



California Currents

NEWSLETTER FOR THE CALIFORNIA CHAPTER OF THE AMERICAN MASSAGE THERAPY ASSOCIATION WINTER 2019-2020

Inside this Issue:

President's Message	1
2020 Conference	2
Call for Candidates	9
Better Business	11
Change Makers Oliver Layco	18
Community Outreach Opportunities	22
Government Relations Update	21
Technique Focus Irene Smith	5
Brian Utting	7
Erik Dalton	24
James Waslaski	28
Calendar	35
Current Contact	36



President's Message

It's February and conference plans are in full swing. We hope to see you in Santa Ana on Saturday, March 14th. We are once again going with the one-day event. Friday (13th) evening will have a Meet & Greet for those who like to see the vendors. Saturday will have classes from Brian Utting and Irene Smith, plus our Annual Business Meeting, Awards, Election Results and Lunch.



The Call for Candidates has gone out. Please consider running for an open position (President, Secretary, Board Member, or Delegate - more details on page 9). With our online election format, every member in our state gets the chance to vote. Winners will be announced at the Annual Business Meeting, Saturday, March 14.

The past week I have had much time to reflect. Thanks to so many who sent their condolences to my family and I as we dealt with the passing of my mother. She battled interstitial lung disease and passed peacefully in her home surrounded by loved ones. She will be missed.

I would like to thank our members. It's been an honor serving as your president the last 2 years. I've met many amazing massage therapists and the experiences I've had will last a lifetime.

Thank you!

John Lambert, CMT #278

SAVE THE DATE

Friday, March 13, 2020 Welcome Vendor Reception
Saturday, March 14, 2020 Workshops, Annual Business Meeting,
Special Recognition, Vendors
at DoubleTree by Hilton Santa Ana-Orange County Airport
201 E. MacArthur Blvd. Santa Ana, CA 92707

Confirmed Presenters
Irene Smith (Hospice Care)
Brian Utting (Anatomy)
[Register Now for the Conference](#)



Special Room Rate, \$109 per night (plus tax)
[Reserve your room now.](#) (Special Group Code: AMT)

Reservations must be made by February 21.

Look for the announcement in your email, Chapter website and our Facebook page.

Conference Registration is Open

Speakers' Biographies and Workshop Descriptions.

You may want to consider making part of your trip, a vacation. There are lots of things to do in Orange County and Surrounding Areas.

[Register Now for the Conference](#)



2020 California Chapter Educational Conference and Annual Business Meeting

Schedule of Events

Friday, March 13, 2020

Time: 6-8pm Welcome Reception and Vendor Mingle

Saturday, March 14, 2020

Time: 7am Registration

Time: 8am-6.30pm Choice of Workshops

Irene Smith Touching Moments: Massage in Hospice Care
or

Brian Utting Muscle-Specific Deep Tissue Techniques for the
Posterior, Lateral and Anterior Neck

Time: 12.30-2pm Annual Business Meeting

Lunch

Welcome

President's Message

Financial Report

Awards and Special Recognition

Elections Results and Oath of Service

Time: 2.30-6.30pm Back to Workshops

Time: 6.30pm End of Conference, Thank you!



2020 California Chapter Educational Conference and Annual Business Meeting

Touching Moments: Massage in Hospice Care

Presented by Irene Smith

Session Information:

This session will award 8.0 CEUs.

Touching Moments will include an overview of the role of massage in Hospice Care and Opportunities available for massage practitioners. The foundation of the hands-on relationship with the hospice client is explored through information on our sense of touch and interactive exercises in cultivating presence. Practitioners will experience how tactile and non-tactile contact play a vital role in the trust development when providing massage for dying persons. This experience is then woven into skills applied to positioning a hospice client for maximum comfort and deep relaxation. This state of relaxation is deepened with the addition of the *everflowing* stroking technique with lotion in a supervised hands-on practice. The day ends with debriefing and participant sharing.



This class will include grounding meditation, Touch Awareness information, experiential exercises in dyads, demonstration and supervised hands-on practice of client positioning and massage technique followed by questions and answers. Participant sharing is encouraged throughout.

Bio: Irene began her journey as a massage therapist in 1974, certified from the Los Angeles School of Massage. She is a member of the Associated Bodywork and Massage Professionals ABMP, Hospice Volunteer Association, the San Francisco Bay Area End of Life Coalition and serves as a member of the Advisory Council for the Elisabeth Kubler Ross Foundation.

In 2001, Irene founded and currently directs Everflowing, (www.everflowing.org) an educational outreach program dedicated to teaching mindful touching, as an integral component to end of life care. Having introduced massage into hospice care on the West coast in 1982, Irene has worked with hundreds of persons in hospital, home, hospice, and skilled nursing environments.

As Director of the internationally acclaimed non-profit organization Service Through Touch (1982-1999), Irene established massage projects for persons with HIV/AIDS worldwide.

A respected author and educator, Irene teaches health care providers, and body workers tactile support skills for caring for ill and dying persons and creates resource materials utilized by institutions worldwide.

Her written contributions include Providing Massage in Hospice Care, Touch Awareness® In Caregiving, The Emotional Impact Of Working With The Dying, chapter four in Psycho immunity and the Healing Process by Jason Serinus and chapter nine in Aids The Ultimate Challenge by Elisabeth Kübler-Ross MD.

Irene's work has been honored by the somatic and health care communities as an outstanding contribution to community wellbeing. Irene's awards for community service include For Those Who Care by KRON TV; Eight Who Matter awarded by the Associated Bodywork and Massage Professionals; two Cable Car awards for providing massage volunteers to hospitals for persons with Aids; the first National AIDS Memorial Grove's inductee for AIDS service, and 2014 World Massage Festival lifetime achievement award recipient.

Irene continues to teach Providing Massage in Hospice Care in various locations in the US, teach Touch Awareness for several San Francisco Bay Area hospice organizations, and consults in the development and implementation of hospice massage programs.

As a West Coast assistant for over 10 years to her teacher, the late pioneering thanatologist, Elisabeth Kübler-Ross, MD, Irene brings remarkable depth, wisdom, and therapeutic presence to her work.

[Register for this workshop!](#)



2020 California Chapter Educational Conference

An Inside Look at our Speakers

Touching Moments: Massage in Hospice Care

Presented by Irene Smith

After thirty six years of providing massage in hospice care and teaching healthcare providers and massage practitioners sensitive touch skills as an invaluable component to end of life care, I am thrilled to present Touch Awareness as the foundational skill for Hospice Massage in combination with client positioning and *Everflowing* lotion technique in an eight hour class entitled Touching Moments March 14th in Santa Ana California during the AMTA California conference.

Through lecture, Meditation discussion, personal experience in group exercises, and hands-on practice, students in Touching Moments will have the opportunity to discover a more expansive conscious relationship with our sense of touch and define the impact of both tactile and non-tactile touch as it pertains to providing massage for hospice clients.

Through integrating awareness of the multi-dimensional relationship of touch, at the core of massage therapy, with education regarding our sense of touch, massage practitioners will have the conscious ability to cultivate deeper levels of trust with clients experiencing various states of physical and emotional vulnerability.

Dying persons are vulnerable. They have lost physical defenses due to the loss of muscle mass and physical stamina. They have relinquished social defenses in the need to receive intimate care, and many will give up emotional defenses as they let go of their image in the world, their family, their bodily functions and finally the ability to breathe. At the same time Clients are most often living inside an overloaded nervous system and being cared for in environments overloaded with stimulus. Assisted Living communities, hospitals, nursing homes and even in-patient hospice facilities provide around the clock care for multiple residents which lends to around the clock activity.

The body is subjected to numerous medications and medications for side effects from medications; friends feeling helpless because they do not know what to do and a health care team that many times has no sensitivity skills in their training to support a patient's various states of anxiety and or trauma.

This depth of vulnerability and possible overwhelm experienced by a dying person, the client, deserves a safe environment or container in which the client feels that his or her vulnerability is witnessed, validated and honored and anxiety from overwhelm has a non-judgmental space to express itself.

As practitioners if we do not understand the impact that our human presence has on a client's nervous system and how awareness of such can completely change the dynamic of a client's experience then our session starts in the middle.

With Touch Awareness as a foundation we have the opportunity and knowledge to cultivate a trusting, validating and restful environment. The dual blessing is that this is a practice of staying grounded, centered and in the current moment for the practitioner. What we put out is mirrored back to us.

Touch awareness skills and a deeper understanding of our sense of touch provide the tempo and attitude that continues to be cultivated through positioning the client. Rather than viewing positioning of a client as preparation for the hands-on
(Irene concludes on page 6)



(Irene concludes from page 5)

session, with a deepened sense of Touch Awareness the practitioner may now recognize the positioning of each prop as a complete offering. Each piece of the offering now becomes a valuable component in the cultivation of ease and comfort. Each prop is honored as an extension of the client's body to be treated with the same dignity and respect as an arm or leg. There is no moment any more sacred than another moment. This attitude and tempo of movement creates a deeply relaxing space of care and nurturing.

