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**REHABILITATION PROTOCOL
DISTAL BICEPS REPAIR**

Phase I: 1 to 3 weeks after surgery

Clinical Goals:

1. Elbow ROM from 30° of extension to 120° of flexion
2. Maintain minimal swelling and soft tissue healing
3. Achieve full forearm supination/pronation

Testing:

- Bilateral elbow and forearm ROM

Exercises:

- Six times per day the patient should range his elbow from 30° of extension to 120° of flexion and perform active assistive flexion and active extension exercises.
 - Two sets of 10 are performed.
- The patient performs 2 sets of 10 forearm rotations.
- Ice after exercise, 3-5 times per day
- A sling should be worn only as needed for comfort with the patient maintaining full shoulder ROM for the first 2 weeks.

Phase II: 3 to 6 weeks after surgery

Clinical Goals:

1. Full elbow and forearm ROM by 6 weeks
2. Scar management

Testing:

- Bilateral elbow and forearm ROM
- Grip strengthening at 5-6 weeks

Exercises:

- 3 weeks:
 - The extension limit is gradually increased to 0°. Flexion remains at 120°, but patient may actively attempt full flexion 2 times per day.
 - Scar massage 3-4 times per day.
- 4 weeks:
 - Continue the same exercises
 - Putty may be used 3 times per day for 10 minutes to improve grip strength.
- 5 weeks:

- The extension limit is maintained to 0° and exercises are continued.
- 6 weeks:
 - Passive elbow extension exercises are initiated if needed.
 - Light strengthening exercises are initiated with light tubing or 2-3 pound weights for elbow flexion, extension, forearm rotation and wrist flexion and extension.
 - Ice is continued after strengthening exercises.

Clinical Follow-up:

- The patient usually is seen at 7 to 10 days post-op, 3 weeks and at 5-6 weeks, then only as needed

Phase III: 6 weeks to 6 months after surgery

Clinical Goals:

1. The strengthening program is gradually increased so that the patient is using full weights by 3 months. It may be as long as 6 months before a patient returns to heavy work.

Testing:

- Grip strengthening
- Elbow ROM

Exercises:

- Elbow ROM exercises are performed if ROM is not WNL
- Strengthening exercises to wrist, elbow, forearm, and possibly shoulder depending on sport and/or work requirements

Clinical Follow-up:

- The patient is seen only as needed, usually with doctor appointments, to monitor progress with strengthening program.