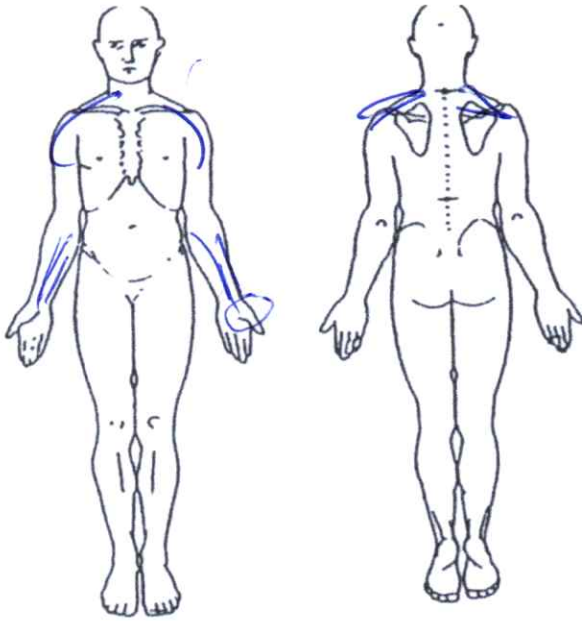


Date 13 / 9 / 23

Initial Consultation Form

Name: Jacqui Butler

Indicate site or pain and referral area

Site of restriction

Location of pain/restriction/other:

Pins & needles in arms  
at night  
forearms

Also neural pathways

Onset - Initial (when/how it first began): 5/12Now (current presentation): goodOther Symptoms: noneType of Pain: tinglingReferral Pain: armsWhat aggravates the pain? laying downDegree of Pain (0-10): \_\_\_\_\_ Irritability Level: Low \_\_\_\_\_ Med \_\_\_\_\_ HighWhat Offsets / Alleviates the Pain? heat - mobility, paracetamolPast Treatments & Results: ~~Massage~~ noneSpecial Questions (may also be specific to region): worse @ night**OBJECTIVE EXAMINATION** - Body Type: Hypomobile 0-1 ( ) Average 2-4 ( ) Hypermobility 5-9 ( )**Observation**

Posterior view <u>Scap LA</u>	Anterior view <u>Shoulders ✓</u> <u>clock LA</u>	Lateral view <u>FHC = 0.5</u>
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# Motion Tests

<p>Active (P1, S1, PB)</p> <p>Wrist Flex L 80 PB R 80 PB</p> <p>Ext L 75 PB R 75 PB</p>	<p>Passive (P1, S1, R1)</p>
<p>Resisted</p>	<p>Functional/Special Tests</p>

Palpatory Assessment:

Clinical Impression: \_\_\_\_\_

<p>Treatment</p> <p>MFT: <del>FCR</del> FCR, <del>ECU</del> ECU, Palmaris longus, Pronator Teres ECR, ECR, ECU</p>	<p>Reassessment</p> <p>Wrist Flex L 85 PB R 85 PB</p> <p>Wrist Ext L 85 PB R 85 PB</p>
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## Corrective Exercises

Exercise	Sets	Reps	Other Advice
Fore arm Stretches			2x2 Daily
Cx Stretches			2x2 Daily

Postural Improvements: \_\_\_\_\_

Treatment Goals / Management Plan: \_\_\_\_\_