

# Student Scope

## A Brief Review of Comma Usage

by Ellen Drake, CMT

Commas are the bane of many MTs. Fortunately for us (and everyone else), there are fewer rules for commas, and the use of commas is declining. For instance, when I was in school, we were taught to put a comma after every introductory expression. See today's rule (#3) below. Review the comma rules below and complete the exercise.

1. Use a comma before a coordinating conjunction (*and, but, for, nor, or, yet, so*) in compound sentences (two independent clauses). *Example:* The patient was discharged in improved condition, and he will follow up with me in one week. (Two subjects, two verbs.)
2. Use a comma after a conjunctive adverb or transitional phrase in a compound sentence joined by a semicolon. *Example:* The patient was discharged in improved condition; however, he is still quite disabled.
3. Use a comma after an introductory (a) clause (contains a verb), (b) phrase of more than 4 words, or (c) common introductory word like *yes, well, etc.*
4. Use a comma to separate 3 or more (a) nouns, (b) phrases, (c) adjectives of equal weight, or (d) clauses (known as elements or items in a series).
5. Use a comma to separate coordinate adjectives (adjectives of equal weight). *Example:* Gross examination revealed ratty, discolored tissue. *Note:* If the adjectives are cumulative (add to or build upon one another), adding to the description, and are not of equal weight, no comma would be used. *Example:* The dissection revealed a dark green muddy fluid behind the pancreas.
6. Use a comma to set off nonessential (nondefining, nonlimiting) (a) words, (b) phrases, (c) clauses, including (d) appositives. *Example:* Mrs. Johnson, whom you referred to me last week, cancelled her appointment and has not rescheduled. *But:* The patient whom you referred to me last week never showed up. (In this sentence, the *whom* clause is essential.)
7. Use a comma to set off words or phrases at the end of a sentence that refer back to beginning or middle of the sentence. *Example:* Blood work was obtained, which showed sodium 134, potassium 3.4, chloride 101. (Note that the results of the blood work are separated from the name of the test by a verb.)
8. Use a comma near the end of sentence to set off a contrasting element or indicate a distinct pause or shift. *Example:* Fungal cultures grew yeast, not thought to be *Candida albicans*.
9. Use a comma to set off an absolute phrase at the beginning or end of a sentence. An absolute phrase is one that modifies the entire sentence or one in which it is difficult to determine what is being modified. *Example:* All options being considered equal, the patient opted for surgery.
10. Use a comma in direct quotations to set off the quotation from the rest of the sentence.
11. Use a comma to set off (a) geographical names [city plus state or state/region plus country], (b) year in full dates, (c) titles or credentials, (d) direct address.
12. Use a comma to prevent confusion. *Example:* The patient came in, in acute distress.

### *Twelve simple rules summarizing most uses of the comma!*

Now, try this exercise. Place commas where they should be, according to the rules at the beginning.

1. Approximately a year and a half ago immediately concomitant with her radiation therapy she developed a persistent and intensely pruritic dermatitis at the radiation port on the midchest.
2. The scar is well healed and there is no evidence of local or deep recurrence.
3. NEUROLOGICAL: Oriented to time place and person with no gross deficit.
4. Bacterial cultures grew mixed flora including pseudomonas lactobacillus and group D streptococci.
5. He is showing more comedo formation and a higher proportion of pustular lesions than before and he now has a scattering of cysts over his upper back.

6. This patient returned today with a spreading rash on her shoulders upper chest and back which has been present for over the last couple of months.
7. His urticaria has not been present for longer than 3 months; therefore I have elected to treat him only with drug therapy.
8. Examination of the submental anterior and posterior lymph nodes was negative.
9. Since her last visit to my office I attempted to get her off steroids but she prefers the use of long-term every-other-day prednisone in an attempt to decrease her costs for other medications.
10. The patient recently moved from Indianapolis Indiana to Central Florida.
11. Thank you, Bob for asking me to see this patient and should she have no improvement I will keep you informed of the results of her endoscopy.
12. This is a 16-year-old patient whose last menstrual period was March 11 2004 nearly 7 months ago.
13. I cannot tell at this point how long this will last but it certainly could be several months or longer depending on his clinical course.
14. Physical exam is quite benign except that he is pale sweating restless and in considerable distress with tenderness at the left costovertebral angle and in the left upper quadrant over the kidney and ureter.
15. The patient's condition permitting we will discharge him in the morning.
16. He had 95 units of insulin the day prior to admission and I believe 80 units of combined NPH and regular insulin the day of admission.
17. In very rare cases these tumors have when uncontrolled resulted in a patient's death.
18. The patient had a total protein of 5.4 albumin level was 3.2 chloride was 106 and a total bilirubin was 1.2.
19. He is to take prednisone 40 mg q.a.m. for 3 days 20 mg for 3 days 10 mg for 3 days 5 mg for 3 days 2.5 mg for 4 days and then off.
20. It is noted however that the patient only used Loprox for about 3 months and no debridement was done.
21. He was seen evaluated in the office and had a panel drawn.
22. If at a future date the patient requires increasing dosage of NSAIDs her stools should be reexamined and if at any time they are positive I would proceed with gastroscopy.
23. Past traumas include a sprained wrist a torn knee cartilage on the left and an injury to her left eye during a shoe fight at school.
24. Dr. Anderson the surgeon of record has discharged the patient; when her attending signs off we can discharge the patient.
25. "I'm here for my third round of chemotherapy" explained the patient.

