

Knee Arthroscopy/Lateral Release Rehabilitation **Dr. David R. Guelich**

This rehabilitation protocol is designed for patients who have undergone knee arthroscopy or arthroscopic lateral release. The intensity allowed and the time frame required for the rehabilitation process is dependent upon the surgical procedure and the clinical assessment of Dr. Guelich. The protocol is divided into phases. Each phase is adaptable based on the individual patient and special circumstances.

The **overall goals** of the surgical procedure and rehabilitation are to:

- Control pain, swelling, and hemarthrosis
- Regain normal knee range of motion
- Regain a normal gait pattern and neuromuscular stability for ambulation
- Regain normal lower extremity strength
- Regain normal proprioception, balance, and coordination for daily activities
- Achieve the level of function based on the orthopedic and patient goals

The physical therapy should be initiated within 3 to 5 days post-op. It is extremely important for the supervised rehabilitation to be supplemented by a home fitness program where the patient performs the given exercises at home or at a gym facility. **Important post-op signs** to monitor:

- Swelling of the knee or surrounding soft tissue
- Abnormal pain response, hypersensitive
- Abnormal gait pattern, with or without assistive device
- Limited range of motion
- Weakness in the lower extremity musculature (quadriceps, hamstring)
- Insufficient lower extremity flexibility

Return to activity requires both time and clinical evaluation. To safely and most efficiently return to normal or high level functional activity, the patient requires adequate strength, flexibility, and endurance. Isokinetic testing and functional evaluation are both methods of evaluating a patient's readiness to return to activity. Return to intense activities following a knee scope may increase the risk of an overuse injury or the possibility of compounding prior articular cartilage damages and symptoms such as pain, swelling, or instability should be closely monitored by the patient.

Phase 3: Week 6-12
Knee Scope

WEEK	EXERCISE	GOAL
6-12	ROM Passive, 0-135° HS/Gastroc/Soleus stretch ITB/Quad stretch Patella mobs STRENGTH SLR in 4 planes with ankle wt/tubing Heel raise/Toe raise Leg Press-single leg eccentric Knee extension (90-10°) with resistance Lateral/Forward step-up/downs Reverse lunges-knee not to migrate over toe Hamstring curls with resistance (0-90°) Multi-hip machine in 4 planes Mini-squats with resistance (0-45°) Stool crawl Straight leg deadlift BALANCE TRAINING Two-legged balance board with plyotoss Initiate single leg steamboats with band ½ Foam roller work Wobble board work Sports cord single-leg agility/balance AEROBIC CONDITIONING Bicycle with resistance EFX/StairMaster Walking program Swimming (kicking) RUNNING PROGRAM Initiate running on minitramp, progress to treadmill when tolerable Increase walking program Backward running MODALITIES Ice 15-20 minutes as needed	0-135°

GOALS OF PHASE:

- ROM 0-135°
- Full weight bearing with quad control
- Increase strength and endurance
- Control pain and swelling

Phase 4: Week 12-24
Knee Scope

WEEK
12-24

EXERCISE

ROM

Continue all stretching from previous phases

STRENGTH

Continue all strengthening activities from previous phases increasing weight and repetitions

BALANCE TRAINING

Continue all single-leg activities increasing difficulty

RUNNING/CONDITIONING PROGRAM

Bicycle with resistance for endurance

EFX/StairMaster for endurance

Increase running program

Increase walking program

Swimming for endurance

Backward running

CUTTING/AGILITY PROGRAM

Lateral shuffle

Carioca

Figure 8's

FUNCTIONAL TRAINING

Initiate plyometric training

Sport specific drills

MODALITIES

Ice 15-20 minutes as needed

GOALS OF PHASE:

- Increase and maximize function
- Maximize strength and endurance
- Return to previous activity level
- Return to sport specific functional level