

HEAR2UNDERSTAND AUDIOLOGY SERVICES

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BOOKING REQUEST PLEASE FAX TO 306-384-4184

Fax: 306-384-4184

Na	Name: Phone:	_
Ado	Address: PHN:	_
City	City/Town: Postal Code: DOB:	_
Re	Referring Doctor: NOK:	
	► SUDDEN ONSET HEARING LOSS MUST BE REFERRED IMMEDIATELY TO ENT ◀	
	Sudden unset hearing loss must be referred immediately to ent	
	Pediatric Audiological Assessment (Birth to 18 years of age)	
	Adult Audiological Assessment	
	Infant /pediatric Auditory Brainstem Response-ABR (frequency specific and click)	
	Adult ABR (click)	
	Central Auditory Processing Screen (Age 3-6:11) Must be able to participate in testing	
	Central Auditory Processing Disorder (CAPD) Complete Diagnostic Evaluation (Ages 7-18)	
]	Central Auditory Processing Disorder (CAPD) Complete Diagnostic Evaluation (Adult)	
	Tinnitus/Sound Tolerance Initial Consultation	
]	Tinnitus/Misophonia/Hyperacusis Assessment/intervention (Pediatric and Adult)	
	Pediatric Amplification Consultation	
]	Bone Conduction Hearing Device Consultation (Pediatric and Adult)	
	Adult Compensation Assessment (includes Cortical Evoked Response Audiometry)	
	■ Vestibular Screening-Adult (GSOP, lateral vHIT, BPPV test)	
	Vestibular Evaluation Adult- BPPV test and treatment only	
	Vestibular Evaluation Adult -Full Diagnostic (GSOP, VNG, lateral/LARP/RALP vHIT, CDVAT, cVEMP/oVEMP)	
	Vestibular Evaluation-Concussion (GSOP, VNG, lateral/LARP/RALP vHIT, CDVAT)	
]	Vestibular Evaluation Pediatric- (vHIT, VEMP, Observational)	
	Vestibular Evaluation- Individual Tests (please specify)	
	☐ Other	
	Additional Information for Scheduling Purposes	
	Relevant history is required to ensure your patient is scheduled correctly.	

^{*}A recent Audiological evaluation (within 12 months) is required prior to vestibular services. Please add to booking request if not available for client at time of request. In some cases a more current audiogram may be required prior to receiving services.