

KEVIN M. ROTH, MD Orthopedic Sports Medicine / Fracture Care www.KevinRothMD.com

DISTAL BICEPS TENDON REPAIR REHABILITATION PROTOCOL (TO BE GIVEN TO YOUR PHYSICAL THERAPIST)

	SPLINT/ BRACE	ROM/ THERAPEUTIC EXERCISE
PHASE I: (WEEK 0-3)	 Post-op splint at all times for 1 week Transition to hinged elbow brace locked at 90° after 1 week Brace is unlocked only for ROM exercise (settings 30°-130°) 	 Passive ROM exercises from 30°-130°, 5-6 times per day for 25 repetitions Achieve full forearm supination and pronation Shoulder, wrist, hand exercises encouraged Edema control/Scar management Apply ice after exercises
PHASE II: (WEEK 3-6)	 Hinged elbow brace at all times except exercise or hygiene Unlock brace according to ROM progression 	 Week 3: Active extension limit changed to 20°. Passive flexion may be increased to full flexion as tolerated. Active wrist flexion/extension. Active ROM of hand in neutral position. Supination/pronation through pain-free range. Week 4: Active extension limit changed to 10°. Continue same exercises. Putty may be used 3 times per day to improve grip strength. Gentle pulley while limiting elbow extension to 10°. Week 5: Full active extension is permitted. Supine scapula stabilization with no weight. Week 6: Passive elbow extension exercises may be started as necessary. Light strengthening exercises started with light tubing or 1 kg weights for elbow flexion, extension, forearm rotation, and wrist flexion/extension. Shoulder theraband strengthening exercises started. Supine scapula stabilization with 1 kg weight.
PHASE III: (WEEK 6-6 MONTHS)	• Discontinue at 6 weeks from surgery	 Gradual increase of strength program so that patient is using full weights at 3 months. Potentially up to 6 months before return to heavy work. Continue ROM as necessary.