

RPW Shockwave Therapy Clinical Guide







2 Clinical Guide Chattanooga RPW

Dear customer!

In your hands you have the Clinical Guide for the Chattanooga line of Radial Pressure Wave units. This practical guide provides specific information on the scientific background, methodology and applications of radial pressure wave therapy, it also includes treatment protocols for every program offered by our RPW devices.

In this guide, you will find the most common indications that can be treated with the Chattanooga RPW devices, with images showing the hand piece placement as well as advice for treatment dosage and information regarding the different applications.

The information is easy to read with the purpose of providing extra support in your daily work to help you achieve optimal treatment outcomes for your patients.

About Chattanooga & DJO Global

Chattanooga is the world's largest manufacturer of rehabilitation equipment for treating musculoskeletal, neurological and soft tissue disorders. For over six decades, Chattanooga has set a benchmark for leadership, reliability and excellence. Our products contribute to better treatment outcomes in hospitals, clinics and home settings worldwide. We lead the physiotherapy industry by example and, through continuous innovation, provide real world solutions for clinicians and their patients.

As the world's leading brand in rehabilitation, Chattanooga is sold in over 80 countries worldwide. Chattanooga is directly represented in our key markets but also has long lasting relationships with dedicated distributors in the USA, Canada, Latin America, EMEA and Asia Pacific. Our Chattanooga distributors and customers are supported for order placement, training, product delivery and after sales service by a dedicated team of highly skilled DJO employees based all over the world.

Chattanooga is a brand of DJO Global Inc. DJO Global provides solutions for musculoskeletal health, vascular health and pain management. Our products help prevent injuries or rehabilitate after surgery, injury or from degenerative disease, enabling patients to regain or maintain their natural motion.

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RPW Introduction

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10 Background

Therapeutic shockwaves were introduced as a medical treatment for eliminating kidney stones 20 years ago. One of the side effects discovered during treatment, was the effect on bone healing (bone density increase), as well as accelerated tissue healing in the area. In nature, shockwaves are caused by a high energy wave. This wave has an extremely short build up time and high amplitude, similar to an explosion.

When we talk about shockwave treatment there are basically two different methods:

- Focused Shockwave:

Can be Electromagnetically generated, high energy, deep penetration, and precise focus on a very small area.

- Radial Shockwave:

Radial shockwaves are often referred to as Radial Pressure Waves (RPW). In physical terms this is the correct definition.



Radial pressure waves are pulses generated by compressed air. The compressed air is used to drive a projectile in a cylinder, located inside the hand piece, to a shock transmitter. The kinetic energy generated by the motion and weight of the projectile, converts into acoustic energy when the projectile hits the shock transmitter. The acoustic pulses then spread into the underlying tissue, treating a larger area than the focused shockwave shown on the previous page. The highest energy level of the pressure waves will be at the tip of the transmitter (max 0, 63 mJ/mm² at 5 Bar) right on the skin over the treatment point and 4 Bar on the Mobile RPW. The energy level will then gradually decrease as the penetration depth increases. The penetration depths are normally 0-6 cm (0-2.3").

Apart from providing focused shockwaves, a treatment with radial pressure waves needs no additional pre examinations or treatments such as ultrasound imaging, local anesthesia, MRT or X-ray. With a correct handling, RPW is an excellent non invasive treatment method with very few negative side effects, for indications that normally are very difficult to treat. For these indications we now know that radial pressure waves is a treatment method that reduces pain as well as improves function and quality of life.

12 Physical Effects of Shockwaves

Radial pressure waves offer a non invasive treatment solution to long term insertion and soft tissue pathologies. Local treatment in the affected area will support and reset the healing pattern.

Today there are several working hypothesis for the physical effects of radial pressure waves:

- Pain reduction: The patient experiences a reduction of pain, explained by the Gate Control Theory. Intensive pulses from the transmitter into the tissues create a strong nociceptor activation of the A-β fibers, which affect interneurons that inhibit the transmission of the pain signals.
- Increased metabolism: Shockwaves influence the tissues on a cellular level. The chemical environment of the cells is affected by free radicals promoting the release of pain and inflammatory inhibiting substances.
- Revascularization: Repeated shockwaves to the affected area create a revascularization effect, with the new blood flow in the area promoting tissue healing and regeneration.
- Reduced muscle tone: The "vicious circle", as well as the strong pathological association between pain and muscle tone, will be broken and lead to restoring a normalized muscular tone.

In the Intelect® RPW, you will find preset programs for several indications.

- The majority of the treatment programs are for what we commonly refer to as "insertional tendinopathies".
- Soft/connective tissue/muscles with trigger points or / and increased tension are also targets for treatment.
- In many cases shockwave treatment gives excellent results in order to dissolve calcifications.

Example of indications for the preset programs*:

- Plantar fasciitis
- Achillodynia
- Shin splint
- Muscle sprain
- Jumpers knee
- Runners knee
- Trigger point therapy
- Trochanteric insertion tendonitis
- · Piriformis syndrome
- · Low back/thoracic pain

- · Calcified shoulder tendonitis
- Frozen Shoulder
- Cervicobrachial neuralgia
- Trapezius tension
- Radial/medial epicondylitis
- Finger tendonitis
- Muscular cramps/spasm
- Cellulite treatment
- Massage, vibration therapy

Contraindications

NOTE: Read the full list of contraindications, precautions and the safety instructions in the Chattanooga RPW User Manual prior to treatment!

Before a treatment with radial pressure wave, a correct examination and diagnosis should be performed. A correct diagnosis is the best way to ensure an optimal effect of the treatment. Please make sure that you are aware of the latest developments and medical publications on Radial Pressure Wave therapy for details on contraindications and side effects not known at the time of manufacturing.

Side Effects

Side effects could occur after treatment with radial pressure wave therapy. Side effects - if any - usually appear within 2 days of the treatment having been performed, they usually fade and disappear after 3-5 days.

Do not repeat a treatment if previous side effects have not diminished. The most common side effects include: reddening, swelling, pain, worsening conditions, hematoma and petechiae (red spots).

15 How to Perform a Radial Pressure Wave Treatment

RPW treatment, given in the right dose and for the correct indications, is an excellent treatment for many chronic conditions that other treatment methods can't improve or heal. Radial pressure therapy is very well perceived among therapists thanks to its positive outcomes and its relatively short treatment period.

- · Let your patient rest in a relaxing position during a treatment session.
- Localise the painful points you plan to treat. Sometimes it's a good idea to mark up the points with a felt tip pen.
- Apply gel on the skin of the treatment area.

A treatment with radial pressure waves requires a hand piece with a transmitter tip especially designed for the treatment (read more about the transmitters below). Point the hand piece on the painful area or on the surrounding muscles. Warn the patient about the sound the projectile makes when hitting the transmitter during the treatment.

The painful spots are localised by palpation following the patient's indications. Radial pressure wave therapy is a powerful treatment and it can be perceived very differently from patient to patient. It is important to observe, communicate and keep in close contact with the patient throughout the treatment.

16 General Muscle Activation / Coupling

General Muscle Activation

There are two different ways in which to start a treatment. The important thing to take into account is that both pain point stimulation and muscle activation/muscular treatment/vibration treatment are included in a full treatment. If you prefer to use a preset program you will find these programs under Muscular Treatment or Vibration Treatment in the Intelect[®] RPW^{*}.

Some therapists find it most convenient to start up with activation and smoothing of the surrounding muscles and connective tissue to get the muscles relaxed before treating the painful points. More commonly, some therapists start with the painful points in order to eliminate the pain radiating from the spots, and then finalize the treatment by activation and smoothing of the surrounding muscles.

Coupling

To ensure efficiency and optimal effect of the treatment, make sure that there is a good contact between the transmitter and the patient's skin. Always apply a sufficient amount of gel on the treatment area, and be sure that the transmitter surface is in contact with the skin, throughout the treatment.

NOTE: If you prefer to use the CERAma-x[®] R-15 transmitter, the unique feature of this transmitter allows you to work without any gel as coupling. CERAma-x[®] is equal to the R-15 (regular) transmitter, and can replace it in the preset programs.

