2.Demographic Information

Set No:    2      CASE STUDY 4

NAME:    D H

D.O.B:    03/03/85

OCCUPATION: Full Time Mum

PRESENTING CONDITION: Fractured Collar bone

2. Forming an Initial Impression

a)    Initial Impression: - D is in a lot of pain, holding her left arm guarding the arm. She seems very stressed and in pain which is difficult to control due to the nature of the fracture and she is unable to take strong pain relief. If she is generally stressed this may also add to the pain due to her thought processes. It is difficult to make out is if she is stressed by the fracture of if she is generally a stressed person.

b)    Lifestyle

D is a full-time mother of five children. She does a lot of walking to and from school as she is unable to drive. She tries to eat healthily but struggles; she smokes a lot of cigarettes daily and drinks a bottle of wine most days.

Physiologically, stress is defined as anything that challenges the body to function in its usual fashion. Many people who experience stressful situations or perceived threats will turn to alcohol to cope with that stress. The problem with that is alcohol itself can cause stress on the body's physiological balance. Researchers have found that alcohol takes a psychological and physiological toll on the body and may actually compound the effects of stress.

Injury, illness, or exposure to extreme temperatures can cause stress to the body. Grieving, depression, fear, and even sexual activity can cause psychological stress.

The Link Between Stress and Alcohol (Buddy 2019)

c)    Family circumstances: - D lives alone with her five children aged 2 to 13. She receives a lot of help from her mum who lives close by.  Other than this she has no other family.

d)    Employment: - D is now a full-time mum but she used to be a hairdresser before having her children.

e)    Emotional State: - D says she has a very stressful life which causes a lot of anger and anxiety her broken collar bone on top of this is making it worse.

f)    Observation of Client and interpretations (comment on hair / skin / eyes / posture / breathing etc and make deductions about the client based on your observations)

D is around 5ft 6inches short blonde hair slim, very tanned skin, she has blue eyes, slightly stopped posture which may be related to the broken collar bone. She has generally relaxed breathing.

3. Presenting Condition

|  |  |
| --- | --- |
| Name of Pathology/Condition |     Fractured collar bone         |
| Brief description of pathology/condition | A bone fractures a medical condition in which there is a partial or complete break in the continuity of the bone. In more severe cases, the bone may be broken into several pieces. A bone fracture may be the result of high force impact or stress, or a minimal trauma injury as a result of certain medical conditions (Corwin 2000) |
| What main body system does this pathology relate to, ie digestive? | Muscle Skeletal system  |
| The main signs/symptoms of this condition | Deformity in the area of the fracture site Inflammation Pain.Reduced movementBruising  |
| Evaluate the possible physical causes | Impact of an object to the area (trauma)Fall, pathological, arthritis other medical conditions  |
| Evaluate the possible mind/body causes | Rebelling against authority (Stormer 2004) |
| Identify which organs/parts of body/systems that may reflect as an imbalance in the feet, as a result of the pathology | Upper arm reflex Shoulder neckBrain /brain helpers.Spine Pituitary AdrenalsPineal |
| Identify one medication (if applicable) used to treat the condition | Ibuprofen |
| State one side effect of this medication | Stomach inflammation  |
| Identify which organs/parts of body/systems that may reflect as an imbalance in the feet, as a result of this side-effect | Digestive system  |

An Alternative Complementary Therapy suited to: Stress and your rationale for this choice

Osteopathy helps to restore movement and function when someone is affected by injury, illness or disability, especially once the break itself has healed

4. Personal Medical History

History of Presenting Condition

Dawn fell on the stairs at home around 6 weeks ago and felt a crack in the left collar bone she went to the emergency department. They confirmed the fracture and told her to keep her arm in a sling and review in 6 weeks. There is no further treatment for this kind of fracture.

Past Medical History

Depression

Anxiety

Fractured collar bone

Current Medication

Fluoxetine 20mg

Omeprazole 20mg

Naproxen 500mg

Paracetamol 1g

5. First Treatment See SOAP

|  |
| --- |
| Treatment **SOAP** Notes - Study Client ID: D H  |
| Date: | 20/05/19 | Start time: | 13:00 | Finish time: | 14:30 | Treatment number: | 1 |
| Preferences: Depth of Touch: Light Medium Deep VariesMusic: light background music Reclining position / postural support: Dawn prefers to be sat up right due to the discomfort in her collar bone Infection prevention / Allergies none known Psychological & relevant information between treatments: Advised between treatments to observe any changes, maintain relaxation, try warm baths cut down on alcohol intake try going for more walks. If any worsening symptoms always contact the gp. We can discuss treatments each time we review.  | Measurements:MYCAW Yes Pain: 1 2 3 4 5 6 7 8 9 Detail: Carol has no pain Stress: 1 2 3 4 5 6 7 8 9 Detail: Her stress levels are really high right now along with the pain  |

**Subjective:** (why they came for a treatment, what they say, what are they experiencing, what makes things better / worse)

|  |
| --- |
| Study Client symptoms and goals:I suggested the treatment of reflexology to D as it works well for stress / anxiety and depression as well as pain relief and the healing process of the fracture. There are a number of problems going on not just the fracture, these other problems can have a knock-on effect with the healing process as the body is not allowed to rest and heal. This is quite a complex treatment as we may need to work with number of areas to restore balance and promote healing. The aim is to, help with pain, reduce stress, promote healing and advise on healthy lifestyle changes. Other: Due to the fact that she has high alcohol intake I will take time to focus on the liver reflex to flush out toxins as well as lymphatic drainage.  |

