

Andrew J. Pastor, M.D.

## **Post Op Instructions Proximal Biceps Tenodesis**

**Activity level** – You have been placed in a sling post-operatively and this will most likely be the most comfortable for the following two to four weeks. The more you are able to allow your body to rest and recover initially, the better and faster your recovery. Sleeping may be difficult the first few days after surgery and comfortable positioning is important. Sleeping in an inclined position with the shoulder higher than the heart is usually most comfortable and can be done best in a reclining chair or lying propped up by pillows.

**Precautions/activities to avoid** – You should keep your elbow bent at 90 degrees. You should avoid straightening your elbow past that point until you are seen back in clinic. You should **not** lift anything heavier than a coffee cup for approximately 6 weeks. Stationary bike and elliptical trainer use, (without the arms), is fine as tolerated right after surgery. Running is better tolerated after 8 weeks.

**Sling** - The sling that you have been placed in is to support the weight of your arm and for comfort. It **should** be worn at all times. Desktop level activities, such as typing, are fine immediately.

**Dressings** - Dressings can be removed after **3 days** and the Steri-Strips will fall off on their own in 7-10 days. At this point, you may get incisions wet in the shower if they are dry and sealed over. Clean with simple soap and water and pat dry. Do not soak the wounds for the 2 weeks following surgery! You may use skin lotion in all places except over the incisions. Do not apply any special ointments or creams to the incision until the skin is completely healed, typically 3 weeks after surgery.

**Home exercises** - You **may** begin doing pendulum exercises in your sling the day after surgery as tolerated. These exercises will keep the shoulder joint mobile and prevent stiffness. Physical therapy may be prescribed when you return for follow up. This will consist primarily of a home exercise program.

**Return to work** - You may return to work, depending upon your job description, as early as 3 to 4 days after your surgery. You will need to be off all narcotic pain medication for your brain to function normally. Jobs that have more physical requirements may require longer time away. Driving requires being off all narcotic pain medications and being comfortable using the shoulder.

**Report any of the following symptoms immediately: Fever greater than 101° F, calf pain, pain not controlled by pain medications, redness swelling specific to the incision site, excessive bleeding, problems with pain medication, numbness and tingling of the arm that was operated on.** You may call our office and speak with a member of our office staff at **(425) 412-1875**.

**Follow up-** Follow up with Dr. Pastor in two weeks following surgery. This appointment should have been pre-arranged prior to surgery.

You will follow up again at 6 and 12 weeks after surgery.

Thank you! I appreciate the opportunity to participate in your care.

A handwritten signature in dark ink, appearing to read 'Andrew J. Pastor', with a stylized flourish at the end.

Andrew J. Pastor, M.D.  
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Based on protocols established by Winston J. Warne, M.D. - Chief of Shoulder surgery at the University of Washington Medical Center