



Patient Name: _____ Patient Phone: _____ D.O.B. _____

Diagnosis: _____

Physician Name: _____ Physician Phone: _____

Physician Signature: _____ Date: _____

Preferred Location: Newport Beach Ladera Ranch

Please fax this form to 949.642.2950 with patient's pertinent medical records and insurance card.

Vestibular

Diagnostic Evaluation and Treatment:

- Vertigo
- Benign Paroxysmal Positional Vertigo (BPPV)
(Epley Omniax® treatment facility)
- Dizziness or Lightheadedness
- Vestibular Migraine
- Ménière's disease
- Perilymphatic Fistula
- Superior Canal Dehiscence
- Unsteadiness, Imbalance or Risk of Falling
- Labyrinthitis or Vestibular Neuritis
- Motion Intolerance or Mal de Debarquement Syndrome (MDDS)
- Persistent dizziness or imbalance related to:
 - Vestibulotoxic Drug Therapy
 - Middle/Inner Ear Surgery

Audiological

Diagnostic Evaluation and Treatment:

- Diagnostic Audiological Evaluation
- Tinnitus
- Hearing Aid Evaluation & Treatment
(Certified provider of Lyric™ extended wear device)
- Electrocochleography (EChocG)
- Auditory Brainstem Response (ABR)
- Ototoxic Audiological Monitoring

Treatment

Following a Comprehensive Diagnostic Vestibular Evaluation

- Advanced Vestibular Treatment™ (AVT)

Notes: _____



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Physician Name: _____ Physician Phone: _____

Physician Signature: _____ Date: _____

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Pediatric Audiological Services

Diagnostic Evaluation and Treatment:

- Pediatric Audiological Evaluation
 - Middle Ear Effusion
 - Pre/Post Tympanostomy Tube Placement
 - Speech and Language Delay
 - Failed School Screening
- Auditory Brainstem Response (ABR)
- Hearing Aid Evaluation & Treatment
- Custom Swim Molds
- Custom Hearing Protection

Pediatric Vestibular Services

Diagnostic Evaluation and Treatment:

- Pediatric Vestibular Evaluation & Treatment

Educational Audiological Services

- IEP/504/FM System Evaluation



Newport Beach



Ladera Ranch