

JOSEPH D. LAMPLOT, M.D. ORTHOPAEDIC SURGERY & SPORTS MEDICINE

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PECTORALIS REPAIR POSTOPERATIVE REHAB PROTOCOL

DATE OF SURGERY:

<u>Phase</u>	Precautions	Treatment Recommendations	<u>Emphasize</u>
Weeks 0-6 Recovery	 Sling immobilization at all times and night FOF WEEKS 0-2. Off for hygiene and gentle exercises (elbow/wrist/hand ROM only) Sling immobilization during daytime only FOR WEEKS 2-6. 	PROM	 Pain/edema control Proper sling position/ compliance Protection of repair Pain-free HEP
Weeks 6-12 Motion, isometric strength	 Discontinue sling AVOID RESISTED IR/ADDUCTION Avoid pain with ADLs, PT, HEP 	Scapular plane ROM Goals (do not force but eval for stiffness) Elevation ER Abduction Weeks 6-12 135° full 120° Exercises Continue Phase 1 exercises 8 weeks: Active-assisted exercises, deltoid/cuff isometrics • Resisted exercises for scapular stabilizers, biceps, triceps, cuff, closed chain scapula	 Regaining ROM No resisted IR/adduction in order to protect repair
Weeks 12-16 Intermediate Strength	 Avoid pain with all activities 	 Emphasize ER and latissimus eccentrics Glenohumeral stabilization exercises Plank/push-ups @ 16 weeks Begin muscle endurance (ok for UE ergometer) Cycling/running OK 	 Progressive strengthening Avoid pain with rehab
4-5 months	 Avoid too much too soon 	 Full and pain-free ROM Aggressive scapular stabilization and eccentric strengthening Begin plyos, throwing/racket program if applicable Continue with more aggressive muscle endurance exercises 	 Maintain ROM and flexibility, optimize strength
5-7 months	 None 	 Return to full activity as tolerated 	 Ensure ready for return to sport

Protocol adapted from Brian Cole, MD rehab guidelines

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