



Massage Therapy Body of Knowledge (MTBOK) Phase 1

Second Draft for Review and Comment

Authored by the MTBOK Task Force
Representing a Consensus of the Massage Therapy Profession

Sponsored under the joint Stewardship of the following organizations:

American Massage Therapy Association (AMTA)
Associated Bodywork and Massage Professionals (ABMP)
Federation of State Massage Therapy Boards (FSMTB)
Massage Therapy Foundation (MTF)
National Certification Board for Therapeutic Massage and Bodywork (NCBTMB)

January 29, 2010

We encourage submission of comments regarding this document.
Comments may be submitted (by section and page number please) via an
automated collection tool available by clicking here or using the following
URL:

<http://www.surveymonkey.com/s/5QV9ZYQ>

Table of Contents

Section 0 [Preamble and Overview](#)

Section 10 [Second Draft Preamble](#)

Section 20 [How to Provide Comments and Suggestions](#)

Section 30 [MTBOK Vision](#)

Section 40 Section Reference Numbers for Non-Section Specific Comments

Section 40.1 *[Intentionally blank]* Use this Section Number as a reference number when providing **General Comments**

Section 40.2 *[Intentionally blank]* Use this Section Number as a reference number when providing **MTBOK Organization/layout Comments**

Section 40.3 *[Intentionally blank]* Use this Section Number as a reference number when providing **New Suggestions**

Section 100 [Massage Therapy Description and Scope of Practice](#)

Section 110 [Description of the Massage Therapy Field](#)

Section 120 [Massage Therapy Scope of Practice Statement](#)

Section 130 [What /s Included in the Scope](#)

Section 140 [What /s Not Included in the Scope](#)

Section 200 [Competency Requirements for a Massage Therapist in Terms of Knowledge, Skills, and Abilities \(KSA\)](#)

[Section 210 Entry-Level Massage Therapist KSAs](#)

Section 210.1 [Overview of Massage and Bodywork History / Culture](#)

Section 210.2 [Anatomy and Physiology](#)

Section 210.3 [Kinesiology](#)

Section 210.4 [Pathology](#)

Section 210.5 [Assessment, Treatment Planning, and Documentation](#)

Section 210.6 [Research and Information Literacy](#)

Section 210.7 [Business Practices, Laws, and Regulations](#)

Section 210.8 [Boundaries, Ethics, and the Therapeutic Relationship](#)

Section 210.9 [Body Mechanics and Self Care](#)

Section 210.10 [Massage Techniques, and Physiological and Psychological Effects](#)

Section 210.11 [Therapeutic Modalities](#)

58 **Section 300** [Terminology](#)

59 **Section 400** **Appendices**

60 Section 410 [Appendix A Bibliography](#)

61 Section 420 [Appendix B Further Reading](#)

62 Section 430 [Appendix C Sample Online Comment Form \(Completed\)](#)

Section 0

Preamble and Overview

Section 10 Second Draft Preamble

Background and Overview: A considerable amount of work has been put into this draft document by members of the MTBOK Task Force, who represent you, the massage therapy and affiliated communities. It's important to note that this document is not being developed in seclusion – we have pushed hard to get a document that is comprehensive and has plenty of substance for the communities to take in, think about, and provide input into. We received approximately 600 comments on the first draft from members of the massage therapy and affiliated communities, and this second draft has been significantly impacted by the comments and suggestions provided.

We want your comments, input, and suggestions because it is our goal for the MTBOK to become truly representative of the thinking of the community, and we hope you will become enthusiastic about the MTBOK and its future. We hope to achieve a living, learning "document" – that is, one that grows with, and in some cases ahead of, our community. *It will become living if you, the community, embrace it, become involved with it over time, and continue to keep it relevant, responsive, growing, and strong.*

The MTBOK has had a good start. Phase 1 is a joint effort sponsored by the major organizations in the massage therapy field, each of which put its individual agenda aside to work for the common good. The organizations did this because they realize that the health and vitality of the massage therapy profession is in all of our interests and that the development of a Massage Therapy Body of Knowledge would help achieve that state.

To that end, they established a joint "Stewards" board that provides the framework and resources to begin the project. At the same time, they have stayed out of the decision-making process, recognizing that the project needs to be by and for the profession and not swayed by individual organizational desires. The Steward Organizations have not been pre-briefed on the content in this document, and they will not receive it before it goes out for public comment.

As to the release of this document, you can again become an important part of the process, and we really hope to see you involved. We hope you will participate throughout the project, and we want you to understand that this isn't the only chance you have had to impact the content and direction of the MTBOK Phase 1. Our general schedule looks like this:

- Task Force work was initiated to assemble the MTBOK on July 1, 2009.
- The first draft was developed and out for public review on September 15, 2009.

Final MTBOK Phase 1 Second Draft Content for Public Comment

- An in-person event designed to let the profession provide us with thoughts and input was held on September 24, 2009 in association with the AMTA National Conference in Orlando, FL.
- The formal comment period on the first draft was open for 45 days. We continued to leave open the ability to provide comments and addressed all that were possible between releases (all comments received by January 5, 2010 were reviewed and their impact is in this document.)
- This, the Second draft, is being released on January 29, 2010.
- The formal comment period on this draft will be open January 29 to March 8, 2010. We will continue to leave open the ability to provide comments and will address all that are possible prior to the final release.
- The final Phase 1 product will be presented to the community and released on May 15, 2010.

MTBOK Phase 2 vs. the “Final” MTBOK: Phase 1 of the MTBOK will not complete the development of a full, living Body of Knowledge, but it will have much of the ground-work done, will result in a working process, and will allow for additional work to be focused on in future MTBOK work. Specifically, Phase 1 is charged with producing 4 crucial elements of a Massage Therapy Body of Knowledge:

- A Description of the massage therapy field;
- A Scope of Practice for massage therapy;
- A description of the competencies of an entry level massage therapist in terms of Knowledge, Skills, and Abilities; and
- Terminology as it applies to the massage therapy field.

It's clear that Phase 1 gets most of the job done but leaves a lot of interesting work to be completed, and it's our hope that a lot of you will participate in upcoming phases, both formally and informally. In this way, you can help guide the destiny of our profession.

The Task Force: The Steward organizations solicited applications for volunteer positions on the task force in hopes that they would achieve a solid, knowledgeable group of individuals who brought a full mix of backgrounds and skills into the project.

The Task Force members did not work together before, nor did they have any significant ties to the Steward organizations. They are, however, an impressive group (see “Who We Are” button on the MTBOK site – <http://www.mtbok.org>) and include educators, business owners, and authors, as well as people who have experience with State Massage Therapy Boards, state and local legislation, examination and certification efforts (both eastern and western traditions). Many of them are also, or have been, massage therapy practitioners. It's a group the profession can be proud of and, even more importantly, one that can be worked with.

The Task Force members are all volunteers who serve until July 2010, so there will be opportunity for others to participate in follow-up work.

The Second Draft Release Notes:

- It's a draft and, by definition, will change. It's being put out as early as possible to provide for substantial input from the community.
- It's far from being done. Although we are proud of the work so far, it needs more work, and we will be starting on that effort shortly. Over the next few weeks we will focus on receiving input from you, the MTBOK stakeholders (i.e., those who have some interest in massage therapy), establishing the process to deal with the comments we receive and working out our strategy for the final release.
- We know we specifically need to devote more time to the terminology section, and plan to do so.
- As you review this document, keep in mind that the Description and Scope of Practice, Section 100, is focused on the entire scope of the massage therapy field. However, the Knowledge, Skills and Abilities, Section 200, is restricted to the competencies an *entry level* massage therapist must possess.
- With the release of this draft, we hope that it is read and acted upon by both the massage therapy profession and allied health care professions – to that end we are specifically sending electronic copies to many allied health care associations.
- Since we are hopeful that we will continue to receive many constructive comments, we have made it easy to provide them using an online form. See the [next section](#) for more information.

Intentions and Clarifications from the Initial MTBOK Task Force

- Remember that the MTBOK has no legal authority – the jurisdictions in which you practice hold that authority. We hope that over time the MTBOK will be a source of information that legislative and regulatory bodies rely on to obtain the best information about our profession. The Task Force seeks to support legislators to make informed decisions when they formulate statutes and consider exempting from massage therapy statutes those related manual practices which have their own standards of education, examination, and practice such as, but not limited to, Asian Bodywork, Reflexology, and Polarity Therapy.
The Task Force also seeks to ensure that massage therapists are not restricted from integrating and applying knowledge and skills gained through education and certification from these practices when applying massage therapy. We seek to maintain the integrity of the massage therapy profession and that of related manual therapies so that we may respectfully work together for the benefit of those we touch.
- We are not defining other professions and recognize that there may be overlap in Scope of Practice and/or Knowledge, Skills, and Abilities (KSA) with other professions. In areas of professional overlap, it is not our intention to limit anyone's

176 practice. There is a richness in professional diversity, which benefits professionals
177 and clients/patients.

- 178 • We believe that massage therapy and bodywork overlap in many although not all
179 areas. Massage is bodywork though not all bodywork is massage therapy.
- 180 • The relationship of body, mind, and spirit represents a functional unit and provides
181 foundational theoretical context for massage therapy.
- 182 • Finally, we hope that the MTBOK creates a common understanding of the profession.
183 We expect that a detailed body of knowledge will have a profound impact on the
184 profession, that the work of regulation, education, accreditation, examination,
185 research, practice, etc., will be facilitated, and that the massage therapy profession
186 will become more cohesive. In addition, our hope is that there will be a sustained
187 interplay among all parties to keep the body of knowledge alive and growing as the
188 profession continues to move forward.

189 **Section 20 How to Provide Comments and Suggestions**

- 190 • Please use the automated form found at: <http://www.surveymonkey.com/s/5QV9ZYQ>
191 to submit your comments whenever possible.
- 192 • Submit one form for each comment, and submit as many forms as you need.
- 193 • Include the line number of the text that begins the part you are commenting on or
194 where you wish to add or delete items.
- 195 • Specify the Section number you are commenting on. Please use the Section
196 numbers within Section 40 as the reference for overall or non-specific comments
- 197 • Providing your email address is optional, but it will help us if we need to get in touch
198 with you regarding your submission. Your email address will not be shared outside
199 the MTBOK project.
- 200 • Click [here](#) for a sample filled-out comment submission form which may also be found
201 as Appendix C.

202 **Section 30 MTBOK Vision**

203 The following summary of the vision of the MTBOK is taken from the final MTBOK
204 Business Case Summary developed by the MTBOK Steward organizations. The
205 document is available at <http://www.mtbok.org/resources.html>.

