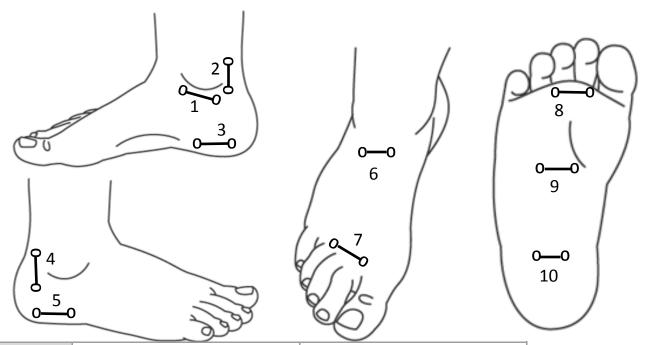
Confidential Patient Information

AVAZ IA ^M			
Date			08
Date:			
Patient Name:			
Symptoms:	Right Foot		Left Foot
· · · · · · · · · · · · · · · · · · ·	Patt	Mark area of symp in one color; mark of treatment in a s color, if different t	area second
Healthcare		areas of symptom highlighter or simi	1 /
Provider		type marker).	
Rate Symptoms Be	fore Treatment	t	
0 = very little pain; 10	= intolerable p	ain	
	•	•	10
Treatment given			
Foot protocol			
3-pathways 6-points (See reverse to record re	eadings)		
Little Wings			
Scar tissue (Location)
Point of Pain (Location)
Treatment Notes:			
Rate Symptoms <i>i</i> 0 = no pain; 10 =			
0 5		•	10
Notes After Treatment			



Treatment for Foot Pain

Go to *avazziatraining.com* for details.



	LEFT	FOOT	RIGHT	FOOT
	Left Foot IR Before Protocol	Left Foot IR After Protocol	Right Foot IR Before Protocol	Right Foot IR After Protocol
Saline used? Yes / No				
Power Level				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

Tips for Foot Protocol

- Use Y-electrode to take IR readings.
- Press Y-electrode firmly to the skin for reading.
- Check first for comfortable power setting. If patient doesn't feel anything, use highest setting.
- 4. For exceedingly dry skin, wipe with mild saline solution first and dry skin. (Note on chart, left.)
- Use Deep Stimulate for 20 minutes.
 Power may be adjusted during that time.
- Take new set of IR readings after protocol.