

Kenneth R Alleyne, MD
Board Certified Orthopedic Surgeon
Specializing Sports Medicine and Arthroscopy
Knee and Shoulder
South Windsor Tolland
Bloomfield Manhattan
www.eosm.net
www.nyosm.net

KNEE ARTHROSCOPY
(PARTIAL MENISCECTOMY, PLICA EXCISION, LATERAL
RELEASE, SYNOVECTOMY, DEBRIDEMENT)
PHYSICAL THERAPY PROTOCOL

Preoperative Visit

- ┆ Discuss role of Physical Therapy post-operatively
- ┆ Teach normal heel-toe gait with crutches on level surfaces and stairs
- ┆ Instruct in knee strengthening, ROM, and stretching exercises (post-op protocol)
- ┆ Instruct in PRICE
- ┆ Discuss importance of post-op portal site management to prevent adhesions/pain
- ┆ Schedule postoperative follow-up

Note: Exercise prescription is dependent upon the tissue healing process and *individual* functional readiness in *all* stages. If any concerns or complications arise regarding the progress of any patient, physical therapy will contact the orthopedist.

Phase I (Post-op Days 1 – 7)

- ┆ Gait Training: Good heel-toe gait using crutches – WBAT (DC crutches when good quad control and normal gait)
- ┆ Patellar mobilizations
- ┆ Friction massage to portal sites when healed
- ┆ Calf pumping
- ┆ AAROM and AROM knee
- ┆ Stationary bike for ROM – complete cycle as able
- ┆ Quad sets, use Estim as needed
- ┆ SLR x 4
- ┆ Standing Well-leg Theraband exs (all 4 directions)
- ┆ Mini squats, weight shifts, in parallel bars
- ┆ Balance (single leg standing)
- ┆ Hamstring curls – prone or standing
- ┆ Double leg heel raises...progress to single leg
- ┆ Stretches – HS, Achilles, quads, hip flexors

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- ┆ Ice with knee elevated and in extension after exercise

Goals to Progress to Phase II: ROM 0-90, SLR without lag, normal heel-toe gait, effusion and pain controlled

Phase II – begin when Phase I goals are met and progress as tolerated

- ┆ Full WB with normal heel-toe gait
- ┆ Continue bike (increase time, gradually increase resistance if pain free)
- ┆ Treadmill – Walking program progressing to 15 min/mile pace
- ┆ Elliptical trainer
- ┆ Patellar mobilizations
- ┆ Portal site massage
- ┆ Continue to progress closed chain exercises...Begin leg press
- ┆ Wall sits (lower position...to 90 degrees if tolerated. Increase time to 3 minutes)
- ┆ Lateral step-downs
- ┆ Hamstring curls with resistance
- ┆ Single leg heel raises
- ┆ Proprioceptive training –single leg BAPS, Plyoback, and Body Blade, etc
- ┆ Functional activities – Fitter, slide board, lateral shuffles, figure 8, etc
- ┆ Continue stretches
- ┆ Pool therapy (when wounds well healed)
- ┆ Gym Program for closed chain strengthening

Goals for Progression to Phase III: Full ROM, Walk 2 miles at 15 min/mile pace, stair ambulation without pain or giving way, minimal swelling, at least 3 minutes in wall sit position

Phase III – When Phase II goals are met

- ┆ Continue progressing strengthening, stretching and proprioceptive training
- ┆ Running progression program (Walk-to-Jog handout)
- ┆ Progress functional training/agility drills/sports-specific drills
- ┆ Return to sports as tolerated

Goals: Run 2 miles at normal pace without pain, swelling, or giving out; quad strength of involved LE within 80% of uninvolved LE (single leg hop, 12 meter hop for time)

We value the assessments and inputs of our patients therapists. Please update our office with progress notes via fax or email.

CT: 860-242-3399/info@eosm.net

NY: 646-663-4141/info@nyosm.net