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PHYSICAL THERAPY PROTOCOL FOR MENISCUS ROOT REPAIR

THIS PROTOCOL IS PROVIDED FOR GENERAL GUIDELINES AND RECOMMENDATIONS. ALL PHYSICIAN ORDERS SUPERCEDED THIS PROTOCOL. IT IS ADVICED THAT THERPAIST USE CLINICAL JUDGEMENT AND DISCRETION IN ADVANCING PATIENTS THROUGH THE PROTOCOL.

PHASE 1 - MAXIMUM PROTECTION (WEEKS 0-6)

Goals:

- 1. Reduce pain and inflammation
- 2. 0 Degrees of knee extension
- 3. Knee flexion limited to 90 degrees for 3 weeks then progressing from 90 to120 degrees by 6 weeks

Weight Bearing – Non-weightbearing for 6 weeks

Therapeutic Exercise:

Ankle Pumps

- Passive knee extension to 0 degrees
- Hamstring stretches
- Patella mobilizations
- Quad sets
- Straight leg raises all 4 directions
- Passive and active knee flexion following knee flexion limitations
- Open chain hip strengthening.

Modalities:

Cryotherapy/Ice packs with elevation for swelling and pain management NMES to assist quadricep's activation if needed Electrical stimulation/IFC for pain control and swelling if needed



PHASE 2 – PROGRESSIVE GAIT, ROM, AND STRENGTHENING (WEEKS 6-8)

Goals:

- 1. Improved knee ROM
- 2. Full weight bearing and normal gait
- 3. Improved quad and LE strength
- 4. Avoid Rotational movements until 14 weeks

Weight Bearing – Progress to full weightbearing

Therapeutic Exercise:

Continue previous exercises

Progress to full knee ROM

Stationary bike

Bilateral closed kinetic chain strengthening starting with limited knee ROM

Step up progression

Balance and proprioception exercises

Gait training as needed to normalize gait

Modalities: PRN

Cryotherapy/Ice packs with elevation for swelling and pain management Electrical stimulation/IFC for pain control and swelling if needed

PHASE 3 – ADVANCED STRENGTHENING AND PROPRIOCEPTION (WEEKS 8-12)

Goals:

- 1. Full knee ROM
- 2. Maximize strengthening for the quadriceps and lower extremity
- 3. Avoid rotational movements until 14 weeks.

Therapeutic Exercise:

Continue previous exercises as needed using therapist discretion Increase endurance on stationary bike Begin unilateral closed kinetic chain exercises May add gym strengthening exercises including leg press less than 90 deg of knee flexion Progressive proprioception exercises Progressive hip strengthening May add treadmill walking and elliptical trainer Progressive squat and lunge program starting at 10 weeks May start outdoor biking at 10 weeks



PHASE 4 – ADVANCED STRENGTH AND RUNNING PROGRESSION (WEEKS 12-16)

Goals:

- 1. Return to running
- 2. Return to sports testing with involved limb testing 90% of uninvolved limb

Therapeutic Exercise:

Continue previous exercises as needed using therapist discretion Start linear running progression Start plyometrics bilateral progressing to unilateral At 14 weeks progress to lateral, rotational and multi directional drills

RETURN TO PLAY

Return to play and sporting events when cleared by physician.