

Soft Tissue and Trigger Point Release Home Study Course

7 CE Hours
Online Study Guide

Presented by the:
Center for Massage Therapy Continuing Education

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It is the responsibility of the practitioner to determine the appropriateness of the principles presented in terms within the scope of practice. This information is in no way meant to diagnose or treat medical conditions. This course is not meant to teach advanced hands-on massage techniques. Written medical opinions are always the best way to resolve any questions regarding contra-indications to massage therapy, soft tissue release, or trigger point therapy.

Instructions for the Soft Tissue and Trigger Point Release Home Study Course

Thank you for investing in the Soft Tissue and Trigger Point Release home study course, a 7 CE hour course designed to further your knowledge in the principles and practices of the modalities soft tissue and trigger point release. The following will give instructions on what you will need to do to complete this course. This is a 7 CE hour course, so that means it should take you approximately 7 hours to complete this course in its entirety.

The following are steps to follow in completing this course:

- 1. Read the instructions and review the textbook and exam.**
- 2. Access the online examination by logging in to your account at www.massagetherapyceu.com. Once there, click on the student login link on the top left and enter your information.**
- 3. Complete your examination and print your certificate. The exam is open book and there is no time limit for completion.**

You must pass the exam with a 70% or better to pass this home study course. You are allowed to access and take the exam up to 3 times if needed. There is no time limit when taking the exam. Feel free to review the textbook while taking the test. This course uses the textbook *Soft Tissue and Trigger Point Release*, by Jane Johnson. Feel free to review the text while completing the exam. There are no trick questions on the exam. All of the answers are clearly found in the text.

It is advised to answer/review the exam questions in the study guide before testing online. That way, when you are testing you do not have to go back and forth through the online exam.

If you have any questions please feel free to contact us at 866-784-5940, 712-490-8245 or info@massagetherapyceu.com. Most state boards require that you keep your “proof of completion” certificates for at least four years in case of audit. Thank you for taking our Soft Tissue and Trigger Point Release home study course.

Soft Tissue and Trigger Point Release Exam

Chapter 1

1. What is soft tissue release (STR)?
 - A. An advanced massage technique widely used in assessing and stretching soft tissues
 - B. An advanced massage technique widely used in diagnosing and treating soft tissues
 - C. An advanced massage technique widely used in lymphatic drainage massage to clear the tissues of edema
 - D. An advanced massage technique widely used in assessing and stretching osseous tissues

2. In STR, how is a stretch localized?
 - A. By holding both the origin and insertion of the muscle, stretching the entire muscle rather than the area of palpable tightness
 - B. By holding both the origin and insertion of the muscle, only stretching the more pliable area of the muscle
 - C. By fixing part of the muscle against underlying structures to create a false insertion point
 - D. By mobilizing part of the muscle against underlying structures to create a false insertion point

3. The fixing – described throughout this book as a _____ – prevents some parts of the muscle from moving and is achieved when a therapist uses his or her own upper body or a massage tool.
 - A. Catch
 - B. Lock
 - C. Move
 - D. Hold

4. Clinically, why are trigger points easily detected?
 - A. Because they are located in the belly of the muscle, hurt when pressed firmly, and refer pain in a predictable pattern
 - B. Because they are located in the insertion of the muscle, hurt when pressed firmly, and refer pain in a predictable pattern
 - C. Because they are located in the belly of the muscle, hurt when pressed firmly, and refer pain in an unpredictable pattern
 - D. Because they are located at the origin of the muscle, hurt with light pressure, and refer pain in a predictable pattern

5. When applying pressure to trigger points using a pain scale of 0 to 10, with 10 being the worst pain ever and 0 being no pain at all, the author recommends using what pain level as a guide?
 - A. 3
 - B. 5
 - C. 7
 - D. 9

Chapter 2

6. Which of the following therapist body parts are best used for providing broad locks?
 - A. Forearm
 - B. Elbow
 - C. Reinforced thumbs
 - D. Knuckles
7. All of the following are cautions to STR EXCEPT:
 - A. Clients who bruise easily or who have thin skin
 - B. Hypermobility clients
 - C. Pre- and post- event STR treatment
 - D. Adults considered to be in general good health
8. How is active-assisted STR performed?
 - A. The therapist applies a lock and moves the client's body part so as to facilitate a stretch
 - B. The therapist applies a lock and the client moves his or her body part to bring about the stretch
 - C. The client applies a lock to himself or herself and also performs the stretch without assistance
 - D. All of the above
9. All of the following are things you can try if the client does not seem to feel the stretch EXCEPT:
 - A. Add more pressure
 - B. Use less pressure
 - C. Check that you are directing your pressure towards the proximal end of the limb
 - D. Use active STR

