

F2 facet fracture

F2 is a [facet fracture](#) with potential for instability from the [AOSpine subaxial cervical spine injury classification system](#). Fracture fragments are greater than 1 cm and comprise less than 40% lateral mass or displaced.

Type F. Facet Injuries

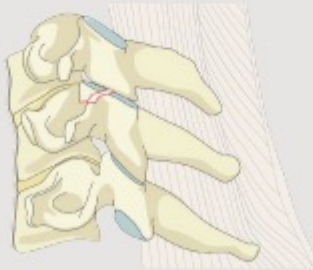
F1. Nondisplaced facet fracture

With fragment <1cm in height, <40% of lateral mass.



F2. Facet fracture with potential for instability

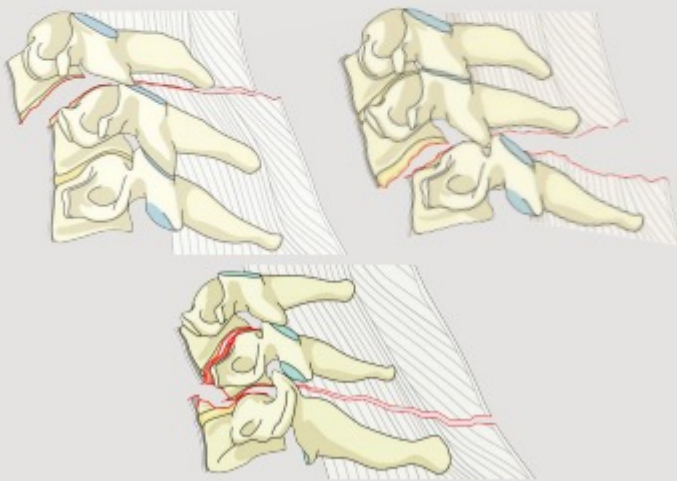
With fragment >1cm, > than 40% lateral mass, or displaced.



F3. Floating lateral mass



F4. Pathologic subluxation or perched/dislocated facet



There was significant variability in [diagnostic accuracy](#) for F1 [facet fracture](#) through F3-type fractures, whereas almost universal agreement was achieved for F4-type injuries ¹⁾.

F2-injuries are usually components of unstable B- or C-injuries, which dictate the surgical strategy.

Possible nerve root compression by the facet fragment may therefore require an additional posterior approach in case of an anterior stabilization.

Facet fractures with [transverse process](#) involvement or comminution have a higher probability of being an F2 fracture. These characteristics may be helpful when categorizing facet fractures using the AOSpine classification ²⁾.

¹⁾

Cabrera JP, Yurac R, Guiroy A, Joaquim AF, Carazzo CA, Zamorano JJ, White KP, Valacco M; and the AO Spine Latin America Trauma Study Group. Accuracy and reliability of the [AOSpine subaxial cervical spine injury classification system](#) grading subaxial [cervical facet injury](#) morphology. Eur Spine J. 2021 Apr 11. doi: 10.1007/s00586-021-06837-w. Epub ahead of print. PMID: 33842992.

²⁾

Jenjitrant P, Beckmann NM, Cai C, Cheekatla SK, West OC. There has to be an easier way: facet fracture characteristics that reliably differentiate AOSpine F1 and F2 injuries. Emerg Radiol. 2019 Aug;26(4):391-399. doi: 10.1007/s10140-019-01684-1. Epub 2019 Mar 25. PMID: 30911958.

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