



## ACL Reconstruction with Meniscal Root Repair Post-Operative Rehabilitation Protocol

### 0-4 Weeks:

- TDWB, Brace locked at 0° for ambulation and sleeping
- ROM: 0-90° with emphasis on full extension
- Patella mobilization
- SLR supine with brace locked at 0°, quad sets
- Ankle pumps
- Short crank (90 mm) ergometry

### 4-6 Weeks:

- Begin WBAT. Unlock brace for weight bearing
- No weight bearing past 90° for ACL with meniscal repair
- D/C crutches when gait is non-antalgic (two weeks with meniscal repair)
- ROM: 0-125° (maintain full extension)
- Active knee extension to 40°
- Standard (170 mm) ergometry (when knee ROM > 115°)
- Leg press (80-0° arc)
- Mini squats / weight shifts
- Proprioception training
- Initiate Step-Up program
- Avoid tibial rotation until 6 weeks

### 6-14 Weeks:

- D/C brace and wean from crutches
- Progressive squat program
- Initiate Step-Down program
- Leg press, lunges
- Isotonic knee extensions (90-40°, closed chain preferred)
- Agility exercises (sport cord)
- VersaClimber/Nordic Track
- Retrograde treadmill ambulation

### 14-22 weeks:

- Begin forward running (treadmill) program when 8" step down satisfactory
- Continue strengthening & flexibility program
- Advance sports-specific agility drills
- Start Plyometric program
- \*\*Plyo Prep Screen when initiating running and/or jumping. Schedule via QR code or email [spc@rushortho.com](mailto:spc@rushortho.com)





MIDWEST  
ORTHOPAEDICS  
AT RUSH

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**> 22 weeks:**

- Advance Plyometric program, Return to Sport (MD Directed)
- \*\*Lower Body Assessment when initiating return to activity progression.  
Schedule via QR code or email [spc@rushortho.com](mailto:spc@rushortho.com)

