



Midcoast Hearing

Independent. Personal.

Midcoast Hearing
Shop 1/19 Manning Street
Taree NSW 2430
02 5510 9777
taree@midcoasthearing.com.au

Referral Form for Ear, Nose & Throat Specialist / Neurologist

Specialist name			
Practice			
Provider number			
Referral date		Referral expiry date	
Patient name		Date of birth	
Medicare number			

Audiological Referral for

ITEM	DESCRIPTION	SELECT
82306	Non-Determined Audiometry — Refers to screening audiometry, LING sound and troubleshooting	<input type="checkbox"/>
82309	Audiometry (AC only)	<input type="checkbox"/>
82312	Audiometry (AC & BC or AC & Sp)	<input type="checkbox"/>
82327*	Impedance — To be claimed with items 82309, 82312, 82315* or 82318* (Claimed when checking middle ear)	<input type="checkbox"/>
82315*	Audiometry (AC, BC & Speech discrimination) FULL AUDIOGRAM — Useful for CI assessment or for standard audiology hearing test. Claim with 82327*.	<input type="checkbox"/>
82318*	Audiogram with CI programming in same appointment (To be used once someone has been fitted with a CI)	<input type="checkbox"/>
82300	Brain Stem Evoked Response Audiometry (Includes programming of Cochlear Speech processor, NRT post op)	<input type="checkbox"/>

CLAIM TOGETHER

- 82306
- 82309, 82312, 82327
- 82327*, 82315*, 82318*, 82300

SPECIALIST SIGNATURE

For any sudden hearing losses please call the clinic and an appointment will be arranged urgently