
Unit VI Acronyms and Abbreviations

Introduction

“The patient had an MI diagnosed in A&E and is now in ICU.”

[MI: Myocardial infarct; A&E: Accident and Emergency (Department); ICU: Intensive Care Unit.]

Doctors' speech is full of abbreviations. Including the writing, we use several abbreviations per minute. This high prevalence has led us to consider medical abbreviations as a challenging pandemic.

Not only are doctors aware of medical abbreviations, but patients are familiar with many of them as well. Not uncommonly a patient in the UK would tell you in consultation something like “I have this weakness in my leg, and I am worried about MS” (multiple sclerosis). In my early months in London, I learnt many medical abbreviations from the patients themselves!

There are several “types” of abbreviations, namely:

- Straightforward abbreviations
- Extra-nice abbreviations
- Expanded-term abbreviations
- Energy-saving abbreviations
- Double-meaning abbreviations
- Mind-blowing abbreviations

Let us begin with the nice ones; we call them the *straightforward* abbreviations because for each nice abbreviation in your own language there is a nice English equivalent. It is just a matter of changing letter order, identifying the abbreviations and learning them. For example:

HRT Hormone replacement therapy

There are other kinds of abbreviations: the *extra-nice* ones. They are mostly used for drugs or chemical substances whose names have three or four syllables too many. They are extra nice because they are usually the same in many languages. For example:

CPK Creatine phosphokinase

In the next group, we have put together some examples of abbreviations that are widely used in English but that are generally preferred in their expanded form in other languages. Since language is an ever-changing creature, we are sure that these terms will eventually be abbreviated in many languages, but so far you can hear them referred to mostly as expanded terms:

MI Myocardial infarct

There is another group, which we can call *energy-saving* abbreviations. These are abbreviations that many languages leave in the English original and, of course, when expanding them the first letter of each word does not match the abbreviation. We call them energy-saving abbreviations because it would not have been so difficult to come up with a real “national” abbreviation for that term. When looking for examples, we realised that most hormone names are energy-saving abbreviations:

FSH Follicle-stimulating hormone

There is yet another kind, which we call *double-meaning* abbreviations. This is when one abbreviation can refer to two different terms. The context helps, of course, to discern the real meaning; however, it is worth keeping an eye open for these because, if misinterpreted, these abbreviations might get you into an embarrassing situation:

PID

- Pelvic inflammatory disease
- Prolapsed intervertebral disc

CSF

- Colony-stimulating factor
- Cerebrospinal fluid

The funniest abbreviations are those that become acronyms in which the pronunciation resembles a word that has nothing to do with the abbreviation’s meaning. We call this group *mind-blowing* abbreviations.

A *cabbage* in English is a vegetable known for its gas-producing properties; however, when an English-speaking surgeon says “This patient is a clear candidate for *cabbage*”, he/she is not talking about what the patient should have for lunch, but rather the type of surgery he/she is suggesting should be performed. Thus, *cabbage* is the colloquial way of referring to CABG (coronary artery bypass grafting).

If you hear an oncologist saying “I think your patient needs a *chop*”, you walk on down the corridor, wondering whether this new alternative therapy will consist of a pork or a lamb chop. But then you quickly realise that the specialist is actually referring to a CHOP (a regimen of cyclophosphamide, hydroxydaunomycin, oncovin and prednisone, used in cancer chemotherapy).

There are more abbreviations out there, and there are also more to come. The medical profession is sure to keep us busy catching up with its incursions into linguistic creation.

We offer a list of common abbreviations and will show you more in Unit IX by clinical areas. We advise you to practise reading them in a natural way. Bear in mind that to be able to identify written abbreviations may not be enough. From this standpoint, there are three types of abbreviations:

1. Read abbreviations (acronyms)
 2. Spelt abbreviations
 3. Half-spelt/half-read abbreviations
1. Nobody would understand a spelt abbreviation if you read it and nobody would understand a read abbreviation if you spelt it. For example, *AIDS* stands for acquired immune deficiency syndrome and must be read *aids* [ādz]. Nobody would understand you if instead of saying *aids* you spelt (saying each letter by its name) A-I-D-S; therefore, never spell a “read abbreviation” and never read a “spelt abbreviation”.
 2. Most abbreviations are spelt abbreviations and are usually those in which the letter order makes them almost impossible to read. Think, for example, of *COPD* (chronic obstructive pulmonary disease) and try to read the abbreviation instead of spelling it. Never use the “expanded form” (chronic obstructive pulmonary disease) of a classic abbreviation such as this one because it would sound extraordinarily unnatural.
 3. The third type is made up of abbreviations such as *CPAP* (continuous positive airway pressure) which is pronounced something like *C-pap*. If you spell out CPAP (C-P-A-P), nobody will understand you.

