

RENAL BIOPSY REQUEST FORM ABBREVIATIONS by Dr Candice Roufosse, Consultant Renal Pathologist Imperial College, Faculty of Medicine, Dept of Immunology and Inflammation, Centre for Inflammatory Disease. London		
ABBREVIATION	SIGNIFICANCE	COMMENT (N.B. normal ranges are indicative; refer to local lab reference levels)
+FC	positive flow cytometry	recipient has antibodies to donor HLA antigens detected using flow cytometry
+ve	positive	
+XM	positive cross match	recipient has antibodies to donor HLA antigens detected using complement dependent cytotoxicity cross match
µhaem	microhaematuria	
A	Serum albumin	
AAA	abdominal aortic aneurysm	
ABMR	antibody-mediated rejection (same as AMR)	
ABOi	blood group ABO incompatible transplant	donor and recipient are of different blood groups
ACE	angiotensin converting enzyme	elevated in sarcoidosis
ACEi	angiotensin converting enzyme inhibitor	e.g. captopril, enalapril, lisinopril, ramipril, ...
ACR	urinary albumin to creatinine ratio	
AKI	acute kidney injury (same as ARF)	rapid increase in creatinine
Alb	Serum albumin	NORMAL RANGE ~ 35-55 g/L
AMR	antibody-mediated rejection (same as ABMR)	
ANA	anti-nuclear antibodies	
ANCA	anti-neutrophil cytoplasm antibody	
ANCA	antineutrophil cytoplasmic antibody	
antiCD20	monoclonal anti-CD20 antibody	
antiCD52	anti-CD52 antibodies	e.g. campath, alemtuzumab
anti-IL2	anti-interleukin 2 receptor antibodies	e.g. daclizumab, basiliximab
antiPLA2R	antiphospholipase type 2 receptor antibodies	
APL	anti-phospholipid antibodies	
ARB	angiotensin receptor blockade	e.g. candesartan, irbesartan, losartan, ...
ARF	acute renal failure (same as AKI)	rapid increase in creatinine
ARVT	anti-retroviral therapy	
ATI	acute tubular injury	
AVF	arteriovenous fistula	complication of renal biopsy procedure; risk of subsequent haemorrhage
Aza	azathioprine	
Banff	Banff scoring system for transplant pathology findings	includes t (tubulitis), I (interstitial inflammation), v (vasculitis), g (glomerulitis), ptc (peritubular capillaritis), ct (tubular atrophy), ci (interstitial fibrosis), cg (transplant glomerulopathy), cv (arterial intimal thickening), ah (arteriolar hyalinosis)
BK	BK virus infection	
Bx	Biopsy	
C	Serum creatinine	C also used for complement, as in C3 or C4
C3	complement component 3	
C3 GN	C3 glomerulonephritis	
C4	complement component 4	
ca	carcinoma	
Cad Tx	cadaveric (deceased donor) transplant	same as DD
CAPD	continuous ambulatory peritoneal dialysis	
CH50	total haemolytic complement	
Chol	cholesterol	levels depend on cholesterol tested (Total, HDL, LDL)
CKD	chronic kidney disease (same as CRF)	progressive increase in creatinine
CMR	cell-mediated rejection (same as TCMR)	
CMV	cytomegalovirus	
CNI	calcineurin inhibitor	
Cr	Serum creatinine	
Creat	Serum creatinine	NORMAL RANGE: adult F up to ~100 µmol/L; adult M up to ~ 120 µmol/L
CRF	chronic renal failure (same as CKD)	progressive increase in creatinine
cryo	cryoglobulin	
CS	Churg Strauss syndrome	also known as eosinophilic polyangeitis
CS	cyclosporine	
CyA	cyclosporine	
cyclo	cyclosporine	
DBD	Donor-after brain death / heart-beating (subtype of DD)	
DCD	Donor-after cardiac death / non heart beating (subtype of DD)	same as NHB
DD	Deceased donor	same as Cad Tx
DES	drug eluting stent	used to treat TRAS
DGF	delayed graft function	graft not functioning in days/weeks following transplantation
dip	dipstick results	for protein and blood e.g. prot ++ blood +
DM	diabetes mellitus	
DM 1 and DM 2	type 1 and type 2 diabetes mellitus	
DSA	donor specific antibody	antibody in the recipient against the donor (usually anti-HLA or anti-blood type)
DSA	donor specific antibody	recipient has antibodies to donor HLA antigens
dsDNA	antibodies against double stranded DNA	
ECD	Extended criteria donor	refers donors > 60 or >50 with risk factors for renal disease

