

- Decrease pain & inflammation

❖ **Precautions:**

- Avoid ER beyond 40 degrees w/ arm neutral

**Phase 3 (6-10 weeks)**

- Begin AAROM, AROM with forward elevation & 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 & depression during forward elevation (flexion) while supine
- May begin light isometrics w/ 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 & middle trap strong & 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 & advance to combined motions)
- Can do resistive pulleys -light weight
- Check grip strength – address elbow & forearm with increased weight
- Continue soft tissue work/joint mobilization

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

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### 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 & 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 & sport specific training

This protocol provides you with general guidelines for the rehabilitation of the patient undergoing pectoralis major tendon repair.

Specific changes in the program will be made by the physician as appropriate for the individual patient.

Questions regarding the progress of any specific patient are encouraged, & should be directed to Dr. Smith's team at **804-939-6662**.