The most common abbreviations used by a family doctor are listed below; however, the use of abbreviations varies locally. You may need to add to this list some others that are used in your environment.

Besides more or less formal abbreviations, there are also “short forms” for some commonly used words in medical notes, such as *abd* for abdomen, *creps* for crepitations, *Paeds* for Paediatrics, *Gynae* for Gynaecology/-ist, etc.

Note that sometimes abbreviations for units of measurement are also spelt, for example *kg* is pronounced *kā-jē* and *mg* is pronounced *ĕm-jē*. Although you may prefer to pronounce the whole word (kilograms or milligrams), be aware that native English speakers may use the abbreviations in spoken language.

Plus, you must be aware of many other abbreviations, unrelated to medicine, that are used in “daily life”. Britons are particularly keen on spoken abbreviations, even if it would be just as easy to say the whole sentence. For example, is it easier to say *A-S-A-P* (spelt abbreviation) than “as soon as possible”? Probably not, but *ASAP* is quite common. Other interesting examples (all *spelt*) are *BO* (body odour), *OTT* (over the top, to indicate an exaggerated reaction), *TLC* (tender love and care), *PA* (personal assistant), etc.

Alphabet Pronunciation

It is worth writing down the alphabet and making sure you remember the names of all the letters in English; some that may need to refresh are the H, J, K, Q, R, X, W, Y or Z (see Appendix 3).

Abbreviations List

ACJ	Acromioclavicular joint
ACE	Angiotensin-converting enzyme
ACEI	Angiotensin-converting enzyme inhibitor
ACL	Anterior cruciate ligament
ADHD	Attention deficit hyperactivity disorder
ADL	Activities of daily living
ADR	Adverse drug reaction
AF	Atrial fibrillation
AFB	Acid-fast bacilli (tuberculosis bacilli)
AI	Aortic incompetence
AIDS	Acquired immunodeficiency syndrome
AJ	Ankle jerk (reflex)
ALP	Alkaline phosphatase
a.m.	In the morning
AN	Antenatal
ANA	Antinuclear antibodies
AP	Antero-posterior
ARDS	Acute respiratory distress syndrome
ARF	Acute renal failure
AS	Ankylosing spondylitis
AST	Aspartate aminotransferase
ATN	Acute tubular necrosis
AXR	Abdominal X-ray
BCC	Basal cell carcinoma
BCG	Bacillus Calmette-Guérin
BID, b.i.d.	Bis in die (twice a day)
BM	Bowel movement
BNF	British National Formulary
BO	Bowels opened
BP	Blood pressure
BS	Bowel sounds
BV	Bacterial vaginosis
CA	Cancer
CABG	Coronary artery bypass graft
CAD	Coronary artery disease
CAT	Computerised axial tomography

CBD	Common bile duct
CBT	Cognitive behavioural therapy
CCF	Congestive cardiac failure
CF	Cystic fibrosis
CHF	Congestive heart failure
CIN	Cervical intraepithelial neoplasia
CML	Chronic myeloid leukaemia
CMML	Chronic myelomonocytic leukaemia
CNS	Central nervous system
C/O	Complains of
COAD	Chronic obstructive airways disease
COPD	Chronic obstructive pulmonary disease
CPAP	Continuous positive airways pressure
CPN	Community psychiatric nurse
CPR	Cardio-pulmonary resuscitation
CrCl	Creatinine clearance
CRF	Chronic renal failure
CSF	Colony stimulating factor
CSU	Catheter specimen of urine
CT	Computerised tomography
CV	Cardiovascular
CVA	Cerebrovascular accident
CVS	Cardiovascular system
Cx	Cervix
CXR	Chest X-ray
D&C	Dilatation and curettage
D&V	Diarrhoea and vomiting
D/D, DDX	Differential diagnosis
DCIS	Ductal carcinoma in situ
DIB	Difficulty in breathing
DLE	Discoid lupus erythematosus
DN	District nurse
DNA	Did not attend
DNA	Deoxyribonucleic acid
DNR	Do not resuscitate
DOA	Dead on arrival
DOB	Date of birth
DPB	Diastolic blood pressure
DRE	Digital rectal examination
DU	Duodenal ulcer
DVT	Deep venous thrombosis
Dx	Diagnosis
EAU	Emergency admission unit
EBV	Epstein-Barr virus
ECG	Electrocardiogram
ECT	Electroconvulsive therapy

