



## Practical 2: Postural Assessment and Client Positioning

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**Objective:** Position clients safely and comfortably (seated, supine, prone), apply correct draping, set table height, use supports (pillows/bolsters) for varied bodies and mobility, protect your own body mechanics, and document postural findings with session modifications.

**End outcome:** You can set up the space, drape confidently, choose and place supports, cue positions, work with neutral therapist mechanics, and record observations + adjustments.

### A. Materials & Room Setup (5 min)

- Massage table with working locks; adjustable face cradle; clean linens.
- Bolsters: full, half-round; pillows; small towel rolls; wedge (if available).
- Non-slip floor mat for therapist stance; oil holster/pump.
- Light: indirect, warm; sound: low/steady; temp: comfortable.
- Documentation sheet + pen.

#### Table height—quick rule:

- **Forearm glides/long strokes:** table **just below wrist crease**.
- **Precision (neck/face/hand):** **1-2 cm higher** than wrist crease.
- **Heavy bodywork (legs/hips):** **1-2 cm lower** than wrist crease.

### B. Safety, Consent & Draping (3 min)

**Rapid screen:** fever? hot swollen joint? new neuro deficit? DVT/PE red flags? pregnancy (trimester)? reflux? recent surgery? → modify/avoid positions accordingly.

#### Consent micro-script (10 s):

"Today we'll practice positioning and draping for comfort and privacy. Tell me 'pause' anytime you want to change or stop. Is that okay?"

#### Draping drill (modesty & warmth):

- Top sheet from shoulders to toes; blanket if cool room.
- Expose **only** the region you work; anchor sheet edges (hand-width tuck) to prevent slippage.
- "Tent & slide" for legs (lift sheet with one hand to create space; the other hand positions bolster).
- Always announce actions: "I'll place a bolster under your knees now."

### C. Therapist Ergonomics (you first) (2 min)

- **Stance:** split stance for reach; horse stance for bilateral work. Knees track 2nd-3rd toe.
- **Hip hinge:** long spine; ribs soft; head in line.
- **Stack joints:** shoulder→elbow→wrist→contact. Wrists near neutral.
- **Move from legs;** hands guide, body delivers.
- **Breath:** exhale on load, inhale on return.

**10-second check before touching:** "Are my feet planted? Is my spine long? Can I breathe and talk easily?"



## D. Positioning Protocols (step-by-step with checkpoints)

### 1) Supine (anterior work; autonomic settling)

#### Setup:

1. Raise table slightly (precision) or keep neutral.
2. Pillow under head **only if** forward head/kyphosis; otherwise flat is fine.
3. **Bolster under knees** to slacken lumbar spine.
4. Arms on table with small towel under wrists.

#### Checkpoints:

- Ask: "Neck okay here?" "Any pull in low back?"
- Visual: ear-shoulder-hip roughly in line; chin neither jammed nor flared.

#### Variants:

- **Reflux/pregnancy:** add **upper-torso wedge** ( $\approx 15-30^\circ$ ).
- **Shoulder impingement:** place **arm shelf** or pillow to keep humerus slightly abducted/external rotated.

### 2) Prone (posterior chain)

#### Setup:

1. Face cradle aligned with sternum; adjust height so neck is neutral.
2. **Half-roll under ankles** to ease knees/Achilles.
3. Towel roll under shoulders for large chest/prone difficulty.

#### Checkpoints:

- Ask: "Forehead/cheek comfortable?" "Any pressure on throat or low back?"
- Visual: neck neutral (no end-range rotation/extension); lumbar not hyper-arched.

#### Variants:

- **Sinus congestion:** alternate short prone sets with side-lying.
- **Pregnancy/abdominal surgery: avoid prone;** use side-lying.

### 3) Seated (head/neck/shoulders; re-entry)

#### Setup:

1. Client on chair/bench, feet flat, hips to the back, **lumbar roll** if needed.
2. Pillow to **hug** (arms propped) or headrest on table edge for forward support.

#### Checkpoints:

- Ask: "Can you relax your shoulders into the support?"
- Visual: ear over shoulder (not far forward); ribs stacked over pelvis.

#### Variants:

- **High BP/lightheadedness:** seated is safer than rapid supine→stand transitions.

## E. Support Selection by Body Type / Limitation (fast map)



Presentation	Primary Support	Why it helps	Extra Tip
<b>Low back ache supine</b>	Bolster under knees	Slack hip flexors/lumbar	Add small sacral towel if needed
<b>Low back ache prone</b>	Half-roll under ankles	Reduces anterior pelvic tilt	Slight table lower to keep hinge
<b>Kyphosis/forward head</b>	Higher head pillow supine	Neutralizes cervical flexion	Towel under shoulders to open chest
<b>Shoulder impingement</b>	Arm shelf/pillow (prone/supine)	Avoids end-range IR	Keep elbow below shoulder line
<b>Pregnancy (2nd-3rd tri)</b>	Side-lying: head, between knees, under waist	Protects abdomen & venous return	Slight trunk forward tilt with towel wedge
<b>Reflux/hiatal hernia</b>	15-30° torso wedge	Reduces symptoms	Avoid deep abdominal work
<b>Obesity</b>	Wider bolsters; sheet clips	Distributes pressure; secure drape	Raise table slightly for access
<b>Knee pain supine</b>	High knee bolster	Decompresses patellofemoral joint	No end-range knee flexion
<b>Ankle/foot sensitivity</b>	Extra towel at cradle/ankle	Avoids pressure points	Check toes not jammed into cradle

