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Outsmart PAIN

Teaching You How to Fix You

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Part of the

Series



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Outsmart Pain!

Teaching You How To Fix<u>You</u>

(2nd Edition -August 2008)

The FAB 5 Program

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Acknowledgements

Before you begin learning about the principles of <u>Total Motion Release</u>, I want to introduce you to all the people who helped make this book possible.

The first people I want to acknowledge are those at my clinic. They are the ones who have truly made this book possible. In fact, they have made the whole Total Motion Release program possible. Without their dedication to the everyday chore of treating patients and keeping the clinic running I would not have the time to teach the Total Motion Release Seminars or write this book. Chip Moseley, Margaret Mitsock, Jeanine Vignjevic and Tonia Hargrove are the front line of Total Motion Release. Chip, Margaret & Jeanine treat patients everyday using only the Total Motion Release concepts. I teach the basics at the seminars while they apply the process to real patients. Their input on what they have learned has been so helpful and important to our growth. Tonia takes care of all the office work and keeps things running on an even keel. Without her diligence we wouldn't progress as far as we have. To all of these wonderful people I say a profound Thank You.

My Father, Alan Baker, for his attention to detail with spending hour after hour writing, rewriting, designing and redesigning all the changes that took place. Without him, this book never would have been started, let alone finished.

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Chip Moseley, MPT - a wonderful colleague & friend that has been with Total Motion Physical Therapy from almost the inception of Total Motion Release. He has been an invaluable asset in the evolution of TMR. He made sense out of my nonsensical ideas and created forms and processes that allowed the Total Motion Release approach to be easily understood by everyone.

Demian Gutierrez, MPT, Jen Morlock, MPT, Margaret Mitsock, PTA for taking time out of their busy schedules to provide ideas for improving the book and for the hours they spent editing it.

All my patients and students, without them none of this would have been possible.

My wife Sarah, for the many hours she spent making this publication grammatically correct, and for her and our children having to put up with my late nights and inattentive disposition over the last several months. They are what makes all this worth it.

Tom Dalonzo-Baker

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What You Can Expect?

I have to assume that you have heard about Total Motion Release[®] (TMR[®]) either from our web site, a friend, a physical therapist, a chiropractor, a massage therapist, a personal trainer or your physician. You might have even heard about us on the news.

You are likely reading this book for 1 of 2 reasons. You treat people who are in pain or you yourself have pain, tightness, numbness, stiffness, swelling or imbalance(s) in your body that you have been unable to resolve or keep away for an extended period of time.

This book will teach you step-by-step the Total Motion Release – Fabulous 5 Program. There is also a companion Fabulous 5 (FAB 5) video that can be purchased at *www.totalmotionrelease.com*. This is an interactive video where I guide you through the entire FAB 5 program as I treat myself for a shoulder restriction in my own body. This video will speed up your healing and learning process ten-fold. If you are serious about your results and want greater success in less time then purchase the FAB 5 companion video.

The FAB 5 Program is an educational process designed to help you gain relief from your pain or musculoskeletal issues. By setting aside time to learn this program, and consistently performing the exercises prescribed, you will become your own healer. This program will provide many of you with significant relief the first time you perform the given exercises, even if you have had the issues for years.

Believe it or not, at our physical therapy clinic approximately eighty percent of musculoskeletal pain & issues are reduced and resolved simply by teaching patients the exact program you have in your hands. In fact, when I teach this FAB 5 program at the beginning of my Total Motion Release seminars to 20 students who have 20 different pain complaints, typically 18 of them will experience an 80 to 90% reduction of their issue using only the 5 exercises outlined in this book. No other pain relief program can provide these results on a multitude of issues with the use of the same 5 exercises.

Another great thing I love about the Total Motion Release Programs is that you will not have to purchase any special equipment or be required to understand difficult concepts. All you will need is a chair, motivation and commitment. That's it! In fact, if you visit our facility in Raleigh, NC, you will not be greeted with an array of intimidating exercise equipment only chairs, stools, white boards and charts on the walls. Your other tools are a pen and a copy of our Fabulous Five Worksheet to keep track of your progress.

All the Total Motion Release Programs are designed to be easy to understand and

able to be performed anywhere, including a street corner. It is this simplicity which allows you to understand and practice the Total Motion Release program just from reading of this book.

And finally, this is the best part of all, if you went to a health professional for low back pain and then three months later you had neck pain you would need to return to the health professional for additional help. This is not the case with Total Motion Release. If three months after you have learn the Total Motion Release FAB 5 Program you have neck pain, you simply treat yourself by repeating the FAB 5 process for the neck pain. Pretty cool! In essence, you have acquired a skill that can be used for a lifetime allowing you to become your own pain manager. Now that is true self-empowerment.

The entire Total Motion Release Program Series advances you through a deeper and deeper understanding and awareness of your own body's signals. As you progress in your awareness of these signals, and how to use them, you will have greater and greater mobility with less and less pain.

The Series includes The Fabulous 5 Program, The Combinations Program, The Alternate Positions Program, The Super Six Program, The Wind Up & Wow Program and The Melting & Free Flow Program. These other Total Motion Release Programs provide instruction beyond the Fabulous 5, going into more advanced exercises that provide relief for more complex issues.

The majority of the above programs have been developed and are being used in our clinic and being taught in our physical therapist training seminars. We are currently working on writing booklets in the same easy to understand format used in this booklet. In the future check our web site for their availability.

If you require or desire more advanced instruction please visit our web site *www.to-talmotionrelease.com* to locate a Total Motion Release Clinician near you. You will also find booklet and video which you can purchase right now, as well as seminars which you can attend.

I hope you find the Total Motion Release FAB 5 Program as exciting as I do. I wish you the best and please share with me your successes and allow me to help you when you run into obstacles. My e-mail is *totalmotionrelease@ncrrbiz.com*.

Wishing You Total Pain Free Motion!

Tom Dalonzo-Baker, MPT

Founder of Total Motion Release Owner of Total Motion Physical Therapy

Total Motion Release is Opposite of What is Currently Practiced for Pain Relief. <u>That is Why it Works So Well.</u>

The major difference between Total Motion Release® and other pain relief approaches is the area being treated. Conventional pain relief programs almost always treat or exercise the area that hurts. Total Motion Release treats or exercises the good area or areas that do not hurt.

For example, if you can't raise your right arm, you may fix it by exercising the left arm or one of your legs. If your left leg hurts, you may resolve the pain by exercising the opposite leg or maybe even doing twist exercises in your trunk. If your low back aches with right rotation, then perhaps left rotation will reduce your symptoms.

No more working through pain to get to pain relief. That never made sense to me. No more having to assume perfect form or perfect posture, which never felt good in the first place. You will begin to learn your body knows how to heal, yet for years neither you nor the medical field knew how to listen to it.

Your observation and awareness skills have been lacking and this has kept you in pain. Do you believe in the saying "Continue to do what you have always done and you will get what you have always gotten?" In the situation of pain and pain relief, if you want relief you need to begin to see your experiences in a different light. You need to act and do differently. And the differently is to simply observe what the body likes doing and give it more of what it likes. Stop trying to force the body where it doesn't want to go and start moving in the ways the body likes to move. The results are astonishing and the simplicity seems almost stupid. It is almost too easy. Nobody ever said common sense was common practice.

If you ever get stuck and feel Total Motion Release is just crazy and you are having a hard time wrapping your mind around this new concept of exercising the good areas of the body, please go back to our web site *www.totalmotionrelease.com* and watch the free videos again and again. Don't give up. Keep practicing, keep filling out the form in its entirety and before you know it something will click and it will all make sense.

It is kind of like learning to ride a bike. You never fully "get it" until you have practiced and practiced and then one day you take off to practice some more and something clicks and you are riding for the first time. You go from not knowing how to ride to having an "ah-hah" moment. In that split second you and your entire being "gets it." Learning Total Motion Release is a similar experience. Make a promise to yourself not to give up until you have that ah-hah moment of how it feels to ride the "bike" of Total Motion Release.

We ask our patients to write testimonials when they are being discharged from our care. Below is typical of what we hear from people just like you:

"Initially, I thought this stuff was crazy and I was skeptical. It sounded more like a sales pitch than a pain relief method. I figured I would give it a try for a few visits to see what happened and to see if maybe there was something to this. I was in severe pain from what I believed to be a failed back fusion. At the end of the first session I was pleasantly surprised how much a simple sit-to-stand on my good side helped reduce my back pain 80%. The same back pain I had tried to reduce with 2 other forms of therapy and yoga. I still don't know how it works, but it works and I am so glad I stuck with it. I can honestly say Total Motion Release IS common sense and has provided me far better results than any other pain relief approach I have tried. I know I didn't feel this way in the beginning, but I sure do now. If you are wondering if TMR works, it does. On top of all these amazing things the most valuable part to me is I love that I now have the tools and the skills to treat myself. Thank you so much! RH

I couldn't do a better job than the above testimonial to sum up the process and the power of Total Motion Release – The Fabulous 5 Program.

