Tarrengower Remedial Massage

CLIENT RECORD: Follow-up Consultation

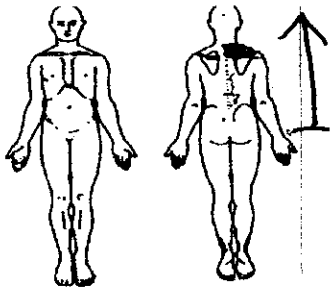
Last Name: ATKINSON First Name: AMY Date 4/11/21

Area Being Treated Cx

Current Presentation LOOTRADIOPS:

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

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



(R) Shoulder (U/T?)
Active + MTRP Supp?
U/T?

Client consent for treatment

Please sign Date

OBJECTIVE EXAMINATION:

Observation:

Palpatory **Assessment:**
Tight U/T, Lev Scap, ESG

Treatment:
MFTT: ESG, Lev Scap.
DiP MTRP U/T, Lev Scap, Rhom (B Lat)

Reassessment & Postural **Improvements:**
Cx Rotn L 60° S. @ U/T
R 60° S. @ U/T.

Motion tests (Active, Passive, Resisted, Special Tests):
Hawkins Kennedy - Ve
empty can - Ve
Shldr ABD R 180 PB
EXT R 50 PB
Hor ABD R 90° PB.
Scap offload +'Ve Bilat
Cx Rotn L 40° S@UT R 45° S@UT

Advice & Corrective Exercises:
Cx Lat Stretch 3sets
Mm
Daily

Next Treatment/Management Plan: Book