



## Meniscus Repair Rehabilitation Guidelines

This rehabilitation protocol was developed for patients who have isolated meniscal repairs. Meniscal repairs located in the *peripheral or outer one-third vascular region* are progressed rapidly, with full weight bearing allowed by the 4th postoperative week and running by the 16th to 20th postoperative week (assuming muscle strength and other criteria are met). *Complex repairs* (in which a segment of the tear is located in the avascular region) are progressed more slowly, with full weight bearing delayed until the 7th postoperative week and running delayed until the 6th postoperative month. Additionally, a postoperative brace is used for complex repairs for the first 8 postoperative weeks to provide added protection.

The protocol is divided into 7 phases according to postoperative weeks (for instance, Phase I = Postoperative Weeks 1-2). Each phase has several categories including:

- *General observation* of the patient's condition (weight bearing, pain, hemarthrosis, muscle control)
- Evaluation of specific variables with goals identified for each
- Treatment and exercise program, according to *frequency* and *durati*
- Rehabilitation goals which must be achieved to enter into the next phase

The **overall goals** of the reconstruction and rehabilitation are to:

- Control joint pain, swelling, hemarthrosis (minimal or none)
- Regain normal knee flexion and extension
- Regain a normal gait pattern and neuromuscular stability for ambulation
- Regain normal quadriceps, hamstring lower extremity muscle strength
- Regain normal proprioception, balance, and coordination for desired activities
- Achieve optimal functional outcome based on orthopaedic and patient goals

The supervised rehabilitation program is supplemented with a *home self-management program* which the patient performs on a daily basis. The therapist must evaluate the patient thoroughly to





implement the enclosed protocol and should see the patient in the clinic for therapeutic procedures and modality treatments which are required for rehabilitation. The majority of this protocol can be accomplished at home provided patient cooperation and follow through are present. The approximate number of rehabilitation visits required for each phase are provided. Additional supervision may be required if a complication develops.

#### Important postoperative signs to monitor include:

- Swelling of the knee joint or soft tissues
- Abnormal pain response
- Abnormal gait pattern with or without assistive device
- Insufficient flexion or extension motions, limited patellar mobility
- Weakness (strength/control) of the lower extremity, especially the quad/hamstrings
- Insufficient lower extremity flexibility
- Tibiofemoral symptoms, indicative of a meniscal tear

### **Return to Activities Warning**

Return to strenuous activities - including impact loading, jogging, deep knee flexion, or pivoting - early postoperatively after meniscal repair carries a definite risk of a repeat meniscus tear. These risks cannot always be scientifically assessed. Patients are warned to return to athletic activities carefully and to avoid any activity in which symptoms of pain, swelling, or a feeling of instability are present.

# **Physical Therapy Visit Timeline**

Phase	Weeks Postoperative	Minimum # Visits	Maximum # Visits
1	1-2	2	3
2	3-4	2	3
3	5-6	1	2
4	7-8	1	2
5	9-12	1	2
6	13-26	2	2
7	27-52	2	2
Total		11	16





#### Rehabilitation Protocol Summary for Meniscus Repairs

		Posto	Postoperative Weeks			Postoperative Months				
		1-2	3-4	5-6	7-8	9-12	4	5	6	7-12
Brace: Bled	Isoe postoperative (complex)	X	X	X						
Range of m	otion minimum goals:									
	0°-90°	X								
	0°-120°		X							
	0°-135°			X						
Weight beari	ng:	· ·	1			ı	ı	ı	I	.1
D	Toe touch – ½ BW	X								
Peripheral	3⁄4 body – full BW		X							
	Toe touch – ¼ BW	X								
Complex	½ to ¾ BW		X	X						
	Full BW				X					
Patella mob		X	X	X	11					
Modalities:										
	muscle stimulation (EMS)	X	X	X						
	a management (cryotherapy)	X	X	X	X	X	X	X	X	X
Stretching:										
Hamstring, gastroc-soleus, iliotibial		X	X	X	X	X	X	X	X	X
band, quadriceps										
Strengthening:										
Quad isometrics, straight leg raises,		X	X	X	X	X				
	e extension									
	n: gait retraining, toe raises,		P	C	X	X	X	X	X	
wall sits, n				_		***	**	**	**	**
	h hamstring curls (90°)			P	C	X	X	X	X	X
	ion quads (90°-30°)			X	X	X	X	X	X	X
Leg press (7	on-adduction, multi-hip			X P	X P	X X	X X	X X	X X	X X
	oprioceptive training:			Г	Г	Λ	Λ	Λ	Λ	Λ
	ing, mini-trampoline,		P	С	X	X	X	X	X	X
	, plyometrics		1		Λ	Λ	Λ	Λ	Λ	Λ
Conditionin	1 ,									
UBC	·6•		X	X	X					
Bike (stationary)			71	21	X	X	X	X	X	X
Aquatic program						X	X	X	X	X
Swimming (kicking)						X	X	X	X	X
Walking						X	X	X	X	X
Stair climbing machine						X	X	X	X	X
Ski mach						X	X	X	X	X
Running: st							P	P	С	X
Cutting: late	eral carioca, figure 8's							P	P	X
Full sports								P	P	X

X = all repairs, C = complex, avascular repairs, P = peripheral repairs

BAPS = Biomechanical Ankle Platform System (Camp, Jackson, MI), BBS = Biodex Balance System(Shirley, NY), UBC = upper body cycle (Biodex, Shirley, NY).