### Answers and Explanations

1. Approximately a year and a half ago,[3b] immediately concomitant with her radiation therapy,[6] she developed a persistent and intensely pruritic dermatitis at the radiation port on the midchest.
2. The scar is well healed,[1] and there is no evidence of local or deep recurrence.
3. NEUROLOGICAL: Oriented to time,[4a] place,[4a] and person,[7] with no gross deficit.
4. Bacterial cultures grew mixed flora including pseudomonas,[4a] lactobacillus,[4a, optional] and group D streptococci.
5. He is showing more comedo formation and a higher proportion of pustular lesions than before,[1] and he now has a scattering of cysts over his upper back.
6. This patient returned today with a spreading rash on her shoulders,[4a] upper chest,[4a, optional] and back,[7] which has been present for over the last couple of months. Note: The *which* phase modifies *rash*.
7. His urticaria has not been present for longer than 3 months; therefore,[2] I have elected to treat him only with drug therapy.
8. Examination of the submental,[4c] anterior,[4c, optional] and posterior lymph nodes was negative.
9. Since her last visit to my office,[3b] I attempted to get her off steroids,[1] but she prefers the use of long-term,[5] every-other-day prednisone in an attempt to decrease her costs for other medications.
10. The patient recently moved from Indianapolis,[11a] Indiana,[11a] to Central Florida.
11. Thank you, Bob,[11d] for asking me to see this patient,[1] and should she have no improvement,[3a] I will keep you informed of the results of her endoscopy.
12. This is a 16-year-old patient whose last menstrual period was March 11,[11b] 2004,[11b] nearly 7 months ago.
13. I cannot tell at this point how long this will last,[1] but it certainly could be several months or longer,[9] depending on his clinical course.

14. Physical exam is quite benign,[8] except that he is pale,[4c] sweating,[4c] restless,[4c, optional] and in considerable distress,[7 or 9] with tenderness at the left costovertebral angle and in the left upper quadrant over the kidney and ureter.
15. The patient's condition permitting,[9] we will discharge him in the morning.
16. He had 95 units of insulin the day prior to admission and,[6c] I believe,[6c] 80 units of combined NPH and regular insulin the day of admission.
17. In very rare cases,[3b] these tumors have,[6b] when uncontrolled,[6b] resulted in a patient's death. *Note:* Although the introductory phrase is only 4 words, using a comma adds emphasis to the phrase and is probably appropriate here.
18. The patient had a total protein of 5.4,[4d] albumin level was 3.2,[4d] chloride was 106,[4d, optional] and a total bilirubin was 1.2.
19. He is to take prednisone 40 mg q.a.m. for 3 days,[4b] 20 mg for 3 days,[4b] 10 mg for 3 days,[4b] 5 mg for 3 days,[4b] 2.5 mg for 4 days,[4b or 8] and then off. *Note:* I would not omit the final comma in this series.
20. It is noted,[6a] however,[6a] that the patient only used Loprox for about 3 months,[1] and *no debridement was done*. *Note:* It's a toss-up here whether the clause no debridement was done goes with the word *that* and is part of the object of the verb *noted* [It is noted that ... no debridement was done.] or whether it is an independent clause, part of a compound sentence. I chose to treat it as an independent clause. Also note that it is unclear whether the word *only* modifies *used* (took no other measures), *Loprox* (only Loprox and nothing else), or *for about 3 months* (only for about 3 months). Unless there were other clues as to what the doctor meant, you have no choice but to leave *only* where it is.
21. He was seen,[4d] evaluated in the office,[4d, optional] and had a panel drawn.
22. If at a future date the patient requires increasing dosage of NSAIDs,[3a] her stools should be reexamined,[;] [1] and if at any time they are positive,[3a] I would proceed with gastroscopy. *Note:* The prepositional phrases (*at a future date* and *at any time*) in each of the introductory clauses are nonessential, but to set them off with commas would really clutter things up, and they're not that interruptive. Also, many would substitute a semicolon for the comma separating the independent clauses.
23. Past traumas include a sprained wrist,[4b] a torn knee cartilage on the left,[4b] and an injury to her left eye during a shoe fight at school.
24. Dr. Anderson,[6d] the surgeon of record,[6d] has discharged the patient; when her attending signs off,[3a] we can discharge the patient.
25. "I'm here for my third round of chemotherapy,"[9] explained the patient.

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