

Complex Meniscus Repair Protocol

* Radial, root, or complex repairs

I) <u>Weeks 0-6:</u>

- Restrictions:
 - 1) Immobilizer must be on at all times when walking.
 - 2) Touch weight bearing (TWB) with the knee in full extension using crutches
 - 3) No knee flexion beyond 90 degrees
- Goals:
 - 1) Active ROM: 0-90 degree maximum.
 - 2) Reduce muscle atrophy.
 - 3) Reduce swelling.
 - 4) Quad Activation
- Anti-edema
 - 1) Ice/Cryotherapy multiple times during the day
 - 2) Limb elevation
 - 3) Compression with TubiGrip/TEDS
 - 4) Ankle pumps while icing.
- Therapy/Exercises:
 - 1) ROM (0-90 degrees maximum):
 - a. Long sitting heel slides.
 - b. Hook lying heel slides.
 - c. Supine wall slides for knee flexion.
 - d. Prone knee flexion.
 - e. Supine knee extension with towel under ankle.

- f. Prone hangs.
- g. Towel calf stretches.
- 2) Core exercises:
 - a. Crunches.
 - b. Oblique crunches.
 - c. Prone superman.
- 3) Hip and lower extremity exercises:
 - a. Belt abduction isometrics.
 - b. Pillow adductor squeezes.
 - c. Advance to straight leg raises as able.
 - d. Gluteal sets.
 - e. Quad sets.
 - f. Hamstring sets.
 - g. Ankle DF and PF isometrics against crutch advancing to Theraband as comfort improves.

II) Weeks 7 to 8:

- Restrictions:
 - 1) D/C immobilizer
 - 2) Progress to weight bearing as tolerated (wean crutches)
 - 3) Avoid loading past 90 degrees of flexion—educate patient on chair mechanics
- Goals:
 - 1) Reduce effusion
 - 2) Full ROM
 - 3) Minimize hip, core and lower extremity atrophy
- Therapy/Exercises:
 - 1) ROM exercises:
 - a. Continue with previous ROM exercises.
 - 2) Gait training:
 - a. Weight shifts.
 - (a) Side to side.
 - (b) Forwards and back.
 - b. Gait mechanics training.
 - (a) High knees.
 - (b) Big steps.
 - (c) Side shuffle walking speed.
 - (d) Single leg stance.
 - (i) Advance to cushion, 1/2 roll, ball catches.

- 3) Core exercise examples:
 - a. Prone plank.
 - b. Side plank.
 - c. Upper back six pack on ball.
 - d. Supine ball rotations.
 - e. Side crunch on ball.
- 4) Hip and lower extremity exercise examples:
 - a. 90 degree flexion limit.
 - (a) Isometric leg press
 - (b) Bridging as able.
 - (c) Standing hip Theraband in all directions.
 - (d) Step up.
 - (e) Mini squat.

III) Weeks 9 to 16:

- Restrictions:
 1) No loading at flexion angles greater than 90 degrees
- Goals:
 - 1) Full active range of motion
 - 2) No effusion
 - 3) Improved core and hip strength and endurance
- Outcome measures at final evaluation:
 - 1) LEFS: Lower extremity functional scale.
 - 2) PSFS: Patient specific functional scale.
- Therapy/Exercises: (No loading past 90 degrees of knee flexion).
 - 1) Weight bearing exercises:
 - a. Maximize proprioceptive training:
 - (a) Cushion work.
 - (b) Bosu ball.
 - (c) ½ roll.
 - (d) Sport specific:
 - (i) Ball catches.
 - (ii) Ball throws.
 - (iii) Stick handling.
 - 2) Core work examples:

- a. Upper back six pack on ball.
- b. Prone walk out on ball.
- c. Side crunch on ball.
- d. Continued plank work.
- e. Back bridge single arm dumbbell fly.
- f. Bridge.
- g. Quadrupled hip extension.
- h. Quadrupled bird dog.
- 3) Hip work/lower extremity work examples:
 - a. Continued standing hip Theraband in all planes.
 - b. Seated hip IR and ER against Theraband.
 - c. 85 degree knee flexion limit)
 - (a) Step ups with dumbbells.
 - (b) Mini lunge with dumbbells.
 - (i) Two dumbbells.
 - (ii) One dumbbell in either hand.
 - (c) Sumo squat with weight elevated on boxes.
 - (d) Wall squat with tubing valgus stress.
 - (e) Hockey side lunge.
 - (f) Limited range dead lift.
- 4) Non-impact aerobic conditioning:
 - a. When walking with normal gait mechanics.
 - b. Build up to 30 minutes of non-impact conditioning.
 - c. Knee flexion angles do not exceed 90 degrees.
 - (a) Elliptical trainer.
 - (b) Stairmaster.
 - (c) Standard stationary bike.

IV) <u>4-6 months:</u>

- 1) Initiation of return to sport program.
- 2) Outcome tools
 - a. LEFS: Lower Extremity Functional Scale
 - b. PSFS: Patient Specific Functional Scale