Rehabilitation Protocol: Combined Anterior Cruciate Ligament (ACL) Reconstruction and Meniscal Repair

Name: __________________________________________________________  Date: ______________________

Diagnosis: ______________________________________________________  Date of Surgery: __________

Phase I (Weeks 0-4)
- **Weightbearing:** Partial weight bearing (50%) as tolerated with brace locked in full extension
- **Hinged Knee Brace:** Locked in full extension for ambulation and sleeping
- **Range of Motion:** No flexion greater than 90 degrees
- **Therapeutic Exercises**
  - No deep bends for first 4 months
  - Quad/Hamstring sets
  - Heel slides
  - Non-weightbearing stretch of the Gastroc/Soleus
  - Straight-Leg Raise with brace in full extension until quad strength prevents extension lag

Phase II (Weeks 4-6)
- **Weightbearing:** As tolerated – discontinue crutch use
- **Hinged Knee Brace:** Discontinue brace use when patient has achieved full extension with no evidence of extension lag
- **Range of Motion:** Maintain full knee extension – work on progressive knee flexion
- **Therapeutic Exercises**
  - No deep bends for first 4 months
  - Closed chain extension exercises
  - Hamstring curls
  - Toe raises
  - Balance exercises
  - Progress to weightbearing stretch of the Gastroc/Soleus
  - Begin use of the stationary bicycle

Phase III (Weeks 6-16)
- **Weightbearing:** Full weightbearing
- **Range of Motion:** Full/Painless ROM
- **Therapeutic Exercises**
  - No deep bends for first 4 months
  - Advance closed chain strengthening exercises, proprioception activities
  - Begin use of the Stairmaster/Elliptical
  - Can Start Straight Ahead Running at 12 Weeks

Phase IV (Months 4-6)
- Gradual return to athletic activity as tolerated
- Maintenance program for strength and endurance

Comments:

Frequency: _____ times per week  Duration: ______ weeks

Signature: __________________________________________________________  Date: _________________