



Policy and Procedure of  
Abbreviations of Medical Terms

AMRH/ADMIN/P&P/001/Vers.02

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**Acronyms:**

<b>AMRH</b>	Al Masarra Hospital
<b>HCWs</b>	Health Care Workers
<b>MOH</b>	Ministry of Health



## **Policy and Procedure of Abbreviations of Medical Terms**

### **1. Introduction**

Approved Abbreviations and Symbols is a list of standard set of abbreviations that are permitted to be used in clinical documentation in the health care record. List of approved abbreviations of medical terms is used to support safe, effective care and communication. It is vital that the patient records are up to date, factual, accurate, and written. Health care workers aim to avoid using abbreviations and note their professional guidance on this. This guidance is issued in an effort to minimize the risks associated with the practice. Therefore, if abbreviations are used, those listed in this document are the only abbreviations are accepted.

In the other hand, Dangerous Abbreviations and Symbols is a list of unacceptable abbreviations which should not be used in the hospital clinical documentation or in any orders and any medication-related documentation. list of dangerous abbreviations that are proven to be a safety risk when used in clinical documentation in the hospital include order forms, progress notes, consultation reports and procedure reports. This guidance is issued in an effort to minimize the risks associated with the practice.

### **2. Scope**

This document is applicable to all clinical multidisciplinary teams who are required to document in the patient/client health care record. It applies across all inpatient, outpatient and community health care settings of Al Masarra Hospital (AMRH).

### **3. Purpose**

- 3.1 To mandate a standard set of abbreviations that are permitted to be used in the clinical setting.
- 3.2 To provide and improve accurate communication among health care providers by defining a list of "Do Not Use" abbreviations.



- 3.3 To ensure patient safety by decreasing the potential for errors associated with the use of abbreviations through the implementation of standardized list of unapproved abbreviations.

#### 4. Definitions

- 4.1 **Approved Abbreviations and Symbols:** is a list of a standard set of abbreviations that are permitted to be used in the clinical documentation in the health care record.
- 4.2 **Dangerous Abbreviations and Symbols:** is a list of unacceptable abbreviations which should not be used in the hospital clinical documentation or any orders and any medication-related documentation.

#### 5. Policy

- 5.1 This policy must serve as a reference for approved abbreviations in Al Masarra Hospital (AMRH).
- 5.2 This policy must be used for the purpose of providing a standard level of documentation, that is consistent across disciplines and facility.

#### 6. Procedure

- 6.1 Only the approved abbreviation list attached with this policy are allowed to be used in the documentation. *(See Appendix 1. List of Approved Abbreviations)*
- 6.2 Avoid the use of abbreviations in discharge summaries, final discharge orders and reports of procedures.
- 6.3 Abbreviations may not be used on consent forms.
- 6.4 Spell out each word of the operation or procedure in the health care documentation.
- 6.5 Encourage the process of spelling out drug names completely to provide exceptional patient care and avoid the potential for confusion.
- 6.6 Do not use the list of Dangerous Abbreviations. *(See Appendix 2. List of Dangerous Abbreviations)*
- 6.7 Orders with unapproved abbreviations shall not be accepted, if there is an unacceptable abbreviation, contact the prescriber to revise/correct the order.



6.8 The list of dangerous abbreviations shall not be used anywhere in the medical records, including order forms, progress notes, consultation reports and procedure reports, consent form and final diagnosis.

## 7. Responsibilities

### 7.1 All Health Care Workers (HCWs) of Al Masarra Hospital:

- 7.1.1 Be responsible for documenting in the patient record and follow the list of approved abbreviations of medical terms.
- 7.1.2 Refrain from using any abbreviations on consent forms and death certificates.

