

**ER/PR/HER2**

**What are estrogen receptors (ER)?**

Estrogen receptors are a group of proteins found inside cells. These protein receptors are activated by the hormone estrogen. The hormone estrogen binds to the receptors inside the cells and may cause the cells to grow.

ER negative cancer cells do not need estrogen to grow, and usually do not stop growing when treated with hormones that block estrogen from binding.

ER positive cancer cells may need estrogen to grow, and may stop growing or die when treated with substances that block the binding and actions of estrogen such as hormones (Tamoxifen) or aromatase inhibitors (Arimidex, Aromasin, or Femara).

**What is a progesterone receptor (PR)?**

A progesterone receptor is another type of protein receptor found inside cells. This protein receptor is activated by the hormone progesterone. The hormone progesterone binds to the receptor inside the cells and may cause cells to grow.

PR negative cancer cells do not need progesterone to grow, and usually do not stop growing when treated with hormones that block progesterone from binding.

PR positive cancer cells need progesterone to grow and will usually stop growing when treated with hormones that block progesterone from binding such as hormones (Tamoxifen) or aromatase inhibitors (Arimidex, Aromasin, or Femara).

**Pre-menopausal women with ER/PR positive cancers are usually treated with Tamoxifen for 5 years, regardless of nodal status or other prognostic factors such as HER2 status.**

**Post-menopausal women are usually treated with an aromatase inhibitor rather than Tamoxifen, regardless of nodal status or other prognostic factors such as HER2 status.**

**What is HER2/neu?**

HER2/neu is a protein involved in normal cell growth and may be found in some types of cancer cells. These protein receptors may also be referred to as tyrosine kinase receptors or human epidermal growth factor receptors.

HER2 positive cancers have an abundance of the protein HER2/neu on their surface. When too much of this protein is present, cells may grow more quickly and are more likely to spread to other parts of the body. Herceptin is a drug that is used to treat HER2-positive cancers (breast, stomach, other) when there is an overexpression of HER2 on cancer cells surfaces.

HER2 testing guidelines and techniques continue to evolve as do the guidelines for interpretation of results. In 2013 the College of American Pathologists (CAP) working with the American Society of Clinical Oncology (ASCO) published updated guidelines for HER2 Testing. The new guidelines clarified test, retest, interpretation and other factors changing cut-off points for positive/negative results among other clarifications providing a better set of patient safety criteria as well as improved clarification of testing/re-testing criteria and results interpretation.

**Favorable Prognostic Factors ER/PR/HER2**

- ✓ Estrogen Receptor (ER) **positive** is a favorable prognostic factor.
  - Hormonal Therapy should be considered in 1<sup>st</sup> course treatment planning for premenopausal women
  - Aromatase Inhibitor Therapy should be considered in 1<sup>st</sup> course treatment planning for post-menopausal women.
- ✓ Progesterone Receptor (PR) **positive** is a favorable prognostic factor.
  - Hormonal Therapy should be considered in 1<sup>st</sup> course treatment planning.

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- Aromatase Inhibitor Therapy should be considered in 1<sup>st</sup> course treatment planning for postmenopausal women.
- ✓ **Single Receptor positive** tumors (ER+ only or PR+ only) do exist but are rare with an unfavorable prognosis
  - These tumors are often large in size, are of high grade, are often HER2+, and are often lymph node +
  - Single Receptor positive tumors are usually NOT treated with Hormonal Therapy or Aromatase Inhibitors
- ✓ Human Epidermal growth factor Receptor 2 (HER2) **positive** is a favorable prognostic factor.
  - Herceptin (trastuzumab) or Tykerb (lapatinib) should be included as part of 1<sup>st</sup> course treatment plan

### Unfavorable Prognostic Factors ER, PR, HER2

- Estrogen Receptor (ER) **negative** is an unfavorable prognostic factor.
  - Hormonal Therapy/Aromatase Inhibitor Therapy usually NOT included as part of 1<sup>st</sup> course treatment plan
- Progesterone Receptor (PR) **negative** is an unfavorable prognostic factor.
  - Hormonal Therapy/Aromatase Inhibitor Therapy usually NOT included as part of 1<sup>st</sup> course treatment plan
- **Single Receptor negative** tumors (ER- only or PR- only) do exist but are rare with an unfavorable prognosis
  - These tumors are often large in size, are of high grade, are often HER2+, and are often lymph node +
  - Single Receptor negative tumors are usually NOT treated with Hormonal Therapy or Aromatase Inhibitors
- Human Epidermal growth factor Receptor 2 (HER2) **negative** is an unfavorable prognostic factor.
  - Herceptin (trastuzumab) or Tykerb (lapatinib) usually NOT included as part of 1<sup>st</sup> course treatment plan
- **Triple Negative Breast Cancer** (ER neg/PR neg/HER2 neg) is a **very unfavorable** prognostic combination.

**2014 ASCO and CAP Reporting guidelines:** ASCO and the CAP have issued recommendations for reporting the results of immunohistochemical assays for ER and PgR (Table 1).<sup>5</sup> Studies using both IHC and the ligand binding assay suggest that patients with higher hormone receptor levels have a higher probability of response to hormonal therapy, but expression as low as 1% positive staining has been associated with clinical response. As a result, the guidelines recommend classifying all cases with at least 1% positive cells as receptor positive.<sup>5</sup> For patients with low ER expression (1% to 10% weakly positive cells), the decision on endocrine therapy should be based on an analysis of its risks and potential benefits.

**Table 1. Reporting Results of Estrogen Receptor (ER) and Progesterone Receptor (PgR) Testing**

Result	Criteria	Comments
Positive	Immunoreactive tumor cells present (≥1%)	The percentage of immunoreactive cells may be determined by visual estimation or quantitation. Quantitation can be provided by reporting the percentage of positive cells or by a scoring system, such as the Allred score or H score.
Negative	<1% immunoreactive tumor cells present	

Older Testing Methods included the reporting of a % of cells with a range of nuclear positivity with accompanying interpretation (positive, negative, borderline). **2014 CAP guidelines eliminated borderline results.** ER/PR are now reported as being either Negative or Positive (See Table 1 above). **Positive results are now ≥1%.**

Test	Value Range	Negative	Borderline	Positive
ER Proportion Score	0%-100%	<5%	5%–19%	≥20%
ER Intensity Score	None, weak, intermediate, strong	None, weak	intermediate	Strong
PR Proportion Score	0%-100%	<5%	5%–19%	≥20%
PR Intensity Score	None, weak, intermediate, strong	None, weak	intermediate	Strong
HER2 by IHC	0, 1+, 2+, 3+	0, 1+	2+	3+
HER2 by FISH	Ratio 1.00-9.79 (note decimal point)	≤ 1.8	1.80-2.20	≥ 2.00
HER2 by CISH	Ratio 1.00-9.79 (note decimal point)	≤ 1.8	1.80-2.20	≥ 2.00
HER2 by unknown	No value given	Stated by MD	Stated by MD	Stated by MD
Test Not Mentioned in Medical Record - Code as Not Done (998) or Unknown if Done (999)				

**SEER RESOURCE: 2015 Coding and Staging Manual - Appendix C: Site-Specific Coding Modules**

Appendix C of the 2015 SEER Coding and Staging Manual brings together the site-specific instructions needed to abstract a case, facilitating efficiency and accuracy. The site-specific coding modules include SEER coding guidelines; equivalent terms, definitions, tables, charts and illustrations; multiple primary rules; histology coding rules; stage coding instructions and surgery of primary site codes. Some modules include site-specific coding guidelines. The goal is to have stand-alone modules for major anatomic sites.

