Common fibular nerve:
Formed by the posterior divisions of the anterior rami of l4-s2), lateral and smaller branch of the sciatic it follows the medial border of the biceps femoris muscle & tendon. It passes superficial to the lateral head of the gastrocnemius and passes over the posterior aspect of the head of the fibula then wraps around the fibular neck and descends antero-medially forming terminal branches:
- Superior fibular nerve – fibularis longus, fibularis brevis, skin distal anterior leg & dorsum of the foot.
- Deep fibular nerve – anterior muscles of the leg, and dorsum of the foot.

Posterior cutaneous nerve of the thigh supplies the skin over the popliteal fossa.

Branches of common peroneal in popliteal fossa

Muscular
- Short head of bicep

Cutaneous
- Sural communicating nerve
- Lateral cutaneous nerve of calf
- Skin of lateral side on the back of neck

Clinical Correlate
- Any expansible process in this area tends to cause great discomfort due to the tight fascial restrictions, early involvement of neurovascular structures and the involvement in locomotion.
- Abscesses tend to extend superiorly or inferiorly due to resistant fascial roof on the fossa.
- Aneurysmal dilatations at the bifurcation of the popliteal artery are not uncommon and often produce symptoms related the nerves traversing the fossa.
- The close approximation of the popliteal artery to the bony structures and joint capsule puts this artery at risk with knee dislocations and distal femur or proximal tib/fib fractures.