206 **Vision**

207 The vision for a massage therapy body of knowledge initiative is to develop and adopt a
208 common BOK for the profession, defined as¹

209 **A living resource of competencies, standards, and values that inform and guide**
210 **the domains of practice, licensure, certification, education, accreditation, and**
211 **research.**

¹ Report from the Massage Therapy Body of Knowledge Meeting, Kansas City, Missouri, November 5-7, 2008

- **Competencies** refer to the *Knowledge, Skills, and Abilities (KSAs)* that enable massage therapists to perform their work in a safe and effective manner. *Knowledge* is the technical information, theory, and research that support the practice; *Skills* are the psychomotor capabilities a massage therapist utilizes; and *Abilities* are demonstrable behaviors – both innate and learned – that result in an observable outcome in the treatment setting. (*KSAs will be defined for both the entry level of practice and areas of specialized and advanced practice.*)
- **Standards** are the established and documented norms or requirements for the profession. They include such components as a Scope of Practice definition, a Code of Ethics, Standards of Practice, Nomenclature, Taxonomy, Education Standards (including Curriculum Standards, Teacher Qualifications, and Institutional Requirements), and Workplace Standards (including Ergonomic Factors, Facility Requirements, and Therapist Capacities).
- **Values** are the unique attributes, qualities, and principles that are embodied by individual massage therapists as well as by the institutions and organizations that comprise the profession.

Section 40 Non-Section Specific Comments

Section 40.1 Use this Section Number for entering General Comments

This section should be used as the section reference number when evaluators submit general or non-specific comments.

Section 40.2 Use this Section Number when entering Comments about the MTBOK Organization or Layout.

This section should be used as the section reference number when evaluators submit MTBOK Organization/layout Comments.

Section 40.3 Use this Section Number when entering New Suggestions.

This section should be used as the Section reference number when evaluators submit new suggestions.

Section 100

Massage Therapy Description and Scope of Practice

Section 110 Description of the Massage Therapy Field

Massage therapy is a health care and [wellness](#) profession. The practice of massage therapy involves a [client/patient](#)-centered session, intended to fulfill therapeutic goals, with the therapist being free of personal agenda. Massage therapy also meets the well-researched need for touch and human connection. Massage therapy is about one human touching another with clear intention, focused attention, and the attitudes of compassion and non-judgment.

During a session a massage therapist incorporates a wide variety of [techniques](#) and approaches to address the varied focuses of the client/patient, which may include any or all of the following:

- Treatment of injury or conditions,
- Relaxation,
- Stress reduction,
- Wellness,
- Enhancing personal growth,
- Encouraging awareness of body,
- Facilitating the balance and connection of body, mind, and spirit.

Massage therapy is performed in a variety of practice settings designed to meet a multitude of client/patient needs. A few examples of the many possibilities include

- In independent offices serving community needs;
- In an athletic training facility working with both amateur and professional athletes to lengthen and stretch muscles and help improve performance;
- In Hospitals, doing pre- and post-surgery massage therapy;
- In a massage clinic working on injury rehabilitation, breaking up scar tissue and increasing flexibility;
- In multidisciplinary clinics with acupuncturists, medical doctors, physical therapists, and naturopathic physicians as part of a health care team, providing integrated health care;
- In oncology clinics, providing palliative care;
- In chiropractic clinics, doing massage treatments that support chiropractic care;
- In airports, doing seated massage on travelers;
- In day spas, offering stress-reducing time away from the hectic pace of life to enjoy nurturing, caring touch;

- With psychotherapists focusing on mind-body connections that help heal past trauma;
- In personal growth centers with clients/patients on a self-actualization path, focusing on mind-body awareness or creating a meditative state for the whole body;
- In a stable, helping the dressage horse and rider work together with ease, addressing the individual body issues that each may have.

Many people who have received a massage can attest to the emotional, mental and physical benefits. The physiological mechanisms that create these benefits have been the focus of a growing body of research over the last twenty-five years. Research confirms that massages ease pain; reduce anxiety levels; decrease blood pressure; improve cognitive function; lessen depression; and facilitates weight gain in premature infants. As research increases our understanding of how this therapy improves health and wellness, it will help guide the teaching, practice, and utilization of massage therapy in order to achieve the greatest benefit to the client/patient.

Section 120 Massage Therapy Scope of Practice Statement

Massage therapy is a health care and wellness profession performed in a variety of employment and practice settings. The practice of massage therapy includes [assessment](#), treatment planning, and treatment through the manipulation of [soft tissue](#), circulatory fluids, and [energy](#) fields, affecting and benefiting all of the body systems, for the following therapeutic purposes, including but not limited to enhancing health and well-being, providing emotional and physical relaxation, reducing stress, improving posture, facilitating circulation, balancing energy, remediating, relieving pain, repairing and preventing injury, and rehabilitating. Massage therapy treatment includes a hands-on component as well as providing education, information, and non-strenuous activities for the purposes of self-care and health maintenance. The hands-on component of massage therapy is accomplished by use of digits, hands, forearms, elbows, knees, and feet with or without the use of emollients, liniments, heat and cold, hand-held tools, or other external apparatus.

Section 130 What Is Included in the Scope of Practice

The preceding Sections 110 and 120—"Description of the Massage Therapy Field" and "The Massage Therapy Scope of Practice Statement"-- were specifically intended and drafted to describe and define the entire field of practice of massage therapy as it presently exists while recognizing, respecting, and excluding the different and distinct identities of other forms of touch therapies within the broader industry (including but not limited to other bodywork and somatic practices with their own separately developed systems and philosophies, scopes of practice and educational requirements).

As written, Sections 110 and 120 define the full scope of practice of the massage therapy profession, one that goes beyond the minimum entry-level "Competency

Requirements for a Massage Therapist in Terms of Knowledge, Skills, and Abilities (KSA's)" presented in Section 200. Therefore, it should be understood that not all items mentioned or implied in the above descriptions of the field and its full scope of practice are entry level and that not all of the items would be expected to be included in Section 200 KSAs or in basic entry-level massage therapy training.

The following list of what is included in the scope of practice of massage therapists assumes, at least, the required or nationally recognized standard for minimum entry-level training in massage therapy and specific post- graduate training where necessary or required.

Assuming the required or nationally recognized standard for minimum entry-level training in massage therapy and specific post-graduate training where necessary or required, the following are included in the Scope of Practice of Massage Therapists.

- The use of touch through [pressure](#), [stroking/gliding \(effleurage\)](#), [kneading \(petrissage\)](#), lifting, [percussion \(tapotement\)](#), [compression](#), [holding](#), [vibration](#), [friction](#), [pulling](#), movement, and stretching (see below) by the digits, hand, forearm, elbow, knee, foot, or mechanical appliances which enhance massage therapy techniques
- Work to enhance wellness and facilitate mind, body, and spirit connections
- The use of active/passive range-of-motion, joint movement within the normal physiologic range-of-motion, active assisted and resistive movement, stretching, and range-of-motion
- Neuromuscular re-education and soft tissue mobilization
- Energy work, which includes treatment of the energy field through the use of touch or through the use of non-contact techniques
- Client/patient assessment by health history and intake, interview, observation of posture and movement, palpation, range-of-motion assessment, [special tests](#), and, with permission, consultation with the client's/patient's other health care providers
- The determination of whether massage therapy is indicated or contraindicated for the client/patient
- The determination of whether referral to another health care practitioner is appropriate or necessary when the client's/patient's condition is determined by the massage therapist to be beyond his or her scope of practice, skills, and training
- Formulation of an individualized treatment plan based on client/patient assessment findings
- Application of therapeutic modalities which include hot and cold applications (such as heat lamps, compresses, ice or hot packs, stones, etc.), hydrotherapy, topical herbal (non-legend) applications (poultices, muds, packs, etc.), body wraps (for therapeutic musculoskeletal, constitutional intentions), topical application of salts/sugars, tools, electric massagers, aromatherapy , and application of tape for the purpose of therapeutic benefit that does not restrict joint movement

- Using emollients, lubricants, and friction-reducing products, such as oils, gels, lotions, creams, powders, rubbing alcohol, liniments, antiseptics, ointments, and other similar preparations
- Documenting a client's health history, intake interview, assessment findings, treatment, and treatment outcomes as appropriate
- Obtaining a client's/patient's [informed consent](#) prior to initiating treatment
- Using guided relaxation techniques for the intention of facilitating and enhancing application of massage therapy
- Offering specific suggestions and recommendations of self-care and health-maintenance activities including but not limited to self-massage, movement, self-administered hydrotherapy applications, stress-reduction and stress-management techniques, stretching and strengthening activities, structured breathing techniques, progressive relaxation, and meditation
- Ethical business practices, which shall include but not be limited to full disclosure of fees and payment policies with the client/patient prior to providing massage therapy
- Intra-oral and intra-nasal work with separate informed consent to address the specific considerations (All other manipulation of soft tissue is limited to external tissues.)
- Female breast massage, with separate informed consent to address the specific considerations
- Animal massage.

Section 140 What *Is Not* Included in the Scope of Practice

The following are NOT included in the Scope of Practice of Massage Therapists.

- Diagnosis of medical or orthopedic conditions or illnesses
- The performing of surgery or other procedures requiring a medical license
- The [prescribing](#), changing, dispensing, and administering of [legend](#), over the counter drugs and herbal medication
- [Genital](#), intra-anal, intra-vaginal manipulation or applications
- Manipulation of any body structure for the purpose of sexual arousal or gratification of either the client/patient or therapist regardless of who initiates such activity
- High velocity/low amplitude thrust force to any articulation of the human body as performed in chiropractic, osteopathic or naturopathic adjustments
- Ear Candling
- Application of ultrasound, electrotherapy, laser therapy, microwave therapy, injection therapy, diathermy, or electronic nerve stimulation of over thirty-five volts
- Depilation, waxing, hair extractions, and electrolysis
- Acupuncture and Chinese Pharmacology.
- Moxibustion
- Western Herbalism

- 389 • Diet and Nutritional [Counseling](#), including the recommendation of vitamins,
 - 390 supplements, and other nutraceuticals
 - 391 • Biofeedback
 - 392 • Exercise, including Personal Fitness Training, Tai Ji Quan (T'ai Chi Ch'uan), Qi Gong
 - 393 (Ch'i Kung), Yoga Instructor Training, and the prescription of therapeutic
 - 394 strengthening exercises
 - 395 • Psychological Counseling
 - 396 • Hypnotherapy
 - 397 • Guided Imagery intended to support counseling interactions
 - 398 • Naturopathy
 - 399 • Homeopathy, which includes Bach Flower Remedies
 - 400 • Cosmetology or the specific practices intended to beautify the skin
 - 401 • Colonic irrigation and other methods of internal hydrotherapy
 - 402 • Intentional use of techniques to evoke an emotional response in the client
- 403 The list of therapies and disciplines described above is not exhaustive. Though it
- 404 represents practices that are not within the scope of practice for massage therapy, they
- 405 may provide benefit for the client/patient. Massage therapists can and often do learn
- 406 and obtain appropriate licensing and certification to practice and add these disciplines to
- 407 their “tool bags” within their practice. Massage therapists are expected to meet all legal
- 408 expectations and requirements of the jurisdiction in which they practice their disciplines
- 409 prior to implementing them in practice.

