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Treatment Protocol
Warning: May cause serious burns. Do not use over sensitive skin areas. The unattended use of the CS1000 light therapy device by children or incapacitated persons may be dangerous.

- The Genesis CS-1000 is a therapeutic device and classified as a Class II medical device and it can be a potential hazard if used incorrectly.

- There are two main components to the Genesis CS-1000, the unit itself that contains the light source and the power cord that connects the energy source to the unit.

- Stop use of the unit and rest if the treatment area becomes hot.

- Do not immerse device or any part of the device in water or other liquid.

- Do not use if there is visible damage to the power cord and/or unit.

- Do not use if you are intoxicated or under the influence of drugs.

**Do not use if your device becomes non operational due to one of the following:**

- Enlarged air bubble in front of the light. If the liquid level in the front chamber appears to be dropping after several uses, contact Genesis Health Light about your concern, with a description of the change your unit has experienced.

- The fan stops functioning when the light is powered on. Turn it off, and contact the company for further instructions.

- Do not operate the light if there is an obvious leak of liquid from behind the glass, or if the glass has been noticeably damaged resulting from a drop onto a hard surface. Contact the company immediately.

- The light bulb does not turn on under normal operation conditions. (If misused, the bulb may break.) There is a 70°C cut-off system to prevent machine overheat. Leave unit off for 15 minutes to cool down internal airflow, the machine can come back to work.

- Regular light bulb life is rated at 2000 hrs.
Contraindications

- Do not treat over or aim into the eyes.

- Do not treat over the abdomen/developing fetus and pelvic girdle in a pregnant woman.

- Do not treat over the site of any known primary carcinoma or secondary metastasis.

- Do not treat directly over the thyroid gland.

- In patients who have had an organ transplant, care must be taken to monitor for any signs of transplant rejection/excess immune activity. Treatment should be discontinued if there is any sign of an adverse reaction.

- For patients who are photosensitive or darker skin tones, treatment may need to use low scale.

- Occasionally patients report post treatment fatigue/mild euphoria/mild nausea. This is usually due to endogenous opiate release that occasionally accompanies photomedicine. This very occasional response typically lasts up to 24-48 hours.

- There may occasionally be a temporary exacerbation of symptoms in patients who have chronic localized inflammation in musculoskeletal conditions, patients who have had a recent steroid (cortisone) injection or patients taking anti-inflammatories. This is likely to take the form of increased localized discomfort for 24-48 hours. Patients should be advised prior to treatment that there may be mild post-treatment soreness and monitored if appropriate.

- Treatment over tattoo may cause pain as the dye absorbs the light energy and can get hot.

- Treatment over the hairline may cause pain as the melanin in the fine superficial hair follicles absorb some light energy.
Complimentary Treatments:

Rest, ice, elevation, stretching, massage, strapping, support bandage, orthotics, modification in training habits (shoe wear and mileage). In acute inflammation, nutritional supplementation is usually beneficial during the course of the light therapy. Usually speaking, acute pain/sprain and strain should add ice treatment just after light for 5-10 minutes.
**Disorder Description:** Tendinitis (informally also tendonitis), meaning inflammation of a tendon (the suffix -itis denotes diseases characterized by inflammation), is a type of tendinopathy often confused with the more common tendinosis, which has similar symptoms but requires different treatment. The term tendinitis should be reserved for tendon injuries that involve larger-scale acute injuries accompanied by inflammation. Generally tendinitis is referred to by the body part involved, such as Achilles tendinitis (affecting the Achilles tendon).

**Treatment Position:**
1. High light 10 min or Low light 15 min over site of haematoma in the ankle or foot;
2. High light 10 min or Low light 15 min over the area under the ankle.
3. High light 10 min or Low light 15 min over the Achilles tendon

**Treatment Protocol:**

<table>
<thead>
<tr>
<th>Time: 30mins</th>
<th>Position: 3</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [ ] Desirable
- [ ] exceptional
- [ ] fully healed
**Disorder Description:** Also called swimmer’s shoulder; pitcher’s shoulder; shoulder impingement syndrome; tennis shoulder; rotator cuff tendinitis. Adhesive Capsulitis (Frozen shoulder) is when the shoulder is painful and loses motion because of inflammation. Rotator cuff tendinitis is an inflammation (irritation and swelling) of the tendons of the shoulder. Tendonitis occurs when a tendon becomes inflamed due to repetitive stress or an injury. It commonly occurs in the major joints of the body: the shoulder, elbow, wrist, hip, knee, or ankle. Tendonitis can be quite painful, especially during movement. Usually there is tenderness and sometimes swelling in the affected joint.

![Image of a human body with red dots indicating treatment areas.](image)

### Treatment Protocol:

**Time:** 50 mins  
**Position:** 5  
**Light:** High  
**Treatment Interval:** 1-2 time/day, 2-4 weeks

**Result:**  
- ☐ satisfactory  
- ☐ acceptable  
- ☐ Desirable  
- ☐ exceptional  
- ☐ fully healed
## Ankle arthritis

### Protocol Information

<table>
<thead>
<tr>
<th>Date</th>
<th>May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Disorder</td>
<td><strong>Ankle arthritis</strong></td>
</tr>
<tr>
<td>Developed By</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** Arthritis is inflammation of one or more joints, which results in pain, swelling, stiffness, and limited movement. Arthritis involves the breakdown of cartilage. Cartilage normally protects the joint, allowing for smooth movement. Cartilage also absorbs shock when pressure is placed on the joint, like when you walk. Without the usual amount of cartilage, the bones rub together, causing pain, swelling (inflammation), and stiffness. If you have arthritis, you may experience: joint pain, joint swelling, reduced ability to move the joint, redness of the skin around a joint, stiffness, warmth around a joint.

### Treatment Position:

1. High light 10 min or Low light 15 min over site of medial side of the ankle;
2. High light 10 min or Low light 15 min over the lateral side of the ankle.

