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## Rehabilitation Protocol: Combined Anterior Cruciate Ligament (ACL) Reconstruction and Meniscal Repair

Name:	Date:
Diagnosis:	Date of Surgery:
<ul> <li>Hinged Knee I</li> <li>Range of Moti</li> <li>Therapeutic E</li> <li>No dee</li> <li>Quad/I</li> <li>Heel sli</li> <li>Non-we</li> </ul>	g:Partial weight bearing (50%) as tolerated with brace locked in full extension  Brace: Locked in full extension for ambulation and sleeping  on:No flexion greater than 90 degrees  Exercises  p bends for first 4 months  Hamstring sets
<ul> <li>Hinged Knee I extension lag</li> <li>Range of Moti</li> <li>Therapeutic E</li> <li>No dee</li> <li>Closed</li> <li>Hamstr</li> <li>Toe rais</li> <li>Balance</li> <li>Progress</li> </ul>	g:As tolerated – discontinue crutch use  Brace: Discontinue brace use when patient has achieved full extension with no evidence of  on: Maintain full knee extension – work on progressive knee flexion  Exercises  p bends for first 4 months  chain extension exercises  ring curls
<ul> <li>Range of Motion</li> <li>Therapeutic Eon No deepon Advance</li> <li>Begin uo</li> <li>Can State</li> </ul> Phase IV (Months <ul> <li>Gradual return</li> </ul>	g: Full weightbearing on: Full/Painless ROM Exercises p bends for first 4 months ce closed chain strengthening exercises, proprioception activities use of the Stairmaster/Elliptical art Straight Ahead Running at 12 Weeks  6 4-6) to athletic activity as tolerated
Comments:	rogram for strength and endurance  es per week Duration: weeks
Signature:	Date: