

Arthroscopic Subacromial Decompression, Distal Clavicle Resection, Biceps Tenodesis REHAB Protocol

BICEPS TENODESIS PRECAUTIONS

Sling for 3 weeks

No active elbow flexion for 4 weeks

No biceps resistance exercises for 6-8 weeks

PHASE I: Day 1-14

Goals:

1. Restore non-painful ROM
2. Prevent muscular atrophy and inhibition
3. Decrease pain/inflammation
4. Improve postural awareness
5. Minimize stress to healing structures

Precautions:

1. Care should be taken with abduction (both AROM and PROM to avoid unnecessary compression of subacromial structures)
2. Creating or reinforcing poor movement patterns, such as excessive scapulothoracic motion with UE elevation

Range Of Motion:

1. PROM (non-forceful flexion and abduction)
2. AAROM
3. AROM
4. Pendulums
5. Pulleys
6. Cane exercises
7. Self stretches, including posterior capsule, upper trapezius, and pectorialis major

Strengthening:

1. Isometrics: scapular musculature, deltoid, RTC
2. Isotonic: Theraband IR and ER in 0 degrees abduction

Modalities:

1. cryotherapy
2. e-stim and/or Inferential current to decrease swelling and pain

Criteria for progression to phase 2:

- Full AROM, PROM
- Minimal pain and tenderness

PHASE II: Weeks 2-6

Goals:

1. regain and improve muscular strength
2. normalize arthrokinematics
3. improve neuromuscular control of shoulder complex

Precautions:

1. Overhead activities
2. Heavy lifting

Exercises:

1. strengthen shoulder musculature – isometric, isotonic, proprioceptive neuromuscular facilitation
2. Strengthen scapulothoracic musculature – isometric, isotonic, PNF
3. Initiate UE endurance exercises

Manual Treatment:

1. Joint mobilization to improve/restore arthrokinematics if indicated
2. Joint mobilization for pain modulation

Modalities:

1. Cryotherapy
2. Electrical stimulation – interferential current to decrease swelling and pain

Criteria for progression to Phase 3:

- full painless ROM
- no pain or tenderness on examination

PHASE III – Weeks 6+

Goals:

1. Improve strength, power, endurance
2. improve neuromuscular control
3. prepare athlete to begin to throw, perform similar overhead activities or other sports exercises

Emphasis of Phase 3

1. high speed, high energy strengthening exercises
2. eccentric exercises
3. Diagonal patterns
4. Workplace ergonomic assessment, work hardening

Exercises:

1. Continued dumbbell strengthening (RTC and deltoid)
2. Progress therapy and exercises to 90/90 position for IR and ER (slow/fast sets)
3. Thera-Band exercises for scapulothoracic musculature and biceps
4. Plyometrics for rotator cuff
5. PNF diagonal patterns
6. Isokinetic's
7. Continue endurance exercises

Criteria for discharge from skilled therapy:

- Patient able to maintain nonpainful active range of motion
- Maximize functional use of upper extremity
- Maximized muscular strength, power and endurance
- Patient has returned to advanced functional activities