

Consultant: Mr Markus Dahm FRACS, PhD, MD

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Referral

Audiology assessment and otology

Audiology

O Hearing a	assessment
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O Tympanometry

\bigcirc Auditory evoked potentials (OAE, ABR, ASS	SR)
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Otology

Opinion	and	treatment
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O Ongoing management

Patient details

Patient name			
Date of birth		Phone	
Email			
Address			
Interpreter req	uired OYes ONo	Language	

Reasons for referral (please attach any presenting history)

Referring health	professional	l or doctor
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Referrer name	
Provider number	
Address	
Email	
Phone	Referral date
Signature	