

Mrs Linda Calanna

DOB 6 Sep 1948

Appointments

Date	Time	Type	Practitioner
24 Sep 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
27 Aug 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
30 Jul 2025	11:00AM – 12:00PM	60 minute Massage	Christine Jervis
2 Jul 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
4 Jun 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
5 May 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
9 Apr 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
12 Mar 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
12 Feb 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
16 Jan 2025	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
20 Dec 2024	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
27 Nov 2024	9:30AM – 10:30AM	60 minute Massage	Christine Jervis
6 Nov 2024	9:30AM – 10:30AM	1. NEW CLIENT (First Massage)	Christine Jervis

Treatment Notes

Standard Consultation - Remedial Massage

Practitioner: Christine Jervis  
Appointment: 27 Aug 2025, 9:30AM  
Created: 27 Aug 2025, 10:49AM  
Last updated: 8 Sep 2025, 1:24PM

Standard Consultation - Remedial Massage

Presenting complaint (relevant medical history or client info)

What's going on now - client been feeling stiff and sore feet and legs especially. Needing a massage today - sore all over.

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

Prescription Medication; Natural Medication; Injury

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

Assessment / Testing done (including

Verbal consent obtained.

<b>ROM) / Observations</b>	ROM - not checked today Anything noteworthy - limited ROM feet Anything specific to massage (E.g. no foot massage) - no
<b>Treatment details - what was done today to help the client</b>	Pressure used - 2-3 firm Music - Steve Helpen Aromatherapy Massage oil - pain blend h20 Spritzer - lavender Peppermint  Remedial techniques - shoulders, back and neck
<b>Hot Pack</b>	Lower Body
<b>Hot Stones</b>	2 x Hips; 2 x Back/Shoulders; Cold stones on face
<b>Hot Wet Towels</b>	Feet; Face
<b>Topical Treatment</b>	Fisiocrem shoulders/neck
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt improvement after Massage
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed weather and body
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

### Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis  
**Appointment:** 30 Jul 2025, 11:00AM  
**Created:** 30 Jul 2025, 12:06PM  
**Last updated:** 30 Jul 2025, 12:07PM

### Standard Consultation - Remedial Massage

**Presenting complaint (relevant medical** What's going on now - client been feeling stiff and sore feet especially.

<b>history or client info)</b>	
<b>Medication or relevant procedures / info identified that may affect the massage.</b>	Prescription Medication; Natural Medication; Injury
<b>Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)-</b>	
<b>Assessment / Testing done (including ROM) / Observations</b>	Verbal consent obtained. ROM - not checked today Anything noteworthy - limited ROM feet Anything specific to massage (E.g. no foot massage) - no
<b>Treatment details - what was done today to help the client</b>	Pressure used - 2-3 firm Music - Enya Aromatherapy Massage oil - pain blend h20 Spritzer - lavender Peppermint  Remedial techniques - shoulders, back and neck
<b>Hot Pack</b>	Lower Body
<b>Hot Stones</b>	2 x Hips; 2 x Back/Shoulders; Cold stones on face
<b>Hot Wet Towels</b>	Feet; Face
<b>Topical Treatment</b>	Fisiocrem shoulders/neck
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt improvement after Massage
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed managing pain
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

## Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis  
**Appointment:** 2 Jul 2025, 9:30AM  
**Created:** 2 Jul 2025, 10:46AM  
**Last updated:** 2 Jul 2025, 11:45AM

## Standard Consultation - Remedial Massage

**Presenting complaint (relevant medical history or client info)** What's going on now - client been feeling stiff and sore today with cooler weather. Did lots of cleaning and gardening so sore today.

