

Tarregower Remedial Massage

CLIENT RECORD: Follow-up Consultation

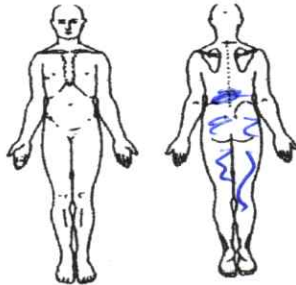
Last Name: WITHERS First Name: LAUREYNE Date 21/1/23

Area Being Treated HIPS

Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? YN
If yes _____

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



LBP
@ HIP
2 weeks post-covid.

Client consent for treatment

Please sign

[Signature]

Date

21/1/23

OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests): <u>Lx Flex 1cm @ Knee Si @ Glute Max</u>
Palpatory Assessment: <u>Glute Med Hypertonic Block</u>	
Treatment: <u>MIST 110 costalis, longissimus,</u> <u>Glute Med, Glute Max, Hs</u> <u>Gastroc,</u> <u>DIP MIP QL, Glute Med, Glute Max</u> <u>psoas</u>	Advice & Corrective Exercises: <u>Added lower back / Glute</u> <u>Stretch</u>
Reassessment & Postural Improvements: <u>Lx Flex 1.5cm @ Knee Si @</u> <u>Glute Med.</u>	

Next Treatment/Management Plan: @ Calf → OIL! Venous Ulcer.
3 weeks (booked)
* Less Pressure ?? → Very Sore post Treatment
@ Glute Med