## 8. Document History and Version Control

Document History and Version Control			
Version	Description of Amendment	Author	Review Date
1	Initial Release	Badriya Al Ghammari	November 2021
2	Update & Review	Badriya Al Ghammari	March 2025
Written by	Reviewed by	Approved by	
Badriya Al Ghammari	Dr. Said Al Kaabi	Dr. Bader Al Habsi	

## 9. Related Documents

- 9.1 Appendix 1. List of Approved Abbreviations
- 9.2 Appendix 2. List of Dangerous Abbreviations
- 9.3 Appendix 3. Audit Tool



## 10. References

<b>Title of book/journal/articles/Website</b>	<b>Author</b>	<b>Year of Publication</b>	<b>Page</b>
General Nursing Procedure Manual	MOH	1999	Appendix (1-5)
Documentation	MOH Nursing Protocol Adapted for use by DGNA from Lippincott	2015	7
Procedure on Approved Abbreviations for Use in the Health Care Record	Sydney West Area Health Service	7 June 2010	1-84
Clinical Information Assurance (Record Keeping) Policy Approved Abbreviations Guidance	Liz Bega, Records Manager Southern health NHS foundation trust	May 2017	1-17



## Appendices

### Appendix 1. List of Approved Abbreviations

<b>A</b>	
A&E	Accident and emergency
a/a	As above
abd	Abdomen
ABG	Arterial blood gases
ac	Before meals
ACE	Angiotensin-converting-enzyme
ACLS	Advanced cardiac life support
ACTH	Adrenocorticotrophic hormone
ADHD	Attention-deficit hyperactivity disorder
ADL	Activity of daily living
ADR	Adverse Drug Reaction
AF	Anterior fontanel
AFB	Acid Fast Bacilli
AFO	Ankle Foot Orthosis
AIDS	Acquired Immune Deficiency Syndrome
ALARA	As low As reasonably achievable
alb	Albumin
alk phos	Alkaline phosphatase
Am	Morning
Amp	Ampule
AMRH	Al Masarra Hospital
Amy	Amylase
Ant	Anterior
Approx	Approximately





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Apt	Appointment
APTT	Activated Partial Thromboplastin Time
ARF	Acute Renal Failure
ASD	Autistic Spectrum Disorder
Asst	Assistant/assist
AV	Atrioventricular
Ax	Axilla

<b>B</b>	
b.i.d.	Twice a day
B12	Vitamin B12
BAI	Beck Anxiety Inventory
BBB	Bundle branch block
BCG	Bacillus Calmette-Guerin immunization shot
BCSA	Blood Culture Aerobic
BCSAN	Blood Culture Anaerobic
BDI	Beck Depression Inventory
BHS	Beck Hopelessness Scale
BM	Bowel movement
BMI	Body Mass Index
BNO	Bowels Not Open
BO	Bowels Open
BP	Blood pressure
BPAD	Bipolar affective disorder
BPD	Borderline personality disorder
BPH	Benign prostatic hypertrophy
BUN	Blood urea nitrogen



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<b>C</b>	
C	Centigrade
$\bar{c}$	With
C&S	Culture and sensitivity
C/C	Chief complaint
c/o	Complain of
Ca	Calcium
CA	Cancer
Cal	Calorie
Cap	Capsule
Carba	Carbamazepine
CAT	Computed Axial Tomography
Cath T	catheter tip
CBC	Complete blood count
CBC	Complete Blood Count
CBT	Cognitive Behavioral Therapy
Cc	Cubic centimeter
CCU	Coronary care unit
CD	Compact Disc
CDC	Central Drug Committee
CDRB	Controlled Drug Register Book
CDs	Controlled Drug Substances
CHD	Congenital heart disease
CHF	Congestive heart failure
CHO	Carbohydrate
Chol	Cholesterol
CK	Creatine Kinase
Cl	Chloride
cm	Centimeter



