

Scarborough



Hearing and Balance Centre

REQUEST FOR CONSULTATION

Scarborough Hearing and Balance Centre 1415 Kennedy Rd., Unit 6 Scarborough, ON M1P 2L6 Tel: 647-748-2999 Fax: 647-748-4999 Email: shbcentre@gmail.com www.hearingandbalancecentre.com

Form with fields: LAST NAME, FIRST NAME, MIDDLE NAME, ADDRESS, APARTMENT No., CITY, PROVINCE, POSTAL CODE, HOME TELEPHONE, OTHER TELEPHONE, EMAIL, DATE OF BIRTH, SEX, HEALTH CARD No., VERSION CODE, REFERRING PHYSICIAN

APPOINTMENT DATE TIME

LANGUAGE SPOKEN:

DIAGNOSIS / REASON FOR REFERRAL: [] AUDIOLOGY [] ENT

[x] PROCEDURES REQUESTED (Battery of tests may vary according to the age and primary concern)

Grid of checkboxes for various tests: Hearing Test, Pediatric Hearing Test, OAE, Cerumen Removal, Tinnitus Assessment, ABR, HAE, HAC, DIZZY TEST BATTERY, Advanced Diagnostic Hearing Tests, EcochG, cVEMP, oVEMP, VAT, ENG.

SPECIAL INSTRUCTIONS: Pediatric Testing, Location, Patients arriving late, Kindly give at least 24 hours notice for cancellations.