Dosage

Depending on the indication, a total of 3-6 sessions with 5-10 days interval, is the most common treatment frequency. Initial success of the treatment can generally be evaluated after 3-4 sessions, but additional improvement can be seen within 2 weeks and up to 3 months after the treatment period is completed.



Ramp Functionality*

The Intelect® RPW has a unique system for increasing the intensity gradually during a treatment session. Instead of starting treatment on a low level, you can manually interrupt the treatment and readjust the intensity (Bar), the "ramp–on functionality" allows you to have an automatic and smooth increase in intensity in tune with your patient. If you prefer to stop the stimulation due to the intensity, just turn off the hand piece. Then, you can choose if you want to go on at the same intensity level, or continue ramping up.

*Not offered on Mobile RPW

The ramp allows a smooth intensity increase, and if the treatment is stopped before the full ramp up, you have the choice of continuing ramping up or of using the new lower intensity level.

18 Preset Program Levels / Transmitters

Preset Program Levels

Many of the preset programs you'll find in the Intelect[®] RPW are available in level I and II. The first level is a lighter version recommended if the patient is very sensitive or the injury fairly recent. Level II of the programs can be used for patients with a higher tolerance, later on in the treatment process or for patients with a longer lasting, more chronic disorder. The preset programs are not available on the Mobile RPW.

Transmitters

The hand pieces can be used with a variety of transmitters, all exclusive and especially developed for optimal results. Each transmitter has its own characteristic effect and area of use. In the software of the Intelect* RPW you will find specific information for each transmitter. The majority of the transmitters generate the shockwaves (R 15, DI 15, F 15, Cera 15). The D-transmitters (D 20 and D 35) generate a combination of shockwaves and vibrations, and the V-transmitters* (V 25 and V 40) generate vibrations only.

Always use a sufficient amount of gel on the treatment area in order to ensure contact between the skin and the transmitter throughout the treatment session.

Depending on the size of the treatment area and the pressure you want to keep to the tissue, there are different ways of holding the hand piece (ex: one or two hands). Please see the hand piece placement images for the preset programs.

During treatment, keep contact with the tissue and move the hand piece with small circular movements.

19 Transmitters



20 V-ACTOR® / Scientific Background

V-ACTOR**

The V-ACTOR® hand piece is used as a complement to the radial shockwave therapy. The V-ACTOR® hand piece is an optional accessory and the kit includes two different sizes of transmitters (V-25 and V-40), which allow soft tissue treatment with high frequency vibrations. With the V-ACTOR® hand piece and V-transmitters only vibrations are generated. It is ideally suited to reduce muscular strain and increase local blood circulation.

Scientific Background

Radial shockwave therapy is a modality which is successfully used by doctors, practitioners and physiotherapists in both sport medicine and rehabilitation. Radial shockwave therapy has recently been the subject of clinical evidence in several medical papers. The research is progressing continuously with a steadily increasing volume of publications.

For references regarding radial shockwave therapy, please visit our research library: www.DJOglobal.com and complete your DJO registration.





FOOT

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23 Plantar Fasciitis with Heel Spur – Muscular Treatment

About	Plantar fasciitis is a painful disorder due to inflammatory/degenerative process of the fascia originating on the calcaneus. The heel spur is a bony calcification on the calcaneus, which can be an incidental finding associated with plantar fasciitis. Overpronators, high weight bearers and people with tight calf muscles are often affected by this indication.		
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.		
Where	Calf muscles, Gastrocnemius, Soleus and Intrinsic muscles of the foot sole. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a RPW treatment of the painful points.		
Intensity	2,0 Bar - 3,0 Bar		
Pulses	2000		
Frequency	15 Hz / 14Hz Mobile RPW		
Transmitter	D 20		
	0.48 mJ/mm ²		

24 Plantar Fasciitis with Heel Spur I

About	Plantar fasciitis is a painful disorder due to inflammatory/degenerative process of the fascia originating on the calcaneus. The heel spur is a bony		
	calcification on the calcaneus, which can be an incidental finding associated with plantar fasciitis. Overpronators, high weight bearers and people		
	with tight calf muscles are often affected by this indication.		
Treatment	Work with the applicator on the pain points with very small circular mov	ements.	
Where	Localise the painful points on the foot sole.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a ge	eneral activation of surrounding muscles.	
	Alternative 1	Alternative 2	
Intensity	1,6 Bar - 3,2 Bar	1,8 Bar - 3,5 Bar	
Pulses	2000	2000	
Frequency	10 Hz	15 Hz / 10 Hz Mobile RPW	
Transmitter	DI 15	R 15	
	0.63 mJ/mm ²	0.38 mJ/mm ²	

25 Plantar Fasciitis with Heel Spur II

About	Plantar fasciitis is a painful disorder due to inflammatory/degenerative process of the fascia originating on the calcaneus. The heel spur is a bony calcification on the calcaneus, which can be an incidental finding associated with plantar fasciitis. Overpronators, high weight bearers and people with tight calf muscles are often affected by this indication.		
Treatment	Work with the applicator on the pain points with very small circular move	ements.	
Where	Localise the painful points on the foot sole.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a ge	neral activation of surrounding muscles.	
	Alternative 1	Alternative 2	
Intensity	1,8 Bar - 4,0 Bar	2,0 Bar - 4,5 Bar	
Pulses	2000	2000	
Frequency	10 Hz / 8 Hz Mobile RPW	15 Hz / This protocol not available on Mobile RPW	
Transmitter	DI 15	R 15	
	0.63 mJ/mm ²	0.38 mJ/mm ²	

26 Plantar Fasciitis without Heel Spur – Muscular Treatment

About	Plantar fasciitis is a painful disorder due to inflammatory/degenerative process of the fascia originating on the calcaneus. Overpronators, high weight bearers and people with tight calf muscles are often affected by this indication.		
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.		
Where	Calf muscles, Gastrocnemius, Soleus and Intrinsic muscles of the foot sole. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a RPW treatment of the painful points.		
Intensity	2,0 Bar - 3,0 Bar		
Pulses	2000		
Frequency	15 Hz / 14 Hz Mobile RPW		
Transmitter	D 20		
	0.48 mJ/mm ²		

27 Plantar Fasciitis without Heel Spur I

About	Plantar fasciitis is a painful disorder due to inflammatory/degenerative process of the fascia originating on the calcaneus. Overpronators, high weight bearers and people with tight calf muscles are often affected by this indication.		
Treatment	Work with the applicator on the pain points with very small circular move	ements.	
Where	Localise the painful points on the foot sole.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a ge	neral activation of surrounding muscles.	
	Alternative 1	Alternative 2	
Intensity	1,8 Bar - 2,8 Bar	1,6 Bar - 3,2 Bar	
Pulses	1500	2000	
Frequency	15 Hz / 14 Hz mobile RPW	10 Hz / 12 Hz Mobile RPW	
Transmitter	R 15	DI 15	
	0.38 mJ/mm ²	0.63 mJ/mm ²	

28 Plantar Fasciitis without Heel Spur II

About	Plantar fasciitis is a painful disorder due to inflammatory/degenerative process of the fascia originating on the calcaneus. Overpronators, high weight bearers and people with tight calf muscles are often affected by this indication.		
Treatment	Work with the applicator on the pain points with very small circular move	ements.	
Where	Localise the painful points on the foot sole.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a ge	neral activation of surrounding muscles.	
	Alternative 1	Alternative 2	
Intensity	2,0 Bar - 3,2 Bar	1,8 Bar - 4,0 Bar	
Pulses	2000	2000	
Frequency	15 Hz / 12 Hz Mobile RPW	10 Hz / 8 Hz Mobile RPW	
Transmitter	R 15	DI 15	
	0.38 mJ/mm ²	0.63 mJ/mm ²	

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30 Lower Leg & Ankle

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31 Achillodynia – Muscular Treatment

About	Chronic achillodynia is mostly due to either an injury of the tendon itself (tendinosis) or to an inflammatory process occurring inside the surrounding tissues (bursitis or peritendinitis). The condition can be either at the attachment point of the heel or in the mid-portion of the tendon (typically around 4 cm above the heel). Healing of the achilles tendon is often slow, due to its poor blood supply.		
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.		
Where	Calf muscles, Gastrocnemius, Soleus and Intrinsic muscles of the foot sole. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a RPW treatment of the painful points.		
Intensity	2,0 Bar - 3,0 Bar		
Pulses	2000		
Frequency	15 Hz / 14 Hz Mobile RPW		
Transmitter	D 20		
	0.48 mJ/mm ²		

