Rehabilitation Protocol: Meniscus Allograft Transplantation Dr Shane Hanzlik

Phase I (Weeks 0-8)

- Weight bearing:
 - **Weeks 0-2:** Partial Weight bearing (up to 50%)
 - **Weeks 2-6:** Advance to WBAT with crutches (d/c crutches at 4 weeks post-op if gait normalized)
- **Hinged Knee Brace**: worn for 6 weeks post-op
 - Locked in full extension for ambulation and sleeping remove for hygiene
 (Week 1)
 - Locked in full extension for ambulation- remove for hygiene and sleeping (Week 2)
 - Set to range from 0-900 for ambulation- remove for hygiene and sleeping (Weeks 3-6)
 - Discontinue brace at 6 weeks post-op
- Range of Motion PROM -> AAROM -> AROM as tolerated
 - **Weeks 0-2:** Non-weight bearing 0-90^o
 - **Weeks 2-8:** Full non-weight bearing ROM as tolerated progress to flexion angles greater than 90^o
- Therapeutic Exercises
 - Quadriceps sets, heel slides, straight leg raises, patellar mobilizations, co-contractions (Weeks 0-2)
 - Add heel raises and terminal knee extensions (Weeks 2-8)
 - Activities in brace for first 6 weeks then without brace
 - No weight bearing with flexion> 90° during Phase I
 - Avoid tibial rotation for first 8 weeks to protect the meniscal allograft

Phase II (Weeks 8-12)

- **Weight bearing:** As tolerated
- Range of Motion Full active ROM
- Therapeutic Exercises
 - Progress to closed chain extension exercises, begin hamstring strengthening
 - Lunges $0-90^{\circ}$, Leg press $0-90^{\circ}$ (flexion only)
 - Proprioception exercises
 - Begin use of the stationary bicycle

Phase III (Months 3-6)

- Weight bearing: Full weight bearing 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
 - Gradual return to athletic activity as tolerated (6 months post-op)

Maintenance program for strength and endurance