**Objective:** (what I see / observe / find)

|  |
| --- |
| Visual:D has small feet with a bunion on the right foot, callus formation over the lung reflexes and heart reflex bilaterally. Slight white glaze to both feet in the insteps which indicates someone that’s exhausted or drained possibly angry under the surface of everything. The bunion indicates that they may be doing too much for others or not enough for themselves and possibly need to learn to say no more. The callus formation over heart and lungs is an indication of protection. She is protecting herself from hurt. (Sheehan 2005). |
| TactileD’s feet were quite rough on the plantar aspect of the foot which indicates she may be going through a rough time. They were soft and warm on the dorsal side.  |
| Areas of Focus:  My main areas of focus throughout the introductory session will be to do a full investigation routine – I will give special focus to :Shoulder  ( to promote blood flow to the area and relax the muscles)Upper arm (To promote blood flow and relaxation of the muscles to help with healing )Neck (To reduce stiffness due to the posture she holds with the fractured clavicle )• Brain / brain helpers  (To help reduce stress, promote calmness)• Adrenals (Helps with inflammation , pain , reduces adrenal response to stress as well ) • Pituitary (Toe encourage endorphins to help with mood  and also pain / thought process ) • Lymphatics (Drain way toxins from alcohol medication etc) • Solar plexus (Stability and generalised calmness and alignment )• Lungs (Breathing will help with relaxation and help excrete toxins from smoking )• Heart (Blood flow and circulation for healing to the joints and muscles)• Liver (Aim to flush out toxins from alcohol and medication)• Gall bladder (As above)• Spleen (Again helps with toxins and heath filter the blood supports the immune system )• Stomach (Promote digestion and protection due to the NSAIDS and alcohol increased risk of ulcers and inflammation )• Intestine (Exertion of toxins)• Kidneys.(Excretion of toxins) |
| System/s focus: Muscle skeletal Cranial / neuro Digestive EndocrineCirculatoryHepatic Urological Respiratory  |
| Other: Muscle / skeletal to help loosen up tight stressed muscles and for relaxation  |

**Assessment:** (what happened / what changed)

|  |
| --- |
|  Preparatory Techniques: Prior to the client’s arrival the treatment chair and protective cover on pillow was sanitized. Clean towel used to cover treatment chair and warm blanket for the client (washed at 60 ◦ C), wipes to cleanse client’s feet, hand sanitizer for client use. Towel on chair will be washed at 60 ◦ C once treatment is finished. COVID-19 questionnaire was sent to client prior to appointment which she confirmed. I asked the questions prior to the client entering the treatment room. All answers ensured the client was fine. The client wore a face mask and I wore a visor throughout the session.I assisted the client on to the chair and made her comfortable before I began. On completion of the consultation form there were no contra-indications noted. I explained the process to the client and gave her my definition of reflexology. I also conducted the consultation and got signed consent to treat her.She sat propped up in Lafuma chair and I put her feet elevated on the stool so that they were level with me. She relaxed quite easily in to the chair. I could see she was slightly apprehensive about it all. I advised her to relax and if she feels uncomfortable or experiences any problems do not hesitate to tell me and we can talk about the problem.  |
| Treatment Responses + interpretation/relevance: * Sharpness over liver which resolved after circling the area for a few seconds
* Dullness over stomach reflex ad intestines I worked the areas by circling the stomach and knuckled the intestines with good effect.
* Pituitary sharp (bilateral) This is a common symptom, but I continued to circle the area as it has the benefit of the good endorphins to help promote mood and more energy.
* Transfer of energy over the adrenals D felt cold, she declined a blanket. I worked the area for 2 to 3 minutes until it resolved.
* Lungs bilateral crunchy I worked the areas x2 the crunchiness improved but not totally resolve I suspect it will take more time. She also smokes a lot and I wonder if this is what I’m picking up on.
* Bilateral shoulders crunchy which took a while to reduce the problem D preferred the sweeping technique. The crunchy sensation reduced but did not resolve. Hopefully as I continue to work on D we will see an improvement in these reflexes. I will consider linking these reflexes with the spinal innervation and see if this makes any change.
* Upper arm left, dull sensation as if there were blockages this resolved in 2 minutes of sweeping the area

.  |
| Study Client Responses: D seemed to relax well in to the treatment and did not say much , I do not think she is actually aware of her own feelings and body responses, this may be interesting as the weeks continue , for her to try and learn to be in tune with her body and understand what it is telling her instead of fighting it, this is kind of what I picked up on.  |
| Other: |

