



East Lancashire Hospitals

NHS Trust

A University Teaching Trust

Tiptoe Walking Assessments

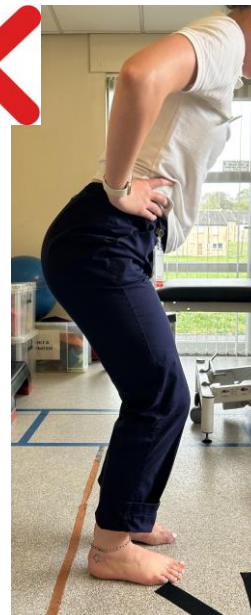
Safe | Personal | Effective

Assessment: Standing Posture

Ask the child/young person to stand with their heels down on the floor. This is one way of assessing whether the calf muscles have adequate length.



Able to stand with feet flat, and trunk/hips/knees all aligned and straight. This indicates there is no shortening to the calf muscles.



The only way can get feet flat is to flex at trunk/hips/knees. This indicates there is shortening to the calf muscles.

**Consider referral.
Complete gastrocnemius
length assessment**

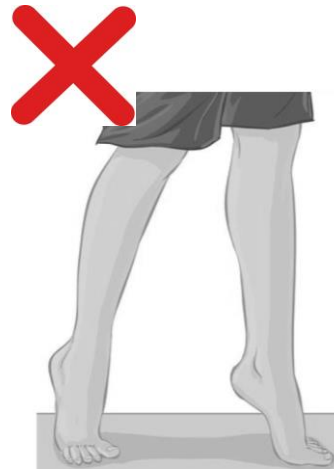
Assessment: Gait Observation

Ask the child/young person to walk barefoot.

Observe if they can get their heels down with/without verbal prompts.



Able to walk with the heel or hindfoot being the first part of the foot to touch the floor when they take a step. This indicates there is no shortening to the calf muscles.



Either unable to walk with heels/feet down flat, or feet flat with excessive flexion at trunk/hips/knees. This indicates there is shortening to the calf muscles.

**Consider referral.
Complete gastrocnemius
length referral.**

Ankle Dorsiflexion ROM

Ankle dorsiflexion range should be assessed to determine whether the child requires a referral to a specialist service.

Follow these steps:

1. Child should be laid down in supine (on their back) on a flat surface
2. Ensure that the leg on the side you are measuring is straight.
3. Place one hand on top of the knee to help maintain full knee extension (or as much knee extension as the child has)
4. Place your other hand underneath the foot ensuring that you have hold of the heel
5. Whilst trying to keep the heel in a neutral/midline position slowly push the foot upwards so that toes move towards the knee, and the back of the calf/underneath the foot is being stretched.



Ankle Dorsiflexion ROM

Silfverskiold Test

Assessing for contractures to the gastrocnemius and/or soleus muscle, and achilles tendon.

<https://youtu.be/La9LUJwGGQ0>

Ankle Dorsiflexion ROM



Beyond plantargrade

No other symptoms = no referral required.
Provide with universal offer advice and reassurance.

Symptoms present i.e. pain = Refer to physiotherapy.



Plantargrade

Refer to physiotherapy.

Refer to orthopaedics if previous physiotherapy episode completed and unsuccessful.



Unable to achieve plantargrade

Refer to orthopaedics.

Consider physiotherapy referral if not felt to be a fixed ankle contracture and may respond to stretches.

Tiptoe Walking Referrals

Please refer to our referral guidance document for tiptoe walking for further information.

[Tiptoe walking - referral guidance.docx](#)