

Meniscectomy

Physical Therapy Protocol



Dr. Christopher Ellingson

Phase 1 (0-7 days after surgery)

GOALS

- Control inflammation/swelling
- Restore ROM
- Re-establish quadriceps activation
- Educate patient on rehabilitation process

WEIGHTBEARING

- Weightbearing as tolerated with crutches
- Wean from crutches as patient demonstrates normal gait and good quad control

INTERVENTIONS

- Ice, compression, elevation
- Ankle pumps
- Retrograde massage
- Patella mobilizations (superior/inferior, medial/lateral)
- Heel slides
- Supine passive hamstring stretch
- Stationary bike
- Calf raises
- Quad sets
- Hip abduction
- Straight leg raise
- Sidelying clamshell
- Low intensity, long duration extension stretches

TO PROGRESS

- 0-90 ° ROM
- Ability to perform straight leg raise

Phase II (Day 8-2 weeks)

GOALS

- Full, pain free ROM
- Restore strength and endurance
- Normal gait without assistive devices

- Improve balance and proprioception

WEIGHTBEARING

- As tolerated—goal to discontinue use of assistive devices

INTERVENTIONS

- Continue phase 1 interventions
- Stretching of all muscle groups (quadriceps, hip flexor, hamstring)
- Lumbopelvic strengthening
- Standing hamstring curls, step ups, ball squats, wall slides
- Single leg standing balance with knee slightly flexed
 - From static to unsteady surface

TO PROGRESS

- Full, pain free ROM
- No swelling
- Normal, symmetric gait without assistive devices

Phase III (2-8 weeks)

GOALS

- Maintain full, pain free ROM
- Enhance strength and endurance
- Proper movement patterns

WEIGHTBEARING

- Full

INTERVENTIONS

- Continue phase I-II
- Cardio: as tolerated
 - Elliptical, stair climber, swimming, pool jogging
 - Strengthening to include: leg press, hip abductor, hip adductor, lunges, deadlift
 - Progress intensity and duration as appropriate

*If you have any problems or questions,
please call your doctor's office (8am-5pm).*

Answering service for after hours.

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- Progress single limb balance
- Walk-to Run program
- Progress to plyometric/agility program

TO PROGRESS:

- No pain or swelling after exercise
- Able to perform ADLs pain free
- If patient is to return to impact activities:
 - 10 repetitions of single leg squat (with proper form) through 60° flexion
 - Drop vertical jump with good control
 - Completion of walk to run program without pain or swelling
 - Functional assessment: quadriceps index >80%, HHD mean preferred, hamstring/glute med/glute max >80%, HHD mean preferred, single leg hop test >75% compared to contralateral side

Phase IV (8+ weeks)

GOALS

- Maintain full ROM
- Progress strengthening
- Proper movement patterns
- Return to all desired and necessary activities

INTERVENTIONS

- Phase I-III continued
- Add:
 - Sport specific plyometrics and agility
 - Hard cutting/pivoting, depending on patient goals
 - Dual-task activities

RETURN TO SPORT

- Quadriceps >95%, HHD mean preferred
- Hamstring/glute med/glute max >95%, HHD mean preferred
- Single leg hop test >95% compared to contralateral side