Jessie Jones

DOB 14 Aug 1959 Occupation Cleaner

Appointments

Date	Time	Туре	Practitioner
5 May 2024	10:30AM - 11:30AM	60 minute Massage	Christine Jervis
19 May 2021	10:00AM - 11:00AM	60 minute Massage	Christine Jervis
27 Sep 2019	1:00PM – 2:00PM	60 minute Massage	Marina Franke
17 Jun 2019	9:30AM – 10:30AM	60 minute Massage	Marina Franke
12 Dec 2018	4:00PM – 5:00PM	60 minute Massage	Marina Franke
2 Nov 2018	9:30AM – 10:30AM	60 minute Massage	Marina Franke

Treatment Notes

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis **Appointment:** 5 May 2024, 10:30AM **Created:** 5 May 2024, 12:11PM **Last updated:** 5 May 2024, 12:16PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical history or client info)

What's going on now - client has bone missing in her foot. Feedback from previous treatment - new job on checkout at his, ok but hours fluctuating. Gave up job at Coles but only 3 hours.

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)-

Missing a bone in her foot. NDIS coverage for that

Assessment / Testing done (including ROM) / Observations

Verbal consent obtained. ROM - not checked.

Anything noteworthy - walking limited.

Anything specific to massage (E.g. no foot massage) - ROM limited on feet

Treatment details - what was done today to help the client

Pressure used - 2 firm

Hot Stones - 2 x Hips and 2 x Back/Shoulders

Hot Wet Towels - Feet / Face Hot Pack - Lower Body

Topical Treatment - Fisiocrem hips

Music - Ian Cam

Aromatherapy Massage oil - Relax Mand/Tang

Spritzer - Neroli

FB Remedial Massage - general massage all over. Tension and tightness felt in back, legs

and hips.

What parts of the body were massaged?

Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone;

Arms - Supine; Legs - Prone; Legs - Supine; Face / sinuses

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids

Body Chart

Feedback after treatment -

Felt good after massage. Enjoyed it.

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

Discussed getting a sauna next time

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis
Appointment: 19 May 2021, 10:00AM
Created: 20 May 2021, 7:12AM
Last updated: 23 May 2021, 5:36AM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now - client has bone missing in her foot

Feedback from previous treatment - client's body is sore from working. New Job in aged

care home and hates it.

Medication or relevant procedures / info identified that may affect the massage.

Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)-

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - not checked.

Anything noteworthy - walking limited.

Anything specific to massage (E.g. no foot massage) - ROM limited on feet

Treatment details - what was done today

Pressure used - 2 firm

to help the client Hot Stones - 2 x Hips and 2 x Back/Shoulders

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Arms - Supine; Legs - Prone; Legs - Supine; Face / sinuses

Where any specific trigger points used?

Rhomboids; Upper Traps; Lev Scaps; Pecs; SITS; Deltoids

Body Chart

Feedback after treatment -

Felt good after massage.

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

Seeing Dr for feet - may need an operation. Looking for new work. Discussed dealing $\,$

with stress at work.

Infra-Red Sauna (if applicable - info is below)

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Marina Franke
Appointment: 27 Sep 2019, 1:00PM
Created: 27 Sep 2019, 12:57PM
Last updated: 27 Sep 2019, 2:08PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical history or client info)

What's going on now -R foot P-bone missing in foot,(L has high bone on top)

Feedback from previous treatment -:)

Details of Medications / Red Flags etc (i.e.

conditions listed above)-

physio for 5 treatment, didn't help. orthodics don't help

Medication or relevant procedures / info identified that may affect the massage.

