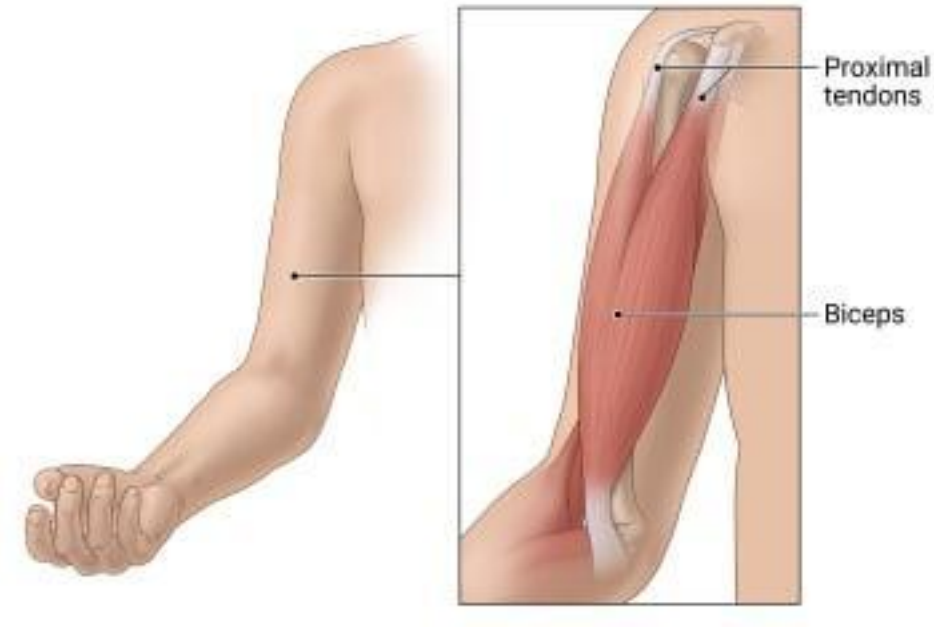
Lucas Rylander, MD
Orthopedic Surgery & Sports Medicine

Proximal Biceps Tendon Tear Surgery: What to Expect at Home



Your Recovery

You had surgery for a proximal biceps tendon tear. This surgery fixes a tendon that is torn near the shoulder.

You will feel tired for several days. Your shoulder will be swollen, and you may notice that your skin is a different color near the cut the doctor made (incision). Your hand and arm may also be swollen. This is normal and will go away in a few days. Depending on the medicine you had during the surgery, your entire arm may feel numb or like you can't move it. This goes away in 12 to 24 hours.

You will have stitches (sutures) and a bandage on your shoulder. You may be able to take off the bandage in about 3 days, or when your doctor tells you to. Your shoulder will also be in a sling for about 6 weeks. You may take the sling off when you dress or wash and during rehabilitation (rehab). If the sutures aren't the type that dissolve, your doctor will take them out 7 to 10 days after your surgery.

Lucas Rylander, MD
Orthopedic Surgery & Sports Medicine

You will need rehab. This will probably start 1 to 2 weeks after your surgery and last for 2 to 3 months. It takes about 4 to 6 months before your shoulder heals.
You may be able to do easier daily activities in 2 to 3 weeks, as long as you don't use your affected arm. Most people who work at desk jobs can go back to work in 1 to 2 weeks. If you lift, push, or pull at work, you may be able to return in 3 to 4 months.
Most people can start activities with low risk of shoulder injury in about 3 months. Jogging is one example. If you play sports, training may also start at this time. Most baseball or softball players can begin a program to toss a ball lightly. It may take 6 to 12 months to return to normal throwing. How long it takes depends on how damaged your shoulder was and how well your rehab goes.
This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.

How can you care for yourself at home?

Activity

- Rest when you feel tired. Getting enough sleep will help you recover. You may be more comfortable if you sleep in a reclining chair. To make your arm and shoulder feel better, keep a pillow under your elbow while you are lying down.
- Try to walk each day. Start by walking a little more than you did the day before. Bit by bit, increase the amount you walk. Walking boosts blood flow and helps prevent pneumonia and constipation.
- For 6 weeks, avoid lifting anything with your arm.
- Wait until your shoulder is completely healed and your doctor says it is okay before you do activities that stress your shoulder. These include chopping wood, playing contact sports or sports with risk of falls, lifting heavy weights, and doing overhead work such as painting a ceiling.

