## NewportCare Medical Group

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## PEC MAJOR TENDON REPAIR REHABILITATION PROTOCOL

	RANGE OF MOTION	IMMOBILIZER	EXERCISES
PHASE I 0-6 weeks	<b>0-3 weeks</b> : None <b>3-6 weeks</b> : Begin PROM  Limit 90° flexion, 45° ER,  20° extension, 45°  abduction	0-2 weeks: Immobilized at all times day and night Off for hygiene and gentle exercise according to instruction sheets 2-6 weeks: Worn daytime only	<ul> <li>0-2 weeks: Elbow/wrist ROM, grip strengthening at home only</li> <li>2-6 weeks: Begin PROM activities</li> <li>Limit 45° ER, 45° abduction</li> <li>Codman's, posterior capsule mobilizations; avoid stretch of anterior capsule</li> </ul>
PHASE II 6-12 weeks	Begin active/active- assisted ROM, passive ROM to tolerance <b>Goals:</b> full ER, 135° flexion, 120° abduction	None	Continue Phase I work; begin active- assisted exercises, deltoid/rotator cuff isometrics at 8 weeks  Begin resistive exercises for scapular stabilizers, biceps, triceps and rotator cuff*; initiate closed-chain scapula
PHASE III 12-16 weeks	Gradual return to full AROM	None	No resisted IR/Adduction  Advance activities in Phase II; emphasize external rotation and latissimus eccentrics, glenohumeral stabilization; plank/push-ups @ 16 wks
PHASE IV 4-5 months**	Full and pain-free	None	Begin muscle endurance activities (upper body ergometer)  Cycling/running okay at 12 weeks  Aggressive scapular stabilization and eccentric strengthening
			Begin plyometric and throwing/racquet program, continue with endurance activities  Maintain ROM and flexibility
PHASE V 5-7 months	Full and pain-free	None	Progress Phase IV activities, return to full activity as tolerated

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

<sup>\*\*</sup>Limited return to sports activities