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time</th>
<th>Position</th>
<th>Light</th>
<th>Treatment Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 mins</td>
<td>2</td>
<td>High</td>
<td>3-5 time/week, 4-8 weeks</td>
</tr>
</tbody>
</table>

### Result:

- [ ] satisfactory
- [ ] acceptable
- [X] Desirable
- [ ] exceptional
- [ ] fully healed
## Protocol Information

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Ankle pain</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
<tr>
<td>Signature:</td>
</tr>
</tbody>
</table>

## Protocol Description

**Disorder Description:** Ankle pain is often due to an ankle sprain. A sprain is an injury to the ligaments, which connect bones to one another. In most cases of ankle sprain, the ankle is twisted inward, causing small tears in the ligaments. This makes the ankle unstable. The tearing leads to swelling and bruising, making it difficult to bear weight on the joint.

### Treatment Position:

1. High light 10 min or Low light 15 min over site of haematoma in the ankle or foot;
2. High light 10 min or Low light 15 min over the area under the ankle.

**Note:** If ankle pain persists, seek professional diagnosis.

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time: 20mins</th>
<th>Position: 2</th>
<th>Light: High</th>
<th>Treatment Interval: 3-5 time/week, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
## Treatment Protocol

### Ankle Sprain

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Ankle Sprain</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

#### Protocol Description

**Disorder Description:** A sprain (possibly from Middle French espraindre, to squeeze) is an injury of joints that is caused by being stretched beyond their oversized capacity and possibly more. A muscular tear caused in the same manner is referred to as a strain. In cases where either ligament or muscle tissue is torn, immobilization and surgical repair may be necessary. Ligaments are tough, fibrous tissues that connect bones to other bones. Sprains can occur in any joint but are most common in the ankle and wrist.

#### Treatment Position:

1. High light 10 min or Low light 15 min over site of haematoma/bruise in the ankle or foot;
2. High light 10 min or Low light 15 min over the area under the ankle.

#### Treatment Protocol:

- **Time:** 20 mins
- **Position:** 2
- **Light:** High
- **Treatment Interval:** 1-2 time/day, 2-4 weeks

#### Result:

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
**Ankle Strain**

**Disorder Description:** An ankle strain is a common injury to the ankle. The most common way the ankle is injured is when the ankle is twisted inward (inversion injury). With this injury, ligaments that support the ankle can be torn which lead to swelling, inflammation, and bruising around the ankle. An ankle strain injury may take a few weeks to many months to fully heal.

**Treatment Protocol:**

6. Over sites of bruise/haematoma; 10 min with High
7. Lateral side of the ankle; 10 min with High
8. Popliteal knee; 10 min with High (if you have pain in the knee)

**Treatment Protocol:**

- **Time:** 20/30mins
- **Position:** 2/3
- **Light:** High
- **Treatment Interval:** 1-2 time/day, 2-4 weeks

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
### Protocol Information

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Anterior Cruciate Ligament Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developed By</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** An injury to the anterior cruciate ligament can be a debilitating musculoskeletal injury to the knee, seen most often in athletes. Non-contact tears and ruptures are the most common causes of ACL injury. ACL injury more commonly causes knee instability than injury to other knee ligaments. Injuries of the ACL range from mild such as small tears to severe when the ligament is completely torn. There are many ways the ACL can be torn; the most prevalent is when the knee is bent too much toward the back and when it goes too far to the side. Tears in the anterior cruciate ligament often take place when the knee receives a direct impact from the front while the leg is in a stable position, for example a standing football player is tackled sideways when his feet are firmly planted. Torn ACL’s are most often related to high impact sports or when the knee is forced to make sharp changes in movement and during abrupt stops from high speed.

**Treatment Position:**

1. High light 10 min or Low light 15 min over medial aspect of the knee
2. High light 10 min or Low light 15 min over lateral aspect of the knee
3. High light 10 min or Low light 15 min over popliteal (back of the knee)

**Note:** Most injuries of ACL will require professional treatment which may include surgery. The above protocols will accelerate healing process after surgery.

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time</th>
<th>Position</th>
<th>Light</th>
<th>Treatment Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>30mins</td>
<td>3</td>
<td>High</td>
<td>1-2 time/week, 2-4 weeks</td>
</tr>
</tbody>
</table>

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [ ] Desirable
- [ ] exceptional
- [ ] fully healed
### Protocol Information

<table>
<thead>
<tr>
<th>Disorder:</th>
<th>Back pain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developed By:</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By:</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** Back pain is a symptom. Common causes of back pain involve disease or injury to the muscles, bones, and/or nerves of the spine. Nerve root syndromes are those that produce symptoms of nerve impingement (a nerve is directly irritated), often due to a herniation (or bulging) of the disc between the lower back bones. Sciatica is an example of nerve root impingement. Impingement pain tends to be sharp, affecting a specific area, and associated with numbness in the area of the leg that the affected nerve supplies.

**Treatment Position:**

1. High light 10 min or Low light 15 min over affected spine area;
2. High light 10 min or Low light 15 min over affected lumbar muscle

*Note: If back pain persist, seek professional diagnosis.*

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time:</th>
<th>≥20 mins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position:</td>
<td>≥2</td>
</tr>
<tr>
<td>Light:</td>
<td>High</td>
</tr>
<tr>
<td>Treatment Interval:</td>
<td>5 time/week, 4-8 weeks</td>
</tr>
</tbody>
</table>

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [ ] Desirable
- [ ] exceptional
- [ ] fully healed
**Disorder Description:** The biceps muscle is in the front of upper arm. It helps to bend the elbow and rotate the forearm. It also helps keep the shoulder stable. The biceps tendons attach the biceps muscle to bones in the shoulder and in the elbow. If the biceps tendon tears at the elbow, patient will lose strength in the arm and be unable to forcefully turn the arm from palm down to palm up. Once torn, the biceps tendon at the elbow will not grow back to the bone and heal. Other arm muscles make it possible to bend the elbow fairly well without the biceps. However, they cannot fulfill all the functions, especially the motion of rotating the forearm from palm down to palm up. This is called supination. Significant, permanent weakness during supination will occur if this tendon is not surgically repaired. Biceps tendon tears can be either partial or complete. **Partial tears:** These tears do not completely sever the tendon. **Complete tears:** A complete tear will split the tendon into two pieces.

