



Orthopaedic Protocols

Plantar Fasciitis Rehabilitation

Evaluation

- AROM/ PROM of ankle
- Strength of the ankle, knee, and importantly the hip
 - Hip rotator weakness can cause increase pronation which strains the plantar fascia
- Sensation
- Palpation- common place is insertion of tendon on the calcaneus. This is important due to high incidence of posterior tibialis tendonitis which can mimic plantar fasciitis
- Joint play- common cause of plantar fasciitis is hypomobility in the forefoot
- Posture-Excessive pronation will increase the strain on the fascia. Also excessive pronation will increase hallux valgus.

Treatment

- Heat prior to treatment- helps “warm up” the fascia to allow for stretching
- Soft tissue mobilization- Breaks up adhesions, results in increased blood flow
- Therapeutic exercise
 - Stretching of gastroc, plantar fascia, and soleus
 - Strengthening of hip rotators, ankle isometrics, eccentric strengthening of ankle muscles, and intrinsic muscle strengthening
 - Balance and proprioception exercises
- Proper foot education-shoe wear is essential for active individual with plantar fasciitis
- Bracing or night splinting as needed
- Modalities PRN