Meniscal Transplantation
Rehab Protocol
Dr. Jon Henry

Phase I – Maximum Protection (Weeks 0 to 6):

Goals
- Emphasis on full knee extension
- ROM to 90 degrees of knee flexion
- Control postoperative pain and swelling
- Regain quadriceps control

Precautions
- Avoid active knee flexion
- Avoid ambulation without brace locked at 0 degrees for first 4 weeks

Weeks 0 to 4:
- Begin passive knee range of motion to 90° of knee flexion and strong emphasis on full knee extension
- Toe Touch weight Bearing for 4 weeks
- Quad sets and prone hangs for knee extension
- Patella mobility
- SLR’s (all planes)
- Multi-plane open kinetic chain straight leg raising
- Gait training

Weeks 4 to 6:
- Progress PWB to WBAT weeks 4-6
- Aquatic therapy may begin
- Standard ergometry (<90°)
- Multi-hip machine
- Leg press (bilateral 0-60°)

MD Appointments:

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<td>2 weeks</td>
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Phase II – Progressive Stretching and Early Strengthening (Week 6 to 14):

Goals:
- Restore full ROM
- Restore normal gait
- Decrease pain and increase NMS control with ADL’s and stairs

Precautions:
- Avoid pain with therapeutic exercise and ADL’s
Avoid Running and sport activities

Treatment Strategies:

Weeks 6 to 14:
- D/C crutches with restoration of normal gait and Quad control
- AAROM exercises
- SLR’s with weight
- Neuromuscular balance training (bilateral to unilateral)
- Standard ergometry (>90°)
- Leg press (bilateral/eccentric/unilateral) 9 weeks?
- Squats (0-45°)
- Forward step-up program
- Retro-Treadmill ambulation
- Hamstring curls
- Elliptical machine

Phase III – Advanced Strengthening and Proprioception Phase (Weeks 14 to 22):

Goals:
- Return to normal Strength and ROM
- Demonstrate 8 inch step down with proper knee control
- Isokinetic test >75% limb symmetry

Precautions:
- Avoid pain with therapeutic exercise
- Avoid sport activity until MD clearance

Treatment Strategies:
- Squats (<60°)
- Forward step-down program
- Progress to gym program

Phase IV – Strengthening and Plyometric Phase (Weeks 22 to 30):

Goals:
- Pain-free running
- Isokinetic testing >85 % limb symmetry
- Independent gym program and HEP

Treatment Strategies:
- Squats progression (>90°)
- Retro treadmill running and forward treadmill running at 6 months
- Advance proprioception drills
- Sports test for return to play
- Revised 10/2010