

REHABILITATION PROTOCOL

Pectoralis Major Repair

Your guide to recovery



DR HARRY CONSTANTIN
ORTHOPAEDIC SURGEON



WELCOME

Your guide to recovery

following pectoralis major repair or reconstruction

This rehabilitation guide has been carefully developed to support your recovery following surgery and to help you achieve the best possible outcome.

It outlines the recommended rehabilitation pathway, providing guidance for your recovery at home and serving as a resource for you and your physiotherapist throughout the rehabilitation process.

Recovery is a gradual and individual journey. While this protocol provides a structured framework, your rehabilitation may be adjusted according to your specific procedure, progress and goals.

We encourage you to work closely with your physiotherapist and follow the advice provided by Dr Harry Constantin and his team during consultations.

We are committed to supporting you throughout your recovery and helping you return safely and confidently to the activities that matter most to you.



Dr Harry Constantin

ORTHOPAEDIC SURGEON

North Sydney Orthopaedic and Sports Medicine Centre
T (02) 9409 0503 E team@drharryconstantin.com

Your recovery in *four phases*

This protocol is designed to guide you and your physiotherapist through your recovery. Your treatment may be adjusted to meet your individual needs. Never push through sharp pain, and always keep your exercises within your movement limits, especially for external rotation.

Repeat your exercises 3 times a day, 5 days a week.

1	Protection & Early Healing	WEEKS 0-4
2	Controlled Motion & Neuromuscular Control	WEEKS 5-8
3	Strengthening & Functional Range	WEEKS 9-12
4	Advanced Strength & Sport Preparation	WEEKS 13 +

Key principles



Follow the movement limits set by Dr Constantin



Avoid pain and sharp, sudden movements



Focus on control, posture and gradual progression – not speed



Regular physiotherapy reviews keep your recovery safe and steady

Progressive loading

- **First 12 weeks** – light load only (½–1 kg or a light Theraband).
- **After 12 weeks** – moderate load, if pain-free.
- **Heavy or overhead work** – delay for at least 6 months.
- **Individualised recovery** – progress depends on tear size, tissue quality, age and any additional procedures.
- **Healing takes time** – tendon-to-bone healing is slow; timelines are guides and may need extending.

Protect your tendon repair



Sling at all times for 4 weeks

No active shoulder movement, and no lifting your arm out to the side (abduction).

Things to avoid



External rotation to neutral only
Weeks 0–4



Passive elevation to 45° only
Weeks 0–4



No lifting or pushing through the arm
Weeks 0–4



No passive abduction or resisted adduction
Weeks 5–8



Avoid excessive external rotation or extension
Weeks 5–8



No maximal lifts
Until cleared by Dr Constantin

Key milestones

WEEKS 5–8	Wean the sling. Active-assisted elevation to 90°. Light cardio in the sling.
WEEKS 9–12	Light resistance bands. Low-load sport drills.
12 WEEKS +	Moderate loads if pain-free. Gradual return to training.
6 MONTHS +	Heavy or overhead work.
6–9 MONTHS	Full return to sport (typically).

Protection & Early Healing

WEEKS 0-4

1

GOALS

Protect the surgical repair. Reduce pain and inflammation. Maintain mobility of the nearby joints.

PRECAUTIONS

- ◆ Sling at all times
- ◆ No active shoulder movement
- ◆ No shoulder abduction
- ◆ No lifting or pushing through the arm

PROGRESSION

- Gentle passive elevation to 45°
- External rotation to neutral

STRENGTH & CONTROL

Hand, wrist and elbow range of motion. Scapula setting exercises.

WORK & SPORT

No sport.

MAINTENANCE

Pain control and postural awareness.

Controlled Motion & Neuromuscular Control

2

WEEKS 5-8

GOALS

Restore controlled shoulder motion. Begin neuromuscular control.

PRECAUTIONS

- ◆ Avoid excessive external rotation or extension
- ◆ No resisted adduction
- ◆ No passive abduction

PROGRESSION

- Active-assisted range of motion to 90° forward elevation
- Gradually wean the sling

STRENGTH & CONTROL

Isometric shoulder activation. Scapula control drills.

WORK & SPORT

Light, non-impact activity only. Light cardiovascular exercise can start in the sling.

MAINTENANCE

Daily range of motion exercises.

Strengthening & Functional Range

3

WEEKS 9-12

GOALS

Near-full range of motion. Improve strength and control.

PRECAUTIONS

- ◆ Avoid heavy pectoralis loading

PROGRESSION

- Light resistance bands
- Functional movement patterns

STRENGTH & CONTROL

Isotonic rotator cuff exercises. Closed-chain stability drills.

WORK & SPORT

Begin low-load sport drills.

MAINTENANCE

Endurance and flexibility work.

Advanced Strength & Sport Preparation

WEEKS 13 +

GOALS

Restore power and endurance. Prepare to return to sport.

PRECAUTIONS

- ◆ Avoid maximal lifts until cleared by Dr Constantin

PROGRESSION

- Progressive resistance
- Dynamic control drills

STRENGTH & CONTROL

Modified pressing patterns. Medicine ball drills.

WORK & SPORT

Gradual return to training. Full return to sport typically takes 6–9 months.

MAINTENANCE

Ongoing strength program.