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CMHT	Community Mental Health Team
CNS	Central nervous system
CO2	Carbone Dioxide
Cont	Continue
COPD	Chronic obstructive pulmonary disease
Cort	Cortisol
CPD	Continuing Professional Development
CPOE	Computerized Prescriber Order Entry
CPR	Cardiopulmonary resuscitation
CR	Computed Radiography
CRE	Carbapenem-resistant Enterobacteriaceae
CS	Culture Sensitivity
CSF	Cerebrospinal fluid
CSU	Catheter Stream Urine Sample
CT	Computed Tomography
cTBS	Continuous Theta Burst
CTG	Cardiotocography
CVA	Cerebrovascular accident
CVP	Central Venous Pressure
CVS	Cardiovascular system
CXR	Chest X-ray

<b>D</b>	
D&C	Dilation and Curettage
DBR	Direct Bilirubin
DD	Dangerous Drugs
DDI	Drug-Drug interaction
Depot	Medication given by injection



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DGMS	Directorate General of Medical Supplies
DGPA & DC	Directorate General of Pharmaceutical Affairs & Drug Control
DIC	Disseminated intravascular coagulation
DI	Deciliter
DM	Diabetes mellitus
DOB	Date of birth

<b>E</b>	
E.coli	Escherichia coli
e.g.	For example
ECG/EKG	Electrocardiography
ECHO	Echocardiogram
ECT	Electroconvulsive therapy
ED	Executive Director
EEG	Electroencephalogram
EFI	Electronic Frailty Index
EMU	Each Morning Urine Sample
ENT	Ear, nose and throat
EPSE	Extrapyramidal side effects
Es	Ear swab
ESBL	Extended Spectrum Beta Lactamase
ESR	Erythrocyte Sedimentation Rate
ETOH	Alcohol
ETT	Endotracheal tube
EUA	Examination under anaesthetic



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<b>F</b>	
F	Fahrenheit
FBC	Full Blood Count
FBO	Foreign body obstruction
FBS	Fasting blood sugar
FDA	Food and Drug Administration
Fe	Iron
FEFO	First Expiry First Out
FHR	Fetal heart rate
fl oz	Fluid ounce
Fol	Folate
FSH	Follicle stimulating hormone
FTD	Formal Thought Disorder
FU	Follow up

<b>G</b>	
G6PD	Glucose-6-Phosphate Dehydrogenase
GA	General Anaesthetic
GB	Gallbladder
GGT	Gamma-Glutamyl Transferase
GI	Gastrointestinal
Gm	Gram
GPs	General Practitioner
Gravida	Number of pregnancies
GS	Gramstain
GTT	Glucose Tolerance Test
GU	Genitourinary
Gynae	Gynecology



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<b>H</b>	
H/O	History of
Hb/HBG	Hemoglobin
HbA1C	Hemoglobin A1c
HbsAg	Hepatitis B surface antigen
HBV	Hepatitis B Virus
HCPs	Health Care Providers
Hct	Hematocrit
HCV	Hepatitis C Virus
HIMS	Hospital Information Management System
HIS	Hospital Information System
HIV	Human Immunodeficiency Virus
HoD	Head of the Department
HPLC	High Performance Liquid Chromatography
Hr	Hour
hs	Hours of sleep/At bed time
HSE	Health, Safety & Environment
ht	Height
Hvs	High Vaginal Swab
Hx	History

<b>I</b>	
I&D	Incision and drainage
I&O	Intake and output
ICF	Intracellular fluid
ICU	Intensive Care Unit
ID	Identification
IM	Intramuscular



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INH	Isonicotinic Acid Hydrazide
IP	Inpatient
IPPB	Intermittent positive pressure breathing
IRDS	Infant respiratory distress syndrome
IRLS	Incident Reporting and Learning System
ISMP	Institute for Safe Medication Practices
IT	Information Technology
iTBS	Intermittent Theta Burst
IUCD	Intrauterine contraceptive device
IV	Intravenous
IVI	Intravenous Infusion
IVP	Intravenous pyelogram

<b>J</b>	
JVD	Jugular venous distension

<b>K</b>	
K	Potassium
Kcl	Potassium Chloride
Kg	Kilogram
KPI	Key Performance Indicator
KUB	Kidneys, ureters, and urinary bladder

