## 86b Orthopedic Massage: Technique Review and Practice - Neck Pain

# 86b Orthopedic Massage: Technique Review and Practice - Neck Pain Class Outline

15 minutes Break

5 minutes Attendance, Breath of Arrival, and Reminders

75 minutes 1<sup>st</sup> trade technique demo and practice

20 minutes Break and switch tables

75 minutes 2<sup>nd</sup> trade technique demo and practice

20 minutes Break down, clean up, and discussion

Total time: 3 hours 30 minutes

## 86b Orthopedic Massage: Technique Review and Practice - Neck Pain Class Outline

#### Exam:

• 89a Practice MBLEx (100 questions in 120 minutes)

#### Quizzes:

- 87a Kinesiology Quiz (semispinalis, splenius capitis, and splenius cervicis)
- 90a Kinesiology Quiz (erectors, multifidi, rotatores, quadratus lumborum, levator scapula, trapezius, splenius capitis, splenius cervicis, and semispinalis capitis)

#### Spot Checks:

- 87b Orthopedic Massage: Touch Assessment
- Bring your grading sheet for evaluation A: 87

#### Preparation for upcoming classes:

- 87a MBLEx Prep
  - Using ABMP Exam Coach, select "Study Subjects", and then "Career Development"
  - For each of the 4 Massage Theory Topics, "Take a Practice Quiz" 4 times (16 total)
  - Research anything that isn't clear on the Internet and bring what you find to class
- 87b Orthopedic Massage: Touch Assessment

#### 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.

The following slides are included at the end of this presentation so that you may refer to the details of techniques during review classes.

Includes:
Neck pain- detailed
SI/Piriformis- simple
Low back pain- simple
RC/CT- simple
TOS- simple

## 86b Orthopedic Massage: Technique Review and Practice - Neck Pain

Packet J - 117

## **SUPINE** 1. Posterolateral neck: superficial fascia assessment (bilateral) 2. Posterolateral neck: myofascial release 3. Posterolateral neck: warming and softening 4. Posterolateral neck: deep longitudinal stripping 5. Lamina groove: deep longitudinal stripping 6. Cervical extensors: deep stripping with active lengthening after PIR 7. Cervical lateral flexors: deep stripping with active lengthening after PIR 8. Passive stretches: neck lateral flexion 9. Passive stretches: neck rotation

## Neuromuscular Neck Pain Protocol-Soft-Tissue Manipulation Supine Details

#### 1. Posterolateral neck: superficial fascia assessment (bilateral)

- Work without lubricant and remove any from you and your client
- Sit at the head of the table facing down toward the feet
- Client's head and neck are in a neutral position
- Place your finger pads flatly on the skin surface working bilaterally
- Apply light tangential pulling pressure without sliding
- Take note of restrictions before switching to a different area or direction
- Use before and after treating superficial fascia to gauge progress1

#### 2. Posterolateral neck: myofascial release (bilateral)

- Work without lubricant and remove any from you and your client
- Sit at the head of the table facing down toward the feet
- Client's head and neck are in a neutral position
- Place your finger pads flatly on the skin surface working bilaterally
- Apply light tangential pulling pressure without sliding
- Hold. Wait for a subtle tissue release or indication from the client
- Repeat in different areas or in different directions
- Address all restrictions discovered in the posterolateral neck

#### 3. Posterolateral neck: warming and softening

- Address upper trapezius, levator scapula, subocciptals, splenius, semispinalis, erectors, multifidi, and rotatores
- BMT: head & neck rotation with posterior cervical compressions & release
- BMT: alternating scapular depressions with trapezius compressions
- Swedish:
  - o Sit at the head of the table facing down toward the feet
  - o Work unilaterally with head rolled <u>slightly</u> to the opposite side
  - o Effleurage longitudinally
  - o Fingertip circles
  - o Broad cross-fiber with one thumb, progressing inferiorly
- Continue until the muscles are thoroughly warmed and softened

#### 4. Posterolateral neck: deep longitudinal stripping

- Address upper trapezius, levator scapula, subocciptals, splenius, semispinalis, erectors, SCM, scalenes, multifidi, and rotatores
- Sit at the head of the table facing down toward the feet
- Work unilaterally with head rolled <u>slightly</u> to the opposite side
- Use finger pads to work in 2 to 4 inch sections
- Work inferiorly
- Melt in or repeat in areas of palpated or reported tension
- Progressively work more deeply as tissues soften

#### 5. Lamina groove: deep longitudinal stripping

- Address multifidi and rotatores
- Lamina groove is between transverse and spinous processes
- Sit at the head of the table facing down toward the feet
- Work unilaterally with head rolled <u>slightly</u> to the opposite side
- Use finger pads to work in 2 to 4 inch sections
- Work inferiorly
- Melt in or repeat in areas of palpated or reported tension
- Progressively work more deeply as tissues soften

#### 6. Cervical extensors: deep stripping with active lengthening after PIR

- Address upper trapezius, levator scapula, subocciptals, splenius, semispinalis, erectors, multifidi, and rotatores
- Sit at the head of the table facing down toward the feet
- Work unilaterally with the client's head in a neutral position
- Instruct the client:
  - o "Using light pressure (25%), press your head back into the table" (isometric neck extension)
  - o "Hold this pressure for 5 seconds and then slowly relax your head" (post-isometric relaxation)
  - o "Now slowly lift your head bringing your chin to your chest"
- As the client does this, strip the cervical extensors inferiorly
- Repeat a few times.
- Progressively work more deeply as tissues soften