**Treatment Protocol:**

1. High light 20 min or Low light 30 min over the torn biceps tendon (elbow)

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
**Biceps Tendon Tear (Shoulder)**

**Treatment Protocol**

**PROTOCOL INFORMATION**

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Biceps Tendon Tear (Shoulder)</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

**PROTOCOL DESCRIPTION**

Disorder Description: The biceps muscle is in the front of the upper arm. It helps to bend the elbow and rotate the arm. It also helps keep the shoulder stable. Tendons attach muscles to bones. The biceps tendons attach the biceps muscle to bones in the shoulder and in the elbow. If the biceps tendon is torn at the shoulder, it may lose some strength in the arm and be unable to forcefully turn the arm from palm down to palm up. Many people can still function with a biceps tendon tear, and only need simple treatments to relieve symptoms. Some people require surgery to repair the torn tendon. Biceps tendon tears can be either partial or complete.

**Treatment Protocol:**

1. High light 20 min or Low light 30 min over the torn biceps tendon (shoulder)

| Time: 20mins | Position: 1 or more | Light: High | Treatment Interval: 1-2 time/day, 2-4 weeks |

**Result:**

- satisfactory
- acceptable
- Desirable
- exceptional
- fully healed
## Protocol Information

<table>
<thead>
<tr>
<th>Date</th>
<th>May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder</td>
<td>Bunion (Hallux valgus/Hallux abducto-valgus)</td>
</tr>
<tr>
<td>Developed By</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

## Protocol Description

**Disorder Description:** A bunion is an enlargement of bone or tissue around the joint at the head of the big toe (metatarsophalangeal joint). The big toe (hallux) may turn in toward the second toe (angulation), and the tissues surrounding the joint may be swollen and tender. The term is used to refer to the pathological bump on the side of the great toe joint. The bump is partly due to the swollen bursal sac and/or an osseous (bony) anomaly on the metatarsophalangeal joint (where the first metatarsal bone and hallux meet). The larger part of the bump is a normal part of the head of first metatarsal bone that has tilted sideways to stick out at its top.

### Treatment Position:

1. High light 15 min or Low light 20 min over site of the first metatarsophalangeal joint (big toe);
2. High light 15 min or Low light 20 min over the side area of the first metatarsophalangeal joint (big toe).

## Treatment Protocol:

<table>
<thead>
<tr>
<th>Time</th>
<th>30mins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Position</td>
<td>2</td>
</tr>
<tr>
<td>Light</td>
<td>High</td>
</tr>
<tr>
<td>Treatment Interval</td>
<td>1-2 time/day, 2-4 weeks</td>
</tr>
</tbody>
</table>

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
### Protocol Information

<table>
<thead>
<tr>
<th>DATE:</th>
<th>May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder:</td>
<td><strong>Carpal tunnel syndrome</strong></td>
</tr>
<tr>
<td>Developed By:</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By:</td>
<td>Dr. Paul Ziemer</td>
</tr>
<tr>
<td>Signature:</td>
<td></td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** Compression of the median nerve at the wrist due to thickening of the carpal tunnel resulting in paresthesia, discomfort and gradual reduced function of the first three digits. Gradual onset: palmar burning, tingling, or numbness in thumb, index and middle fingers. Fingers may feel swollen. Night symptoms—sufferers wake needing to move shake the hand. This may progress to daytime paresthesia, reduced grip strength may affect fine motor control of the hand and performance of manual tasks. Eventually the thenar muscles may waste.

**Treatment Position:**

1. High light 10 min or Low light 15 min over palm.
2. High light 10 min or Low light 15 min over carpal tunnel.
3. High light 10 min or Low light 15 min over elbow.

**Treatment Protocol:**

| Time: | 30mins |
| Position: | 3 |
| Light: | High |
| Treatment Interval: | 1-2 time/day, 4 weeks |

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
## Diabetic Foot Wound Healing

### Treatment Protocol

<table>
<thead>
<tr>
<th><strong>Disorder Description</strong></th>
<th>Diabetic foot wound healing can be accelerated by increasing temperature, blood supply and local oxygen ratio in operated area. These three factors are critical for tissue recovery process. Genesis light can improve nerve sensitivity in diabetic neuropathy.</th>
</tr>
</thead>
</table>

### Treatment Protocol:

1. High light 20 min or Low light 30 min over diabetic foot wound

<table>
<thead>
<tr>
<th>Time: 20mins</th>
<th>Position: 1 or more</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 8-12 weeks</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Result:</th>
<th>satisfactory</th>
<th>acceptable</th>
<th>Desirable</th>
<th>exceptional</th>
<th>fully healed</th>
</tr>
</thead>
</table>

**DATE:** May 4, 2011

**Disorder:** Diabetic Foot Wound Healing

**Developed By:** Dr. Hao Wu

**Reviewed By:** Dr. Paul Ziemer
# Protocol Information

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Elbow Arthritis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developed By</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

**Protocol Description**

**Disorder Description:** Arthritis is inflammation of one or more joints, which results in pain, swelling, stiffness, and limited movement. Arthritis involves the breakdown of cartilage. Cartilage normally protects the joint, allowing for smooth movement. Cartilage also absorbs shock when pressure is placed on the joint, like when you walk. Without the usual amount of cartilage, the bones rub together, causing pain, swelling (inflammation), and stiffness. If you have arthritis, you may experience: joint pain, joint swelling, reduced ability to move the joint, redness of the skin around a joint, stiffness, warmth around a joint.

