



ADVANCED MASSAGE TECHNIQUES

COURSE MANUAL



Brighton School of Massage

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What is Advanced Massage?

Advanced means:

- Accessing deeper muscle groups.
- You would include stretches.
- You are performing tailored and specific techniques, such as, cross fibre work, pressure points.
- You work at a 45 degree angle to the muscle.
- You work specific muscle groups from: prone, side lying and supine position.
- Your applicators are: Heel of hand; fist, forearm, reinforced fingers.
- You would start with postural analysis

Recommended book: Muscles Manual Book – Dr. Nikita A. Vizniak

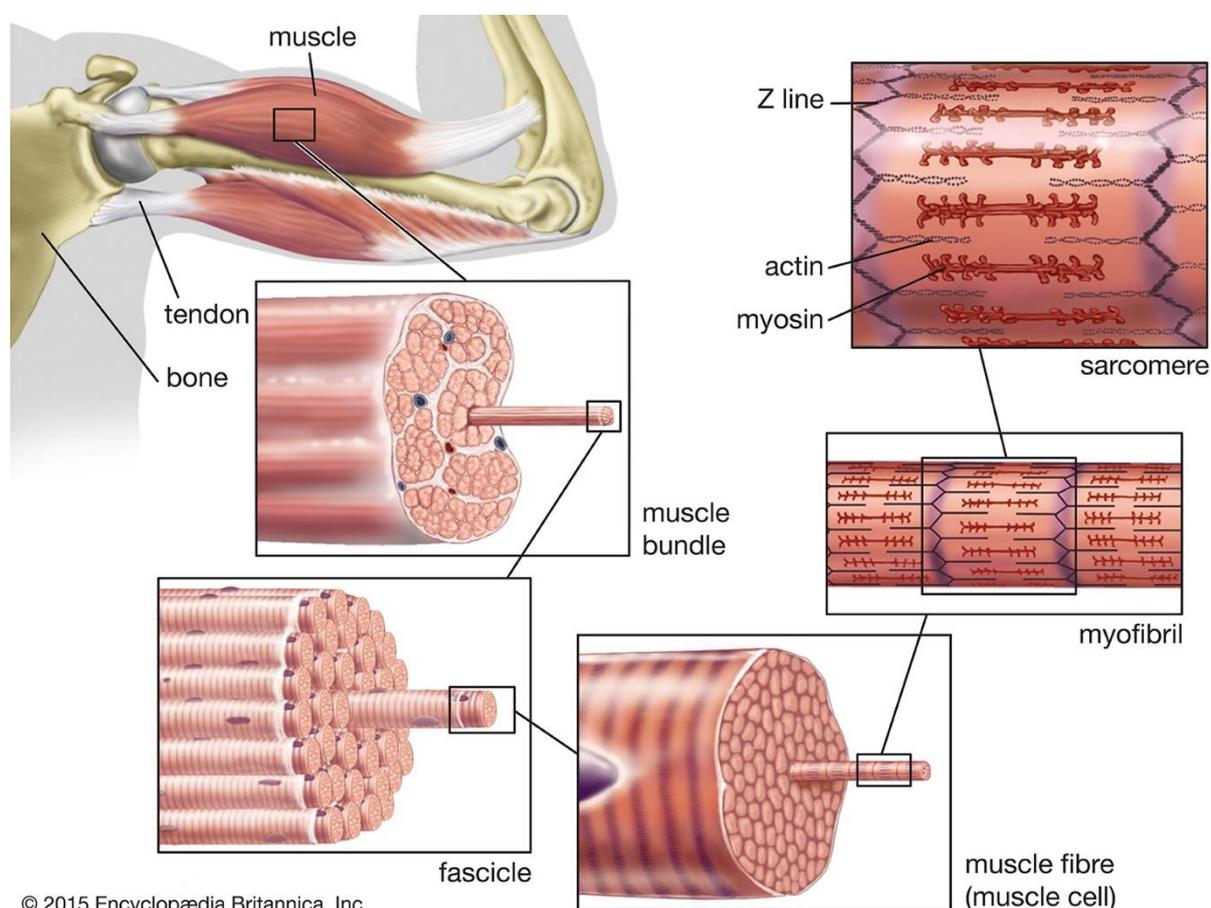
The Muscular System

Muscle Structure

Muscles are classified into three different types, which are skeletal, smooth and cardiac.

For the purpose of this course, we are mainly going to concentrate on skeletal muscle, as smooth muscle is mainly found within hollow organs and cardiac muscle is found within the heart.

Skeletal muscles, also known as striated due to its appearance, or voluntary due to its action, are attached to bones and deal with movement. These muscles are made up of fine, thread like fibres of muscles, containing light and dark bands. Skeletal muscles can be made to contract and relax by voluntary will. They have striations due to the actin and myosin fibres and create movement when contracted. There are over 650 different types of muscles in the human body, making up nearly half of the body weight.



Muscles have the following properties:

Excitability – the muscle responds to stimuli

Contractibility – the muscle shortens due to a nerve impulse

Extensibility – the muscle can stretch and increase its length by half

Elasticity – the muscle will return to its normal length

Muscles consist mainly of muscle fibres which are held together by fibrous connective tissue, with numerous blood vessels and nerves penetrating through them. The muscle fibres are made up of muscle cells, which vary in length and are rod shaped. The fibres are called myofibrils and they get shorter (contract) in response to a nerve impulse. The protein strands then slide against each other when the muscle contracts.

Each muscle fibre has an individual wrapping of a fine connective tissue called endomysium, which are then wrapped into bundles called fascicule and are covered by the perimysium. This is what forms the muscle belly, and has its own covering called the fascia epimysium. The fascia acts as a “clingfilm” around muscles, giving them support and also acts as a pathway for nerves, blood, and lymph vessels.

When a muscle is damaged, fibres become torn and the connective tissue around the muscle is also damaged. Fluid seeps out of torn fibres, which can cause localised swelling. This fluid tends to stick the fibres together which causes pain as the muscle is irritated by the slightest contraction. The fibres stop sliding as effectively and the fascia gets tighter and begins to constrict the muscle. The fascia can also become torn, and the loss of elasticity can create tissue congestion. If the body is held in the same position for too long, such as sat at a computer, then the fascia can easily adapt to that shortened position, and any attempts to return it to its normal length can be painful. There is then a temptation to remain in that position, which in turn worsens it.

Muscle Shapes

The bundles of fibres within muscles will determine the shape of the muscle. The most common muscle fibre arrangements are:

Parallel fibres – these muscles have fibres that run parallel to each other in length and can sometimes be called strap muscles. These muscles have great endurance but may not be that strong due to their length. An example would be the Sternocleidomastoid (SCM).

Circular muscles – these muscles are usually circular in shape and an example would be the muscles surrounding the mouth and eye.

Convergent – this is where the muscle fibres converge to an attachment to a bone. The fibres are arranged to allow maximum force and can sometimes cross joints which have a large range of movement such as the Pectoralis Major.

Pennate – these are made up of short fibres, so the pull is short but also strong, though the muscle tires easily.

