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PEC MAJOR TENDON REPAIR
REHABILITATION PROTOCOL

	RANGE OF MOTION	IMMOBILIZER	EXERCISES
<i>PHASE I</i> <i>0-6 weeks</i>	0-3 weeks: None 3-6 weeks: 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	0-2 weeks: Elbow/wrist ROM, grip strengthening at home only 2-6 weeks: Begin PROM activities Limit 45 ° ER, 45° abduction Codman 's, posterior capsule mobilizations; avoid stretch of anterior capsule
<i>PHASE II</i> <i>6-12 weeks</i>	Begin active/active- assisted ROM, passive ROM to tolerance Goals: 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 No resisted IR/Adduction
<i>PHASE III</i> <i>12-16 weeks</i>	Gradual return to full AROM	None	Advance activities in Phase II; emphasize external rotation and latissimus eccentrics, glenohumeral stabilization; plank/push-ups @ 16 wks Begin muscle endurance activities (upper body ergometer) Cycling/running okay at 12 weeks
<i>PHASE IV</i> <i>4-5 months**</i>	Full and pain-free	None	Aggressive scapular stabilization and eccentric strengthening Begin plyometric and throwing/racquet program, continue with endurance activities Maintain ROM and flexibility
<i>PHASE V</i> <i>5-7 months</i>	Full and pain-free	None	Progress Phase IV activities, return to full activity as tolerated

- ❖ 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
- ❖ Limited return to sports activities



For any questions or concerns regarding the protocol or rehabilitation process please contact

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