



Personal Information				
Full Name Robert Vizzard		Occup	ation Min offe	àes
Postal Address	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		a	
3 Lynd Street	ARM &	idan.		
Home Phone	Work Phone		Mobile	
40863034	4081533	<i>S</i>	040230	3563.
Email Address	1)	
Lapidu-nis@vogu	1901. con			
Please circle: what is the fastest /	best way to get a re	sponse from you	(e.g. when confi	rming a massage)
Text Message Home Tele	phone Work Te	lephone Ema	ail Faceb	ook Message
Emergency Contact Name:	Emergency Contac		Relationship to y	ou (e.g. Partner).
Brenda Sqvire	0438 768	3 161	Sister	
Is it ok to email you massage tax invoices? Please circle if you use any of the following:				
Please circle: Yes (please email)	/ No (please print)	Facebook / Twitt	er / Instagram / F	Pinterest / Linked In
Anything new about your health / I	medical history? (A	llergies / injuries	accidents / surg	gery / medications)
		-		
\bigcirc	1			
Client Signature			Date ()	4/18
	Office - Please	e tick after updated	d information is e	lectronically entered

ocus on movement Ren	nedial Massage Clie	nt Recor
Full Name Rober Vizzard	nedial Massage Clies 3 Lynd Street Mt Shuridan Old 4868 Date of Birth	charged a
(a) Ivaline	Date of Birth	n 1014/63
Postal Address Ot Wingh Cos		
Iome Phone 40544045 Work	40410591 Mobile 94053	526C
Email Address 100yn-1/20 hot	Health Fund	MBF
Emergency Contact Details - Name and Number	- · · · · · · · · · · · · · · · · · · ·	
Current Doctor De Tory Turner	Referred By	
Occupation and how long		
Physical Activities/Hobbies/Exercise	s Raden.	
Past Medical History (operations/illnesses/accide		al Aei
(operations/ limesses/ accide	ents/injuries)	od stor
Medications - Prescribed or Natural:		
rescribed of Natural:	1 -	
Please circle areas of soreness or pain on the body chart below:	Some conditions require your massage treats Please tick all conditions below that apply to Write the letter P next to any past conditions	you NOW.
	Allergies / Asthma	•
	 Any Contagious Disease / Skin Problem 	1
	□ Arthritis	Arters,
([-[]-])	 Blood Pressure / Heart Problems 	ASVIT
	 Bruising 	C 7 %
	Chronic Pain	
// Y // //	□ Cold / Flu	
and how and how	□ Diabetes	
	 Dizziness 	5 C4
(36)	 Fractured bones 	an action
(\)/	Headache	294
)3£(Numbness / Tingling 	5 36 6
كالما لماك	 Pregnant or Breastfeeding 	
Amount of Pain (1-10):	Recent Illness / Surgery	
Type (sharp, dull, aching etc)	 Spinal / Back Problems 	
When is the pain worst?	 Sprained/strained muscles 	
What relieves the pain?	 Varicose Veins 	
triac refleves the pain?	Details regarding above selections:	
ssage may include several areas of the had. Dis	22/4	
ssage may include several areas of the body. Ple	omach Back Buttocks Arms Legs Feet	from the list belo
	Annis Legs Feet	7.
Please circle what type of massage pre	essure you prefer: Gentle Firm Hard V	ery Hard
	essure you prefer: Gentle Firm Hard \	ery Hard
Please circle what type of massage pre		ery Hard
Please circle what type of massage pre	UTHORISATION	/ery Hard
Please circle what type of massage pre CLIENT A understand that The information provided above is used to help defined to the provided above.		***

Signature:



Informed Consent for Massage

It may be necessary to discuss your condition and/or treatment with your doctor, physiotherapist or referring health care practitioner - you will be informed if this occurs. Do you agree to such discussion for the purpose of improving your well being?

Yes

No

Every massage treatment has some potential risks; such as causing pain, bruising, infection, burns (from heat therapy), feeling sleepy, fainting, aggravating pre-existing conditions, or creating an aromatic response (irritating/photo-sensitising skin, blood thinning or euphoria or interacting with medications and homeopathic remedies)

To minimise possible risk, you must:

Be honest about the information you provide regarding your health. (especially if you have heart/kidney/immune/health problems or are pregnant/breastfeeding)

Tell your therapist if you have sensitive skin, bruise easily, have any known health problems if the temperature becomes unbearable (too hot or cold), if the massage pressure level is too intense or if you become uncomfortable at any stage in the treatment.

Ster treatment, it is common to feel relaxed or sleepy – please get up very slowly from the treatment table and give yourself time to adjust before driving or using stairs.