0 - 50 mm

32 Achillodynia I

About	Chronic achillodynia is mostly due to either an injury of the tendon itself (tendinosis) or to an inflammatory process occurring inside the surrounding tissues (bursitis or peritendinitis). The condition can be either at the attachment point of the heel or in the mid-portion of the tendon (typically around 4 cm above the heel). Healing of the achilles tendon is often slow, due to its poor blood supply.		
Treatment	Work with the applicator on the pain points with very small circular movements.		
Where	Localise the painful points on the tendon. Treat over the Achilles tendon in fiber direction but give the majority of the pulses from lateral or medial side of the tendon.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.		
	Alternative 1	Alternative 2	
Intensity	1,6 Bar - 3,0 Bar	1,6 Bar - 2,8 Bar	
Pulses	2000	1500	
Frequency	10 Hz / 14 Hz Mobile RPW	15 Hz	
Transmitter	DI 15	R 15	
P	0.63 mJ/mm ²	0.38 mJ/mm ²	

Lower Leg & Ankle

33 Achillodynia II

About	Chronic achillodynia is mostly due to either an injury of the tendon itself (tendinosis) or to an inflammatory process occurring inside the surrounding tissues (bursitis or peritendinitis). The condition can be either at the attachment point of the heel or in the mid-portion of the tendon (typically around 4 cm above the heel). Healing of the achilles tendon is often slow, due to its poor blood supply.	
Treatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise the painful points on the tendon. Treat over the Achilles tendon in fiber direction but give the majority of the pulses from lateral or medial side of the tendon.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.	
Intensity	1,6 Bar - 3,0 Bar	
Pulses	2000	
Frequency	15 Hz / 14 Hz Mobile RPW	
Transmitter	R 15	



34 Shin Splints – Muscular Treatment

About	"Shin splints" is simply the name given to pain over the front of the lower leg and can be caused by several conditions, most commonly a medial tibial stress syndrome, or an exercise induced compartment syndrome. A tibial stress syndrome is due to overuse and results in an irritation and inflammation in the tibial periost. Tight calf muscles are often associated with this condition.		
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.		
Where	Gastrocnemius, Soleus, Tibialis Anterior and Peroneal muscles. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a RPW treatment of the painful points.		
Intensity	2,0 Bar - 2,8 Bar		
Pulses	2000		
Frequency	15 Hz		
Transmitter	D 20		
	0.48 mJ/mm ²		

Lower Leg & Ankle

35 Shin Splints I

About	"Shin splints" is simply the name given to pain over the front of the lower leg and can be caused by several conditions, most commonly a medial tibial stress syndrome, or an exercise induced compartment syndrome. A tibial stress syndrome is due to overuse and results in an irritation and inflammation in the tibial periost.		
Treatment	Work with the applicator on the pain points with very small circular movements.		
Where	Localise the most painful points and treat along both sides of the shin bone		
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.		
	Alternative 1	Alternative 2	
Intensity	1,6 Bar - 2,8 Bar	1,6 Bar - 2,8 Bar	
Pulses	2000	1500	
Frequency	10 Hz	15 Hz	
Transmitter	DI 15	R 15	
	0.63 mJ/mm ²	0.38 mJ/mm ²	
36 Shin Splints II

About	"Shin splints" is simply the name given to pain over the front of the lower tibial stress syndrome, or an exercise induced compartment syndrome. A inflammation in the tibial periost.	leg and can be caused by several conditions, most commonly a medial tibial stress syndrome is due to overuse and results in an irritation and
Treatment	Work with the applicator on the pain points with very small circular move	ements.
Where	Localise the most painful points and treat along both sides of the shin bo	one
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a ge	neral activation of surrounding muscles.
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 3,0 Bar	1,8 Bar - 3,0 Bar
Pulses	2000	1500
Frequency	10 Hz / 14 Hz Mobile RPW	15 Hz
Transmitter	DI 15	R 15
	0.63 mJ/mm ²	0.38 mJ/m ²

Lower Leg & Ankle

37 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage*.
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. To improve drainage, move the V-ACTOR® in the same direction as the lymphatic drainage system.
Where	Gastrocnemius, Soleus, Tibialis Anterior and Peroneal muscles.
Dosage	3-6 treatments, 3-10 days interval
Intensity	2,4 Bar - 3,4 Bar
Pulses	5000 - Could vary between 2000-6000 depending on treatment area
Frequency	30 Hz
Transmitter	V 25 for smaller muscle groups and more integrated trigger points. For larger areas and larger muscle groups, V 40 is recommended.



*Not offered on Mobile RPW

38 General Muscle Sprain/Strain, Calf Muscles

About	Sprains and strains are among the most common orthopaedic injuries. Sprains describe an injury to a ligament and strains describe an injury to muscle. A calf strain is a very common sport injury, and is more likely to occur if the calf muscles are tight.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation. Do not treat in the acute phase or if there is ongoing bleeding or hemorrhage.
Where	Gastrocnemius, Soleus, Tibialis Anterior and Peroneal muscles. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	1,8 Bar - 2,6 Bar
Pulses	2000
Frequency	15 Hz
Transmitter	D 20
	0.48 mJ/mm ²

Lower Leg & Ankle

39 Muscular Cramps/Spasm, Calf Muscles

About	Leg cramps are painful contractions of the muscle that happen involunta may cause damage to the muscle. Fibres of the muscle may be torn due muscle will be painful for some time afterwards.	arily. A common site for leg cramps are the calf muscles. Severe leg cramp to the shear strength of the muscle contraction. If this happens the
Treatment	General activation and smoothing of surrounding muscles and connecti relaxation. Do not treat in the acute phase or if there is ongoing bleeding	ve tissue in order to increase circulation locally, and get a muscular g or hemorrhage.
Where	Muscles in the affected area. Gastrocnemius, Soleus, Tibialis Anterior and may feel uncomfortable in bony areas.	Peroneal muscles. Apply over muscles and soft tissue, the treatment
Dosage	3-6 treatments with 5-10 days interval	
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 3,0 Bar	1,8 Bar - 3,2 Bar
Pulses	2000	2000
Frequency	15 Hz / 14 Hz Mobile RPW	12 Hz / 12 Hz Mobile RPW
Transmitter	D 20	D 35
10	0.48 mJ/mm²	0.46 mJ/mm ²

40 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the located, but also causes "referred pain" in tissues supplied by nerves. A p trigger point causes the referred pain constantly.	e tissue, which affects not only the muscle where the trigger point is assive trigger point causes the referred pain if it is pressed, the active
Treatment	Work with the applicator on the trigger points with very small circular me	ovements.
Where	Localise the trigger points by duplicating the perceived pain pattern. The the point.	e taut band is often recognizable when you move the transmitter over
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a ge between 300-800 pulses on the same trigger point, higher values on a pa	eneral activation of surrounding muscles. Stretch after treatment. Use assive trigger point, lower values on an active trigger point.
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar
Pulses	1500	1500
Frequency	15 Hz	15 Hz
Transmitter	D 20	R 15
	0.48 mJ/mm ²	0.38 mJ/mm ²

Lower Leg & Ankle



42 Thigh & Knee

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43 Jumpers Knee – Muscular Treatment

About	Known as patellar tendinopathy or Jumpers Knee. With repeated strain like jumping movements, or overuse, micro-tears as well as collagen degeneration may occur in the patellar tendon insertion below the knee cap. Pressing the tendon in the affected area normally causes pain.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Quadriceps, Tensor Fascia Latae (Iliotib tract), Anterior Tibialis, Peroneal muscles. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a RPW treatment of the painful points.
Intensity	2,0 Bar - 3,0 Bar
Pulses	2500
Frequency	15 Hz / 14 Hz Mobile RPW
Transmitter	D 20
	0.48 mJ/mm ²

