Instruction Manual Part 2b Instructions for Classifying the Multiple Causes of Death Errata for Year 2012

Due to the limited number of changes required for coding instructions in 2011, the 2b Instruction Manual will not be reprinted this year. The 2b Errata for Year 2012 provides replacement pages for the 2011 2b Instruction Manual. Please discard the pages indicated on the errata cover sheet and insert the replacement pages provided.

This will update the coding instructions for 2012 classification purposes.

Page#	Content to be Corrected	Corrections
81	Changed 3 rd Example	Corrected page attached
84	Add phrase in last sentence	Corrected page attached
86	Add second title	Corrected page attached
154	Under 2 a (1) add Note and example	Corrected page attached
156-A	Add instruction d and examples	Insert attached page
179	Number 11, add clarifying phrase to 2 nd paragraph	Corrected page attached
190	Under 2.a, delete reference to HIV	Corrected page attached
379	Add AKI to abbreviations	Corrected page attached
380	Add AMA to abbreviations	Corrected page attached
389	Add MCA to abbreviations	Corrected page attached
391	Place PP in proper alpha order	Corrected page attached

Relating and Modifying Conditions

I	(a)	Laceration heart	I518
	(b)	Myocardial infarction	I219
	(c)		

<u>Consider</u> laceration of heart as nontraumatic and code to other ill-defined heart diseases.

I	(a)	Subdural hematoma	I620
	(b)	CVA	I64
	(c)		

Code Hematoma, subdural, nontraumatic (I620) as indexed.

I	(a)	Acute kidney injury	N288
	(b)	Kidney disease	N289
	(c)		

<u>Code</u> acute kidney injury as nontraumatic since reported due to a disease. Apply instruction to assign other diseases of kidney (N288), even though indexed as acute.

I	(a)	Cardiorespiratory failure	R092	
	(b)	Intracerebral hemorrhage	I619	
	(c)	Meningioma, subdural hematoma	D329	I620

<u>Code</u> subdural hematoma as nontraumatic since it is reported on the same line with a disease.

I	(a)	Liver failure	K7290	
	(b)	Cirrhosis with injury to liver	K746	K768
	(c)			

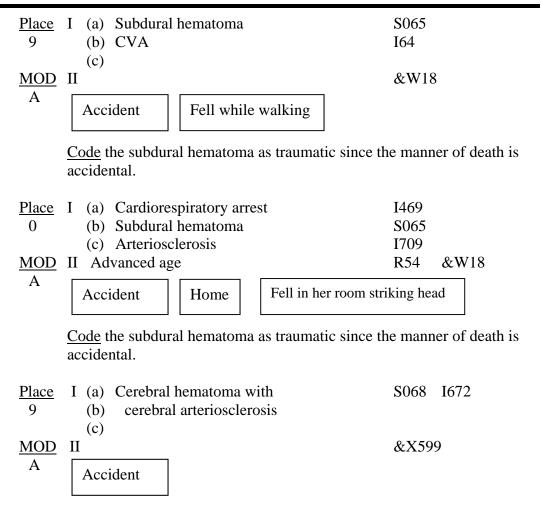
<u>Code</u> injury to liver as nontraumatic since it is reported on the same line with a disease.

I	(a)	Cerebral arteriosclerosis with	I672	I620
	(b)	subdural hematoma		

<u>Code</u> subdural hematoma as nontraumatic since it is reported on the same line with a disease.

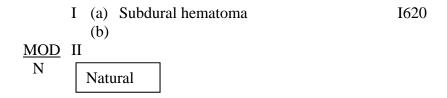
b. Some conditions are indexed directly to a traumatic category but the Classification also provides a nontraumatic code. When these conditions are reported due to or with a disease <u>and</u> an external cause is reported on the record or the Manner of Death box is checked as Accident, Homicide, Suicide, Pending Investigation or could not be determined, code the condition as traumatic.