**Medication or relevant procedures / info identified that may affect the massage.** Prescription Medication; Natural Medication; Injury

**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 today  
Anything noteworthy - limited ROM feet  
Anything specific to massage (E.g. no foot massage) - no

**Treatment details - what was done today to help the client** Pressure used - 2-3 firm  
Music - Enya  
Aromatherapy Massage oil - relax tincture  
Spritzer - lavender Peppermint  
  
Remedial techniques - shoulders, back and neck

**Hot Pack** Lower Body

**Hot Stones** 2 x Hips; 2 x Back/Shoulders; Cold stones on face

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

**Where any specific trigger points used?** Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs

**Body Chart**

**Feedback after treatment -** Felt improvement after Massage

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

Discussed cool weather and managing pain

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

**Time in Sauna (minutes) -**

**Feedback after treatment -**

### Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis

**Appointment:** 4 Jun 2025, 9:30AM

**Created:** 4 Jun 2025, 10:39AM

**Last updated:** 5 Jun 2025, 8:33AM

### Standard Consultation - Remedial Massage

**Presenting complaint (relevant medical history or client info)**

What's going on now - client been feeling stiff and sore today with cooler weather.  
Everything sore from fibromyalgia

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

Prescription Medication; Natural Medication; Injury

**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 today  
Anything noteworthy - limited ROM feet  
Anything specific to massage (E.g. no foot massage) - no

**Treatment details - what was done today to help the client**

Pressure used - 2-3 firm  
Music - Indian mix  
Aromatherapy Massage oil - extreme sports. Liked.  
Spritzer - Euc tea tree Peppermint  
  
Remedial techniques - shoulders, back and neck

**Hot Pack**

Lower Body

**Hot Stones**

2 x Hips; 2 x Back/Shoulders; Cold stones on face

**Hot Wet Towels**

Feet; Face

**Topical Treatment**

Fisiocrem shoulders/neck

<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt improvement after Massage
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed managing body aches
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

### Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis  
**Appointment:** 5 May 2025, 9:30AM  
**Created:** 5 May 2025, 9:23AM  
**Last updated:** 5 May 2025, 10:37AM

### Standard Consultation - Remedial Massage

<b>Presenting complaint (relevant medical history or client info)</b>	What's going on now - client been feeling stiff and sore today with wet weather. Moving slowly.
<b>Medication or relevant procedures / info identified that may affect the massage.</b>	Prescription Medication; Natural Medication; Injury
<b>Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)-</b>	
<b>Assessment / Testing done (including ROM) / Observations</b>	Verbal consent obtained. ROM - not checked today Anything noteworthy - limited ROM feet Anything specific to massage (E.g. no foot massage) - no
<b>Treatment details - what was done today to help the client</b>	Pressure used - 2-3 firm Music - Ian Cam Smith Aromatherapy Massage oil - extreme sports. Liked. Spritzer - Euc tea tree Peppermint  Remedial techniques - shoulders, back and neck

<b>Hot Pack</b>	Lower Body
<b>Hot Stones</b>	2 x Hips; 2 x Back/Shoulders; Cold stones on face
<b>Hot Wet Towels</b>	Feet; Face
<b>Topical Treatment</b>	Fisiocrem shoulders/neck
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt really great after Massage
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed weather and body aches
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

### Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis  
**Appointment:** 9 Apr 2025, 9:30AM  
**Created:** 9 Apr 2025, 9:27AM  
**Last updated:** 9 Apr 2025, 10:44AM

### Standard Consultation - Remedial Massage

<b>Presenting complaint (relevant medical history or client info)</b>	What's going on now - client been feeling stiff and sore today. Moving slowly.
<b>Medication or relevant procedures / info identified that may affect the massage.</b>	Prescription Medication; Natural Medication; Injury
<b>Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)-</b>	
<b>Assessment / Testing done (including ROM) / Observations</b>	Verbal consent obtained. ROM - not checked today Anything noteworthy - limited ROM feet

	Anything specific to massage (E.g. no foot massage) - no
<b>Treatment details - what was done today to help the client</b>	Pressure used - 2-3 firm Music - don McG tunes Aromatherapy Massage oil - extreme sports. Liked. Spritzer - Euc tea tree Peppermint  Remedial techniques - shoulders, back and neck
<b>Hot Pack</b>	Lower Body
<b>Hot Stones</b>	2 x Hips; 2 x Back/Shoulders; Cold stones on face
<b>Hot Wet Towels</b>	Feet; Face
<b>Topical Treatment</b>	Fisiocrem shoulders/neck
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt really great afterwards. Liked the warmth and smell of the oil blend
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed weather and body aches
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

### Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis  
**Appointment:** 12 Mar 2025, 9:30AM  
**Created:** 12 Mar 2025, 10:39AM  
**Last updated:** 12 Mar 2025, 12:18PM

