



RELEASE + RESTORE

### **Client Commitment Sheet**

I (client) understand that progress in therapy is not always smooth and getting some initial change can sometimes be slow. I understand that years of tension can accumulate, and movement patterns become very ingrained. I commit my patience, participation, and attention so I can catch subtle improvements and stay positive through the tough spots.

I understand that in the first few sessions it may feel like not much change is occurring. I understand that neuromuscular therapy is generally a slow process similar to diet and exercise. I understand acute pain episodes often respond far more dramatically to neuromuscular therapy and that chronic issues require more time and attention and are a gradual process. I commit to doing the homework prescribed by my therapist and sticking with the stretches, postural advice and movement modifications to the best of my ability.

I commit to filling out my symptom report before each session and sending it in to my therapist so that they may respond to changes and progress with an appropriate treatment plan. I commit to noting subtle improvement as well as activities that aggravate my condition and any deterioration in my condition. .

I understand that one of the best pieces of information for my therapists is the activities and movements that flair up my condition. I commit to recording my observations about these to the best of my ability and reporting them as accurately as I can. I commit to carefully and comfortably participating in the movements recommended by my therapist with an eye on any feelings of discomfort that come from doing them.

I commit to immediately stopping any stretches or activities my therapist has prescribed if they cause additional pain or new pain. I understand that stretches should be as gentle and passive as possible, and bring on a feeling of relaxation in the targeted muscles as well as the rest of my body. I commit to holding off any strenuous activities (sports, exercises, dance etc) for any period of time as prescribed by my therapist, with the understanding that treated tissues may require time to rest and recuperate.

I understand that aspects of my job, my personality, and my gesticulations may be contributing to my pain and tension. I commit to developing the awareness of my daily movements so that I can make the changes necessary to resolve my condition.

I understand that no therapy is perfect and I may hit a plateau or wall in progress at certain times with certain areas. I understand that my therapist will provide their best efforts in elucidating the barriers to success. I commit to keeping my therapist aware of any concerns, worries, or doubts I may be having so that we may find a solution together.

I understand my therapist may be missing key information about what else may be driving my condition, and that I may have overlooked something critical that is worthy of mentioning. I commit to bringing up relevant information to the best of my ability.

I understand that underlying disease processes, vitamin and mineral deficiencies, structural damage and abnormalities, tears, arthritis, and other factors may be at the root of my problem. I commit to seeing other healthcare professionals when necessary and especially when recommended by my therapist.

I understand my health and well being are in my own hands and my therapist can at best perform informed treatments and educate me about maintaining my progress. I commit to my own health and pain management. I commit to my continual improvement with all the requirements that go along with it.

**Signature**\_\_\_\_\_ **Date**\_\_\_\_\_

**Printed Name** \_\_\_\_\_