

Jared T. Lee, MD

Hip, Knee, Shoulder & Sports Medicine Surgery

The Steadman Clinic – Aspen & Basalt

Practice Manager: Elizabeth Fioretti, M.Ed., LAT, ATC

Phone: (970) 456-2798

**REHABILITATION PROTOCOL FOR DISTAL BICEPS TENDON REPAIR**

| Phase | Restrictions | Therapeutic Exercises |
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| Phase 1: Weeks 0-2 Goals: Protect the repair | -Posterior Arm Splint x2 weeks -Begin PT at 2 weeks -NO lifting more than 3lbs -NO active wrist supination or pronation | -Unrestricted hand, and finger range of motion -Shoulder range of motion, avoid external rotation -Neck range of motion and stretching -Sub-maximal pain free isometrics for triceps and shoulder musculature |
| Phase 2: Weeks 2-10 Goals: Protect the repair, range of motion, retard muscle atrophy, minimize pain | -Hinged elbow brace to be always worn except hygiene, PT, and dressing -To begin, brace set from 60 degrees to full flexion -No lifting more than 3lbs until 6 weeks s/p | -Passive wrist supination and pronation, NO active supination or pronation -Passive elbow range of motion 60 degrees to full flexion until week 4 -After week 4, follow this ROM progression and set the brace to: <ul style="list-style-type: none"> • Week 4: 50 degrees to full elbow flexion • Week 5: 40 degrees to full elbow flexion • Week 6: 30 degrees to full elbow flexion • Week 7: 20 degrees to full elbow flexion • Week 8: 10 degrees to full elbow flexion • Weeks 9-10: Full ROM of elbow in brace -Range of motion exercises (to above brace specifications) <ul style="list-style-type: none"> • Weeks 2-4: Passive ROM elbow flexion and wrist supination • Weeks 4-6: Initiate active-assisted ROM elbow flexion • Continue assisted extension and progress to passive extension ROM • Week 6-8: Active ROM elbow flexion and extension • Week 8-10: Continue program as above -May begin combined/composite motions (i.e. extension with pronation) |

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| | | <p>Strengthening Program:</p> <ul style="list-style-type: none"> -Weeks 2-4: Sub-maximal pain free biceps isometrics with forearm in neutral -Week 4-6: Single plane active ROM elbow flexion, extension, supination, and pronation -Week 6-8: Progressive resisted exercise program is initiated for elbow flexion, extension, supination, and pronation |
| <p>Phase 3: Weeks 10-14</p> <p>Goals: Full range of motion, minimal pain, begin muscular activation and strengthening, protect the repair</p> | <ul style="list-style-type: none"> -Discontinue orthosis -Full range of motion -No lifting objects greater than 10lbs | <ul style="list-style-type: none"> -Full passive, active, and active assisted range of motion without resistance -Progress scapular strengthening exercises -Initiate PNF patterns at week 7 -Begin UBE biking with resistance -Progress strengthening at week 10: eccentric elbow flexion/extension, isotonic forearm and wrist program, manual resistance diagonal patterns, plyometric exercise program (chest pas, side throw close to body) -Neck stretching and strengthening -Core stabilization -Week 12: Increase strengthening exercises, program plyometrics to 2 hand drills away from the body, side to side throws, soccer throws, side throws, increase plyometrics as tolerated |
| <p>Phase 4: Weeks 14-20</p> <p>Goals: Progression of functional activities, advanced sport, and recreational activity per surgeon</p> | <ul style="list-style-type: none"> -No heavy weightlifting until 16 weeks <p>Criteria for Discharge:</p> <ul style="list-style-type: none"> -<10% strength deficit -Limb similarity index of 90% or greater -45/50 on biomechanical functional tests (if performed) -NO pain or complaints of instability | <ul style="list-style-type: none"> -Progress strengthening program -Emphasis on elbow and wrist power and flexibility exercises -Maintain full elbow range of motion -Initiate one hand plyometric throwing and one hand wall dribble -Week 16: Begin gradual return to sports with interval throwing program as indicated |