<b>L</b>	
lb	Pound
LA	Local Anaesthetic
Lab	Laboratory



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LAMA	Leave Against Medical Advice
LE	Lupus Erythematosus
LFT	Liver Function Test
LH	Luteinizing Hormone
LMP	Last menstrual period
LP	Lumbar puncture
Lt	Left

<b>M</b>	
m <sup>2</sup>	Square meters
MAO-A	Monoamine Oxidase A
MAO-B	Monoamine Oxidase B
MAOIs	Monoamine Oxidase Inhibitors
Max.	Maximum
mcg	Microgram
MCH	Maternal child health
MDE	Major depressive episode
MDR	Multidrug Resistant
MDT	Multidisciplinary Team
mEq	Milliequivalent
MET	Metanephrine
MFSS	Al Masarra Food Safety System
mg	Milligram
Mg	Magnesium
MI	Myocardial infarction
min	Minute
mm	Millimeter
MO	Medical orderly





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MOH	Ministry of health
MP	Malaria Parasite
MRI	Magnetic Resonance Imaging
MRSA	Multiple Antibiotic Resistant Staphylococcus Aureus
MS	Medical Stores
MSDS	Material Safety Data Sheet
MSE	Mental State Examination
MSU	Midstream Urine Sample

<b>N</b>	
Na	Sodium
NaCl	Sodium chloride
NG	Nasogastric
NGT	Nasogastric Tube
No.	Number
Noct	Night
NPH	Neutral Protamine Hagedorn (insulin )
NPO	Nothing per oral / Non per orem
NS	Nervous system
NS	Normal Saline
NS	Lab ( Nasal Swab)
NSAID	Non-steroidal Anti-inflammatory Drug

<b>O</b>	
O2	Oxygen
Ob/gynae	Obstetrics and gynecology
OCBL	occult blood in stool



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OCD	Obsessive-compulsive disorder
OD	Right eye (oculus dexter )
Oint	Ointment
OP	Outpatient
OPD	Outpatient department
OS	Left eye (oculus sinister)
Osmol	osmolality
OT	Operating theatre
OT	Occupational Therapy
OU	Both Eye (oculus uterque)
oz	Ounce

<b>P</b>	
P	Pulse
PACS	Picture Achieving and Communication System
Paeds	Pediatrics
Para	Number of children
pc	After meals
PCR	Polymerase Chain Reaction
PEEP	Positive End Expiratory pressure
pH	Hydrogen ion concentration
Plt	Platelets
pm	Evening
PO	Per ore (Orally)
PODs	Patient's Own Drugs
Post-Op	Postoperative
PPE	Personal Protective Equipment



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PR	Per rectum
Pre-Op	Preoperative
PRL	Prolactin
PRN	Pro re nata (as required)
PRO	Public Relation Officer
PS	Peripheral Smear
psi	Pounds per Square Inch
PT	Prothrombin Time
PTSD	Post-traumatic stress disorder
<b>Q</b>	
QDS	Four times daily

<b>R</b>	
RA	Rheumatoid Factor
RBC	Red Blood Cell
RBS	Random Blood Sugar
REC	Rectal
Retic	Reticulocyte count
RFT	Renal Function Test
RIS	Radiology Information System
RL	Ringer's Lactate
RPA	Radiation protection advisor
RPR	Rapid Plasma Reagin
RSV	Respiratory Syncytial Virus
RTA	Road Traffic Accident
rTMS	Repetitive Transcranial Magnetic Stimulation
RX	Treatment



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<b>S</b>	
̄	without
SBR	Serum Bilirubin
SC	Subcutaneous
SCBU	Special care baby unit
SCPK	Serum creatinine phosphokinase
Sec	Second
SGOT	Serum glutamic-oxalocetic transaminase
SGPT	Serum glutamic pyruvic transaminase
Sick	sickling
SL	Sublingual
SM	Substance Misuse
SN	Staff Nurse
SOP	Standard Operating Procedures
SP	Sputum
SSRIs	Selective Serotonin Reuptake Inhibitors
St Re	Stool Routine
staph	Staphylococcus
supp	Suppository
Surg	Surgery
susp	Suspension
SW	Social Work(er)
Syr	Syrup