**Plan:** (future treatments / techniques / focus / self-care suggestions)

|  |  |
| --- | --- |
| Number of Treatments recommended: 7 TREATMENTS  | Date of next treatment: 27/05/19 |
| Techniques for next treatment and reasons: Please see the treatment plan detailed after this treatmentI will focus on the: - **Muscle / skeletal system** Her left clavicle is broken which has a knock on effect with the upper muscles in her body, her posture and as the muscle on the opposite side compensate for the effected side, which puts strain on them, hopefully I can aim for less tense and more relaxed muscles as well as promote the healing process to the clavicle. I would also like to try some linking and see if this has any affect on the client’s reflexes.**Endocrine** I feel this system also plays a large part in balance, aiming to balance hormones with the pituitary / thyroid and pineal / hypothalamus reflexes as well as the adrenals to build on release of cortisone to help with adrenaline release secrete good endorphins and stimulate hormones to balance each other out. **Hepatic** The liver will be under more pressure with her alcohol intake, stimulating the hepatic system will help flush out toxins and regulate the natural balance of the liver. **lymphatics** This will be useful in excreting any toxins in the body especially unwanted toxins from her alcohol and smoking, balancing out any blockages and making the system flow more easily. **Digestive** I aim to release serotonin to promote happier feelings which her Fluoxetine is doing. The stomach has an important part to play as part of the brain/gut connection so need to work this area well, perhaps introduce links or the vagus nerve which is good as part of the feel good factor in the stomach. The intestine will also help release toxins and excrete unwanted substances quicker,**Respiratory** This needs a lot of help with her smoking and its unlikely for her to stop at this stage with her stress. It will also promote steady breathing and relaxation. I may also do some deep breathing at the beginning or end of the session which is good exercise of the respiratory system. |
| Plan for Self-Care/support between treatments: I advised D to keep a diary of her symptom’s thoughts and feelings throughout the 7 weeks.Morton (1993) suggests that writing a diary helps you connect with your feelings and identify any stresses and positive outcomes. It helps you manage and organise your life. This should help Dawn recognise any benefits and areas we can work on. It may also help her listen to what her body is saying and become more in tune. Advised on relaxation techniques, deep breathing exercises which I demonstrated to her. Advised to increase fluids avoid caffeine and alcohol. I have also advised her to see her GP to chase up any follow up appointments required for the fracture as it has been 6 weeks. I also advised to call GP if any worsening thoughts or symptom’s in between now and next week. (Safety netting). I reminded D before she left of the healing response which she may experience and showed her LI4 meridian point which is useful to help with pain – I’m not sure that she will use the technique but I’ve showed her this today.  |
| Other: |

**Reflexology Treatment Plan**

**Objectives / Aim** (what you and they hope to achieve):

I am hoping to help with the pain in D’s fracture and also to ease the considerable stress she is feeling.

**Frequency** (how often are you going to treat?): Once a week for 7 weeks

|  |  |
| --- | --- |
| **Key Reflex** | **Reason**  |
| Shoulder/collar bone | The area affected by the break |

|  |  |
| --- | --- |
| **Helper Reflexes (remember Golden Rule!)** | **Reason** |
| Neck | This area will be stiff and in pain from the break and from wearing a sling |
| Pituitary | As this gland releases endorphins, a natural pain killer |
| Spleen | To guard from any infection caused by the break |
| Zones 2, 3 and 4 | The zones associated with the collar bone |
| Adrenal glands | To help minimize any inflammation from the break and for good balance of cortisone |
| Thyroid and pineal | To help with the balance of hormones |
| Liver | The liver will be under more pressure with her alcohol intake, stimulating the hepatic system will help flush out toxins and regulate the natural balance of the liver |
| The whole digestive system | I Aim to release serotonin to promote happier feelings which her Fluoxetine is doing. The stomach is the main brain/gut connection and has an important part to play. The intestine will also help release toxins and excrete unwanted substances quicker |
| Lungs | These need a lot of help with her smoking and its unlikely for her to stop at this stage with her stress. It will also promote steady breathing and relaxation |
| Diaphragm | Same as above |
| Intercostals | Same as above |
|  |  |
|  |  |
| **Nerve Innervations** | **Reason** |
| **C6 & C7** | **Nerve innervations to the shoulder** |
| **T6** | **Stomach** |
|  |  |

|  |  |
| --- | --- |
| **Regular Maintenance Areas:** | **Reason/Effects** |
| Brain, Spine, Kidneys and Heart. | As Reflexology is a holistic therapy, these organs are always included. Also, these organs are all vital for life. |

|  |
| --- |
| Treatment **SOAP** Notes - Study Client ID: D H |
| Date: | 27/05/19 | Start time: | 11:00 | Finish time: | 12:00 | Treatment number: | 2 |
| Preferences: Depth of Touch: Light Medium Deep VariesMusic: light background music Reclining position / postural support: D prefers to be sat up right due to the discomfort in her collar bone Infection prevention / Allergies none known Psychological & relevant information between treatments: Advised between treatments to observe any changes, maintain relaxation, try warm baths cut down on alcohol intake try going for more walks. If any worsening symptoms always contact the GP. We can discuss treatments each time we review.  | Measurements:MYCAW Yes Pain: 1 2 3 4 5 6 7 8 9 Detail: high pain levelsStress: 1 2 3 4 5 6 7 8 9 Detail: Her stress levels are really high right now along with the pain  |

**Subjective:** (why they came for a treatment, what they say, what are they experiencing, what makes things better / worse)

|  |
| --- |
| Study Client symptoms and goals:D’s symptoms and goals remain the same as the above outlined in treatment one. D says she felt relaxed in the session but does not feel any different throughout the week. Continues to have a painful Clavicle. I explained it may not improve straight away it may take a few sessions. I asked about her stress levels, she shrugged her shoulders and says with 5 children and a broken clavicle she expects her stress levels to be high. If someone expects something it will not change in their head, they need to believe that things will improve. This may be quite a challenging set of seven treatments as she is not feeling any different just yet. D does come across quite negative and angry, I need to try and help improve this in order to gain benefit. Other: Positive affirmations or visualisations? |

**Objective:** (what I see / observe / find)

|  |
| --- |
| Visual:D appears frustrated sitting crossed arms and upright. It may be because she was expecting something to change straight away.  |
| Tactile:No obvious change in the feet from last week similar texture and temperature.  |
| Areas of Focus:  My main areas of focus will be to implement the treatment plan |
| System/s focus: Muscle skeletal Cranial / neuro Digestive EndocrineCirculatoryHepatic Urological Respiratory  |
| Other: I feel I need to spend more time with the cranial and neuro and endocrine before the musculo- skeletal system, in order to try and help D feel more relaxed and positive before we can move on.  |

