

## Rehabilitation Protocol: Biceps Tenodesis

### Precautions

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<i>Distal Clavicle Excision</i>	- Hold horizontal cross body adduction until 8 weeks
<i>Biceps Tenodesis</i>	<ul style="list-style-type: none"> <li>- Limit active elbow flexion of biceps beyond 90 deg &amp; limit eccentric loads on biceps for 6 wks postop</li> <li>- Avoid abduction and 90/90 ER until 8 wks</li> <li>- No resisted elbow flexion until 8 wks</li> </ul>

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### Phase I: 0-4 weeks

- Sling for Comfort.
  - o May discontinue after 4 weeks
- Passive to Active shoulder ROM as tolerated
  - o 140 deg Forward Flexion
  - o 40 deg External Rotation with arm at side
  - o Internal rotation behind back with gentle posterior capsule stretching
- No rotation with arm in abduction until 4 wks
  - o With distal clavicle excision, hold cross body adduction until 8wks.
  - o Grip Strength, Elbow/Wrist/Hand ROM, Codmans
  - o Avoid Abduction and 90/90 ER until 8wks
  - o No resistive elbow flexion until 8 wks

### Phase II: 4-8 weeks

- Discontinue Sling
  - o Advance ROM as tolerated (Goals FF to 160°, ER to 60°)
  - o Begin Isometric exercises
  - o Progress deltoid isometrics
  - o ER/IR (submaximal) at neutral
- Advance to theraband as tolerated
  - o No resisted elbow flexion until 8 wks

### Phase III: 8-12 weeks

- Advance to full, painless ROM
- Continue strengthening as tolerated
- Begin eccentrically resisted motion and closed chain activities
- Only do strengthening 3 times/wk to avoid rotator cuff tendonitis