



REHABILITATION GUIDELINES
PROXIMAL BICEPS TENODESIS AND TENOTOMY WITHOUT RTC REPAIR

IMMEDIATELY POST-OP

DOS:

DO NOT combine ACTIVE/ PASSIVE PRONATION with ELBOW EXTENSION

- 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

Begin as Soon as Pain and Swelling have subsided and is tolerated

- Active range of motion with terminal stretch
 - Active flexion, extension elbow with terminal stretch
 - Active supination, 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

6 WEEKS POST-OP

DATE:

- Begin Biceps and Supinator isometrics

8 WEEKS POST-OP

DATE:

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

12 WEEKS POST-OP

DATE:

- OK to progress to free weights for resistance

RETURN TO ACTIVITIES

Golf and tennis 4-6 months depending upon pain

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