ACL Reconstruction *with meniscus repair*	Rehab Protocol **Mathew Taylor, M.D**	**INLAND** Orthopaedic Surgery & Sports Medicine Clinic
	** Please follow MOON protocol for specifics … this just clarifies weight-bearing, ROM and brace use ***** Bucket-handle repairs will go slower with WB flexion progression (4 weeks locked, then progress)*** ***** Root repairs & radial repairs will be strict NWB x 6 weeks, ROM per Root Repair Protocol***	

Phase 1: Immediate post-op
    Weeks 1-2
	• Routine simple repair: WBAT locked straight x 2 weeks
	  - Discontinue crutches as comfort & gait safety allows
	  - Sleep with brace locked straight first week, then D/C
	• Encourage NWB ROM 0-90, active and passive
	• Bike for ROM, not for cardio
	• Encourage patellar glides, SLR / quad sets, hip add / abd
	• NMES unit for quad recruitment	

Phase 2 Weeks 3-6	• Routine repair: WBAT 0-30; progress 30 degrees per week • Discontinue brace as quad control improves (Goal is to d/c by 4 weeks) … but no WB flexion beyond 90 x 6 weeks • Full NWB ROM; Bike for ROM; routine NMES • Scar management with Vitamin E oil	
Phase 3 Beyond 6 weeks	• Full WBAT • From 6 weeks to 3 months … ok WB in flexion beyond 90 degrees, but no deep resistance • Beyond 3 months … ok full WB flexion with resistance • Progress with MOON protocol or equivalent (per PT)	

General ACL Graft Principles:

-**ACLR with allograft**: progress with WB flexion early as quad control allows; start hamstring (HS) activities (stretches, ROM, strengthening) as comfort allows

-**ACLR with quad autograft**: no restrictions in quad ROM and strengthening (pain and control typically improves around 3-5 week mark); start HS activities as comfort allows

-**ACLR with hamstring autograft**: HS stretching ok at 3-4 weeks and HS strengthening at 6-8 weeks

-**ACLR with patellar tendon autograft:** same as quad autograft in general; anterior knee pain / quad weakness persists longer than allograft / quad auto / HS auto