

Meniscus Repair (Peripheral/Vertical)

Phase 1 – Maximum Protection

Weeks 0 to 3

- Brace – locked in full extension during all ambulation for 3 weeks
 - Can unlock brace to allow 0-90 degrees for unloaded range of motion only
- Touch toe weight bearing (<25%) at all times for 3 weeks
- Use two crutches at all times
- Limit knee flexion to 90 degrees for 3 weeks

Goals:

- Reduce pain and inflammation
- Full knee extension

Exercise Progression:

- Emphasize patellofemoral mobilizations
- Passive/active knee range of motion with 90 degrees flexion limit
- Quadriceps setting emphasize VMO function
- Multi-plane straight leg raising
- Open chain hip strengthening
- Gait training

Weeks 3 to 6

- Brace – open to 0-90 degrees for ambulation
- Continues using two crutches, with gradual progression of weight bearing
 - Increase to full weight bearing over the next 2 weeks
- Progress as tolerated past 90 degrees of knee flexion

Goals:

- Reduce pain and inflammation
- Maintain full knee extension

Phase 2 – Progressive Stretching and Early Strengthening

Weeks 6 to 8

- Discontinue brace

Goals:

- Full knee extension
- Gradual progression to full knee flexion

- No swelling
- Normal gait

Exercise Progression:

- Continue to emphasize patella mobility
- Begin bilateral closed kinetic chain strengthening (limited range initially)
- Step-up progression
- Begin stationary bike with light resistance initially
- Proprioceptive drills
- Gait training – normalize gait pattern

Phase 3 – Advanced Strengthening and Endurance Training

Weeks 8 to 12

Goals:

- Full knee flexion and extension

Exercise Progression:

- Avoid rotational movements for 14 weeks
- Begin gym strengthening program
- Advance stationary bike program (increase intensity)
- Introduce treadmill walking and elliptical trainer
- Begin unilateral closed kinetic chain program
- Gym strengthening progression (leg press above 90 degrees, hamstring curls, etc.)

Phase 4 – Advanced Strengthening and Plyometric Drills

Weeks 12 to 16

- Follow-up examination with the physician

Goals:

- Pass return to sport function test at >90% (involved vs uninvolved limb) by 16 weeks

Exercise Progression:

- Plyometric drills from bilateral to unilateral at 12 weeks
- Linear running progression at 12 weeks
- Progress to lateral and rotational stresses at 14 weeks
- Multi-directional drills at 14 to 16 weeks

Criteria for return to play:

- Follow-up examination with the physician
- Pass return to sport function test at >90% (involved vs uninvolved limb)



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Postoperative Protocol

- Display symmetry and confidence in high-speed cutting, multi-plane plyometric drills, sprinting, and decelerating

Anticipated return to sport:

- 4-5 months for contact and non-contact athletes