



## **Pectoralis Major Repair**

### **Phase I – Immediate Post-Surgical (Week 1-2)**

Goals:

- Protect surgical repair
- Decrease pain & inflammation
- Achieve appropriate range of motion

Precautions:

- Strict sling immobilization for 4 weeks
- Remain in sling, only remove for showering
- Avoid abduction & external rotation activity
- No Passive Range of Motion (PROM) or Active Range of Motion of shoulder (AROM)
- No weight bearing with operative shoulder (no lifting)

#### Week 1

- Sling at all times except showering
- Sleep with sling
- Shower with operative arm held at the side
- Elbow, hand and wrist motion only
- Ball squeezes
- Cryotherapy for pain and inflammation

#### Week 2

- Start pendulum exercises

### **Phase II – Protection (Week 3-6)**

Goals:

- Gradually restore PROM of shoulder
- Do no overstress healing tissue

Precautions:

- Follow surgeon's specific ROM restrictions (dictated in operative note)
- No AROM or weight bearing

Criteria for progression to the next phase:

- Full flexion and internal rotation PROM
- PROM 30 degrees of external rotation at the side
- Can begin gentle external rotation stretching in the 90/90 position

#### Week 3-4

- Continue sling
- Pendulums
- Gentle non-painful PROM
  - External Rotation: Neutral
  - Extension: Neutral
  - Forward Elevation in plane of scapula: 90 degrees



- Abduction: 90 degrees
- Abduction External Rotation: None
- Submaximal, pain-free rotator cuff isometrics in neutral

#### Week 5-6

- Wean from sling
- Start active range of motion
- Non-painful active range of motion
  - External rotation: Neutral
  - Extension: Neutral

### **Phase III – Intermediate (Week 7-11)**

#### Goals:

- Gradually increase passive and active external rotation
- Independence with ADLs
- Enhance strength and endurance

#### Precautions

- No aggressive ROM or stretching
- No lifting with affected arm
- No strengthening activities that place significant stress across the shoulder in an abducted position with external rotation (i.e. push-ups, pectoralis flies, ect.)

#### Week 7-8

- Active and passive range of motion as tolerated, non-painful range of motion
- Scapular retraction strengthening
- Begin gentle isotonic and rhythmic stabilization techniques for rotator cuff strengthening (open and closed chain)

### **Phase IV – Strengthening (Week 12-15)**

#### Goals:

- Continue to increase external rotation PROM gradually
- Maintain full non-painful AROM
- Gradually progress activities to full function

#### Precautions:

- Do no stress the anterior shoulder with aggressive overhead strengthening

#### Week 12-15

- Start light resistance and strengthening
- Continue stretching and PROM in all planes to tolerance
- Range of motion as tolerated
- Progress muscular strengthening, stability and endurance, progress to full function

### **Phase V – Return to Activity (Week 16-24)**

#### Goals:

- Gradual return to strenuous work activities



- Gradual return to recreational activities
- Gradual return to sports activities

Precautions:

- Do not begin throwing or overhead athletic moves until 4 months post-op
- Weight lifting
  - Avoid wide grip bench press
  - No overhead press
  - No kipping pull-ups
  - No latissimus pull-downs behind the head

Week 16-20

- Continue progressing stretching and strengthening program
- Light weight lifting
- Can begin generalized upper extremity weight lifting with low weight and high repetitions

Week 21-24

- Continue stretching and strengthening
- Can begin golf, tennis, ect.
- May initiate interval sports program (if applicable)

**Criteria to Return to Sport**

- Surgeon clearance
- Pain free shoulder function
- Adequate active and passive range of motion necessary for required sport/activity
- Greater than 90% strength as compared to the non-operative shoulder