

# ACL with Meniscus Repair Physical Therapy Protocol William A. Sanko, MD

## WEEK 1 (out of hospital to 7 days)

- 1. See Dr. Sanko in office
- 2. Crutch walking- NWB 4-6 weeks
  - a. 4 weeks small tear
  - b. 6 weeks large tear
- 3. Open long leg brace at 1 weeks and stop for sleep at 2 weeks
- 4. Extension equal to other side by 2 weeks
  - a. Heel prop
  - b. Prone hangs
  - c. Hamstring and calf stretches
- 5. Quad sets
- 6. Straight leg raises all 4 ways –aiming for 50-100 repetitions
- 7. Patellar mobilizations
- 8. Flexion ROM  $\leq 90^{\circ}$  4-6 weeks
  - a. 4 weeks small tear
  - b. 6 weeks large tear
- 9. Flexion exercises
  - a. Heel slides, prone flexion, seated flexion at EOB
- 10. Electrical Stimulation VMS if weak quad or as needed for pain and swelling
- 11. Supervised therapy 3 times per week

Goals: Decrease swelling

Full leg extension

Quadricep control

Protect graft

## WEEK 2 (7-14 days)

- 1. Continue with above
- 2. Stitches will be taken out and steristrips will be replaced.
- 3. Measure for functional brace
- 4. Add
  - a. Biofeedback if inconsistent quad set
  - b. Theraband 4 way hip and TKE
  - c. Ankle theraband

#### WEEK 3

- 1. Continue with above activities
- 2. Water exercises as appropriate or available

## WEEK 4-6 depending on when WB

- 1. Continue with above activities increasing resistance
- 2. Add
  - a. Stationary bike for ROM
  - b. Step ups
  - c. Leg Press (0-70)
  - d. Wall squats
  - e. Single leg stance
  - f. Stepper
  - g. BAPS or other advanced balance training
- 3. Forward and Backward walking on treadmill EMPHYSIZE NORMAL GAIT

## WEEK 6

- 1. Leg curl
- 2. Brisk walking on treadmill
- 3. Sidestepping on treadmill

## **WEEK 12**

- 1. May start Leg extension blocking last 25 degrees
- 2. If strength 70% or greater and okay with Physician start
  - a. Forward and backward running
  - b. Figure 8
  - c. Lateral shuffles
- 3. If patient has no swelling and is able to run without a limp, progress to:
  - a. Cariocas
  - b. Sport specific drills
  - c. Hops
  - d. Jumps, jump rope
  - ALL WITH BRACE ON
  - NO SUDDEN STARTS/STOPS

RETURN TO COMPETITIVE SPORTS WHEN PHYSICIAN APPROVES AND 85-100% STRENGTH

William A. Sanko, MD