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## **Radial/Root Meniscus Repair Postoperative Protocol**

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Date of Surgery:\_\_\_\_\_ Procedure(s) Performed: \_\_\_\_\_

	Weight bearing Status	Brace	Range of Motion	Recommended Therapeutic Exercises	<u>PATIENT'S CHECKLIST</u>
Week 1-6	No weight with brace locked in extension Continue crutches for 6 weeks	Yes (sleep with brace)	O-60 Degrees ONLY for 2 weeks Then 0-90 degrees only til week 6 Do not exceed 90 degrees	<ol> <li>Modalities as needed to decrease pain and swelling</li> <li>Heel slides to increase flexion ROM, as needed</li> <li>Isometric hip adduction</li> <li>Quadriceps sets</li> <li>Closed chain exercise</li> <li>Toe raises</li> <li>Hip adduction and abduction, as tolerated</li> <li>Patella/Tendon mobilizations</li> </ol>	<ul> <li>Day 1: take off Ace-wrap</li> <li>Take Aspirin 81mg as recommended daily for 30 days.</li> <li>Focus on regaining <u>FULL</u> <u>EXTENSION</u></li> <li>Exercise 4x-6x daily and use Ice</li> </ul>
Week 6-8	Full	Taper off	0-120+	<ol> <li>Patena/Tendor mobilizations</li> <li>Continue ROM and strengthening exercises, as needed</li> <li>Add step-downs/ups, lunges, and/or partial squats as tolerated</li> <li>Add eccentric quadriceps and hamstring exercises</li> <li>Increase resistance on stationary bicycle</li> </ol>	<ul> <li>Keep up with range of motion 0-90 by end of 2-3 week.</li> <li>Do not exceed 90 degrees</li> <li>Swelling AND/OR</li> </ul>
Week 8-16	Full	None	Full	<ol> <li>Above +</li> <li>Step-up, lounges, squats, hamstring curls, and single leg squats.</li> <li>Balance, strengthening, squats on board, cycling</li> </ol>	<ul> <li>bruising may pool</li> <li>behind the knee, ankle,</li> <li>and foot (normal). IF</li> <li>you have persistent calf</li> <li>pain, call the office.</li> </ul>
Week 16- 36+	Full	None	Full	<ol> <li>Jogging, lateral movements</li> <li>Plyometric exercises,</li> <li>Ladder drills, swimming, quick feet, power skipping (Focus on Quality not Quantity)</li> </ol>	physical therapy, START 14 days after surgery. Bring this sheet to your physical therapist