

Rehabilitation Protocol: Meniscus Allograft Transplantation

Name: _____

Date: _____

Diagnosis: _____

Date of Surgery : _____



Phase I (Weeks 0-8)

- Weightbearing:

- **Weeks 0-4:** Toe touch weightbearing
- **Weeks 4-6:** Advance to WBAT with crutches (d/c crutches at 4 weeks post-op if gait normalized)

- Hinged Knee Brace: worn for 6 weeks post-op

- Locked in full extension for ambulation and sleeping – remove for hygiene (**Week 1**)
- Locked in full extension for ambulation– remove for hygiene and sleeping (**Weeks 2-4**)
- Set to range from 0-90° for ambulation- remove for hygiene and sleeping (**Weeks 4-6**)
- Discontinue brace at 6 weeks post-op

- Range of Motion – PROM → AAROM → AROM as tolerated

- **Weeks 0-4:** Non-weightbearing 0-90°
- **Weeks 5-8:** Full non-weightbearing ROM as tolerated – progress to flexion angles greater than 90°

- Therapeutic Exercises

- Quadriceps sets, heel slides, straight leg raises, patellar mobilizations, co-contractions (Weeks 0-2)
- Add heel raises and terminal knee extensions (Weeks 2-8)
- Activities in brace for first 6 weeks – then without brace
- **No weightbearing with flexion > 90° during weeks 0-4**
- **Avoid tibial rotation for first 8 weeks to protect the meniscal allograft**



Phase II (Weeks 8-12)

- Weightbearing: As tolerated

- Range of Motion – Full active ROM

- Therapeutic Exercises

- Progress to closed chain extension exercises, begin hamstring strengthening
- Lunges – 0-90°, Leg press – 0-90° (flexion only)
- Proprioception exercises
- Begin use of the stationary bicycle

**Phase III (Months 3-6)**

- **Weightbearing:** Full weightbearing with normal gait pattern
- **Range of Motion** – Full/Painless ROM
- **Therapeutic Exercises**
 - Continue with quad and hamstring strengthening
 - Focus on single-leg strength
 - Begin jogging/running
 - Plyometrics and sport-specific drills
- Gradual return to athletic activity as tolerated (6 months post-op)
- Maintenance program for strength and endurance

Comments:**Frequency:** _____ **times per week****Duration:** _____ **weeks****Signature:** _____**Date:** _____