



REHABILITATION GUIDELINES
PROXIMAL BICEPS TENODESIS AND TENOTOMY

DOS:

IMMEDIATELY POST-OP

- Immobilized in sling for **6 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

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***