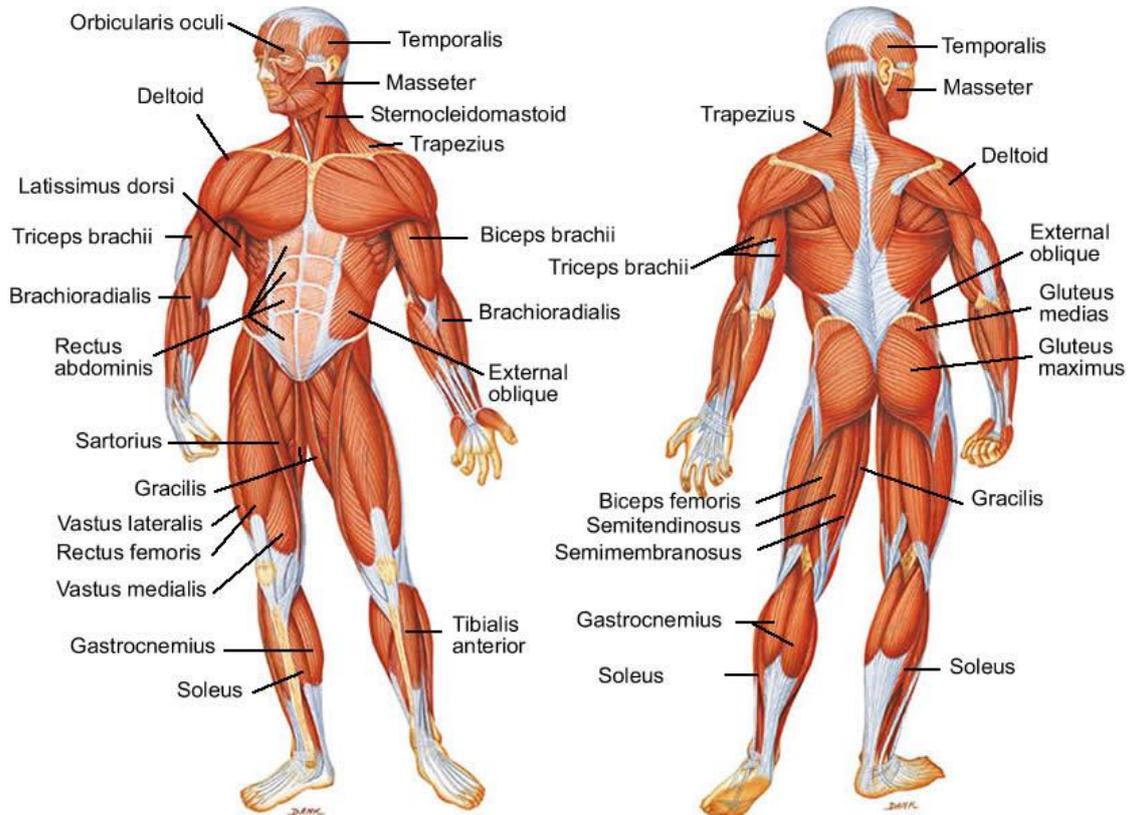
Fusiform – these are sometimes included within the parallel muscle group and are made up of spindle shaped fibres. A good example is the Biceps Brachii as the belly is wider than the origin and the insertion.

Muscle Movement

Muscles are only every able to contract or pull. This means they have to work in groups and even when carrying out an action, do not work alone. A joint, therefore has to have two or more muscles working together.

As a muscle contracts, the second muscle relaxes, and as this second muscle contracts, the first muscle relaxes. This is called Antagonistic action as they are pulling in the opposite direction to each other but without working against each other. One end of the muscle needs to be fixed, which is known as the origin and as that muscle contracts, the other end of the muscle moves towards the origin. The name given to the end of the muscle that moves towards the origin is called the insertion.

Muscles of the Body



Muscles of the Chest and Upper Arm

Name	Position	Action
Pectoralis major	Across upper chest	Used in throwing and climbing; adducts arms
Pectoralis minor	Underneath pectoralis major	Draws shoulders downwards and forwards
Deltoids	Surrounds shoulders	Lifts arms sideways, forwards and backwards
Biceps	Front of upper arm	Flexes elbow; supinates the forearm and hand
Triceps	Back of upper arm	Extends the elbow
Brachialis	Under the biceps	Flexes the elbow

Muscles of the Hand and Forearm

Name	Position	Action
Brachio radialis	On the thumb-side of the forearm	Flexes the elbow
Flexors	Middle of the forearm	Flexes and bends the wrist drawing it towards the forearm
Extensors	Little finger side of the forearm	Extends and straightens the wrist and hand
Thenar muscle	Palm of the hand below the thumb	Flexes the thumb and moves it outwards and inwards
Hypothenar muscle	Palm of hand below little finger	Flexes little finger and moves it outwards and inwards

Muscles of the Abdomen

Name	Position	Action
Rectus abdominis	Front of abdomen from the pelvis to the sternum .	Flexes the spine; compresses the abdomen; tilts the pelvis
Oblique's	Internal – either side of the rectus abdominis External – lies on top of the internal oblique's .	Both compress the abdomen and twist the trunk

Muscles of the Back

Name	Position	Action
Trapezius	The back of the neck and collar-bones	Moves scapula up, down and back; raises the clavicle
Latissimus dorsi	Across the back	Used in rowing and climbing; adducts the shoulder downwards and pulls it backwards
Erector spinae	Three groups of muscles which lie either side of the spine from the neck to the pelvis	Extends the spine; keeps body in an upright position
Rhomboids	Between the shoulders	Braces the shoulders; rotates the scapula

Muscles of the Buttocks and Legs

Name	Position	Action
Gluteals	In the buttocks	Abducts and rotates the femur; used in walking and running
Hamstrings	Back of the thigh	Flexes the knee; extends the knee
Gastrocnemius	Calf of the leg .	Flexes the knee; plantar-flexes the foot
Soleus	Calf of leg, below the Gastrocnemius	Plantar-flexes the foot
Quadriceps extensor	Front of the thigh: group of four muscles	Extends the knee; used in kicking
Sartorius	Crosses the front of the thigh	Flexes the knee and hip; abducts and rotates the femur
Adductors	Inner thigh	Adducts the hip; flexes and rotates the femur
Tibialis anterior	Front of the lower leg	Inverts the foot; dorsi-flexes the foot; rotates the foot outwards

Musculo-Skeletal Problems

When a muscle is relaxed, there is a good flow of blood to the area, but during contraction, the flow of blood is reduced and therefore waste removal is limited. This is not a problem if this is occurring during exercise, as the constant contraction and relaxation allows the blood flow to remain. The problem can occur if we constantly contract the muscle without it actually moving, such as in sitting in a poor position, as the blood capillaries can become compressed and blood flow can be impeded, resulting in an accumulation of waste and a reduction in the delivery of nutrients and oxygen. Muscles can become fatigued and become weaker and can result in spasm, eventually creating pain. As the muscles become shorter, they will eventually pull on the tendons that attach them, which can result in loss of function and pain. As function gradually deteriorates, an imbalance can be caused in the muscle group and unless the action or activity that started the issue in the first place is not stopped, the problem will usually re- occur, even after treatment.

If a client is presenting with a sharp pain, this can represent inflammation in the area and massage should not commence until the pain has turned into a dull sensation.

Causes of Musculo-Skeletal Problems

Very often, the problem will not be noticed for a long time and the symptoms can be very subtle at first. This can make it difficult to be able to determine the cause of the problem. However, below are some of the most common causes.

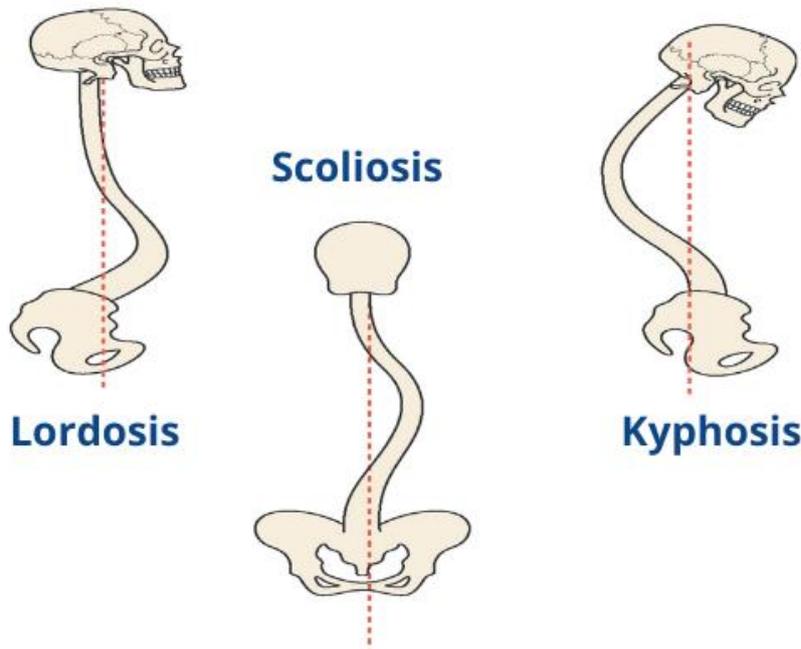
Stress – emotional stress will usually show itself in physical tension, causing tight muscles and poor posture.