Details of Medications / Red Flags etc (i.e. conditions listed above)-

Xray & ultra sound = R rot cuff, supra spin calcification, bursa narrowing, ac joint

narrowing, glenohumeral joint narrowing June 2019

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - reduced in feet, & generally

Anything noteworthy -R upper leg muscles not formed properly-premature birth=R foot

P & bone issue (R foot) Any precautions / Red Flags -

Anything specific to massage - E.g. no foot massage

Treatment details - what was done today

to help the client

Pressure used -firm Hot Stones -4 Hot Wet Towels -2

Cupping area -

Topical Treatment -fisio R scap etc

Music -tribal mix

Aromatherapy -tang/mand

What parts of the body were massaged? Full Body Treatment; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone; Arms - Supine;

Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses

Where any specific trigger points used? Upper Traps; Lev Scaps; SCMs

Body Chart

Feedback after treatment -

enjoyed

Plan for future results / treatment / progress / homework (including

discussion with client, advice, stretches)

hydro, massage, physio exercises

Infra-Red Sauna

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Marina Franke
Appointment: 17 Jun 2019, 9:30AM
Created: 17 Jun 2019, 10:34AM
Last updated: 17 Jun 2019, 10:35AM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now -R foot P, L has high bone on top, R shoulder P

Feedback from previous treatment -:)

Details of Medications / Red Flags etc (i.e.

conditions listed above)-

physio for 5 treatment, didn't help. orthodics don't help

Medication or relevant procedures / info identified that may affect the massage.

Details of Medications / Red Flags etc (i.e.

conditions listed above)-

Xray & ultra sound = R rot cuff, supra spin calcification, bursa narrowing, ac joint

narrowing, glenohumeral joint narrowing

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - reduced in feet, & generally

Anything noteworthy -R upper leg muscles not formed properly-premature birth=R foot

P & bone issue (R foot) Any precautions / Red Flags -

Anything specific to massage - E.g. no foot massage

Treatment details - what was done today

to help the client

Pressure used -firm Hot Stones -4

Hot Wet Towels -2 Cupping area -

Topical Treatment -fisio R scap etc

Music -modern mix

Aromatherapy -pep ecc/rosemary

What parts of the body were massaged? Full Body Treatment; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone; Arms - Supine;

Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses

Where any specific trigger points used? Upper Traps; Lev Scaps; SCMs

Body Chart

Feedback after treatment -

enjoyed

Plan for future results / treatment / progress / homework (including

discussion with client, advice, stretches)

hydro, massage, physio exercises

Infra-Red Sauna

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Marina Franke
Appointment: 12 Dec 2018, 4:00PM
Created: 12 Dec 2018, 4:00PM
Last updated: 12 Dec 2018, 5:10PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now -R foot P

Feedback from previous treatment - :)

 $\label{eq:decomposition} \textbf{Details of Medications} \, / \, \, \textbf{Red Flags etc (i.e.}$

conditions listed above)-

physio for 5 treatment, didn't help. orthodics don't help

Medication or relevant procedures / info identified that may affect the massage.

Details of Medications / Red Flags etc (i.e.

Xray & ultra sound = R rot cuff, supra spin calcification, bursa narrowing, ac joint

conditions listed above)narrowing, glenohumeral joint narrowing

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - reduced in feet, & generally

Anything noteworthy -R upper leg muscles not formed properly-premature birth=R foot

P & bone issue (R foot) Any precautions / Red Flags -

Anything specific to massage - E.g. no foot massage

Treatment details - what was done today

to help the client

Pressure used -firm Hot Stones -4 Hot Wet Towels -2 Cupping area -

Topical Treatment -fisio R scap etc

Music -nature

Aromatherapy -tangerine

What parts of the body were massaged?

Full Body Treatment

Where any specific trigger points used?

Upper Traps; Lev Scaps; SCMs

hydro, massage, physio exercises

Body Chart

Feedback after treatment -

enjoyed

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

Infra-Red Sauna

Time in Sauna (minutes) -

Feedback after treatment -

Standard Consultation - Remedial Massage

Practitioner: Marina Franke Appointment: 2 Nov 2018, 9:30AM Created: 2 Nov 2018, 10:30AM Last updated: 12 Dec 2018, 3:49PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical

history or client info)

What's going on now -R foot P

Feedback from previous treatment -:)

Details of Medications / Red Flags etc (i.e.

conditions listed above)-

physio for 5 treatment, didn't help. orthodics don't help

Medication or relevant procedures / info

identified that may affect the massage.