**Assessment:** (what happened / what changed)

|  |
| --- |
| Preparatory Techniques: Prior to the client’s arrival the treatment chair and protective cover on pillow was sanitized. Clean towel used to cover treatment chair and warm blanket for the client (washed at 60 ◦ C), wipes to cleanse client’s feet, hand sanitizer for client use. Towel on the chair will be washed at 60 ◦ C once treatment is finished. COVID-19 questionnaire was sent to client prior to appointment which she confirmed. I asked the questions prior to the client entering the treatment room today. All answers ensured the client was fine. The client wore a face mask and I wore a visor throughout the session.I managed to get D comfortable in the lafuma chair and applied a stool under her legs to ensure she remained in the upright position to make her comfortable. I spent a slightly longer time performing relaxation moves. The aim was to help her relax better into the treatment. I explained to D I’d like to focus on other reflexes first to promote more relaxation and aim to help her stress and anxiety and then aim to work with the shoulder and as well as focusing on adrenals for pain control and helping to calm the body. |
| Treatment Responses + interpretation/relevance: : Sharpness over liver which resolved after circling the area for a few seconds * crunchy over stomach reflex and intestines I worked the areas by circling the stomach and knuckled the intestines with good effect.
* Pituitary sharp (bilateral) This is a common symptom, but I continued to circle the area as it has the benefit of the good endorphins to help promote mood and more energy.
* Lungs bilateral crunchy I worked the areas x2 the crunchiness improved but not totally resolve.
* Bilateral shoulders crunchy again I circled and swept the area and this seemed to improve a lot
* I linked around the lateral edge of shoulder and C5 which feeds the nerves for the shoulder and neck. The small toe twitched on the left foot which was fascinating to see. D giggled as she said she didn’t make the toe move!
* Again, Upper arm left dull sensation as if there were blockages this resolved in 2 minutes of sweeping the area

.* Bilateral adrenals transfer of energy, D got goose bumps I worked the areas longer and slightly deeper as they help with inflammation and pain. When a client feels chilled or hot, these are often signing that the body’s healing mechanisms are being activated (Sheehan 2005) I also felt this was a positive as D was able to express her feelings and realised a change in her body.
* I finished off the final relaxation moves by performing the vagus nerve and D just totally relaxed. You could feel it in the feet. She could hardly open her eyes when I had finished.
 |
|  |
| Other: |

**Plan:** (future treatments / techniques / focus / self-care suggestions)

|  |  |
| --- | --- |
| Number of Treatments recommended: 7 TREATMENTS  | Date of next treatment: 04/06/19 |
| Techniques for next treatment and reasons: I will maintain the treatment plan, as I think the treatment flowed well.  |
| Plan for Self-Care/support between treatments: Again, as above I asked D to keep a diary or not any differences in her head. Try to listen to her body. Any new sensation cold, hot, burning, tingling I advised her to write them down, She does not need to understand them but we can go over them, This is to try to encourage her to be more in tune with her body.Advised to increase fluid intake cut down on alcohol and try to chase up her physio with the GP. I suggested that Epsom salts bathes are good for detoxification and relaxation. |
| Other: |

|  |
| --- |
| Treatment **SOAP** Notes - Study Client ID: D H |
| Date: | 04/06/19 | Start time: | 13:00 | Finish time: | 14:00 | Treatment number: | 3 |
| Preferences: Depth of Touch: Light Medium Deep VariesMusic: light background music Reclining position / postural support: Dawn prefers to be sat up right due to the discomfort in her collar bone Infection prevention / Allergies none known Psychological & relevant information between treatments: Advised between treatments to observe any changes, maintain relaxation, try warm baths cut down on alcohol intake try going for more walks. If any worsening symptoms always contact the GP. We can discuss treatments each time we review.  | Measurements:MYCAW Yes Pain: 1 2 3 4 5 6 7 8 9 Detail: Stress: 1 2 3 4 5 6 7 8 9 Detail: A slight improvement in her stress levels along with the pain  |

**Subjective:** (why they came for a treatment, what they say, what are they experiencing, what makes things better / worse)

|  |
| --- |
| Study Client symptoms and goals:D has noticed a slight improvement this week. Pain to shoulder has improved her mood has improved she feels she has more energy. She has cut down her alcohol intake to every other day which is an improvement. She said she was able to sleep a little better when not disturbed by the children.She has also contacted to GP to ask for physio and chase up any follow ups she may have missed for her fracture although the GP says it may be too late and the altered alignment in her collar bone and possible build-up of scar tissue may be too late to improve. However, Physio will be a positive step forward. The GP also agreed with having reflexology. Other:  |

**Objective:** (what I see / observe / find)

|  |
| --- |
| Visual: D appears more open and relaxed despite having her arms crossed, her facial expressions are less tense, as if she has gained more trust.  |
| Tactile:There was no great change from the previous session. |
| Areas of Focus:  I will maintain the treatment plan. |
| System/s focus: Musculo-skeletal Cranial / neuro Digestive EndocrineCirculatoryHepatic Urological Respiratory  |

