SESLHD PROCEDURE COVER SHEET

NAME OF DOCUMENT	Clinical Abbreviations
TYPE OF DOCUMENT	Procedure
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LEVEL OF EVIDENCE	NSW Ministry of Health Policy Directives National Safety and Quality Health Service Standards: Standard 1- Clinical Governance
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EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR	Director Clinical Governance and Medical Services
AUTHOR	SESLHD Health Records and Medicolegal Working Group
POSITION RESPONSIBLE FOR THE DOCUMENT	Chair, Health Records and Medicolegal Working Group Leonie.Patterson@health.nsw.gov.au
KEY TERMS	Abbreviation/s, acronym, health care record, documentation
SUMMARY	This document outlines responsibilities for the use of abbreviations and acronyms. It is to be read in conjunction with a list of abbreviations and acronyms that are acceptable for use in SESLHD. The list can also serve as a dictionary.

1.   POLICY STATEMENT

NSW Ministry of Health Policy Directive PD2012_069 'Health Care Records and Documentation Management' requires that "*Documentation in health care records must ….. Use approved abbreviations and symbols"* and that the *"PHO must use an approved abbreviation list"*

2.   BACKGROUND

This procedure has been produced to assist clinicians to adhere to this requirement when documenting in health care records and any associated clinical information system such as the eMR. It not only lists clinical abbreviations and acronyms that are accepted widely in clinical practice but also acts as a dictionary, listing entries that are specific to specialist fields.

Both individual SESLHD staff members and professional groups are encouraged tosubmit modifications for consideration.

Facilities may compile an additional, local list of approved abbreviations to reflect local clinical practice. For example, this may be a reduced list to reflect a smaller number of abbreviations that are acceptable at a site.

3.   RESPONSIBILITIES
3.1   Clinical Staff will:

- Use only those abbreviations listed in the appendix to this procedure.
- Refrain from using any abbreviations on consent forms.

3.2   Line Managers will:

- Promote awareness of this procedure and list, especially at local level Orientation.
- Provide staff with access to this procedure via the Intranet.
- Advise the SESLHD Health Records and Medico-Legal Working Group when changes in clinical practice necessitate addition of new abbreviations or removal of outdated ones.

3.3   District Managers/ Service Managers will:

- Promote awareness of this procedure and list, especially at local level Orientation
- Ensure that staff has access to this procedure via the Intranet.

4. PROCEDURE

4.1   Clinical Staff to familiarise themselves with the approved SESLHD Clinical Abbreviations list and ensure only approved abbreviations and acronyms are used when documenting in the patients health care record. This includes all documentation in both paper-based and electronic formats and in inpatient, non-admitted and community settings.

5.   DOCUMENTATION

Health Care Record

6.   AUDIT

SESLHD Documentation Audit

7.   REFERENCES

NSW Ministry of Health PD 2012_069 – Health Care Records, Documentation and Management

NSW Ministry of Health PD2013_043: Medication Handling in NSW Public Health Facilities (with particular reference to Appendix B)

NSW Ministry of Health IB2020_010: Consent for Medical and Healthcare Treatment – Manual

SESLHD CYFS Clinical Abbreviations for Use in the Client Health Record

Health Information Management Association of Australia Ltd (1997). *The Australian Dictionary of Clinical Abbreviations, Acronyms and Symbols.*

8.   REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
March 2013	1	Donna Martin, SGSHHS Manager, Clinical Information and Administrative Services
August 2016	2	Vivienne Rowlands, on behalf of the SESLHD Health Records & Medicolegal Working Group
December 2016	2	Updates endorsed by Executive Sponsor
September 2020	3	Executive Sponsor updated from Chair, SESLHD Health Records Steering Committee to Director Clinical Governance and Medical Services. Risk rating review date amended to be in line with a Low Risk.
January 2022	4	Minor review conducted by SESLHD Health Records and Medico-Legal Committee.
February 2022	4	Endorsed by Executive Sponsor. Processed and published by SESLHD Policy.
July 2022	4	Clinical Abbreviations List updated by SESLHD Health Records and Medico-Legal Committee following consultation period. List approved by Executive Sponsor. Hyperlink to list updated.