

REHABILITATION GUIDELINES  
MENISCAL ROOT REPAIR

(isolated without ACL or microfracture)

## 0-6 WEEKS POST-OP

DOS:

- a. Rest, ice, compression wrap, elevation
  - i. Dressing change ok after POD #2
  - ii. Elevation with knee in maximal extension optimal as much as tolerated (i.e. pillows under calf or heel, not knee crease)
- b. Ankle AROM as much as possible
- c. Quad isometrics with knee in full passive extension
- d. Straight leg raise ok when able to do so without extensor lag
- e. Gastroc isometrics
- f. Patellar mobilization as soon as pain permits
- g. Supine heel slides with terminal stretch to increase flexion slowly to full. **No aggressive terminal passive stretching beyond 120 degrees permissible**
- h. Sit and allow knee flexion over edge of table to facilitate flexion to 90
- i. Supine knee passive extension with wedge under heel to promote full hyperextension
- j. Gait training: Strict NWB with crutches or walking
  - Brace only as directed for concomitant ligament issues

## 7-8 WEEKS POST-OP

DATE:

- a. Progress ROM to full, gentle terminal stretch, avoid hyperflexion
  - b. Begin stationary cycle, gradually increase duration and resistance as tolerated, maintaining at least 60 RPM
  - c. Progress weight bearing to full as tolerate
  - d. Proprioceptive training
  - e. Begin sportcord or theraband resisted closed chain strength, knee flexion angle not to exceed 90 degrees, for strength. Progress to light weight training if not ready (no effusion, full-range of motion, good progress with therabands)
  - f. ¼ squats ok
  - g. Begin treadmill, add incline progressively up to 7-10 degrees, backwards treadmill ok
- \*no pivoting, twisting, running, jumping or landing**

## 9-12 WEEKS POST-OP

DATE:

- a. Continue terminal stretching, should be full AROM by this time frame
- b. Low impact cardio
- c. Outdoor and/or stationary cycling, no off-road, no clipless pedals
- d. Continue to increase resistance and endurance on stationary cycle
- e. Controlled lateral, forward, and backward movement with sportscord resistance
- f. May initiate/continue to high rep, low resistance weight training. No open chain knee extension, no flexion greater than 90 degrees during strength exercises
- g. Single leg quarter squats ok, no knee flexion angle greater than 90 degrees



h. Advance proprioception to include balance board

## 3-4 MONTHS POST-OP

DATE:

- a. As above for stretch
- b. Increased resistance training, closed chain Lunges, leg press, calf press minisquats, HS curls
- c. Begin jogging if desired
- d. Functional progression from jogging to straightline running to figure 8 runs to carioca to planting and cutting, and plyometrics
- e. Advanced cardiovascular fitness exercises

## RETURN TO SPORT CRITERIA

- a. MD clearance
- b. Minimal to no effusions, no mechanical symptoms or joint line tenderness, AFROM, minimal to no atrophy, negative McMurray's
- c. Sports test 20/21 or better
- d. Completed sport-specific functional progression
- e. No cutting and twisting sports prior to 4 months postop minimum