A 53 year old woman was referred to the general medical outpatient clinic. She had no relevant past medical history. Her main complaints were those of numbness and burning over her entire right forearm and hand. She felt that a recent cough had exacerbated the pain. In addition, she had burnt her right hand twice in the last month without even noticing. She denied any history of neck pain or stiffness and there was no history of spinal trauma.

On examination, she looked well and undistressed. There was nil of note on examination of the cardiorespiratory system or the abdomen. There were no palpable breast lumps or lymphadenopathy. Examination of the cranial nerves and lower limbs was unremarkable and in particular there were no long tract signs. The left upper limb was normal from a neurological point of view. On neurological examination of the right upper limb, both the biceps and supinator jerks were absent. In addition there was grossly impaired sensation of pain over the C3–T2 dermatomes. Light touch and vibration sense were preserved over this area. There was early wasting of the intrinsic hand muscles with an associated reduction in distal power. The tone was normal.

**QUESTIONS**

1. What is the likely diagnosis?
2. What is the differential diagnosis?
3. What relevant investigations would you request?
A woman with painless burns

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