

The logo for Goltech features the word "Goltech" in a stylized font. The "Go" is in a dark brown, outlined font, while "ltech" is in a white, solid font. The "ltech" part is set against a teal-to-blue gradient rectangular background. A registered trademark symbol (®) is located to the right of the "ch".

Goltech®

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Goltech® Basic: Cross-Fibre Muscle Release

1. History & Development of Goltech®

2. Musculo-Skeletal System as relevant to Goltech®

1. The Basic Operation of the Musculoskeletal System
 - a. Bone & Periosteum
 - b. Joints
 - i. Ligaments
 - ii. Capsules & synovial fluid
 - iii. Cartilage
 - c. Muscles
 - d. Bursae & Synovial Sheaths of Tendons

3. Why Goltech® cross-fibre muscle release works

1. It activates the Golgi Tendon Organ but *not* the Muscle Spindle

4. Practical Application of Goltech® Cross-Fibre Muscle Release

a. Demonstration & Practise of the Technique

b. Refining the “Feel” of the Technique

c. Practical Application to the Body Generally

(i) Legs

(ii) Arms

(iii) Shoulder & Chest

(iv) Hips, Back & Neck

d. The Importance of Order and Flow

Goltech® Advanced

1. Goltech® Myofascial Release

a. Theory: The Connective Tissue Frameworks of the Body

1. What is the ECM?
 - a. Basic Structure
 - b. Skeleton: Specialised ECM
 - c. Myofascia & Fascia: Specialised ECM
 - i. Ligaments & Tendons: Specialised Fascia
2. Dysfunction in the Myofascial/Fascial System: Cause
 - a. Loss of Elastic Resilience™
 - i. Tension in the myofascia
 - ii. Micro-scarring in the myofascia
 - iii. Loss of fluidity in ground substance

b. Practical: Myofascial Release of the Whole Body

1. Lower Limb
2. Upper Limb
3. Shoulder & Chest
4. Hips, Back & Neck

2. Theoretical Foundations of Treatment: The Body as an Engineering Structure

1. Interconnectedness of ECM, bones & joints, myofascia/fascia, tendons, ligaments.
2. The Stability of Body Structure
 - a. By *Compression*: Stacks of Bones
 - b. By *Tension*: Introducing the Musculo-Fascial System
 - i. *One muscle compartmentalized, not multiple muscles interconnected*

3. Implications for Effective Treatment

a. Dysfunction in a part causes dysfunction in the whole: and vice versa

1. Treat *broadly* and *distally* as well as *focally*
2. Restore whole body strength and flexibility
3. Restore correct muscle recruitment

b. Balance is Crucial

Make sure attention is paid to:

1. All structures associated with *all joints* with which dysfunctional structures are associated.
2. The *kinetic chain* of which the dysfunctional structures are a part.
3. The *whole body*

c. Posture is Crucial

d. Spinal Alignment is Crucial

4. Postural Analysis and Corrections

1. Basic Postural Analysis & Postural Training
2. Advanced Postural Analysis & Corrections: for more complex postural deviations

5. Spinal Alignment without Manipulation

1. Practical Procedure

6. Presentations and Contraindications

a. Presentation Types

1. Presenting Pathologies
2. Patient Presentations

b. Contraindications to Goltech®

1. Acute Inflammation
2. Strains in Healing Phase
3. Spinal Nerve Root Compression: Disc Herniation or Prolapse
4. Headaches: Cluster, Cranial (Traction), Meningism/Migraine, Metabolic (hypertensive, premenstrually, anaemia, fever, hypoglycaemic, drug intoxication), Temporal Arteritis
5. Chest Pain: Heart Attack (AMI) / Angina

7. Treatment of Specific Conditions: Real Problems in the Real Clinic

a. Face & Neck

1. TMJ Syndrome (Temporo-Mandibular Joint Dysfunction)
2. Generalised Neck Pain
3. Cervical Headaches & Tension headaches
4. Sinus Headaches
5. Whiplash
6. Torticollis / Wry Neck

b. Upper & Mid Back

1. General Back Pain
2. Upper Trapezius Strain
3. Chronic Mid-Back Strain
4. Sharp Pain between Spine & Scapula

c. Lower Back

1. Lower Back Instability
2. Lumbar Strain
3. Non-Specific Chronic Lower Back Pain
4. Facet Syndrome
5. Coccygeal Pain

d. Chest

1. Lateral Chest Pain
2. Serratus Anterior Spasm
3. Intercostal Muscle Spasm
4. Medial Chest Pain
5. Pectoralis Major Spasm
6. Tietze's Syndrome (Costochondritis)

e. Shoulder

(i) Rotator Cuff Impingement Syndromes

1. Subacromial Bursitis
2. Supraspinatus Tendonitis
3. Swimmer's Shoulder

(ii) Rotator Cuff Non-Impingement Conditions

1. Subscapularis Tendonitis
2. External Rotator Tendonitis / Strain
3. Calcific Tendonitis
4. Supraspinatus Spasm / Chronic Strain (Deep Rotator Cuff Muscles)

