



Lauterstein-Conway
Massage School & Clinic

Outside Massage Form #5: Orthopedic: Piriformis & Sacroiliac OR Low Back Pain

Client _____ Due Date _____ Class 85a _____

Student _____ Group _____ Date _____

Case Study #5:

Client is a 40-year-old person presenting with restricted ROM in the right shoulder and both hips, as well as left SI joint and posterior gluteal pain. Client practices high intensity combat sports that place stress on the body leading to muscular imbalances. Client has a history of low back pain and significant reductions in hip ROM.

Write five client specific questions to ask during the interview:

1. _____

2. _____

3. _____

4. _____

5. _____

Treatment plan and modifications:

Expected Outcomes:



Treatment Record

Client Name _____

Date _____

Student Therapist _____

S: Subjective or what the client reports about their status
(client goals, functional limitations, and diagnosis/clearance from a physician)

O: Objective or findings made by the therapist
(client posture, client movement, palpation of client during interview, details of focus area treatment)

Prone:

Supine:

A: Assessment or how the client rates the pain or discomfort of a focus area
(0-10, 0 = no pain, 5 = moderate pain, 10 = worst possible pain, recorded before and after treatment)

Before treatment:

After treatment:

P: Plan or a strategy for further care

(client education, self care such as movement or stretches, future massage session ideas, referrals)

Personal reflection or meaningful insights made by the therapist about the therapist



Lauterstein-Conway
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Outside Massage Form # 6: Orthopedic: Rotator Cuff & Carpal Tunnel OR Thoracic Outlet

Client _____ Due Date _____ Class 85a

Student _____ Group _____ Date _____

Case Study # 6:

Client is a 26-year-old who complained of stiffness and swelling in their overworked fingers of the left hand (violinist). Client tested positive for thoracic outlet syndrome and nerve impingement. (Consider the ergonomics).

Write five client specific questions to ask during the interview:

1. _____

2. _____

3. _____

4. _____

5. _____

Treatment plan and modifications:



Treatment Record

Client Name _____

Date _____

Student Therapist _____

S: Subjective or what the client reports about their status
(client goals, functional limitations, and diagnosis/clearance from a physician)

O: Objective or findings made by the therapist
(client posture, client movement, palpation of client during interview, details of focus area treatment)

Prone:

Supine:

A: Assessment or how the client rates the pain or discomfort of a focus area
(0-10, 0 = no pain, 5 = moderate pain, 10 = worst possible pain, recorded before and after treatment)

Before treatment:

After treatment:

P: Plan or a strategy for further care

(client education, self care such as movement or stretches, future massage session ideas, referrals)

Personal reflection or meaningful insights made by the therapist about the therapist
