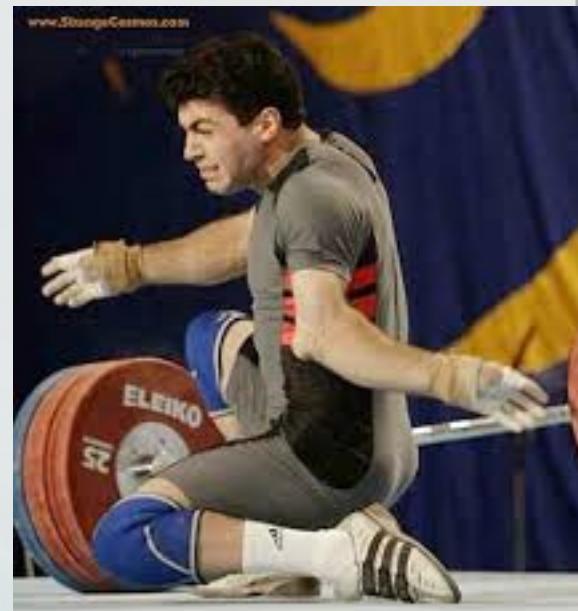




# Upper Limb

Dr. Matthew Szarko  
[mszarko@sgul.ac.uk](mailto:mszarko@sgul.ac.uk)



# Range of Motion

- Flexion
- Extension



EXTENSION

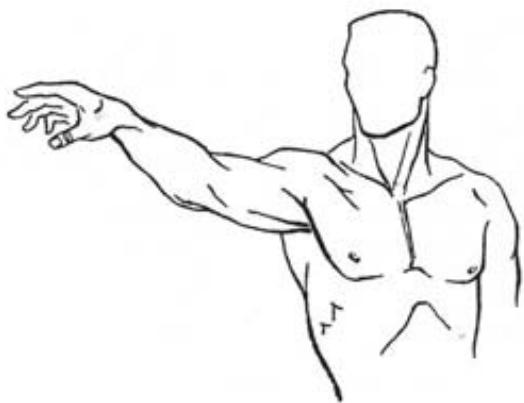


FLEXION

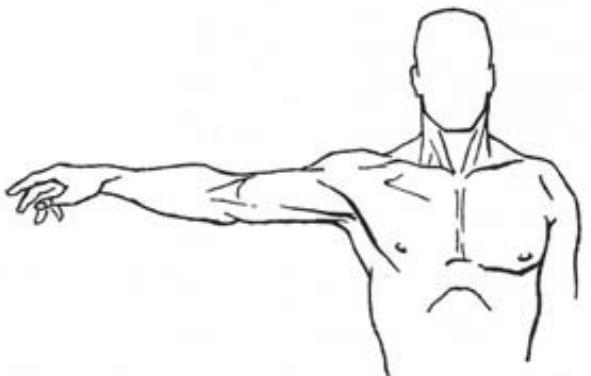


# Range of Motion

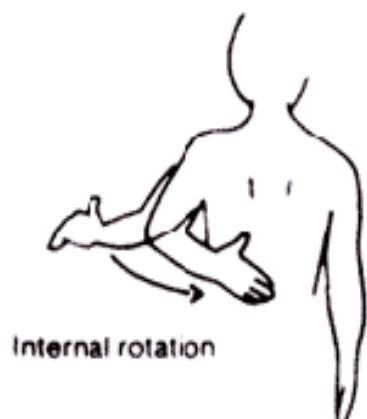
- Abduction
- Internal and External Rotation



ABDUCTION, PLANE OF SCAPULA



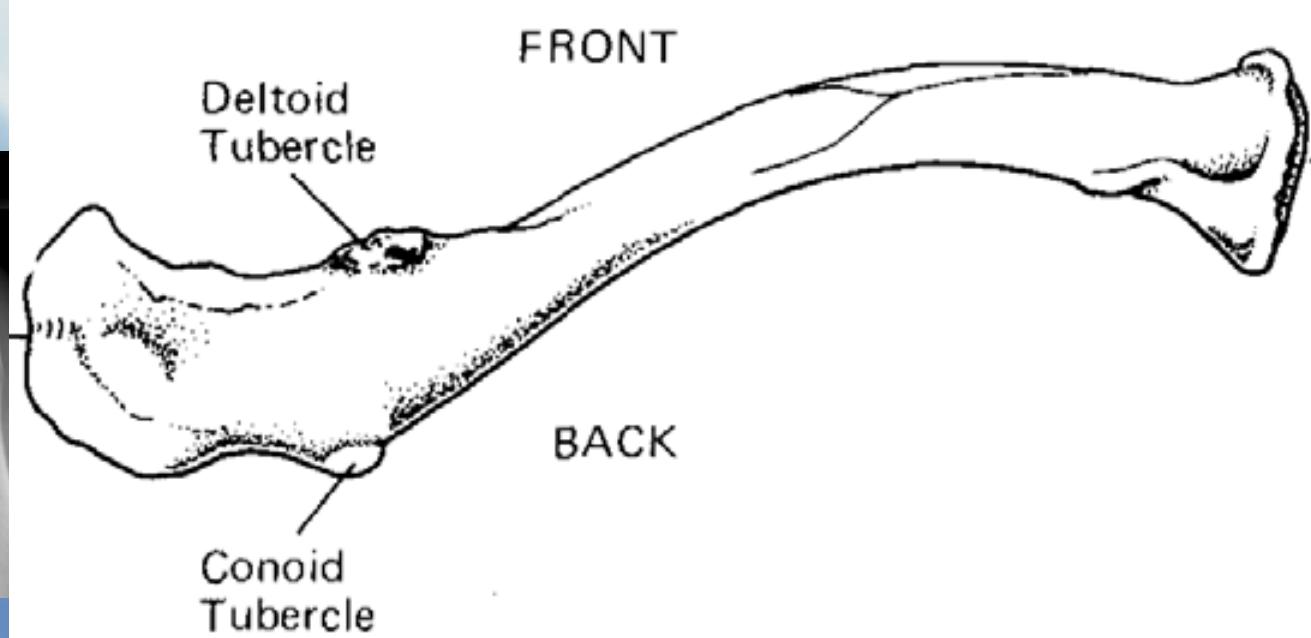
ABDUCTION, CORONAL PLANE



Internal rotation

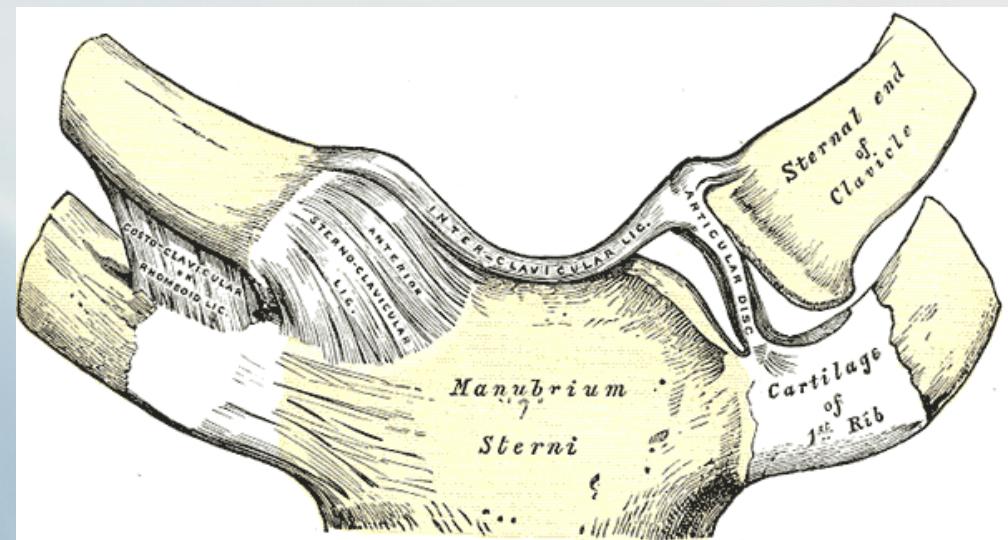
# Clavicle

- Protects underlying brachial plexus and vascular structures.
- Elevates along with upper limb elevation.



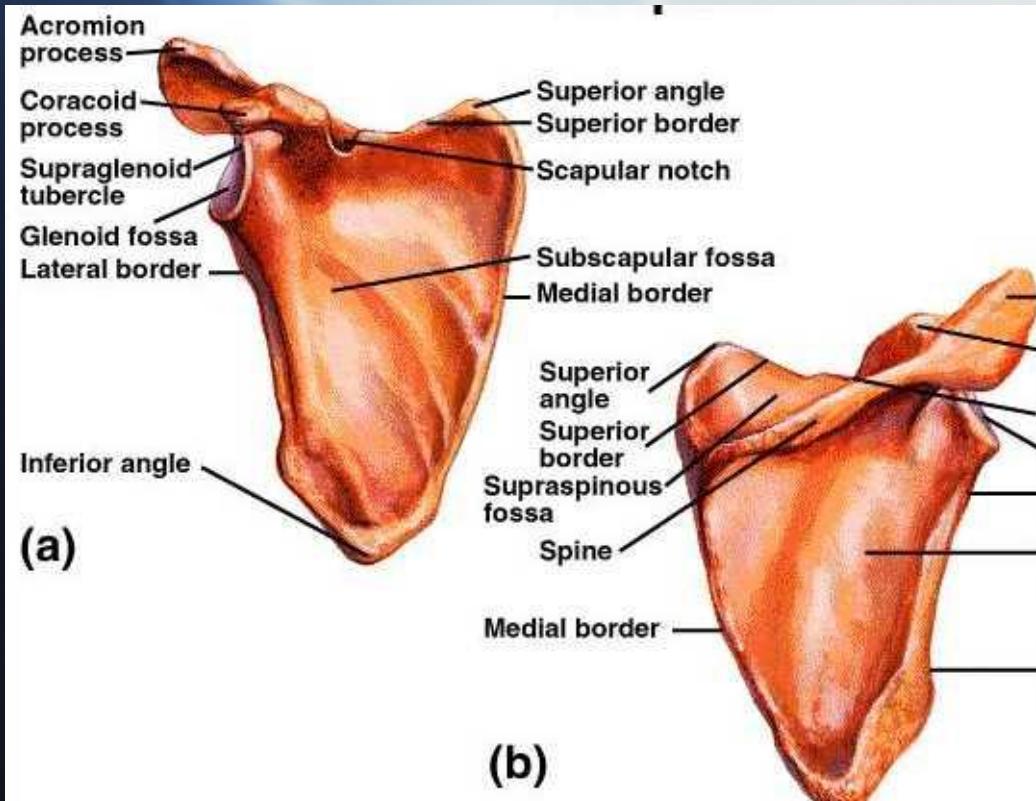
# Sternoclavicular Joint

- Only bony connection of upper limb to thorax.
- ~4° of clavicular elevation occurs for every 10° arm elevation at this joint.



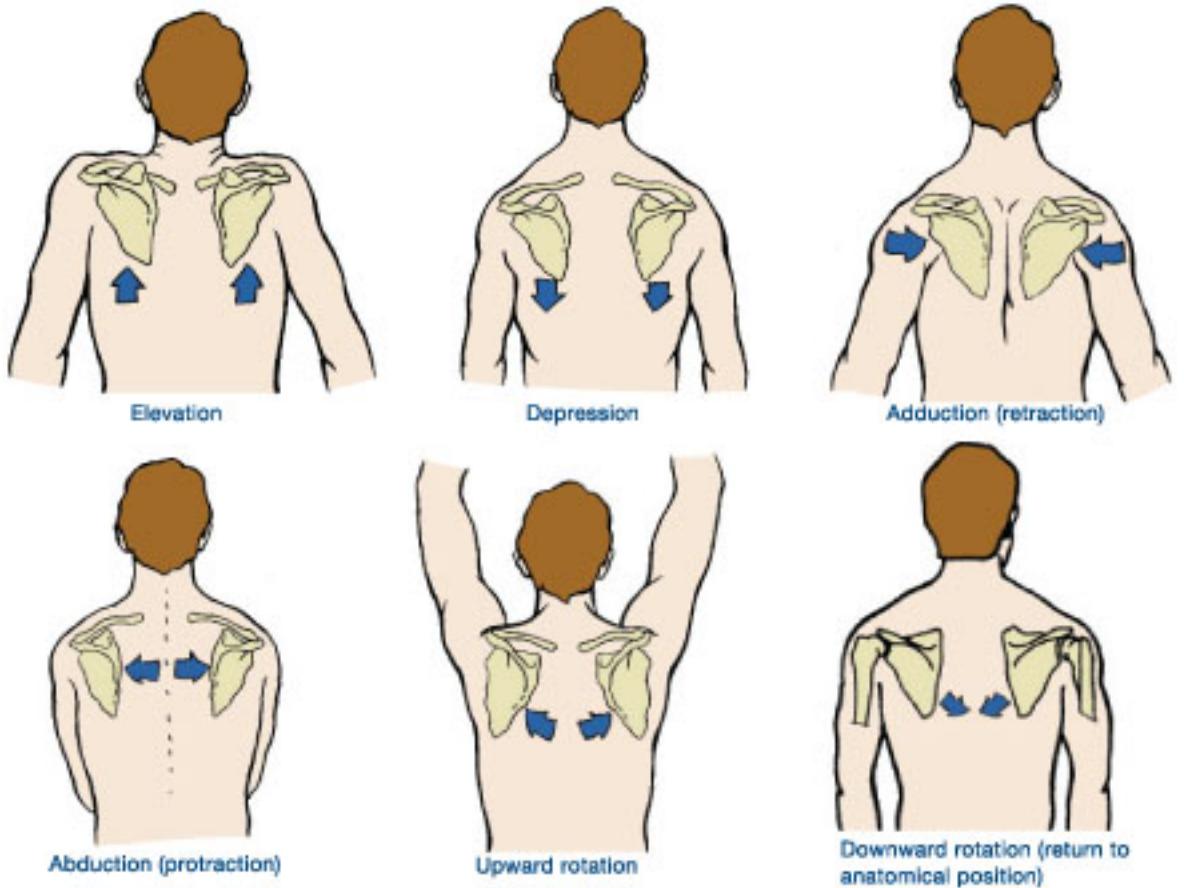
# Scapula

- Spine
- Acromion
- Coracoid process
- Supraglenoid tubercle
  - Long head of biceps brachii
- Infraglenoid tubercle
  - Triceps brachii origin
- Supraspinous fossa
- Infraspinous fossa
- Subscapular fossa



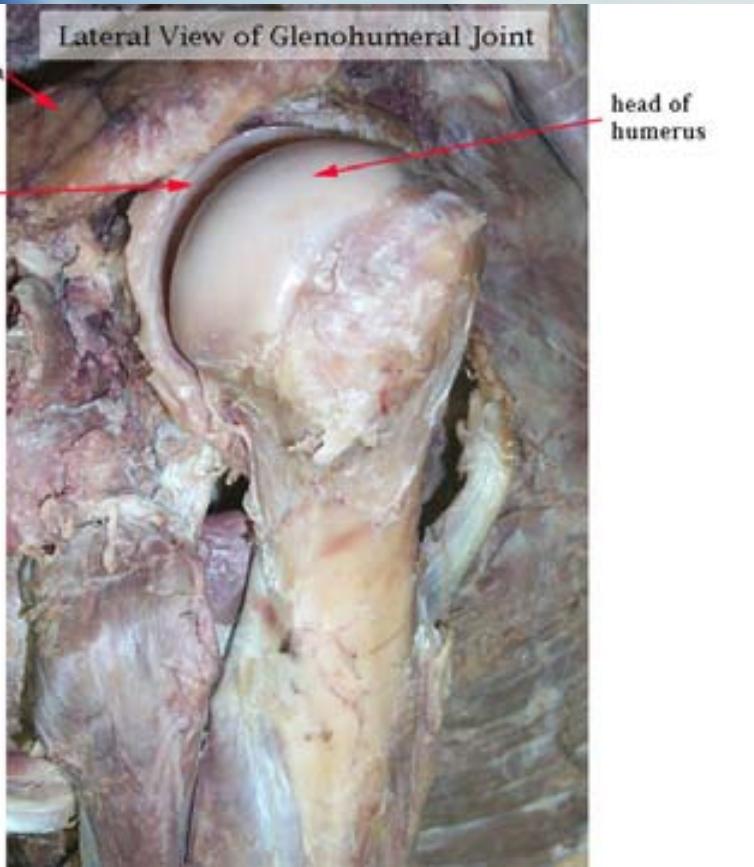
# Scapulothoracic Articulation

- Protraction
- Retraction
- Elevation-Depression
- Rotation- during arm flexion.



