

**Clinical Information Assurance (Record Keeping) Policy**

**Approved Abbreviations Guidance**

**Version 3**

<b>Summary:</b>	Procedure attached to Clinical Information Assurance (Record Keeping) Policy. List of Abbreviations produced by Clinical Staff for use within Health Records	
<b>Keywords (minimum of 5):</b> <i>(To assist policy search engine)</i>	Abbreviations, approved abbreviations, abbreviations guidance, record keeping.	
<b>Target Audience:</b>	All staff who contribute or manage clinical information – both paper and electronic.	
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<b>Author:</b>	Liz Bega, Records Manager	
<b>Sponsor:</b>	Helen Reading, Associate Director of Technology	

# Version Control

## Change Record

Date	Author	Version	Page	Reason for Change
15/08/2011	L Barrington	DV0.1	All	Developed from HPFT and HCHC guidance and merged into SHFT document
29/12/2011	L Barrington	DV0.2	All	Minor amendments following consultation
29/04/2012	L Barrington	FINAL	8-9	Paediatric Therapies inclusion
06/06/2014	R Lloyd	FINAL V2	All	Minor amendments following consultation
20/08/2014	R Lloyd	V2	12	Minor addition
1/10/2014	R Lloyd	V2	17	Addition of MSK Abbreviations
19/05/2017	L Bega	V3	4	Addition of SLT (Speech and Language Therapist) abbreviation
19/05/2017	L Bega	V3	4	Addition of Physio (Physiotherapist)
19/05/2017	L Bega	V3	5	Addition of ERS (Enhanced Recovery and Support at Home Service)
19/05/2017	L Bega	V3	7	Addition of EFI (Electronic Frailty Index)
25/10/2017	L Bega	V3	7	Addition of ASQ (Ages and stages questionnaire) and EPDS (Edinburgh Postnatal Depression Score)

## Reviewers/contributors

Name	Position	Version Reviewed & Date
MH&LD Records Group members	Various – service records leads	V0.1 15/08/2011
ICS Records Group members	Various – service records leads	V0.1 15/08/2011
Clinical Info Assurance Stg Group	Senior Clinical Leads for Records	V0.1 15/08/2011
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Trust Clinical Records Group	Various – Chief Clinical Information Officer, service and clinical leads	DV0.03 29/05/2014
Dr Neil Langridge	Consultant Physiotherapist, Musculoskeletal Service	DV0.03 19/05/2014
Dr Jennifer Rowden	Clinical Lead ISD West EPR Project	V2 03/02/2015
Record Keeping and Care Planning Workstream	Various – service records leads	V3 19/05/2017

# Contents

	<b>Page</b>
1. General	4
2. Consensus agreed in Trust documentation	4
3. Medical abbreviations	6
4. Specimens	6
5. Others	7
6. Adult Services	7
7. Latin abbreviations	8
8. Signs for male/female	9
9. Paediatric Therapies Abbreviations	10
9.1. Paediatric Therapies Test Abbreviations	11
10. School Nursing & Health Visiting	12
11. Musculoskeletal Service (MSK) Abbreviations	13

## List of Abbreviations produced by Clinical Staff for use within Health Records

**To support safe, effective care and communication, patient records must be up to date, factual, accurate, and written so that the meaning is clear to everyone who uses the record.**

Staff should always aim to avoid using abbreviations and should note their professional guidance on this. The Trust does not encourage or positively support the use of abbreviations but noting that some staff use them, this guidance is issued in an effort to minimise the risks associated with the practice. Therefore, if abbreviations are used those listed below are the only abbreviations that can be used; they have been produced by consensus by clinicians throughout the Trust.

When a condition, treatment or investigation is mentioned it must always be written in full when first recorded, and repeated on each new page (paper records only) The initials for reference later should be put in brackets behind the full name e.g. "Cognitive Behaviour Therapy" (CBT). Should this be mentioned again in the notes it could then be referred to as CBT.

There is no agreement amongst clinicians to use any other abbreviations at all. Please contact the Records Manager should you believe a new abbreviation should be added to the list.

### 1. GENERAL

- 1.1 Left or right must be written in full.
- 1.2 24 hour clock system to be used.

