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# **Shoulder Biceps Tendinitis Physical Therapy Protocol**

#### Prescription

- PT / OT 2 times per week x 16 weeks, with 2 refill as needed
- Ordering physician Erick Marigi, MD (NPI: 1801393509)

#### **Points of Emphasis**

1. Goal of the protocol is to reduce pain and inflammation, improve range of motion, and strengthen the shoulder to prevent future injuries. Function, rather than time, determines a patient's progress through this protocol. However, we have placed some loose guidelines on timing.

#### Week 0 - 2: Acute Phase (Pain Management and Initial Healing)

- **Goal**: Reduce pain and inflammation.
- **Rest**: Avoid activities that exacerbate pain, especially overhead activities or heavy lifting.
- **Ice Therapy**: Apply ice to the affected area for 15 20 minutes every 2 3 hours to reduce inflammation.
- **Gentle Passive ROM**: Gentle movements within a pain-free range to maintain mobility. No forced motion.
- Isometric Exercises: Begin with gentle isometric exercises (muscle contractions without moving the joint) to maintain muscle tone without aggravating the tendon.

#### Week 2 – 6: Subacute Phase (Flexibility and Strength Building)

- **Goal**: Improve flexibility and start building strength.
- **Stretching Exercises**: Gentle stretching for the shoulder, including biceps stretches, to improve flexibility. Perform within a pain-free range.
- Strengthening Exercises: Begin with low-resistance exercises focusing on the rotator cuff and scapular stabilizers. Examples include IR and ER with a resistance band, scapular retraction, and shoulder abduction.
- Eccentric Exercises for Biceps: Slowly introduce eccentric strengthening exercises for the biceps to improve tendon health.
- **Continue Passive and Active ROM Exercises**: Increase the range as tolerated without pain.

## Week 6 - 12: Advanced Strengthening and Return to Activity

- **Goal**: Restore full strength and integrate into functional activities.
- Advanced Strengthening Exercises: Increase resistance for exercises gradually, focusing on the entire shoulder complex and upper extremity.
- Plyometric and Functional Exercises: Begin light plyometric exercises (if appropriate) and functional activities that mimic daily or sport-specific tasks.
- Sport-Specific Drills: If applicable, gradually reintroduce sport-specific activities, starting with low impact drills and gradually increasing intensity.
- **Education**: Teach proper techniques for lifting, posture, and sports to prevent recurrence.

### **Throughout All Phases**

- Pain Management: Continue to manage pain as needed with ice, heat, or NSAIDs.
- Monitor Symptoms: Adjust activities based on pain + inflammation, avoiding activities that exacerbate Sx.
- Guidance from the Physical Therapist: Regular check-ins with a physical therapist to adjust the program as needed based on progress and pain levels.

This protocol is not meant to be prescriptive but a recommendation to guide the rehabilitation process. Each patient's progress may vary based on specifics of their injury and procedure.