<http://seer.cancer.gov/manuals/2015/appendixc.html>

<ul style="list-style-type: none"> <li>⊕ Oral Cavity</li> <li>⊕ Parotid, Other and Unspecified Glands</li> <li>⊕ Pharynx, Tonsil, Oropharynx, Hypopharynx, Pyriform Sinus</li> <li>⊕ Esophagus</li> <li>⊕ Stomach</li> <li>⊕ Small Intestine</li> <li>⊕ Colon</li> <li>⊕ Rectosigmoid, Rectum</li> <li>⊕ Anus</li> <li>⊕ Liver, Intrahepatic Bile Ducts</li> <li>⊕ Gallbladder, Extrahepatic Bile Ducts, Ampulla of Vater</li> <li>⊕ Pancreas</li> <li>⊕ Other Digestive</li> <li>⊕ Nasal Cavity, Middle Ear</li> <li>⊕ Sinuses</li> <li>⊕ Larynx</li> <li>⊕ Trachea</li> <li>⊕ Lung</li> <li>⊕ Heart, Mediastinum, Pleura</li> <li>⊕ Bones, Joints, Cartilage</li> <li>⊕ Skin</li> <li>⊕ Melanoma</li> <li>⊕ Mycosis Fungoides, Sezary Disease</li> <li>⊕ Nerves, Nervous System, Soft Tissues</li> <li>⊕ Retroperitoneum, Peritoneum</li> </ul>	<ul style="list-style-type: none"> <li>⊕ Breast</li> <li>⊕ Vulva, Vagina</li> <li>⊕ Cervix Uteri</li> <li>⊕ Corpus Uteri, Uterus, NOS</li> <li>⊕ Ovary</li> <li>⊕ Fallopian Tube, Ligaments, Adnexa</li> <li>⊕ Other and Unspecified Female Genital Organs, Placenta</li> <li>⊕ Penis</li> <li>⊕ Prostate</li> <li>⊕ Testis</li> <li>⊕ Other and Unspecified male Genital Organs</li> <li>⊕ Kidney</li> <li>⊕ Renal Pelvis, Ureter</li> <li>⊕ Bladder</li> <li>⊕ Urethra, Other Urinary</li> <li>⊕ Eye</li> <li>⊕ Brain, Central Nervous System, Malignant</li> <li>⊕ Brain, Central Nervous System, Benign and Borderline</li> <li>⊕ Thyroid</li> <li>⊕ Thymus, Adrenal and Other Endocrine Glands</li> <li>⊕ Kaposi Sarcoma</li> <li>⊕ Lymphoma</li> <li>⊕ Hematopoietic, Reticuloendothelial, Immunoproliferative and Myeloid</li> <li>⊕ Other and Unknown Sites</li> </ul>
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**GLOSSARY OF COMMON TERMS**

Abstract - A succinct synopsis of pertinent information gleaned from the patient record. Every abstract should reflect the diagnosis and first course of therapy for each cancer diagnosis in any patient. In general, an abstract represents the first four to twelve months of the patient's cancer experience. Completeness, consistency and attention to detail are very important. Please take care when abstracting each cancer case.

Active Surveillance/Watchful Waiting - No therapy is also a first course of therapy treatment option. If a physician or patient elects to undergo simple observation (as is often the case with prostate cancer) and later receives a TURP or hormonal therapy, the first course of therapy is No Therapy. The abstract should reflect that no therapy was administered for the first course.

Adjuvant - Systemic therapy and/or radiation therapy that is given after other methods have destroyed the clinically detectable cancer cells. This therapy is given to destroy micrometastases (undetectable cancer cells). The intent is to prevent or delay a recurrence.

Analytic Case - Any case of cancer where the reporting facility is involved in the diagnosis and/or evaluation of the diagnosis and/or the evaluation of the extent of cancer spread at the time of diagnosis and/or the administration of all or any part of the first course of therapy.

Cancer Directed Therapy - Any treatment that is given to modify, control, remove or destroy primary or metastatic cancer tissue. The treatment is meant to remove or minimize the size of tumor or delay the spread of disease.

Clinical Stage or Clinical Classification – This is a point in time, not specific types of exams or procedures. The clinical (stage) classification encompasses all information from the diagnostic workup. This is from the moment of diagnosis until just before the first treatment.

Concurrent Therapy - Different types of therapies that are administered at the same time.

Consultation - Services rendered by a facility to confirm a diagnosis or treatment plan. Examples include: Pathology review of slides that have been previously read by another pathology physician or department; Radiation therapy planning without radiation therapy services administered; Specialty testing performed to confirm a diagnosis or extent of disease where the testing is not available elsewhere.

End-Results Registry - A cancer registry that performs all of the necessary functions required by the Commission on Cancer/American College of Surgeons for cancer program accreditation.

Federal Information Processing Standards (FIPS) – Standard codes for U.S. counties taken from the publication “Counties and Equivalent Entities of the United States, Its Possessions, and Associated Areas.”

First Course of Therapy or Treatment - All methods of therapy that are included in the original treatment plan, including neo-adjuvant, concurrent, prophylactic, palliative, and adjuvant therapies. Generally, the first course of therapy is completed during the first four months after a patient's diagnosis with cancer. The first course of therapy can extend beyond one year after initial diagnosis.

No therapy is also a first course of therapy treatment option. If a physician or patient elects to undergo simple observation (as is often the case with prostate cancer) and later receives a TURP or hormonal therapy, the first course of therapy is No Therapy. The abstract should reflect that no therapy was administered for the first course.

Historical Case - A case of cancer that is not active or receiving therapy (NED, remission) that must be reported to accompany a case of cancer for the same patient that is active or receiving therapy.

Incidence Registry - A cancer registry that performs minimal cancer reporting as required in order to calculate cancer incidence rates for a defined geographic region and/or meet state reporting requirements.

NED - No Evidence of Disease

Neo-Adjuvant - Systemic therapy and/or radiation therapy that is given prior to surgical resection to reduce the bulk of a locally advanced primary cancer. Definitive surgery must be performed to complete the loop. Systemic therapy may consist of chemotherapy, immunotherapy, or hormone therapy.

Non-Analytic Case - Any case of cancer where the reporting facility is not involved with the diagnosis and/or the first course of therapy but, the patient is seen at the reporting facility with evidence of active cancer, and/or is actively receiving therapy for cancer, and/or is diagnosed with cancer at the time an autopsy is performed.

Non-Cancer Directed Therapy - Any treatment that is designed to prepare a patient for cancer-directed therapy, prolong a patient's life, alleviate pain or make the patient comfortable. Non-cancer directed therapies are not meant to destroy or control the tumor or delay the spread of disease. These therapies include diagnostic tests and supportive care.

Palliative - Treatment that is given primarily for the purpose of pain control. Palliative therapy is non-curative. Any benefits of the treatment are considered secondary contributions to the patient's quality of life.

Pathologic Stage or Pathologic Classification – This is a point in time, not specific types of procedures. The pathologic (stage) classification encompasses all information from the diagnostic workup, the surgical (operative) evaluation, and the pathologist's review of the resected specimen, from the moment of diagnosis THROUGH the surgical resection.

Prophylactic - Radiation therapy that is administered for the purpose of preventing the development of symptoms in a setting in which clinical evidence indicates that problems are likely to develop if treatment is not administered.

Remission - Cancer that is no longer detectable by any testing or evaluation means. This term is most often used for leukemia cases.

Reportable Case - Any cancer case that meets reporting requirements as outlined in Section I.