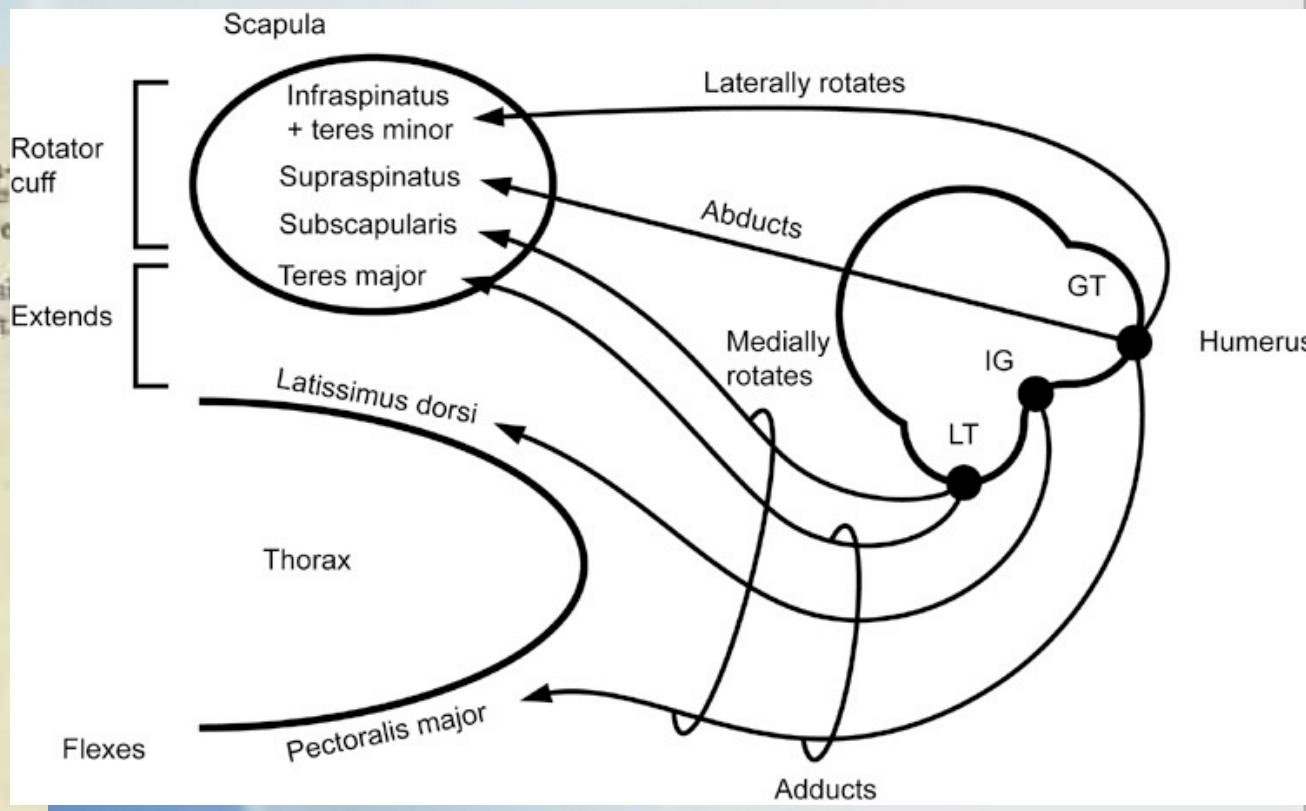
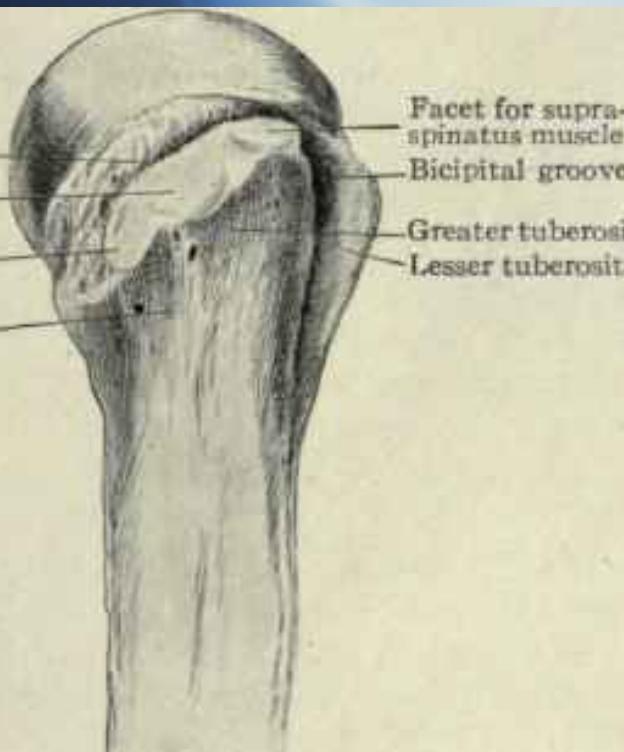
# Proximal Humerus

- Head
  - Anatomical neck
  - Surgical neck



# Proximal Humerus

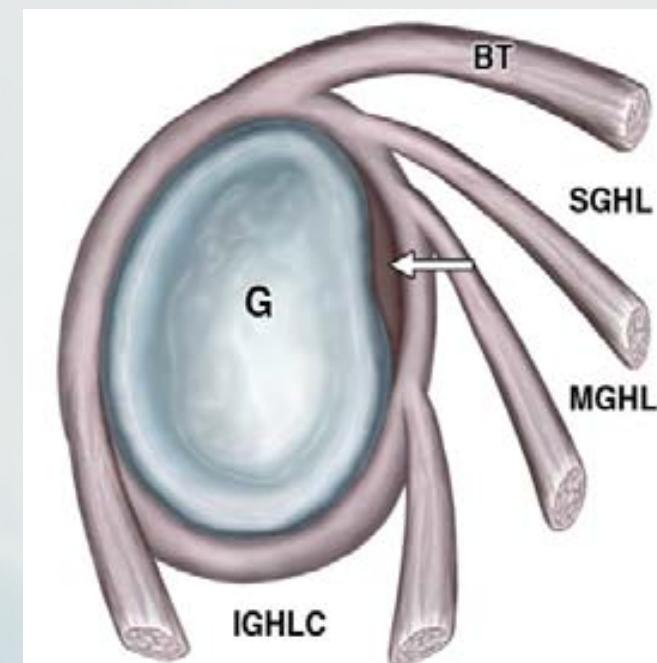
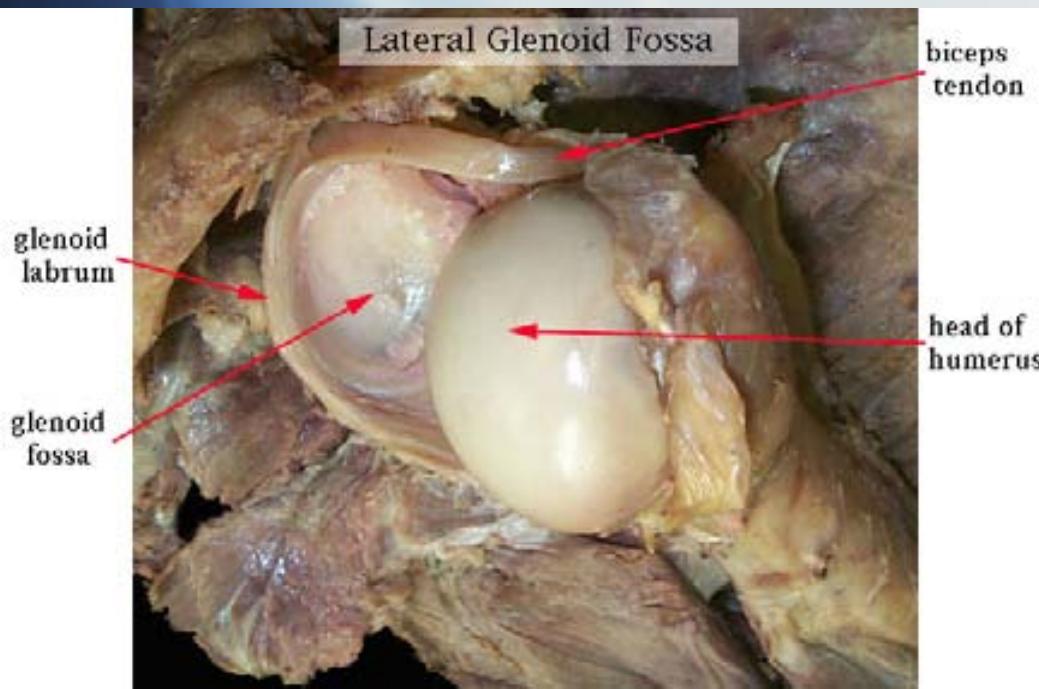
- Greater tubercle
- Lesser tubercle
- \* Serve as attachment sites for rotator cuff musculature.



# Glenohumeral Joint

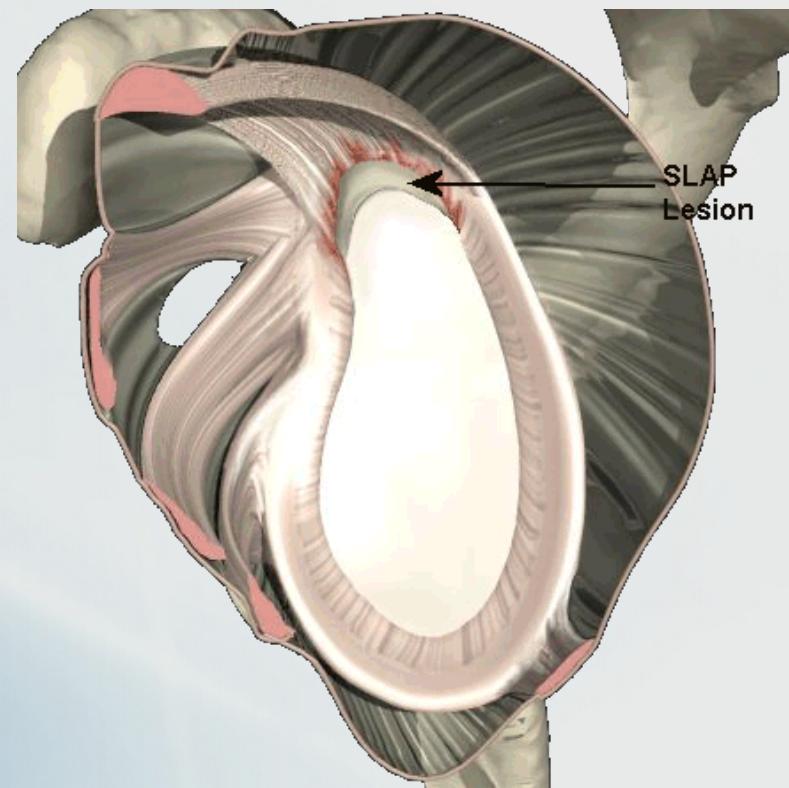
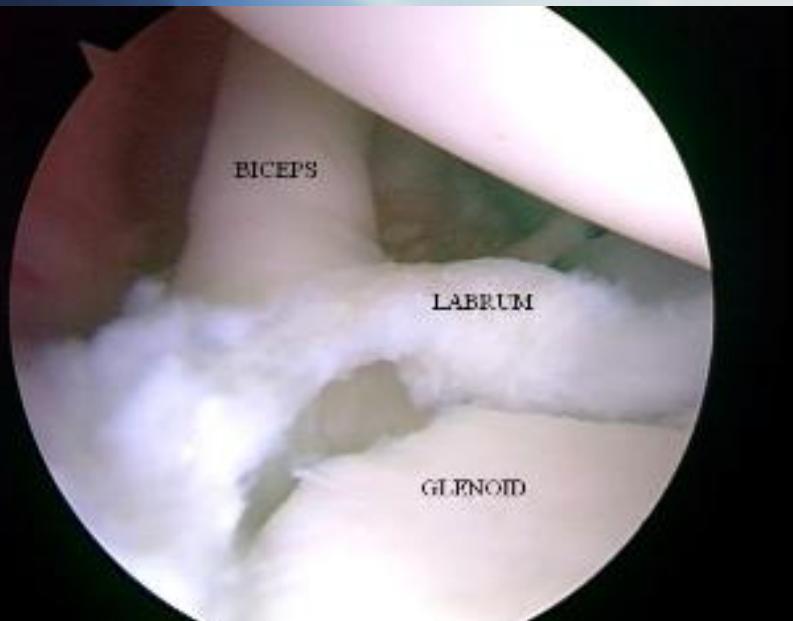
- Glenoid labrum

- Is fibrocartilaginous and provides 50% of overall glenohumeral depth.
- Superior portion of labrum congruent with tendon to long head of biceps brachii.



# SLAP Tear

- Superior Labrum tear from Anterior to Posterior
- Dull throbbing ache
- Shoulder discomfort during sleeping
  - Shoulder drops due to decreased stability. This pulls on muscles giving rise to discomfort.



- Excessive extension and external rotation cause anterior joint dislocation.



# Shoulder Musculature: Deep Layer

- **Rotator Cuff**

- *\*\*Abduct and rotate humerus; glenohumeral stabilisation*

- **Supraspinatus**

- Closed packed position
  - Initiation of humerus abduction
- **Infraspinatus**

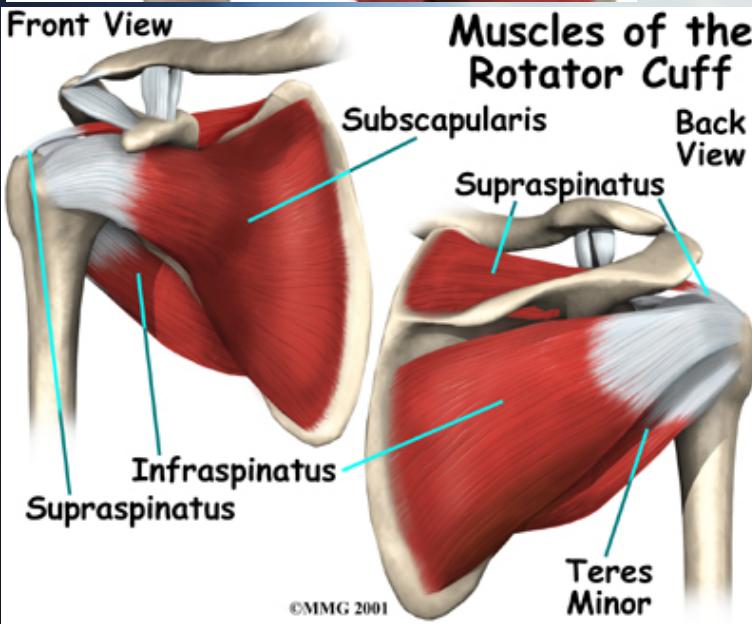
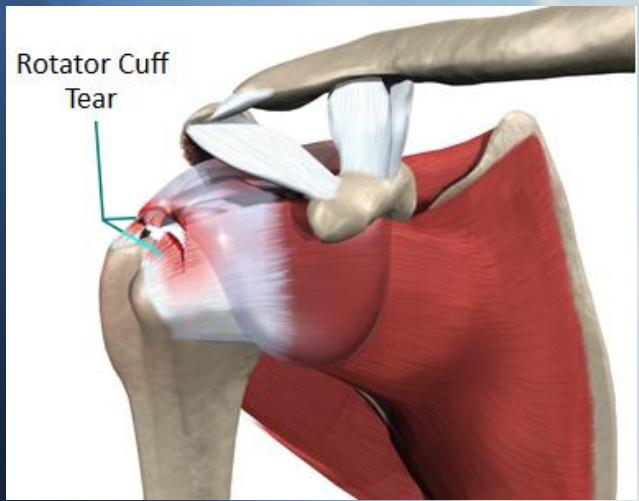
- Most efficient external rotator of humerus

- **Teres minor**

- External rotation of humerus

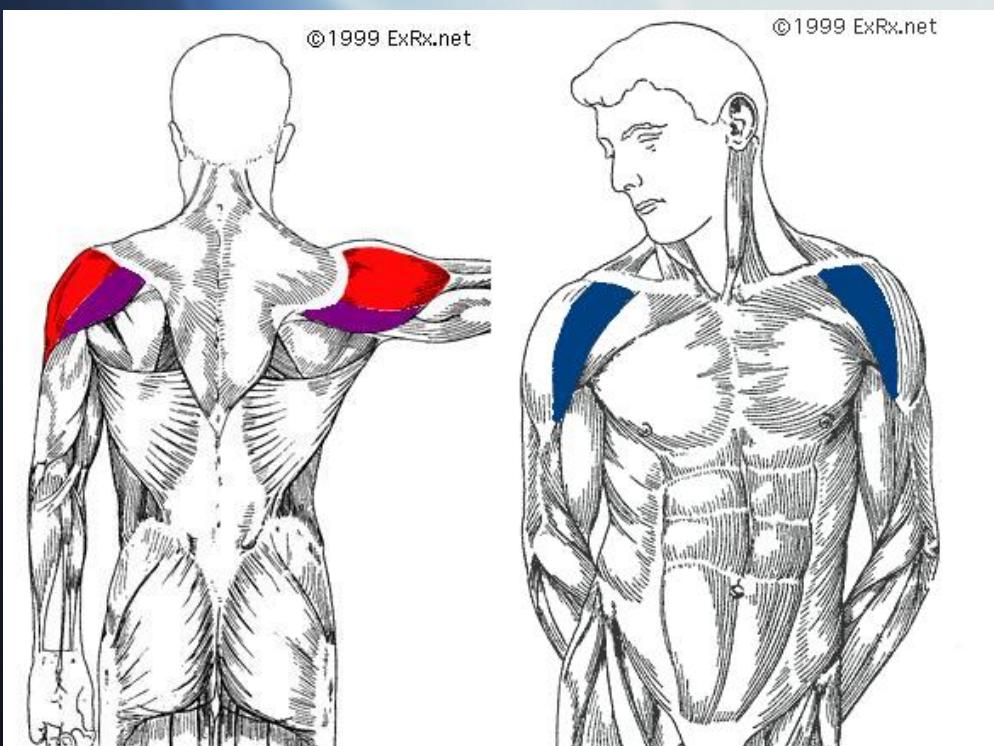
- **Subscapularis**

- Internal rotation.



