

Aimee Pinfield

DOB2 Sep 1984

Appointments

Date	Time	Type	Practitioner
29 Apr 2024	9:45AM – 10:45AM	Sauna & Massage - for clients with a FREE Sauna offer/voucher	Christine Jervis
20 Mar 2024	9:30AM – 10:30AM	1. NEW CLIENT (First Massage)	Christine Jervis

Treatment Notes

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis

Appointment: 29 Apr 2024, 9:45AM

Created: 29 Apr 2024, 9:19AM

Last updated: 6 May 2024, 10:00PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical history or client info)	What's going on now - client has some soreness in her shoulders/neck. Looking forward to trying a Sauna. Never done that before.
Medication or relevant procedures / info identified that may affect the massage.	Injury
Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)-	Shoulder/neck tension. Some knee pain.
Assessment / Testing done (including ROM) / Observations	Verbal consent obtained. ROM - not checked today. Anything noteworthy - no Anything specific to massage (E.g. no foot massage) - no. Slight build. Likes soft pressure.
Treatment details - what was done today to help the client	Pressure used - 2-3 firm Music - Yanni if there Aromatherapy Massage oil - Relax Spritzer - Joyful Remedial techniques - shoulders/back/hips/neck.
Hot Pack	Lower Body
Hot Stones	2 x Hips; 2 x Back/Shoulders

Hot Wet Towels	Feet; Face
Topical Treatment	Fisiocrem shoulders/neck
What parts of the body were massaged?	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
Where any specific trigger points used?	Rhomboids; Upper Traps; Lev Scaps; Pecs; Deltoids; QLs; ITBs; Psoas
Body Chart	
Feedback after treatment -	Lots of sore spots today
Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)	Discussed getting some regular treatment to help.
Infra-Red Sauna (if applicable - info is below)	
Time in Sauna (minutes) -	20
Feedback after treatment -	Didn't sweat much as she doesn't sweat much even with exercise - try a higher heat next time?

Initial Consultation - Remedial Massage	
Practitioner: Christine Jervis Appointment: 20 Mar 2024, 9:30AM Created: 20 Mar 2024, 9:28AM Last updated: 22 Mar 2024, 6:04PM	
Initial Consultation - Remedial Massage Appointment	
Presenting complaint (relevant medical history or client info)	What's going on now - client's lower back and hips were sore, physio helped. Shoulders and neck and R knee feels tension.
Assessment / Testing done (including ROM) / Observations	Verbal consent obtained. ROM - checked before not after Anything noteworthy - small build Anything specific to massage (E.g. no foot massage) - gentle firm pressure Client had any previous treatment elsewhere? Yes 6 weeks ago. Helen kahuna and reflex at redlynch Any Red Flags - No
Medication or relevant procedures / info	

identified that may affect the massage.	
Details of Medications / Red Flags etc (i.e. conditions listed above)-	
Treatment details - what was done today to help the client	Pressure used - 2-3 firm Hot Stones - 2 x Hips and 2 x Back/Shoulders Hot Wet Towels - Feet / Face Hot Pack - Lower Body Topical Treatment - Fisiocrem shoulders neck Music - Ian Cam Smith Aromatherapy Massage oil - Lacender relax blend. Spritzer -joyful rose FB (+stom). Remedial techniques on her shoulders, back, hips and neck
What parts of the body were massaged?	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - quick prone stretch/massage; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
Where any specific trigger points used?	Rhomboids; Upper Traps; Lev Scaps; Pecs; TFLs
Body Chart	
Feedback after treatment -	Felt good, some sore spots
Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)	Showed doorway pec stretch. Suggested Sauna next time.
Infra-Red Sauna (if applicable - info is below)	
Time in Sauna (minutes) -	
Feedback after treatment -	

Patient Forms

New Client Record - Women's Health	
Practitioner: Christine Jervis Appointment: 20 Mar 2024, 9:30AM Completed: 17 Mar 2024, 8:33PM	
About you...	
What's your health fund?	NA
Occupation - how long?	Social worker - 13 years

