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

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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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Class Reminders

Spot Checks and Assessments:

- 87b Orthopedic touch Assessment

Exams and Quizzes:

- 89a Practice MBLEx
  - 100 Questions in 120 minutes
- 90a Kinesiology Quiz (erectors, multifidi, rotatores, quadratus lumborum, levator scapula, trapezius, splenius capitis and cervicis, semispinalis capitis)

Assessments:

- 87b Orthopedic Touch Assessment

Preparation for upcoming classes:

- 87a MBLEx Prep
- 87b Orthopedic 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

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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

SUPINE DETAILS - Neck Pain

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

SUPINE DETAILS - Neck Pain

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

SUPINE DETAILS - Neck Pain

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:
  - Sit at the head of the table facing down toward the feet
  - Work unilaterally with head rolled slightly to the opposite side
  - Effleurage longitudinally
  - Fingertip circles
  - Broad cross-fiber with one thumb, progressing inferiorly
- Continue until the muscles are thoroughly warmed and softened

SUPINE DETAILS - Neck Pain

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 slightly 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

SUPINE DETAILS - Neck Pain

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 slightly 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

SUPINE DETAILS - Neck Pain

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:
  - "Using light pressure (25%), press your head back into the table" (isometric neck extension)
  - "Hold this pressure for 5 seconds and then slowly relax your head" (post-isometric relaxation)
  - "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

SUPINE DETAILS - Neck Pain

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:
    - "Keeping your nose pointing toward the ceiling, slide your left (right) ear toward your left (right) shoulder"
    - "Using light pressure (25%), press the side of your head into my hand" (isometric neck lateral flexion)
    - "Hold this pressure for 5 seconds and then slowly relax your head" (post-isometric relaxation)
    - "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

SUPINE DETAILS - Neck Pain

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

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