**Assessment:** (what happened / what changed)

|  |
| --- |
| Preparatory Techniques: Prior to the client’s arrival the treatment chair and protective cover on pillow was sanitized. Clean towel used to cover treatment chair and warm blanket for the client (washed at 60 ◦ C), wipes to cleanse client’s feet, hand sanitizer for client use. Towel on the chair will be washed at 60 ◦ C once treatment is finished. COVID-19 questionnaire was sent to client prior to appointment which she confirmed. I asked the questions prior to the client entering the treatment room today. All answers ensured the client was fine. The client wore a face mask and I wore a visor throughout the session.I cleaned D’s feet with soft relaxing back ground music on. This time I told her to take some deep long slow breaths before starting the session and close her eyes to try and get her to relax before we started. I then conducted the opening relaxation sequence several times and she did relax much quicker. |
| Treatment Responses + interpretation/relevance: * Brain reflex was crunchy but much less than usual bilaterally, I worked the brain helpers as well.
* Bilateral adrenals transfer of energy, again the same as last time however I chose to work these harder and longer.
* Sharp sensation felt by D over the Liver reflex I lightly worked the area until this improved.
* Lungs left side transfer of energy, D felt cool, I gave her a blanket she also had a drink as her mouth felt dry.
* Pituitary sharp left side more so than usual as D jumped, I gently soothed the area until the sensation resolved.
* Kidney left side dull, I worked the areas and circled the kidney until this resolved (this may be a collection of toxins causing the dull sensation)
* Right shoulder and upper arm crunchy I continued with sweeping motions until the sensation resolved which this time it did. I did add the link to C5 before I finished this area and again the small toe moved on both feet. D spotted both and she said she felt a funny sensation just before this happened, a further transfer of energy. I hope this works as part of the healing process.
 |
| Other:I was surprised to see a response with the kidneys which may be due to the movement of toxins, it will be interesting to see what I find next week Also I was surprised that the right shoulder stopped feeling crunchy and that D experienced the energy flow and toe movement again.  |

**Plan:** (future treatments / techniques / focus / self-care suggestions)

|  |  |
| --- | --- |
| Number of Treatments recommended: 7 TREATMENTS  | Date of next treatment: 11/06/19 |
| Techniques for next treatment and reasons: I will continue with the treatment plan, as the presenting condition remains unchanged. |
| Plan for Self-Care/support between treatments: I encouraged D to continue with her diary and make a note of any improvements and try to cut out alcohol for the full week to see how she feels. Alcohol can cause anxiety and low mood and cutting it out totally for a while may work well for her. It will not only help her mood but help with digestion and hopefully she will take on more nutrients from food as well as energy and also help with healing. She is starting to understand and experience the benefits from what may seem a slight change to me but a big change to her. Keep up the increased water intake. |
| Other:  |

|  |
| --- |
| Treatment **SOAP** Notes - Study Client ID: D H  |
| Date: | 11/06/19 | Start time: | 12:00 | Finish time: | 13:00 | Treatment number: | 4 |
| Preferences: Depth of Touch: Light Medium Deep VariesMusic: light background music Reclining position / postural support: D prefers to be sat up right due to the discomfort in her collar bone Infection prevention / Allergies none known Psychological & relevant information between treatments: Advised between treatments to observe any changes, maintain relaxation, try warm baths cut down on alcohol intake try going for more walks. If any worsening symptoms always contact the GP. We can discuss treatments each time we review.  | Measurements:MYCAW Yes Pain: 1 2 3 4 5 6 7 8 9 Detail: pain level static Stress: 1 2 3 4 5 6 7 8 9 Detail: Continuing decrease in levels – this is encouraging  |

**Subjective:** (why they came for a treatment, what they say, what are they experiencing, what makes things better / worse)

|  |
| --- |
| Study Client symptoms and goals: D says she has noticed a positive difference in comparison to 3 weeks ago. She feels less tense in herself which has helped her relax her shoulders instead of guarding them adding tension to the surrounding muscles. This has helped with pain management. She has managed to cut down on the alcohol from a bottle of wine most nights to 3 bottles in a week. The benefits of this have been a big noticeable change, she is not as tired and has more energy and feels a lot happier. Other:   |

**Objective:** (what I see / observe / find)

|  |
| --- |
| Visual:D appears less tense more relaxed she does not have a closed posture and appears more open and confident.  |
| Tactile:D’s feet have not changed since the beginning .  |
| Areas of Focus:  As my client is noticing an improvement, I am going to continue with the treatment plan |
| System/s focus: Muscle skeletal Cranial / neuro Digestive EndocrineCirculatoryHepatic Urological Respiratory  |
| Other: I’d like to continue with the same areas and not change anything as my treatments seem to be working. However I will use my own intuition to guide me and adapt the treatment accordingly if required. |

**Assessment:** (what happened / what changed)

|  |
| --- |
| Preparatory Techniques: Prior to the client’s arrival the treatment chair and protective cover on pillow was sanitized. Clean towel used to cover treatment chair and warm blanket for the client (washed at 60 ◦ C), wipes to cleanse client’s feet, hand sanitizer for client use. Towel on the chair will be washed at 60 ◦ C once treatment is finished. COVID-19 questionnaire was sent to client prior to appointment which she confirmed. I asked the questions prior to the client entering the treatment room today. All answers ensured the client was fine. The client wore a face mask and I wore a visor throughout the session.Again, I got D to sit back relax and take long deep breaths while I set the music and the lighting. I did a longer opening relaxation treatment before working into the reflexes to try and help her relax, I also worked the solar plexus for more balance.Stormer (2004) agrees that by focusing on the solar plexus as well as the central nervous reflexes helps for expansion, agility and strength of mind.  |
| Treatment Responses + interpretation/relevance: I found the flow of today’s treatment improved. There were still the usual disturbances, but it felt better in general. The energy between myself and D was better and I did not feels as drained and I was grounding myself better. * Brain reflex was crunchy but much less than usual bilaterally, I worked the brain helpers as well.
* Left adrenal transfer of energy, its usually bilateral hopefully this is a sign of things settling down
* Crunchy sensation felt by D over the Liver reflex I circled the area and knuckled the area until it resolved.
* Lungs left side crunchy throughout once I worked the areas, I then circled throughout the lungs to resolve the crunching sensation.
* Shoulder area less crunchy bilaterally
* Pituitary nil on right and sharp left side Dawn was ready for this area
* Solar plexus transfer of energy Dawn felt cold and used a blanket at that point.
 |
|   |
| Other: the treatment went smoother and faster I decided to spend more time on relaxion ending and on the solar plexus with 5 long relaxation breathes instead of three to open the lungs area and when exhaling to get rid of all the negative thoughts with a little affirmation  |

