

# MVFPD PROTOCOL

## SECTION 9: COMMON ABBREVIATIONS

ā	before	DNR	do not resuscitate	ICU	intensive care unit
AAA	abdominal aortic aneurysm	DOA	dead on arrival	I & D	incision and drainage
AAO x 4	awake, alert, & oriented to person, place, time, event	DOB	date of birth	IDDM	insulin dependent diabetes
Abd	abdomen	DOE	dyspnea on exertion	IM	intramuscular
AB	abortion	Dr.	doctor	IND	intranasal dispersal
ABC	airway, breathing, circulation	drsg/dsg	dressing	inf	inferior
ACLS	Advanced Cardiac Life Support	DT	delirium tremens	int	internal
AD	Advanced Directive	Dx	diagnosis	IO	intraosseous
adm	admits to or admission	↓	decrease	IV	intravenous
ALS	Advanced Life Support	ea.	each	IVB	intravenous bolus
am	morning	EBL	estimated blood loss	IVP	intravenous push
AMA	against medical advice	ECG/EKG	electrocardiogram	↑	increase
AMS	altered mental status	ED	emergency department	J	Joule(s)
amp(s)	ampule(s)	EENT	eye, ear, nose, throat	JVD	jugular venous distention
AND	allow natural death	EMS	emergency medical services	K <sup>+</sup>	potassium
ant	anterior	ENT	ear, nose, throat	kg	kilogram
asa	aspirin	EOM	extraocular movement	KVO/ TKO	keep vein open / to keep open
ASCVD	arteriosclerotic cardiovascular disease	et	and		
ASHD	arteriosclerotic heart disease	ET	endotracheal		
A&P	anterior and posterior	ETI	endotracheal intubation	L/I	liter
≈	approximately	ETT	endotracheal tube	L	left
@	at	ETA	estimated time of arrival	lac	laceration
		etc	and so forth	LAD	left axis deviation
β	Beta	ETOH	alcohol (ethyl)	LAHB	left anterior hemiblock
BBB	Bundle Branch Block	exam	examination	lat	lateral
BCLS	Basic Cardiac Life Support	=	equal	LBBB	left bundle branch block
BGL	blood glucose level	° F	Fahrenheit	lb	pound
bid	twice a day	$\overline{\text{FB}}$	foreign body	lg	large
bil	bilateral	FBAO	foreign body airway obstr.	LLL	left lower lobe
BLS	Basic Life Support	FD	fire department	LLQ	left lower quadrant
BM	bowel movement	Fv	fever	LLR	left lateral recumbent
BP	blood pressure	Fx	fracture	LMP	last menstrual period
BS	breath sounds	♀ or F	female	LOC	loss of consciousness
BVM	bag, valve, mask	1°	first degree/primary	LPHB	left posterior hemiblock
				LPO	last meal (by mouth)
ĉ	with	GB	gallbladder	L-spine	lumbar spine
✓	check	GC	gonorrhea or gonococcus	LS	lung sounds
° C	Centigrade	GCS	Glasgow coma scale	LUL	left upper lobe
Ca	cancer	GI	gastrointestinal	LUQ	left upper quadrant
Ca <sup>++</sup>	calcium	g	gram	<	less than
CABG	coronary artery bypass graft(s)	GPA	gravid, para, abort	○ —	lying
CAD	coronary artery disease	gr	grain	♂ or M	male
cath	catheter, catheterization	GSW	gunshot wound	MAE	moves all extremities
CBC	complete blood count	gtt(s)	drop(s)	mcg	microgram
cc	cubic centimeter	GU	genitourinary	MCL	midclavicular line, modified chest lead
CC	chief complaint	GYN	gynecology		
CCU	coronary care unit	→	going to/leading to	MD	medical doctor
CHF	congestive heart failure	>	greater than	med(s)	medication(s)
CHI	closed head injury			mEq	milliequivalent
cm	centimeter	h/hr	hour	Mg	magnesium
CMS	circulation, motor, sensory	HA	headache	mg	milligram
CNS	central nervous system	HACE	high-altitude cerebral edema	MI	myocardial infarction
CO	carbon monoxide	HAPE	high-altitude pulmonary edema	min	minute
c/o	complaining of/complaint of	HAZMAT	hazardous materials (incident)	misc	miscellaneous
CO2	carbon dioxide			ml	milliliter
Δ	change	HB	heart block	mm	millimeter
Δ	no change	HBV	hepatitis B virus	mo	month
COPD	chronic obstructive pulmonary disease	HCV	hepatitis C virus	MOE x ___	movement of extremities times ___
		Hct	hematocrit		
COR-O	cardiopulmonary arrest	HCTZ	hydrochlorothiazide	MOI	mechanism of injury
C-spine	cervical spine	HEENT	head, eyes, ears, nose, throat	MS/MSO4	morphine sulfate
C-section	cesarean section	Hg	mercury	MgSO4	magnesium sulfate
CSF	cerebrospinal fluid	Hgb	hemoglobin	MS	multiple sclerosis
CSMOEx ___	circulation, sensory, motor of extremities x ___	HIV	human immunodeficiency virus	MVC	motor vehicle crash
				MCC	motorcycle crash
CTA	clear to auscultation	H & P	history and physical	MS	morphine sulfate
CTAB	clear to auscultation bilaterally	HR	heart rate		
CVA	cerebral vascular accident	ht	height	N/A	not applicable
CPR	cardiopulmonary resuscitation	HTN	hypertension	NAD	no apparent distress
		Hx	history	NaCl	sodium chloride
d/c	discontinue	hypo-	low or less than	NaHCO3	sodium bicarbonate
D&C	dilatation and curettage	H2O	water	NC	nasal cannula
detox	detoxification			⊖	negative
D5W	dextrose 5% in water	IC	incident command	neuro	neurological/nervous
D50W	dextrose 50% in water	ICS	intercostal space	NGC	normal gastric contents
DM	diabetes mellitus				

