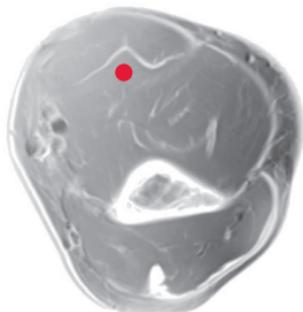




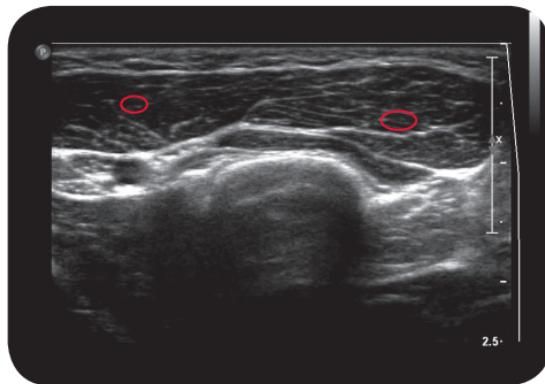
biceps brachii

* * *

C r o s s S e c t i o n



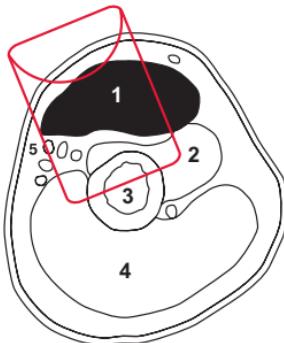
M R I



U l t r a s o u n d

99





L e g e n d
 1: M. triceps brachii
 2: M. brachialis 3: Humerus
 4: M biceps brachii 5: ves-
 sel-nerve bundle

O r i g i n
 Caput breve: Processus coracoideus scapulae
 Caput longum: Tuberculum supraglenoidale scapulae

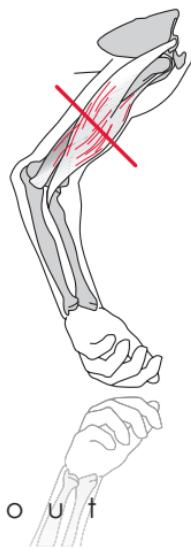
I n s e r t i o n
 Tuberositas radii and aponeurosis M. bicipitis brachii

I n n e r v a t i o n
 N. musculocutaneus (C5-C7)

F u n c t i o n
 Flexion of elbow, supination of forearm, anteversion of shoulder.

C o n t r o l o f I n j e c t i o n
 Sonography, electrical stimulation, EMG

C o m m e n t
 Strong flexor of elbow.
 Short and long head can not be differentiated by sonography. Due to location of motor end plates in lower third, injection should be performed there. Strong supinator. When to be injected, both functions of biceps have to be weighted carefully against each other, i.e. reduced elbow-flexion vs. reduced supination.



S c o u t