



Modified Meniscectomy **Post-Operative Rehabilitation Protocol**

0-2 weeks

- PWB x 2 weeks post-op.
- Brace locked in extension x 2 weeks post-op.
- Full Active/Passive ROM
- Patella mobilization
- SLR supine
- Quad Sets
- Heel Slides
- Ankle Pumps

2-6 weeks

- Begin progression to Full weight-bearing.
- Progress with ROM until full
- Wall sits, lunges, balance exercises.
- Closed chain quad strengthening
- Modalities PRN

Weight Bearing Status

PWB x 2 weeks

ROM Restrictions

Full
AROM/PROM
beginning POD
1

"Pie-crusting" is a surgical technique that involves partially releasing the medial collateral ligament (MCL) during an arthroscopic knee procedure. During the surgery, Dr. Chahla used this procedure in order to expand the medial joint space and increase working space in the medial compartment. This allows Dr. Chahla to safely evaluate the medial compartment of the knee and address any pathology without causing permanent damage to the cartilage.



Exercise	Week																
	1	2	3	4	5	6	7	8	9	10	12	16	20	24			
Initial Exercises:																	
ROM Goals	0-90°		0-125°				Progress to full										
Flexion/extension, heel slides																	
Flexion/extension- seated																	
Patella/Tendon mobilization																	
Quad Series																	
Hamstring Sets																	
Sit and Reach for Hamstrings																	
Ankle Pumps																	
Crutch weaning	PWB																
Heel prop knee extension stretch																	
SLR (w/ brace until quad control restored)																	
Toe and Heel Raises																	
Balance Series																	
Weight-bearing Strength Exercises:	1	2	3	4	5	6	7	8	9	10	12	16	20	24			
Double Knee Bends																	
Double Leg Bridges																	
Reverse Lunge, static holds																	
Beginning cord exercises																	
Dead Lift (2 →1 leg)																	
Squat/Leg press (ISO →reps, 2 → 1 leg) (80-0° arc)																	
Sports Test Exercises																	
Cardiovascular Exercises:	1	2	3	4	5	6	7	8	9	10	12	16	20	24			
Bike with both legs-no resistance																	
Bike with both legs- resistance																	
Aqua jogging																	
Treadmill-walking 7% incline																	
Swimming with fins-light flutter kick																	
Elliptical Trainer																	
Rowing																	
Stair stepper																	
Agility Exercises:	1	2	3	4	5	6	7	8	9	10	12	16	20	24			
Running Progression																	
Initial-Single Plane																	
Advance-Multi Directional																	
Functional Sports Test																	
High Level Activities:	1	2	3	4	5	6	7	8	9	10	12	16	20	24			
Golf Progression																	
Outdoor biking, hiking, running																	
Return to Sport																	



Quad Series:

- Quad sets (5 sec hold) also quick contractions (NMES to supplement)
- Prone quad sets
- SLR with no extension leg
- Progression of Quad Strengthening
 - LAQ in safe range -no added resistance to begin
 - Once weight bearing tandem stance TKE with 5 sec hold
 - Isometric wall sit
 - SLR with resistance
 - Step up progression
 - Squat progression
 - Leg press progression
 - Lunge progression

Hamstring Series:

- Hamstring stretching (supine/prone)
- Hamstring set (heel dig)- contract hamstring with knee flexed pressing heel into the floor (5 sec hold)
- Hamstring curls
- Progress to resisted hamstring curl

Sport Test Exercises:

- Goals: impact training and introduction of directional drills
- Double leg squat jumps
- Box jumps
- Speed skaters
- Double leg jumps for height and distance progress to single leg as tolerated
- Blaze pod change of direction drills

Further Clarifications and Considerations:

- Double Knee Bends: feet shoulder width apart, bend knees to 30°, keeping knees behind the toes.
- Cord exercises (resistance band/cord): resisted double knee bends, resisted hamstring curls
- May begin to implement BFR as early as 1 week into post-op period



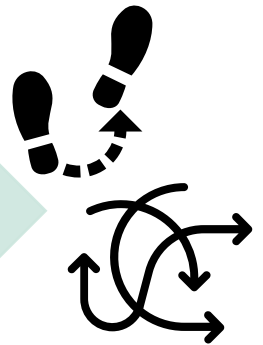
Return to Running Criteria

- Trace effusion, flexion within 5 degrees of contralateral side
- LSI on anterior reach Y balance test $\geq 90\%$
- LSI on quadriceps torque output on isometric measurement $\geq 75\%$
- 12" SL squat tolerance
- Able to walk > 1 mile with no limping or pain
- Able to "hop" with UE assist on operative leg 5 times without pain or compensation
- SL balance with eyes closed 30 seconds without loss of balance



Return to Agility/Change of Direction Criteria

- Return to running criteria listed above met
- No effusion
- Full ROM
- Quad LSI on isokinetic $\geq 85\%$
- Hamstring LSI on isokinetic $\geq 85\%$
- LSI on anterior reach Y-balance $\geq 95\%$
- SL hopping pain-free and effusion free



Return to Sport Criteria

- In order to test must demonstrate full AROM, no pain, no/trace effusion, 5/5 strength, negative lachman and pivot shift, LSI $\geq 95\%$ hamstring curl and leg press
- Quadricep strength $\geq 95\%$ of contralateral side (< 2cm of atrophy)
- Able to perform single leg squat with correct form
- LSI SL hop $\geq 95\%$
- Y-Balance $\geq 95\%$ (mean of 3 trials in anterior, posterolateral, posteromedial/100)
- Vertical jump test, single leg hop distance, and timed single leg hop over 20 -feet $\geq 90\%$ of contralateral side