EDD	Expected date of delivery
EEG	Electroencephalogram
EMS	Emergency medical service
ENT	Ear, nose and throat
ER	Emergency room
ERCP	Endoscopic retrograde cholangiopancreatography
ESR	Erythrocyte sedimentation rate
ESRD	End-stage renal disease
ETT	Exercise tolerance test
FB	Foreign body
FEV ₁	Forced expiratory volume in 1 second
FH, FAHX	Family history
FH+/FH-	Family history positive/negative
FB	Foreign body
FBC	Full blood count
FOB	Faecal occult blood
FPC	Family Planning Clinic
FUO	Fever of unknown origin
G	Gravidity
GFR	Glomerular filtration rate
GGT	γ -Glutamyltranspeptidase, -glutamyltransferase
GH	Growth hormone
GI	Gastrointestinal
GIS	Gastrointestinal system
GORD	Gastro-oesophageal reflux disease
GOT	Glutamic oxaloacetic transaminase
GP	General practitioner
GPT	Glutamic pyruvic transaminase
GTN	Glyceryl trinitrate
GTT	Glucose tolerance test
GU	Gastric ulcer
GUM	Genitourinary Medicine
HBP	High blood pressure
HBV	Hepatitis B virus
hCG	Human chorionic gonadotropin
HCV	Hepatitis C virus
HIV	Human immunodeficiency virus
HO	house officer
HPV	Human papilloma virus
HR	Heart rate
HRT	Hormone replacement therapy
HS	Heart sounds
HVS	High vaginal swab
IBD	Inflammatory bowel disease
IBS	Irritable bowel syndrome
ICU	Intensive care unit

INR	International normalised ratio
IP	Interphalangeal
IP	In-patient
IQ	Intelligence quotient
ISQ	In statu quo (condition unchanged)
ITU	Intensive therapy unit
IU	International unit
IUD	Intra-uterine device
IUCD	Intra-uterine contraceptive device
IV, i.v.	Intravenous
IVF	In vitro fertilisation
IVP	Intravenous pyelogram
IVU	Intravenous urogram
Ix	Investigation
JVP	Jugular venous pressure
KUB	Kidney, ureter and bladder
L	Left
LA	Left atrium
LAD	Left anterior descending coronary artery
LAD	Left axis deviation
LBBB	Left bundle branch block
LBP	Low back pain
LCX	Left circumflex coronary artery
LE	Lupus erythematosus
LE	Left eye
LFT	Liver function test
LIF	Left iliac fossa
LLL	Left lower lobe (of lung)
LLQ	Left lower quadrant (of abdomen)
LMP	Last menstrual period
LP	Lumbar puncture
LRTI	Low respiratory tract infection
LSCS	Lower segment caesarean section
LUL	Left upper lobe (of lung)
LUQ	Left upper quadrant (of abdomen)
LUTS	Lower urinary tract symptoms
LV	Left ventricle
LVD	Left ventricular dysfunction
LFV	Left ventricular failure
LVH	Left ventricular hypertrophy
M	Male
M.B.	Bachelor of Medicine
MCHC	Mean corpuscular haemoglobin concentration
MCP	Metacarpophalangeal
MCTD	Mixed connective tissue disease
MCV	Mean corpuscular volume

M.D.	Medicinae doctor [American]
MI	Myocardial infarction
MI	Mitral insufficiency/incompetence
MMR	Measles, mumps, rubella (vaccine)
M/R	Modified release
MR	Magnetic resonance
MRCGP	Member of the Royal College of General Practitioners
MRI	Magnetic resonance imaging
MRSA	Meticillin resistant <i>Staphylococcus aureus</i>
MS	Multiple sclerosis
MS	Mitral stenosis
MSU	Mid-stream urine
MTP	Metatarsophalangeal
MVP	Mitral valve prolapse
N/A	Not applicable
NAD	No abnormality detected
NGU	Non-gonococcal urethritis
NHS	National Health Service
NI	National insurance
NK	Not known
NPO	Nil per os (nothing by mouth)
NSAIDs	Nonsteroidal anti-inflammatory drugs
NUD	Non-ulcer dyspepsia
N & V	Nausea and vomiting
OA	Osteoarthritis
OAP	Old age pensioner
Obs	Obstetrics
OCG	Oral cholecystography
OD	Overdose
OGD	Oesophagogastroduodenoscopy
O/E	On examination
OM	Otitis media
OOH	Out of hours
OP	Out-patient
OPA	Outpatients appointment
OPD	Outpatients department
OSA	Obstructive sleep apnoea
OT	Operating theatre
OT	Occupational therapist
OTC	Over the counter
P	Pulse
P	Parity
p.c.	Post cibum (after meals)
p.r.n.	Pro re nata (according to circumstances, may require)
p.v.	Per vaginam
PAN	Polyarteritis nodosa

