SCHOOL OF MEDICINE
DEPARTMENT OF ORTHOPAEDICS & REHABILITATION

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Post-operative Rehabilitation Protocol

Distal Biceps Repair

To start 0-2 weeks post op
1-2x wk for 12+ weeks

___ At surgeon discretion: Brace locked 0-90 degrees and advance 20 degrees per week

Phase I: Protective Phase (day 1 to week 6)

Weeks 0-2

- Shoulder sling x 2 weeks
- Shoulder, elbow, and hand ROM
- Ok for active elbow flexion against gravity
    - **NO** greater than gravity resistance active biceps flexion/supination
- Hand gripping exercises
- Passive and gentle active assisted ROM exercises
    - Codmans exercises
    - Flexion and scaption to 90^0
    - ER to 30^0 x 4 weeks
    - IR to 45^0
    - Scapulothoracic AROM in all planes
- Submaximal isometrics for shoulder musculature
- Cryotherapy PRN

Weeks 6:

- Continue exercises as above
- Continue to gradually improve ROM
    - Flexion and Scaption
    - Full ROM should be achieved at 8-10 weeks
- Continue submaximal shoulder isometrics
- Can begin AROM supination (no resistance/elbow flexed)

Phase II: Moderate Protection Phase (Weeks 7-12)

Week 7-9

- Continue to progress AROM/PROM (Full by week 10)
- Begin isotonic rotator cuff IR/ER strengthening with bands/weights
- Progressions
    - Submaximal to maximal

    - Slow speeds to fast speeds
    - Known patterns to random patterns
    - Eyes open to eyes closed
- Exercises
    - Scapular plane elevation
    - Side lying ER
    - Standing rotator cuff series
    - Prone horizontal abduction/extension
- Manual resistance to shoulder
- **NO** biceps loading until week 12

Phase III: Minimum Protection Phase (Weeks 12)

- Goals:
    - Full active elbow and shoulder of motion
    - Ok to be resisted elbow flexion strengthening
    - Strengthening program at the discretion of the therapist
    - Full return to strength and unrestricted function typically by 4-6 months

Assessment for full return to activity by treating surgeon