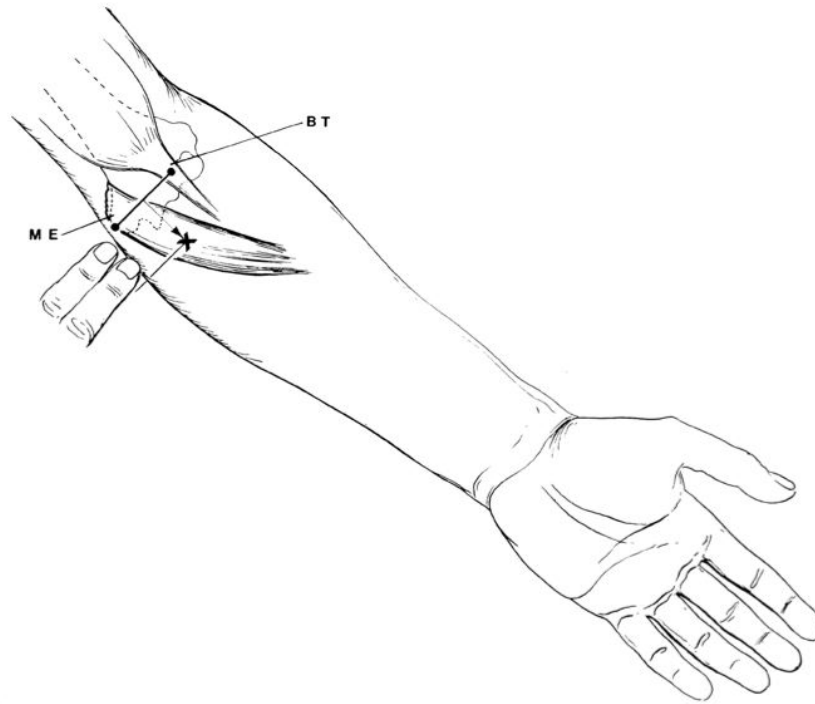


## ***PRONATOR TERES***



### ***Innervation***

Median Nerve, Lateral Cord, Anterior Division, Upper and *Middle* Trunk, C6, C7.

### ***Origin***

This muscle has two heads of origins: (a) from the medial epicondyle of the humerus and (b) the coronoid process of the ulna. The median nerve enters the forearm between these two heads.

### ***Insertion***

Lateral surface of radius at mid-shaft.

### ***Position***

The forearm fully supinated.

***Electrode Insertion (X)***

Two fingerbreadths distal to the midpoint of a line connecting the medial epicondyle (ME) and biceps tendon (BT).

***Test Maneuver***

Pronation of forearm.

***Pitfalls***

If the needle electrode is inserted too deeply it will be in the flexor digitorum sublimis; if inserted too ulnarly it will be in the flexor carpi radialis.

***Comments***

- (a) The most proximal muscle innervated by the median nerve.
- (b) Common site of entrapment as it is pierced by the median nerve.
- (c) May or may not be involved in pronator teres syndrome depending on whether the nerve to the pronator muscle branches proximal to or within the muscle itself.
- (d) Also involved in entrapment at the ligament of Struther.
- (e) Of the two pronators, this is the most powerful.
- (f) Its main function is to flex and prorate the forearm.

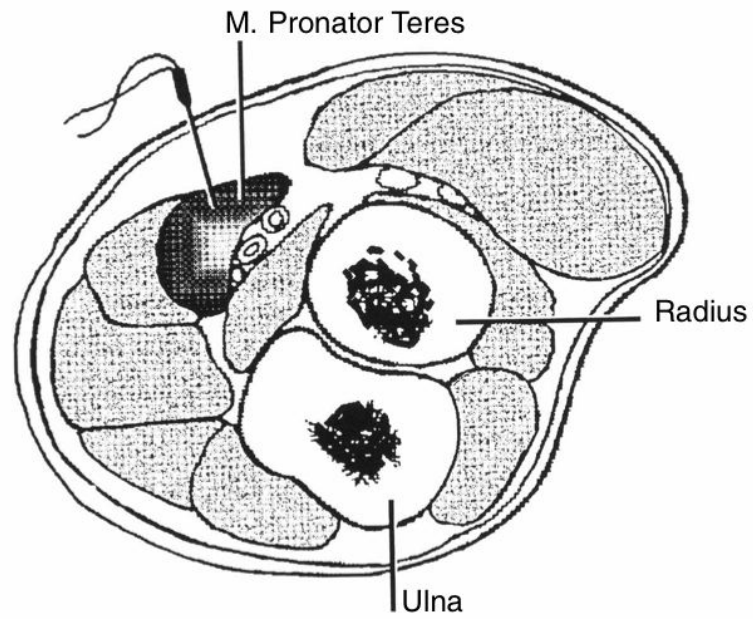


Figure 25. Cross section of the forearm through distal end of the proximal radio-ulnar joint.