

Meniscus Repair Protocol

Dr. Schaap

Time Frame	Treatment	Goals
Post-Op Day	<ul style="list-style-type: none"> -Dressing change -Instructions in signs and symptoms of infection -Check for DVT -Issue HEP for quad sets, SLR, hip ab/adduction, patellar mobs, hip extension, heel slides and cryotherapy 	<ul style="list-style-type: none"> -Independent in home exercise program -Fair quad set -Independent with SLR -Full Weight-bearing in immobilizer(locked in extension) only for 4 weeks or NWB per instructions -Home electrical stimulation unit if needed
Phase I (0-4 weeks)	<ul style="list-style-type: none"> -Frequency = 1-2 times per week if needed to attain good quad set and see good progression of range of motion -Tabletop exercises if in the clinic and continued HEP at home -Can progress range of motion as tolerated to 90 degrees 	<ul style="list-style-type: none"> -Good quad set -Full extension -Range of motion to 90° -Continued maintenance of full weightbearing in brace or per instructions
Phase II (4-12 weeks)	<ul style="list-style-type: none"> -Frequency = 3x/ week -Progress weight-bearing activities as tolerated unless otherwise specified -Progress unilateral stance -Progress ambulation to normalize gait -Continue to progress range of motion -Begin double legged plyometrics at 12 weeks, progressing to single leg as tolerated May begin jogging, swimming, biking as tolerated at 12 weeks for meniscus repairs 	<ul style="list-style-type: none"> -Normal gait -Normal gait up/down stairs -Range of motion within normal limits
Phase III (12-16 weeks)	<ul style="list-style-type: none"> -Frequency = 1-2x/week -Progressed to full range of motion as tolerated -Progress all other strengthening, proprioception and plyometrics as tolerated 	<ul style="list-style-type: none"> -Return to sports/functional training at 12-16 weeks -Return to sports/functional activities per physician