

# **POST-OPERATIVE INSTRUCTIONS**

## **Biceps Tenodesis**

**Dr. Sostak**

[www.healthy-txt.com/drsoastak](http://www.healthy-txt.com/drsoastak) for more detailed post op instructions

**PAIN:** Your prescription for pain medication will be called into the pharmacy of your choice before you leave the surgery center. After the first day or two, as the pain lessens, you may decrease the frequency with which you take the medication. Remember, the medications are not necessarily meant to completely eliminate your pain, only to make it more bearable.

Narcotic pain medications can cause constipation; you may wish to use an over-the-counter stool softener to help prevent this. Narcotic pain medications can cause constipation; I recommend using Senokot-S, an over-the-counter stool softener, 1 tab twice a day to help prevent this. You can increase to 2 tabs twice a day as needed. In addition Miralax or Milk of Magnesia can be used if no results with the Senokot-S. Use ice or a cold therapy unit constantly for the first 48 hours, then as frequently as needed.

**MILD PAIN:** If you are having minimal pain and would like to switch to a milder medication, please take Tylenol/acetaminophen (extra strength or regular). Do not take Tylenol and norco together (this would be too much acetaminophen). Do not exceed more than 4000mg of Tylenol/acetaminophen in a 24 hour period. Try to avoid medications such as Advil, Aleve, Motrin, or Ibuprofen for about 3 months after surgery- some studies show that these medications could slow healing of your surgical repair.

**DRESSINGS:** You will have a soft dressing applied over your incisions. It is meant to absorb any leaking blood or fluid from the joint, and to protect from infection. Leakage immediately after surgery is normal and actually helps to drain some of the fluid that accumulates in the joint

during surgery. The dressings may become moist or blood-stained; this is normal and usually not a cause for alarm.

**BATHING:** You may remove your dressing 48 hours after your surgery to take a shower. For showering, you may remove your entire sling and let your arm rest at your side. Under the surgical dressing, you may have steri-strips over your incisions (small white strips of tape). Please leave them in place until they fall off on their own or until they are removed at your first post-op appointment. You may let soap and water gently wash over your incisions, but do not scrub them. Pat them dry with a towel, then recover each of the incisions with a band-aid if desired. You may not soak your shoulder in a bathtub or go into a pool or hot tub until incisions are well healed (usually takes a few weeks).

**PHYSICAL THERAPY:** Therapy typically starts 2-7 days after surgery. The timing for when you begin physical therapy will be individualized based on your surgery. Most patients will go to physical therapy for 2-3 months.

**OFFICE VISIT:** Your first post-op visit will be scheduled 7-10 days after surgery. At this visit, we'll check your incisions and answer any questions you may have.

**WHEN TO CALL:** Please call our office at (630) 584-1400 if you develop a fever greater than 101°F, increasing pain that is not responding to pain medication, redness around incisions or shoulder, increased swelling, persistent bleeding or drainage, or drainage other than clear fluid or blood. If it is after hours, the answering service will contact the physician assistant on call.

It is normal to develop bruising to the operative arm. Some people have bruising across the chest all the way down to the hand. It can also be normal to develop swelling to the arm and hand. Gravity tends to pull fluid down the arm. Your body will be able to reabsorb this fluid but it may take a few weeks. If the swelling becomes increasingly painful and more tender to the touch, please let our office know.

**AFTER SURGERY:** You will be receiving a post-operative phone call from the surgical staff within a few days after surgery to check on you and assist you with any concerns.

**DRIVING:** Please do not attempt driving for about 3 weeks after surgery. This is for your safety, as well as other drivers- please do not attempt to drive with only one hand. Reasons for no driving post operatively: A quick, reactive motion of the shoulder while driving could damage your surgical repair. Secondly, you should not drive while taking any narcotic pain medications.

**SLING:** The sling should be worn at all times for the first 24 hours after surgery. After this time, please continue using your sling when you are up and walking and if needed when sleeping. While you are sitting/ resting, you may remove the sling as long as your upper arm/shoulder stays near your body. You may take off the entire sling up to 3 times daily to take a break from it. Typically sling should be used for up to 3 weeks post op.

