

Abbreviations Commonly Used in Ophthalmology

This is a brief list of some of the abbreviations used on clinic notes. Many of these abbreviations change from year to year, and there are dozens more which we use less often.

30-2	Commonly used automated Humphrey visual fields	LPI	Laser peripeheral iridectomy
A/C or AC	Anterior chamber	LP, LPO	Light perception, light perception only
ACG	Angle closure glaucoma	LR	Lateral rectus
ALPC	Argon laser photocoagulation (often for diabetic macular edema)	M	Manifest (non-cyclopleged) refraction
ALT	Argon laser trabeculoplasty (for glaucoma)	M&N	Mydriacyl & Neosynephrine mixture used for pupil dilation
AMD	Age-related macular degeneration	NLP	No light perception
APD	Afferent pupillary defect	NS or NSC	Nuclear sclerotic cataract
BCC	Basal cell cancer	NVD	Neovascularization of the disc
BDR	Background diabetic retinopathy	NVE	Neovascularization of the retina elsewhere (outside the disc)
BRVO	Branch retinal vein occlusion	NVI	Neovascularization of iris
c or cc	With refractive correction	OD, OS, OU	Right eye, left eye, both eyes
C/D	Cup-to-disc ratio of the optic nerve	OHT	Ocular hypertension
CF	Count fingers visual acuity	P1, P2, P4	Pilocarpine (with concentration)
CL, HC	Contact lenses, hard	PC	Posterior chamber or posterior capsule
SCL, EWSCL	Soft and extended wear	PD	Prism diopters
CME	Cystoid macular edema	PE, PHACO	Phacoemulsification
CRAO	Central retinal artery occlusion	PEE	Punctate epithelial erosions
CRVO	Central retinal vein occlusion	PEG	Punctate epithelial granularity
CSR or CSCR	Central serous chorioretinopathy	PEK	Punctate epithelial keratitis or keratopathy
CVF	Confrontation visual field	PERL	Pupils equal and reactive to light
cyl	Cylinder (in refraction)	PF, PA 1%	Pred Forte eye drops, prednisolone acetate
D	Diopter	PH	Pinhole
DCR	Dacryocystorhinostomy	PI 1/8	Phospholine Iodine 1/8%
DVD	Dissociated vertical deviation (a form of strabismus)	PKP or PK	Penetrating keratoplasty (cornea transplant)
DVS	Ductions, versions, saccades	POAG	Primary open angle glaucoma
DWSCL	Daily wear contact lenses	POHS	Presumed ocular histoplasmosis syndrome
ECCE c IOL	Extracapsular cataract extraction with intraocular lens implantation	PPDR	Pre-proliferative diabetic retinopathy
EOG	Electrooculogram	PRP	Pan-retinal photocoagulation
ERG	Electroretinogram	PSC	Posterior subcapsular cataract
EOM	Extraocular muscle	PVD	Posterior vitreous detachment
ERM	Epi-retinal membrane	RD	Retinal detachment
ET, E(T), E, E'	Esotropia, intermittent esotropia, esophoria, and esophoria at near	ROP	Retinopathy of prematurity
EUA	Exam under anesthesia	RP	Retinitis pigmentosa
HM	Hand motion vision	RPE	Retinal pigment epithelium
ICCE	Intracapsular cataract extraction	s or sc	Without refractive correction
IF 1%	Inflamase Forte 1%	SLE or SLX	Slit lamp exam
IK	Interstitial keratitis	SPK	Superficial punctate keratitis (Thygeson or keratopathy)
IO	Inferior oblique	SR	Superior rectus
IOL	Intraocular lens	SRN, SRNVM	Subretinal neovascular membrane
IOP	Intraocular pressure	Ta	Applanation tonometry
IR	Inferior rectus	T ½, T ¼	Timoptic (with concentrations)
K	Keratometer reading (measures the curvature of the cornea), or abbreviation for cornea	Va	Visual acuity
KCS	Keratoconjunctivitis sicca	VF	Visual field
KP	Keratic precipitate	vit	Vitreous
L HoT, R HoT	Left Hypotropia, right hypotropia	VTX	Vitrectomy
LHT, RHT	Left hypertropia and right hypertropia	W4D	Worth 4-dot test (in strabismus)
LOC	Laxative of choice	XT, X(T)	Exotropia, intermittent exotropia
		X, X'	exophoria, exophoria at near
		YAG	Neodymium-yttrium aluminum garnet laser
		Δ	Prism diopter

Sample Ophthalmology Clinic Note

The following is a sample clinic note, which you should use as a template for your patient evaluations during this rotation. We do not intend it to be complete, but to serve as an example of a typical chart entry. Try to do as much of the exam as you can when you screen patients for your resident. Please note there are many standard abbreviations and conventions used in ophthalmology, for instance the OD is always above the OS in noting V, IOP, etc.

History: Age, sex, race
Chief complaint
History of complaint (nature, duration, symptoms, etc.)
Pertinent positives and negatives
POHx (Past ocular history, including operations and laser treatment)
FOHx (Family history of eye disease: retina detachment, glaucoma, etc.)
PMH Meds (ocular and non-ocular)
Allergies

Exam: D Va 20/30 or 20/15 Distance visual acuity; be sure to use best correction with glasses.
PH to 20/20 OD Pinhole used over glasses if vision less than 20/20
External nl Lids, orbit, resistance to retropulsion, etc.
EOM's nl Extraocular motions normal
CVF's OD: full Confrontation visual fields
 OS: superior arcuate scotoma
Pupils: 6/2+ Pupils are 6mm OU, with 2+ reactivity OD and 1+ OS.
 6/1+ left APD APD = afferent pupillary defect

TA: 14/34 @0935

SLE Slit lamp exam
Corneas clear TA = applanation tonometric IOP
AC's clear and deep Anterior chamber
Gonio 4+ open OU Gonioscopic exam
M&N OU @0947 Mydracil and neosynephrine put in at 0947
Lenses and vitreous clear (90D) C/D: 0.3² / 0.8 x 0.9
 (The cup-to-disc ratio, horizontal and vertical)
 (90D = 90 diopter lens used with the slit lamp)
Macula and vessels normal OU
Indirect normal OU

Assessment:

A) Open angle glaucoma OS (assessment)

Plan:

P) 30/2 HVF (P = Plan, HVF = Humphrey Visual Field)
Stereo disc photos
Betagan 1 drop OS bid
F/U 1 wk for IOP check, then 3 mo.