Testimonials

- ♦ I constantly suffer from tightness in my *back and hands, feet, knees*...As a scientist by trade, I am skeptical of EVERYTHING. What I saw and experienced was amazing. People who couldn't move almost immediately regained their range of motion. I almost immediately regained my range of motion and my back pain improved dramatically! I am a believer! Beth R.
- Being able to move my left *shoulder/arm* with no constriction is amazing. The immediate release was unexpected, exciting and mind altering! There are so many problems I face with fibromyalgia I'm relieved to see a therapy technique which really helps. Christy N.
- ◆ I came to Total Motion for relief from my *migraine headaches*. In only 4 sessions, my areas of restricted movement were moving more freely than I can ever recall. The migraine medication dosage has been cut by half. I know what to do if I ever feel a headache coming on or if I start to stiffen up again. Total Motion has definitely improved my quality of life! Lisa E.
- ◆ I came in and was just going to observe and as I sat here I realized things that I just thought were *old age* weren't. I haven't really had any true pain. I was shown how to observe my own body. By the time he helped me I was able to put my leg behind my head. It is nothing short of amazing. If you know you truly are in pain you must do this for yourself. Donna V.
- ◆ I was totally amazed at the improvement of the motion in *lifting my arm*. It helped with some of the pain in my neck and I'm going to try all of the 5 tests to help my whole body. Thanks so much this is incredible! Elizabeth M.
- ♦ I was very impressed with what we were shown. I had big problems with my *hips* and climbing stairs. After Tom showed us how to treat the good side to improve the bad side, it really worked. I would really recommend it. Ann L.
- ♦ I have suffered with *hip pain for going on four years*. I have tried chiropractic and physical therapy. Total Motion has been a great addition to the journey toward healing. I have made great improvements and have learned techniques to manage the pain. Thank you! S. G., Personal Trainer.
- I came tonight as a *doubting Thomas* and leaving a new patient. I raised my right arm over my head for the first time since I was 10 (over 32 years.) Thank You. Wendy H

For more Testimonials go to: www.totalmotionrelease.com

User's Guide

The remainder of the book is your step-by-step guide to using the FAB 5 exercises for pain and restriction relief.

You will need a copy the Fabulous 5 Worksheet and the 5 Steps to Freedom Worksheet in the back of the book. They will need to be enlarged to fill an 8.5 by 11 page. You can also download them from our web site: *www.totalmotionrelease.com*.

This book is designed to be easy to read. Don't think too much, or make the worksheet more difficult than it is. The worksheet is a method to help you organize your thoughts and record the progress you are making. It is an extremely powerful tool, but don't let it be confusing. Initially, simply fill out the form the best you know how, and as you practice more the form will become easier.

First, you will be introduced to the five steps in the Fabulous 5 process. The steps are represented by the circled faces. You will notice these five steps are at the top of the Fabulous 5 Worksheet. These steps are as important as following a recipe. If you skip steps or don't follow the steps in order, they will not produce the desired result.

Next, you will be guided on how to fill out the FAB 5 worksheet by the use of pictures and an interactive example. The worksheet is the essence of the FAB 5. Once you know how to fill it out correctly, you will be well on your way to mastering your own pain and restriction relief.

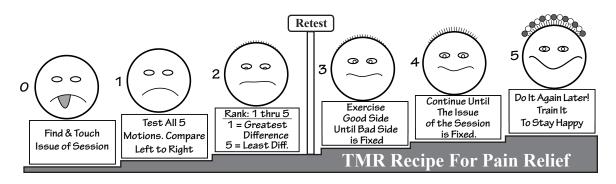
Lastly, a list of frequently asked questions has been included at the end of the book to help you through potential trouble spots.

Now turn the page and let's get started!

Notes



The Five Steps To Freedom

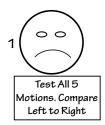


The above graphic illustrates the 5 steps (actually 6) required to successfully test and treat the issues you may have in your body. These steps are the foundation for getting you from being in pain, to experiencing pain relief. For maximin benefit, follow them exactly (without skipping any steps.) Let's review these steps quickly. They will be explained in greater detail later in the book.

0 Issue of the Session Step 0 in Total Motion Release® will be to find what



1 Testing All 5



issue is bothering you the most. You will learn how to access this *issue* and make it worse with specific motion'(s). You will record your worst issue on the top line of the FAB 5 Worksheet and describe how you touched it.

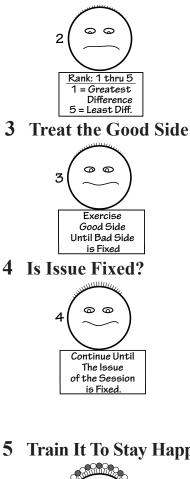
The next step will be to test all five exercises; comparing the left side to the right side. The purpose is to find out which is the *good* side and which is the *bad* side.

The five exercises you will test are: the Arm Raise, Twist (Trunk Rotation), Leg Raise, Sit-To-Stand, and the Bent Knee Toe Reach.

During testing, each exercise will be checked for the difference between the *good* side and the *bad* side. This difference will be recorded as a percent.

-age from 0% (no pain) to 100% (maximum pain) on the FAB 5 worksheet. Do not use the same number more than once as it will make it harder to prioritize (rank) the exercise effectively.

2 Rank Each Exercise





After testing, each exercise will be ranked from the greatest to the least amount of difference. The exercise with the highest percentage of difference is ranked #1. The exercise with the lowest percentage of difference is ranked #5.

The next step will be to treat the exercise ranked #1. The good side is exercised until the *bad* side is fixed, plateaus, or until you become too fatigued to continue.

The next step will be to continue working on the exercises until your Issue of the Session is fixed. This may take one exercise or all 5. If the issue is fixed after a couple exercises, you are done for this session. Any remaining exercises not yet done, left versus right side, can still be performed to help balance the body. The more balanced the body, the longer the issue stays gone.

Train It To Stay Happy In Total Motion Release[®], there are 3 stages of healing. The first stage is Pain Relief. The second stage is Maintenance. The third stage is Prevention & Wellness. A different amount of effort will be required at each stage. These stages are explained later in the book.

Notes



Follow along using your blank <u>Fabulous 5 Worksheet</u>, plus <u>The 5 Steps to Freedom</u> forms.

(Download the forms from: www.totalmotionrelease.com)

Step 0: Issue of the Session

What Issues are bothering you *now*? Where do you feel pain, tightness, stiffness, heaviness, weakness, numbness, or anything beside a normal sensation?

Can you perform a motion that causes a worsening of your above mentioned issue or a motion that creates a worse issue. The motion you choose should produce an issue quickly and not take an extended period of time.

- 1. Pick the worst issue you have and do a motion that makes it worse. Record it on the line next to <u>Issue of the Session</u>. See the shoulder issue example below.
- 2. Record your issue level on a scale of 0 to 100%. Is it a *low* issue level (0-30%), *medium* (40-60%) or *high* (70-100%)? Mark this percentage on the form as shown.
- 3. Touch the issue. In the grey box on the upper right side of the worksheet, describe how you touched the issue. Record how much pressure you used to touch the affected area (deep, moderate or light.)

Touching the Issue will allow you to see how your Issue is changing and progressing. Sometimes you will think your issue has not changed, then after you touch it you realize it has. For example, the original issue area is now smaller and you use less pressure when touching it. *So, don't forget to touch*.

				Issue of the Session	[%	Touch Issue of the Session
Issue of the Session S	eft. S ide a	Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure					
Day 1 - Session	Bad Side	0% - 100%	Rank	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - l		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise							
Twist							
Leg Raise							
Sit-to-Stand							
Toe Reach							



Our Example:

With Patient's Left arm out to the side, it hurts the shoulder when rotating. The issue scale is 65%. He touched his shoulder with 3 fingers and moderate pressure.

Tauah



The Fabulous Five: Step 1 - Testing

Once you determined your <u>Issue of the Session</u>, you will test five areas of your body, comparing the left side to the right side, looking for differences.

These are the five exercises you will test left side versus right side.

Arm Raise - Twist - Leg Raise - Sit-To-Stand - Toe Reach

When doing an exercise you must find out which is the *good* side and which is the *bad* side. You must understand there is *always* one side that is worse than the other side (even if it is just a subtle difference.) Here are a couple tips you can use to help decide which is the bad side. Say to yourself, which side do I dislike the most, or if I had to do the exercise for two hours which side would I dislike exercising more?

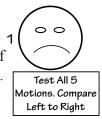
Once you have determined the *bad* side, record it on the FAB 5 worksheet (see worksheet on the opposite page.)

Then decide how much difference there is between the bad and good side. Is there a low difference (0-30%), medium difference (40-60%) or high difference (70-100%)? Think to yourself, how much more do I dislike the bad side versus the good side?

Record the percentage of difference on the worksheet as shown on the opposite page.

Note:

Your <u>Issue of the Session</u> may change during testing. This is okay. Simply change your <u>Issue of Session</u> percentage to the higher or lower number and go on to Step 2 - Ranking. In Step 3 - Treatment, you will learn to reduce your Issue.