#### PHASE 1: Week 1-2

C 1	To a touch to 1/4 WD (considered to the 1/2 WD (considered)	
General	Toe-touch to 1/4 WB (complex); toe touch to 1/2 WB (peripheral)	
Observation	when:	
	- Pain controlled - Hemarthrosis controlled	
	- Voluntary quadriceps contraction & full extension achieved	
Evaluation		Goals
	ν Pain	Controlled
	v Hemarthrosis	Mild
	v Patellar mobility	Good
	v ROM minimum	0°-90°
	v Quadriceps contraction & patella migration	Good
	v Soft tissue contracture	None
Frequency		Duration
3-4 x/day	Range of motion	
10 minutes	ROM (passive, $0^{\circ}$ - $90^{\circ}$ )	
	Patella mobilization	
	Ankle pumps (plantar flexion with resistance band)	
	Hamstring, gastroc-soleus stretches	5 reps x 30 secs
3 x/day	Strengthening	
15 minutes	Straight leg raises (flexion)	3 sets x 10 reps
	Active quadriceps isometrics	1 set x 10 reps
	Knee extension (active-assisted)	3 sets x 10 reps
As required	Modalities	
1 is required	Electrical muscle stimulation	20 minutes
		20 minutes
Goals	Cryotherapy	20 minutes
Goals	ν ROM 0°-90°	
	v Adequate quadriceps contraction	
	v Control inflammation, effusion	





#### PHASE 2: Weeks 3-4

General Observation	v 1/2 weight bearing (complex); full WB (peripheral) when: - Pain controlled - Hemarthrosis controlled	
Observation	- Voluntary quadriceps contraction achieved	
Evaluation		Goals
	v Pain	Controlled
	v Effusion	Mild Good
	v Patellar mobility v ROM minimum	0°-120°
		Good
	v Quadriceps contraction & patella migration v Soft tissue contracture	None
Frequency		Duration
3-4 x/day	Range of motion	
10 minutes	ROM (passive, 0°-120°)	
	Patella mobilization Ankle pumps (plantar flexion with resistance band)	
	Hamstring, gastroc-soleus stretches	5 reps x 30 secs
	Hamsting, gastroc-soreus stretenes	5 Teps x 50 sees
2-3 x/day	Strengthening	
20 minutes	Straight leg raises (flexion, extension, adduction)	3 sets x 10 reps
	Isometric training: multi-angle (0°, 60°)	1 set x 10 reps
	Knee extension (active-assisted, 90°-30°)	3 sets x 10 reps
	Closed-chain (peripheral) - Toe raises	2 cata v. 20 mana
	- Toe raises - Wall sits	3 sets x 20 reps to fatigue x 3
	- wan sits	to fatigue x 5
2 x/day	Balance training (peripheral)	
10 minutes	Weight shift side/side and forward/back	5 sets x 10 reps
	Cup walking	
2 x/day	Aerobic conditioning	
10 minutes	UBC	
As required	Modalities	
•	Electrical muscle stimulation	20 minutes
	Cryotherapy	20 minutes
Goals	ν ROM 0°-120° ν Control inflammation, effusion	
	v Muscle control	
	v Early recognition complications (motion, RSD, patellofemoral)	





