

## Rehabilitation Protocol: Arthroscopic Meniscus Repair

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Diagnosis: \_\_\_\_\_

Date of Surgery: \_\_\_\_\_

**Phase I (Weeks 0-6)**

- **Weightbearing:**
  - Non weight bearing with brace locked in extension (**Weeks 0-4**)
  - Non weight bearing with brace unlocked (**Weeks 5-6**)
- **Hinged Knee Brace:** worn for 6 weeks post-op
  - Locked in full extension for ambulation and sleeping – remove for hygiene and PT
- **Range of Motion:** AAROM → AROM as tolerated
  - **Weeks 0-6:** No flexion greater than 90°
- **Therapeutic Exercises**
  - Quad/Hamstring sets, heel slides, straight leg raises, co-contractions
  - Isometric abduction and adduction exercises
  - Patellar Mobilizations
  - At **6 weeks:** can begin partial wall-sits – keep knee flexion angle less than 90°

**Phase II (Weeks 6-12)**

- **Weightbearing:** As tolerated – discontinue crutches
- **Hinged Knee Brace:** Discontinue when patient has achieved full extension with no extension lag
- **Range of Motion:** Full active ROM
- **Therapeutic Exercises**
  - Closed chain extension exercises, Hamstring strengthening
  - Leg press – 0-90°
  - Proprioception exercises
  - Begin use of the stationary bicycle

**Phase III (Weeks 12-16)**

- **Weightbearing:** Full weightbearing with normal gait pattern
- **Range of Motion:** Full/Painless ROM
- **Therapeutic Exercises**
  - Continue with quad and hamstring strengthening
  - Focus on single-leg strength
  - Begin jogging/running
  - Plyometrics and sport-specific drills

**Phase IV (Months 4-6)**

- Gradual return to athletic activity as tolerated
- Maintenance program for strength and endurance

**Comments:** Patients should avoid tibial rotation for 4-6 weeks post-op

Frequency: \_\_\_\_ times per week

Duration: \_\_\_\_ weeks

Signature: \_\_\_\_\_

Date: \_\_\_\_\_