### Standard Consultation - Remedial Massage

**Presenting complaint (relevant medical history or client info)**
 What's going on now - client been feeling stiff and sore today. Moving slowly. Been tired with low energy, acupuncture worked on that yesterday



<b>Medication or relevant procedures / info identified that may affect the massage.</b>	Prescription Medication; Natural Medication; Injury
<b>Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)-</b>	
<b>Assessment / Testing done (including ROM) / Observations</b>	Verbal consent obtained. ROM - not checked today Anything noteworthy - limited ROM feet Anything specific to massage (E.g. no foot massage) - no
<b>Treatment details - what was done today to help the client</b>	Pressure used - 2-3 firm Music - Saxophone tunes Kenny G Aromatherapy Massage oil - extreme sports Spritzer - Euc tea tree Peppermint  Remedial techniques - shoulders, back and neck
<b>Hot Pack</b>	Lower Body
<b>Hot Stones</b>	2 x Hips; 2 x Back/Shoulders; Cold stones on face
<b>Hot Wet Towels</b>	Feet; Face
<b>Topical Treatment</b>	Fisiocrem shoulders/neck
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt really great afterwards. Liked the warmth of the oil blend
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed using warming oils and blends
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

### Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis**Appointment:** 12 Feb 2025, 9:30AM**Created:** 12 Feb 2025, 10:43AM**Last updated:** 13 Feb 2025, 12:18PM

## Standard Consultation - Remedial Massage

**Presenting complaint (relevant medical history or client info)**

What's going on now - client been feeling stiff and sore today. Moving slowly

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

Prescription Medication; Natural Medication; Injury

**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 today

Anything noteworthy - limited ROM feet

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

**Treatment details - what was done today to help the client**

Pressure used - 2-3 firm

Music - Mod Girls KD lang

Aromatherapy Massage oil - Lavender Peppermint

Spritzer - Euc tea tree Peppermint

Remedial techniques - shoulders, back and neck

**Hot Pack**

Lower Body

**Hot Stones**

2 x Hips; 2 x Back/Shoulders; Cold stones on face

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

**Where any specific trigger points used?**

Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs

**Body Chart****Feedback after treatment -**

Felt really great afterwards, bit stiff today

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

Discussed using heat

**Infra-Red Sauna (if applicable - info is below)****Time in Sauna (minutes) -****Feedback after treatment -****Standard Consultation - Remedial Massage****Practitioner:** Christine Jervis**Appointment:** 16 Jan 2025, 9:30AM**Created:** 16 Jan 2025, 10:41AM**Last updated:** 16 Jan 2025, 10:42AM**Standard Consultation - Remedial Massage****Presenting complaint (relevant medical history or client info)**

What's going on now - client been feeling improvement bit bit stiff and sore today.

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

Prescription Medication; Natural Medication; Injury

**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 today

Anything noteworthy - limited ROM feet

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

**Treatment details - what was done today to help the client**

Pressure used - 2-3 firm

Music - Acker Bilk and Don McG 2

Aromatherapy Massage oil - Lavender Peppermint

Spritzer - Euc tea tree Peppermint

Remedial techniques - shoulders, back and neck

**Hot Pack**

Lower Body

**Hot Stones**

2 x Hips; 2 x Back/Shoulders; Cold stones on face

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

Where any specific trigger points used; ITBs; TFLs	
Body Chart	
Feedback after treatment -	Felt really great afterwards, bit stiff today
Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)	Discussed keeping cool in this hot weather
Infra-Red Sauna (if applicable - info is below)	
Time in Sauna (minutes) -	
Feedback after treatment -	

Standard Consultation - Remedial Massage	
Practitioner: Christine Jervis Appointment: 20 Dec 2024, 9:30AM Created: 20 Dec 2024, 10:47AM Last updated: 20 Dec 2024, 10:48AM	
Standard Consultation - Remedial Massage	
Presenting complaint (relevant medical history or client info)	What's going on now - client been feeling improvement since last massage. Seen acupuncture this week for sore back.
Medication or relevant procedures / info identified that may affect the massage.	Prescription Medication; Natural Medication; Injury
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 today Anything noteworthy - limited ROM feet Anything specific to massage (E.g. no foot massage) - no
Treatment details - what was done today to help the client	Pressure used - 2-3 firm Music - Acker Bilk and Don McG 2 Aromatherapy Massage oil - Lavender Peppermint Spritzer - Euc tea tree Peppermint  Remedial techniques - shoulders, back and neck
Hot Pack	Lower Body

