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# Shoulder Arthroscopy with Biceps Tenodesis

## REHABILITATION PROTOCOL

| PHASE | RANGE OF MOTION | IMMOBILIZER | THERAPEUTIC EXERCISE |
|---|---|---|---|
| **Phase I**<br>**0–2 weeks**<br>GOAL TO ADVANCE<br>*Pain controlled; shoulder motion improving* | Shoulder passive and active-assisted motion as tolerated. Elbow bending and palm-up turning passive only*. No shoulder extension behind the body with elbow straight | Sling for comfort; may remove for exercise and hygiene | Pendulums, grip with arm relaxed, wrist and neck ROM, scapular setting, ice |
| **Phase II**<br>**2–6 weeks**<br>GOAL TO ADVANCE<br>*Full shoulder motion by 6 weeks* | Progress to full shoulder active motion. Week 4: active elbow motion without resistance | Discontinue sling by 2-4 weeks | Gentle rotator cuff isometrics with elbow at 90°, scapular stabilization. Week 4: light band ER/IR and rows below shoulder height. No lifting >2 lb with operated arm |
| **Phase III**<br>**6–12 weeks**<br>GOAL TO ADVANCE<br>*Pain-free strength progression* | Full; posterior capsule and cross-body stretching | None | Progressive rotator cuff and scapular strengthening. Week 6: gentle biceps isometrics. Week 8: resisted biceps*, start at 1 lb and add about 1 lb per week |
| **Phase IV**<br>**12+ weeks**<br>GOAL TO ADVANCE<br>*Physician clearance* | Full without discomfort | None | Unrestricted strengthening, work- and sport-specific training; heavy lifting and throwing at about 3-4 months** |

**NOTES**

*NO resisted elbow bending or palm-up turning (biceps) until 8 weeks post-operative

**If approved by physician

*This protocol is a guideline. Your surgeon may adjust it based on your surgery and progress.*
*Call the office for fever, wound drainage, calf pain or swelling, or new numbness or tingling.*

**Questions: 469.800.7200**
Rev. 10/2026