

Dr. Allen Triceps Repair Rehabilitation Protocol

Phase I: Protection (Weeks 0-6)

Weeks 0-2

- First post-op visit at ~2 weeks
- Leave splint in place until first visit (bag on arm to shower)
- Arm will be splinted at 90° for the first 2 weeks
- Scheduled NSAIDs & Tylenol with Opioids for break through pain
- Finger, hand, & wrist motion; scapular retractions & isometrics

Weeks 2-6

- Splint is removed at first visit, will be transitioned to a hinged elbow brace
- Ok to shower after splint is removed
 - Don't soak wound, pat dry and cover with fresh bandage
- Motion is increased based on the repair quality at the time of surgery
 - Typical return of motion (goal for full motion at 8 weeks)
 - Full extension- 90° for 1 week
 - Full extension- 100° for 1 week
 - Full extension- 110° for 1 week
 - Full extension- 120° for 1 week
- ROM (within range allowed)
 - No shoulder forward flexion >90° until week 4
 - No shoulder forward flexion >120° until week 6
 - PROM and AAROM for elbow flex/ext and pro/sup
- Strengthening
 - Submaximal pain-free triceps isometrics



- Non-weight bearing, motion only
- RTC Therabands (no shoulder extension)
- Ok to use hand for cell phone, hygiene, and computers

Phase II: Weight Bearing (Weeks 6-12)

- Second post-op visit at 6 weeks
 - Will plan to discontinue brace at 8 weeks
- Ok to use arm and hand for ADLs
 - Cell phone, computer, grooming, cooking, light cleaning
- Restore full motion
 - Brace full extension- 130° for 1 week
 - Brace unlocked for 1 week
 - Brace discontinued at 8 weeks
- Strengthening
 - 1# weight restriction @ 6 weeks if pain free
 - 5# weight restriction @ 8 weeks if pain free
 - 10# weight restriction @ 12 weeks if pain free
 - No triceps eccentrics until 16 weeks

Phase III: Strengthening (Weeks 12+)

- Third post-op visit at 12 weeks
- Advance weight training as able
 - No bench/military press until 14 weeks
- Return to full sport/labor work at 18-22 weeks