Treatment - See Treatment Section

**APPENDIX C****2016 NAACCR RECOMMENDED ABBREVIATION LIST  
ORDERED BY WORD/TERM(S)**

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Abdomen (abdominal)	ABD
Abdomen/Pelvis	A/P
Abdominal perineal	AP
Abnormal	ABN or ABNL
Above	^
Above knee (amputation)	AK(A)
Absent/Absence	ABS
Abstract/Abstracted	ABST
Achilles tendon reflex	ATR
Acid phosphatase	ACID PHOS
Acquired Immune Deficiency Syndrome	AIDS
Activities of daily living	ADL
Acute granulocytic leukemia	AGL
Acute lymphocytic leukemia	ALL
Acute myelogenous leukemia	AML
Acute myocardial infarction	AMI
Acute renal failure	ARF
Acute Respiratory Distress (Disease) Syndrome	ARDS
Acute tubular necrosis	ATN
Adenocarcinoma	ADENOCA or ADENO
Adenopathy	ADENOP
Adenosine triphosphate	ATP
Adjacent	ADJ
Admission/Admit	ADM
Adrenal cortex	AC
Adrenal cortical hormone	ACH
Adrenocorticotrophic hormone	ACTH
Adult-onset Diabetes Mellitus	AODM

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Adverse drug reaction	ADR
Affirmative	AFF
African American	AA
Against medical advice	AMA
AIDS-related condition (complex)	ARC
AIDS-related disease	ARD
Air contrast barium enema	ACBE
Albumin	ALB
Alcohol	ETOH
Alkaline phosphatase	ALK PHOS
Alpha-fetoprotein	AFP
Also known as	AKA
Ambulatory	AMB
Amount	AMT
Amputation	AMP
Amyotrophic lateral sclerosis	ALS
Anal intraepithelial neoplasia, grade III	AIN III
Anaplastic	ANAP
And	&
Angiography/Angiogram	ANGIO
Anterior	ANT
Anteroposterior	A-P
Antibiotics	ABX
Antibody	AB
Antidiuretic hormone	ADH
Antigen	AG
Aortic stenosis	A-STEN
Apparently	APPL'Y
Appendix	APP
Approximately	≈
Aromatase inhibitor	AI
Arrhythmia	ARRHY
Arterial blood gases	ABG
Arteriosclerotic cardiovascular disease	ASCVD
Arteriosclerotic heart disease	ASHD
Arteriosclerotic Peripheral Vascular Disease	ASPVD

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Arteriosclerosis/Arteriosclerotic	AS
Arteriovenous	AV
Arteriovenous malformation	AVM
Artery (ial)	ART
As soon as possible	ASAP
Ascending colon	A-COLON
Aspiration	ASP
Aspirin, Acetylsalicylic acid	ASA
Associated	ASSOC
At	@
Atrial fibrillation	A FIB
Atrial flutter	A FLUTTER
Atrial premature complexes	APC
Atrial stenosis/insufficiency/incompetence	AI
Auscultation & percussion	A&P
Autoimmune hemolytic anemia	AIHA
Autonomic nervous system	ANS
Autopsy	AUT
Average	AVG
Axilla(ry)	AX
Axillary Lymph Node Dissection	AXLND or ALND
Bacillus Calmette-Guerin	BCG
Barium	BA
Barium enema	BE
Bartholin's, Urethral & Skene's	BUS
Basal cell carcinoma	BCC
Base of tongue	BOT
Before noon	AM
Below knee (amputation)	BK(A)
Benign prostatic hypertrophy/hyperplasia	BPH
Bilateral	BIL or B/L



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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Bilateral salpingo-oophorectomy	BSO
Bile duct	BD
Biological response modifier	BRM
Biopsy	BX
Bipolar affective disorder	BAD
Black female	B/F or BF
Black male	B/M or BM
Bladder tumor	BT
Blood pressure	BP
Blood urea nitrogen	BUN
Blood volume	BV
Bloom-Richardson	BR
Body mass index	BMI
Body surface area	BSA
Bone marrow	BM
Bone marrow biopsy	BMBX
Bone marrow transplant	BMT
Bone scan	BSC
Bowel movement	BM
Brachytherapy	BRACHY
Brain tumor	BT
Breast cancer susceptibility gene	BRCA 1 and BRCA 2
Bright red blood per rectum	BRBPR
Brother	BRO
Calcification(s)	CA <sup>++</sup> or CALC(s)
Calcium	CA
Cancer	SPELL OUT; DO NOT ABBREVIATE
Cancer Antigen 125	CA 125
Capsule (s)	CAP(S)
Carbohydrate Antigen 19-9	CA 19-9
Carcinoembryonic antigen	CEA
Carcinoma	CA
Carcinoma <i>in situ</i>	CIS
Cardiovascular disease	CVD
CAT/CT scan/Computerized axial tomography	CT

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Centigray	CGY
Centimeter	CM
Centimeters from nipple	CFN
Central nervous system	CNS
Cerebrospinal fluid	CSF
Cerebrovascular accident	CVA
Cervical intraepithelial neoplasia	CIN
Cervical intraepithelial neoplasia, grade III	CIN III or CIN 3
Cervical spine	C-SPINE
Cervical vertebrae	C1-C7
Change	CHG
Chemotherapy	CHEMO
Chest, abdomen, pelvis	C/A/P
Chest X-ray	CXR
Chief complaint	CC
Chromogenic in situ hybridization	CISH
Chronic	CHR
Chronic granulocytic leukemia	CGL
Chronic lymphocytic leukemia	CLL
Chronic myeloid (myelocytic) leukemia	CML
Chronic obstructive lung disease	COLD
Chronic obstructive pulmonary disease	COPD
Chronic renal failure	CRF
Chronic ulcerative colitis	CUC
Cigarettes	CIG
Circulating tumor cells	CTC
Circumferential resection margin	CRM
Clear	CLR
Cobalt 60	CO60
Collaborative stage	CS
Colon, Ascending	A-COLON
Colon, Descending	D-COLON
Colon, Sigmoid	SIG COLON or S-COLON
Colon, Transverse	TRANS-COLON or T-COLON

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Colony-stimulating factor	C-SF
Complaint (-ning) of	C/O
Complete blood count	CBC
Congenital heart disease	CHD
Congestive heart failure	CHF
Consistent with	C/W
Continue/continuous	CONT
Contralateral	CONTRA
Coronary artery bypass graft	CABG
Coronary artery disease	CAD
Coronary care unit	CCU
centimeter	CM
Cystic fibrosis	CF
Cystoscopy	CYSTO
Cytology	CYTO
Date of birth	DOB
Date of death	DOD
Dead on arrival	DOA
Decrease(d)	DECR
Deep tendon reflex	DTR
Deep vein thrombosis	DVT
Degenerative joint disease	DJD
Deoxyribonucleic acid	DNA
Dermatology	DERM
Descending colon	D-COLON
Diabetes mellitus	DM
Diagnosis	DX
Diameter	DIAM
Diethylstilbestrol	DES
Differentiated/differential	DIFF
Differential diagnosis	DDX
Digital rectal examination	DRE
Dilatation and curettage	D&C
Discharge	DISCH or D/C

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Discontinue(d)	DC
Disease	DZ
Disseminated intravascular coagulopathy	DIC
Disseminated tumor cells	DTC
Don't/Doesn't know	DK
Ductal carcinoma <i>in situ</i>	DCIS
Due to	D/T
Dyspnea on exertion	DOE
Ears, nose, and throat	ENT
Electrocardiogram	ECG/EKG
Electroencephalogram	EEG
Electromyogram	EMG
Electron volt	EV
Elevated	ELEV or ^
Emergency department	ED
Emergency room	ER
End stage renal disease	ESRD
Endoscopic retrograde cholangiopancreatography	ERCP
Enlarged	ENLGD or ENL
Epidermal growth factor receptor	EGFR
Equal(s)	=
Esophagogastro-duodenoscopy	EGD
Estrogen receptor (assay)	ER, ERA
Evaluation	EVAL
Every	Q
Every day	QD
Evidence of	E/O
Exam under anesthesia	EUA
Examination	EXAM
Excision/excised	EXC(D)
Expired	EXP
Exploratory	EXPL
Exploratory laparotomy	EXPL LAP or EXP LAP

