

## Euphoria Massage and Healing

Spa, Beauty, and Personal Care

Date:		_				
PATIENT INFORMATION						
Name			Date of Birth			
Address:		Р	Phone:			
Emergency Contact Name		E	Emergency Contact Phone:			
Occupation:		Is	s your occupation	n physically demanding	? Yes No	
Does your job require any of the following? Circle all that apply						
Lifting ( lbs)			Standing	Bending	Twisting	
Walking	Wearing high heels		Running	Extensive phone use	Computer operation	
Repetitive movement	Other:					
Would you describe your job as mentally stressful? Yes No						
Which of the following areas do you hold stress? Circle all that apply						
Neck	Shoulders N	/lid-back	Low back	Head	Other:	
What is your goal for today's session? Circle all that apply						
Stress relief Reduce muscle tension Relaxation Increase range of motion Increase muscle flexibility  Prenatal						
Have you had a profess	sional massage before?	Yes	No	How long ago?		
Do you experience any	difficulty lying on your	back, fron	t, or side?	Yes No?		
Are there any areas you would like extra time spent on? Describe						
Are there any areas you would like avoided? Describe						
Do you exercise? Ye	s No		How often?	For how long	a session?	
Are you currently taking any medications? Please list						
How much water do you drink daily?ounces						

## **Session Documentation Form**

Oliver News					
Client Name:					
Primary Complaint:					
History of:	Acute condition / Chronic condition				
Client preferences:					
Type of oil:	Type of pressure:				
Essential Oils:	Bolster				
Incense:	Pillows				
Scented Candles:					
Indication of massage: Stress relief Reduce muscle tension Relaxation Increase range of motion Increase muscle flexibility Prenatal Energize					
Contraindications:					
Areas to focus on:					
Observations:					
Treatment administered: Swedish Foot Reflexology Acupressure Aromatherapy Reiki / Energy Work Sports Massage Hydrotherapy Deep Tissue Other:					
Indicate areas of stress and any physical abnormalities ( swelling, bruising) with an "X"					
Right Front	Back Left				
	LOTE LOTE				