<b>T</b>	
T	Temperature
t.i.d.	Three times a day
Tab	TABLET



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TB	Tuberculosis
TCA	tricyclic antidepressant
TFT	Thyroid Function Test
THC	Cannabis/marijuana
TLD	Thermoluminescent dosimeter
TMS	Transcranial Magnetic Stimulation
TPN	Total parenteral nutrition
TPR	Temperature-pulse-respiration
TRB	Total Bilirubin
Tropon	Troponin T
TSDD	Training and Staff Development Department
TSH	Thyroid stimulating hormone
TURP	Transurethral resection prostatectomy

<b>U</b>	
U- A/G	Urine Albumin/Glucose
U Re	Urine Routine
U's and E's	Urea and Electrolytes
UA	Uric Acid
UD	Urethral Discharge
UDS	Urine drug screen
UDS	Urine Drug Screening
UE1	Urea and Electrolytes
UM	Urine Microalbumin
UPT	Urine Pregnancy Test
UR	Ket:Urine Ketone
URTI	Upper respiratory tract infection
US	Ultrasound



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UTI	Urinary tract infection
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<b>V</b>	
Vag	Vaginal
VD	Venereal disease
VDRL	Venereal disease research laboratory test
VF	Ventricular Fibrillation
Vit	Vitamin
Vit D3	Vitamin D3
VPA	Valproic Acid
VT	Ventricular Tachycardia
VTE	Venous Thromboembolism

<b>W</b>	
WBC	White Blood Cell
WCDR	Ward Controlled Drugs Register
WHO	World Health Organization
WS	Wound
Wt	Weight

<b>Z</b>	
ZN stain	Ziehl-Neelsen stain

## Symbols

@	At
&	And



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=	Equal
≠	Is not equal to
#	Fracture
≈	Approximately
♂	Male
♀	Female
+ve	Positive
-ve	Negative
Δ	Diagnosis
/60	Indicating minutes
/7	Indicating days
/12	Indicating Months
/24	Indicating hours
® or ® or R	Right
(L) or L	Left
%	Percent
°c	Degrees Celsius
↑	Increase
↓	Decreased
<	Less than
>	Greater than
-	minus
+	plus
?	query
/	per
→	Transverse Right (physio)
←	Transverse Left (physio)



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x	Multiplication
u	micron
ng	Nanogram
pg	Picogram
ug	Microgram





## Appendix 2. List of Dangerous Abbreviations

Abbreviations	Intended Meaning	Misinterpretation	Correction
µg	Microgram	Mistaken as "mg"	Use "mcg"
AD, AS, AU	Right ear, left ear, each ear	Mistaken as OD, OS, OU (right eye, left eye, each eye)	Use "right ear," "left ear," or "each ear"
OD, OS, OU	Right eye, left eye, each eye	Mistaken as AD, AS, AU (right ear, left ear, each ear)	Use "right eye," "left eye," or "each eye"
cc	Cubic centimeters	Mistaken as "u" (units)	Use "mL"
D/C	Discharge or discontinue	Premature discontinuation of medications if D/C (intended to mean "discharge") has been misinterpreted as "discontinued" when followed by a list of discharge medications	Use "discharge" and "discontinue"
IJ	Injection	Mistaken as "IV" or "intrajugular"	Use "injection"
IN	Intranasal	Mistaken as "IM" or "IV"	Use "intranasal" or "NAS"
HS	Half-strength	Mistaken as bedtime	Use "half-strength" or "bedtime"
hs	At bedtime, hours of sleep	Mistaken as half-strength	
IU	International unit	Mistaken as IV (intravenous) or 10 (ten)	Use "units"
o.d. or OD	Once daily	Mistaken as "right eye" (OD-oculus dexter), leading to oral liquid medications administered in the eye	Use "daily"
OJ	Orange juice	Mistaken as OD or OS (right or left eye); drugs meant to be diluted in orange juice may be given in the eye	Use "orange juice"



