



ROSENBERG COOLEY METCALF
THE ORTHOPEDIC CLINIC AT PARK CITY

Charles C. Lind, MD
Meniscectomy & Debridement
Post-Operative Protocol

Phase I – Maximum Protection (Week 0 to 1):

- Ice and modalities as needed to reduce pain and inflammation
- Use crutches for 2 to 5 days to help reduce swelling, the patient may discontinue crutches when able to walk without a limp or pain
- Elevate the knee above the heart for the first three to five days
- Initiate patella mobility drills
- Full active/passive knee range of motion exercises
- Quadriceps setting focusing on VMO function
- Multi-plane open kinetic chain straight leg raising
- Gait training
- Stationary bike as swelling and pain allow

Phase II – Progressive Stretching and Early Strengthening Phase (Weeks 1 to 4):

- Patella mobility and scar massage
- Active and static lower extremity stretching
- Treadmill and/or elliptical trainer as strength and swelling allow, avoid impact activities
- Bilateral closed kinetic chain strengthening progressing to unilateral as tolerated
- Implement reintegration exercises emphasizing core stability exercises
- Closed kinetic chain multi-plane hip exercises
- Proprioception drills emphasizing neuromuscular control

Phase III – Advanced Strengthening and Proprioception Phase (Weeks 4 to 6):

- Advance time and intensity on cardiovascular program-no running
- Functional cord resistance program
- Gym program
- Pool running program progressing to dry land as tolerated

Phase IV – Advanced Strengthening Phase (Weeks 6 to 8):

- Running and agility program
- Controlled field drills
- Advance gym program
- Plyometric exercises

Phase V – Return to Sports Phase (8-12 weeks):

- Progress sport specific multi-directional drills
- > 90% on Sports test and negative clinical exam for return to full activity