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Isolated Meniscus Repair

GAIT:

PWB (50%) with brace locked in extension for 3-4 weeks (or per script). Concern is flexion in WB.

Criteria to D/C crutches: Once WB restrictions are lifted: Pain under control.

Criteria to D/C brace: Good quad control

ROM:

2-4 weeks: flexion < 90 degrees (depends on stability of repair)

> 6 weeks: WB or NWB flexion > 90 degrees

MODALITIES:

IFC/ice/elevation as need for pain/effusion control

FES to quads to facilitate good quad contraction as needed

REHAB EXERCISES:

Rehab as tolerated, with respect to concomitant surgeries.

Phase I – ROM: 0-2 weeks

Start PT POD 5-7

Goal is full extension by POD 5, quad activation.

Rehab Exercise Suggestions

AROM knee flexion (< 90 degrees), goal is full extension by POD #3-5.

Patellar mobs: Initiate at POD #2-3, focus on superior glide, especially if lacking Extension. Goal = 10 mm superior glide by POD #5-6.

Isometric quads (multi-angle > 50 degrees to 0 degrees)

E-Stim to quads to facilitate good contraction (in shortened range).

Isometric hip adduction

SLR x 4, quad/glut/ham sets, A/P's

Soft tissue techniques to infrapatellar space.

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Criteria to Progress: AROM 0 – 90 degrees
Quad activation

Phase II - 2-8 weeks

Dr. Anderson: POW 2-6

Begin at 2 weeks with brace unlocked for rehab (< 90 degrees flexion)

**** MUST CONSIDER ROM GUIDELINES WHEN PERFORMING ALL EXERCISES**

Closed chain exercises: Initiate once patient is WBAT

Weight-shifts (L/R, F/B, diagonals)
SLB (eyes open/closed, head/arm movement)
Progress to SL balance – reach activities, no pivoting

Phase II: Continued

Step-ups, step-downs 2"-4" (* WB knee flexion must be < 90 until week 6)

Leg press: Within available AROM and ROM guidelines
VMO Closed Chain Wall slides (60 degree) to protect patella
Calf jumps with respect to ROM guidelines
NO depth jumps, jumps with knee flexion > 90 degrees (Swimex or land)

Gait activities: Forward cup walk step-overs (emphasize hip position), progress to lateral cup walk (requires core training to avoid compensation)

Train heel strike portion of gait
Emphasize external stimuli

AROM: Knee flexion within restrictions, extension, SLR x 4 with weights

Patellar mobs: superior glide

Initiate motion loss program at POW 2 if lacking extension:

Include posterior glide of femur (small load, long duration)

Hourly ROM by patient

Prone hangs with weight

FES

More aggressive joint mobs (patella, femur)

Distraction mobilization (within ROM)

**No posterior glides of tibia on femur*

Aerobic conditioning: Treadmill: forward, retro, progress to incline

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Stairmaster: partial closed chain: forward, retro

Criteria to Progress: Good quad control
AROM 0 – 125 degrees
No gait deviations

Phase III - 8-12 weeks

Begin WB in > 90 degrees flexion at 6 weeks

Closed Chain: Continue to progress above exercises
Medial step-downs
Emphasize terminal range extension
Mini-squats
Mini-lunges
Leg press with respect to AROM and ROM guidelines
SLB - to start transverse plane activities
Functional strengthening/early sport-specific training
Biking, swimming, progress to half-speed running
NO full squat, full speed running, agility activities

Criteria to Progress: AROM within 10% of uninvolved extremity
Performs forward/retro step-ups and medial step-downs with
good quad control.

Criteria to discharge non-athlete:
AROM within 10% of uninvolved extremity
Forward/retro step-ups, medial step-downs with good quad
control
No difficulty with ADL's, work
Independent Written, Progressive Home Exercise Program
Strength 4+ - 5/5
80% of single Leg Balance Reach

Criteria to discharge non-athlete: AROM within 10% uninvolved leg
Strength 4+- 5/5, Independent HEP
No difficulty with ADLs or work
Independent Written, Progressive Home
Management Program
80% of single Leg Balance Reach

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Phase IV – 12 Weeks and Later: Sport Specific Activities, Functional Retraining

Continue functional rehab
Return to sport activities
Biodex testing needs to be 85% of pre-/uninvolved

Criteria to Discharge Athlete:

Strength 85% of uninvolved leg per isokinetic testing
Single leg balance reach 85% of uninvolved leg
Single leg hop for distance 85% of uninvolved leg

Revised: 9/04