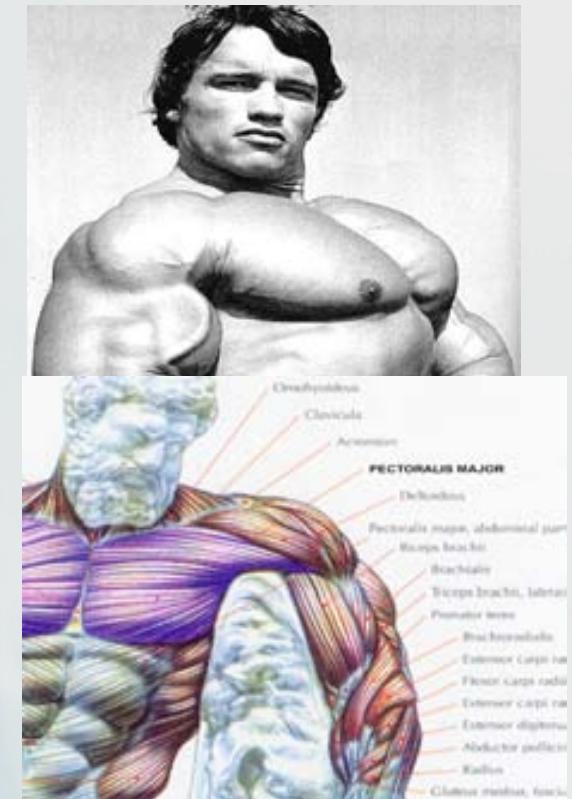
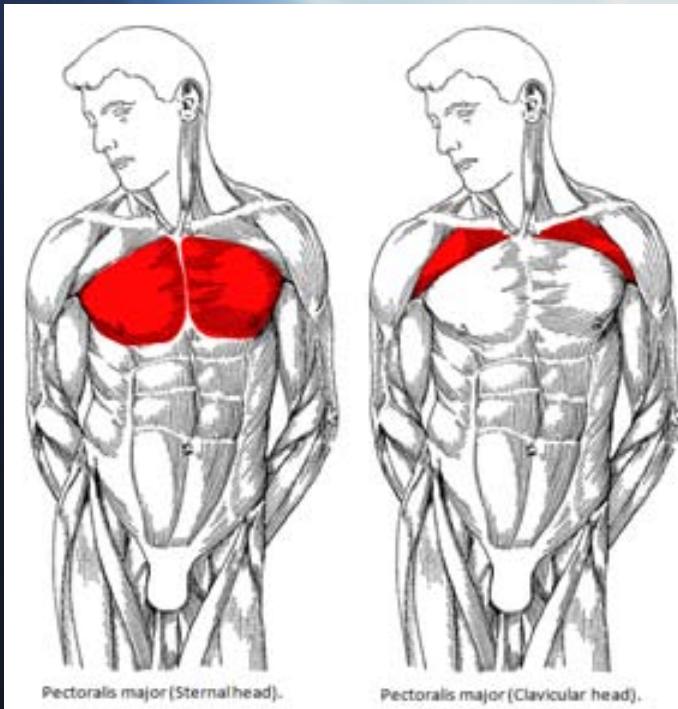
# Shoulder Musculature: Outermost Layer

- Deltoid
  - Anterior fibres: abduction, flexion, internal rotation
  - Middle fibres: abduction
  - Posterior fibres: abduction, extension, external rotation



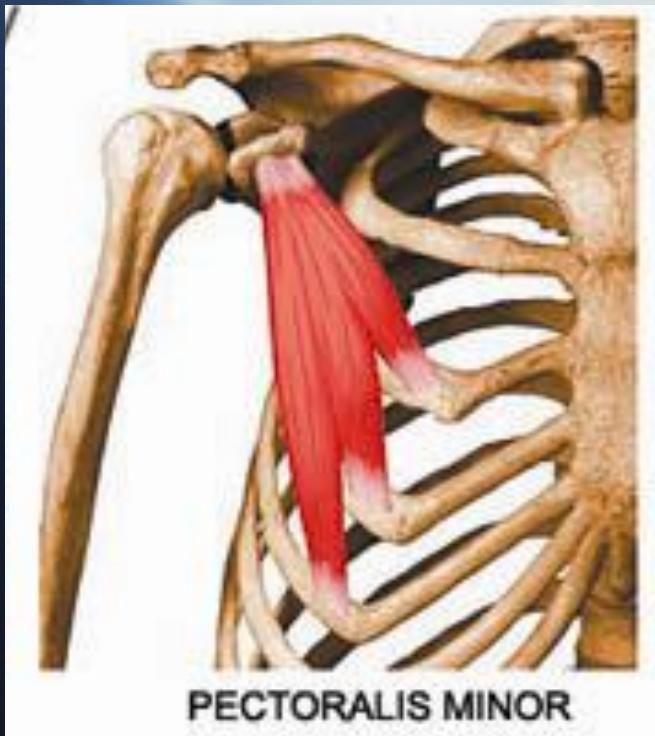
# Shoulder Musculature: Outermost Layer

- Pectoralis major
  - Clavicular head
  - Sternocostal head



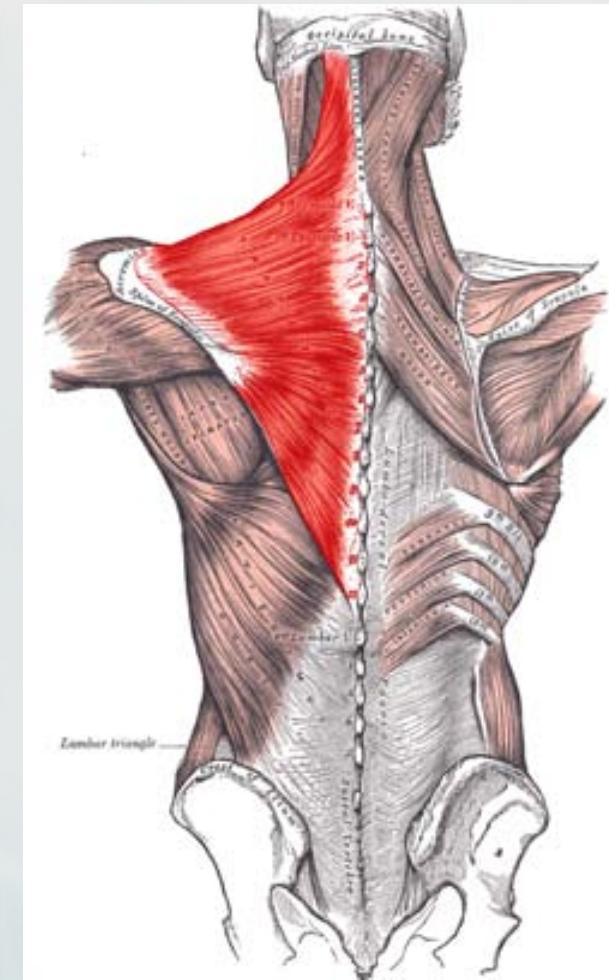
# Shoulder Musculature: Outermost Layer

- Pectoralis minor
  - Important scapular stabiliser
  - Pulls scapula towards thorax (medial and inferior).



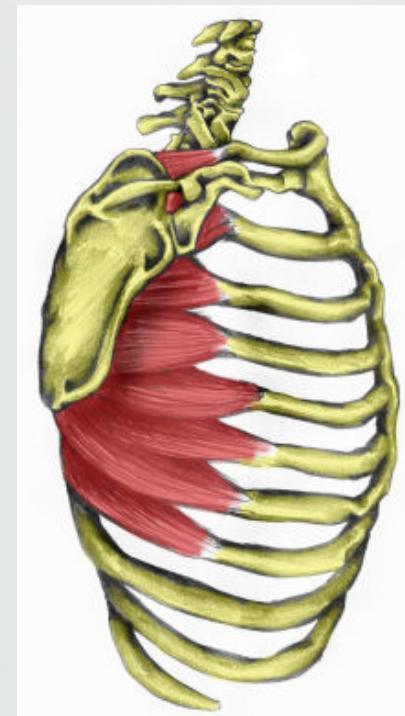
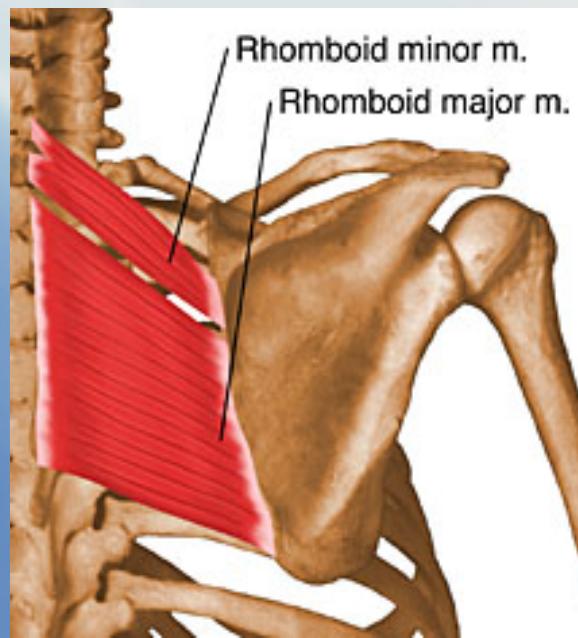
# Shoulder Musculature: Accessory Muscles

- Trapezius
  - Upper fibres: Scapula elevation
  - Middle Fibres: Scapular adduction (retraction)
  - Lower Fibres: Scapular rotation



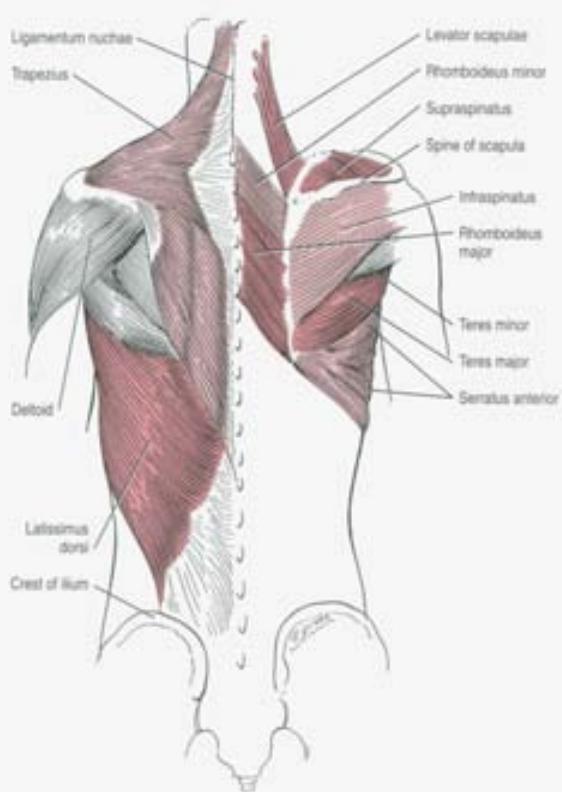
# Shoulder Musculature: Accessory Muscles

- Rhomboid major/minor
  - Retract and rotate scapula
- Serratus anterior
  - Scapular protraction



# Shoulder Musculature: Accessory Muscles

- **Latissimum dorsi**
  - Extension, adduction, and internal rotation
- **Teres major**
  - Adduction and internal rotation, extension



# Shoulder Musculature: Accessory Muscles

- **Biceps brachii**
  - Long head
    - Humeral head depressor conferring stability.
  - Short head (coracoid process)
  - Shoulder flexion
  - Flexion and supination of forearm



# Elbow

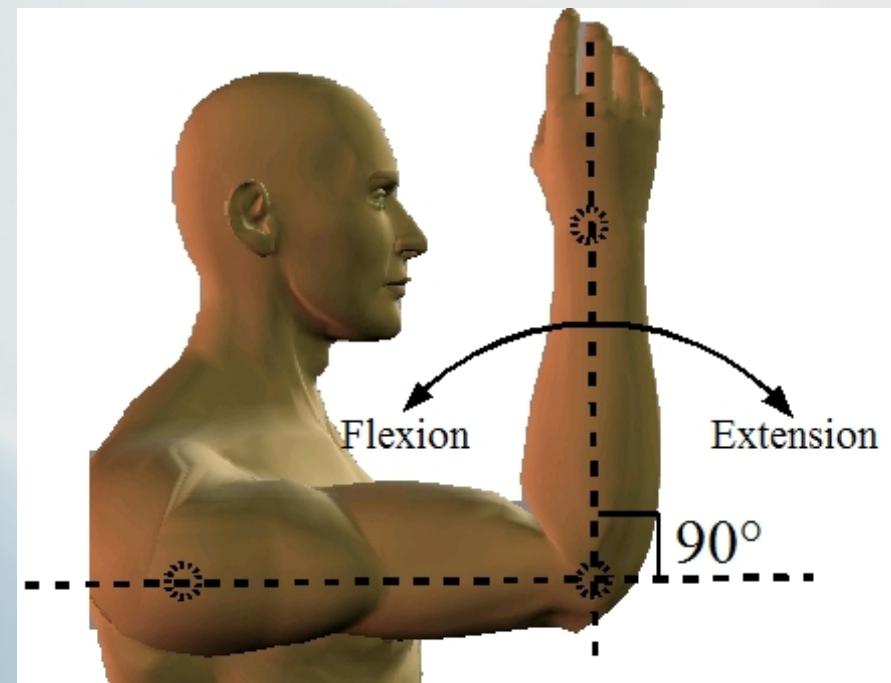


# Elbow Movements



# Elbow Movements

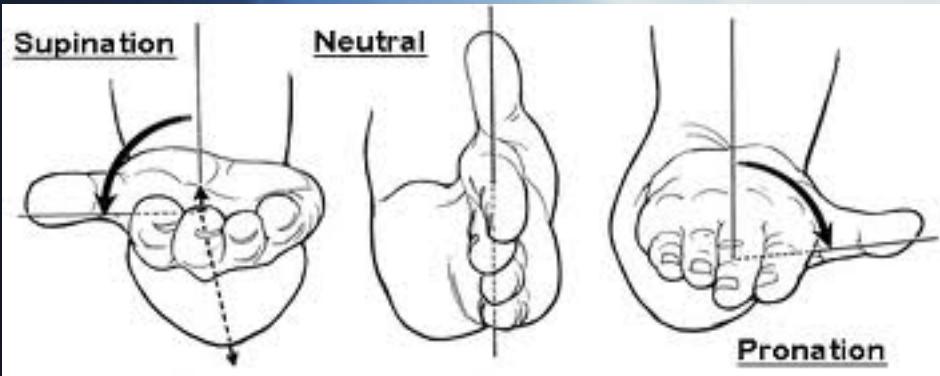
- Flexion-Extension
  - Normal range 0-146°
  - Functional range 30-130°



# Elbow Movements

## ■ Pronation-Supination

- Normal range 71° pronation to 81° supination- 152° arc
- Most activities require 50° pronation to 50° supination
- Take place primarily at humeroradial and proximal radioulnar joints.
- Forearm rotates about a longitudinal axis passing through centre of capitulum.



