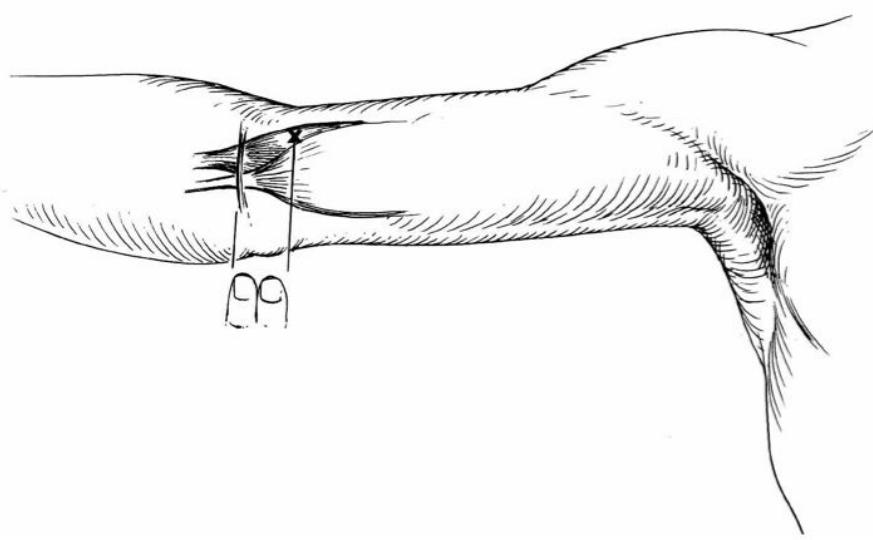
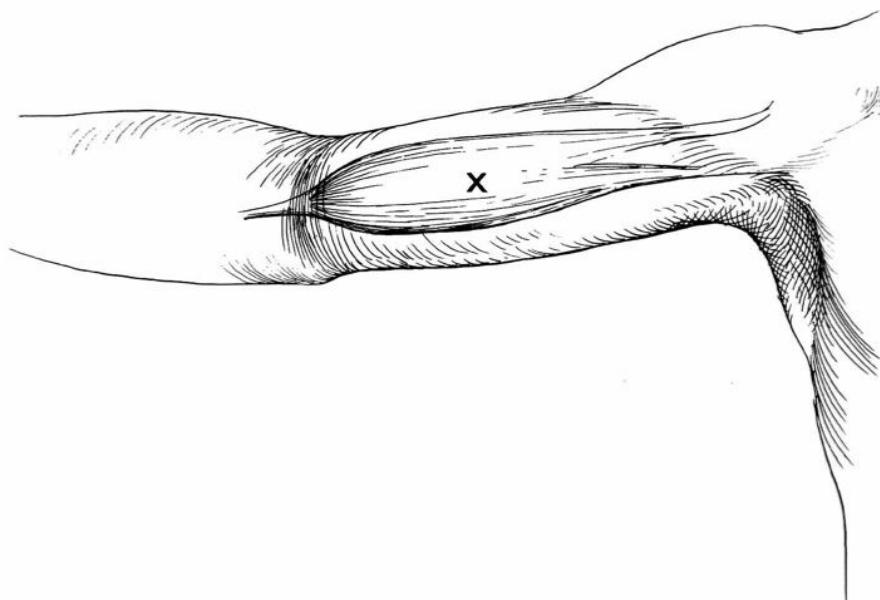


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**SECTION III**  
**ARM**

## ***BICEPS BRACHII***



### ***Innervation***

Musculocutaneus Nerve, Lateral Cord, Anterior Division, Upper Trunk, *C5, C6*.

### ***Origin***

*Long Head*: From the supraglenoid tuberosity of scapula.

*Short Head*: From the apex of the coracoid process of the scapula.

### ***Insertion***

On the bicipital tuberosity of the radius.

### ***Position***

The patient supine with the arm extended.

### ***Electrode Insertion (X)***

Into the bulk of the muscle in mid-arm.

***Test Maneuver***

To flex or to supinate the forearm.

***Pitfalls***

If the needle electrode is inserted too deeply it will be in the brachialis.

***Comments***

- (a) Frequently used as recording muscle for musculocutaneus nerve motor conduction study.
- (b) This muscle gets involved in entrapment of the musculocutaneus nerve as it courses through the coracobrachialis muscle. It also gets involved in upper brachial plexus lesions and in high cervical radiculopathies.
- (c) Excessive traction of the baby head during delivery may produce an elongation of the upper brachial plexus resulting in paralysis of this muscle (obstetrical paralysis or Bell's palsy).
- (d) The biceps shows a dual function: as a strong supinator of the forearm and a powerful elbow flexor. These two functions can be carried out separately.

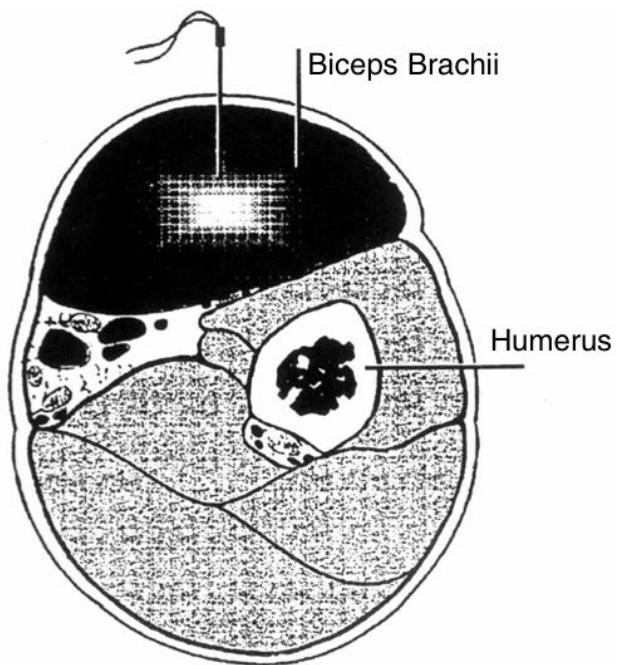


Figure 27. Cross section of the arm through the middle section.