44 Jumpers Knee I

About	Known as patellar tendinopathy or Jumpers Knee. With repeated strain like jumping movements, or overuse, micro-tears as well as collagen degeneration may occur in the patellar tendon insertion below the knee cap. Pressing the tendon in the affected area normally causes pain.	
Treatment	Work with the applicator on the pain points with very small circular movements. In extension, lift apex patella by pressing and pushing Patella from cranial direction.	
Where	Localise the painful points on the tendon.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.	
Intensity	1,6 Bar - 2,6 Bar	
Pulses	2000	
Frequency	15 Hz	
Transmitter	R 15	
	0.38 mJ/mm ²	

Thigh & Knee

45 Jumpers Knee II

About	Known as patellar tendinopathy or Jumpers Knee. With repeated strain like jumping movements, or overuse, micro-tears as well as collagen degeneration may occur in the patellar tendon insertion below the knee cap. Pressing the tendon in the affected area normally causes pain.
Treatment	Work with the applicator on the pain points with very small circular movements. In extension, lift apex patella by pressing and pushing Patella from cranial direction.
Where	Localise the painful points on the tendon.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,6 Bar - 3,0 Bar
Pulses	2000
Frequency	15 Hz / 14 Hz Mobile RPW
Transmitter	R 15
	0.38 mJ/mm ²

46 Runners Knee – Muscular Treatment

About	The Ilio Tibial Band (ITB) is a fibrous connective tissue which attaches at the top of both the Iliac and the Tensor. It then inserts into the outer surface of the Tibia. As the ITB passes over the lateral epicondyle of the Femur it is prone to friction. For people who run regularly, the friction can create a painful condition where this sensitive area of the ITB causes pain if palpated.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	Tensor Fascia Latae (Iliotib tract), Quadriceps vastus lateral, Anterior Tibial. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a RPW treatment of the painful points.	
Intensity	2,0 Bar - 3,0 Bar	
Pulses	2500	
Frequency	15 Hz / 14 Hz Mobile RPW	
Transmitter	D 20	
	0.48 mJ/mm ²	

Thigh & Knee

47 Runners Knee I

About	The Ilio Tibial Band (ITB) is a fibrous connective tissue which attaches at the top of both the Iliac and the Tensor. It then inserts into the outer surface of the Tibia. As the ITB passes over the lateral epicondyle of the Femur it is prone to friction. For people who run regularly, the friction can create a painful condition where this sensitive area of the ITB causes pain if palpated.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise the painful points on the tendon.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,6 Bar - 2,6 Bar
Pulses	2000
Frequency	15 Hz
Transmitter	R 15



48 Runners Knee II

About	The Ilio Tibial Band (ITB) is a fibrous connective tissue which attaches at the top of both the Iliac and the Tensor. It then inserts into the outer surface of the Tibia. As the ITB passes over the lateral epicondyle of the Femur it is prone to friction. For people who run regularly, the friction can create a painful condition where this sensitive area of the ITB causes pain if palpated.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise the painful points on the tendon.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,6 Bar - 3,0 Bar
Pulses	2000
Frequency	15 Hz / 14 Hz Mobile RPW
Transmitter	R15
	0.38 mJ/mm ²

0 - 40 mm

Thigh & Knee

49 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage*.
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. To improve drainage, move the V-ACTOR® in the same direction as the lymphatic drainage system.
Where	Quadriceps and Hamstrings muscles
Dosage	3-6 treatments, 3-10 days interval
Intensity	2,4 Bar - 3,6 Bar
Pulses	6000 - Could vary between 2000-6000 depending on treatment area
Frequency	35 Hz
Transmitter	V 40 is recommended for larger areas and larger muscle groups, V 25 for smaller muscle groups and more integrated trigger points.



*Not offered on Mobile RPW

50 General Muscle Sprain/Strain, Thigh Muscles

About	Sprains and strains are among the most common orthopaedic injuries. Sprains describe an injury to a ligament and strains describe an injury to muscle. Strains can range in severity, from a very small tear to a complete rupture. Hamstring strains are common in sprinters and hurdle jumpers, and in the Quadriceps, the Rectus Femoris is most susceptible to injury.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation. Do not treat in the acute phase or if there is ongoing bleeding or hemorrhage.	
Where	Quadriceps, Hamstrings and Tensor Fasciae Latae. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	2,0 Bar - 3,0 Bar	
Pulses	2000	
Frequency	15 Hz / 14 Hz Mobile RPW	
Transmitter	D 20	
	0.48 mJ/mm ²	

Thigh & Knee

51 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the tissue, which affects not only the muscle where the trigger point is located, but also causes "referred pain" in tissues supplied by nerves. A passive trigger point causes the referred pain if it is pressed, the active trigger point causes the referred pain constantly.		
Treatment	Work with the applicator on the trigger points with very small circular me	ovements.	
Where	Localise the trigger points by duplicating the perceived pain pattern. The taut band is often recognizable when you move the transmitter over the point.		
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles. Stretch after treatment. Use between 300-800 pulses on the same trigger point, higher values on a passive trigger point, lower values on an active trigger point.		
	Alternative 1	Alternative 2	
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar	
Pulses	1500	1500	
Frequency	15 Hz	15 Hz	
Transmitter	D 20	R 15	
	0.48 mJ/mm ²	0.38 mJ/m ²	

52 Pelvis & Hip



Pelvis & Hip

53 Pelvis & Hip

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54 Trochanteric Insertional Tendonitis – Muscular Treatment

About	Tendonitis can occur in any of the tendons that surround the hip joint. The most frequently encountered tendonitis around the hip is the lliotibial (IT) band. Pressing the tendon in the affected area normally causes pain.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	Tensor Fascia Latae (Iliotib tract), Quadriceps (Vastus lateralis), Gluteal muscles. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a RPW treatment of the painful points.	
Intensity	2,0 Bar - 3,0 Bar	
Pulses	2500	
Frequency	15 Hz / 14 Hz Mobile RPW	
Transmitter	D 20	
	0.48 mJ/mm ²	



55 Trochanteric Insertional Tendonitis I

About	Tendonitis can occur in any of the tendons that surround the hip joint. The most frequently encountered tendonitis around the hip is the lliotibial (IT) band. Pressing the tendon in the affected area normally causes pain.	
Treatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise and treat the most painful points.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a ge	eneral activation of surrounding muscles.
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 3,2 Bar	2,0 Bar - 4,0 Bar
Pulses	2000	2000
Frequency	20 Hz / 12 Hz Mobile RPW	15 Hz
Transmitter	DI 15	R 15
	0.63 mJ/mm ²	0.38 mJ/mm ²

56 Trochanteric Insertional Tendonitis II

About	Tendonitis can occur in any of the tendons that surround the hip joint. The most frequently encountered tendonitis around the hip is the lliotibial (IT) band. Pressing the tendon in the affected area normally causes pain.	
Treatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise and treat the most painful points.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a ge	neral activation of surrounding muscles.
	Alternative 1	Alternative 2
Intensity	2,0 Bar - 3,6 Bar	2,0 Bar - 4,5 Bar
Pulses	2000	2000
Frequency	20 Hz / 10 Hz Mobile RPW	15 Hz
Transmitter	DI 15	R 15
	0.63 mJ/mm ²	0.38 mJ/mm ²
	0-60 mm	0 - 40 mm

Pelvis & Hip

57 Bursitis – Muscular Treatment

About	The trochanteric bursa rests between the Trochanter major and the lliotibial band. The bursal sac becomes inflamed, or irritated from trauma or repetitive friction. Each time the tendon has to move over the bone, pain results. Pressing the tendon in the affected area normally causes pain.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation. Do not treat in the acute phase when there is an active inflammation, ongoing bleeding or hemorrhage.
Where	Tensor Fascia Latae (lliotib tract), Quadriceps (Vastus lateralis), Gluteal muscles. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 3,4 Bar
Pulses	2000
Frequency	15 Hz / 11 Hz Mobile RPW
Transmitter	D 20



58 Piriformis Syndrome – Muscular Treatment

About	The Piriformis muscle is a deep buttock muscle that rotates the leg outwards. The sciatic nerve runs very close to it, and a tight Piriformis put pressure on, or irritates the nerve, causing pain (sometimes radiating) as a result. Tight adductor muscles is common among these patients, combine treatment with stretching.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation. Do not treat in the acute phase when there is an active inflammation, ongoing bleeding or hemorrhage.
Where	Gluteal muscles (Medius and Maximus), Piriformis, Hamstrings, Tensor Fasciae Latae. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 3,4 Bar
Pulses	2000
Frequency	15 Hz / 11 Hz Mobile RPW
Transmitter	D 20



59 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage*.
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. For improving drainage, move the V-ACTOR® in the same direction as the lymphatic drainage system.
Where	Gluteal muscles, Hamstrings and Tensor Fasciae Latae
Dosage	3-6 treatments, 3-10 days interval
Intensity	2,4 Bar - 3,6 Bar
Pulses	6000 - Could vary between 2000-6000 depending on treatment area
Frequency	35 Hz
Transmitter	V 40 is recommended for larger areas and larger muscle groups, V 25 for smaller muscle groups and more integrated trigger points.