Section 200

Competency Requirements for a Massage Therapist in Terms of Knowledge, Skills, and Abilities (KSA)

Section 210 Entry-Level Massage Therapist KSAs

The following competencies represent minimum requirements recommended by the profession for entry-level massage therapists. A basic understanding is expected unless otherwise specified in the language of the competency. These entry-level KSAs are what the profession perceives a new massage therapist would possess in order to enter into professional practice. It is presumed that these KSAs would be gained through education and training and demonstrated through examination in order to obtain license or certification for practice (dependent upon legal expectations of the jurisdiction in which they practice). Each jurisdiction determines its own specific requirements.

Educational institutions are not precluded from providing education and training that goes beyond entry-level knowledge, skills, and abilities. It is through such educational practices as well as research endeavors that our profession will continue to grow and advance. Through such advancement and growth the profession will continue to inform and refine these entry-level requirements.

Section 210.1 Overview of Massage Therapy and Bodywork History / Culture

Knowledge, skills, and abilities relating to origins and the development of the massage therapy and bodywork professions.

Knowledge: Understand origins and the developments of the massage therapy and bodywork professions.

Understand the history of massage therapy and bodywork.

- Global and local developments of massage therapy and its historical applications
- Integration of massage therapy into Eastern and Western medicine and culture
 - Countries and cultures that influenced the development of massage therapy and related practices
- Knowledge of founders of massage therapy methods

Understand the overview of influences involved in the development of massage therapy.

- Practice setting/environmental
- Cultural
- Social awareness and acceptance of massage therapy

- Manual therapy techniques by other allied health professions
- Relationships between these different groups
- Legal overlaps and potential areas of friction between professions

Skills

None applicable

Abilities

- Describe the historical, cultural, and social influences of massage therapy as it relates to today's practice.

Section 210.2 Anatomy and Physiology

Knowledge, skills and abilities relating to anatomic structures and their locations along with their functions, interactions, and relative medical terminology

Knowledge: Know and understand the anatomic structures and their locations along with their functions, interactions, and relative medical terminologies, and relate this information to the practice of massage therapy, indications, contraindications, cautions, and benefits.

Anatomic organization

- Levels of organization
 - Chemical / elements
 - Molecular
 - Cellular
 - Structures and their functions
 - Types
 - Cell division
 - Tissues
 - Structure, organization and location of types of tissues
 - Epithelial
 - Muscular
 - Nervous
 - Connective
 - Membranes, their descriptions and functions
 - Organs
 - Types
 - Structures and functions
 - Organ systems
 - Organism

Anatomic structures and their functions

- Body systems
 - Skeletal System
 - Muscular System
 - Cardiovascular System
 - Nervous System
 - Endocrine System
 - Lymphatic System
 - Respiratory System
 - Integumentary System
 - Digestive System
 - Urinary System
 - Reproductive System

Metabolic function

- Anabolism
- Catabolism

Homeostasis

- Homeostatic mechanisms
 - Negative feedback
 - Positive feedback
- Hormonal and neural homeostatic regulators

Body area identification

- Body cavities
- Body sections
- Body regions

Body positions and movements

- Anatomic position
- Relative positions
- Body planes
- Axes
- Types of joint movement
- Joint structures
 - Joint locations, anatomic name, structure and classification
 - Relationships between joint structures and types of movement allowed

Human development and special demographics

- Stages of development

- Understand how the body changes and develops during normal life stages in the following populations.

- Prenatal
- Infancy
- Child
- Adolescence
- Adult
- Elderly

Fascia

- Understand the anatomic structure of fascia.
- Describe how fascia covers and connects all the structures of the human body.
- Understand the interconnected holistic system of tensegrity and support for the body.
- Understand that the superficial fascia is a continuous plane of tissue covering the entire body subdermally.
- Differentiate the characteristics of healthy and injured fascia.
- Understand the inherent plasticity of fascia.

Skills

- Locate and palpate accessible massage relevant anatomic structures.
- Palpate tissue with the intention to sink slowly and sense multiple layers of tissue.
- Use techniques to sense and release restricted fascia.

Abilities

- Recognize and modify massage in endangerment sites and areas of caution.
- Classify joints by type and location.
- Discuss anatomic structures, their functions and interactions using current medical terminology.
- Demonstrate informed interactions about client/patient status with colleagues and other health care providers (maintaining appropriate confidentiality).
- Apply knowledge of anatomy and physiology to determine appropriate massage applications to obtain desired and intended physiologic outcomes.

Section 210.3 Kinesiology

Knowledge, skills, and abilities of movement as it relates to the anatomy and physiology of the human body.

Knowledge: Understand movement, relevant anatomic structures, and physiological concepts as well as terminology.

Body positions and movements

- anatomic position
- relative positions

- 553 • body planes
- 554 • axes
- 555 • levers
- 556 • types of joint movement
- 557 - single joint movements
- 558 - complex movements
- 559 **Body mechanics of the client/patient**
- 560 • Awareness of posture, use of body weight and movement and their effect on
- 561 determining massage therapy techniques and application
- 562 • Balance, equilibrium, and stability as they relate to movement and function
- 563 • Activities of Daily Living (ADL's) and their relation to the client's /patient's quantity
- 564 and quality of movement and tissue status/tension
- 565 **Joint structure and function in relation to kinesthetic theories**
- 566
- 567 **Motion-oriented physics theories and laws**
- 568 • Law of inertia
- 569 • Law of action reaction
- 570 **Terms of motion**
- 571 • Elasticity
- 572 • Flexibility
- 573 • Force
- 574 • Force of gravity
- 575 • Line of force
- 576 • Line of gravity
- 577 • Origin and insertion and proximal and distal attachments
- 578 **Components and characteristics of skeletal muscle tissue and the resulting effect**
- 579 **on posture and movement**
- 580 • Types of skeletal muscle contractions
- 581 • Locations, attachments, and actions of skeletal muscles
- 582 • Skeletal muscle size, shape, and fiber direction
- 583 • Stretch reflexes and responses
- 584 **Muscular interaction**
- 585 • Agonists/prime movers
- 586 • Antagonists
- 587 • Synergists
- 588 • Fixators/stabilizers

- 589 • Impact of
- 590 - Imbalance of length and strength between agonist/antagonist
- 591 - Weak fixators/stabilizers or synergists
- 592 **Range of motion (ROM)**
- 593 • Types of ROM-- active, passive, and resistive
- 594 • Purpose and effect on structures and their function
- 595 • Common joint classification
- 596 • Synovial joint movements
- 597 • Joint play and end feel
- 598 • End feel hard, firm, soft, vacant
- 599 • Joint range of movement and considerations of normal limits
- 600 • Approximation of attachments by way of movement at the joint or by manual
- 601 shortening of muscle
- 602 **Stretching**
- 603 • Effects on tissue structure and function
- 604 • Purpose and uses
- 605 • Active
- 606 • Passive
- 607 • Active assisted
- 608 • Active resisted
- 609 **Resistive range of motion**
- 610 • Isometric
- 611 • Isotonic
- 612 - Eccentric action
- 613 - Concentric action
- 614 • Reciprocal inhibition
- 615 • Post-isometric relaxation or contract relax
- 616 • Effects on tissue structure and function
- 617 • Purpose and uses
- 618 **Posture and movement**
- 619 • Healthy and pathologic
- 620 • Compensatory patterns
- 621 - Muscular adaptations
- 622 - Concept of symmetry
- 623 - Stability, instability, and fixations

Biomechanics

- Kinematic and kinetic principles as they relate to the practice of massage therapy to include assessment and treatment

Skills

- Palpate bony attachments, muscle bellies, tendons, and ligaments.
- Demonstrate primary actions, shorten, lengthen, and apply a stretch and isometric resistive for all major muscles of the body.
- Demonstrate appropriate mechanics to facilitate development of normal client / patient posture and movement in their activities of daily living (ADL's).
- Demonstrate use of ROM principles in properly mobilizing joints for purposes of assessment, treatment planning, and treatment.
- Demonstrate use of passive and resistive actions as assessment and treatment applications.

Abilities

- Evaluate general movement compensatory patterns and develop a treatment plan to address the findings.
- Evaluate posture, symmetry, and movement patterns on a client/patient and apply appropriate massage treatments.
- Demonstrate verbally directing a client/patient to actively shorten/lengthen all major muscles of the body to support assessment and treatment.

Section 210.4 Pathology

Knowledge, skills, and abilities related to the physiologic and psychological processes resulting from injury and/or illness as they relate to massage therapy.

Knowledge: Understand patho-physiological terms and processes resulting in/from injury and disease as they relate to massage therapy.

Understand mental health illnesses and common associated terms as they relate to massage therapy.

Common pathologies along with their etiology, signs/symptoms, complications, and treatment considerations as they relate to massage therapy

- Prevalent pathologies by body system
- Indications for massage therapy
- Local and absolute contraindications for massage therapy
- Cautions, adaptations, and limitations based on
 - Specifics of condition
 - Techniques/approaches
 - Therapist's knowledge, skills, and abilities

- Proper sanitary procedures-- their purpose and use
- Knowledge of how to access authoritative information on pathological conditions and general medical information

Common disabilities and their specific restricting characteristics and considerations in relation to massage therapy

Pharmacology

- General classification and types of drugs
- Common over-the-counter and prescription drugs by type, their effects, and their side effects
- General classification and types of herbs, their effects, and their side effects
- Methods of drug administration, massage therapy considerations, and their responses
- Use of authoritative, medically accepted drug reference to look up drugs, their effects, and their side effects

Chronic versus acute onset

- Definitions
- Massage therapy considerations and cautions

Dysfunctions caused by improper body mechanics, posture, and repetitive movements

Inflammatory processes

- Functions, effects on tissues/structures, effect of treatments, and contraindications and adaptive measures.
- Wound/tissue repair process
- Stages of healing – acute, sub-acute, and maturation stages
- Level of severity

Muscular pain patterns

- Trigger point and referred pain
- Fascial planes and their relation to trigger or tender point pain/tenderness and referred pain

Nociception and pain pathways, physiological processes, functions, effects on tissues/structures, client/patient response.

Standard precautions and sanitary practices for infection control and special methods for handling biohazards

First Aid and CPR – American Red Cross or equivalent

- Emergency action plan

Skills

- Conduct a client/patient health history and intake with an understanding of the implications of reported pathologies on a massage treatment.

Abilities

- Demonstrate how to adapt massage therapy to clients/patients based on pathologies/conditions, stage of healing, and level of severity present.
- Accommodate clients/patients who have disabilities resulting from diseases or injuries.
- Apply standard precautions and procedures of infection control for the individual, the equipment, and the practice environment.
- Demonstrate when to refer a client to his/her physician because of potential for contraindication.
- Demonstrate researching a pathological condition and determine appropriateness of massage therapy.
- Identify and appropriately respond to medical emergencies using applicable first aid and CPR as needed.
- Observe and identify signs of autonomic (sympathetic and parasympathetic) nervous system activation.