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over medial epicondyle (medial side of the elbow);
2. High light 10 min or Low light 15 min over lateral epicondyle (lateral side of the elbow)

**Treatment Protocol:**

- **Time:** 20mins
- **Position:** 2
- **Light:** High
- **Treatment Interval:** 5 time/week, 4-8 weeks

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
## Protocol Information

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Developed By</th>
<th>Reviewed By</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elbow pain</td>
<td>Dr. Hao Wu</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** Some common causes of elbow pain include lateral epicondylitis (tennis elbow), medial epicondylitis (golfer’s elbow), olecranon bursitis and arthritis.

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over medial epicondyle (medial side of the elbow);
2. High light 10 min or Low light 15 min over lateral epicondyle (lateral side of the elbow)

**Note:** If elbow pain persists, seek professional diagnosis.

**Treatment Protocol:**

<table>
<thead>
<tr>
<th>Time</th>
<th>Position</th>
<th>Light</th>
<th>Treatment Interval</th>
</tr>
</thead>
<tbody>
<tr>
<td>20 mins</td>
<td>2</td>
<td>High</td>
<td>5 time/week, 2-4 weeks</td>
</tr>
</tbody>
</table>

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [✓] Desirable
- [ ] exceptional
- [ ] fully healed
Disorder Description: This can sometimes be confused with Tennis elbow but a sprain is when a ligament is stretched, partially torn or fully torn. The ligaments hold the elbow bones together and sometimes more than one ligament can be damaged. Elbow sprains are usually caused by a direct blow or an unnatural movement that twists the elbow sideways or backwards. The elbow will be tender and there maybe swelling. A tingling feeling may be felt in the forearm if a nerve has been injured giving both arm and elbow pain. Discoloration may occur.

Treatment Protocol:

1. High light 10 min or Low light 15 min over medial epicondyle (medial side of the elbow);
2. High light 10 min or Low light 15 min over lateral epicondyle (lateral side of the elbow);
3. High light 10 min or Low light 15 min over bruise area.
## Treatment Protocol

### Elbow Strain

<table>
<thead>
<tr>
<th>PROTOCOL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE: May 4, 2011</td>
</tr>
<tr>
<td>Disorder: Elbow Strain</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

**Disorder Description:** An elbow strain is typically described as an injury to the muscles or tendons that attach to the bones near the elbow. An imbalance or weakness in one or more of the muscles or tendons near the elbow can result in a strained elbow. Activities that require you to have a tight grip on an object that sometimes includes elbow rotation. For example, construction workers using tools, plumbers, golfers, cooks, dentists, factory workers, musicians, etc… all fall into the high risk category for developing an elbow strain.

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over medial epicondyle (medial side of the elbow);
2. High light 10 min or Low light 15 min over lateral epicondyle (lateral side of the elbow);
3. High light 10 min or Low light 15 min over bruise area.

<table>
<thead>
<tr>
<th>Treatment Protocol:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time: 30mins</td>
</tr>
</tbody>
</table>

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
## Protocol Information

<table>
<thead>
<tr>
<th>Disorder:</th>
<th>Frozen Shoulder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developed By:</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By:</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

## Protocol Description

**Disorder Description:** Also called swimmer's shoulder; pitcher's shoulder; shoulder impingement syndrome; tennis shoulder; rotator cuff tendinitis. Frozen shoulder is when the shoulder is painful and loses motion because of inflammation. Rotator cuff tendinitis is an inflammation (irritation and swelling) of the tendons of the shoulder. Tendonitis occurs when a tendon becomes inflamed due to repetitive stress or an injury. It commonly occurs in the major joints of the body: the shoulder, elbow, wrist, hip, knee, or ankle. Tendonitis can be quite painful, especially during movement. Usually there is tenderness and sometimes swelling in the affected joint.

**Treatment Protocol:**

<table>
<thead>
<tr>
<th>Time: 50mins</th>
<th>Position: 5</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed

---

![Muscle Diagram]
Disorder Description: Golfer's elbow, or medial epicondylitis, is an inflammatory condition of the elbow which in some ways is similar to tennis elbow.

The anterior forearm contains several muscles that are involved with flexing the fingers and thumb, and flexing and pronating the wrist. The tendons of these muscles come together in a common tendinous sheath which is inserted into the medial epicondyle of the humerus at the elbow joint. In response to minor injury, or sometimes for no obvious reason at all, this point of insertion becomes inflamed.

Treatment Protocol:

1. High light 10 min or Low light 15 min over medial epicondyle (medial side of the elbow);
2. High light 10 min or Low light 15 min over lateral epicondyle (lateral side of the elbow)
## Protocol Information

<table>
<thead>
<tr>
<th>Disorder:</th>
<th>Hallux valgus/Hallux abducto-valgus (Bunion)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developed By:</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By:</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

## Protocol Description

Disorder Description: A bunion is an enlargement of bone or tissue around the joint at the head of the big toe (metatarsophalangeal joint). The big toe (hallux) may turn in toward the second toe (angulation), and the tissues surrounding the joint may be swollen and tender. The term is used to refer to the pathological bump on the side of the great toe joint. The bump is partly due to the swollen bursal sac and/or an osseous (bony) anomaly on the metatarsophalangeal joint (where the first metatarsal bone and hallux meet). The larger part of the bump is a normal part of the head of first metatarsal bone that has tilted sideways to stick out at its top.

### Treatment Position:

1. High light 15 min or Low light 20 min over site of the first metatarsophalangeal joint (big toe);
2. High light 15 min or Low light 20 min over the side area of the first metatarsophalangeal joint (big toe).

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time: 30mins</th>
<th>Position: 2</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [ ] Desirable
- [ ] exceptional
- [ ] fully healed
## Treatment Protocol

### Hamstring Pull

**Protocol Description**

**Disorder Description:** Straining of the hamstring, also known as a pulled hamstring, is defined as an excessive stretch or tear of muscle fibers and related tissues. The hamstring refers to any one of the three posterior thigh muscles, or to the tendons that make up the borders of the space behind the knee.

