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# POSTOPERATIVE REHABILITATION FOLLOWING PECTORALIS MAJOR TENDON REPAIR

# PHASE I – IMMEDIATE POST OPERATIVE PHASE (WEEKS 0-2)

Goals Protect healing repaired tissue

Decrease pain and inflammation

Establish limited range of motion (ROM)

No exercise until end of 2<sup>nd</sup> week Exercises

Sling immobilization for 2 weeks Sling

Passive rest for full 2 weeks

Allow soft tissue healing to begin uninterrupted

Allow acute inflammatory response to run normal course

## PHASE II – INTERMEDIATE POST OPERATIVE PHASE (WEEKS 3-6)

Goals Gradually increase ROM

Promote healing of repaired tissue

Retard muscular atrophy

Sling immobilization until 3<sup>rd</sup> week Week 2

Begin passive ROM per guidelines (table 2) External rotation to 0 beginning 2<sup>nd</sup> week

Increasing 5 degrees per week Forward flexion to 45 degrees Increasing 5-10 degrees per week

Week 3 Wean out of sling immobilizer – week 3

Continue passive ROM per guidelines (table 2)

Begin abduction to 30 degrees Increasing 5 degrees per week

Begin gentle isometrics to shoulder/arm **EXCEPT** pectoralis major

Scapular isometric exercises

End of Week 5 Gentle sub-maximal isometrics to shoulder, elbow, hand and writs

> Active scapular isotonic exercises Passive ROM per guidelines

Flexion to 75 degrees Abduction to 35 degrees

External rotation at 0 degrees of abduction to 15 degrees

### PHASE III – LATE POST OPERATIVE PHASE (WEEKS 6-12)

Goals Maintain full ROM

Promote soft tissue healing

Gradually increase muscle strength and endurance

Week 6 Continue passive ROM to full

Continue gentle sub maximal isometrics progressing to isotonic exercises

Begin sub maximal isometrics to pectoralis major in a shortened position progressing to

neutral muscle tendon length.

Avoid isometrics in full elongated position

Week 8 Gradually increase muscle strength and endurance

Upper body ergometer

Progressive resistive exercises (isotonic machines)

Theraband exercises

PNF diagonal patterns with manual resistance

May use techniques to alter incision thickening

Scar mobilization techniques Ultrasound to soften scar tissue

Week 12 Full shoulder ROM

Shoulder flexion to 180 degrees Shoulder abduction to 180 degrees Shoulder external rotation to 105 degrees Shoulder internal rotation to 65 degrees

Progress strengthening exercises

Isotonic exercises with dumbbells

Gentle 2-handed sub maximal plyometric drills

Chest pass

Side-to-side throws

Bodyblade Flexbar

Total arm strengthening

### PHASE IV - ADVANCED STRENGTHENING PHASE (WEEKS 12-16+)

Goals Full ROM and flexibility

Increase muscle strength and power and endurance

Gradually introduce sporting activities

Exercise Continue to progress functional activities of the entire upper extremity

Avoid bench press motion with greater than 50% of prior 1 repetition max (RM)

Gradually work up to 50% of 1 RM over next month.

Stay at 50% prior 1 RM until 6 months post operative, then progress to full slowly after 6

month time frame

KEYS Don't rush ROM

Don't rush strengthening Normalize arthrokinematics Utilize total arm strengthening

Range of Motion Guidelines Following Pectoralis Major Repair

| Week | ER@0° I | Forward Abo<br>Flexion | duction |  |
|------|---------|------------------------|---------|--|
|      |         | riexion                |         |  |
| 2    | 0       | 45                     | 30      |  |
| 3    | 5       | 50-55                  | 35      |  |
| 4    | 10      | 55-65                  | 40      |  |
| 5    | 15      | 60-75                  | 45      |  |
| 6    | 20      | 65-85                  | 50      |  |
| 7    | 25      | 70-95                  | 55      |  |
| 8    | 30      | 75-105                 | 60      |  |
| 9    | 35      | 80-115                 | 65      |  |
| 10   | 40      | 85-125                 | 70      |  |
| 11   | 45      | 90-135                 | 75      |  |
| 12   | 50      | 95-145                 | 80      |  |

 $\overline{ER} = External rotation$