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Extend/extension	EXT
External beam radiotherapy	EBRT
External radiation therapy	XRT
Eye, ear, nose, throat	EENT
Familial adenomatous polyposis	FAP
Family History	FHX
Fever of unknown origin	FUO
Fine needle aspiration	FNA
Fine needle aspiration biopsy	FNAB
Floor of mouth	FOM
Flow cytometry	FLOW CYTO
Fluid	FL
Fluorescence in situ hybridization	FISH
Fluoroscopy	FLURO
Follicular lymphoma international prognostic index	FLIPI
Follow-up	FU
For example	E.G.
Fraction(s)	FX(s)
Fracture	FX
Frequent/Frequency	FREQ
Frozen section	FS
Full thickness skin graft	FTSG
Gallbladder	GB
Gastroesophageal	GE
Gastroesophageal reflux disease	GERD
Gastrointestinal	GI
Gastrointestinal stromal tumors	GIST
General/Generalized	GEN
Genitourinary	GU
Grade	GR
Gray	GY
Greater/Greater than	>
Gynecology	GYN
Hematocrit	HCT

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Hematology/Oncology (ist)	HEM/ONC
Hematoxylin and Eosin	H&E
Hemoglobin	HGB
Hemoglobin and hematocrit	H/H
Hepatitis A (virus)	HAV or HEP A
Hepatitis B (virus)	HBV or HEP B
Hepatitis C (virus)	HCV or HEP C
Hepatitis D (virus)	HDV or HEP D
Hepatosplenomegaly	HSM
High dose rate	HDR
High grade squamous intraepithelial lesion	HGSIL
Hispanic female	HF
Hispanic male	HM
History	HX
History and physical	H&P
History of	H/O
History of present illness	HPI
Hormone	HORM
Hormone replacement therapy	HRT
Hospital	HOSP
Hour/Hours	HR(S)
Human chorionic gonadotropin	HCG
Human epidermal growth factor receptor 2	HER2
Human Immunodeficiency Virus	HIV
Human Papilloma Virus	HPV
Human T-Lymphotropic Virus, (Type III)	HTLV
Hypertension	HTN
Hypertensive cardiovascular disease	HCVD
Hypertensive vascular disease	HVD
Hysterectomy	HYST
Idiopathic hypertrophic subaortic stenosis	IHSS
Idiopathic thrombocytopenia	ITP
Immunoglobulin	IG
Immunohistochemical	IHC

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Impression	IMP
Incision & drainage	I&D
Includes/Including	INCL
Increase(d)	INCR
Inferior	INF
Inferior vena cava	IVC
Infiltrating	INFILT or INFIL
Infiltrating/invasive ductal carcinoma	IDC
Inflammatory bowel disease	IBD
Inpatient	IP or INPT
Insulin-dependent diabetes mellitus	IDDM
Intensity modulated radiation therapy	IMRT
Intensive care unit	ICU
Intercostal margin	ICM
Intercostal space	ICS
Intermittent positive pressure breathing	IPPB
Internal	INT
International prognostic index (for lymphoma)	IPI
International prognostic score	IPS
Interstitial lung disease	ILD
Intracavitary brachytherapy	ICB
Intramuscular	IM
Intraperitoneal	IP
Intrathecal	IT
Intravenous	IV
Intravenous cholangiogram	IVCA
Intravenous pyelogram	IVP
Invade(s)/invading/invasion	INV
Involve(s)/involvement/involving	INVL
Iodine 131	I-131
Ipsilateral	IPSI
Irregular	IRREG
Isolated tumor cells	ITC
Janus kinase 2	JAK2
Jugular venous distention	JVD
Juvenile rheumatic arthritis	JRA

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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Kaposi sarcoma	KS
Kidneys, ureters, bladder	KUB
Kilogram	KG
Kilovolt	KV
Laboratory	LAB
Lactic dehydrogenase	LDH
Laparotomy	LAP
Large	LRG
Laryngeal intraepithelial neoplasia	LIN
Last menstrual period	LMP
Lateral	LAT
Left	LT
Left bundle branch block	LBBB
Left costal margin	LCM
Left lower extremity	LLE
Left lower lobe	LLL
Left lower quadrant	LLQ
Left salpingo-oophorectomy	LSO
Left upper extremity	LUE
Left upper lobe	LUL
Left upper outer quadrant	LUOQ
Left upper quadrant	LUQ
Less/Less than	<
Licensed practical nurse	LPN
Linear accelerator	LINAC
Liver function test	LFT
Liver/spleen scan	LS SCAN
Lobular carcinoma in situ	LCIS
Low dose rate	LDR
Lower extremity	LE
Lower inner quadrant	LIQ
Lower outer quadrant	LOQ



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<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Lumbar spine	L-SPINE
Lumbar vertebra	L1-L5
Lumbosacral	LS
Lupus erythematosus	SLE
Lymph node(s)	LN(S)
Lymph node dissection	LND
Lymphadenopathy	LAD or LAN
Lymphadenopathy-associated virus	LAV
Lymph/vascular invasion	LVI
Macrophage colony-stimulating factor	M-CSF
Magnetic resonance cholangiopancreatography	MRCP
Magnetic resonance imaging	MRI
Main stem bronchus	MSB
Malignant/malignancy	MALIG or MAL
Malignant melanoma	SPELL OUT; DO NOT ABBREVIATE
Mammogram	MMG or MAMMO
Mandible/mandibular	MAND
Maternal grandfather	MGF
Maternal grandmother	MGM
Maximum	MAX
Medical center	MC
Medical Oncology (ist)	MED ONC
Medication	MED
Megavolt	MV
Melanoma in situ	MIS
Metastatic/Metastasis	METS
Methicillin Resistant Staphylococcus Aureus	MRSA
Microgram	MCG
Microsatellite instability	MSI
Microscopic	MICRO

**APPENDIX C**

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Middle lobe	ML
Millicurie (hours)	MC(H)
Milligram (hours)	MG(H)
Milliliter	ML
Millimeter	MM
Million electron volts	MEV
Minimally invasive breast biopsy	MIBB
Minimum	MIN
Minus	-
Minute	MIN
Mitral valve prolapse	MVP
Mixed combined immunodeficiency	MCID
Mixed connective tissue disease	MCTD
Moderate (ly)	MOD
Moderately differentiated	MD, MOD DIFF or M/DIFF
Modified radical mastectomy	MRM
Monoclonal gammopathy of uncertain significance	MGUS
Month(s)	MO(S)
More/More than	>
Mucinous cystic neoplasm	MCN
Multifocal atrial tachycardia	MAT
Multifocal premature ventricular contraction	MPVC
Multiple	MULT
Multiple sclerosis	MS
Multiple myeloma	SPELL OUT; DO NOT ABBREVIATE
Myasthenia gravis	MG
Myelodysplastic syndrome	MDS
Myocardial infarction	MI
Nausea and vomiting, nausea/vomiting	N&V or N/V
Neck vein distention	NVD
Negative	NEG
Negative	-
Neoplasm	NEOPL
Neuroendocrine tumor	NET