Keep well hydrated with water especially in the 24-48 hours after treatment.

Please tick the boxes below to confirm you have read and agree with each statement:

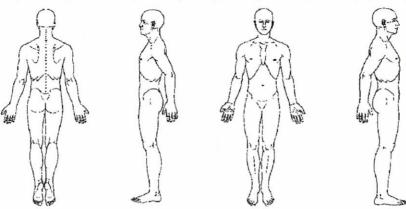
- ☑ I understand there are possible significant risks, complications and side-effects to any treatment I receive.
- I have the right to ask for further information or to refuse treatment of breast, buttock or groin areas.
- $\ensuremath{\,\boxtimes\,}$ I know that the therapist and I both have the right to refuse or stop any treatment at any time.
- I agree to read and retain the information brochure I will be given to take home at the end of my first session

Your Name:	myn 1	Irrard	Signature:	Date:	2
	11				

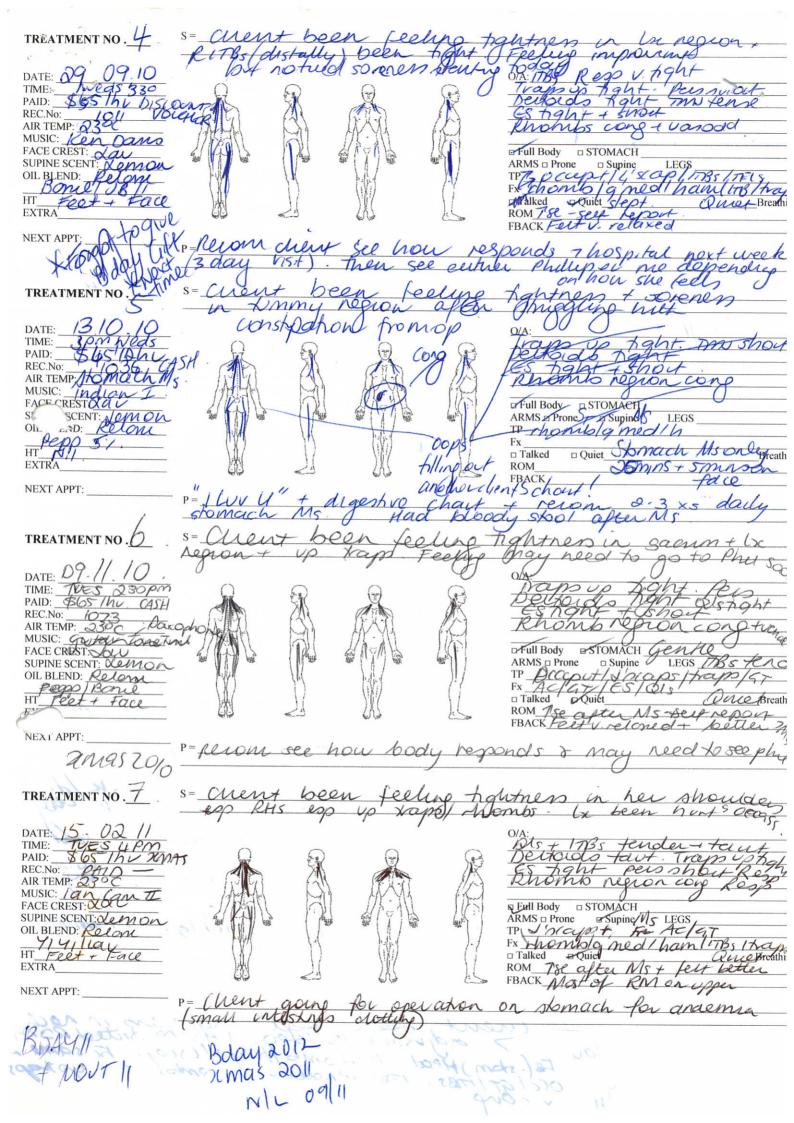
TOTAPS = TALK (history/area/symptoms) OBSERVE (signs) TOUCH (Palpate) ACTIVE Movement (Client's ROM) PASSIVE Movement SKILLS Test (client to-ordination)

Head (chin/ears) Trunk (spine) Shoulder (height/pro-retract) Arms (elbows/forearms/wrist/fingers) Hips (tilt) Knees (level) Ankles (toes/in-evert).

