

Rehab Protocol

Meniscus Transplants

	Postoperative Weeks					Postoperative Months			
	1-2	3-4	5-6	7-8	9-12	4	5	6	7-12
Brace: Bledsoe postoperative	X	X	X						
Range of motion minimum goals:									
0-90°		X							
0-120°			X						
0-135°				X					
Weight bearing:									
Toe touch - 1/4 body weight	X								
1/2 to 3/4 body weight		X							
Full			X						
Patella mobilization	X	X	X						
Modalities:									
Electrical muscle stimulation (EMS)	X	X	X						
Pain/edema management (cryotherapy)	X	X	X	X	X	X	X	X	X
Stretching:									
hamstring, gastroc-soleus, iliotibial band, quadriceps	X	X	X	X	X	X	X	X	X
Strengthening:									
Quad isometrics, straight leg raises, active knee extension	X	X	X	X	X				
Closed-chain (gait retraining, toe raises, wall sits, mini-squats)				X	X	X	X	X	
Knee flexion hamstring curls (90°)					X	X	X	X	X
Knee extension quads (90-30°)		X	X	X	X	X	X	X	X
Hip abduction-adduction, multi-hip			X	X	X	X	X	X	X
Leg press (70-10°)					X	X	X	X	X
Balance/proprioceptive training:			X	X	X	X	X	X	X

weight-shifting, mini-trampoline,
BAPS, KAT, plyometrics

Conditioning:

UBE	X	X	X						
Bike (stationary)			X	X	X	X	X	X	X
Aquatic program				X	X	X	X	X	X
Swimming (kicking)					X	X	X	X	X
Walking				X	X	X	X	X	X
Stair climbing machine									X
Ski machine							X	X	X

Light recreational sports

X
