

Rehabilitation Protocol: Arthroscopic Meniscus Root Repair

Name: _____

Date: _____

Diagnosis: _____

Date of Surgery: _____

Phase I (Weeks 0-6)

- **Weightbearing:** Toe touch weight bearing for the first 6 weeks post-op
- **Hinged Knee Brace:** worn for 6 weeks post-op
 - Locked in full extension for ambulation and sleeping – remove for hygiene and PT (**Weeks 0-6**)
- **Range of Motion:** AAROM → AROM as tolerated
 - **Weeks 0-4:** Full ROM – No weight bearing at flexion angles greater than 90°
 - **Weeks 4-6:** Full ROM as tolerated – progress to flexion angles greater than 90°
- **Therapeutic Exercises**
 - Quad/Hamstring sets, heel slides, straight leg raises, co-contractions
 - Isometric abduction and adduction exercises
 - Patellar Mobilizations

Phase II (Weeks 6-12)

- **Weightbearing:** As tolerated – discontinue crutches
- **Hinged Knee Brace:** Discontinue when patient has achieved full extension with no extension lag
 - **We will typically get an UNLOADER Brace to wear during weeks 6-12** for ambulation only
- **Range of Motion:** Full active ROM
- **Therapeutic Exercises**
 - Closed chain extension exercises, Hamstring strengthening
 - Lunges - 0-90°, Leg press – 0-90°
 - Proprioception exercises
 - Begin use of the stationary bicycle

Phase III (Weeks 12-16)

- **Weightbearing:** Full weightbearing with normal gait pattern
- **Range of Motion:** Full/Painless ROM
- **Therapeutic Exercises**
 - Continue with quad and hamstring strengthening
 - Focus on single-leg strength
 - Begin jogging/running
 - Plyometrics and sport-specific drills

Phase IV (Months 4-6)

- Gradual return to athletic activity as tolerated
- Maintenance program for strength and endurance

Comments: Patients should avoid tibial rotation for 4-6 weeks post-op

Frequency: _____ times per week

Duration: _____ weeks



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Signature: _____

Date: _____