Chapter 3

10. When applying STR, which of the following is the most common direction to work?
 - A. Proximally to distally
 - B. Distally to proximally
 - C. Externally to internally
 - D. Internally to externally

11. When applying passive STR to a client's gluteals, how is the stretch achieved?
- A. Passively flex the femur; simply move the foot of the limb on which you are working down toward the table
 - B. Passively extend the client's femur; simply move the foot of the limb on which you are working up toward your shoulder
 - C. Ask the client to rotate their femur; have them move the foot of the limb on which you are working towards or away from you
 - D. Passively rotate the client's femur; simply move the foot of the limb on which you are working towards or away from you
12. All of the following are safety guidelines for passive STR EXCEPT:
- A. When working rhomboids in prone, be sure to place your client's entire body to the side of the treatment couch
 - B. When applying STR, protect your thumbs
 - C. When integrating STR with oil massage, remember that it is much easier to provide a lock when working through a towel than when working through clothing or on dry skin
 - D. When using passive STR, always get feedback from your client and stop if your client reports pain
13. When using passive STR to treat trigger points, your lock (thumb or elbow) is placed over the:
- A. Insertion of the muscle
 - B. Origin of the muscle
 - C. The trigger point
 - D. Nearest bony landmark

Chapter 4

14. Active-assisted STR uses the efforts of:
- A. The therapist only
 - B. The client only
 - C. A massage tool only
 - D. Both the client and the therapist
15. All of the following are areas of the body that lend themselves to active-assisted STR EXCEPT:
- A. Hamstrings
 - B. Masseter
 - C. Gluteals
 - D. Erector spinae

16. When performing active-assisted STR on the gluteals, which of the following is the best client position?
- A. Prone
 - B. Supine
 - C. Seated
 - D. Side-lying
17. All of the following are situations when active-assisted STR is indicated EXCEPT:
- A. When working with clients who relax easily
 - B. When it is necessary to apply more pressure to lock tissues
 - C. When treating clients who do not feel the stretch of passive STR
 - D. When muscle strengthening is required, perhaps after immobilization of a joint

Chapter 5

18. Active STR is a technique:
- A. You might use on yourself or teach to your clients to use as part of a home care programme
 - B. You perform on the client with no assistance from the client using your thumbs
 - C. You perform on the client with assistance from them
 - D. You perform on the client with no assistance from the client using a massage tool
19. When locking a muscle, the intensity of the subsequent stretch _____ as you work from the proximal end of the muscle to the distal end.
- A. Decreases
 - B. Remains the same
 - C. Increases
 - D. Becomes painful
20. When performing active STR on the quadriceps and the calf muscles, what provides the lock?
- A. Your forearm
 - B. A ball
 - C. Your fingers
 - D. Your thumbs
21. All of the following are safety guidelines for the use of active STR EXCEPT:
- A. Avoid active STR if you have had a recent injury or if you bruise easily
 - B. Be careful not to overwork any one area
 - C. Use active deep STR before a sporting event
 - D. Be careful when using your thumbs to lock into tissues

Chapter 6

22. The best way to palpate the rhomboid muscles to locate trigger points is with the:
- A. Shoulder extended and the scapula protracted
 - B. Shoulder fixed and the scapula retracted
 - C. Shoulder flexed and the scapula retracted
 - D. Shoulder flexed and the scapula protracted
23. When performing passive STR on the pectorals, if you find it tricky to apply your lock, what can you do?
- A. Use your thumbs instead of your fist
 - B. Cushion the lock by working through a facecloth folded into fourths
 - C. Cushion the lock by using an ample amount of massage oil
 - D. Use a massage tool instead
24. Where do trigger points found in the levator scapulae produce pain?
- A. Locally and down the medial border of the scapula as well as to the back of the shoulder
 - B. Locally and down the lateral border of the scapula as well as to the front of the shoulder
 - C. Locally and up to the occiput as well as to the sternocleidomastiod
 - D. Locally and up to the upper trapezius as well as to the back of the shoulder
25. All of the following are advantages of active-assisted STR on the upper trapezius with your client sitting EXCEPT:
- A. You have easy access to the muscle and good leverage
 - B. There is little danger that soft tissues of the neck will be overstretched because the client is in charge of the stretch
 - C. With practice, and by working with the client, you will be able to alter the direction of pressure to localize the stretch to different fibres in the upper trapezius
 - D. It is easy to press into bony structures, such as the clavicle and acromion process
26. Which of the following is a disadvantage of providing active-assisted STR for the erector spinae with the client in the seated position?
- A. Clients usually find this stretch to be comfortable
 - B. It can be performed with the client in a sitting position
 - C. It is easy to get a good lock
 - D. It is easy to overuse your fingers or thumbs