Environment – by looking at the client's lifestyle and occupation, a pattern may form that could highlight a potential problem. Such activities as walking a dog which pulls on a lead or carrying heavy bags over the shoulder can often lead to problems.

Injury – any type of injury will cause the soft tissue to become swollen and may lead to increased muscle tension or spasm. This can lead to a lack of range of motion. If you suspect an injury, always refer your client to a professional such as osteopath, physiotherapist or GP.

Posture – postural problems may be due to bad habits, but they may also be due to postural faults, such as those below:

Postural Fault	Definition
Kyphosis	Excessive curvature at the top of the spine, creating a "hump"
Scoliosis	Curvature of the spine to one side, causing the hips to be misaligned.
Lordosis	Inward curve of the lower back, creating a protruding abdomen.



As a therapist, you are not in the position to diagnose a postural fault, but it is important to recognise that poor flexibility and imbalance may develop and the muscle groups surrounding will be affected if a postural fault is present.

If a client is presenting with a sharp pain, this can mean inflammation in the area and massage should not commence until the pain has turned into a dull sensation.



Assessment Techniques

The assessment process will take a variety of procedures. Firstly, there will be a verbal discussion, completing a consultation form to determine the clients' lifestyle, medical history and also the presenting problem/s. It is essential, that during this process, you find out as much information as possible on what seems to make any muscular pain worse and if you feel that the client needs medical advice due to the presence of an injury, then to refer them appropriately and do not treat. As part of your consultation process, below are other ways to carry out an assessment.

Observation

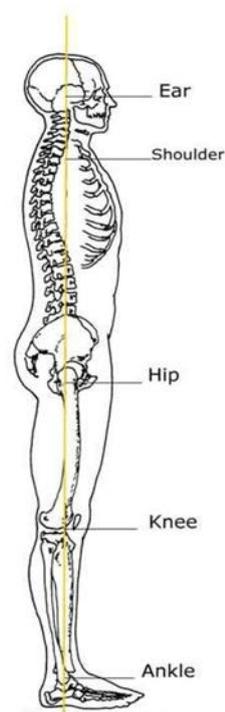
One of the best ways to observe the client is naturally, because if you tell someone you are watching them, they will unconsciously change their actions. Watch them as they walk across the room, as they sit down, or reach for their bag. Do they have an unusual gait, do they appear to have one shoulder higher than the other etc. Ideally, ask your client to be dressed in undergarments (shorts/vest), and stand behind them approximately a metre away. Imagine they have a plumb line running through the body from head to the feet. The line should run through the ear, through the shoulder, through the hip and knee and be in front of the ankle. Start by looking at the head to see if it is level, use the ears as a guide.

Do the shoulders sit straight? Check the "key hole" (the gap between the arms and the body) to see if the gap is wider on one side. Do the hands hang at the same length?

Look at the belt line of the clients' underwear to see if level, this may indicate scoliosis otherwise.

Look at the back of the knees to see if the skin creases are level. Do the knees turn in or out?

Check for the alignment of the Achilles tendons to see if there is any thickening of either tendon. Look at the angle of the feet to see if they are turned in or out.



Range of Motion (ROM)

Another way to carry out an assessment is to determine the amount of movement which occurs without discomfort or pain.

If you are going to carry this out, demonstrate the movement to your client beforehand and always carry out checks on the unaffected side first, so that you have something to compare it to, then check for restriction or pain. This is purely as a guide and should not be used as a diagnosis but can help you understand that muscles may be tight or restricted in a particular area.

Palpation

This is the process of feeling with your hands, sometimes before but, during the massage and it is a continual process throughout the treatment. Palpation will give you feedback on areas where you need to concentrate on and with lots of experience your fingers will begin to “see” what is beneath. During palpation, your fingers move the skin over the underlying tissues so that you are able to determine different textures.

This procedure needs to be carried out very slowly. Below are some of the textures you may feel:

- Soft and pliable – this indicates healthy and relaxed soft tissue.
- Firm and stringy – will usually be tendons, due to their fibrous nature. Firm and less resilient – this can indicate thickening of the fascia.
- Dip in the contour of the muscle – this can represent a tear in the muscle. Woody and stringy and may “flick” – can signify adhesions of the fascia. Firm, gritty and fairly pliable – can indicate recently formed scar tissue. Firm, solid – can signify mature scar tissue.
- Knotty and resistant – this can indicate tension within a muscle.
- Fluid – if there is oedema in the soft tissues, the sensation can be soft and mobile, however if there is excessive fluid then the skin can feel tight, firm and be painful.

Definitions of Soft Tissue Dysfunction

Acute pain	If client experiences acute pain that lingers, stop massaging the area and suggest they see a GP for diagnosis
Adhesions	Adhesions are fibrous bands that form around joints or within the fascia layers. The muscle fibers or the fascia stick together and eventually fibrous nodules develop – the area feels fibrous and less flexible. They are usually caused by inflammation or injury and the release of adhesive glycoprotein's which aid the repair process. They seldom cause acute pain when worked over but they can cause discomfort and sensitivity. You may know adhesions as “knots”.
Crystal Deposits	Found on muscle fibers and around bone structures: e.g. around the edge of the scapular. Can feel gritty and ‘crunchy’ and can cause pain when worked over
Edema	Excess fluid in tissues. Test by applying pressure to the area, if the area stays white for longer than 10 seconds it is edema. Extremely swollen areas will be firm, even solid with little movement and pain due to excess fluid pressure on the sensory nerves. Avoid area and work softly above area to aid drainage
Fibrosis	Occurs when excess fibrous connective tissue forms usually due to tissue damage such as repetitive strain
Fibrous Nodules	Located close to the surface of the skin. They are moveable, often jumpy and the areas will feel lumpy. They seldom cause acute pain when worked over but they can cause severe discomfort and sensitivity
General tension	Muscle fibres will be hard and difficult to move. Unlike a toned muscle, which can feel hard but will be pliable and will move with you as you massage over it. With deep held tension the area will become sensitive to touch and often ticklish
Inflammation	Symptoms to look out for are: redness, heat, pain, swelling
Muscle spasms	A convulsive muscular contraction which can be a result of tissue damage as the natural response is to contract nearby muscles. They can also occur if a muscle is overworked or over stretched. The contraction of the muscle fibres can compress on blood vessels and with a build-up of toxins in the muscle, the nerves can become irritated, causing pain.
Scar tissue	The body's natural response to injury, and its aim is to bring two ends together, for example in a torn muscle. It is also made of elastic fibres but also collagen and can be sticky in its early stages, causing the fibres to adhere together, causing muscle fibres to clump together over time and preventing the fibres from gliding. Not as mobile or pliable as normal tissue. Old scar tissue will feel lumpy or solid with no flexibility. New scar tissue will feel firm with little flexibility. The muscles affected will feel stiff and inflexible.
Tearing	There will be a dip or a hole in the muscle contour and acute pain. Advise client to see a GP. Do not massage

Massage Techniques

Before applying any Advanced Massage Techniques, ensure the muscles are warmed up.

Apply any of these movements between your Advanced Techniques.

Effleurage

Stroking, or Effleurage, is the principal diagnostic and treatment technique. This can be performed in infinite variety of ways. Basic variables of application are:

- Pressure can be deep or superficial.
- Direction can be longitudinal or transverse or reinforced hands.