Section 210.5 Assessment, Treatment Planning, and Documentation

Knowledge, skills, and abilities relating to practices, procedures and relative terminology of assessment, treatment planning, and documentation

Knowledge: Understand basic aspects of assessment process, treatment planning, documentation, procedures, and relative terminology.

Understand the science, application, philosophy, and legal and ethical factors involved in client/patient assessment.

- Communication (verbal and nonverbal)
- Client/patient consultation, health history, and intake procedures/documents
- Subjective client/patient information
- Objective findings gained through observation and palpation
- Postural and functional evaluation
- Plan of treatment based on client/patient assessment, client/patient goals (long and short term)

Physical assessment

- Performance testing
- Functional biomechanical testing
- Palpation
- Visual and auditory assessment of tissue, skin, posture, and movement

Basic client/patient documentation components

- Informed consent
- Waiver of liability
- Medical release
- Health history and current condition/status
- Record of
 - client/patient name
 - session date
 - client/patient health concerns/considerations for treatment
 - assessments and findings, if applicable
 - treatment administered
 - treatment outcomes

Treatment plan

- Purpose of the plan
- Collection and interpretation of client information and assessment findings

Health Insurance Portability and Accountability Act (HIPAA) regulations that apply to massage therapy

- Client /patient confidentiality
- Storage, maintenance/security, transport, and release of client/patient personal health information (PHI)

Skills

- Demonstrate the ability to conduct a client/patient interview including a health history and client/patient consultation.
- Perform assessment procedures including visual, auditory, verbal, written, and physical evaluation/palpation.
- Perform basic posture and movement analysis.
- Use palpation to locate, assess, and treat tissues during pre-massage assessments and those used during the session.
- Demonstrate effective communication skills including writing, listening and speaking.

Abilities

- Read and interpret client/patient intake and health history form.
- Determine appropriate treatments based on client/patient health history, intake form, and client/patient consultations (initial and follow-up).
- Formulate a treatment plan based on finding from a health history, an intake interview, and an assessment process.
- Generate relevant charting documentation for each session, which meets legal requirements for health care and wellness practitioners.

- Prepare, maintain, safeguard client/patient records in accordance with federal, state, and municipal laws.
- Explain chosen techniques and relate the choice back to the physiological, psychological, and anatomical effectiveness of the technique.
- Describe how to refer client/patient to appropriate healthcare provider when client's/patient's needs exceed the skills and abilities of the therapist or are outside the massage therapy scope of practice.
- Explain a treatment plan, intended outcomes, and potential adverse outcomes to the client/patient, and gain informed consent to include framework for how to modify the plan based upon feedback, prior to administering massage therapy.
- Modify a treatment plan during subsequent sessions based on changes in the client's/patient's health or desired outcomes.

Section 210.6 Research and Information Literacy

Section Preface

Research heightens every aspect of massage therapy. Massage therapists informed by the world of scientific research support the efficacy of the field. Evidence-based practice supported by research facilitates therapeutic outcomes and professional dialogue. Each of the sections within the Massage Therapy Body of Knowledge is informed by research.

Knowledge: Understand the necessity and process of scientific investigation, its importance to the massage therapy profession, literature review skills, information literacy, and relevant terminology.

- The professional necessity, importance, and further development of the research body of literature regarding massage therapy
- The scientific process relating to evidence-based knowledge/medicine and massage therapy practice
- The importance of the peer-review process and critical appraisal of published research
- Digital literacy skills including the effective use of search engines, on-line databases, determination of information quality (i.e. accuracy of web-based information)
- Key components of research methodologies
 - Scientific method (observation, hypothesis, experiment, conclusions)
 - Types of research studies and their importance
 - Qualitative and quantitative methods
 - The key parts of a scientific paper (Abstract, Introduction, Methods, Results, Discussion, and Conclusion)
- Key terms relating to research
- Impact of bias on research

- Method of formulating a basic research question and creating a rigorous case study
- Differentiation between a case study and a case history
- Identification of personal methods used to keep up to date on new research developments

Skills

- Demonstrate the ability to find and use scientific databases.
- Search the literature on a specific topic, and obtain a complete copy of relevant and reliable article.

Abilities

- Develop an inquiring mind and question current massage therapy practice.
- Discuss the reliability of literature sources.
- Read and assess current massage therapy and related literature for its strengths and weaknesses.
- Communicate current research knowledge to clients, colleagues, and the public.
- Explain ways to support, collaborate, and participate in massage therapy and/or related research.

Section 210.7 Business Practices, Laws, and Regulations

Knowledge, skills, and abilities relating to business practices, legal requirements, and professionalism as related to massage therapy.

Knowledge: Understand business practices, legal requirements, and professionalism.

Municipal, state, and national laws and regulations

- Importance of regulation on massage practice, massage quality, professional reputation, and growth of the profession
- Applicable state and local licenses, certification and registration laws, and certification as a profession status
 - Understand the difference between and expectations of legal vs. profession status.
 - Stay current with changes in laws and rules.
 - Maintain fiduciary responsibility as a licensed/regulated profession.
 - Understand legal differences and similarities between states.
 - Identify differences among licensing, certification, and registration.
 - Identify differences among types of certification (e.g. legal, professional, and educational).

Business practices

- Employment overview
 - Types of business entities, venues, and legal requirements
 - Responsibilities associated with being the employee and employer

- 845 - Key components of contracts for sole proprietors vs. employment agreements for
- 846 employees and related legal differences between them
- 847 • Marketing
- 848 - Basic marketing principles, advertising, networking, and their application to
- 849 massage therapy.
- 850 - Common marketing tools – resume, cards, flyers, brochures.
- 851 - Ethical marketing considerations to reflect therapist's training, licensing, certification
- 852 accurately.
- 853 • Insurance for therapist and practice
- 854 - Liability and malpractice
- 855 - General or premise liability
- 856 • Insurance billing basics
- 857 - Recognize CMS1500 – Universal billing form.
- 858 - Understand terms and conditions.
- 859 - Understand requirements for becoming a provider and contract considerations with
- 860 being a preferred provider.
- 861 - Define, recognize, and avoid medical fraud.
- 862 • Finances
- 863 - Basic financial requirements and responsibilities for a therapist as an employee, as
- 864 a sole proprietor engaged in independent contracting, or as a business owner
- 865 /employer
- 866 - National, state, and local tax requirements
- 867 - Fiscal accountability and integrity
- 868 • Administration
- 869 - Responsibilities and requirements of running a massage practice
- 870 - Recordkeeping-- securing and maintaining
- 871 o Client/patient records
- 872 o Practice records (i.e. schedules/appointment book)
- 873 o Financial records
- 874 o Business license
- 875 **Scope of practice**
- 876 • Massage therapy regulations at the local, state, and national level and how these
- 877 affect a massage practice
- 878 • Awareness and avoidance of violation of state, national, or local laws regarding the
- 879 practice of massage therapy
- 880 **Professional organizations**
- 881 • Understand the importance of professional organizations.
- 882 • Understand the impact on the local, state, and national levels.

Professionalism in business

- Awareness of business etiquette in verbal, non-verbal, written, and electronic communications
- Legal terminology as related to licensure and certification
- Types of business communications
- Benefits of networking among peers and between professions
- Referrals – practices, legalities, and ethics – risks and responsibilities
 - Basic knowledge of scope of practice of other health care professions
- Continuing Education
 - Applicable legal and professional responsibilities and requirements
 - o Ethics relating to marketing and level of training received through CE's

Americans with Disabilities Act (ADA)

- Compliance expectations
- Reasonable accommodations

Skills

- Write a resume and basic business letter.
- Write a basic business plan and mission statement.

Abilities

- Develop practice policies that reflect boundaries and expectations.
- Be aware of changes to and abide by laws and standards that govern the profession.
- Uphold professional standards of practice and standards of care.
- Demonstrate ethical and professional behavior and presentation consistent with standards in the massage therapy field.
- Behave in a trustworthy and responsible manner, and be honest in all professional settings.
- Demonstrate and explain basic marketing techniques and methods.
- Read and interpret a contract or proposal, or solicit the services of someone who can.
- Build a support network, and develop a contact list for referrals.
- Maintain basic financial records.
- Follow acceptable accounting, bookkeeping, and monetary practices.
- Demonstrate compliance with current personal and/or business tax laws.
- Seek consultation/counseling/mentorship to deal with issues (business, personal, or therapeutic) that arise during practice.
- Discuss, during the initial meeting, therapist and client/patient boundaries and responsibilities in the business/therapeutic relationship.
- Continue education, and expand knowledge of new and developing information and techniques that benefit clients/patients, practice, and self.

Section 210.8 Boundaries, Ethics, and the Therapeutic Relationship

Preface

The quality of the therapeutic relationship is based on ethical behavior, clear boundaries, and the therapist's capacity to pay attention to his or her own body and mind. According to research, this quality impacts the central nervous system of the client. Consequently, this section begins with a research-based understanding of therapeutic relationships from the field of affective neuroscience. Research in this field has highlighted the need for massage therapists to integrate information on the neurobiology of interpersonal relationships at a clinical level. This research includes much more clarity on the neurobiology of empathy and loving kindness. To facilitate that understanding, some additional detail has been added, both in this section and in the terminology section. This is a new paradigm evolving from the research literature on interpersonal relationships that affect every helping profession.

Knowledge, skills, and abilities relating to professional boundaries and ethics in relation to the development and maintenance of therapeutic relationships.

Knowledge

Therapeutic relationship

- Description and components
- Therapist/client/patient interaction and communications
 - Differentiate between emotional and psychological processing (outside scope of practice for massage therapists) and handling emotions (in scope of practice).
 - Understand that clear communication in the therapeutic relationship is important to successful health outcomes.
- Client/patient disclosure and confidentiality
- Understand impact of therapist self disclosure on therapeutic relationship
- Personal and professional boundaries
- Professional boundary between massage therapy and psychotherapy
- Trauma and shock
 - Understand that client/patients may hold stress, trauma and shock in their bodies, and these can be sensed by the therapist.
- Dual relationships
- Transference/countertransference
- Psychological defense mechanisms
- Empathy
 - Understand that empathy is generated in the brain and heart by mirror neurons in order for the therapist to feel what the client/patient is feeling.

