



ACL Reconstruction With Meniscus Repair REHAB Protocol

Week 1

Rest, ice, compression, elevation

-Elevation with knee in maximal extension optimal

Ankle ROM

Quad isometrics with knee in full passive extension

SLR ok in brace only (locked in full extension)

Gastroc isometrics

Patellar mobilization

Supine heel slides with terminal stretch to increase flexion to 90 degrees by 4 weeks post op

DO NOT exceed this goal prior to 4 weeks post op

Sit and allow knee flexion over edge of table to facilitate flexion to 90

Supine knee passive extension with wedge under heel to promote full hyperextension

Gait training TDWB with brace locked in full extension

Must sleep in brace

Weeks 2-4

Continue with above – primary emphasis on increasing ROM (full hyperextension, flexion to 90)

Continue crutches with brace locked at 0, TDWB

Add supine SLR out of brace when able to do so with no extensor lag

Side lying SLR begins

Must sleep in brace

Weeks 5-6

Progress ROM to full, including flexion

Rehabilitation brace opened 0-90°, may wean from nighttime brace as tolerated

More aggressive patellar mobilization

May begin stationary cycle, no resistance

Progressed to full WBAT

Transition to functional knee brace is not routine optional for a risk patient at 6 full weeks postoperative swelling permits

Weeks 7-12

Continue aggressive terminal stretching, should be full AROM early in this timeframe
Begin Treadmill, and clinically progressively up to 7-10°, backwards treadmill okay
Gradually increase resistance and endurance stationary cycle
Leg sport cord or Thera-Band resisted closed kinetic chain resistance training
May transition to high rep, low resistance weight training after 2 full months postop, if motion full
No open chain knee extension, no flexion greater than 90° during strengthening exercises
Quarter squats okay, no knee flexion angle greater than 90
Continue functional knee brace full-time except sleep
Begin stork stance for proprioception

Weeks 12-16

As above for stretching
Increase his resistance training, close chain. Lunges, leg press, calf press, mini squats, HS curls
Sport cord resisted forward, backward, lateral movement
May cycle outside in brace (remain seated in saddle, Road only)
Light jogging brace
At slide board and advanced proprioceptive training
No brace needed except for workouts
May begin golfing and brace (chip or putt)
Increase intensity and duration of cardio training
Stairstepper, precor, cardioglide OK

Weeks 17-24

Add Plyometrics
Hill training with jogging and bicycle
Figure 8 runs, controlled intro to cutting maneuvers and sport specific activities and noncontact, noncompetitive environment
Advanced strengthening, proprioception, cardiovascular condition

Return to sports criteria

MD clearance
Sports test 20/21 or better
Single leg hop equal to contralateral leg
Adequate stability on ligament testing
No significant effusions or mechanical symptoms
Completed sport-specific functional progression
Functional knee brace for contact sports, jumping, landing or cutting and twisting until 1 year