

# Michael S. Bogard, DO

ORTHOPAEDIC SURGEON

— Sports Medicine Specialist —

## Post-Operative Rehabilitation Guidelines/Rehab Protocol ACL Reconstruction with **Meniscus Repair (Inside Out)**

### 0-2 Weeks:

- TDWB, Brace locked at 0 degrees for ambulation and sleeping
- ROM: 0-90° with emphasis on full extension, ok to unlock brace while at rest
- Patella mobilization
- SLR supine with brace locked at 0 degrees, Quad Sets
- Ankle Pumps
- Short crank (90mm) Ergometry

### 2-4 Weeks:

- Remains TDWB with brace locked in full extension for ambulation
- No weight bearing past 90° for ACL with meniscal repair
- ROM: 0-125 degrees (Maintain full extension)
- Active knee extension to 40 degrees
- Standard (170mm) ergometry (when knee ROM > 115 degrees)

### 4-6 Weeks:

- Progress to 50% WB, can unlock brace between 60-90 degrees, progress to WBAT by 6 weeks.
- 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:

- Wean from crutches, anticipate wean from brace between 6-8 weeks once quadriceps control adequate
- 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 (Doc Directed)
- \*\*May require Functional Sports Assessment (FSA) 5-6 months post op for clearance to return to sport