Movement Check: Flexion/Extension/Lateral Flexion/Rotation (internal/external)/Abduction/Adduction/Pronation/Pron



OBSERVATION/PALPATION/ASSESSMENT Major areas of asymmetry/pain/tension/tone, quality/quantity ROM, gait analysis, special tests performed: Phil Nolan Sees TREATMENT NO DATE: ____ REC.No: AIR TEMP DATE: TIME: PAID: REC.No: NEXT APPT: DATE: _🛇 TIME: PAID: REC.No: AIR TEMP **EXTRA** NEXT APPT: how Ms can help bod



TREATMENT NO. pinchup -Ment's Rhip Feet - spile (Se shi should R 19.04.11 Peestiglet Phones con Emadipin AIR TEMP: 2 MUSIC: 1900 Full Body STOMACH TO ASS

ARMS Pront Support LEGS

TP homolog ned han 178

Talked Device Support FACE CREST: Jaw SUPINE SCENT: Jem OIL BLEND: Relay Tea Tree / ger reed + Face 7st after EXTRA FBACK FOLT NEXT APPT: DIXUSSED NO is prohing pain I mount RHS WITH & RH Knee Just Had iron Injection TREATMENT NO DATE: 22 11.11. Thes 350 Holate \$70 hv Holate rophi REC.No: region comp Full Body TSTOMACH

ARMS Prone Supine S LEGS

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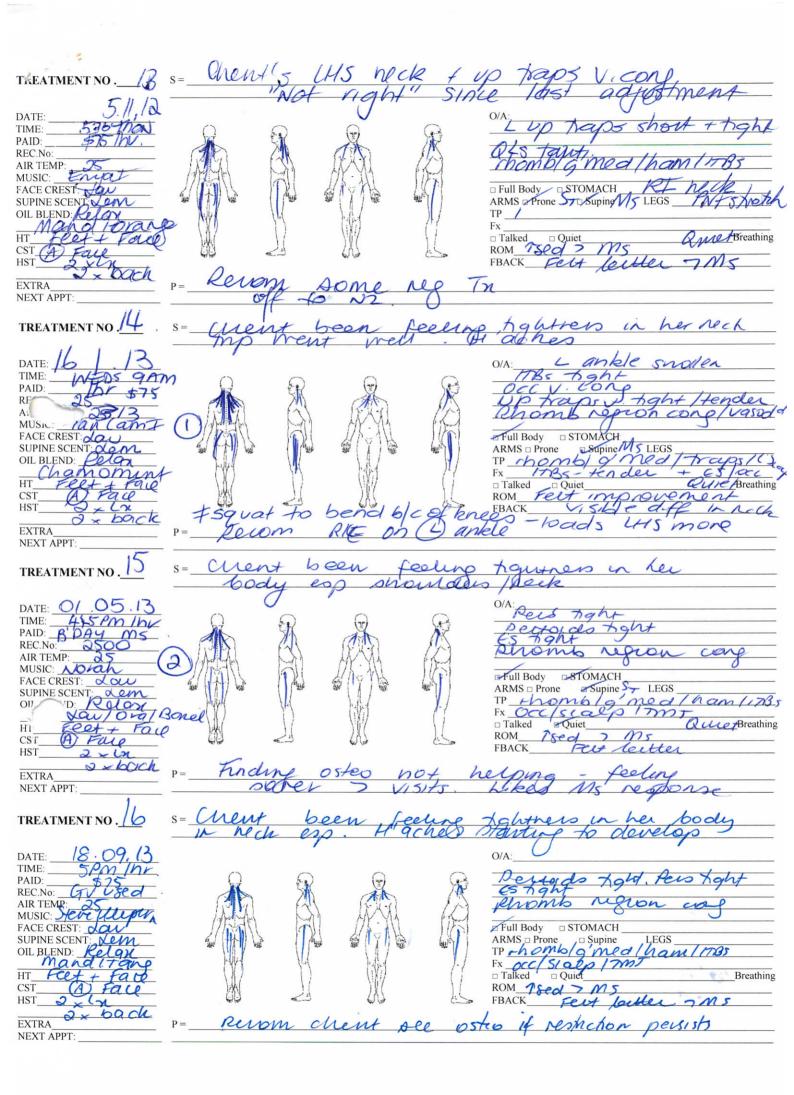
Talked Quiet Out Breat

