

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: SHEPHERD First Name: ALAN

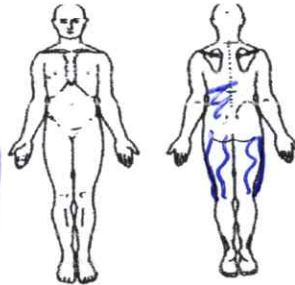
Date 18/7/23

Area Being Treated LBP/HPS/ITB Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y ☒ N

If yes _____

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



"Sciatica" - not Diagnosed
QL
ITB

Client consent for treatment

Please sign

Date

OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests):
Palpatory Assessment:	
Treatment: <u>MFTT: ilio costalis, Glute Meds</u> <u>Glute Max, TFL</u> <u>Cupping ITB</u> <u>→ Internal & external glutes</u>	Advice & Corrective Exercises: <u>Glute Bridge</u> <u>Piriformis</u> <u>TFL</u> <u>Glute Stretch supine</u> } <u>2x Daily.</u>
Reassessment & Postural Improvements:	

Next Treatment/Management Plan: 2nd Stretches