- 956 - Understand that the therapist's empathy develops the felt sense of being nurtured
957 and loved for the client/patient.
- 958 • [Compassion](#)
- 959 - Body language
 - 960 - Understand that body language, postures, and body shapes, forms and tissue
961 patterns may be expressions of psychological history coupled with chronic stress,
962 trauma, and experiences of shock in the past. Tissue work may or may not impact
963 these expressions.
 - 964 - Understand that when soft tissue does not respond to massage, the tension may
965 be psychological or emotional in nature. Attempting to force this tissue to change
966 may re-traumatize the client/patient
- 967 • Therapeutic environment
- 968 • Self regulation
 - 969 - Understand that self regulation is modulated by two pathways. One pathway is
970 from the body and heart to the brain via sensation and feeling (bottom up). The
971 second pathway is from the brain to the body via cognitive thinking (top down).
 - 972 - Massage therapy primarily affects the first pathway, from the bottom up.
 - 973 - Understand that the quality of attention is based on self-regulation utilizing three
974 simultaneous neurological pathways: [attunement](#), [intersubjectivity](#) and [social
975 neuroscience](#).
- 976 • [Attunement](#)
 - 977 - Understand that a therapeutic relationship based on safety and trust includes the
978 process of *attunement*.
- 979 • [Intersubjectivity](#)
 - 980 - Understand that the client/patient and the therapist co-regulate each other's
981 nervous systems and cardiovascular systems through resonance, which builds
982 emotional coherence.
 - 983 - Understand that each person in the therapeutic relationship is affecting the other's
984 nervous and cardiovascular systems equally.
 - 985 - Understand that intersubjectivity is the nervous systems of the client/patient and
986 therapist seeking to remain oriented to present time rather than the past.
- 987 • [Social Neuroscience](#)
 - 988 - Understand neurological self-regulation of the mind-body has two components:
 - 989 ○ Internal self-regulation through [interoceptive](#) (self) awareness of the body from
990 the inside
 - 991 ○ Socially, in relationships through [exteroceptive](#) processing with the special
992 senses of seeing, hearing, etc.
 - 993 - Know that the therapist is responsible for building and maintaining a therapeutic
994 relationship in which normal self regulation can manifest.

- [Loving-kindness](#)

- Nurturing touch stimulates the release of the hormone oxytocin and deepens the empathetic response in both the therapist and the client/patient.

Ethics

- Code of ethics
- Harassment, prejudice, and discrimination in the workplace
 - Ethical and legal considerations and ramifications
- Ethical challenges relating to personal beliefs and biases

Sexual misconduct

- Definition
- Misconduct by the client/patient or the therapist
- Recognition and appropriate responses
- Ethical and legal ramifications
- Preventive measures – behavior, communications, policies, boundaries, and presentation
- Ethical challenges relating to misconduct of peers

The mind, body, and spirit connection

- [Healing processes](#)
- [Therapeutic processes](#)
 - Understand that emotions may surface for a client/patient during a massage, that this is normal, and that emotions are not harmful.

Skills

Therapeutic relationship

- Therapist/client/patient interaction and communication
 - Demonstrate active listening and reflection.
 - Actively acknowledge the client/patient as he/she speaks using soft eye contact, head nodding, sounds of recognition, and/or words of recognition.
 - Acknowledge emotions when they arise.
 - Provide support for a client/patient experiencing an emotional release during a massage therapy session.
- Personal and professional boundaries
 - Demonstrate maintenance of boundaries while applying massage therapy.
 - Demonstrate supporting client/patient while experiencing and/or expressing thoughts and feelings.
 - Terminate, in a professional manner, a session when a client/patient violates and is unwilling to respect a therapist's professional boundaries.

- 1032 • Body language
- 1033 - Notice when soft tissue does not respond to massage.
- 1034 - Move on to another area of the client's/patient's body if one area is unresponsive.
- 1035 • Self regulation
- 1036 - Maintain a steady pace during the massage that can be integrated by the
- 1037 client/patient.
- 1038 - Be able to refer to mental health professional when appropriate.
- 1039 • [Attunement](#)
- 1040 - Use conscious breathing to center attention in the therapist's body.
- 1041 - When using deep or vigorous techniques, pause periodically and observe the
- 1042 client's/patient's breathing.
- 1043 • [Intersubjectivity](#)
- 1044 - Regularly scan the whole body of the client/patient while in contact.
- 1045 - Observe signs of the client's/patient's autonomic nervous system seeking
- 1046 homeostasis, such as skin color tone, breathing, shaking or trembling, eyes glazing,
- 1047 etc.
- 1048 - Modulate input to the client/patient slowly while the autonomic nervous system is
- 1049 active.
- 1050 - Understand that feel awkward or making an occasional mistake during a session
- 1051 can be a normal aspect of the therapeutic relationship.
- 1052 • [Loving-kindness](#)
- 1053 - Periodically allow the hands to pause while in contact, especially at the beginning
- 1054 and end of a session, to encourage oxytocin release.
- 1055 **Ethics**
- 1056 • Communicate with a fellow therapist about alleged or perceived unethical or illegal
- 1057 behavior(s).
- 1058 • Follow proper reporting processes relating to unethical or illegal behavior of other
- 1059 therapists and other health care professionals.
- 1060 **Sexual misconduct**
- 1061 • Demonstrate awareness of how therapist's body might touch client/patient, and avoid
- 1062 incidental and/or inappropriate body contact.
- 1063 • Do not sexualize communications, or initiate or engage in sexualized or sexual
- 1064 contact with clients/patients regardless of who initiates.
- 1065 • Communicate boundaries in appropriate professional manner without blaming or
- 1066 shaming the client/patient.

Abilities

Therapeutic relationship

- Therapist/client/patient interaction and communications
 - Therapist periodically attends to own sensations while in contact with the client/patient, acknowledging and addressing them as appropriate.
 - Therapist is curious, if something in the client's/patient's story seems to be missing.
 - Therapist provides non-judgmental support.
 - Therapist avoids eliciting more psychological or emotional information.
 - Therapist avoids interpreting or giving advice.
 - Therapist conveys a sense of dignity and respect, in both actions and words, towards clients/patients, colleagues, and the profession.
 - Therapist demonstrates consistent patience in dealing with others.
 - Therapist demonstrates appropriate communications during a session by remaining focused on client's/patient's intentions, rather than unfocused conversation.
- Client disclosure and confidentiality
 - Safeguard the client's/patient's confidentiality unless information is released by client/patient or compelled by law.
- Personal and professional boundaries
 - Respect boundaries of client/patient.
 - Respect professional boundaries of other health care providers involved in the client's/patient's care.
 - Establish, communicate, and maintain healthy professional boundaries.
- Boundary between massage therapy and psychotherapy
 - Be willing to not know the source or cause of a client's/patient's pain and suffering.
 - Be thoroughly familiar and operate with a rigorous code of ethics.
- Dual relationships
 - Avoid situations that create conflicts of interest and dual relationships.
- Psychological defense mechanisms
 - Recognize client's/patient's psychological defense mechanisms, and when necessary, take appropriate steps to reduce adverse impact on the therapeutic relationship.
- Empathy
 - Therapist periodically notices own sensations and feelings related to empathy and compassion.
- Therapeutic environment
 - Establish and maintain an environment of emotional safety and trust for the client/patient.

- 1106 • Self regulation
 - 1107 - Regularly sense both the therapist and the client/patient body systemically as one
 - 1108 whole continuum of fluid, bone, and membrane.
 - 1109 - Acknowledge (nonverbally) any personal feelings, such as fear and anxiety, during
 - 1110 a massage, and hold them as normal.
 - 1111 - Visualize the client/patient as one interconnected whole being during the massage.
 - 1112 - Maintain conscious awareness of the location of mental and physical attention
 - 1113 while in relationship with the client/patient.
 - 1114 - Scan own body periodically in order to sense areas of tension and holding during a
 - 1115 session, and release when appropriate.
 - 1116 - Avoid judgment, withdrawal, or psychological intervention when emotions surface
 - 1117 for a client/patient.
 - 1118 - Stay present with client/patient, grounded and centered in self, when emotions
 - 1119 surface for client/patient.
 - 1120 - Seek supervision if thoughts, feelings, and emotions that come up for client/patient
 - 1121 trigger personal history or a personal emotional process.
- 1122 • Attunement
 - 1123 - Stay mentally and emotionally present with the client/patient while working.
 - 1124 - Be aware of how attention moves periodically between the body-mind of the
 - 1125 therapist and that of the client/patient.
 - 1126 - The therapist should be aware when attention is separated from self or
 - 1127 client/patient for prolonged periods, and regularly settle attention back into the
 - 1128 therapist body.
 - 1129 - Be aware of impact of emotions on your ability to maintain a therapeutic
 - 1130 relationship and perform massage therapy.
 - 1131 - Notice the speed or tempo of own sensations, thoughts, and feelings, slowing them
 - 1132 down in order to achieve attunement.
 - 1133 - Demonstrate unobtrusive intermittent eye contact in the attunement process.
 - 1134 - Regulate the tempo of the massage to build resonance and sustain it over time.
- 1135 • [Intersubjectivity](#)
 - 1136 - Therapist periodically focuses attention on his/her heart, respiration rate, and
 - 1137 visceral sensations as a part of [interoceptive awareness](#).
 - 1138 - Therapist becomes aware of, acknowledges, and releases when appropriate own
 - 1139 mundane thoughts of the past or future while in contact with client/patient.
- 1140 • Loving kindness
 - 1141 - Periodically practice thoughts and feelings of loving kindness while in contact with
 - 1142 the client/patient.

1143 **Ethics**

- 1144 • Demonstrate ethical behaviors with clients/patients, peers, and other professions.
- 1145 • Operate under a professionally recognized code of ethics.

- Practice with competence and within the individual knowledge, skills, and abilities and the legal limits of the massage therapy profession.
- Refrain from using substances that would interfere with the ability to provide safe and effective massage therapy and to make ethical decisions.
- Avoid circumstances and situations where the ability to make ethical decisions is impaired or made difficult.
- Do not discriminate against a client's/patient's race, color, religion, gender, sexual orientation, national origin, age, disability, handicap, health status, physical appearance (including size, shape, and body art), marital status, or veteran's status.
- Represent credentials and training honestly.

Section 210.9 Body Mechanics and Self Care

Knowledge, skills, and abilities relating to body mechanics for self care and application of techniques

Knowledge: Understand the body mechanics for self care and application of techniques.

Body mechanics of the therapist to optimize application while minimizing adverse effects and supporting longevity in the field

- Posture, balance, and positioning
- Structural alignment of bones and joints
- Use of body weight and leverage
- Application of various forms of force
- Foot positions and stances
- Understanding of the relationship among effective body mechanics, massage therapy applications, and injury prevention
- Injury prevention strategies

Table and chair mechanics

- Table/chair height adjustment based on size and shape of client/patient, type of massage applications to be administered, intended outcomes of massage therapy, and injury prevention for therapist
- Mechanics involved in the use of floor mats and other massage therapy tools

Self Care

- Benefits and impact of self care in personal and professional arena
- Regular physical activity
- Proper nutrition
- Adequate rest
- Structured breathing practices

- 1182 • Stress management
- 1183 • Self - awareness of muscle tension, pain and fatigue, and state of mind
- 1184 • Self-massage techniques
- 1185 • Self-administered hot and cold hydrotherapy and related therapeutic modalities
- 1186 • Boundary practices (physical, mental, emotional, spiritual, energetic, etc.)
- 1187 • Prevention of self-inflicted injuries resulting from improper body mechanics

1188 **Burnout**

- 1189 • Recognize, prevent, and manage professional burnout.
- 1190 • Practice skills advancement and diversification through continuing education to
- 1191 manage burnout.

