

Pectoralis Major Tendon Repair Protocol

Specific requests or deviations that fall outside the scope of this protocol will be made by the provider as appropriate for the individual patient.

PHASE 1 (1 – 10 DAYS)

- Sling use at all times (except therapy) for first 6 wks.
- Decongestive massage
- Icing every other hour 15-20 minutes
- Wrist and elbow ROM particularly focusing on elbow extension
- Soft tissue massage to surrounding musculature if needed: biceps, upper trapezius, levator, etc.

Goals:

- Maintain integrity of repair
- Gradually increase passive ROM
- Diminish pain and inflammation
- Prevent muscular inhibition

Precautions:

- Maintain arm in brace, remove only for exercise for first 6 wks.
- No lifting of any objects
- No excessive shoulder abduction, no external rotation past 40° with elbow at side
- No supporting of body weight by hands
- Keep incision clean and dry

PHASE 2 (2 – 6 WEEKS)

- Begin Codman's (long arm distraction – prone arm hang over edge of bed if too guarded)
- Begin gradual passive forward flexion as tolerated only in supine position
- Maintain ER restriction no greater than 40° with arm neutral
- Continue with soft tissue massage
- Ensure full elbow supination and extension, if not, mobilize radio-ulnar joint
- Begin using pulleys at week 4, pain free
- Scapular stabilization exercises.

Goals:

- Allow healing of soft tissue
- Do not overstress healing tissue
- Gradually restore full passive ROM
- Decrease pain and inflammation

Precautions: Avoid ER beyond 40 degrees with arm neutral

PHASE 3 (6 – 10 WEEKS)

- Begin AAROM, AROM with forward elevation and if pain free can begin scapular plane, continue toward full ROM
- Gradually increase external rotation toward full ROM
- Stretch/ensure scapular thoracic mobility, AC joint mobility
- Scapular isometrics
- Gentle capsular stretching
- AROM: Glenohumeral retraction and depression during forward elevation (flexion) while supine
- May begin light isometrics with elbow flexed to side
- Goal at 8 weeks is full passive range of motion

Goals: Full AROM, PROM, gradual restoration of shoulder muscular endurance.

Precautions: No unrestricted weight training or contact athletics

PHASE 4 (10 – 12 WEEKS)

- Begin side lying exercises, partial range of motion (side lying abduction, ER, IR, extension, flexion, adduction then gradually adding weight)
- Ensure rhomboids, lower and middle trap strong and able to withstand resistance without upper trap compensation
- Strengthen serratus anterior: prone prop, wall push up, etc.
- Rhythmic stabilization exercises in supine, side lying, etc.
- Overhead ball exercises
- Chest pass, light recreational throwing
- Standing flexion, adduction PRE's with very light free weights (begin with single planes and advance to combined motions)
- Can do resistive pulleys- light weight
- Check grip strength – address elbow and forearm with increased weight
- Continue soft tissue work/joint mobilization

Goal: Introduce muscular endurance with light weight and several repetitions without upper trap compensation

PHASE 5 (12 – 16 WEEKS)

- Seated: free weights pec fly, lat pull down (front grip to sternum – avoid excessive extension)
- Supine modified pec fly (elbows straight and bent) light resistance 1-2 pounds partial ranges, high repetitions
- Military press free weights; bench press free weights (very light weight – 10-20 pounds)
- Partial pushups while body weight is supported on ball progressing to full pushups
- Plyometrics against wall advancing as able
- Make sure full range of motion – continue soft tissue, joint mobilization as necessary

Goal: Introduce dynamic/functional movement sport-specific

PHASE 6 (17 – 25 WEEKS)

Goal: Advance strengthening and sport specific training