BURNIE: 73 – 75 Mount Street
DEVONPORT: 70 Oldaker Street
LAUNCESTON: 50b Frankland Street
BELLERIVE: 9 – 11 Cambridge Road
ROSEBERY: 3 Reece Avenue

My Speech Pathology Tasmania
ABN: 91 428 242 665
73-75 Mount Street, Burnie TAS 7320
PO Box 510, Burnie TAS 7320
p 03 6431 8411 | **f** 03 6431 1417
e admin@myspeechpathology.org.au

Referral – Speech Pathology

My Speech Pathology Tasmania welcomes referrals from people within the community wishing to refer themselves to our service or from other professionals wishing to refer people to our service.

Client Details

Client Name:					
Date Of Birth:		Age:		Gender / Pronoun	
Address:					
Email:				Phone:	
Key Contact:	(please circle) Key Contact Primary Guardian Self				
Name:				Phone:	
Emergency Contact:	Name:				
	Relationship:			Phone:	

Referrer Details

Date:			
Name and Title:			
Organisation:			
Address:			
Email:		Phone:	

Reason for Referral

- ☐ **Speech**
- ☐ **Language**
- ☐ **Alternative Communication**
- ☐ **Voice**
- ☐ **Stuttering**
- ☐ **Literacy**
- ☐ **Mealtime Difficulties**
- ☐ **Swallowing**
- ☐ **Orofacial Myofunctional Assessment / Therapy**
- ☐ **Other (provide details below)**

Extra Referral Information

If 'Other was selected please provide information about your key concerns so that we can determine how to best meet your needs / the needs of the client.

Relevant History/Information:
Include any past/current diagnoses and/or medical conditions and please advise if any asthma, epilepsy, anaphylactic/allergy plans are in place.

Other Current Therapists / Services engaged with:
Please provide details and contact details if possible

Relevant reports or plans to be provided:
Please attach to referral or provide details prior to service

Funding – *some services may attract a gap fee, contact us to discuss if unsure.*

- ☐ NDIS
  - Number:
  - Plan Dates:
  - Self, Plan, or Agency Managed:
- ☐ Home Care Package (HCP)
- ☐ Community Home Support Plan (CHSP)
- ☐ Home and Community Care (HACC)
- ☐ Medicare (care plan)
- ☐ Private

Please send all referrals to:

My Speech Pathology Tasmania
PO BOX 510
Burnie TAS 7320

email: admin@myspeechpathology.org.au
fax: **03 6431 1417**