Relating and Modifying Conditions



<u>Code</u> the cerebral hematoma as traumatic since the manner of death is accidental.

c. Some conditions are indexed directly to a traumatic category, but the Classification also provides a nontraumatic code. When these conditions are reported and the Manner of Death is Natural, code condition as nontraumatic unless the condition is reported due to or on the same line with an injury or external cause. This instruction applies only to conditions with the term "nontraumatic" in the Index. It does not apply to conditions in Section III, Intent of Certifier.



Code I(a) as nontraumatic since Manner of Death box states "Natural."

Part O

Relating and Modifying Conditions

Place I (a) Subdural hematoma 2 (b) (c)	I620	
MOD II Hip fracture	S720 &W19	
Natural Fell in hospital Code I(a) as nontraumatic since Manner of	Death box states "Natural."	
<u>Place</u> I (a) Subdural hematoma	S065	
2 (b) Open wound of head	S019	
MOD II Fell in hospital	&W19	
N Natural		

<u>Code</u> subdural hematoma as traumatic since it is reported due to an injury, disregarding Natural in the Manner of Death box.

In order to assign the most appropriate code for a given diagnostic entity, it may be necessary to take other recorded information and the order in which the information is reported into account. It is important to interpret this information properly so the meaning intended by the certifier is correctly conveyed. The objective is to code each diagnostic entity in accordance with the intent of the certifier without combining separate codable entities. The following instructions help to determine the intent of the certifier. Apply Intent of Certifier instructions to "See also" terms in the Index and to any synonymous sites or terms as well.

- 1. Other and unspecified gastroenteritis and colitis of unspecified origin (A099)
 - a. Code A090 (Gastroenteritis and colitis of infectious origin)

When reported due to:

A000-B99 R75 Y431-Y434 Y632

Y842

I (a) Enteritis

A090

(b) Listeriosis

A329

Code I(a) gastroenteritis and colitis of infectious origin, A090, since enteritis is reported due to a condition classified to A329.

EXCEPTION: When the enteritis is reported due to another infectious condition or an organism classified to A49 or B34, refer to Section III, 6. Organisms and Infections.

b. Code K529 (Noninfective gastroenteritis and colitis, unspecified)

When reported due to:

C000-K929

L272

M000-N999

P000-R749

R760-Y430

Y435-Y631

Y633-Y841

Y843-Y899

I	(a)	Enteritis	K529
	(b)	Abscess of intestine	K630

Code I(a) noninfective gastroenteritis and colitis, unspecified, K529, since enteritis is reported due to a condition classified to K630.

I (a) **Colitis** A099

Code I(a) gastroenteritis and colitis of unspecified origin, A099, as indexed.

SECTION III Intent of Certifier

2. <u>Spinal Abscess (A180)</u> <u>Vetebral Abscess (A180)</u>

Code M462 (Nontuberculous spinal abscess)

When reported due to:

A400-A419	H650-H669	M910-M939
A500	H950-H959	M960-M969
A509	J00-J399	N10-N12
A527	J950-J959	N136
A539	K650-K659	N151
B200-B24	K910-K919	N159
B89	L00-L089	N288
B99	M000-M1990	N340-N343
C412	M320-M351	N390
C760	M359	N700-N768
C795	M420-M429	N990-N999
C810-C969	M45-M519	R75
D160-D169	M600	S000-T983
D480	M860-M889	
D550-D589	M894	

I (a) Spinal Abscess M462 (b) Staphylococcal septicemia A412

<u>Code</u> I(a) nontuberculous spinal abscess, M462, since spinal abscess is reported due to a condition classified to A412.

Part A

Neoplasms (C00-D48)

C80 Malignant neoplasm without specification of site

Cancer

Carcinoma

Malignancy

Malignant tumor or neoplasm

Any neoplasm cross-referenced as "See also Neoplasm, malignant"

I (a) Carcinoma of stomach

C169

<u>Code</u> the morphological type "Carcinoma" to Neoplasm, malignant, stomach as indexed.

