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SLAP and Biceps Tenodesis
PHYSIOTHERAPY PROTOCOL AFTER LHB TENODESIS
PROCEDURES (including subpectoral tenodesis and biceps transfers)

1st 6 weeks after surgery

Precautions	<ul style="list-style-type: none"> • Sling immobilization required for soft tissue healing- 3 weeks • Hypersensitivity in axillary nerve distribution is a common occurrence • No bicep tension for 6 weeks to protect repaired tissues—this includes avoiding long lever arm flexion range of motion and no resisted forearm supination, elbow flexion or shoulder flexion • Limit external rotation to 40° for the first 4 weeks • No extension or horizontal extension past body for 4 weeks
Range of Motion (ROM) Exercises (Please do not exceed the ROM specified for each exercise and time period)	<ul style="list-style-type: none"> • Gentle active and active assistive range of motion for the elbow and wrist • Pain free, gentle passive range of motion for shoulder flexion, abduction, internal rotation and external rotation to neutral
Suggested Therapeutic Exercise	<ul style="list-style-type: none"> • Begin week 3 with sub-maximal shoulder isometrics for internal rotation; external rotation; abduction; and adduction • Hand gripping • Cervical spine and scapular active range of motion • Desensitization techniques for axillary nerve distribution
Cardiovascular Fitness	<ul style="list-style-type: none"> • Walking, stationary bike—sling on. • No treadmill or swimming • Avoid running and jumping due to the distractive forces that can occur at landing

6-8 Weeks from surgery

Appointments • Rehabilitation appointments are 1 time a week for 1 to 2 weeks Rehabilitation

Goals • Full active range of motion

- Full rotator cuff strength in a neutral position

Precautions	<ul style="list-style-type: none">• Begin bicep progressive resistive exercises very gradually—this includes avoiding long lever arm flexion range of motion and avoiding resisted forearm supination, elbow flexion or shoulder flexion• No passive range of motion for abduction and external rotation or extension
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- Rehabilitation appointments are 1 to 2 times per week

ROM Exercises (Please do not exceed the ROM specified for each exercise and time period)	<ul style="list-style-type: none">• Shoulder active range of motion• Shoulder passive range of motion for flexion or abduction if needed
Suggested Therapeutic Exercise	<ul style="list-style-type: none">• Scapular squeezes• Internal and external rotation in neutral with Theraband resistance— make sure patient is not supinating with external rotation movement• Ball squeezes

Cardiovascular Fitness • Walking and/or stationary bike without using arms (No Airdyne) • No treadmill, swimming or running

Prof M Imam

Consultant Orthopaedic Surgeon