"I didn't realize when I learned Touch Awareness that it would be priceless. Sitting tonight with someone I had spent time with every week for over a year, and seeing her immobile and actively dying, I realize that the small easy things that can be done to make the person more comfortable were not being done. I found unsupported gaps, and gently rolled up small towels and placed them to support various body parts. I then taught her kids how to do this method with awareness. As I said my goodbye, her hard breathing, that she had the whole time, went silent. Even though someone may seem unresponsive, their soul is always listening."

The protocols most prevalent in this approach are,

- Begin entry with a **pause**. Be still. Listen to the silence and **breathe**
 - **Observe** your environment; your client; Have **eye contact** to express clearly that you are right there in that moment.
 - Feel your feet on the earth. **Ground** and center.
 - **Breathe**. This is a good time to **integrate** the experience you find yourself in
 - **Rest** always rest. This means for the practitioner to find a place of **self-comfort**.
 - **Breathe** with **exhale** included. Your breath gives permission for relaxation for all those present. If you are holding your breath, then there is no room for receptivity.
 - **State exactly where you are going to touch**. Speak audibly and clearly. Your voice establishes a tone and rhythm that becomes a vital component to the overall rhythm that your client's nervous system will mirror back to you.
 - **Observe** your client's body animation to assess comfort or lack of comfort before following through with the touch. This is the pause. An environment of trust is created before the hands make contact
- You touch with your eyes, breath, voice, body movement and when the trust has been established you may make physical contact
- **Approach the body slowly**, honoring the space around the body. The energy fields surrounding the physical body are scientifically the most sensitive of the bodies. A fast approach may elicit a startle response.
 - **Move slowly and gently**, your rhythm will be mirrored through your client's body. Slow dictates one activity at a time. Multi-tasking causes diffused focus and confusion as to exact intention. Multi-tasking may also cause physical agitation.
 - Always feel your feet grounded with the earth.
 - **Always breathe. Always rest.**

The protocols listed above create an attitude of honoring what is rather than suggesting there is something to fix, something to change or something to heal. In honoring what is we acknowledge that there is nothing left unfinished. Your moment to moment experience is already perfect.

Please check out my website (www.everfloweing.com) for a full spectrum of educational resources, classes and webinars. Hope to see you in Santa Ana!





2020 California Chapter Educational Conference and Annual Business Meeting

Muscle-Specific Deep Tissue Techniques for the Posterior, Lateral, and Anterior Neck

Presented by Brian Utting

Session Information:

This session will award 8.0 CEUs.



The neck is a strong, vulnerable and complex structure. It is the most movable part of the spine, and yet is strong enough to balance and support the head (10-11 pounds), even with chronically poor posture. Skillful deep tissue work in this area is not about brute force; it's about precision and strategy, informed by knowledge of the anatomical structures. It's rare to find massage therapists who really know how to massage the neck in a precise, specific way -- especially around the small muscular attachments to the transverse processes -- even though this is often where the muscles are most frayed and/or inflamed.

In the morning you will learn specific techniques for releasing the cervical posterior paraspinal muscles (longissimus, semispinalis capitis, multifidus), suboccipital triangle, levator scapula (especially the cervical attachments), facet joints, splenius capitis and cervicis, posterior, middle, and anterior scalenes, sternocleidomastoid, and masseter.

In the afternoon we will focus on deep muscle-specific techniques for the anterior neck. Many people learned in massage school to avoid this area, but it responds safely and well to skilled and precise touch. We will focus on the scalene, suprahyoid, infrahyoid, and longus capitis and colli groups. This is really helpful work for clients who have been in car accidents, have emotional issues with their necks or throats, or use their voices professionally (eg, singers)

These are straightforward, muscle-specific techniques that can be immediately applied in practice. The work is well-suited to either treating cervical injuries or improving your spa massage, and will increase your precision, palpatory sensitivity, and effectiveness. Body mechanics will also be a focus of the class as well as proper use of fingers to save wear and tear on joints.

Bio: Brian founded and directed the Brian Utting School of Massage (Seattle, WA) in 1982; his 1000-hour professional licensing program was considered one of the best in the United States. Brian has been teaching continuing education internationally since 1990. He designs his classes and programs so that the students truly "get" the material and can immediately apply it in their practices, rather than just being exposed to it. With over 35 years of experience, Brian teaches with a rare blend of passion, anatomical precision, humor, common sense, and depth. He was awarded the AMTA's Robert N. Calvert Award for Lifetime Achievement in 2009, and was inducted into the Massage Therapy Hall of Fame in 2014. Brian now owns and operates the Pacific Northwest School of Massage (www.pnwschool.com).

[Register for this workshop!](#)



2020 California Chapter Educational Conference

An Inside Look at our Speakers

Muscle-Specific Deep Tissue Techniques for the Posterior, Lateral, and Anterior Neck with Brian Utting, LMT

The phrase 'deep tissue work' is used in so many contexts that it's hard to know what it means anymore. To some practitioners, 'deep tissue' simply means deep pressure. To others, it has more fascial, myofascial, or structural connotations. Muscle-Specific Deep Tissue work (MSDT) still works with the fascia, and uses deep pressure when appropriate, but is more focused and precise, particularly with the muscles and muscular attachments.

Like structural work, it has a strategy, but it gets there by releasing the individual muscles as well as the fascia. This work gets to the smaller stress points that are often passed over in a standard deep tissue massage. It's liberating and feels wonderful when everything is released and working in harmony, and creates states of ease, balance, and deep relaxation. The work also cleanses the tissues, and supports improved local circulation. The small paraspinal muscles of the neck (which are strong, under weight-bearing stress and are often quite tight) respond extremely well to this precision; there are many cervical muscles living alongside each other that rarely (if ever) get stretched and separated from each other. In addition, there are bones and joints that benefit from having motion introduced into them once the fascial and muscular structures of the neck are unglued. It's helpful to think of the neck as a live tensegrity scaffolding that needs to be maintained and properly balanced (see Leonardo da Vinci image).

We all need to have these structures balanced and 'cleaned up' from time to time, just as we periodically go to the dentist to get our teeth cleaned. These MSDT principles and techniques will improve the precision and effectiveness of your neck massage (or any massage), and can be easily integrated to your style of bodywork. Students who have taken this introductory class have reported that it helped to increase their precision, palpatory sensitivity, and effectiveness with their neck massages. Their clients loved the results, feeling a newfound sense of freedom and ease in their necks.





AMTA-CA Chapter Candidate Application

Please complete and submit on or before Monday, February 24, 2020

You should receive an email confirmation that your application was received.

Please send to the Online Elections Coordinator - info@amta-ca.org

Application (this form)

Photo (preferably head shot taken within past year)

Please sign appropriate Volunteer Code of Conduct:

Click here to [sign Chapter Volunteer Code of Conduct](#) and/or Delegate Code of Conduct prior to submitting this form.

Your candidate statement & photo along with name and position sought will appear on election ballot.

Please mark with an “X” next to the position(s) for which you are applying.

Re: Board positions (president, board member, secretary or financial administrator): You may apply for only one position.

Re: Delegate position: You may apply for delegate only or delegate and one board member position.

Please review the eligibility requirements and sign the Code of Conduct found at <https://www.amtamassage.org/chapters/codesofconduct/index.html>

President 2-year term (2020-2022) – Board Position

Eligibility:

- Professional Member in good standing for at least 1 year and *at least one of the following*:
 - Completed one term year as a chapter board member within the last three years AND/OR
 - Completed one term year as a chapter committee chair or member, within the last two years AND/OR
 - Completed one term year as a national board member, national standing committee chair or national standing committee member within the last two years.

Board Member 2-year term (2020-2022) – Board Position

Eligibility:

- Professional Member in good standing for at least 1 year

Secretary 2-year term (2020-2022) – Board Position

Eligibility:

- Professional Member in good standing for at least 1 year

Delegate (2020-2022)

Eligibility:

- Professional Member in good standing for at least 1 year



AMTA-CA Chapter Candidate Application

Please complete and submit on or before Monday, February 24, 2020

You should receive an email confirmation that your application was received.

Please send to the Online Elections Coordinator - info@amta-ca.org

Name:

Main Phone:

Other Phone:

Email:

City:

Eligibility Requirements

Please check the requirements below you have met. Please sign the Code of Conduct prior to submitting this application: <https://www.amtamassage.org/chapters/codesofconduct/index.html>

- ☐ AMTA Professional Member in good standing (includes Graduate Member)
- ☐ Signed the AMTA Chapter Volunteer and/or Delegate Code of Conduct
- ☐ Additional requirements listed under the position to which I'm applying

Preferred Qualifications

Please check all the qualifications below you would commit to if elected. See position description in Call for Candidates for more information about position for which you are applying.