**Plan:** (future treatments / techniques / focus / self-care suggestions)

|  |  |
| --- | --- |
| Number of Treatments recommended: 7 TREATMENTS  | Date of next treatment: 18/06/19 |
| Techniques for next treatment and reasons: I’m really pleased with the treatment plan as D is noticing good results, so I will maintain this approach to treatment.  |
| Plan for Self-Care/support between treatments: As also recommended by Stormer (2004) I advised more relaxation techniques at home to release the mind body and soul from the grips of fear and anxiety. I advised D to download Head space app which will give guidance on how to relax. I also explained where she can work on her own feet to help with the fractured area. Increase fluid intake and maintain a healthy diet.  |
| Other:  |

|  |
| --- |
| Treatment **SOAP** Notes - Study Client ID: D H  |
| Date: | 18/06/19 | Start time: | 12:00 | Finish time: | 13:00 | Treatment number: | 5 |
| Preferences: Depth of Touch: Light Medium Deep VariesMusic: light background music Reclining position / postural support: D prefers to be sat up right due to the discomfort in her collar bone Infection prevention / Allergies none known Psychological & relevant information between treatments: Advised between treatments to observe any changes, maintain relaxation, try warm baths cut down on alcohol intake try going for more walks. If any worsening symptoms always contact the GP. We can discuss treatments each time we review.  | Measurements:MYCAW Yes Pain: 1 2 3 4 5 6 7 8 9 Detail: Pain levels are reducingStress: 1 2 3 4 5 6 7 8 9 Detail: Her stress levels are dropping nicely now along with the pain  |

**Subjective:** (why they came for a treatment, what they say, what are they experiencing, what makes things better / worse)

|  |
| --- |
| Study Client symptoms and goals:What a big change from last week, D has not taken her pain relief and pain control has improved through relaxation. She says the head space app has really helped, her get back on track. She says she is able to move around more with ease, it is more comfortable when lying down at night. She does not need as many pillows to prop her up. Other:   |

**Objective:** (what I see / observe / find)

|  |
| --- |
| Visual:D seems very relaxed again today. She seems happier in herself.  |
| Tactile:D’s feet were lovely and warm today.  |
| Areas of Focus:  I’d like to continue with the same areas and not change anything as my treatments seem to be working. However, I will use my own intuition to guide me and adapt the treatment accordingly if required. |
| System/s focus: Muscle skeletal Cranial / neuro Digestive EndocrineCirculatoryHepatic Urological Respiratory  |
| Other:  |

**Assessment:** (what happened / what changed)

|  |
| --- |
| Preparatory Techniques: Prior to the client’s arrival the treatment chair and protective cover on pillow was sanitized. Clean towel used to cover treatment chair and warm blanket for the client (washed at 60 ◦ C), wipes to cleanse client’s feet, hand sanitizer for client use. Towel on the chair will be washed at 60 ◦ C once treatment is finished. COVID-19 questionnaire was sent to client prior to appointment which she confirmed. I asked the questions prior to the client entering the treatment room today. All answers ensured the client was fine. The client wore a face mask and I wore a visor throughout the session.I had been using a diffuser with lavender prior to D arriving. I asked D if I could keep burning. She said she normally doesn’t like Lavender but found it so relaxing today and was happy for me to keep it going.I did the normal pre-treatment relaxation techniques and ensured Dawn was comfortable. |
| Treatment Responses + interpretation/relevance: I found the flow of today’s treatment very easy. There have been noticeably less disturbances throughout the reflexes. I found a lot of dullness over the liver as usual but this is now predictable, there was a transfer of energy when working over this area today and transfer of energy while working through the kidneys bilaterally, Again this may be the fact that she is flushing out a lot of toxins. Less crunchiness over bilateral lung reflexes. Right shoulder reflex had transfer of energy and crunchy I swept over the reflex and spent some time there until the symptoms resolved. I didn’t feel I needed to link the reflexes today as the reflexes seemed much gentler to work.Transfer of energy across the adrenals bilaterally, this time I decided to do a link with the adrenals which worked well. It was like a buzz under the pads of both my thumbs.  |
| After the treatment D says that this is the most relaxed she has felt out of all the treatments. She feels as if she is learning how to relax and leaving pain and anxiety behind. I advised her to continue as with previous advice and continue using her head space app. |
| Other: D’s demeanour is changing and her facial expression is much softer. |

