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Shoulder Biceps Tenodesis

The following is a basic framework from which to work during rehabilitation following shoulder biceps tenodesis, which is typically performed in combination with subacromial decompression, with or without distal clavicle excision. Every patient is different, so the time points are just guidelines – the emphasis should be on achieving the milestones of each phase prior to advancing to the next phase. Please feel free to communicate with our office with any questions or concerns.

	Range of Motion	Sling	Exercises
Phase I 0 – 4 weeks	PROM as tolerated*	0 – 6 weeks: at all times except for exercises and hygeine	0 – 2 weeks: wrist/hand ROM, pendulums, wall stretch at home per therapist. 2 – 4 weeks: grip strengthening, pulleys/canes, wrist/hand ROM, pendulums Deltoid, rotator cuff isometrics Scapular protraction/retraction Avoid active biceps exercises until 6 weeks post-op.
Phase II 4 – 8 weeks	Increase as tolerated to full	0 – 6 weeks: at all times except for exercises and hygeine 6 – 8 weeks: discontinue	Advance isometrics with arm at side, rotator cuff, and deltoid Advance to Therabands and dumbbells as tolerated, capsular stretching at end-ROM to maintain flexibility
Phase III 8 – 12 weeks	Progress to full AROM, PROM without discomfort	None	Advance strength training as tolerated Begin eccentrically resisted motions and closed chain activities Advance to sports and full activity as tolerated after 12 weeks

^{*}If distal clavicle excision is performed, horizontal adduction is minimized until pain resolves.