

POST-OPERATIVE GUIDELINES FOLLOWING A MENISCUS REPAIR

Crutches	6 to 8 weeks partial weight bearing for a lateral meniscus repair. Weight bearing may start from day 1 post surgery. NB: In the case of a medial meniscus repair, full weight bearing may be allowed earlier (from 4 weeks).
Brace	6 to 8 weeks. The flexion setting on your brace will be adjusted accordingly by Dr. Barrow or your Physiotherapist.
Stocking	10 days.
Driving	Consult with Dr. Barrow or your Physiotherapist.
Stationary bike (seat elevated)	8 weeks.
Elliptical machine	8 to 12 weeks.
Swimming (crawl)	8 to 12 weeks.
Jogging in a straight line	16 to 20 weeks for peripheral tears. 6 months for complex inner tears.
Skiing / jumping	20 weeks.
Contact sport	6 months.

The above time guides are approximations only. Your rehabilitation will depend greatly on the location of the meniscus tear i.e.: peripheral or central and will also be dependent on whether or not there is associated cartilage damage. Consult with Dr. Barrow or your Physiotherapist before starting any of the above activities.

Post-operative exercises from day 1:

- To be done 4 times per day:
 - Isometric quadriceps progressing to a straight leg raise (3 x 8).
 - Knee pushes into bed, hold for 5 seconds (3 x 8).
 - Passive knee stretch using a pillow under the heel (torture pillow) – 15 minutes.
 - Heel slides (bend knee as far as pain allows, but no further than 90° (x 15).

Practice walking with a heel / toe gait.

Ice (15 minutes on – 10 minutes off repeated throughout the day for the first 2 weeks).

Over the course of the first 6 weeks your Physiotherapist will introduce new exercises to the above exercises.

Aims of rehabilitation in the first 6 weeks:

- Full active and passive extension.
- Decrease swelling / pain.
- Functional co-contraction of quads and hamstrings.
- Flexion to 90°.

Start with your out-patient physiotherapy approximately 3 / 4 days post surgery.

In the case of a medial meniscus repair, patient may aim for full flexion from 6 weeks onwards. In the case of a lateral repair, flexion is further restricted to 100° / 110° until 12 weeks post surgery, i.e. no deep squat movements).



