

REHABILITATION PROTOCOL OVERVIEW: ACL RECONSTRUCTION, MAJOR MENISCUS REPAIR

	Phase 0 Preparing for Surgery	Phase 1: Restoring Activities of Daily Living Maximum Graft Protection Regain Motion Normalizing ADL's				Phase II: Strength/Balance	Phase III: Strength/Agility Minimal Graft Protection Regain Strength Regain Agility Returning to Sport
		Week 0	Weeks 1-2	Weeks 2-4	Weeks 4-6	Months 1.5-7.5	Months 7.5 - 9
Ideal # PT Visits	2 x a week	3 x a week	3 x a week	3 x a week	3 x a week	2 x a week until 12 weeks, then 1 x a week to 1 every other week	2 x a week
Injury/Surgery	Target	Target	Target	Target	Target		
Swelling	Resolution	Resolution	Resolution	Resolution	Resolution		
Range of Motion	Restore 0-120	Advance with No Restrictions	Advance with No Restrictions	Advance with No Restrictions	Advance with No Restrictions		
Weight Bearing	Full Weight Bearing with Crutches Optional	Toe Touch Weight Bearing	Toe Touch Weight Bearing	Toe Touch Weight Bearing	Toe Touch Weight Bearing	Two Week Crutch Weaning Protocol Weeks 7,8	
Hinged Knee Brace	Only if Confidence Requires	Locked While Block Active; Unlock after Block 0-90	Unlocked 0-90 Degrees	Unlocked 0-90 Degrees	Wean As Tolerated Goal: 12 SLR's without Lag	Only if Confidence Requires	Functional ACL Brace As Returning to Full Contact Sport
Proprioception				*	*	*	
Functional Movements				*	*	*	*
Strengthening				*	*	*	*
Swimming Like Activities						Begin at 3 Months	*
Jogging Like Activities						Begin at 5-6 Months	*
General Agility							Begin at 7.5 Months
Sport Specific Agility							Begin at 8 Months

This Protocol is Designed to Protect and Optimize Recovery and Reduce the Risk of Reinjury:

- Patients who return to level I sports have a 4.32 times higher injury rate than those who do not.
- Re-injury rates are reduced by 51% for each month RTS is delayed until 9 months after surgery.
 - After 9 months, no further risk reduction is observed