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Understanding of abbreviations in dermatology: A survey of primary care providers

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Background/Objectives: Abbreviations in medical documentation limit effective communication between health care providers.

Methods: A survey containing 5 demographic questions and 20 fill-in the blank questions was conducted from August through October of 2016. Respondents included physicians and mid-level providers in the fields of medicine, medicine-pediatrics, pediatrics and family practice.

Results: Responses were provided by 57 total providers in the departments of family medicine 39 (68.4%), internal medicine 7 (12.3%), medicine/pediatrics 6 (10.5%), and pediatrics 5 (8.8%). On average, providers correctly answered 7.2 (36.2%) of the twenty dermatology abbreviations. The abbreviations with the highest number of correct responses were AK-actinic keratosis (91.2%), BCC-basal cell carcinoma (86.0%), SCC-squamous cell carcinoma (86.0%), SK-seborrheic keratosis (82.5%) and MTX-methotrexate (71.9%), and the lowest were ILK- intralesional kenalog (1.8%), AA-alopecia areata (1.8%), PDT- photodynamic therapy (1.8%), and MMS- Mohs micrographic surgery (3.5%). Family medicine providers scored better (median of 40% correct) compared to providers from other departments (internal medicine and

medicine/pediatrics combined 35%, pediatrics 15%) (p-value = 0.0115).

Conclusion: Niche dermatologic abbreviations are often unrecognized by primary care providers and should be avoided in medical documentation.

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