**Treatment Position:**

1. High light 10 min or Low light 15 min over site of affected muscle;

   **Note:** Because of the size of muscle belly of hamstrings, it may need 2-4 treatments to cover the affected area.

**Treatment Protocol:**

- **Time:** ≥20mins  
- **Position:** ≥2  
- **Light:** High  
- **Treatment Interval:** 1-2 time/day, 2 weeks

**Result:**

- [ ] satisfactory  
- [ ] acceptable  
- [x] Desirable  
- [ ] exceptional  
- [ ] fully healed
Disorder: **Knee Osteoarthritis**

**Disorder Description:** Osteoarthritis is the most common form of knee arthritis and can involve any or all three compartments in the knee: the medial compartment (medial tibial plateau and medial femoral condyle); lateral compartment (lateral tibial plateau and lateral femoral condyle); or the patellofemoral compartment (patella and femoral trochlear notch). Osteoarthritis is the disease process by which joints wear out. As the joint surface wears away it sheds wear particles which stimulate the joint lining to produce fluid, causing the knee to swell. When the articular cartilage wears through, the underlying bone becomes exposed. The exposed bone rubs against exposed bone when walking and this causes pain - often described as a toothache type pain.

**Treatment Protocol:**

1) High light 10 min or Low light 15 min over medial aspect of the knee
2) High light 10 min or Low light 15 min over lateral aspect of the knee
3) High light 10 min or Low light 15 min over popliteal (back aspect of the knee)

**Treatment Protocol:**

- Time: 30mins
- Position: 3
- Light: High
- Treatment Interval: 5 time/week, 4-8 weeks

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [ ] Desirable
- [ ] exceptional
- [ ] fully healed
## Treatment Protocol

### Knee pain

<table>
<thead>
<tr>
<th>PROTOCOL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE: May 4, 2011</td>
</tr>
<tr>
<td>Disorder: Knee pain</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PROTOCOL DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder Description: Knee joint pain can be related to overuse where small stresses are repeated a large number of times without allowing adequate recovery, for example running too much too soon, or excessive jumping. Or injuries can be acute where the injury is caused by an impact or twisting such as an anterior cruciate ligament injury. An overuse injury can also be considered to be acute if it is painful or inflammed.</td>
</tr>
</tbody>
</table>

### Treatment Position:

1) High light 10 min or Low light 15 min over medial aspect of the knee
2) High light 10 min or Low light 15 min over lateral aspect of the knee

**Note:** If knee pain persists, seek professional diagnosis.

### Treatment Protocol:

- **Time:** 20mins
- **Position:** 2
- **Light:** High
- **Treatment Interval:** 5 time/week, 2-4 weeks

**Result:**
- satisfactory
- acceptable
- Desirable
- exceptional
- fully healed
# Treatment Protocol

## Knee Sprain

### Protocol Information

<table>
<thead>
<tr>
<th>Date: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Disorder:</strong> Knee Sprain</td>
</tr>
<tr>
<td><strong>Developed By:</strong> Dr. Hao Wu</td>
</tr>
<tr>
<td><strong>Reviewed By:</strong> Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** A sprain is an injury of joints that is caused by being stretched beyond their oversized capacity and possibly more. A muscular tear caused in the same manner is referred to as a strain. In cases where either ligament or muscle tissue is torn, immobilization and surgical repair may be necessary. Ligaments are tough, fibrous tissues that connect bones to other bones.

**Treatment Position:**

1. High light 10 min or Low light 15 min over medial aspect of the knee;
2. High light 10 min or Low light 15 min over lateral aspect of the knee

**Treatment Protocol:**

<table>
<thead>
<tr>
<th>Time: 20 mins</th>
<th>Position: 2</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [ ] Desirable
- [ ] exceptional
- [ ] fully healed
# Treatment Protocol

## Neck pain

### Protocol Information

| DATE: May 4, 2011 |

| Disorder: | **Neck pain** |
| Developed By: | **Dr. Hao Wu** |
| Reviewed By: | **Dr. Paul Ziemer** |

### Protocol Description

**Disorder Description:** The most common cause of neck pain is injury to the soft tissues including the muscles, tendons, and ligaments within these structures. This can occur from whiplash or other injury to these areas. The common causes include arthritis, tendonitis and whiplash injury.

### Treatment Position:

1. High light 10 min or Low light 15 min over affected neck area;
2. High light 10 min or Low light 15 min over affected muscle

**Note:** If neck pain persists, seek professional diagnosis.

### Treatment Protocol:

| Time: 20mins | Position: 2 | Light: High | Treatment Interval: 5 time/week, 2-4 weeks |

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
## Treatment Protocol

### Olecranon (funny bone) Bursitis

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Disorder:</strong> Olecranon (funny bone) Bursitis</td>
</tr>
<tr>
<td><strong>Developed By:</strong> Dr. Hao Wu</td>
</tr>
<tr>
<td><strong>Reviewed By:</strong> Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** Olecranon bursitis (informally known as "student's elbow" or "baker's elbow") is a condition characterised by pain, swelling and inflammation of the olecranon (funny bone) bursa located in the elbow. This bursa is located over the extensor aspect of the extreme proximal end of the ulna. In common with other bursae, it is in the normal state invisible and impalpable, and contains only a very small amount of fluid, but fulfills the function of all bursae in facilitating movement at a joint (in this case the elbow) by enabling anatomical structures to glide more easily over each other. Also in common with other bursae, it can become inflamed, producing a condition called bursitis. This is sometimes known as a "swellbow" or "water on the elbow."

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over medial epicondyle (medial side of the elbow);
2. High light 10 min or Low light 15 min over lateral epicondyle (lateral side of the elbow);
3. High light 10 min or Low light 15 min over Olecranon (funny bone) bursitis.

