Hays Medical Center

Plantar Fasciitis / Calcaneal Apophysitis

General Principles:

This protocol was designed to provide the rehabilitation professional with a guideline of care. It should be stressed that this is only a protocol and should not be a substitute for clinical decision making regarding a patient's progression. Actual progression should be individualized based upon your patient's physical examination, progress, and presence of any complications.

PHASE I:

Week 1

Weight Bearing-

1. May be full weight-bearing as tolerated. Physician may advise limited weight-bearing depending on severity of symptoms

Orthotics-

- 1. Heel cup, foam heel pad, or other at discretion of the physician
- 2. Night splint if indicated by physician

Modalities (PRN)-

- 1. Ice Massage
- 2. Whirlpool
- 3. Electrical Stimulation
- 4. Ultrasound
- 5. Phonophoresis with 10% Hydrocortisone cream or Iontophoresis with Dexamethasone if no relief with Ultrasound

Exercises-

- 1. Ankle Stretching
 - a. All planes with special attention to Gastroc and Soleus
 - b. Plantar arch stretches
- 2. Intrinsic foot stretching / strengthening
 - a. Towel scrunches
 - b. Marble pick ups
- 3. Plantar massage with bottle, rolling pin, ball, or manually
- 4. Educate patient on home stretching and massage to be done daily

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PHASE II:

May progress to Phase II if patient has full, pain-free foot and ankle ROM with minimal/improving tenderness to palpation

Week 2 – 3

Weight Bearing-

1. May be full weight-bearing as tolerated with normal gait

Orthotics-

1. Continue use of orthotic as directed by physician

Modalities (PRN)-

1. Continue only as needed.

Exercises-

- 1. Continue/progress previous exercises.
- 2. Ankle isotonics with Theraband, all planes as tolerated
- 3. Heel / Toe raises
 - a. No resistance initially, progress as tolerated
 - b. Start seated, progress to standing
- 4. Stationary bicycle, stair stepper, elliptical
- 5. Begin interval running program

PHASE III:

May progress to Phase III if patient has full, pain-free AROM, no tenderness to palpation, and no pain with ambulation or Phase II exercises.

Week 4+

Orthotics-

1. Continue with orthotic as needed for comfort

Modalities (PRN)-

1. Continue only as needed.

Exercises-

- 1. Gradually progress into sport / functional activities
 - a. Initiate Interval Running Program
 - b. May start light jumping / plyometric activity

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