1192 **Compliance with Operational Safety and Health Administration (OSHA)**

- 1193 • Basic applicable OSHA expectations relevant to the profession

1194 **Skills**

- 1195 • Demonstrate the proper body mechanics during massage therapy application.
- 1196 • Demonstrate proper body mechanics during application of therapeutic techniques.
- 1197 • Correctly set up and adjust a massage table, chair, and other massage-related
- 1198 equipment, to support effective body mechanics.
- 1199 • Demonstrate proper client/patient draping techniques.
- 1200 • Demonstrate correct client/patient positioning based on specific client/patient and
- 1201 therapist health and safety needs.

1202 **Abilities**

- 1203 • Use proper body mechanics for injury prevention of the massage therapist and the
- 1204 client/patient.
- 1205 • Identify and adopt self-care practices which support personal and professional goals,
- 1206 prevent injury and burnout, and enhance longevity in the field.

1207 **Section 210.10 Massage Techniques and Physiological and**

1208 **Psychological Effects**

1209 Knowledge, skills, and abilities relating to massage applications and the resulting
1210 physiologic and psychological effects

1211 **Knowledge:** Understand massage applications and the resulting physiologic and
1212 psychological effects.

1213 **Massage therapy applications**

- 1214 • Types of soft tissue massage techniques and their functions/purposes
- 1215 • Application of soft tissue massage techniques within the theoretical context of the
- 1216 application(s) being taught

1217 **Physiological response**

- 1218 • Anatomic structures
- 1219 • Physiological and biochemical processes
- 1220 • Psychological processes
- 1221 • Energy systems
- 1222 • Physiological and pathological processes of trauma, wound healing, and tissue repair
- 1223 and their implications for the selection and application of a massage treatment
- 1224 • Contemporary pain-control theories as they relate to the application of massage
- 1225 therapy

1226 **Client/patient positioning and draping**

- 1227 • Positioning – supine, prone, side-lying, semi-reclining, and seated
- 1228 • Use of supportive devices, including bolsters, wedges, and rolls in relation to
- 1229 client/patient position, comfort, and support
- 1230 • Draping variations which maintain client/patient modesty, warmth, and comfort while
- 1231 allowing appropriate access for massage therapy applications

1232 **Assessment**

- 1233 • Process/methods of assessing and reassessing the status of the client/patient, using
- 1234 standard assessment techniques to determine appropriate massage treatment

1235 **Indications and benefits/cautions**

- 1236 • Specific applications of massage techniques and their potential benefits, desired
- 1237 outcomes, and specific precautions
- 1238 • Sequence of stroke application based on theoretical understanding, current tissue
- 1239 condition, and intended outcomes
- 1240 • Pressure and depth
- 1241 • Rhythm and pacing
- 1242 • Direction
- 1243 • Duration
- 1244 • Flow, drag, and continuity
- 1245 • Use of equipment, tools, and appliances
- 1246 • Positioning for ease of applications to facilitate achievement of intended outcomes

1247 **Psychophysiology**

- 1248 • Chronic stress and trauma and their effects on all body systems

1249 **Energetic theory**

- 1250 • Describe basic energetic theory from a common theoretical framework, such as
- 1251 - Eastern Frameworks
 - 1252 ○ Chakras
 - 1253 ○ Body Currents

- 1254 ○ Meridians
- 1255 ○ Acupoints
- 1256 - Western/Hybrid Frameworks
- 1257 ○ Aura fields
- 1258 ○ Poles and zones
- 1259 ○ Sound, vibration, and color as energy expressions

1260 **Documentation**

- 1261 • Appropriate health care and wellness documentation for recording each session,
- 1262 meeting minimum legal expectations.

1263 **Skills**

- 1264 • Demonstrate use of multiple massage techniques, and describe their proper use and
- 1265 contraindications.
- 1266 • Demonstrate application of massage techniques using appropriate body structures
- 1267 with effective body mechanics, being self aware and client focused.
- 1268 • Demonstrate ability to palpate, using massage techniques, various body structures to
- 1269 include muscles, tendons, ligaments, fascia, bones, lymph nodes, vessels, scar
- 1270 tissue, adhesions, etc.
- 1271 • Demonstrate varying rhythms/pace, depth, stroke sequence, and flow/continuity for
- 1272 specific applications and intended outcomes.
- 1273 • Demonstrate the use of massage tools/equipment as applicable. Explain any
- 1274 contraindications or indications for their use.
- 1275 • Demonstrate the use of verbal and non-verbal communication to gain client/patient
- 1276 feedback and explain its importance and the therapist's appropriate response.
- 1277 • Adjust the tempo, pace, rhythm, pressure, depth, direction, and duration of the
- 1278 massage strokes and techniques to be appropriate to the desired response and
- 1279 current tissue condition in conjunction with client/patient requirements and feedback.
- 1280 • Position and drape the client/patient for the application of massage therapy.
- 1281 • Communicate and obtain informed consent prior to administering massage therapy.

1282 **Abilities**

- 1283 • Regularly observe the client's/patient's whole body for autonomic activation while
- 1284 working, and adjust appropriately when overstimulation occurs.
- 1285 • Acknowledge the client/patient as he/she speaks without directing, leading, or
- 1286 counseling.
- 1287 • Avoid disruptive personal disclosure during application of massage therapy.
- 1288 • Demonstrate active and reflective listening with minimal disruption to the flow of
- 1289 application and client's/patient's experience of the massage.
- 1290 • Ask open-ended and/or explorative questions when necessary to gain relevant
- 1291 information to ensure appropriate application of massage.

- Avoid sharing personal interpretations of perceived underlying psychological issues with the client/patient, and avoid personal interactions or disruptions to the client's/patient's experience.
- Perform an assessment procedure, and interpret the findings as they relate to the selection and application of massage techniques to address treatment goals.
- Interpret the results of an assessment, and determine an appropriate massage treatment to address goals.
- Select and apply appropriate massage techniques according to evidence-based guidelines when they are available.
- Apply techniques based on treatment plan as determined from evaluation of the assessment findings of the client/patient or as directed by referring provider(s).
- Describe appropriate methods of assessing progress over time, interpret the results, and project outcomes.
- Document subjective and objective findings, treatment goals, treatment, and treatment outcomes in accordance with minimum legal expectations for health care and wellness professionals.
- Synthesize information obtained in a client/patient interview and assessment to determine the indications, contraindications, and precautions for the evidence-based application of massage therapy as is appropriate for common pathologies and musculoskeletal issues and conditions, their location, onset, severity, and stage of healing.
- Formulate a progressive treatment addressing long- and short-term goals (when applicable), and appropriately apply the massage to obtain intended outcomes.
- Identify personal perception of energy.

Section 210.11 Therapeutic Modalities

Knowledge, skills, and abilities relating to the physiological response to the application of therapeutic modalities, proper application, indications and contraindications, and safety considerations

Knowledge: Understand the physiological response to the application of therapeutic modalities, proper application, indications and contraindications, and safety considerations.

Physiological response

- Physiological and pathological processes of trauma, wound healing, and tissue repair and their implications for the selection and application of therapeutic modalities as used in conjunction with a massage treatment
- Contemporary pain-control theories as they relate to the application of a therapeutic modality

- 1329 • Body's physiological responses during and following the application of therapeutic
1330 modalities

1331 **Assessment**

- 1332 • Process/methods of assessing and reassessing the status of the client/patient using
1333 standard techniques and documentation strategies to determine appropriate modality
1334 treatment

1335 **Application and documentation**

- 1336 • Appropriate medical documentation for recording progress for use with therapeutic
1337 modalities
- 1338 • Manufacturers', institutional, state, and federal standards for the operation and safe
1339 application of therapeutic modalities and related supplies and equipment
- 1340 • Indications, contraindications, and precautions applicable to the use of therapeutic
1341 modalities
- 1342 • Identification of commonly used essential oils and their purpose in the massage
1343 session
- 1344 • Understanding of the importance of a carrier product during the use of essential oils

1345 **Skills**

- 1346 • Apply heat and cold safely and appropriately. Inspect the equipment and supplies
1347 used when applying therapeutic modalities, and inspect treatment environment to
1348 ensure compliance with hygienic practices for standard precautions and for potential
1349 safety hazards.
- 1350 • Select and apply appropriate therapeutic modalities according to evidence-based
1351 guidelines.
- 1352 • Position and prepare the client/patient for the application of therapeutic modalities.
- 1353 • Document treatment goals, expectations, and treatment outcomes.
- 1354 • Communicate with the client/patient to establish informed consent, eliciting and
1355 conveying information about the client's/patient's status and the recommended
1356 modality/modalities and potential outcomes (including potential adverse reactions).

1357 **Abilities**

- 1358 • Describe and interpret appropriate measurement and assessment procedures as
1359 they relate to the selection and application of therapeutic modalities.
- 1360 • Interpret the results of assessment, and determine an appropriate therapeutic
1361 modality program for achievement of the treatment goals.
- 1362 • Determine the appropriate therapeutic modality application, progressive plan, and
1363 appropriate therapeutic goals and objectives based on the initial assessment and
1364 regular reassessments.
- 1365 • Describe appropriate methods of assessing progress when using therapeutic
1366 modalities, and interpret the results.

- 1367 • Obtain and interpret baseline and post-treatment objective physical measurements to
1368 evaluate and interpret results.
- 1369 • Synthesize information obtained in a client/patient interview and assessment to
1370 determine the indications, contraindications, and precautions for the selection,
1371 client/patient set-up, and evidence-based application of therapeutic modalities for
1372 injuries in the acute, sub-acute, and maturation stages of healing.
- 1373 • Formulate a progressive treatment plan, and appropriately apply the modalities.
- 1374 • Document subjective and objective findings, treatment goals, treatment, and
1375 treatment outcomes in accordance with minimum legal expectations for health care
1376 and wellness professionals.
- 1377 • Demonstrate the ability to use essential oils safely within a massage practice.
1378

Section 300

Terminology

Assessment – An appraisal or evaluation of a client's/patient's condition, based on health and medical history, client's/patient's account of symptoms, and functional data gathered by means of observation, palpation, range of motion, movement, and special tests as applicable, and relating to determining a person's ability to perform everyday tasks and activities of daily living.

Attention - The direction of awareness to any object, sense, or thought for the sake of gaining clarity. Such awareness may precede or occur simultaneously with the motor activity of a massage. Attention as a neurological function has two phases.