### 2. CONSENSUS AGREED IN TRUST DOCUMENTATION

#### 2.1 Titles

Any name prefixes e.g. Dr/SR/CN but to include the professionals' name:

RN – Registered Nurse

Dr – Doctor

FY1 and FY2 – Foundation Doctor

StR – Specialty Doctor

ST4-6 – Speciality Trainee

AMHP – Approved Mental Health Professional

HCSW – Healthcare Support Worker

OT – Occupational Therapist

CPN – Community Psychiatric Nurse

CMHN – Community Mental health Nurse

LDN – Learning Disability Nurse

CT1-3 – Core Trainee

SLT – Speech and Language Therapist

Physio - Physiotherapist

#### 2.2 Chemical Symbols

Internationally recognised chemical symbols.

#### 2.3 Diagnosis and Operations

These are written out in full.

## 2.4 Procedures and Investigations

BP	Blood Pressure
CT scan	Computerised Tomography
CVP	Central Venous Pressure
CXR	Chest X-ray
ECT	Electro Convulsive Therapy
ECG	Electrocardiogram
EEG	Electro-encephalogram
ESR	Erythrocyte Sedimentation Rate
FBC	Full Blood Count
Hb	Haemoglobin
IVP	Intravenous Pyelogram
LFT's	Liver Function Tests
MRI	Magnetic Resonance Imaging
TPN	Total Parenteral Nutrition
TPR	Temperature, Pulse and Respiration
U's and E's	Urea and Electrolytes

## 2.5 Administrative and Management Terms

AAT	Access and Assessment Team (Adult Mental Health Services)
ACT	Acute Care Team (Adult Mental Health Division)
AIS	Adult Information System
AMHT	Area Mental Health Team
CAMHS	Child and Adolescent Mental Health Services
CBT	Cognitive Behavioural Therapy
CCT	Community Care Team (Adult Services)
CTT	Community Treatment Team (Adult Mental Health Division)
CLDT	Community Learning Disability Team
CPA	Care Programme Approach
CM	Care Management
CMHT	Community Mental Health Team
DNA	Did not attend
ELP	Essential Lifestyle Planning
EPR	Electronic Patient Record
ERS	Enhanced Recovery and Support at Home Service
FU	Follow up
H@H	Hospital at Home Service (Adult Mental Health Division)
HIS	Healthcare Information System
ICA/ICU	Intensive Care Area/Intensive Care Unit
ICT	Integrated Care Team
ISD	Integrated Service Division
IST	Intensive Support Team
LBHU	Locally Based Hospital Unit
LMHT	Locality Mental Health Team
MCA	Mental Capacity Act
MEHLEDIS	Mental Health and Learning Disabilities Information System
MHA	Mental Health Act
MSK	Musculoskeletal Service
NP	New Patient
PARIS	Southampton City Council Adult Service IT system
PAS	Patient Administration System
PCP	Person Centred Planning
PICU	Psychiatric Intensive Care Unit

Poppie	Substance Misuse Client Information System
QA	Queen Alexandra Hospital
RiO	Trust Electronic Patient Record
SCR	Secondary Care Record
SGH	Southampton General Hospital
SPOC	Single Point Of Contact
SWIFT	County Council Adult Services IT system

### 3. MEDICAL ABBREVIATIONS

A & E	Accident and Emergency – also known as Emergency Department
BD	Twice daily
BMI	Body Mass Index
CA	Cancer
DNR	Do Not Resuscitate
DNAR	Do Not Attempt Resuscitation
DNACPR	Do Not Attempt Cardio Pulmonary Resuscitation
EUA	Examination under anaesthetic
GA	General Anaesthetic
INR	International Normalised ratio – measure the time taken for blood to clot (for patients on anti-coagulants)
IVI	Intravenous Infusion
LA	Local Anaesthetic
Mane	Morning dose
NAD	Nothing abnormal discovered
Nocte	Night dose
NoF	Neck of Femur
OM	Each morning
ON	Every night
PO	Per Orem (Orally)
PR	Per rectum
PV	Per vagina
PRN	Pro re nata (as required)
QDS	Four times daily
RTA	Road Traffic Accident
RX	Treatment
SC	Sub-cutaneous
SL	Sublingual
TDS	Three times daily
VTE	Venous Thromboembolism
#	Fracture
+ive / -ive	positive / negative

### 4. SPECIMENS

CSU	Catheter Stream Urine Sample
CSF	Cerebrospinal Fluid
EMU	Each Morning Urine Sample
MSU	Mid-Stream Urine Sample

