

University Orthopedics, Inc.

## PECTORALIS MAJOR REPAIR REHABILITATION PROTOCOL

This protocol was developed for patients who have had a pectoralis major repair. Please note this protocol is a guideline. Patients with additional surgery will progress at different rates. Achieving the criteria of each phase should be emphasized more than the approximate duration.

### **PHASE I: 1-2 WEEKS POSTOPERATIVE**

GOALS: Protection and Pain Control

#### AMBULATION AND BRACE USE:

Shoulder Immobilizer x 6 weeks  
– Even while sleeping  
– Place pillow under shoulder / arm while sleeping for comfort

#### EXERCISES:

Hand squeezing exercises  
Elbow and wrist active motion (AROM) with shoulder in neutral position at side  
Stationary bike (must wear immobilizer)

### **PHASE II: 2-4 WEEKS POSTOPERATIVE**

GOALS: Protection and Pain Control

#### AMBULATION AND BRACE USE:

Continue immobilizer x6 weeks

#### EXERCISES:

Continue appropriate previous exercises  
Supported pendulum exercises  
Resisted elbow/wrist exercises with light dumbbell (<5#), shoulder in neutral position

### **PHASE III: 4-6 WEEKS POSTOPERATIVE**

GOAL: Supine AAROM Flexion to 90 degrees

#### AMBULATION AND BRACE USE:

Continue immobilizer x6 weeks

#### EXERCISES:

Continue appropriate previous exercises

Shoulder shrugs, scapular retraction without resistance

AAROM supine with wand—flexion to 90 degrees

1-2 Finger isometrics x 6 (fist in box)

### **PHASE IV: 6-8 WEEKS POSTOPERATIVE**

GOAL: AROM Flexion to 120 degrees, Abduction to 90 degrees

#### AMBULATION AND BRACE USE:

D/C immobilizer

#### EXERCISES:

Continue appropriate previous exercises  
AROM in pain-free range as tolerated, No PROM  
AAROM (pulleys, supine wand, wall climb)  
– Flexion > 90 degrees  
– Abduction and ER to tolerance  
– IR and extension (wand behind back)  
Submaximal isometrics (continue 1-2 fingers for IR)  
Elliptical trainer – Lower extremity only  
Treadmill – Walking progression program

### **PHASE V: 8-12 WEEKS POSTOPERATIVE**

GOALS: Full AROM and 30 Wall push-ups

#### EXERCISES:

Continue appropriate previous exercises  
AROM, AAROM through full range, No PROM  
Light Theraband ex – ER, Abduction, Extension  
Biceps and Triceps PREs  
Prone scapular retraction exercises (without weights)

Push-up plus on wall – No elbow flexion > 90 degrees  
Body blade  
BAPS on hands  
Ball on wall (arcs, alphabet)  
Elliptical trainer (upper and lower extremities)  
Pool walking / running – No UE resistive exercises

### **PHASE VI: 3-4 MONTHS POSTOPERATIVE**

#### **GOALS:**

30 table push-ups  
Run 2 miles at an easy pace

#### **EXERCISES:**

Continue appropriate previous exercises  
PROM / mobilization as needed to regain full ROM  
Light Theraband ex – IR, Adduction, Flexion, Scaption  
– Continue ER, Abduction, Extension with increased resistance  
Push-up progression – Wall to table to chair (no elbow flexion > 90 degrees)  
Weight training with VERY LIGHT resistance (no flies or pull downs)  
– No elbow flexion > 90 degrees  
– Bench press  
– Seated row weight machine  
– Cable column  
Ball toss with arm at side using light ball  
UBE forwards and backwards at low resistance  
Stairmaster  
Treadmill – Running progression program  
Pool walking / running – With UE resistance (No swimming)

### **PHASE VII: 4-6 MONTHS POSTOPERATIVE**

#### **GOALS:**

Normal Pectoralis Major strength  
Resume all activities

#### **EXERCISES:**

Continue appropriate previous exercises with increased resistance  
Fitter on hands  
Ball toss overhead  
Push-up progression – Chair to regular  
Sit-ups  
Weight training with increasing resistance  
– No elbow flexion > 90 degrees  
– Military press, lat pull downs, flies  
– Gravitron for pull-ups and dips  
Swimming  
Running progression to track  
Transition to home / gym program

#### ***No contact sports until after 6 months post-op.***

**\*\*This protocol is designed to be administered by a licensed physical therapist and/or certified athletic trainer. Please do not hesitate to contact our office should you have any questions concerning the rehabilitation process.**