**APPENDIX C**

C-19

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Neurology	NEURO
No evidence	NE
No evidence of disease	NED
No significant findings	NSF
Non-Hodgkin lymphoma	NHL
Non insulin dependent diabetes mellitus	NIDDM
Non small cell carcinoma	NSCCA
Non small cell lung carcinoma	NSCLC
Normal	NL or NML or NORM
Not applicable	NA or N/A
Not elsewhere classified	NEC
Not otherwise specified	NOS
Not recorded	NR
Not reportable	NR
Number	#
Nursing home	NH
Obstetrics	OB
Obstructed (-ing, -ion)	OBST
Oncology (ist)	ONC
Operating room	OR
Operative report	OP RPT
Organic brain syndrome	OBS
Orthopedics	ORTHO
Otology	OTO
Ounce	OZ
Outpatient	OP or OUTPT
Pack years	PY
Packs per day	PPD
Palpated (-able)	PALP
Papanicolaou smear	PAP
Papillary	PAP
Papillary transitional cell carcinoma	PTCC
Past/personal (medical) history	PMH
Paternal grandfather	PGF

**APPENDIX C**

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Paternal grandmother	PGM
Pathology	PATH
Patient	PT
Pediatrics	PEDS
Pelvic inflammatory disease	PID
Peptic ulcer disease	PUD
Per rectum	PR
Percutaneous	PERC
Percutaneous transhepatic cholecystogram	PTC
Performance Status	PS
Peripheral blood stem cell transplant	PBSCT
Peripheral nervous system	PNS
Peripheral vascular disease	PVD
Phosphorus 32	P32
Physical examination	PE
Physiotherapy/Physical therapy	PT
Platelets	PLT
Plus	+
Polycythemia vera	P VERA or PCV
Poorly differentiated	PD, POOR DIFF or P/DIFF
Positive	POS
Positive	+
Positron emission tomography	PET
Possible	POSS
Posterior	POST
Postoperative (-ly)	POST OP
Pound(s)	LB(S)
Pound(s)	#
Premature atrial contraction	PAC
Preoperative (-ly)	PRE OP
Prescription	RX
Previous	PREV
Primary care physician	PCP

**APPENDIX C**

C-21

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Primary medical physician	PMP
Prior to admission	PTA
Probable (-ly)	PROB
Proctoscopy	PROCTO
Progesterone receptor (assay)	PR, PRA
Prostatic intraepithelial neoplasia, grade III	PIN III or PIN 3
Prostatic specific antigen	PSA
Pulmonary	PULM
Quadrant	QUAD
Radiation absorbed dose	RAD
Radiation Oncology	RAD ONC or RONC
Radiation therapy	RT or XRT
Radical retropubic prostatectomy	RRP
Radioactive iodine	RAI
Radioactive iodine uptake	RAIU
Radioimmunoassay	RIA
Received	REC'D
Recommend	REC
Red blood cells (count)	RBC
Refractory anemia	RA
Refractory anemia with excess blasts	RAEB
Regarding	RE
Regional	REG
Regional medical center	RMC
Regular	REG
Regular sinus rhythm	RSR
Renal cell carcinoma	RCC
Resection (ed)	RESEC
Reticulum cell sarcoma	RCS
Review of outside films	ROF
Review of outside slides	ROS
Rheumatic heart disease	RHD
Rheumatoid arthritis	RA
Right	RT

**APPENDIX C**

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Right bundle branch block	RBBB
Right costal margin	RCM
Right inner quadrant	RIQ
Right lower extremity	RLE
Right lower lobe	RLL
Right lower quadrant	RLQ
Right middle lobe	RML
Right outer quadrant	ROQ
Right salpingo-oophorectomy	RSO
Right upper extremity	RUE
Right upper lobe	RUL
Right upper quadrant	RUQ
Robotic assisted laparoscopy	RAL
Robotic assisted radical prostatectomy	RARP
Rule out	R/O
Sacral spine	S-SPINE
Sacral vertebra	S1-S5
Salpingo-oophorectomy	SO
Satisfactory	SATIS
Sentinel lymph node	SLN
Sentinel lymph node biopsy	SLNBX
Serum Chromogranin A	CGA
Serum glutamic oxaloacetic transaminase	SGOT
Serum glutamic pyruvic transaminase	SGPT
Serum protein electrophoresis	SPEP
Severe combined immunodeficiency syndrome	SCID
Short(ness) of breath	SOB
Sick sinus syndrome	SSS
Sigmoid colon	SIG COLON or S-COLON
Small	SM
Small bowel	SB
Small cell carcinoma	Small Cell CA
Small lymphocytic lymphoma	SLL
Social History	SH or SHX

**APPENDIX C**

C-23

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Specimen	SPEC
Spine, Cervical	C-SPINE
Spine, Lumbar	L-SPINE
Spine, Sacral	S-SPINE
Spine, Thoracic	T-SPINE
Split thickness skin graft	STSG
Squamous	SQ
Squamous cell carcinoma	SQCC – not SCC
Squamous intraepithelial neoplasia	SIN III
Status post	S/P
Stem cell transplant	SCT
Subcutaneous	SUBCU or SUBQ
Suggestive	SUGG
Summary stage	SS
Superior vena cava	SVC
Supraclavicular	SCV
Supraclavicular fossa	SCF
Surgery/Surgical	SURG
Suspicious/suspected	SUSP
Stem cell transplant	SCT
Symptoms	SX
Syndrome of inappropriate ADH	SIADH
Systemic lupus erythematosus	SLE
Thoracic spine	T-SPINE
Thoracic vertebra	T1 – T12
Thrombotic thrombocytopenia purpura	TTP
Times	X
Tobacco	TOB
Total abdominal hysterectomy	TAH
Total abdominal hysterectomy- bilateral salpingo-oophorectomy	TAH-BSO
Total vaginal hysterectomy	TVH
Transient ischemic attack	TIA
Transitional cell carcinoma	TCC
Transrectal ultrasound	TRUS
Transurethral resection	TUR

**APPENDIX C**

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
Transurethral resection bladder	TURB
Transurethral resection prostate	TURP
Transverse colon	TRANS-COLON or T-COLON
Treatment	TX
True vocal cord	TVC
Tuberculosis	TB
Tumor board	TB
Tumor, node, metastasis	TNM
Tumor size	TS
Twice a day (daily)	BID
Ultrasound	US
Undifferentiated	UNDIFF
Unknown	UNK
Upper extremity	UE
Upper gastrointestinal (series)	UGI
Upper inner quadrant	UIQ
Upper outer quadrant	UOQ
Upper respiratory infection	URI
Urinary tract infection	UTI
Vagina/Vaginal	VAG
Vaginal hysterectomy	VAG HYST
Vaginal intraepithelial neoplasia (grade III)	VAIN III or VAIN 3
Vertical growth phase	VGP
Vertical growth rate	VGR
Vital signs	VS
Vulvar intraepithelial neoplasia (grade III)	VIN III or VIN 3
Week(s)	WK(S)
Weight	WT
Weight loss	WL
Well differentiated	WD, WELL DIFF or W/DIFF
White blood cells (count)	WBC
White female	W/F or WF



**APPENDIX C**

C-25

<b>WORD/TERM(S)</b>	<b>ABBREVIATION/SYMBOL</b>
White male	W/M or WM
With	W/
Within normal limits	WNL
Without	W/O
Wolff-Parkinson-White syndrome	WPW
Work-up	W/U
Xray	XR
Year(s)	YR(S)
Year old	YO or Y/O

