# biceps tenodesis physical therapy protocol

**biceps tenodesis physical therapy protocol** is a critical component in the recovery process following biceps tenodesis surgery. This protocol guides patients and healthcare professionals through a structured rehabilitation plan designed to restore strength, mobility, and function of the shoulder and arm while protecting the surgical repair. The biceps tenodesis procedure involves reattaching the long head of the biceps tendon to the humerus, and physical therapy plays an essential role in ensuring optimal healing and functional outcomes. This article will provide a comprehensive overview of the phases of rehabilitation, specific exercises, precautions, and expected timelines within a typical biceps tenodesis physical therapy protocol. Furthermore, it will cover patient education and factors influencing recovery to support successful return to daily activities and sports.



## Understanding Biceps Tenodesis Surgery

Biceps tenodesis is a surgical technique commonly used to address issues related to the long head of the biceps tendon, such as tendinopathy, partial tears, or instability. The procedure involves detaching the tendon from its original attachment at the superior labrum and reattaching it to the humerus bone, typically in the bicipital groove. This surgery aims to relieve pain, restore function, and prevent further damage. The success of biceps tenodesis largely depends on a carefully designed physical therapy protocol that follows the biological healing timeline of the tendon and surrounding tissues.

## Phases of the Biceps Tenodesis Physical Therapy Protocol

The rehabilitation process after biceps tenodesis is divided into distinct phases, each with

specific goals and therapeutic interventions. These phases are structured to promote tissue healing, prevent stiffness, and gradually restore motion and strength.

- Phase 1: Protection and Immobilization
- Phase 2: Early Motion and Passive Range of Motion
- Phase 3: Active Range of Motion and Strengthening
- Phase 4: Advanced Strengthening and Return to Activity

# Early Postoperative Rehabilitation

## Phase 1: Protection and Immobilization

Immediately following surgery, the primary focus is on protecting the surgical repair to allow proper healing. The arm is typically immobilized using a sling or brace to limit movement and reduce stress on the reattached tendon. This phase usually lasts for approximately 4 to 6 weeks, depending on the surgeon’s protocol and patient factors.

During this time, patients are encouraged to maintain mobility in the elbow, wrist, and hand joints through gentle exercises to prevent stiffness and promote circulation, but shoulder movement is restricted.

## Phase 2: Early Motion and Passive Range of Motion

After the initial immobilization phase, passive range of motion (PROM) exercises are introduced to prevent shoulder stiffness and promote flexibility without compromising the repair. These exercises are typically guided by a physical therapist and focus on gentle movements within pain-free limits. The goal is to gradually restore shoulder mobility while avoiding active biceps contraction.

Common passive movements include forward elevation and external rotation of the shoulder, performed carefully to ensure the tendon fixation site is not stressed.

# Intermediate Rehabilitation Phase

## Phase 3: Active Range of Motion and Strengthening

Once adequate healing has occurred, usually around 6 to 8 weeks post-surgery, active range of motion (AROM) exercises are initiated. During this phase, patients begin to actively use their shoulder muscles, including the biceps, but with controlled intensity to avoid overload. Strengthening exercises are introduced gradually, starting with isometric contractions and progressing to light resistance exercises.

Physical therapists focus on restoring normal biomechanics of the shoulder complex, including scapular stabilization and rotator cuff strengthening, which are essential for functional recovery.

## Key Exercises in the Intermediate Phase

- Isometric biceps contractions without resistance
- Theraband exercises for shoulder external and internal rotation
- Scapular retraction and depression drills
- Gentle shoulder flexion and abduction against minimal resistance

# Advanced Strengthening and Functional Training

## Phase 4: Progressive Strengthening and Return to Activity

At approximately 12 weeks postoperatively, patients enter the advanced strengthening phase. This stage emphasizes progressive resistance training to rebuild muscle strength and endurance. The goal is to prepare the patient for return to work, sports, and daily activities without pain or functional limitations.

Exercises become more dynamic, incorporating multi-planar movements and functional tasks. Plyometric training and sport-specific drills may be introduced for athletes under professional supervision.