Arm Raise: Testing

Our first step is to find out which arm, when raised, causes the most discomfort.

Raise one of your arms as high and as far back as you can. Do not allow your back to touch the chair. As you raise it, what do you feel (pain, tightness, heaviness, weakness, loss of motion, unsteadiness, not as quick to move)? How far back does your arm go?

Now raise your other arm as high and as far back as you can. As you raise it, what do you feel? How far back does your arm go?

Compare both sides. Which one causes you more discomfort when you move it? Remember, there is *always* one that is worse than the other, even if it is a very small difference. The one that causes the most discomfort, or is more difficult, will be called the *bad* side. (Ex. Right)

- 1. Record the *bad* side as seen below.
- 2. Record how much difference there is between the *bad* side and the *good* side. Is the difference low (0-30%), medium (40-60%) or high (70-100%)? *(Example: 25%)* Do not use the same percentage more than once (for ranking purposes.)



Good Side



Bad Side

Issue of Lot the Session S	eft. S ide a	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure				
Day 1 - Session		0% - 100%	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - l		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25				
Twist						
Leg Raise						
Sit-to-Stand						
Toe Reach						

The Twist: Testing

Here you will find out which side, when the trunk is rotated, causes the most discomfort.

Place your hands over your belly button. Rotate as far as you can to one side. Remember to keep your neck in a comfortable position while rotating. As you rotate, what do you feel (pain, tightness, heaviness, weakness, loss of motion, unsteadiness, not as quick to move)? How far can you rotate?

Now rotate as far as you can to the other side. As you rotate, what do you feel? How far do you rotate?

Compare both sides. Which side causes you more discomfort when you move? Remember, there is *always* one that is worse than the other, even if it is a very small difference. The one that causes the most discomfort, or is more difficult, will be called the *bad* side. (Ex: left)

- 1. Record the *bad* side as shown below.
- 2. Record how much difference there is between the *bad* side versus the *good* side. Is the difference low (0-30%), medium (40-60%) or high (70-100%)? *(Example: 40%)* Do not use the same percentage more than once (for ranking purposes.)





Good Side



Bad Side

Issue of Letter the Session S	eft. S ide a	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure					
Day 1 - Session	on Bad 0% – Bad Side (after exercise) Issue (after exercise Side 100% Rank (Start - End) % (Start - End)					Re- Check Where and How you Touch The <u>Issue of the Session</u>	
Arm Raise	R	25					
Twist	L	40					
Leg Raise							
Sit-to-Stand							
Toe Reach							



Leg Raise: Testing

Next you will find out which leg, when raised, causes the most discomfort.

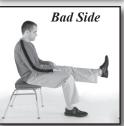
Start by extending one of your legs with your knee locked and your heel on the ground. (If using a chair, turn it and sit without the back support behind you.) Raise your leg as high as you can. What do you feel (pain, tightness, heaviness, weakness, loss of motion, unsteadiness, not as quick to move)? How far did you raise your leg?

Now do the same with your other leg, raising it as high as possible. Compare both sides. Which side causes you more discomfort when you move? Remember, there is *always* one that is worse than the other, even if it is a very small difference. The one that causes the most discomfort, or is more difficult, will

be called the *bad* side. (Example: left)

- 1. Record the *bad* side as seen below.
- 2. Record how much difference between the *bad* side versus the *good* side. Is the difference low (0-30%), medium (40-60%) or high (70-100%)? (*Ex: 15%*) Do not use the same percentage more than once (for ranking purposes.)







Issue of the Session			Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure			
Day 1 - Session	Bad Side	0% - 100%	Bad Side (after exercise) (Start - End) %	lssue (after e (Start -		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25				
Twist	L	40				
Leg Raise	L	15				
Sit-to-Star	nd					
Toe Reach						

Sit-To-Stand: Testing



Next you will find out which one-legged <u>Sit-To-Stand</u> causes the most discomfort.

Lift one of your feet off the floor and stand using only your other leg. What do you feel (pain, tightness, heaviness, weakness, loss of motion, unsteadiness, not as quick to move)? Now do the exercise on the other side. What do you feel?

If you cannot stand up with either leg, go to a higher stool, chair, table or add pillows or books to your seat. Increase the height until you can raise yourself with one leg. If you can raise yourself easily, use a lower stool or go to a step stool (8" high.)

Compare both sides. Which leg causes you more discomfort when you stand up on it? Remember, there is *always* one that is worse than the other, even if it is a very small difference. The one that causes the most discomfort, or the most difficult, will be called the *bad* side. (Example: Left)

- 1. Record the *bad* side as shown below.
- Record how much difference between the *bad* side versus the *good* side. Is the difference low (0-30%), medium (40-60%) or high (70-100%)? (*Example: 50%*) Do not use the same percentage more than once (for ranking purposes.)



Left Leg Stand



Right Leg Stand

	pose	Touch <u>Issue of the Session</u>					
Issue of the Session S	eft. S ide a	Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure					
Day 1 - Session	Bad Side	0% - 100%	Rank	Bad Side (after exercise) (Start - End) %	lssue (after exercise) (Start - End)		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25					
Twist	L	40					
Leg Raise	L	15					
Sit-To-Stand	L	50					
Toe Reach							



Bent Knee Toe Reach: Testing

Lastly, you will find out which <u>Bent Knee Toe Reach</u> causes the most discomfort for the weight-bearing back leg.

Place a bar, or a piece of paper on the floor, or use a wall as your marker. Stand approximately one big step away from your marker.

Standing on one leg, reach out with your other foot while keeping the sole, or heel, of that foot 1" above the floor. Keep the back, weight bearing foot flat on the ground. If you can easily reach the marker, then back up 3 or 4 inches and try again. What do you feel (pain, tightness, heaviness, weakness, loss of motion, unsteadiness)? How far did you reach?

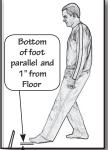
Do the exercise on the other side. What do you feel? How far did you reach?

<u>The leg you are standing on</u>, not the leg you are reaching with, is the one used to determined which is your *good* or *bad* side.

Compare both sides. Which leg causes you more discomfort? Remember, there is *always* one that is worse than the other, even if it is a very small amount. The one that causes the most discomfort, or is more difficult, will be called the *bad* side. (Example: right)

- 1. Record the *bad* side as shown below.
- 2. Record how much difference between the *bad* side versus the *good* side. Is the difference low (0-30%), medium (40-60%) or high (70-100%)? *(Example: 70%)* Do not use the same percentage more than once (for ranking purposes.)

Touch Issue of the Session Write Where and How Touched Issue of Left. Shoulder Pain, Arm Raised Out To 65% **Circular Rub Front Shoulder.** the Session Side at 90^o - Forward Rotation **3 Fingers - Moderate Pressure** Day 1 - Session 0% -Bad Side (after exercise) Bad Issue (after exercise) Re- Check Where and How you Touch Side 100% Rank (Start - End) % (Start - End) The Issue of the Session R 25 Arm Raise Twist 40 L 15 L Leg Raise 50 Sit To Stand L R 70 Toe Reach







Good Side

Notes



Step 2 - Rank



Now you must *rank* each exercise from 1 to 5. Number one is the exercise with the greatest percentage of difference.

In our example below, Sit-to-Stand is ranked #1. Continue until the exercise with lowest difference in percentage is ranked as #5. The exercise with the next greatest percentage difference is ranked #2.

Issue of	l oft	SI	houl	der	Pain, Arm Raised	Touch <u>Issue of the Session</u> Write Where and How Touched		
					orward Rotation	l out lo	65%	Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure
Day 1 - Session			0% - 1 <i>00%</i>		Bad Side (after exercise) (Start - End) %	lssue (after e (Start - l		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	F	2	25	4				
Twist	Ι	_	40	3				
Leg Raise	Ι	_	15	5				
Sit-to-Star	nd L	_	50	2				
Toe Reach	F	2	70	1				



Fabulous Five: Step 3 - Ranking for Treatment

The treatment of the FAB 5 exercises on the following pages are explained in the ranked order of our patient example.

Day 1 - Session	Bad Side	0% - 100%	Rank	
Arm Raise	R	25	4	
Twist	L	40	3	This is the Rank order the book follows.
Leg Raise	L	15	5	• Your Rank order will be different. •
Sit-to-Stand	L	50	2	
Toe Reach	R	70	1	

You should read through the Treatment Section one time to get the feel of how to perform and record treatment of the FAB 5 exercises.

Then, begin your treatment by starting on the pages that demonstrate your #1 ranked exercise. Sequence through the exercises in the order of your ranking, reviewing the pages that correspond to them.

Fabulous Five: Step 3 - Treatment

Issue of the Session S	eft. S ide a	Touch Issue of the Session Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure					
Day 1 - Session	Bad Side	0% - 100%	Rank	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - I		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4				
Twist	L	40	3				
Leg Raise	L	15	5				
Sit-to-Stand	L	50	2				
Toe Reach	R	70	1				

You can see by looking at the above example that the *Toe Reach* exercise was ranked number 1 and the *Leg Raise* was ranked number 5.

