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Arthroscopic Meniscal Repair Protocol

Name		Date	
Procedure			
Procedure Date			
Frequency 1 2 3	4 5 times/week	Duration 1 2 3	4 5 6 weeks
		ion of therapy, but limi	ting swelling is important. motion.***
Location of repair:			
Accelerated Rehabilitation	on (if circled follow mod	difications below)	
o 50% brace lock	ntion: ted, bilateral crutches ted, bilateral crutches n, bilateral crutches	s week 4	
Weeks 0-4: • Non-weight bearing.			

- Brace:
 - o 0-2 weeks locked in full extension for ambulation and sleeping
 - o May unlock brace to max of 90° per patients' tolerance at therapists discretion
 - Keep locked for ambulation
- Goal ROM: 0-90°
 - o ROM beyond 90° begins at week 3 (for *Accelerated Rehab*)
- Therapeutic exercises: ankle pumps, heel props, quad sets, SLR, heel slides 0-90°, NWB hamstring/calf stretch, quad stimulation, patellar mobilization, scar mobilization once healed
- CPM: 0-90° 2-3x per day for 2 hours each session and increase 5-10° per day
 - o Week 3 goal: 0-110° unloaded

Weeks 4-6:

- Weight bearing progression per MD
- Brace:
 - o DC brace after independent SLR with no lag and after weight bearing restrictions are lifted (approx. 6 weeks)
- ROM: FULL
- Therapeutic exercises: continue as above

Weeks 6-12:

- Progress towards FWB without crutches, normalize gait pattern
- ROM: FULL
- Therapeutic exercises: stationary bike: ROM, ¼ squats, partial wall squats, TKE, Hip 4-way band, proprioception exercises, leg press (≤90°)

Months 3-12:

- Full weight bearing
- Full ROM
- Progress quad strength, focus on single limb strength, light jogging with progression o running gradually
- 5-6 months begin sport specific drills
- **No weighted squats below 90° x 6 months**

Comments	5:	
FCE	Work Conditioning/Work Hardening	Teach HEP
	ery patient's therapy progression will vary Please use your best clinical judgment on a considered to improve patient's outco	dvancing a patient. If other ideas are
Patient	e's recovery is a team approach: Patient, for surgeon. Every team member plays an i	
Signature		Date