- ☐ Access to computer, phone & Internet
- ☐ Can travel for volunteer activities if required
- ☐ Time required to fulfill responsibilities of position to which I'm applying
- ☐ Can commit to fulfilling entire term of position to which I'm applying

Candidate Statement

Your answers to the questions below will appear on the ballot. You are responsible for spelling, grammar & punctuation prior to submitting. You can use as much space as you need under each question.

Why are you seeking this position?

What are your qualifications, strengths, talents, skills and/or abilities for this position?

What is your volunteer experience within AMTA or otherwise?

Please email this application along with photo to:

Online Elections Coordinator:

Trevor Hinkley

info@amta-ca.org

916-382-8542

You will receive an email confirmation that your application was received.

If you don't, please contact the Online Elections Coordinator.

(page 2 of 2)

Measure Your Massage Business Marketing

Summer MTJ 2016

Measure Your Massage Business Marketing



Before you spend another cent on marketing your massage therapy services, set yourself up for success with a plan to set, implement and track your goals.

- SET A MARKETING GOAL
- MAKE IT MEASURABLE
- TRACK YOUR PROGRESS

“Marketing is how you get customers,” explains Margo Aaron, founder of Argotics, a Jersey City, New Jersey-based marketing consultancy that specializes in entrepreneurial clients.

“Unfortunately, you have limited resources to do it—especially if you’re a small business owner where it might only be you running the entire thing. So, spending your time on activities that don’t work is a big problem. It wastes time, money and energy, and it ultimately could lead to your demise.”

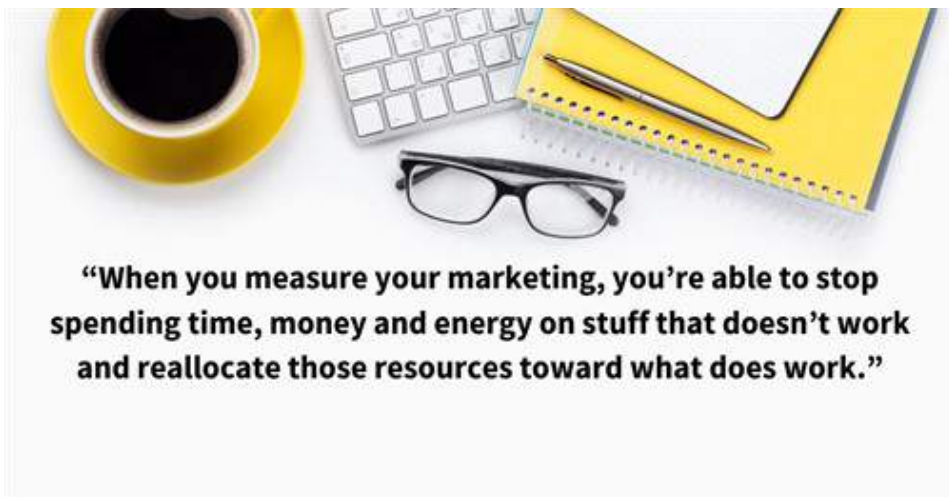
It all comes down to the old, but true, business adage: You can’t manage what you don’t measure.

“The reason we invest in marketing is because we want to see results,” echoes Carolyn Higgins, founder, and president of Fortune Marketing Company, a marketing consultancy based in Walnut Creek, Calif.

Explore Benefits »

AMTA has resources and a community of massage therapists to help you take your career to the next level. Learn more about member benefits.

(Marketing continues on page 12)



In large corporations, results are measured as “return on investment,” or ROI, which is typically calculated using sophisticated formulas with complex variables such as “net operating income,” “average operating assets,” “customer lifetime value” and “operating profit margin,” just to name a few. In small businesses, however, the best approach to determining ROI is usually the simplest.

“When my clients want to implement a marketing tactic, I ask them to think about how much time, money and energy it will cost, and how much payoff they would get.”

“I use the word ‘payoff’ instead of ‘ROI,’” says Rockville, Maryland-based marketing consultant Evan Leepson, author of *Critical Connections: The Step-by-Step Guide to Transform Your Business Through Referral Marketing*.

According to Leepson, evaluating a given marketing effort’s payoff is as easy as keeping track of what you put in and comparing it to what you got out, then asking yourself, “Was it worth it?” These three steps will help you determine if it was.

1. Set a Marketing Goal for Your Massage Practice

Before you can determine whether your marketing has paid off, you need to clearly define what you want to get out of it, according to Higgins. “Are you building your brand? Or are you expecting to get actual customers?” she asks. “Setting your expectations upfront will help you determine later if your investment was worth it.”

The best goals aren’t always monetary.

For instance, you might want to increase your number of repeat customers. Or, perhaps you want to sell more of a particular service. Maybe you want to target a new market, attracting more pregnant women for prenatal massages, or more businesspeople for neck and shoulder massages.

“I even have some clients whose goal is having more time off. They went into business for themselves so they could spend more time with their family, so success for them is marketing that doesn’t require them to invest a lot of time,” says Seattle-based business coach Karol Dixon de la O of FocalPoint Business Coaching.



Dixon de la O points out that the goal is explicit, realistic and has a deadline associated with it—all of which will make it easier to evaluate later whether you met your goal, and whether your marketing helped you do it. Either you doubled your clients by the end of the quarter, or you didn't.

2. Make It Measurable

Once you've set a goal, you've got to make your marketing strategy quantifiable. How you do so will depend on which marketing channels and tactics you've chosen to pursue.

Print advertising

When you advertise in print—whether it's an ad in your local newspaper, a flyer on a community bulletin board or a direct mail piece—it can be difficult to know if anyone's actually seeing it.

To measure if they are, include a call to action and a unique promo code. You can offer customers who use the promo a discount, for example, a complimentary upgrade or a free gift.

"Asking the potential customer to use a phrase or code when they call for a discount isn't perfect—not everyone who sees the ad will remember to use the code—but it will begin to help you pinpoint where your potential customers saw your ad and whether the spend was worth it," Dixon de la O says.

The call to action doesn't have to be claiming a discount or gift. It could be as simple as visiting your website and signing up for your email newsletter, in which case an easy way to measure results is creating a special landing page on your website where you send people who saw the ad.

It shouldn't be your homepage, but rather a separate page created especially for your advertisement. Try using a landing page tool such as these or your own website platform:

- HubSpot
- LeadPages
- WordPress Landing Pages plugin for WordPress

Either way, using a free tool like Google Analytics to track your website traffic will allow you to see how many people visited your landing page, which will give you a sense for whether or not the ad is working.

(Marketing continues on page 14)

(Marketing continued from page x13)

AMTA Member Discount: 6 Ways to Market Your Massage Practice While Saving Money

Digital advertising

The same strategies that work for print advertising work for digital advertising, according to Higgins, who reiterates the importance of calls to action and landing pages.

Whether it's a paid advertisement on Facebook, a pay-per-click ad on Google or a banner ad on a third-party website, most of your advertising should ask consumers to visit your website—again, via a special landing page—and complete a designated action, like downloading a piece of content.

“I recommend every business owner have some kind of download on their website, like ‘10 Tips for a Healthier Back’ or ‘10 Things You Should Ask Your Massage Therapist Before Your Next Appointment,’” states Higgins, who says downloads add value and can be easily tracked.

Resource: Downloadable Massage Client Education Resources

Social media marketing

If your goal is increasing awareness—making more people aware of your services—social media can be a good channel in which to invest, according to Higgins, who says quantifying social media exposure can be as easy as counting Facebook likes.

“It doesn't do any good to spend five hours a week posting on Facebook if you only have 20 followers; you need to make an effort to build your following, because the bigger your numbers, the more things start snowballing,” she says. “Try to grow your following by at least 20 percent a year.”

Resource: Easily Offer Gift Certificates With This Downloadable Template

In addition to Facebook likes, you can track Facebook shares, Twitter followers, re-tweets or even YouTube views, if you have a YouTube channel.

“It's about continuous growth; as long as you see your numbers going up, you know it's working... You can create a special ‘Facebook-only’ offer and put ‘Facebook’ in the promo code so you can measure it. If that offer is only available on Facebook, you know that anyone who redeems it came from that campaign.”

- Carolyn Higgins, founder + president of Fortune Marketing Company

(Marketing continues on page 15)

(Marketing continues from page 14)

Referral Marketing

Referral marketing—promoting your business through word of mouth—can take many forms.

One is networking, according to Higgins, who says the easiest way to measure the fruits of networking is to keep track of how many “qualified leads”—people who actually seem interested in your services—you meet during networking events, and how many of them eventually turn into business, either directly or through referrals.

