

Distal Biceps Repair

This protocol is intended to be a general outline only. The physician reserves the right to either advance or delay this protocol as deemed necessary. If so, this should be done by direct communication with the therapist, or in writing on the therapy referral form given to the patient on the day of surgery.

0-2 Weeks Post-Op: General Guidelines

Patient will be in rigid cast at 90 degrees elbow flexion for two weeks.

Stage I: (Week 2-6):

- Rigid cast removed
- Patient fit with IROM elbow brace/sling, to be worn at all times except bathing. Brace locked at 90 degrees flexion for four weeks.
- No formal physical therapy during this time.

Stage II: (Week 6 – 12) Patient seen 2 x / week

Precautions: No full elbow extension stretch until 12 weeks post-op

No active biceps strengthening. IROM worn as per MD orders.

- Begin elbow ROM exercises: full gradual passive flexion allowed within patient tolerance
- Elbow ext PROM to progress as follows:
 - Week 6: PROM to -70 degrees
 - Week 7: PROM to -60 degrees
 - Week 8: PROM to -50 degrees
 - Week 9 PROM to -40 degrees,
- Full elbow extension achieved by approximately 12 weeks post-op.

Stage III: (Week 12-16) Patient seen 1x / week

Full elbow AROM and PROM should be achieved.

No active biceps resistance.

- Begin AROM bicep activity without resistance
- Light triceps strengthening without biceps involvement
- Open-chain rotator cuff strengthening can begin without biceps involvement

Final Stage: (Week 16 to 6 Months Post-Op): Patient seen as needed

Goals for Discharge: Full strength of biceps, shoulder musculature

- Gradual weight/theraband resistance training for biceps
- Closed-chain and co-contraction shoulder strengthening
- Gradual introduction of throwing activities and plyometrics as authorized per MD.