JT
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ORTHOPAEDIC SURGERY | SPORTS MEDICINE

Rehabilitation Protocol:
Distal Biceps Tendon Repair

Phase I:
0-2 weeks

- Brace: splint at 90 degrees & neutral rotation full time
- ROM: no elbow ROM; okay for gentle shoulder, wrist, digit ROM
- Weightbearing: Non-weightbearing
- Strengthening: None

Phase II:
2-6 weeks

- Brace: Hinged elbow brace. Wear at all times including for exercise. Okay to remove for hygiene
- ROM: Active extension to 50 deg in brace (depending on repair tension) with goal to progress to 0 deg by week 6
> NO ACTIVE ELBOW FLEXION
> Continue wrist and shoulder ROM
- Weightbearing: Non-weightbearing
- Strengthening: none
- Exercises: gentle joint mobilization

Phase III:
6-9 weeks

- Brace: Wean out of hinged elbow brace once ROM full
- ROM: full ROM, active extension to 0 degrees
> Continue wrist and shoulder ROM
- Weightbearing: Non-weightbearing
- Strengthening: none of elbow; begin rotator cuff/deltoid isometrics
- Exercises: active extension in brace

Phase IV:
9-12 weeks

- Brace: none
- ROM: advance ROM to tolerance
- Weightbearing: limited
- Strengthening: begin biceps isometrics; then begin active flexion and extension against gravity; resistive strengthening for deltoid/rotator cuff
- Exercises: maintain flexibility/ROM

Phase V:
12 weeks-6 months

- Brace: none
- ROM: return to full and pain free ROM
- Weightbearing: gradually increase as tolerated
- Strengthening: begin gentle flexion strengthening, advance gradually as tolerated

Phase VI:
6+ months

- Brace: none
- ROM: return to full and pain free ROM
- Weightbearing: as tolerated
- Activity: return to full activity
Functional activities and sport-specific demands
- Return to sport after clearance by MD

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