

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: McShanag First Name: Lynn

Date 13/3/23

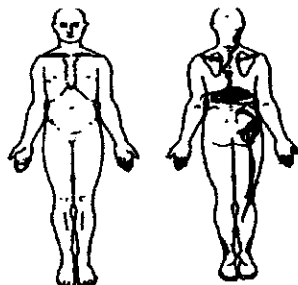
Area Being Treated _____

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y ☒

If yes _____

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



codeine this am
 ① LBP - Reaching
Glute Med?
Piriformis → H/S.
strong dull ache ↓
R leg.
 ② R CX

Client consent for treatment

Please sign _____

Date _____

OBJECTIVE EXAMINATION:

Observation: <u>Cx Tilt ① (slight)</u>	Motion tests (Active, Passive, Resisted, Special Tests): <u>Lx Flex knee S, @ Glute Med.</u> <u>Cx Rotn ① 70° S, @ U/T</u> <u>R 65° S, @ Post Sac Scap</u> <u>SLR R 60° S, @ Glute Med</u> <u>L 70° PB.</u>
Palpatory Assessment: <u>tender T1-7</u>	Advice & Corrective Exercises: <u>Supine Glute Stretch</u> <u>Piriformis - add QL</u>
Treatment: <u>MFTT: ESG, U/T, Lx Scap,</u> <u>Post Scap, QL, Glute Med</u> <u>Glute Max, H/S.</u> <u>DIP MTRP - Lx Scap, Piriformis</u> <u>Cx Joint mob. Glute</u> <u>Reassessment & Postural Improvements:</u> <u>Cx Rotn L 80° PB</u> <u>R 80° PB.</u> <u>Lx Flex 2em & knee S, @</u> <u>H/S</u>	

Next Treatment/Management Plan: W/Ln needed