POST OPERATIVE KNEE ARTHROSCOPY (Partial Meniscectomy/Chondroplasty/Synovectomy)

This five-phased program approach can be utilized for both conservative and surgical patellofemoral clients. This systematic approach allows specific goals and criteria to be met; once goals and criteria are attained, the rehabilitation process can progress safely.

Ultimate Goal of Program

- 1. Improve Functional Status
- 2. Normalize Biomechanical Forces
- 3. Improve Strength/Power/Endurance
- 4. Decrease Pain/Inflammatory Status

Acute Phase (usually post-op days 1-5): Maximal Protection

Goals:

- 1. Relieve pain, swelling and inflammation
- 2. Retard muscle atrophy
- 3. Increase ROM and flexibility
- FWB, unless otherwise specified by physician
- Ice, Compressions, Elevation
- Strengthening exercises
 - Quadriceps setting and multi-angle isometrics (non-painful) 910, 750, 600, 450
 - Straight leg raises (Hip abduction not done with lateral compression syndrome)
 - Gentle standing or prone hamstring curls as tolerated
- Electrical Stimulation if needed (EMS, TNS, HVGD, Biofeedback)
- Flexibility, LE stretches (especially hamstrings/gastroc and also ITB if needed)
- ROM exercises- Heel slides to tolerance, prone/supine "knee hang" for extension
- · Patient education regarding activities, pathomechanics
- Avoidance Program
 - Squatting, Kneeling, Excessive Knee Flexion, Stairs

Sub-acute Phase (usually 1 to 2 weeks post-op): Moderate Protection

Progress to phase two when:

- 1. Pain and swelling reduce
- 2. ROM is increased
- 3. Strong visible quadriceps contraction

Goals:

- 1. Increase muscle strength and ROM without exacerbation
- Initiate weights for SLR (Hip abduction not done with lateral compression syndrome)
- Initiate weights for short arc quadriceps exercises, non-painful ROM
- Initiate mini-squats (0-30/40o) non-painful ROM
- Bicycle (low resistance, seat high)
- Continue isometrics, ROM, and flexibility exercises as needed
- Continue ice therapy
- Avoidance program
 - Squatting, Kneeling, Stairs

Chronic Phase (usually 2-4 weeks post-op): Minimal Protection

- 1. Progress to phase three when:
- 2. ROM and swelling WNL
- 3. Pain is minimal to none

Goal:

- 1. Achieve maximal strength and endurance
- Continue SLR and other isotonic knee exercises
- Continue mini-squats
- Advance closed kinetic chain activities (leg press, shuttle)
- Initiate proprioceptive exercises (unilateral balance, contra-kicks)
- Emphasis on increased functional activities, (example: step-ups)
- Cryotherapy post exercise
- Avoidance program
 - Full Squatting, Kneeling, Painful ADL's

Maintenance Program

Patient is usually discharged from therapy at 4-6 weeks post-op.

Goal:

- 1. Continue strengthening without detrimental affects on patellofemoral joint
- Continue flexibility daily (part of warm-up and cool down)
- Continue HEP program 3 times per week
- Endurance training is continued
- Continue to be active (walking, swimming, pool running, possible biking)

Advanced Strengthening Phase

Patients with physical work requirements or a goal to return to high levels activities may remain in therapy for the advanced strengthening phase.

Goals:

1. Increase strength/increase power

Criteria for advanced strengthening phase:

- 1. Increase endurance
- 2. Full ROM
- 3. Increase neuromuscular control
- 4. Strength 5/5
- 5. Fast speed training
- 6. No episodes of giving way

Exercises:

4 Quad Program

- 1. Isotonic knee extension (100-1400)
- 2. 1/2 squats (gradually increase weight)
- 3. Progress Leg press
- 4. Increase height of step up

Fast Speed Training

- 1. Exercise tubing (Breg)
- 2. Fast hamstring curls
- 3. Fast hip ext/flex

4 Endurance Program

- 1. Bicycle (30 mins or more)
- 2. Elliptical
- 3. Pool Running
- 4. Stairmaster

Balance/Agility Drills

- 1. Breg Kat system
- 2. Balance board (single leg)
- 3. Unilat. Balance on unstable surface
- 4. Agility training (lateral shuffle, carioca, etc)

Return to Sport

Criteria to Participate:

- 1. full non-painful ROM
- 2. Proprioception test 95% of opposite leg
- 3. Isokinetic Test
- 4. 65% Quad Torque/BW ratio (180o/s)
- 5. 70-75% Hamstring/Quad ratio (180o/s)
- 6. 95% Work/BW ratio (180o/s)
- 7. Hop Test (optional)

Continue Strengthening Program:

- 4 Quad Program
- 4 Endurance Program
- Continue Balance/Agility Drills