



What Would You Do?

Chapter 7

an online resource
created to accompany

Pre- and Perinatal Massage Therapy:

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and Postpartum Practice*
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this resource links to:
Chapter 7, pages 241, 244





What Would You Do? Chapter 7

[from page 241]

You volunteer to provide massage at a local organization that serves teenage mothers. What risk factors and complications might you encounter in this situation? What types of technique and positioning modifications might you make? If a client there is considering whether to keep her baby as a single mother or relinquish her baby for adoption, how would you support her contemplations while staying within scope of practice?

Below is one possible response:

Risk factors/special needs:

- *High risk due to age*
- *Likely psychosocial and sociodemographic contributing issues*
- *Possible physical complications secondary to age*
- *Emotional considerations of higher stress levels*

Positional and/or technical adjustment requirements:

- *Get permission to discuss her condition and needs with medical personal to get guidance and release.*
- *Get parental consent or consent from the facility. You may want to have one of these adults present when you work with these underage clients.*



- *Prioritize autonomic sedation to reduce negative effects of stress.*
- *Emphasize work that increases her self-awareness, ability to recognize and communicate her needs.*
- *When in doubt, use side-lying position. If semi-reclining is acceptable to doctor, may be more comfortable and familiar for apprehensive client.*
- *Avoid abdominal work for liability precaution.*

What can you do to connect with your client the baby?

- *Use delicacy of relational finesse and emotional awareness*
- *Maintain a nurturing demeanor and exercise your active listening skills especially if she needs more emotional support.*
- *Take cues from her as to how much and if she'd like to reveal of her situation and adjust accordingly. (e.g.; is she putting baby for adoption or keeping baby?)*
- *Breathe with her to nonverbally connect.*
- *Send your welcoming, nurturing intention to the baby as you contact the mother.*

[from page 244]

You have been working on a healthy pregnant client every two weeks. She calls you at her 32nd week of pregnancy to cancel her next appointment as she has been on bed rest for a week to hopefully address vaginal bleeding. After assessment in the hospital, her doctor discharged her home on prescribed bed rest with less than two hours up on her feet each day. She has been having more headaches than normal and also now has some heartburn and achiness due to bed rest. What other information and communications do you need prior to working with her now? Where would you see her for a next



appointment? What positions would you use and what technique modifications would you make?

Below is one possible response:

Other information and communication prior to first session

- *Request permission to correspond with her medical team and do so getting a written release to proceed with massage therapy and restrictions and guidelines.*
- *Is her blood pressure stable now? What is it?*
- *Normal labs or protein in urine?*
- *Other secondary complications? Organ involvement?*
- *What does her doctor think of the headaches?*
- *What positioning restrictions does she have?*

Additional precautions to take with her

- *No abdominal massage (liability precaution)*
- *Watch for systemic and/or pitting edema and adapt circulatory work in response*
- *Refer to MD if headaches worsen*
- *Does repositioning help her symptoms? (i.e.; heartburn, low back or kidney pain – if not; calmly recommend that she mention it to her doctor)*

Positioning

Follow doctor's restrictions or use left sidelying; if doctor approves use semireclining for possible relief of heartburn symptoms