If you spend an hour networking every week but never generate any business, it’s probably not worth your time. If you get at least one new client every time you attend a mixer, however, attending more events may pay off.

Resource: Grow Your Practice Through Word-of-Mouth Marketing

To determine whether a new client is someone you met at a networking event or was referred by someone you met: ask.

“The No. 1 thing every business owner needs to do to measure their marketing ROI is to get in the habit of asking every single person who calls or comes in, ‘How did you hear about me?’” explains Higgins, who says the question can yield insights about virtually every marketing channel you’re in. “That’s the easiest thing any business owner can do to figure out where customers are hearing about them.”

Another way to engage in referral marketing is by partnering with other local businesses. For example, you could offer a discount to clients who are referred by another local health care provider.

You could quantify that type of partnership, Aaron says, by asking your partner to pass out flyers; customers receive the discount when they bring in the flyers, which you can count.

“Doing some very basic arithmetic—asking your partner how many flyers they passed out, and counting the number of people who bring them in—will help you see if it’s working.”

Email Marketing

Email is one of the most measurable mediums there is, according to Aaron, who recommends sending newsletters and promotions using an email marketing platform like Constant Contact or MailChimp, which automatically track email performance to help you quantify your success.

AMTA Member Discount: Get Started With Email Marketing - Free for 60 Days

“Things you want to pay attention to are who’s opening it, which we call ‘open rate,’ and who’s clicking on it, which is called ‘click rate,’” Aaron explains. “You also want to know if anyone is forwarding it or unsubscribing. All this can be tracked, and over time you can tell if people are actually reading your emails.”

(Marketing concludes on page 16)

(Marketing concludes from page 15)

3. Track Your Progress

Quantifying your marketing is useless unless you're also aggregating and analyzing the results.

"It doesn't matter that you're collecting the information," Aaron says. "You also have to spend some time—two or three hours a day, one day a week—looking at it, because that's the only way you'll know what to do with it."

Because it allows you to keep a database of your customers, including information about how they heard about you and which marketing channels they use to engage with you, customer relationship management (CRM) software such as Salesforce, Insightly, Nimble or Zoho can be helpful, though not necessary.

"There a number of good CRM systems online that enable you to track everything. The simplest, though, is pencil and paper," Dixon de la O says. "You can start with just a list of who your customers are when they come in, where they came from and how they interact with you. Then, at the end of the week or the end of the month, you can look at things and determine that this person who saw one of your YouTube videos made four appointments versus this person who heard about you on Facebook who only made one. If you want to get a little fancier, you can make an Excel spreadsheet and track it that way."

Ultimately, the goal is to determine which marketing strategies are helping you achieve your goals, and which ones are distracting you from them.

"Your data will give you a roadmap to identify where there are problems so you can fix them. If you spent \$400 on an ad but only made \$25, that's probably not a good place for you to be marketing. So, what else can you be doing, instead?" Aaron concludes. "Sometimes it raises more questions than answers, and that's OK. Because that means there are new places you should be spending your time and money that will be more effective and will grow your business. You just have to find out what they are."

This article by Matt Alderton was adapted from the summer 2016 issue of Massage Therapy Journal.

Additional Resources: Tools to Market Your Massage Business

Continue Learning: Marketing for Massage Therapists

Attracting Business Clients: Part I — Start-up and Retention

\$30 members / \$50 nonmembers 2 CE Credits

Smart Marketing with Social Media

\$30 members / \$50 nonmembers 2 CE Credits

Growing a Thriving Practice—Systems for Success

\$45 members / \$75 nonmembers 3 CE Credits

EXPERIENCE NHI'S

ADVANCED NEUROMUSCULAR THERAPY PROGRAM

The only federally approved
continuing education program for
massage therapy in the country!



NHI's ANMT Program is 450-Hours, offered in five 90-hour modules:

- Classes designed for those who have already completed one or more massage therapist programs, and for NHI graduates of our entry-level Massage Therapy Training Program
- The five modules are comprised of classes that focus on:
 - Shoulder & Thoracic region
 - Head & Neck combined with a Cadaver Lab
 - Lumbar-Pelvic region
 - Lower Extremities combined with a Cadaver Lab
 - Upper Extremities combined with a Cadaver Lab.

FREE samplers of NHI's Advanced Neuromuscular Therapy course are offered at various times during the year at all of our campuses throughout the state. The full 450-Hour ANMT Program is offered year-round at the following campuses:

- Emeryville
- San Jose
- Sacramento
- Los Angeles (Studio City)
- Orange County (Santa Ana)

The ANMT program will allow you to confidently evaluate and differentiate between myofascial pain and dysfunction as opposed to injury. Advanced techniques allow you to increase the value you provide for your clients.

If you have specific questions about the program, and would like to speak directly to our Advanced Neuromuscular Therapy Program Director, please call Cynthia Ribeiro at , 800-315-3552 ext 217.

Visit nhi.edu or call 1-800-315-3552 for more information

Change Maker:

Oliver Layco

NHI Graduate Laces Up to Run the Boston Marathon for Massage Therapy Research

NHI Grad Laces Up to Run Boston for Massage Therapy Research



Sacramento, Calif.— 29-year old Certified Advanced Neuromuscular Therapist, Oliver Layco, is taking to the pavement for his daily training routine. A runner from the age of 13, Oliver has run ten full marathons to date, but running the 2020 Boston Marathon® for charity through the John Hancock Non-Profit Marathon Program has special meaning. His 26.2-mile run will help raise funds for the Massage Therapy Foundation, which provides critical research, education, and community service initiatives for his profession.

Helping others has always been Oliver's primary motivation; he was an Emergency Medical Technician before discovering massage therapy through his passion for running. "While in training to run my third marathon—the New York Marathon—as a charity runner for UNICEF, I started to look into how to better take care of my body and became aware of the importance of massage therapy as part of a maintenance program," said Oliver. "It opened my eyes to massage therapy's potential to help other people. I knew that the more I learned the better able I would be to make a difference."

Oliver's search for a massage therapy training program led him to enroll at the National Holistic Institute (NHI). There, Oliver completed an ambitious 1,250 hours of hands-on training, including a 450-Hour Advanced Neuromuscular Therapy Program, which is the only federally accredited massage therapy continuing education program in the country. Many of the students in this program are not only massage therapists, but also physical therapists and physical therapy assistants, chiropractors, and chiropractic assistants, nurses, athletic trainers, and more. The program's emphasis on the importance of research literacy and massage therapy's role in chronic pain management ensures that graduates are able to find and integrate the latest research into care plans for clients with a range of conditions and to communicate with medical professionals.

While in school Oliver continued wearing out his sneakers. Running the Boston Marathon® has always been a major item on his bucket list; but he fell short of qualifying. When he learned of the possibility of running Boston as a charity fundraiser for MTF he could not have been more excited by the idea of uniting his love of running and his passion for massage therapy research. "Oliver is dedicated and genuine in everything he does; as a student he went above and beyond in his studies, as an athlete he is committed to his training, and as a massage therapist he goes the extra mile to bring the latest research to his client's care. We are thrilled to have him on board running and fundraising for Team MTF," said MTF President Doug Nelson, LMT, BCTMB.

For eight consecutive years, MTF has been honored by the opportunity to bring more awareness to the benefits of
(Supporting Oliver and MTF concludes on page 19)

(Supporting Oliver and MTF concludes from page 18)

massage through participation in this program. Since its founding in 1990, MTF has provided over \$1 million in research grants studying the science behind therapeutic massage. The Foundation founded and publishes an open-access, peer-reviewed scientific journal and provides many educational resources for massage therapists, educators, and students. MTF also provides community service grants to populations in need of therapeutic massage who would otherwise lack access.

The Massage Therapy Foundation is proud to be an official Partner of John Hancock in the Marathon Non-Profit Program. The Non-Profit Program provides over 1,000 Boston Marathon® bibs to select non-profit organizations throughout the community, which provides organizations with a significant fundraising opportunity. Last year, John Hancock Non-Profit Runners raised over \$13.1M for their causes.

“I am grateful for the opportunity to promote the work of the Foundation and shine a light on massage therapy’s ability to improve lives. The support of the massage therapy community means so much as I continue to raise money. It still surprises me when friends tell me it’s motivating or inspiring what I do just by lacing up a pair of shoes and putting one foot in front of the other; I am humbled to be able to represent all those who believe in the power of massage therapy,” said Oliver.

National Holistic Institute | A College of Massage Therapy is supporting the MTF and their graduate, Oliver, through dedicated Student Clinics on all 10 of their campuses, where student and graduates will volunteer their time to raise funds to sponsor Oliver's Race. Check out NHI's Instagram and Facebook profiles for more details on specific dates and times at each campus. Donating one session from your private practice is another way to support the MTF and Oliver's efforts.

