

Tarregnow Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: WITHERS First Name: EWON

Date 3/7/23

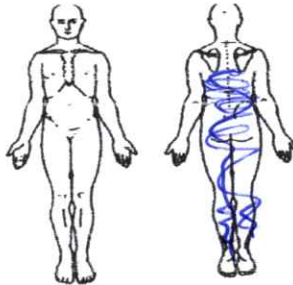
Area Being Treated Lx/HIPS

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y/N

If yes _____

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



calfs - deep pain

Client consent for treatment

Please sign

Date

3/7/23

OBJECTIVE EXAMINATION:

Observation: <u>Calcaneal Tendon 'J' bilat.</u>	Motion tests (Active, Passive, Resisted, Special Tests):
Palpatory Assessment:	
Treatment: <u>MFR - iliocostalis, longissimus lat dorsi, glute med/max, QL</u> <u>DIP T.b Post</u> <u>MFR Peroneals, Calfs, Soleus</u>	Advice & Corrective Exercises: <u>Glute - unilat then Bilat</u> <u>Piriformis Stretch</u> <u>Hold 20 sec</u> <u>2 sets 2 reps</u> <u>Heel raise & Drop 2 sets 2 reps</u>
Reassessment & Postural Improvements: <u>Calc. Tendon 'J' reduced.</u> <u>bilat</u>	

Next Treatment/Management Plan:

2 weeks (booked)