

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: McLEOD First Name: NEIL

Date 26/8/23

Area Being Treated HIPS/Glutes Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y N

If yes _____

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

~~Minimised~~ Didn't last long.

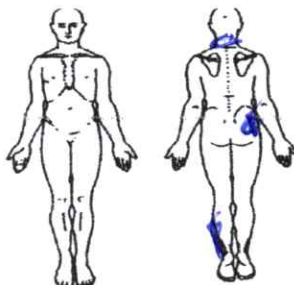
Client consent for treatment

Please sign



Date

26-8-23



@Glute

→ Glute Med

→ Glute Max

No referral pain

@Calf - tight outside

neck tight

OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests):
Palpatory Assessment:	
Treatment: <u>MFTT @ iliocostalis, Glute Med</u> <u>Glute Max, Peroneus longus & brevis</u> <u>DIP MTP Glute Med, PDS Piriformis</u> <u>ex Joint Mob.</u>	Advice & Corrective Exercises: <u>Hydrotherapy exercises.</u> <u>Crabwalk - Dipping as low as possible</u> <u>Lunges - Dipping as low as possible</u>
Reassessment & Postural Improvements:	

Next Treatment/Management Plan:

2 weeks checked