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Ultrasound Evaluation of Peripheral Nerves and Focal
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Abstract. Focal neuropathies represent a rare but

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clinically important and potentially challenging aetiology of pain in athletes. Diagnostic ultrasound is commonly used in the evaluation of nerve entrapments, and has several advantages over other imaging modalities, including high resolution, portability, lack of ionising radiation, low cost, point-of-care access, ease of contralateral comparison and capability of Doppler and dynamic imaging techniques.

Ultrasound evaluation of focal neuropathies in athletes:

a ...

The definitive reference on peripheral nerve ultrasound and focal neuropathies, this practical text and atlas is

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the prime resource for neurologists, physiatrists, radiologists, sports medicine physicians, and other providers seeking to combine ultrasound with electrodiagnosis for entrapments of the upper and lower limbs.

Ultrasound Evaluation of Peripheral Nerves and Focal

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Abstract Objective To evaluate the cost-effectiveness of neuromuscular ultrasound (NMUS) for the evaluation of focal neuropathies. **Methods** A prior prospective, randomized, double-blind controlled trial demonstrated that NMUS, when added to electrodiagnostic testing,

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resulted in improved clinical outcomes after 6 months of follow-up.

Cost-effectiveness of neuromuscular ultrasound in focal

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Ultrasound Evaluation of Peripheral Nerves and Focal Neuropathies Training Video is designed to provide a review of anatomy and normal ultrasound characteristics of peripheral nerves. Indications, applications, and ultrasound characteristics of focal neuropathies are included.

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Based on the literature review and clinical experiences, ultrasound findings detected in radial mononeuropathies include focal nerve enlargement, nerve hypoechogenicity, enlarged nerve fascicles, and increased nerve vascularity (20).

Ultrasound in the Evaluation of Radial Neuropathies at the ...

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120 individuals with focal neuropathy based on history, examination, and electrodiagnosis were enrolled. All underwent neuromuscular ultrasound and were randomized to either have their ultrasound results sent to the referring physician or not. Outcomes were assessed at 6 months by evaluators blinded to group assignment.

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