

DAIM NTAWV XA MUS KUAJ QHOV NTSEJ

(Hearing Referral Letter — Hmong)

NPE: _____

Txog Cov Niam Txiv:

Raws li cov lus uas Minnesota Department of Health tau xav kom ua, cov me nyuam uas kawm hauv koj tus me nyuam lub hoob thiab koj tus me nyuam twb raug kuaj qhov ntsej thaum _____ thiab rov qab kuaj dua thaum _____.

Txawm hais tias cov ntsiab lus uas tshawb tawm los ntawd tsi tau qhia tau tseeb tseeb hais tias koj tus me nyuam muaj teeb meem txog kev tsi hnov lus los koj yuav tsum tau coj nws mus ntsib thaj maum thiab/los yog tus kws kuaj qhov ntsej (audiologist) es kom lawv tshawb saib nbxiv txog seb nws puas hnov lus zoo.

Thov coj daim ntawv no tuaj thaum koj coj koj tus me nyuam tuaj kuaj thiab hais kom tus neeg kuaj ntawm sau rau nram qab no.

See the attached screening audiogram or tympanogram.

Please complete this portion of the form and send it at your earliest convenience to: _____

I have examined _____ and find the following:

MEDICAL

- Normal hearing
- Medically treatable
- Not medically treatable
- Outer ear
- Middle ear
- Inner ear
- Refer to audiology
- Further comments

AUDIOLOGICAL

- Normal hearing
- Conductive
- Mixed
- Sensorineural
- Refer to physician
- Amplification evaluation
- Further comments

Signed: _____

Signed: _____

Date: _____

Date: _____

HEARING REFERRAL LETTER

Name: _____

Dear Parent:

In keeping with the recommendations of the Minnesota Department of Health, your child's school class was screened for hearing on _____ and rescreened on _____.

Your child was unable to hear all of the screening sounds. Although the results do not definitely mean your child has a hearing problem, you are urged to take him/her to your physician and/or audiologist for further hearing evaluation.

Please take this letter with you when your child is examined and ask the examiner to complete the bottom half.

See the attached screening audiogram or tympanogram.

Please complete this portion of the form and send it at your earliest convenience to:

I have examined _____ and find the following:

MEDICAL:

- Normal hearing
- Medically treatable
- Not medically treatable
- Outer ear
- Middle ear
- Inner ear
- Refer to audiology
- Further comments

Signed: _____

Date: _____

AUDIOLOGICAL:

- Normal hearing
- Conductive hearing loss
- Mixed hearing loss
- Sensorineural hearing loss
- Refer to physician
- Amplification evaluation
- Further comments

Signed: _____

Date: _____