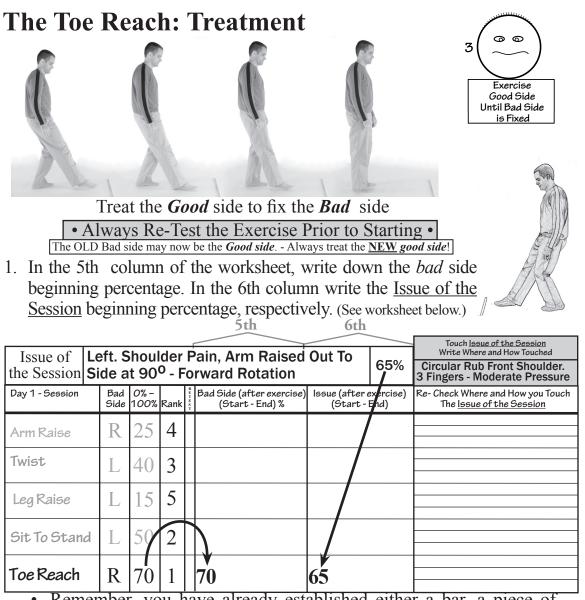
You now will do Step 3 - Treatment. During this step, you will exercise the *good* side for each of the five exercises. Begin with the exercise *ranked* number 1 (in our example, the Toe Reach.)

Before you start treatment on the sit-to-stand, re-test it. <u>You must always re-test</u> because sometimes the bad side, or the Issue, will change after going through Step 1 - Testing.

You will treat each of the exercises by following the rank order shown in the worksheet above. Pay attention to the written instructions on the pages that follow and always record your results in the FAB 5 worksheet as demonstrated at the bottom of each page.

Note:

You will see the term <u>End-Range</u> used quite a bit during Step 3 - Treatment. It refers to the furthest point you can achieve. At <u>End-Range</u> you will continue to test your limits. If you stop pushing when you reach your first End-Range and "just hang out there," you will not get the maximum benefit from these exercises.



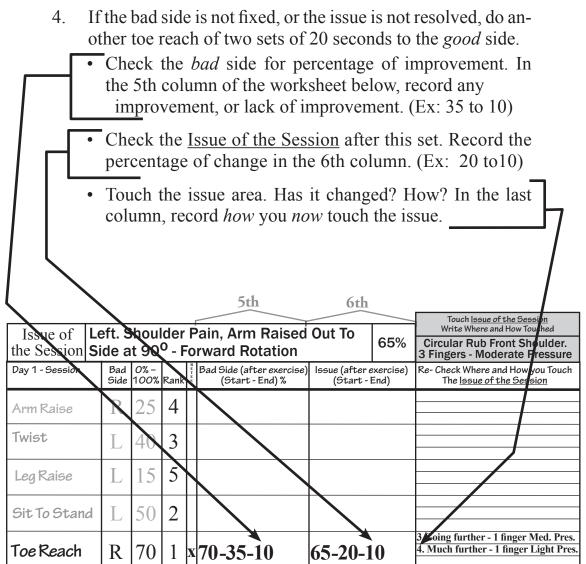
- Remember, you have already established either a bar, a piece of paper or a wall as your reach point.
- While standing on the good leg (left), bend it and reach the toe of your other foot out as far as possible, keeping the bottom of the reaching foot one inch above the floor. Keep the back foot's heel on the ground.
 - Continue reaching the front foot by bending the knee of the back leg further.
 - Perform two sets of 20 seconds.

The Toe Reach: Treatment

- 2. Check the *bad* side after the two sets. Is the bad side better? By how much?
 - If the bad side was originally 70 and you now feel it is a 35, then record it in the 5th column of the worksheet on the opposite page.
- 3. Re-check the <u>Issue of the Session</u> after the two sets. Check it exactly as you did during Step 0, either still or with motion.
 - Record your improvement for the <u>Issue of the Session</u> in the 6th column of the worksheet. (Our example: was 65; now 20)
 - Touch the issue. In the last column record how you touched the issue (with your fist, with the whole hand, with your fingers) and with how much pressure (light, moderate, heavy.)

					5th	6th		
Issue of Lot the Session S	eft. S ide a	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure						
Day 1 - Session		0% - 100%	Rank	R E T E S T	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25						
Twist	D	40	3					
Leg Raise	L	15	5					
Sit To Stand	L	50	2	N				
Toe Reach	R	70	1	x	70-35	65-20		Going further - 1 finger Med. Pres.

The Toe Reach: Treatment



Toe Reach: Treatment



5

If the bad side is not fixed, or the issue is not resolved, do another 2 sets of 20 seconds to the *good* side (we used one set of 30 to 40 seconds instead of 2 sets of 20 seconds.), and record all the information as done in Step 4. Continue until the *bad* side is fixed (a zero), your issue is fixed (a zero), improvement has plateaued or you are too fatigued to continue. **Example**: Bad Side 10 - 0 – Issue 10 - 8 – Record touch

					5th		6th	Γ		
Issue of the Session					Pain, Arm R prward Rota		Out To	6	5%	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure
Day 1 - Session	Bad Side			R E T E S T	Bad Side (after e (Start - End		lssue (after ex (Start - E			Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4							
Twist	L	40	3							
Leg Raise	L	15	5							
Sit To Stand	L	50	2							
Toe Reach	R	70	1	x	70-35-10	-0	65-20-1	0.	-8	3 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. 5. Very Very Lightly - 1 finger

• Take the final number in column 6 and write it as the starting point for your #2 ranked exercise. – Then move on to that exercise.

6th 5th Touch Issue of the Session Write Where and How Touched Left. Shoulder Pain, Arm Raised Out To Issue of 65% **Circular Rub Front Shoulder.** the Session Side at 90^o - Forward Rotation **3 Fingers - Moderate Pressure** Day 1 - Session Bad 0% -Bad Side (after exercise) Issue (after exercise) Re- Check Where and How you Touch Side 100% Rank (Start - End) % (Start - End) The Issue of the Session 25 4 R Arm Raise Twist 3 I 40 5 15 I Leg Raise Sit To Stand 50 2 8 3. Going further - 1 finger Med. Pres. x 70-35-10-0 65-20-10-8 4. Much further - 1 finger Light Pres. 70 Toe Reach R 1 5. Very Very Lightly - 1 finger

Sit-To-St	tan	and the second second											
• Start in Sitting Position •													
Treat the <i>Good</i> side to fix the <i>Bad</i> side													
• Always Re-Test the Exercise Prior to Starting •													
The OLD Bad side may now be the <i>Good side</i> Always treat the <u>NEW good side</u> ! 1. In the 5th column of the worksheet, write down the <i>bad</i> side													
beginning percentage. In the 6th column write the <u>Issue of the</u>													
Session beginning percentage, respectively. (See worksheet below.)													
I				1	Sun	6th		Touch <u>Issue of the Session</u>					
					Pain, Arm Raised rward Rotation	Out To	65%	Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure					
Day 1 - Session	Bad Side	0% - 100%	Rank	R E T E S T	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>					
Arm Raise	R	25	4										
Twist	L	40	3										
Leg Raise	L	15	5										
Sit To Stand	L	50	2		50	8							
Toe Reach	R	70	1		70-35-10-0	65-20-1	0-8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger 					
Sit To Stand Toe Reach	R	70	1		70-35-10-0	65-20-1		4. Much further - 1 finger Light Pres.					

- Stand up on your *good* leg. The worksheet shows the *bad side* as the left leg, therefore, the Right leg is the *good side*.
- Stand up and sit down for 12 repetitions with 100% of your weight on the *good* side. (If you can't do 12, do as many as you can.)
- Perform two sets of 12 repetitions.

Sit-To-Stand – Treatment

2.	Chec	Check the <i>bad</i> side after the two sets. Is the bad side better? By how much?												
\square	• If the bad side was originally 50 and you now feel it is a 25, then record it in the 5th column of the worksheet below.													
3.	. Re-check the <u>Issue of the Session</u> after the two sets. Check it exactly as you did during Step 0, either still or with motion.													
-	Record your improvement for the <u>Issue of the Session</u> , in the 6th column of the worksheet. (Our example: was 8; now 8)													
	• Touch the issue. In the last column record how you touched the issue (with your fist, with the whole hand, with your fingers) and with how much pressure (light, moderate, heavy.)													
			<u>`hou</u>						Touch <u>Issue of the Session</u> Write Where and How Toucher					
Issue the Sea						Pain, Arm Raised rward Rotation	Out Io	65%	Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure					
Day 1 - Se	ession	Bad Side	04 - 100%	Rank	R E T E S T	Bad Side (after exercise) (Start - End) %	lssue (after ex (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>					
Arm R	Raise	K	25	4										
Twist		L	40	3										
LegR	Leg Raise L 15 5													
Sit To	Stand	L	50	2	x	50-25	8-8		3. Touched The Same					
ToeR	each	R	70	0-8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger 									

Sit-To-Stand: Treatment

4. If the bad side is not fixed, or the issue is not resolved, do another 2 sets of 12 repetitions to the *good* side.

	 Check the <i>bad</i> side for percentage of improvement. In the 5th column of the worksheet below, record any improvement, or any lack of improvement. (Ex: 25 to 10) Check the <u>Issue of the Session</u> after this set. Record the percentage of change in the 6th column. (Ex: 8 to 4) 											
• Touch the issue area. Has it changed? How? In the last column, record <i>how</i> you <i>now</i> touch the issue.												
	5th 6th Touch Issue of the Session											
Issue of the Session S	eft. S ide a	65%	Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure									
Day 1 - Session	Bad Side	0 100%	Rank	RETEST	Bad Side (after exercise) (Start - End) %	lssue (after ex (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>				
Arm Raise	R	25	4									
Twist	L	40	3									
Leg Raise	L	15										
Sit To Stand	L	50	2	x	50-25-10	8-8-4		3 Souched The Same 4. More Motion - Very Very Light				
Toe Reach	R	70	1	x	70 -35 -10 -0	65 -20 -]	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger 				

Sit-To-Stand: Treatment



5.