- You may drive when you are no longer taking pain medicine and feel you can control the car. This will take about 4 weeks or as your doctor says.
- If you had arthroscopic surgery, you can take a shower 48 to 72 hours after surgery. If your doctor agrees, remove the sling, and leave your arm by your side. To wash under your armpit, lean over and let the arm fall away from your body. Do not raise your arm.
- If you had open surgery, do not shower until your doctor says it is okay.
- Most people who work at desk jobs can return to work in 1 to 2 weeks. If you lift, push, or pull at work, you may be able to return in 3 to 4 months.

Diet

- You can eat your normal diet. If your stomach is upset, try bland, low-fat foods like plain rice, broiled chicken, toast, and yogurt.
- Drink plenty of fluids, unless your doctor tells you not to.
- You may notice that your bowel movements are not regular right after your surgery. This is common. Try to avoid constipation and straining with bowel movements. You may want to take a fiber supplement every day. If you have not had a bowel movement after a couple of days, ask your doctor about taking a mild laxative.

Medicines

- Your doctor will tell you if and when you can restart your medicines. The doctor will also give you instructions about taking any new medicines.
- If you stopped taking aspirin or some other blood thinner, your doctor will tell you when to start taking it again.
- Take pain medicines exactly as directed.



    - If the doctor gave you a prescription medicine for pain, take it as prescribed.
    - If you are not taking a prescription pain medicine, take an over-the-counter medicine such as acetaminophen (Tylenol), ibuprofen (Advil, Motrin), or naproxen (Aleve). Read and follow all instructions on the label.
    - Do not take two or more pain medicines at the same time unless the doctor told you to. Many pain medicines have acetaminophen, which is Tylenol. Too much acetaminophen (Tylenol) can be harmful.
- If you think your pain medicine is making you sick to your stomach:
    - Take your medicine after meals (unless your doctor has told you not to).
    - Ask your doctor for a different pain medicine.
- If your doctor prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.

Incision care

- If you had arthroscopic surgery and have a dressing over your cut (incision), keep it clean and dry. You may remove it 2 to 3 days after the surgery.
- If you had open surgery, do not remove your dressing until you see your doctor and they okay it. Keep it clean and dry.
- If your incision is open to the air, keep the area clean and dry.
- If you have strips of tape on the incision, leave the tape on for a week or until it falls off.

Lucas Rylander, MD
Orthopedic Surgery & Sports Medicine

Exercise

- You will need rehabilitation. This is a series of exercises you do after your surgery. Rehab helps you get back your shoulder's range of motion and strength. You will work with your doctor and physical therapist to plan this exercise program. To get the best results, you need to do the exercises correctly and as often and as long as your doctor tells you.

Ice

- Put ice or a cold pack on your shoulder for 10 to 20 minutes at a time. Try to do this every 1 to 2 hours for the next 3 days (when you are awake) or until the swelling goes down. Put a thin cloth between the ice and your skin.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

When should you call for help?

Call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have severe trouble breathing.
- You have chest pain, are short of breath, or cough up blood.

Call your doctor now or seek immediate medical care if:

- You have pain that does not get better after you take pain medicine.
- Your hand is cool or pale or changes color.
- Your cast or splint feels too tight.
- Your hand or fingers are tingly, weak, or numb.
- You are sick to your stomach or can't keep down fluids.
- You have loose stitches, or your incision comes open.

- You have signs of a blood clot in your leg (called a deep vein thrombosis), such as:
    - Pain in your calf, back of the knee, thigh, or groin.
    - Redness or swelling in your leg.
- You have signs of infection, such as:
    - Increased pain, swelling, warmth, or redness.
    - Red streaks leading from the area.
    - Pus draining from the area.
    - A fever.
- Bright red blood has soaked through the bandage over your incision.

Watch closely for changes in your health, and be sure to contact your doctor if:

- Your cast or splint feels too tight, or your hand or fingers are swollen.
- You do not get better as expected.