## MVFPD PROTOCOL

NKA	no known allergies	s	without
NKDA	no known drug allergies	SAB	spontaneous abortion
noc/noct	night	SQ/sub q	subcutaneous
NPO	nothing by mouth	SL	sublingual
NRB	non-rebreather mask	SIVP	slow IV push
NS	normal saline	SMOEx___	sensation, movement of extremities x ___
NSR	normal sinus rhythm	SOB	shortness of breath
NTG	nitroglycerin	sm	small
NTI	nasotracheal intubation	SNT	soft, non-tender
NTT	nasotracheal tube	ST	sinus tachycardia
NV/D	nausea, vomiting, & diarrhea	↑ST	elevated ST segment
∅	none	stat	at once
O2	oxygen	sup	superior
OB	obstetrics	s/s	sign/symptom
occ	occasional	surg	surgery
O.D.	right eye (oculus dexter)	SVT	supraventricular tachycardia
OD	overdose	SW	stab wound
OJ	orange juice	synch	synchronous
ophth	ophthalmology	2°	second degree/secondary
OPP	organophosphate poisoning	○	sitting
OR	operating room	○	standing
Ortho	orthopedics	TB	tuberculosis
O.S.	left eye (oculus sinister)	tblsp	tablespoon
O.U.	both eyes (oculus uterque)	TCP	transcutaneous pacing
OTI	otracheal intubation	temp	temperature
oz	ounce	TIA	transient ischemic attack
p	after	tid	three times a day
PAC	premature atrial contraction	TKO	to keep open
PAT	paroxysmal atrial tachycardia	TM	tympanic membranes
PCP	private care physician	tol	tolerated
PD	police department	tsp	teaspoon
PE	pulmonary emboli	Tx	treatment/transport
Phx	physical exam	∴	therefore
peds	pediatrics	3°	third degree, tertiary
per	by or through	U/A	upon arrival
PERL	pupils equal, react to light	uncons	unconscious
PERLA	pupils equal, react to light and accommodation	unk	unknown
PID	pelvic inflammatory disease	URI	upper respiratory infection
PMD	private medical doctor	UTI	urinary tract infection
PMHx	past medical history	≠	unequal/not equal
PND	paroxysmal nocturnal dyspnea	vag	vaginal
po	by mouth	VD	venereal disease
pos/+	positive	VF	ventricular fibrillation
post	posterior	via	by way of
POV	privately owned vehicle	vol	volume
PSVT	paroxysmal supraventricular tachycardia	VS	vital signs
psych	psychiatric	VT	ventricular tachycardia
pt	patient	WAP	wandering atrial pacemaker
PTA	prior to arrival	WBC	white blood cell
PTP	painful to palpation	wc	wheelchair
Pul Ed	pulmonary edema	WNL	within normal limits
PVC	premature ventricular contractions	WPW	Wolff-Parkinson-White Syndrome
ψ	psychiatric	Ws	watt seconds
q	every	wt	weight
®	right	x	times
RAD	right axis deviation	y/o	year(s) old
RBBB	right bundle branch block	yr	year(s)
RBC	red blood cell		
resp	respirations		
RHD	rheumatic heart disease or right hand dominant		
RLL	right lower lobe		
RLQ	right lower quadrant		
R/O	rule out		
ROM	range of motion		
ROS	review of systems		
ROSC	return of spontaneous circulation		
RUQ	right upper quadrant		
Rx	treatment/prescription		