Details of Medications / Red Flags etc (i.e. conditions listed above)-

Assessment / Testing done (including

ROM) / Observations

Verbal consent obtained.

ROM - reduced in feet, & generally

Anything noteworthy -R upper leg muscles not formed properly-premature birth=R foot

P & bone issue (R foot) Any precautions / Red Flags -

Anything specific to massage - E.g. no foot massage

Treatment details - what was done today

to help the client

Pressure used -firm Hot Stones -4

Hot Wet Towels -2 Cupping area -

Topical Treatment -fisio R foot

Music -uplifting

Aromatherapy -tangerine

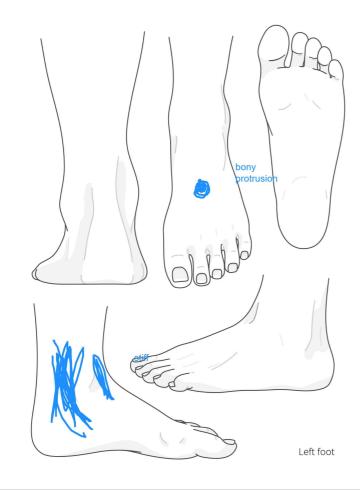
What parts of the body were massaged?

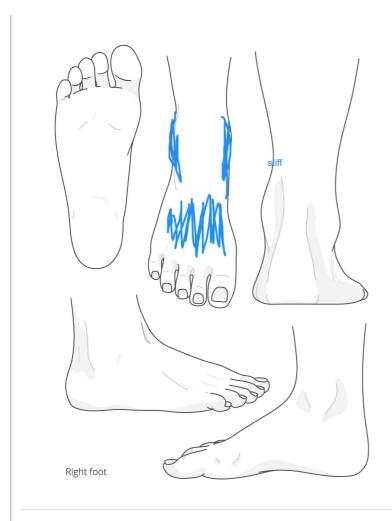
Full Body Treatment

Where any specific trigger points used?

Upper Traps

Body Chart





Feedback after treatment -

enjoyed

Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)

hydro, massage

Infra-Red Sauna

Time in Sauna (minutes) -

Feedback after treatment -

Patient Forms

Client Health Check

Practitioner: Christine Jervis **Appointment:** 19 May 2021, 10:00AM **Completed:** 6 May 2021, 9:22AM

Travel History

Have you been out of the country in the No past 2 months? If so, where.

L		
	Symptoms Have you experienced any of the following symptoms in the past 2 weeks?	☐ Cough ☐ Fever ☐ Shortness of breath ☑ None of the above
	How severe are your symptoms?	 Not severe
	Have you been to a doctor's clinic or hospital in the last two weeks?	☐ Yes 🗹 No
	COVID-19 Have you been in contact with anyone known to have COVID-19 in the last two weeks?	☐ Yes ☑ No ☐ I don't know
	Have you had to self-isolate any time within the last month due to COVID-19 symptoms?	☐ Yes ☑ No

Bayview Heights. 3 Pheasant Street Client Record

FOCUS ON MASSAGE

6.1	
Full Name Sessie Selina	Jones Date of Birth 14/8/19
Postal Address / CS/Re/ S-	Bayura Heigh
Home Phone 40331 512 Work -	Mobile 0408331512
Email Address 0 43	12140 285 Health Fund MBF
Emergency Contact Details - Name and Number _	Realth Fund MOT
Current Doctor Tony Tunck	Referred By
Occupation and how long WAS Nig	H filler, now Cleaner
Physical Activities/Hobbies/Exercise	LRIKING
STROKE	nts/injuries)
	To te
Please circle areas of soreness or pain on the body chart below:	Some conditions require your massage treatment to be modified. Please tick all conditions below that apply to you NOW.
	Write the letter P pext to any past conditions. Allergies Asthma
$\langle \tau_{\underline{f}} \rangle$ $\langle \rangle$	Any Contagious Disease / Skin Problem
	 Arthritis
	Blood Pressure / Heart Problems
	 Bruising
	Chronic Pain
	Cold / Flu
and box End hour	 Diabetes
	 Dizziness
););() } }	 Fractured bones
(iXt) (X)	Headache
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Numbness / Tingling
(36)	Pregnant or Breastfeeding
T-tool	Recent Illness / Surgery
Amount of Pain (1-10):	 Spinal / Back Problems
Type (sharp, dull, aching etc)	 Sprained/strained muscles
When is the pain worst?	□ Varicose Veins
What relieves the pain?	Details regarding above selections:
Massage may include several areas of the body. Ple	ease circle any areas you do NOT want massaged from the list below
	omach Back Buttocks Arms Legs Feet
Please circle what type of massage pre	essure you prefer: Gentle Firm Hard Very Hard
- X	
CITENT A	UTHORISATION
I understand that The information provided above is used to help d	

