

Surgical Rehabilitation Protocol Distal Biceps Repair

The following information is to help make your recovery from surgery as smooth and rapid as possible. If you have any questions or concerns, contact Dr. Mayo's team at the number above. You will have appointments with Dr. Mayo at 2 weeks postop.

Phase 1: Recovery from Surgery – 0-2 Weeks After Surgery

Goals	<ul style="list-style-type: none"> • Protect the biceps repair and create an environment for optimal healing • Educate patient on rehab progression and precautions • Control pain, swelling and inflammation • Hand, wrist, shoulder range of motion
Precautions	<ul style="list-style-type: none"> • No Isolated Biceps strengthening for 6 weeks • Sling: Wear sling for comfort as needed. • Splint: Splint at all times for 2 weeks at 90 degrees of flexion if placed into one • Weight Bearing: No lifting anything with the operative arm • Range of Motion: Move fingers as well as wrist side to side as tolerated in the splint, gentle shoulder motion. Gentle elbow motion if no splint. • Wound Care: Keep splint on and clean and dry • Call Dr. Mayo if: Worsening pain, numbness, tingling, finger color changes.
Therapeutic Exercises	<ul style="list-style-type: none"> • Strengthening: None • Conditioning: Stationary bike, walking • Range of motion: OK for gentle PROM elbow, shoulder PROM and AROM wrist and hand motion • Modalities: None • Manual Therapy: None
Home Instructions	<ul style="list-style-type: none"> • Wound Care: Splint in place until 2 week postop visit • Bathing: Showering permitted keeping the splint on, clean, and dry • Driving: You should not drive while your arm is in a splint as your ability to drive safely is reduced. • Sleeping: Sleep in reclining chair or bed as comfortable • Ice and Elevation: Ice for 20 minutes every hour for the first week. • Home Exercise: As instructed by physical therapy daily
Criteria to Progress	<ul style="list-style-type: none"> <input type="checkbox"/> 2 weeks postoperative <input type="checkbox"/> Minimal swelling and pain



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Phase 2: Early Motion– 2-6 Weeks After Surgery

Goals	<ul style="list-style-type: none"> Continued protection of healing tissue with slow progression of motion Improve neuromuscular control of shoulder complex Gradually progress PROM without overstressing healing tissue Minimize pain and inflammation (may ice after exercise)
Precautions	<ul style="list-style-type: none"> Sling: No sling Brace: Brace locked at 90 degrees, remove for shower and exercises only Weight Bearing: No lifting or pushing Range of Motion: <ul style="list-style-type: none"> <u>Weeks 2-3:</u> <ul style="list-style-type: none"> PROM into flexion and supination IN BRACE AAROM into extension and pronation IN BRACE IMPORTANT pronation/supination always performed at 90 degrees of flexion Week 2: 60 degrees-full flexion Week 3: 40 degrees -full flexion <u>Weeks 4-6:</u> <ul style="list-style-type: none"> Add AAROM into flexion (not supination) IN BRACE Add grip exercises IMPORTANT pronation/supination always performed at 90 degrees of flexion Week 4: 30 degrees-full flexion Week 5: 20 degrees- full flexion Week 6: brace unlocked, full motion allowed Call Dr. Mayo if: Any wound concerns
Therapeutic Exercises	<ul style="list-style-type: none"> Strengthening: No biceps strengthening. OK for AAROM elbow no weight. Continue Hand, Wrist, Shoulder ROM, Scapular strengthening, triceps isometrics (week 5) Range of motion: As above Conditioning: Stationary bike, walking Modalities: Per therapist Manual Therapy: Scapular mobilization
Home Instructions	<ul style="list-style-type: none"> Driving: No driving until 6 weeks postop as no use of right arm for motion Sleeping: In brace locked at 90 degrees Ice and Elevation: Ice as needed for pain and swelling after activity Home Exercises: Daily, As instructed by physical therapy
Criteria to Progress	<input type="checkbox"/> Full passive range of motion



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Phase 3: Active Motion Phase – 6-12 Weeks After Surgery

Goals	<ul style="list-style-type: none"> • Full AROM with normalized mechanics in all planes • Protect surgical repair • Return to ADL's <1 lb
Precautions	<ul style="list-style-type: none"> • Brace: Weeks 6-8: Open brace 20-120. Discontinue brace weeks 8-12 • Weight Bearing: No lifting or pushing objects >1 lb • Call Dr. Mayo if: Failure to progress motion
Therapeutic Exercises	<ul style="list-style-type: none"> • Strengthening: Weeks 8-12: Begin biceps isometrics, active flexion against gravity. Rotator cuff strengthening/deltoid and upper body ergometry (Week 10) • Conditioning: Stationary bike, walking • Modalities: Per therapist
Home Instructions	<ul style="list-style-type: none"> • Home exercises: Workouts in gym, focus per physical therapist
Criteria to Progress	<input type="checkbox"/> Full painless AROM

Phase 4: Strengthening Phase – 12-24 Weeks After Surgery

Goals	<ul style="list-style-type: none"> • Normalize strength and function • Return to all desired activities
Precautions	<ul style="list-style-type: none"> • Brace: None • Weight Bearing: Progress as tolerated • Range of Motion: No restrictions • Call Dr. Mayo if: Failure to progress or regression in motion or strength
Therapeutic Exercises	<ul style="list-style-type: none"> • Strengthening: Weeks 12-16: Elbow flexion resistive strengthening Weeks 16-24: Progress as tolerated, plyometric and sport specific exercises • Conditioning: Stationary bike, walking, running • Modalities: Per therapist
Home Instructions	<ul style="list-style-type: none"> • Home exercises: Workouts in gym, focus per physical therapist
Criteria to Return to Work/Sport	<input type="checkbox"/> Clearance from physician <input type="checkbox"/> Pain free at rest and minimal pain with the work or sport specific activity simulation <input type="checkbox"/> Sufficient ROM and strength with normalized mechanics for the needed activity

