



Official Health Care Provider of the Louisville Cardinals

## Procedure: Meniscus Transplantation

**Description of Procedure:** An allograft meniscus is transplanted and fixated to replace the patient's worn or nonfunctional meniscus

**PT Frequency:** Begin 1-3 days postop, 3-4x wkly, 0-3 mo, physician/therapist discretion afterwards. Home exercises daily.

	Weight Bearing	Brace	ROM	Therapeutic Exercises
<b>Phase I: 0-4 wks</b>	Toe touch weight bearing (TTWB) with use of two crutches. Keep brace locked in extension for ambulation.	Brace is worn when ambulating and sleeping. Remove for therapy and hygiene.  Dressing: PT may perform dressing change as needed. Leave steri-strips in place. Ok to shower with or without dressing. No tub bathing/ soaking until wound fully healed.	<b>0-2 wks:</b> 0-60°. <b>2-4 wks:</b> 0-90°.  **Emphasize importance of full extension wks 0-2.  ** Meniscal motion is greatest past 60 degrees. Twisting should be avoided.  ** <b>No weight bearing with flexion &gt;90° or tibial rotation to protect meniscus</b>	Heel slides, quad sets, SLR, short arc quad, co-contractions, isometric ab/adduction, patellar mobilization, ankle strength, avoid knee rotational exercises. Modalities as indicated.
<b>Phase II: 4-12 wks</b>	<b>4-6 wks:</b> Advance weight bearing over this time frame (2 crutches → 1 crutch → no crutches)  <b>6-12 wks:</b> Full	<b>4-6 wks:</b> Unlocked  <b>6-12 wks:</b> None	Full but with caution with flexion >>90° to protect meniscus	<b>4-6 wks:</b> Initiate BFR. Partial wall sits, no greater than 90°, TKE  <b>6-12 wks:</b> Progress closed-chain exercise, begin hamstring work, proprioception exercises

	<b>Weight Bearing</b>	<b>Brace</b>	<b>ROM</b>	<b>Therapeutic Exercises</b>
<b>Phase III: 12 wks onward</b>	WBAT	None	Full	Progress phase II exercises, maximize core/glutes, pelvic stability work, eccentric hamstrings, balance. Begin stationary bike at 12 weeks with low resistance Swimming as tolerated after 12 weeks. Elliptical as tolerated after 16 weeks
<b>Phase IV &gt; 6 mo</b>	WBAT	None	Full	Advance to functional activity without impact  Return to sport-specific activity and impact once cleared by MD after 6-8 months

*Typical follow up frequency is 2 wks with mid-level then with Dr. Richards at 4-6 wks, 3 mo, 6-8 mo for RTP discussion, 1 yr, 2 yr, and 5 yr. Long term follow up is kindly requested for data collection. Frequency is subject to change pending patient progress. Progression back to sport is dependent on case-by-case basis and determined by Dr. Richards. If significant pain or swelling occurs, patient is expected to stop causative activity and follow up with our office. On call providers are always available.*