If the bad side is not fixed, or the issue is not resolved, do another 2 sets of 12 repetitions to the *good* side, and record all the information as done in Step 4. Continue until the *bad* side is fixed (a zero), improvement has plateaued or you are too fatigued to continue.

Example: Bad Side 10 - 0 - Issue 4 - 0 - Record touch

NOTE: You ar									
Issue is 0! We w					5th		6th		
Balance the othe	r exe	rcises	.	1					Touch <u>Issue of the Session</u>
Issue of IL	en. s	nou	ider	· F	Pain, Arm Ra	lised	Out To		Write Where and How Touched
the Session Si								65%	Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure
Day 1 - Session	Bad Side	0% - 100%	Rank	R E T E S T	Bad Side (after ex (Start - End)		lssue (after ex (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4						
Twist	L	40	3						
Leg Raise	L	15	5			Ţ			1
Sit To Stand	L	50	2	x	50 - 25 - 10) -0	8 -8 -4 -	-0	3 Touched The Same 4 More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10) -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

• Take the final number in column 6 and write it as the starting point for your #3 ranked exercise. – Then move on to that exercise. 6th

				Touch <u>Issue of the Session</u>				
Issue of the Session	Left. Side a	Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure						
Day 1 - Session	Bad Side	0% - 100%	Rank	R E T E S T	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - I		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4					
Twist	L	40	3			0		
Leg Raise	L	15	5					
Sit To Stan	d L	50	2	x	50 - 25 - 10 - 0	8-8-4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

The Twist (Trunk) – Treatment







Treat the *Good* side to fix the *Bad* side

• Always Re-Test the Exercise Prior to Starting • The OLD Bad side may now be the *Good side*. - Always treat the <u>NEW good side</u>!

 In the 5th column of the worksheet, write down the *bad* side beginning percentage. In the 6th column write the <u>Issue of the Session</u> beginning percentage, respectively. (See worksheet below.) 5th 6th

5					/) III	otn		
Issue of the Session S	eft. S ide a	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure						
Day 1 - Session		0% - 100%		R E T E S T	Bad Side (after exercise) (Start - End) %	lssue (after ex (Start - E		Re- Check Where and How you Touch The <u>lssue of the Session</u>
Arm Raise	R	25	4					
Twist	L	40	3		40	0		
Leg Raise	L	15	5)			
Sit To Stand	L	50	2	x	50 - 25 - 10 - 0	8-8-4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

- Place your hands on your belly button and then rotate toward your *good* side as far as possible. Keep neck in a neutral/comfortable position. (Right side in our example see worksheet on opposite page.)
- Continue pushing further into the end range for 20 seconds. Push hard!
- Perform two sets of 20 seconds.

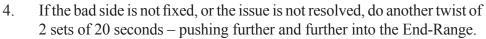
The Twist (Trunk) – Treatment

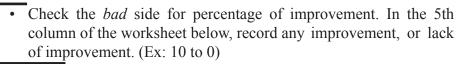
- 2. Check the *bad* side after the two sets. Is the bad side better? By how much?
 - If the bad side was originally 40 and you now feel it is a 10, then record it in the 5th column of the worksheet on the opposite page.
- 3. Re-check the <u>Issue of the Session</u> after the two sets. Check it exactly as you did during Step 0, with motion.
 - Record your improvement for the <u>Issue of the Session</u> in the 6th column of the worksheet. (Our example: was 0; still 0)

• Touch the issue. In the last column record how you touched the issue (with your fist, with the whole hand, with your fingers) and with how much pressure (light, moderate, heavy.)

					5th	6th		
Issue of the Session Si	eft. S	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure						
Day 1 - Session	Bad Side	04 - 1007	Rank	R E T E S T	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and how you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4	N				
Twist	L	40	3	X	40-10	0-0		3. Nothing
Leg Raise	L	15	5					
Sit To Stand	L	50	2	X	50 - 25 - 10 - 0	8-8-4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

The Twist (Trunk): Treatment





- Check the <u>Issue of the Session</u> after this set. Record the percentage of change in the 6th column. (Ex: 0 to 0)
- Touch the issue area. Has it changed? How? In the last column, record *how* you *now* touch the issue.

					5th	6th		Touch Issue of the Session
Issue of the Session Si	eft. ide a	Write Where and How Touche Circular Rub Front Shoul Jer. 3 Fingers - Moderate Pressure						
Day 1 - Session		0% - 100%	Rank	RETES	Bad Side (after exercise) (Start - End)%	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4					
Twist	L	40	3	x	40 -10 -0	0-0-0		3. Nothing 4. Nothing
Leg Raise	L	15	5					
Sit To Stand	L	50	2	x	50 - 25 - 10 - 0	8-8-4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

NOTE: Our bad side is fixed so we are moving on to the next exercise - Arm Raise #4. If your bad side isn't fixed continue on to step 5.

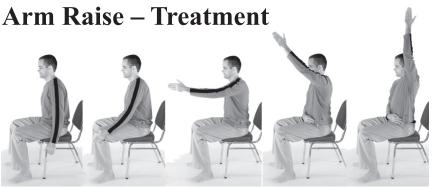
5. If the bad side is not fixed, or the issue is not resolved, do another twist exercise of two sets of 20 seconds to the *good* side, and record all the information as done in Step 4. Continue until the *bad* side is fixed (a zero), the Issue is fixed (a zero), improvement has plateaued or you are too fatigued to continue.

The Twist (Trunk): Treatment



• Take the final number in column 6 and write it as the starting point for your #5 ranked exercise. – Move on to that exercise.

15 FIXea					5th	6th	
Issue of the Session Si	eft. S de a	Touch Issue of the Session Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure					
Day 1 - Session	Bad Side	0% - 100%			Bad Side (after exercise) (Start - End) %	lssue (after exercise (Start - End)	e) Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4			0	
Twist	L	40	3	x	40 -10 -0	0 -0 -0	3. Nothing 4. Nothing
Leg Raise	L	15	5				
Sit To Stand	L	50	2	X	50 - 25 - 10 - 0	8 -8 -4 -0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -10 -	8 3. Going further - 1 finger Med. Pres. 4. Much further - 1 finger Light Pres. 5. Very Very Lightly - 1 finger





Treat the *Good* side to fix the *Bad* side • Always Re-Test the Exercise Prior to Starting •

The OLD Bad side may now be the *Good side*. - Always treat the <u>NEW good side</u>!

In the 5th column of the worksheet, write down the *bad* side beginning percentage. In the 6th column write the <u>Issue of the Session</u> beginning percentage, respectively. (See worksheet below.)



Issue of the Session Si Day 1 - Session	eft. S de a ^{Bad} ^{Side}	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure Re- Check Where and How you Touch The <u>Issue of the Session</u>						
Arm Raise	R	25	4		25	0		
Twist	L	40	3	x	<i>4</i> 0 -10 -0	0-0-0		3. Nothing 4. Nothing
Leg Raise	L	15	5					
Sit To Stand	L	50	2	x	50 - 25 - 10 - 0	8 - 8 - 4 - 0		3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -10) -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

- Raise your *good* arm up as high as possible and back as far as possible (Left arm in our example see worksheet on opposite page.) Do not lean against chair.
- Push your fingertips further to the ceiling (lifting the rib cage) and continue pushing your arm further back.
- Continue pushing further into the End-Range for 20 seconds. Push hard!
- Perform two sets of 20 seconds.

