



DISTAL BICEPS TENDON REPAIR

Overview

This is a protocol that provides you with general information and guidelines for the initial stage and progression of rehabilitation according to the listed timeframes. Specific changes may be made by the care team as appropriate given each patient's operative findings.

Questions

If you have any concerns or questions after your surgery, during business hours call **763-302-2231**. You may need to leave a message.

After hours 763-520-7870

Address

Maple Grove

9825 Hospital Drive, Suite 104

Maple Grove, MN 55369

Minnetonka

15450 Highway 7, Suite 100

Minnetonka, MN 55345

Robbinsdale

3366 Oakdale Ave. N Suite 103

Robbinsdale, MN 55422

Distal Biceps Tendon Rupture



POST OPERATIVE INSTRUCTIONS

DIET

- Begin with clear liquids and light foot (jello, soup, etc.)
- Progress to your normal diet as tolerated

WOUND CARE

- Leave operative dressing/splint in place after surgery. Loosen ACE wrap if pain/swelling in arm/hand becomes too severe.
- **DO NOT** remove surgical dressings/splint after your surgery. Swelling and bleeding after surgery is normal. If ACE wrap becomes saturated with blood, please call the clinic, 763-520-7870.
- Keep your dressing/splint clean and dry until you're seen back in clinic.
- You may shower as needed after surgery, but cover with plastic bag to keep splint dry. No immersion in water, i.e. bath. If splint becomes wet, call our office for appointment, 763-520-7870.



More information

DVT prophylaxis

- DVT risk factors: smoking, obesity, pregnancy, oral contraceptive use, prolonged sitting and surgery
- To reduce this risk we recommend taking 325 mg Aspirin daily, if 18 yrs or older.
- Self care measures include: stop smoking, avoid sitting for long periods, and WALK.
- Signs of a blood clot include: Shortness of breath, chest pain/pressure, leg pain, swelling, warmth and redness

Pain medications

- We do NOT refill medications after 2:00 pm Fridays, or over the weekends. Call in advance.

Driving

- Do not drive or operate machinery while taking narcotic pain medications. No driving until instructed by your surgeon.

MEDICATIONS

- Local pain medications were used at the time of surgery. This will wear off in 8-12 hours. If nerve block was administered, this may give you longer relief.
- Most patients will require narcotic pain medications for short period of time following surgery. Take per MD request.
- If pain meds are causing nausea and vomiting, contact the office (763-520-7870)
- Do not operate or drive machinery while taking narcotic meds.
- Ibuprofen can be taken between narcotic medication doses to help alleviate pain.

ACTIVITY

- Elevate the operative arm above your chest whenever possible to reduce swelling.
- Do not engage in activities that increase pain/swelling in your arm such as prolonged standing, walking, sitting without leg elevated.
- No driving until instructed by surgeon

BRACE

- You will be fit with a hinged elbow brace before surgery. Please bring this to you first post op appointment to be adjusted.

ICE THERAPY

- Begin immediately after surgery
- Ice machines can be used continuously, or ice packs every 2 hours for 20 minutes daily until post-op appointment.

POST OP APPOINTMENTS

First post op visit (7-10 days)

Your first post-op appointment is about 7-10 days from surgery. You will see the PA to review your surgery and have the sutures removed. Your surgical splint will be removed and your hinged elbow brace will be adjusted and placed at this visit.

*****subsequent post op visits will be at 2 week intervals***

What to expect after surgery

- Swelling is common after surgery. Ice and elevation are recommended. Muscle cramps may occur.
- Pain medications will be needed for the first 3-4 days. Switch to ibuprofen or acetaminophen (if not contraindicated) as soon as possible.
- Physical therapy is generally needed after surgery (depending on your intra-operative findings, we may prescribe physical therapy after your surgery).
- Light exercise (biking, treadmill) allowed as tolerated. Start slow and slowly increase intensity as able.

REHAB PROTOCOLS

	WEIGHT BEARING	BRACE	ROM	EXERCISES
PHASE I (0-2 WEEKS)	Nonweightbearing (NWB)	Surgical splint	None	None
PHASE II (2-4 WEEKS)	NWB	Hinged elbow brace with all activities and sleeping Off for hygiene only	Full flexion to 30 degrees	Hand, wrist, shoulder exercises allowed with hinged elbow brace on.
PHASE III (4-6 WEEKS)	NWB	Hinged elbow brace with all activities and sleeping Off for hygiene only	Full flexion to 60 degrees	Hand, wrist exercises allowed with hinged elbow brace on.
PHASE IV (6-12 WEEKS)	Advance 5 lbs per week as tolerated starting at 6 weeks.	Hinged elbow brace with all activities and sleeping Off for hygiene only	Full flexion and extension	6 week: Begin with PT. 12+ weeks: Return to full activities after cleared by MD.

ICE MACHINES



GAME READY



CRYOCUFF



POLAR ICE

Patients are not required to purchase any of these devices. They are only offered as a supplemental modality to help with pain control. Patients may use ice packs from home or any other cold therapy device available to them. Dr. Arthur does not have any affiliation to these medical equipment companies.

BENEFITS

- Portable ice machines
- Reduces pain and swelling
- Gives constant cold therapy

PRICE

- Call for prices

CONTACT

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