

## **Dr. Thomas X. Nguyen, MD's Meniscal Repair Rehab Protocol**

- Can take dressings down in 3 days and shower. Apply Band-aids over portal sites.
- Limit knee flexion to 90 degrees for 4 weeks with hinge-knee brace.
- Avoid leg presses past 70 degrees knee flexion, cross-legged sitting, deep squats and lifting for first 4 months.
- 0-6 weeks: Toe-touch weight bearing with crutches. Quadriceps strengthening with straight leg raises and isometric exercises.
- 7-14 weeks: Progress range of motion to full motion. Brace can be discontinued if quadriceps strength is good. Begin partial protected weight bearing (20%) and wean off of crutches when patient can ambulate without a limp. Initiate proprioception with therapy. Strengthening exercises can start when there is full normal range of motion. Pool and bicycle therapy allowed.
- 15-22 weeks: strengthening and sports-specific activities. Core muscle strengthening. Running begins followed by agility and sport-specific exercises.
- 5 months: Isokinetic and plyometric training are introduced with deep flexion and pivoting activities.
- 6 months: return to play when patient achieves full range of motion, absence of mechanical symptoms, strength greater than 80% of the strength of contralateral extremity, perform single-leg hop and crossover hop tests with less than 15% deficit.