

# How to fill out your:

## Treatment Record

Client Name Don't forget to

Student Therapist write first + last names!

Date 8.25.20

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

What: Why is your client here today? Goal of the session.

Focus: Where to spend more time or focus?

Avoid: Where not to massage or be cautious?

Lubricant: Allergies/preferences.

Other: Pressure, stretches, likes/dislikes, more notes.

→ Repeat all of this back to client

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

Posture: What do you see?

Palpation: Palpate the focus areas

Observation: Watch the client move/walk/ROM/sit/stand etc.

Prone: 3-4 areas, 2-3 techniques per area

Supine: 3-4 areas, 2-3 techniques per area

Keep it simple, detailed, and to the point

Avoid these words: Massage, work, + routine

No need to write modalities, use the checkboxes on the back page for stretches, BMTs, Deep tissue, + ortho

Be specific!

**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:**

How did they feel when they arrived?  
- or -

Where + what + number/rating

**After treatment:**

→ and after the session

Include focus areas

Do not leave blank or write 0. Find something to assess.

**P: Plan** or a strategy for further care

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

Do not write anything not taught at TLC - foam rolling, yoga, supplements, vitamins, nutrition, etc.

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

Don't write about client here unless it's a lesson. What did you learn or take away? Something you enjoyed or felt challenged by.

Example:

Treatment Record

Client Name Benjamin James

Student Therapist Cristel McCarthy

ate 8.25.20

**S: Subjective** or what the client reports about their status

(client goals, functional limitations, and diagnosis/clearance from a physician)

What: wants relaxing massage, started working out

Focus: Pecs, shoulders, hamstrings (all feel tight w/ tension)

Avoid: Bottom of feet (ticklish) + bruise on R tibia

Lube: OK with gel. No allergies.

Other: wants med-firm pressure. Loves scalp massage. Less time on arms.

**O: Objective** or findings made by the therapist

(client posture, client movement, palpation of client during interview, details of focus area treatment)

Posture: Sits tall. R shoulder higher. Head forward.

Palpate: Felt tension in both peCS, shoulders more tense @ neck

observe: Positive mood, excited to finally get worked on

**Prone:**

Traps - Eff, iron, cross fiber

Rhomboids - Circular eff, strip

Deltoids - knead, eff

Hamstrings - Comp eff, knead, strip

**Supine:**

Quads - Eff, full, wring, knead,  
comp. eff

Pecs - Circular friction, comp. eff

Scalp - Superficial + deep friction

**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:**

Client feels relaxed

or

Pecs tension 4

Hamstring tightness 5

**After treatment:**

Client is sleepy + feels good

or

Pecs tension 3

Hamstring tightness 2

**P: Plan** or a strategy for further care

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

Drink water throughout day. Stretch regularly (gave leg stretch paper).

Schedule every 2-3 weeks. Next session, more time on upper body (30+min)

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

I need to remember to lower my table next time, especially when I  
might need more pressure. Eat a snack between sessions, even if  
I'm not hungry!