Chapter 7

27. Passive STR is excellent for treating the:
- A. Hamstrings, calf, and gluteal muscles
 - B. Foot, tibialis anterior, and peroneals
 - C. Quadriceps, ITB, and iliacus
 - D. Hamstrings, quadriceps, and iliacus

28. When performing passive STR on the hamstrings muscle, what movement is done by the therapist to the client, once the lock is in place?
- A. Adduction of the client's knee
 - B. Inversion of the client's knee
 - C. Extension of the client's knee
 - D. Rotation of the client's knee
29. When providing a lock for passive STR for the calf using your thumbs with the client in the prone position, where should your pressure be directed?
- A. Towards the knee
 - B. Perpendicularly
 - C. Towards the ankle
 - D. Horizontally
30. All of the following are advantages of performing active-assisted STR for the calf EXCEPT:
- A. This method allows you to apply a firm lock
 - B. Not having to stand at the foot of the treatment table means you can focus the lock in a variety of ways
 - C. The client is likely to dorsiflex to a greater extent than would be produced through passive STR to the calf and may therefore experience a greater stretch
 - D. Constant dorsiflexion will eventually fatigue the tibialis anterior
31. When performing active STR for the foot, what motion is performed by the client?
- A. Extension of the toes, dorsiflexing the ankle
 - B. Flexion of the toes, plantar flexing the ankle
 - C. Rotation of the ankle
 - D. Inversion and eversion of the ankle
32. Which of the following types of STR is recommended for the tibialis anterior?
- A. Passive
 - B. Active-assisted
 - C. Active
 - D. Seated
33. Which of the following is a disadvantage of performing active-assisted STR for the gluteals with the client in the side-lying position?
- A. Active-assisted STR to the gluteals in the side-lying position is helpful when working with a client who is unable to rest in the prone position
 - B. It is possible to locate the fibres of the gluteus minimus, which are more difficult to access when using STR in the prone position
 - C. With practice you will be able to identify triggers in the gluteus maximus and use STR in this position to deactivate them
 - D. When you first begin, it is challenging to keep your client balanced in the side-lying position whilst you focus your lock in the correct spot on the muscles

34. A trigger point in the _____ is located high in the muscle, just inferior to the iliac crest on the anterior of the ilium.
- A. Vastus lateralis
 - B. Iliacus
 - C. Psoas
 - D. Gluteus medius

Chapter 8

35. When performing active STR for the biceps brachii, which of the following motions is performed?
- A. Elbow flexion
 - B. Elbow extension
 - C. Elbow rotation
 - D. Shoulder abduction
36. When performing passive STR for wrist and finger extensors with the client in the supine position, pressure from your lock should be directed:
- A. Toward the wrist
 - B. Toward the ulnar side
 - C. Toward the elbow
 - D. Toward the radial side
37. As with the wrist and finger extensor muscles, trigger points in the flexor groups are perpetuated by:
- A. Forced or prolonged gripping
 - B. Lack of movement
 - C. Forced or prolonged extension
 - D. Excessive shoulder movement
38. When performing active STR for the wrist and finger flexors, how do you identify the bellies of your wrist and finger flexors?
- A. Palpate your forearm on the posterior surface as you extend your wrist and fingers
 - B. Palpate your forearm on the posterior surface as you flex your wrist and fingers
 - C. Palpate your forearm on the anterior surface as you flex your wrist and fingers
 - D. Palpate your forearm on the anterior surface as you extend your wrist and fingers

Chapter 9

39. All of the following are questions you may want to ask your client during the initial client consultation EXCEPT:
- A. How may I help?
 - B. Have you had this condition before?
 - C. Can you describe the type of discomfort you are feeling?
 - D. Have I met your treatment goals?

40. What is a body map?

- A. An outline of the body, showing front, back and sometimes side views, onto which you record the area of your client's symptoms
- B. A scale in which the client is able to report their level of pain
- C. A test in which you document the client's range of motion in body areas such as the neck, shoulder, or lower back
- D. The process of documenting and creating a list of what you did and how you did it

This completes the Soft Tissue and Trigger Point Release exam.