

**Knee Arthroscopy  
With Debridement, Meniscectomy, etc  
Dr. LT Fleske & Dr. Randall Hildebrand**



**Central Kansas  
Orthopedic Group**  
SURGICAL SPECIALISTS & PHYSICAL THERAPY

**Weeks 1-2:**

Weight Bearing:	WBAT, non-analgesic gait. Caution with WB too soon if large chondroplasty performed
Modalities:	Russian Stimulation & Pain/Edema management
Stretching:	Hamstring, IT Band, Gastroc-Soleus
Strengthening:	<ol style="list-style-type: none"><li>1. Quad Sets</li><li>2. Straight Leg Raises (no extension lag)</li><li>3. Hip Isotonics (abduction, extension)</li><li>4. Ankle Pumps or resisted ther-a-band</li><li>5. Ball ROM (CPM type movements)</li><li>6. Prone Hangs and/or sustained knee extension stretches</li></ol>
Range of Motion:	0-110 degrees

**Weeks 3-4:**

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Weight Bearing:	Full Weight Bearing, non-analgesic gait
Modalities:	Russian Stimulation and/or biofeedback if quadriceps tone is poor
Stretching:	Same as above
Strengthening:	<ol style="list-style-type: none"><li>1. Total Gym</li><li>2. Ball ROM/extension stretching (contact physician if ROM is difficult)</li><li>3. Continue hip isotonics, SLR's with biofeedback, etc</li><li>4. Bike, Elliptical, treadmill</li><li>5. Ball bridges, hamstring curls</li><li>6. Closed Kinetic Chain: hip isotonics, squats, step ups/downs</li><li>7. Resisted walking</li></ol>
Range of Motion:	0 – 130 degrees

**Weeks 5-6:**

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Modalities: As needed

Strengthening: 

1. Progress with above exercises
2. Add functional lifting, squatting, sports specific activities to improve body mechanics to return to full activities as tolerated.

Range of Motion: Full

**Weeks 7-8:**

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Strengthening: 

1. Progress into independent fitness program and/or Home Exercise Program
2. Return to full recreational activities as tolerated per physicians' orders