

**PROXIMAL BICEPS TENODESIS AND TENOTOMY**  
**WITHOUT RC REPAIR**  
(WITH RC REPAIR – SEE BELOW)  
**SHOULDER REHABILITATION**  
Dr. Carson

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**DOS:** \_\_\_\_\_

**IMMEDIATELY POST-OP**

- Immobilized in sling for 4 WEEKS
- Passive range of motion
  - Passive flexion, active extension
  - Passive supination, active pronation
  - ROM to shoulder girdle to full.
  - Progress shoulder to active after 1-2 weeks if NO cuff Repair

**DO NOT combine ACTIVE/ PASSIVE PRONATION with ELBOW EXTENSION**

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**BEGIN AS SOON AS PAIN AND SWELLING HAVE SUBSIDED AND IS TOLERATED**

**BEGIN DATE:** \_\_\_\_\_

- Active extension elbow with terminal stretch
  - Active pronation with terminal stretch
  - Active elevation, external rotation, internal rotation of the shoulder
  - Full range of motion of the shoulder
  - Full range of motion at elbow, gradually coming out to full extension
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**NO ACTIVE FLEXION OR SUPINATION OF ELBOW UNTIL 6 WEEKS**

**BEGIN AT POST OP WEEK 6**

**BEGIN DATE:** \_\_\_\_\_

- Begin Active Flexion and Supination
- Biceps and Supinator isometrics

**BEGIN AT POST OP WEEK 8**

**Begin Date:** \_\_\_\_\_

- OK to progress to theraband resistance plus continue active ROM
  - Resisted flexion, extension, supination, pronation elbow and wrist
  - Routine shoulder strengthening
  - Continue stretching

**BEGIN AT POST OP WEEK 12**

**Begin Date:** \_\_\_\_\_

- OK to progress to free weights for resistance
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*With rotator cuff repair – follow guidelines of rotator cuff repair with following exceptions: -No resisted biceps until: Post Op week 6 – Biceps isometrics  
8 weeks – Begin theraband resistance 12 weeks – Progress to free weights*