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**PATIENT NAME:**

**PROCEDURE:**

**DATE OF SURGERY:**

**PHYSICAL THERAPY ORDER – Anterior Cruciate Ligament Reconstruction with Meniscus Repair**

Phase I: 0-2 weeks

- Edema and pain control
- Weight bearing status: TTWB with brace locked in extension and crutches
- ROM: 0-90 degrees
- Brace: 0-90 degrees except when weight bearing; locked in extension while sleeping
- Exercises: heel slides, patellar mobs, gastroc/soleus stretch, calf pumps
- Keep pillow under heel to maintain full extension while sleeping / resting

Phase II: 2-6 weeks

- WB status:
  - o 2-4 weeks – partial WB in brace locked in extension and crutches
  - o 4-6 weeks – partial WB in brace unlocked and crutches
- ROM: maintain full extension and progress flexion
- Brace: unlocked except when weight bearing as above
- Exercises: Phase I + toe raises, balance exercises, stationary bike, hip/glutes/core
- Keep pillow under heel to maintain full extension while sleeping / resting

Phase III: 6-12 weeks

- WB status: Full without brace
- ROM: full
- Brace: wean off
- Exercise: Phase II + close chain quads, hamstring curls, step-ups, front/side planks

Phase IV: 3-9 months

- WB status: full without brace
- ROM: full
- Brace: none
- Exercise: Phase III + advance closed chain exercises, progressive proprioception exercises, stairmaster, elliptical
  - o 4 mo: begin jogging straight ahead, 5 mo: begin jumping
  - o 6-9 mo: advance running to sprinting, backward running, cutting/pivoting/changing direction, initiate plyometric program and sport specific drills; focus heavily on proprioception and reactive drills
  - o 9 mo: advance as tolerated; **strength evaluation and single hop testing**

Phase V: 9-12 mo

- Gradual return to sports