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## Foot and Ankle

### INTRODUCTION AND ANATOMY

The ankle is a commonly injured body part among athletes. The ankle constitutes the foundational support for the body and functions as both a shock absorber and propulsion mechanism. The foot and ankle have 3 main structural components: the forefoot, the midfoot, and the hindfoot.<sup>1</sup> The forefoot contains 5 metatarsals and 14 phalanges and extends up to the tarsometatarsal joint (also called the Lisfranc joint). The metatarsals are numbered, starting medially at the great toe or hallux, which is numbered 1, and continuing laterally to the small toe, which is designated 5. The 5 bones of the midfoot are relatively immobile with respect to one another, but they do provide a mechanical link between the forefoot and hindfoot. The midfoot contains the navicular, the cuboid, and the 3 cuneiforms and extends from the tarsometatarsal joint distally to the transverse tarsal joint proximally.<sup>2</sup> The hindfoot contains the calcaneus and the talus. The calcaneus is the largest tarsal bone and forms the heel of the foot; it also helps support the weight of the body and provides an attachment for muscles to move the foot.<sup>2,3</sup> The superior aspect articulates with the talus via 3 articular surfaces—the anterior, middle, and posterior facets.<sup>2</sup> The irregularly shaped talus is also the most superior of the tarsal bones. It is situated superior to the calcaneus over a bony projection called the sustentaculum tali. Because the talus fits into the space formed by the ankle bones or malleoli, lateral movement is restricted by the stabilizing ligaments