

DISTAL BICEPS TENDON REPAIR PROTOCOL

Name: _____

Diagnosis: _____

Date of Surgery: _____

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

____ Weeks 0-2:

- Passive, AAROM, and active ROM of the elbow as tolerated
- Unrestricted ROM in flexion/extension and pronation/supination
- Strict non-weight bearing (no resistance)
- Biceps, rotator cuff, deltoid isometrics as needed
- Wrist/shoulder ROM exercises unrestricted

____ Weeks 3-6:

- Continue ROM exercises unrestricted
- May progress to very light resistance only for activities of daily living (i.e. lifting cup of coffee)
- Otherwise no resistance exercises

____ Weeks 7-12:

- Continue exercises as above
- May begin light (5 lbs or less) resistance training

____ Weeks 13 and Beyond+:

- Begin gradual elbow flexion/supination strengthening program as tolerated without restrictions

Signature _____

Date: _____