Arm Raise – Treatment

- 2. Check the *bad* side after the two sets. Is the bad side better? By how much?
 - If the bad side was originally 25 and you now feel it is a 5, then record the new number in the 5th column of the worksheet on the opposite page.
- 3. Re-check the <u>Issue of the Session</u> after the two sets. Check it exactly as you did during Step 0, with motion.
 - Record your improvement for the <u>Issue of the Session</u> in the 6th column of the worksheet. (Our example: was 0; still 0)
 - Touch the issue. In the last column, record how you touched the issue (with your fist, with the whole hand, with your fingers) and with how much pressure (light, moderate, heavy.)______

				г	5th	6th		Touch Issue of the Session
Issue of the Session Si	eft. S de a	Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure						
Day 1 - Session	Bad Side	0% - 100%	Rank	RE EST	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>Issue of the Sestion</u>
Arm Raise	R	25	4	x	25 -5	0-0		3. Nothing
Twist	L	40	3	x	40 -10 -0	0 -0 -0		3. Nothing 4. Nothing
Leg Raise	L	15	5					
Sit To Stand	L	50	2	X	50 - 25 - 10 - 0	8 - 8 - 4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

Arm Raise: Treatment

- 4. If the bad side is not fixed, or the issue is not resolved, do another arm raise of two sets of 20 seconds to the *good* side, pushing further and further into the End-Range.
 - Check the *bad* side for percentage of improvement. In the 5th column of the worksheet below, record any improvement, or any lack of improvement. (Ex: 5 to 0)
 - Check the <u>Issue of the Session</u> after this set. Record the percentage of change in the 6th column. (Ex: 0 to 0)
 - Touch the issue area. Has it changed? How? In the last column, record *how* you *now* touch the issue.

\leq	\geq			r	5th	6th		Touch <u>Issue of the Session</u>
Issue of the Session Si	eft. S	Write Where and How Touche Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure						
Day 1 - Session		0% - 100%	Rank	RETEST	Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>Issue of the Sessio</u>
Arm Raise	R	25	4	X	25 - 5 - 0	0-0-0		3. Nothing 4. Nothing
Twist	L	40	3	х	40 -10 -0	0-0-0		3. Nothing 4. Nothing
Leg Raise	L	15	5					
Sit To Stand	L	50	2	X	50 - 25 - 10 - 0	8 - 8 - 4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

NOTE: Our bad side is fixed so we are moving on to the next exercise - Leg Raise #5. If your bad side isn't fixed continue on to step 5.

5. If the bad side is not fixed, or the issue is not resolved, do another arm raise exercise of 2 sets of 20 seconds to the *good* side, and record all the information as done in Step 4. Continue until the *bad* side is fixed (a zero), your issue is fixed (a zero), improvement has plateaued or you are too fatigued to continue.

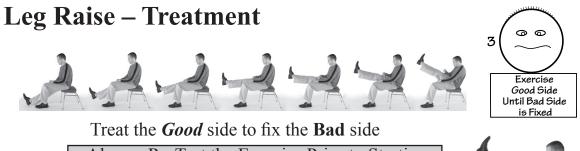
Arm Raise: Treatment



•

Take the final number in column 6 and write it as the starting point for your #5 ranked exercise – Then move on to that exercise.

					5th	6th		
					Pain, Arm Raised rward Rotation	Out To	65%	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure
Day 1 - Session		0% - 100%			Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4	x	25 -5 -0	0-0-0		3. Nothing 4. Nothing
Twist	L	40	3	X	40 -10 -0	0-0-0		3. Nothing 4. Nothing
Leg Raise	L	15	5			0		
Sit To Stand	d L	50	2	X	50 - 25 - 10 - 0	8 - 8 - 4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger



• Always Re-Test the Exercise Prior to Starting • The OLD Bad side may now be the *Good side*. - Always treat the <u>NEW good side</u>!

1. In the 5th column of the worksheet, write down the *bad* side beginning percentage. In the 6th column write the <u>Issue of the Session</u> beginning percentage, respectively. (See worksheet below.)

					5th	6th		
					ain, Arm Raised rward Rotation	Out To	65%	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure
Day 1 - Session		0% - 100%			Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	R	25	4	X	25 -5 -0	0-0-0		3. Nothing 3. Nothing
Twist	L	40	3	X	40 -10 -0	0 - 0 - 0		3. Nothing 4. Nothing
Leg Raise	L	15	5	X	15	0		
Sit To Stand	L	50	2	X	\$0 -25 -10 -0	8 - 8 - 4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

- Raise your *good* leg up as high as possible. (Right leg in our example see worksheet on opposite page) If using a chair, turn it and sit without the back support behind you.
- Continue lifting higher into the end range for 20 seconds. Lift hard and higher! (Allow your body to lean back as it wants to. As long as you are raising your leg higher this is not cheating.)
- Perform two sets of 20 seconds.

Leg Raise – Treatment

- 2. Check the *bad* side after the two sets. Is the bad side better? By how much?
 - If the bad side was originally 15 and you now feel it is a 0, then record it in the 5th column of the worksheet on the opposite page.
- 3. Re-check the <u>Issue of the Session</u> after the two sets. Check it exactly as you did during Step 0, with motion.
 - Record your improvement for the <u>Issue of the Session</u> in the 6th column of the worksheet. (Our example: was 0; still 0)
 - Touch the issue. In the last column, record how you touched the issue (with your fist, with the whole hand, with your fingers) and with how much pressure (light, moderate, heavy.)

					5th	6th		
					Pain, Arm Raised	Out To	65%	Touch <u>Issue of the Session</u> Write Where and How Touched Circular Rub Front Shoulder. 3 Fingers - Moderate Pressure
Day 1 - Session	Bad Side	0% 100%	Rank		Bad Side (after exercise) (Start - End) %	lssue (after e (Start - E		Re- Check Where and How you Touch The <u>lesue of the Session</u>
Arm Raise	R	25	4	X	25-5-0	0 -0 -0		3. Nothing 4. Nothing
Twist	L	40	3	X	40 -10 -0	0-0-0		3. Nothing 4. Nothing
Leg Raise	L	15	5	x	15-0	0-0		3. Nothing
Sit To Stand	L	50	2	x	50 - 25 - 10 - 0	8 - 8 - 4	-0	3. Touched The Same 4. More Motion - Very Very Light 5. Nothing Left - All Better
Toe Reach	R	70	1	X	70 -35 -10 -0	65 -20 -	10 -8	 Going further - 1 finger Med. Pres. Much further - 1 finger Light Pres. Very Very Lightly - 1 finger

Leg Raise – Treatment

NOTE: Our bad side is fixed and this is our last exercise, so we are done. If your bad side isn't fixed continue on to steps 4 and 5.

- 4. If the bad side is not fixed, or the issue is not resolved after the first exercise sets, do another leg raise of two sets of 20 seconds to the *good* side, pushing further and further into the End-Range.
 - Check the *bad* side for percentage of improvement. In the 5th column of the worksheet below, record any improvement, or lack of improvement.
 - Check the <u>Issue of the Session</u> after this set. Record the percentage of change in the 6th column.
 - Touch the issue area. Has it changed? How? In the last column, record *how* you *now* touch the issue.
- 5. If the bad side is not fixed, or the issue is not resolved after the second exercise sets, do another leg raise exercise of two sets of 20 seconds to the *good* side, and record all the information as done in Step 4. Continue until the *bad* side is fixed (a zero), improvement has plateaued or you are too fatigued to continue.
 - If this is not your last exercise, take the final number in column 6 and write it as the starting point for your next ranked exercise. Then move on to that exercise.



Continue Until The Issue is Fixed

Throughout <u>Step 3 - Treatment</u>, you were asked to re-check the issue and see if it had improved. In the examples shown throughout the book, only 2 exercises were required to fix the issue. This is not always the case (see example below.) In some instances only 1, 3, 4 or all 5 exercises will be required to fix the <u>Issue of the Session</u>.



When the <u>Issue</u> is fixed (a zero), you are done for the session.

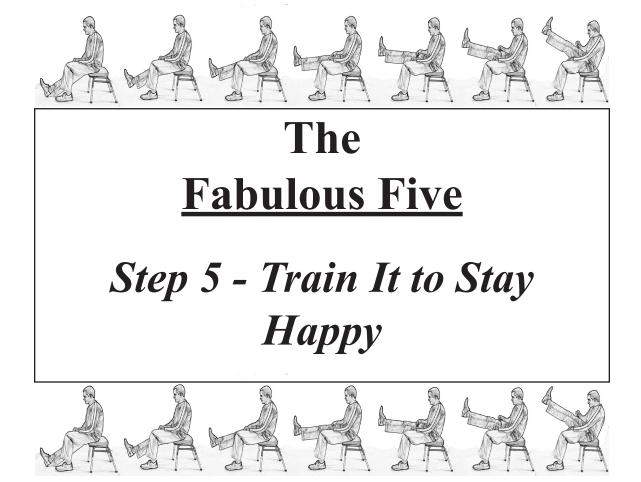
As we did in our example, any remaining exercises can be performed to help balance the body. The more balanced the body, the longer the issue stays gone.

So, try to reduce all the bad sides to zero.