ROM FEE JM; - SUP PEPPE AIR TEMP: OSC MUSIC: Acher Oldies FACE CREST: Our SUPINE SCENT: Jem OIL BLEND: FELON HT FELON TO A CONTROL OF THE PARTY OF AIR TEMP: no /yechon Face Msble brus tochach FBACK_/ another Tu before seeling tightness TREATMENT NO . S= Clent been en morping & dVB DATE: 11. 0512 TIME: TAT 1050
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REC.No: 18 CT
AIR TEMP: 35
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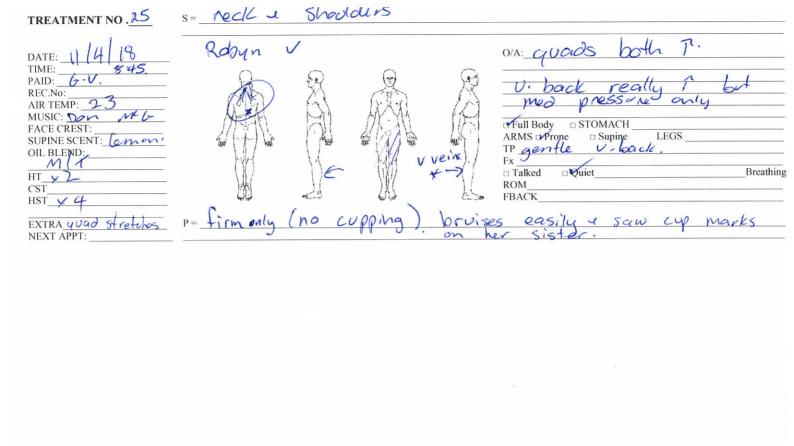
Talked Quiet Quiet ROM Per Breathi

FBACK FACE CREST: Lau dream SUPINE SCENT: Vem OIL BLEND: Relax1-1 Manditage Feet + FRBE P= Ceron peopl more by Ms - v. con NEXT APPT: weak dis poss for non s= Men been TREATMENT NO ._____ + neck DATE: OLI OIL.
TIME: 515 77 77
PAID: 515 77 O/A: tender. 185 tals raps us tight my tensor work region conf + to 1950 25 Storethey REC.No: AIR TEMP: MUSIC: Moral Full Body STOMACH
ARMS Prone Stoppine LEGS FACE CREST: Vau SUPINE SCENT: NON OIL BLEND: Policy TP months medihantrups Fx Mand Hang □ Talked □ Quiet_ Breathi Feet + MH ROM FBACK NEXT APPT: 04.0912 12 EMB Heat to homb traps/iscap to same, went \$75 the trues EnyaI Repp/dau 2xtn +2xbach > MS 64 needed 4 IMT-FEET + A/H lerbon see of pain persists



TREATMENT NO .	s= Mer	H been	feeling	Lightness	in hes	
DATE: 13.05.14. TIME: 94777ES PAID: 8.5 Inv. REC.NO: A PAIDS AIR TEMP: 05 MUSIC: 1 A.M I FACE CREST: 00.0 SUPINE SCENT: 0.0 SUPINE SCENT: 0.0 OIL BLEND: PCLGM HT.(A) FACE CST HST	Sheis P= Feelis	Discussed with	of 14h	Full Body S ARMS Prone S TP Ohn S TAlked Qu ROM Ased	ent improvement ment so rec	Breathing ## / March
TREATMENT NO/S		Wingy.	Inner Go	htness on	her shouldes /	nech
DATE: 1.10.14. TIME: 5.5 THUES PAID: \$50 WENS REC.NO: Refer notes AIR TEMP: 25 MUSIC: /an (am 1 FACE CREST: AU SUPINE SCENT: LUM OIL BLEND: Relan Mand I tang HT Feet Face CST (A) Face HST 2 Lm Deach	Redundo	ant offen	a weens	O/A: DCAROLDS ES TIGHT Full Body ARMS Prone TP Flow Fx OCC 47 Talked Qu ROM 78ed 7	Aching dill re Swells - gentle tight - Mgron using TOMACH Desipine LEGS Naps GT	⊘ Breathing
EXTRANEXT APPT:	P= Pelom gradia	lient re			seible encoura	Sid
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DATE: 73 /0 /4 TIME: 74 PAID: 888 REC.NO: 18 few mole AIR TEMP: MUSIC: 19 face CREST: NOW	P = Recon	n chent	sketch out	□ Full Body □ S	STOMACH Supine T LEGS LAND STOMACH SUPINE T LEGS LAND STORY SUPER STORY SUPER STORY SUPER STORY SUPER STORY SUPER	t mg
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DATE: 0804.15. Spring in the state of the st	nd and	alwas		ARMS - Prone	iet Rus	off 2/Breathing
CSTK + 2 K	bach pe	com Julie	Hambya	FBACK	fest better 7h	<u>r</u>

s= Chent	been fe	chy tigo	htressin her	body n
P= 15 Cus			O/A: Pew shi Delto do Full Body STO ARMS Prone TP FUS / TO FX DCC/Tray Falked Quiet ROM 1500 > FBACK feet	MS cop hight out. Glotest Ols high tout. Trains of tight region long OMACHMS Stellap By TSupine LEGS BS (CS Ols DS (CT MBs DTS) MS
s= Chen	1 been	Reling ,	rightness in	her body in hips
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To: Robyn, Thanks so much for all your help and being part Lots of From: Lyn Brooks XXX (2) of the Cyclone Removal team once again!

