

Kevin M. Kaplan, MD Advanced Arthroscopy/Sports Medicine

Rehabilitation Protocol: Arthroscopic Meniscus Repair

Name:		Date:	
Diagnosis:		Date of Surgery:	
Phase I (Weeks 0-6)			
	As tolerated with crutches		
	ace: worn for 4 weeks post-	op	
	-	n and sleeping – remove for hygiene and PT (Weeks 0-2)	
		d while sleeping, for hygiene and PT (Weeks 2-4)	
	- AAROM → AROM as tolera		
○ Weeks 0-	4: Full ROM – No weightbea	aring at flexion angles greater than 90°	
Weeks 4-	6: Full ROM as tolerated - p	progress to flexion angles greater than 90°	
 Therapeutic Exe 	rcises		
Quad/Har	nstring sets, heel slides, stra	light leg raises, co-contractions	
 Isometric 	abduction and adduction ex	rercises	
	<i>lobilizations</i>		
o At 4 Wee l	ks: can begin partial wall-sit	s – keep knee flexion angle less than 90°	
Phase II (Weeks 6-1	2)		
• Weightbearing:	As tolerated discontinue of	crutch use at 6 weeks	
 Hinged Knee Bra 	ace: Discontinue brace use v	when patient has achieved full extension with no evidence	of
extension lag			
 Range of Motion 	 Full active ROM 		
 Therapeutic Exe 			
	ain extension exercises, Ham	nstring strengthening	
9	0-90°, Leg press – 0-90°		
-	eption exercises		
o Begin use	of the stationary bicycle		
Phase III (Weeks 12	-16)		
• Weightbearing:	Full weightbearing with nor	rmal gait pattern	
 Range of Motion 	- Full/Painless ROM		
 Therapeutic Exe 	rcises		
	with quad and hamstring str	engthening	
	single-leg strength		
	ging/running		
o Plyometri	ics and sport-specific drills		
Phase IV (Months 4-	6)		
 Gradual return to 	athletic activity as tolerated	l	
 Maintenance prog 	gram for strength and endur	ance	
Comments: Patients sh	ould avoid tibial rotation	for 4-6 weeks post-op	
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Frequency: times	per week Durati	on: weeks	

Signature:	Date):	_