



Pectoralis Major Tendon Repair

<u>Postop</u>	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>
Phase I Weeks 0-6 PT 1-2x/week HEP daily	Edema and pain control Protect surgical repair ROM: 0-3 weeks: None 3-6 weeks: Begin PROM Limit <ul style="list-style-type: none"> - 90° flexion - 45° ER - 20° extension - 45° abduction 	No active ROM Non weight bearing Sling: 0 – 2 weeks: <ul style="list-style-type: none"> - immobilized at all times day and night - Off for hygiene and gentle exercise according to instruction sheets 2-6 weeks: worn daytime only	0 – 2 weeks: Elbow/wrist ROM, grip strengthening 2-6 weeks: Begin PROM activities Limit 45° ER, 45° abduction Codman's, posterior capsule mobilizations Avoid stretch of anterior capsule
Phase II Weeks 6-12 PT 2-3x/week HEP daily	Begin active/ active-assisted ROM, passive ROM to tolerance Goals: <ul style="list-style-type: none"> - Full ER - 135° flexion - 120° abduction 	No sling No restricted IR/ Adduction	Continue Phase I work; begin active-assisted exercises, deltoid/rotator cuff isometrics at 8 weeks Begin resistive exercises for scapular stabilizers, biceps, triceps, and rotator cuff; initiate closed chain scapula
Phase III Weeks 12-16 PT 2-3x/week HEP daily	Gradual return to full AROM		Advance activities in Phase II; emphasize external rotation and latissimus eccentrics, glenohumeral stabilization; plank/push-ups @ 16 weeks Begin muscle endurance activities (upper body ergometer) Cycling/running ok at 12 weeks
Phase IV 4-5 Months PT 1-2x/week HEP daily	Full ROM Pain Free	Maintain ROM and flexibility	Aggressive scapular stabilization and eccentric strengthening Begin plyometric and throwing/racquet program, continue with endurance activities
Phase V 5-7 Months PT 1x/week HEP daily	Full ROM Pain Free		Progress Phase IV activities, return to full activity as tolerated