eGFR	estimated glomerular filtration rate	NORMAL RANGE: > 60 mL/min/1.73 m ²
Eo	eosinophils	
EPA	eosinophilic polyangeitis	also known as Churg Strauss syndrome
ESRF	end stage renal failure	
FH	Family history	
FK(506)	tacrolimus	
FSGS	focal and segmental glomerulosclerosis	
GFR	Glomerular filtration rate	short cut for eGFR
GN	glomerulonephritis	
GPA	granulomatous polyangeitis	also known as Wegener's granulomatosis
Hb	haemoglobin	
HbA1c	glycated haemoglobin	target value in diabetes <48 mmol/mol
HBV	hepatitis B virus	
HCV	hepatitis C virus	
HD	haemodialysis	
HLA	human leukocyte antigen	most common donor antigens to elicit the development of donor specific antibodies against the graft
HT	hypertension	
HTN	hypertension	
IADSA	intra-arterial digital subtraction angiography	used to investigate for TRAS
ICH	intracranial haemorrhage	
IFTA	interstitial fibrosis/tubular atrophy	
IgA	IgA nephropathy	
IHD	ischaemic heart disease	
Implantation	biopsy taken at or just after implantation of the donated organ	
Indication	biopsy taken for dysfunction of the graft	most often increase in creatinine or proteinuria
IVIG	intravenous immunoglobulin	
LCDD	light chain deposition disease	
LD	Live donor/living donation	
LN	lupus nephritis	LN class I-VI
LN	lupus nephritis	
LN	lymph node	
LRT/ LRTx	Live related transplant (subtype of LD)	
LRTI	lower respiratory tract infection	
Luminex	bead technology for detecting HLA antibodies in the serum	
LURT/ LURTx	Live unrelated transplant (subtype of LD)	
LUTS	lower urinary tract symptoms	
macrohaem	macrohaematuria	visible blood in urine
Mb	membranous glomerulopathy	
MCGN	mesangiocapillary glomerulonephritis	same as membranoproliferative glomerulonephritis; type I-III
microhaem	microhaematuria	blood in the urine without visible urine discoloration
MIDD	monoclonal immunoglobulin deposition disease	
Min ch	minimal change disease	
MM	multiple myeloma	
MM	mismatch	mismatch in HLA loci A,B and DR; min of 0, max of 2 mismatches per locus; total MM 0 to 6 (where 0 is best and 6 is worst); e.g. 1:1:0 signifies 1 mismatch in A, 1 mismatch in B and 0 mismatches in DR
MMF	mycophenolate mofetil	
mono	monotherapy	
MP	methylprednisolone	
MPA	microscopic polyangeitis	
MPGN	membranoproliferative glomerulonephritis	same as mesangiocapillary glomerulonephritis; type I-III
MPO	myeloperoxidase	subtype of ANCA
N	Normal	
Native	Biopsy of native kidney	
NHB	Donor-after cardiac death / non heart beating (subtype of DD)	same as DCD
No	nephrotic (syndrome)	haevy proteinuria with low serum albumin and oedema
NODAT	new onset diabetes after transplantation	
NSAIDS	non steroidal anti-inflammatory drugs	
P	prednisolone	
PCR	urinary protein to creatinine ratio	
PD	peritoneal dialysis	
Pex	plasma exchange	
PLA2R	phopholipase type 2 receptor	short-cut for anti-PLA2R
PLT	platelets	
PPI	proton pump inhibitors	e.g. omeprazole, lansoprazole, ...
PR3	proteinase 3	subtype of ANCA
Pred	prednisolone	
Preimplantion	biopsy taken just before implanting the donated organ	
PTLD	post-transplant lymphoproliferative disorder	
PUO	Pyrexia of unknown origin	
PUO	pyrexia of unknown origin	
RA	rheumatoid arthritis	
RAS	same as TRAS	
RCC	renal cell carcinoma	
RF	rheumatoid factor	present in rheumatoid arthritis and other autoimmune diseases
Ritux	rituximab (antiCD20)	
RTA	road traffic accident	
S	often stands for serum	

sAlb	Serum albumin	
sC	Serum creatinine	
SLE	systemic lupus erythematosus	
SPK	Simultaneous pancreas and kidney transplant	
Surveillance	biopsy taken from a graft with stable function	in order to detect subclinical events
T1DM and T2DM	type 1 and type 2 diabetes mellitus	
Tac	tacrolimus	
Tb	tuberculosis	
TBM	thin basement membrane disease	
TCMR	cell-mediated rejection (same as CMR)	
TIA	transient ischaemic attack (brain)	
Time zero	biopsy taken at or just after implantation of the donated organ	
TIN	tubulointerstitial nephritis	
Transplant	Biopsy of transplant kidney	
TRAS	transplant renal artery stenosis	restricts blood flow to transplant resulting in dysfunction
Tx	Transplant	
Tx	transplant(ation)	
Txp	Transplant	
type 1 and type 2 DM	type 1 and type 2 diabetes mellitus	
uACR	urinary albumin to creatinine ratio	Significant proteinuria >30 mg/mmol
UP	urinary protein	
uPCR	urinary protein to creatinine ratio	Significant proteinuria >50mg/mmol
USS	ultrasound scan	
UTI	urinary tract infection	
-ve	negative	
WBC	white blood cells	
WG	Wegener's granulomatosis	also known as granulomatous polyangeitis