

ACL Reconstruction with Meniscus Repair Rehab Protocol

	WEIGHT BEARING	BRACE	ROM	EXERCISES
Phase I 0-2 weeks	Heel touch weightbearing with crutches	Locked in full extension for sleeping and all activity *Off for exercises and hygiene	0-90° when non-weight bearing	Heel slides, quad sets, patellar mobs, SLR, SAQ No weight bearing with flexion >90° Avoid tibial rotation for 8 weeks to protect meniscus
Phase II 2-8 weeks	2-6 weeks: Heel touch WB with crutches 6-8 weeks: Progress to full WB	2-8 weeks: Locked 0-90° Off at night Discontinue brace by 8 weeks when comfortable WB	As tolerated, caution with flexion >90° to protect meniscus	2-6 weeks: Add side-lying/floor-based quad/hamstring/hip and core, advance quad set and stretching 6-8 weeks: Addition of heel raises, closed chain lower body, gait normalization, eccentric quads/hamstrings; advance core, glutes and pelvic stability Activities w/ brace until 6 weeks; then w/o brace as tolerated No weight bearing with flexion >90°
Phase III 8-12 weeks	Full	None	Full, caution with flexion >90° to protect meniscus	Progress closed chain activities Begin hamstring work, lunges/leg press 0-90°, proprioception exercises, balance/core/hip/glutes
Phase IV 12-16 weeks	Full	None	Full	Progress Phase III exercises and functional activities: single leg balance, core, glutes, and eccentric hamstrings Begin stationary bike at 12 weeks with low resistance Swimming okay at 12 wks
Phase V 16-24 weeks	Full	None	Full	Start elliptical and running straight ahead after 16 weeks, jumping after 18 weeks >20wks: Advance to sprinting, backward running, cutting/pivoting/changing direction, initiate plyometric program and sport-specific drills FSA completed after 22 weeks

Phase VI >6 months	Full	None	Full	Gradual return to sports participation after completion of FSA and clearance by MD
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*Brace may be removed at night after first post-operative visit (day 7-14) if directed

*Same protocol applies for all graft choices

***Completion of FSA (Functional Sports Assessment/Lower Body Assessment) is not mandatory, but highly recommended at approximately 22 weeks postop for competitive athletes returning to sport