### Treatment Protocol:

| Time: 30mins | Position:3 | Light: High | Treatment Interval: 1-2 time/day, 2-4 weeks |

**Result:** □ satisfactory □ acceptable □ Desirable □ exceptional □ fully healed
## Treatment Protocol

### Open Wound

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Open Wound</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
<tr>
<td>Signature:</td>
</tr>
</tbody>
</table>

### Protocol Information

#### Disorder Description
Open wound healing/post-operation can be accelerated by increasing temperature, blood supply and local oxygen ratio in operated area. These three factors are critical for tissue recovery process.

### Protocol Description

#### Treatment Protocol:

1. High light 20 min or Low light 30 min over operation wound;

#### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time: 20mins</th>
<th>Position:1 or more</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/week, 2-4 weeks</th>
</tr>
</thead>
</table>

#### Result:

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
# Treatment Protocol

## Patellar Tendinitis

<table>
<thead>
<tr>
<th><strong>Protocol Information</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DATE:</strong> May 4, 2011</td>
</tr>
<tr>
<td><strong>Disorder:</strong> Patellar Tendinitis</td>
</tr>
<tr>
<td><strong>Developed By:</strong> Dr. Hao Wu</td>
</tr>
<tr>
<td><strong>Reviewed By:</strong> Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

## Protocol Description

**Disorder Description:** Tendinitis (informally also tendonitis), meaning inflammation of a tendon (the suffix -itis denotes diseases characterized by inflammation), is a type of tendinopathy often confused with the more common tendinosis, which has similar symptoms but requires different treatment. The term tendinitis should be reserved for tendon injuries that involve larger-scale acute injuries accompanied by inflammation. Generally, tendinitis is referred to by the body part involved, such as Achilles tendinitis (affecting the Achilles tendon), or patellar tendinitis (jumper's knee, affecting the patellar tendon).

### Treatment Position:

1. High light 10 min or Low light 15 min over medial aspect of the knee;
2. High light 10 min or Low light 15 min over lateral aspect of the knee;
3. High light 10 min or Low light 15 min over Patellar Tendon (just below the kneecap).

### Treatment Protocol:

| Time: 30mins | Position: 3 | Light: High | Treatment Interval: 5 time/week, 4-8 weeks |

### Result:

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
# Treatment Protocol

## Plantar Fasciitis

### Protocol Information

<table>
<thead>
<tr>
<th>Date:</th>
<th>May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder:</td>
<td>Plantar Fasciitis</td>
</tr>
<tr>
<td>Developed By:</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By:</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** Plantar fasciitis is a painful inflammatory process of the plantar fascia. Longstanding cases of plantar fasciitis often demonstrate more degenerative changes than inflammatory changes, in which case they are termed plantar fasciosis. The plantar fascia is a thick fibrous band of connective tissue originating on the bottom surface of the calcaneus (heel bone) and extending along the sole of the foot towards the five toes.

**Treatment Protocol:**

1. High light 15 min at the junction of the Plantar Fascia and the Calcaneus
2. High light 10 min over further distal in the centre of the fascia where there may also be pain upon walking.

**Note:** 10 min ice/day directly over the treated area after light therapy to get the maximum effect.

**Result:**
- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed

---

- **Achilles tendon**
- **Inflammation of the plantar fascia can cause heel pain**
- **Plantar fascia**
# Post-Operation Wound Healing

## Protocol Information

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Post-Operation Wound Healing</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

## Protocol Description

**Disorder Description:** Post-operation wound healing can be accelerated by increasing temperature, blood supply and local oxygen ratio in operated area. These three factors are critical for tissue recovery process.

## Treatment Protocol:

1. High light 20 min or Low light 30 min over operation wound;

## Result:

- □ satisfactory
- □ acceptable
- ■ Desirable
- □ exceptional
- □ fully healed

| Time: 20mins | Position: 1 or more | Light: High | Treatment Interval: 1-2 time/week, 2-4 weeks |
**Protocol Information**

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotator Cuff Tendinitis</td>
<td>Dr. Hao Wu</td>
</tr>
</tbody>
</table>

Developed By: Dr. Hao Wu
Reviewed By: Dr. Paul Ziemer

**Protocol Description**

**Disorder Description:** Also called swimmer's shoulder; pitcher's shoulder; shoulder impingement syndrome; tennis shoulder. Rotator cuff tendinitis is when the shoulder is painful and loses motion because of inflammation. Rotator cuff tendinitis is an inflammation (irritation and swelling) of the tendons of the shoulder. Tendonitis occurs when a tendon becomes inflamed due to repetitive stress or an injury. It commonly occurs in the major joints of the body: the shoulder, elbow, wrist, hip, knee, or ankle. Tendonitis can be quite painful, especially during movement. Usually there is tenderness and sometimes swelling in the affected joint.

Treatment over rotator cuff insertion and nerve root exit of the affected side:

14. rotator cuff: 10 min High
15. rotator cuff insertion: 10 min High
16. affected axillary: 10 min High
17. cervical vertebrae 3-5: 10 min High
18. cervical 6-thoracic 2: 10 min High

**Treatment Protocol:**

<table>
<thead>
<tr>
<th>Time: 50mins</th>
<th>Position: 5</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**

- ☐ satisfactory
- ☐ acceptable
- ☐ Desirable
- ☐ exceptional
- ☐ fully healed
## Treatment Protocol

### Sciatica

<table>
<thead>
<tr>
<th>PROTOCOL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE: May 4, 2011</td>
</tr>
<tr>
<td>Disorder: <strong>Sciatica</strong></td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PROTOCOL DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder Description: Sciatica refers to pain, weakness, numbness, or tingling in the leg. It is caused by injury to or compression of the sciatic nerve. Sciatica is a symptom of another medical problem, not a medical condition on its own.</td>
</tr>
</tbody>
</table>