<b>Hot Stones</b>	2 x Hips; 2 x Back/Shoulders; Cold stones on face
<b>Hot Wet Towels</b>	Feet; Face
<b>Topical Treatment</b>	Fisiocrem shoulders/neck
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt really good afterwards
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed getting into swimming pools with support and looking after herself with exercises
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

### Standard Consultation - Remedial Massage

**Practitioner:** Christine Jervis  
**Appointment:** 27 Nov 2024, 9:30AM  
**Created:** 27 Nov 2024, 3:32PM  
**Last updated:** 27 Nov 2024, 3:40PM

### Standard Consultation - Remedial Massage

<b>Presenting complaint (relevant medical history or client info)</b>	What's going on now - client been feeling improvement since last massage. Seen physio Ryan and Podiatrist given exercises too.
<b>Medication or relevant procedures / info identified that may affect the massage.</b>	Prescription Medication; Natural Medication; Injury
<b>Details of Medications / Red Flags / Precautions needed etc (i.e. conditions listed above)-</b>	
<b>Assessment / Testing done (including ROM) / Observations</b>	Verbal consent obtained. ROM - not checked today Anything noteworthy - limited ROM feet Anything specific to massage (E.g. no foot massage) - no

<b>Treatment details - what was done today to help the client</b>	Pressure used - 2-3 firm Music - Acker Bilk 2 Aromatherapy Massage oil - Lavender Peppermint Spritzer - Euc tea tree Peppermint  Remedial techniques - shoulders, back and neck
<b>Hot Pack</b>	Lower Body
<b>Hot Stones</b>	2 x Hips; 2 x Back/Shoulders; Cold stones on face
<b>Hot Wet Towels</b>	Feet; Face
<b>Topical Treatment</b>	Fisiocrem shoulders/neck
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; Pecs; ITBs; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Felt really good
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed challenge of managing different medication and exercises for. Physio
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

### Initial Consultation - Remedial Massage

**Practitioner:** Christine Jervis  
**Appointment:** 6 Nov 2024, 9:30AM  
**Created:** 6 Nov 2024, 10:28AM  
**Last updated:** 6 Nov 2024, 2:39PM

### Initial Consultation - Remedial Massage Appointment

<b>Presenting complaint (relevant medical history or client info)</b>	What's going on now - 4 weeks since last massage, sore all over, joints aching
<b>Assessment / Testing done (including ROM) / Observations</b>	Verbal consent obtained. ROM - checked

	<p>Anything noteworthy -</p> <p>Anything specific to massage (E.g. no foot massage) - no</p> <p>Client had any previous treatment elsewhere? Yes monthly massage</p> <p>Any Red Flags - age, injuries</p>
<b>Medication or relevant procedures / info identified that may affect the massage.</b>	Natural Medication; Injury
<b>Details of Medications / Red Flags etc (i.e. conditions listed above)-</b>	Limited ROM feet and neck, mid thoracic very tight, bursitis in R hip, arthritis, seeing podiatrist regularly, past illness (similar to dengue) causes fatigue.
<b>Treatment details - what was done today to help the client</b>	<p>Pressure used - 2 firm</p> <p>Hot Stones - 2 x Hips and 2 x Back/Shoulders</p> <p>Hot Wet Towels - Feet / Face</p> <p>Hot Pack - Upper Body / Lower Body</p> <p>Topical Treatment - Fisiocrem / Zen / Balm</p> <p>Music - Enya</p> <p>Aromatherapy Massage oil - Lav/Peppt</p> <p>Spritzer - Joyful</p> <p>FB with a little on stomach, remedial techniques on shoulders, back, neck.</p>
<b>What parts of the body were massaged?</b>	Full Body Treatment; Stomach; Gluteals / Lower Back; Neck / Shoulders; Arms - Prone; Arms - Supine; Legs - Prone; Legs - Supine; Feet; Head / scalp; Face / sinuses
<b>Where any specific trigger points used?</b>	Rhomboids; Upper Traps; Lev Scaps; TFLs
<b>Body Chart</b>	
<b>Feedback after treatment -</b>	Best massage she's ever had
<b>Plan for future results / treatment / progress / homework (including discussion with client, advice, stretches)</b>	Discussed doing more in the future, including some side lying massage.
<b>Infra-Red Sauna (if applicable - info is below)</b>	
<b>Time in Sauna (minutes) -</b>	
<b>Feedback after treatment -</b>	

