

Distal Biceps Tendon Repair

Post-Surgical Rehabilitation Protocol

3-5 days post op

1. Abbreviated Evaluation
 - a. Surgical dressing is removed
 - b. Assess incision site
 - c. Assess edema
2. Hinged Elbow Brace
 - a. Elbow placed in a hinged elbow **brace locked to 90 degrees flexion/extension for 14 days postop**
 - b. Maintain full supination of the forearm during exercises at this stage
3. Initiate elbow flexion passively and elbow extension actively within brace parameters
4. Initiate active ROM of the wrist while in elbow splint
5. Initiate forearm **supination passively** and pronation actively with elbow at 90 degrees
6. **NO Active elbow flexion exercises until 4 weeks post op**

Week 2

1. **Hinged brace to 40-100 degrees**
2. Initiate scar mobilization if needed
3. Shoulder ROM as needed avoiding excessive elbow extension
4. Gripping
5. Stationary Bike

Week 3

1. **Hinged brace to 30-110 degrees**
2. Begin active pronation and supination
3. Active elbow extension to 30 degrees (progress to 0 deg over next 3 weeks)
4. Begin shoulder (rotator Cuff) isometrics with brace on in planes of ER, IR, abd, and extension

Week 4

1. **Hinged brace to 20-115 degrees**
2. Initiate active elbow flexion with the splint
3. Begin elbow isometrics (submax for biceps with forearm at neutral)
4. Initiate putty if pain and edema are low

Week 5

1. **Hinged brace to 10-120 degrees**
2. Isometric tricep exercises



Week 6-8

1. **Hinged Brace to 0-130 degrees**
2. If PROM limitation present, use weighted stretch or consider static/dynamic splint
3. Initiate progressive resisted exercises for elbow flexion and supination
4. Encourage light functional hand use
5. D/C splint at **end of 6 week-therapist to D/C**

Week 8-12

1. Consider work conditioning/hardening for those with physically demanding jobs

Week 16

1. Return to work

***Developed and approved by Rolando Izquierdo, MD (updated May 2019)**