

UPPER LIMB BIRTH INJURIES INCLUDING BRACHIAL PLEXUS PALSY

DEFINITION

- Brachial plexus palsy may be congenital occurring in-utero or acquired due to injury to brachial plexus nerves sustained due to stretching of nerves during delivery
- Fractures to humerus or clavicle
- Isolated radial nerve palsy of the newborn

ASSESSMENT OF ALL BABIES WITH REDUCED UPPER LIMB MOVEMENT

- Examine the arm and neck for swelling, bruising, tone, posture and degree of movement
- Assess for breathing difficulties and Horner's syndrome
- Document findings clearly in case notes
- Explain to parents that recovery probable but may not be complete
- Inform consultant obstetrician and paediatrician

MANAGEMENT

- X-ray humerus/clavicle to exclude fracture
- if fracture of clavicle clearly seen, reassure parents and review baby at 3 weeks when movement should be returning
- if fracture of humerus is clearly seen, offer strapping of arm to chest for comfort and contact Birmingham Children's Hospital (BCH) orthopaedic team to arrange follow-up
- if uncertain, refer to Children's Hand and Upper Limb Service at BCH
- Classical 'Waiter's tip position':
 - refer to Children's Hand and Upper Limb Service at BCH as soon as possible
 - initiate referral to local physiotherapists
- Paralysis of the arm, which is **completely** resolved within a few days does not need to be referred but if there is any doubt, **all** babies will be seen in the regular **4 times weekly hand trauma clinic** so that a specialist assessment can be made and the parents can be given appropriate information

BIRMINGHAM CHILDREN'S HAND AND UPPER LIMB SERVICE:

- Fax referral proforma to: 0121 333 8131. Form available to download from <https://bwc.nhs.uk/hand-surgery-information-for-professionals>
- Email secretary: bwc.handsandupperlimb@nhs.net
Tel: 0121 333 8136/8285
- Email for advice: bwc.handsandupperlimb@nhs.net
- **Email a copy to the local consultant's secretary, so that the referral can be put on CLIP**