Case Study Form: *For Self-Help, Family, Friend or Client*

**Your Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Session for:** Self-Help \_\_\_ Family \_\_\_ Friend \_\_\_ Client \_\_\_ Co-Worker\_\_\_ Stranger\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **Recipient’s Initials** | **Female** | **Male**  | **Age**  |
|  |  |  |  |

* **Reason for Tellington TTouch®:**

* **History of the Condition:**

**Pain Scale - Before Session**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|  |  |  |  |  |  |  |  |  |  |  |

**1 – 3** Light pain (uncomfortable); **4 – 7** Medium pain (could be reduced with an over-the-counter drug like Ibuprofen); **8 – 10** Extreme pain

Remarks:

* Therapeutic Modalities used previously or concurrently:
* Session environment - atmosphere (living room, office, train, plane, accident, or ?)
* **Position of the recipient - sitting, standing, laying down:**
* **Your Position - sitting or standing:**

Case Study Form

**Tellington TTouch-for-You® Session**

| **Part of Body TTouched** | **TTouch used** | **Tempo** | **Pressure** |
| --- | --- | --- | --- |
| **Example:** Neck & Shoulders | Clouded Leopard | 2 Seconds | 1-3 |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

* **Length of TTouch® Session:**
* Feedback immediately after TTouch® Session:

**Pain Scale** *After Session*

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **0** | **1** | **2** | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|  |  |  |  |  |  |  |  |  |  |  |

**1 – 3** Light pain (uncomfortable); **4 – 7** Medium pain (could be reduced with an over-the-counter drug like Ibuprofen); **8 – 10** Extreme pain

Remarks:

* Your reflections after session:
* If there are additional sessions with this person, continue below and on next pages.
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Case Study Form