DISTAL BICEPS REPAIR

POST OPERATIVE PROTOCOL

	Time Frame	Guidelines
PHASE I	0 to 10 days	SPLINT: Immobilization in 90° splint x 10 days SLING: 6 weeks EXERCISE PROGRESSION • Cervical ROM, basic deep neck flexor activation (chin tucks) • Shoulder pinches
PHASE II	10 days to 3 wks	EXERCISE PROGRESSION Discontinue sling at 6 weeks Brace 90° to full flexion; remove for therapy Begin passive elbow flexion – full range; Passive and active extension to 90° Begin active shoulder protraction/retraction
	3 to 6 wks	 EXERCISE PROGRESSION Maintain program as outlined in weeks 1 to 3 Initiate gradual ROM progression with active assisted/passive extension to 0° Initiate AA/passive pronation/supination Begin prone scapular strengthening series (unweighted)
PHASE III	6 to 8 wks	 EXERCISE PROGRESSION Discontinue brace at 6 weeks Begin active range of motion of the elbow and wrist in all planes Light resistance rotator cuff and scapular strengthening program; avoid load specific to elbow flexion and supination CKC progression beginning with quadruped Weighted prone scapular stabilization exercises
PHASE IV	8 to 10 wks	EXERCISE PROGRESSION Continue with end range stretching Advance RC and scapular strengthening program Advance CKC program with push-up progression Begin resisted biceps strengthening Begin wrist and forearm strengthening all planes
	Week 12	 EXERCISE PROGRESION Begin global upper extremity gym strengthening program with gradual weight increase Advance intensity of forearm and hand strengthening, including wrist extension Initiate Plyometric Drills ◇ Plyoball wall drills ◇ Double arm rebounder drills progressing to single arm
	4-6 months	 RETURN TO ACTIVITY Follow-up appointment with physician Initiate return to sport program per physician approval Full return to play between 4-6 months post-op