

Christopher M. Brusalis, MD
Phone: (516)-743-3036
Fax: (516)-743-3576
Email: DrBrusalisOffice@hss.edu
Website: www.BrusalisMD.com



Physical Therapy following Distal Biceps Tendon Repair

The following is a basic framework from which to work during rehabilitation following a distal biceps tendon repair. We encourage patients and therapists to communicate with Dr. Brusalis and his staff with any questions.

- Post-op - 2 weeks:** Arm immobilized in splint in 90 deg with the arm in neutral
- 2 weeks post-op:** Transition to a hinged elbow brace locked at 90 deg
The patient may remove the brace to shower, eat, and sleep. The brace should be worn at all other times.
- 2-6 weeks post-op:** Extend the hinged elbow brace progressively for 30 minutes 4 times/day
In brace: passive elbow flexion (supine, gravity assisted) and passive supination (with elbow flexed to 90)
In brace: progress active elbow extension (45/30/15/0) and pronation (20/40/60/75) in weeks 3/4/5/6, respectively
Wrist and shoulder range-of-motion exercises
Cardio
- 6 weeks post-op:** Discontinue hinged elbow brace
Begin progression to full elbow range of motion
Maintain wrist and shoulder range of motion
Begin biceps isometrics strengthening exercises: No lifting >1 pound
Begin rotator cuff and deltoid isometric strengthening
- 8-12 weeks post-op:** Initially active elbow flexion only (no weight) and can progress over 4 weeks to 5 lbs weight restriction
- 12 weeks post-op+:** Gradual biceps strengthening (+5 lbs per week)
Patient may gradually resume higher-level activities, including sports and weightlifting