# Distal Humerus

- Capitulum
- Trochlea
- Coronoid fossa
- Radial fossa
- Olecranon fossa
- Lateral epicondyle
- Medial epicondyle

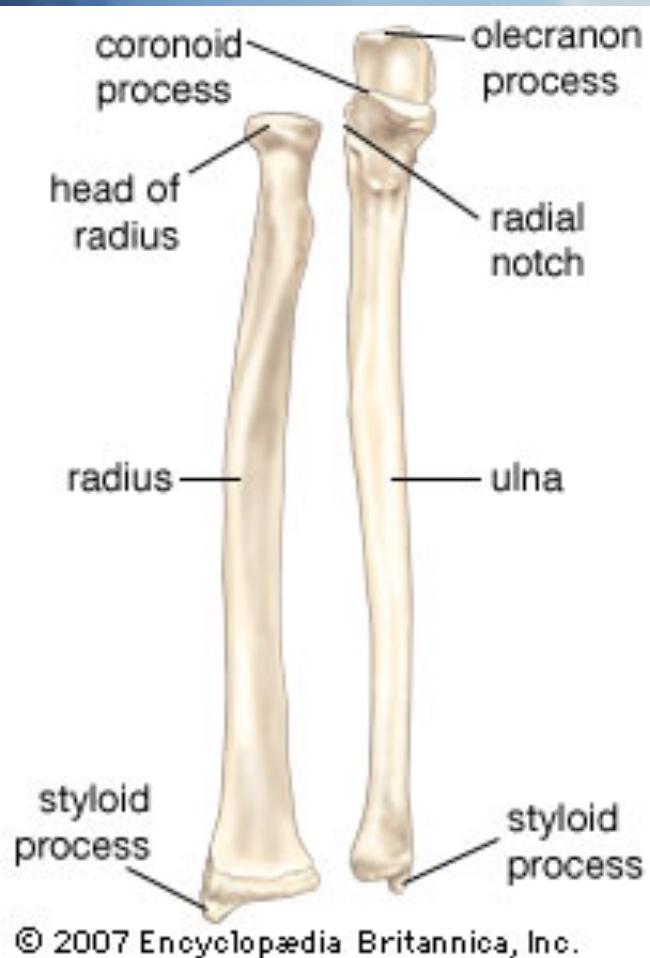


(a) Anterior view



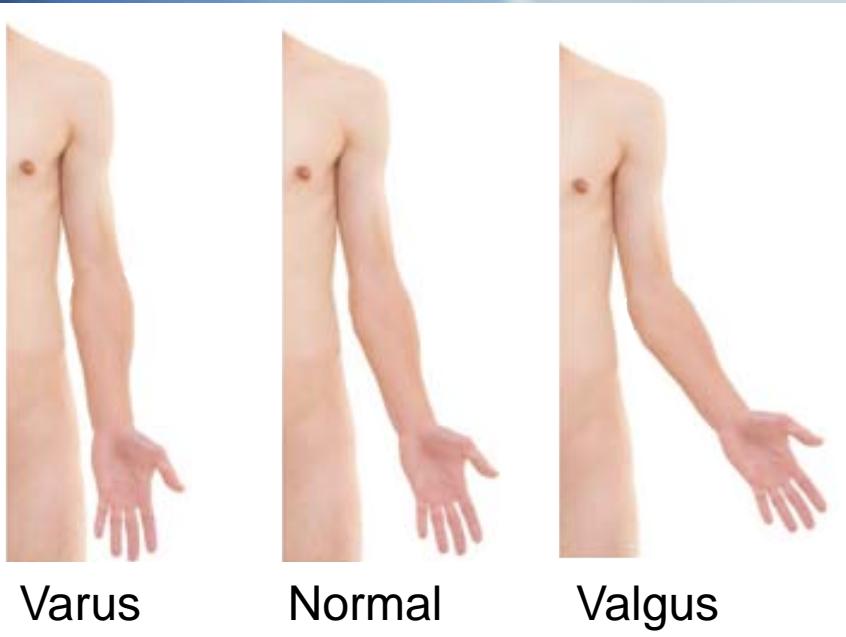
(b) Posterior view

# Elbow

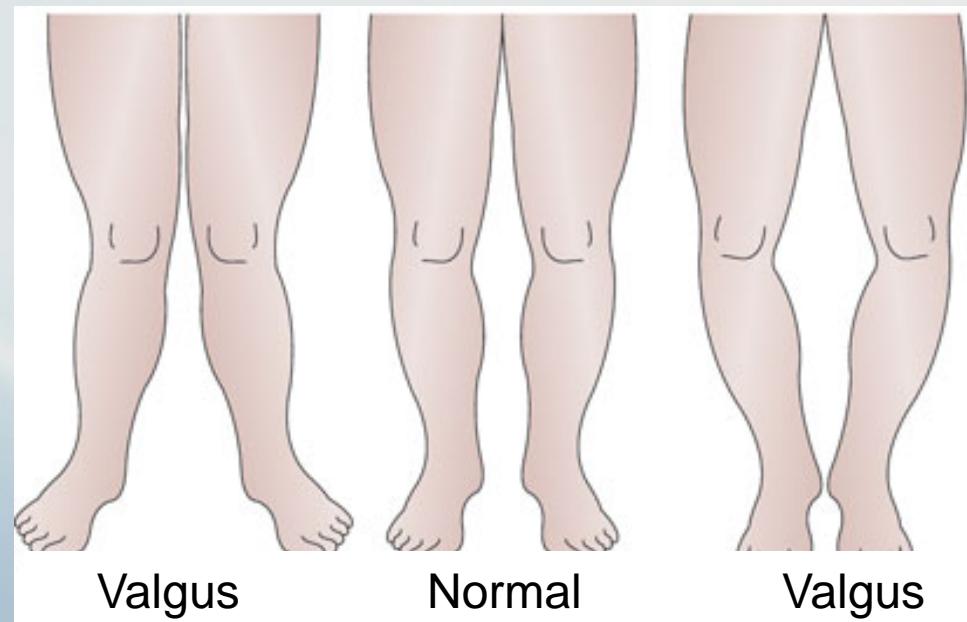


- Radius
  - Head and neck
  - Radial tuberosity
- Ulna
  - Olecranon
  - Coronoid process
    - Prevents posterior ulna displacement
  - Radial notch
  - Trochlear notch

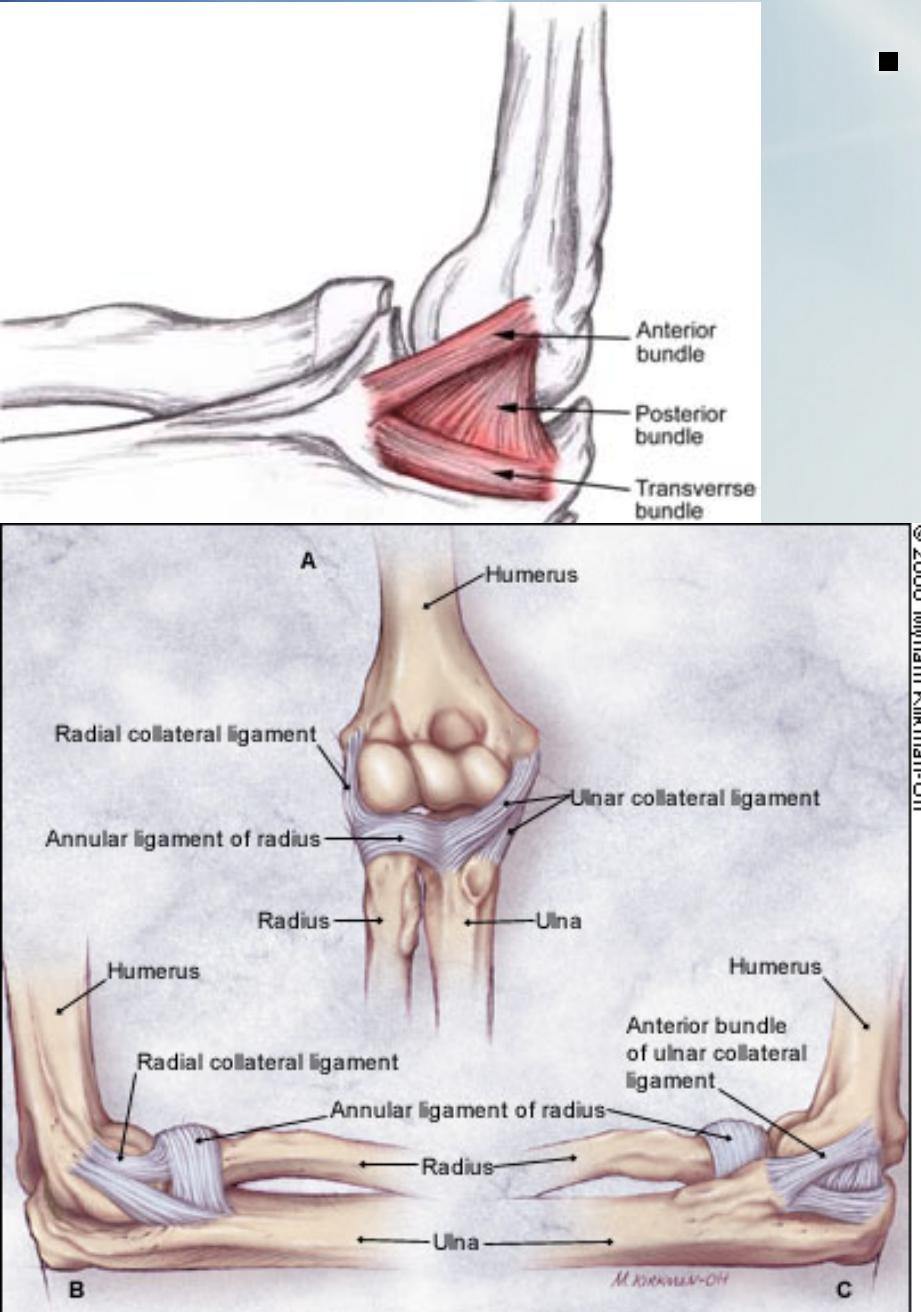
# Elbow Joint



- Varus vs. Valgus



# Elbow Joints



- **Humeroulnar joint**
  - Flexion-Extension
  - Ulnar (Medial) collateral ligament
    - Primary resistance to valgus stress
    - Anterior band: resists valgus forces, tightens in extension.
    - Posterior band: tightens in flexion
  - Elbow articulation resists varus stress.

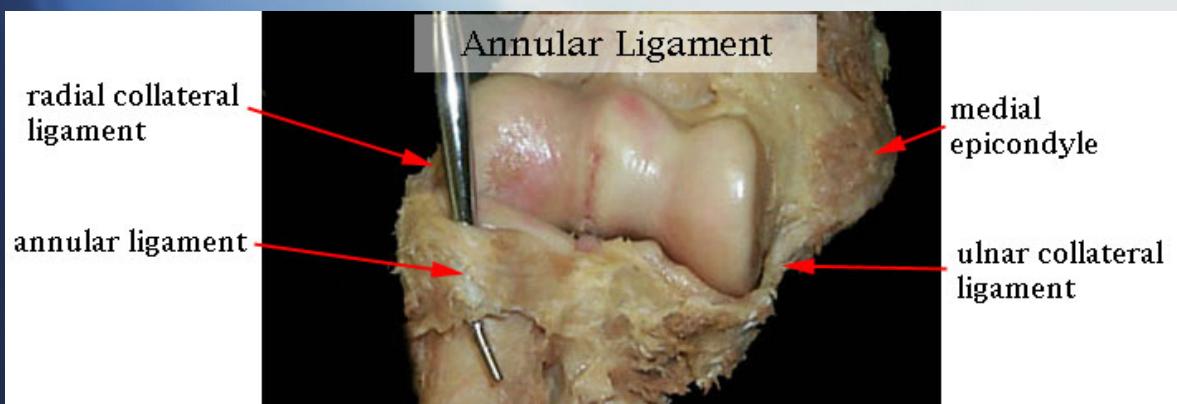
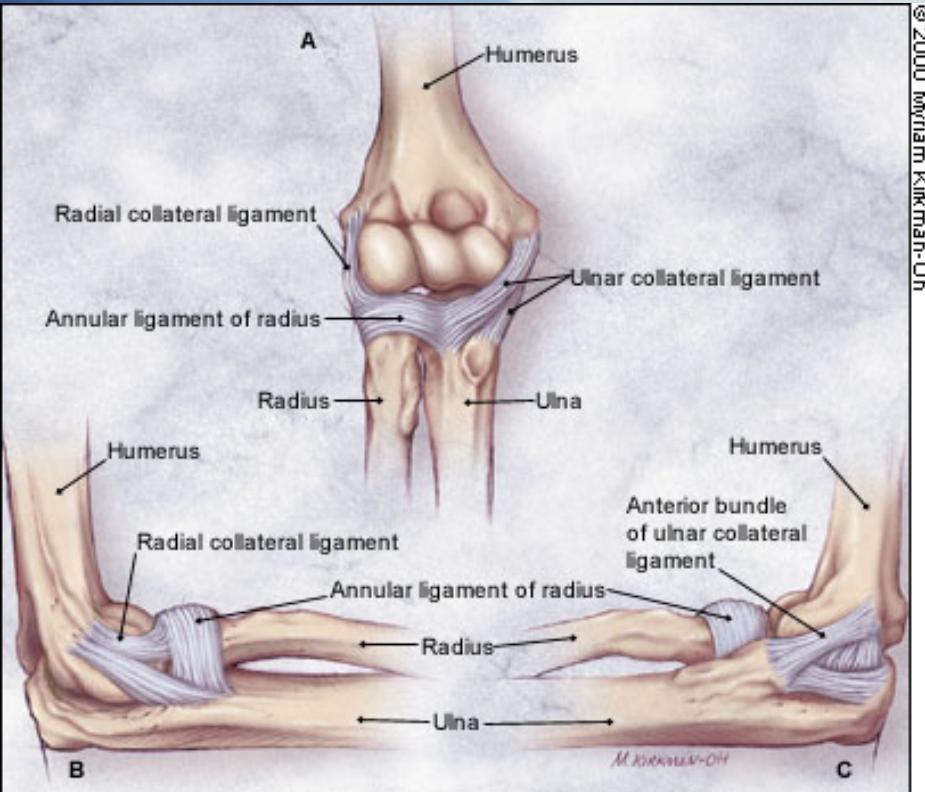
# Elbow Joints

## ▪ Humeroradial joint

- Flexion-Extension
- Radial (Lateral) collateral ligament
  - Resists posterolateral rotation instability
- Annular ligament
  - Resist subluxation of radial head

## ▪ Radioulnar Joint

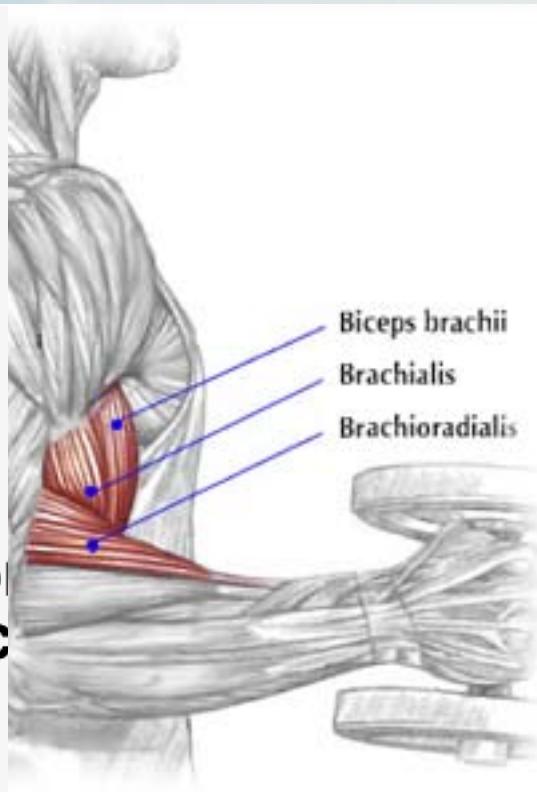
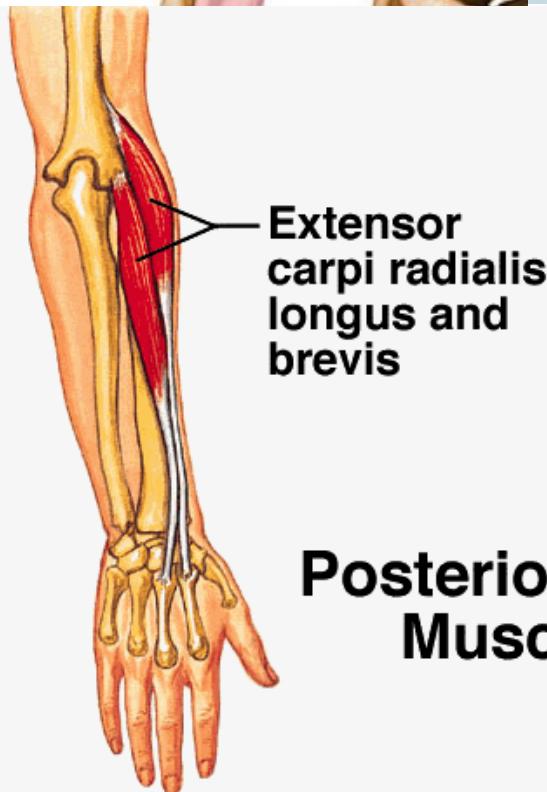
- Pronation-Supination



