

ACL RECONSTRUCTION WITH MENISCUS REPAIR
JOSEPH MISSON, MD

PATIENT _____

DATE OF SURGERY _____

POST-OP 1-4 WEEKS (days 2-28)

Frequency/Duration of treatment to be determined by therapist
Encourage patient to follow HEP

GOALS

Full active extension equal to opposite leg (no open chain extension)
Good patellar mobility

WEIGHT BEARING

20 - 30 lbs weight bearing

ROM LIMITS

0 - 70 degrees

CPM x 3weeks 0 - 60 progress to 70 degrees max for 6 - 8 hrs/day

THER-EX

Quad Sets
Straight Leg Raise (4 plane)
Four Plane Theraband
Hamstring and Gastroc Stretching
Prone Hang for Extension ROM
Patellar Mobs
Heel Slide (0 - 90 degrees)
Ankle Pumps
Theraband Ankle Exercises

MODALITIES

E-Stim (quad control, pain, swelling)
Cryotherapy
Biofeedback

POST-OP 4-6 WEEKS (days 29 - 42)

WEIGHT BEARING

WBAT

D/C crutches when patient demonstrates good quad control and no extensor lag

ROM LIMITS

0 - 120 degrees by day 42

THER-EX

Continue above exercises
Closed Chain exercises 0-45
 Wall Sit Stationary bike
 Total Gym Eliptical walker
 Leg Press
Heel Raises on Step
Leg Curl (0-45 degrees with low resistance)
NO OPEN CHAIN EXTENSION MACHINE
Proprioceptive Training
 Foam
 Dyna Disc
Treadmill Walking forward/backward
Step ups
Bike with no resistance

MODALITIES

Continue above modalities as needed

POST-OP 7-15 WEEKS (days 43 - 4 months)

BRACE

Functional ACL Brace to be determined by surgeon

WEIGHT BEARING

Full Weight Bearing

ROM

Progress to full ROM as tolerated (continue to limit ROM with isotonic strengthening)

THER-EX

Continue above exercises with ROM increased to 90 degrees

Proprioceptive Training

 Single leg balance

 Foam/Dyna Disc with Plyoback

Single Leg Heel Raise

Side Stepping on Treadmill

Resisted walking

Stool Slides

POST-OP 4 MONTHS

Continue above exercises (ROM 0 - 90)

May begin gradual open chain exercises

Initiate jogging/running program

Plyometrics

 Line jumps

POST-OP 5 MONTHS

Continue above exercises

Full ROM on all exercises

Agility drills

Sport specific training

POST-OP 6 - 8 MONTHS

Return to Sport

Physician Signature

Date