

HARLEY STREET HEARING

REFERRAL FORM

129 Harley Street, London W1G 6BA

9 Harley Street, London, W1G 9AQ

7 Devonshire Street, W1W 5DY

North London Hearing-Wellington Diagnostics & Outpatients Centre, 296 Golders Green Rd, NW11 9PY
The Wellington Hospital, Platinum Medical Centre, 3rd Floor, 15-17 Lodge Road, NW8 8NX

Tel: 020 7486 1053

info@harleysthearing.co.uk / referrals@harleysthearing.co.uk / www.harleysthearing.co.uk

Patient Name:	Clinic Location:
Date of Birth:	Referred by:
Address:	Patient contact details: Home: Work:
Insurance provider:	Mobile: E-mail:

Investigations / services required (please mark with X):

Pure tone audiometry	
Tympanometry	
Acoustic reflex thresholds	
Speech audiometry	
Uncomfortable loudness levels	
Tinnitus match / mask	
SCAN-A (APD testing)	
APD assessment	
APD strategies and management	
Vestibular Assessment (vHIT, C-VEMP, O-VEMP, VNG, Positioning & Calorics) *please identify if your patient has contraindications to any of the above-mentioned tests in the relevant history section	
Vestibular rehabilitation	
Hearing aid assessment / trial	
Lyric assessment / trial	
Listening & communication enhancement (LACE)	
Swimming moulds	
Hearing protection – musicians, shooting etc	
Hearing therapy / tinnitus management	
Wax removal / microsuction	
Other (please specify):	

Relevant history:

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The account will be sent direct to the client or the medical insurance company, unless otherwise specified

Harley Street Hearing are registered providers with all major insurance companies. BUPA provider number: 30031569. AXA provider No: H83344