Effleurage can also be used as a palpation method, allowing you to feel and sense any tissue abnormalities. This would be done throughout the massage.

Petrissage

Palmar Kneading

- Can be used pre-event to quickly warm major muscle groups
- Relax and loosen muscle tissue
- Effective in mobilising muscle tissue
- Help reduce muscle stiffness following activity
- Increases muscle blood supply and promotes lymphatic drainage

Finger thumb kneading

- Can be used on small areas where deep pressure is needed
- Can be used to break down adhesions in muscle tissue
- Can help to reduce muscle tension in smaller muscular areas.
- Will increase localised circulation of blood and lymphatic drainage

Wringing

- Can be used to pre-event where it will be effective in warming and stimulating muscle tissue quickly.
- Can help reduce tension and relax muscle post-event.

Skin / muscle rolling

- Help stretch muscle tissue
- Reduce muscle tension
- Increases lymphatic drainage and blood flow to the muscle
- Increases skins pliability

Thumb sliding

- Can stretch muscle tissue and improve muscle elasticity
- Can help disperse lactic acid
- Can help to identify muscle adhesions

Knuckling

- Deeper treatment (direct pressure can be applied)
- Loosen tight muscles and reduce tension
- Can increase local circulation
- Effective in helping to break down adhesions/fibrous nodules

Rocking and Shaking

Used in massage and appeal to senses on primary level: Like rocking a baby.

Rocking is applied with firm but gentle pressure over a whole part of the body, usually back or leg. The hands rock the body. The hands work together or in opposite directions to create smooth, wave-like motion through whole area.

Advanced Massage Techniques

Pressure points

An area of tension. Apply pressure gently as you slowly work deeper to get the muscles to release. You might spend a minute here and feel the muscle release. If the muscle is not releasing, give it a break and try a different approach.

Vibrations

Rapid movement. Relaxes muscles

Cross fibre strokes

You are shearing the muscle fibres. Only to be done after muscles have been warmed

Stretches

Improves ROM

Tools - palm, fist, forearm and elbow

During massage the therapist will apply more pressure, but always thinking of how the muscles are moving.

The Palm

The palm covers a larger area than fingers and pressure is deeper with less effort to the therapist. When applying the heel of the hand one can go deeper into the muscles.

The Fist

When using the fist we use the surface area between the first and second joints of the fingers. This is one of the best techniques to get blood circulation to the area and warm up before deep work is done.

The Forearm

When applying the forearm, make sure you use the fleshy side of the forearm. Tension can be increased by making a fist.

The Elbow

The elbow is the deepest tool of all. Bring your forearm closer to you to make your elbow a pointy tool.

Cam and Spindle

This is a deep stroking technique. The thumb of one hand is used as a "cam" or pivot and the other hand is placed in a fist around pivot as a spindle. The cam hand glides up area while the spindle hand rotates around cam while moving up area.

Palpation

Identifying changes in the soft tissue. Areas to be checked:

- Texture
- Tension
- Actual damage

Palpation Techniques

Therapist apply deep palpation through one hand while the other hand is in gentle contact with client to sense possible pain reactions, reassure client that the intention is not that of brutality.

If tissue feels normal but causes pain then compare it with the other side of body. If the tissue feels different to first side of body there may be an underlying problem to treat. If the tissue feels the same as first side of body then there is no problem.

It is important to always give feedback to client as to the findings.

The palpating tip of the finger is supported by the other fingers. Passive pressure is applied into tissues and gliding movements are made to identify textural changes.

Watch out for the Carotid Artery.
Remember: Lymph nodes are not muscle tension.



Advanced Massage: Practical

Common issues where advanced massage techniques can help:

- Computer strain
- Frozen shoulder
- Sciatica
- Headaches
- Tight shoulder and neck muscles
- Lower back pain

Discuss with client:

- Consultation
- Lifestyle
- Assess the work station
- Regular breaks
- No laptop
- Pilates
- Postural assessment
- Red flag – burning, shooting pain

If the treatment is for frozen shoulder be aware of the following:

- The capsular fluid is a paste and sticky.
- ROM may be restricted so be gentle
- You may have to refer your client

VIDEO 1: CLIENT PRONE

1. Minimize the wrinkles of the neck – so important to adjust the cradle.
2. Place a rolled towel under the shoulder – this will make the muscles less taught
3. Heel of hands stretch the shoulders – work with breath
4. One side at a time: Heel of hand hook into side of vertebrae, rock, and then roll - erector spinae group – connecting stroke.
5. Palpation.
6. Now apply the oil to your hands and forearms: Effleurage – faster to warm up
7. Reinforced hands Effleurage one side.
8. Knead the shoulder – warm up –Option.
9. Cupping shoulder – warm up – Option.

Forearm deep work the shoulder. Work with client's breath – 6/7 out of 10 is acceptable.

1. Lane 1: Right forearm, then follow with left forearm. From Iliac crest – base of neck – Then repeat from neck down - work straight down next the spine – mid back turn your arm – get to the gluteal area – hold the point at the tendons – hop over – continue down the gluteal.
2. Lane 2: Around the scapula.
3. Pressure points from C7 next to spine – wrist relaxed – 45 degrees. Be patient – hold for count of 10.
4. Iron out with forearm from lower border of scapula to lower back.
5. Then iron out with forearm next to spine.
6. Pressure points around scapula – Make a cup with your other hand around elbow to stabilize. Could hold these point longer – ask client when they feel release – 4/5 out of ten. As you move around the scapula – move your body slightly contra lateral.
7. Contra lateral seesaw with your forearm.

VIDEO 2: Wing Scapula to work even deeper:

Muscles: Rotator cuff

1. Sooth
2. Stand at head of client: From vertebrae - C7 Heel of hand drain into scapula and hold to bring scapula into a stretch. Move around contra-lateral as you work around the scapula.
3. Sooth.
4. C7 Reinforced thumbs – drain into scapula and hold, point.
5. Continue with reinforced thumbs draining from vertebra into scapula – make sure your lanes overlap.
6. Sooth.
7. **OPTIONAL:** Pressure point with forearm around the scapula from base of the neck. Stabilize with other hand, rock slightly, client takes a breath and go into your pressure point. Direct pressure into, under scapula, not downward.
8. Sooth.
9. Forearm seesaw around scapula and out to the point of the shoulder.
10. Hook fingers into scapula and stretch count of 10. X3
11. Sooth.
12. Un-wing the arm.
13. Terse minor and major – Reinforced thumbs push under edge of scapula – if client is large, you can use the heel of your hand. 6 is enough! Sooth.
14. ROM – Rock arm side to side.
15. Leave arm hanging over the side of the bed – repeat reinforced thumb pressure on the lateral side of the scapula. **OPTION:** Can use the heel of your hand – Then Sooth.
16. ROM – Do not lift the arm up, stretch the arm forward. X3 Use your body weight.
17. Bring arm back to the side – remove towel under shoulder.

VIDEO 4: LOWER BACK

Very important – be careful of the kidneys and floating ribs

If client has Lordosis – support under the belly

Muscles: Quadratus Lumborum, Serratus posterior Inferior, Erector group

1. Warm up: Knuckle down or up the lower back - avoid floating ribs.
2. Effleurage, petrissage and cupping warm to continue warming.
3. Place elbow next to vertebra - Cross fibre - Forearm drag down – between floating rib and iliac crest.
4. Sooth.
5. Reinforced thumb – staircase from floating rib – move up toward spine. Push up from floating rib towards the spine – work slowly and mindfully – wait for muscle to release.
6. Head of client - Effleurage down to Iliac Crest and rock.
7. Cross fibre - Contra lateral – reinforced hand hook into spine drag QL.
8. Get your hand under the belly – reinforced hand and stretch up into GL drag toward spine.
9. Hand over hand sooth.
10. Return the side - Forearm work from iliac crest toward floating rib and hold PP, go over rib and seesaw - Fan your forearm, then diagonally drag forearm under rib.
11. Reinforced hand rock over sacrum.

