

Tarrengower Remedial Massage

CLIENT RECORD: Follow-up Consultation

Last Name: WITHERS First Name: LAUREYNE

Date 18/9/23

Area Being Treated HIPS

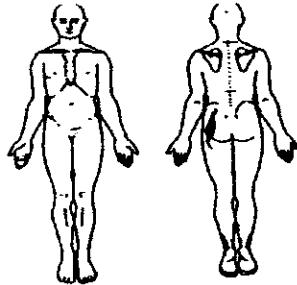
Current Presentation LOOTRADIOPS:

Has your Clinical Impression changed? Y ☒ N

If yes _____

Response to previous treatment (+ve, -ve, SQ): five

not as sore



@ Glute Med

Client consent for treatment

Please sign Laurey

Date 18/9/23

OBJECTIVE EXAMINATION:

Observation:	Motion tests (Active, Passive, Resisted, Special Tests): <u>Trendelenberg L -ive</u> <u>R +ive</u> <u>Lx Lat Flex & Knee PB @ TLF/QL2</u> <u>R Knee PB</u> <u>Lx Flex MID Shin S. @ Gastroc</u> <u>HIP Flex L 95° r. (Spring)</u> <u>R 100° r. (Spring)</u>
Palpatory Assessment: <u>@ TFL Hypertonic</u>	
Treatment: <u>MFR - TFL, ilio costalis, longiss,</u> <u>QL, Glute Med, Glute Max</u> <u>DIP MFR - TFL, Glute Med</u> <u>Piriformis stretch</u>	Advice & Corrective Exercises: <u>Piriformis stretch - seated</u> <u>Glute Bridges - supine</u>
Reassessment & Postural Improvements: <u>Lx Flex 2m r. ankle</u> <u>Lx lat Flex L Knee PB</u> <u>R Knee PB</u> <u>HIP Flex L 100° r. (Spring)</u>	

Next Treatment/Management Plan: 6 weeks (booked)