#209 – 6193 Currents Dr. NW
Edmonton, AB. T6W 2Z4

T: 780.424.8433 ● F: 780.756.9738
www.stanfordhearing.ca

PATIENTS NAME: ____

PHONE #: ______________________________

D.O.B: ____DD / MM / YYYY______ P.H.N: __________________________

☐ EDMONTON ☐ HIGH LEVEL ☐ HIGH PRAIRIE ☐ SLAVE LAKE

REASON FOR REFERRAL:

☐ Hearing Test ☐ Tinnitus Consultation

☐ Tympanometry ☐ Custom Hearing Protection

☐ Other ____

APPOINTMENT COMMENTS:

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Healthcare Provider Signature/Stamp

______________________________ DD / MM / YYYY ______________________________
PRAC. ID # DATE