

Triceps Tendon Repair Rehabilitation Protocol

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Please fax initial evaluation and progress notes to 815-381-7498.

0-14 Days Postoperative

- Do NOT remove the surgical bandage.
- Restrictions: No heavy lifting or pulling greater than 0 lbs. No driving.
- Perform range of motion of the hand and shoulder to prevent stiffness and reduce swelling.

10-14 Days Postoperative

- The sutures are removed at Dr. Holtkamp's office.
- While at Dr. Holtkamp's office the patient will be fitted with a hinged elbow brace with flexion block at 30 degrees.
- The brace is to be worn at all times. The brace may be removed for hygiene purposes and to perform the exercise program.
- Instruct the patient to begin passive elbow extension (gravity-assisted) exercises.
- Instruct the patient to begin active elbow flexion to 30 degrees.
- The therapist will educate the patient on anti-edema management. This includes, but not limited to, self-retrograde massage, cold therapy, and extremity elevation. The anti-edema management will continue for several weeks.

3 Weeks Postoperative

• The therapist will begin scar tissue management to decrease sensitivity and density, which could include ultrasound and/or silicone gel pads per the therapist's discretion. The scar tissue management will continue for several weeks.

4 Weeks Postoperative

- The hinged elbow brace flexion block is increased to 50 degrees.
- Instruct the patient to begin putty exercises.

5 Weeks Postoperative

• The hinged elbow brace flexion block is increased to 70 degrees.

6 Weeks Postoperative

• The hinged elbow brace flexion block is increased to 90 degrees.

7 Weeks Postoperative

The hinged elbow brace flexion block is increased to 110 degrees.

8 Weeks Postoperative

- The hinged elbow brace is discontinued.
- Instruct the patient to begin active elbow extension exercises.

10 Weeks Postoperative

 Instruct the patient to begin a strengthening exercise program starting with mid-range isometrics, then isotonic concentric contractions, and finally, eccentric muscle contractions.

12 Weeks Postoperative

- Instruct the patient to continue their home exercise program for range of motion and strengthening.
- If the patient has not achieved functional range of motion and strength, then continue with occupational therapy for an additional 2-4 weeks.

16 Weeks Postoperative

- The patient may resume normal activities of daily living as tolerated.
- Work status: The patient is allowed to return to full duty status if the job requirements have been met. If not met, then a functional capacity evaluation and work hardening program may be recommended.
- The healing process can take up to a full year. Therefore, it is advised to continue with the home exercise program until goals have been met.