## Saint Louis University SSM Health Physical Therapy Orthopedic Residency in Collaboration with SLUCare Physician



These guidelines, treatments, and milestones have been established to assist in guiding rehabilitaT.trrent havlablhehedeeTheTrerra rnts

When implementing the below guidelines for rehabilitation of meniscal repairs with concomitant procedures, consider the following:  o With ACL reconstruction:  Promote protection of the ACL	beyond 45 until week 5 <sup>-3</sup> No loaded knee flexion beyond 90° until week 8  No forced knee	Shorter meniscus healing time if concomitant cruciate repair <sup>7,8</sup> Biopsychosocial factors such as pain catastrophizing, fear-
graft by limiting excessive anterior tibial translation  o With ACL and MCL repair:  Limit excessive tantinor	hyperextension if atterior horn repair  No forced knee flexion if posterior horn repair  Avoid OKC exercise from 0 tibiaβ0° and CKC exercise from 90-120° if patient shows signs/symptoms of patellofemoral irritation.	avoidance behavior, and exercise selefficacy
<sup>6</sup> when determining exercise progression		

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Please respond to our anonymous survey regarding these guidelines to assist in improving patient care and advocacy<a href="https://slu.az1.qualtrics.com/jfe/form/SV\_bpX7Z9AaVTzGblj">https://slu.az1.qualtrics.com/jfe/form/SV\_bpX7Z9AaVTzGblj</a>

