**Physical Therapy Prescription**

**Meniscal Transplant**

**Patient Name: Today’s Date: Surgery Date:**

**Dx: s/p (LEFT / RIGHT) Meniscal Transplant (medial / lateral)**

**Weeks 1-4** \_\_\_ Hinged, double-upright brace in full extension

 \_\_\_ NWB first 4 weeks

 \_\_\_ Quadriceps and Adductor isometrics

\_\_\_ SLR’s into flexion, extension, abduction and adduction (AAROM🡪AROM)

 \_\_\_ Passive (CPM) and AAROM (ROM limited to 0-90° knee flexion)

 \_\_\_ Manual and self-stretch for Hamstrings, Gastrocnemius, Hip flexors and ITB

 \_\_\_ Gentle Patella, fibular head and scar mobilization

 \_\_\_ NMES for Quadriceps re-education daily

 \_\_\_ Cryotherapy for pain control

**Weeks 4-6** \_\_\_ Continue hinged, double-upright brace in full extension

 \_\_\_ Progressive partial WB to full WB by week 6 with brace locked in extension

 \_\_\_ Progress ROM as tolerated past 90 degrees

 \_\_\_ Continue proximal lower extremity open chain exercise

 \_\_\_ Begin gentle Quadriceps stretching as tolerated

(Concentrating on proximal attachment – limiting knee flexion to less than 120°)

 \_\_\_ Continue gentle Patella, fibular head and scar mobilization

 \_\_\_ Continue Cryotherapy for pain/edema/effusion

**Weeks 6-12** \_\_\_ Discontinue Hinged, double-upright brace in full extension

 \_\_\_ Full weight bearing

 \_\_\_ Begin gait training and standing proprioceptive training

 \_\_\_ Progress closed kinetic chain strengthening for lower extremity

 \_\_\_ Progress open and closed kinetic chain strengthening for hip

 \_\_\_ Begin balance training

 \_\_\_ Continue gentle Patella, fibular head and scar mobilization

 \_\_\_ Continue NMES for Quadriceps re-education daily

 \_\_\_ Continue Cryotherapy for pain/edema/effusion

**Weeks 12-20** \_\_\_ Continue gait training and proprioceptive training

\_\_\_ Progress closed chain strengthening for lower extremity

(Avoid hyperflexion at knee and full open kinetic chain knee extension)

 \_\_\_ Begin resisted hamstring strengthening

 \_\_\_ Continue lower extremity strengthening

 \_\_\_ Begin light jogging if eccentric step-down is symmetric

 \_\_\_ Continue NMES for Quadriceps re-education PRN

 \_\_\_ Continue Cryotherapy for pain/edema/effusion PRN

 \_\_\_ May begin lateral motions, no pivoting

## Physical Therapy Prescription

##  Meniscal Transplant

**Week 20 +**

 \_\_\_ May begin multi-planar movements

 \_\_\_ May begin functional training and triple extension exercises for LE

**Frequency & Duration:** (circle one) 1-2 2-3 x/week for \_\_\_\_\_ weeks Home Program

\*\*Please send progress notes.

**Physician’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ M.D.**