

## 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 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)

#### Weeks 4-8:

Partial weight bearing at 4 weeks (FWB at 6 - 8 weeks)  
ROM - Achieve full ROM by 8 weeks

*Developed in conjunction with the physicians at OrthoCarolina*

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 to release:** Continue exercises three times per week  
Running  
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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