

tarrengowerrm@gmail.com

From: Squarespace <form-submission@squarespace.info>
Sent: Tuesday, 12 April 2022 6:47 PM
To: tarrengowerrm@gmail.com
Subject: Form Submission - Client History Form

Sent via form submission from [Tarrengower Remedial Massage](#)

Name: Alan Shepherd

Identify as: Male

Email: ash87797@bigpond.net.au

Phone: 0419358110

Date of Birth: 2/2/1957

Occupation: Storeman

Sports / activities: Activity football, fire brigade, gardening

Health fund: None

Private health extras cover?: No

Emergency Contact Name: Pam Shepherd

Emergency contact phone: 0409932318

Do you have any limitations for treatment?: No

What are your expectations for treatment?: Ease the problem

Is there a possibility that you are pregnant?: I am male

Varicose Veins: No

Sunburn: No

Recent surgery / scar tissue: No

Major operations / accidents: No

Inflamed / painful areas: Yes Headache / suboccipital

High / low blood pressure: Yes ↑

Circulatory disorders: Yes chemo / radiation → no feeling lower extremities

Supplements: Yes Vitamin.

Neck / spine injury: Yes

Lumbar L4? Disk

Arthritis: No

Skin Diseases: No

Allergies: No

Diabetes: Yes

T2? no injections

DVT / blood clots: No

Fractures / dislocations: No

Raised temperature: No

Headaches / migraines: Yes

✓ neck

Strains / sprains: Yes

✓

Cancer: Yes

leukaemia 12 years remission

Infectious conditions: No

Medications: Yes

gingles, Blood Pressure, antibiotics

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↓
Scars
infections