

Rehabilitation Protocol: Arthroscopic Meniscus Repair

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Phase I (Weeks 0-6)

- **Weightbearing:** As tolerated with crutches
- **Hinged Knee Brace:** worn for 4 weeks post-op
 - Locked in full extension for ambulation - remove for hygiene and PT (**Weeks 0-6**)
- **Range of Motion** - AAROM -> AROM as tolerated
 - **Weeks 0-4:** Full ROM - Weight bearing locked in extension
 - **Weeks 4-6:** Full ROM as tolerated - progress to flexion angles greater than 90°
- **Therapeutic Exercises**
 - Quad/Hamstring sets, heel slides, straight leg raises, co-contractions
 - Isometric abduction and adduction exercises
 - Patellar Mobilizations

Phase II (Weeks 6-12)

- **Weightbearing:** As tolerated -- discontinue crutch use at 6 weeks
- **Hinged Knee Brace:** Discontinue brace use when patient has achieved full extension with no evidence of extension lag
- **Range of Motion** - Full active ROM
- **Therapeutic Exercises**
 - Closed chain extension exercises, Hamstring strengthening
 - Lunges - 0-90°, 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