**APPENDIX C****2016 NAACCR RECOMMENDED ABBREVIATION LIST  
ORDERED BY ABBREVIATION/SYMBOL**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
ABD	Abdomen (abdominal)
A/P	Abdomen/Pelvis
AP	Abdominal perineal
ABN or ABNL	Abnormal
^	Above
AK(A)	Above knee (amputation)
ABS	Absent/Absence
ABST	Abstract/Abstracted
ATR	Achilles tendon reflex
ACID PHOS	Acid phosphatase
AIDS	Acquired Immune Deficiency Syndrome
ADL	Activities of daily living
AGL	Acute granulocytic leukemia
ALL	Acute lymphocytic leukemia
AML	Acute myelogenous leukemia
AMI	Acute myocardial infarction
ARF	Acute renal failure
ARDS	Acute Respiratory Distress (Disease) Syndrome
ATN	Acute tubular necrosis
ADENOCA or ADENO	Adenocarcinoma
ADENOP	Adenopathy
ATP	Adenosine triphosphate
ADJ	Adjacent
ADM	Admission/Admit
AC	Adrenal cortex
ACH	Adrenal cortical hormone
ACTH	Adrenocorticotrophic hormone
AODM	Adult-onset Diabetes Mellitus

**APPENDIX C**

C-27

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
ADR	Adverse drug reaction
AFF	Affirmative
AA	African American
AMA	Against medical advice
ARC	AIDS-related condition (complex)
ARD	AIDS-related disease
ACBE	Air contrast barium enema
ALB	Albumin
ETOH	Alcohol
ALK PHOS	Alkaline phosphatase
AFP	Alpha-fetoprotein
AKA	Also known as
AMB	Ambulatory
AMT	Amount
AMP	Amputation
ALS	Amyotrophic lateral sclerosis
AIN III	Anal intraepithelial neoplasia, grade III
ANAP	Anaplastic
&	And
ANGIO	Angiography/Angiogram
ANT	Anterior
A-P	Anteroposterior
ABX	Antibiotics
AB	Antibody
ADH	Antidiuretic hormone
AG	Antigen
A-STEN	Aortic stenosis
APPL'Y	Apparently
APP	Appendix
≈	Approximately
AI	Aromatase inhibitor
ARRHY	Arrhythmia
ABG	Arterial blood gases
ASCVD	Arteriosclerotic cardiovascular disease
ASHD	Arteriosclerotic heart disease
ASPVD	Arteriosclerotic Peripheral Vascular Disease

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
AS	Arteriosclerosis/Arteriosclerotic
AV	Arteriovenous
AVM	Arteriovenous malformation
ART	Artery (ial)
ASAP	As soon as possible
A-COLON	Ascending colon
ASP	Aspiration
ASA	Aspirin, Acetylsalicylic acid
ASSOC	Associated
@	At
A FIB	Atrial fibrillation
A FLUTTER	Atrial flutter
APC	Atrial premature complexes
AI	Atrial stenosis/insufficiency/incompetence
A&P	Auscultation & percussion
AIHA	Autoimmune hemolytic anemia
ANS	Autonomic nervous system
AUT	Autopsy
AVG	Average
AX	Axilla(ry)
AXLND or ALND	Axillary Lymph Node Dissection
BCG	Bacillus Calmette-Guerin
BA	Barium
BE	Barium enema
BUS	Bartholin's, Urethral & Skene's
BCC	Basal cell carcinoma
BOT	Base of tongue
AM	Before noon
BK(A)	Below knee (amputation)
BPH	Benign prostatic hypertrophy/hyperplasia
BIL or B/L	Bilateral

**APPENDIX C**

C-29

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
BSO	Bilateral salpingo-oophorectomy
BD	Bile duct
BRM	Biological response modifier
BX	Biopsy
BAD	Bipolar affective disorder
B/F or BF	Black female
B/M or BM	Black male
BT	Bladder tumor
BP	Blood pressure
BUN	Blood urea nitrogen
BV	Blood volume
BR	Bloom-Richardson
BMI	Body mass index
BSA	Body surface area
BM	Bone marrow
BMBX	Bone marrow biopsy
BMT	Bone marrow transplant
BSC	Bone scan
BM	Bowel movement
BRACHY	Brachytherapy
BT	Brain tumor
BRCA 1 and BRCA 2	Breast cancer susceptibility gene
BRBPR	Bright red blood per rectum
BRO	Brother
CA++ or CALC(s)	Calcification(s)
CA	Calcium
SPELL OUT; DO NOT ABBREVIATE	Cancer
CA 125	Cancer Antigen 125
CAP(S)	Capsule (s)
CA 19-9	Carbohydrate Antigen 19-9
CEA	Carcinoembryonic antigen
CA	Carcinoma
CIS	Carcinoma <i>in situ</i>
CVD	Cardiovascular disease
CT	CAT/CT scan/Computerized axial tomography

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
CGY	Centigray
CM	Centimeter
CFN	Centimeters from nipple
CNS	Central nervous system
CSF	Cerebrospinal fluid
CVA	Cerebrovascular accident
CIN	Cervical intraepithelial neoplasia
CIN III or CIN 3	Cervical intraepithelial neoplasia, grade III
C-SPINE	Cervical spine
C1-C7	Cervical vertebrae
CHG	Change
CHEMO	Chemotherapy
C/A/P	Chest, abdomen, pelvis
CXR	Chest X-ray
CC	Chief complaint
CISH	Chromogenic in situ hybridization
CHR	Chronic
CGL	Chronic granulocytic leukemia
CLL	Chronic lymphocytic leukemia
CML	Chronic myeloid (myelocytic) leukemia
COLD	Chronic obstructive lung disease
COPD	Chronic obstructive pulmonary disease
CRF	Chronic renal failure
CUC	Chronic ulcerative colitis
CIG	Cigarettes
CTC	Circulating tumor cells
CRM	Circumferential resection margin
CLR	Clear
CO60	Cobalt 60
CS	Collaborative stage
A-COLON	Colon, Ascending
D-COLON	Colon, Descending
SIG COLON or S-COLON	Colon, Sigmoid
TRANS-COLON or T-COLON	Colon, Transverse

**APPENDIX C**

C-31

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
C-SF	Colony-stimulating factor
C/O	Complaint (-ning) of
CBC	Complete blood count
CHD	Congenital heart disease
CHF	Congestive heart failure
C/W	Consistent with
CONT	Continue/continuous
CONTRA	Contralateral
CABG	Coronary artery bypass graft
CAD	Coronary artery disease
CCU	Coronary care unit
CM	centimeter
CF	Cystic fibrosis
CYSTO	Cystoscopy
CYTO	Cytology
DOB	Date of birth
DOD	Date of death
DOA	Dead on arrival
DECR	Decrease(d)
DTR	Deep tendon reflex
DVT	Deep vein thrombosis
DJD	Degenerative joint disease
DNA	Deoxyribonucleic acid
DERM	Dermatology
D-COLON	Descending colon
DM	Diabetes mellitus
DX	Diagnosis
DIAM	Diameter
DES	Diethylstilbestrol
DIFF	Differentiated/differential
DDX	Differential diagnosis
DRE	Digital rectal examination
D&C	Dilatation and curettage
DISCH or D/C	Discharge

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
DC	Discontinue(d)
DZ	Disease
DIC	Disseminated intravascular coagulopathy
DTC	Disseminated tumor cells
DK	Don't/Doesn't know
DCIS	Ductal carcinoma <i>in situ</i>
D/T	Due to
DOE	Dyspnea on exertion
ENT	Ears, nose, and throat
ECG/EKG	Electrocardiogram
EEG	Electroencephalogram
EMG	Electromyogram
EV	Electron volt
ELEV or ^	Elevated
ED	Emergency department
ER	Emergency room
ESRD	End stage renal disease
ERCP	Endoscopic retrograde cholangiopancreatography
ENLGD or ENL	Enlarged
EGFR	Epidermal growth factor receptor
=	Equal(s)
EGD	Esophagogastro-duodenoscopy
ER, ERA	Estrogen receptor (assay)
EVAL	Evaluation
Q	Every
QD	Every day
E/O	Evidence of
EUA	Exam under anesthesia
EXAM	Examination
EXC(D)	Excision/excised
EXP	Expired
EXPL	Exploratory
EXPL LAP or EXP LAP	Exploratory laparotomy



