

**Meniscus Repair  
Post Operative Rehabilitation Protocol  
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**Prior to Surgery:**

- Expect a call from your physical therapy facility to schedule a “Prehab” appointment for you. This appointment will encompass exercises that you may start after surgery, how to perform your activities of daily living, how to use your crutches, how to use stairs, etc.
- Unless otherwise decided, expect a call from Rapid Recovery to demonstrate and instruct you on how to use the cryocuff (ice machine)
- At the surgical center, the anesthesiologist will discuss the option of a nerve block to numb your knee for your surgery, often using an indwelling nerve block or pain ball

**Following Surgery:**

- Expect a surgical bulky dressing and knee immobilizer after surgery. **The knee immobilizer must be worn at all times** except for during exercises and showering for at least 6 weeks. When you are upright, your knee brace must be on and “locked” out
- Use cryocuff or ice knee 3-5 times per day, as instructed.
- After the pain ball is removed after 3 days, may remove the dressing and the yellow gauze, allowing the water to flow over the incision, no scrubbing or soap
- After your shower, gently pat the incisions dry and apply band-aids or a clean dry dressing. No ointments or oils on the incisions until after the sutures are removed
- Sutures will be removed in the office at 10-14 days after surgery.
- Take your pain medicine as needed and as prescribed. Call if any problems or questions arise

**Precautions:**

- Watch for signs of infection and call immediately if these signs develop:
  - Fever higher than 102°F, shortness of breath, or have nausea and vomiting that does not improve with anti-nausea meds.
  - Warmth, redness, and/or increased drainage coming from your incision site.
- Watch for signs of blood clots and go to the ER immediately if these signs develop:
  - Excessive increase in swelling, hardness, pain, or redness in calf
- No hot tub or Jacuzzi for at least two weeks or until all wounds are healed and sutures are out.

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**PHASE 1 (0-2 weeks):**

Continue to **wear knee immobilizer at all times for at least 6 weeks.**

1. Walking-Brace locked, use crutches
2. Partial weight bearing
3. When climbing stairs, lead with the non-surgical side when going up the stairs, lead with the crutches and surgical side when going down the stairs

May shower w/o plastic covering once block has been removed and wound is sealed w/o bloody drainage

**Physical Therapy: Goals**

- **Protect repair**
- **Restore patellar mobility**
- **Restore Full extension**
- **Flexion: < 90 degrees**
- **Begin quad sets**
- **Ankle pumps**
  - Patient education:
    - Keep your knee straight and elevated when sitting or lying down. Do not rest with a towel placed under the knee
    - Do not pivot on your surgical leg
    - Do not actively bend your knee

**PHASE 2 (3-5 weeks):**

Continue partial weight bearing. Continue to wear knee immobilizer at all times and use crutches for support

**Physical Therapy: Goals**

- **Continue to protect the repair**
- **Maintain full extension**
- **Flexion < 120 degrees**

**May add:**

- **Stationary bicycle: gentle ROM only**
- **Calf raises**
- **Lumbopelvic strengthening-Side lying hip external rotation-clamshell**
- **Double limb standing balance utilizing uneven surface (wobble board)**
- **Joint position re-training**

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**PHASE 3 (6-8 weeks):**

May discontinue use of brace/crutches after 6 weeks, once quad control is achieved.

**Physical Therapy: Goals**

- Continue to protect the repair
- Maintain full extension
- Normalize gait
- Flexion within 10 degrees of contra lateral side
- Safely progress strengthening
- Supine active hamstring stretch
- Standing gastroc stretch and soleous stretch
- Gentle stretching all muscle groups
- Continue stationary bicycle
- Partial squat exercise 0-60 degrees
- Hamstring strengthening
- Lumbo-pelvic strengthening-Bridges on physio-ball, bridge on physio-ball with roll-in, bridge on physio-ball, hip hike
- Single limb balance progress to uneven surface including perturbation training
- Progress intensity and duration of exercises

**PHASE 4 (9-12 Weeks):**

**Physical Therapy: Goals**

- Maintain full ROM
- Safely progress strengthening
- May use elliptical, stair climber
- Squat to chair
- Lateral lunges
- Single leg progression
- Maintain quad strength

**PHASE 5 (3-5 Months):**

Continue strengthening

**Physical Therapy: Goals**

- Safely progress strengthening
- Progress to plyometric and agility program

**PHASE 6 (6+ Months): Unrestricted sport/work once all PT goals are met.**

Note: These instructions are to serve as guidelines and are subject to Physician discretion. Actual progress may be faster or slower depending on the individual.