- **Focused:** the capacity to observe and be aware of how and where the hands and body of the therapist are located while giving a massage.
- **Unfocused:** the capacity to observe and be aware of the surrounding environment during a massage, such as the treatment room, outer office space, and weather outside the windows, etc. Sometimes called **exteroceptive awareness**.

The nervous system naturally focuses and un-focuses attention in a rhythmic pattern within a range of possible tempos. See [Attunement](#).

Attunement – The process by which the phases of attention among two or more people and the environment come into harmony through resonance or cohesion (union) of their interpersonal brain activity, especially from physical touch. This includes the capacity of a massage therapist to move attention consciously among his/her body-mind, the body-mind of the client, and the environment. This usually occurs at a slow tempo in order to stabilize the autonomic nervous system. Attention naturally focuses and unfocuses rhythmically during a massage. Attunement is the foundation for establishing safety and trust in a therapeutic relationship. See [Attention](#).

Body Language – The way in which posture, hand gestures, eye contact, facial expressions, vocal tones, and body movements non-verbally convey feelings and emotions between two people, especially the client/patient and therapist. Body language is also a nervous system activity oriented to present time rather than neuromuscular patterns retained from past experience. In addition, the body mechanics of a massage therapist, which is a form of body language, may convey information to the client/patient such as comfort and ease or their opposite. See [Intersubjectivity](#).

Body, Mind, and Spirit - A fundamental principle of massage therapy is the functional unity of mind, body, and spirit. Mind, in this sense, refers to thoughts, feelings, emotions and self-awareness. Body refers to the structure and function of the eleven systems of

the body. Spirit refers to the research on health and spirituality relating to improved health outcomes from such practices as prayer, church attendance, meditation, mindfulness practice, and/or connecting with nature.

Body Psychotherapy - also called Somatic Psychology. Body Psychotherapy is a branch of psychotherapy based upon theoretical research. It involves a theory of mind-body functioning that takes into account the complexity of interactions between the body and the mind. The basic underlying assumption is that a functional unity exists between the mind and the body. In other words there is no separation of mind and body. Body Psychotherapy involves a developmental model, a theory of personality, and hypotheses about the origins of psychological disturbances. It employs a rich variety of diagnostic and therapeutic techniques, such as movement, touch, and breathing. Many different and sometimes quite separate approaches are found within Body Psychotherapy.

Bodywork – Bodywork is a term used in complementary and integrative medicine (CIM) to describe any therapeutic, healing, or personal self-development work which involves some form of physical touching, energetic work, or physical manipulation of the body. There are many forms of bodywork that are practiced in the United States. Often bodywork is combined with other methods for personal development, such as body-psychotherapy and somatic psychology.

One form of bodywork is massage therapy, and the terms *massage therapy* and *bodywork* are frequently used interchangeably. However, while bodywork includes all forms of massage therapy, it also includes many other types of touch and incorporates many other skills and techniques to enhance awareness of the mind-body-spirit connection.

Complementary and Integrative Medicine (CIM) Practices – Formerly CAM (complementary and alternative medicine) practices. A term used by the National Institute of Health (NIH) to begin forming a bridge between allopathic and natural healing methods through research and dialogue. Massage therapy, in general, is also defined as a CIM practice.

Client – A patient of a health care professional ([Thomas, 1997](#)) or a patient of a wellness professional. See [Patient](#).

Clinical Massage – Massage therapy practice involving more extensive use of assessment, specific focused techniques, and applications with the intention of achieving clinical treatment outcomes, also referred to as treatment massage or medical massage.

Compassion - The heartfelt intention to see the pain and suffering in the client/patient removed or eliminated. It is present from birth as part of human nature and can be damaged from early experiences of relational shock and trauma. Research on the hormone oxytocin has confirmed this altruistic intent in our behavior. See [Loving Kindness](#).

Counseling – Professional guidance in resolving personal conflicts and emotional problems ([Webster's](#), 1996). Nutritional counseling involves guidance and recommendations for diet and nutritional intake to resolve health issues.

Deep Tissue – Tissues below surface or superficial tissues. This term is commonly misused to describe a general category of techniques which address specific structures. The task force purposes a more accurate use of language in relation to the intention of “deep tissue work” to better describe the level of tissues being treated and to be more descriptive of the techniques applied, regardless of the force/pressure being exerted or level of discomfort/pain experienced during and/or resulting from the application.

Diagnosis –

- **Western Medical** – Term denoting the disease or syndrome a person has or is believed to have. This is determined through use of skillful methods to establish the cause and nature of a person’s illness and involves assessment AND laboratory data, and special medical tests, such as radiography, CAT and MRI scan, etc. Performed by a primary care provider.
- **Eastern Medical** – Term denoting the disharmony and imbalance a person has, resulting in a disease or a syndrome a person has or is believed to have. This is determined through the application of Traditional Chinese Medical (TCM) principles for assessing, diagnosing, and evaluating the body’s energetic system and involves the use of skillful methods to establish the cause and nature of a person’s illness in TCM terms, using methods of assessment and evaluation that include the Four Pillars of Examination: observation (including tongue diagnosis), listening, asking, and touching (including pulse and hara diagnosis). Assessments are based primarily on TCM parameters relating to the balance and circulation of the Five Essential Substances of the body: Qi (energy of the channel system), Jing (vital essence), Shen (consciousness), Xue (blood), and Jin-ye (fluids).

Discipline – A subject or field of activity or branch of instruction or training, a set of rules or regulations, relating to behavior in accordance with a code of conduct.

Empathy –The ability to feel what another person is feeling. This capacity is a function of what are called mirror neurons recently discovered in the brain and heart that allow one to recognize and/or feel another person’s emotional state. Developmentally, this

process has its foundation in the sustained skin contact between a mother and her infant in the first two years after birth. Such contact also involves prolonged periods of eye gazing that together build a library of emotional knowledge about the other person's emotional state. The result is called empathy. Thus empathy is present from birth through the life span. The mirror neuron part of the brain can easily be damaged from early relational trauma. Research implies that some forms of massage therapy may have the potential to restore this neurological function.

Energy - In western physics, energy is a physical quantity that describes the amount of work that can be performed by a force. Different forms of energy include kinetic, latent, potential, radiant, thermal, gravitational, sound, light, photonic, elastic, and electromagnetic energy.

In biology, energy is an attribute of all biological systems from the biosphere to the smallest living organism. Within the body it is responsible for growth and development of a cell. Thus energy, from a western science point of view, is often said to be stored by cells as carbohydrates (including sugars) and lipids, which release energy when they react with oxygen. In the human body, for a given amount of energy expenditure, the relative quantity of energy needed for human metabolism is called the basal metabolic rate.

In eastern medical systems such as Ayurveda (India), Tibetan Medicine, and Traditional Chinese Medicine (TCM), energy is associated with the movement and activity of what is called "life force," "prana" (India), "Qi" (China), "ki" (Japan) in the body. The life force is a subtle energy that has the quality of being a force that creates, maintains, and restores the human body. It is organized into meridians or elemental orientation in TCM and focal points called Chakras in Ayurveda and Tibetan Medicine. Systems of manual therapy have derived from these Eastern medical systems that work with the subtle energy of the life force.

Fiduciary Responsibility – Entrusted with the responsibility to and for the benefit of another.

Genitalia, Genitals – Reproductive organs; reproductive organs

- Male genitals include the penis and scrotum/testis.
- Female genitals include – vulva (labia majora and minora, clitoris, vestibule), hymen and vagina.

Healing Process - The developmental capacity to discern the meaning of personal pain and suffering and transform it into a healthy outcome. Not usually time dependent. See [Therapeutic Process](#).

Holistic Health – has two aspects:

- The belief that health is never lost in one's body and that the role of the massage therapist is to use skills and techniques that first are aligned with and then support the pre-existing health in the body regardless of the presence of disease or illness. Based on the Osteopathic concept that all systems of the body have the capacity to self-correct and normalize under optimal conditions.
- The belief that health is an interconnected state among the natural wisdom of the body, the wisdom of the natural world and environment, and their mutual connection to a spiritual dimension. Encompasses many diverse complementary and integrative medical practices (CIM). Includes forms of massage therapy. See [Mind, Body Spirit](#).

Informed Consent – A client's authorization for professional services based on information the massage therapist provides. Written is optimal for protecting the therapist's interests from a legal perspective. The consent may be a separate document or combined with the health history intake form. If the client signs the consent without reading, then part of the therapist's responsibility is to read or review its contents with the client.

The document may include, but is not limited to, the following items.

- Description of modalities and where they are administered
- Expectations and potential benefits
- Potential risks and possible undesirable side effects
- Right of refusal
- Client or legal guardian signature
- Date signed

Interoceptive Awareness – The conscious ability to pay attention to and be aware of visceral sensations in the body, especially in the heart and cardiovascular system but also in all the other organ systems of the body.

Intersubjectivity – The process by which parts of the nervous systems and bodies of both client/patient and therapist orient to present time in a therapeutic relationship. Body language is an expression of intersubjectivity. Research implies that heightened awareness of body language and consciously orienting to present time, through body oriented or contemplative skills, assist the therapeutic relationship.

Joint Play –

1. Motions of sliding, rolling, spinning, and/or compressing that occur between bony surfaces within a joint when the bones move through ranges of motion.
2. The distensibility or "give" of the joint capsule and ligaments that allows motion to occur between bony partners within a joint. ([Thomas](#), 1997)

1557 **Legend Drug** – Any restricted medication requiring prescription.

1558 **Loving Kindness** – The heartfelt intention to wish that another person be happy and
1559 know the sources of happiness. This includes behaviors that support happiness such as
1560 some forms of massage therapy. It is present from birth through the life span and can
1561 be easily damaged from early relational trauma. See [Empathy](#).

1562 **Massage Therapy Equivalent Terms** – Massage, therapeutic massage, body
1563 massage, myotherapy, massotherapy, body rub, massage technology, bodywork,
1564 bodywork therapy, somatic therapy, or any derivation of these terms. Massage therapy
1565 may be assumed to be bodywork, but not all bodywork is massage therapy. See
1566 Bodywork.

1567 **Massage Therapist Equivalent Terms** – Massage practitioner, massage technologist,
1568 massage technician, masseur, masseuse, myotherapist, massotherapist, bodyworker,
1569 bodywork therapist, somatic therapist, or any derivation of these terms. Massage
1570 therapists may be assumed to be bodyworkers, but not all bodyworkers are massage
1571 therapists.

1572 **Medical Massage** – See [Clinical Massage](#).

1573 **Mobilization** – The process of making a fixed part movable or releasing stored
1574 substances, as in restoring motion to a joint, freeing an organ, or making available
1575 substances held in reserve in the body, such as glycogen or fat.

