Meniscus Repair Protocol

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A. 0-3 weeks post-op
   1. Gait: NWB using crutches
   2. Bracing: - Physician directed
      - Generally yes, to protect ROM restriction and added ambulatory protection
   3. ROM restrictions: 0-90°
   4. Frequent cryotherapy and modalities as indicated
   5. Exercise
      a. ROM work within restrictions
      b. No OKC hamstring work
      c. NWB muscle flexibility work
      d. Progressive OKC exercise within brace/ROM restrictions
      e. Progressive OKC hip and core

B. 3-6 weeks post-op
   1. Gait: - WB status is ultimately physician directed
      - Beginning at 3 or 4 weeks post-op, WB may be gradually increased to full
   2. Bracing: - Hinged knee braces opened in accordance with patient's ROM gain
      - Immobilizer braces are discontinued
   3. ROM work: To tolerance
   4. Continue cryotherapy and modalities as indicated
   5. Exercise
      a. Progressive OKC strength (no hamstring until 6 weeks p/o) within available ROM
      b. Progressive CKC exercise within WB restrictions
      c. Progressive balance/proprioceptive work within WB restrictions
      d. Progressive hip and core
      d. Progressive non-impact cardio: Stationary Bike→Elliptical→Stairmaster

C. 6-8 weeks post-op
   1. Gait: Wean from AD if not allowed earlier
   2. Progressive OKC, CKC, balance/proprioceptive work
   3. Progressive hip and core
   4. Progressive cardio

D. 8 weeks post-op
   1. Interval jog to run program
   2. Progressive agility and footwork drills

E. 9 weeks post-op: Progressive plyometric and sports specific activities

F. ≈10-12 weeks post-op Return to sport. Physician directed.