PAT	Paroxysmal atrial tachycardia
PBC	Primary biliary cirrhosis
PC	Present complaint
PCL	Posterior cruciate ligament
PCP	<i>Pneumocystis carinii</i> pneumonia
PDA	Patent ductus arteriosus
PE	Pulmonary embolus
PERLA	Pupils equal and reactive to light and accommodation
PE	Pulmonary embolism
PH, PHx	Past history
PID	Pelvic inflammatory disease
PM	Post mortem
p.m.	In the afternoon or evening
PMB	Post-menopausal bleeding
PMH	Past medical history
PMS	Premenstrual symptoms
PN	Postnatal
PND	Postnatal depression
PND	Paroxysmal nocturnal dyspnoea
PO	Per os (by mouth, oral)
POMR	Problem-oriented medical record
POP	Progesterone only pill
PPH	Postpartum haemorrhage
PR	Per rectum
Pt	Patient
PUO	Pyrexia of unknown origin
PRL	Prolactin
PSA	Prostate-specific antigen
PTH	Parathyroid hormone
PV	Per vaginam
QALY	Quality adjusted life year
q.i.d.	Quater in die (four times daily)
q.v.	Quantum vis (as much as desired)
R	Right
RA	Rheumatoid arthritis
RA	Right atrium
RBBB	Right bundle branch block
RBC	Red blood cell or count
RDA	Recommended daily allowance
RE	Right eye
RF	Rheumatoid factor
RIF	Right iliac fossa
RLL	Right lower lobe (of lung)
RLQ	Right lower quadrant (of abdomen)
RML	Right middle lobe (of lung)
RMZ	Right middle zone

RPGN	Rapidly progressive glomerulonephritis
RTA	Road traffic accident
RTA	Renal tubular acidosis
RUL	Right upper lobe (of lung)
RUQ	Right upper quadrant (of abdomen)
RV	Right ventricle
Rx	Prescribe, prescription drug
S	Sugar
SAH	Subarachnoidal haemorrhage
SBC	Secondary biliary cirrhosis
SBP	Systolic blood pressure
SAD	Seasonal affective disorder
SC	Subcutaneous
SCC	Squamous cell carcinoma
SCLE	Subacute cutaneous lupus erythematosus
SCM	Sternocleidomastoid muscle
SHO	Senior house officer
SI	Sacro-iliac
SIADH	Syndrome of inappropriate secretion of antidiuretic hormone
SIDS	Sudden infant death syndrome
SLE	Systemic lupus erythematosus
SOAP	Subjective, objective, assessment, and plan (used in problem-oriented records)
SOB	Shortness of breath
SOBOE	Short of breath on exertion
SOL	Space-occupying lesion
SpR	Specialist registrar
SSc	Systemic sclerosis
STD	Sexually transmitted disease
STI	Sexually transmitted infection
SVCS	Superior vena cava syndrome
Sx	Symptoms/signs
T	Temperature
Tabs	Tablets
TENS	Transcutaneous electrical nerve stimulation
t.i.d.	Ter in die (three times daily)
TB	Tuberculosis
TFTs	Thyroid function tests
TIA	Transient ischaemic attack
TM	Tympanic membrane
TMJ	Temporomandibular joint
TOP	Termination of pregnancy
TPN	Total parenteral nutrition
TSH	Thyroid-stimulating hormone
TPP	Thrombotic thrombocytopaenic purpura
TURP	Transurethral resection of the prostate

TV	Trichomonas vaginalis
UC	Ulcerative colitis
U&E	Urea and electrolytes
URTI	Upper respiratory tract infection
USs	Ultrasound scan
UTI	Urinary tract infection
VC	Vital capacity
VE	Vaginal examination
VF	Ventricular fibrillation
VV	Varicose vein
WBC	White blood cell
WNL	Within normal limits
XR	X-ray
#	Fracture
^^	Increased