



## **Knee Arthroscopy/Menisectomy Protocol**

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**PHASE I - 1-14 Days:** Control of effusion, ROM, Normalize gait, SLB 30 sec.

Gait: WBAT with crutches, D/C crutches when able to walk with out a limp  
Except: Dr. Kolowich: 2 – 4 days 50% WB, then WBAT

0 - 90° minimum progress as tolerated.

Exercises:

ROM: Wall slides, heel slides, stationary bike.  
Extension: prone hangs, heel sags if not equal to opposite side.  
Strengthening: Quad/Ham/Glut. sets, SLR x 4, Toe raises, leg curls, assisted squats, leg press/shuttle, hip and core strengthening  
Stretching: Calves, hams, quads, hip flexors  
Function: Progressive static/dynamic SLB  
Gait: Normalize  
Modalities: Ice, IFC prn  
Aquatics: Address problem areas

**Phase II – 2- 4 Weeks:** No gait deviations, AROM approaching opposite side

Exercises:

ROM: PROM as needed  
Strengthening: SLR's x4 with weight, wall squats, leg press, ham curls; hip and core strengthening  
Proprioceptive Ex: Dynamic SLB reach progressing below waist level, less stable surfaces, with perturbations  
CV Conditioning: Stationary bike, treadmill, stairmaster, swimming, progressive running program  
Aquatics: Address problem areas  
Function: Step-ups, medial step-downs  
Gait: On land or in pool as needed, all directions

**Phase III – 4-6 Weeks**

Full ROM equal to opposite side  
Increase eccentric neuromuscular control to allow acceptance of impact activities

Exercises:

Strengthening/Proprioceptive/Function: Sport specific activities