List your physical activities, hobbies, exercise or sport.	Yoga, gardening , crafting, running around with the kids .
Do you sit/stand for long hours? (E.g. car/desk)	Sometimes when at work
Medications - prescribed or natural	Tumeric, evening primrose oil, probiotics on and off, medicinal mushrooms
Medical History - recent and past operations, illnesses, accidents, injuries or broken bones.	NA
About Massage...	
How did you find out about our massage clinic?	<input checked="" type="checkbox"/> Google <input type="checkbox"/> Facebook <input type="checkbox"/> Instagram <input type="checkbox"/> Phonebook <input type="checkbox"/> Massage Association <input type="checkbox"/> Health Professional (Doctor, Physio, Midwife) <input type="checkbox"/> Referral - word of mouth <input type="checkbox"/> Current/Previous customer
Who referred you? We use a client reward system - May we thank them?	
Type of massage pressure you prefer?	<input type="checkbox"/> Gentle <input checked="" type="checkbox"/> Firm <input type="checkbox"/> Hard <input type="checkbox"/> Very Hard <input type="checkbox"/> Not sure? (We'll check at your massage)
What are your goals or reasons for getting massage?	Hip and knee pain. back, neck and shoulders are tight as. After physio, hip pain improved.
Any areas you DON'T want massaged?	<input type="checkbox"/> Face <input type="checkbox"/> Head <input type="checkbox"/> Stomach <input type="checkbox"/> Back <input type="checkbox"/> Buttocks <input type="checkbox"/> Arms <input type="checkbox"/> Legs <input type="checkbox"/> Feet <input checked="" type="checkbox"/> Ok with above areas being massaged <input type="checkbox"/> Not sure? (Our Massage Therapist can discuss reasons for massaging different areas at y
Do you experience headaches?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Mild <input type="checkbox"/> Severe <input type="checkbox"/> Persistent <input type="checkbox"/> Migraines
Abdominal Massage helps digestive problems. Do you suffer any digestive complaints?	<input type="checkbox"/> No problems - everything is working well <input type="checkbox"/> Discomfort with a whole mix of things happening <input type="checkbox"/> Abdominal pain <input checked="" type="checkbox"/> Bloating <input type="checkbox"/> Constipation (going less than once per day) <input type="checkbox"/> Hard bowel movements <input type="checkbox"/> Loose bowel movements <input type="checkbox"/> Diarrhoea <input type="checkbox"/> Food allergies <input type="checkbox"/> Struggling most of the time <input type="checkbox"/> Occasionally experience problems
Do you have any pain?	<input type="checkbox"/> No pain - nothing hurts <input type="checkbox"/> Morning soreness <input type="checkbox"/> Night time pain <input type="checkbox"/> Varies - can be any time <input type="checkbox"/> All the time <input checked="" type="checkbox"/> Hurts doing something specific. E.g. Bending over to touch toes. <input type="checkbox"/> Tender to touch <input checked="" type="checkbox"/> Dull pain <input type="checkbox"/> Aching or throbbing <input type="checkbox"/> Sharp pain <input type="checkbox"/> Stiffness <input type="checkbox"/> Muscle tightness <input type="checkbox"/> Restricted movement
If your body hurts, what relieves it?	<input type="checkbox"/> I have no pain to manage <input type="checkbox"/> Ice <input type="checkbox"/> Heat <input type="checkbox"/> Rest <input type="checkbox"/> Exercise <input checked="" type="checkbox"/> Stretching <input type="checkbox"/> Medication <input type="checkbox"/> Topical Cream (E.g. Tiger Balm)
Some conditions affect massage. We want to safely treat you. Tick what applies to you -	<input type="checkbox"/> Allergies <input type="checkbox"/> Asthma <input type="checkbox"/> Sinus <input checked="" type="checkbox"/> Anxiety <input type="checkbox"/> Depression <input type="checkbox"/> Trouble falling asleep <input checked="" type="checkbox"/> Trouble staying asleep through the night <input type="checkbox"/> Arthritis <input type="checkbox"/> Osteoporosis <input type="checkbox"/> Spinal problems <input type="checkbox"/> Swelling <input type="checkbox"/> Bruise Easily <input type="checkbox"/> Blood clotting problems <input type="checkbox"/> Cancer

- ☐ Diabetes Type 1 ☐ Diabetes Type 2 ☐ Dizziness ☐ Numbness
☐ Tingling ☐ Cold hands / Cold feet ☐ Heart Problems
☐ Blood Pressure - high ☐ Blood Pressure - low ☐ Hearing problems
☐ Hearing aid ☐ Vision problems ☐ Contact Lenses
☐ None of the above apply to me

Any extra health details or info you'd like to share?

