

**List of Abbreviations and Acronyms**  
**(in alphabetical order according to the abbreviation or acronym)**

State policy requires that, when using abbreviations and acronyms, staff adhere to this list for consistent documentation and accurate interpretation by all local agencies and the Indiana WIC office. Context should always be considered when interpreting abbreviations or acronyms that represent more than one word or meaning (i.e. Fluorine or female). It is suggested but not required, for abbreviations and acronyms that appear on this list in uppercase, that uppercase be used.

A		C		D	
AAP	American Academy of Pediatrics	C or c	Cup	d	Day
		c/o	Complains of	d&v or d/v	Diarrhea and Vomiting
abn	Abnormal	CA	Clinic Assistant/Clerk	d/c	Discontinue
ad lib	As needed or Desired	CA	Cancer / Carcinoma	d/t	Due to
adeq	Adequate	Ca+	Calcium	DCS	Department of Child Services
adv	Advance(d)(ing)	cal	Calorie		
am	Morning	CDC	Center for Disease Control and Prevention	dd	Developmental Delay/ Developmental Disability
amt	Amount				
approp	Appropriate	cert	Certification	decr	Decrease
approx	Approximately	cf	Cystic Fibrosis	def	Deficiency
appt	Appointment	chg	Change	del	Delivery
asap	As Soon As Possible	cho	Carbohydrate	DFR	Division of Family Resources**
avg	Average	cig	Cigarette		
B		cig/d	Cigarettes per Day	diar	Diarrhea
b/c	Because	ck or chk	Check	disc	Discussed
bev	Beverage	CLS	Certified Lactation Specialist	dm	Diabetes Mellitus
bf	Breastfeeding				
bid	Twice a Day	conc	Concentrate	dob	Date of Birth
bm	Bowel Movement	constp	Constipation	doz	Dozen
bmi	Body Mass Index	cont	Continue	Dr	Doctor
Bmilk	Breast Milk	cp	Cerebral Palsy	dri	Dietary Reference Intakes: Recommended Intakes for Individuals
bp	Blood Pressure	CPA	Competent Professional Authority		
bs	Blood Sugar	CPS	Child Protective Services*	dx	Diagnosis
btl	Bottle				
btl fdg	Bottle Feeding	CS, C/S or c-section	Cesarean-Section	dz	Disease
bw	Birth Weight		CVV	Cash-value Voucher	E
				echo	Echocardiogram
				ed	Education
				edc	Estimated Date of Confinement
				edd	Estimated Date of Delivery
				EFNEP	Expanded Food & Nutrition Education Program
				EHS	Early Head Start
				enc	Encouraged
				enf	Enfamil
				etoh	Alcohol
				ex	example
				exp	Exempt
				expl	Explain

\*Child Protective Services (CPS) is part of the Department of Child Services (DCS)

\*\*The local office should be referred to as the Division of Family Resources (DFR) county office.

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F		G		I	
F	Fluorine	ga	Gestational Age	IBCLC	International Board
F	Female	gal	Gallon(s)		Certified Lactation
f/u	Follow-up	gdm	Gestational Diabetes	ic	Consultant
f/v	Fruits and Vegetables		Mellitus		Infant Cert
fa	food allergy	gen	General	ic	Individual Contact
fas	Fetal Alcohol Syndrome	ger	Gastroesophageal	ic	Initial Certification
fbf	Fully Breastfeeding / Fully Breastfed		Reflux	icu	Intensive Care Unit
fbs	Fasting Blood Sugar	gerd	Gastroesophageal	iddm	Insulin Dependent Diabetes Mellitus (type1)
FDA	Food and Drug Administration		Reflux Disease		
fdad	Foster Dad	gest	Gestation	ila	Individual Learning Activity
fdg	Feeding or Feeding Guide	GGs	Gerber Good Start		
fe	Iron	GGs2	Gerber Good Start 2	immun	Immunization
ff	Finger Foods	gi	Gastro-Intestinal		
ff	First Foods	glu	Glucose or Blood	in	Inches
fff	Fully Formula Feeding/ Fully Formula Fed		Glucose	inadeq	Inadequate
fl or fld	Fluid	gm	Gram	incr	Increase
Fl	Fluoride	gma	Grandmother	ind	individual
FM	Farmers Market		gpa		
FMNP	Farmers Market Nutrition Program	grav	Gravida (Pregnancies)	ineo	Internet Nutrition Education Opportunity
fmom	Foster Mom	grp	Group	inf	Infant
freq	Frequent	g-tube	Gastrostomy tube	intro	Introduction
ft	Full Term	GYN	Gynecology	iu	International unit(s)
ft	Feet (as a measurement not an appendage)	H		J	
ftt	Failure To Thrive	h/a	Height for Age	jce	Juice
		h2o	Water	K	
		hbw	High Birth Weight	K	Potassium
		hct	Hematocrit	kcal	Kilocalorie
		HF	Healthy Families	kg	Kilogram
		hgb	Hemoglobin	L	
		hh	Household	l/a	Length for Age
		HH	Hoosier Healthwise	lb	Pound
		hmbh	Help Me Be Healthy	lbp or HoTN	Low Blood Pressure (Hypotension)
		ho	Handout		
		hosp	Hospital	lbw	Low Birth Weight
		hr	Hour	lg	Large
		HS	Head Start	lga	Large for Gestational Age
		ht	Height	lgth	Length
		htn	Hypertension	lmp	Last Menstrual Period
		hx	History		

