Physical/Occupational Therapy Prescription

Name:		Date of Bi	rth:
Diagnosis:	: Biceps tendonitis	Code:	M75.20
Procedure	: Biceps Tenodesis	Surgery D	ate:
Instruction	ns:		
- Beg - Pro - Beg - Avo	motion: ng as needed for the first week post-operativel gin immediate range of motion including scap gress from passive to active-assisted to active gin with pendulums, pulleys, and wand/cane pid cross-body adduction and rotational motion d 40° external rotation in adduction have been	oular range of motion. motion as tolerated. exercises. ons in flexion or abduction	on until 140° elevation
acti - Beg tole - Foo - Do - Avo - Beg - Ret	ning: gin strengthening once pain has subsided and live range of motion, which usually occurs at a gin with isometrics with the arm at the side are erated. Cus strengthening upon the rotator cuff, deltoic not strengthen the rotation cuff more frequencial positions of impingement during strengthed gin eccentrics, plyometrics, and sport-specification to athletics, including pitching, at three magin throwing from the mound and collision specification.	four weeks post-operative and then progress to bands d, and scapular stabilizer atly than three times per vening. Exercises at two months nonths.	ely. and light weights as s. veek to avoid tendonitis. post-operatively.
stre	s: resisted elbow flexion or forearm supination essing the biceps tenodesis. vide a home exercise program.	for the first eight weeks μ	post-operatively to avoid
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Modalities		s par thoropist	
	re and ice after therapy. Remaining modalities	э рег шегарізс	
Frequency	2: 2 times/week Duration: 6 weeks		

Signature: ______Date: _____