

for orthopedics Lisa Kaplin, DO

DISTAL BICEPS REPAIR REHAB PROTOCOL

Weeks 0-1:

- Initial post operative week will be in a splint elbow from 70-90 degrees, neutral rotation. Do not remove splint, do not get it wet. Splint will be removed at first post operative visit. Follow up in 1 week.
- No weight bearing.

Weeks 1-4:

- Continue no weight bearing on upper extremity.
- Elbow is now immobilized in a Bledsoe Brace at 45-50 degrees flexion with wrist free at first post op visit.
- 45 degrees to full passive elbow flexion
- May do shoulder ROM

Weeks 4-6:

• Brace adjusted to 30 degrees extension, may begin **active assisted** flexion to 90 degrees in brace, at the end of week 5 may go to 20 degrees of flexion to full elbow flexion.

Weeks 6-8:

- 10 degrees to full elbow flexion
 - May begin active ROM at this time
- Shoulder and elbow ROM, PROM-AAROM-AROM, advance as tolerated
- Begin muscle strengthening exercises for wrist and forearm

Week 8-10:

- Full ROM of elbow, discontinue brace if adequate motor control
- May begin combined/composite motions (i.e. extension with pronation)
- If at 8 weeks the patient has significant ROM deficits, therapist may consider more aggressive management, after consultation with referring surgeon, to regain ROM.

>12 weeks:

- May begin elbow strengthening
 - May initiate light upper extremity weight training
 - Non athletes initiate endurance program that simulates desired work activities/requirements.

