Todd C. Battaglia, MD, MS Syracuse Orthopedic Specialists, PC

Patient name:	 Date:
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PHYSICAL THERAPY PRESCRIPTION AND PROTOCOL: <u>Distal Biceps Tendon Repair</u>

General

- First follow-up with MD at approximately 10-14 days after surgery
- Stitches removed if well-healed
- Placed in hinged elbow brace limiting elbow extension to 80-90 degrees
- Add 10 deg extension to resting position per week

Phase I – at approximately 2-6 weeks post-op

- Scar management
- Gentle PASSIVE flexion without limitation no AROM or resistance
- Gentle PASSIVE supination and pronation as tolerated no AROM or resistance
- Gravity-assisted active extension to resting position (75-90 flexion), adding 10-15 degrees per week (adjust brace accordingly) – GOAL: full extension by week 8.
- SLOW progression into extension!!!

Phase II - 6-8 weeks post-op

- Begin gentle AROM, AAROM, and PROM as tolerated for elbow flexion, supination, and pronation
- Gentle PASSIVE ROM into extension
- Expect residual elbow extension limit to be approximately 15-30 degrees; may now slowly advance to full extension over next 2-4 weeks
- Begin gentle strengthening in all planes ISOMETRIC ONLY
- May discontinue splint for protection
- May continue to use brace at night to assist with gaining extension end motion (static extension at night)

Phase III - begins at 8-10 weeks post-op

- Advance full active and passive range of motion as tolerated
- Begin gentle ISOTONIC strengthening in all directions
- Progress slowly
- Full ROM, strength and endurance typically expected at about 4 months

Frequency: 2-3x per week	Duration: 16-20 weeks	
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	Todd C. Battaglia, MD, MS	