

## Flat Feet (Pes Planus)

### Eligibility

- Flattening of the medial longitudinal arch of the foot
- +/-Associated pain. Especially if:
- Unilateral
- Acquired ( flattening of the arch in adulthood)
- Rigid ( loss of normal hindfoot inversion/eversion)
- Bony swelling on the medial border of the foot

### Differential Diagnosis

- Posterior tibialis tendon dysfunction ( PTTD)
- Flexible flat foot
- Midfoot arthritis
- Tarsal coalition
- Accessory navicular
- Charcot foot
- Inflammatory arthropathy eg Rheumatoid arthritis

### Information Required for Referral

- Detail history of the deformity, pain and swelling
- Unilateral or Bilateral
- Acquired (adult) or developmental (childhood)
- Rigid or flexible hindfoot movement
- Progression of deformity ( is it worsening?)
- Any treatment taken eg Orthotics
- Any previous surgeries
- Associated medical condition eg DM

### Investigations Required for Referral

- Full weight bearing foot x rays.
- Ultrasound to examine Tibialis Posterior tendon

### Fax Referral to:

**Repatriation General Hospital**

**Fax:(08) 8374 2591**

### Red Flags

- Continuous symptoms despite the non-operative management.

### Suggested GP Management

- Supportive footwear ( usually lace up)  
+/- Foot orthotics (arch supports)
- Analgesia

### Clinical Resources

- Office based management of adult acquired flat foot deformity. Miniaci-Coxhead SL, Flemister A S Jr Medical clinics of North Americas 2014 Mar;98(2) 291-9
- Foot Orthoses for Adults with Flexible Pes Planus: a systematic review. Banwell HA, Mackintosh S, Thewlis D. Journal of Foot and Ankle Research 2014 april5;7(1): 23

General Information to assist with referrals and the and Referral templates for FMC and RGH are available to download from the SALHN Outpatient Services website [www.sahealth.sa.gov.au/SALHNoutpatients](http://www.sahealth.sa.gov.au/SALHNoutpatients)

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1.0	July 2014	July 2016	Original