### Treatment Protocol:

**Time:** 40mins  
**Position:** 4  
**Light:** High

**Treatment Interval:** 5 time/week, 4-8 weeks

**Result:**  
- satisfactory  
- acceptable  
- **Desirable**  
- exceptional  
- fully healed

---

### Treatment Protocol:

1. Lumbar vertebrae 5; 10 min with High
2. Sacrum vertebrae 1; 10 min with High
3. Piriformis muscle (middle of the buttocks); 10 min with High
4. Back of the Knee; 10 min with High

---

![Muscle Diagram]
**Protocol Information**

**DATE:** May 4, 2011

<table>
<thead>
<tr>
<th>Disorder:</th>
<th>Shoulder Arthritis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developed By:</td>
<td>Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By:</td>
<td>Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

**Protocol Description**

**Disorder Description:** Arthritis is inflammation of one or more joints, which results in pain, swelling, stiffness, and limited movement. Arthritis involves the breakdown of cartilage. Cartilage normally protects the joint, allowing for smooth movement. Cartilage also absorbs shock when pressure is placed on the joint, like when you walk. Without the usual amount of cartilage, the bones rub together, causing pain, swelling (inflammation), and stiffness. If you have arthritis, you may experience: joint pain, joint swelling, reduced ability to move the joint, redness of the skin around a joint, stiffness, warmth around a joint.

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over Acromion (point of shoulder);
2. High light 10 min or Low light 15 min over subacromial space;

A common symptom of shoulder arthritis is neck stress, if you experience neck stress treat as follows:

High light 10 min or Low light 15 min over affected neck

**Treatment Protocol:**

- **Time:** 20/30 mins
- **Position:** 2 or 3
- **Light:** High
- **Treatment Interval:** 5 times/week, 4-8 weeks

**Result:**
- [☐] satisfactory
- [☐] acceptable
- [☒] Desirable
- [☐] exceptional
- [☐] fully healed
# Treatment Protocol

## Shoulder Bursitis

<table>
<thead>
<tr>
<th>Protocol Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>DATE: May 4, 2011</td>
</tr>
<tr>
<td>Disorder: <strong>Shoulder Bursitis</strong></td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

## Protocol Description

**Disorder Description:** Bursae are fluid-filled cavities near joints where tendons or muscles pass over bony projections. They assist movement and reduce friction between moving parts. Bursitis can be caused by chronic overuse, trauma, rheumatoid arthritis, gout, or infection. Sometimes the cause cannot be determined. Bursitis commonly occurs in the shoulder, knee, elbow, and hip. Other areas that may be affected include the Achilles tendon and the foot. Chronic inflammation can occur with repeated injuries or attacks of bursitis.

![Diagram of shoulder anatomy](image)

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over Acromion;
2. High light 10 min or Low light 15 min over subacromial space;

**Treatment Protocol:**

| Time: 20mins | Position: 2 | Light: High | Treatment Interval: 1-2 time/day, 2-4 weeks |

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
## Treatment Protocol

### Shoulder Pain

<table>
<thead>
<tr>
<th>PROTOCOL INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DATE:</strong> May 4, 2011</td>
</tr>
<tr>
<td><strong>Disorder:</strong> Shoulder Pain</td>
</tr>
<tr>
<td><strong>Developed By:</strong> Dr. Hao Wu</td>
</tr>
<tr>
<td><strong>Reviewed By:</strong> Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>PROTOCOL DESCRIPTION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Disorder Description:</strong> Shoulder pain is an extremely common complaint, and there are many common causes of this problem, such as bursitis, rotator cuff tendinitis, adhesive capsulitis (frozen shoulder), arthritis, and SLAP lesion.</td>
</tr>
</tbody>
</table>

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over Acromion;
2. High light 10 min or Low light 15 min over subacromial space;

A common symptom of shoulder sprain is neck stress, if you experience neck stress treat as follows:

- High light 10 min or Low light 15 min over affected neck

**Note:** If shoulder pain persists, seek professional diagnosis.

<table>
<thead>
<tr>
<th><strong>Treatment Protocol:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Time:</strong> 20/30 mins</td>
</tr>
<tr>
<td><strong>Position:</strong> 2 or 3</td>
</tr>
<tr>
<td><strong>Light:</strong> High</td>
</tr>
<tr>
<td><strong>Treatment Interval:</strong> 5 time/week, 2-4 weeks</td>
</tr>
</tbody>
</table>

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [ ] Desirable
- [ ] exceptional
- [ ] fully healed
Disorder Description

A SLAP tear is an injury to a part of the shoulder joint called the labrum. The shoulder joint is a ball and socket joint, similar to the hip; however, the socket of the shoulder joint is extremely shallow, and thus inherently unstable. To compensate for the shallow socket, the shoulder joint has a cuff of cartilage called a labrum that forms a cup for the end of the arm bone (humerus) to move within. A specific type of labral tear is called a SLAP tear; this stands for Superior Labrum from Anterior to Posterior. The SLAP tear occurs at the point where the tendon of the biceps muscle inserts on the labrum.

Treatment Protocol:

1. High light 10 min or Low light 15 min over Acromion;
2. High light 10 min or Low light 15 min over subacromial space;

A common symptom of SLAP tear is neck stress, if you experience neck stress treat as follows:

High light 10 min or Low light 15 min over affected area of the neck

Result: □ satisfactory  □ acceptable  ■ Desirable  □ exceptional  □ fully healed
# Treatment Protocol

## Slipped Disc

### Protocol Information

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Slipped Disc</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** A spinal disc herniation (prolapsus disci intervertebralis), informally and misleadingly called a "slipped disc", is a medical condition affecting the spine, in which a tear in the outer, fibrous ring (annulus fibrosus) of an intervertebral disc (discus intervertebralis) allows the soft, central portion (nucleus pulposus) to bulge out. Tears are almost always postero-lateral in nature owing to the presence of the posterior longitudinal ligament in the spinal canal. This tear in the disc ring may result in the release of inflammatory chemical mediators which may directly cause severe pain, even in the absence of nerve root compression (see pathophysiology below). This is the rationale for the use of anti-inflammatory treatments for pain associated with disc herniation, protrusion, bulge, or disc tear. It is normally a further development of a previously existing disc protrusion, a condition in which the outermost layers of the annulus fibrosus are still intact, but can bulge when the disc is under pressure.

