

**(PROTOCOL #17)POST OPERATIVE PROXIMAL BICEPS TENODESIS PROTOCOL**

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The following is a set of general guidelines. It is important to remember that each patient is different. The progression of the patient depends on many factors including age and medical health of the patient and physician preferences. Any bracing is discontinued **ONLY UPON DIRECTION OF PHYSICIAN.**

<b>PHASE</b>	<b>FUNCTIONAL PROGRESSION/ACTVITIES</b>	<b>GOALS/RESTRICTIONS</b>
Post-op to 2 weeks	OT elbow/hand ROM putty and ADL modification instruction Pendulum, Isometrics: deltoid (anterior, middle, posterior) biceps/triceps, periscapular, shoulder shrugs, scapular retraction Joint Mobs: grade 1-2; PROM/gentle stretching shoulder Modalities as needed	Decrease pain Increase ROM to WFL DASH questionnaire at time of evaluation and every 4 weeks Concurrent Biceps tenodesis No Full Shoulder extension, elbow extension for 3 weeks; resisted Pronation or Supination.
6 weeks	All of above including: AROM UBE Rhythmic Stabilization exercises	4 to 6 weeks initiate short arc strengthening with light weights. Isotonic exercises. Continue to decrease pain Muscle reeducation for Glenohumeral and Scapulohumeral rhythm
6 to 8 weeks	All of above including: May initiate light strengthening	Return patient to functional activities Progress to all planes theraband Progress Strength <b>BRACING REMOVED ONLY UNDER DIRECTION OF PHYSICIAN</b>

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PHASE	FUNCTIONAL PROGRESSION/ACTIVITIES	GOALS/RESTRICTIONS
10-12 weeks	All of above including: More strengthening: light dumbbell, biceps/triceps, advance therabands At 12 weeks can start full arc band Advanced strengthening exercises i.e. Endurance Plyometrics	No Residual pain <b>Activities:</b> Gradually increase activity <b>Golf:</b> pitching wedge to start in approx 4 months <b>Bowling:</b> use weighted ball at approx 3-4 months <b>Tennis:</b> same start slow gradually increase activity <b>Driving:</b> able to drive, monitor meds <b>Shower:</b> usually after first dressing with watertight dressing <b>Throwing:</b> 3-4 months

**Refer to enclosed table for suggested exercises which optimize muscle function based on EMG activity.**

Approved By:

Physician reserves the right to adjust these protocols for each patient.

Signature: \_\_\_\_\_ Date \_\_\_\_\_  
 Robert M. Doane, M.D., P.C.

Signature: \_\_\_\_\_ Date \_\_\_\_\_  
 Balu Pisupati, PT