

University of Texas Health Science Center at Houston
School of Medicine
Department of Orthopaedic Surgery
Sports Medicine & General Orthopaedics
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	Biceps Tenodesis Postoperative Protocol
	Referral for Rehabilitation Services
Patient Name:	Date of Surgery:
	/ Week Weeks
Sling for 3 weeks – No a	ctive elbow motion during this time.
Phase 1 - Passive	Begin:
Week 1-4	<ol> <li>Immediate full elbow passive ROM (flexion and extension)</li> <li>Passive shoulder ROM – all planes, no restrictions</li> </ol>
Phase 2 - Active	Begin:
Week 5-6	1. Start active elbow flexion – no restrictions
	2. Start active shoulder ROM – no restrictions
Phase 3 - Resistive	Begin:
Week 7	<ol> <li>Rotator cuff and periscapular (shrugs, rows, serratus, etc) strengthening program (use weights or therabands)</li> <li>Start resisted elbow flexion with bands or weights</li> </ol>
Week 8	1. May start weight training – bicep curls and tricep extension
Return to Activities	
Computer	4 weeks
Golf	8 weeks – start with chip and putt and advance
Tennis	12 weeks – start with ground strokes and advance
I hereby certify these services	as medically necessary for the patient's plan of care.
	Date
Physician's Signature	