### Treatment Position:

1. High light 10 min or Low light 15 min over affected spine area;
2. High light 10 min or Low light 15 min over affected lumbar muscle

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time: ≥20mins</th>
<th>Position: ≥2</th>
<th>Light: High</th>
<th>Treatment Interval: 5 time/week, 4-8 weeks</th>
</tr>
</thead>
</table>

### Result:

- □ satisfactory
- □ acceptable
- □ Desirable
- □ exceptional
- □ fully healed
**Disorder Description:** Tennis elbow is an overuse injury occurring in the lateral side of the elbow region, but more specifically, occurs at common extensor tendon that originates from the lateral epicondyle. While the common name tennis elbow suggests that people who play tennis may develop this condition, other activities of daily living may also cause it.

**Treatment Protocol:**

1. High light 10 min or Low light 15 min over medial epicondyle (medial side of the elbow);
2. High light 10 min or Low light 15 min over lateral epicondyle (lateral side of the elbow).

**Result:** □ satisfactory □ acceptable □ Desirable □ exceptional □ fully healed
## Disorder Description

Whiplash is commonly associated with motor vehicle accidents, usually when the vehicle has been hit in the rear; however, the injury can be sustained in many other ways, including sports such as basketball, football, soccer, hockey, and falls from bicycles or horses.

### Treatment Position:

1. High light 10 min or Low light 15 min over affected neck area;
2. High light 10 min or Low light 15 min over affected muscle

**Note:** Before treatment, seek professional diagnosis.

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time: 20mins</th>
<th>Position: 2</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**

- satisfactory
- acceptable
- Desirable
- exceptional
- fully healed
### Disorder Description

Arthritis is inflammation of one or more joints, which results in pain, swelling, stiffness, and limited movement. Arthritis involves the breakdown of cartilage. Cartilage normally protects the joint, allowing for smooth movement. Cartilage also absorbs shock when pressure is placed on the joint, like when you walk. Without the usual amount of cartilage, the bones rub together, causing pain, swelling (inflammation), and stiffness. If you have arthritis, you may experience: joint pain, joint swelling, reduced ability to move the joint, redness of the skin around a joint, stiffness, warmth around a joint.

### Treatment Position:

1. High light 10 min or Low light 15 min over palm;
2. High light 10 min or Low light 15 min over wrist;

### Treatment Protocol:

- **Time:** 20mins
- **Position:** 2
- **Light:** High
- **Treatment Interval:** 5 time/week, 4-8 weeks

### Result:

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
# Treatment Protocol

## Wrist Pain

<table>
<thead>
<tr>
<th>Protocol Information</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DATE:</strong> May 4, 2011</td>
</tr>
<tr>
<td>Disorder: Wrist Pain</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Protocol Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Disorder Description:</strong> There are many causes of wrist pain including but not exclusive to tendonitis, sprain, carpal tunnel syndrome and arthritis.</td>
</tr>
</tbody>
</table>

### Treatment Position:

1. High light 10 min or Low light 15 min over palm;
2. High light 10 min or Low light 15 min over wrist;

**Note:** If pain persists, seek professional diagnosis.

### Treatment Protocol:

- **Time:** 20 mins
- **Position:** 2
- **Light:** High
- **Treatment Interval:** 5 time/week, 2-4 weeks

**Result:**
- ☐ satisfactory
- ☐ acceptable
- ☐ Desirable
- ☐ exceptional
- ☐ fully healed
## Treatment Protocol

**Wrist Sprain**

### Protocol Information

<table>
<thead>
<tr>
<th>DATE: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Wrist Sprain</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** A sprain is an injury of joints that is caused by being stretched beyond their oversized capacity and possibly more. A muscular tear caused in the same manner is referred to as a strain. In cases where either ligament or muscle tissue is torn, immobilization and surgical repair may be necessary. Ligaments are tough, fibrous tissues that connect bones to other bones. Sprains can occur in any joint but are most common in the ankle and wrist.

**Treatment Position:**

1. High light 10 min or Low light 15 min over palm;
2. High light 10 min or Low light 15 min over wrist;
3. High light 10 min or Low light 15 min over back of wrist

### Treatment Protocol:

| Time: 30mins | Position: 3 | Light: High | Treatment Interval: 1-2 time/day, 2-4 weeks |

**Result:**

- [ ] satisfactory
- [ ] acceptable
- [x] Desirable
- [ ] exceptional
- [ ] fully healed
# Treatment Protocol

## Wrist Tendinitis

### Protocol Information

<table>
<thead>
<tr>
<th>Date: May 4, 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disorder: Wrist Tendinitis</td>
</tr>
<tr>
<td>Developed By: Dr. Hao Wu</td>
</tr>
<tr>
<td>Reviewed By: Dr. Paul Ziemer</td>
</tr>
</tbody>
</table>

### Protocol Description

**Disorder Description:** Tendinitis (informally also tendonitis), meaning inflammation of a tendon (the suffix -itis denotes diseases characterized by inflammation), is a type of tendinopathy often confused with the more common tendinosis, which has similar symptoms but requires different treatment. The term tendinitis should be reserved for tendon injuries that involve larger-scale acute injuries accompanied by inflammation.

### Treatment Position:

1. High light 10 min or Low light 15 min over palm;
2. High light 10 min or Low light 15 min over wrist;

### Treatment Protocol:

<table>
<thead>
<tr>
<th>Time: 20mins</th>
<th>Position: 2</th>
<th>Light: High</th>
<th>Treatment Interval: 1-2 time/day, 2-4 weeks</th>
</tr>
</thead>
</table>

**Result:**
- □ satisfactory
- □ acceptable
- ☒ Desirable
- □ exceptional
- □ fully healed