

Phone: **9839 3350** Fax: **9839 3374**

Patient Name:		D.O.B:
Address:		Postcode:
Phone Home:	Phone Work:	Mobile:
Medicare No.:	Ref:	Expiry: /

- Hearing Assessment\*** 9 months and up
- Auditory Processing Screening** 5½ - 10 years (at school)
- Central Auditory Processing Assessment (CAPA)\***  
Assess auditory processing skills, 8 – 13 yrs
- Pre Employment Aviation/Police/Hearing Assesment**
- Hearing Aid Opinion/Fitting Private**  
Adults Private & Pensioners/DVA/gold card **FREE Aids/Devices to eligible patients (government funded).**
- Workcover Assessment:** Registered Worksafe Provider
- Personal listeners, TV devices, Alarm clocks for the hearing & visually impaired, Alert systems**
- Swim Plugs** Pre-moulded/custom fit
- Noise Reduction, Work/Music Ear Plugs** Premium hearing protection
- Custom In Ear Monitors for Musicians**
- Ear, Nose & Throat + Specialist Referral** (include past medical history)

Review as Required       Ring me for further tests       Proceed with further tests

**Reason for referral:**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Referring Doctor: \_\_\_\_\_ Provider Number: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

**Report with opinion/advice OR Tick box for report only**

\*Medicare Rebates

Please phone **9800 5697** or email **info@knoxaudiology.com.au** to order another referral pad