## Components of Advanced Training

- Weightlifting exercises targeting the biceps, rotator cuff, and deltoid muscles
- Closed kinetic chain activities for shoulder stability
- Proprioceptive and neuromuscular control drills
- Gradual reintroduction to overhead and throwing motions

# Precautions and Contraindications

Adhering to precautions during the biceps tenodesis physical therapy protocol is essential to avoid compromising the surgical repair. Excessive early loading or aggressive motion can lead to tendon failure or prolonged recovery. Key contraindications include:

- Avoiding active biceps contraction during the initial 6 weeks post-surgery
- No heavy lifting or resistance training until cleared by the surgeon and therapist
- Limiting shoulder external rotation and forward elevation within prescribed ranges
- Monitoring for signs of increased pain, swelling, or instability during rehabilitation

# Factors Influencing Rehabilitation Outcomes

Several patient-specific and surgical factors can influence the success of the biceps tenodesis physical therapy protocol. These include the patient’s age, overall health, adherence to the rehabilitation plan, and the presence of concomitant shoulder injuries such as rotator cuff tears. Surgical technique and fixation method also play a role in determining the rehabilitation timeline and intensity.

Effective communication between the patient, surgeon, and physical therapist is vital to customize the protocol to individual needs and optimize recovery outcomes.

# Frequently Asked Questions

## What is biceps tenodesis physical therapy protocol?

Biceps tenodesis physical therapy protocol is a structured rehabilitation program designed to restore strength, flexibility, and function following biceps tenodesis surgery, which reattaches the biceps tendon to the humerus.

## When does physical therapy typically begin after biceps tenodesis surgery?

Physical therapy usually begins within the first week after surgery, focusing initially on passive range of motion and gentle mobility exercises to protect the repair.

## What are the main phases of the biceps tenodesis physical therapy protocol?

The main phases include the immobilization and protection phase, early passive motion phase, active motion and strengthening phase, and advanced strengthening and return-to-

activity phase.

## How long does the full recovery process take with a biceps tenodesis physical therapy protocol?

Full recovery typically takes about 3 to 6 months, depending on the patient’s condition and adherence to the rehabilitation protocol.

## What exercises are recommended during the early phase of biceps tenodesis physical therapy?

During the early phase, passive range of motion exercises such as pendulum swings and gentle shoulder flexion and extension are recommended to prevent stiffness without stressing the repair.

## When can strengthening exercises begin after biceps tenodesis surgery?

Strengthening exercises usually begin around 6 to 8 weeks post-surgery, focusing initially on isometric exercises before progressing to resistance training.

## Are there any activities to avoid during biceps tenodesis physical therapy?

Yes, patients should avoid heavy lifting, sudden jerking movements, and activities that put excessive strain on the biceps tendon during the initial phases of rehabilitation.

## How is pain managed during the physical therapy protocol for biceps tenodesis?

Pain is managed through a combination of rest, ice, prescribed medications, and careful progression of exercises to avoid overloading the healing tendon.

## What role does the physical therapist play in the biceps tenodesis recovery process?

The physical therapist guides the patient through the rehabilitation protocol, monitors progress, adjusts exercises as needed, and educates the patient on proper techniques to ensure safe recovery.

## Can patients return to sports after completing the biceps tenodesis physical therapy protocol?

Yes, most patients can return to sports and heavy activities after completing the rehabilitation program, typically around 4 to 6 months post-surgery, depending on individual recovery.

# Additional Resources

1. *Biceps Tenodesis Rehabilitation: A Comprehensive Guide*
This book offers an in-depth exploration of physical therapy protocols following biceps tenodesis surgery. It covers preoperative preparation, postoperative care, and step-by-step rehabilitation exercises designed to optimize recovery. Clinicians will find practical tips to tailor therapy plans based on patient-specific factors.

2. *Postoperative Rehabilitation for Biceps Tenodesis: Evidence-Based Approaches*
Focusing on evidence-based practices, this text reviews the latest research on rehabilitation strategies after biceps tenodesis. It provides detailed timelines for immobilization, range of motion, strengthening, and return to activity. The book also discusses common complications and how to address them in therapy.

3. *Physical Therapy Protocols for Shoulder Surgery: Biceps Tenodesis and Beyond*
This comprehensive manual covers rehabilitation protocols for various shoulder surgeries, with a dedicated section on biceps tenodesis. It includes practical guidelines for therapists on progression of exercises and functional milestones. Case studies illustrate typical recovery pathways and outcomes.

4. *Biceps Tenodesis: Surgical Techniques and Rehabilitation*
Combining surgical insights with rehabilitation strategies, this book bridges the gap between surgeons and physical therapists. It details the anatomical considerations of biceps tenodesis and provides customized rehab protocols. Readers gain a holistic understanding of patient care from surgery through full recovery.