## 5. OTHERS

ASQ	Ages and stages questionnaire
BO	Bowels Open
BNO	Bowels Not Open
DOB	Date of Birth
DVT	Deep Vein Thrombosis
EFI	Electronic Frailty Index
EPDS	Edinburgh Postnatal Depression Score
HNPU	Has Not Passed Urine
Ht	Height
LMP	Last Menstrual Period
MRSA	Methicillin or Multiple Antibiotic Resistant Staphylococcus Aureus
NAI	Non Accidental Injury
NG	Naso Gastric
NBM	Nil by Mouth
POP	Plaster of Paris
PU	Passed Urine
TTO	To Take Out
TCI	To Come In
UTI	Urinary Tract Infection
Wt	Weight

## 6. ADULT SERVICES (previously known as Social Services)

APO	Adult Placement Officer
AMHP	Approved Mental Health Practitioner
C&F	Children and Families
CM	Care Manager
CP	Child Protection
CPC	Child Protection Conference
CWD	Children with Disabilities
DhoH	Deafened and Hard of Hearing
EMI	Elderly Mentally Infirm
FP	Family Placement
HC	Home Care(r)
LAC	Looked After Children
LD	Learning Disabilities/Difficulties
MH	Mental Health
OOH	Out of Hours Service (formerly EDS, Emergency Duty Service)
OP	Older Persons
OT	Occupational Therapy (ist)
PD	Physical Disabilities
R&A(T)	Reception and Assessment (Team)
SM	Service Manager
SM	Substance Misuse
SSA	Social Services Assistant
SSW	Senior Social Worker – also known as Senior Practitioner
SW	Social Work(er)
TM	Team Manager
YOT	Youth Offending Team

Internationally recognised units and symbols are used in the BNF where possible.


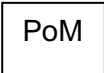
## 7. Latin Abbreviations

Although directions should preferably be in English without abbreviation, it is recognised that some Latin abbreviation areas are used when prescribing. The following is a list of appropriate abbreviations. It should be noted that the English version is not always an exact translation.

a. c.	=	ante cibum	(before food)
b. d.	=	bis die	(twice daily)
o. m.	=	omni mane	(every morning)
o. n.	=	omni nocte	(every night)
p. c.	=	post cibum	(after food)
p. r. n.	=	pro re nata	(when required)
q. d.	=	quater die	(four times daily)
q. d. s.	=	quater die sumendus	(to be taken 4 times daily)
q. q. h.	=	quarta quaque hora	(every four hours)
stat	=	immediately	
t. d. s.	=	ter die sumendus	(to be taken 3 times daily)
t. i. d.	=	ter in die	(three times daily)

ACBS	Advisory Committee on Borderline Substances
ACE	Angiotensin-converting enzyme
ADHD	Attention Deficit Hyperactivity Disorder
AIDDS	Acquired immunodeficiency syndrome
Approx.	Approximately
AV	Atrioventricular
BAN	British Approved Name
BP	British Pharmacopoeia 2002, unless otherwise stated
BPC	British Pharmaceutical Codex 1973 and Supplement 1976, unless otherwise stated
CD	Preparation subject to prescription requirements under The Misuse of Drugs Act.
CDSM	Committee on Dental and Surgical Materials
CNS	Central Nervous System
CPMP	Committee on Proprietary Medicinal Products
CRM	Committee on Review of Medicines
CSM	Committee on Safety of Medicines
d.c	Direct current
DPF	Dental Practitioners' Formulary
e/c	Enteric-coated (termed gastro-resistant in BP)
EMA	European Medicines Evaluation Agency
f/c	Film coated
G6PD	Glucose-6-phosphate dehydrogenase
HIV	Human Immunodeficiency Virus
HRT	Hormone Replacement Therapy
i/m	Intramuscular
i/v	Intravenous
INR	International Normalised Ratio
MAOIs	Monoamine Oxidase Inhibitors



Max.	Maximum
MCA	Medicines Control Agency, now MHRA
MHRA	Medicines and Healthcare Products Regulatory Agency
m/r	Modified-release
NHS	National Health Service
	Not prescribed under National Health Service
NICE	National Institute for Clinical Excellence
NP	Proper Name
NPF	Nurse Prescribers' Formulary
NSAID	Non-steroidal Anti-inflammatory Drug
PGD	Patient Group Direction
	Prescription Only Medicine
®	Trade Mark
rINN	Recommended International Non-proprietary Name
RSV	Respiratory Syncytial Virus
s/c	Subcutaneous
SLS	Selected List Scheme
SMAC	Standing Medical Advisory Committee
SPC	Summary of Product Characteristics
Spp.	Species
SSRIs	Selective Serotonin Reuptake Inhibitors
UK	United Kingdom
Units	For SI Units
USP	United States Pharmacopeia 25 (2002) unless otherwise stated
WD	Withdrawn or Specially Imported Drugs, see Prescription writing, p.4
WHO	World Health Organisation

## 8. Signs for male and female ♂ ♀



From the symbol of [Mars](#) (U+2642 ♂). The symbol for a [male organism](#) or [man](#).