I (a) Cancer prostate

C61

<u>Code</u> the morphological type "Cancer" to Neoplasm, malignant, prostate as indexed.

I (a) Adenosarcoma breast

C509

<u>Code</u> the morphological type "Adenosarcoma" to Neoplasm, malignant, of the specified site as cross-referenced.

C81-C96 Malignant neoplasms of lymphoid, hematopoietic, and related tissue

Leukemia Lymphoma

I (a) Lymphoma of brain

C859

<u>Code</u> Lymphoma NOS, C859, as indexed. Neoplasms in C81-C96 are coded by morphological type and not by site.

1. Neoplasms stated to be secondary

Categories C77-C79 include secondary neoplasms of specified sites regardless of the morphological type of the neoplasm. The Index contains a listing of secondary neoplasms of specified sites under "Neoplasm." Secondary neoplasms of specified sites without indication of the primary site require an additional code to identify the morphological type of neoplasm if the morphological type is classifiable to one of the following categories: C40, C41, C43, C44, C45, C46, C49, C70, C71, and C72.

I (a) Secondary melanoma of lung

C439 C780

Melanoma is classified to C43; therefore, when stated secondary of a site, code Melanoma, unspecified site and secondary neoplasm of the reported site.

Classification of Certain ICD Categories

Part A Neoplasms (C00-D48)

I (a) Secondary carcinoma of intestine

C785

The morphological type of the term "carcinoma" is C80; therefore, code a secondary neoplasm code only.

2. Malignant neoplasms with primary site indicated

NOTE: If two or more malignant neoplasms are indicated as primary, refer to instructions under 5. Independent (primary) sites.

- a. If a particular site is indicated as primary, it should be coded as primary and other neoplasms coded as secondary whether in Part I or Part II. The primary site may be indicated in one of the following ways:
 - (1) If two or more sites with the same morphology are reported, and one site is specified as primary in either Part I or II

I (a) Carcinoma of bladder C791
II Primary in kidney C64

<u>Code</u> carcinoma of bladder as secondary and code primary malignant neoplasm of kidney.

I (a) Primary cancer of lung C349
(b) Cancer of breast C798

<u>Code</u> primary malignant neoplasm of lung and code cancer of breast as secondary.

NOTE: This also applies when the same site is reported more than once and qualified as primary.

I (a) Met lung cancer C780 (b) Primary lung cancer C349

<u>Code</u> metastatic lung cancer on I(a) as secondary and code primary malignant cancer of lung on I(b).

Classification of Certain ICD Categories

Part A Neoplasms (C00-D48)

d. If the only thing reported is a site specific neoplasm and a malignant neoplasm of the same site, with or without metastases, code both as primary.

I	(a)	Hepatocellular cancer	C220
	(b)	Liver cancer	C229

Code both the hepatocellular cancer and liver cancer as primary.

I	(a)	Oat cell cancer	C349
	(b)	Lung cancer	C349

<u>Code</u> both the oat cell cancer and lung cancer as primary.

I (a) Liver cancer and hepatocellular carcinoma with mets C229 C220 C80

<u>Code</u> both the liver cancer and hepatocellular carcinoma as primary. Code metastases NOS as indexed.

Neoplasms (C00-D48)

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Part A Neoplasms (C00-D48)

- d. When "primary site unknown" or its equivalent appears on the certificate and a doubtful expression such as presumed or probably is reported qualifying a specific site(s), interpret the primary to be the site(s) following the doubtful qualifying expression and code as primary.
 - I (a) Cancer, unk primary, presumed lung C349

Code primary lung cancer.

10. Primary examples

- a. When a morphological type of C80, not qualified as metastatic, is reported with a site stated to be primary, code primary of the site.
 - I (a) Carcinoma, breast primary C509

Code primary malignant neoplasm of breast.

- b. When a morphological type of C80 is qualified as metastatic and reported with a site stated to be primary, code C80 and primary of the site.
 - I (a) Metastatic cancer (primary bladder) C80 C679

Code C80 and primary cancer of the bladder.