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Per os	By mouth, orally	The "os" can be mistaken as "left eye" (OS-oculus sinister)	Use "PO," "by mouth," or "orally"
q.d. or QD**	Every day	Mistaken as q.i.d., especially if the period after the "q" or the tail of the "q" is misunderstood as an	Use "daily"
qhs	Nightly at bedtime	Mistaken as "qhr" or every hour	Use "nightly"
q.o.d. or QOD**	Every other day	Mistaken as "q.d." (daily) or "q.i.d. (four times daily) if the "o" is poorly written	Use "every other day"
q1d	Daily	Mistaken as q.i.d. (four times daily)	Use "daily"
q6PM, etc.	Every evening at 6 PM	Mistaken as every 6 hours	Use "6 PM nightly" or "6 PM daily"
SC, SQ, sub q	Subcutaneous	SC mistaken as SL (sublingual); SQ mistaken as "5 every;" the "q" in "sub q" has been mistaken as "every" (e.g., a heparin dose ordered "sub q 2 hours before surgery" misunderstood as every 2 hours before surgery)	Use "subcut" or "subcutaneously"
ss	Sliding scale (insulin) or ½ (apothecary)	Mistaken as "55"	Spell out "sliding scale;" use "one-half" or "½"
SSRI	Sliding scale regular insulin	Mistaken as selective-serotonin reuptake inhibitor	Spell out "sliding scale (insulin)"
SSI	Sliding scale insulin	Mistaken as Strong Solution of Iodine (Lugol's)	

Dose Designations and Other Information	Intended Meaning	Misinterpretation	Correction
Trailing zero after decimal	1 mg	Mistaken as 10 mg if the	Do not use trailing zeros for



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point (e.g., 1.0 mg)**		decimal point is not seen	doses expressed in whole numbers"
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Dose Designations and Other Information	Intended Meaning	Misinterpretation	Correction
Drug name and dose run together (especially problematic for drug names that end in "l" such as Inderal40 mg; Tegretol300 mg)	Inderal 40 mg  Tegretol 300 mg	Mistaken as Inderal 140 mg  Mistaken as Tegretol 1300 mg	Place adequate space between the drug name, dose, and unit of measure
Abbreviations such as mg. or mL. with a period following the abbreviation	mg  mL	The period is unnecessary and could be mistaken as the number 1 if written poorly	Use mg, mL, etc. without a terminal period
Large doses without properly placed commas (e.g., 100000 units; 1000000 units)	100,000 units  1,000,000 units	100000 has been mistaken as 10,000 or 1,000,000; 1000000 has been mistaken as 100,000	Use commas for dosing units at or above 1,000, or use words such as 100 "thousand" or 1 "million" to improve readability

Drug Name Abbreviations	Intended Meaning	Misinterpretation	Correction
AZT	zidovudine (Retrovir)	Mistaken as azathioprine or aztreonam	Use complete drug name
CPZ	Compazine (prochlorperazine)	Mistaken as chlorpromazine	Use complete drug name
HCT	hydrocortisone	Mistaken as	Use complete drug



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		hydrochlorothiazide	name
HCTZ	hydrochlorothiazide	Mistaken as hydrocortisone (seen as HCT250 mg)	Use complete drug name
MgSO4	magnesium sulfate	Mistaken as morphine sulfate	Use complete drug name
MS, MSO4	morphine sulfate	Mistaken as magnesium sulfate	Use complete drug name
MTX	methotrexate	Mistaken as mitoxantrone	Use complete drug name
PTU	propylthiouracil	Mistaken as mercaptopurine	Use complete drug name



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**Appendix 3. Audit Tool**

Department: \_\_\_\_\_

Date: \_\_\_\_\_

S.N.	Audit Process	Standard/Criteria	Yes	Partial	No	N/A	Comment
1.	Observation Document Review	Is only the list of approved abbreviations used in the documentation?					
2.	Interview Document review	Is the use of abbreviations in discharge summaries, final discharge orders and reports of procedures avoided?					
3.	Document review	Are abbreviations not be used on consent forms?					
4.	Observation Document review	Is each word of the operation or procedure in the health care documentation spelled out?					



