Alabama A & M University

Communicative Sciences and Disorders Clinic

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APPROVED ABBREVIATIONS

(Please limit the use of these abbreviations in reports.)

\$	female	ARDS	adult respiratory	CSF	cerebrospinal fluid
ð	male		distress syndrome	ct	client
#	number	artic.	articulation	CVA	cerebrovascular
#	paragraph	AS	left ear (auris sinistra)		accident (stroke)
%	percent	ASAP	as soon as possible	(D)	dependent
?s	questions	AU	both ears (aures unitas)	DAT	diet as tolerated
\uparrow	increase (↑'d; ↑'ing)	B	bilateral	dB	decibels
\downarrow	decrease (↓'d; ↓'ing)	Ва	barium	d/c	discontinue; discharge
<u>@</u>	at	BAER	brainstem auditory	demo.	demonstrate, -ation
Δ	change		evoked response	DM	diabetes mellitus
≈	approximately	BID	(or bid) twice a day	DNR	do not resuscitate
+	present; positive	bil.	bilateral	DOB	date of birth
-	absent; negative	BOM	bilateral otitis media	DOE	date of eval
\$	stimulus	BW	birth weight	d/t	due to
2°	secondary to	b/t	between	Dx	diagnosis
A&A	awake and alert	C	with	EAC	external auditory canal
ABR	auditory brainstem	Ca	cancer; carcinoma	e.g.	for example
	response (See BAER)	CABG	coronary artery bypass	ENT	ear, nose and throat
acc.	accuracy; accurate		graft (say as "cabbage")		specialist
AD	right ear (auris dextra)	CC	chief complaint	ETOH	ethanol (drinking alcohol)
ADLs	activities of daily	CHF	congestive heart failure	eval.	evaluation
	living	CHI	closed head injury	FT	feeding tube
adm.	admitted		(See TBI)	F/u	follow-up
ALS	Amyotrophic Lateral	cln	clinician	Fx	function
	Sclerosis	CN	cranial nerve	GCS	Glasgow Coma Scale
AMA	against medical advice	CNS	central nervous system	GSW	gunshot wound
AMB	ambulatory	c/o	complaint of	GT	gastric feeding tube
AODM	adult-onset diabetes	comm.	communicate;	HEENT	head, eyes, ears, nose
	mellitus		communication		and throat
A-P	anteroposterior	comp.	comprehension	HH	home health
approp.	appropriate	COPD	chronic obstructive	HOB	head of bed
			pulmonary disease	НОН	hard of hearing

HTN	hypertension	O ₂	oxygen	stat.	immediately
Hx	history	OX3	oriented times 3	STM	short-term memory
H&P	History and Physical		(person, place, year)	TBI	traumatic brain injury
<u> </u>	independent	OBS	organic brain		(See CHI)
ICA	internal carotid artery		syndrome	TEP	tracheoesophageal
ICU	Intensive Care Unit	od	right eye (oculus		puncture
id.	identify		dextra)	TF	tube feeding
IDDM	insulin-dependent	ООВ	out of bed	TIA	transient ischemic
	diabetes mellitus	ОМ	otitis media		attack
Imp	impression	os	left eye (oculus	tid	three times a day
	left		sinister)	TM	tympanic membrane
lang.	language	ОТ	occupational therapy	trach.	tracheostomy
LL	lower lobe (either LLL	p	after	TICU	trauma intensive care
	or RLL) of a lung	PEG	percutaneous		unit (See ICU)
LOC	loss of consciousness		endoscopic	TVC	true vocal cords
LOS	length of stay		gastrostomy (feeding		(See VC; TVF)
LTM	long-term memory		tube)	TVF	true vocal folds
MBS	Modified Barium	p.o.	by mouth		(See TVC; VC)
	Swallow	PRN	as needed	tx	treatment; therapy
MCA	middle cerebral artery	Pt.	patient	UL	upper lobe (either RUL
MHz	megahertz	PT	physical therapy		or LUL) of a lung
min.	minimum	q	every; each	utt.	utterances
mod.	moderate	qd	every day	VC	vocal cords
MS	mental status;	qid	four times a day		(See TVC; TVF)
	Multiple Sclerosis	R	right	vent.	ventilator
MVA	motor vehicle accident	Rx	recommendation;	VF	visual field (as in, "VF
NC	nasal cannula		prescription		deficit" or "VF cut")
NGT	nasogastric tube	s	without	W/C	wheelchair
NIDDN	Inon-insulin-dependent	SCI	spinal cord injury	WFL	within functional limits
	diabetes mellitus	sev.	severe	WNL	within normal limits
NPO	nothing by mouth	SNF	skilled nursing facility	X	except
NR	no response	SOA	shortness of air	X	time(s)
		spont.	spontaneous(ly)	Y/N	yes/no
				y/o	years old

Example: Ct will ① ly answer oral Y/N comparison ?s @ 80%.