

## **PECTORALIS MAJOR TENDON REPAIR REHABILITATION PROTOCOL**

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The following protocol is intended as a guide for post-operative pectoralis major tendon repair rehabilitation. This does not represent a fully inclusive list of all interventions that can be used in the rehab process, and the therapist should use their clinical experience/judgment to help guide their patient through their recovery, consulting with the referring physician should questions arise.

### **0 – 4 Weeks Post-Op:**

#### Goals:

- Minimize pain and swelling
- Maintain light range of motion
- Use modalities as indicated to control pain and inflammation

#### Sling use/Precautions:

- Must wear sling at all times, except during home exercises and physical therapy

#### Exercises:

- Pendulum exercises 3 x/day
- Passive supine forward flexion with assistance of opposite hand (limit to 130 degrees)
- Hand, wrist, and elbow range of motion/strengthening as tolerated
- Peri-scapular strengthening exercises

#### Home instructions:

- Keep surgical dressing clean and dry
- Change surgical bandages on the 2<sup>nd</sup> day after surgery (keep covered until first clinic visit)
- Can bathe on the 2<sup>nd</sup> day after surgery (do not scrub, soak, or submerge the incisions)
- Must sleep in the sling
- May type or write with surgical side hand, but only while in the sling

#### **4 – 6 weeks Post-Op:**

Goals:

- Minimize pain
- Improve passive ROM
- Begin light isometric strengthening exercises

Sling use/Precautions:

- Continue to wear sling at all times, except during home exercises and physical therapy.

Exercises:

- Passive supine range of motion
  - Forward flexion to full as tolerated
  - External rotation to 25 degrees
- Avoid anterior capsule stretching
- Elbow extension and flexion
- Peri-scapular strengthening exercises
- Shoulder sub-maximal (pain free) deltoid and rotator cuff isometrics
- Wrist and hand exercises with light resistance if appropriate

Home Instructions:

- Continue to sleep in sling
- Can submerge incision in water after first post-op visit only when incision is completely healed
- Can continue to write or type with operative hand while in sling
- No lifting with operative shoulder
- Do not support bodyweight with operative shoulder

#### **6 – 12 Weeks Post-Op:**

Goals:

- Progress PROM

Sling use/Precautions:

- Discontinue sling use at 6 weeks post-op

Exercises:

- Progress PROM as tolerated in all directions (caution with external rotation)
- Begin active shoulder flexion, external rotation, and abduction
  - Avoid active internal rotation and horizontal adduction
- Avoid stretching anterior capsule
- Continue isometric exercises in all directions
- Continue scapular exercises
- Begin isometric exercises in flexion, extension, abduction, and external rotation
- Begin very light upper extremity resistive exercises avoiding IR until 10 weeks post-op
  - Avoid stress on the anterior capsule

Home instructions:

- Discontinue sling
- No overhead work
- No repetitive motions with the shoulder

**12+ Weeks Post-Op:**

Goals:

- Progress resistance exercises
- Restore full active ROM

Exercises:

- Begin active internal rotation and adduction motion
- Progress to/maintain full active ROM
- Progress upper extremity resistive strengthening exercises
- Gradual increase exercises to incorporate weights, progress as tolerated
- Can begin single arm strengthening of pec muscle and progress to resistance and weights
- Advance to plyometric exercises once aggressive resistive exercises have been achieved with full strength
- Incorporate sport-specific strengthening and plyometric exercises

Home Instructions:

- Work on restoring normal activities of daily living

- Progressively advance weight restriction for at-home activities
- Discuss specific activity/sport restrictions with your surgeon

**Criteria for Return to Sport:**

- Doctor has cleared athlete for return to sport
- Passing strength testing if requested
- Completion of throwing progression if applicable