

Biceps Tenodesis Protocol

Phase I – (Weeks 1 to 4):

- Sling for comfort, discontinue as tolerated (days, to one week)
- May advance rehabilitation as rapidly as motion and pain allow
- PROM, AAROM, AROM of elbow without resistance. This gives the biceps tendon time to heal into new insertion site on humerus without being stressed
- Encourage pronation/supination without resistance
- Grip strengthening o Maintain shoulder motion by progressing PROM to AROM without restrictions
- ROM goals:
 - o Full passive flexion and extension at elbow
 - o Full shoulder AROM
- No resisted motions until 4 weeks post-op
- Heat before PT sessions; other physical modalities per PT discretion

Phase II – (Weeks 4 to 12):

- Being AROM for elbow in all directions with passive stretching at end ranges to maintain or increase biceps/elbow flexibility and ROM
- At 6 weeks:
 - o Begin light isometrics with arm at side for rotator cuff and deltoid; can advance to bands as tolerated
 - o Begin scapular strengthening
- Weeks 8 to 12:
 - o Only do strengthening 3x/week to avoid rotator cuff tendonitis
 - o Begin UE ergometer
 - o Begin eccentrically resisted motions, plyometrics (ex weighted ball toss), proprioception (ex body blade), and closed chain exercises at 12 weeks.

Phase III – (Months 3 to 12)

At 3 months:

- o Begin sports related rehab, including advanced condition
- o Return to throwing and begin swimming

At 4.5 months:

- o Throw from pitcher's mound

At 6 months:

- o Collision sports
- o MMI

*If distal clavicle excision was performed, horizontal adduction is restricted for 8 weeks