VIDEO 5

Muscles: Gluteal medius, Gluteus Maximus, piriformis (hip flexor contribute to sciatica (Syndrome – lots can contribute to sciatica)

1. Knuckle down to warm area.
2. Forearm pressure points from Greater Trochanter of femur – 45 degree angle toward to sacrum and forearm stroking down. You are below the iliac crest – staircase PP all the way up to the sacrum.
3. Hold towel and forearm drain down over pressure points. X6
4. Contra lateral - Reinforced heel of hand - contra lateral cross fibre.
5. Return to the side - Pressure point Gluteus maximus – Greater Trochanter of femur – aim for belly of muscle. Staircase PP up to the sacrum. Move in small increments.
6. Forearm drain down the maximus muscle.
7. Location: Flex leg — slight lateral rotation to feel the muscle move.
8. Place elbow on pirifemoris and pressure point. 2 Points
9. Contra lateral, place hand on sacrum – heel of hand drain down belly of Gluteus Maximus.

VIDEO 6: BACK LEGS

Muscles: Lower leg – Gastrocnemius, medial and lateral, soleus,

1. Knuckle calf, cup to warm
2. Reinforced thumb pressure point out the calf. Sooth.
3. Cross fibre friction: Both heels of hand drain sideways the calf.
4. Contra lateral both heel of hands cross fibre calf. Sooth.
5. Passive stretching – place clients foot against your thigh – depress foot down – heel of hand drain up the calf – hand on foot keep stretching foot.
6. Keep leg in this position - Thumbs next to each other, drain belly of Gastrocnemius.
7. Thigh – knuckle to warm.
8. Forearm pressure point toward Ischium bone. Hold PP into Ischium bone - 2 or 3 lanes.
9. Drain area with forearm between your PP.
10. Fist drain back of thigh. 2/3 lanes.
11. Stay same side - Cross fibre heel of hand medial.
12. Contra lateral – Cross fibre lateral heel of hand followed by reinforced heel of hand.
13. Repeat cross fibre with reinforced hands.
14. Sooth.

VIDEO 7: SIDE LYING POSITION SHOULDER AND NECK

Muscles: Trapezius; Levator Scapulae; Rhomboids, Supraspinatus

1. Place a pillow between the client's knees.
2. Interlace the fingers, straighten your arms, use your body weight and lean back into a stretch.
3. One hand static on the shoulder, the other use the heel of your hand, work from point of shoulder toward the occiput deep stroking into the neck and occiput– shopping muscle – repeat 6 X
4. Repeat this movement and as you hold the PP under occiput - depress the shoulder as this lengthens the tissue.
5. Full thumbs contact – Thumb over thumb knead the neck into the occiput
6. Head of client: Full palmer alternate soothing from shoulder into the neck.
7. Fist stroke down the shopping muscle – from base of neck to corner of shoulder.
8. One hand cup shoulder other hand work around the scapula – side of hand – fist drain.
9. Follow with alternate soothing strokes.
10. Reinforced thumbs or elbow: Trigger points Supraspinatus and include occiput
11. ROM: Do not lift the arm - Bring arm toward ear and stretch the arm forward – work with client's breath.

VIDEO 8: SIDE LYING LOWER BACK AND LEGS

Lower back

Muscles: Quadratus Lumborum.

1. Lane 1: Locate floating rib with reinforced thumb and press down and in/under ribs – continue as you move up to the spine.
2. Lane 2: from waist – repeat.
3. Shear the QL with reinforced fingers up toward the ribs
4. Step up toward the spine.
5. NOTE: Make sure your client breathes as the QL is the muscle that pulls the ribs down during exhalation.

Legs

Muscles: Rectus Femoris; Vastus lateralis and medialis, Tensor fasa Latae (This is the helper to the ITB which is fascia)

1. Knuckle the thigh – warm
2. Petrissage – warm
3. Soothing palmer strokes – warm
4. Bring the knee in – This shortens the Rectus Femoris and opens up the Gluteus
5. From knee up into Vastus lateralis Cam and Spindle
6. If the client is big, use your forearm.
7. Heel of hand – cross fibre stroke back of thigh, then top of the thigh
8. Forearm stroke the gluteus medius down – it's a small area.
9. Trigger point with your elbow the gluteus and maximus.
10. Forearm stroke down from iliac crest the gluteus – direction toward the feet.
11. Heel of hand down the gluteus

VIDEO 10: Pectoralis

Muscles: pectoralis major and minor, Sternocleidomastoid, Scalene, TMJ, Masseter.

Palpation – Avoid Lymph nodes – work off the Clavicular. Tuck client in so not to expose breasts. Get permission – ask about deep work to the Pectoralis. Working the Pecs will improve posture.

Pecs are antagonistical to back muscles – can be shortened due to rounded shoulders

1. Head of client: PP the shoulders, pectorals and down the arms
2. Effleurage and warm up muscles. A very important step before deep work is to be done.
3. One side at a time: Fast knuckling down the Pec to continue warm up.
4. Heel of hand – Stretch down the pectoralis – slow movement
5. One hand static on opposite shoulder– the other in a fist. Stretch the pectoralis out. Be gentle. Fascia release.
6. Heel of hand drain up the Pec.
7. If client has good muscle tone, you can do forearm work down the Pec.
8. ROM – this will stretch the upper, middle and lower fibres of the Trapezius
9. Fast knuckle the deltoid to warm up.
10. Cross fibre the deltoid with the heel of the hand.

Contraindications to Massage Treatment

Types of Contraindication

Contra-indications that restrict treatment totally

This means that no massage treatment should be carried out.

Require GP permission or signed indemnity/consent form

The client may be able to receive a treatment - but written medical permission should be obtained before treatment, to ensure it is safe and beneficial to the client.

In circumstances where written medical permission cannot be obtained the client must sign an informed consent stating that the treatment and its effect has been fully explained to them and that they are willing to proceed without permission from their GP or specialist.

Once permission has been granted – caution is required during treatment and the massage must be adapted to suit the client's individual needs.

Contra-indications that restrict treatment locally

The client can receive a treatment - but it will need to be adapted to suit their specific needs and areas of their body may need to be avoided.

General considerations

As a massage therapist, you must be aware of the following guidance.

If a client is having a condition treated by medical professional, or another complementary therapist, you should never specifically treat the same condition as it may interfere with the course of treatment. Ask client to check with their consultant or therapist if a massage will be beneficial at present, and/or how it may be adapted to suit. This is also the case for any prescription medication.

You should **not continue with a treatment at all** if any of the following apply to the client:

- Has a fever (>37.8°C).
- Is feeling nauseous or experiencing vomiting or diarrhoea.
- Has an infectious disease.
- Is in the first trimester of pregnancy.
- Is under the influence of alcohol and recreational drugs.
- Has had an accident, injury or surgery within the last 3 months (6 months if major).

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified medical recommendations.

