

## SOAP Charting Notes for Massage Therapy

## MAIN

Therapist Name: Bob Burger **Facility Name:** Massage Therapy Center **Client First Name:** Lisa **Client Last Name:** Simpson Date of Service: 11/15/2019 Subjective Notes: Client - pain in lower back, intense at times **Objective Notes:** Therapist - Observes client has bruising in area Assessment: Client should restrict activties to walking less than 1 mile per day, and carrying less than 10 lbs for 14 days and re-evaluation Plan: Client will come into clinic 3x per week for next 14days for massage therapy Comments:

Client has agreed with plan