

Dr. Cory D. Smith | Orthopedic Surgery and Sports Medicine

Shoulder Reconstruction & Arthroplasty

Hip, Shoulder, Knee, and Elbow Arthroscopy

Physical Therapy Protocol: DISTAL BICEPS TENDON REPAIR

Recommendation: PT/ OT 2-3 visits per week for 10-12 weeks

Initial Postoperative Immobilization

- Posterior splint, elbow immobilization at 90° for 10-14 days with forearm in neutral (Unless otherwise indicated by surgeon)

Hinged Elbow Brace

- Elbow placed in a hinged ROM brace at 10-14 days postoperative.
- Brace set unlocked at 60° to full flexion.
- Gradually increase elbow ROM in brace (see below)

Hinged Brace Range of Motion Progression (ROM progression may be adjusted based on surgeon's assessment of the surgical repair.)

Week 3 - 60° to full elbow flexion

Week 4 - 45° to full elbow flexion

Week 5 - 30° to full elbow flexion

Week 6 - 20° to full elbow flexion

Week 7 - 10° to full elbow flexion

Week 8 - Full ROM of elbow; discontinue brace if adequate motor control

Range of Motion Exercises (to above brace specifications)

Weeks 3 - 8

- Passive ROM for elbow flexion and supination (with elbow at 90°)
- Assisted ROM for elbow extension and pronation (with elbow at 90°)
- Shoulder ROM as needed based on evaluation, avoiding excessive extension.

Strengthening Program

Week 2 - Sub-maximal pain-free isometrics for triceps and shoulder musculature.

Week 3 - Sub-maximal pain-free biceps isometrics with forearm in neutral.

Week 4 - Single plane active ROM elbow flexion, extension, supination, and pronation.

Week 8 - Progressive resisted exercise program initiated for elbow flexion, extension, supination, and pronation.