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5.	Interview	Is the process of spelling out drug names completely encouraged to provide exceptional patient care and avoid the potential for confusion?					
6.	Observation	Is the list of Dangerous Abbreviations strictly adhered?					
	Interview						
7.	Interview	Are orders with unapproved abbreviations not accepted? If there is an unacceptable abbreviation, is the prescriber contacted to revise/correct the order?					
8.	Observation	Is the list of dangerous abbreviations not used anywhere in the medical records, including order forms, progress notes, consultation reports and procedure reports, consent form and final diagnosis?					
	Interview						
	Document review						



### Appendix 4. Document Request Form

Document Request Form			
<b>Section A: Completed by Document Requester</b>			
1. Requester Details			
Name	Badriya Al Ghammari	Date of Request	March 2022
Institute	Al Masarra Hospital	Mobile	95268636
Department	Nursing Affairs Department	Email	-
The Purpose of Request			
<input type="checkbox"/> Develop New Document		<input checked="" type="checkbox"/> Modification of Document	<input type="checkbox"/> Cancelling of Document
1. Document Information			
Document Title	Policy and Procedure of Abbreviations of Medical Terms		
Document Code	AMRH/ADMIN/P&P/001/Vers.02		
<b>Section B: Completed by Document Controller</b>			
<input checked="" type="checkbox"/> Approved		<input type="checkbox"/> Cancelled	<input type="checkbox"/> Forward To:.....
Comment and Recommendation:			
Name	Ruvilee Ramel-Bueno	Date	March 2022
Signature	<i>R. Bueno</i>	Stamp	





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**Appendix 5. Document Validation Checklist**

<b>Document Validation Checklist</b>					
<b>Document Title:</b> Policy and Procedure of Abbreviations of Medical Terms			<b>Document Code:</b> AMRH/ADMIN/P&P/001/Vers.02		
No	Criteria	Meets the Criteria			Comments
		Yes	No	N/A	
<b>1.</b>	<b>Approved format used</b>				
1.1	Clear title – Clear Applicability	✓			
1.2	Index number stated	✓			
1.3	Header/ Footer complete	✓			
1.4	Accurate page numbering	✓			
1.5	Involved departments contributed	✓			
1.6	Involved personnel signature /approval	✓			
1.7	Clear Stamp	✓			
<b>2.</b>	<b>Document Content</b>				
2.1	Clear purpose and scope	✓			
2.2	Clear definitions	✓			
2.3	Clear policy statements (if any)	✓			
<b>3.</b>	<b>Well defined procedures and steps</b>				
3.1	Procedures in orderly manner	✓			
3.2	Procedure define personnel to carry out step	✓			
3.3	Procedures define the use of relevant forms	✓			
3.4	Procedures to define flowchart			✓	
3.5	Responsibilities are clearly defined	✓			
3.6	Necessary forms and equipment are listed	✓			
3.7	Forms are numbered	✓			
3.8	References are clearly stated	✓			
<b>4.</b>	<b>General Criteria</b>				
4.1	Policy is adherent to MOH rules and regulations	✓			
4.2	Policy within hospital/department scope	✓			
4.3	Relevant policies are reviewed	✓			
4.4	Items numbering is well outlined	✓			
4.5	Used of approved font type and size	✓			
4.6	Language is clear, understood and well structured	✓			
Recommendations ..... For implementation..... More revision .....To be cancelled.....					
Reviewed by: <u>Kunooz Al Balushi</u>			Reviewed by: <u>Ruvilee Ramel-Bueno</u>		



P [REDACTED]