Oliver and his Team MTF—Running for Research teammates will run in the 124th Boston Marathon on Monday, April 20, 2020. The American Massage Therapy Association (AMTA) is the Premier Sponsor of Team MTF—Running for Research. For more information visit www.massagetherapyfoundation.org.

Are you aware of the resources the **Massage Therapy Foundation** provides? From their website, www.MassageTherapyFoundation.org, here is their list of resources available:

[E-Books](#)

[Research Perch Podcast](#)

[Research Infographics](#)

[Research Posters](#)

[Writing Case Reports: Free Five-Part Webinar Series](#)

[Research Literacy Courses](#)

[IJTMB](#) (International Journal of Therapeutic Massage and Bodywork)

[Research Tools](#)

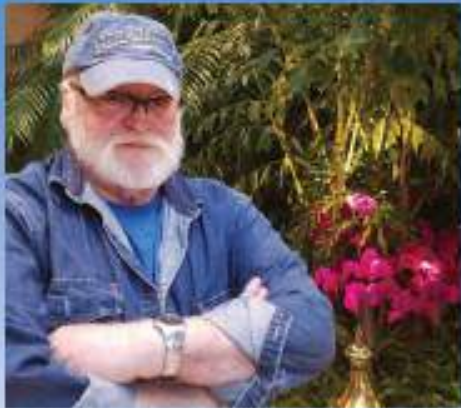
[Meta-Analysis on Massage Therapy and Pain Database](#)

[Student and Faculty Tools](#)

[Community Service Resources](#)

[Outreach Center](#)





John F. Barnes, PT, LMT
International lecturer, author,
and authority on Myofascial Release.



Develop Your "Hands-On" Expertise

Visit our website **1-800-FASCIAL**
www.MyofascialRelease.com

Learn from the Experts!

Myofascial Release



MYOFASCIAL MOBILIZATION
Sacramento, California
June 6 & 7, 2020



**ELEVATE
THE
PROFESSION**



www.camtc.org

916.669.5336

info@camtc.org

Government Relations Update



Assembly Bill 5 Update:

There has been much discussion around Assembly Bill 5 and what it means for contractors in our state. The AMTA California Chapter was neutral in the passage of this bill. For every therapist considered and Independent Contractor, we had another that had employee status. We did not seek an exemption as we wanted to protect those that indeed had employee status.

Businesses in the moment must pass the following test:

1) Provides that a person providing labor or services for remuneration must be considered an employee unless the hiring entity demonstrates that all of the following conditions are satisfied:

- a) The person is free from the control and direction of the hiring entity in connection with the performance of the work, both under the contract for the performance of the work and in fact.
- b) The person performs work that is outside the usual course of the hiring entity's business; and
- c) The person is customarily engaged in an independently established trade, occupation, or business of the same nature as that involved in the work performed

For those that oppose AB5, please continue to contact your elected officials and express how this is affecting your livelihood. So many industries are taking this to court, cleanup legislature is being introduced as well. Until a clear solution is introduced AMTA California Chapter will continue to be neutral.

AMTA has been and continues to be pro licensure and is continuing to advocate for licensure in all 50 states. If a licensure bill is introduced, expect the AMTA stand behind it allowing all Massage Therapists in this state to have equal qualifications and respect as health care providers.

Submitted by

John Lambert CMT

Community Outreach Events

March 13-14 The California Chapter Annual Massage and Bodywork Educational Conference, Santa Ana.

We could use your assistance in Welcoming our members, Checking in/out of workshops, Parliamentarian, Sergeant at Arms, Packing swag bags and more things may come up as we get closer to our conference dates. Please fill out the Volunteer Resume (page xx) and send it to info@amta-ca.org.

Saturday, April 4 Oceanside IRONMAN, Oceanside

This is a popular IRONMAN event for Southern California. We will be providing post-event massages to those athletes who have completed a swim, ride and run 70.3 miles, on the Boardwalk of Oceanside Beach. Arrive by 8am – Done by 5pm. Food, T-shirt.

Kevin Whitfield is the contact person resettherapyfitness@gmail.com 858.668.9710

Date TBA Stand Down San Diego, San Diego High School Upper Athletic Field

For Veterans who have lost everything and are living on the streets of San Diego, this event provides and opportunity to meet with representatives from Veterans Affairs and with representatives from many community services. Massage therapists will join other allied health professionals, providing massages to participating Veterans. Note that all participants are freshly showered before services. This is a 3-day event. You can volunteer for 1 –3 days.

Kevin Whitfield is the contact person resettherapyfitness@gmail.com 858.668.9710

Date TBA Camp Pendleton Family Day Massage Event, Del Mar Beach, Camp Pendleton, San Diego

This is the 13th annual event with some 3,000+ Marines and their families from 3rd Track. Arrive on base by 10 am and you will be off base by 5pm. Bring your tables and supplies. You will be working on the beach, on top of platforms, with a great view of the festivities and the ocean. Other community organizations will be participating with free food, fun, games, music, and more. This is a great event celebrating “FAMILY”. **This event requires your contact information ahead of time for access on base. Please commit to **Michael Roberson**, the current coordinator for this event, handsonoc@aol.com, as soon as possible if you are planning to attend.** (the date has not been set; it is usually at the end of August or first of September)

Saturday, September 12 Best Buddies® Challenge, Hearst Castle, San Simeon

This is the 12th year we have participated in this event. We will be providing post massage to the athletes who complete cycling 100 miles (or less). Volunteers are guaranteed 1 nights shared room accommodations, car pooling stipend, T-shirt, door prizes, free food and SWAG bag. All of this and a great location near Hearst Castle, on the coastline.

Cynthia Sykes is the coordinator, cynsykes46@gmail.com 781.588.0864 (She lives in MA, 3hrs ahead of CA time, DO NOT CALL AFTER 7PM)

Sunday, September 20 SuperFrog® IRONMAN®, Imperial Beach, San Diego

This IRONMAN® is one that allow members of the military to qualify for the World’s Championship and has about 80% military participation. We will be providing post-event massages to those athletes and service men/women on the Boardwalk of Imperial Beach. Parking is provided to early arrivals. Arrive by 8am – Done by 5pm. Food, T-shirt, music and ocean view are there for all of us to enjoy.

Kevin Whitfield is the contact person resettherapyfitness@gmail.com 858.668.9710

NEW!!! Myoskeletal Home Study/eLearning **ESSENTIAL MAT ASSESSMENTS**

**Erik Dalton's NEW 16 CE
home study & eLearning
course includes:**

- 130 practical "hands-on" assessments
- Anatomy dissection and animation
- Range of motion, pain provocation & brain-based testing
- Tendinopathy, radiculopathy, & sports injury exams
- References to Myoskeletal treatment techniques



**8th Annual
Oklahoma City
Workshop
(July 3-5)**

*with special guest
Whitney Lowe.*

**Visit erikdalton.com for
all 2020 MAT seminars!**



**Freedom From Pain Institute, LLC
800.709.5054**



Ankle Sprain or Peroneal Nerve Pain?

Erik Dalton, Ph.D.

Tightness is one way the brain applies the parking brake when the body's natural braking systems fail — and pain is another. When working properly, the brain's motor control system is finely tuned to process peripheral input and deliver appropriate output. However, when the body's healing mechanism has been compromised, the nervous system has the ability to fully engage the parking brake to slow us down and keep us out of trouble.



Muscle spasm is the brain's way of applying the brakes to slow us down.

When bodyworkers palpate tissue tightness or scarring from an old injury, we often notice a significant amount of resting tone in neighboring muscles. In these cases, the brain may have ordered the musculofascial tissue to tighten and maintain a significant amount of resting tone to protect a perceived weak link in the system. To most bodyworkers, excessive muscle tone indicates a lack of mobility, but we need to look further to see if it has a specific cause or is simply a tissue “habit” that got stuck on the client's hard drive and needs to be cleaned. This motor control loss is frequently helped through high-quality bodywork. I've found the neurological effects of Myoskeletal Alignment Techniques combined with cognitive reassurance and corrective exercise help boost confidence while restoring optimal functional movement. For example, this client photo



suffered a fairly serious (grade 2) inversion ankle sprain when thrown from a horse eight months earlier. During gait evaluation, I noticed him limping. He said his doc told him the limp had become a *habit* and would soon go away — but I've found that's not always the case.

Image 1 shows photos of a client we'll call Bud who suffered a fairly serious (grade 2) inversion ankle sprain when thrown from a horse eight months earlier. Image 1: Grade 2 inversion ankle sprain.

A physical therapist friend referred him to me, letting me know his orthopedist had released him and the ligamentous damage had completely healed, but Bud still complained of persistent

(Dalton continues on page 25)

(Dalton continues from page 24)

leg and hip cramping. During gait evaluation, I noticed him limping. He said his doc told him the limp had become a *habit* and would soon go away – but I’ve found that’s not always the case.