*Not offered on Mobile RPW

60 Cellulite Treatment

About	Despite the fact that cellulite is not considered a disease, but purely a cosmetic problem, it is very common among post pubertal women. It is a non inflammatory, degenerative condition where the adipose tissue and microcirculation in the hypodermis alters and causes fibrosclerosis in the connective tissue. The skin gets an "orange peel" appearance. Cellulite appears in 3 stages: Stage I: "Orange peel appearance on pinching the skin" Stage II: "Orange peel appearance visible when standing" Stage III: "Orange peel skin while standing and lying down"
Treatment	Use enough coupling gel in the area to ensure good transmission. Always move the hand piece in the direction of the lymph flow. A 3-5 minute session with V-ACTOR® massage after a treatment, is recommended*.
Where	Treat the affected areas like buttocks and thighs.
Dosage	Use more pulses and higher energy levels for more severe stages of cellulite, but be sure that a session never is painful for the client. 8-12 treatment sessions in total, 1-2 times a week. Always let the body rest 2-3 days between treatments.

*Not offered on Mobile RPW

Continued over...

61 Cellulite Treatment (Cont.)

	Alternative 1 Deeper penetration	Alternative 2
Intensity	2,0 Bar - 3,2 Bar	2,6 Bar - 4,2 Bar
Pulses	2000 (Stage III) 1500 (Stage II) 1000 (Stage I)	3000 (Stage III) 2500 (Stage I and II)
Frequency	12 Hz	12 Hz
Transmitter	DI 15	D 20
	0.63 mJ/mm ²	0.48 mJ/mm ²

62 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the tissue, which affects not only the muscle where the trigger point is located, but also causes "referred pain" in tissues supplied by nerves. A passive trigger point causes the referred pain if it is pressed, the active trigger point causes the referred pain constantly.	
Treatment	Work with the applicator on the trigger points with very small circular movements.	
Where	Localise the trigger points by duplicating the perceived pain pattern. The taut band is often recognizable when you move the transmitter over the point.	
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles. Stretch after treatment. Use between 300-800 pulses on the same trigger point, higher values on a passive trigger point, lower values on an active trigger point.	
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar
Pulses	1500	1500
Frequency	15 Hz	15 Hz
Transmitter	D 20	R 15
	0.48 mJ/mm ²	0.38 mJ/mm ²

63 Lower Back



64 Lower Back

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65 Lower Back – Muscular Treatment

About	Muscle strains are one of the most common causes of lower back pain. Most lumbar muscle strains and sprains cause symptoms isolated to the lower back, usually they do not cause radiating pain in the legs like some other spine conditions. The most common symptoms of a lumbar strain or sprain are muscle spasm and pain around the lower back and upper buttocks.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Gluteal muscles (Medius and Maximus). Along the Pelvic rim, Piriformis, Longissimus dorsi, Quadratus lumborum. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,2 Bar - 3,2 Bar
Pulses	2500
Frequency	15 Hz / 12 Hz Mobile RPW
Transmitter	D 20



66 Lower Back I

About	Muscle strains are one of the most common causes of lower back pain. Most lumbar muscle strains and sprains cause symptoms isolated to the lower back, usually they do not cause radiating pain in the legs like some other spine conditions. The most common symptoms of a lumbar strain or sprain are muscle space and pain around the lower back and upper buttocks.	
Ireatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise and treat the painful points. Treat along the Pelvic rim where the Gluteal muscles inserts.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.	
Intensity	2,0 Bar - 3,4 Bar	
Pulses	1500	
Frequency	17 Hz / 11 Hz Mobile RPW	
Transmitter	R15	
	0.38 mJ/mm ²	



67 Lower Back II

About	Muscle strains are one of the most common causes of lower back pain. Most lumbar muscle strains and sprains cause symptoms isolated to the lower back, usually they do not cause radiating pain in the legs like some other spine conditions. The most common symptoms of a lumbar strain or sprain are muscle spasm and pain around the lower back and upper buttocks.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the painful points. Treat along the Pelvic rim where the Gluteal muscles inserts.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	2,0 Bar - 4,0 Bar
Pulses	1500
Frequency	17 Hz / 8 Hz Mobile RPW
Transmitter	R 15



68 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage*.	
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. To improve drainage, move the V-ACTOR* in the same direction as the lymphatic drainage system.	
Where	Gluteal muscles, Longissimus dorsi and lower back muscles	
Dosage	3-6 treatments, 3-10 days interval	
Intensity	2,4 Bar - 3,6 Bar	
Pulses	6000 - Could vary between 2000-6000 depending on treatment area	
Frequency	35 Hz	
Transmitter	V 40 is recommended for larger areas and larger muscle groups, V 25 for smaller muscle groups and more integrated trigger points.	
	Not offered on Mobile RPW	

69 Lumbalgia – Activation of Muscles and Connective Tissue

About	Lumbago is the term used to describe general lower back pain. Most lumbar muscle strains and sprains cause symptoms isolated to the lower back, usually they do not cause radiating pain in the legs like some other spine conditions. The most common symptoms of a lumbar strain or sprain are muscle spasm and pain around the lower back and upper buttocks.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Lumbar area, Gluteal muscles (Medius and Maximus), Longissimus dorsi. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas. The intensity of the treatment can vary from the pressure the therapist applies on the applicator.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 3,2 Bar
Pulses	2500
Frequency	15 Hz / 12 Hz Mobile RPW
Transmitter	D 20



70 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the tissue, which affects not only the muscle where the trigger point is located, but also causes "referred pain" in tissues supplied by nerves. A passive trigger point causes the referred pain if it is pressed, the active trigger point causes the referred pain constantly.	
Treatment	Work with the applicator on the trigger points with very small circular movements.	
Where	Localise the trigger points by duplicating the perceived pain pattern. The taut band is often recognizable when you move the transmitter over the point.	
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles. Stretch after treatment. Use between 300-800 pulses on the same trigger point, higher values on a passive trigger point, lower values on an active trigger point.	
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar
Pulses	1500	1500
Frequency	15 Hz	15 Hz
Transmitter	D 20	R 15
	0.48 mJ/mm ²	0.38 mJ/mm ²


72 Upper Back

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73 Thoracic Back Pain – Muscular Treatment

About	Thoracic back pain is often correlated to posture, where an exaggerated Kyphosis together with a long period of static muscle work could trigger the pain. The most common symptoms of a thoracic strain or sprain are muscle spasm and pain in the upper back. The pain often causes a secondary imbalance of the surrounding neck and thoracic muscles.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Longissimus dorsi, Trapezius, Rhomboids and Levator Scapulae. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 3,0 Bar
Pulses	2500
Frequency	15 Hz / 14 Hz Mobile RPW
Transmitter	D 20
	0.48 mJ/mm ²



74 Thoracic Back Pain I

About	Thoracic back pain is often correlated to posture, where an exaggerated Kyphosis together with a long period of static muscle work could trigger	
	the pain. The most common symptoms of a thoracic strain or sprain are muscle spasm and pain in the upper back. The pain often causes a	
	secondary imbalance of the surrounding neck and thoracic muscles.	
Treatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise and treat the painful points.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.	
Intensity	1,8 Bar - 3,2 Bar	
Pulses	1500	
Frequency	17 Hz / 12 Hz Mobile RPW	
Transmitter	R15	
	0.38 mJ/mm ²	
	U - 40 mm	

