

Patient Name:

Patient Phone:

Surgery/DOS:

Surgeon:

PARTIAL MENISCECTOMY REHABILITATION PROTOCOL

Phase I (Weeks 0-2) *Goal: full extension to 90 degrees by end of week 1*

- ROM: + Patella mobs, flex/ext supine wall slides, flex/ext seated AAROM, extension mobs
- + Stretches – Hamstrings seated with towel
- Therapeutic exercise: + Ankle pumps, Isometric quad sets / SLR with NMES, glute & HS sets
- Cardiovascular exercise: + Bike without resistance, upper body circuit training
- Other: + Keep incision and sutures dry + Ice/compression, edema control

Phase II (Weeks 2-8)

- Range of Motion + Continue motion, continue patella mobs
- Therapeutic exercise: Continue Ankle pumps, SLR with NMES.
- + Begin: squat progression (shallow à 90 deg), bridges, reverse lunge with static hold, open chain hip abduction/extension in supine or standing.
- +Week 5 begin balance squats, SL deadlift, leg press
- Cardiovascular exercise: Bike with resistance, Treadmill walking with incline as tolerated, upper body circuit training. Week 5 may add elliptical trainer, rower or stair stepper
- Other: Keep incision and sutures dry. No immersion until 4 weeks post-op.
- Running – if desired – begin running progression at Week 8.

Phase III (Weeks 9-16)

- Stretching and mobilization maintenance program
- Therapeutic ex: Balance squats, reverse lunges, open chain hip abd/ext in standing, SL deadlift.
- + Begin: Agility exercises – single plane --> multi-directional
- Cardiovascular exercise: Bike with resistance, TM walking with incline as tolerated vs. jogging
- Other: Return to sport/activity testing at 3-month follow-up

Phase IV (Weeks 16+)

- Motion maintenance. Sports-specific training, agility, balance and prep to return to desired activities

Comments:

Modalities:

Dry Needling

Cupping

Electrical Stim

Soft tissue mobilization/Manual therapy/Graston

Per treating therapist

Signature _____ **Date** _____