



Distal Biceps Tendon Repair Post-operative Protocol

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The Surgery

Your distal biceps tendon repair surgery is an outpatient procedure that will be done in a formal operating room. After checking into our registration desk, you will be taken to a preoperative holding area where you will change into a gown, meet with your surgeon, your anesthesia staff, nurses, and other members of our team to evaluate you and prepare you for the procedure. You will then be taken to the operating room. The surgery is typically performed under sedation and a local anesthesia block placed around the collarbone to give about 12 hours of post-op pain control. It is very important that you have nothing to eat or drink after midnight the evening prior to surgery if you are getting general anesthesia or sedation. You will also need to have someone else drive you home. If you are unable to meet these two needs, your surgery may have to be cancelled and rescheduled for another date.

In the operating room, the OR staff will require about 15 minutes to place you under anesthesia then prep and drape your arm. After this, the surgery itself will take about 1.5 hours. During the operation, I will make an anterior elbow incision to mobilize the torn biceps tendon and repair it to the bone using a drill hole, a suture button, and a screw. The wound is then closed with absorbable stitches and sealed with an acrylic sealer. I then place a long arm splint to protect the repair, then you will be awoken and taken to a recovery room. Once you are comfortable and can drink clear fluids, you may go home. You will be given a prescription for pain medication to take as needed.

The most common complications after this surgery include nerve compressions that could cause numbness or loss of finger or wrist extension for some months after the surgery, abnormal bone formation, stiffness, and failure of the repair.

Post-operative Protocol

The first two weeks

During this time, you should stay in the sling as much as possible. You should only remove it to change clothes or shower. After one week, you can come out of the sling once or twice a day to do some gentle pendulum exercises for the shoulder.

You must keep the splint clean and dry, and you cannot remove it. Use a plastic bag or formal cast cover to protect the splint when showering.

I will see you in my office two weeks after the surgery. The dressing will be removed, and I will get elbow x-rays. You can then shower and allow the wound to get wet, but do not scrub the incision. Pat it dry with a towel when you are done.

You will be placed in hinged elbow brace to protect the repair while allowing some range of motion.

Do not do any lifting heavier than a cup of coffee with the surgical hand.

The 3rd through 6th weeks

During this time, your chief goal is to slowly regain motion while preventing the repaired tendon from pulling apart. You will start with therapy, emphasizing elbow, wrist and hand motion. The therapist will open up the splint by 10 degrees a week and also guide home exercises.

You should call my office if you have progressively worsening pain that is not relieved by icing, rest, and non-narcotic pain medication. You should also call if you have a persistent fever of greater than 101°F or notice any drainage from the incisions.

I will see you in the office again at 6 weeks after surgery. I will evaluate tendon function and usually start full active motion and some very gentle strengthening at this stage.

The 6th through 12th weeks and beyond

At this point, I expect to see slow but steady improvement in elbow flexibility and function. You should be having much less pain at this time also. The therapist will slowly progress with strengthening twice a week, but you should not lift any significant weight yet. You will also have to do a lot of home exercises.

I will see you in the office at 10-12 weeks after surgery. At this time, I will check your function and get another x-ray to make sure no abnormal bone has formed. You can usually progress with strengthening at home.

At 4 months post-op, patients can start light weightlifting in the gym with return to sports including golf at 5-6 months after surgery.