



Level 1, Suite 13, "The Gallery" Arcade  
 445 Victoria Avenue, Chatswood NSW 2067  
 T | 02 9188 9292 F | 02 9188 1611  
 E | [referral@chatswoodent.com.au](mailto:referral@chatswoodent.com.au)  
 W | [www.chatswoodent.com.au](http://www.chatswoodent.com.au)



**ASOHNS**  
MEMBER

THE AUSTRALIAN SOCIETY  
OF OTOLARYNGOLOGY  
HEAD AND NECK SURGERY



Fellow of the Royal Australasian  
College of Surgeons

**CHOOSE PROVIDER**

**Dr Bill Johnston**  
MBBS FRACS

**A/Prof Raewyn Campbell**  
FRACS BMed(Hons) BAppSc(Phty) GradDipEx&SportSc FARS

**FIRST AVAILABLE**

**URGENT** →  **<7 DAYS**    **1-2 WEEKS**    **<1 MONTH**    \_\_\_\_\_

**PATIENT INFORMATION (or patient label)**

NAME \_\_\_\_\_ DOB \_\_\_\_\_

MOBILE \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_

PARENT NAME (FOR CHILD PATIENTS) \_\_\_\_\_

**REFERRED FOR**

**(Tick all that apply)**

**EARS**

- Pain/infection
- Hearing loss
  - Unilateral
  - Bilateral
- Tinnitus/vertigo
- Wax/discharge

OTHER (Specify)

\_\_\_\_\_

**NOSE**

- Sinusitis
- Allergic Rhinitis
- Rhinorrhea
- Nasal Obstruction
- Snoring
- Epistaxis
- Loss of smell

**THROAT**

- Tonsils/tonsil stones
- Foreign body sensation
- Pain/discomfort
- Neck mass
- VCC

**SKULL BASE**

- Skull Base
- CSF Leak

**EXISTING RESULTS (include lab/clinic)**

Please consider ordering tests where appropriate

- CT nose/sinus \_\_\_\_\_
- Allergy tests \_\_\_\_\_
- Sleep Study \_\_\_\_\_
- Audiogram \_\_\_\_\_

**CLINICAL INDICATION**

**REFERRING DOCTOR DETAILS/PRACTICE STAMP**

REQUEST NEW REFERRAL PAD

NAME

Provider #

CLINIC

PHONE

EMAIL

**SIGNATURE**

**DATE**

## PATIENT INSTRUCTIONS

Call 02 9188 9292 for an appointment. Please advise if you are not with a health fund.

**YOUR APPOINTMENT**

**Date:**

**Time:**

**Consultation Fee:**

### STEP 1. BOOKING CHECKLIST – to send/notify Chatswood ENT in advance

You will be given instructions on how to provide these documents when booking.

- Send this referral
- Complete Patient intake form
- Advise date and location of test results – hearing test, skin prick allergy tests, blood tests – where available
- Advise date and location of relevant scans – x-ray, CT or MRI – where available

### STEP 2. APPOINTMENT CHECKLIST – bring these to your appointment

- This referral
- Hardcopy of relevant scans – x-ray, CT or MRI on film or CD – where available
- Medicare card / DVA Card
- Private Health fund card or information

## LOCATION AND PARKING



Level 1, Suite 13, 'The Gallery', 445 Victoria Avenue, Chatswood 2067.

Located inside 'The Gallery' arcade. Access from Victoria Avenue or Endeavour Street. To reach Level 1, look for the elevators behind the red Directory sign near the Victoria Avenue entrance.

**Public transport** – We are located a short walk from the new Chatswood bus/train interchange. From the train station, follow the signs for Victoria Ave and head up the escalator towards Westfields. The arcade '445 The Gallery' is on the left halfway down the pedestrian mall, just after the Chemist Warehouse.

**Parking** – The closest parking station is at 20 Endeavour Street. Endeavour Street is a one-way street. The parking entrance is on the left. Across the street from the parking, enter through the rear of the Gallery Arcade. Parking is free with purchase/ validation from New Yen Yen Supermarket, otherwise there is a fee.

There is free parking available at nearby Westfield. From Westfield shopping centre entrance walk left up the Victoria Avenue pedestrian mall towards the train station. Look for the arcade '445 The Gallery' halfway up the pedestrian mall before the Chemist Warehouse on the right as you head away from the Westfields.