termine an appropriate massage treatment for me.

It is my (the client's) responsibility to notify the clinic if changes occur regarding any details listed above.

Massage practitioners are not qualified to diagnose or treat illness or disease or to perform thrust manipulation.

Signature:

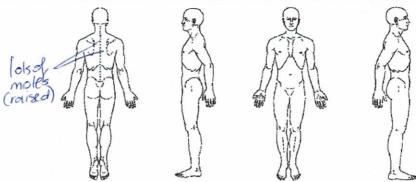


SOAP = SUBJECTIVE (clients states) OBJECTIVE (therapist observations, treatment) ANALYSIS (what worked, didn't) PLAN (plans for next session, advice, goals)

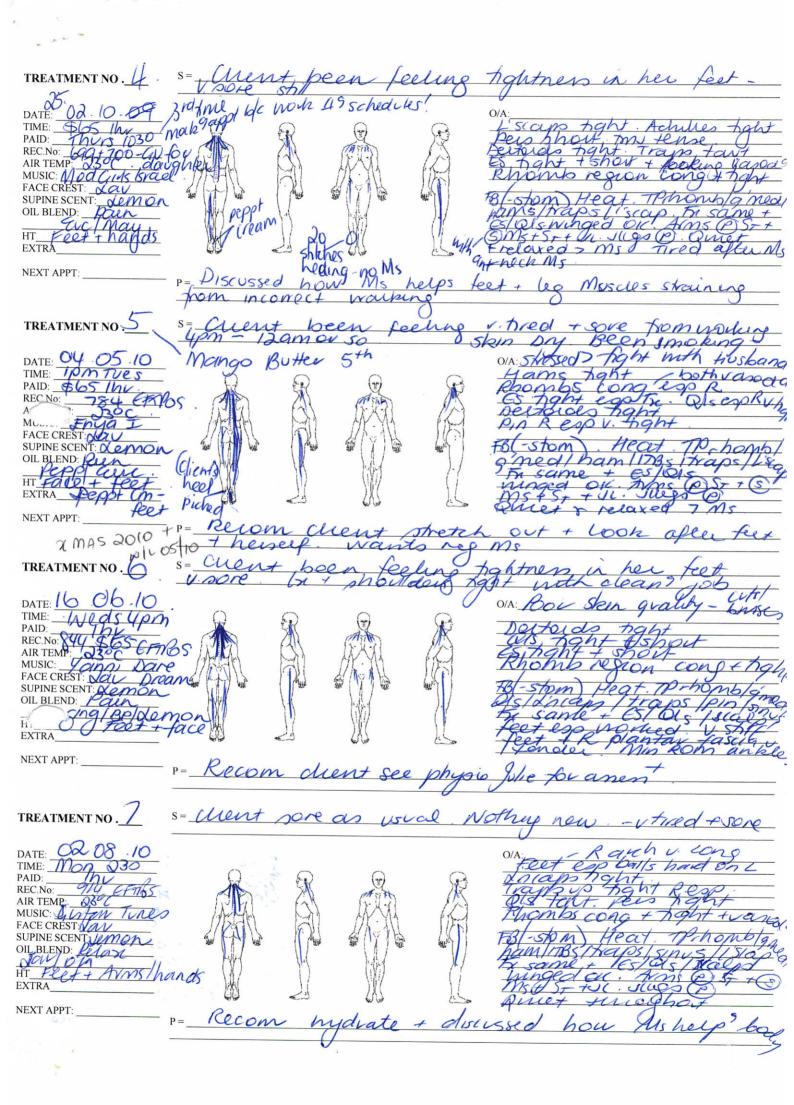
TOTAPS = TALK (history/area/symptoms) OBSERVE (signs) TOUCH (Palpate) ACTIVE Movement (Client's ROM) PASSIVE Movement SKILLS Test (client co-ordination)