75 Thoracic Back Pain II

About	Thoracic back pain is often correlated to posture, where an exaggerated Kyphosis together with a long period of static muscle work could trigger the pain. The most common symptoms of a thoracic strain or sprain are muscle spasm and pain in the upper back. The pain often causes a secondary imbalance of the surrounding neck and thoracic muscles.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	2,0 Bar - 3,6 Bar
Pulses	1500
Frequency	17 Hz / 10 Hz Mobile RPW
Transmitter	R15
	0.38 mJ/mm ²

76 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage*.
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. To improve drainage, move the V-ACTOR® in the same direction as the lymphatic drainage system.
Where	Longissimus dorsi, Rhomboids, Trapezius and Levator Scapulae
Dosage	3-6 treatments, 3-10 days interval
Intensity	2,4 Bar - 3,6 Bar
Pulses	6000 - Could vary between 2000-6000 depending on treatment area
Frequency	35 Hz
Transmitter	V 40 is recommended for larger areas and larger muscle groups, V 25 for smaller muscle groups and more integrated trigger points.
	*Not offered on Mobile RPW

77 Dorsalgia – Activation of Muscles and Connective Tissue

About	Dorsalgia is the term used to describe general upper back pain. The most common symptoms of a thoracic strain or sprain are muscle spasm and pain in the upper back especially between the shoulder blades. The pain often causes a secondary imbalance of the surrounding neck and thoracic muscles.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Longissimus dorsi, Rhomboids, Trapezius and Levator Scapulae Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 3,0 Bar
Pulses	2500
Frequency	15 Hz / 14 Hz Mobile RPW
Transmitter	D 20
	0.48 mJ/mm ²

78 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the located, but also causes "referred pain" in tissues supplied by nerves. A partrigger point causes the referred pain constantly.	e tissue, which affects not only the muscle where the trigger point is assive trigger point causes the referred pain if it is pressed, the active
Treatment	Work with the applicator on the trigger points with very small circular mo	ovements.
Where	Localise the trigger points by duplicating the perceived pain pattern. The the point.	taut band is often recognizable when you move the transmitter over
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a ge between 300-800 pulses on the same trigger point, higher values on a pa	neral activation of surrounding muscles. Stretch after treatment. Use assive trigger point, lower values on an active trigger point.
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar
Pulses	1500	1500
Frequency	15 Hz	15 Hz
Transmitter	D 20	R 15
	0.48 mJ/mm ²	0.38 mJ/mm ²





80 Neck

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81 Cervicobrachial Neuralgia – Muscular Treatment

About	Cervical pain can often affect the shoulder and arm with numbness, wea muscles, disc damage, or formation of bony deposits. If the cause is tight indication both neck, upper back and shoulder muscles can be affected,	kness or radiating pain. The nerve entrapment can be caused by tight muscles with painful points, RPW therapy can be an alternative. For this and if so, treated.
Treatment	General activation and smoothing of surrounding muscles and connecti relaxation. Do not treat in the acute phase or if there is ongoing bleeding	ve tissue in order to increase circulation locally, and get a muscular g or hemorrhage.
Where	Muscles in the affected area. Deltoid muscle, Trapezius, Levator Scapulae tissue, the treatment may feel uncomfortable in bony areas.	, Pectorals and Coracobrachial muscles. Apply over muscles and soft
Dosage	3-6 treatments with 5-10 days interval	
	Alternative 1	Alternative 2
Intensity	2,0 Bar - 3,0 Bar	2,0 Bar - 3,0 Bar
Pulses	5000 (2000-5000 depending on treatment area)	4000 (2000-4000 depending on treatment area)
Frequency	15 Hz / 14 Hz Mobile RPW	18 Hz / 14 Hz Mobile RPW
Transmitter	D 20	D 35
	0.48 mJ/mm ²	0.46 mJ/m ²

82 Cervicobrachial Neuralgia I

About	Cervical pain can often affect the shoulder and arm with numbness, weakness or radiating pain. The nerve entrapment can be caused by tight muscles, disc damage, or formation of bony deposits. If the cause is tight muscles with painful points, RPW therapy can be an alternative. For this indication both neck, upper back and shoulder muscles can be affected, and if so, treated.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,4 Bar - 2,2 Bar
Pulses	1500
Frequency	15 Hz
Transmitter	R 15
	0.38 mJ/mm ²

83 Cervicobrachial Neuralgia II

About	Cervical pain can often affect the shoulder and arm with numbness, weakness or radiating pain. The nerve entrapment can be caused by tight muscles, disc damage, or formation of bony deposits. If the cause is tight muscles with painful points, RPW therapy can be an alternative. For this indication both neck, upper back and shoulder muscles can be affected, and if so, treated.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,6 Bar - 2,6 Bar
Pulses	1500
Frequency	15 Hz
Transmitter	R 15



84 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage. The V-ACTOR® applicator is not available for the Mobile RPW.
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. For improving drainage, move the V-ACTOR® in the same direction as the lymphatic drainage system.
Where	Trapezius and Levator Scapulae
Dosage	3-6 treatments, 3-10 days interval
Intensity	2,4 Bar - 3,4 Bar
Pulses	5000 - Could vary between 2000-6000 depending on treatment area
Frequency	30 Hz
Transmitter	V 25 for smaller muscle groups and more integrated trigger points. V 40 is recommended for larger areas and larger muscle groups.
	Not offered on Mobile RPW

85 Trapezius Tension – Muscular Treatment

About	A common cause of neck pain and headache is Trapezius tension caused by poor posture, static muscle work and stress. The vicious circle is triggered by the tension in the muscle that prevents normal blood flow and affects the microcirculation. Secondary to this, more pain and tension occurs.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	Trapezius and Levator Scapulae. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	2,0 Bar - 2,6 Bar	
Pulses	3500	
Frequency	15 Hz	
Transmitter	D 20	
	0.48 mJ/mm ²	

86 Tension Headache – Muscular Treatment

About	Tension-type headaches cause a dull aching pain that people describe as a band around their heads radiating to their neck. Tension headaches are the most common types of headaches occurring among people between 20-50 years of age, and more often among women. A side effect from frequent intake of analgetics is the risk of "rebound headache", where the headache occurs when the analgetic dose wears off.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation. Combine the RPW treatment with stretching and physical exercise.
Where	Trapezius and Levator Scapulae and Rhomboids. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 2,6 Bar
Pulses	3500
Frequency	15 Hz
Transmitter	D 20
	0.48 mJ/mm ²

87 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the located, but also causes "referred pain" in tissues supplied by nerves. A p trigger point causes the referred pain constantly.	e tissue, which affects not only the muscle where the trigger point is assive trigger point causes the referred pain if it is pressed, the active
Treatment	Work with the applicator on the trigger points with very small circular me	ovements.
Where	Localise the trigger points by duplicating the perceived pain pattern. The the point.	e taut band is often recognisable when you move the transmitter over
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a ge between 300-800 pulses on the same trigger point, higher values on a pa	eneral activation of surrounding muscles. Stretch after treatment. Use assive trigger point, lower values on an active trigger point.
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar
Pulses	1500	1500
Frequency	15 Hz	15 Hz
Transmitter	D 20	R 15
	0.48 mJ/mm ²	0.38 mJ/mm ²

88 Shoulder



Shoulder

	89	Shoulder	
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90 Calcified Tendonitis Shoulder – Muscular Treatment

About	A condition that causes the formation of a small calcium deposit, usually 1-2 cm in size, within the tendons of the rotator cuff. These deposits are usually found in patients at least 30-40 years old, and there is a higher incidence of this condition in diabetics.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	Supraspinatus, Infraspinatus, Deltoideus, Trapezius and Levator Scapulae. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	2,0 Bar - 2,8 Bar	
Pulses	2000	
Frequency	15 Hz	
Transmitter	D 20	
	0.48 mJ/mm ²	

