

MENISCUS ROOT OR RADIAL REPAIR

Post-Operative Physical Therapy Protocol



Stanford
MEDICINE

Dear Colleague,

I appreciate your partnership in the rehabilitation of this very special patient of ours. I have instructed the patient that you will be using this protocol. My belief is that the biggest predictor of success is what the patient does at home and consistently. **They should view you not just as a therapist but as a highly educated and skilled teacher** and the patient *must* be an active participant in the rehab process.

To facilitate this, I have included a copy of the rehab protocols I would like the patient to focus on at each time point in the rehab process. Please assist me by encouraging and teaching our mutual patient their home exercises as well.

With your help and the active participation of our patient, I know we can have another fantastic knee.

Please do not hesitate to reach out directly to me and my team with any questions at any time.

Respectfully,



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	WEEKS 0-4	WEEKS 4-6	WEEKS 6-12	WEEKS 12-16	WEEKS 16+
Weight bearing	NWB / foot-flat <i>Crutches</i>	PWB 20 lb <i>Crutches</i>	Full within 0-90° <i>No WB past 90°</i>	Full <i>Unrestricted</i>	Full
Range of motion	PROM → AROM <i>0-90°, NWB</i>	Unrestricted <i>No PWB past 90°</i>	Unrestricted <i>No WB past 90°</i>	Unrestricted <i>Even with WB</i>	Full
Brace	Locked in extension <i>Walk and sleep; off for hygiene and PT</i>	Continue	D/C when quad <i>adequate, no ext lag</i>	None	None
Strengthening	Quad sets, SLR <i>Heel slides, mobs</i>	Continue	Closed chain, bike <i>Lunges, mini-squats 0-90°</i>	Squats, step-downs <i>Leg press</i>	Plyometrics <i>Sport-specific drills</i>
Impact and sport	None	None	Stationary bike	Bike	Jogging, running <i>Full sport at 6+ months</i>

As tolerated means pain during exercise no more than 2/10 above baseline. Avoid pushing into pain.

WEEKS 0-4

- NWB/foot-flat weight bearing with brace in full extension when ambulating and sleeping.
- Remove for hygiene and PT.
- **PROM → AAROM → AROM**, progress as tolerated within 0 to 90° (non weight bearing).
- Heel slides, quad sets, patellar mobilizations, ankle pumps.
- Straight leg raises (without the brace when able to SLR without an extension lag).

WEEKS 4-6

- **Progress to partial (20 pound) weight bearing with crutches.**
- Unrestricted ROM; however, no partial weight bearing past 90° of flexion.

WEEKS 6–12

- Discontinue the brace when quad strength is adequate for ambulation and there is no extension lag.
- **Progress to full weight bearing in 0 to 90° of flexion; no weight bearing past 90° of flexion.**
- Closed chain knee extension, stationary bike, weight-bearing gastrocnemius and soleus stretch.
- Lunges, mini-squats, weight shifts, initiate step-up program (all 0 to 90°).
- Proprioceptive training, stationary bike use.

WEEKS 12–16

- Unrestricted ROM, even with weight bearing.
- Advance closed chain strengthening and bike exercises.
- Progressive squat program; initiate step-down program.
- Leg press (start initially with body weight only).

WEEKS 16+

- Begin plyometrics and sport-specific drills, jogging, running.
- Gradual return to athletic activity as tolerated.
- Maintenance program.
- **Return to full sport at least 6 months after surgery,** once cleared by Dr. Tummala.

CRITERIA TO RETURN TO SPORT

- Full ROM compared with the uninvolved side.
- No effusion.
- Normal gait and pain-free activities of daily living.
- Quadriceps strength at least 90% of the uninvolved side.

Week-by-Week Progression

EXERCISE	1	2	3	4 (1 mo)	5	6	7	8 (2 mo)	9	10	12 (3 mo)	16	20	24 (6 mo)
Initial Exercises														
NWB / footflat, brace locked in extension														
PWB 20 lb with crutches														
Brace until quad strength adequate														
PROM → AAROM → AROM within 0 to 90° (NWB)														
Heel slides, quad sets, patellar mobs, ankle pumps														
Straight leg raises														
Advanced Exercises														
Unrestricted ROM, no WB past 90° flexion														
Full WB within 0 to 90°														
Closed chain knee extension, calf stretch														
Lunges, mini-squats, step-ups (0 to 90°)														
Proprioceptive training														
Unrestricted ROM, including with WB														
Progressive squats, step-downs														
Leg press (body weight first)														
Plyometrics														
Cardiovascular Exercises														
Stationary bike														
Agility Exercises														
Jogging, progressing to running														
Sport-specific drills														
High-Level Activities														
Gradual return to athletic activity														
Return to full sport at 6+ months														

This protocol is a general guideline and does not replace the clinical judgment of the treating therapist and surgeon. Please contact our office with any questions.