

Arthroscopic Knee Debridement

Physical Therapy Protocol

Keys to a Successful Outcome

- Pain > 4/10 = Hold progression
- WB is allowed and encouraged as early as it is comfortable
- When resting, the foot should be placed on a chair or ottoman so that the knee is straight with nothing behind the knee to help prevent a flexion contracture from developing

Phase	Brace	ROM Goals	WB	Exercises
Weeks 0-2	None	AAROM->AROM, 0-90°	WBAT	AAROM stretching of lower limbs; straight-leg raise, quad/multi-planar hip strengthening, stationary bike w/out resistance.
Weeks 2-8	None	FAROM	WBAT	Gait training; balance/proprioception exs; begin closed-chain lower limb exs; cardio machines (no running)*
Weeks 8+	None	FAROM	WBAT	Progress resistance training exs; begin plyometric/jumping exs; sport-specific RTP protocol.

* Running in pool or anti-gravity treadmill is acceptable

Patient Instructions

- Ice frequently and be proactive about NSAIDs to mitigate inflammation and stiffness

General Time Frames for ADLs

- Driving: 2-6 wks
- Desk/light return to work: 1-4 wks
- Golf (chipping/putting): 6-12 wks