	Condition	Description	Type of Contraindication	Treatment Notes
Cardiovascular	Angina Pectoral	Reduced blood supply to the heart, causing spasm and pain in the chest area	Require GP permission or signed indemnity form.	
	Arrhythmia	Abnormal / irregular heartbeat	Require GP permission or signed indemnity form.	
	Arteriosclerosis	Accumulation of fatty substances in the walls of the arteries causing them to narrow and harden	Require GP permission or signed indemnity form.	
	Carotid Bruit	Irregular heart murmurs in the cervical region	Require GP permission or signed indemnity form.	Massage should be slow and given with light pressure.
	Haematoma	A haematoma is a severe bruise within the soft tissues, usually a muscle. It often results from an injury. Symptoms will often resolve over time, but it can take several months before all the bruising and swelling goes.	Require GP permission or signed indemnity form.	when the condition is severe the area must be completely avoided. Internal and external infections are the greatest dangers.
	Haemophilia	A condition of diminished or absence of blood clotting. Anyone suffering from this condition will bruise and bleed easily. Deep pressure could cause internal bleeding – haematoma.	Require GP permission or signed indemnity form.	Pressure must be kept light.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Cardiovascular	Hypertension	Clinically high blood pressure	Require GP permission or signed indemnity form.	
	Hypotension	Clinically low blood pressure	Require GP permission or signed indemnity form.	
	Localised swelling or inflammation (in the treatment area)	The five classical signs of inflammation are heat, pain, redness, swelling, and loss of function. Inflammation can indicate infection.	Avoid area completely.	Advise client to see their doctor if condition doesn't improve.
	Oedema (Medical)	An accumulation of excess lymph fluid in the body, oedema is the increase of interstitial fluid in any organ, tissues, or cavities. It may indicate several dangerous conditions.	Require GP permission or signed indemnity form.	Only an experienced therapist should undertake treatment.
	Oedema (Non-medical)	Oedema is swelling. With an injury, swelling may be localized and often corrects itself. Subcutaneous oedema commonly occurs in women before menstruation but does subside if legs are rested in a raised position.	Require GP permission or signed indemnity form.	Gentle massage can be given to help alleviate the condition.
	Phlebitis	A painful condition where the lining of a vein in the legs becomes inflamed and may result in thrombosis.	Require GP permission or signed indemnity form.	
	Thrombosis	A clot forming on the vein wall, usually in the leg.	Require GP permission or signed indemnity form.	Any pressure applied to the vein may dislodge the clot with potentially dangerous circumstances.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
				Massage of the leg is a definite total contra-indication. Light pressure elsewhere.
	Varicose veins and varicose ulcers	Swollen and enlarged veins that are usually blue or dark purple. They may also be lumpy, bulging or twisted.	Any obvious protruding vein must be avoided – massage above the veins can help relieve the pressure. Also avoid treatment below the varicose veins.	Gentle massage above the veins only.
Digestive	Gastric (stomach) ulcer	Open sores that develop on the lining of the stomach.	Massage is locally contraindicated in the area of any ulcer. With regard to a peptic ulcer, abdominal massage can make symptoms worse.	
	Vomiting and diarrhoea (particularly when acute)	Vomiting and diarrhoea cause the body to be dehydrated. Typically, a sign of infection.	Massage totally contra-indicated. Increased stimulation may interfere with the body's own healing process.	Advise client to return home and get plenty of rest / fluids or to seek medical advice.
Endocrine	Diabetes	A group of metabolic disorders characterized by a high blood sugar level over a prolonged period of time.	Require GP permission or signed indemnity form.	

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Immune	HIV (human immunodeficiency virus)/ AIDS (acquired immune deficiency syndrome)	<p>HIV is a virus that damages the cells in the immune system and weakens the ability to fight everyday infections and disease.</p> <p>AIDS The breakdown of the immune system makes the receiver susceptible to any pathogens the therapist may carry. HIV is rarely life-threatening these days and is typically managed with medicine.</p>	<p>HIV requires GP permission or a signed indemnity form.</p> <p>Massage is regarded as totally restricted for clients with AIDS.</p>	<p>Massage can be greatly beneficial, but only after approval with medical advice.</p> <p>In serious/late-stage cases where terminal, a gentle hand massage, encouraging words, compassion and empathy are an equally valuable form of treatment to release stress and anxiety.</p>
Infectious	Localized infections	For example, Herpes simplex, boils, verruca, athlete's foot.	Danger of cross infection – avoid the area completely.	
	Acute infectious & contagious diseases	Examples include: Scabies, Impetigo, Ringworm, Shingles, Measles, Pediculosis, Tuberculosis, Hepatitis, Influenza.	<p>Massage totally contra-indicated.</p> <p>Danger of cross-infection – passing condition on to therapist and possibly next client.</p>	Advise client to seek medical advice if not already done so.
Infectious	Fever	A fever is any body temperature elevation over 100°F (37.8°C). Fever generally occurs in response to an infection	Massage totally contra-indicated.	Be particularly mindful of fever during the COVID-19 pandemic.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
		and is an important immune system response.		Consider taking client's temperature prior to treatment to ensure no fever is present.
	Meningitis	Inflammation of the connective tissue (Meninges) that encircle the spinal column & the brain.	Massage totally contra-indicated. Highly contagious – especially in the early stages.	
Musculo-skeletal	Ankylosing Spondylitis	Chronic inflammation of the spine and the sacroiliac joints. The sacroiliac joints are in the lower back where the sacrum (the bone directly above the tailbone) meets the iliac bones (bones on either side of the upper buttocks). Chronic inflammation in these areas causes pain and stiffness in and around the spine.	Require GP permission or signed indemnity form.	Massage should be light. Percussion movements must be avoided.
	Cervical Spondylitis	Cervical spondylosis is a common, age-related condition that affects the joints and discs in your cervical spine, which is in your neck. It's also known as cervical osteoarthritis or neck arthritis. It develops from the wear and tear of cartilage and bones.	Require GP permission or signed indemnity form.	Massage should be light. Percussion movements must be avoided.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Musculo-skeletal	Hereditary spastic paraplegia	a general term for a group of rare inherited disorders that cause weakness and stiffness in the leg muscles. Symptoms gradually get worse over time.	Require GP permission or signed indemnity form.	Relaxing and light pressure massage is recommended. Percussion movements must be avoided.
	Hernia	A hernia is when an internal part of the body, such as an organ, pushes through a weakness in the muscle or surrounding tissue wall.	Gentle massage can be given - the herniated area must be avoided completely.	Gentle massage recommended.
	Muscular spasticity (thus conditions which cause this e.g., cerebral palsy)	Spasticity is a condition in which muscles stiffen or tighten, preventing normal fluid movement. The muscles remain contracted and resist being stretched, thus affecting movement, speech and gait.	Require GP permission or signed indemnity form.	Relaxing and light pressure massage is recommended. Percussion movements must be avoided.
	Osteoporosis	A condition where the bones become thin and weak and break easily. Bones start to lose density, particularly of calcium and collagen. It frequently goes undiagnosed until a fracture occurs, as there are no warning signs. The spine, wrist and hips are particularly vulnerable to fracture. It is more common in elderly people, particularly in women after the Menopause. The onset is usually after 60 years of age.	Require GP permission or signed indemnity form.	Relaxing and light pressure massage is recommended. Percussion movements must be avoided.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

