Tarrengower Remedial Massage

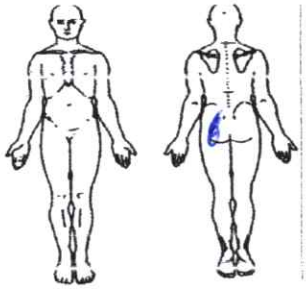
CLIENT RECORD: Follow-up Consultation

Last Name: Shepherd First Name: Alan Date 15/5/23

Area Being Treated Cx, Head, Shoulder Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y N
If yes

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



L Glute → down leg
R " " "
② Vertigo → MLD → Cx
③ ⓡ Shoulder

Client consent for treatment

Please sign Date

OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests):
Palpatory **Assessment:**	
Treatment: MFR iliocostalis, longissimus, Semispinalis, Lat Dorsi, U/T, Lev Scap; Splenius cerv. Cx Joint Mobs Suboccipitals MLD Head & Neck.	P&S Piriformis
Reassessment & Postural **Improvements:**	Advice & Corrective Exercises: Piriformis stretch Glute stretch

Next Treatment/Management Plan: call when needed