

# Meniscus Repair Postoperative Protocol

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**Patient Name:**

**Date of Surgery:**

## **Phase I: Surgery - 4-6 weeks post-op**

### **Rehabilitation goals**

Protection of the postsurgical knee  
Restore normal knee extension  
Eliminate effusion (swelling)  
Restore leg control

### **Precautions**

The patient may gradually wean from two crutches to one crutch to no crutches as long as the knee is in the locked knee brace, and there is no increase in pain or swelling for 4 weeks.

*Knee brace locked for all weight-bearing activities for 4 weeks*

Do not flex the knee past 90°

### **Range of motion exercises**

Knee extension on a bolster  
Prone hangs  
Supine wall slides  
Heel slides (caution with poster medial meniscus repair secondary to the semimembranosus insertion)  
Knee flexion off the edge of the table

### **Suggested therapeutic exercise**

Quadriceps sets  
Straight leg raises  
4-way leg lifts in standing with a brace on for balance and hip strength  
Abdominal isometrics

### **Cardiovascular exercise**

Upper body circuit training or upper body ergometer

### **Progression criteria**

4 weeks after surgery  
Pain-free gait without crutches  
No effusion (swelling)

## **Phase II- Start after Phase I criteria are met (~4 weeks post-op)**

### **Rehabilitation goals**

Single leg stand control

Normalize gait

Good control and no pain with functional movements, including step up/down, squat, partial lunge (between 0° and 60° of knee flexion)

### **Precautions**

No forced flexion with passive range of motion with knee flexion or weight-bearing activities that push the knee past 60° of knee flexion

Avoid post-activity swelling

No impact activities

### **Suggested therapeutic exercise**

Non-impact balance and proprioceptive drills

Stationary bike

Gait drills

Hip and core strengthening

Stretching for patient-specific muscle imbalances

Quadriceps strengthening, making sure that closed chain exercises occur between 0° and 60° of knee flexion

### **Cardiovascular exercise**

Non-impact endurance training: stationary bike, nordic track, swimming, deep water running or cross trainer

### **Progression criteria**

Normal gait on all surfaces

Ability to carry out functional movements without unloading affected (injured) leg or pain, while demonstrating good control

Single leg balance greater than 15 seconds

## **Phase III- Start after Phase II criteria are met (~ 3 months post-op)**

### **Rehabilitation goals**

Good control and no pain with sport and work specific movements, including impact

### **Precautions**

Post-activity soreness should resolve within 24 hours

Avoid post-activity swelling

Avoid posterior knee pain with end range knee flexion

**Suggested therapeutic exercise**

Impact control exercises beginning 2 feet to 2 feet, progressing from 1 foot to the other and then 1 foot to the same foot

Movement control exercise beginning with low velocity, single plane activities and progressing to higher velocity, multi-plane activities

Strength and control drills related to sport specific movements

Sport/work specific balance and proprioceptive drills

Hip and core strengthening

Stretching for patient-specific muscle imbalances

**Cardiovascular exercise**

Replicate sport or work specific energy demands

**Return to sport/work criteria**

Dynamic neuromuscular control with multi-plane activities without pain or swelling