91 Calcified Tendonitis Shoulder I

About	A condition that causes the formation of a small calcium deposit, usually 1-2 cm in size, within the tendons of the rotator cuff. These deposits are usually found in patients at least 30-40 years old, and there is a higher incidence of this condition in diabetics.	
Treatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise and treat the most painful points.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.	
	Alternative 1	Alternative 2
Intensity	1,4 Bar - 3,2 Bar	1,6 Bar - 3,6 Bar
Pulses	2000	2000
Frequency	20 Hz / 12 Hz Mobile RPW	15 Hz / 10 Hz Mobile RPW
Transmitter	DI 15	R 15



92 Calcified Tendonitis Shoulder II

About	A condition that causes the formation of a small calcium deposit, usually 1-2 cm in size, within the tendons of the rotator cuff. These deposits are usually found in patients at least 30-40 years old, and there is a higher incidence of this condition in diabetics.	
Treatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise and treat the most painful points.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.	
	Alternative 1	Alternative 2
Intensity	1,6 Bar - 3,4 Bar	1,8 Bar - 4,0 Bar
Pulses	2000	1500
Frequency	20 Hz / 11 Hz Mobile RPW	15 Hz / 8 Hz Mobile RPW
Transmitter	DI 15	R 15



Shoulder

93 Shoulder Pain – Muscular Treatment

About	Shoulder pain is a common complaint with many causes. For instance the pain can come from a cervical disorder, tendonitis, impingement or a trauma. Always be sure that a complete examination and a correct diagnosis is made, prior to your treatment.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Supraspinatus, Infraspinatus, Deltoideus, Trapezius, Levator Scapulae, Teres minor and Pectorals. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 2,8 Bar
Pulses	2000
Frequency	15 Hz
Transmitter	D 20
	0.48 mJ/mm ²

94 Shoulder Pain I

About	Shoulder pain is a common complaint with many causes. For instance the pain can come from a cervical disorder, tendonitis, impingement or a trauma. Always be sure that a complete examination and a correct diagnosis is made, prior to your treatment.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,8 Bar - 3,2 Bar
Pulses	1500
Frequency	15 Hz / 12 Hz Mobile RPW
Transmitter	R 15



95 Shoulder Pain II

About	Shoulder pain is a common complaint with many causes. For instance the pain can come from a cervical disorder, tendonitis, impingement or a trauma. Always be sure that a complete examination and a correct diagnosis is made, prior to your treatment.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	2,0 Bar - 3,6 Bar
Pulses	1500
Frequency	15 Hz / 10 Hz Mobile RPW
Transmitter	R 15



96 Frozen Shoulder – Muscular Treatment

About	Also called "adhesive capsuliitis," this is a common condition that leads to stiffness of the joint. Typically, it affects patients with endocrine disorders between 40-60 years, and is twice as common in women. The cause for this condition is not fully known (idiopathic), but sometimes it can be triggered by a trauma. It's a slow recovery process, but most cases will resolve over a 1-2 year period.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Supraspinatus, Infraspinatus, Deltoideus, Trapezius, Levator Scapulae, Teres minor and Pectorals. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 2,8 Bar
Pulses	3000
Frequency	15 Hz
Transmitter	D 20
	0.48 mJ/mm ²

97 Frozen Shoulder I

About	Also called "adhesive capsuliitis," this is a common condition that leads to stiffness of the joint. Typically, it affects patients with endocrine disorders between 40-60 years, and is twice as common in women. The cause for this condition is not fully known (idiopathic), but sometimes it can be triggered by a trauma. It's a slow recovery process, but most cases will resolve over a 1-2 year period.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,6 Bar - 3,6 Bar
Pulses	2000
Frequency	20 Hz / 10 Hz Mobile RPW
Transmitter	R 15



98 Frozen Shoulder II

About	Also called "adhesive capsuliitis," this is a common condition that leads to stiffness of the joint. Typically, it affects patients with endocrine disorders between 40-60 years, and is twice as common in women. The cause for this condition is not fully known (idiopathic), but sometimes it can be triggered by a trauma. It's a slow recovery process, but most cases will resolve over a 1-2 year period.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles.
Intensity	1,8 Bar - 4,0 Bar
Pulses	2000
Frequency	20 Hz / 8 Hz Mobile RPW
Transmitter	R 15



99 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage*.
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. To improve drainage, move the V-ACTOR® in the same direction as the lymphatic drainage system.
Where	Trapezius, Levator Scapulae, Supraspinatus, Infraspinatus, Pectoral and Deltoid muscles
Dosage	3-6 treatments, 3-10 days interval
Intensity	2,4 Bar - 3,4 Bar
Pulses	7000 - Could vary between 2000-7000 depending on treatment area
Frequency	30 Hz
Transmitter	V 25 for smaller muscle groups and more integrated trigger points. V 40 is recommended for larger areas and larger muscle groups.



*Not offered on Mobile RPW

100 Bursitis – Muscular Treatment

About	Primary inflammation of the subacromial bursa is relatively rare. Subacromial bursitis arises as a result of complex factors, thought to cause shoulder impingement symptoms. Impingement syndrome occurs when there is inflammation of the rotator cuff tendons and the bursa	
	between the top of the Humerus and the Acromion. The structures become impinged.	
Ireatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	Supraspinatus, Infraspinatus, Deltoideus and Trapezius. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	2,0 Bar - 2,8 Bar	
Pulses	2000	
Frequency	15 Hz	
Transmitter	D 20	
	0.48 mJ/mm ²	

101 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the located, but also causes "referred pain" in tissues supplied by nerves. A p trigger point causes the referred pain constantly.	e tissue, which affects not only the muscle where the trigger point is assive trigger point causes the referred pain if it is pressed, the active
Treatment	Work with the applicator on the trigger points with very small circular me	ovements.
Where	Localise the trigger points by duplicating the perceived pain pattern. The the point.	e taut band is often recognizable when you move the transmitter over
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a ge between 300-800 pulses on the same trigger point, higher values on a pa	eneral activation of surrounding muscles. Stretch after treatment. Use assive trigger point, lower values on an active trigger point.
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar
Pulses	1500	1500
Frequency	15 Hz	15 Hz
Transmitter	D 20	R 15
	0.48 mJ/mm ²	0.38 mJ/m² 0 - 40 mm



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104 Ulnar / Medial Epicondylitis (Golfer's Elbow) – Muscular Treatment

About	Golfer's elbow, or medial epicondylitis is an injury caused by repetitive stress of the muscles and tendons of the forearm, leading to inflammation and pain gradually developing around the elbow joint. Tender points are around the medial epicondyle of the insertion of the flexor muscles.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	Flexor Carpi Radialis, Flexor Carpi Ulnaris, Palmaris Longus, Flexor Digitorum, pronator teres and Biceps. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	2,0 Bar - 2,6 Bar	
Pulses	2000	
Frequency	15 Hz	
Transmitter	D 20	
	0.48 mJ/mm ²	

Upper Arm & Elbow

105 Ulnar / Medial Epicondylitis (Golfer's Elbow) I

About	Golfer's elbow, or medial epicondylitis is an injury caused by repetitive stress of the muscles and tendons of the forearm, leading to inflammation and pain gradually developing around the elbow joint. Tender points are around the medial epicondyle of the insertion of the flexor muscles.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.
Intensity	1,4 Bar - 2,4 Bar
Pulses	1500
Frequency	15 Hz
Transmitter	R 15
	0.38 mJ/mm ²

106 Ulnar / Medial Epicondylitis (Golfer's Elbow) II

About	Golfer's elbow, or medial epicondylitis is an injury caused by repetitive stress of the muscles and tendons of the forearm, leading to inflammation and pain gradually developing around the elbow joint. Tender points are around the medial epicondyle of the insertion of the flexor muscles.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.
Intensity	1,6 Bar - 2,6 Bar
Pulses	1500
Frequency	15 Hz
Transmitter	R 15





