

Meniscus Root Repair Rehabilitation Protocol

	Weight-bearing	Brace	Range of Motion	Exercises
Phase 1 0-4 weeks	Heel touch with crutches	Locked in full extension at all times Off for hygiene and home exercise only Off at night at 2 weeks	Gentle passive 0-90°	Calf pumps, patellar mobilization, quadriceps tightening sets and SLR in brace . No weight-bearing motion.
Phase 2 4-8 weeks	4-6 weeks: 50% weight bearing with brace unlocked 0-90° 6-8 weeks: Progress to full with brace unlocked 0-90° and discontinue brace at 8 weeks.	4-6 weeks: Unlocked 0-90° Off at night Discontinue brace at 8 weeks	Advance motion to regain full passive motion	Add side-lying hip and core, advance quad set and stretching ^a In brace: Addition of heel raises, total gym (closed chain), gait normalization, eccentric quads, eccentric hamstrings. Advance core work with hip, gluteal and core strengthening No weight-bearing with flexion >90°
Phase 3 8-12 weeks	Full	None	Full	Progress closed chain activities. Advance hamstring exercises, proprioception & balance exercises, lunges & leg press 0-90° only Advance core work with hip, gluteal and core strengthening Begin Stationary Bike at 8 weeks
Phase 4 3-5 months	Full	None	Full	Progress Phase III exercises and functional activities: walking lunges, planks, bridges, Swiss ball, half-Bosu exercises Advance core work with hip, gluteal and core strengthening Swimming allowed at 12 weeks Advance to running/jumping and sport specific drills at 16 weeks when cleared by MD.

CPM – continuous passive motion machine; SLR – Straight-leg raise;

^aAvoid tibial rotation for first 6 weeks.

Matthew A. Varacallo MD
Penn Highlands Healthcare – Orthopaedic Surgery & Sports Medicine
145 Hospital Avenue, Suite 301
DuBois, PA 15857
O: 814-375-6200
F: 814-375-6452