Rehabilitation Protocol:

Arthroscopic Meniscus Repair

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Diagnosis:		Date of Surgery:		
Phase I (We	eks 0-6)			
•	Weightbearing: WBAT TTWB NWB			
•	Hinged Knee Brace: worn for 4 weeks post-op			
	0	Locked in full extension for ambulation and sleeping – remove for hygiene and PT (Weeks 0-2)		
	0	Unlocked for ambulation and removed while sleeping, for hygiene and PT (Weeks 2-4)		
•	Range of Motion -AROM as tolerated			
	0	Weeks 0-2: ☐ 0-60° ☐ 0-90° ☐ Full ROM		
	0	Weeks 2-4: Full ROM – No weight bearing at flexion angles greater than 90°		
	0	Weeks 4-6: Full ROM as tolerated – progress to flexion angles greater than 90°		
•	Therapeuti	ic Exercises		
	0	Quad/Hamstring sets, heel slides, straight leg raises, co-contractions		
	0	Isometric abduction and adduction exercises		
	0	Patellar Mobilizations		
•	At 4 Weeks	At 4 Weeks: can begin partial wall-sits - keep knee flexion angle less than 90°		
Phase II (W	eeks 7-12)			
•	Weightbearing: As tolerated discontinue crutch use at 6 weeks			
•	Hinged Kno	ged Knee Brace: Discontinue brace use when patient has achieved full extension with no evidence of extension lag		
•	Range of M	ange of Motion – Full active ROM		
•	Therapeuti	Therapeutic Exercises		
	0	Closed chain extension exercises, Hamstring strengthening		
	0	Lunges - 0-90°, Leg press - 0-90°		
	0	Proprioception exercises		
	0	Begin use of the stationary bicycle		
Phase III (V	Veeks 13-16)			
•	Weightbearing: Full weightbearing with normal gait pattern			
•	Range of Motion - Full/Painless ROM			
•	Therapeutic Exercises			
	0	Continue with quad and hamstring strengthening; Focus on single-leg strength		
	0	Begin jogging/running		
	0	Plyometrics and sport-specific drills		
Phase IV (M	lonths 4-6)			
•	Gradual ret	Gradual return to athletic activity as tolerated		
•	Maintenanc	te program for strength and endurance		
Comments:	Patients show	uld avoid tibial rotation for 4-6 weeks post-op		
Frequency: 2-3 times per week			Duration: 6-8 weeks	
Signature			Date	