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**Musculoskeletal Service (MSK) Abbreviations**

**Standard medical abbreviations for body parts**

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 writs 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

**Standard Acupuncture abbreviations**

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

**Movements/tests/techniques**

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 Bearing

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 max pain)