Kinesiology Taping Theory & Application (KT TA)
An introduction to the basic concepts and theories of Kinesiology Tape
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I. Introduction
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Welcome to Kinesiology Taping; Theory and Application (KTTA). Kinesiology taping is an amazing modality that will take your manual therapy practice to the next level. When applied properly, kinesiology tape will provide your patients with more efficient results than you have experienced before. When used independently on conditions such as shin splints, low back pain, and IT Band friction syndrome, to name just a few, kinesiology taping can be very effective. When utilized in a complimentary role with your hands on work, kinesiology tape can dramatically increase the effectiveness of your work.

Kinesiology tape was first introduced in the USA in 1995 at the North West Athletic Trainers Association Conference (NWATA) clinical symposium in Portland, OR. This type of taping was originally developed over 30 years ago in Japan. The inventor theorized that this new method of taping could work in unison with the body’s natural healing processes by allowing the body to maintain mobility and support as well as providing reparative assistance to the lymphatic system where generally the process is slowed due to pain and inflammation, hence expediting the overall therapeutic recovery time.
I was originally introduced to Kinesiology taping in 1996 while serving as an Athletic Trainer at the University of South Florida. Conceptually, it was a difficult idea for all of us to grasp considering our experience and understanding of prophylactic taping methods. It wasn’t until 2003, that I began to explore this taping more. Over the years I have had tremendous success with kinesiology taping when used in conjunction with my clinical massage practice. I have achieved results with kinesiology taping that I never imagined taping could do so effectively and/or efficiently.

Prior to making this leap, I took my time doing several comparative analysis's between Kinesiology Tapes including 3B TAPE® and several other popular brands of kinesiology tape. Over a period of 4 months I taped over 50 patients with a variety of brands of tape in order to compare and contrast both overall durability and functional outcomes. Patients were not informed as to which tape they were using and asked to report back to me their impressions. The 3B TAPE® had received a more positive net result than all of the other brands that I tried. The 3B TAPE® had a higher rate of durability; longer sustained taping through both activity and general wear and tear. 3B TAPE® was also reported to be slightly “more effective” than the other tapes. This was by no means a conclusive scientific study, rather a means for me to determine the quality of the product I was looking to endorse.

*I firmly believe that regardless of what type of kinesiology tape you use in today’s market, the best results are only achieved through careful application of the tape. Failure to properly assess, apply and educate the patient will render any application pointless.*

In today’s workshop, we will begin to discuss and understand the basic theories and applications of 3B TAPE®. At the conclusion of this workshop, attendees will be prepared to relax hypertonic muscles, stimulate inhibited muscles and reduce pain and edema through the use of 3B TAPE®.
Theoretical Properties of Kinesiology Tape

• Mimics elasticity of skin

• Thickness is approximately the same as the epidermis of the skin

• May stretch up to 40-60% of original length

• 100% Cotton Rayon Fiber – wave pattern-breathable

• Latex free and Hypoallergenic

• Acrylic-based adhesive – heat activated

• 50% Water resistant

• Designed for consistent use for 3-5 days

• Colors: Beige, Blue, Black, Green, Pink & Yellow

• Sizes: Roll: 3BTAPE® Roll 5M x 5cm (16’x2”)

3BTAPE® Bulk Roll: 31m x 5cm (103’x2"

3BTAPE® PROROLL® are available in X,Y,I, and Eyelash style pre-cut strips
**Physiological effects**

Kinesiology tape serves as a handy tool in your manual therapy practice. 3BTAPE can be effective when used as a sole method of therapy, but when used in conjunction with manual therapy, the therapeutic benefits are noticeably enhanced. 3BTAPE’s primary function serves to reduce pain and inflammation. This is achieved by the tapes stretch capabilities. When placed upon the surface of the skin with simple “paper off tension”, the tape will lift the skin, creating space in the area where blood and lymph flow as well as relieve pressure on sensory nerves. This space is known as the interstitial space. It is within this space that our bodies own healing functions thrive to restore homeostasis to the body.
**Therapeutic uses**

There are hundreds of uses for 3B TAPE™. When used properly, it can treat a variety of orthopedic, myofascial, structural, neurological and medical conditions. With the use of a single “I” Strip, “X” Strips “Y” strip Eyelash strips or a variety of other unique cuts, as well as the direction and the amount of stretch of the taping application you can receive results such as:

- Reduce pain and inflammation
- Relax hypertonic muscles
- Stimulate weak or inhibited muscles
- Re-educate the neuromuscular system
- Enhance performance
- Prevent Injury
- Promote circulation
Kinesiology Taping Prerequisites

In order to achieve effective results there are several concepts that must be observed and understood.

**Assessment & Evaluation:** Prior to the application of 3BTAPE, one must take the time to properly assess and evaluate the patient in order to be certain of the proper taping procedure. Failure to doing so will result in limited success with 3BTAPE.

**Proper preparation:** Prior to applying 3BTAPE, the area being taped must be clean of any oils or dirt. In some patients, the removal of hair may be needed in order to achieve proper contact with the skin.

**Tissue Stretch:** Unlike other taping methods learned or understood in the past, 3BTAPE is applied with a “less is best” mindset. Degrees of tension may range from 0-60% of resting length.

Tensions are expressed either descriptively or by percentage of available stretch.

**Standard ranges and descriptors:**

- 0% or none: no tension: anchor and/or end
- Paper-off: 10-15%
- Light: 15-25%
- Moderate: 25-35%
- Severe: 50-75%
- Full: 100%
**Determine the appropriate cut of tape:** There are several ways to cut your 3B TAPE® in order to achieve desired results. Today we will focus on 3 different cuts. When applying any of these strips, you should be certain to leave approximately 2” for your anchor and 1-2” for your ends.

- **I strip:** Apply directly over the targeted muscle in the direction of the muscle striations
- **Y strip:** Apply your anchor and run your cuts along the border of the muscle being treated
- **Fan strip:** Cut into 4, 5 or even 6 strips, apply with limb in a gently stretched position using 0-20% of available tension. Typically used for edema or swelling with a crisscross pattern.

**Tape Direction:** The direction of tension placed on the tape is indicative of your assessment. As an example, if you are trying to treat acutely overused or shortened muscles, your direction would be from insertion to origin (distal to proximal). If your goal was to treat a chronically weak or elongated muscles your direction of tension would be from origin to insertion (proximal to distal).