Your Gift is: 45 minute Initial Massage Date of Passue: 26:11:09

PHONE: 0439 775 003 CLINIC: 51 Lyndel Drive Woree 4868 POST: PO Box 106 Westcourt 4870 EMAIL: relax@focusonmovement.com.au WEB: www.focusonmovement.com.au



Hi Robyn, For \$10 you can Opgrade massage special lyn's gift certificate to 60 min lemas massage special Bonus - Christmas Special

GIFT CERTIFICATE for 60 MINS MASSAGE

(includes Hot Towels + Aromatherapy) only \$55 (Normally \$75 for new client).

Valid for Jan-Feb use only. Must be purchased before 18th December 2009. Limit of one \$55 massage per person.



Look out for your handmade birthday card in 2010l



Clinic CLOSES ON 17th December and OPENS 6th January 2010

focus on provement A Gift of Massage

To: Robyn enjoy a relaxing hour with Christine

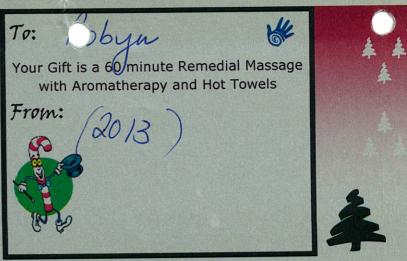
From: Love your Glosays (many thanks)

Your Gift is: One how massage

Valid for three months from the date of issue

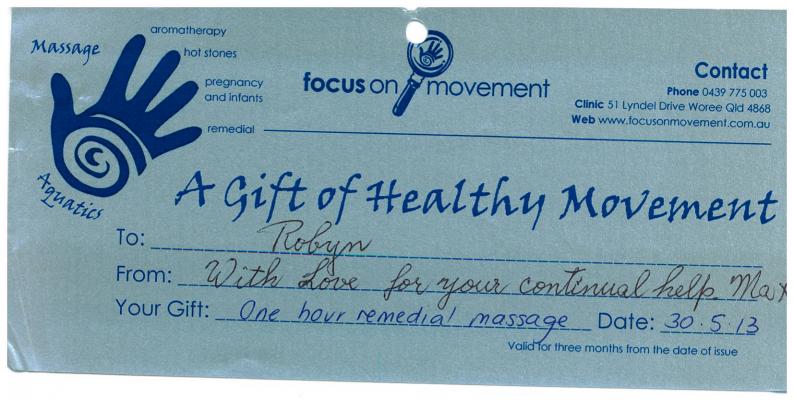
BOOK NOW - PHONE: 0439 775 003 CLINIC: 51 Lyndel Drive Woree 4868 POST: PO Box 106 Westcourt 4870 EMAIL: relax@focusonmovement.com.au WEB: www.focusonmovement.com.au







PHONE: 0439 775 003
CLINIC: 51 Lyndel Drive Woree 4868
WEB: www.focusonmovement.com.au







Contact

Phone 0439 775 003

Clinic 51 Lyndel Drive Woree Qld 4868

Web www.focusonmovement.com.au

A Gift of Healthy Movement

To: Robyn Vizzard

From:

Your Gift: One hour massage

Date: 11.10 16

Valid for three months from the date of issue

Robyn Vizzard

DOB 10 Apr 1963 **Occupation** Bookseller

Appointments

Date	Time	Туре	Practitioner
20 May 2025	4:00PM – 5:00PM	60 minute Massage	Christine Jervis
12 Mar 2025	5:00PM – 6:00PM	60 minute Massage	Christine Jervis
28 Dec 2024	1:30PM – 2:30PM	60 minute Massage	Christine Jervis
25 Sep 2024	9:00AM – 10:00AM	60 minute Massage	Christine Jervis
3 Jul 2024	2:30PM – 3:30PM	REBOOKING - 60 minute Massage	Christine Jervis
23 Mar 2024	1:30PM – 2:30PM	Sauna & Massage	Christine Jervis
25 Feb 2024	3:00PM – 4:00PM	REBOOKING - 60 minute Massage	Christine Jervis
5 Jan 2024	11:00AM – 12:00PM	HOLIDAY SPECIAL - February 2024 - Rebooking Clients	Christine Jervis
11 Sep 2023	4:00PM – 5:00PM	Gift Certificate - Book your Massage	Christine Jervis
24 Feb 2020	4:00PM – 5:00PM	60 minute Massage	Christine Jervis
25 Feb 2019	5:30PM – 6:30PM	60 minute Massage	Marina Franke
21 Dec 2018	2:30PM – 3:30PM	60 minute Massage	Marina Franke

