

Healing Touch Session: Back Work Documentation

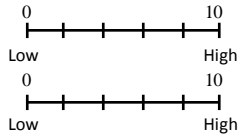


Date: _____ Session#: _____ Session Length: _____

Client: _____ Last Treatment: _____

1. Intake/Update:

2. Health Issue(s) to be addressed in this session: P E M S, pain:

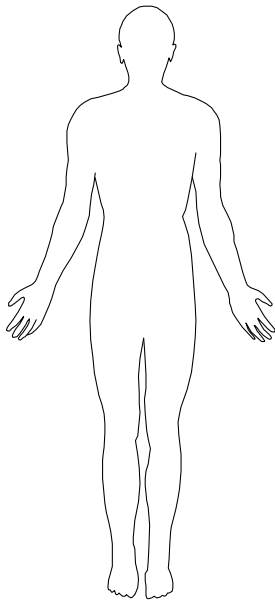


3. Mutual Goals/Intention(s) for Healing: To balance/clear/open/energize ...

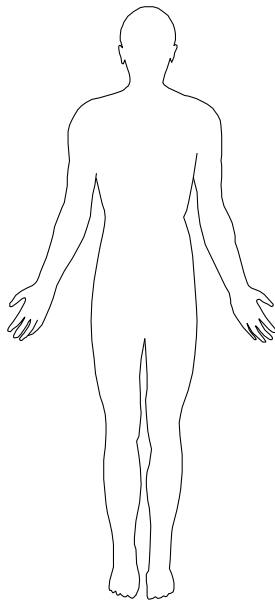
4. Practitioner Preparation (describe Ground, Center and Attune):

Pre and Post Energetic Assessment

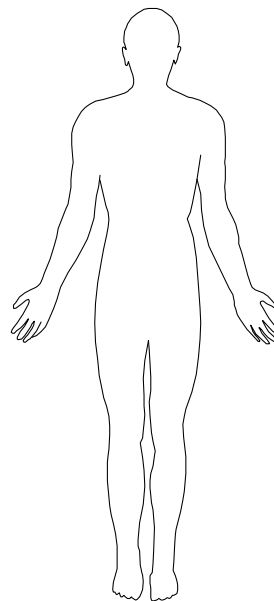
5. Front Pre-Treatment



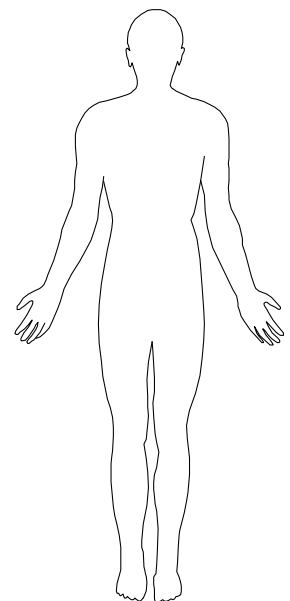
Back Pre-Treatment



Re-Assessment Front/Back



7. Final Assessment Front/Back

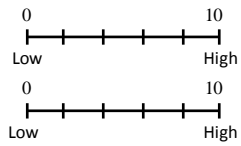


6. H. T. Interventions with Rationale:

8a. Describe Ground:

8b. Describe Release:

9a. Client Feedback - P E M S, pain:



9b. Practitioner Observations and Evaluation:

10. Plan (growth work, self care, referrals, appt):