Granted, a limp was functional for Bud after his painful ankle injury because its offloaded stress, allowing him some degree of locomotion. However, it became dysfunctional once the injury had healed and there was no longer a reason to offload stress. Bud’s lingering limp presented a red flag, telling me we may be dealing with a nervous system processing problem, sending down faulty commands to continue limping.

Assessing locally, thinking globally

To identify and correct Bud’s hip and leg cramping symptoms, I first wanted to determine if the ankle injury was driving the protective muscle guarding, I was palpating or if biomechanical compensations from months of limping might be triggering compensatory hip and leg spasm. Initial hands-on assessment of Bud’s lower limb revealed limited ankle mobility and peroneus longus and brevis compartmental rigidity. Since these fibularis muscles evert and plantar flex the foot, it’s likely they were either strained during the fall or recruited by the brain to splint and stabilize the inversion sprain.

To address the peroneal spasm, I applied a mild sling and resist technique (*Image 2*).

This maneuver seemed to work nicely for creating mobility at the talocalcaneal joint, but when I went to the other side of the therapy table to perform the same technique from a different angle, an unexpected thing happened. As my webbed fingers compressed the tissue overlying the superficial peroneal nerve at the anterolateral aspect of the ankle, Bud recoiled in pain.

Damage to this peroneal branch of the sciatic nerve during an inversion injury is not uncommon and is often mis-assessed (*Image 3*).

(Dalton continues on page 26)



Image 2: The therapist’s right hand slings the client’s ankle into eversion and the left-hand resists. The goal is to reduce the peroneal muscle spasm and ligamentous ankle adhesions.

(Dalton continues from page 25)



Image 3: Superficial peroneal nerve



Image 4

To confirm a peroneal traction injury, I performed a supine straight leg sciatic test with Bud's foot plantar flexed and inverted (Image 4).

Image 4: The therapist performs a straight leg (sciatic nerve) test with the clients' foot dorsiflexed and inverted. To floss the peroneal nerve, the therapist slowly raises the client's leg to the first sign of discomfort, and as they bring the extended leg down, the client flexes the neck to pull the sciatic nerve headward. The therapist and the client repeat the back and forth flossing movement for 2 minutes each session, and the client practices the technique to continue at home after the session.

He tested positive and reported mild buttock and lateral thigh pain, indicating possible low back sciatic entrapment.

In Myoskeletal Alignment, we're always looking for compensatory patterns that may be contributing to a client's motor control problem, but other than a slight iliocostal alignment issue and a limp, Bud did not present with anything remarkable. I performed an SI joint spring test, hip abduction test, and an Adam's test – all were negative.

Throughout the next few sessions, I focused on freeing the fibularis adhesions around the lateral malleoli and various peroneal nerve mobilization maneuvers. I supplied Bud with a TheraBand stretch strap and taught him a couple of sciatic nerve mobilizations to perform between sessions.

To help the brain re-map the motor control problem causing the limp, Bud was asked to slowly practice walking backwards and sideways with his pelvis tucked for 15 minutes a day, followed by 10 minutes of slow bouncing on his mini trampoline. Novel movement routines such as these, help convince the brain the ankle is now fully functional.

(Dalton concludes on page 27)

(Dalton concludes from page 26)

Summary

Muscle tightness is often the brain's way of applying the brakes when it senses loss of coordination, timing, and symmetry due to tension, trauma, or poor posture. This motor control loss is frequently helped through high-quality bodywork. However, for the brain to permanently re-map the new posture or pain-free movement, it must learn new movement patterns. I've found the neurological effects of Myoskeletal Alignment Techniques combined with cognitive reassurance and corrective exercise promote confidence and help restore proper movement.

Erik Dalton serves as Executive Director of the Freedom From Pain Institute, a school committed to the research and treatment of chronic pain conditions. Dr. Dalton shares his wide therapeutic background in massage, Rolfing®, and osteopathy in his entertaining continuing education (CE) workshops, home study courses, books, and videos.

With over thirty years educating massage therapists around the world, Erik Dalton is among the best teachers a professional bodyworker could ever study with. He has worked tirelessly to develop a system of manual therapy that addresses and heals pain patterns at their very core. Armed with a comprehensive understanding of the intricate interplay between mind and body, structure and function, massage therapists who've studied Myoskeletal Alignment Techniques with Erik Dalton are changing the face of chronic pain the world over. For more information on Erik Dalton and his Myoskeletal Alignment Technique, please go to: www.erikdalton.com



Congratulations to Our Own Cynthia Ribeiro!

In her new role as Practitioner Member on the
National Certification Board of Therapeutic Massage
and Bodywork!

NCBTMB

CERTIFICATION BOARD ELECTIONS



Cynthia Ribeiro
LMT, BCTMB, NMT



Nicole G. Zeger
M.A.

Technique Focus
**Kinetic Chain Patterns Causing Complicated Knee Conditions
Including Ascending Syndromes**
By James Waslaski

In the world of manual therapy, it has been estimated that 90% of knee pain comes from the joint above and below the knee. Stated so brilliantly at a number of past seminars I have taken with my friend and colleague, Erik Dalton, “the knee is the slave to the foot and hip”. So, I have learned that the stirrup spring system in the ankle is responsible for “Ascending Syndromes” that work their way up into the knee, hip, back, spine, and neck. If the client has bilateral pronation that can contribute to “knock knees”, or bilateral supination that can contribute to “bow legged conditions,” that should be addressed prior to assessing and treating the pain in the knee. After many years of studying and co-teaching with Erik, I have come to realize that one of the most challenging and complicated ascending syndromes is when one ankle over-pronates and the other ankle supinates. Manual therapists can swipe the arch of the pronated foot (pronation includes eversion, abduction and dorsiflexion (Fig. 1). With 2 fingers the therapist can try to lift the navicular bone. If the assessment reveals the navicular and cuneiforms have no spring and the foot appears to be flat, the arch is pronated. (Fig. 2) For the supinated foot (plantar flexion, inversion and adduction) the arch will be high (Pes cavus). The therapist can palpate a high arch that feels stuck in a supinated position (Fig 3 -middle photo).

In a supinated foot the subtalar joint is usually fixated in a varus position accompanied by a collapsed cuboid. The combination of foot pronation and foot supination not only affects leg length, but begins an ascending syndrome pattern that travels up the kinetic chain distorting knee, hip, and low back structures”.

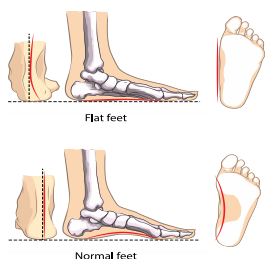


Fig.1 Flat Foot (Pronation)



Fig. 2 (Swipe arch)

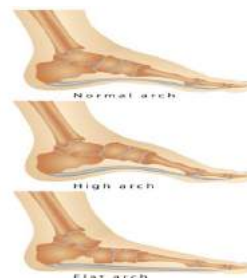


Fig. 3

The pronated foot (Fig.4) results in a valgus subtalar joint accompanied by a dropped navicular bone. This causes internal tibial torsion patterns in the knee (Fig. 5) along with sacral torsions (Fig. 6) and pelvic obliquities. Pelvic Obliquities can be caused by anatomical or functional leg length differences. Corrections of proper arch support and foot strike to address functional leg length patterns will be covered in a future articles.



Fig. 4



Fig. 5



Fig. 6

(Waslaski continues on page 29)

(Waslaski continued from page 28)

This ascending pattern can continue into roto-scoliosis of the lumbar spine which can lead to ascending kyphosis of the thoracic spine. This sometimes locks down the OA joint, and can often be the cause of migraine headaches. The first thing therapists should do is look at the ankles, and the stirrup spring system, which is the foundation of the entire body. Once the lower body kinetic chain is addressed, by restoring proper foot strike and resolving the ascending tibial torsion and sacral torsion patterns, the manual therapist can do good orthopedic assessment for anatomical structures causing knee pain. Most of the time chronic knee pain will go away just from restoring proper foot strike, releasing hip capsular patterns (Fig. 7) and sacral torsion patterns (Figs. 8-10) of the hip, and correcting tibial torsion patterns of the knee. This simplifies the ability to restore proper fibular glide for the normal stirrup spring system. All of these techniques are done through positional release of articular ligaments and muscle balancing protocols, to mobilize or stabilize proper joint function of the hip, knee and ankle.

