



Manual Lymphatic Drainage

TREATMENT ADVICE

WHAT IS MANUAL LYMPHATIC DRAINAGE?

Manual Lymph Drainage is a gentle technique that stimulates the lymphatic system and promotes detoxification of the entire body. MLD is the first effective tool to decongest stagnant lymph that is causing swelling to any areas specially if that area has/have lymph nodes removed or been damaged through surgeries or medical conditions. MLD reduces fluid retention, accelerates healing of burns, regeneration of tissue, and helps to minimize scarring. Lymph drainage is an excellent treatment before and after surgery.

Treating Lymphedema with manual lymph drainage is specific to each individual. When the lymphatic system has been compromised as a result of surgery or radiation, the lymphatic fluid may lack the capacity for transporting fluids through that area. Stagnation can cause a build up of proteins which leads to swelling. MLD influences reabsorption and the flow of lymphatic fluid encouraging the lymph to regain a healthy path.

The lymphatic system is a complex network made up of lymph vessels, capillaries, lymph nodes, lymph organs and lymph tissues that defend the body against infection. When fighting Lyme disease and other tick-borne illnesses, the lymphatic system can become exhausted trying to filter out the bacteria and neurotoxins that dying spirochetes release. A sluggish lymphatic system can give rise to the experience of even more intense symptoms of Lyme disease. Lymphatic Drainage Massage detoxifies the body by moving stagnant fluids, filtering out bacteria and foreign debris. It also regenerates tissue, reduces inflammation and helps strengthen and maintain a healthy immune system.

PREPARE FOR YOUR SESSION

Drink plenty of water or fresh natural juice two to four days before the sessions. Eat light at least on the day of the initial session and avoid heavy, highly processed and greasy foods. This will allow your system to clear things out a little easier. There's a chance you could feel tired afterwards as your body detoxes and if you have the room to buffer your appointment at the end you might want to give yourself some extra time to settle in.

Self Care

- Your clothing should be loose and not restrictive
- Check for red marks on your skin when you remove your clothes at the end of the day. If there are, loosen up!
- Activate your muscles with regular exercise and stretching
- Practice deep, diaphragmatic breathing. See your belly rise and fall as your body absorbs fresh, energizing oxygen
- Get in water. Compression from the water is one of the best ways to move lymph
- Individuals with Lymphedema should avoid hot temperatures and follow the advice from your doctor
- Learn Manual Lymph Drainage and Self Care Techniques from your Therapist
- important of all: Maintain your edema or lymphedema with MLD session because Manual Lymphatic Drainage is the most effective and basic tool to decongest lymphedema.



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CONSULTATION

PERSONAL INFORMATION

FIRST NAME

LAST NAME

DATE OF BIRTH

GENDER

MALE FEMALE NONE

AGE

HEIGHT

CONTACT DETAILS

EMAIL ADDRESS

PHONE NUMBER

HOME ADDRESS

CITY, STATE

ZIP CODE

HOW MAY WE CONTACT YOU?

PHONE EMAIL POST

EMERGENCY CONTACT NAME & PHONE

HOW DID YOU HEAR ABOUT US?

(If someone referred you, please name them so that we may thank them)

Friend Referral _____

Social Media

(Please indicate which version you used to find out about our services)

Facebook Instagram Website Other



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INTAKE

Do you have any chronic medical conditions which we should know about?

Yes () No () If so, please list: _____

For what reason are you seeking Manual Lymphatic Drainage? ____Medical reason____Relaxation

If you are here for a medical issue, please specify the issue and when did the problem start?

Please describe your problem including where it is and its severity.

Are you suffering from acute DVT (deep Vein Thrombosis) Yes () No ()

Do you have Congested Heart Failure? Yes () No ()

Do you have cellulitis? (Acute Infection) Yes () No ()

Do you have Renal Failure? Yes () No ()

Do you have any history of surgery procedure? If so? where and when _____

Do you have missing lymph nodes? Yes () No () if yes. please specify _____

Do you have active Cancer? Yes () No () if yes, what, where is it malignant or benign? Circle the type and explain what it is _____

Do you have hyperthyroidism? Yes () No ()

Do you have Hypersensitive Carotid Sinus? Yes () No ()

Are you pregnant? Yes () No () Are you in your menstrual period? Yes () No ()

Do you have current or surgical history of Aortic Aneurism? Yes () No ()

Do you have these following conditions? if so. please circle them. Your honesty is crucial here.

- Diverticulitis, Diverticulosis?
- Severe Arteriosclerosis?
- Inflammatory Bowel Disease (Crohn's, Ulcerative colosis)?
- Intra-abdominal scar formations following surgery
- Recent abdominal surgery?
- Irradiation of the abdominal region?
- Presence of clot prevention devices (greenfield Filter)?
- Unexplained pain?

