



Shire Balance Clinic

Vertigo and Dizziness

REFERRAL

Patient Name _____

Diagnosis/ Clinical Notes _____

Treatment Required

- Vestibular Assessment & Treatment
- Balance & Dizziness
- Neurological
- Other

Steroids/ Anti-Nausea Prescribed _____

Private WC CTP NDIS DVA EPC

Signed: _____ Date: _____

Kate Holmes
Provider # 4073801T
B App Sc (Physio)
Advanced Vestibular & Neurological
Physiotherapy

Stephanie Hely
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Call for an appointment today 0401 305 703

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