Cuboid Subluxation in a Collegiate Softball Player
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**Background:** An 18-year-old female Division III Collegiate softball player was running around second base, when she plantarflexed her ankle and inverted her foot. The patient presented with an antalgic gait while walking into the athletic training room. Physical exam demonstrated moderate swelling on the dorsal lateral surface of the foot, with no ecchymosis and no obvious deformity. Palpation presented point tenderness over the area of the cuboid, both dorsally and on the plantar aspect of the foot. Range of motion was limited and painful in eversion and plantarflexion. The patient exhibited extreme pain during dorsal and plantar cuboid glides. **Differential Diagnosis:** cuboid fracture, cuboid dislocation, mid-foot sprain, tarsal fracture. **Treatment:** The athlete was diagnosed with a cuboid subluxation and was immediately treated with ice. She was also instructed in the use of an ankle walker and crutches. Therapeutic exercises for the first week included toe pick-ups, Thera-Band for plantarflexion, dorsiflexion, eversion and inversion. During the first week the use of the boot and crutches were discontinued. During week two, proprioceptive exercises were started. The clinicians also formulated a modified low-dye technique where strips of tape were pulled medial to lateral which was effective in reducing pain and the perception of instability. After three weeks of rehabilitation, functional training was started with the modified taping technique. She demonstrated pain only during quick deceleration and cutting maneuvers. Once her pain diminished during deceleration and cutting she resumed full activity. Her rehabilitation took four weeks to complete before she could return to full play. **Uniqueness:** This case is unique because it is not a common injury. Most often with an inversion mechanism the anterior talofibular ligament is affected. Nine months post-injury, there has been no reoccurring subluxations, which seems to be inconsistent with current research. It has been shown that patients with this pathology are more likely to develop multiple cuboid subluxations due to chronic instability. This case is also unique because of the effectiveness of the modified low-dye taping technique in relieving pain and instability. **Conclusion:** The clinicians want to bring more awareness to this injury so that future athletic trainers and healthcare professionals know how to recognize and treat a cuboid subluxation because the mechanism is similar to an inversion ankle sprain. **Key Words:** cuboid, subluxation, plantar. **Word Count:** 373