**MOTIONS TO AVOID:** Do not lift anything more than one pound until your physical therapist has progressed you to that point in therapy. It will be approximately 8 weeks for your restrictions. It is ok to gently bend your elbow and use your hand to do things like typing.

**SLEEPING:** You may wear the sling for comfort to sleep after surgery, but this is optional. Some patients find it more comfortable to sleep upright (in a recliner chair) for a few days to weeks after surgery- this is optional.

**RETURN TO WORK:** This depends on the nature of your job. If you have a desk job or can work from home, you may be able to do computer/phone work within 1 week of surgery. However, you may not drive yourself to work for 3-4 weeks.

If you have a labor-intense job, or job that requires heavy lifting/ repetitive use of your arm, you may need to be off full duty work for 3 months. You will have restrictions for 3-4 months after your biceps tenodesis. Some employers allow light-duty, and we can give you work restriction notes at each post-operative visit if necessary.

## **MOST COMMON QUESTIONS**

### **Proximal Biceps Tenodesis**

**How should I be using my sling?** The sling should be worn at all times for the first 24 hours after surgery. After this time, please continue using your sling when you are up and walking and if needed when sleeping. While you are sitting/resting, you may remove the sling as long as your upper arm/shoulder stays near your body. You may take off the entire sling up to 3 times daily to take a break from it. Typically sling should be used for up to 3 weeks post op.

**What motions should I avoid/what motions are safe?** You may gently bend your elbow, keeping your upper arm near the body. It is ok to use your hand to do things like typing (as long as your shoulder stays near your body). For example, you should put a computer keyboard in your lap instead of reaching out on a table for your keyboard). In therapy, your therapist will start active and passive motion immediately. The main restriction will be no resisted elbow flexion greater than 1 pound for 8 weeks. Resistance will progress after 8 weeks. Full unrestricted elbow flexion will be allowed at 12 weeks. This protects your bicep repair and allows your body to heal.

**When can I drive?** Please do not attempt driving for about 3 weeks after surgery. This is for your safety, as well as other drivers- please do not attempt to drive with only one hand. Reasons for no driving post operatively: A quick, reactive motion of the shoulder while driving could damage your surgical repair. Secondly, you should not drive while taking any narcotic pain medications.

**How should I be sleeping?** Please try to wear the sling while you are sleeping until your first follow up appointment. Some people find it more comfortable to sleep upright (in a recliner chair) for a few days to weeks after surgery- this is optional.

## **HOW CAN I LEARN MORE ABOUT PROXIMAL BICEPS TENODESIS SURGERY?**

Please visit <http://orthoinfo.aaos.org/topic.cfm?topic=a00031>

## **SPORTS SPECIFICS**

### **PROXIMAL BICEPS TENODESIS**

We know you are eager to return to your sports and hobbies. We want to guide you safely through that process. Please use the following as a guide

#### **GOLF**

6 weeks post-op: Putting

2 months post-op: Chipping, pitching, and half-swings with your short irons

3 months post-op: Full but gentle swings with irons

4 months post-op: Full play with no restrictions

#### **BASKETBALL**

1 month post-op: jogging, light dribbling drills

2-3 months post-op: Free-throws, passing drills, “shooting around,” but no contact

4 months post-op: No restrictions

#### **FOOTBALL**

1 months post-op: Jogging

2 months post-op: Agility/plyometric training with the guidance of a professional

4 months post-op: No restrictions

#### **BASEBALL/SOFTBALL**

2 months post-op: Jogging and light throwing drills (with guidance of physical therapist)

3 months post-op: Throwing/batting drills

4 months post-op: No restrictions

#### **WEIGHT LIFTING**

Please follow the instructions of your physical therapist. Once you are nearing the end of physical therapy (typically 3 months post-op), your

therapist can create a safe “return-to-lifting” program. Physical Therapists and Athletic Trainers can outline a specific plan for you.