I (a) Mestastatic cancer probably breast primary C80 C509

Code C80 and primary cancer of the breast.

11. Implication of malignancy

Mention on the certificate that a neoplasm has produced metastases (secondaries) means it must be coded as malignant, even though this neoplasm without mention of metastases would be classified to some other section of Chapter II.

Code neoplasms indexed to D00-D09 (in situ neoplasms), D10-D36 (benign neoplasms), or D37-D48 (neoplasms of uncertain or unknown behavior) to a primary malignant neoplasm category in C00-C76 (whether or not on the list of common sites of metastases) if reported on the record with the following conditions:

a. Metastases NOS and metastases of a site

Part A Neoplasms (C00-D48)

I (a) Breast tumor with metastases

C509 C80

<u>Code</u> I(a) to primary malignant neoplasm of breast and code metastases NOS. Code breast tumor as malignant neoplasm of breast since it is reported with metastases NOS.

I (a) Brain metastasis C793 (b) Lung tumor C349

<u>Code</u> I(a) secondary neoplasm of brain and I(b) primary malignant neoplasm of lung since the lung tumor is reported with metastases of a site.

b. Any neoplasm indexed to C77-C79 in Volume III

I (a) Lymph node cancer C779 (b) Carcinoma in situ of breast C509

<u>Code</u> the carcinoma in situ of breast as primary malignant neoplasm of breast since it is reported with a neoplasm that is indexed to C779. Malignant neoplasm of lymph node is indexed to secondary neoplasm.

c. A common site of metastases (excluding lung) qualified by the word "metastatic"

I (a) Metastatic liver cancer C787 (b) Small intestine tumor C179

<u>Code</u> I(a) as secondary neoplasm of liver and code primary malignant neoplasm of small intestine on I(b), since the small intestine tumor is reported with a common site of metastases qualified by the word "metastatic."

d. If a, b, or c do not apply, code the neoplasm in D00-D09, D10-D36, D37-D48 as indexed.

12. Sites with prefixes or imprecise definitions

Neoplasms of sites prefixed by "peri," "para," "supra," "infra," etc. or described as in the "area" or "region" of a site, unless these terms are specifically indexed, should be coded as follows: for morphological types classifiable to one of the categories C40, C41, C43, C44, C45, C46, C47, C49, C70, C71, and C72, code to the appropriate subdivision of that category; otherwise, code to the appropriate subdivision of C76 (other and ill-defined sites).

C. Pregnancy, childbirth, and the puerperium (O00-O99)

1. General information

Conditions classifiable to categories O00-O99 are limited to deaths of females of childbearing age. Some of the <u>maternal conditions are also the cause of death in newborn infants</u>. Always refer to the age and sex of the decedent before coding a condition to O00-O99.

Obstetric deaths are classified according to time elapsed between the obstetric event and the death of the woman:

O95 Obstetric death of unspecified cause
O960-O969 Death from any obstetric cause occurring more than 42 days but less than one year after delivery
O970-O979 Death from sequela of obstetric causes (death occurring one year or more after delivery)

The standard certificate of death contains a separate item regarding pregnancy. Any positive response to one of the following items should be taken into consideration when coding pregnancy related deaths:

Pregnant at time of death
Not pregnant, but pregnant within 42 days of death
Not pregnant, but pregnant 43 days to 1 year before death

If the third option from the previous list is marked and the decedent is greater than 54 years old, code as pregnancy record only when there is a condition reported which indicates the person was pregnant either at the time of death or pregnant 43 days to 1 year before death.

Consider the pregnancy to have terminated 42 days or less prior to death unless a specific length of time is written in by the certifier. Take into consideration the length of time elapsed between pregnancy and death if reported as more than 42 days.

Maternal deaths are subdivided into two groups:

<u>Direct obstetric deaths (O00-O97)</u>: those resulting from obstetric complications of the pregnant state (pregnancy, labor and puerperium), from interventions, omissions, incorrect treatment, or from a chain of events resulting from any of the above.