107 Radial / Lateral Epicondylitis (Tennis Elbow) – Muscular Treatment

About	Tennis elbow, or lateral epicondylitis is an injury caused by repetitive stress of the muscles and tendons of the forearm, leading to inflammation and pain gradually developing around the elbow joint. Lateral epicondylitis occurs most commonly in the tendon of extensor carpi radialis 2 cm below the elbow joint. Tender points are around the lateral epicondyle of the insertion of the extensor muscles.
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.
Where	Extensor Carpi Radialis, Extensor digitorum, Brachialis, triceps. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.
Dosage	3-6 treatments with 5-10 days interval
Intensity	2,0 Bar - 2,6 Bar
Pulses	2000
Frequency	15 Hz
Transmitter	D 20
	0.48 mJ/mm ²
108 Radial / Lateral Epicondylitis (Tennis Elbow) I

About	Tennis elbow, or lateral epicondylitis is an injury caused by repetitive stress of the muscles and tendons of the forearm, leading to inflammation and pain gradually developing around the elbow joint. Lateral epicondylitis occurs most commonly in the tendon of extensor carpi radialis 2 cm below the elbow joint. Tender points are around the lateral epicondyle of the insertion of the extensor muscles.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.
Intensity	1,4 Bar - 2,4 Bar
Pulses	1500
Frequency	15 Hz
Transmitter	R 15
	0.38 mJ/mm ²

109 Radial / Lateral Epicondylitis (Tennis Elbow) II

About	Tennis elbow, or lateral epicondylitis is an injury caused by repetitive stress of the muscles and tendons of the forearm, leading to inflammation and pain gradually developing around the elbow joint. Lateral epicondylitis occurs most commonly in the tendon of extensor carpi radialis 2 cm below the elbow joint. Tender points are around the lateral epicondyle of the insertion of the extensor muscles.
Treatment	Work with the applicator on the pain points with very small circular movements.
Where	Localise and treat the most painful points.
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.
Intensity	1,6 Bar - 2,6 Bar
Pulses	1500
Frequency	15 Hz
Transmitter	R 15
	0.38 mJ/mm ²

110 Massage – Vibration Treatment

About	Vibration therapy feels very comfortable and is very well accepted by the patients. The vibrations affect the fluid in- and out flow within the tissue. Circulation increases locally and muscular relaxation is enhanced. The treatment can also be used to improve drainage, to treat post injury/ operative oedemas, or to improve lymphatic drainage*.
Treatment	Apply the treatment in the fiber direction over muscle or soft tissue areas. Cover large areas with broader movements and stay longer over integrated trigger points. To improve drainage, move the V-ACTOR® in the same direction as the lymphatic drainage system.
Where	Biceps and triceps brachii, Carpi extensors
Dosage	3-6 treatments, 3-10 days interval
Intensity	2,4 Bar - 3,4 Bar
Pulses	4000 - Could vary between 2000-6000 depending on treatment area
Frequency	30 Hz
Transmitter	V 25 for smaller muscle groups and more integrated trigger points. V 40 is recommended for larger areas and larger muscle groups.
	Not offered on Mobile RPW

111 Trigger Point Therapy

About	A trigger point is a tender nodule located in a taut band of muscles in the located, but also causes "referred pain" in tissues supplied by nerves. A p trigger point causes the referred pain constantly.	e tissue, which affects not only the muscle where the trigger point is assive trigger point causes the referred pain if it is pressed, the active
Treatment	Work with the applicator on the trigger points with very small circular me	ovements.
Where	Localise the trigger points by duplicating the perceived pain pattern. The the point.	e taut band is often recognizable when you move the transmitter over
Dosage	3-8 treatments with 5-10 days interval. Combine this treatment with a ge between 300-800 pulses on the same trigger point, higher values on a pa	eneral activation of surrounding muscles. Stretch after treatment. Use assive trigger point, lower values on an active trigger point.
	Alternative 1	Alternative 2
Intensity	1,8 Bar - 2,6 Bar	1,6 Bar - 2,4 Bar
Pulses	1500	1500
Frequency	15 Hz	15 Hz
Transmitter	D 20	R 15
	0.48 mJ/mm²	0.38 mJ/m ²



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114 Finger Tendonitis – Muscular Treatment

About	Overuse, repetitive work in combination with bad position can be the cause of finger pain with painful points along the insertions as a result. Always be sure that a complete examination and a correct diagnosis is made, prior to your treatment.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	The intrinsic muscles of the hand, central, thenar and the hypothenar muscle groups. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	2,0 Bar - 2,6 Bar	
Pulses	2000	
Frequency	15 Hz	
Transmitter	D 20	
	0.48 mJ/mm ²	

115 Finger Tendonitis I

About	Overuse, repetitive work in combination with bad position can be the cause of finger pain with painful points along the insertions as a result. Always be sure that a complete examination and a correct diagnosis is made, prior to your treatment.	
Treatment	Work with the applicator on the pain points with very small circular movements.	
Where	Localise and treat the most painful points.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.	
Intensity	1,4 Bar - 2,4 Bar	
Pulses	1000	
Frequency	5 Hz / 15 Hz Mobile RPW	
Transmitter	R 15	
	0.38 mJ/mm ²	

116 Finger Tendonitis II

Overuse, repetitive work in combination with bad position can be the cause of finger pain with painful points along the insertions as a result. Always be sure that a complete examination and a correct diagnosis is made, prior to your treatment.
Work with the applicator on the pain points with very small circular movements.
Localise and treat the most painful points.
3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.
1,6 Bar - 2,6 Bar
1000
5 Hz / 15 Hz Mobile RPW
R 15



117 Dupuytren's Contracture

About	Also known as "Palmar fibromatosis" is caused by underlaying contractures of the palmar fascia. Occurs most often in men over 40 with a family history of the condition. Typically Dig IV and V are affected. Treatment target is to soften and stretch the palmar aponeurosis tissue.	
Treatment	Work with the applicator with very small circular movements.	
Where	Localise and treat the on the fibrotic/contracture area.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.	
Intensity	1,4 Bar - 2,4 Bar	
Pulses	500	
Frequency	12 Hz / 15 Hz Mobile RPW	
Transmitter	R15	
	0.38 mJ/mm ²	

118 Dupuytren's Contracture – Muscular Treatment

About	Also known as "Palmar fibromatosis" is caused by underlaying contractures of the palmar fascia. Occurs most often in men over 40 with a family history of the condition. Typically Dig IV and V are affected. Treatment target is to soften and stretch the palmar aponeurosis tissue.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	The Palmar aponeurosis, intrinsic muscles and flex muscles of the hand. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	1,6 Bar - 2,4 Bar	
Pulses	1000	
Frequency	15 Hz	
Transmitter	D 20	
	0.48 mJ/mm ²	

119 De Quervain Syndrome

About	De Quervain's tenosynovitis is a condition that causes pain associated with movement of the thumb. It is an inflammation of the synovium of the abductor pollicis longus and extensor pollicis longus muscles as they pass through the wrist. Finkelstein's test shows positive.	
Treatment	Work with the applicator with very small circular movements.	
Where	Localise and treat the most painful points.	
Dosage	3-6 treatments with 5-10 days interval. Combine this treatment with a general activation of surrounding muscles and stretching.	
Intensity	1,4 Bar - 2,4 Bar	
Pulses	500	
Frequency	12 Hz / 15 Hz Mobile RPW	
Transmitter	R 15	
	0.38 mJ/mm ²	

120 De Quervain Syndrome – Muscular Treatment

About	De Quervain's tenosynovitis is a condition that causes pain associated with movement of the thumb. It is an inflammation of the synovium of the abductor pollicis longus and extensor pollicis longus muscles as they pass through the wrist. Finkelstein's test shows positive.	
Treatment	General activation and smoothing of surrounding muscles and connective tissue in order to get a muscular relaxation.	
Where	Extensor Pollicis Brevis, Abductor Pollicis Longus, intrinsic muscles of the hand. Apply over muscles and soft tissue, the treatment may feel uncomfortable in bony areas.	
Dosage	3-6 treatments with 5-10 days interval	
Intensity	1,6 Bar - 2,4 Bar	
Pulses	1000	
Frequency	15 Hz	
Transmitter	D 20	
	0.48 mJ/mm ²	

DJO Global la Guildford Business Park Guildford Surrey GU2 8XG ENGLAND Tel: + 44 (0) 1483 459 659 Fax: + 44 (0) 1483 459 470 www.DJOglobal.eu



Together in Motion ...