## Patient Forms

### New Client Record - Women's Health

**Practitioner:** Christine Jervis  
**Appointment:** 6 Nov 2024, 9:30AM

Completed: 24 Oct 2024, 4:05PM

**About you...**

<b>What's your health fund?</b>	BUPA
<b>Occupation - how long?</b>	Retired maybe 5 years
<b>List your physical activities, hobbies, exercise or sport.</b>	Walking, gardening, cooking . catching up with friends.
<b>Do you sit/stand for long hours? (E.g. car/desk)</b>	No move regularly.
<b>Medications - prescribed or natural</b>	Rosuvastatin, levothyroxone, candersartan,.felodipine, pantoparazole, spren. Magnesium and multi vitamin.
<b>Medical History - recent and past operations, illnesses, accidents, injuries or broken bones.</b>	Tonsils and adenoids, 2 c sections, biopsy on left breast, carpal tunnel release, wisdom tooth extraction.

**About Massage...**

<b>How did you find out about our massage clinic?</b>	<input type="checkbox"/> Google <input checked="" 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
<b>Who referred you? We use a client reward system - May we thank them?</b>	N/A
<b>Type of massage pressure you prefer?</b>	<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)
<b>What are your goals or reasons for getting massage?</b>	Better mobility and wellbeing.
<b>Any areas you DON'T want massaged?</b>	<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 type="checkbox"/> Ok with above areas being massaged <input checked="" type="checkbox"/> Not sure? (Our Massage Therapist can discuss reasons for massaging different areas at y
<b>Do you experience headaches?</b>	<input checked="" type="checkbox"/> No <input type="checkbox"/> Mild <input type="checkbox"/> Severe <input type="checkbox"/> Persistent <input type="checkbox"/> Migraines
<b>Abdominal Massage helps digestive problems. Do you suffer any digestive complaints?</b>	<input checked="" 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 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 checked="" type="checkbox"/> Occasionally experience problems
<b>Do you have any pain?</b>	<input type="checkbox"/> No pain - nothing hurts <input checked="" type="checkbox"/> Morning soreness <input type="checkbox"/> Night time pain <input checked="" type="checkbox"/> Varies - can be any time <input type="checkbox"/> All the time <input type="checkbox"/> Hurts doing something specific. E.g. Bending over to touch toes. <input type="checkbox"/> Tender to touch <input type="checkbox"/> Dull pain <input type="checkbox"/> Aching or throbbing <input type="checkbox"/> Sharp pain



☒ Stiffness    ☒ Muscle tightness    ☐ Restricted movement

**If your body hurts, what relieves it?**

☐ I have no pain to manage    ☒ Ice    ☒ Heat    ☒ Rest    ☒ Exercise  
☒ Stretching    ☒ Medication    ☒ Topical Cream (E.g. Tiger Balm)

**Some conditions affect massage. We want to safely treat you. Tick what applies to you -**

☐ Allergies    ☐ Asthma    ☐ Sinus    ☒ Anxiety    ☐ Depression  
☐ Trouble falling asleep    ☐ Trouble staying asleep through the night  
☒ Arthritis    ☒ Osteoporosis    ☐ Spinal problems    ☒ Swelling  
☒ Bruise Easily    ☐ Blood clotting problems    ☐ 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?**

No.

## 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?**

Tailbone

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

2 c sections

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

No.

**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? No.

## 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? 2

How many babies have you birthed? 2

Have you had any birth interventions or complications? High blood pressure 1st pregnancy requiring hospital rest in the last month.

How long were your birth hours for each delivery? N/A

Any other info you would like to share? No.

## 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.



