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MENISCUS REPAIR REHABILITATION PROTOCOL

Patient Name: _____ Date: _____

Frequency: _____ per week, for _____ weeks SITE R L

MODALITIES: PRN

Please send progress notes.

Physician's Signature: _____

Jozef Murar, M.D.

Orthopaedic Surgeon

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 1: Maximum Protection Phase (Weeks 1 – 4)

Stage 1: 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 2: 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 2

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

COORDINATOR PROGRAM

- Balance Board High
- Speed Bands Pool
- Sprinting Backward
- Walking

PLYOMETRIC PROGRAM

Phase 3: 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 3

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

EXERCISES

- Continue all Exercises in Phase 2
- 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