# Elbow Musculature

## Anterior Compartment (Flexion)

- Brachialis
  - Primary elbow flexor
- Brachioradialis
  - Active in both rapid and slow flexion

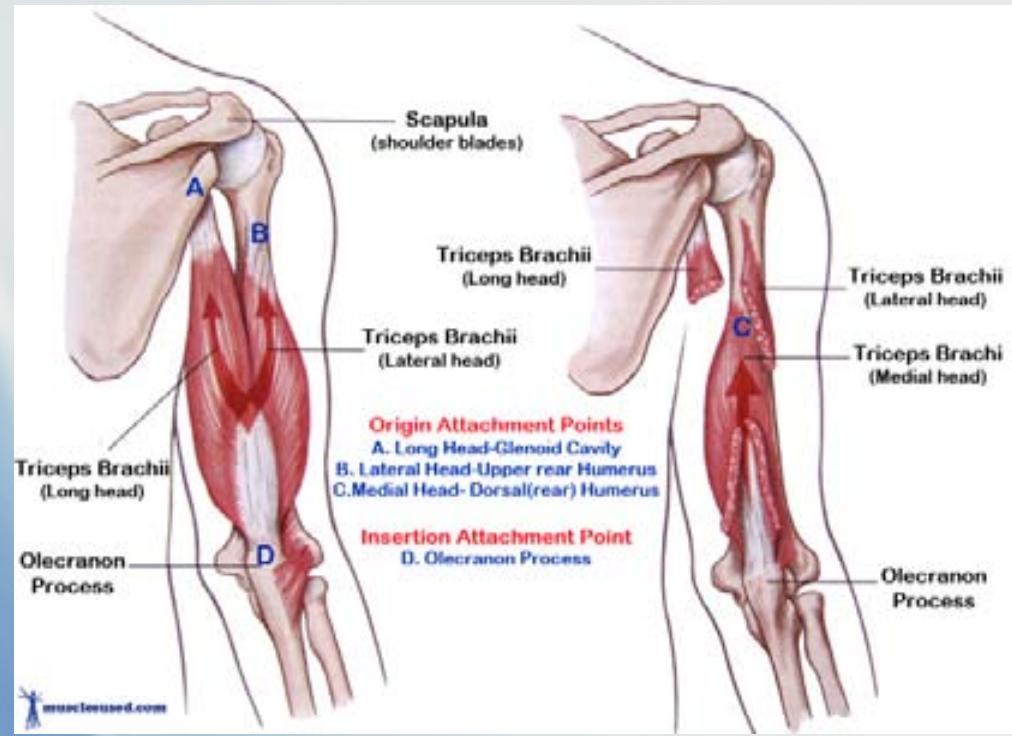


on with supinated or  
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ing fast exercise.  
i radialis longus/brevis

# Elbow Musculature

## Posterior Compartment (Extension)

- Triceps brachii
  - Primary extensor (medial head primary, lateral and long heads act in reserve).
  - Three heads coalesce to form one tendon inserting on to olecranon process. Similar to quadriceps tendon on patella.



# Valgus Elbow Orientation

- Extended Arm
  - Carrying angle (10-15°)
  - Less in children than adults, greater in females than males.
  - Allows arm swinging without contacting hips.
  - Greater resistance to valgus stress than to varus (Medial ulnar collateral ligament).
    - Valgus stress places joint into valgus, varus stress places joint into varus



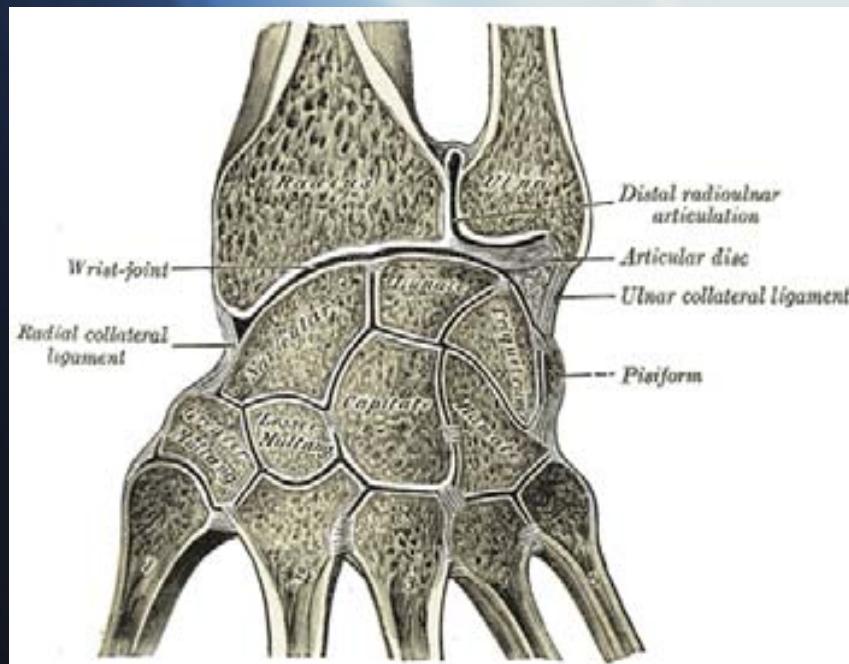
# Wrist and Hand



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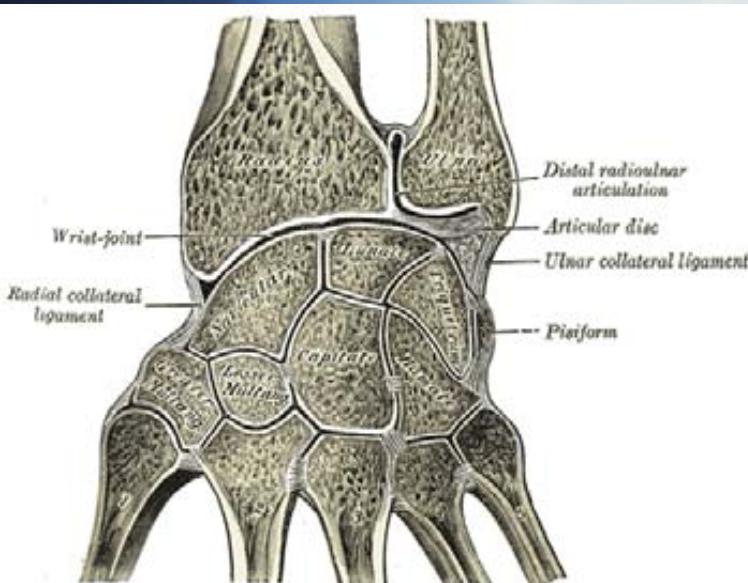
# Wrist Anatomy

- Ulna
  - Styloid process
    - Styloid process of ulna connected to triquetral and pisiform bones by ulnar carpal ligament.
  - Triangular fibrocartilage



# Wrist Anatomy

- Radius
  - Articulating surface for scaphoid and lunate
- Radioulnar joint
  - Head of ulna-ulnar notch on distal radius
  - Motion: Supination and pronation



# Wrist Anatomy

- Colle's Fracture
  - Complete transverse fracture within distal 2 cm of radius.
  - Distal fragment displaced dorsally.
  - Results from forced dorsiflexion (fall from outstretched limb)
  - Dinner fork deformity

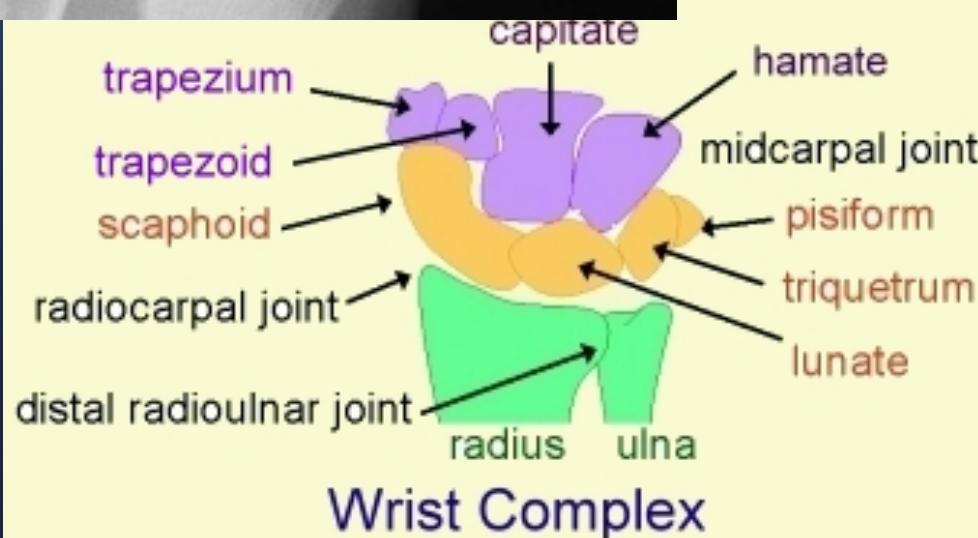


# Wrist Anatomy

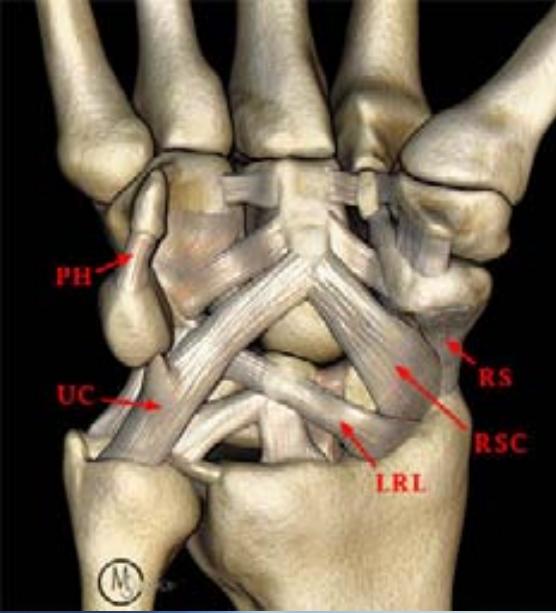
- Carpals
  - Proximal Row

- Moveable
- Scaphoid
- Lunate
- Triquetrum
- Pisiform

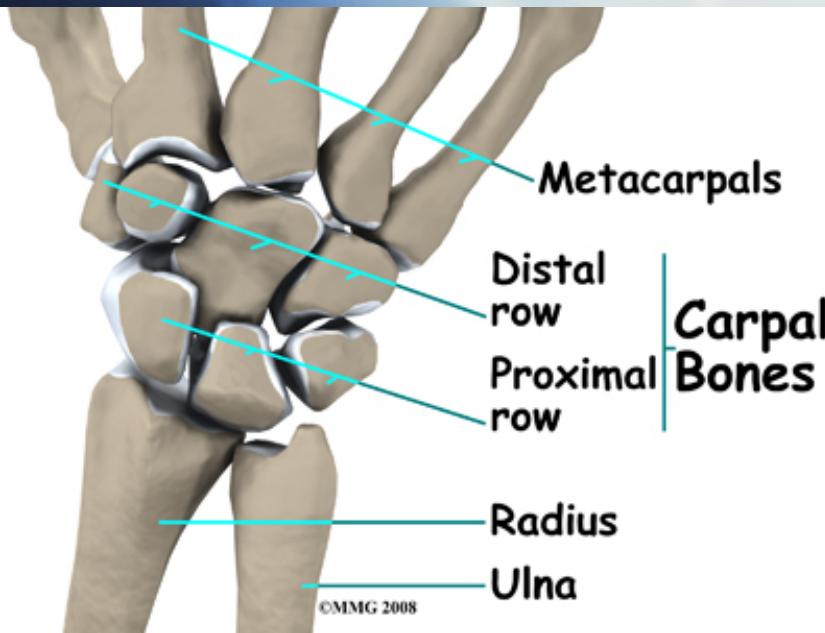
- Within flexor carpi ulnaris tendon- enhances mechanical advantage.



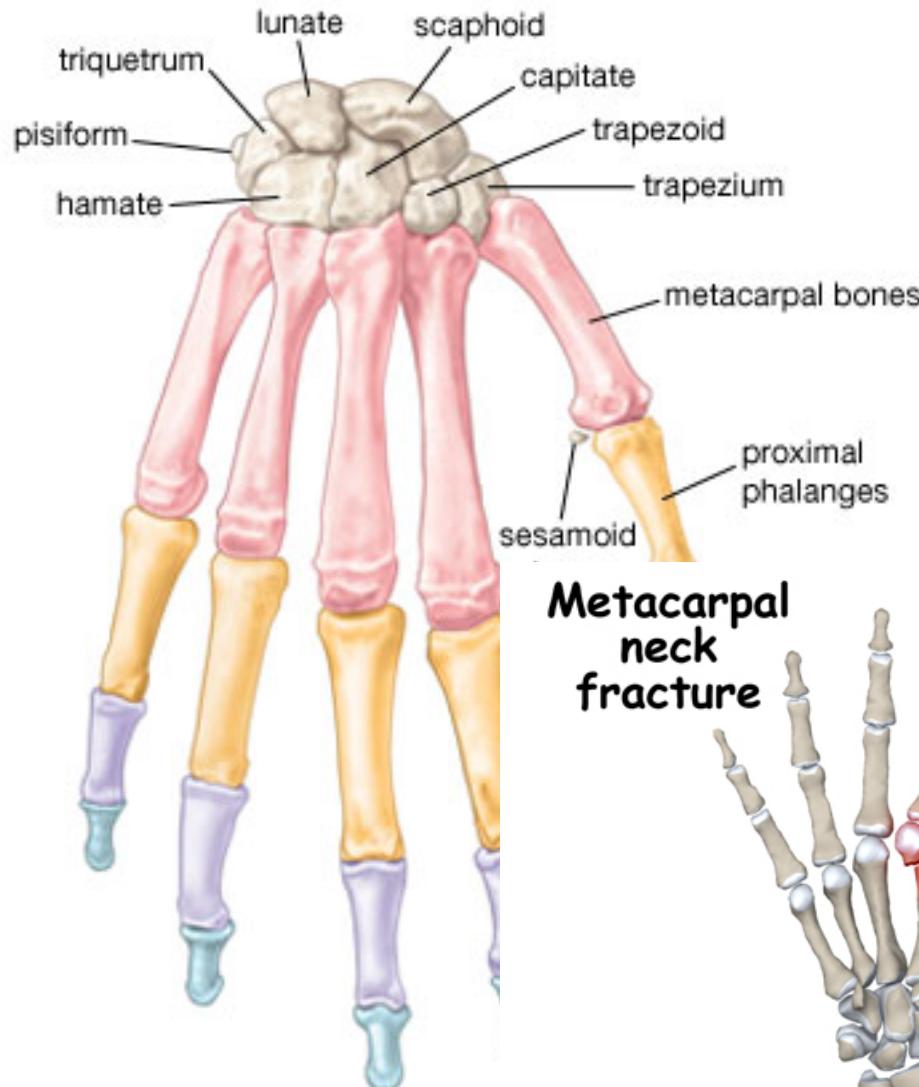
# Wrist Anatomy



- Carpals
  - Distal Row
    - Immobile
    - Trapezium
    - Trapezoid
    - Capitate
    - Hamate



