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# **PEC MAJOR REPAIR PROTOCOL**

## **DR ELRASHIDY – TRI-VALLEY ORTHOPEDICS**

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### **Phase I (Weeks 0-4): Post-Surgical and Protection Phase**

#### **Goals**

- Pain and inflammation control
- Protect repair integrity
- Gradually increase PROM

#### **Precautions (Through Week 6)**

- Maintain arm in sling for 6 weeks, remove for exercise only
- No lifting, no body weight support with hands
- No shoulder abduction, forward elevation or ER
- No excessive or aggressive stretching or sudden movement

#### **Weeks 0 - 2**

- Shoulder sling for 6 weeks
- Elbow, wrist and hand grip and AROM exercises
- Begin pendulum exercises as tolerated
- Stationary bicycle, with shoulder sling on

#### **Weeks 2 - 4**

- Continue shoulder sling for 6 weeks
- Begin PROM forward elevation (no greater than 90°)
- Continue previous exercises, pendulums

### **Phase II (Weeks 5-8): Intermediate and Range of Motion Phase**

#### **Goals:**

- Supine PROM flexion to 130°
- Attain full PROM and begin AAROM
- Protect repair

#### **Weeks 5 - 6**

- Continue shoulder sling for 6 weeks
- Continue previous exercises
- PROM and supine AAROM forward flexion up to 90°, with arm in adduction
- Shoulder shrugs, scapular retraction with no resistance

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### Weeks 7 – 8

- Discontinue sling and continue previous exercises
- Start AAROM and pulleys as follows:
  - Flexion > 90°
  - Abduction and external rotation to tolerance
  - Internal rotation and extension, arm behind back
- Submaximal isometrics (avoid shoulder adduction, IR)
- Ok to use arm with ADLs and begin gentle AROM
- Treadmill walking and Elliptical trainer without arm motion component

### **Phase III (Weeks 8-16): Early strengthening**

#### **Goals :**

- Full and non-painful AROM
- Begin pectoralis major strengthening after 3 months
- Gradual return to functional activities

### Weeks 8 – 12

- Continue previous exercises
- AROM, AAROM through full motion
- Light theraband exercises for external rotation, abduction, extension
- Prone scapular retraction exercises, no weights
- Standing wall push-ups, no elbow flexion >90°
- Elliptical trainer, upper and lower extremities

### Months 3 – 4

- Continue previous exercises and maintain full ROM
- Light theraband exercises: Add internal rotation, adduction, flexion
- Push-up progression – wall → table → chair, no elbow flexion >90°
- **Very light** resistive weight training, no pec flies, bench press or pull downs
  - No elbow flexion >90°
  - Seated rows
  - Single arm pulleys/cables for IR, forward elevation, adduction
  - Rotator cuff and periscapular strengthening
- Treadmill running
- Ball toss with arm at side, light weight

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### Phase IV (Months 4-6): Advanced strengthening

#### Months 4 – 6

**Goals:** Maintain pain-free full ROM, Advance strengthening, Gradual return to functional activities

- Continue previous exercises with increasing resistance
- Overhead ball toss
- Full running program
- Swimming
- Weight training with increasing resistance
  - No bench press
  - May start pull downs and pec flies with light resistance only

### Phase V – Return to full activity

#### Months 6+

- Full activities as tolerated
- Gradual return to recreational sports and/or strenuous work activities
- Continue previous exercises with increasing weight / resistance
- May perform bench press, light weight and high repetition
  - Advance weight as tolerated
  - Recommend indefinitely avoiding high weight, low repetition

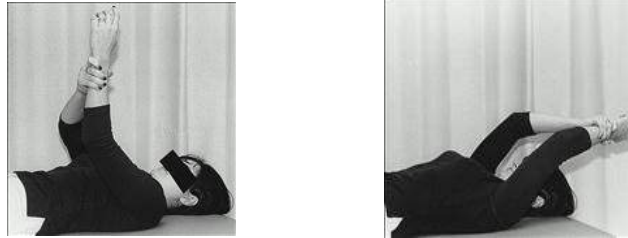
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## PEC REPAIR PROTOCOL

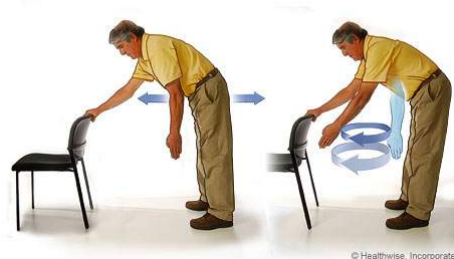
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### EXERCISES: PHASE I

- 1) **Passive Supine Flexion/Forward Elevation:** Lie on your back. Grasp wrist with non-op hand and passively raise operative arm overhead. Aim to get to 90° by 3 weeks. In week 4, progress to 120°. Then full ROM after 6 weeks. Keep elbow bent and relaxed. Repeat 10 reps, 2-3 times/day



- 2) **Passive Pendulum Exercise:** Hold onto a chair back with non-op hand and bend forward. Let the operative arm hang down passively. Use body to passively swing arm: Forward, backward, side to side and in small circles. Repeat throughout the day as tolerated



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