Treatment Notes

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis
Appointment: 12 Mar 2025, 5:00PM
Created: 18 Mar 2025, 9:30PM
Last updated: 18 Mar 2025, 9:30PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical history or client info)

What's going on now - client been feeling sore in lumbar region plus shoulders and neck

identified that may affect the massage. Details of Medications / Red Flags / War Precautions needed etc (i.e. conditions listed above)- Assessment / Testing done (including New New New Yer New	Flags atch veins.
Precautions needed etc (i.e. conditions listed above)- Assessment / Testing done (including Ve ROM) / Observations	atch veins.
ROM) / Observations	
RC	erbal consent obtained.
An	DM - yes improved.
	nything noteworthy -
An	nything specific to massage (E.g. no foot massage) - watch veins
	ressure used - 2, gentle on legs with veins - flushing.
to help the client	ot Stones - 2 x Hips and 2 x Back/Shoulders
Ho	ot Wet Towels - Feet / Face
Ho	ot Pack / Lower Body
To	ppical Treatment - Fisiocrem
Mu	usic - Acker Bilk
Arı	omatherapy Massage oil - lavender and peppermint
What parts of the body were massaged? Full	Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone -
quick stretch/massage; Arms - Supine; Legs - Pron shoulders, neck, arms)	ne; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back,
Where any specific trigger points used? Rhol	mboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids; QLs; ITBs; TFLs; Glutes
Body Chart	
Feedback after treatment - Fe	elt lots of tender areas, esp ITBs and shoulders sore but enjoyed it
Plan for future results / treatment / Disprogress / homework (including discussion with client, advice, stretches)	scussed getting some more treatment.
Infra-Red Sauna (if applicable - info	o is below)
Time in Sauna (minutes) -	
Feedback after treatment -	

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis **Appointment:** 28 Dec 2024, 1:30PM **Created:** 28 Dec 2024, 2:56PM **Last updated:** 28 Dec 2024, 2:59PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical history or client info)

What's going on now - client been feeling sore in lumbar region plus shoulders and neck been sore and knee. R wrist hurts and L shoulder catching

Medication or relevant procedures / info identified that may affect the massage.

Red Flags

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)- Watch veins.

Assessment / Testing done (including ROM) / Observations

Verbal consent obtained.

ROM - yes improved.

Anything noteworthy -

Anything specific to massage (E.g. no foot massage) - watch veins

Treatment details - what was done today to help the client

Pressure used - 2, gentle on legs with veins - flushing.

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face
Hot Pack / Lower Body
Topical Treatment - Fisiocrem

Music - Acker Bilk

Aromatherapy Massage oil - lavender and peppermint

What parts of the body were massaged? Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone - quick stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back, shoulders, neck, arms)

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids; QLs; ITBs; TFLs; Glutes

Body Chart

Feedback after treatment -

Felt lots of tender areas, esp ITBs and shoulders sore but enjoyed it

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

Discussed New year - been a hard few months putting her mum in a home for dementia

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis

Appointment: 25 Sep 2024, 9:00AM Created: 25 Sep 2024, 10:01AM Last updated: 25 Sep 2024, 10:08AM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now - client been feeling sore in lumbar region plus shoulders and neck

been sore and knee

Medication or relevant procedures / info

identified that may affect the massage.

Red Flags

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions

listed above)-

Watch veins.

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - yes improved.

Anything noteworthy -

Anything specific to massage (E.g. no foot massage) - watch veins

Treatment details - what was done today

to help the client

Pressure used - 2, gentle on legs with veins - flushing.

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face Hot Pack / Lower Body Topical Treatment - Fisiocrem

Music - Mod Girls KdLang

Aromatherapy Massage oil - extreme sports h20 oil

Spritzer - pepper euc and tea tree

What parts of the body were massaged? Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone quick stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back, shoulders, neck, arms)

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids; QLs; ITBs; TFLs; Glutes

Body Chart

Feedback after treatment -

Felt lots of tender areas, esp ITBs and shoulders sore but enjoyed it

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

Discussed booking in regular treatment as she has a lot of stress with her mum now in the home and the grandkids living with her.