# Hand Anatomy



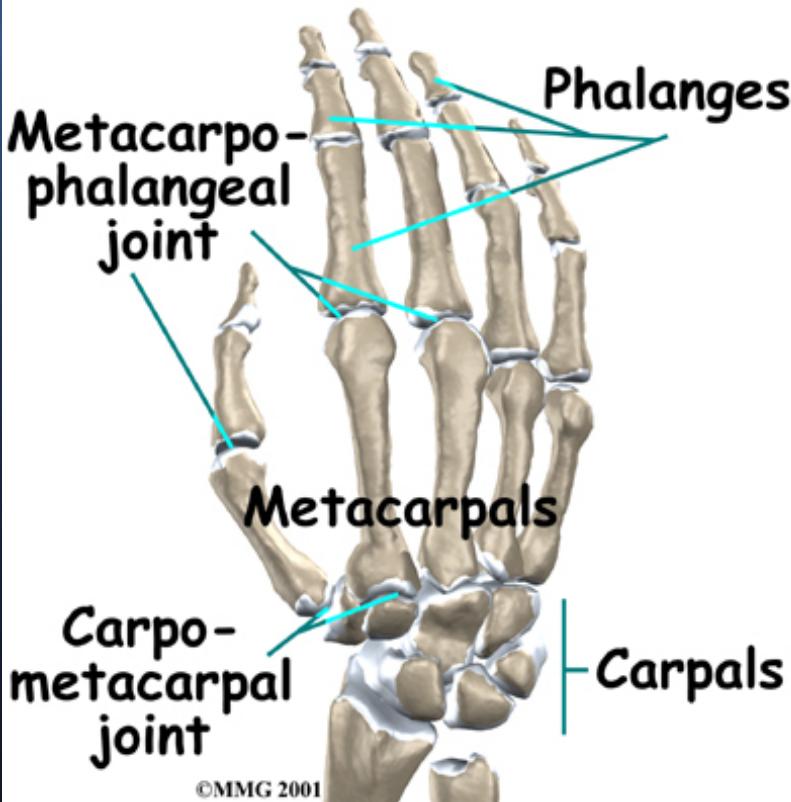
- Metacarpals

- I-V
- Head
- Neck

- Phalanges

- Proximal
- Intermediate
- Distal

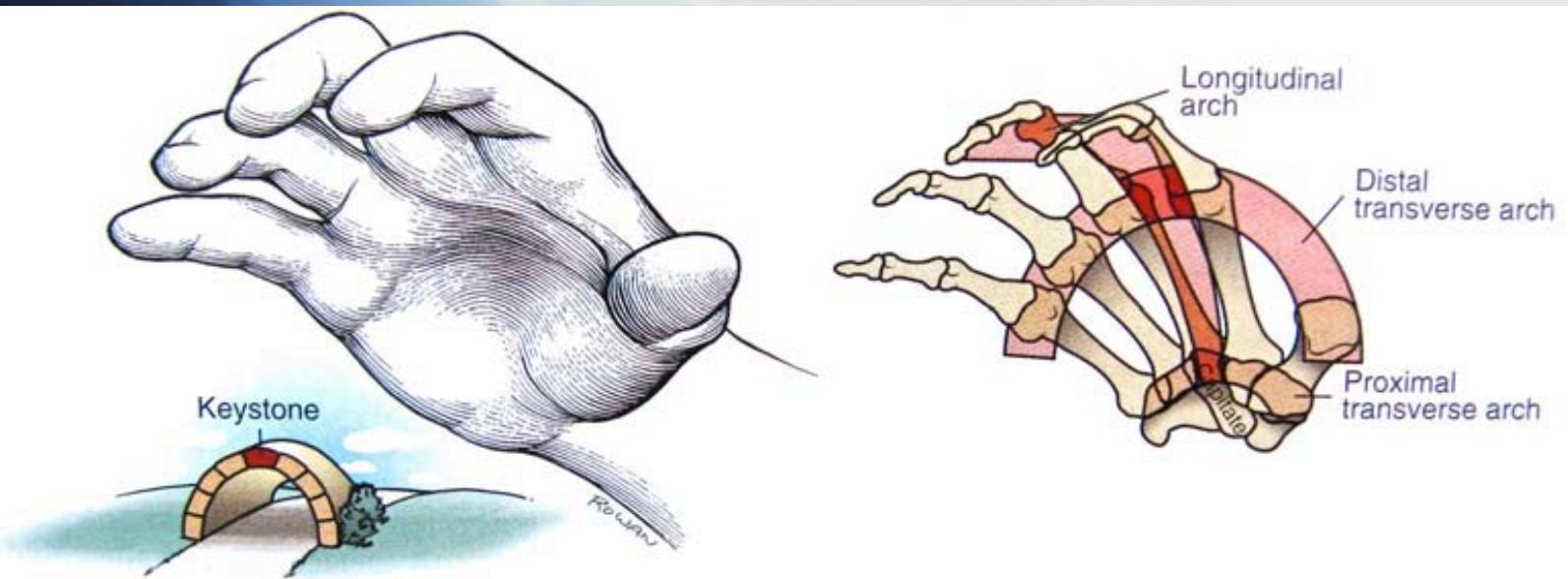
# Hand Anatomy



- Joints
  - Carpometacarpal (CMC) Joints
  - Metacarpophalangeal (MCP) Joints
  - Interphalangeal
    - Proximal Interphalangeal Joint (PIP)
    - Distal Interphalangeal Joint (DIP)
- Digital articulations all designed to function in flexion.

# Arches of the Hand

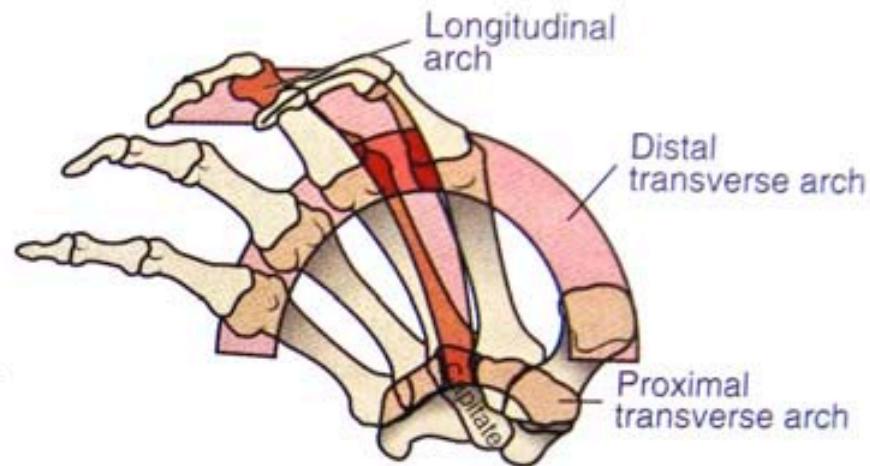
- Intrinsic hand muscles maintain arches
- Proximal Transverse
  - Capitate as keystone
  - Relatively flexed
  - Along immobile distal carpal row
- Distal Transverse
  - Head of 3<sup>rd</sup> metacarpal as keystone
  - Passes through all the metacarpal heads
  - More mobile



# Arches of the Hand

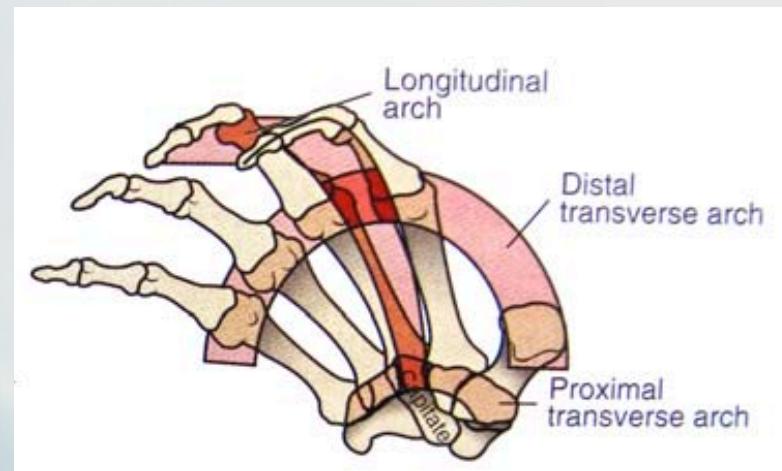
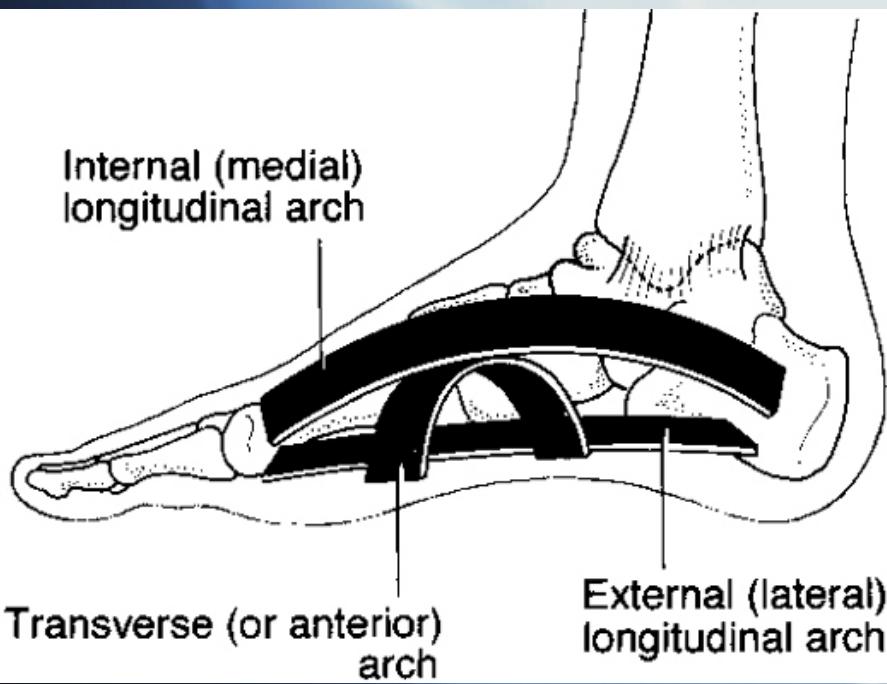
- Longitudinal

- Connects transverse arches.
- Central pillar- 2<sup>nd</sup> and 3<sup>rd</sup> metacarpals
- Thumb- 4<sup>th</sup>, 3<sup>rd</sup>-5<sup>th</sup> finger flexion allows palm to flatten or cup.
  - Try this! Cup hand and move index finger



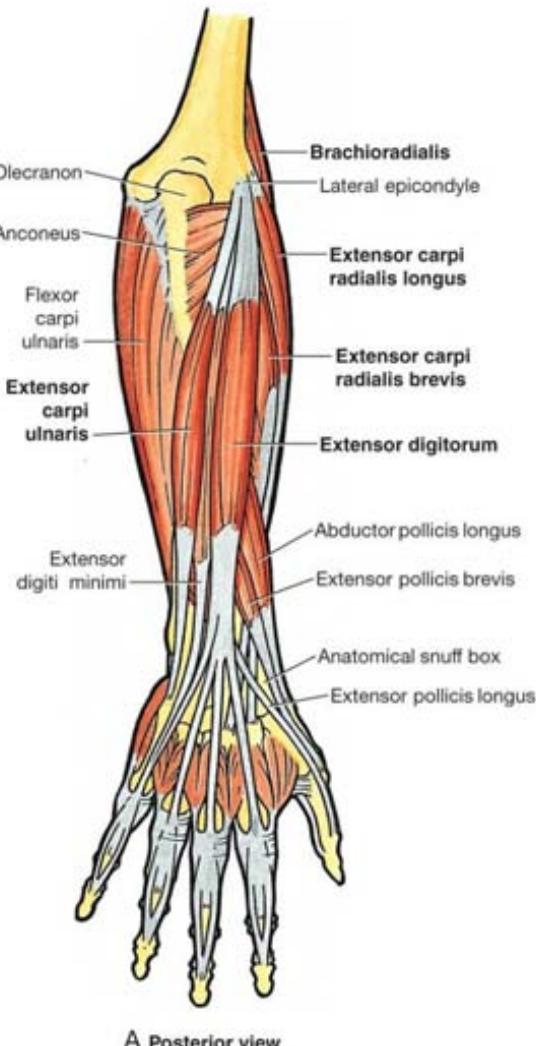
# Arches of the Hand

- Similar to foot
  - Two longitudinal arches and 1 transverse arch.
  - Hand more transverse (opposition)-foot more longitudinal-foot flexion-extension.

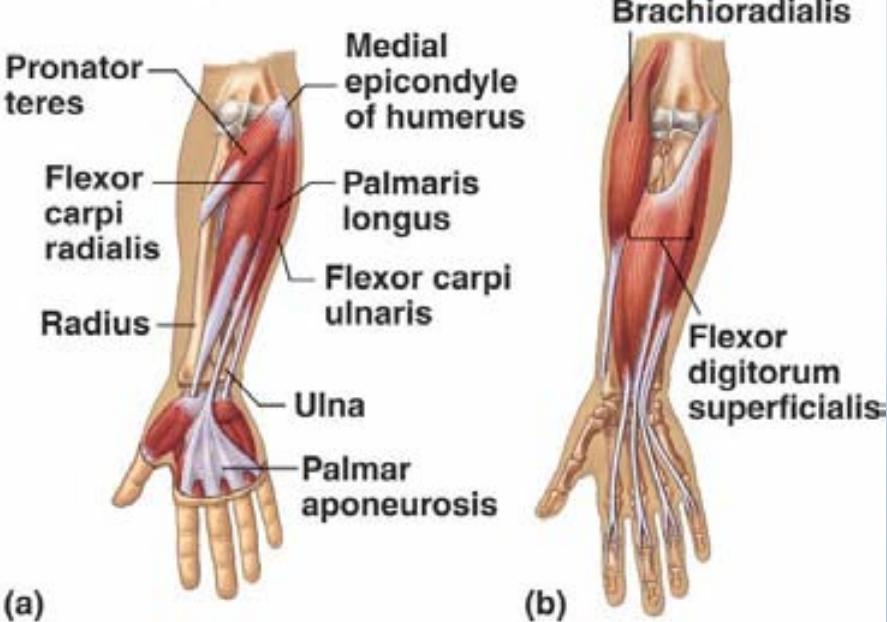


# Muscles at the Wrist

- Motors of the wrist
  - Flexor carpi radialis, Flexor carpi ulnaris, Palmaris longus
  - Extensor carpi radialis longus/brevis, Extensor carpi ulnaris
  - Control radial/ulnar deviation as well as flexion/extension.



# Anterior Compartment



- Flexor carpi radialis
  - Flex and abduct hand at wrist
- Flexor digitorum superficialis
  - Flex intermediate phalanx
  - Continued action flexes 1<sup>st</sup> phalanx at hand
- Flexes hand at wrist, forearm at elbow
- Flexor digitorum profundus
  - Flex distal phalanx after passing through tendon of FDS
  - Flex hand at wrist

# Muscles at the Wrist

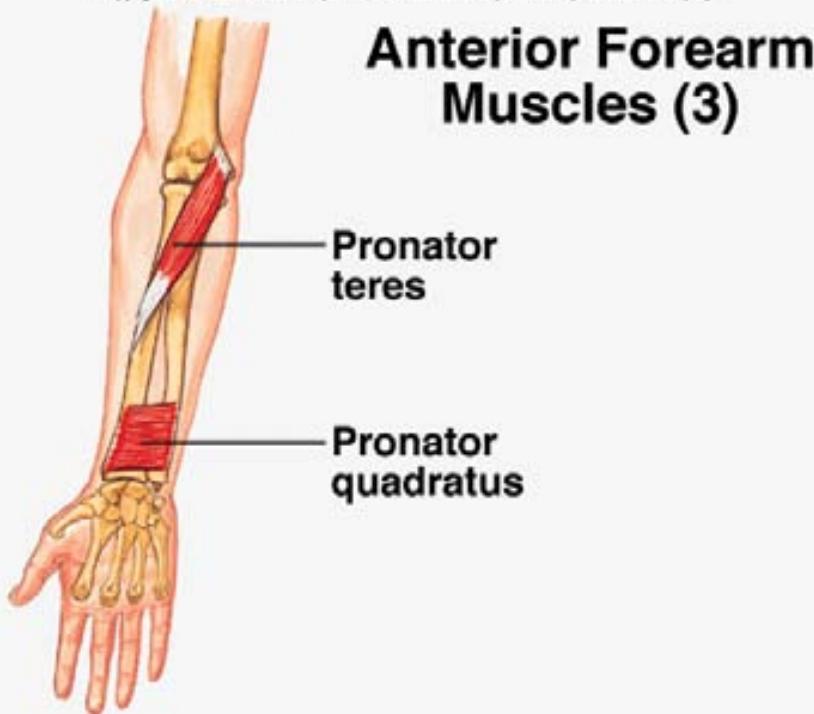
- Test FDS and FDP independently
  - If DIPs can flex but PIPs cannot, there is a problem with FDS.



