

Upper Limb

Bone / Fracture	Associated Nerve Injury	Key MCQ Points
Clavicle (middle 1/3)	Brachial plexus (rare)	Usually lateral compression, mostly subclavian vessels at risk
Humerus – Proximal (surgical neck)	Axillary nerve	Weak deltoid, loss of shoulder abduction $\geq 15^\circ$, sensory loss over lateral shoulder ("regimental patch")
Humerus – Midshaft	Radial nerve	Most common nerve injury in humerus fracture; wrist drop, sensory loss over dorsum of hand
Supracondylar humerus (children)	Median nerve	Especially flexion type; ape hand deformity possible
Medial epicondyle	Ulnar nerve	Clawing of 4th & 5th fingers, sensory loss in medial hand
Distal radius	Median nerve	Acute carpal tunnel syndrome, thenar atrophy if chronic

Lower Limb

Bone / Fracture	Associated Nerve Injury	Key MCQ Points
Hip (proximal femur / neck)	Femoral nerve	Weak hip flexion, knee extension, sensory loss in anterior thigh
Posterior hip dislocation / acetabulum fracture	Sciatic nerve	Foot drop, sensory loss in dorsum of foot; peroneal division more commonly affected
Femoral shaft fracture	Rare femoral or sciatic injury	Usually iatrogenic during fixation
Tibial plateau / proximal tibia	Peroneal nerve	Foot drop, sensory loss in dorsum of foot; common peroneal wraps around fibular neck
Fibular neck fracture	Common peroneal nerve	Most classic association; foot drop, numbness over dorsum of foot

Key Points for MCQs

1. Most common nerve injury in humerus fracture \rightarrow Radial nerve (midshaft)
2. Most common nerve injury in distal humerus fracture (supracondylar, kids) \rightarrow Median nerve

3. Most commonly injured nerve in fibular neck fracture → Common peroneal nerve
4. Nerve affected in surgical neck of humerus fracture → Axillary nerve

Presentation Clues

- Wrist drop → Radial nerve
- Foot drop → Peroneal division of sciatic / common peroneal
- Ape hand → Median nerve
- Claw hand (4th–5th finger) → Ulnar nerve
- Weak shoulder abduction → Axillary nerve

MCQ Tips

- Upper limb fractures → Radial/Median/Ulnar/Axillary
- Lower limb fractures → Sciatic / Peroneal / Femoral
- Association by location is the most tested point
- Children vs adults may differ (supracondylar fracture → median nerve in kids)
- Sensory + motor deficits help localize nerve injury