

**PEC Major Tendon Repair Rehabilitation Protocol**

	RANGE OF MOTION	IMMOBILIZER	EXERCISES
<p><b>PHASE 1</b> 0-6 weeks</p>	<p>0-3 weeks: None 3-6 weeks: Begin PROM</p> <p>Limit 90 flexion, 45 ER, 20 extension, and 45 abduction</p>	<p>0-2 weeks: Immobilized at all times day and night</p> <p>Off for hygiene and gentle exercise according to instruction sheets</p> <p>2-6 weeks: worn daytime only</p>	<p>0-2 weeks: elbow/wrist ROM, grip strengthening at home only</p> <p>2-6 weeks: begin PROM activities</p> <p>Limit 45 ER, 45 abduction</p> <p>Codman's posterior capsule mobilizations; avoid stretch of anterior capsule</p>
<p><b>PHASE 2</b> 6-12 weeks</p>	<p>Begin active/ active-assisted ROM, passive ROM to tolerance</p> <p>Goals: Full ER, 135 flexion, 120 abduction</p>	<p>None</p>	<p>Continue Phase 1 work; begin active-assisted exercises, deltoid/rotator cuff isometrics at 8 weeks</p> <p>Begin resistive exercises for scapular stabilizers, biceps, triceps and rotator cuff*; initiate closed-chain scapula</p> <p>No resisted IR/adduction</p>
<p><b>PHASE 3</b> 6-12 weeks</p>	<p>Gradual return to full AROM</p>	<p>None</p>	<p>Advance activities in Phase 2; emphasize external rotation and latissimus eccentrics, glenohumeral stabilization; plank/ push-ups @ 16 weeks</p> <p>Begin muscle endurance activities (upper body ergometer)</p> <p>Cycling/running OK at 12 weeks</p>
<p><b>PHASE 4</b> 4-5 months**</p>	<p>Full and pain free</p>	<p>None</p>	<p>Aggressive scapular stabilization and eccentric strengthening</p> <p>Begin plyometric and throwing/ racquet program, continue with endurance activities</p> <p>Maintain ROM and flexibility</p>
<p><b>PHASE 5</b></p>	<p>Full and pain free</p>	<p>None</p>	<p>Progress Phase 4 activities, return to full activity as tolerated</p>

**\*Utilize exercise arcs that protect the anterior capsule from stress during resistive exercises, and keep all strengthening exercises below the horizontal plane in phase 2**

**\*\*Limited return to sports activities**