

Treatment Evidence Guidance Form

iUSP178 – Sports massage treatments

25 full sports massage treatments to be performed on five different profile clients (Case studies can be made through a number of combinations) of which must include the following range of environments and the outcomes documented:

- Clinical (Classroom accepted)
- Non-clinical (Home environment)

The Therapist must also log 10 treatments that include pre-event, post-event massage and maintenance routines on specific areas of the body. **These do not need to be documented.**

To be completed by the lecturer and verified by the external examiner. Please attach a copy of this sheet to the front of each learner's completed treatment evidence form.

Learner name: _____

Learner number: _____

Centre name: _____

Date: _____

	Please tick box:	Yes	No
Consultation			
Physical examination to include body alignment/posture			
Reason for sports massage treatment plan including pre-event, post-event & maintenance			
Client feedback			
Reflect on feedback received and self-analysis of treatment			
Home care/aftercare advice			
All treatments completed			

Please note; each box must be ticked 'Yes' in order to gain a pass grade. If any area is answered 'No' the treatment evidence will be referred until the omitted section is completed.

External examiner name: _____

External examiner signature: _____ **Date:** _____

Lecturer/assessor name: _____

Lecturer/assessor signature: _____ **Date:** _____

Learner name: _____

Learner signature: _____ **Date:** _____

Document History

Version	Issue Date	Changes	Role
v1.0	27/09/2019	First published	Qualification Administrator
v2.0	24/04/2023	Amended requirement to 25 treatments	Qualification Administrator