Distal Biceps Repair Physical Therapy Protocol

Name_________________________________________ Date__________________

Diagnosis s/p RIGHT/LEFT Distal Biceps Tendon Repair

Date of Surgery______________________________

Frequency:  1     2     3     4      times/week    Duration:  1     2     3     4     5     6 Weeks

_____ Weeks 1-4:
  ● Elbow is immobilized in the Bledsoe Brace at 75 degrees flexion with wrist free.
  ● Dressing changed at 7-10 days after surgery to hinged elbow brace
    ○ In brace can perform passive flexion to 100 degrees and progress to passive full flexion by 4 weeks
    ○ No active flexion
    ○ Ok to actively extend to 45 degrees
  ● Neck strap / sling to be used for the first 2-5 days. Then, may begin AROM of shoulder

_____ Weeks 4-6
  ● Brace adjusted to 30 degrees extension, progressing to 0 degrees by 6 weeks,
  ● May begin active assisted flexion to full in brace

_____ Weeks 6-8:
  ● Discontinue the use of the Bledsoe Brace
  ● Shoulder and elbow ROM, PROM-AAROM-AROM, advance as tolerated
  ● Begin muscle strengthening exercises for wrist and forearm

_____ Months 2-3:
  ● May begin elbow strengthening

Comments:

_____Functional Capacity Evaluation ______Work Hardening/Work Conditioning ______ Teach HEP

Modalities
  ___Electric Stimulation ___Ultrasound ___Iontophoresis ___Phonophoresis ___TENS ___Heat before
  ___Ice after ___Trigger points massage ___Therapist’s discretion

Signature_________________________________________ Date__________________