



Distal Biceps Tendon Repair Rehabilitation Protocol

Stephanie A. Boden, MD

Diagnosis: Distal biceps tendon rupture

Brace: Splint x 7-14 days, then hinged elbow brace as below

- Week 2: brace locked from 60 degrees to full flexion
- Week 3: brace locked from 40 degrees to full flexion
- Week 4: brace locked from 30 degrees to full flexion
- Week 5: brace locked from 20 degrees to full flexion
- Week 6: brace unlocked, full motion allowed

Precautions: No active elbow flexion x 6 weeks

Phase I: Week 0-2

- Sling and splint at all times
- Gentle wrist and shoulder ROM

Phase II: Weeks 2-6

- Hinged elbow brace with extension block at 60° initially, then decrease by 10° weekly as above
- Brace should be worn at all times including exercise. Can remove for hygiene only.
- Continue wrist and shoulder ROM
- Begin Active Assist ROM
 - Initially Limit Extension to 60°
 - **NO active elbow flexion**
 - Gentle joint mobilizations
 - Advance to full extension by 6 weeks

Phase III: Weeks 6-9

- May unlock elbow brace. Continue to wear at all times, except for hygiene.
- Active extension to 0° in brace.
- Continue to maintain wrist and shoulder ROM.
- Begin rotator cuff/deltoid isometrics, progress active extension in brace.

Phase IV: Weeks 9-12

- Gently advance ROM to tolerance.
- Discontinue elbow brace.
- Begin active flexion and extension against gravity.
- Advance strengthening in phase III to resistive.
- Maintain flexibility/ ROM.

Phase V: Weeks 12- 6 months

- Gradual return to full and painfree ROM.



- Begin gentle flexion strengthening
- Advance activities in phase IV.

Phase VI: 6 months and beyond

- Gradual return to all activities as tolerated.