**Pec major repair - rehabilitation programme**

# 0 – 6 weeks after surgery

* Wear sling when walking or travelling
* Otherwise remove sling with arm supported on a chair, table or pillow and use hand the hand can be used for eating, computer and paperwork etc
* Begin passive motion 0-90° forward flexion supine **but the arm must be kept adducted and internally rotated during these exercises**
* Don’t move the shoulder too much
* At least 3 times a day, wrist and hand exercises with a squeeze ball
* Physiotherapy to teach isometric muscle contraction of deltoid and scapular stabilizers, elbow and hand movement
* Review with surgeon at 2 week and 6 week mark

# 6 – 12 weeks after surgery

* No more sling, except if in a rowdy crowd situation
* increase forward elevation 0-180° and begin external rotation from against tummy to 0°
* No abduction for 4 months until all other movements are full

**12 – 16 weeks after surgery**

* Continue stretching of the shoulder including to full ER by 16 weeks gently to protect Pec repair
* Begin formal strengthening internal/external rotation, retraining of scapulo-thoracic rhythm and proprioception.
* Patient may walk / jog and swimming (breaststroke only)

# 16 – 24 weeks after surgery

* obtain full range of motion slowly over 24 weeks
* sports specific strength and endurance training (tennis overhead serve, freestyle swimming, surfing) when fully rehabilitated with respect to motion, strength & proprioception This usually does not occur until 6 months , 9 months for throwing.

Patient may feel more comfortable with shoulder taped or strapped for sports