Tarrengower Remedial Massage

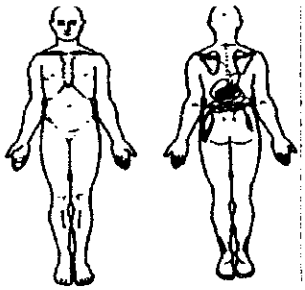
CLIENT RECORD: Follow-up Consultation

Last Name: McComb First Name: Anne-Maree Date 22/9/23

Area Being Treated _____ Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y (N)
If yes _____

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



Wednesday - bent forwards
- hurt lower back
→ TLF, Glute Med
Si's.
Hurt to sit

Client consent for treatment

Please sign [signature] Date 22/9/23

OBJECTIVE EXAMINATION:

Observation:

Palpatory **Assessment:**

Treatment:
MFTT Iliocostalis, QL, Longissimus
Lat Dorsi, G Med, G Max
DIP MTP G Med.

Reassessment & Postural **Improvements:**
Lx Flex Toes ~~50%~~ PB
SLR L 90° PB
R 10° Si @ H/S

Motion tests (Active, Passive, Resisted, Special Tests):
PSIS - level ✓
SLR L 60 Si @ ~~TLF~~ H/S
R 60 Si @ TLF

HIP Flex L 125° R1 (Spring)
R 125° R1 (Spring)
Lx Flex Feet - Si @ Gastroc
Lx Lat Flex L Knee PB
R ilium PB

Advice & Corrective Exercises:
Piriformis Stretch 2x2 20sec
Glute Stretch (supine) 2x2 20sec

Next Treatment/Management Plan: as needed