

Hasani Swindell, M.D.

Sports Medicine
Shoulder, Elbow & Knee Arthroscopy
Shoulder Replacement Surgery
T: 718.246.8700
F: 718.246.8701

**Post-Operative Rehabilitation Guidelines for ACL Reconstruction
with Meniscal Root Repair**

0-4 Weeks:

- NWB, Brace locked at 0 degrees for ambulation and sleeping
- ROM: 0-90° with emphasis on full extension
- Patella mobilization
- SLR supine with brace locked at 0 degrees, Quad Sets
- Ankle Pumps
- Short crank (90mm) ergometry

4-6 Weeks:

- Begin TTWB x 2 weeks, then WBAT. No weight bearing past 90° for ACL with meniscal repair
- D/C crutches when gait is non-antalgic (six weeks with meniscal repair/when WBAT comfortably)
- ROM: 0-125 degrees (Maintain full extension)
- Active knee extension to 40 degrees
- Standard (170mm) ergometry (when knee ROM > 115 degrees)
- Leg Press (80-0 degree arc)
- Mini Squats / Weight Shifts
- Proprioception training
- Initiate Step Up program
- Avoid Tibial Rotation until 6 weeks

6-14 Weeks:

- D/C Brace and wean from crutches
- Progressive Squat program
- Initiate Step Down program
- Leg Press, Lunges
- Isotonic Knee Extensions (90-40 degrees, closed chain preferred)
- Agility exercises (sport cord)
- Versaclimber/Nordic Track
- Retrograde treadmill ambulation

14-22 weeks:

- Begin forward running (treadmill) program when 8" step down satisfactory
- Continue Strengthening & Flexibility program
- Advance Sports-Specific Agility Drills
- Start Plyometric program

> **22 weeks:**

- Advance Plyometric program, Return to Sport (MD Directed)
 - ****May require Functional Sports Assessment (FSA) 5-6 months post op for clearance to return to sport**