<u>Indirect obstetric deaths (O98-O99)</u>: those resulting from previous existing disease or disease that developed during pregnancy and which was not due to direct obstetric causes, but which was aggravated by physiologic effects of pregnancy.

When coding pregnancies, code any direct obstetric cause to O00-O97 and any indirect obstetric cause to O98-O99.

- 2. Pregnancy or childbirth without mention of complication
 - a. Do not assign a separate code for "pregnancy" or "delivery" if any other condition is reported other than nature of injuries and external causes (S000-Y899).

Female, 39 years

Place I (a) Asphyxia by hanging T71 &X70

9 (b)

MOD II 1st trimester pregnancy O95

Suicide

<u>Code</u> I(a) to nature of injury and external cause. Code pregnancy in Part II to Pregnancy, death from (O95) since the only other reported condition is classified to a nature of injury and external cause.

- b. When pregnancy or delivery is the <u>only entry</u> on the certificate, apply the following instructions:
 - (1) Code to category O95 if death occurred 42 days or less after termination of pregnancy or when there is no indication of when the pregnancy terminated.

Female, 28 years
I (a) Pregnancy O95

<u>Code</u> "pregnancy" to Pregnancy, death from (O95) since it is the only entry on the certificate.

(2) Code to category O960-O969 if death resulted from direct or indirect obstetric causes that occurred more than 42 days but less than one year after termination of the pregnancy.

Female, 28 years
I (a) Childbirth 3 months O969

<u>Code</u> childbirth to death from any obstetric cause occurring more than 42 days but less than one year after delivery.

Standard Abbreviations and Symbols

When an abbreviation is reported on the certificate, refer to this list to determine what the abbreviation represents. **If an abbreviation represents more than one term, determine the correct abbreviation by using other information on the certificate.** If no determination can be made, use abbreviation for first term listed.

AAA	abdominal aortic aneurysm	AEG	air encephalogram
AAS	aortic arch syndrome	AF	auricular or atrial fibrillation; acid fast
AAT	alpha-antitrypsin	AFB	acid-fast bacillus
AAV	AIDS-associated virus	AGG	agammaglobulinemia
AB	abdomen; abortion; asthmatic bronchitis	AGL	acute granulocytic leukemia
ABD	abdomen	AGN	acute glomerulonephritis
ABE	acute bacterial endocarditis	AGS	adrenogenital syndrome
ABS	acute brain syndrome	AHA	acquired hemolytic anemia; autoimmune hemolytic anemia
ACA	adenocarcinoma	AHD	arteriosclerotic heart disease
ACD	arteriosclerotic coronary disease	AHHD	arteriosclerotic hypertensive heart disease
ACH	adrenal cortical hormone	AHG	
ACT	acute coronary thrombosis	ANG	anti-hemophilic globulin deficiency
ACTH	adrenocorticotrophic hormone	AHLE	acute hemorrhagic leukoencephalitis
ACVD	arteriosclerotic cardiovascular disease	AI	aortic insufficiency; additional information
ADEM	acute disseminated encephalomyelitis	AIDS	acquired immunodeficiency syndrome
ADH	antidiuretic hormone	AKA	above knee amputation
ADS	antibody deficiency syndrome		•
		AKI	acute kidney injury