1576 **Modality** –

- 1577 1. A method of application or the employment of any therapeutic agent; limited usually
1578 to [physical agents](#) and devices.
1579 2. Any specific sensory stimulus, such as taste, touch, vision, pressure, or hearing.

1580 **Neural Regulations** – Facilitation or inhibition of neural transmissions to help maintain
1581 homeostasis. An example is activation of parasympathetic (craniosacral) outflow to slow
1582 respiration and heart rate. ([Patton, Thibodeau](#), 2009)

1583 **Neuromuscular Re-education** – Training to develop and restore muscular tone and
1584 activity by way of activation of both nerves and muscles.

1585 **Palliative Care** – Care and treatment intended to relieve or alleviate pain and
1586 discomfort without curing.

1587 **Patient** – Client who is receiving care, including those with or without demonstrable
1588 illness or injury. See [Client](#).

Physical Agent – A form of therapy used in rehabilitation that produces a change in soft tissue through light, water, temperature, sound, or electricity. These include transcutaneous electrical nerve stimulation units, ultrasound, whirlpool, hot and cold packs, and other modalities. ([Thomas](#), 1997)

Prescription – An oral or written direction or order for dispensing and administering a healthcare intervention that includes the following.

- Superscription – recipe
- Inscription – ingredients and vehicle for delivery
- Subscription – directions to the dispenser
- Signature – directions to the patient with regard to the manner and dosage of application

Psychophysiology – The branch of psychology that is concerned with the physiological bases of psychological processes. Psychophysiology is closely related to the fields of neuroscience and social neuroscience, which primarily concern themselves with relationships between psychological events and brain responses. Psychophysiology is especially concerned with the effects of overwhelming stress, trauma and shock on the body, mind, and spirit. It is estimated that 80% of clients/patients have experienced overwhelming stress in their life.

Referral – The practice of sending a client/patient to another therapist or specialist for consultation or service.

Resonance – The way in which the brain and heart of the client/patient communicate with the brain and heart of the therapist and vice versa. Body language, eye contact, and physical contact are the primary forms of this non-verbal communication. Each brain recreates the feeling tone of the other person based on resonance and body language. See [Intersubjectivity](#).

Self Regulation – The conscious ability of the prefrontal areas of the brain to down regulate stressful and emotional states in the body while in relationship with another person (as well as when alone). This is called “top/down” regulation that occurs slowly and begins with body awareness and a neutral or unattached thought process, which leads to a new behavior or choice. Massage therapy supports self regulation through a “bottom/up” process of relaxing the body which in turn influences the brain to perceive more clearly. The prefrontal areas of the brain get connected during infancy through the loving touch and care of a mother and are thus stimulated through the loving touch of a massage therapist. Massage therapy, in general, promotes healthy self regulation. Also refers to the osteopathic concept that all systems of the body are self regulating. See [Social Neuroscience](#), [Intersubjectivity](#), [Resonance](#).

Social Neuroscience – The academic domain describing how human brains develop and grow in relationship to one another from birth through the life span. The same developmental dynamics occurring in early attachment and bonding experiences between a caregiver and a child occur in adult relationships, especially between a client/patient and a therapist including some sessions of massage therapy. Sometimes called Affective Neuroscience. See [Attunement](#), [Attention](#) and [Self Regulation](#).

Soft Tissues – Tissues that include skin, fascia, adipose, muscle, tendons, ligaments, joint capsules, cartilage, bursa, myofascial, blood, lymph, interstitial fluids, synovial fluids, cerebrospinal fluids, periostial tissues, and connective tissues.

Special Tests – Assessments that involve a specific stresses or changes in state administered to particular structures with the intention of determining the likelihood that a specific condition is or is not present.

Spirit – That part of a person that senses a connection to a higher or deeper meaning in life. Also thought to be the source of well being in some models of health. In eastern theories it is perceived as the underlying source of life vitality and well being.

Stress – Environmental conditions that cause the autonomic nervous system to work harder periodically to maintain homeostasis in the body. Stress is a neutral term.

Supportive Environment – One in which the therapist provides support and loving kindness within clear and appropriate boundaries, free from judging, enabling, caretaking, or counseling,

Technique – A procedure, skill, or art used in a particular task. The way in which the basics of something are treated. A skill or expertise in performing details of a procedure. A systematic procedure or method by which a task is completed . Basic massage therapy techniques include but are not limited to the following.

- **Compression** strokes involve use of downward force, commonly applied at a 90-degree angle to the tissue, followed by a lift or release of force. Force varies in depth and pressure. These strokes are commonly administered in a rhythmic, press-lift pattern of application.
- **Friction** strokes involve rubbing one surface over another, with little to no surface glide, providing both compressive and shearing forces. Pressure may be superficial (light) to deep, providing friction effects between various tissue levels. Varieties of friction may include warming, rolling, wringing, linear, stripping, cross-fiber, chucking, circular, etc. Most friction strokes are administered with use of little or no lubricant.
- **Gliding/Stroking** (effleurage) strokes are gliding movements of relaxed hand contact that contours to the body. The pressure may be either superficial (light) or deep.

Variations may include one-handed, two-handed, alternate hand, and nerve stroke.

- **Holding** strokes are those involving simple holding of tissue with little to no force/weight in the contact.
- **Kneading** (petrissage) strokes are lifting, rolling, squeezing, and releasing of tissue, most commonly using rhythmic alternating pressures. Variations may include one-handed, two-handed, alternate hand, fulling, and skin rolling.
- **Lifting** strokes are those which entail pulling tissue up and away from their current position.
- **Movement, gymnastics, and range of motion** strokes entail shortening and/or lengthening of soft tissues with movement at one or more joints. Variations include active movements (client/patient moving structures without practitioner help), passive movements (practitioner moving the structures without client/patient help), and resistive movement (client/patient moving structures against resistance provided by the practitioner).
- **Oscillating** strokes are a variation of the vibration strokes. They involve movements that spring in and out, or swing back and forth and are commonly used in relation to joint movement.
- **Percussion** (tapotement) strokes involve alternating or simultaneous rhythmic striking movement of the hands against the body, allowing the hand to spring back after contact controlling the impact. Hand surfaces commonly used include ulnar surface of the hand, tips or flats of the fingers, open palm, cupped palm, and back ulnar surface, knuckles, or sides of a loosely closed fist. Technique variations may include tapping, pincement, hacking, cupping, slapping, beating, pounding, and clapping.
- **Pressure** in relation to stroke definitions refers to any form of contact with pressure variation. Variations of pressure are an aspect of most massage strokes.
- **Pulling** strokes entail movement of tissue from its current position. Angle and force of pull may vary.
- **Stretching and traction** strokes which entail pulling and/or pushing soft tissues from one point towards another with or without friction, or controlled movement. Stretching can be uni- or multi-directional.
- **Vibration** strokes involve shaking, quivering, trembling, swinging, or rocking movements applied with the fingers, the full hand, or an appliance. Variations may include fine or coarse vibration, rocking, jostling, shaking, or fluffing. Speed varies from slow to rapid.

Therapeutic Process – The capacity of the musculoskeletal system (and other systems) of the body to self-correct, come into balance, and achieve equilibrium through the skillful normalization of tissue tone by a massage therapist. Therapeutic processes are time dependent and may be noticed within one massage. They are usually

1699 noticeable in other body systems after several massage sessions. A therapeutic
1700 process may or may not lead to a [healing process](#).

1701 **Treatment Massage** – See [Clinical Massage](#).

1702 **Wellness** – Condition of optimal physical emotional, intellectual, spiritual, social, and
1703 vocational well-being. The concept of wellness is holistic at its core, encompassing the
1704 whole person. ([Benjamin](#), 2009)

1705 **Wellness Model** – A model developed from the academic domain of spirituality and
1706 health research that seeks to perceive and treat a client/patient as a “whole person” in
1707 body, mind, and spirit. The wellness model then becomes a wellness program to be
1708 practiced by individuals and groups. See [Wellness](#) and [Holistic Health](#).

Appendix A

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In addition to the publications listed above, the task force has been given access to a large reference set of materials provided by major massage therapy publishers. This material has been invaluable in the development of the MTBOK and will be listed in detail in the final publication in May, 2010.

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Appendix B

Further Reading

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Appendix C

Sample Filled-out Comment Form (2 pages)

Message Therapy
MTBOK
Body of Knowledge

Exit this survey

2nd Draft Massage Therapy Body of Knowledge (MTBOK) Comment Collection Form

1. What Version of the MTBOK Content are you providing a comment on? (Select only ONE)

☒ a. 2nd Draft, Released January 29, 2010 ☐ b. Not Related to a Specific Version

2. Please enter your email address. Although you are not required to enter your email, it is the only way that we would be able to contact you regarding your comment.

(your email address will not be provided to others, and will only be used if necessary to contact you regarding your input)

3. I am (or represent) the following (check as many boxes as appropriate):

| | |
|---|--|
| <input checked="" type="checkbox"/> Message Therapist/Practitioner | <input checked="" type="checkbox"/> Massage Instructor |
| <input type="checkbox"/> Client | <input type="checkbox"/> Trade or Professional Association |
| <input type="checkbox"/> Massage Related Business Owner | <input type="checkbox"/> Allied Health Field or profession |
| <input type="checkbox"/> Massage School | <input type="checkbox"/> Massage Therapy Student |
| <input type="checkbox"/> Public school with a Massage Therapy program | <input type="checkbox"/> Other |

***4. What Section or category of the MTBOK is this comment about? Enter only ONE response**

| | |
|--|--|
| <input type="radio"/> 0 Preamble and Overview | <input type="radio"/> 210.2 - Anatomy and Physiology |
| <input type="radio"/> 010 - Second Draft Preamble | <input type="radio"/> 210.3 - Kinesiology |
| <input checked="" type="radio"/> 020 - How to Provide Comments and Suggestions | <input type="radio"/> 210.4 - Pathology |
| <input type="radio"/> 030 - MTBOK Vision | <input type="radio"/> 210.5 - Assessment, Treatment Planning etc |
| <input type="radio"/> 040.1 - General Comments | <input checked="" type="radio"/> 210.6 - Research and Information Literacy |
| <input type="radio"/> 040.2 - Organization or Layout Comments | <input type="radio"/> 210.7 - Business Practices, Laws and Regulations |
| <input type="radio"/> 040.3 - New Suggestions | <input type="radio"/> 210.8 - Boundaries, Ethics & Therapeutic Rel. |
| <input type="radio"/> 100 - Massage Therapy Description and Scope | <input type="radio"/> 210.9 - Body Mechanics and Self Care |
| <input type="radio"/> 110 - Description of the Massage Therapy Field | <input type="radio"/> 210.10 - Massage Techniques, Physiologic etc |
| <input type="radio"/> 120 - Massage Therapy Scope of Practice | <input type="radio"/> 210.11 - Therapeutic Modalities |
| <input type="radio"/> 130 - What IS included in the Scope | <input type="radio"/> 300 - Massage Therapy Terminology |

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