76b Orthopedic Massage: Technique Demo and Practice - Low Back Pain

76b Orthopedic Massage: Technique Demo and Practice - Low Back Pain Class Outline

15 minutes Break

5 minutes Attendance, Breath of Arrival, and Reminders

75 minutes 1st trade technique demo and practice

20 minutes Break and switch tables

75 minutes 2nd trade technique demo and practice

20 minutes Break down, clean up, and discussion

Total time: 3 hours 30 minutes

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Early Warning:

• 85a Orthopedic Massage: Outside Massages – Begin these now!

Quizzes:

- 78a Kinesiology Quiz (erectors, lats, quadratus lumborum, multifidi, rotatores)
- 81a Kinesiology Quiz (supraspinatus, infraspinatus, teres minor, subscapularis, flexor digitorum superficialis, extensor digitorum, flexor pollicis longus, flexor digitorum profundus)

Spot Checks:

- 78b Orthopedic Massage: Spot Check Low Back Pain
- 81b Orthopedic Massage: Spot Check Rotator Cuff & Carpal Tunnel

Preparation for upcoming classes:

- 77a Special Populations: Introduction
 - Salvo: Chapter 11.
 - Packet K: 1-10.
- 77b Orthopedic Massage: Technique Review and Practice Low Back Pain
 Packet J: 69-76 and 77-78.

Classroom Rules

Punctuality - everybody's time is precious

- Be ready to learn at the start of class; we'll have you out of here on time
- Tardiness: arriving late, returning late after breaks, leaving during class, leaving early

The following are not allowed:

- Bare feet
- Side talking
- Lying down
- Inappropriate clothing
- Food or drink except water
- Phones that are visible in the classroom, bathrooms, or internship

You will receive one verbal warning, then you'll have to leave the room.

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J - 69

Soft-Tissue Manipulation Prone Details

1. Low back: superficial fascia assessment

- Work without lubricant
- Use your palm and fingers to apply light tangential pulling pressure
- Place your fingertips flatly on the skin surface
- Press in just enough to traction the superficial fascia without sliding
- Slowly traction in all directions taking note of restrictions
- Use before and after treating superficial fascia to gauge progress

2. Low back: myofascial release (bilateral)

- Work without lubricant
- Assess the fascia before and after to track effectiveness
- Arms crossed: place hands 5 to 10 inches apart on either side of the spine
- Apply a light degree of pulling force between the hands
- Hold. Wait for a subtle sensation of tissue release or a working sign
- Slowly release and repeat (between the sacrum and T10)

3. Low back: warming and softening

- Address thoracolumbar fascia, lats, erectors, and QL
- BMTs: spinal rotation and release with erector compressions
- Swedish: effleurage, wringing, pulling, and skin rolling
- Deep tissue: QL deep effleurage
- Tissues must be thoroughly warmed and softened before proceeding

4. Erector spinae: deep longitudinal stripping

- Address lumbar sections of spinalis, longissimus, and iliocostalis
- Use thumbs or fingertips with hands stacked for stability
- Strip longitudinally and superiorly, working in 2-4 inch sections
- Melt in or repeat stripping in areas of palpated or reported tension
- Progressively work more deeply as tissues soften

5. Quadratus lumborum: deep longitudinal stripping

- Address the 3 angles of QL muscle fibers
 - 1. Iliac crest diagonally to lumbar transverse processes 1-4
 - 2. Iliac crest superiorly to the 12th rib

(Move to the opposite side of the table)

- 3. Lumbar transverse processes 1-4 diagonally to the 12th rib
- Melt in or repeat stripping in areas of palpated or reported tension
- Progressively work more deeply as tissues soften

6. Lamina groove: deep longitudinal stripping

- Address the lumbar sections of multifidi and rotatores
- Use thumbs or fingertips with hands stacked for stability
- Strip longitudinally and superiorly, working in 2-4 inch sections
- Melt in or repeat stripping in areas of palpated or reported tension
- Progressively work more deeply as tissues soften

Repeat on the other side starting with "3. Low back: warming and softening".

Soft-Tissue Manipulation Side-Lying Details

7. Side-lying: draping and positioning

- Keep the client fully covered with sheet and blanket

8. Quadratus lumborum: pin and stretch with active engagement

- Only use in non-acute stages and check in with the client because this may be intense or may exacerbate symptoms
- Instruct the client:
 - o "I'm going to hold the sheet and blanket while you reposition."
 - o "Lie on your side diagonally with your head at the top front corner and your hips at the back edge of the middle of the table."
 - o "Slightly flex your bottom hip and knee so they stay on the table."
 - o "Hang your top leg off the table behind you."
 - o "Grasp the top edge of the table with your top hand to stabilize the torso and further stretch the lateral trunk muscles"
- Keeping the client completely covered with the sheet, move the blanket out of the way to help gain access to the QL

8. Quadratus lumborum: pin and stretch with active engagement, continued

- Using a thumb wrapped in your index finger OR two thumbs side-by-side,
 press medially to clearly but compassionately pin the QL
- Instruct the client:
 - o "Take the weight of your leg and hike your hip toward your ribs."
 - o "Slowly release the hip hike and then lower the leg toward the floor behind you to stretch this muscle that I am pinning."
 - o "Bring your leg back up and hike your hip again."
 - o Repeat to facilitate more tension reduction up 3 repetitions total
 - o "We're done. Bring your top leg forward to rest on the table."
- VARIATION: instead of pinning, strip the QL fibers inferiorly or superiorly as the client releases the hip hike and adducts the leg