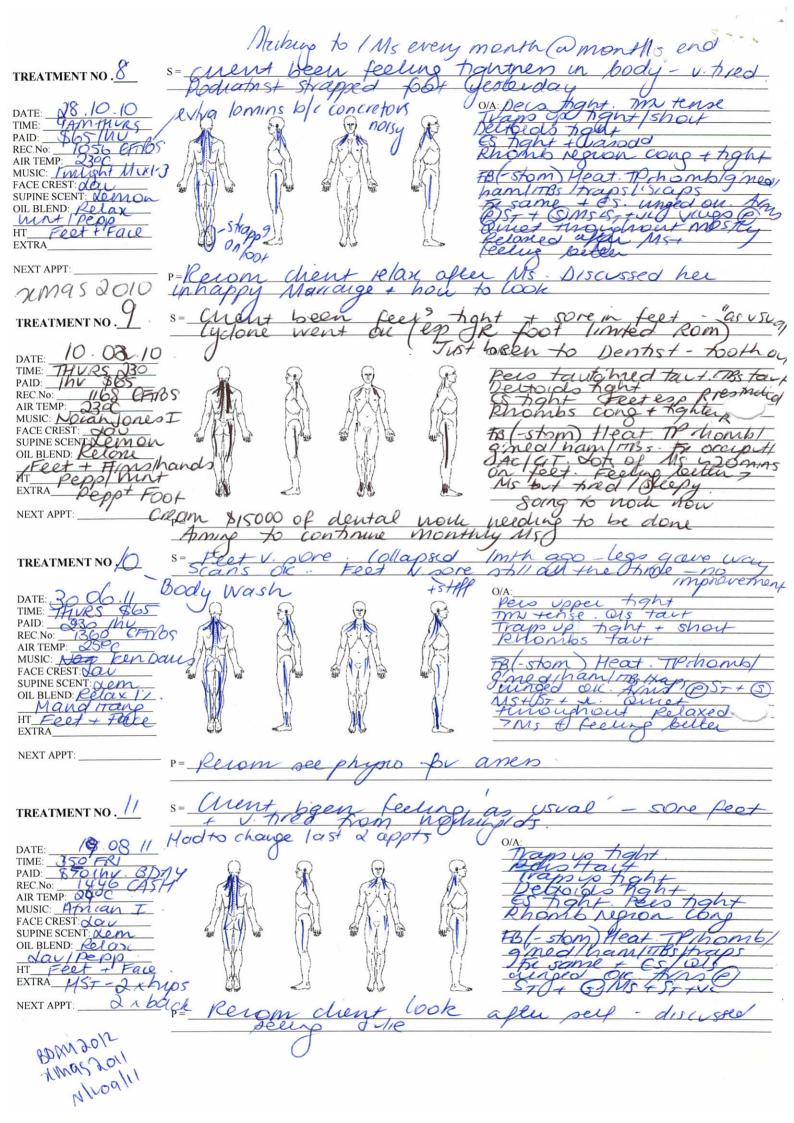
Head (chin/ears) Trunk (spine) Shoulder (height/pro-retract) Arms (elbows/forearms/wrist/fingers) Hips (tilt) Knees (level) Ankles (toes/in-evert).

