Kingston Health Sciences Centre
Centre des sciences de la santé de Kingston

8589

Hôpital Hotel Dieu Hospital

Hôpital Général de Kingston General Hospital

Vestibular Function Lab Referral Form

Hotel Dieu Hospital site - Murray Building
Videonystagmography (VNG)
Phone: 613-544-3400 ext. 23633 | Fax: 613-544-7461

Patient Demographics

NAME: _____ TELEPHONE: _____

ADDRESS: _____ D.O.B. _____ (yyyy/mm/dd)

_____ HCN: _____

_____

Reason for Referral:

- ☐ Dizziness
- ☐ Vertigo
- ☐ Unilateral hearing loss
- ☐ Other hearing loss
- ☐ Tinnitus
- ☐ Other (specify): _____

Working diagnosis: _____

Has the patient had a previous VNG/ENG? _____

Has the patient had ear surgery? _____

Is there a cavity or perforation? _____

Is the ear canal free of wax? _____

List of relevant medications: _____

Check off requested testing:

- ☐ Standard VNG*
- ☐ Fistula test (Impedance Bridge)
- ☐ Other _____

*Includes: Gaze tests, Saccades, Tracking, Optokinetic tests, Positions, Spontaneous, and Water Caloric Tests

Physician Name: _____ **Signature:** _____
please print

Date: _____
(yyyy/mm/dd)