**Meniscal Repair Protocol**

**General Precautions:**

-Full protected weightbearing with brace locked 0-90 deg., crutches x6 weeks

-No loading flexion > 90 deg. for 3 months post-operatively

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| **Phase** | **Goals/Progression Criteria** | **Precautions** | **Suggested treatments** |
| **1.**  **0-6 weeks post-op**  **Inflammation and pain management** | 1. Pain-free gait  2. No effusion  3. 0-90 deg. knee ROM  3. Straight leg raise without extensor lag | -Full protected weightbearing with brace locked 0-90 deg., crutches  2-4 weeks: Leg press with <50% body weight | 0-2 weeks:  -Pain/edema control  -Quad recruitment with e-stim  -Quad and hamstring sets at multiple angles  -SLR and heel slides in brace  -Patellar mobilizations  2-6 weeks:  -Stationary cycle  -Progressive resistive exercises (PREs) [low weight, high volume]  -Hip and core strengthening  -Scar and soft tissue mobilization  -Gait training  -Balance and proprioceptive exercises |
| **2.**  **6-12 weeks post-op**  **Protected loading** | 1. Full knee ROM  2. Non-antalgic gait  3. Good control step up, down, lunge (mid-range)  4. L = R single leg balance  5. Quad strength within 15% of unaffected side | -No loading the knee in flexion >90 deg. until 12 weeks | 6-8 weeks:  -Gait training without brace or crutches  -Progress PREs in closed and open chain in full weightbearing  -Treadmill walking  -Single leg balance and proprioceptive exercises  -May begin swimming  8-10 weeks:  -Continue above  -Progress PREs to higher weights and intensity, lower volume  -Single leg squat <90 deg  10-12 weeks:  -Continue above  -Plyometrics progressing from double to single leg  -Assess light jogging on treadmill |
| **3.**  **12 weeks -5 months post-op**  **Return to activity** | 1. Return to full sport  2. Pass evaluation for return to sport\*\*\* | -None | -Sport-specific strengthening  -Plyometrics for speed and power  -Progress from single to multiplanar exercises |