

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: HUDSON First Name: SAM

Date 2/11/23

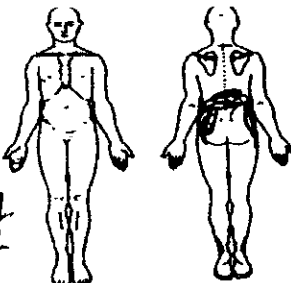
Area Being Treated Lx/HIP

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y (N)
If yes _____

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

a little tender post appointment



① HIP worse than ②

C. Med
C. Max
TFL
QL

Client consent for treatment

Please sign

S. Hudson

Date

OBJECTIVE EXAMINATION:

Observation: <u>Sam is aware of 'click' in ① HIP. Has been assessed by Orthopaedic Surgeon</u>	Motion tests (Active, Passive, Resisted, Special Tests): <u>SLR L 90° R (block).</u> <u>R 90° PB.</u> <u>HIP Flex L 90° (ext. rotn)</u> <u>R 90° (ext rotn).</u> <u>HIP IR L 10° R (spring)</u> <u>R 10° R (spring)</u> <u>ER L 30° R (spring)</u> <u>R 30° R (spring)</u>
Palpatory Assessment:	Advice & Corrective Exercises: <u>① Leg abducted over R</u> <u>→ leg extension</u> <u>→ Rotate ② foot internally</u> <u>→ Daily 2 sets 6 reps</u>
Treatment: <u>MFT - the coxarth, QL, C. Med, C. Max, TFL</u> <u>DIP HIP C. Max, P. Iliotermus, C. Med</u>	Reassessment & Postural Improvements: <u>SLR L 90° R (Block)</u> <u>R 90°</u> <u>HIP Flex L 90° R (Block)</u> <u>R 90° R (spring)</u> <u>HIP IR L 10° R (spring)</u> <u>R 10° R (spring)</u>

Next Treatment/Management Plan:

Next week (booked)