# Anterior Compartment



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- Palmaris longus
  - Flex hand at wrist
- Flexor carpi ulnaris
  - Flex and adduct hand at wrist
- Flexor pollicis longus

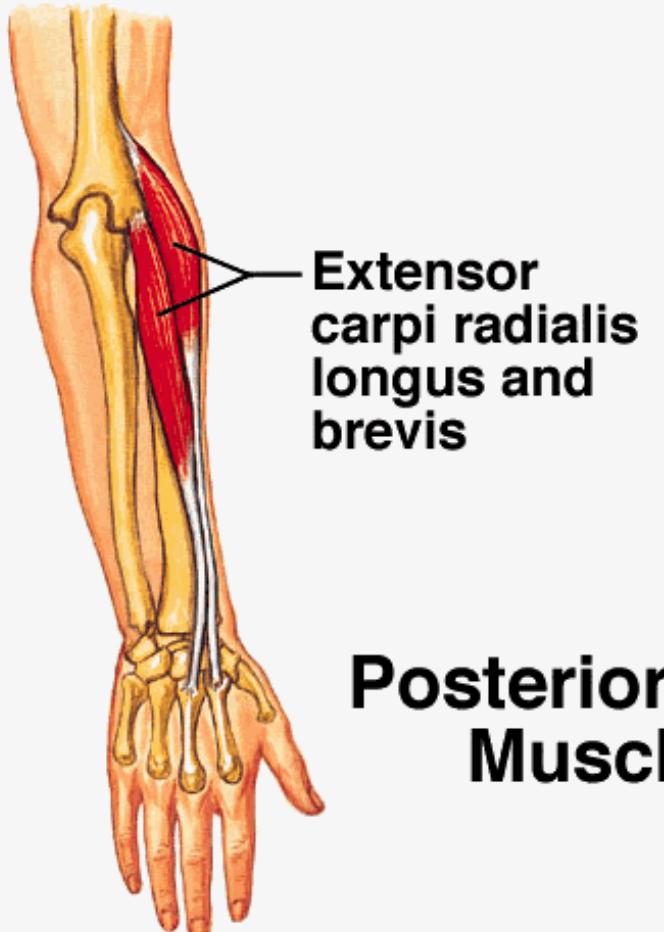


# Posterior Compartment

- Brachioradialis

- Assists elbow flexion
- Semipronator/semisupinator of forearm (bring to neutral position)

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ducts hand  
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iflexor.

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ducts hand

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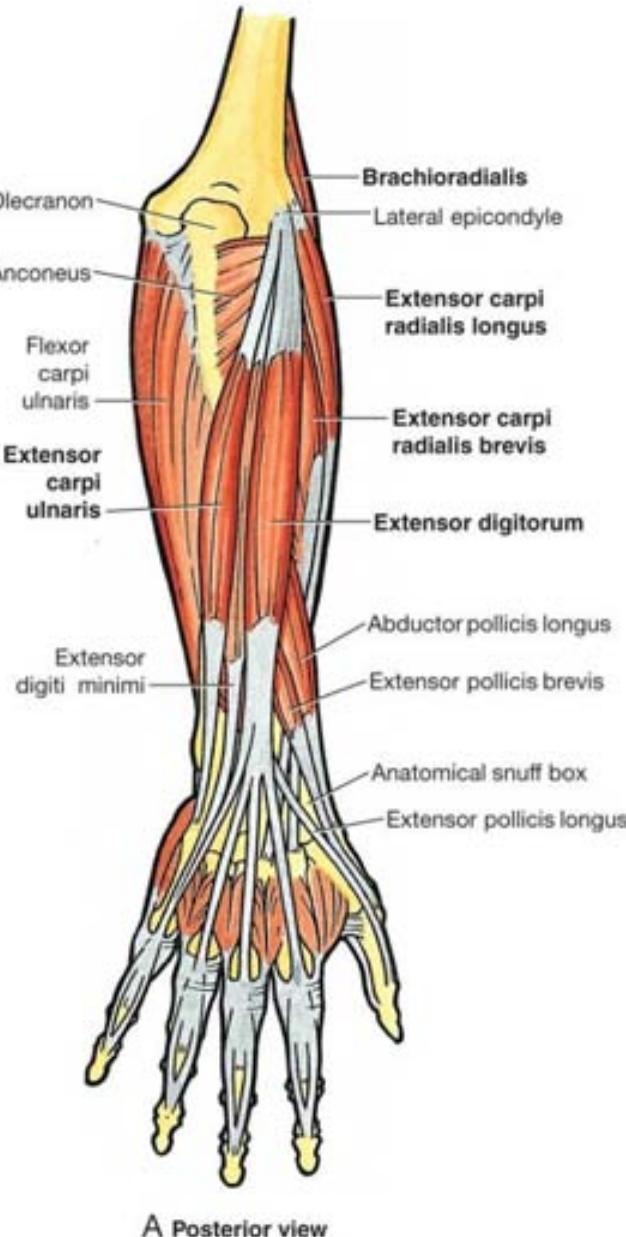
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AskTheTrainer.com

R.W.C.

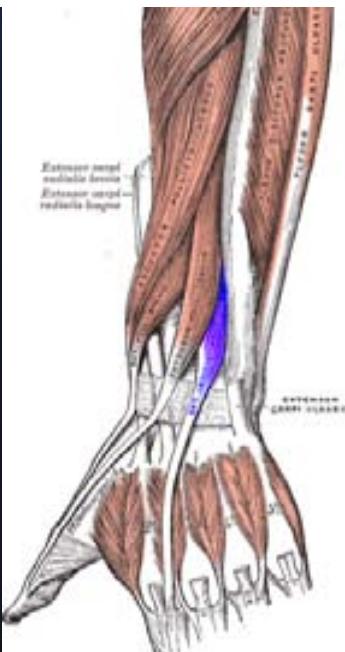
# Posterior Compartment



- Extensor digitorum
  - Extends MCP and CMC joints
- Extensor digiti minimi
  - Extend proximal phalanx of 5<sup>th</sup> digit at MCP
  - Assist in hand extension at wrist
  - Extend middle and distal phalanges of 5<sup>th</sup> digit when proximal phalanx flexed.
- Extensor carpi ulnaris
  - Extends and adducts hand at wrist

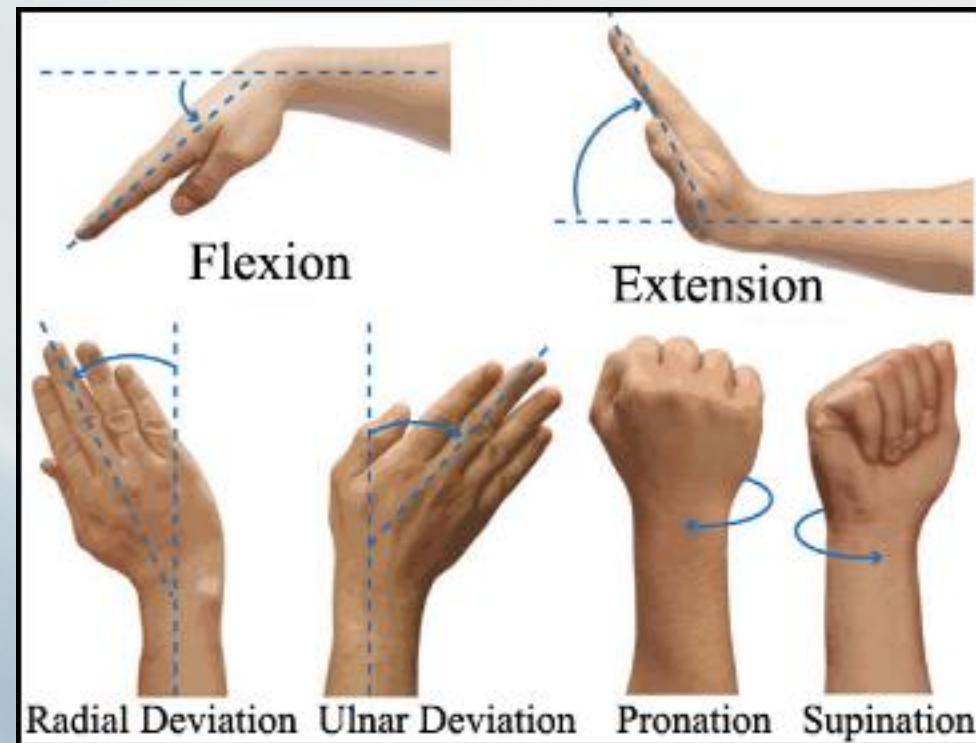
# Posterior Compartment

- Abductor pollicis longus
  - Flex and abduct wrist
  - Abducts and assists thumb CMC flexion
- Extensor pollicis brevis
  - Extends proximal phalanx of thumb
- Extensor pollicis longus
  - Extends distal thumb phalanx
- Extensor indicis
  - Extension of all phalanges of index finger.



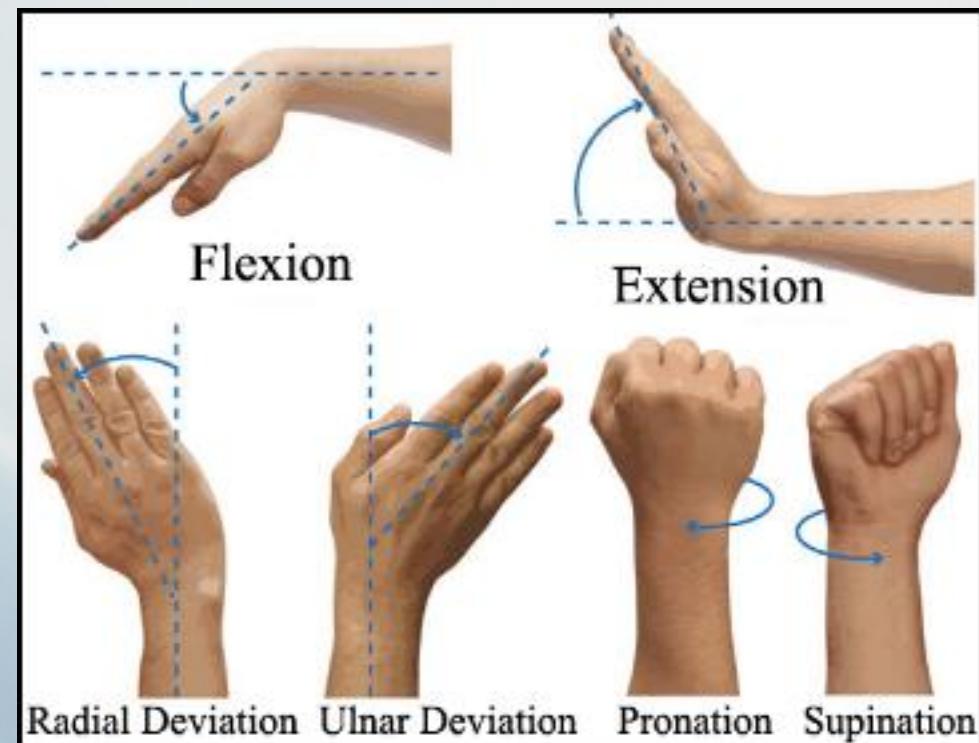
# Wrist Movements

- **Flexion:**
  - FDS/FDP, Flexor carpi radialis, Flexor carpi ulnaris, palmaris longus, flexor pollicis longus.
- **Extension:**
  - Extensor carpi radialis longus/brevis, extensor carpi ulnaris, extensor digitorum, extensor digiti minimi, extensor indicis, extensor pollicis longus.



# Wrist Movements

- Ulnar Deviation (Adduction):
  - Flexor carpi ulnaris, Extensor carpi ulnaris
- Radial Deviation (Abduction):
  - Flexor carpi radialis, extensor carpi radialis longus/brevis, abductor pollicis longus, extensor pollicis longus/brevis.



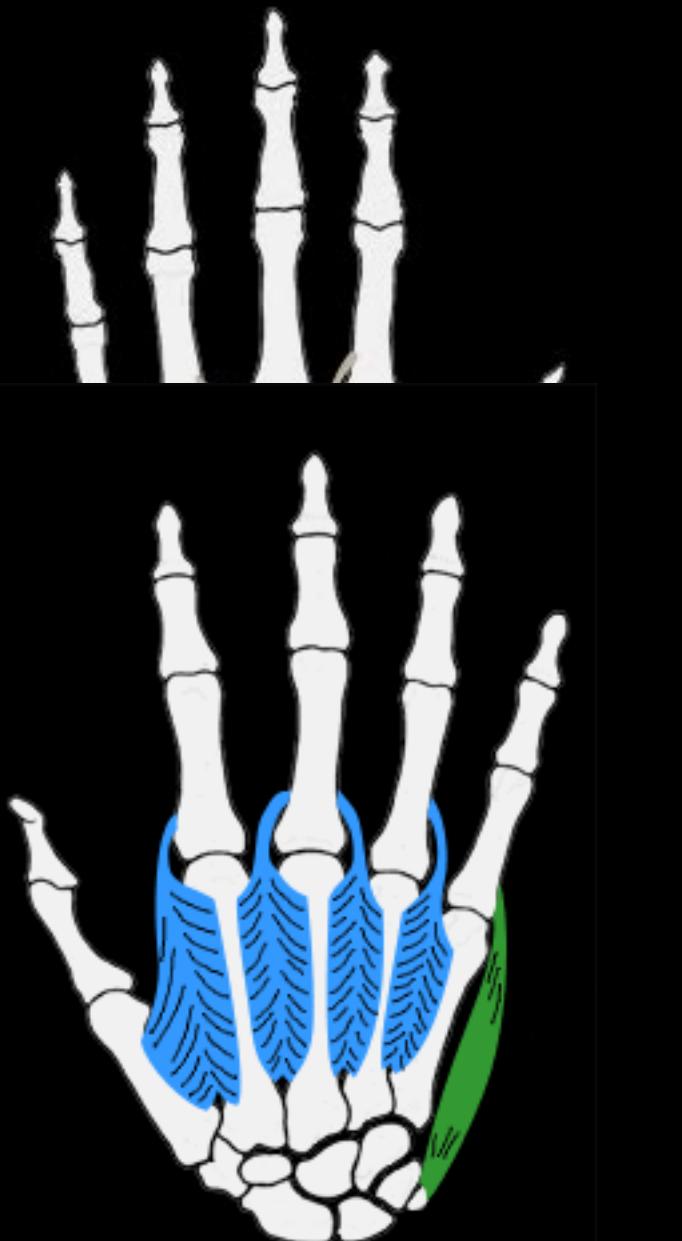
# Thumb Movements



- Flexion
- Extension
- Abduction
- Adduction
- Opposition



# Intrinsic Hand Muscles: A of A of A



## Deep Musculature:

- Lumbricals:
  - Flex MCP joints
  - Extend IP joints
- Palmar Interossei:
  - Adduct digits towards middle finger.
  - PAD
- Dorsal Interossei:
  - Abduct digits away from middle finger.
  - DAB

# Intrinsic Hand Muscles: A of A of A

- Interossei and lumbricals in writing
  - Lumbricals place digits into writing position (flex MCP-Extend IP joints)
  - Interossei adduct or abduct digits to make width of letters.



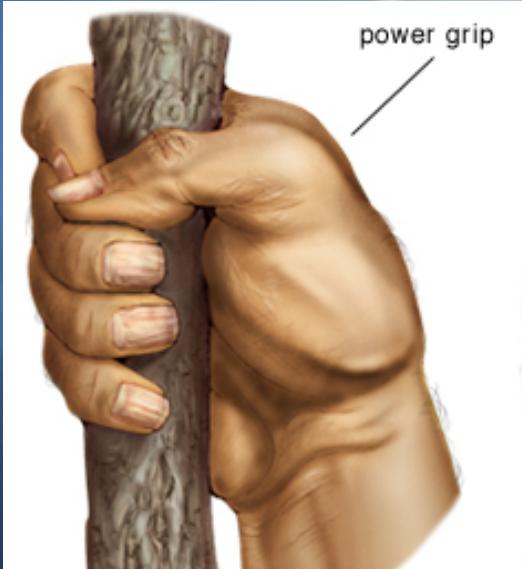
# Grip

- **Power Grip**

- Fingers flexed at all three joints
- No thumb reinforcement
- Usually performed with ulnar deviation and extension of wrist.

