

Arthroscopic Meniscus Repair

PHASE I (Weeks 0-6)

- **Weight Bearing: Toe Touch with crutches**
- **Hinged Knee Brace:** worn for 4 weeks post-op (May unlock for sleep, set at 90 degrees)
 - Locked in full extension for ambulation and sleeping – remove for hygiene and PT (week 0-2)
 - Unlocked for ambulation and sleeping – remove for hygiene and PT (week 2-4)
- **Range of Motion** – AAROM → AROM as tolerated
 - **Weeks 0-4:** Full ROM – no weightbearing at flexion angle greater than 90 degrees
 - **Weeks 4-6:** Full ROM as tolerated – progress to flexion angles greater than 90 degrees
- **Therapeutic Exercises:**
 - Quad/Hamstring sets, Heel Slides, straight leg raises, co-contractions
 - Isometric abduction and adduction exercises
 - Patellar mobilizations
 - At **6 weeks:** can begin partial wall sits – keep knee flexion angle less than 90⁰

PHASE II (Weeks 6-12)

- **Weight Bearing:** As tolerated—discontinue crutches at 6 weeks.
- **Hinged Knee Brace:** Discontinue when patient has achieved full extension with no evidence of extension lag
- **Range of Motion:** Full active ROM
- **Therapeutic Exercises:**
 - Closed chain extension exercises, Hamstring strengthening
 - Leg press – 0-90⁰
 - Proprioception exercises
 - Begin use of stationary bicycle

PHASE III (Weeks 12-16)

- **Weight Bearing:** 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