#### PHASE 3: Weeks 5-6

G 1		1
General	v 3/4 WB (complex); full WB (peripheral) when:	
Observation	- Pain controlled without narcotics - Hemarthrosis controlled	
- ·	- ROM 0°-135° - Muscle control throughout ROM	~ .
Evaluation		Goals
	• Pain	Mild/No RSD
	Effusion	Minimal
	Patellar mobility	Good
	• ROM	0°-135°
	Muscle control	3/5
	Inflammatory response	None
Frequency		Duration
3 x/day	Range of motion	
10 minutes	ROM (passive, 0°-135°)	
	Patella mobilization	
	Hamstring, gastroc-soleus stretches	5 reps x 30 secs
2 x/day	Strengthening	
20 minutes	Straight leg raises (ankle weight, not to exceed 10% of body weight)	3 sets x 10 reps
	Isometric training: multi-angle (90°, 60°, 30°)	2 sets x 10 reps
	Hamstring curls (active, 0°-90°, peripheral)	3 sets x 10 reps
	Knee extension (active, 90°-30°)	3 sets x 10 reps
	Closed-chain (all repairs)	3 sets x 10 reps
	- Heel raise/toe raise	3 sets x 20 reps
	- Wall sits	to fatigue x 3
	Multi-hip machine (flexion, extension, abduction, adduction)	3 sets x 10 reps
	Leg press (70°-10°)	3 sets x 10 reps
3 x/day	Balance training	
5 minutes	Weight shift side/side and forward/back	5 sets x 10 reps
	Balance board/2 legged	
	Cup walking	
	oup numing	
2 x/day	Aerobic conditioning (patellofemoral precautions)	
10 minutes	UBC	
As required	Modalities	
	Electrical muscle stimulation	20 minutes
	Cryotherapy	20 minutes
Goals	ν ROM 0°-135°	
	v Control inflammation, effusion	
	v Muscle control	
	v Early recognition complications	
	(motion loss, RSD, patellofemoral changes)	





#### PHASE 4: Weeks 7-8

	T	
General	Full weight bearing with 1 crutch (complex) when:	
Observation	- Pain controlled without narcotics - Hemarthrosis controlled	
	- ROM 0°-135° - Voluntary quad contraction achieved	
Evaluation		Goals
	Pain	Mild/No RSD
	Effusion	Minimal
	Patellar mobility	Good
	• ROM	0°-135°
		4/5
	Muscle control	None
	Inflammatory response	
Frequency		Duration
2 x/day	Range of motion	
10 minutes	ROM (0°-135°)	
	Hamstring, gastroc-soleus stretches	5 reps x 30 secs
2 x/day	Strengthening	
20 minutes	Straight leg raises (flexion, extension, abduction, adduction)	3 sets x 10 reps
	Straight leg raises, rubber tubing	3 sets x 30 reps
	Hamstring curls (active, 0°-90°, all repairs)	3 sets x 10 reps
	Knee extension (active, 90°-30°)	3 sets x 10 reps
	Leg press (70°-10°)	3 sets x 10 reps
	Closed-chain	
	- Wall sits	3 sets x 20 reps
	- Mini-squats (rubber tubing, 0°-30°)	to fatigue x 3
	Multi-hip machine (flexion, extension, abduction, adduction)	3 sets x 10 reps
	ividiti-inp inacinne (itexion, excusion, adduction, adduction)	3 sets x 10 leps
3 x/day	Balance training	
5 minutes	Balance board/2 legged	
Jillitutes	Single leg stance	
	Cup walking	
1.2 - / 4	A anabia aanditianing	
1-2 x/day 15 minutes	Aerobic conditioning UBC	
13 minutes		
	Stationary bicycling	
A = ==================================	Modelities	
As required	Modalities	20
G 1	Cryotherapy	20 minutes
Goals	Full weight bearing, normal gait	
	<ul> <li>Control inflammation, effusion</li> </ul>	
	Muscle control	
	• ROM 0°-135°	





#### PHASE 5: Weeks 9-12

		1
General	v Full weight bearing (complex) when: v ROM 0°-135°	
Observation	- Pain, effusion controlled	
	- Muscle control throughout ROM	
Evaluation		Goals
	v Pain	Minimal/No RSD
		4/5
	v Manual muscle test	4/3
	Hamstrings, quadriceps, hip abductors/adductors/flexors/extensors	Minimal
	v Swelling	Minimal
	v Isometric test (peripheral, % difference quads & hams)	30
	ν Patellar mobility	Good
	v Crepitus	None/slight
	v Gait	Symmetrical
Frequency		Duration
2 x/day	Range of motion	2 41 441011
10 minutes	Hamstring, gastroc-soleus, quad, ITB stretches	5 reps x 30 secs
10 minutes	Trainstring, gastroe soletas, quad, 11D stretches	3 10ps x 30 sees
2 x/day	Strengthening	
20 minutes	Straight leg raises	3 sets x 10 reps
20 minutes	Straight leg raises, rubber tubing	_
	Hamstring curls (active, 0°-90°)	3 sets x 30 reps
		3 sets x 10 reps
	Knee extension (active, 90°-30°)	3 sets x 10 reps
	Leg press (70°-10°)	3 sets x 10 reps
	Closed-chain	
	- Wall sits	3 sets x 20 reps
	- Mini-squats (rubber tubing, 0°-40°)	to fatigue x 3
	- Lateral step-ups (2-4" block)	3 sets x 10 reps
	Multi-hip machine (flexion, extension, abduction, adduction)	3 sets x 10 reps
3 x/day	Balance training	
5 minutes	Balance board/2 legged	
	Single leg stance	
1 x/day	Aerobic conditioning (patellofemoral precautions)	
15-20	Stationary bicycling	
minutes	Water walking	
	Swimming (straight leg kicking)	
	Walking	
	Stair machine (low resistance, low stroke)	
	Ski machine (short stride, level, low resistance)	
As required	Modalities	
1	Cryotherapy	20 minutes





