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Subacromial Decompression/Debridement with Biceps Tenodesis

Phase I (1 – 5 days post-op.)

- Wound Care: remove dressings 48 hours after surgery. Place band-aids over portals and incisions. OK to shower 48 hours after surgery.
- Edema: Edema control interventions
- Sling: Ultrasling worn continuously except in therapy or during exercise.
- ROM
 - Initiate PROM of shoulder in all planes (as tolerated avoiding subacromial pain).
 - Pendulum exercises
 - Table stretches
 - Pulleys if tolerated
 - A/PROM of elbow, wrist, and digits
- Strengthening
 - Isometric grip strengthening
 - Scapulothoracic retraction exercises
- Modalities: PRN for pain and inflammation

Phase II (5 days – 4 weeks post-op.)

- Edema: Edema control interventions
- Sling: Ultrasling worn for 4 weeks continuously
- ROM
 - Active shoulder flexion to equal/exceed 140 degrees.
 - Initiate joint mobilization to GH, AC, and Scapulothoracic Joint as tolerated.
 - Full PROM of the elbow. Progress to AAROM and AROM with no resistance.
- Strengthening
 - Rotator Cuff and Scapular Strengthening in pain free ranges while avoiding impingement beginning with Active Assisted and Isometric Strengthening.
 - Wrist/Forearm isometric and progressive resistive exercises.
 - No resistance to elbow flexion.
- Modalities: PRN for pain and inflammation

Phase III (4 weeks – 10 wks post-op.)

- AROM
 - Achieve functional motion in all planes (forward flexion/abduction >145°).
 - Full ROM of the elbow
- Strengthening
 - Increase rotator cuff and scapular strengthening while avoiding increased pain symptoms and impingement.

- Slowly progress strengthening of the biceps
- Begin Return To Work and Sport Specific Strengthening.
- Consider referral to Work Hardening Program following D/C from therapy

Phase IV (s/p 10 wks + post op.)

- Achieve those goals not yet attained in Phase III.

Adapted from:

1) Brotzman SB, Wilk KE. Clinical Orthopedic Rehabilitation Second Edition. Philadelphia: Mosby; 2003

2) Wilk KE, Reinold MM, Andrews, JR. Rehabilitation Following Arthros