**APPENDIX C**

C-33

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
EXT	Extend/extension
EBRT	External beam radiotherapy
XRT	External radiation therapy
EENT	Eye, ear, nose, throat
FAP	Familial adenomatous polyposis
FHX	Family History
FUO	Fever of unknown origin
FNA	Fine needle aspiration
FNAB	Fine needle aspiration biopsy
FOM	Floor of mouth
FLOW CYTO	Flow cytometry
FL	Fluid
FISH	Fluorescence in situ hybridization
FLURO	Fluoroscopy
FLIPI	Follicular lymphoma international prognostic index
FU	Follow-up
E.G.	For example
FX(s)	Fraction(s)
FX	Fracture
FREQ	Frequent/Frequency
FS	Frozen section
FTSG	Full thickness skin graft
GB	Gallbladder
GE	Gastroesophageal
GERD	Gastroesophageal reflux disease
GI	Gastrointestinal
GIST	Gastrointestinal stromal tumors
GEN	General/Generalized
GU	Genitourinary
GR	Grade
GY	Gray
>	Greater/Greater than
GYN	Gynecology
HCT	Hematocrit

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
HEM/ONC	Hematology/Oncology (ist)
H&E	Hematoxylin and Eosin
HGB	Hemoglobin
H/H	Hemoglobin and hematocrit
HAV or HEP A	Hepatitis A (virus)
HBV or HEP B	Hepatitis B (virus)
HCV or HEP C	Hepatitis C (virus)
HDV or HEP D	Hepatitis D (virus)
HSM	Hepatosplenomegaly
HDR	High dose rate
HGSIL	High grade squamous intraepithelial lesion
HF	Hispanic female
HM	Hispanic male
HX	History
H&P	History and physical
H/O	History of
HPI	History of present illness
HORM	Hormone
HRT	Hormone replacement therapy
HOSP	Hospital
HR(S)	Hour/Hours
HCG	Human chorionic gonadotropin
HER2	Human epidermal growth factor receptor 2
HIV	Human Immunodeficiency Virus
HPV	Human Papilloma Virus
HTLV	Human T-Lymphotropic Virus, (Type III)
HTN	Hypertension
HCVD	Hypertensive cardiovascular disease
HVD	Hypertensive vascular disease
HYST	Hysterectomy
IHSS	Idiopathic hypertrophic subaortic stenosis
ITP	Idiopathic thrombocytopenia
IG	Immunoglobulin
IHC	Immunohistochemical

**APPENDIX C**

C-35

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
IMP	Impression
I&D	Incision & drainage
INCL	Includes/Including
INCR	Increase(d)
INF	Inferior
IVC	Inferior vena cava
INFILT or INFIL	Infiltrating
IDC	Infiltrating/invasive ductal carcinoma
IBD	Inflammatory bowel disease
IP or INPT	Inpatient
IDDM	Insulin-dependent diabetes mellitus
IMRT	Intensity modulated radiation therapy
ICU	Intensive care unit
ICM	Intercostal margin
ICS	Intercostal space
IPPB	Intermittent positive pressure breathing
INT	Internal
IPI	International prognostic index (for lymphoma)
IPS	International prognostic score
ILD	Interstitial lung disease
ICB	Intracavitary brachytherapy
IM	Intramuscular
IP	Intraperitoneal
IT	Intrathecal
IV	Intravenous
IVCA	Intravenous cholangiogram
IVP	Intravenous pyelogram
INV	Invade(s)/invading/invasion
INVL	Involve(s)/involvement/involving
I-131	Iodine 131
IPSI	Ipsilateral
IRREG	Irregular
ITC	Isolated tumor cells
JAK2	Janus kinase 2
JVD	Jugular venous distention
JRA	Juvenile rheumatic arthritis

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
KS	Kaposi sarcoma
KUB	Kidneys, ureters, bladder
KG	Kilogram
KV	Kilovolt
LAB	Laboratory
LDH	Lactic dehydrogenase
LAP	Laparotomy
LRG	Large
LIN	Laryngeal intraepithelial neoplasia
LMP	Last menstrual period
LAT	Lateral
LT	Left
LBBB	Left bundle branch block
LCM	Left costal margin
LLE	Left lower extremity
LLL	Left lower lobe
LLQ	Left lower quadrant
LSO	Left salpingo-oophorectomy
LUE	Left upper extremity
LUL	Left upper lobe
LUOQ	Left upper outer quadrant
LUQ	Left upper quadrant
<	Less/Less than
LPN	Licensed practical nurse
LINAC	Linear accelerator
LFT	Liver function test
LS SCAN	Liver/spleen scan
LCIS	Lobular carcinoma in situ
LDR	Low dose rate
LE	Lower extremity
LIQ	Lower inner quadrant
LOQ	Lower outer quadrant

**APPENDIX C**

C-37

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
L-SPINE	Lumbar spine
L1-L5	Lumbar vertebra
LS	Lumbosacral
SLE	Lupus erythematosus
LN(S)	Lymph node(s)
LND	Lymph node dissection
LAD or LAN	Lymphadenopathy
LAV	Lymphadenopathy-associated virus
LVI	Lymph/vascular invasion
M-CSF	Macrophage colony-stimulating factor
MRCP	Magnetic resonance cholangiopancreatography
MRI	Magnetic resonance imaging
MSB	Main stem bronchus
MALIG or MAL	Malignant/malignancy
SPELL OUT; DO NOT ABBREVIATE	Malignant melanoma
MMG or MAMMO	Mammogram
MAND	Mandible/mandibular
MGF	Maternal grandfather
MGM	Maternal grandmother
MAX	Maximum
MC	Medical center
MED ONC	Medical Oncology (ist)
MED	Medication
MV	Megavolt
MIS	Melanoma in situ
METS	Metastatic/Metastasis
MRSA	Methicillin Resistant Staphylococcus Aureus
MCG	Microgram
MSI	Microsatellite instability
MICRO	Microscopic

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
ML	Middle lobe
MC(H)	Millicurie (hours)
MG(H)	Milligram (hours)
ML	Milliliter
MM	Millimeter
MEV	Million electron volts
MIBB	Minimally invasive breast biopsy
MIN	Minimum
-	Minus
MIN	Minute
MVP	Mitral valve prolapse
MCID	Mixed combined immunodeficiency
MCTD	Mixed connective tissue disease
MOD	Moderate (ly)
MD, MOD DIFF or M/DIFF	Moderately differentiated
MRM	Modified radical mastectomy
MGUS	Monoclonal gammopathy of uncertain significance
MO(S)	Month(s)
>	More/More than
MCN	Mucinous cystic neoplasm
MAT	Multifocal atrial tachycardia
MPVC	Multifocal premature ventricular contraction
MULT	Multiple
MS	Multiple sclerosis
SPELL OUT; DO NOT ABBREVIATE	Multiple myeloma
MG	Myasthenia gravis
MDS	Myelodysplastic syndrome
MI	Myocardial infarction
N&V or N/V	Nausea and vomiting, nausea/vomiting
NVD	Neck vein distention
NEG	Negative
-	Negative
NEOPL	Neoplasm
NET	Neuroendocrine tumor