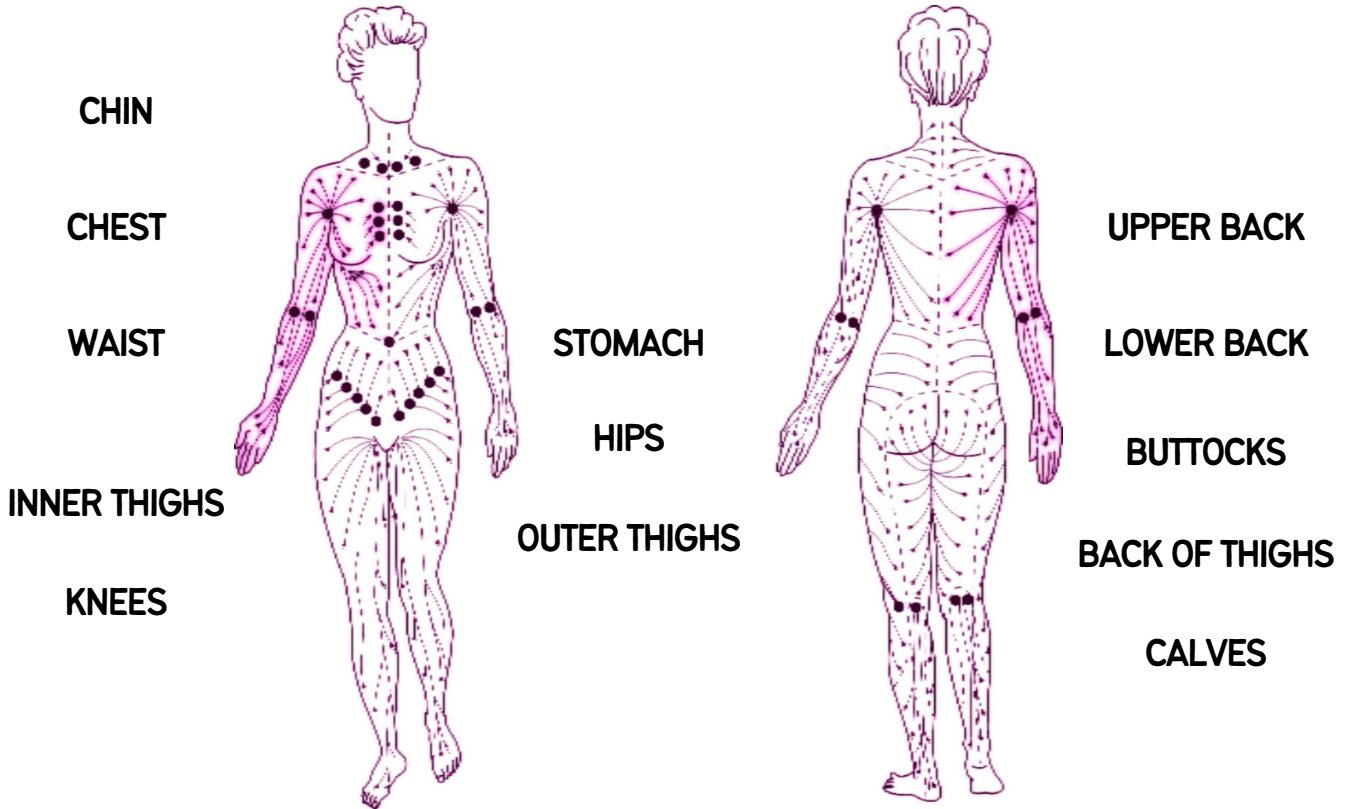
Please list all medications (including vitamins, hormones, and herbs) and reason for prescription.

Is there is anything else that your therapist should know about you or your needs before the session?

Please review your answers above to avoid any complications for this session.



PLEASE CHECK ALL AFFECTED AREAS



Caution:

If you are missing any lymph Nodes to your armpits. groins, abdomen, neck knees or any part of your body, please specify here _____ so your Therapist can provide you the best treatment you need.



Lunas Masahe

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MEDICAL

IN ORDER TO CREATE THE MOST BENEFICIAL SESSION, PLEASE MARK ALL CURRENT AND PREVIOUS CONDITIONS THAT APPLY.

GENERAL		FEMALE REPRODUCTIVE	
Fever		Currently pregnant	
Undergoing cancer treatment		Currently menstruating	
Last chemotherapy session		Fibrocystic breast disease	
Arteriosclerosis		IUD	
Carotid sinus issues		Other:	
Hyperthyroidism			
Liver Cirrhosis		MUSCULOSKELETAL	
Other:		Osteoporosis	
		Osteoarthritis	
EARS, NOSE, THROAT		Hernia	
Ringing in ears		Rheumatoid arthritis	
Sinus problems		Other:	
Earaches			
Other:		SKIN	
		Cellulitis	
CARDIOVASCULAR		Rash	
Chest pain or pressure		Major scars	
Swelling of legs		Lumps	
Palpitations		Other:	
Varicose veins			
Dizziness		HEMATOLOGIC/ LYMPHATIC	
Acute deep vein thrombosis		Cuts that do not stop bleeding	
Congestive heart failure		Enlarged lymph nodes (glands)	
Heart attack		Lymph nodes removed	
High/Low blood pressure		Frequent bruising	
Aneurysm		HIV/AIDS:	
Cardiac arrhythmia		Other:	
Other:			
		NEUROLOGICAL	
GASTRO-INTESTINAL		Strokes	
Crohn's disease		Seizures	
Abdominal pain		Other:	
Surgical implant(mesh or other)			
GI inflammation		ALLERGIES	
Diverticulitis/Diverticulosis:		Ear fullness	
Other		Sinus congestion	
		Recent sinus surgery	
URINARY		Other:	
Kidney failure			
Kidney stones		EMOTIONAL	
Urinary tract infection		Stress	
Dialysis		Anxiety & Depression	
Other:		Difficulty sleeping	
		Other:	



