

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: Gudgeon First Name: Bronwyn

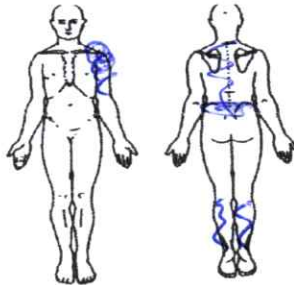
Date 17/8/23

Area Being Treated Dorsi
cx/sx calves

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y N
If yes _____

Response to previous treatment (+ve, -ve/ISQ): +ve



1st Treatment
post Travel

Client consent for treatment

Please sign

B

Date

OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests): <u>Shoulder abd L 180</u> <u>R 180</u> <u>Flex L 180</u> <u>R 180</u>
Palpatory Assessment: <u>Tib Post Hypertonic</u> <u>Piriformis "</u>	<u>Resisted Flex ✓</u> <u>Ext ✓</u> <u>Dorsi L 0° R (spring)</u> <u>R 0° R (spring)</u> <u>Plantar L 45° R (spring)</u> <u>R 45° R (spring)</u>
Treatment: <u>met ESC, Glute Med, Glute</u> <u>Max, Hfs, Gastroc, Tib Post,</u> <u>Soleus</u> <u>P&S Piriformis</u>	Advice & Corrective Exercises: <u>call stretches</u> <u>Piriformis stretch</u>
Reassessment & Postural Improvements: <u>Dorsi Flex 50° R Spring</u> <u>R 50° R (Spring)</u>	

Next Treatment/Management Plan:

2 weeks. (booked).

→ Dorsi Flexion

→ Hfs.