From the symbol of [Venus](#) (U+2640 ♀). The symbol for a [female organism](#) or [woman](#).

## 9. PAEDIATRIC THERAPIES ABBREVIATIONS

ABBREVIATION	MEANING
Ax	Assessment
AFO	Ankle Foot Orthosis
Appt	Appointment
ASD	Autistic Spectrum Disorder
CAF	Common Assessment Framework
CC	Copy Circulation
CNN	Community Nursery Nurse
DAFO	Dynamic Ankle Foot Orthosis
DNA	Did not attend
DOB/dob	Date of Birth
EP	Educational Psychologist
FMS/fms	Fine Motor Skills
GMS/gms	Gross Motor Skills
GP	General Practitioner (Family Doctor)
HI	Hearing Impairment
HV	Health Visitor
IDP	Inclusion Development Programme
IEP	Individual Educational Plan
IPA	Inclusion Partnership Agreement
IRQ	Inner Range Quadriceps
KAFO	Knee ankle Foot Orthosis
LL	Lower limb
LSA	Learning Support Assistant
MCP	Metacarpalangeal Joint
MDA	Multi Disciplinary Assessment
NAD	Nothing Abnormal Detected
OT	Occupational Therapy
OT Tech	Occupational Therapy Technician
Physio	Physiotherapist or Physiotherapy Treatment
PTT	Physiotherapy Technician
PTA	Physiotherapy Assistant
ROM	Range of Movement
RTA	Road Traffic Accident
SEN	Special Educational Needs
SLT	Speech and Language Therapist
SLTA	Speech and Language Therapist Assistant
SNA	Special Needs Assistant
SENCO	Special Educational Needs Co-Ordinator
TA	Teaching Assistant
UL	Upper Limb
VI	Visual Impairment
WNL	Within Normal Limits

## 9.1 PAEDIATRIC THERAPIES TEST ABBREVIATIONS

ABBREVIATION	TITLE
ACE 6-11	Assessment of Comprehension and Expression 6-11
BPVS	British Picture Vocabulary Scale
CELF	Clinical Evaluation of Language Fundamentals
CELF Pre	Clinical Evaluation of Language Fundamentals - Pre-School
CLEAR	Clear phonology screening assessment
DEAP	Diagnostic Evaluation of Articulation and Phonology
DLS	Derbyshire Language Scheme
PLS	Pre-school Language Scales
PSA	Phonology Screening Assessment
RAPT	Renfrew Action Picture Test
RDLS	Reynell Developmental Language Scales
RWFT	Renfrew Word Finding Test
STAP	South Tyneside Assessment of Phonology
CANT & THAN	Canterbury & Thanet Verbal Reasoning Scales
MVPT-R	Motor-Free Visual Perception Test - Revised
DTV-P2	Developmental Test of Visual Perception 2
Peabody	Peabody Developmental Motor Scales
TVPS	Test of Visual- Perceptual Skills (Non Motor)
Beery VMI	Developmental Test of Visual Motor integration
BOTOMP-2	Bruininks- Oseretsky Test of Motor Proficiency 2
MAP	Miller Assessment for Preschoolers
MABC-2	Movement Assessment Battery for Children - 2
Bayleys	Bayley Scales of Infant Development (II)
Clin Obs	Observational/Criterion Referenced Assessments
Durrell	Durrell Test of Handwriting Speed
DASH	Detailed assessment of Speed of Handwriting
SFA	School Function Assessment
Sensory Profile	Sensory Profile Questionnaire (Winnie Dunn)
PEDI	Pediatric Evaluation of Disability Inventory
AIMS	Alberta Infant Motor Scale
Chailey level	Chailey Levels of Ability
GMFCS	Gross Motor Function Classification System
GMFM	Gross Motor Function Measure
Sheridan	Mary Sheridan Birth to five years
GAS	Goal Attainment scaling
AHA	Assisting Hand Assessment

