

## Jordan M. Meiss, MD

## Knee Arthroscopy

This information and protocol is a guideline, individual variations and changes will apply

Postop	<u>Goals</u>	<u>Precautions</u>	<u>Exercises</u>
Weeks 0-2 PT 1-2x/week HEP daily	Edema and pain control Maintain full extension Limit quad inhibition ROM 0-90° (at least)	WBAT Avoid prolonged standing/walking No reciprocal stair ambulation	Quadriceps isometrics & re-education Patella mobilization Emphasize full passive extension P/A/AAROM flexion/extension Proprioception training Hip progressive resisted exercises
Weeks 2-6 PT 2-3x/week HEP daily	Full ROM Minimal swelling Normalize gait Ascend/Decent 8" stair Reciprocate stairs Return to normal ADLs	WBAT Avoid pain with therapeutic exercises and functional activities	Continue above Advance flexibility and proprioception Leg press Step up/step down program Elliptical
Weeks 6-12 PT 2-3x/week HEP daily	Full ROM Return to normal activity Run pain free Maximize strength/flexibility	WBAT Avoid pain with therapeutic exercises and functional activities Return to sport (MD directed)	Continue above Initiate running when able to descend 8" step without pain/deviation Plyometrics Agility and sport specific training Advance proprioception Advance LE strengthening