

Physician Assistant students discover anatomic variation of the musculocutaneous nerve.

A 75-year-old female embalmed cadaver with a left upper extremity variation of musculocutaneous nerve not piercing through the coracobrachialis and three branches originating from the median nerve.

Dissection of the upper extremity revealed the musculocutaneous nerve not piercing through the coracobrachialis muscle. Students discovered three separate branches extending off the median nerve to innervate the coracobrachialis, biceps brachii, and brachialis muscles. Review of literature found this specific anatomic variation has a prevalence ranging between 1.5 to 15%. Variability in the origin of the musculocutaneous nerve not piercing through the coracobrachialis increases the susceptibility to damage as the nerve fibers are not protected by the biceps brachii muscle. Exploratory and traumatic surgical interventions can result in clinicians performing invasive procedures without prior knowledge of anatomical variation