

Distal Biceps Repair Protocol

Phase 1

➤ Sling w/ immobilizing splint:
 Full time, Day and Night
 Weeks 0-2
 Full time, Day and Night
 Weeks 2-6

- ➤ Weeks 0-2 (Sling and splint)
 - Perform scapular stability (shrugs, retraction) exercises as shown
 - Minimal movement of the fingers/hand is encouraged soon after surgery.
 Minimize wrist flex/extension and forearm twisting as much as possible
 - NO resistance/ holding objects with the arm/hand greater than 1lb
- ➤ Weeks 2-6 (Hinged arm brace)
 - o The brace and instructions for use will be provided at your follow up visit
 - Begin with extension block at 50°, adjust by 10° each week the elbow will become progressively straighter with each adjustment
 - Begin active ROM of the wrist, hand, and shoulder. Typing OK as tolerated if the forearm/elbow is supported. Do not use excessive force or grip with hand
 - Begin PASSIVE elbow flexion/extension within brace several times daily. Minimal assisted extension (with <u>posterior</u> upper arm activation) is acceptable
 - Do Not actively engage the biceps via elbow flexion or forearm supination
 - OK to remove brace while showering if the arm is in a sling

Phase 2

- ➤ Weeks 6-12 (Cease brace use after visit)
 - o Continue active hand and shoulder motion
 - Begin (limited) active ROM of elbow and forearm. Perform daily movement exercises as instructed 2-3x per day
 - No resistance/ holding objects with the arm/hand greater than 1-5 lb
 - No excessive repetitive movements involving the biceps

Phase 3

- ➤ Weeks 12+
 - Begin strengthening program as directed (usually 50-75% effort, limit 3x/wk max),
 such as low level therabands, rows, etc. Transition to home exercise program
 - Goals: Increase activity stepwise as tolerated and directed
 - We advise against intense sports/activity with explosive movements, or risk for forceful twisting of the arm until 6 months post-op

