

**Mr Mark S. Falworth MBBS FRCS(Eng) FRCS (Orth)**  
**Consultant Orthopaedic Surgeon**  
**Shoulder and Elbow Surgery**

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**Appointments & Queries:**  
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**Physiotherapy protocol: LHB Tenodesis.**

Weeks 0-3:

- Sling for first 6 weeks
- PROM → AAROM of elbow flexion with gravity assisted extension with 30<sup>0</sup> block to extension. No resistance work so that the biceps tendon has time to heal into new insertion site on humerus without being stressed
- Encourage pronation / supination without resistance
- Grip strengthening
- Maintain shoulder motion by progressing PROM → AROM without restrictions
- ROM goals at 4 weeks: Full passive flexion & extension to 30<sup>0</sup> block at elbow; full shoulder AROM
- No resisted motions until 6 weeks post-op
- Heat before Physio sessions, cooling (ice) after

Weeks 3-6:

- Increase gravity assisted extension 10<sup>0</sup> per week reaching full extension by week 6 discontinue sling

Weeks 6-12

- Discontinue sling
- Begin AROM for elbow in all directions with passive stretching at end ranges to maintain or increase biceps/elbow flexibility and ROM
- At 6 weeks, begin light isometrics with arm at side for rotator cuff and deltoid; can advance to bands as tolerated
- At 6 weeks, begin scapular strengthening

Month 3-12

- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- Begin eccentrically resisted motions, plyometrics (eg. weighted ball toss), proprioception, and closed chain exercises at 12 weeks.
- Return to throwing and swimming at 3 months,
- Collision sports at 6 months

Comments: