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Rehabilitation Following Meniscal Repair

The protocol for rehabilitation following meniscal repair is divided into four phases: maximum protection, moderate protection, advanced phase, and return to activity phase. These time periods are based primarily on the healing time of peripheral tissues, and location of the tear.

Phase I

Maximum Protection Phase: Weeks 1-6

Stage I: Immediate post-surgery day 1 through week 3

Weight bearing-NWB

Ice, compression elevation

Electrical Muscle Stimulation

Brace locked at 0 degrees

Range of Motion 0-90

Motion is limited for the first 7 to 21 days, depending on the development of scar tissue around the repair site. Gradual increase in flexion ROM based on assessment of pain (0-30 then 0-50, 0-70, 0-90)

Patellar Mobilization

Scar Tissue Mobilization

Passive Range of Motion

Exercises:

Quadriceps isometrics

Hamstring isometrics (posterior horn no hamstring exercises for 6 weeks)

Hip Abd/Adduction

Weight bearing as tolerated with crutches with brace locked at 0 degrees

Stage II: Week 4-6

Weight bearing – full without assisted device with brace locked at 0 degrees at 6 weeks

Exercises:

PRE program initiated

Limited range knee extension

(in range less likely to impinge or pull on repair)

Toe Raises

Mini-squats

Cycling

Surgical Tubing Exercises – diagonal patterns

Flexibility Exercises

Phase II

Moderate Protection Phase: Weeks 6-10

Criteria to progress to phase II

1. ROM 0°-90°
2. No change in pain or effusion
3. Good quad control

Exercises:

Strength PRE program continues

Toe Raises

Mini-squats

Cycling

Surgical Tubing Exercises – diagonal patterns

Lateral Step-ups 30 sec X5 sets TM 60 sec X 5 sets

Isokinetic Exercises

Flexibility Exercises:

Hamstring Stretches

Calf stretches

Endurance Program:

Swimming

Cycling

Pre Core Machine

Nordic Track

Stair Master

Pool Running

Coordination/ Proprioceptive training

BAPS Board

Single leg therex on & off foam

Pool sprinting

Backwards Walking

Plyometric Program

As appropriate for sport activity