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CONSENT

I understand that the Manual Lymphatic Drainage I receive is provided for the basic purpose of improving the flow of my lymphatic system and also for relaxation. If I experience any pain or discomfort during this session, I will immediately inform the practitioner so that the pressure and/or strokes may be adjusted to my level of comfort.

I further understand that massage or bodywork should not be construed as a substitute for medical examination, diagnosis, or treatment and that I should see a physician, chiropractor, or other qualified medical specialist for any mental or physical ailment of which I am aware. I understand that massage/bodywork practitioners are not qualified to perform spinal or skeletal adjustments, diagnose, prescribe, or treat any physical or mental illness, and that nothing said in the course of the session given should be construed as such.

Because massage/ bodywork should not be performed under certain medical conditions, I affirm that I have stated all my known medical conditions and answered all questions honestly. I agree to keep the practitioner updated as to any changes in my medical profile and understand that there shall be no liability on the practitioner's part should I fail to do so.

I understand that Manual Lymphatic Drainage is an effective basic tool in Complete Decongestive Therapy, therefore, the Therapist will activate lymph nodes so the lymph can successfully flow without interruption and to successfully decongest the edema. These areas are the following:

- Breast/ Gentelia (only if it has edema and it is the area that is giving discomfort to the client. This applies to severe cases, only) Your initial is needed here.

Initial: _____ date: _____

- Groin
- axilla
- neck
- abdomen

*Please Note: Manual Lymphatic Drainage (MLD) is a very powerful modality and certain medical conditions are contraindicated and determine if and when you can receive a session. After the consultation and review of the information you have provided on this form, it will be determined if MLD should be administered to you today. Some conditions will require a note from your doctor before proceeding. Please understand this is for your safety and well-being.

Signature: _____

Date _____:



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For Lymphedema clients only

I understand that my Therapist is a certified to Manual Lymphatic Drainage and Decongested Lymphatic Therapy and has gone through training and education under Vodder techniques . I also understand that in some cases depending of clients cases, the followings are needed to successfully manage it's condition.

- MLD appointments (very important! Post-surgical, everyday from 6-8 weeks to avoid fibrosis.)
- Homecare MLD (will be explained by your therapist)
- Skin care (crucial to avoid skin infection and lesion)
- Bandages, compressions and garment (important to move the lymph continuously along with your MLP sessions.)
- Remedial exercises (Don't ignore this! muscles contractions propel the lymph to our deep trunks to return the lymph fluids to our body to circulate.

CLIENT NAME: _____ DATE _____

BODYWORKER SIGNATURE _____ DATE _____

CONSENT TO TREATMENT OF MINOR: BY MY SIGNATURE BELOW, I HEREBY AUTHORIZE (YOUR NAME), TO ADMINISTER MLD TECHNIQUES TO MY CHILD OR DEPENDENT AS THEY DEEM NECESSARY.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____



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AFTER CARE

LYMPHATIC HEALTH AND HEALING WITH MANUAL LYMPH DRAINAGE

To ensure that you gain maximum benefit from a massage treatment, I recommend that you:

- Loosen tight clothing - this inhibits lymph flow
- Increase the amount of water you drink over the next few days - the body will be in a state of high toxicity for a few days after the treatment
- Reduce your caffeine intake (coffee, tea, colas)
- Avoid alcohol for 24 hours
- Try to cut down on smoking
- Make time to rest and relax- this allow the blood pressure to return to normal if has dropped during a treatment (this often happens)
- Regular (but not too strenuous) exercise helps with muscle contraction, therefore lymph flow
- Deep diaphragmatic breathing also helps to promote healthy lymph congestion
- Diet is important; a light diet of row foods id recommended so that the body does not need to concentrate on sluggish digestions. Remember, low sodium diets are recommended for a healthy lymphatic system - poor diets are a contributing factor to poor lymphatic drainage

Occasionally, you may experience reactions when the body its self-healing process and elimination of toxins. These reactions may include:

- Frequent visit to the toilet
- Runny nose and/or cough
- Slight rash as the skin rebalances
- Perspiration - another way that the body can excrete waste
- Conditions which have been suppressed may flare up temporarily before they heal
- Deep sleep or difficulty sleeping and vivid dreams

Those reactions are only temporary and should clear within 24-48 hours. They are positive signals that your body has responded to the treatment and is balancing itself.

Stay Well!