

SESSION NOTES & LOG BOOK for: _____

[RECIPIENT NAME]

SKIN TEST INDICATES SKIN SENSITIVITY TO THE FOLLOWING OILS (indicate L,M,H = low, medium, high sensitivity)	
CLIENT HISTORY SUMMARY	OILS TO AVOID (A) OR USE WITH CAUTION (C), or MODIFIED TECHNIQUE (M)

SESSION #: _____ DATE: _____ RECIPIENT SIGNATURE: _____

REASON FOR SESSION: _____

BODY ASSESSMENT: _____

ADDITIONAL OILS USED (AND WHY): _____

RECIPIENT COMMENTS: _____

PRACTITIONER NOTES: _____

INCREASE IN HEIGHT? Yes/No IF YES, BY HOW MUCH: _____ millimetres

SESSION #: _____ DATE: _____ RECIPIENT SIGNATURE: _____

REASON FOR SESSION: _____

BODY ASSESSMENT: _____

ADDITIONAL OILS USED (AND WHY): _____

RECIPIENT COMMENTS: _____

PRACTITIONER NOTES: _____

INCREASE IN HEIGHT? Yes/No IF YES, BY HOW MUCH: _____ millimetres

SESSION #: _____ DATE: _____ RECIPIENT SIGNATURE: _____

REASON FOR SESSION: _____

BODY ASSESSMENT: _____

ADDITIONAL OILS USED (AND WHY): _____

RECIPIENT COMMENTS: _____

PRACTITIONER NOTES: _____

INCREASE IN HEIGHT? Yes/No IF YES, BY HOW MUCH: _____ millimetres