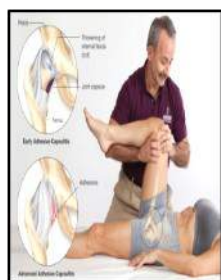


Fig. 7(Hip Capsule)



Fig. 8 (Assess AIIS)



Fig.9 (Outflare Ilium)



Fig.10 (Inflare/balance)

In other words, 90 percent of knee pain is not due to the structures of the knee. In fact, various articles, and clinical studies, have shown that rarely ever will the knee pain be coming from conditions like Patellar Femoral Syndrome (damage to cartilage under the kneecap) or Iliotibial Band Friction Syndrome. Chasing The Pain Blog from Erik Dalton, and an article published by Whitney Lowe, elaborate on “New Perspectives on ITB Friction Syndrome”. So therapists that abide by “conventional wisdom,” who often seek out sore spots around the epicondyle of the knee and friction that area along with fascia mashing with forearms and foam rollers, might want to look into the benefits of massage cupping as a replacement for forearm work and foam rolling for the Iliotibial Band Problems. Even in 4th grade degeneration of the patella, the pain is rarely from that cartilage. Due to tracking of the patella, pain is usually coming from the irritated bursa and fatty sacs or irritated nerves in the knee area. In the classroom settings for knee pain, manual therapists will spend time just analyzing gait patterns, and the function of the bones of the foot, for open and closed kinetic chain foot biomechanics.

So for structures that are actually injured in the knee, manual therapists can quickly assess and treat the actual structures damaged in the knee. But that should only be done after assessing and correcting kinetic chain patterns coming from the foot and hip, along with balancing all the actual muscle groups around the knee.

Once the muscles around the knee are balanced, therapists can start by addressing ligament sprains of the knee to see if stability or mobility is the proper route to pursue. Perform the Posterior Drawer Test (Fig. 11) to assess a ruptured or injured PCL. Then the Anterior Drawer Test to assess for an injured or ruptured ACL (Fig.12) Refer out clients with Ruptured ACL and PCL injuries for additional evaluation by a good orthopedic physician. Then do the Valgus Stress Test (Fig. 13) to identify an injured medial collateral ligament (MCL) and the Varus Stress Test (Fig. 14) to evaluate for an injured lateral collateral ligament (LCL). These can often be treated quickly and effectively if the kinetic chain patterns have been addressed.

(Waslaski continues on page 30)

(Waslaski continues from page 29)



Fig. 11 (PCL Injury)



Fig. 12 (ACL Injury)



Fig. 13 (MCL Injury)



Fig. 14 (LCL Injury)

Once the therapist knows the knee has proper stability from the major ligaments, we can assess and treat the other structures of the knee. From many years of manual therapy experience, I suggest you evaluate and correct any non-weight bearing tibial torsion patterns to align the tibia with the fibula. This brings all the structure of the knee back into their normal resting positions for more effective therapeutic outcomes. Start by bending the knee to 90 degrees, put the ankle in a neutral position, and assessing the position of the foot. Often times, especially in the right leg because of the way we drive our car, the foot will be externally rotated out 30-45 degrees from the biceps femoris pulling on the proximal fibular head (Fig.15). That can compromise fibular glide and stress the fibular nerve. This should be corrected before treating conditions like patellar tendinitis, ligament sprains, muscle tendon strains, nerve adhesions, bursitis, or meniscus injuries. Simply lengthen the biceps femoris (Fig. 16) and rotate the tibia and fibula back in alignment with the femur (Fig.17/ Fig. 18). In most cases, after correcting tibial torsion patterns of the knee, most knee pain will go away. That assures that the ligaments are back where they belong, the muscles around the knee are balanced, the patella is tracking normally, and the nerves glides are not compromised.



Fig. 15



Fig. 16



Fig. 17



Fig. 18



Once the kinetic chain patterns are addressed in the ankles, knees and hips, therapists will have so much more success in assessing and treating what would have seemed like complicated knee conditions. Correcting tibial torsion patterns of the knee will often allow the MCL and LCL injuries to heal properly, the patella to track normally and the nerves to properly glide without joint fixations or scar tissue lesions. Our next article in this series and our newest seminar and newest DVD on Kinetic Chain Patterns for Complicated Knee Conditions, will include additional assessments such as the McMurray's Test and Apley's Compression test for Meniscus Injuries, along with

therapeutic treatment and rehabilitation for Meniscus tears. It will also include treating muscle-tendon strain patterns for hamstring injuries, Pes Anserinus Tendinitis/ Bursitis, and treating popliteal and plantaris strains. It will also include looking at myofascial cupping (vacu-therapies) for nerve adhesion release, iliotibial band pain, and retinaculum release for the structures of the knee. We will also elaborate on the studies in regards to patella femoral syndrome and IT band pain not being properly treated in most situations. Future articles, kinetic chain
(Waslaski concludes on page 31)

(Waslaski concludes from page 30)


knee seminars, and our recently produced new DVD will include, assessment, treatment and home care retaining for about 12 different contributions for complicated knee pain. State of the art anatomical inserts will aid all therapist with understating the cause, treatment and rehabilitation of most complicated knee conditions. Our most recent DVD produced in March of 2019 takes therapist through Kinetic Chain Patterns and total body lesion assessments for complicated knee conditions prior to doing orthopedic evaluations of the knee. For details on seminars or DVDs go to www.orthomassage.net

Biography



James Waslaski is an Author & International Lecturer teaching approximately 40 seminars per year around the globe. He's developed 10 Integrated Manual Therapy & Sports Injury DVDs and authored manuals on Orthopedic Massage and Client Self Care. His book, *Clinical Massage Therapy: A Structural Approach to Pain Management*, was published by Pearson Education in 2012. James presents at state, national, and international massage, chiropractic, and Osteopathic conventions. His audience includes massage and physical therapists, as well as athletic trainers, chiropractors, osteopaths, nurses and physicians. James received the 1999 FSMTA International Achievement Award, the 2012 One Concept Massage Therapist of The Year Award in Canada, the 2014 FSMTA President Award, and the 2014 Instructor of The Year Award at the World Massage Festival. As an industry pioneer, James was inducted into the Massage Therapy Hall of Fame in 2008.

www.orthomassage.net



NEW DVD SERIES
**MANUAL THERAPY TO ELIMINATE
MULTIPLE NERVE COMPRESSION PATTERNS**

ORTHOPEDIC MASSAGE
& PAIN MANAGEMENT


3-DVD SET

Volume 1: Upper Body Conditions
Volume 2: Lower Body Conditions
Volume 3: Home Retraining Exercises

UPPER BODY
OA & AA Fixations; Spinal Stenosis; Whiplash; Stuck Facet Joints; Costo-Clavicular Syndrome; Thoracic Outlet Patterns; Shoulder Capsule Adhesions; Cubital Tunnel; Carpal Tunnel; and Guyan's Canal Corrections.


LOWER BODY
Leg Length Conditions; L4/L5/S1 Herniations; IlioSacral Upslips & Sacral Torsions; Muscle Activation; Ligament & Scar Tissue Releases; Tibial & Fibular Torsions; Tarsal Tunnel; and Morton's Neuroma Corrections.

HOME RETRAINING EXERCISES
Spinal Decompression; Stretching; Strengthening; Nerve Glides & Nerve Tensioning.



These DVDs compliment our **NEW Classes!** Manual Therapy to Eliminate Multiple Nerve Compression Patterns of the Upper Body and Lower Body.

FEATURING
James Waslaski,
Published Author &
International Lecturer



GET CERTIFIED
IN MANUAL THERAPY & ORTHOPEDIC MASSAGE


**MULTIPLE NERVE COMPRESSION CLASS
AND FIVE DAY INTENSIVE**

**MULTIPLE NERVE COMPRESSION PATTERNS
UPPER / LOWER BODY**
February 8-9, 2020
16 CEU - \$350 - AMTA members save \$50
Use coupon code CAAMTA50 at checkout
Location: PRO TO COL Sport Systems, 2949 Garnet Ave, San Diego, CA 92109

FIVE DAY INTENSIVE SEMINAR
July 29 - August 2, 2020
40 CEU - \$699 - AMTA members save \$100
Use coupon code CAAMTA106 at checkout
Location: Live Love Spa, 2991 Dow Ave, Turin, CA 92780

Register: www.orthomassage.net/store
Contact: Alison 800-643-5543
alison@orthomassage.net

FOR 2019 SEMINAR INFORMATION:
www.orthomassage.net
800.643.5543



Call for Local Volunteers

Are you missing the days of our local Units? When we had more Continuing Education and Community Outreach opportunities?

We can have that again! There is a catch ... We Need Local Members to assist with our organizers to make these events happen. 5 Chapter Board Members cannot organize everything and be at every event for a Chapter of our size to make these happen.

Although we cannot have local unit boards as we once did, the need to have local volunteers to make our events happen is still there.

Will you be willing to assist in this task? You can assist for one or more events. We need your help! Will you? Will you help?

If you are willing and interested, please contact any of our Chapter Board members or our Chapter Office (info@amta-ca.org). You will not be expected to do things all by yourself, your Board Members and other locals members will assist.