<u>*Tip*</u>: The FAB 5 is great for addressing your soreness from prior treatments. Simply treat the soreness as your <u>Issue of Session</u>



<u>Session.</u>				This issue	is fixed.	7
				These two exe still be tr		/
				\square		Touch <u>Issue of the Session</u> Write Where and How Touched
Issue of the Se	SS101	<u>n</u>	eft Kı	nee Hurts and Stiff		Touched Right side of Knee with Palm of Hand and Heavy Pressure.
Day 1 - Session	Bad Side	0% - 100%	Fank	Bad bide (after exercise) (Start - End) %	lssue (after exerdise) (Start - Endi	Re- Check Where and How you Touch The <u>Issue of the Session</u>
Arm Raise	L	$ \overline{40} $	4			
Twist	R	60	3	60 - 20 - 00	20 - 10 - 00	3. Touched Lightly With Index Finger 4. Wow! It's Gone!
Leg Raise	R	70	2/	70 - 40 - 30 - 10	50 - 30 - 20 - 20	3. Touched Moderately with Fingers 4. Touched Lightly with Fingers 5. Touched Lightly with Fingers
Sit-to-Stand	R	80	h	75 - 50 - 20 - 15	80 - 60 - 50 - 50	3. Rubbed Knee With Palm of Hand 4. Moderately Rubbed Knee With Palm 5. Moderately Rubbed Knee With Palm
Toe Reach	R	30	5			



Train It to Stay Happy Practice * Practice * Practice

How often do you need to perform the exercises?

In Total Motion Release® there are three goals of therapy.

- Pain or Issue Relief. You want your Pain or Issue to be 90-100% improved.
- Fix the underlying restrictions that cause your pain or issue. You do this by being able to reduce and keep all the FAB 5 exercises below 10-15%. This will create a greater balance in your body and the more balanced your body the less pain or issues you will experience.
- Be able to fix yourself now and into the future using the FAB 5 Program. You understand and can use the FAB 5 worksheet to resolve any musculoskeletal issue you may experience in your lifetime.

Here is how you achieve these three goals.

For 4-5 days set aside 15-30 minutes to practice filling out the FAB 5 worksheet in its entirety. The goal is to be able to do this without difficulty and with good understanding. As you begin to master the program the worksheet will take approximately 5-10 minutes.

For the remainder of the day, perform your top 1 & 2 ranked exercises 3-4 times a day. For example, if the top two ranked exercises are the leg raise and arm raise there a couple ways you can break this up during the day. You can choose to do sets of the leg raise 2 times that day and sets of the arm raise 2 times that day, or you can do four sessions where you do sets of the arm raise followed by sets of the leg raise. Better results will be seen with the later. Perform the exercise until the exercise and/or issue resolves or plateaus. This may take two sets or it could take 10 sets.

Continue the above sequence until you have achieved a 90-100% reduction in your pain or issue and have been able to keep the FAB 5 exercises below 10-15%.

Most people achieve significant pain relief in 4-5 days. Some will respond quicker and some will respond slower. As long as progress is being seen continue with the FAB 5 Program. If you are not seeing progress please read the frequently asked questions section in the back of this book. The number one reason why this program is not reducing a persons' pain is because that person is not working for the program. The program works, are you working hard enough for it?



Once you have achieved the three goals of therapy, you now are into what we refer to as the Maintenance Stage or the Predictor Stage of Pain Relief. During this stage your goal is to maintain the gains you have made. You do this by:

TESTING All FAB 5 Exercises 2 times a day.

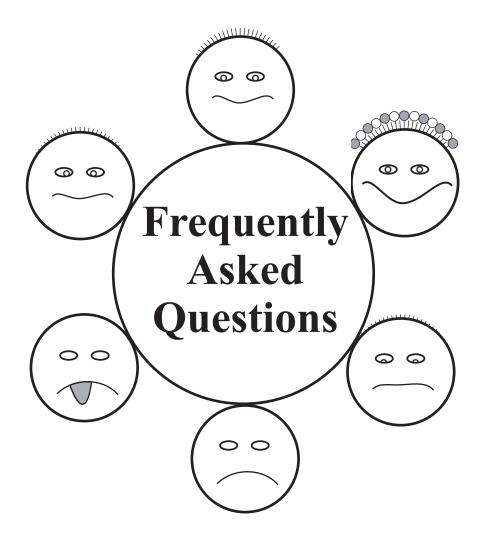
Treat if these tests are worse than the last time you tested. It is as simple as that! Sometimes the tests will feel the same or better. In these instances you do not need to do anything. Other times the tests will show you have gotten worse. When they are worse, simply treat out your body using the FAB 5 Process.

Soon you will have a better and better understanding of your body and will know if your body needs to be treated or not. There will be activities of your daily living that will give you clues as to if your body feels good and doesn't need to be treated or is getting worse and needs to be treated.

For example, I love to sleep on my belly at night. If, however, this hurts my neck or back then I know I am tight and I need to treat myself. I also purposefully put my socks on standing up. If I go to do this and I am stiff then I know I need to treat myself. Lastly, I have a shoulder that can flare up from time to time if I am not regularly treating myself. So if I am playing basketball and I go to shoot a basket and it hurts my shoulder or neck I know it is time to treat myself.

You too will eventually learn motions and positions that you commonly do that let you know what is going on in your body. Use them to gauge if your body is getting worse and you need to treat yourself. Do not, however, forget to test from time to time all the FAB 5. I recommend 2-3 times a week. These exercises were cleverly designed to be used as a global predictor of where precisely in your body you are getting worse.

One final note has to do with Progression and Wellness. Some of you will love and be passionate about how Total Motion Release makes you feel and you will want to learn the advanced programs. I applaud you if you are one of these people. You understand that the more aware you become of your body the more healing will occur. The advanced programs are currently being put into a book and video format, please check our web site for availability. The learning of the advanced programs requires contacting us on our web site at *www.totalmotionrelease.com* to find a Total Motion Release trained clinician near you.



Frequently Asked Questions

1. I am really sore after doing the treatment exercises. Is this normal?

- Soreness is normal. You have just exercised muscles that haven't been used in a long time.
- Don't stop your treatment because you are sore.
- Use your soreness as the Issue of Session. Go through your testing and treat the *good* sides. You will notice that as you balance out your **FAB 5** exercises, your soreness will resolve.

2. It seems like I could do some of these exercises in the standing position instead of sitting. Do I have to do them in the sitting position?

- We teach the exercises in a sitting position to help standardize the process. This way, the process is more easily understood by the patient. However, doing them in a standing position can be as effective and even more effective for some specific issues. If you get better results standing, then go ahead and treat while standing.
- For example, the <u>Twist</u> from a chair is different from a standing <u>Twist</u>. Different parts of the body are involved when standing that are not involved when sitting. For some, the results may be better in standing than sitting,

3. At the clinic, I can see definite improvement between the *good* and *bad* sides. At home, I don't seem to be able to get the same results.

- At the clinic, you have your therapist to keep pushing you to work harder, go further, raise the rib cage, and reach beyond the bar. At home, you have to become your own coach as well as be the patient. Have a friend, husband, mom or best pal be your coach to help push you further.
- If you have to go it alone, stick to it. You are working to reduce your pain and/or tightness. You must work hard at it. If you watch Tom (the founder) in any of his videos' or during a seminar, you can see how hard he works. It tires you out just watching him.

- 4. Sometimes when I do an exercise, it eliminates my <u>Issue of the Session</u>, but then it seems to cause a new issue. Did I do something wrong?
 - No, you did nothing wrong. This is very common. As you remove one area of restriction, the tightness in another area may increase causing a new issue. As you continue through the rest of the exercises, you will probably decrease that new tightness and solve the new issue.
 - The reason we want you to do two sets at the beginning of each exercise is because of the above reaction. By the time you have gone through one set, you have changed some of the restrictions causing the issue. The second set of the same exercises will reduce your tightness even more. This is a progressive process. By the time you have done the 3rd and 4th sets and completed all 5 exercises, as illustrated in this handbook, your issues and their underlying areas of restriction should be substantially reduced.

5. I feel better when I do the FAB 5 routine, but it doesn't last. It comes back later and sometimes feels worse than before I tried TMR.

- Your body has spent some time in these restricted positions and will try to return to what it thinks is the normal position. Even though you were successful in moving a joint back to the position where you feel and move better, the body will try to shift it back to the normal spot. Because of this, it will hurt again. It may even feel worse because you made the *good* side work more.
- You win this battle by continually using the FAB 5 process to keep your body in balance. During testing, keep an eye on these key movement restrictions and their symptoms. If they start to return, do the exercises again and again until it is better. You will have to repeat this for several weeks, until the mind and body get adjusted to the new good (balanced) position. Do not slack off and let this problem continue! You want your body to spend as much time as possible being balanced.