#### 7. Cervical lateral flexors: deep stripping with active lengthening after PIR

- Address upper trapezius, levator scapula, SCM, scalenes, splenius, and erectors
- Work unilaterally with the client's head in a neutral position
- Stand or sit by the belly facing toward the head of the table
- Place your outside hand along the side of the head to resist lateral flexion
- Instruct client:
  - o "Keeping your nose pointing toward the ceiling, slide your left (right) ear toward your left (right) shoulder"
  - o "Using light pressure (25%), press the side of your head into my hand" (isometric neck lateral flexion)
  - o "Hold this pressure for 5 seconds and then slowly relax your head" (post-isometric relaxation)
  - o "Now slowly slide your head toward the opposite shoulder."
- As the client does this, strip the cervical lateral flexors inferiorly
- Repeat a few times.
- Progressively work more deeply as tissues soften

8. Passive stretches: neck lateral flexion

9. Passive stretches: neck rotation

## Piriformis/SI Joint Dysfunction Protocol: **PRONE** 1. Sacroiliac ligament: deep transverse friction 2. Low back: superficial fascia assessment 3. Low back: myofascial release 4. Gluteals: draping 5. Gluteals: superficial fascia assessment 6. Gluteals: myofascial release 7. Low back: warming and softening 8. Low back: deep longitudinal stripping 9. Sacroiliac ligament: deep transverse friction 10. Hamstrings: warming and softening 11. Hamstrings: deep longitudinal stripping 12. Gluteals: warming and softening 13. Piriformis: deep longitudinal stripping 14. Piriformis: pin and stretch 15. Piriformis: deep longitudinal stripping after PIR 16. Piriformis: passive stretching after PIR 17. Sacroiliac ligament: deep transverse friction

#### **SUPINE**

- 18. Gluteals: passive stretch
- 19. Low back: passive stretch
- 20. Hamstrings: active-assisted stretch with PIR

#### **Low Back Pain Protocol:**

#### **PRONE**

- 1. Low back: superficial fascia assessment
- 2. Low back: myofascial release
- 3. Low back: warming and softening
- 4. Erector spinae: deep longitudinal stripping
- 5. Quadratus lumborum: deep longitudinal stripping
- 6. Lamina groove: deep longitudinal stripping

#### **SIDE-LYING**

- 7. Side-lying: draping and positioning
- 8. Quadratus lumborum: pin and stretch with active engagement
- 9. Quadratus lumborum: active-assisted stretch after PIR

#### **SUPINE**

- 10. Iliopsoas: active-assisted stretch after PIR
- 11. Quadriceps femoris: superficial fascia assessment
- 12. Quadriceps femoris: myofascial release
- 13. Quadriceps femoris: warming and softening
- 14. Quadriceps femoris: deep longitudinal stripping

#### **PRONE**

15. Rectus femoris: passive stretch

#### **Rotator Cuff and Carpal Tunnel Protocol:**

#### **SEATED**

1. TCL: myofascial release

#### **PRONE**

- 2. Upper back and shoulder: superficial fascia assessment
- 3. Upper back and shoulder: myofascial release (bilateral)
- 4. Upper back and shoulder: warming and softening
- 5. Upper back and shoulder: deep longitudinal stripping
- 6. Supraspinatus insertion tendon: deep transverse friction
- 7. GH lateral rotators: warming and softening
- 8. GH lateral rotators: deep longitudinal stripping
- 9. GH lateral rotators: deep stripping with active engagement lengthening
- 10. GH lateral rotators: passive stretch
- 11. Triceps and anterior forearm: superficial fascia assessment
- 12. Triceps and anterior forearm: myofascial release
- 13. Triceps and anterior forearm: warming and softening
- 14. Anterior forearm: deep effleurage distally

#### **Rotator Cuff and Carpal Tunnel Protocol continued:**

#### **SUPINE**

- 15. Chest and anterior deltoid: superficial fascia assessment
- 16. Chest and anterior deltoid: myofascial release
- 17. Chest and anterior deltoid: warming and softening
- 18. Chest and anterior shoulder: deep longitudinal stripping
- 19. Subscapularis: deep friction and melting
- 20. Subscapularis: passive stretch

- 21. Anterior upper extremity: warming and softening
- 22. Finger and wrist flexors: deep stripping with active lengthening
- 23. Flexor pollicis brevis: passive stretch
- 24. Median nerve: mobilization

## **Thoracic Outlet Syndrome Protocol: SEATED** 1. Vertebrobasilar insufficiency test (VBI test) **SUPINE** 2. Upper chest: superficial fascia assessment 3. Upper chest: myofascial release 4. Upper chest: warming and softening 5. Pectoralis minor: deep longitudinal stripping 6. Pectoralis minor: pin and stretch 7. Anterolateral neck: superficial fascia assessment 8. Anterolateral neck: myofascial release 9. Anterolateral neck: warming and softening 10. Scalenes: deep longitudinal stripping 11. Scalenes: deep longitudinal stripping with active lengthening after PIR 12. Brachial plexus: mobilization 13. Passive stretches: neck lateral flexion 14. Passive stretches: neck rotation

## 85b Orthopedic Massage: Technique Demo and Practice - Neck Pain