5. *Rehabilitation of the Biceps Tendon: Protocols Following Tenodesis*
This resource emphasizes tendon healing biology and how it informs rehabilitation timing and intensity. It offers clear phase-based protocols to safely restore strength and function after biceps tenodesis. The book is suitable for therapists aiming to optimize outcomes and minimize re-injury risk.

6. *Shoulder Rehabilitation: Focus on Biceps Tenodesis Recovery*
Targeted at clinicians working with shoulder injuries, this book delves into specific rehab exercises and modalities for biceps tenodesis patients. It outlines progression from passive motion to advanced strengthening and sport-specific training. Practical tips help therapists individualize care plans.

7. *Clinical Guide to Biceps Tenodesis Rehabilitation*
This concise guide provides a practical framework for managing patients post-biceps tenodesis. It highlights key assessment tools, common challenges, and strategies to enhance compliance and functional recovery. The book is designed to support both novice and experienced therapists.

8. *Advanced Rehabilitation Techniques After Biceps Tenodesis Surgery*
Focusing on cutting-edge rehab methods, this book explores neuromuscular re-education, proprioceptive training, and kinetic chain integration following biceps tenodesis. It emphasizes a multidisciplinary approach for athletes and active individuals. Therapists will find innovative protocols to accelerate return to play.

9. *Evidence-Based Physical Therapy for Biceps Tenodesis Patients*

This text synthesizes current clinical trials and systematic reviews related to post-biceps tenodesis rehabilitation. It assists clinicians in applying research findings to develop effective, patient-centered therapy plans. The book also discusses future directions in rehab science for tendon repairs.

## Biceps Tenodesis Physical Therapy Protocol



**biceps tenodesis physical therapy protocol: Clinical Orthopaedic Rehabilitation** S. Brent Brotzman, Robert C. Manske, 2011-01-01 In Clinical Orthopaedic Rehabilitation: An Evidence-Based Approach, Dr. S. Brent Brotzman and Robert C. Manske help you apply the most effective, evidence-based protocols for maximizing return to function following common sports injuries and post-surgical conditions. A well-respected, comprehensive source for evaluating, treating, and rehabilitating orthopaedic patients, the 3rd Edition guides you on the prevention of running injuries, the latest perturbation techniques, and the ACL rehabilitation procedures and functional tests you need to help get your patients back in the game or the office. You'll also find a brand-new spine rehabilitation section, an extensively revised art program, and online access to videos demonstrating rehabilitation procedures of common orthopaedic conditions at www.expertconsult.com. Get expert guidance on everything you may see on a day-to-day basis in the rehabilitation of joint replacements and sports injuries. Apply evidence-based rehabilitation protocols to common sports conditions like ACL and meniscus injuries and post-surgical rehabilitation for the knee, hip, and shoulder. See how to perform perturbation techniques for ACL rehabilitation, ACL functional tests and return-to-play criteria after reconstruction, analysis of running gait to prevent and treat running injury, and more with videos online at www.expertconsult.com. Use the expert practices described in Tendinopathy and Hip Labral Injuries, part of the expanded Special Topics section, to help patients realize quicker recovery times. Visualize physical examination and rehabilitation techniques with the extensively revised art program that presents 750 figures and illustrations. The new edition of the well-respected Brotzman has been updated to consistently include evidence-based rehabilitation protocols, as well as comprehensive coverage and videos at a great value!

**biceps tenodesis physical therapy protocol:** Clinical Orthopaedic Rehabilitation: A Team Approach E-Book Charles E Giangarra, Robert C. Manske, 2017-01-04 Evidence suggests a direct correlation between the quality of postoperative orthopaedic rehabilitation and the effectiveness of the surgery. Clinical Orthopaedic Rehabilitation, 4th Edition, helps today's orthopaedic teams apply the most effective, evidence-based protocols for maximizing return to function following common sports injuries and post-surgical conditions. Charles Giangarra, MD and Robert Manske, PT continue the commitment to excellence established by Dr. S. Brent Brotzman in previous editions, bringing a fresh perspective to the team approach to rehabilitation. - Every section is written by a combination of surgeons, physical therapists, and occupational therapists, making this respected text a truly practical how-to guide for the appropriate initial exam, differential diagnosis, treatment, and rehabilitation. - Treatment and rehabilitation protocols are presented in a step-by-step, algorithmic format with each new phase begun after criteria are met (criteria-based progression, reflecting current best practice). - Revised content brings you up to date with new evidence-based literature on examination techniques, classification systems, differential diagnosis, treatment options, and

