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Rehab Protocol



ACL Reconstruction with meniscus repair

***** Please follow MOON protocol for specifics ... this just clarifies weight-bearing, ROM and brace use***
***** Bucket-handle repairs will go slower with WB flexion progression (4 weeks locked, then progress)***
***** Root repairs & radial repairs will be strict NWB x 6 weeks, ROM 0-90***

Phase 1: Immediate post-op
Weeks 1-2

- Routine repair: WBAT locked straight x 2 weeks minimum
 - Discontinue crutches as comfort & gait safety allows
 - Sleep with brace locked straight first week, then ok to progress out of for patient comfort
- Encourage NWB ROM 0-90, active and passive
- Bike for ROM, not for cardio
- Encourage patellar glides, SLR / quad sets, hip add / abd
- NMES unit for quad recruitment

Phase 2
Weeks 3-6

- Routine repair: WBAT 0-30; progress 30 degrees per week
- Discontinue brace as quad control improves, but no WB flexion beyond 90 x 6 weeks
- Full NWB ROM; Bike for ROM; routine NMES
- Scar management with Vitamin E oil

Phase 3
Beyond 6 weeks

- Full WBAT and discontinue brace
- From 6 weeks to 3 months ... ok WB in flexion beyond 90 degrees, but no deep resistance
- Beyond 3 months ... ok full WB flexion with resistance
- Progress with MOON protocol or equivalent (per PT)

General ACL Graft Principles:

-ACL with allograft: progress with WB flexion early as quad control allows; start hamstring (HS) activities (stretches, ROM, strengthening) as comfort allows

-ACL with quad autograft: no restrictions in quad ROM and strengthening (pain and control typically improves around 3-5 week mark); start HS activities as comfort allows

-ACL with hamstring autograft: HS stretching ok at 3-4 weeks and HS strengthening at 6-8 weeks

-ACL with patellar tendon autograft: same as quad autograft in general; anterior knee pain / quad weakness persists longer than allograft / quad auto / HS auto