

## PHYSICAL THERAPY PROTOCOL/PRESCRIPTION: BICEPS TENODESIS, DISTAL CLAVICLE EXCISION, SUBACROMIAL DECOMPRESSION

Name: \_\_\_\_\_

Date of Surgery: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Signed: \_\_\_\_\_\_

Frequency: 2-3 times per week x 6 weeks

## 0-4 Weeks:

- Sling for Comfort.
- May discontinue after 4 weeks
- Passive to Active shoulder ROM as tolerated
  - 140° Forward Flexion
  - 40° External Rotation with arm at side
  - Internal rotation behind back with gentle posterior capsule stretching
  - No rotation with arm in abduction until 4 wks
- With distal clavicle excision, hold cross body adduction until 8wks.
- Grip Strength, Elbow/Wrist/Hand ROM, Codmans
- Avoid Abduction and 90/90 ER until 8wks
- No resistive elbow flexion until 8 wks

## 4-8 Weeks:

- Discontinue Sling
- Advance ROM as tolerated (Goals FF to 160°, ER to 60°)
- Begin Isometric exercises
  - Progress deltoid isometrics
  - ER/IR (submaximal) at neutral
- Advance to theraband as tolerated
- No resisted elbow flexion until 8 wks

## 8-12 Weeks:

- Advance to full, painless ROM
- Continue strengthening as tolerated
- Begin eccentrically resisted motion and closed chain activities
- Only do strengthening 3times/wk to avoid rotator cuff tendonitis