Condition	Description	Type of Contraindication	Treatment Notes
Recent sprains, fractures, or muscle strains in the treatment area	There may be damage to the ligament, tendons and muscle fibres.	Injury must be allowed to heal before massage in the affected area can take place. Fractures – allow a minimum of 3 months before massage treatment on the area.	
Rheumatoid Arthritis	Caused by inflammation of the joint and the synovial membrane, which eventually causes the erosion of the cartilage and bone. Usually affects the feet, ankles, fingers, and wrists.	Require GP permission or signed indemnity form.	Relaxing and light pressure massage is recommended. Percussion movements must be avoided.
Slipped Disc - prolapsed or herniated disc	A common back complaint, which affects the fibres of the intervertebral discs. The shock-absorbing discs in the spine are made up of a strong outer fibrous coat that contains soft gel-like material. A prolapsed disc occurs when the gel-like material pushes out from between the vertebrae. A herniated disc occurs when the outer coat ruptures. Pain is caused when the disc puts pressure on the surrounding nerves or spinal cord. A slipped disc is most common in the lower back, but it can also occur	Require GP permission or signed indemnity form.	It is a very painful and debilitating condition, and it is best to refer any client to a good Chiropractor or Osteopath. Relaxing and light pressure massage only. Percussion movements must be avoided.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Musculo-skeletal		in the neck and upper back. It is most likely to occur between the ages of 25 and 45 and is slightly more common in men.		
	Spinal Deformities	A side-to-side curve is called scoliosis; a forward curve (kyphosis) shifts the centre of balance in front of the hip; a concave lower back (lordosis) thrusts the hips forward.	Require GP permission or signed indemnity form.	Relaxing and light pressure massage is recommended
	Spondylosis	Degeneration of the joints and intervertebral discs of the spine causing pain in the neck and lumbar region.	Require GP permission or signed indemnity form.	Relaxing and light pressure massage is recommended. Percussion movements must be avoided.
	Whiplash injury (recent)	Caused by the sudden forwards and backwards jerking of the head and neck, usually in a car accident – but can be caused by strenuous sports. This stretches and tears the soft tissues of the neck - the tendons, ligaments & muscles – usually the Splenius capitus and Sternocleidomastoid muscles and may damage the nerves and other structures in the area, such as the cervical vertebrae and spinal cord. It is also known as cervical sprain or hyperextension injury.	Avoid neck and shoulder area for a minimum of 3 months. Best practice advice is to check any x-rays have been signed-off by a medical practitioner before treatment. Require GP permission or signed indemnity form.	Relaxing and light pressure massage is recommended. Percussion movements must be avoided.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Nervous	Bell's palsy	Paralysis of the face muscles caused by infections, the result of a stroke or basal skull injuries.	Require GP permission or signed indemnity form.	Massage must be soft and gentle. Percussion and vibration movements must be avoided.
	Epilepsy	Epilepsy is a common condition where sudden bursts of electrical activity in the brain cause seizures or fits.	Require GP permission or signed indemnity form.	A very gentle massage only as over stimulation may trigger a fit. Avoid friction movements around the occipital and facial area. Percussion and vibration movements must be avoided.
	Migraine	A migraine can feel like a throbbing headache, usually on 1 side of the head. Other symptoms include feeling sick and sensitivity to light.	Massage totally contra-indicated during an attack only.	Migraine sufferers' benefit from massage but should not have treatment during an attack.
	Motor Neurone Disease	A fatal, rapidly progressing neurological disease. It attacks the nerves that control movement (motor neurones) so that muscles no longer work. Motor neurones control important muscle activity such as gripping, walking,	Require GP permission or signed indemnity form.	Massage must be soft and gentle. Percussion and vibration movements must be avoided.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Nervous		speaking, swallowing and breathing.		
	Multiple Sclerosis (MS)	A condition that can affect the brain and spinal cord, causing a wide range of potential symptoms, including problems with vision, arm or leg movement, sensation or balance. It's a lifelong condition that can sometimes cause serious disability, although it can occasionally be mild.	Require GP permission or signed indemnity form.	Massage must be soft and gentle. Percussion and vibration movements must be avoided.
	Neuritis	Inflammation of a nerve.	Massage totally contra-indicated. Massage would be too painful – increased body stimulation increases the pain level.	
	Parkinson's disease	A progressive disease caused by degenerative abnormalities in the brain and characterized by tremor, or shaking hands and limbs, and by stiffness in movements.	Require GP permission or signed indemnity form.	Massage must be soft and gentle. Percussion and vibration movements must be avoided.
	Psychosis	Psychosis is a condition of the mind that results in difficulties determining what is real and what is not real. Symptoms may include delusions and hallucinations. Other symptoms may include incoherent speech and behaviour that is inappropriate for the situation. There may also	Seek medical advice to ensure the deep relaxation caused by massage will not trigger any emotional problems. Require GP permission or	Massage should be gentle and can be useful for treating these conditions, if used properly, as a means of reducing the anxiety and stress causing it.

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
		be sleep problems, social withdrawal, lack of motivation, and difficulties carrying out daily activities.	signed indemnity form.	
	Sciatica (trapped/pinched nerve)	Condition caused by entrapment of the long Sciatic nerve as it exits from the spine. The nerves become inflamed and cause pain in the buttocks and thigh.	Require GP permission or signed indemnity form.	Massage must be soft and gentle. Percussion and vibration movements must be avoided.
	Undiagnosed pain	Pain where the client does not know the reason.	Massage totally contra-indicated.	Advise them to see their Doctor before you give them a treatment.
Reproductive	Hormonal contraceptive implant	A small flexible plastic rod placed under the skin in the upper arm. It releases the hormone progesterone into the bloodstream to prevent pregnancy.	If it can be felt, the local area should be avoided.	Light movements may be used across the skin to join up the routine.
	Menstruation	Menstruation (also known as a period) is the regular discharge of blood and mucosal tissue from the inner lining of the uterus through the vagina. The menstrual cycle occurs due to the rise and fall of hormones.	Avoid abdomen in the first few days – depending how client feels, as there is a risk of increased blood flow and may be painful.	
Reproductive	Pregnancy	Pregnancy usually lasts about 40 weeks, or just over 9 months, as measured from the last menstrual period to delivery. The first trimester is typically defined as the first 12 weeks, the second from weeks 13 – 27 and	Require GP permission or signed indemnity form. Massage should not be given in the first trimester, as there is a risk of miscarriage.	As a rule – overall pressure should be kept light. Avoid deep pressure around the occipital and lumbar areas,

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
		the third from week 28 until childbirth.	In second and third trimester, gentle massage can be given. Seek medical advice for massage of the abdomen or avoid.	at all times during the pregnancy.
	Gynaecological infections e.g. thrush	Increased blood circulation could aggravate inflammation and worsen infection.	Require GP permission or signed indemnity form.	
Respiratory	Asthma	Asthma is a long-term condition in which over-sensitive airways become narrow and inflamed, making it difficult to breathe in and out normally. Its cause isn't completely understood, but asthma is one of a group of allergic conditions, including eczema and hay fever, which often occur together.	Require GP permission or signed indemnity form.	If your client requires medication – ensure they have their inhaler with them.
	Disorders affecting the treatment area	For example: severe eczema, psoriasis, dermatitis, allergy reactions, active alopecia, acne vulgaris, acne rosacea.	Only contra-indicated if weeping as there is a danger of aggravating the condition and causing infection.	Always ensure the client is not sensitive to the massage medium used.
Skin	Scar tissue	A scar is an area of fibrous tissue that replaces normal skin after an injury. Scars result from the biological process of wound repair in the skin, as well as in other organs and tissues of the body.	Avoid localised area for: 2 years – for major operations/ large areas of scarring	

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Urinary		Thus, scarring is a natural part of the healing process.	6 months – for minor operations / small scar	
	Kidney infections / disorders Including cystitis	The kidneys are unable to absorb the correct substance from filtration. Stimulation of lymphatic flow could put further strain on the kidneys.	Require GP permission or signed indemnity form.	
Other	Cancers	Massage stimulates the Lymphatic and Circulatory systems. Cancerous cells are carried within the lymph and blood circulation.	In the early stages of cancer, massage is not recommended, as there is a danger of spreading the cancerous cells. Require GP permission or signed indemnity form.	In the later stages and during remission, any form of bodywork can help reduce the anxiety and stress, but should be carried out with medical permission, and the treatment needs to be adapted to suit the receiver's individual needs.
	Extensive bruising, cuts, abrasions, or sunburn in the treatment area		Avoid area completely.	
	Heavy meal within 2 hours	A heavy meal should be avoided in the two hours prior to massage treatment. The client risks nausea, indigestion, bloating and general discomfort.	Localised contra-indication. If a client has eaten a heavy meal, massage could be limited to face, arms, and legs. – avoiding	

Contraindications to Massage Treatment

The following table provides guidance on appropriate course of action for a number of common ailments or conditions. This does not replace qualified **medical recommendations**.

