



# Dr. Aryn Rajani

**M.S Orth (Gold Medallist), D-Orth, MBBS**

**Consultant Knee and Shoulder Surgeon**

Specialist in Joint Replacement, Arthroscopy & Sports Injury

Let's Begin to Live Again...

## POSTSURGICAL MENISCECTOMY REHABILITATION PROTOCOL:

This is an outline of the major exercises that are commonly incorporated. Individual patient response should be considered and therefore modifications may need to be made. Communication should be made to the Surgeon if concerns arise during rehabilitation.

The overall goals of the rehabilitation are to:

- ✓ Control joint pain, swelling, hemarthrosis (minimal or none).
- ✓ Regain normal knee flexion and extension.
- ✓ Regain a normal gait pattern and neuromuscular stability for ambulation.
- ✓ Regain normal quadriceps, hamstring lower extremity muscle strength.
- ✓ Regain normal proprioception, balance, and coordination for desired activities.
- ✓ Achieve optimal functional outcome based on orthopaedic and patient goals.

## POSTOP DAYS 1 – 7 ( 20 REPS)

### GOALS:

- ✓ Pain reduction
- ✓ Pain / effusion control.
  - No extensor lag.
  - Brace – Days 17: Locked in extension .
  - Walking with walker, weight bearing as tolerated.
  - AROM, AAROM 020 degrees knee bending.
  - Calf pumping/ Ankle Toe movements.
  - Passive extension with heel.
  - Hip abduction and adduction.
  - Quad sets, Isometric quads.
  - Straight leg raise (SLR)
  - Ice Pack application 15mins every 3hours with knee in full extension, compression and elevation.

## DAYS 7 – 14 (20 REPS)

### GOALS:

- ✓ Gait training.
- ✓ Knee bending ROM 060 degrees.
  - Ice application as prescribed.
  - No active hamstring exercise.
  - Active knee bending 20 60 degrees.
  - Active knee extension.
  - Active dynamic knee extension edge of the bed (900 degrees).
  - Isometric quads and dynamic VMO strengthening.
  - SLR.
  - Hamstring stretch.

## Orthopaedic Arthroscopy Knee & Shoulder Clinic (OAKS)

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- o Glutes, hip abductor and adductors strengthening.
- o Heel and toe raises.
- o Walking with tripod stick support.
- o Staircase climbing.

## Weeks 2 – 5

### GOALS:

- ✓ Normal Walking.
- ✓ Knee bending ROM 60/90 degrees.
  - o Hinge knee brace
    - ✓ Weeks 23: 60/75 degrees
    - ✓ Weeks 35: 75/90 degrees.
  - o Continue appropriate previous exercises.
  - o AAROM, AROM 60/90 degrees knee bending.
  - o SLR no resistance.
  - o Single leg heel raises.
  - o Stretches – Hamstring, hip flexors, ITB.

## WEEKS 5 – 8

### GOALS:

- ✓ ROM 90/120 degrees.
- ✓ No effusion.
  - o Continue appropriate previous exercises.
  - o AROM 90/120 degrees knee bending.
  - o Standing SLR.
  - o Weight shifts, Mini squats.
  - o Short arc quads with light weight as tolerated.
  - o Hamstring curls 0/45 degrees.
  - o Proprioception exercises.
  - o Stationary bike for ROM.
  - o Pool therapy.

## WEEKS 8 – 12

### GOAL:

- ✓ Full painless ROM.
- ✓ Walk 2 miles at 15 min/mile pace.
  - o D/C brace.
  - o Continue appropriate previous exercises.
  - o PROM, AAROM, AROM through full range.

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- Wall squats – No knee flexion past 45 degrees.
- Standing SLR with Theraband.
- Forward, lateral and retro step downs.
- Proprioceptive exercises.
- Hamstring curls through full range.
- Stationary bike – Progressive resistance and time.
- Elliptical trainer.
- Treadmill – Forwards and backwards walking.

#### **MONTHS 3 – 4**

##### **GOAL:**

- ✓ Run 2 miles at normal pace.
  - Continue appropriate previous exercises.
  - Agility drills – figure 8s, gentle loops, large zigzags.
  - Swimming.
  - Stairmaster – Small steps.
  - Treadmill – Running progression program.
  - Quad stretches.

#### **MONTHS 4 – 6**

##### **GOAL:**

- ✓ Return to all activities.
  - Continue appropriate previous exercises.
  - Agility drills / Plyometrics.
  - Situp progression.
  - Progressive weight training program.
  - Running progression to track.
  - Transition to home / gym program.

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