

## Meniscus Transplant Rehabilitation Protocol

Phase	Goals	Precautions/Restrictions	Treatment
Weeks 0-4	<ul> <li>Protect surgical site</li> <li>Active ROM: 0-90 degrees (Maximum)</li> <li>Reduce muscle atrophy</li> <li>Reduce swelling</li> <li>PRICE principles</li> <li>Decrease pain and inflammation</li> </ul>	<ul> <li>ROM: 0-90 degrees (Maximum)</li> <li>PWB with the knee in full extension using crutches (0- 4 weeks)</li> <li>WBAT (4+ weeks)</li> <li>Immobilizer worn at all times while walking (4 weeks)</li> </ul>	<ul> <li>ROM (limited to 0-90 deg x 4weeks): <ul> <li>Heel slides</li> <li>Prone knee hangs/Supine knee extension with towel under ankle</li> <li>Patella mobilizations</li> </ul> </li> <li>PRICE <ul> <li>Cryotherapy: 5-7 times per day</li> <li>Compression with TubiGrip/TEDS</li> </ul> </li> <li>Quadriceps recruitment</li> <li>Global LE isometric/proximal hip strengthening</li> <li>Gait training with crutches</li> <li>Initial visit: FOTO, LEFS</li> </ul>
Weeks 4-16	<ul> <li>Discontinue knee immobilizer</li> <li>Full ROM</li> <li>Reduce atrophy/progress strengthening</li> <li>Reduce swelling</li> <li>Normalize gait</li> <li>SLR without extensor lag</li> </ul>	<ul> <li>Progress to WBAT (wean crutches)</li> <li>No loading at knee flexion angles &gt;90 degrees (16 weeks)</li> <li>No jogging or sport activity</li> <li>Avoid painful activities / exercises</li> </ul>	<ul> <li>ROM: No limit</li> <li>Gait training from WBAT to independent</li> <li>Core stabilization exercises</li> <li>Global LE strengthening <ul> <li>Limit deep knee flexion angles &gt;90 degrees</li> <li>Begin functional strengthening exercises (bridge, mini-squat, step up, etc)</li> <li>Double limb and single limb balance/proprioception</li> </ul> </li> <li>Aerobic training: <ul> <li>Walking program when walking with normal gait mechanics</li> <li>Stationary bike/elliptical</li> </ul> </li> </ul>
Weeks 16-24	<ul> <li>Full ROM</li> <li>Increase functional LE strength</li> <li>No effusion</li> <li>Return to activity as tolerated</li> </ul>	<ul> <li>Jogging program initiated at 16 weeks</li> <li>Basic plyometric exercises may begin at 16 weeks with caution to avoid loaded high knee flexion</li> </ul>	<ul> <li>Gradually increase lifting loads focusing on form, control, and tissue tolerance</li> <li>Progress as tolerated: ROM, Strength, Endurance, Proprioception/Balance, plyometrics</li> <li>Week 16: FOTO, LEFS</li> </ul>
Weeks 24+	<ul> <li>Full ROM</li> <li>Functional strengthening</li> <li>Return to sport/activity</li> </ul>	<ul> <li>Return to sport 6-12 months post-op</li> <li>Return to high demand sport &gt;8 months</li> </ul>	<ul> <li>Gradually increase lifting loads focusing on form, control, and tissue tolerance</li> <li>Progress as tolerated: ROM, Strength, Endurance, Proprioception/Balance, agility, Sport specific skills</li> <li>Week 24: FOTO, LEFS</li> </ul>

This protocol is not meant to be prescriptive but a recommendation to guide the rehabilitation process. Each patient's progress may vary based on specifics of their injury and procedure.

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