6. There are no differences between my left and right sides on any of the tests.

- Re-do your tests. Pay close attention to your position in the End-Range. There is always a difference, even if it is minimal.
- <u>Here are some common errors when testing:</u>
 - Are you testing further and further into the <u>End-Range</u>? Are you reaching/twisting far enough? Are you going deep enough into the movement to appreciate any differences, especially at the end of the movement?
 - Are you ignoring symptoms because they are different than a pain sensation? For example, they may be different because of tightness, weakness, numbness, stiffness or quality of motion. Do not ignore these important differences.
 - Are you comparing apples to oranges? Do you move differently on one side to reach the End-Range than you do on the other side? (Example: with the arm raise, I bend my left arm at the elbow and reach back, but I keep my right arm straight at the elbow when I reach back.) Make sure you test the same way on both sides.
 - Some people have a hard time feeling differences. Here is a tip to help: ask yourself, if I were to push into this End-Range for two hours, which side would I dislike doing more? Keep testing it until you can figure it out for yourself. Remember the difference between sides can be minimal.
- 7. I have no symptoms.
- Rejoice! What a victory! You are winning! To continue to improve your body's condition, move further and further into the End-Ranges or progress into more difficult positions. For example, if you are doing the Sit-to-Stand from a chair, do it from a low stool.
- 8. My *bad* side is now where my good side was yesterday. Why did this happen? What side do I work on now?
- Forget about yesterday! Work on the side that currently is the *good* side. As your body changes, so may your *good* and *bad* sides. This is a sign of improvement which indicates you are making progress.

9. I'm not sure how often I should exercise. How hard I should push? How many sets and repetitions should I do?

- It is all based on results. The goal is for the <u>Issue of Session</u> to be resolved (equal zero.) This may take one set of one exercise, several sets of each exercise or several sessions of the FAB 5. You should do the FAB 5 three to five times a day for the first four to five days, or until you are experiencing several days of pain relief. Your result is your answer. After you have gone beyond the <u>Pain Relief Stage</u> and into the <u>Maintenance Stage</u>, testing is recommended two times a day. If imbalances are found then treatment is to be performed.
- 10. What if I lift my left leg during the Leg Raise exercise and it causes pain on the right side of my lower back. Is my right side my *bad* side?
- Because you were lifting your left leg when you felt low back pain, the left side would be considered the *bad* side, not the location where you felt the pain.
- 11. What if both sides hurt me when I test an exercise?
- When both sides hurt, record the one that hurts the most. The percentage of difference typically will be low. This means it will be ranked lower than the other exercises and performed later in the treatment routine. By the time this exercise is ready to be treated, often the *good* side no longer hurts and it can be used to help fix the *bad* side.

Notes

Pages For Photo Copying

Increase to 8.5 by 11

5 Steps To Freedom

Mastering The Basic Concepts of Total Motion Release®

0. STEP 0: Find, Touch & Record the "<u>Issue of the Session</u>".

- Find an "Issue for the Session", either sitting or with motion. Touch it! Record how you touched it and give the Issue a Percentage. (0-100). 100 being the Worst.
- 1. STEP 1: Test All 5 Exercises First, Comparing The Left To The Right
 - **Test All 5 Exercises First Quickly** (<3 Min.), By Memory, Correctly and Into The End-Range.
 - Record the Bad side (Right or Left) & percent (%) of difference between the two sides
 - **Remember:** it is not just about finding pain. It is also about tightness, weakness, heaviness, stiffness, etc.
 - STEP 2: Rank the Test in Order From the Greatest to Least Amount of Difference.
 - **1** = The most difference between right and left side. **5** = The least difference)
 - Record the Rank on the FAB 5 form.

3. STEP 3: Exercise "Good" Side Until Bad Side Is Fixed

- **Start** with the exercise with the greatest difference from the tests (#1 Rank).
- RETEST this Exercise
- Exercise the Good Side Only Until the Bad Side is Fixed, plateaus, the good side is fatigued or until the patient no longer wants to continue. (But, know that if the Bad Side movement is not fully fixed to O, you are leaving a problem in the system that will need to be addressed again at a later time in order to have the issue fully resolved.)
- Record the Bad side percentage (%) after each set is performed.
- **Do Not Stop This Exercise Too Early** Use enough end range motion, and/or force, with the exercise to make a change. (Greater tightness needs greater End-Range or greater force)
- 4. STEP 4: Re-Check, Record and Re-Touch the Issue. Continue until the "Issue of the Session" is fixed.
 - Re-Check the "Issue of the Session". Record findings. Re-Touch the Issue. Is it fixed?
 - If the "Issue" is Fixed You Are Done For This Session. If desired, any remaining exercises that are not balanced, left versus right side, can be performed. The more balanced the body, the longer the issue stays gone.
 - If the "Issue" is not fixed go to the next Ranked exercise.
 - Continue from Step 3.
- 5. STEP 5: Practice steps 0-4 again later. Achieve Body Balance! Train It To Stay Happy
 - Understand That Gains Made Now May Not Last, especially at first due to assuming bad body positions, continued movements into the bad motions, and deeper tissue tightness.
 - **Consistency** with the routine and progressing into more and more balance will keep the issues from returning.
 - Do the Routine Also To Get Rid Of Soreness.

Grade

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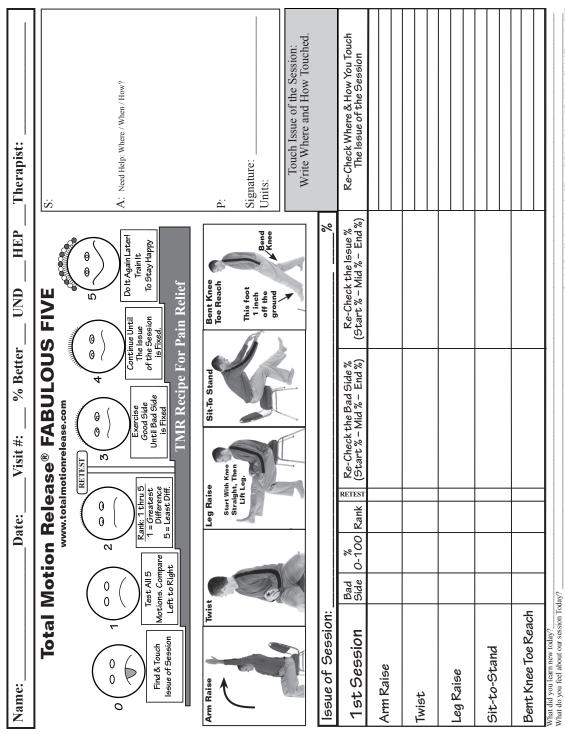
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Session #							Touch Issue of the Session: Write Where and How Touched.
Issue of Session:						%	
Day 1 - Session	Bad Side	0-100	Rank	RETEST	Bad % File Re-Check the Bad Side % Side 0-100 Rank [3] (Start % - Mid % - End %)	Re-Check the Issue % (Start % – Mid % – End %)	Re-Check Where & How You Touch The Issue of the Session
2							
Arm Kaise							
Trunk (Twist)							
Leg Raise							
Sit-to-Stand							
Bent Knee Toe Reach							

							Th. L af 41- C
Session #							Write Where and How Touched.
Issue of Session:						%	
Day 1 - Session	Bad Side	0-100	Rank	RETEST	Bad % Side 0-100 Rank 3 (Start % - Mid % - End %)	Re-Check the Issue % (Start % - Mid % - End %)	Re-Check Where & How You Touch The Issue of the Session
Arm Raise							
Trunk (Twist)							
Leg Raise							
Sit-to-Stand							
Bent Knee Toe Reach							

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Notes

About The Founder of Total Motion Release Thomas H. Dalonzo-Baker Sr., MPT

Tom received his Masters of Physical Therapy from the University of North Carolina at Chapel Hill. He also has a Masters in Mathematics Education from Wake Forest University and a Bachelors in Business and Economics from Hawaii Loa College.

Tom owns and operates Total Motion Physical Therapy in Raleigh, NC and teaches Total Motion Release Seminars all over the United States. He has been trained in the following traditional and non-traditional approaches:

- Strain Counter Strain: 1 (Spine (3 times)), 2 (Extremities (3 times)), 3 (Cranials and lab assisted))
- Mulligan's Mobilization with Movement, SNAG's & NAG's
- John Barne's Myofascial Release: MFR I, II, III, Unwinding I, II, Rebounding, Fascial Pelvis, Cervical-Thoracic, Skill Enhancement
- Muscle Energy 1: Michigan State
- Primal Reflex Release Technique's- Beginner & Intermediate
- Direct Action Thrust (Manipulation): Michigan State
- Principles of Manual Medicine: Michigan State
- Ola Grimsby: MT-1 Clinical & Scientific Rationale for Modern Manual Therapy,
- MT-2 Modern Manual Therapy of the Extremities, MT-3 Modern Manual Therapy of the Spine
- Upledger Institute: Cranial Sacral Therapy 1
- Maitland Mobilization: MT-1 Basic Peripherals, MT-2 Basic Spinals, MT-3 Intermediate Spine, MT-4 Differential Diagnosis
- Mckenzie: Parts A-D (twice)
- Measurable Solutions Executive Training Courses in Clearwater, Florida. (12-Executive Courses)

The loves of Tom's life are his wife and four children. His passion is teaching Total Motion Release to as many people as possible showing them that pain relief can be simple if the basic principles of healing are understood.