

Date:

Patient's name:

Date of birth:

Phone Number:

Appointment Date:

Time:

Audiology

- Hearing Evaluation / Possible Hearing Loss
- Hearing Aid Assessment
- Tinnitus
- Vertigo / Balance Issues

Otolaryngology

- Consultation as indicated by Audiology Exam

Comments:

The patient has been referred to the Audiologists and Otolaryngologists associated with Hearing Institute of Ontario

Referring Physician:

Tel:

Oakville

1011 Upper Middle Rd E, Unit A6
Oakville, ON L6H 4L2
P: 905-338-6363
F: 289 351-3039

Mississauga

1077 N Service Rd, Unit 27
Mississauga, ON L4Y 1A6
P: 905-949-2002
F: 289 351-3039

Scarborough (Victoria Park)

1448 Lawrence Ave East, Suite 203
North York, ON M4A 2V6
P: 416-535-8020
F: 289 351-3039