

Differentiating Heel Pain

MORE THAN PLANTAR FASCIITIS

Heel pain isn't always plantar fasciitis. Several distinct conditions can mimic its symptoms, each requiring a unique approach. Use this quick-reference guide to identify key differentiators and apply evidence-based strategies for faster, more accurate diagnosis and relief.

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LISTEN FOR PATIENT CUES

- Burning, numbness, tingling → think Tarsal Tunnel or Baxter's Neuropathy
- Deep, bruise-like pain with pressure → think Heel Pad Syndrome
- Sharp pain with first steps → think Plantar Fasciitis
- Progressive pain with loading → consider stress fracture

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CONFIRM WITH ORTHOPEDIC TESTS

- Nerve-related pain increases with compression or stretching.
- Plantar fascia pain is localized to the medial calcaneal tubercle.
- Heel pad pain is centralized and typically worsens when walking barefoot.
- Toe vs. heel walking can serve as a simple differentiating test.

3



APPLY MANAGEMENT PEARLS

- Plantar Fasciitis = offload + strengthen
- Tarsal Tunnel = address nerve compression and intrinsic foot weakness
- Heel Pad Syndrome = cushion, offload, protect (don't scrape/stretch!)
- Stress Fracture = offload, rest, imaging

DID YOU KNOW?

54%

54% of plantar heel pain has a neurologic etiology.

15%

15% of plantar heel pain is Heel Pad Syndrome.