Radiating/Distal Cervical Spine Pain
Brachial Plexus Injury

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<th>HISTORY</th>
<th>MECHANISM OF INJURY</th>
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| • Patient reports having a “burner or stinger”
  • Acute onset
  • Patient reports pain, burning, numbness, or tingling from the shoulder down to the hand | • Lateral flexion with shoulder depression creating a stretching of the brachial plexus
  • Extension, compression, and rotation to the affected side, compressing the brachial plexus | • Upper quarter screen
  • Assess AROM and PROM
  • Brachial Plexus test stretching of the plexus
  • Evaluate muscle strength
  • Chronic “burners or stingers” need to be evaluated for the possibility of congenital spinal stenosis |

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<th>KEY FINDINGS</th>
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| • The patient will experience neuropraxia that lasts for several minutes and rarely days
  • Mechanism will involve either compression or a stretch at the neck, positive upper quarter screen initially that resolves quickly | • Radiographs and MRI may be indicated after multiple incidents as up to 50% of athletes with recurring injuries have been found to have spinal stenosis\(^\text{13}\) |