

THE Hearing & Dizziness CLINIC

Amherstburg

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Essex

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LaSalle

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<input type="checkbox"/> Hearing Test Adult	<input type="checkbox"/> Hearing Test Child (0-18)	<input type="checkbox"/> Hearing Test Child (6-18)
<input type="checkbox"/> Cognitive Screening	<input type="checkbox"/> Hearing Test Adult	<input type="checkbox"/> Hearing Test Adult
<input type="checkbox"/> Hearing Aids	<input type="checkbox"/> Cognitive Screening	<input type="checkbox"/> Cognitive Screening
	<input type="checkbox"/> Hearing Aids	<input type="checkbox"/> Hearing Aids
<input type="checkbox"/> Tinnitus Assessment	<input type="checkbox"/> CAP Test	
	<input type="checkbox"/> Tinnitus Assessment	<input type="checkbox"/> Tinnitus Assessment
	<input type="checkbox"/> Vertigo Evaluation & Management	<input type="checkbox"/> Vertigo Evaluation & Management
	<input type="checkbox"/> Vestibular Rehabilitation	<input type="checkbox"/> Vestibular Rehabilitation
<input type="checkbox"/> Earwax Removal	<input type="checkbox"/> Earwax Removal	<input type="checkbox"/> Earwax Removal
<input type="checkbox"/> Custom Noise/Swim Plugs	<input type="checkbox"/> Custom Noise/Swim Plugs	<input type="checkbox"/> Custom Noise/Swim Plugs
SUDDEN HEARING LOSS	SUDDEN HEARING LOSS	SUDDEN HEARING LOSS
<input type="checkbox"/> Urgent: Kindly call us or encourage visit to ER	<input type="checkbox"/> Urgent: Kindly call us or encourage visit to ER	<input type="checkbox"/> Urgent: Kindly call us or encourage visit to ER

Patient Name:

Date of Birth:

Phone Number:

Email Address:

Referring Healthcare Provider:

Reason for Referral:

www.YouHear.ca

Questions or concerns? Reach out to our office manager Melissa at (519) 961-9285 or email melissa@youhear.ca
McKenzie Audiology Professional Corporation doing business as "The Hearing & Dizziness Clinic"

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