



TenJet Percutaneous Tenotomy

PATIENT INFORMATION GUIDE

What Is Chronic Tendinopathy?

When a tendon is overloaded again and again, damage can outpace the body's ability to repair it, and healthy tendon fibers are slowly replaced by weak, disorganized scar-like tissue. This is called **tendinopathy** (or tendinosis). Despite the common name "tendinitis," long-standing tendon pain is mostly a *degeneration* problem, not an inflammation problem — which is why rest, anti-inflammatory pills, and steroid shots often fail to fix it for good.

How TenJet Works

TenJet is a minimally invasive procedure performed through a small skin nick, without open surgery. Under live ultrasound guidance, a thin instrument uses a fine, high-pressure stream of sterile saline to cut away and remove the damaged tissue while leaving healthy tendon in place. The goal is to clear out tissue that is not healing and restart the tendon's repair — which is why the recovery that follows matters as much as the procedure.

Areas We Commonly Treat

AREA	OFTEN CALLED	WHERE IT HURTS
Hip – gluteal tendons	"Hip bursitis"	Outside of the hip; lying on that side, stairs, standing on one leg
Shoulder – rotator cuff	Rotator cuff tendinitis	Front and side of the shoulder; reaching overhead or behind, sleeping on it
Knee – patellar & quadriceps tendons	"Jumper's knee"	Just below or above the kneecap; stairs, squatting, kneeling, jumping
Heel – Achilles tendon	Achilles tendinitis	Back of the heel or lower calf; first steps, walking uphill, running
Foot – plantar fascia	Plantar fasciitis	Bottom of the heel; first steps in the morning or after sitting
Elbow – forearm tendons	Tennis or golfer's elbow	Outside or inside of the elbow; gripping, lifting, turning a doorknob

Usually a Good Fit

- Tendon pain lasting **3 months or longer**
- Damaged tendon tissue confirmed on **ultrasound or MRI**
- Not enough improvement after a real trial of physical therapy
- Willing and able to follow the **6–8 week recovery plan**

Usually Not a Fit

- A **complete or large tear** — needs a surgical evaluation
- New pain, or no trial of therapy yet
- Infection in or near the area
- Pain from another source, such as arthritis or a nerve

Where TenJet Fits

Strengthening exercise remains the foundation of tendon treatment, before and after TenJet. Steroid injections calm pain for a short time but do not repair the tendon, and repeated injections can weaken it. TenJet is an option when good rehab has not been enough, before considering open surgery. Insurance coverage for this procedure varies and some plans do not cover it — we verify your benefits and discuss any cost with you before scheduling.

The Honest Summary

Many patients have meaningful, lasting improvement after TenJet, though no procedure works for everyone. Improvement is **gradual, not instant** — most people notice change over 6–12 weeks, with full benefit taking 3–6 months. The single biggest factor you control is protecting the tendon during recovery.

Nicolas Pugh, MD | Adrienne Anders, NP | Ted Chaka, PA

Abilene Pain Locations

Main: 1925 Hospital Place

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Contact Numbers

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Chaka: 325-468-8096

Online

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TenJet Tenotomy: Procedure & Recovery

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Before Your Procedure

- **Tell us about blood thinners.** Most can be continued, but we will give you specific instructions.
- **Avoid a steroid injection** in the area being treated in the weeks before your procedure.
- **Plan your week.** Arrange time off work, help at home, or lighter duty for the first week.
- **If you receive sedation,** you must have a driver and should not drive the rest of the day.
- **Wear loose clothing** that easily exposes the treatment area.
- **Bring your boot, sling, brace, or crutches** if you were asked to get them in advance.

The Day of Your Procedure

We locate the damaged tendon with ultrasound, clean the skin, and numb the area well; some patients also receive light sedation. The treatment itself usually takes 10–20 minutes, and you may feel pressure but should not feel sharp pain. The small skin opening is closed with an adhesive strip — usually no stitches — and you go home the same day. Expect soreness once the numbing wears off; it is common for the area to feel *worse* for the first several days before it starts to improve.

Your Recovery: The Most Important Part

WHEN	WHAT TO DO
Week 1 Limited activity	Rest the treated area. Light daily tasks and short walks are fine; no exercise, lifting, or workouts involving that area. Use any boot, sling, brace, or crutches exactly as instructed. Ice 15–20 minutes at a time for comfort. Keep the bandage dry for 48 hours, and no baths, pools, or hot tubs until the skin is fully closed.
Week 2 to week 6–8 No strenuous activity	Return to normal daily activities gradually. Begin physical therapy or your home program when instructed — controlled strengthening is part of the healing. No running, jumping, sports, heavy lifting, or gym workouts that load the treated tendon, even if it feels good.
After 6–8 weeks	Once cleared at your follow-up visit, gradually build back to exercise, sports, and heavy work. Increase slowly over several weeks rather than returning all at once.
3–6 months	Full benefit. The repaired tendon continues to strengthen during this time; keep up your exercises.

Important: Protect the Tendon for 6–8 Weeks

After TenJet, the tendon is rebuilding and is temporarily **weaker than it feels**. Many people feel much better within a few weeks and are tempted to resume their usual workouts, sports, or heavy work. Doing too much too soon is a common cause of setbacks and raises the risk of a tear. Following the **1 week of limited activity** and **6–8 weeks of no strenuous activity** gives the treatment its best chance to work.

Possible Risks

- Soreness, bruising, or swelling for several days to two weeks
- Infection, bleeding, or nerve irritation — uncommon
- Tendon weakening or tear — rare, most often with early overuse
- Not enough improvement; some patients need a repeat procedure or surgery

Call Our Office If You Have

- Fever, spreading redness, warmth, or drainage from the site
- Pain that keeps getting worse after the first several days
- A sudden “pop” with new weakness, or new numbness
- Calf swelling or pain — especially while wearing a boot. **Call 911 for chest pain or trouble breathing.**

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