



# Sports Medicine

## University of Colorado

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### Biceps Tenodesis Rehab Protocol

#### *POST OPERATIVE MANAGEMENT*

- Pain control with ice and anti-inflammatories
- Protect repair in sling x4-6 weeks

#### Week 1-4:

- Shoulder:
  - PROM
  - Stop at first resistance for external rotation for first 2 weeks
  - No extension past body for first 2 weeks
  - Scapular AROM retraction/protraction, elevation/depression with sling
  - Pendulums with wrist in neutral position
- Elbow:
  - PROM until 14 days post-surgery
  - AAROM flexion/extension with wrist in neutral position starting week 3
  - AAROM supination/pronation starting week 3
  - Avoid end-range elbow extension coupled with pronation for first 2 weeks
- Hand:
  - Gripping exercises
  - AROM

#### Week 5-9:

- Shoulder:
  - Progress towards full PROM as tolerable
  - AAROM→AROM
    - No shoulder flexion/abduction with elbow fully extended (long lever elevation) until 9 weeks postoperatively
  - Scapular isometrics/rhythmic stabilization at PT
  - Scapular AROM retraction/protraction, elevation/depression without sling
  - Rotator cuff and deltoid isometrics in neutral position
- Elbow:
  - Progress towards full PROM as tolerable
  - AROM flexion/extension with wrist neutral weeks 5-6, with supination weeks 7-9
  - AAROM flexion/extension with wrist supinated weeks 5-6
  - AROM pronation/supination
- Hand:
  - Continue previous exercises as needed

#### Goals by week 10:

- 1) Full PROM of shoulder and elbow
- 2) Pain free AROM through available ROM

#### Week 10-16:

- Shoulder:
  - Initiate PRE for RC and peri-scapular muscles
- Elbow:
  - Begin bicep PRE

- High repetition/low velocity/low repetition
- Begin 1 lb, progress 1 lb/week

Week 16-24:

- Functional Training/Sport Specific

Week 24+:

- return to sport

**Criteria for discharge:**

1. Full, pain free range of motion
2. Strength is equal bilaterally
3. Has met specific functional/activity goals
4. Has been cleared by physician