Tarrengower Remedial Massage

From:

Squarespace <form-submission@squarespace.info>

Sent:

Monday, 26 September 2022 4:14 PM

To:

tarrengowerrm@gmail.com

Subject:

Form Submission - Client History Form

Sent via form submission from Tarrengower Remedial Massage

Name: Mark Shepherd

Identify as: Male

Email: markshep197938@gmail.com

Phone: 0417114948

Date of Birth: 5/21/1979

Occupation: Customer Service

Sports / activities: Walking

Health fund: Nil

Private health extras cover?: No

Emergency Contact Name: Lynda Shepherd

Emergency contact phone: 0459166797

Do you have any limitations for treatment?: No

What are your expectations for treatment?: Loosen muscles and help with headaches

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

Hermated disc L3?4?5? CX/Uppertx

High / low blood pressure: Yes

Circulatory disorders: No

Supplements: No

Neck / spine injury: No

Arthritis: No

Skin Diseases: No

Allergies: No

Diabetes: No

DVT / blood clots: No

Fractures / dislocations: No

Raised temperature: No

Headaches / migraines: Yes

Strains / sprains: No

Cancer: No

Infectious conditions: No

Medications: Yes

Blood Pressure

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