## 10. School nurse and health visiting

HPV	Human Papilloma Virus
NCMP	National Childhood Measurement Programme
HV	Health Visitor
SN	School Nurse
CSN	Community Staff Nurse
CNN	Community Nursery Nurse
LCM	Locality Clinical Manager
HCSW	Health Care Support Worker
SNA	School Nurse Assistant
SW	Social Worker
UTI	Urinary Tract Infection
Ht	Height
Wt	Weight
Cm	Centimetres
Kg	Kilograms
CAMHS	Child and Adolescent Mental Health Services
SENCo	Special Educational Needs Co-ordinator
ICPC	Initial Child Protection Conference
RCPC	Review Child Protection Conference
CAF	Common Assessment Framework
TAC	Team Around the Child
CPP	Child Protection Plan
CIN	Child in Need
CIC	Child in Care
ASD	Autistic Spectrum Disorder
ADHD	Attention Deficit Hyperactive Disorder
EWO	Education Welfare Officer
EP	Educational Psychologist
OT	Occupational Therapist
GP	General Practitioner
SALT	Speech and Language Therapy
YOT	Youth Offending Team
HCP	Healthy Child Programme
LSCB	Local Safeguarding Children's Board
HR1	Health Review 1
HR2	Health Review 2
HR3	Health Review 3
HR4	Health Review 4 [School entry review]
RRUCD	Rapid Response Unexpected Child Death
MASH	Multi-Agency Safeguarding Hub

## 11. Musculoskeletal Service (MSK) Abbreviations



<b>Standard medical abbreviations for body parts</b>	
ACJ	Acromioclavicular joint
ACL	Anterior Cruciate Ligament
ADM	Abductor digiti minimi
APB	Abductor pollicis Brevis
APL	Abductor pollicis longus
ASIS	Anterior superior iliac spine
ATFL	Anterior talofibular ligament
C (followed by number)	Cervical vertebra
CMC	Carpometacarpal joint
CSp	Cervical spine
DIP	Distal interphalangeal joint
DRUJ	Distal radioulnar joint
ECU	Extensor carpi ulnaris
ECRL & B	Extensor carpi radialis longus & brevis
EDBr	Extensor digitorum brevis
EDC	Extensor digitory communis
EDL	Extensor digitorum longus
EDM	Extensor digiti minimi
EHL & B	Extensor Hallucis Longus & brevis
EPL	Extensor pollicis longus
EPB	Extensor polis brevis
FHL & Br	Flexor hallucis longus & brevis
GHJ	Glenohumeral joint
GI	Gastrointestinal
IPJ	Interphalangeal Joint
ITB	Iliotibial band
L (followed by number)	Lumbar vertebra
LCL	Lateral Collateral Ligament
LSp	Lumbar spine
MC	metacarpal
MCL	Medial Collateral Ligament
MCP or MCPJ	Metacarpophalangeal joint
MT	metatarsal
MTP or MTPJ	Metatarsophalangeal Joint
PCL	Posterior Cruciate Ligament
PFJ	Patellofemoral joint
PIP or PIPJ	Proximal interphalangeal joint
PSIS	Posterior superior iliac spine
RCL	Radial collateral ligament
SCJ	Sternoclavicular Joint
SIJ	Sacroiliac Joint
TFCC	Triangular Fibrocartilagenous Complex (medial wrists joint)
TFL	Tensor fascia lata
TMJ	Temporomandibular joint
T (followed by a number)	Thoracic vertebrae
TSp	Thoracic spine
UCL	Ulnar collateral ligament

VL	Vastus Lateralis
VMO	Vastus Medialis Oblique
<b>Standard Acupuncture abbreviations</b>	
BL	Bladder meridian
CV	Conception vessel meridian
GB	Gall bladder acupuncture meridian
GV	Governor vessel meridian
HT	Heart meridian
KI	Kidney (acupuncture meridian)
LIR	Liver (acupuncture meridian) - check
LI	Large intestine (acupuncture meridian) - check
LU	Lung meridian
PC	Pericardium meridian
SI	Small intestine meridian
SP	Spleen meridian
ST	Stomach meridian
TE	Triple energiser meridian
Admin terms	
A	Analysis ( from SOAP notes; subjective, objective, analysis, plan)
A/L	Annual leave
Ax or assess	assessment
d/c	Discharge
DH	Drug history
DOB	Date of birth
DNA	Did not attend
FH	Family History
HPC	History of present complaint
n/a or N/A	Not applicable
NAD	Nothing abnormal detected
n/t or N/T	Not tested
O	Objective ( from SOAP notes; subjective, objective, analysis, plan)
OPD	Outpatient department
P	Plan ( from SOAP notes; subjective, objective, analysis, plan)
PMH	Previous Medical History
S	Subjective ( from SOAP notes; subjective, objective, analysis, plan)
SH	Social history
SOS	Indicating when a patient can rebook within a certain time frame rather than being discharged.
UTA	Unable to Attend
2/7	Two days
2/52	Two weeks
2/12	Two months
<b>Movements/tests/ techniques</b>	
Abd	abduction
Acup	acupuncture
ADL	Activities of daily living
Add	adduction
Ant	Anterior

