

Dr. Steven E. Flores 6400 Fannin, Ste 1700 Houston, TX 77030 713-486-7550 (office) 713-512-7237 (fax)

## **BICEPS TENODESIS REHABILITATION PROTOCOL**

## Phase I Weeks 1-4:

- Sling for 4 weeks; may remove for sedentary activity when comfortable
- Shoulder: Progress ROM as tolerated without restrictions; PROM $\rightarrow$ AA $\rightarrow$ AROM as strength allows
  - Encourage HEP to regain full motion; NO SHOULDER MOTION RESTRICTIONS
  - Begin gentle scapular retraction and shoulder shrugs
- Elbow: PROM  $\rightarrow$  AAROM  $\rightarrow$  AROM without resistance.
  - This gives biceps tendon time to heal into new insertion site on humerus without being stressed
  - Instruct patient to avoid weight bearing activity on operative extremity
- Wrist and hand ROM; grip strengthening
- No resisted motions until after 4 weeks
- ROM goals: Full shoulder AROM; full passive/assisted elbow ROM

## Phase II Weeks 4-12:

- Discontinue sling
- If shoulder ROM lacking, increase to full with gentle passive stretching at end ranges
- Continue AROM for elbow in all directions with passive stretching at end ranges to maintain or increase biceps/elbow flexibility and ROM
- At 4 weeks, begin light isometrics with arm at side for rotator cuff and deltoid; can advance to bands as tolerated at week 6
- At 6 weeks, begin scapular strengthening
- At 6 weeks begin light resistive biceps strengthening.

## Phase III Months 3-12:

- Only do strengthening 3 times a week to avoid rotator cuff tendonitis
- Begin UE ergometer
- Begin eccentrically resisted motions, plyometrics (ex weighted ball toss), proprioception (ex body blade), and closed chain exercises
- Begin sports related rehab at 3 months, including advanced conditioning
- Return to throwing and begin swimming at 3 months,
- Throw from pitcher's mound at 4 <sup>1</sup>/<sub>2</sub> months