

Meniscal Repair Protocol

Recommendations:

TDWB for balance only for first 4 weeks (May vary by physician or procedure)
May be required to wear immobilizer for 4 weeks depending on physician preference.
(May come out of brace for exercise)
No Passive ROM past 90 degrees for initial 4 weeks (ROM restrictions may vary with su

No Passive ROM past 90 degrees for initial 4 weeks (ROM restrictions may vary with surgical procedure.)

Program:

Day 1 – 14:

TDWB only with 2 crutches
AROM to tolerance; No passive ROM past 90 degrees
Ice and Elevation, 3-4 times a day
Biofeedback or E-Stim for muscle re-education and effusion reduction as needed
Patella mobilization
Isometrics for Quads, hip abductors and adductors
Straight leg raises (SLR)
Hip Flexion, Abduction or Adduction (opposite repair), hip extension

Weeks 2-4:

TDWB only with 2 crutches
Continue biofeedback for Quads
Control knee effusion as needed
Progress weight for SLR
Active knee extension in painfree range (monitor patellofemoral complaints)
Hamstring curls in pain free range (not to exceed 90 degrees flexion)

Developed in conjunction with the physicians at OrthoCarolina

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Weeks 4-8:

Partial weight bearing at 4 weeks (FWB at 6 - 8 weeks)

ROM - Achieve full ROM by 8 weeks

Bike, pool, wall slides

Balance training (partial progressing to full weight bearing)

Rocker board; progress to BAPS

Single leg balance, balance reach, etc.. when allowed

Endurance training

Light bike work as ROM allows

Closed chain strengthening exercises (PWB to FWB)

Squats, lunges, calf raises, leg press, step downs, sports cord, etc..

Isokinetics (add at 6 - 8 weeks)

High speeds 150 - 300 degrees/second

(Assess for patellofemoral complaints)

Flexibility

Lower extremity stretching as tolerated

Weeks 8-16:

Progressive resistance on Eagle machines
Multi-hip; knee extension/flexion; leg press; calf raises
Isokinetics
Velocity spectrum
Increase endurance activities
Bike, pool, versaclimber, walking, **No Running**

16 weeks Continue exercises three times per week

to Running

release: Begin with 1 mile jog/walk and increase in 1/4 mile increments. Once

patient is able to jog 20 minutes with no discomfort or swelling may progress functional activities to include figure 8's, cutting, jumping, etc.

Sport specific activities (progressed as tolerated)

Backward running, carioca, ball drills & other sport skills

Criteria for Return to Full Activity:

Adequate healing time Full pain free ROM Normal isokinetic evaluation and function tests

Satisfactory performance of sport specific activities without swelling

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