

Post-Operative Instructions **Pectoralis Major Repair**

Day of Surgery

- A. Relax. Diet as tolerated.
- B. Icing is important for the first 5-7 days post-op. While the post-op dressing is in place, icing should be done continuously. Once the dressing is removed on the first or second day, ice is applied for 20-minute periods 3-4 times per day. Care must be taken with icing to avoid frostbite.

You will be contacted by East Coast Orthotics regarding an ice compression unit to be used after surgery. This helps with pain and swelling but typically is not covered by insurance. The cost is \$200-300 for a 2-week rental. Alternatively, ice gel packs with a shoulder or knee sleeve can be provided by the hospital for a minimal charge.

- C. Pain medication as needed every 6 hours (refer to pain medication sheet)

First Post-Operative Day

- A. Continue ice pack everyone to two hours while awake and pain meds as needed or cryocuff or gameready. Ice cuff as per instructions.

Second Post-Operative Day

- A. Continue ice pack up to post op day 2-5 and utilize after physical therapy sessions.

Third Post-Operative Day

- A. You may remove surgical bandage and shower this evening. Apply 4x4 (or similar size) waterproof bandage to these wounds prior to showering and when showering is complete apply fresh waterproof bandage. You will need to follow this routine for 2 weeks after surgery.

Physical Therapy

- A. Physical Therapy should begin at 6 weeks. Please call your preferred facility to make an appointment.

**Note: Your shoulder will be very swollen. It may take a week or longer for this to go away. It is also common to notice burning around the shoulder as the swelling resolves. If excessive bleeding occurs, please notify Dr. Jazrawi.*

Call our office @ 646-501-7223 option 4, option 2 to confirm your first postoperative visit, which is usually about 1-2 weeks after surgery. If you are experiencing any problems, please call our office or contact us via the internet at www.newyorkortho.com.

Rehabilitation Protocol: Pectoralis Tendon Repair

Name: _____

Date: _____

Diagnosis: _____

Date of Surgery: _____

Phase I (Weeks 0-2)

- **Sling:** Sling immobilization for 2 weeks
- **Range of Motion:** Passive rest for full 2 weeks
- **Therapeutic Exercises:** No exercise until end of 2nd week

Phase II (Weeks 3-6)

- **Sling:** Wean out sling immobilizer – **week 3**
- **Range of Motion:** Begin Passive ROM
 - External rotation to 0 (**week 2**) – Increasing 5° per week
 - Forward flexion to 45° (**week 2**) – Increasing 5-10° per week
 - **Week 3:** Begin abduction to 30° – increasing 5° per week
 - **Week 5:** Flexion to 75°, abduction to 35°, external rotation to 15° (at 0° of abduction)
- **Therapeutic Exercises**
 - Gentle isometrics to shoulder/arm **EXCEPT** pectoralis major (**week 3**)
 - Scapular isometric exercises (**week 3**)
 - Gentle submaximal isometrics to shoulder, elbow, hand, and wrist (**week 5**)
 - Active scapular isotonic exercises (**week 5**)

Phase III (Weeks 6-12)

- **Range of Motion:** Continue passive ROM to full – full shoulder ROM by **week 12**
- **Therapeutic Exercises**
 - Continue gentle sub maximal isometrics progressing to isotonic (**week 6**)
 - Begin sub maximal isometrics to pectoralis major in a shortened position progressing to neutral muscle tendon length (**avoid** isometrics in full elongated position) (**week 6**)
 - Progressive resistive exercises – isotonic machines (**week 8**)
 - Theraband exercises (**week 8**)
 - Scar mobilization techniques (**week 8**)
 - **Week 12:** Progress strengthening exercise: isotonic dumbbells, 2-handed sub maximal plyometrics

Phase IV (Weeks 12-16+)

- Gradual return to athletic activity as tolerated
- Continue to progress functional activities of the entire upper extremity
- Avoid bench press motion with greater than 50% of prior 1 repetition max (RM)
- Gradually work up to 50% of 1 RM over next month
- Stay at 50% of prior 1 RM until 6 months post op, then progress to full slowly

Frequency: _____ times per week

Duration: _____ weeks

Signature: _____

Date: _____