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**Subacromial Decompression with Distal Clavicle Excision and Biceps Tenodesis**

Name \_\_\_\_\_

Date \_\_\_\_\_

Diagnosis \_\_\_\_\_

Date of Surgery \_\_\_\_\_

Frequency: 1 2 3 4 times/week Duration: 1 2 3 4 5 6 Weeks

\_\_\_\_\_ Weeks 1-4:

- PROM → AAROM → AROM as tolerated
- With a distal clavicle resection, hold cross-body adduction until 8 weeks post-op; otherwise, all else is the same in this rehab program
- No active biceps function for 4 weeks
- ROM goals: 140° FF/40° ER at side
- No abduction-rotation until 4-8 weeks post-op
- No resisted motions until 4 weeks post-op
- D/C sling at 1-2 weeks post-op; sling only when sleeping if needed
- Heat before/ice after PT sessions

\_\_\_\_\_ Weeks 4-8:

- D/C sling totally if not done previously
- Start gentle biceps active motion
- Increase AROM in all directions with passive stretching at end ranges to maintain shoulder flexibility
- Goals: 160° FF/60° ER at side
- Begin light isometrics with arm at side for rotator cuff and deltoid; can advance to bands as tolerated
- Physical modalities per PT discretion

\_\_\_\_\_ Weeks 8-12:

- Advance strengthening as tolerated: isometrics → bands → weights; 10 reps/1 set per rotator cuff, deltoid, and scapular stabilizers
- Only do strengthening 3x/week to avoid rotator cuff tendonitis
- If ROM lacking, increase to full with passive stretching at end ranges
- Begin eccentrically resisted motions, plyometrics, and closed chain exercises.

Modalities

Electric Stimulation

Ultrasound

Signature: \_\_\_\_\_

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