

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: GUDGEON First Name: Bronwyn

Date 31/8/23

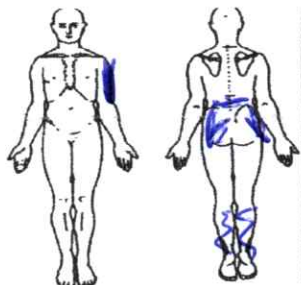
Area Being Treated HIPS

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y N

If yes _____

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



② ARM - ext
rotation - delt, infra
teres minor
calves
Piriformis
ITB's

Client consent for treatment

Please sign

Bronwyn

Date

31/8/

OBJECTIVE EXAMINATION:

Observation: Bronwyn seemed to be more sensitive to pain than previous appointments	Motion tests (Active, Passive, Resisted, Special Tests): Resisted ^{shoulder} ext rot L x3 x3 R ✓ ✓ Resisted ^{shoulder} int rot L ✓ ✓ R ✓ x2 Shoulder abd L 165° S @ lat dors R 180° PB
Palpatory Assessment: Post Deltoid ② Tender	
Treatment: MFTT ilio costalis, longissimus Semi Spinalis, lat dors, infra. supra, Deltoids, Glute med, latscap, GASTROc, H/S Glute Max DIP MTR - Teres Minor, Piriformis	Advice & Corrective Exercises: Resistance band - ext. & int. Shoulder rotations x 10 → Hold for 5sec, 5sec release
Reassessment & Postural Improvements: Shoulder abd L 180° S @ lat dors	

Next Treatment/Management Plan:

3 weeks (next week)