ALC	alaahalism	A D N /I	antificial marture of
ALC	alcoholism	ARM	artificial rupture of membranes
ALL	acute lymphocytic leukemia	ARV	AIDS-related virus
ALS	amyotrophic lateral sclerosis	ARVD	arrhythmogenic right
AMA	advanced maternal age; against medical advice; antimitochondrial		ventricular dysplasia
	antibody(ies	AS	arteriosclerotic;
AMI	acute myocardial infarction		arteriosclerosis; aortic stenosis
AML	acute myelocytic leukemia	ASA	acetylsalicylic acid (aspirin)
ANS	arteriolonephrosclerosis	ASAD	arteriosclerotic artery disease
AOD	arterial occlusive disease	ASCAD	arteriosclerotic coronary
AODM	adult onset diabetes mellitus	ASCAD	artery disease
AOM	acute otitis media	ASCD	arteriosclerotic coronary disease
AP	angina pectoris; anterior and posterior repair; artificial	ASCHD	arteriosclerotic coronary
	pneumothorax; anterior pituitary		heart disease
A&P	anterior and posterior repair	ASCRD	arteriosclerotic cardiorenal disease
APC	auricular premature contraction; acetylsalicylic acid,	ASCVA	arteriosclerotic
	acetophenetidin, and caffeine		cerebrovascular accident
APE	acute pulmonary edema; anterior pituitary extract	ASCVD	arteriosclerotic cardiovascular disease
A DLI		ASCVR	
APH	antepartum hemorrhage	ASCVK	arteriosclerotic cardiovascular renal disease
AR	aortic regurgitation	ASCVRD	arteriosclerotic
ARC	AIDS-related complex		cardiovascular renal disease
ARDS	adult respiratory distress syndrome	ASD	atrial septal defect
ARF	acute respiratory failure, acute	ASDHD	arteriosclerotic decompensated heart disease
AIXI	renal failure		_
		380	2b January 2012 E-1

 LKS	liver, kidney, spleen	LVF	left ventricular failure
LL	lower lobe	LVH	left ventricular hypertrophy
LLL	left lower lobe	MAC	mycobacterium avium complex
LLQ	lower left quadrant	MAI	mycobacterium avium intracellulare
LMA	left mentoanterior (position of fetus)	MAL	malignant
LML	left middle lobe; left mesiolateral	MBAI	mycobacterium avium intracellulare
LMCAT	left middle cerebral artery thrombosis	MBD	minimal brain damage
LML	left mesiolateral;	MCA	metastatic cancer; middle cerebral artery
LMP	left mediolateral (episiotomy) last menstrual period; left	MD	muscular dystrophy; manic depressive; myocardial damage
	mento-posterior (position of fetus)	MDA	methylene dioxyamphetamine
LN	lupus nephritis	MEA	multiple endocrine adenomatosis
LOA	left occipitoanterior	MF	myocardial failure; myocardial
LOMCS	left otitis media chronic serous	MGN	fibrosis; mycosis fungoides membranous glomerulonephritis
LP	lumbar puncture	MHN	
LRI	lower respiratory infection		massive hepatic necrosis
LS	lumbosacral; lymphosarcoma	MI	myocardial infarction; mitral insufficiency
LSD	lysergic acid diethylamide	MPC	meperidine, promethazine, chlorpromazine
LSK	liver, spleen, kidney	MRS	-
LUL	left upper lobe		methicillin resistant staphylococcal
LUQ	left upper quadrant	MRSA	methicillin resistant staphylococcal aureus
LV	left ventricle	MRSAU	methicillin resistant staphylococcal aureus

	MS	multiple sclerosis; mitral	OA	osteoarthritis
	MCOE	stenosis	OAD	obstructive airway disease
	MSOF	multi-system organ failure	OB	obstetrical
	MT	malignant teratoma	OBS	organic brain syndrome
	MUA	myelogram	OBST	obstructive; obstetrical
	MVP	mitral valve prolapse	OD	overdose; oculus dexter (right eye); occupational disease
	MVR	mitral valve regurgitation; mitral valve replacement		
	NACD	no anatomical cause of death	OHD	organic heart disease
	NAFLD	nonalcoholic fatty liver disease	OLT	orthotopic liver transplant
		·	OM	otitis media
	NCA	neurocirculatory asthenia	OMI	old myocardial infarction
	NDI	nephrogenic diabetes insipidus	OMS	organic mental syndrome
	NEG	negative	ORIF	open reduction, internal fixation
	NFI	no further information	OS	oculus sinister (left eye);
	NFTD	normal full-term delivery		occipitosacral (fetal position)
	NG	nasogastric	OT	occupational therapy; old TB
	NH_3	symbol for ammonia	OU	oculus uterque (each eye); both eyes
	NIDD	non-insulin-dependent diabetes	PA	pernicious anemia; paralysis
	NIDDI	non-insulin-dependent diabetes		agitans; pulmonary artery; peripheral arteriosclerosis
	NIDDM	non-insulin-dependent diabetes mellitus	PAC	premature auricular contraction; phenacetin, aspirin, caffeine
	NSTEMI	non-ST-elevation myocardial infarction	PAF	paroxysmal auricular fibrillation
	N&V	nausea and vomiting	PAOD	peripheral arterial occlusive disease; peripheral arteriosclerosis occlusive
	NVD	nausea, vomiting, diarrhea		disease