(iii) Non-Rotator Cuff Conditions

1. Bicipital Tendonitis
2. Frozen Shoulder
3. Slipped Biceps Tendon
4. Winged Scapula – actually a shoulder problem!

f. Arm & Hand

(i) Upper Arm and Elbow

1. Brachial Plexus Impingement
 - a. Scalenus Anterior
 - b. Pectoralis Minor
2. Axillary Nerve Impingement
3. Tennis Elbow
4. Golfer's Elbow
5. Caught Synovial Fringe
6. Pulled Elbow (infants & children)

(ii) Trapped / Impinged Radial Nerve

1. In Axilla (high in the upper arm)
2. In Spinal Groove of Upper Arm
3. By Extensor Carpi Radialis Brevis
4. Impingement by Supinator - Radial Tunnel Syndrom & Supinator Syndrome
5. Impingement of Superficial Radial Nerve - By Brachioradialis & At the Wrist

(iii) Trapped / Impinged Median Nerve

1. By Ligament of Struthers
2. By Lacertus Fibrosis (Bicipital Aponeurosis)
3. By Flexor Digitorum Superficialis
4. Pronator Teres Syndrome
5. Carpal Tunnel Syndrome

(iv) Trapped / Impinged Ulnar Nerve

1. By Arcade of Struthers
2. Cubital Tunnel Syndrome
3. By Flexor Carpi Ulnaris
4. Guyon Canal Syndrome (Ulnar Canal/Tunnel Syndrome)
5. Repetition Strain Injury (RSI)
6. Tenosynovitis

g. Hip & Upper Leg

1. Sciatic Nerve Entrapment (Piriformis Syndrome)
2. Trochanteric Bursitis (Greater Trochanteric Pain Syndrome)
3. Ilio-Tibial Band Syndrome (Runner's Knee I)
4. Old Athlete Legs

5. Meralgia Paraesthetica
6. Groin Strain
7. Hamstring Strain

h. Knee

1. Anterior or Posterior Cruciate ligament Damage / Tear
2. Collateral
3. Ilio-Tibial Band Syndrome
4. Caught Synovial Fringe
5. Meniscal Issues – Tears / Caught
6. Dislocating Kneecap
7. Chondromalacia Patella (Patello-Femoral Pain Syndrome, Runner's Knee II)
8. Patellar Tendonitis (Osgood –Schlatter Disease)

i. Ankle & Foot

1. Compartment Syndromes & Shin Splints
2. Lower Limb Neuropathies
3. Peroneal Nerve Syndrome
4. Tarsal Tunnel Syndrome
5. Pain on the Lateral Dorsal Aspect of the Foot
6. Tenosynovitis
7. Achilles Problems
8. Plantar Fasciitis
9. Pain on Ball of Foot / in Front of Ball
10. Collapsed Anterior Arch

8. Strengthen & Stretch: Rehabilitation and Injury Prevention

a. Effective & Efficient Strength Training Principles

b. Effective and Efficient Stretching Principles

c. Rehabilitation & Prevention Exercises (Strengthen & Stretch)

1. Restores balanced muscle recruitment by neural re-education

9. Overview of Treatment Strategies: Putting it all Together

a. Revision of Treatment Steps

1. Goltech® cross-fibre work: Release muscle tension *both* locally *and* distally
2. Goltech® myofascial release: Restore elastic resilience to the myofascial/fascial network *both* locally *and* distally
 - a. NB. Steps 1 and 2 may be reversed, particularly for very tight muscles.
3. Correct postural imbalance
4. Rehabilitation & Prevention Exercises
 - a. Strength Exercises: Strengthen weak muscles & movements and the body as a whole with functional exercise
 - b. Stretching: Lengthens shortened muscles to improve functionality and range of motion

b. Workshop

1. Participants to workshop a number of conditions and see if they can put it all together

Assessment

1. Via observation of participants throughout the course
2. Certificate provided to those who demonstrate competence in practical application of the techniques
3. Aspects of theory relevant to Goltech® are for information only, and will not be assessed.