

PEC REPAIR PROTOCOL

Shoulder immobilizer will be worn 4 weeks during the day and 1 additional week at night. On the first post-op visit, the patient's surgical dressings should be changed.

POST-OP DAYS 1-14:

PROM (**do not want to elicit a “stretching sensation”)

Flexion to 90 degrees

IR to 45 degrees in the scapular plane

Avoid Abduction and ER for first 2 weeks

- Shoulder Immobilizer x 4 weeks during the day, 1 more week at night
- Hand Gripping Exercises
- Wrist and hand ROM
- Elbow flexion & extension AAROM
- Shoulder Shrugs
- Codman's Pendulum Exercises
- Cervical ROM, lateral flexion
- Cryotherapy with e-stim

POST OP WEEKS 2-4 (DAYS 15-28):

PROM – continue to avoid aggressive stretching with PROM

Flexion to 120 degrees

Abduction to 90 degrees

IR as tolerated in scapular plane

ER to 15-20 degrees start at 20 degrees abduction and progress to stretching in scapular plane

- Submax isometrics (shoulder extension, abduction, ER, and triceps)
- AROM elbow flexion/extension (add weight as tolerated start with theraband resistance)
- Add resistance to gripping, wrist and forearm exercises
- Supported RS
- Scapular PNF

POST OP WEEKS 4-6 (DAYS 29-42):

Discontinue use of sling after 4 weeks during the day and 5 weeks at night

PROM:

Flexion to 150 degrees

Abduction to 120 degrees

ER 35 degrees by end of week 4; 50 degrees by end of week 5; 65 degrees by the end of week 6 in scapular plane

- Add bicep, gentle adduction, gentle IR, gentle flexion isometrics
- Scapular Retraction without resistance
- AAROM:
 - supine wand flexion and ER in scapular plane to range of motion limits
 - pulleys- flexion and scaption

POST OP WEEKS 6-8: (Day 43-56)

PROM: all motions to tolerance at 60-70 degrees of abduction

- Supine Balance point (flexion and D2), progressing to active supine flexion and D2
- Supine punch
- Rhythmic stabilization unsupported at 90 degrees of flexion
- Prone extension and prone row
- SL ER

POST OP WEEKS 8-12: (Day 57-84)

PROM: Continue Stretching and add joint mobs to achieve or maintain full range of motion

- UBE
- Prone horizontal abduction palm down initially and progress to horizontal abduction with thumb up and thumb down
- Prone flexion at 135 degree angle
- Rhythmic stabilization at various angles
- Standing PRE's and D2
- ER/IR with theraband resistance
- Horizontal abduction and adduction with theraband resistance
- Push-up plus on wall
- Bodyblade- IR/ER at side, 90 degrees flexion and scaption
- **Week 10** - progress closed chain exercises, weight bearing on an uneven surface (BAPS, BOSU)
- **Week 11:** wall push ups

POST OP WEEKS 12-16: (Day 85-112)

PROM: Continue Stretching and Joint Mobs if necessary

- **Week 12-** Standing D2 and Hor Abd with RS
Bodyblade at 90/90

90/90 ER/IR with theraband resistance

Impulse

- **Week 14-** 2 hand plyos: chest pass
overhead throw
rotation
woodchop
tricep slam
- **Week 15-** 1 hand plyos: semicircle and 90/90 wall dribbles
kneeling D2
- **Week 16-** Bodyblade 90/90
Kneeling ER flip plyos
Initiate hitting program and restricted sport activities (half golf
Swings and light swimming)

WEEK 18—Initiate Interval Throwing Program for throwing athletes

WEEK 20—Initiate pushups (begin narrow grip)

WEEK 24—Initiate light bench pressing with gradual progression to 6-10 rep maximum load by one year postoperatively

Please call with any questions!