

Distal Biceps Repair Rehabilitation Protocol

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Phase I: 1-3 weeks

Clinical Goals

- ◆ Elbow ROM from 30° of extension to 120° of flexion
- ◆ Maintain minimal swelling and soft tissue healing
- ◆ 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.

Phase II: 3-6 Weeks

Clinical Goals

- ◆ Full elbow and forearm ROM by 6 weeks
- ◆ 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

Clinical Goals

◆ 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.