



Hearing Aid Provider

Hearing Aid Returns

If an injured worker returns or exchanges a hearing aid during the 60-day trial period, the hearing aid must be sent to the manufacturer for credit **within five business days** of the worker returning the hearing aid to the clinic. If the returned or exchanged hearing aid is an in-clinic stock hearing aid, contact the manufacturer **within five business days** to process the credit to WorkSafeBC. Please complete this form **each time** an injured worker returns or exchanges a hearing aid.

Date of submission

Date (yyyy-mm-dd)

This form must be submitted on the **same date** the hearing aid is sent to the manufacturer **or** when the manufacturer is contacted regarding an exchanged or returned in-clinic stock hearing aid.

Worker information

Last name	First name	Middle initial	Date of birth (yyyy-mm-dd)	WorkSafeBC claim number
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Clinic information

Clinic	Fax number	Payee number
Address		
City	Province	Postal code
Phone number	Practitioner	

Hearing aid information

Manufacturer and model	Serial number	Ear (left or right)	Date hearing aid was returned to clinic (yyyy-mm-dd)	Date hearing aid was sent to manufacturer (yyyy-mm-dd)	For in-clinic stock hearing aids: Date manufacturer was contacted (yyyy-mm-dd)
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Claims Call Centre
Phone 604.231.8888
Toll-free 1.888.967.5377
M-F, 8 a.m. to 6 p.m.

Fax
604.233.9777
Toll-free 1.888.922.8807

Mail
WorkSafeBC
PO Box 4700 Stn Terminal
Vancouver BC V6B 1J1

WorkSafeBC collects information on this form for the purposes of administering and enforcing the *Workers Compensation Act*. That Act, along with the *Freedom of Information and Protection of Privacy Act*, constitutes the authority to collect such information. To learn more about the collection of personal information, contact WorkSafeBC's FIPP Office, at PO Box 2310 Stn Terminal, Vancouver BC, V6B 3W5, or email FIPP@worksafebc.com, or call 604.279.8171.