AP	Anterior-posterior
ASLR	Active Straight Leg Raise
BBQ	Back Bournemouth Questionnaire
CEO	Common extensor origin
ceph	cephalad
CFO	Common flexor origin
CkLy	Crook lying
c/o	Complaining of
dev	deviation
DF or DFx	Dorsiflexion
dist	distal
DTF	Deep transverse frictions
DWP	Discussed (and agreed) with patient
EIS	Extension in standing
Elb or EJ	Elbow or elbow joint
EIL	Extension in lying
EOR	End of range
EMS	Early morning stiffness
ER	External rotation
ERP	End range pain
Ev	eversion
Ex	Exercise
Ext	Extension
Fx	flexion
FHP	Forward head posture
FIS	Flexion in standing
FISS	Flexion in step standing
FIL	Flexion in lying
FROM	Full Range of Movement
FWB	Full Weight Bearing
Gd	Grade
H-Ab	Horizontal Abduction
H-Ad	Horizontal adduction
HBB	Hand behind back
HBN	Hand behind neck
HE	Hyperextension
IF	Index finger
I/F or IFT	Interferential or interferential therapy
inf	inferior
Inv	Inversion
IR	Internal rotation
IRQ or IRDQ	Inner range quads or inner range dynamic quads
ISQ	In status quo (stable/no change)
Lat	Lateral
LR	lateral rotation
Med	Medial
MR	Medial rotation
MET	Muscle energy technique
mm	Muscle
Mob(s)	Mobilisation(s)
MSK	Musculoskeletal
Mvt/Movt	Movement
MWM	Mobilisation with movement
NAG	Natural apophyseal glide
NBI	No bony injury

NWM	Non weight bearing
Opp	opposition
PA	Posterioranterior
PGP	Pelvic girdle pain
PID	Prolapsed intervertebral disc
PKB	Prone knee bend
P&N	Pins and needles
PNF	Proprioceptive neuromuscular facilitation
Pro	Pronation
PSLR	Passive straight leg raise
PSWD/curapulse	Pulsed shortwave diathermy
PWB	Partial Weight Bearing
QL	Quadratus Lumborum
r/c	Radio carpal
RD	Radial deviation
ROM	Range of movement
REP	Repeated
Rot(n)	Rotation
r/u	radioulnar
SLR	Straight Leg raise
SLS	Single leg stand
SNAG	Sustained natural apophyseal glide
SQ	Static Quads
STM	Soft tissue massage
STR	Soft tissue release technique
Sup	Supination
Sx	Symptoms
TA	Tendoachilles
TENS	Transcutaneous electrical nerve stimulation
TFM	Transverse friction massage
°THREAD	No Thyroid, Heart, Rheumatoid Arthritis, Epilepsy, Asthma or Diabetes
TOP	Tender on palpation
TP or TrP	Trigger point
Trans	Transverse
TTWB	Toe Touch Weight Bearinig
TVA or TvA	Transversus abdominus
TWB	Touch weight bearing
U/S	Ultrasound
UD	Ulnar deviation
UT or UFT	Upper trapezius
VAS	Visual analogue scale (usually used for pain e.g. 2/10 where 0 is no pain and 10 is worst pain ever)
WB	Weight Bearing
x	No of repetitions or frequency of exs e.g. 3 x 10 reps daily
ZF	Zimmer Frame
1°	primary
2°	secondary
+ve	positive
-ve	negative
← or → (with a central line bisecting)	Transverse mobilisation
↔	Longitudinal caudad or cephalad (specified)
ć	with



c	without
↑ (with a central line bisecting)	Anterior to posterior mobilisation associated with a joint or vertebral level
↓ (with a central line bisecting)	Posterior to anterior mobilisation associate with a joint or vertebral level
	Right rotation mobilisation
	Left rotation mobilisation

→	Leads to
Δ	diagnosis
√	Area clear of symptoms on body chart (after Petty & Moore)
↑	Increased
↓	Decreased

Reviewed by Dr Neil Langridge, Consultant Physiotherapist, Musculoskeletal Services  
September 2014