



MENISCUS REPAIR PROTOCOL – STABLE PATTERNS (NON ROOT/RADIAL)

Repair Type: _____

Date of Surgery: _____

	Weight bearing Status	Brace	Range of Motion	Recommended Therapeutic Exercises	PATIENT'S CHECKLIST
Week 0-4	Toe touch, weight bearing Crutches: Yes	Yes	0-90° only until week 2	<ol style="list-style-type: none"> 1. Modalities as needed to decrease pain and swelling 2. Heel slides to increase flexion ROM, as needed 3. Isometric hip adduction 4. Quadriceps sets 5. Static weight lifts 6. Hamstring curls 7. Hip adduction and abduction, as tolerated 8. SportCord exercises: knee extension, leg press (sitting or supine) 9. Stationary bicycle: low resistance, as tolerated 	<input type="checkbox"/> Day 1: take off Ace-wrap <input type="checkbox"/> Take Aspirin as recommended daily for 30 days (unless other medication was prescribed) <input type="checkbox"/> Focus on regaining <u>FULL EXTENSION</u> <input type="checkbox"/> Exercise 4x-6x daily and use Ice <input type="checkbox"/> Keep up with range of motion 0-60° only until week 2 0-90° only until week 6
Week 4-6	Progress to Full weight	YES	Gently progress flexion as tolerated, DO NOT FORCE	<ol style="list-style-type: none"> 1. Continue ROM and strengthening exercises, as needed 2. Add step-downs/ups, lunges, and/or partial squats as tolerated 3. Add eccentric quadriceps and hamstring exercises 4. Increase resistance on stationary bicycle 5. Continue strengthening exercises 	<input type="checkbox"/> Do not exceed 90 degrees <input type="checkbox"/> Swelling AND/OR bruising may pool behind the knee, ankle, and foot (normal). IF you have persistent calf pain, call the office.
Week 6+	Full	Taper off	Full	<ol style="list-style-type: none"> 6. Progress to outdoor running (e.g., track) and agility drills 7. Add plyometric exercises as needed 8. Begin practicing skills specific to the activity (i.e., work, recreational activity, sport, etc.) 	<input type="checkbox"/> <u>Make appointment with physical therapy, START 3-7 days after surgery.</u>

