



Caroline Filo

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Member of the Australian College of Audiology. Hearing Rehabilitation Specialist (HRS). Office of Hearing Services Practitioner. 2450351J WorkCover Provider Number – 501444 Working With Children Check. WC0722502E

Referral for Hearing Services - 0455 404 486

Patient details:	
First Name:	Last Name:
Phone Number:	
Please conduct the following:	
Full Hearing Assessment Screening (Patients over 2 1/2 years of age) Includes Air Conduction, Tympanometry, Screening Acoustic Reflexes and Speech Test - Word Recognition Kendall Toy Test (KTT).	
Otoacoustic Emissions (DPOAE) Screening Cochlea Function Test from 6mths of age	
Objective Test - Can Detect a Hearing Loss from 30dB. Infants/Children/Adults.	
Air Conduction only	
Tympanometry Monitoring for Middle Ear Fluid/Grommets	
Speech Test - Word Recognition Kendall Toy Test (KTT) only	
Pre-Employment Assessments (Individual)	
Industrial Work Cover Baseline Assessments	
Industrial Work Cover Monitoring Assessments	
Custom-made Plugs (Swimming, Musicians, Noise protection, Sleeping, Communications pieces, Police)	
Other	
Clinical notes:	
Doctor details:	
Date:	
Name:	
Clinic name:	
Provider Number:	
Signature:	Stamp details here

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