

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: Ladde First Name: Genevieve

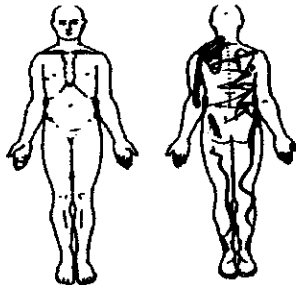
Date 21/2/23

Area Being Treated Post chmn Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y ☒ N

If yes _____

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



Sore ④ Lx & Shlder
 LBP → ② & ③ Chute Med
 Max ②
 8.5

Client consent for treatment

Please sign

Date

OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests): Lx Flex 1/2 Quad S. @ QL Lx Lat Flex R 10cm ↑ knee S. @ QL L " " " " P. @ QL
Palpatory Assessment: ④ QL Wypubonic	
Treatment: MFR 11/12 costals, longissimus semispinalis, QL, Chute Med Chute Max, H/S, gastroc DIF MT, P Lev scap, QL, Chute Chute Med	Advice & Corrective Exercises: QL Shetka → Held for 20 Sec
Reassessment & Postural Improvements: Lx Flex 5cm ↑ knee S. @ QL	

Next Treatment/Management Plan: As needed