	Condition	Description	Type of Contraindication	Treatment Notes
Other			abdomen and lower back.	
	Recent surgery	<p>Surgical operation within 6 months.</p> <p>Major surgery normally involves opening the body. Includes caesarean section, organ replacement,</p> <p>Minor surgical procedures are those that are minimally invasive. Include biopsies, laparoscopy amongst others.</p>	<p>Major surgery; no massage for a minimum of 6 months, thereafter only with medical advice/ indemnity.</p> <p>Minor surgery; no massage for a minimum of 3 months, thereafter only with medical advice / indemnity.</p>	
	Under the influence of alcohol and/or recreational drugs	Increased blood circulation could exacerbate the effects of the drug/s.	Massage totally contra-indicated.	Be sure to advise clients when they book that they should avoid alcohol and drugs on the day of their treatment.
	Undiagnosed lumps and bumps	Any lumps or bumps which the client has not had diagnosed or medically assessed.	Avoid area completely - and advise client to see their doctor.	

Client Consultation Form

Therapist Details

Treatment:	ADVANCED MASSAGE
Centre name:	BRIGHTON SCHOOL OF MASSAGE
Therapist name:	

Client Consultation Form

Client name		
Address		
Profession		
Telephone Number	Mobile	
	Other	
Emergency Contact	Name	
	Contact number	

Personal details:

Age group	Under 18 <input type="checkbox"/>	18 – 29 <input type="checkbox"/>	30 – 39 <input type="checkbox"/>	40 – 49 <input type="checkbox"/>	50 – 59 <input type="checkbox"/>	60+ <input type="checkbox"/>
Gender						
GP Surgery and Address						
Last visit to the doctor						

Contra-indications requiring medical permission where medical permission cannot be obtained, clients must give their informed consent in writing prior to treatment (Select if/where appropriate) **None**

Currently being treated by a GP or another complementary practitioner for any condition?

Notes:

Taking prescribed medication?

Pregnant? How many weeks? ____ If first trimester (0 – 12 weeks) massage is contraindicated due to risk of miscarriage. (2nd/3rd trimester (gentle massage, abdomen avoided)

Recent operations? Major Minor Date: _____ Notes:

Has a hormonal implant?

Any dysfunction of the nervous system? (e.g. multiple sclerosis, Parkinson's disease, motor neurone disease)

Any skeletal/muscular conditions? (e.g. cervical spondylitis, osteoporosis, arthritis, whiplash, slipped disc)

Any conditions causing muscular spasticity? (e.g. cerebral palsy)

Any cardiovascular conditions? (e.g. thrombosis, phlebitis, hypertension, hypotension, heart conditions)

Any mental health / psychotic conditions?

Any undiagnosed pain? Notes:

Any of the following conditions:	Asthma <input type="checkbox"/>	Diabetes <input type="checkbox"/>
Epilepsy <input type="checkbox"/>	Kidney infection <input type="checkbox"/>	Cancer <input type="checkbox"/>
Haemophilia <input type="checkbox"/>	Bell's palsy <input type="checkbox"/>	Medical oedema <input type="checkbox"/>
Trapped/pinched nerve (e.g. sciatica) <input type="checkbox"/>	Inflamed nerve <input type="checkbox"/>	Rheumatoid arthritis <input type="checkbox"/>

Contra-indications that restrict treatment (Select if/where appropriate) **None**

Fever <input type="checkbox"/>	Contagious or infectious diseases <input type="checkbox"/>	Diarrhoea and vomiting <input type="checkbox"/>
Under the influence of alcohol or recreational drugs <input type="checkbox"/>	Undiagnosed lumps and bumps <input type="checkbox"/>	Recent heavy meal (<2hr) <input type="checkbox"/>
Cuts / Bruises / Abrasions <input type="checkbox"/>	Sunburn <input type="checkbox"/>	Hypersensitive skin <input type="checkbox"/>
Scar tissue (avoid area - 2 years for major operation; 6 months for a small scar) <input type="checkbox"/>	Localised swelling <input type="checkbox"/>	Varicose veins <input type="checkbox"/>
Skin diseases <input type="checkbox"/>	Hernia <input type="checkbox"/>	Gastric ulcers <input type="checkbox"/>
Haematoma <input type="checkbox"/>	Inflammation <input type="checkbox"/>	Recent fractures (minimum 3 months) <input type="checkbox"/>
Any allergies? <input type="checkbox"/>		Menstruating <input type="checkbox"/>

Written permission required by: (attached to the consultation form)

GP/Specialist <input type="checkbox"/>	Informed consent <input type="checkbox"/>
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Medical History	
Reason for treatment	
Muscular/Skeletal problems	Back <input type="checkbox"/> Aches/pain <input type="checkbox"/> Stiff joints <input type="checkbox"/> Headaches <input type="checkbox"/> Notes:
Digestive problems	Constipation <input type="checkbox"/> Bloating <input type="checkbox"/> Liver/gall bladder <input type="checkbox"/> Stomach <input type="checkbox"/> Notes:
Circulation	Heart <input type="checkbox"/> Blood pressure <input type="checkbox"/> Fluid retention <input type="checkbox"/> Tired Legs <input type="checkbox"/> Varicose veins <input type="checkbox"/> Cellulite <input type="checkbox"/> Kidney problems <input type="checkbox"/> Cold hands and feet <input type="checkbox"/> Notes:
Gynaecological	Irregular periods <input type="checkbox"/> P.M.T <input type="checkbox"/> Menopause <input type="checkbox"/> H.R.T. <input type="checkbox"/> Pill <input type="checkbox"/> Coil <input type="checkbox"/> Notes:
Nervous system	Migraine <input type="checkbox"/> Tension <input type="checkbox"/> Stress <input type="checkbox"/> Depression <input type="checkbox"/> Notes:
Respiratory	Allergies <input type="checkbox"/> Hay fever <input type="checkbox"/> Asthma <input type="checkbox"/> Notes:
Skin	Dermatitis <input type="checkbox"/> Acne <input type="checkbox"/> Eczema <input type="checkbox"/> Psoriasis <input type="checkbox"/> Skin cancer <input type="checkbox"/> Notes:
Skin type	Dry <input type="checkbox"/> Oily <input type="checkbox"/> Combination <input type="checkbox"/> Sensitive <input type="checkbox"/> Dehydrated <input type="checkbox"/> Notes:
Immune system	Prone to infections <input type="checkbox"/> Colds <input type="checkbox"/> Sore throats <input type="checkbox"/> Chest <input type="checkbox"/> Sinus issues <input type="checkbox"/> Notes:
Medication taken	
Herbal remedies	
General health notes	

Lifestyle	
Do you have children?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Ability to relax	Good <input type="checkbox"/> Moderate <input type="checkbox"/> Poor <input type="checkbox"/> Methods of relaxation:
Sleep patterns	Good <input type="checkbox"/> Moderate <input type="checkbox"/> Poor <input type="checkbox"/> Average no. of hours:
Natural daylight (e.g.in workplace)	Yes <input type="checkbox"/> No <input type="checkbox"/> Work environment:
Work at a computer?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, for how many hours?

Do you smoke?	Yes <input type="checkbox"/> No <input type="checkbox"/>	No. per day:
Do you drink alcohol?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Units per week:
Do you exercise?	None <input type="checkbox"/> Occasional <input type="checkbox"/> Irregular <input type="checkbox"/> Regular <input type="checkbox"/>	Type/s of exercise:
Stress level (1-10 rating)	At work _____ At home _____	Notes:

Reasons for stress

Diet

Do you take any food/vitamin supplements?	Yes <input type="checkbox"/> No <input type="checkbox"/>			
How many portions of each of these items does your diet contain per day?	Fresh fruit	Fresh vegetables	Protein	Protein - source?
	Dairy produce	Sweet things	Added salt	Added sugar
How many units of these drinks do you consume per day?	Tea	Coffee	Fruit juice	
	Water	Soft drinks	Other	

Treatment Record

Treatment Date and Location	
Treatment plan	
Medium used	
Client signature <i>To be signed before treatment.</i>	Please sign here to agree and consent to the proposed treatment plan. Sign: _____ Date: _____