**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

|  |  |  |  |
| --- | --- | --- | --- |
| **Phase** | **Goals/Progression Criteria** | **Precautions** | **Suggested treatments** |
| **1.** **0-6 weeks post-op** **Inflammation and pain management** | 1. Pain-free gait2. No effusion3. 0-90 deg. knee ROM3. Straight leg raise without extensor lag | -Full protected weightbearing with brace locked 0-90 deg., crutches2-4 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 mobilizations2-6 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 ROM2. Non-antalgic gait3. Good control step up, down, lunge (mid-range)4. L = R single leg balance5. 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 swimming8-10 weeks: -Continue above-Progress PREs to higher weights and intensity, lower volume-Single leg squat <90 deg10-12 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 sport2. Pass evaluation for return to sport\*\*\* | -None | -Sport-specific strengthening-Plyometrics for speed and power-Progress from single to multiplanar exercises |