



## Audiology Request

Patient Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

### CUSTOM EAR MOULDS

- Water** Excluding Plugs (Swim)
- Noise** Excluding Plugs (Ear-Defender)
- Musicians** Filtered Plugs
- In-Ear **Monitors / ComSet** Adaptor
- Ear **Impressions**

### ADULT ASSESSMENT

- Pre Employment / OH&S** Assessment
- Hearing** Assessment
- Hearing Aid** Suitability Evaluation
- Tinnitus** Rehabilitation & Management
- Auditory Processing** Assessment
- Cochlear Implant Candidacy** Assessment

### ELECTROPHYSIOLOGICAL ASSESSMENT

- Transient Evoked Otoacoustic Emissions (TEOAEs)
- Distortion Product Otoacoustic Emissions (DPOAEs)
- Auditory Brainstem Response (ABR)
- Auditory Stead State Response (ASSR)
- Electrocochleography (EChoG)
- Vestibular Evoked Myogenic Potentials (VEMPs)

Referral Investigation: \_\_\_\_\_

Referral Source: \_\_\_\_\_

Provider Number: \_\_\_\_\_ Date: \_\_\_\_\_

Does the patient have a high risk of falling? Yes / No

### PAEDIATRIC ASSESSMENT

- Hearing** Assessment
- Auditory Processing** Assessment (Age 7yrs+)

### VESTIBULAR ASSESSMENT

- VNG / Calorics

### ADULT REHABILITATION

- Hearing Aid** Adjustment
- Commonwealth Hearing Services** Program
- Cochlear Implant** Adjustment
- Bone Conduction Implant** Adjustment

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Visiting Atherton, Innisfail, Mareeba & Mossman