

Biceps Tenodesis Protocol

	Phase I: weeks 1-4	Phase II: 5-12 weeks	Phase III: 12+ weeks
Weight-Bearing and Immobilization	<ul style="list-style-type: none"> • Non-weight-bearing • Sling immobilizer with pillow <u>at all times</u> except for PT/HEP exercises or for hygiene 	<ul style="list-style-type: none"> • Discontinue sling • May begin light weight-bearing for ADLs within guidelines below 	<ul style="list-style-type: none"> • WBAT
Aerobic	<ul style="list-style-type: none"> • None 	<ul style="list-style-type: none"> • Stationary bike • Begin walk-jog-run progression 	<ul style="list-style-type: none"> • May begin swimming
Range of Motion (ROM) and Strengthening	<ul style="list-style-type: none"> • Elbow ROM: Progress PROM to AAROM to AROM as tolerated with no resistance. Encourage pronation and supination without resistance • Shoulder ROM: maintain ROM by progressing from PROM to AROM without restriction • No resisted motions • Grip strengthening • Maintain hand/wrist ROM 	<ul style="list-style-type: none"> • Continue to advance from Phase I exercises • Increase AROM in all planes (may provide passive stretch/assist at end-ranges of AROM) • At 6 weeks, may begin scapular strengthening • At 6 weeks, with arm at side, begin light isometric exercises for rotator cuff, scapular stabilizers, and deltoid (advance to bands as tolerated) 	<ul style="list-style-type: none"> • Continue to advance from Phase II exercises • Advance strengthening as tolerated from isometrics to bands to weights • Upper extremity ergometer • Perform strengthening exercises no more than 3 days per week • Begin eccentrically resisted motions, plyometrics, proprioception, and closed-chain exercises • Begin sports-related rehabilitation and advanced conditioning • May begin throwing program but no throwing from mound until 4.5 months • No contact/collision sports until 6 months
Other	<ul style="list-style-type: none"> • Heat before and/or ice after PT sessions as needed • Modalities as needed to reduce swelling and for muscle re-education • Home Exercise Program (HEP) per discretion of Physical Therapist 		
Goals	<ul style="list-style-type: none"> • Pain control • Protection of tissue healing • Minimize joint stiffness • Full passive elbow flexion and extension • Full shoulder AROM 	<ul style="list-style-type: none"> • Advance ROM • Begin strengthening 	<ul style="list-style-type: none"> • Restore full and symmetric ROM • Advance strengthening • Begin plyometrics and proprioception • Advance sport-specific activity