**Plan:** (future treatments / techniques / focus / self-care suggestions)

|  |  |
| --- | --- |
| Number of Treatments recommended: 7 TREATMENTS  | Date of next treatment: 27/06/19 |
| Techniques for next treatment and reasons: More of the same as we are seeing such good results. As the saying goes ‘if it’s not broken, don’t fix it’ (very appropriate for D’s broken collar bone!)  |
| Plan for Self-Care/support between treatments: I advised D to increase her fluids today as I worked a lot on lymphatics, kidneys and the liver to flush out toxins. Continue with the usual advice and I will look forward to seeing her in a week  |
| Other:  |

|  |
| --- |
| Treatment **SOAP** Notes - Study Client ID: D H  |
| Date: | 27/06/19 | Start time: | 10:00 | Finish time: | 11:00 | Treatment number: | 6 |
| Preferences: Depth of Touch: Light Medium Deep VariesMusic: light background music Reclining position / postural support: D prefers to be sat up right due to the discomfort in her collar bone Infection prevention / Allergies none known Psychological & relevant information between treatments: Advised between treatments to observe any changes, maintain relaxation, try warm baths cut down on alcohol intake try going for more walks. If any worsening symptoms always contact the GP. We can discuss treatments each time we review.  | Measurements:MYCAW Yes Pain: 1 2 3 4 5 6 7 8 9 Detail: Pain continues to drop Stress: 1 2 3 4 5 6 7 8 9 Detail: Her stress levels are reduced considerably now along with the pain  |

**Subjective:** (why they came for a treatment, what they say, what are they experiencing, what makes things better / worse)

|  |
| --- |
| Study Client symptoms and goals:D has improved yet again, Her pain is more controlled and she says she has never been so settled with her mood , She has had no alcohol this week , sleeping better and moving around better and she is massaging the collar bone, whereas, she had been afraid to touch the area in the past. Other:   |

**Objective:** (what I see / observe / find)

|  |  |
| --- | --- |
| Visual:D seems very relaxed again today and happy with good eye contact and sounds more positive. . |   |
| Tactile:Dawn’s feet were much the same as previous sessions, slightly cooler but a nice temperature not much change than usual  |  |
| Areas of Focus:  I’d like to continue with the same areas and not change anything as my treatments seem to be working. However, I will use my own intuition to guide me and adapt the treatment accordingly if required. |  |
| System/s focus: Muscle skeletal Cranial / neuro Digestive EndocrineCirculatoryHepatic Urological Respiratory  |  |
| Other:  |  |

**Assessment:** (what happened / what changed)

|  |
| --- |
| Preparatory Techniques: Prior to the client’s arrival the treatment chair and protective cover on pillow was sanitized. Clean towel used to cover treatment chair and warm blanket for the client (washed at 60 ◦ C), wipes to cleanse client’s feet, hand sanitizer for client use. Towel on the chair will be washed at 60 ◦ C once treatment is finished. COVID-19 questionnaire was sent to client prior to appointment which she confirmed. I asked the questions prior to the client entering the treatment room today. All answers ensured the client was fine. The client wore a face mask and I wore a visor throughout the session. I asked D if she would like the diffuser on in the room as she said yes. I duly complied with Lavender burning. It took a few minutes to build up the scent as I had just completed ventilating room before D arrived.D lay back on the chair today, I made sure she was comfortable with a blanket beside her if she required it. I asked her to take Five nice deep breaths to enhance the lung expansion by taking in nice deep positive energy filled air and let out all the negative energy and relax.  |
| Treatment Responses + interpretation/relevance: Todays treatment was interesting again. Brain reflexes were less crunchy this enabled me to work on them with smoother flow and catch up on reflexes that are more neglected so to speak due to time due to focusing on problem ones. The lungs were much easier this week with a transfer of energy Dawn felt really cold and took the blanket and snuggled into it. I held the link on the gall bladder and liver for longer which caused a transfer of energy and a twitch of several toes on both feet. D wasn’t aware of this as she appeared to be sleeping as her breathing was quiet.The liver was less problematic again with energy transfer I worked all areas slightly longer but with less pressure and eased the disturbances away.I swept across the shoulders and there was some crunchiness both R&L but that quickly resolved as I thumb walked up the shoulder reflex, plantar on zone 5 and then across to zone 4 both dorsal and plantar. |
| After the treatment D felt relaxed but quite cold, she had a chilly bottle with her with warm tea which she drank as I was talking to her and she soon warmed up. She became quite tearful and overwhelmed with how good she felt and says she has not felt like this for years she fearful of going back to how she was. I gave her some reassurance that if she feels this well it is an incentive to continue to work on herself.  |
| Other: |

**Plan:** (future treatments / techniques / focus / self-care suggestions)

|  |  |
| --- | --- |
| Number of Treatments recommended: 7 TREATMENTS  | Date of next treatment:7/07/19 |
| Techniques for next treatment and reasons: I will continue to focus on the treatment plan as it is working so well.  |
| Plan for Self-Care/support between treatments: I advised D to increase her fluids today as I worked a lot on lymphatics kidneys and the liver to flush out toxins. To continue with the usual advice and I will look forward to seeing her for her final treatment. |
| Other:  |

|  |
| --- |
| Treatment **SOAP** Notes - Study Client ID: D H |
| Date: | 07/07/19 | Start time: | 10:00 | Finish time: | 11:00 | Treatment number: | 7 |
| Preferences: Depth of Touch: Light Medium Deep VariesMusic: light background music Reclining position / postural support: D prefers to be sat up right due to the discomfort in her collar bone Infection prevention / Allergies none known Psychological & relevant information between treatments: Advised between treatments to observe any changes, maintain relaxation, try warm baths cut down on alcohol intake try going for more walks. If any worsening symptoms always contact the GP. We can discuss treatments each time we review.  | Measurements:MYCAW Yes Pain: 1 2 3 4 5 6 7 8 9 Detail: Stress: 1 2 3 4 5 6 7 8 9 Detail: Her stress levels are so much better now along with the pain  |

