

# Bicep Tenodesis (may or may not include SAD/DCR) Post-op Rehabilitation Protocol Dr. Edgerton

#### 0-2 Weeks

- Immobilization in sling (for 6 weeks)
- Initiate PROM shoulder- flexion, scaption, ER and IR (with elbow bent, range to patient tolerance- especially ER)
- Pendulum exercises
- AROM elbow, wrist, forearm and hand with elbow at side, HAND IN PRONATION POSITION
- Active scapular retraction/depression
- Grade I and II gentle GH and scapulothoracic joint mobilization for pain management
- Modalities PRN
- Scar management after stitch removal

#### 3-4 Weeks

- Continue with sling immobilization (for 6 weeks)
- Continue above stretches
- Add gentle cross body adduction and extension to patient tolerance
- AAROM for flexion and ER, progress to AROM as able
- Grade I and II GH/scapulothoracic joint mobilization
- Modalities PRN

### 5-6 Weeks

- Continue with sling immobilization (for 6 weeks)
- Continue shoulder AAROM and AROM all planes
- Grade I and II GH/scapulothoracic joint mobilization
- Modalities PRN

## 7-12 Weeks

- At 6 weeks, D/C sling
- Continue all stretching/ROM
- Continue with GH/scapulothoracic joint mobilizations
- Modalities PRN
- Initiate scapular, rotator cuff and deltoid strengthening to tolerance
- Gently initiate bicep strengthening
- Bodyblade/plyometrics
- Appropriate variable resistance and gentle free weight exercises
- Work hardening/sport specific exercises, if needed

Signature Date