PAP	primary atypical pneumonia	PIE	pulmonary interstitial emphysema
PAS	pulmonary artery stenosis	PIP	proximal interphalangeal joint
PAT	pregnancy at term; paroxysmal auricular tachycardia	PKU	phenylketonuria
Pb	chemical symbol for lead	PMD	progressive muscular dystrophy
PCD	polycystic disease	PMI	posterior myocardial infarction; point of maximum impulse
PCF	passive congestive failure	PML	progressive multifocal
PCP	pentachlorophenol; pneumocystis carinii pneumonia	11112	leukoencephalopathy
PCT	porphyria cutanea tarda	PN	pneumonia; periarteritis nodosa; pyelonephritis
PCV	polycythemia vera	PO	postoperative
PDA	patent ductus arteriosus	POC	product of conception
PE	pulmonary embolism; pleural effusion; pulmonary edema	POE	point (or portal) of entry
		POSS	possible; possibly
PEG	percutaneous endoscopic gastrostomy; pneumoencephalography	PP	postpartum
PEGT	percutaneous endoscopic gastrostomy tube	PPD	purified protein derivative test for tuberculosis
PET	pre-eclamptic toxemia	PPH	postpartum hemorrhage
PG	pregnant; prostaglandin	PPLO	pleuropneumonia-like organism
PGH	pituitary growth hormone	PPS	postpump syndrome
PH	past history; prostatic hypertrophy; pulmonary hypertension	PPT	precipitated; prolonged prothrombin time
PI	pulmonary infarction	PREM	prematurity
PID	pelvic inflammatory disease; prolapsed intervertebral disc	PROB	probably

PROM	premature rupture of membranes	PWMI	posterior wall myocardial infarction
PSVT	paroxysmal supraventricular tachycardia	PX	pneumothorax
PT	paroxysmal tachycardia; pneumothorax; prothrombin time	R	right
PTA	persistent truncus arteriosus	RA	rheumatoid arthritis; right atrium; right auricle
PTC	plasma thromboplastin component	RAAA	ruptured abdominal aortic aneurysm
PTCA	percutaneous transluminal coronary angioplasty	RAD	rheumatoid arthritis disease; radiation absorbed dose
PTLA	percutaneous transluminal laser angioplasty	RAI	radioactive iodine
PU	peptic ulcer	RBBB	right bundle branch block
PUD	peptic ulcer disease; pulmonary disease	RBC	red blood cells
DUIG		RCA	right coronary artery
PUO	pyrexia of unknown origin	RCS	reticulum cell sarcoma
P&V	pyloroplasty and vagotomy	RD	Raynaud's disease; respiratory
PVC	premature ventricular contraction	ILD	disease
PVD	peripheral vascular disease; pulmonary vascular disease	RDS	respiratory distress syndrome
D1 11	-	RE	regional enteritis
PVI	peripheral vascular insufficiency	REG	radioencephalogram
PVL	periventriclar leukomalacia	RESP	respiratory
PVT	paroxysmal ventricular tachycardia	RHD	rheumatic heart disease
PVS	premature ventricular systole (contraction)	KIID	meumane neart disease
PWI	posterior wall infarction		