



Date: / /

BULK BILL Request for Paediatric Audiology

KIDS HEARING

+ School yEARS Screen

www.kidshearing.com.au

Diagnostic Assessment for Children 3+ (BULK BILLED)

- PTA or Play Audiometry (includes otoscopy, impedance audiometry and DPOAE's) **ABN: 14936161168**

**Please be advised, children 9 months to 3 years who require VROA assessment or complex children requiring two-audiologist assessment will need to be referred to Next Sense, Macquarie University Audiology, The Children's Hospital at Westmead, Sydney Children's Hospital Randwick and other private clinics as we do not have VROA facilities at the moment.*

Childs Name: _____ **DOB:** _____

Child's Address _____

Child Medicare: _____ **Ref:** _____ **Exp:** _____

Referral Reason:

- Speech and Language Delay
 - Articulation Difficulties
 - Developmental Concerns
 - Parent/Guardian Concerns
 - History of Middle Ear Issues
 - Pre- or Post Surgical Check
 - School/Pre-School Recommendation
 - Complex Medical History
 - Born Overseas, No Hearing Screen
 - Family History of Hearing Loss
 - Routine Wellness Check (e.g. Starting School)
 - Second opinion
- Other:.....

Parent/Guardian Contact Details:

Name: _____

Mobile: _____

Email: _____

Referring Provider Details (please fill below, or use practice stamp):

Referring Doctor Name:

Provider Number:

Practice Address:

Phone:

An electronic copy of this form is available on our website.

Once completed, please ask your patient to visit our website to book an appointment OR contact kidshearingclinic@gmail.com for assistance

Hours: Sunday 9:00 am to 1:30 pm | **Address:** 23 Wongala Crescent Beecroft 2119

Phone: 0403 765 046 | **Website:** www.kidshearing.com.au

Email: kidshearingclinic@gmail.com