9. Quadratus lumborum: active-assisted stretch after PIR

- Only use in non-acute stages and check in with the client because this may be intense or may exacerbate symptoms
- Instruct the client:
 - o "I'm going to hold the sheet and blanket while you reposition."
 - o "Lie on your side diagonally with your head at the top front corner and your hips at the back edge of the middle of the table."
 - o "Slightly flex your bottom hip and knee so they stay on the table."
 - o "Hang your top leg off the table behind you."
 - o "Grasp the top edge of the table with your top hand to stabilize the torso and further stretch the lateral trunk muscles"
- Keeping the client completely covered with the sheet, move the blanket out of the way to help gain access to the QL

9. Quadratus lumborum: active-assisted stretch after PIR, continued

Instruct the client:

- "Inhale and hold your breath as you take the weight of your leg and hike your hip toward your ribs. Hold this for 5 seconds." (isometric contraction)
- "Slowly release your breath and the hip hike." (PIR)
- "Lower your leg toward the floor behind you."
- "I'm going to press down on your hip to get a stretch."
- "Let me know when this is a good stretch for you."
- Hold stretch for 3 of your breath cycles
- "Bring your leg back up and I will support the weight of your leg."
- Repeat to facilitate more length up to 3 repetitions total
- "We're done. Bring your top leg forward to rest on the table."



Repeat on the other side starting with "8. Quadratus lumborum: pin and stretch".

Soft-Tissue Manipulation Supine Details

Draping:

Keep the client fully covered with sheet and blanket

10. Iliopsoas: active-assisted stretch after PIR

- Instruct the client:
 - o "I'm going to hold the sheet and blanket while you reposition."
 - o "Lie diagonally with your head and hips at opposite sides of the table and your outside leg hanging off the table."
 - o "Pull your inside knee up into your chest and hold it there" (reducing lumbar extension reduces Z-joint compression)
 - o "Inhale and hold your breath. Using only 25% of your strength, lift your hanging leg with knee bent against my resistance and hold for 5 seconds." (isometric hip flexion)
 - o "Slowly release your breath and your contraction, allowing your leg to lower." (post-isometric relaxation, PIR)
 - o "Let me know when this stretch feels good."
 - o Hold stretch for 3 of your breath cycles
 - o Repeat to facilitate more length up 3 repetitions total
 - o "We're done with this side. I'll hold the sheet and blanket while you reposition yourself on the table."

11. Quadriceps femoris: superficial fascia assessment

- Work without lubricant
- Use your palm and fingers to apply light tangential pulling pressure
- Place your fingertips flatly on the skin surface
- Press in just enough to traction the superficial fascia without sliding
- Slowly traction in all directions taking note of restrictions
- Use before and after treating superficial fascia to gauge progress

12. Quadriceps femoris: myofascial release

- Work without lubricant
- Assess the fascia before and after to track effectiveness
- Arms crossed: place hands 2 to 10 inches apart
- Apply a light degree of pulling force between the hands
- Hold. Wait for a subtle sensation of tissue release or a working sign
- Slowly release and repeat to address the entire quadriceps femoris

13. Quadriceps femoris: warming and softening

- Address all 4 quad muscles, but focus on rectus femoris
- BMTs: supine hip rotation with leg compressions
- Swedish: effleurage, fulling, kneading, and skin rolling
- Deep tissue: deep effleurage, petrissage, and wringing/fiber spreading
- Tissues must be thoroughly warmed and softened before proceeding

14. Quadriceps femoris: deep longitudinal stripping

- Address entire length of rectus femoris
- Use thumbs or fingertips with hands stacked for stability
- Work superiorly in 2-4 inch sections
- Melt in or repeat stripping in areas of palpated or reported tension
- Progressively work more deeply as tissues soften

Repeat on the other leg, "10. Iliopsoas: active-assisted stretch after PIR".

Soft-Tissue Manipulation Prone (again) Details

PRONE (again) DETAILS - Low Back Pain

15. Rectus femoris: passive stretch

- Mobilization of the hip joint with the knee flexed to 90 degrees
- Traction to slightly open the hip joint
- "I'm going to stretch your quads. Let me know when the stretch is good for you"
- Slowly bring the calcaneus toward the ischial tuberosity
- When the client indicates a good stretch, hold the stretch for 3 of your breath cycles
- Slowly release and mobilize the hip joint again

PRONE (again) DETAILS - Low Back Pain

15. Rectus femoris: passive stretch, continued

- VARIATION: to enhance the stretch with emphasis on the rectus femoris
- "I'm going to enhance this stretch by lifting your leg and placing it on top of my leg"
- Fully flex the knee of you foot-leg and place it on the table just inferior to the client's flexed knee
- Gently lift the client's leg and slide your leg in between it and the table
- Place your head-hand on the sacrum with slight anterior and inferior pressure to counteract any over emphasis of the lumbar lordosis
- "Is this position comfortable for you?
- "Let me know when this stretch is good for you"
- Slowly bring the calcaneus toward the ischial tuberosity
- When the client indicates a good stretch, hold the stretch for 3 of your breath cycles
- Slowly release and repeat if needed

Repeat on the other side starting with "15. Rectus femoris: passive stretch".

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