



The Children's Hospital



Affiliated with

University of Colorado at Denver
and Health Sciences Center

CGMA

Center for Gait and Movement Analysis

PT07: Split anterior tibial tendon transfer to the cuboid

Indications: Varus foot/ ankle position during stance and swing with over activity of the anterior tibialis

Procedure: Lateral ½ of tibialis tendon insertion is detached from the 1st cuneiform and re-attached to the cuboid, tendon is longitudinally split up to the musculotendinous junction

Casting: Short leg cast for 6 weeks, 1st 3 weeks non weight bearing, 2nd 3 weeks are weight bearing as tolerated

Healing Time: Approximately 6-8 weeks

Precautions: -Avoid activities that place the patient at risk of forceful plantarflexion

Contraindications:

-Avoid forceful, resisted muscular contraction, avoid impact activities

Phase 1: Post-op day 1-7

Goals: -protect the surgical site including the incision and underlying surgical tissues

-home exercise instruction including positioning, stretching, ADL function

-isometric contraction of the gluts, quads, hamstrings

Criteria to Progress:

-safe mobility for ADL completion

-able to demonstrate understanding of home exercises and precautions

Phase 2: Post-op day 8-21

Goals: -begin weight bearing activities with cast at the end of post-op week 3

-independent SLR all planes with cast donned

Criteria to Progress:

-uneventful healing of surgical tissues

Phase 3: Post-op 22 to completion of PT care

Goals: -full ankle ROM, all planes

-neutral foot alignment during stance and swing phases of gait

-improve strength of the lower leg with emphasis on ankle dorsiflexion, gastroc-soleus, may use theraband for ankle inversion/eversion strengthening at 6 weeks post-op

-closed chain proprioception exercises, balance activities

-Transverse friction massage to surgical scar to improve mobility once the incision is closed (Approx. 4-6 weeks)

-independent management with home exercises

When multiple procedures are performed at the same surgical event, the post-op physical therapy care needs to default to the most conservative time frames and guidelines.