## F. Postural Assessment: What to Look For (60-90 s scan)

**Side view (sagittal):** ear-shoulder-hip-knee-ankle vertical; note **forward head, thoracic kyphosis, anterior/posterior pelvic tilt.**

**Front/back (frontal):** level shoulders/ASIS/PSIS; **knee valgus/varus; foot pronation/supination.**

**Dynamic quick tests:**

- **Knee-to-wall** (ankle dorsiflexion symmetry).
- **Single-leg stance 10 s** (pelvic drop? sway?).
- **Scapular setting** (ask for gentle “slide shoulder blades into back pockets”).

**Translate to action (examples):**

- Forward head → **raise head support** in supine; cue “long back of neck.”
- Valgus knees in side-lying → pillow between knees, cue feet parallel.
- Pronated feet seated → ensure feet flat, knees tracking over 2nd-3rd toe.

## G. Mini-Drills (interactive, timed)

1. **10-Second Drape:** Expose one leg, anchor edges, maintain modesty. Partner checks: no gaps, client warm?
2. **90-Second Position Switch:** Supine → side-lying with three-point support (head, between knees, under waist). Goal: zero tug on sheets.
3. **Table-Height Snap:** Set for forearm glides (below wrist crease), then for neck work (slightly higher). Partner confirms with wrist-crease test.
4. **Comfort Check Script:** Ask **one** question at a time—“Neck okay?” (wait), “Low back okay?” (wait). Modify and re-ask.

## H. Therapist Ergonomics in Action (live cues)

- Feet planted → **step, don't reach.**
- Hinge → “bring belly to thigh,” not “nose to table.”



- Elbows kiss your ribs on returns.
- If you feel it in your thumbs/wrists → **broaden contact** (palm/forearm), **lower table**, or **step closer**.

## I. Documentation (S.O.A.P. mini-template)

- **S (Subjective):** main comfort issues, preferred position, heat/cold tolerance.
- **O (Objective):** posture notes (e.g., forward head, L>R shoulder elevation), position used, supports placed.
- **A (Assessment):** comfort response (0-10), tissue ease after 5 min, ergonomic notes for you.
- **P (Plan):** next session positioning, bolster changes, table height, home cue (e.g., **4/6 breath before bed, knee-to-wall 10 reps**).

### Example:

S: "Neck tight, can't lie flat long." O: Kyphosis, forward head; supine with 2" pillow + knees bolstered. A: Comfort 2/10 strain; improved after adjustment. P: Keep elevated supine; add side-lying block for scapular work next time.

## J. Troubleshooting (quick fixes)

- **Face cradle nose/cheek pressure:** re-angle cradle, add thin towel, or switch to side-lying.
- **Cold client:** blanket + warm towel at feet; shorten exposure.
- **Sheet creep:** anchor corners; use sheet clips.
- **Low-back pinch prone:** add ankle roll; place tiny towel under ASIS to reduce lumbar lordosis.
- **Dizziness supine→stand:** roll to side, **seated 30-60 s**, then stand with support.

## K. Assessment Rubric (self/peer)

Criterion	Pass	If not yet, coach cue
Table & drape	Stable, height set, drape anchored	Wrist-crease test; anchor edges tighter
Supine position	Neutral neck, knees bolstered	Add/adjust head pillow; check chin angle
Prone position	Neutral neck; ankles supported	Re-set cradle; add half-roll
Side-lying support	Head, knees, waist supported	Add waist towel; align hips/knees/feet
Therapist mechanics	Hinge, stacked joints, neutral wrists	Lower table; step closer; forearm contact
Client comfort checks	2-3 targeted questions, modifications made	Ask one Q at a time; re-check after fix
Documentation	Clear S/O/A/P with posture notes	Write one mod + one plan item

## L. Reflection (write 3 lines)

- Which position did my client breathe easiest in? \_\_\_\_\_
- One support I'll place earlier next time: \_\_\_\_\_
- One ergonomic habit to keep: \_\_\_\_\_

## M. Quick-Reference Cards (print/save)

**Supine** → pillow (if kyphotic), **bolster knees**, arms supported.

**Prone** → face cradle neutral, **half-roll ankles**, option shoulder towel.

**Side-lying** → **head + between knees + under waist**; slight forward trunk tilt.



**Ask (one at a time):** “Neck okay?” “Low back okay?” “Too warm/cool?”

**Therapist:** hinge, step, breathe; wrists neutral.

**Never stack heat + pressure** over chest/umbilicus/pelvis/crown; avoid carotid compression.

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### **Practice Flow (20-25 min)**

1. Room & table set (2) → Drape drill (1) → Supine position (4) → Prone position (5) → Side-lying position (5) → Ergonomics walk-through during simple glides (4) → Documentation & debrief (3).

**Finish line:** Your client can say, “I felt supported, warm, and comfortable,” and you can name **one** postural deviation you saw **and** the support you used to address it.

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