



## **Shoulder Arthroscopy with Biceps Tenodesis: Post-Operative Rehabilitation Protocol**

### **0-4 Weeks**

- Wear sling at all times for 4 weeks, only removing it for exercises and hygiene.
- Gradually progress from passive to active shoulder range of motion (ROM) as tolerated:
  - Forward Flexion (FF): up to 140°
  - External Rotation (ER) with arm at side: up to 40°
  - Internal Rotation (IR) behind back, with gentle posterior capsule stretching
  - Avoid rotation with arm in abduction until 4 weeks
- For distal clavicle excision, limit cross-body adduction until 8 weeks.
- Perform grip strength exercises and range of motion for the elbow, wrist, and hand. Incorporate Codman's pendulum exercises.
- Avoid abduction and 90/90 external rotation until 8 weeks.
- No resisted elbow flexion until 8 weeks.

### **4-8 Weeks**

- Discontinue the sling at 4 weeks.
- Gradually advance ROM as tolerated:
  - Forward Flexion (FF): up to 160°
  - External Rotation (ER): up to 60°
- Begin isometric exercises, including:
  - Deltoid isometrics
  - External and internal rotation (submaximal) at neutral
- Progress to TheraBand exercises as tolerated.
- No resisted elbow flexion until 8 weeks.

### **8-12 Weeks**

- Continue to progress to full, pain-free ROM.
- Strengthen the shoulder as tolerated, incorporating:
  - Eccentric resisted motion
  - Closed chain exercises

- Limit strengthening exercises to 3 times per week to reduce risk of rotator cuff tendonitis.

**Note:** Progression through these phases should be based on individual recovery, with all exercises adjusted as necessary under the guidance of your surgeon and physical therapist. Regular follow-ups with the surgical team are crucial to ensure optimal recovery