- **Coal hammer Grip**

- Thumb is wholly occupied in reinforcing clamping action of digits (bunched fist).



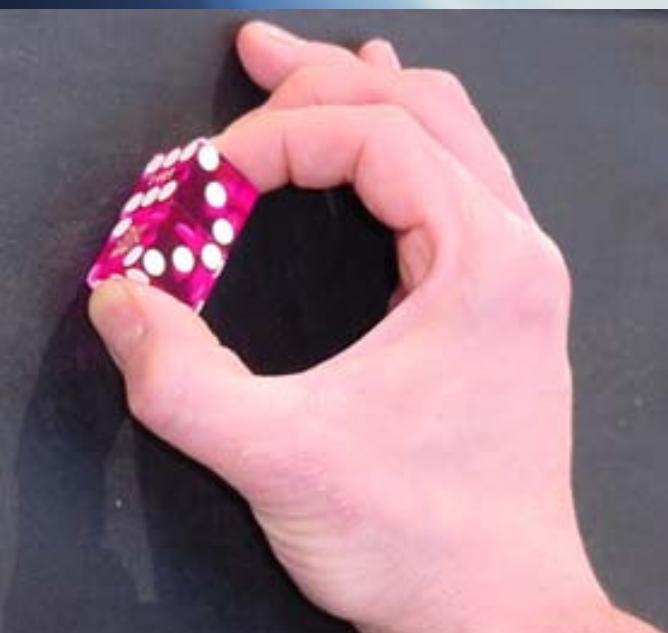
# Grip

- **Precision Grip**

- Manipulation of small objects between thumb and flexor aspects of fingers.
- Fingers semi-flexed.
- Thumb palmar abducted and opposed.

- **Muscles**

- Adductor pollicis (adducts thumb)
- 1<sup>st</sup> dorsal interosseus (abducts index finger)
- Lumbrical (flex MCP joint)
- Opponens pollicis
- Flexor pollicis brevis
- FDS/FDP



# Grip

- Dynamic Tripod
  - Thumb, index finger, and middle finger for precision handling of an object.
  - 4<sup>th</sup> and 5<sup>th</sup> digits used for support and static control.



# Grip

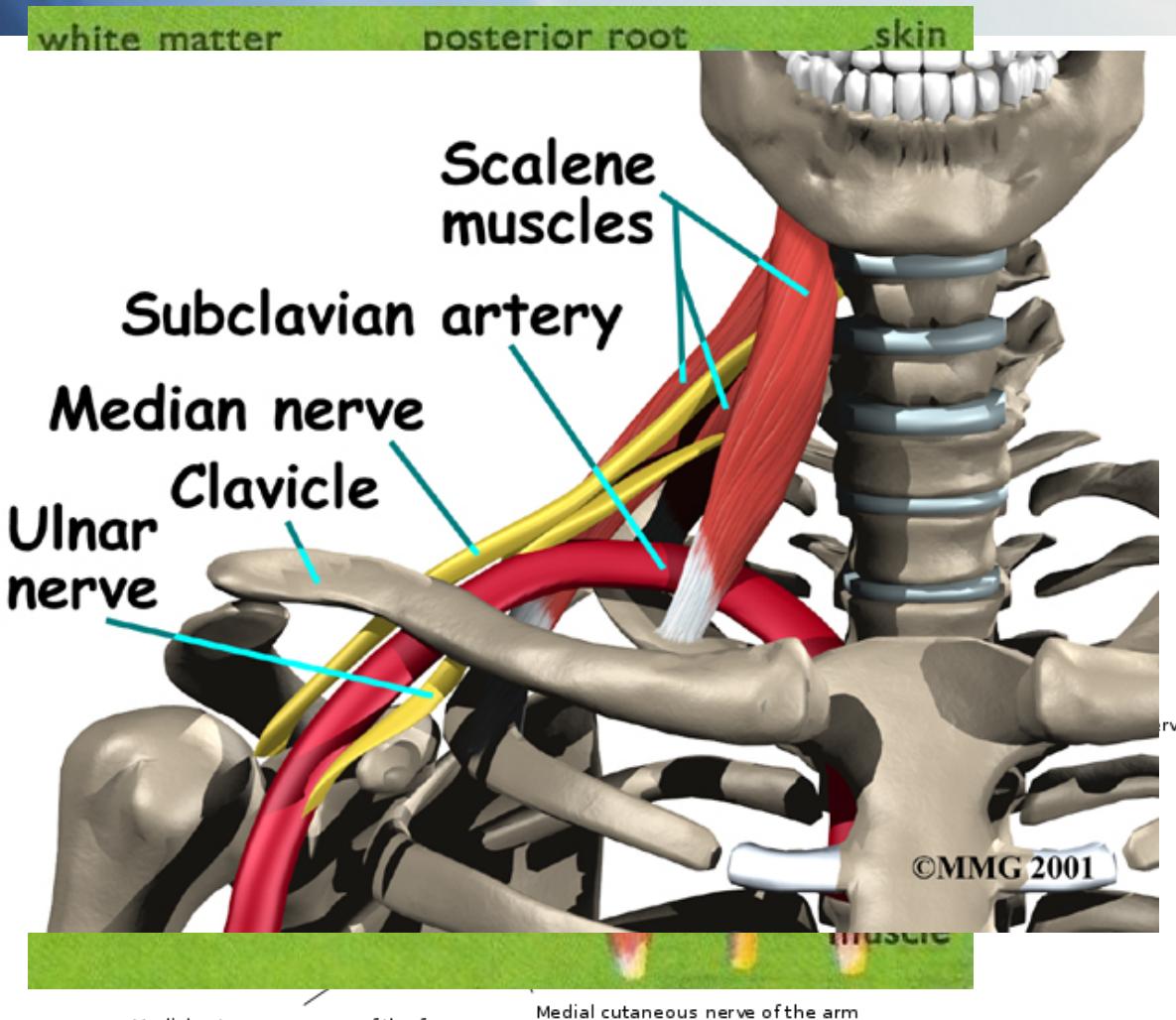
## ▪ Hook Grip

- Fingers flexed so their pads lie directly parallel and slightly away from palm.
- Requires relatively little muscle activity.
- Used when precision not needed but power needed over a long period of time.
- Ie. Carrying a suitcase by its handle.
- Only grasp pattern available when hand intrinsics not working.
  - Paralysis of hand intrinsics- hand relies on hook grasp for all functional task



# Brachial Plexus (5-3-6-3-5)

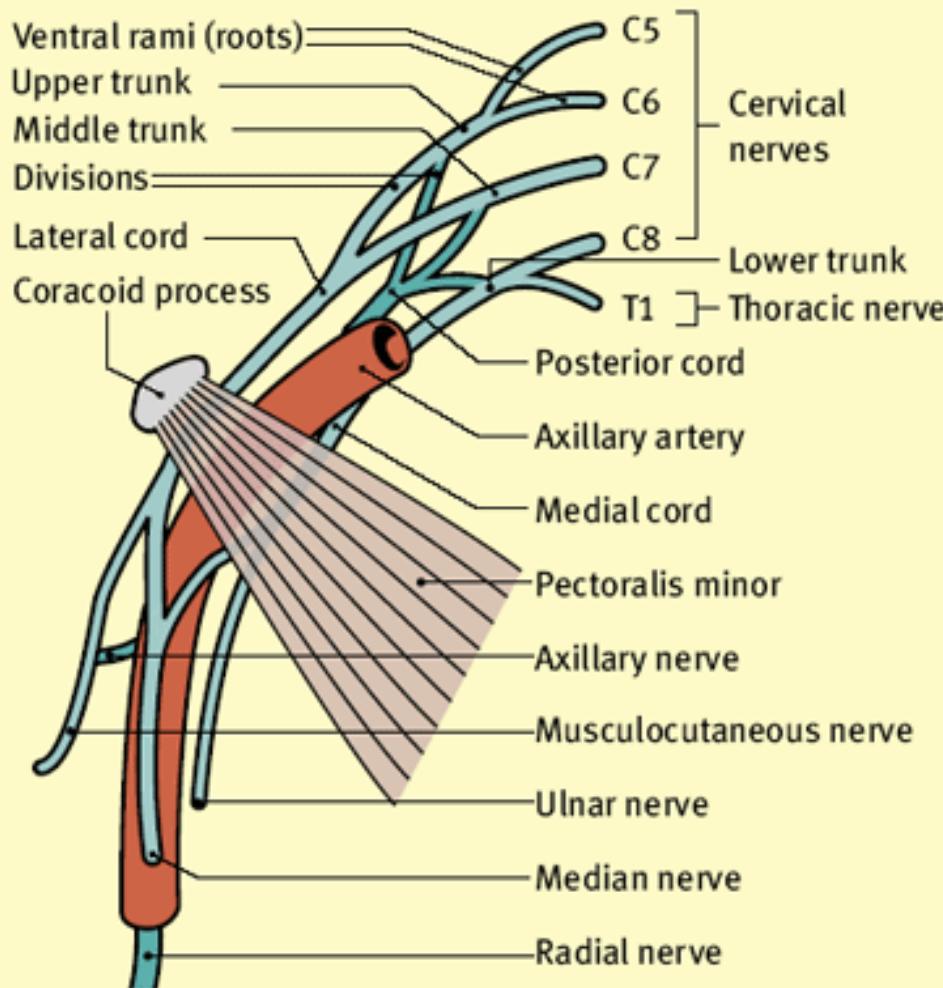
- 5 Roots
  - From anterior (ventral) rami of spinal nerves
- Scalene muscles
- 3 Trunks
  - Superior (C5-C6)
  - Middle (C7)
  - Inferior (C8-T1)



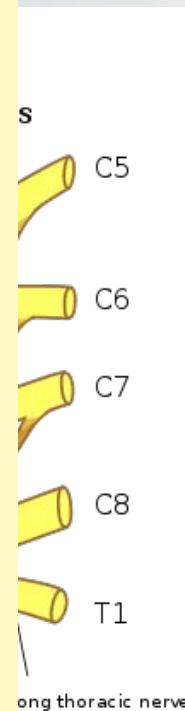
# Brachial Plexus

- 6 Divisions
  - Each trunk splits into anterior and posterior
- 3 Cords
  - Posterior (C5-T1)
  - Lateral (C5-C7)
  - Medial (C8-T1)
  - Named in reference to axillary artery

## Relationship of the brachial plexus to the axillary artery

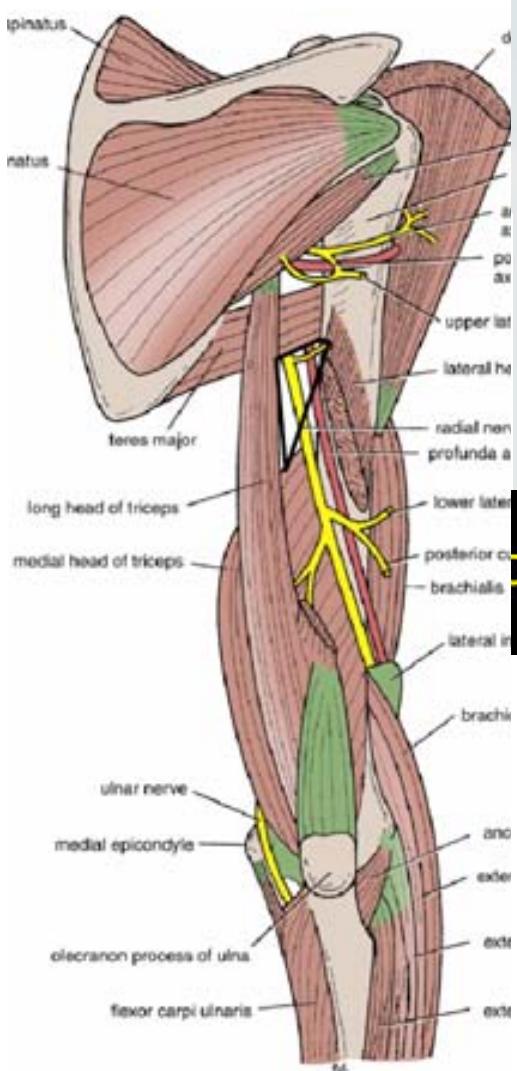
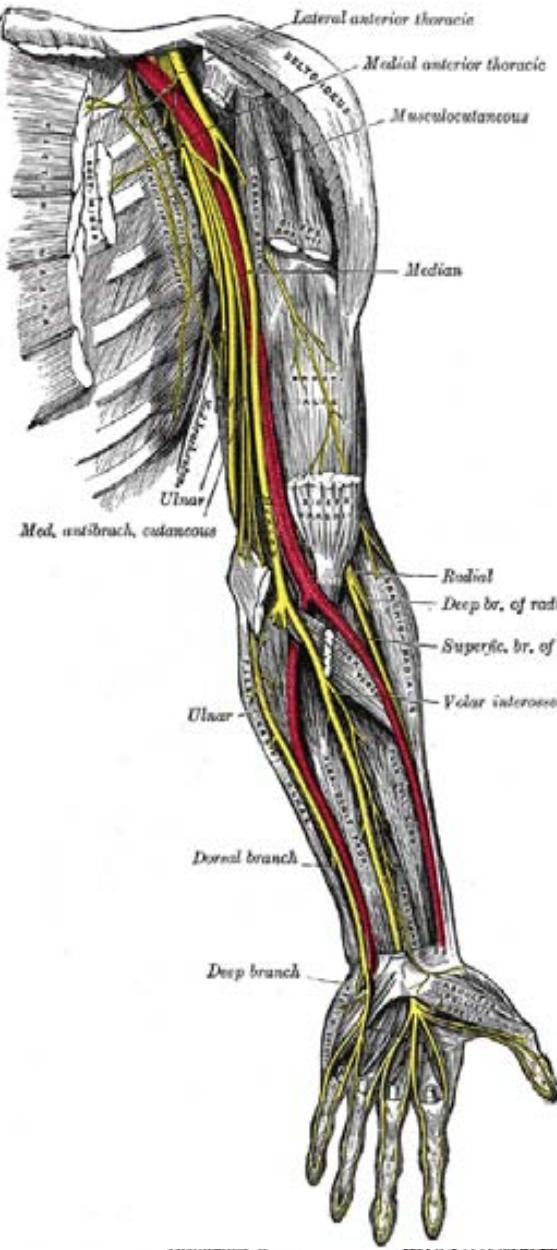


Posterior divisions and their branches dark green



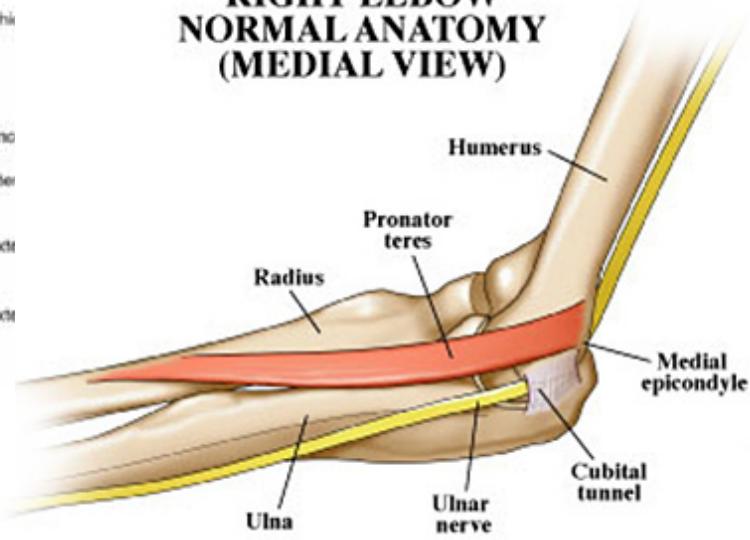
# IS Branches

- Axillary nerve (C5-C6)
- Musculocutaneous nerve (C5-C7)
- Median nerve (C5-T1)
- Ulnar nerve (C8-T1)
- Radial nerve (C5-T1)



**Cutaneous  
Brachialis**

**RIGHT ELBOW  
NORMAL ANATOMY  
(MEDIAL VIEW)**



# Brachial Plexus Injury



- Superior injuries (C5-C6)
  - Result from excessive increase in angle between neck and shoulder
- Inferior injuries (C7-T1)
  - Occurs when upper limb pulled suddenly superior