

# Tarregower Remedial Massage

## CLIENT RECORD: Follow-up Consultation

Last Name: PETRUS MIA First Name: DONNA

Date 25/7/22

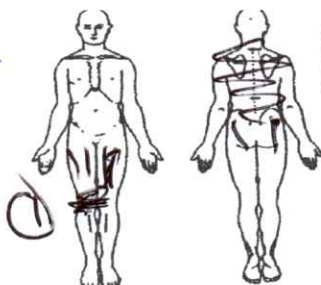
Area Being Treated (R) Knee

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? (R)

If yes Inflammation of (R) Knee due to bike strength training.

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



(R) Knee

Has been doing seated big gear bike strength training

### Client consent for treatment

Please sign

Donna

Date 25/7/22

### OBJECTIVE EXAMINATION:

Observation: <u>(R) knee swollen</u> <u>Patella Tracking?</u>	Motion tests (Active, Passive, Resisted, Special Tests): <u>PKB L 6 Fingers (R. Spring)</u> <u>R 6+ Fingers (~100°) (R. Spring)</u> <u>THOMAS TEST L -ve</u> <u>R -ve</u>
Palpatory Assessment: <u>Vas. lat, &amp;</u> <u>Hypertonic</u>	
Treatment: <u>MFTT Vas lat, Vastus</u>	Advice & Corrective Exercises: <u>Tape knee (estee)</u> <u>ICE</u> <u>1</u>
Reassessment & Postural Improvements: <u>PKB L 5 Fingers</u> <u>R ~110° (R. Spring)</u>	

Next Treatment/Management Plan: as needed for massage,  
see estee for patella taping if required

# PATIENT SCREENING QUESTIONNAIRE FOR COVID-19

Please Circle Yes or No

1. Do you have a fever or Respiratory Symptoms? Yes ☒ No ☐

Symptoms include fever OR an acute respiratory infection and include (but are not limited to) cough, sore throat, fatigue and shortness of breath with or without a fever.

2. Have you been identified as a close contact of a confirmed case of coronavirus? Yes ☒ No ☐

You are a close contact if you: live in the same house as someone who tests positive. spent 4 hours or longer with someone in a home, or health or aged care environment.

3. Are you waiting on COVID-19 swab results? Yes ☒ No ☐

4. Have you been asked to self-isolate by your GP, or a government authority? Yes ☒ No ☐

5. Have you received a COVID-19 vaccination in the past 3 days? Yes ☒ No ☐

I, the undersigned hereby declare that the information I have provided in this questionnaire is true and accurate

Name

Donna Petrusma

Your signature

Donna Petrusma

Date

25, 7, 22