

# Jozef Murar, M.D.

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### MENISCUS REPAIR REHABILITATION PROTOCOL

Patient Name:		Date:		
Frequency:	per week, for	weeks	SITE R L	
MODALITIES: PRN				
Please send progress				
Physician's Signature	<b>:</b>	<del></del>		
Jozef Murar, M.D.				
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Our 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.

#### The Key Factors in Meniscal Repairs Include:

- 1. Anatomical site of tear
- 2. Suture fixation can lead to failure if too vigorous
- 3. Location of tear- anterior or posterior
- 4. Other pathology; i.e. PCL, MCL, ACL

# Phase I • Maximum Protection Phase: Weeks 1 - 4

#### Stage I: Immediate post-surgery day: week 1

- · Ice, compression, elevation
- Electrical Muscle Stimulation
- Brace locked at 0
- Weight-Bearing: Weight bearing as tolerated with brace locked in extension x 4 weeks, then progress as tolerated
- Range of Motion 0-90

Motion is limited for the first 7 to 21 days, depending on the development of scar tissue around repair site. Gradual increase in flexion ROM based on assessment of pain (0-90° for 1st 4 weeks)

- 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 brace locked at 0" Proprioception Training

# Stage II: Weeks 2 - 6

#### 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

#### Moderate Protection Phases: Weeks 6 – 10

Goals: Increase strength, power, endurance
Normalize ROM of knee Prepare patient
for advanced exercises

#### Criteria To Progress To Phase II:

- 1. Range of Motion 0-90
- 2. No change in Pain or Effusion
- 3. Quad Control "Good MMT"

#### Exercises:

Strength - PRE program continues
Flexibility Exercises are emphasized
Lateral Step-ups - 30 sec x 5 sets -» 60 sec x 5 sets
Mini-squats
Isokinetic Exercises

#### **Endurance Program**:

Swimming Cycling Nordic Track Stair Machines Pool Running

### **Coordination Program:**

Balance Board High Speed Bands Pool Sprinting Backward Walking

#### Plyometric Program

#### Phase III

# Advanced Phase: Weeks 11 – 15

#### Goals:

Increase Power, Endurance Emphasize Return to Skill Activities Prepare to Return to Full Unrestricted Activities

# Criteria To Progress To Phase III:

- 1. Full non-painful ROM
- 2. No pain or tenderness
- 3. Satisfactory Isokinetic Test
- 4. Satisfactory clinical exam

#### Exercises:

Continue all Exercises in Phase II Increase Tubing Program, Plyometrics. Pool program Initiate Running Program

# Return To Activity:

# Criteria For Return To Activity:

- 1. Full non-painful ROM
- 2. Satisfactory Clinical Exam
- 3. Satisfactory Isokinetic Test