Women's Health Check...

We focus on specialist care for women of all ages. Digestive and fertility health are strongly linked. Massage also helps with improved sleep, mental health and stress management.

Any falls / injuries to your sacrum, tailbone, head, ankles or feet?

After sitting at work for an hour or so my tailbone really hurts when I stand up .

Have you had any surgery on your abdomen or lower back?

Appendix removed 10 years ago

How well is your bladder working? Any infections, bladder weakness, difficulty experiencing orgasms, trouble when you sneeze or do you need to urinate frequently?

Wee frequently. Jumping on tramp isn't great if I need to wee but otherwise okay.

Menstrual and Fertility Conditions - please tick what applies to you...

- ☐ Painful Periods ☐ Irregular Periods
☐ Excessive Bleeding (>1pad/tampon per/hr) ☐ Fibroids
☐ Painful Ovulation ☐ Miscarriage (once) ☐ Recurrent miscarriage
☐ Currently doing Fertility Treatment. E.g. IVF. ☐ Trying to get pregnant now
☐ Postnatal Recovery ☐ PCO (Polycystic ovaries)
☒ PCOS (Polycystic Ovarian Syndrome) ☐ POF (Premature Ovarian Failure)
☐ Endometriosis ☐ Failure to Ovulate ☐ Low AMH
☐ Retroverted uterus ☐ Inverted uterus ☐ No problems that I know of

Symptoms experienced prior to and during menstruation

- ☐ I don't menstruate now ☐ Lower back ache ☒ Headaches
☐ Dizziness ☐ Dragging sensation ☐ Heaviness or pressure in lower pelvis
☐ Increased urination ☐ Constipation ☐ Diarrhoea
☒ Changes in my usual bowel movements ☐ Pain/numbness in right leg
☐ Pain/numbness in left leg ☐ Pain/numbness in both legs
☐ Cramps - lower abdomen ☐ Cramps - left side ☐ Cramps - right side
☐ Dark thick blood at beginning of menstruation
☐ Dark thick blood at the end of menstruation ☐ Blood clots
☐ None of the above happen during my period

Any female health details or info you'd like to share?

Super mood changes leading up to bleed

Pregnancy, Birth and Postnatal Recovery

Trauma is stored at a cellular level in the body. Some massage techniques affect your body's response, especially if you've experienced emotional events or trauma. Massage creates a safe, supportive treatment space for all women to be nurtured.

Tick what applies to your birth experiences -

- ☐ No birth history to report ☒ Vaginal Birth ☒ Water Birth
☐ Epidural / Pethidine ☐ Forceps / Ventouse ☐ C-section

☒ Termination ☐ Miscarriage ☐ Ectopic

How many pregnancies have you had?

4

How many babies have you birthed?

2

Have you had any birth interventions or complications?

Significant tears with both. Worse with Zahra

How long were your birth hours for each delivery?

Zahra -5 and Zoe 2

Any other info you would like to share?

Your consent...

Your confidential information helps our Massage Therapist plan the safest treatment. Be honest - tell us if the temperature is too hot/cold, pressure level needs adjusting or you're uncomfortable/unwell or unsure at any stage.

Every massage has potential risks, complications or side-effects. Such as causing muscular discomfort, fatigue, bruising, burns (from heat therapy), aggravating existing conditions, increasing blood pressure or skin sensitivity.

After massage, it's common to feel relaxed or sleepy. Get up slowly from the table - give yourself time to adjust afterwards. Delay your shower for 2 hours for essential oils to keep working. Keep well hydrated with water in the 24-48 hours after massage.

It's ok to discuss my treatment with my doctor, physio or referring health practitioner.

☐ Yes - clients will be informed if this happens. ☒ No thanks.

My Massage Therapist and I both have the right to stop or refuse treatment at any time.

☒ Yes - I know I can ask questions at any time too.

I will keep my Massage Therapist updated on any changes to this information and my health.

Aimee Pinfield