



Physical Therapy Protocol: Meniscus Allograft Transplant

Phase	Notes	Exercises
I: Weeks 0-6	Toe touch WB (10-20% body weight) ROM 0-90 Brace locked in extension day and night	<ul style="list-style-type: none"> ROM: 0-90 x 6 weeks, progress through passive, active, and resisted ROM, heel slides, patellar mobilization, gastric/soleus stretches Strength: quad/hamstring/glute sets, straight leg raise with knee in full extension with brace until quad strength prevents extension lag, no open chain or isokinetic exercises, utilize NMES and BFR as needed Goals: 60 degrees of flexion by week 2. Full active hyperextension, 90 degrees of flexion, minimal swelling by week 6
II: Weeks 6-12	Discontinue brace Full ROM No WB flexion past 90 degrees or impact for 12 weeks total post op	<ul style="list-style-type: none"> ROM: full active/passive ROM, okay for squats from 0-90 Strength: ok to begin WBAT and progress out of brace once pt is able to perform SLR without lag, progress closed chain activities, Begin hamstring work, lunges/leg press 0-90°, proprioception exercises, balance/core/hip/glutes, begin stationary bike, recommend BFR and NMES as appropriate Goals: full ROM and active hyperextension by week 12 at the latest, contact practice if not on track by 8 weeks post-op
III: Weeks 12+	No repetitive impact activities (ex. running) for 1 year post op	<ul style="list-style-type: none"> No ROM restrictions Strength: Progress Phase III exercises and functional activities: walking lunges, planks, bridges, swiss ball, half-bosu exercises, Advance core/glutes and balance, bike, elliptical Goals: increase strength, transition to higher level activities

Sports Performance Center Resources

- Plyometric Prep Screen when returning to running/ jumping (1 year post-op)
 - Schedule via QR code or email spc@rushortho.com

- Lower Body Assessment when initiating preparing to return to sport
 - Schedule via QR code or email spc@rushortho.com