Thank you!

Follow Your Pathway to Success

Discover Upledger CranioSacral Therapy...

Upcoming Classes:

CRANIOSACRAL THERAPY 1 (CS1)

San Francisco, CA	Jan 9 - 12, 2020
Los Angeles, CA	Feb 27-1, 2020
Big Sur, CA	May 17 - 22, 2020
San Diego, CA	Jun 25 - 28, 2020

CRANIOSACRAL THERAPY 2 (CS2)

Albuquerque, NM	Jan 23 - 26, 2020
Los Angeles, CA	Feb 13-16, 2020
San Francisco, CA	May 7 - 10, 2020

SOMATOEMOTIONAL RELEASE 1 (SER1)

Big Sur, CA	Jul 12-17, 2020
-------------	-----------------

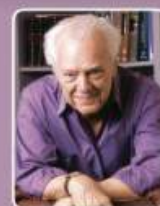
SOMATOEMOTIONAL RELEASE 2 (SER2)

San Diego, CA	Feb 13-16, 2020
---------------	-----------------

CST TOUCHING THE BRAIN 1; Stimulating Self-Correction Through the Glial Interface (CTTB1)
Los Angeles, CA Feb 27 - 1, 2020

"Great experience. As a massage instructor and having been the director of a massage school, I appreciated how well all aspects of this workshop came together - admin and curriculum."

— Natalie K., LMT



John E. Upledger, DO, OMM
Developer of
CranioSacral Therapy

Additional dates
and locations:

CALL

800-233-5880

PRIORITY CODE CA AMTA 11-19

CLICK

Upledger.com

U Upledger
Institute
International

**Inquire about our Core-Pak Training
and Certification Package**

SAVE MORE THAN 30%
SATISFACTION GUARANTEED!



**START
TRAINING
NOW!**

\$100
PER MONTH



2020-2021 CALIFORNIA CURRENTS PUBLICATION INFORMATION

The American Massage Therapy Association, California Chapter newsletter, [California Currents](http://www.ca.amtamassage.org), is scheduled to have 4 issues a year. Currently, the [California Currents](http://www.ca.amtamassage.org) has a circulation of over 7,800, reaching our members and massage schools. All issues will be sent green, via email, posted to our Chapter website (www.ca.amtamassage.org) and to our Chapter Facebook page.

Issue	Last Date for Submissions	Date to be Published
Spring	April 27, 2020	May 11, 2020
Summer	August 3, 2020	August 19, 2020
Fall	November 2, 2020	November 16, 2020
Winter	January 18, 2021	February 1, 2021
Spring	April 19, 2021	May 3, 2021

***dates are subject to change.* All newsletter inquiries should be directed to Michael Roberson at editor@amta-ca.org. Thank you.

As of November 2019, per National AMTA policy, the California Chapter's newsletter, [California Currents](http://www.ca.amtamassage.org), will no longer be able to accept new advertising or promotions within our newsletter. Articles are always welcomed. We will have opportunities to support our Continuing Education and Community Outreach Events. If you are interested in supporting our Chapter and members in this way, please send your inquiries to info@amta-ca.org.

AMTA-CA CHAPTER
Candidate and Volunteer Resume Form

Please print or type _____ Yr joined _____
Name _____ AMTA I.D. # _____
Home Address _____
Phone (w) _____ (h) _____
Email _____
Years in massage _____ CAMTC # _____ Massage license? _____ City/County _____
Massage school attended/# of hours _____
Date of completion _____ Other related schooling _____

I am interested in volunteering in the following areas: (details can be found on the Chapter website)

Board of Directors: ☐ **President** ☐ **Secretary** ☐ **Financial Administrator** ☐ **Board Member**
☐ **National Convention Delegate**

Appointees/Chairs: ☐ **Awards** ☐ **Exhibitors** ☐ **Parliamentarian** ☐ **Budget (Member At Large)** ☐ **Government Relations**
☐ **Sergeant at Arms** ☐ **Committee on Candidacy** ☐ **Newsletter Editor** ☐ **Social Media** ☐ **Conferences/Workshops**
☐ **Sports Massage** ☐ **Education Chair (Region: ☐ N ☐ C ☐ S)** ☐ **Website** ☐ **Northern Rep** ☐ **Southern Rep**
☐ **Other** _____

You want to serve, but not sure where? What skills do you have? and How much time do you want to give? Let us know and we will reach out to you. _____

Relevant community or professional experience _____

List AMTA Chapter (C) and Unit (U) Offices held with dates (include committees): _____

Other Qualifications _____

FOR THOSE SEEKING A BOARD OF DIRECTOR POSITION How many hours a week do you estimate will be required to perform the duties of this office? _____ Are you currently able to commit the appropriate time for the performance of your duties? YES NO

What are your reasons and objectives for seeking this office? _____

At Board meetings, I understand that I must be present, focused and courteous; that I must put aside my private life for the duration of the function; that I will refrain from introducing distracting influences to other Board Members and that I will be prepared to transact the business of the Association.

Signature _____ Date _____

Please submit Candidate and Volunteer Resume Form to **info@amta-ca.org**. If you have any questions about the position, please ask any of the current board members. Additional information on all roles can be found on the chapter website, **www.ca.amtamassage.org**. Thank you for your submission.

Calendar of Upcoming Events

- February 13-14** **AMTA Schools Summit, Hollywood, CA**
- Tuesday, March 11 Chapter Board Meeting, Call In
- Friday, March 13** **California Chapter Welcome Vendor Reception**
DoubleTree Hotel, Santa Ana
- Saturday, March 14** **California Chapter Annual Continuing Education Conference and Business Meeting**
DoubleTree Hotel, Santa Ana
- Saturday, March 14 Chapter Board Meeting, Face to Face
**future Chapter Board Meetings will be posted after conference*
- Saturday, April 4 *Community Outreach Opportunity, **IRONMAN® Oceanside**, San Diego*
- Sunday, May 31 **Last Day to submit for the [Rick Boden Healer at Heart \\$10,000 Student Scholarship](#)**
- August 27-29** **National AMTA Convention, Phoenix, AZ**
- TBA** *Community Outreach Opportunity, **Stand Down San Diego**, South County*
**dates to be confirmed*
- TBA** **Last Day to submit for the [AMTA \\$2,500 Summer Student Scholarship](#)**
- Saturday, September 5 *Community Outreach Opportunity, **Family Day Camp Pendleton**, Oceanside, San Diego*
**date to be confirmed*
- Saturday, September 12 *Community Outreach Opportunity, **Best Buddies Challenge-Hearst Castle**, San Simeon*
- Sunday, September 20 *Community Outreach Opportunity, **SuperFrog® IRONMAN®**, Imperial Beach, San Diego*
- October 18-24** **National Massage Therapy Awareness Week**

Note: Chapter Board Meetings are open to all members. Please contact our Chapter President for access to the call. Meetings are generally, 7.30pm-8.30pm and are subject to change.

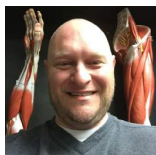


California Currents Contacts

Chapter Board

President

John Lambert
president@amta-ca.org



Secretary

Phil Okazaki
secretary@amta-ca.org



Financial Administrator

Michael Roberson
treasurer@amta-ca.org



Board Member

Megan Martin
1stvp@amta-ca.org



Board Member

Bonni Kelley
2ndvp@amta-ca.org



Appointees

Northern Representative

Open
northernrep@amta-ca.org

Southern Representative

Open
southernrep@amta-ca.org

Government Relations Chair

John Lambert
gr@amta-ca.org

Newsletter Editor

Michael Roberson
editor@amta-ca.org

Appointee to CAMTC

John Lambert
gr@amta-ca.org

Elected Delegates

- 1) Stacey DeGooyer (2019-2020)
- 2) Karl Reid Kramer (2019)

Northern Regions

East Bay
Far North
Golden Gate
Greater Sacramento
Monterey Bay
Napa Valley
Redwood Empire
Silicon Valley

Southern Regions

Desert Resorts
Gold Coast
Inland Empire
Los Angeles-South Bay
Mid State
Orange County
San Diego

Chapter Administrator

Jeff Milde
Calma Association
Management, LLC



Chapter Website

www.ca.amtamassage.org

Follow Us on Facebook

Amta-CA-American-Massage-Therapy-
Association-California-Chapter

National Website

www.amtamassage.org

California Chapter's Phone Number

916-382-8542

and EMAIL ADDRESS

info@amta-ca.org

and National:
American Massage Therapy Association
- AMTA

CA Chapter's Mailing Address:
AMTA-CA

1721 Eastern Avenue, Suite 19
Sacramento, CA 95864

National's Office Phone Number

847.905.1638

National's Mailing Address:
American Massage Therapy Association
500 Davis Street
Evanston, IL 60201-4668