

Diagnosis	Peripheral Nerve	Entrapment Site	Sensory Distribution	Muscles Affected	Common Physical Examination Findings
Spinal cord injury	N/A	Spinal canal	Variable but often spans multiple dermatomal and peripheral nerve root distributions	Variable but often spans multiple myotomal and peripheral nerve root distributions	Weakness and sensory impairments;
Cervical radiculopathy	N/A	Nerve root	Corresponds with affected dermatome based on nerve root level	Corresponds with affected myotome based on nerve root level	Weakness and sensory impairments; absent deep tendon reflexes associated with affected nerve root;
Carpal tunnel syndrome	Median nerve	Carpal tunnel (wrist)	Palmar portion of the first three digits and radial half of the fourth digit as well as the distal dorsal aspects of these digits	Abductor pollicis brevis, opponens pollicis, superficial head of flexor pollicis brevis, lumbricals I/II	Weakness and sensory impairments;
Pronator teres syndrome	Median nerve	Various locations at the elbow or proximal forearm, most commonly between the two heads of pronator teres	The same as in carpal tunnel syndrome, with the addition of the thenar eminence	The same as in carpal tunnel syndrome with the possible addition of pronator teres, flexor carpi radialis, palmaris longus, flexor digitorum superficialis, and the anterior interosseous nerve innervated muscles	Weakness and sensory impairments; Reproduction of symptoms with resisted forearm pronation
Anterior interosseous nerve syndrome	Anterior interosseous nerve	Same as in pronator teres syndrome	None, this is a pure motor palsy	Flexor pollicis longus, flexor digitorum profundus, pronator quadratus	Weakness; Difficulty making an "OK" sign with the thumb and the forefinger

Ulnar neuropathy at the elbow	Ulnar nerve	Elbow, most commonly within the cubital tunnel	Ulnar half of digit 4, entire digit 5	Frequently spares the ulnar innervated forearm muscles (flexor carpi ulnaris and flexor digitorum profundus to digits 4/5), while commonly affecting the ulnar innervated hand muscles, particularly the first dorsal interosseous muscle	Weakness and sensory impairments;
Guyon's canal syndrome	Ulnar nerve	Guyon's canal (wrist)	The same as in ulnar neuropathy at the elbow	May involve all ulnar innervated hand muscles (interossei, lumbricals of digits 4/5, adductor pollicis, palmaris brevis, abductor digiti minimi, flexor digiti minimi, and opponens digiti minimi)	Weakness and sensory impairments
Saturday night palsy, radial neuropathy at the spiral groove	Radial nerve	Radial groove of the humerus	Dorsal aspect of lateral hand, part of the thumb, and proximal aspect of the dorsal phalanges of the index, middle, and ring fingers	Extensor indicis, extensor digitorum communis, extensor carpi ulnaris, long head of the extensor carpi radialis, supinator, brachioradialis; triceps are spared	Weakness and sensory impairments
Posterior interosseous neuropathy	PIN (branch of radial nerve)	Forearm, most commonly within the Arcade of Frohse	No cutaneous sensory loss although pain may be present	The same as in radial neuropathy at the spiral groove except for sparing of brachioradialis, long and short heads of the extensor carpi radialis	Weakness
Radial nerve compression at the wrist	Superficial branch of the radial nerve	Wrist	The same as in radial neuropathy at the spiral groove	None, pure sensory palsy	Sensory impairments, tenderness at compression site
Lateral antebrachial	Lateral antebrachial	Between biceps tendon/aponeurosis and the brachialis	Lateral forearm	None, pure sensory palsy (compression of the musculocutaneous nerve more	Sensory impairments,

cutaneous nerve entrapment	cutaneous nerve			proximally could have motor findings)	tenderness at compression site
Suprascapular nerve entrapment at suprascapular notch	Suprascapular nerve	Suprascapular notch	There is no cutaneous sensory distribution	Infraspinatus, supraspinatus	Weakness, atrophy
Suprascapular nerve entrapment at spinoglenoid notch	Suprascapular nerve	Spinoglenoid notch	There is no cutaneous sensory distribution	Infraspinatus	Weakness, atrophy
Long thoracic nerve palsy	Long thoracic nerve	Most commonly becomes entrapped where the nerve passes through the middle scalene muscle or angulates over the second rib; also may be involved in cervical traction injury	None, pure motor palsy	Serra	