## **Nervous System**



## Peripheral Nerves Examination

Nerves	Explaniation							
Upper Limb: <a href="https://www.youtube.com/watch?v=8fmG9cNKjlg">https://www.youtube.com/watch?v=8fmG9cNKjlg</a>								
Radial nerve: C5 – C8 motor nerve supplying: triceps, brachioradialis, extensor muscle of hand Sensation test: by pin over the area of snuff box.	Wrist drop. if it is not obvious, ask pt to flex elbow and pronate the forearm and extend the wrist and fingers.							
Median nerve (C6-T1) motor nerve sypplying: all muscles in front of forearm except flexor carpi ulnaris, and ulnar half of the flexor digitorum profounds. And supply the following short muscles (LOAF) Lateral two lumbricals. Opponens pollicis. Abductor pollicis brevis. Flexor Pollicis brevis.  Sensation test: pin-prick sensation over: palmar aspect of: the thumb, the index finger, the middle finger, and the lateral half of the ring finger.	If lesion at the wrist:  Carpal tunnel: use pen-touching test ask the patient to lay the hand flat, palm upward, and attempt to abduct the thumb vertically to touch your pen. This is impossible with median nerve palsy.  if lesion at cubital fossa: Ochsner's clasping test.							
Ulnar nerve (C8-T1) motor supplying all muscles of the hand except the LOAF of the median nerve.  Sensation: pin-prick over the palmar and dorsal aspect of the little finger, and the medial half of the ring finger.	Claw-like hand.  Froment's sign: ask patient to grasp a piece of paper b\w the thumb and lateral aspect of the forefinger with each hand, the affected thumb will flex because loss of adductor of the thumb.							

Lower Limb:						
Lateral cutaneous nerve of the thigh: test for sensory: loss of sensory over the lateral aspect of the thigh.						
Femoral nerve: (L2-L3-L4) weakness of: knee extension, Hip flexion, absent of knee jerk, loss of sensation over the inner aspect of the thigh and leg.						
Sciatic nerve (L4-L5-S1-S2) supply all muscles below the knee and hamstring, loss of power below the knee, weakness of knee flexion, knee jerk is intact, ankle jerk is absent. sensation: over posterior thigh, lateral and posterior calf, the foot.	Foot drop.					
Common peroneal nerve (L4-L5-S1) terminal branch of sciatic nerve, supply anterior and lateral aspect of the leg. weakness of dorsiflexion and eversion, sensation: minimal loss over the lateral aspect of dorsum foot.						

## **Upper Motor Neuron vs. Lower Motor Neuron**



• Sign		Upper Motor Neuron Lesions		<ul> <li>Lower Motor Neuron Lesions</li> </ul>			
		Weakness	•	Yes			Yes
		Atrophy		No <sup>a</sup>		•	Yes
		Fasciculations	•	No			Yes
		Reflexes		Increased <sup>b</sup>			Decreased
	•	Tone		Increased <sup>b</sup>		0	Decreased

<sup>&</sup>lt;sup>a</sup> Mild atrophy may develop due to disuse

b With acute upper motor neuron lesions; tone may be decreased