**Subjective:** (why they came for a treatment, what they say, what are they experiencing, what makes things better / worse)

|  |
| --- |
| Study Client symptoms and goals:D feels much more in control having less pain and better coping skills. She has more patience and does not feel angry and churned up inside. She has a physio appointment in two weeks and feels ready for this, instead of feeling apprehensive. She is coping much better with the children. |

**Objective:** (what I see / observe / find)

|  |
| --- |
| Visual:D’s skin on her face appears much healthier, less tired and her facial expressions and the way she presents herself is much healthier and happier. Her posture is much better and she seems comfortable and relaxed.  |
| Tactile:Her feet remain soft and warm at each visit. |
| Areas of Focus:  My main areas of focus remain unchanged and I will continue to follow the treatment plan. |
| System/s focus: Muscle skeletal Cranial / neuro Digestive EndocrineCirculatoryHepatic Urological Respiratory  |
| Other: I will take longer on the opening relaxation session and the finishing session and include the vagus nerve as these are lovely relaxing ways to finish off the final treatment  |

**Assessment:** (what happened / what changed)

|  |
| --- |
| I did the standard pre-treatment relaxation routine |
| Treatment Responses + interpretation/relevance: Prior to the client’s arrival the treatment chair and protective cover on pillow was sanitized. Clean towel used to cover treatment chair and warm blanket for the client (washed at 60 ◦ C), wipes to cleanse client’s feet, hand sanitizer for client use. Towel on the chair will be washed at 60 ◦ C once treatment is finished. COVID-19 questionnaire was sent to client prior to appointment which she confirmed. I asked the questions prior to the client entering the treatment room today. All answers ensured the client was fine. The client wore a face mask and I wore a visor throughout the session.Again, the treatment went smoothly Dawn relaxed well into the chair. Liver was slightly less crunchy than usual; I worked on the area and held the gall bladder liver link where there was a transfer of energy. Kidney on the left side I found there was some crunchy sensations, I worked the kidney until this resolved. I worked longer on lymphatic drainage, to promote increased drainage of toxins and noticed a transfer of energy where Dawn felt cold again, this resolved very quickly but it did happen on both feet.The adrenal glands were unremarkable. The brain and brain helpers had less disturbances, but I found there were more disturbances on the right foot.Shoulders on both feet continue to improve with less crunchiness noted.  |
| After the treatment D felt quite emotional knowing it was her last treatment and couldn’t believe how much better she felt. I advised her to continue with the positive changes she has made and also things may improve further after working with the physio.  |
| Other: |

**Plan:** (future treatments / techniques / focus / self-care suggestions)

|  |  |
| --- | --- |
| Number of Treatments recommended: 7 TREATMENTS  | Date of next treatment: 7 completed To be confirmed ongoing treatment  |
| Plan for Self-Care/support between treatments:  I have advised D to continue with her positive lifestyle changes work with the physio and continue with meditation and keep up her water intake.  |
| Other: D said that she had been telling some of her friends about me as a few of them had really noticed such a change in D which she was pleased about. |

Conclusion and Success of treatment plan

In conclusion I feel these treatments went well. I have observed new changes every time D came back. MYCAW reduced from 9 to 3 in her stress levels. I was really pleased to see she made lifestyle changes and she is going to see a physio for further help with her shoulder. This felt like a complex case as I was not just working with the shoulder pain. It is important to work with the client holistically, looking at multiple factors and causes to gain the best out of the treatment.

Summary of my learning from this case study

In summary I have learnt that everything takes time as my downfall is that I expect everything to change and see big changes in the first few sessions. It is nice to see the gradual changes. I feel for the future I would like to aim to develop my confidence in applying pressure to the feet as there are times where I feel pressure could be deeper and more beneficial. I feel this will come with practice. I was able to apply Energy Links with the treatment which was new to me they seemed to work well. I realised that sometimes you need to get the client relaxed before you can work on the areas that you want to focus on such as the shoulder pain. Otherwise the client is too tense and won’t get the full benefit of the reflexology. Furthermore, you may have to repeat advice or provide the reasons behind why a client should follow what you say otherwise they don’t understand the benefit of this.

I have enjoyed this case study as it has taught me patience and see that I can’t do everything at once for the client that we need to plan and focus on the reflexes. That I need to record my findings well so that I can compare the findings of the last session to what I find or feel at the current session and then assess if their has been an improvement made.

REFERENCES:

Buddy .T., (2001). Drinking Alcohol May Correct Stress-Hormone Malfunction. **Pp** 36, 20-20. <https://doi.org/10.1176/pn.36.12.0020a> (Accessed on 17/07/19)

National Health Service (2019) https://www.nhs.uk/conditions/physiotherapy/ (Accessed on 18/08/19)

Health direct (2017) <https://www.healthdirect.gov.au/relaxation> (Accessed 0n 17/07/19)

Maguire, P, Pitchathly , C, (2002) *Key Communication Skills and How to Acquire Them,* British Medical Journal **322.** Pp. 697-700

Morton P.G (1993) *Health Assessment* Davis .F. Philadelphia

Sheehan, J., (2005.) *Let’s Read Our Feet!* , Jane Sheehan, Maids Moreton.

Stormer .C. (2004) *Reflexology The definitive guide.,* Hodder and Stoughton ,

,