criteria-based rehabilitation protocols. - Extensive updates throughout include new chapters on: medial patellofemoral ligament, shoulder impingement, pec major ruptures, thoracic outlet syndrome, general humeral fractures, foot and ankle fractures, medial patellofemoral ligament reconstruction, the arthritic hip, athletic pubalgia, and labral repair and reconstruction. - Easy-to-follow videos demonstrate rehabilitation procedures of frequently seen orthopaedic conditions and commonly used exercises, and new full-color images complement the highly visual nature of the text.

**biceps tenodesis physical therapy protocol:** *The Management of Biceps Pathology* Anthony A. Romeo, Brandon J. Erickson, Justin W. Griffin, 2021-01-25 The biceps tendon is one of the most challenging anatomic structures to completely understand. Its precise role for shoulder function has yet to be completely defined, and pathologic conditions exist at both its proximal and distal ends. In recent years, the biceps labral complex has been recognized as a common cause of shoulder pain among patients. Accurate diagnosis, utilizing both physical examination and imaging, is crucial to decision-making regarding the most effective treatment. Many controversies exist surrounding the management of biceps pathology with a myriad of potential solutions to consider. This practical text breaks down the biceps into succinct, digestible portions with expert tips and tricks to help manage bicipital problems in a wide array of patients. Sensibly divided into three thematic sections, it encompasses all aspects of the biceps tendon, including relevant anatomy, diagnosis, imaging, and non-operative management (including rehabilitation and biologic treatments). Surgical management strategies as they pertain to both proximal and distal biceps tendon pathologies will be covered, including both arthroscopic and open tenodesis, transfer, and inlay and onlay fixation methods. A review of associated complications and how to avoid them is likewise described in detail, along with post-surgical rehabilitation techniques to maximize return to play. Ideal for orthopedic surgeons and sports medicine specialists at all levels, The Management of Biceps Pathology will be a unique resource for all clinicians facing challenges treating the active patient with shoulder and elbow pain.

**biceps tenodesis physical therapy protocol: Musculoskeletal Pain** Carl Edward Noe, 2025-06-25 This concise book covers common musculoskeletal problems in all body regions, filling a critically important gap in the literature. It's organized by sections the begin with an introduction, followed by regional problems, clinic treatment, perioperative care, and special topics. Chapters are authored by clinicians who actively manage patients, and are focused on clinically important information rather than historical or theoretical information. Clinicians are given all of the information needed to evaluate and manage common musculoskeletal pain in one concise resource. Musculoskeletal Pain is aimed for all physicians who evaluate and manage patients with musculoskeletal problems.

**biceps tenodesis physical therapy protocol:** Complex and Revision Problems in Shoulder Surgery Jon J. P. Warner, Joseph P. Iannotti, Evan L. Flatow, 2005 Written by the world's leading shoulder surgeons, this volume offers much-needed guidance on managing complex and revision problems that cannot be solved by standard treatment formulas. The authors present successful approaches with illustrative case examples, emphasizing avoidance of common pitfalls and management of complications. This edition has a greater focus on arthroscopic procedures and includes full-color arthroscopic images. New chapters cover arthroscopic rotator cuff reconstruction, idiopathic and diabetic stiff shoulder, alternatives to arthroplasty, and the failed arthroplasty. The thoroughly revised fractures section includes new information on two-, three-, and four-part fractures and AC/SC fractures. This edition contains over 800 illustrations.

**biceps tenodesis physical therapy protocol: Essentials of Physical Medicine and Rehabilitation E-Book** Walter R. Frontera, Julie K. Silver, 2018-09-26 Packed with practical, up-to-date guidance, Essentials of Physical Medicine and Rehabilitation, 4th Edition, by Walter R. Frontera, MD, PhD; Julie K. Silver, MD; and Thomas D. Rizzo, Jr., MD, helps you prevent, diagnose, and treat a wide range of musculoskeletal disorders, pain syndromes, and chronic disabling conditions in day-to-day patient care. This easy-to-use reference provides the information you need to improve patient function and performance by using both traditional and cutting-edge therapies,

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