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<b>M</b>		<b>N (cont'd)</b>		<b>P (cont'd)</b>	
m	Male	nka	No Known Allergies	premie or preme	Premature infant
mbf	Mostly Breastfeeding/ Mostly Breastfed	nkfa	No Known Food Allergy	prep	Preparation
		NP	Nurse Practitioner	Pre-preg or prepreg	Prepregnancy (i.e. Prepregnancy Wt.)
mcg	Microgram	npo	Nothing By Mouth		
MD	Medical Doctor	ns	No Show		
mdf	Medical Documentation Form	nutr	Nutrition	prn	Whenever Necessary or As needed
		<b>O</b>			
mdr	Minimum Daily Requirement	1:1	One to One (i.e. 1:1 counseling)	pro	Protein
mdu	Medical Data Update	OB	Obstetrics	PT	Physical Therapy
med	Medium	oj	Orange Juice	pu	Pick-up (i.e. Check Pick-up = chkpu)
meds	Medications	OT	Occupational Therapy		
mfd	Medical Food	ow	Over weight	pwdr	Powder
mg	Milligram	oz	Ounce		
		<b>P</b>		<b>Q</b>	
mi or mica	Mental Illness or Mental Illness and Chemical Abuse			q	Every
		p	Para (births)	q2h	Every two hours
misc	Miscellaneous	p/p/g/c	participant/ parent/guardian/ caretaker	q3h	Every three hours
				q4h	Every four hours
MJN	Mead Johnson Nutritionals	PA	Physician's Assistant	qd	Every day
				qd	Once a day
mo	Month	pb	Peanut Butter	qid	Four Times Daily
mvi; or mvit	Multivitamin	PC	Peer Counselor	qn	Every Night
		ped	Pediatric	qod	Every Other Day
		pgw	Pre-gravida Weight	quad	Quadruplegic
<b>N</b>		<b>P</b>		<b>R</b>	
n&v or n/v	Nausea and Vomiting	phys	Physician	r/t	Related to
		pkg	Package	rc	Regional Center
n/a	Not Applicable	pku	Phenylketonuria	RD	Registered Dietitian
n/v/d	Nausea, Vomiting and Diarrhea	pn	Prenatal	re	Regarding
		pnc	Prenatal Care	rec	Recommend
n2	Second Nutrition Education Contact	prvit	Prenatal Vitamin	ref	Referral or Reference
		po	By Mouth	reg	Regular
nb	newborn	poa	Proof of Address	res	Residence/Residency
nbf	Non Breast Feeding	poi	Proof of Income	rev	Reviewed
ne or nutr ed	Nutrition Education	poid	Proof of ID	rf	Risk Factor
		poss	Possible	RN	Registered Nurse
nem	Nutrition Education Materials	pp	Post Partum	rsv	Respiratory Syncytial Virus Infection
		ppd	Packs/Day	rtc	Return to Clinic
nicu	Neonatal Intensive Care Unit	ppt	Participant	rtu	Ready to Use
		preg	Pregnant / Pregnancy	rx	Prescription
nk	Not Known				

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<b>S</b>		<b>T</b>		<b>Symbols</b>			
s2s	Skin to Skin	T or Tb	Tablespoon	@	AT		
sbf	Some Breastfeeding/ Some Breastfed	t or tsp	Teaspoon	=	Equals		
		TANF	Temporary Assistance to Needy Families	>	Greater Than		
sched	Schedule			<	Less Than		
serv	Serving	temp	Temperature	-	Minus		
sga	Small for Gestational Age	tf	Tube Feeding	-	Negative		
sib	Sibling	thtm	Touching Hearts	#	Number or Pounds		
SNAP	Supplemental Nutrition Assistance Program		Touching Minds	/	Per		
sns	Supplemental Nursing	tid	Three Times Daily	%	Percent		
SOAP	Subjective, Objective, Assessment, and Plan	tx	Treatment	+	Plus		
		<b>U</b>		X	Times		
sp or span	Spanish	unk	Unknown				
ST	Speech Therapy	uri	Upper Respiratory Infection (cold)				
stat	At Once or Immediately	utd	Up to Date				
sts	States (i.e. mom sts [states]...)	uti	Urinary Tract Infection				
		uw	Under weight				
		<b>V</b>					
sub	Subsequent (i.e. Sub Cert)	v	Vomiting				
		vag	Vaginal				
suppl	Supplement	vit	Vitamin(s)				
svgs	Servings	voc	Verification of Certification				
sx	Surgery						
symp	Symptoms	<b>W</b>					
sz	Seizure	w/	With				
		w/a	Weight for Age				
		w/h	Weight for Height				
		w/i	Within				
		w/l	Weight for Length				
		w/o	Without				
		wk	Week				
		wnl	Within Normal Limits				
		wt	Weight				
				<b>X</b>			
		x/d	Times per day				
				<b>Y</b>			
		yo	Year(s) Old				
				<b>Z</b>			
	(None)						