Medical Shorthand

ad lib	as needed	Uр	tandarnace to polication
aa no	of each	OP DTR	tendernessto palpation deep tendon reflex
ac	before meals	C-sp	cervical spine
pc	after meals	T-sp	thoracic spine
hs	at bedtime	L-sp	lumbar spine
2tt	2 tablets	LS-sp	lumbosacral spine
b.i.d.	2 times/day	DC	discontinue/chiropractor
t.i.d.	3 times/day	DX	diagnosis
q.i.d.	4 times/day	RX	prescription
q4h	every 4 hours	TX	treatment
ADL	activities/daily living	SX	symptoms
AMA	against medical advice	FX	fracture
<u>c</u>	with	HX	history
<u>s</u>	without	PMH	past medical history
D	after	HA	headache
<u>р</u> ā	before	LBP	low back pain
Ō	negative	HNP	herniated disc
<u>n</u>	normal	H/O	history of
WNL	within normal limits	h	hour
PRN	return as needed	PE	physical exam
RTC	return to clinic	XR	x-rays
<u>†</u>	increase	ROS	review of systems
† 	decrease	R/O	rule out
<u>†</u>	high	F/U	follow up
† †	very high	Y/A	years ago
<u> </u>	low	CBC	complete blood count
<u>**</u>	very low	UA	urinalysis
1	slight increase	SMAC	Chem panel
	slight decrease	BUN	bloodureanitrogen
>	greater than	CNS	central nervous system
<	less than	PNS	peripheral nervous system
cc	chief complaint	ANS	autonomic nervous system
<u>d</u> o	complains of	CXR	chestx-ray
➂	bilateral	LLE	left lower extremity
®	right	IMO IMO	left upper quadrant
①	left	LMP	last menstrual period
ĪTD	temp. total disability	MCL	mid clavicular line
TPD	temp. partial disability	MAL	mid axillary line
WHP	work hardening program	PERRLA	pupils equal, round, regIr,
(S)	subjective	S.O.B.	react to light/accommodat. shortness of breath
9 8	objective	S.O.B. S/P	
(Ā)	actiontaken	ν/O	status post year old
CMT MS	plan	PT	physical therapy
CMT	manipulation	SS	
MS	myospasm	PS	surging sine wave pulsed sine wave
		ΓD	Purseu silie wave