

Rehabilitation Protocol: Arthroscopic Meniscus Repair (Peripheral Tear)

Phase 1 (Weeks 0-6)

- **Weightbearing:**
 - Partial weight bearing (50%) with crutches (**Weeks 0-2**)
 - Weight bearing as tolerated with crutches (**Weeks 2-6**)
- **Hinged Knee Brace:** Worn for 6 weeks post-op
 - Locked in full extension for ambulation and sleeping, remove for hygiene and PT (**Weeks 0-4**)
 - Unlocked for ambulation; and removed for sleeping, hygiene, and PT (**Weeks 4-6**)
- **Range of Motion:** AAROM → AROM as tolerated
 - **Weeks 0-4:** No flexion 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
 - At **4 weeks:** Begin partial wall-sits – keep knee flexion angle less than 90°
 - Okay to begin blood flow restriction therapy at 4 weeks
 - **Avoid** tibial rotation for 6 weeks post-op

Phase 2 (Weeks 6-12)

- **Weightbearing:** As tolerated – discontinue crutches
- **Hinged Knee Brace:** Discontinue when patient has achieved full extension with no extension lag
- **Range of Motion:** Full active ROM
- **Therapeutic Exercises**
 - Closed chain extension exercises, Hamstring strengthening
 - Leg press 0-90°
 - Proprioception exercises
 - Begin use of the stationary bicycle

Phase 3 (Weeks 12-16)

- **Weightbearing:** Full weightbearing with normal gait pattern
- **Range of Motion:** Full/Painless ROM
 - **No deep knee bends/squats for 4 months**
- **Therapeutic Exercises**
 - Continue with quad and hamstring strengthening
 - Focus on single-leg strength
 - Begin jogging/running, plyometrics, and sport-specific drills

Phase 4 (Months 4-6)

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