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis Appointment: 3 Jul 2024, 2:30PM Created: 3 Jul 2024, 3:33PM Last updated: 3 Jul 2024, 3:34PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now - client been feeling sore in lumbar region plus shoulders and neck

been sore and knee

Medication or relevant procedures / info identified that may affect the massage.

Red Flags

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions

listed above)-

Watch veins.

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - yes improved.

Anything noteworthy -

Anything specific to massage (E.g. no foot massage) - watch veins

Treatment details - what was done today

to help the client

Pressure used - 2, gentle on legs with veins - flushing.

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face Hot Pack / Lower Body

 ${\sf Topical\,Treatment-Fisiocrem}$

Music - Ian Cam Smith

Aromatherapy Massage oil - lavender oil

Spritzer - joyful

What parts of the body were massaged?

Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone -

quick stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back,

shoulders, neck, arms)

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids; QLs; ITBs; TFLs; Glutes

Body Chart

Feedback after treatment -

Felt lots of tender areas, esp ITBs and shoulders sore but enjoyed it

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches) Discussed getting some more regular massage to help, especially because so tight and

tender at the moment

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis Appointment: 23 Mar 2024, 1:30PM Created: 23 Mar 2024, 1:17PM Last updated: 23 Mar 2024, 4:14PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now - client been feeling sore in lumbar region (bit better than last time)

plus shoulders and neck been sore and knee

Medication or relevant procedures / info identified that may affect the massage.

Red Flags

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)- Watch veins.

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - yes improved.

Anything noteworthy -

Anything specific to massage (E.g. no foot massage) - watch veins

Treatment details - what was done today

to help the client

Pressure used - 2, gentle on legs with veins - flushing.

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face Hot Pack / Lower Body

Topical Treatment - Fisiocrem

Music - Yanni Piano

Aromatherapy Massage oil - lavender oil

Spritzer - joyful

What parts of the body were massaged?

Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone -

quick stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back,

shoulders, neck, arms)

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids; QLs; ITBs; TFLs; Glutes

Body Chart

Feedback after treatment -

Felt lots of tender areas, esp ITBs and shoulders sore but enjoyed it

Plan for future results / treatment /

Discussed getting some more regular massage to help

progress / homework (including discussion with client, advice, stretches)

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) - 20

Feedback after treatment - Lots of sweat, felt good afterwards.

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis **Appointment:** 25 Feb 2024, 3:00PM **Created:** 25 Feb 2024, 4:16PM **Last updated:** 6 May 2024, 10:00PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

 $What's\ going\ on\ now\ -\ client\ been\ feeling\ sore\ in\ lumbar\ region\ especially,\ but\ shoulders$

hurt and knees, neck - everything even feet.

Medication or relevant procedures / info

identified that may affect the massage.

Red Flags

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions

listed above)-

Watch veins.

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained. ROM - yes improved. Anything noteworthy -

Anything specific to massage (E.g. no foot massage) -

Treatment details - what was done today

to help the client

Pressure used - 2, gentle on legs with veins - flushing.

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face Hot Pack / Lower Body

Topical Treatment - Fisiocrem

Music - Yanni if there

Aromatherapy Massage oil - relax h20 oil

Spritzer - joy

What parts of the body were massaged? Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone - quick stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back, shoulders, neck, arms)

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids; QLs; ITBs; TFLs; Glutes

Body Chart

Feedback after treatment -

Felt lots of tender areas, esp ITBs and glutes sore.

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches) Discussed Sauna next time. She'd like monthly massage if she can.

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis
Appointment: 5 Jan 2024, 11:00AM
Created: 6 Jan 2024, 5:23AM
Last updated: 6 Jan 2024, 5:25AM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now - client been feeling sore in lumbar region especially, but shoulders

hurt too.

Medication or relevant procedures / info

identified that may affect the massage.

Red Flags

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions

listed above)-

Watch veins.

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained. ROM - yes improved. Anything noteworthy -

Anything specific to massage (E.g. no foot massage) -

Treatment details - what was done today

to help the client

Pressure used - 2, gentle on legs with veins - flushing.

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face Hot Pack / Lower Body

Topical Treatment - Fisiocrem

Music - Yanni if there

Aromatherapy Massage oil - relax h20 oil

Spritzer - joy

What parts of the body were massaged? Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone - quick stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back, shoulders, neck, arms)

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids; QLs; ITBs; TFLs; Glutes

Body Chart

Feedback after treatment -

Felt lots of tender areas, esp ITBs and glutes sore.

Plan for future results / treatment / progress / homework (including

Discussed Sauna next time. She'd like monthly massage.

discussion with client, advice, stretches)

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis **Appointment:** 11 Sep 2023, 4:00PM **Created:** 11 Sep 2023, 5:08PM **Last updated:** 11 Sep 2023, 5:12PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now - client been feeling sore in shoulders and back.

