

# Tarregower Remedial Massage

## CLIENT RECORD: Follow-up Consultation

Last Name: McShanag First Name: LYNN

Date 22/7/23

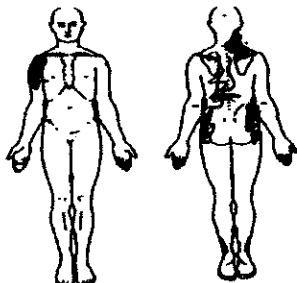
Area Being Treated Cx/HIPS

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y ☒ N

If yes \_\_\_\_\_

Response to previous treatment (+ve, -ve, SQ): +ve



Shoulders ☒  
Deltoids ☒  
HIP ☒  
Referral pain ☒  
Dem. ☒  
Nerve pathway (forearm)

Client consent for treatment

Please sign

Date

### OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests): <u>Cx Rotn L 30° S. @ Lev Scap</u> <u>R 30° S. @ U/T.</u>
Palpatory Assessment:	
Treatment: <u>MCTT - iliocostalis, longissimus,</u> <u>semi spinalis, lev scap, OM,</u> <u>Deltoids, Sphen cap.</u> <u>O.P.O., Glute med, glute max, piriformis</u> <u>Cx Joint mob</u>	Advice & Corrective Exercises: <u>Cx mobility Daily</u>
Reassessment & Postural Improvements: <u>Cx Rotn L 50° S. @ Lev Scap</u> <u>R 50° S. @ U/T</u>	

Next Treatment/Management Plan: 3 weeks (booked)