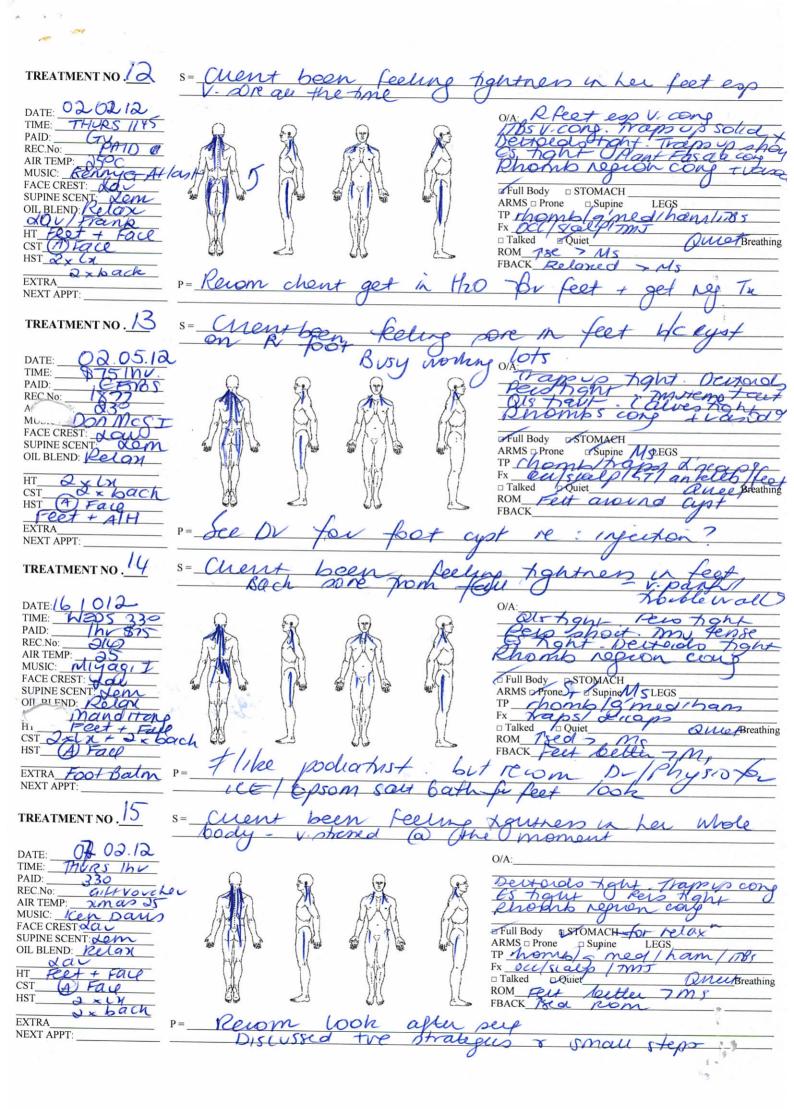
Movement Check: Flexion/Extension/Lateral Flexion/Rotation (internal/external)/Abduction/Adduction/Supination/Pronation/Eversion/Inversion



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NL 6/2/01	- cuent bear	1 feeling	taht	+ short fore in		—>pa
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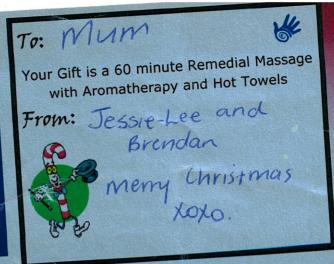






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DATE: Q OS 3 TIME: 1/5 COS PAID: DS INV REC No: PAID EFICAL AIR TEMP: DS MUSIC: HChow Bith T FACE CREST: Q U SUPINE SCENT: Jem OIL BLEND: PEI GN Mand Ora HT (A) FACE CST 2 X X HST 2 X D ACK EXTRA NEXT APPT:	P= Rosom	du	esp'	CHS S.	Full Body STOMACH ARMS Prone STOSupine MILEGS TP Wombols med hamling Fix adjust the flushed Talked Quiet Church Breathing ROM ISE OF MIS FBACK FELL Letter INT
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NEXT APPT:		9			1
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EXTRA_NEXT APPT:	P = Che	ut b	een see	talheo	about that i been to
TREATMENT NO	S =			ji	
DATE: TIME: PAID: REC.No: AIR TEMP: MUSIC: FACE CREST: SUPINE SCENT: OIL BLEND: HT CST HST EXTRA NEXT AP T	P =				O/A:







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