Medication or relevant procedures / info

identified that may affect the massage.

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions

listed above)-

Watch veins.

Red Flags

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained. ROM - yes improved.

Anything noteworthy -

Anything specific to massage (E.g. no foot massage) -

Treatment details - what was done today

to help the client

Pressure used - 2-3

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face

Hot Pack / Lower Body

Topical Treatment - Fisiocrem

Music - mixed modern girls

Aromatherapy Massage oil - relax h20 oil

Spritzer - joy

What parts of the body were massaged? Full Body Treatment; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone - quick stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses; Upper body treatment (hips, back,

shoulders, neck, arms)

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids

Body Chart

Feedback after treatment -

Felt lots of tender areas. Loved lower back massage with hot stones.

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

Discussed doing more to help with her body balance

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis **Appointment:** 24 Feb 2020, 4:00PM **Created:** 24 Feb 2020, 5:06PM **Last updated:** 24 Feb 2020, 5:11PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now - client been feeling very sharp pain in RHS shoulder.

Medication or relevant procedures / info

identified that may affect the massage.

Red Flags

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions

listed above)-

Watch veins.

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained. ROM - yes improved. Anything noteworthy -

Anything specific to massage (E.g. no foot massage) -

Treatment details - what was done today

to help the client

Pressure used -

Hot Stones - 2 x Hips and 2 x Back/Shoulders Hot Wet Towels - Feet / Face / Arms & Hands / Back

Hot Pack - Upper Body / Lower Body Topical Treatment - Fisiocrem / Zen / Balm

Music - Yanni if there

Aromatherapy Massage oil - Pepp/Rosem/Euc

Spritzer - Frank.

What parts of the body were massaged?

Full Body Treatment; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone - quick

stretch/massage; Arms - Supine; Legs - Prone; Upper body treatment (hips, back, shoulders, neck, arms)

Where any specific trigger points used? Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids

Body Chart

Feedback after treatment -

Felt lots of tender areas.

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches) Discussed doing more to help with her body balance and mentioned about rebooking

specials.

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Marina Franke **Appointment:** 25 Feb 2019, 5:30PM **Created:** 25 Feb 2019, 5:23PM **Last updated:** 25 Feb 2019, 6:37PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now -usually neck and shoulders, L B occasionally- mid lift

Feedback from previous treatment -

Details of Medications / Red Flags etc (i.e.

conditions listed above)-

Medication or relevant procedures / info identified that may affect the massage.

Details of Medications / Red Flags etc (i.e. conditions listed above)-

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM -

Anything noteworthy -Any precautions / Red Flags -

Anything specific to massage - E.g. no foot massage

Treatment details - what was done today

to help the client

Pressure used -gentle/firm

Hot Stones -4 Hot Wet Towels -2 Cupping area -

Topical Treatment - fisio crem L calf- cramp at night

Music -instrumental Aromatherapy -tangerine What parts of the body were massaged?

Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses

Where any specific trigger points used?

Body Chart

Feedback after treatment - bruises on outer glutes-bruises easily, quads tight.
:)

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

Infra-Red Sauna

Time in Sauna (minutes) -

Standard Consultation - Remedial Massage

Practitioner: Marina Franke **Appointment:** 21 Dec 2018, 2:30PM **Created:** 21 Dec 2018, 2:25PM **Last updated:** 21 Dec 2018, 4:49PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical history or client info)

What's going on now -LB from mowing, usually neck and shoulders

Feedback from previous treatment -

Details of Medications / Red Flags etc (i.e.

conditions listed above)-

Medication or relevant procedures / info identified that may affect the massage.

Details of Medications / Red Flags etc (i.e. conditions listed above)-

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM -

Anything noteworthy -Any precautions / Red Flags -

Anything specific to massage - E.g. no foot massage

Treatment details - what was done today

to help the client

Pressure used -gentle/firm

Hot Stones -4
Hot Wet Towels -2
Cupping area Topical Treatment Music -instrumental

	Aromatherapy -tangerine
What parts of the body were massaged? Legs - Prone; Legs - Supine; Feet; Head / scal	Full Body Treatment; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone; Arms - Supine; p; Face / sinuses
Where any specific trigger points used?	
Body Chart	
Feedback after treatment -	bruises on outer glutes-bruises easily, quads tight. :)
Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)	
Infra-Red Sauna	
Time in Sauna (minutes) -	
Feedback after treatment -	

Patient Forms

There are no patient forms for Robyn Vizzard.