

Meniscus Root Repair Rehabilitation Protocol

Phase/ Goals	Immobilization	ROM	Therapeutic Exercises
<p>Phase 1 (0-2 weeks)</p> <p>Goals:</p> <ul style="list-style-type: none"> ● protect repair ● Minimize pain ● Minimize Swelling ● Begin passive range of motion exercises ● Start PT 3-5 days after surgery ● Work on quad recruitment 	<p>25% weightbearing with crutches</p> <p>Brace locked at 0 degrees while ambulating</p> <p>may be unlocked 0-90 while sleeping</p> <p>Can remove brace for hygiene and physical therapy</p>	<ul style="list-style-type: none"> ● Obtain full extension if lag is present ● Passive knee flexion limited to 90 degrees with therapy ● Brace locked at 0 degrees while ambulating 	<ul style="list-style-type: none"> ● ankle pumps ● heel slides in brace ● quad recruitment ● SLR in brace at 0 degrees until quad can maintain knee locked ● patella mobilizations
<p>Phase 2 (2-6 weeks)</p> <p>Goals:</p> <ul style="list-style-type: none"> ● Protect repair ● Minimize pain ● Minimize swelling ● Progress range of motion ● continue to restore quadriceps function 	<p>25% weightbearing with crutches</p> <p>brace 0-90 while ambulating and sleeping</p> <p>Can remove brace for hygiene and physical therapy</p>	<ul style="list-style-type: none"> ● Obtain full extension if lag present ● Passive knee flexion limited to 90 degrees 	<ul style="list-style-type: none"> ● Ankle pumps ● Heel slides in brace ● Quad recruitment with stim ● SLR in brace ● Patella mobilizations ● stationary bike with seat high (lower seat as tolerated until reaches normal height) ● Aquatic therapy with clearance from doctor after first postop visit (forward/retro walking, marching) ● Leg press (25% BW max) ● Leg extensions (high volume low weight)



<p>Phase 3 (6-12 weeks)</p> <p>Goals:</p> <ul style="list-style-type: none"> • Full weightbearing • Encourage full range of motion as tolerated • Normalize gait mechanics 	<p>begin gradual transition off crutches over 2 week period from 25% WB to full WB</p> <p>discontinue brace, can use neoprene sleeve if needed</p>	<ul style="list-style-type: none"> • Restore and maintain full active range of motion 	<ul style="list-style-type: none"> • No pivoting, twisting, hopping, jumping, running • Treadmill forward and retro-walking • Cable column exercises • Single leg stands for proprioception • Cardiovascular training • Slide board (start short and increase as tolerated) • Be aware of PTF signs and symptoms • Can transition to exercises on affected leg only after 8 weeks • Single leg squats after 8 weeks • Incorporate gentle plyometrics at 10 weeks post-op - start both feet and progress to single
<p>Phase 4 (12-20weeks)</p> <p>Goals:</p> <ul style="list-style-type: none"> • Full range of motion • Normal gait mechanics • Work on sport-specific drills 	<p>Ace wrap or neoprene sleeve as needed</p>	<ul style="list-style-type: none"> • maintain Full A/PROM 	<ul style="list-style-type: none"> • Continue everything in phase 3 • Plyometrics for speed and power • quad strength to within 15% or less of uninvolved leg • Full return to sport/work involving pivoting, squatting, twisting, running at 5 months • sport specific training