Goals	v Increase strength and endurance	
	ν ROM 0°-135°	





#### PHASE 6: Weeks 13-26

C 1	N 00 1 1 1 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1	T
General	v No effusion, painless ROM, joint stability	
Observation	v Performs ACL,	
	can walk 20 minutes without pain v ROM 0°-135°	
Evaluation		Goals
	v Pain	Minimal/No RSD
	v Isometric test (6 mos. complex, % difference quads & hams)	10-15 (P), 30 (C)
	ν Swelling	Minimal
	v Patellar mobility	Good
	v Crepitus	None/slight
	v Gait	Symmetrical
Frequency		Duration
2 x/day	Range of motion	
10 minutes	Hamstring, gastroc-soleus, quad, ITB stretches	5 reps x 30 secs
2 x/day	Strengthening	
20 minutes	Straight leg raises, rubber tubing (high speed)	3 sets x 30 reps
	Hamstring curls with resistance (0°-90°)	3 sets x 10 reps
	Knee extension with resistance (90°-30°)	3 sets x 10 reps
	Leg press (70°-10°)	3 sets x 10 reps
	Multi-hip machine (flexion, extension, abduction, adduction)	3 sets x 10 reps
	Closed-chain: Mini-squats (rubber tubing, 0°-40°)	3 sets x 20 reps
1-3 x/day	Balance training	
5 minutes	Balance board/2 legged	
	Single leg stance	
3 x/week	Aerobic conditioning (patellofemoral precautions)	
20 minutes	Stationary bicycling	
	Water walking	
	Swimming (kicking)	
	Walking	
	Stair machine (low resistance, low stroke)	
	Ski machine (short stride, level, low resistance)	
3 x/week	Running program (16-20 wks peripheral, straight, 30%	
15-20	deficit isometric test)	
minutes	Jog	1/4 mile
	Walk	1/8 mile
	Backward run	20 yards
3 x/week	Cutting program – lateral, carioca, figure 8's	20 yards





3 x/week	Functional training	
	Plyometric training: box hops, level, double-leg	15 secs, 4-6 sets
	Sport specific drills (10-15% deficit isokinetic test)	
As required	Modalities	20 minutes
	Cryotherapy	
Goals	v Increase strength and endurance	





#### PHASE 7: Weeks 27-52

General	ν No effusion, painless ROM, joint stability	
Observation	v Performs ADL, can walk 20 minutes without pain	
Evaluation		Goals
	v Isokinetic test (isometric + torque 300°/sec, % diff quads & hams)	10-15
	v Swelling	None
	ν Patellar mobility	Good
	v Crepitus	None/slight
	v Single-leg function tests (9 mos: hop distance, timed hop,	85
	% inv/uninv)	
Frequency		Duration
2 x/day	Range of motion	
10 minutes	Hamstring, gastroc-soleus, quad, ITB stretches	5 reps x 30 secs
		_
1 x/day	Strengthening	
20-30	Straight leg raises, rubber tubing (high speed)	3 sets x 30 reps
minutes	Hamstring curls with resistance (0°-90°)	3 sets x 10 reps
	Knee extension with resistance (90°-30°)	3 sets x 10 reps
	Leg press (70°-10°)	3 sets x 10 reps
	Multi-hip machine (flexion, extension, abduction, adduction)	3 sets x 10 reps
	Closed-chain: Mini-squats (rubber tubing, 0°-40°)	3 sets x 20 reps
1-3 x/day	Balance training	
5 minutes	Balance board/2 legged	
	Single leg stance	
3 x/week	Aerobic conditioning (patellofemoral precautions)	
20-30	Stationary bicycling	
minutes	Water walking	
	Swimming (kicking)	
	Walking	
	Stair machine (low resistance, low stroke)	
	Ski machine (short stride, level, low resistance)	
3 x/week	Running program (straight, 30% deficit isokinetic test)	1/4 '1
15-20	Jog	1/4 mile
minutes	Walk	1/8 mile
	Backward run	20 yards
3 x/week	Cutting program (20 wks peripheral, 20% deficit isokinetic test)	20 1
	Lateral, carioca, figure 8's	20 yards
3 x/week	Functional training (20 wks peripheral)	1.5
	Plyometric training: box hops, level, double-leg	15 secs,
	Sport specific drills (10-15% deficit isokinetic test)	4-6 sets





As required	Modalities Cryotherapy	20 minutes
Goals	v Increase function v Maintain strength, endurance v Return to previous activity level	