**APPENDIX C**

C-39

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
NEURO	Neurology
NE	No evidence
NED	No evidence of disease
NSF	No significant findings
NHL	Non-Hodgkin lymphoma
NIDDM	Non insulin dependent diabetes mellitus
NSSCA	Non small cell carcinoma
NSCLC	Non small cell lung carcinoma
NL or NML or NORM	Normal
NA or N/A	Not applicable
NEC	Not elsewhere classified
NOS	Not otherwise specified
NR	Not recorded
NR	Not reportable
#	Number
NH	Nursing home
OB	Obstetrics
OBST	Obstructed (-ing, -ion)
ONC	Oncology (ist)
OR	Operating room
OP RPT	Operative report
OBS	Organic brain syndrome
ORTHO	Orthopedics
OTO	Otology
OZ	Ounce
OP or OUTPT	Outpatient
PY	Pack years
PPD	Packs per day
PALP	Palpated (-able)
PAP	Papanicolaou smear
PAP	Papillary
PTCC	Papillary transitional cell carcinoma
PMH	Past/personal (medical) history
PGF	Paternal grandfather

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
PGM	Paternal grandmother
PATH	Pathology
PT	Patient
PEDS	Pediatrics
PID	Pelvic inflammatory disease
PUD	Peptic ulcer disease
PR	Per rectum
PERC	Percutaneous
PTC	Percutaneous transhepatic cholecystogram
PS	Performance Status
PBSCT	Peripheral blood stem cell transplant
PNS	Peripheral nervous system
PVD	Peripheral vascular disease
P32	Phosphorus 32
PE	Physical examination
PT	Physiotherapy/Physical therapy
PLT	Platelets
+	Plus
P VERA or PCV	Polycythemia vera
PD, POOR DIFF or P/DIFF	Poorly differentiated
POS	Positive
+	Positive
PET	Positron emission tomography
POSS	Possible
POST	Posterior
POST OP	Postoperative (-ly)
LB(S)	Pound(s)
#	Pound(s)
PAC	Premature atrial contraction
PRE OP	Preoperative (-ly)
RX	Prescription
PREV	Previous
PCP	Primary care physician



**APPENDIX C**

C-41

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
PMP	Primary medical physician
PTA	Prior to admission
PROB	Probable (-ly)
PROCTO	Proctoscopy
PR, PRA	Progesterone receptor (assay)
PIN III or PIN 3	Prostatic intraepithelial neoplasia, grade III
PSA	Prostatic specific antigen
PULM	Pulmonary
QUAD	Quadrant
RAD	Radiation absorbed dose
RAD ONC or RONC	Radiation Oncology
RT or XRT	Radiation therapy
RRP	Radical retropubic prostatectomy
RAI	Radioactive iodine
RAIU	Radioactive iodine uptake
RIA	Radioimmunoassay
REC'D	Received
REC	Recommend
RBC	Red blood cells (count)
RA	Refractory anemia
RAEB	Refractory anemia with excess blasts
RE	Regarding
REG	Regional
RMC	Regional medical center
REG	Regular
RSR	Regular sinus rhythm
RCC	Renal cell carcinoma
RESEC	Resection (ed)
RCS	Reticulum cell sarcoma
ROF	Review of outside films
ROS	Review of outside slides
RHD	Rheumatic heart disease
RA	Rheumatoid arthritis
RT	Right

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
RBBB	Right bundle branch block
RCM	Right costal margin
RIQ	Right inner quadrant
RLE	Right lower extremity
RLL	Right lower lobe
RLQ	Right lower quadrant
RML	Right middle lobe
ROQ	Right outer quadrant
RSO	Right salpingo-oophorectomy
RUE	Right upper extremity
RUL	Right upper lobe
RUQ	Right upper quadrant
RAL	Robotic assisted laparoscopy
RARP	Robotic assisted radical prostatectomy
R/O	Rule out
S-SPINE	Sacral spine
S1-S5	Sacral vertebra
SO	Salpingo-oophorectomy
SATIS	Satisfactory
SLN	Sentinel lymph node
SLNBX	Sentinel lymph node biopsy
CGA	Serum Chromogranin A
SGOT	Serum glutamic oxaloacetic transaminase
SGPT	Serum glutamic pyruvic transaminase
SPEP	Serum protein electrophoresis
SCID	Severe combined immunodeficiency syndrome
SOB	Short(ness) of breath
SSS	Sick sinus syndrome
SIG COLON or S-COLON	Sigmoid colon
SM	Small
SB	Small bowel
Small Cell CA – not SCC	Small cell carcinoma
SLL	Small lymphocytic lymphoma
SH or SHX	Social History

**APPENDIX C**

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<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
SPEC	Specimen
C-SPINE	Spine, Cervical
L-SPINE	Spine, Lumbar
S-SPINE	Spine, Sacral
T-SPINE	Spine, Thoracic
STSG	Split thickness skin graft
SQ	Squamous
SQCC – not SCC	Squamous cell carcinoma
SIN III	Squamous intraepithelial neoplasia
S/P	Status post
SCT	Stem cell transplant
SUBCU or SUBQ	Subcutaneous
SUGG	Suggestive
SS	Summary stage
SVC	Superior vena cava
SCV	Supraclavicular
SCF	Supraclavicular fossa
SURG	Surgery/Surgical
SUSP	Suspicious/suspected
SCT	Stem cell transplant
SX	Symptoms
SIADH	Syndrome of inappropriate ADH
SLE	Systemic lupus erythematosus
T-SPINE	Thoracic spine
T1 – T12	Thoracic vertebra
TTP	Thrombotic thrombocytopenia purpura
X	Times
TOB	Tobacco
TAH	Total abdominal hysterectomy
TAH-BSO	Total abdominal hysterectomy- bilateral salpingo-oophorectomy
TVH	Total vaginal hysterectomy
TIA	Transient ischemic attack
TCC	Transitional cell carcinoma
TRUS	Transrectal ultrasound
TUR	Transurethral resection

**APPENDIX C**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
TURB	Transurethral resection bladder
TURP	Transurethral resection prostate
TRANS-COLON or T-COLON	Transverse colon
TX	Treatment
TVC	True vocal cord
TB	Tuberculosis
TB	Tumor board
TNM	Tumor, node, metastasis
TS	Tumor size
BID	Twice a day (daily)
US	Ultrasound
UNDIFF	Undifferentiated
UNK	Unknown
UE	Upper extremity
UGI	Upper gastrointestinal (series)
UIQ	Upper inner quadrant
UOQ	Upper outer quadrant
URI	Upper respiratory infection
UTI	Urinary tract infection
VAG	Vagina/Vaginal
VAG HYST	Vaginal hysterectomy
VAIN III or VAIN 3	Vaginal intraepithelial neoplasia (grade III)
VGP	Vertical growth phase
VGR	Vertical growth rate
VS	Vital signs
VIN III or VIN 3	Vulvar intraepithelial neoplasia (grade III)
WK(S)	Week(s)
WT	Weight
WL	Weight loss
WD, WELL DIFF or W/DIFF	Well differentiated
WBC	White blood cells (count)
W/F or WF	White female

**APPENDIX C**

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<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
W/M or WM	White male
W/	With
WNL	Within normal limits
W/O	Without
WPW	Wolff-Parkinson-White syndrome
W/U	Work-up
XR	Xray
YR(S)	Year(s)
YO or Y/O	Year old

**APPENDIX C****2015 NAACCR RECOMMENDED ABBREVIATION LIST  
CONTEXT-SENSITIVE ABBREVIATIONS**

<b>ABBREVIATION/SYMBOL</b>	<b>WORD/TERM(S)</b>
AP	Anteroposterior
AP	Abdominal perineal
BM	Bone marrow
BM	Bowel movement
CA	Calcium
CA	Carcinoma
MIN	Minimum
MIN	Minute
ML	Milliliter
ML	Middle lobe
MM	Millimeter
MM	Multiple myeloma
PAP	Papillary
PAP	Papanicolaou smear
PT	Patient
PT	Physiotherapy/Physical therapy
RT	Right
RT	Radiation therapy