



## BRIEF EXTRACT of CASE HISTORY FORM

Please find time to let me know of any good result(s) with Classical Reflexology as this will help our research and some of these details can be shared in future reports by Research Forum, or held on a Research data base.

Please send this form back. You need only write a few lines but I may contact you at later date if a little more information is required especially if the details are to go into an article/ publication for Reflexology Research. Very occasionally we are asked by journalists, professional bodies or the medical profession to quote a case history. Please indicate below how you wish to be quoted - it can be anonymous if you wish. Thank you.

**Please List the following:**

**Condition treated:** .....

.....

**Describe brief Profile and Medical History of client including duration of condition/ illness?** .....

.....

.....

**Client:**        Male \_\_\_        Female \_\_\_        Age: \_\_\_\_\_

**No. of Reflexology treatments:** \_\_\_\_\_

**Aim of Treatment:** .....

**Result:** .....

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**Any contraindications/ cautions observed:** .....

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**Other comments in Reflective Practice:** .....

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**Name:** ..... **Tel:** .....

**Address:** ..... **E-mail:** .....

..... **NRRI Membership No. (if applicable)**

.....

**Are you willing to have this case history collated on research data base/ quoted?**        Yes \_\_\_ No \_\_\_

**If so, do you wish to be quoted by:**        Name \_\_\_        Initials \_\_\_        Anonymously \_\_\_

*(Please tick beside relevant answers)*

Please send Results to:

**Britta Stewart Dolan**

**NRRI Research Forum**

**"A.U.R.A.", Beechlawns, Mullingar, Co. Westmeath.**

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