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Rehabilitation Protocol: Arthroscopic Meniscectomy/ Chondral Debridement

Name:	Date:
Diagnosis:	Date of Surgery:
hase I (Weeks 0-2)	
 Weightbearing: As tolerated with 	crutches (for balance) x 24-48 hours – progress to WBAT
 Range of Motion – AAROM → ARO)M as tolerated
 Goal: Immediate full range 	of motion
 Therapeutic Exercises 	
 Quad and Hamstring sets 	
 Heel slides 	
 Co-contractions 	
 Isometric adduction and ab 	duction exercises
 Straight-leg raises 	
 Patellar mobilization 	
Phase II (Weeks 2-4)	
 Weightbearing: As tolerated 	
• Range of Motion - maintain full R	OM – gentle passive stretching at end ranges
• Therapeutic Exercises	
o Quadriceps and Hamstring	strengthening
o Lunges	
o Wall-sits	
o Balance exercises – Core wo	ork
Phase III (Weeks 4-6)	
• Weightbearing: Full weightbearing	ng
• Range of Motion – Full/Painless R	
Therapeutic Exercises	
o Leg press	
o Hamstring curls	
o Squats	
o Plyometric exercises	
o Endurance work	
 Return to athletic activity a 	s tolerated
Comments:	
Frequency: times per week	Duration: weeks
Signature	Deter
Signature:	Date: