

User Release Notes

for eRAD RIS
Version 1
Build 40

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1. Purpose

This document describes some of the new features and changes implemented in eRAD RIS as of the end of Sprint 39. This version of eRAD RIS is referred to as Build 1.3.40.

Only features which can be visually demonstrated to the user will be outlined in this document.

2. Intended Audience

This document is created by the RIS Development team for the RadNet RIS management team.

3. Installing/Accessing the Application

The installation guide for the eRAD RIS client have been posted to the RadNet Wiki page at <http://mdbal01rdtweb/Wiki/>

Under the RIS menu click on the rRIS page. The credentials to access the page are:

Username: rRIS

Password: Summerside

Please note that Build 1.40 is considered a new core release of the application and will require a reinstallation of eRAD RIS. This is accomplished by navigating to the eRAD RIS shared installation drive and running the CoreInstall.bat file (ex: I:\RISDeployment\CoreInstall.bat)

If you experience difficulties accessing the application please do not hesitate to contact Darcy Noye with the PEI RIS Development Team.

4. New Access Strings and Configuration Settings

Setting Placeholder	Setting	Default	Purpose / Controls Access to
Access string / User Group Permission tables	Clinical.Rad.AssignToRadiologistDropDown	Full	Controls access to the Assign To – Radiologist list box in reporting window
Access string / User Group Permission tables	Config.LookupEditor.ReferringPractice	None	Controls access to the Referring Practice lookup table
Access string / User Group Permission tables	Clinical.ManuallyResolveMammoFollowUp	Full	Controls access to the window that is displayed to select a reason when Follow Up Resolved check box is selected
Access string / User Group Permission tables	Clinical.Schedule.AssignRadiologist	Full	Controls access to the Assign Radiologist feature in the New Appointment and Registration windows
Access string / User Group Permission tables	Clinical.ReadPreCertNotes	Full	Allow the user to read preCert and verification notes on non-IVT screens
SystemConfig lookup	MaxWorklistItem	500	Value will be the max number of rows to display on a work list
Ris.exe.config	<p>BEFORE:</p> <pre><startup> <supportedRuntime version="v4.0" sku=".NETFramework,Version=v4.0" /> </startup></pre> <p>AFTER:</p> <pre><startup useLegacyV2RuntimeActivationPolicy="true"> <supportedRuntime version="v4.0" sku=".NETFramework,Version=v4.0" /> </startup></pre>	N/A	<p>Addition to start up added for sites that will be using PACS IW Integration.</p> <p>(useLegacyV2RuntimeActivationPolicy="true")</p>

5. New Features and Enhancements

Reporting – Auto rewind functionality on play back

The auto rewind functionality has been added for transcription users. This is controlled by a new user preference “Rewind <value> seconds on play-back. The default is 0 with a maximum of 10.

The screenshot shows the 'User Preferences' dialog box with the 'Input Device' tab selected. The 'Audio Control' section at the bottom left contains a slider for 'Rewind / fast forward speed' set to 5. Below the slider are two checkboxes: 'Enable rewind / fast forward play-back' and 'Resume play-back after rewinding', both of which are unchecked. At the bottom of the 'Audio Control' section, the 'Rewind 0 seconds on play-back' preference is highlighted with a red rectangle. The 'SpeechMike™ Button Actions' section on the left lists various buttons (F1-F4, EOL, Instr, Trigger, RWD, FWD) with their corresponding actions. The 'Foot Pedal Actions' section on the right shows 'No supported devices connected.' with a 'Get from device' button. The 'Keyboard Button Actions' section shows 'Arrow Left' and 'Arrow Right' both set to 'Nothing'. The 'Barcode Reader Action' section shows 'Mode' set to 'Keyboard text' and 'Action' set to 'PatientSearchOnMrnNumber'.

Figure 5.1 – New user preference to set rewind play-back in seconds

The new preference is located on the input device tab under Audio Control section.

Reporting – Resume play-back after rewinding

A new user preference “Resume play-back after rewinding” has been added on the input device tab under Audio Control section.

The screenshot shows the 'User Preferences' dialog box with the 'Input Device' tab selected. The 'Audio Control' section is expanded, showing a slider for 'Rewind / fast forward speed' set to 5. Below the slider, there are two checkboxes: 'Enable rewind / fast forward play-back' and 'Resume play-back after rewinding'. The 'Resume play-back after rewinding' checkbox is highlighted with a red box. Below these checkboxes is a 'Rewind' field set to 0 seconds on play-back. The 'SpeechMike™ Button Actions' section on the left lists various buttons (F1, F2, F3, F4, EOL, Instr, Trigger, RWD, FWD) and their corresponding actions. The 'Foot Pedal Actions' section on the right shows 'No supported devices connected.' and a 'Get from device' button. The 'Keyboard Button Actions' section shows 'Arrow Left' and 'Arrow Right' both set to 'Nothing'. The 'Barcode Reader Action' section shows 'Mode' set to 'Keyboard text' and 'Action' set to 'PatientSearchOnMrnNumber'.

Figure 5.2 – New user preference “Resume play-back after rewinding”

When enabled (checkbox selected), if the transcription user rewinds a part or all of the dictation, it will automatically begin play back. When disabled it will behave as before and the user will need to initiate the play back.

Reporting – Save notes in problem work flow

Studies that are on the problem work list could not have notes added without resolving the problem, which would remove the study from the Problem work list. To fix this issue, the resolve button has a drop list addition with a new option to “Save notes only”. The notes field displays in a similar fashion to other notes fields within the applications (Ex: patient notes). The date stamp and users last name first initial are displayed for the notes being added. Additionally historical notes will display with the date stamp and user who entered the comment.

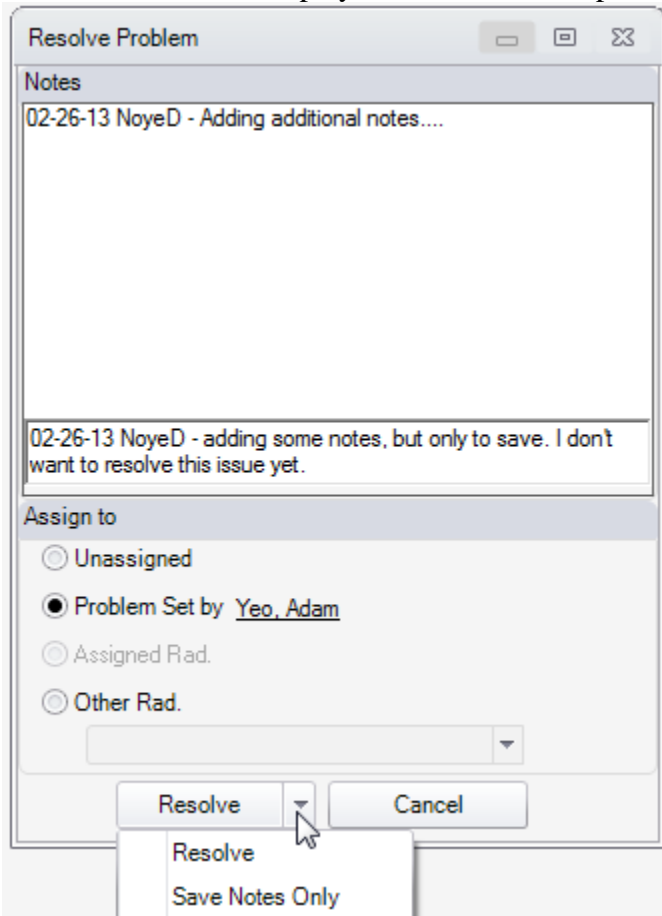


Figure 5.3 – Displaying new option to “Save notes only” for studies on problem work list.

Select the Save Notes Only option will close the Resolve Problem window and return the user to the work list and the study will remain on the Problem work list

Reporting – Open at end of dictation

In previous builds of eRAD RIS, if a batch dictation user re-opened a study to add additional dictation, the window would open at the start of the dictation. The user would need to go the end of the dictation manually.

For batch dictation users a user preference “Open at the end of dictation (non interactive only)” has been added to allow them set if the dictate window opens at the start or end for studies that already have a dictation.

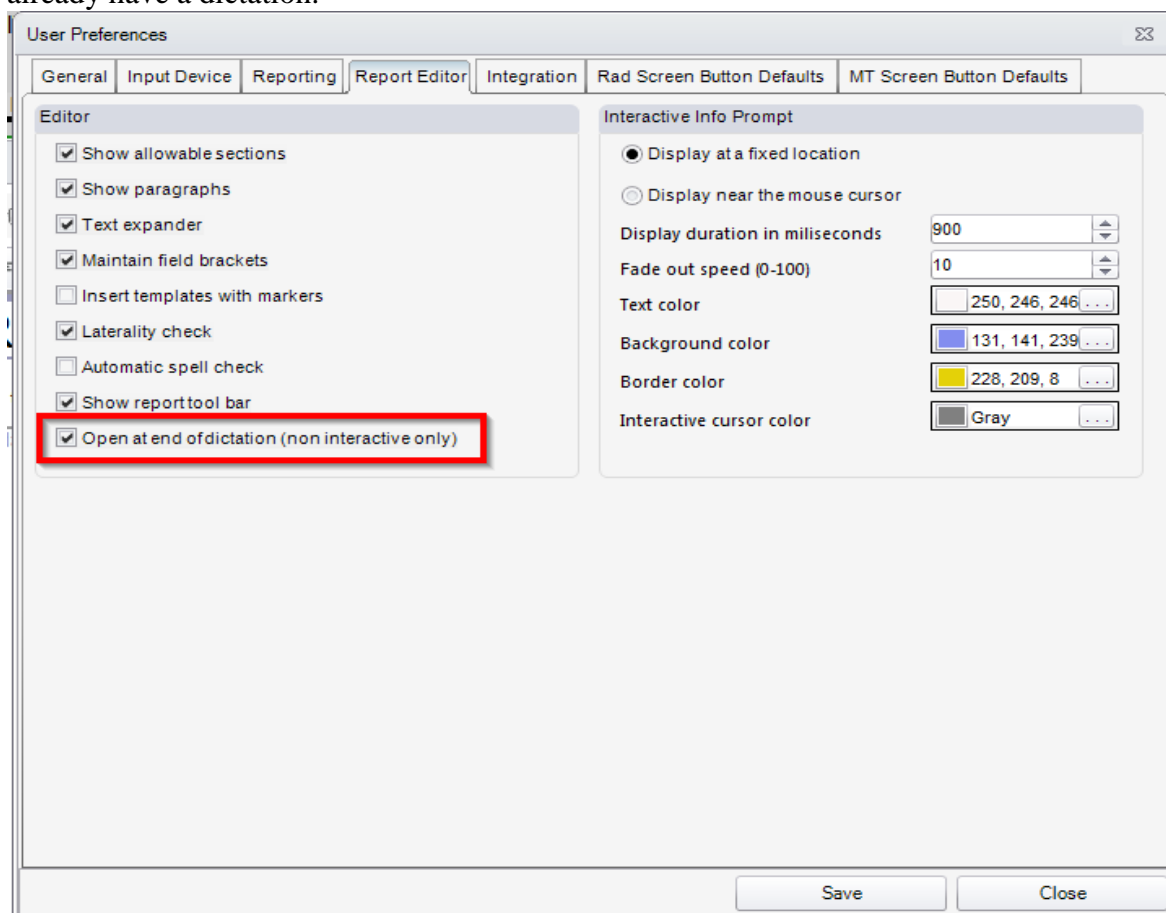


Figure 5.4 – New user preference “Open at end of dictation (non interactive only)”

When this preference is enabled (checkbox selected) when a study that already has a dictation recorded via batch mode is opened in the dictate window, it will be defaulted to the end of the dictation. If disabled it works as before and will open at the start of the dictation.

Assign to Radiologist permission

Within the reporting window, we have a data pane “Assign To”. In the “Assign To” data pane there is a list box to assign to a particular radiologist. This field was available to all user groups. To control access, the access string “**Clinical.Rad.AssignToRadiologistDropDown**” has been added in this build to restrict who can use this field.

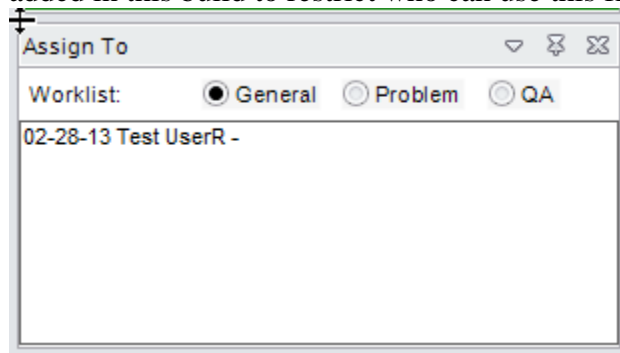


Figure 5.5 – Clinical.Rad.AssignToRadiologistDropDown = none

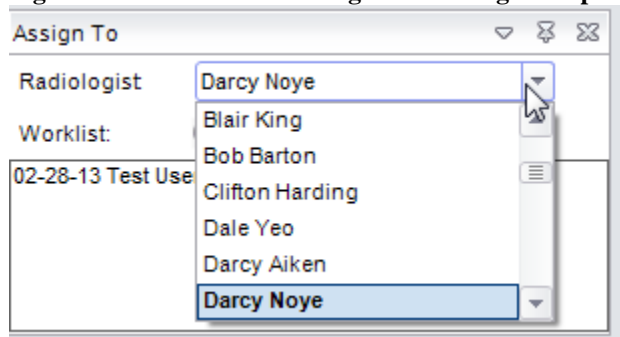


Figure 5.6 – Clinical.Rad.AssignToRadiologistDropDown = full

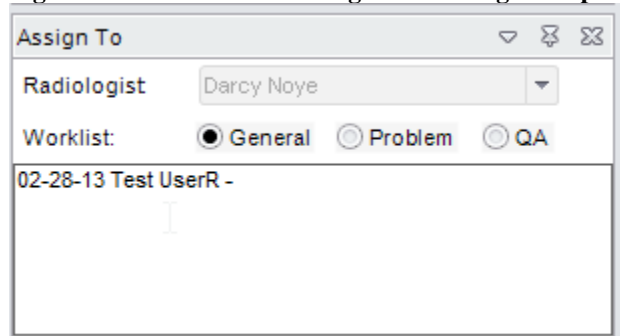


Figure 5.7 – Clinical.Rad.AssignToRadiologistDropDown = read only / disabled

Scheduling – Existing orders prompt

When creating a new appointment or walk in schedule, the patient name is entered into the first / last name fields and a search is performed. If the patient entered is an existing patient with orders or short term follow orders, the user will be prompted with the “Existing Orders” window. The “Existing Orders” window allows the user to select a pre-existing order to schedule instead of continuing with the current new appointment.

The user also has the option to select multiple existing orders to schedule instead of the current new appointment, or the user can choose to continue creating the new appointment with the current and add additional existing orders to be scheduled.

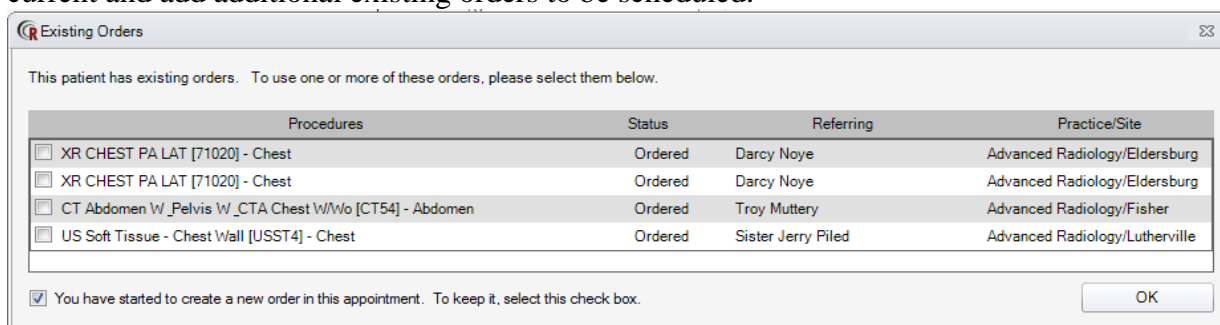


Figure 5.8 – Existing orders window

The “You have started to create a new order...” check box is selected by default when the window opens. If this is unchecked, the initial order will be destroyed, but to close (select OK button) the Existing Order window a one of an existing order or the current order must be selected.

If the new appointment window is opened from the patient folder, we assume that you want to create a new order / schedule. The Existing Orders window is still presented but the option to exclude the current new appointment is not available.

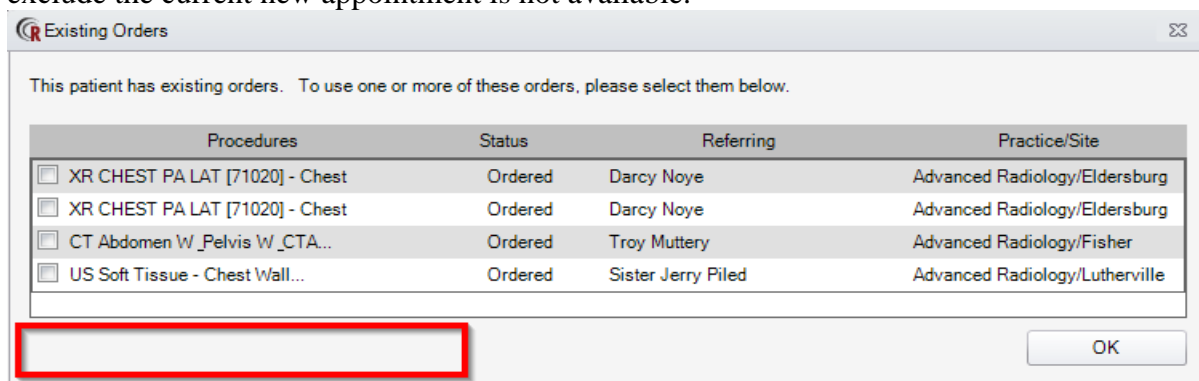


Figure 5.9 – Existing Orders window presented from patient folder.

Registration – IVT Info Provided

The registration window now displays a read only PreCert status. The column was added to the existing billing code grid on the Exam tab.

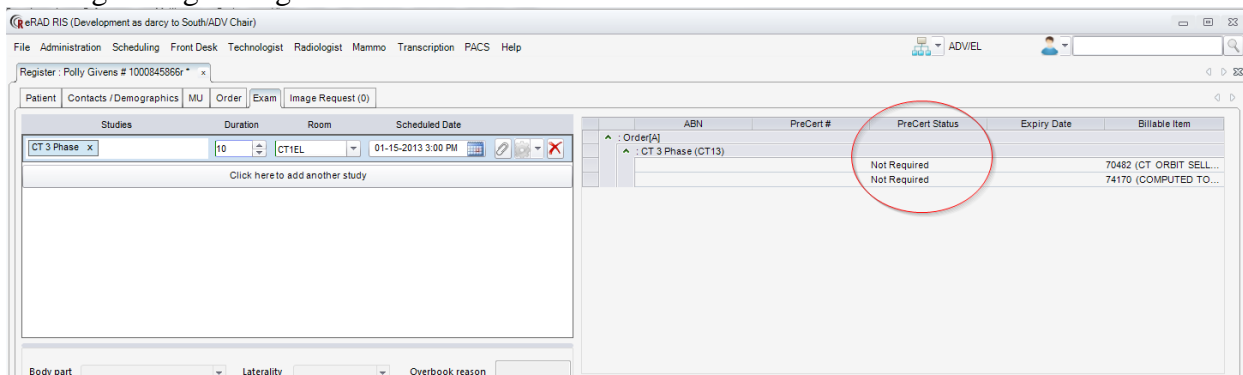


Figure 5.10 – PreCert status in registration

An IVT Notes button was added to the Insurance Policies Grid. The expected behavior of the button is as follows:

1. If the parent screen is IVT, the button should be invisible
2. If the current exam(s) do not have notes, the IVT Notes button is disabled
3. If the user does not have permissions (**Clinical.ReadPreCertNotes**) to see IVT Notes, the button is disabled
4. If there is only one open order, display the notes on a pop-up window
5. If there are two open orders (e.g. Order[A], Order[B]), show “Order[A]” and “Order[B]” with the notes for each grouped under a header.
6. The IVT Notes button should be disabled when scheduling a new order.

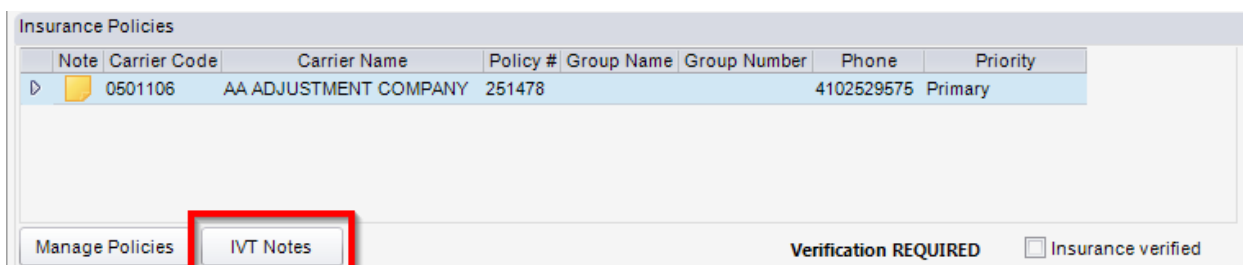


Figure 5.11 – IVT button to display notes added. This button is available from registration and view/edit

If the patient only has one study for the day, or if the patient has multiple studies for the day and the user chose to arrive only one of the studies in the registration window, the notes window opens with the notes associated with that study.

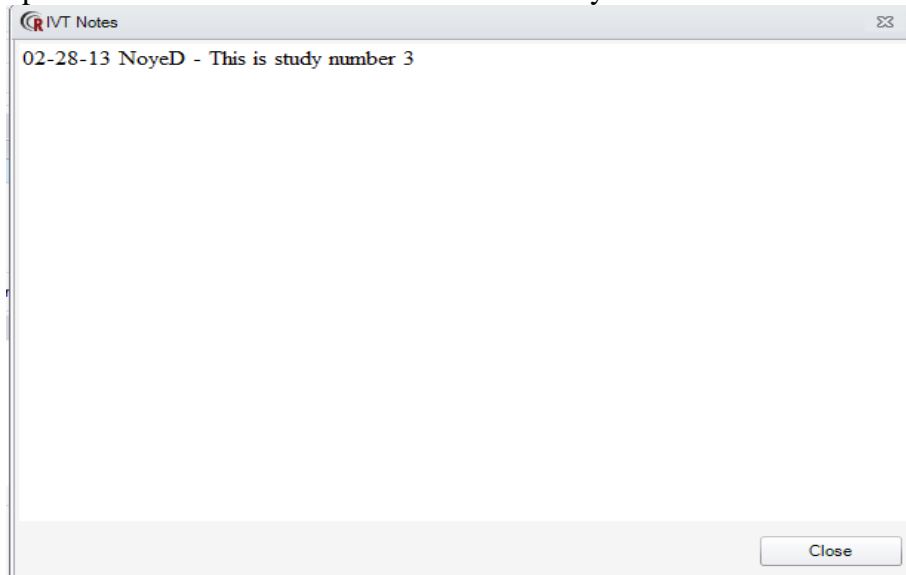


Figure 5.12 – IVT note accessed from registration on one study

If the patient has multiple studies and the user chooses to arrive multiple, the IVT notes will display for each study in the same notes window.

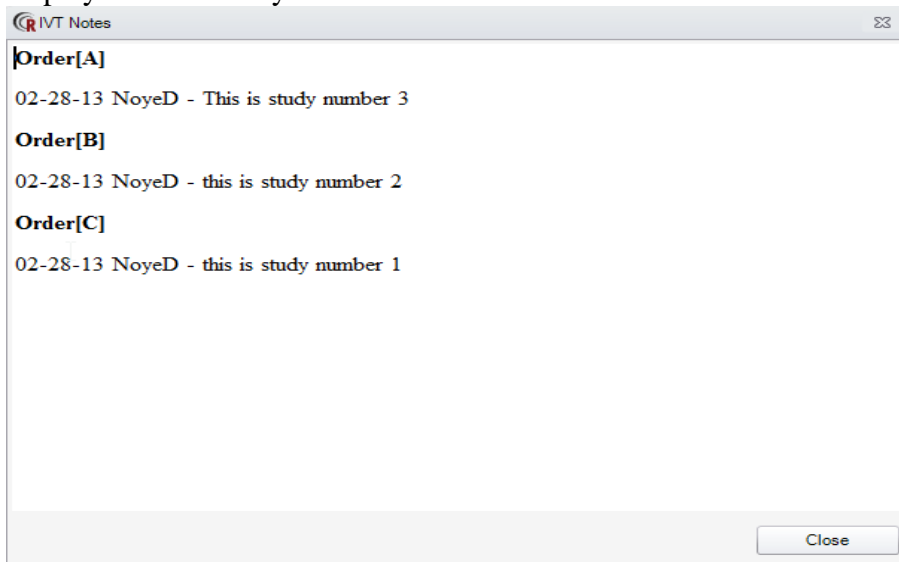


Figure 5.13 – Notes displayed for multiple studies opened in registration window

The perform exam window (tech window) also displays a read only version of the Verification and PreCert Notes field. This display only notes field is located on the Billing Codes tab.

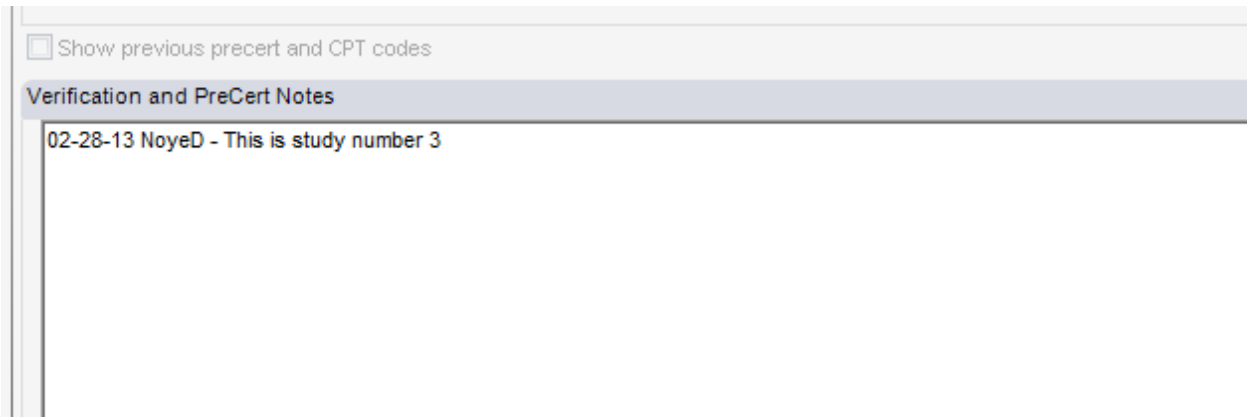


Figure 5.14 – IVT notes on the Billing Codes tab of the Perform Exam window.

Unknown CC Physician

Users of eRAD RIS have always had the ability to add the referring physician as an “Unknown Referring Physician” when the referrer was not already known, and /or the details for referrer are not completely known at the time of entering the order.

In build 40, this has been extended to the CC Physician field. Unknown CC Physicians are added in the same manner as the unknown referrer. If the physician entered in the CC Physician field is not found in a search the user can select the “Add Unknown” button in the search window.

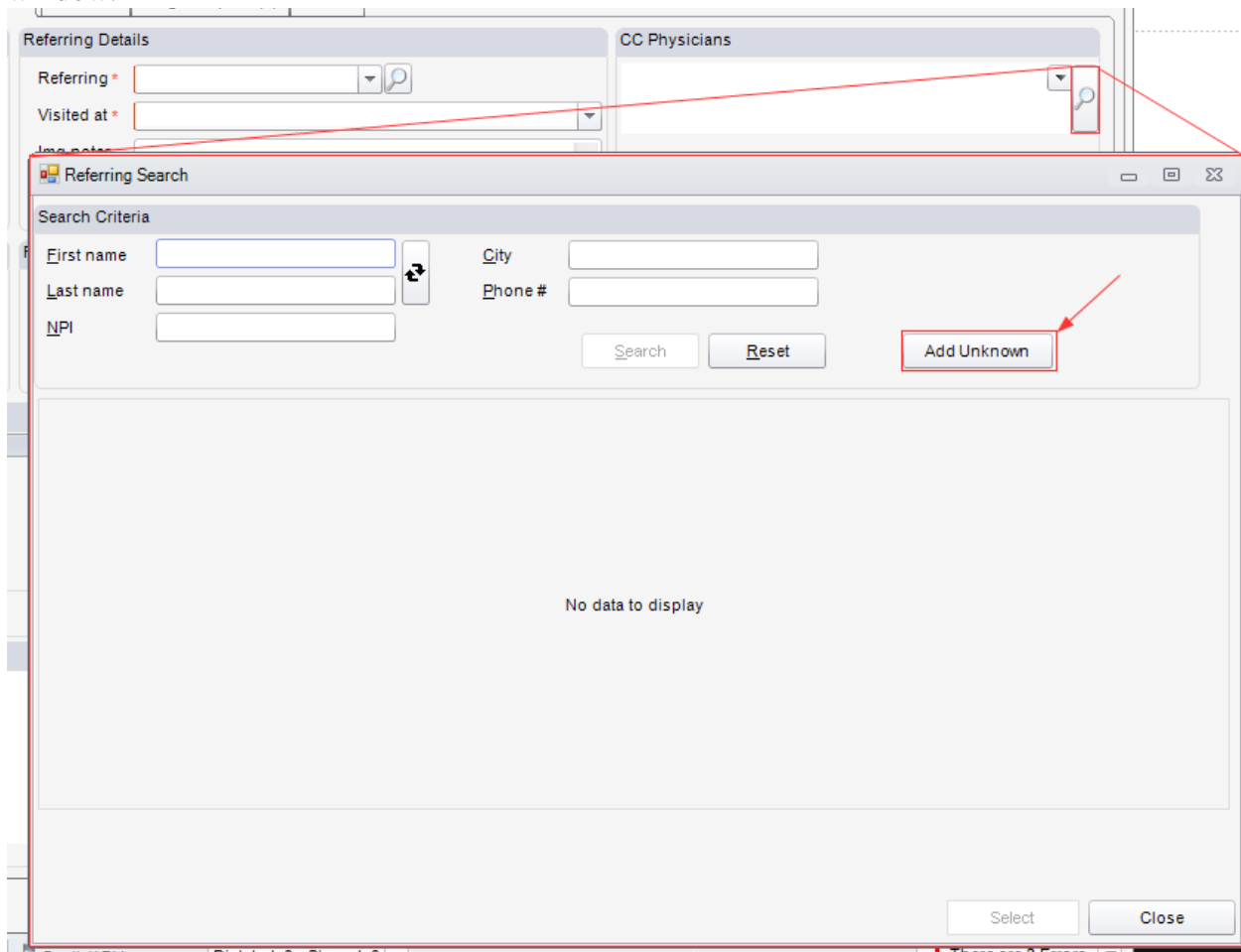


Figure 5.15 – Add unknown CC Physician.

Selecting the Add Unknown button in the Referring Search window that is opened will open the personnel editor (with limited functionality). The Physicians first and last name, gender and D.O.B are required. The Unknown Referring flag is auto selected.

Once the study in which the Unknown CC Physician is being added to is saved, a row is added to the Unknown Reconciliation work list. The Unknown CC Physician can be reconciled from this work list and also from other data windows such as the Schedule/Reschedule window, Registration window, View/Edit window, etc... by a right click on the CC Physician name and selecting Reconcile Unknown Referring

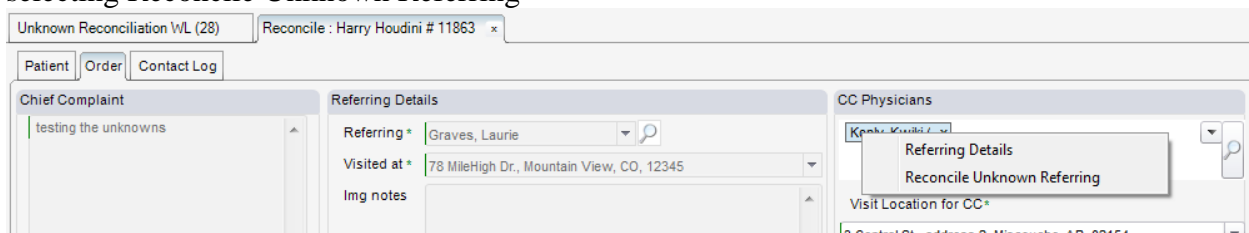


Figure 5.16 – Reconcile unknown CC Physician

NOTE: A limitation of this release. When a Unknown CC Physician is added, the row added to the Unknown Reconciliation work list will have the Referring Physician displayed in the under the referring column instead of the Unknown CC. The flag on the Unknown Reconciliation work list is added to the Unknown Referring column to indicate the purpose for the row being added to the work list

Expired Insurance and Inactive Carrier Warnings

Two new alerts have been added in build 40. eRAD RIS can be configured to inform the user if the patient insurance has expired or the insurance carrier is inactive in the RIS.

An expired insurance carrier may arise if the patient has an active order or scheduled appointment with insurance A assigned to the study. Another order or study is created and the patient informs that insurance carrier A has expired, and they now use insurance carrier B. Now when the first study is worked on (scheduled, registered, etc...) it will inform the user by a message prompt.

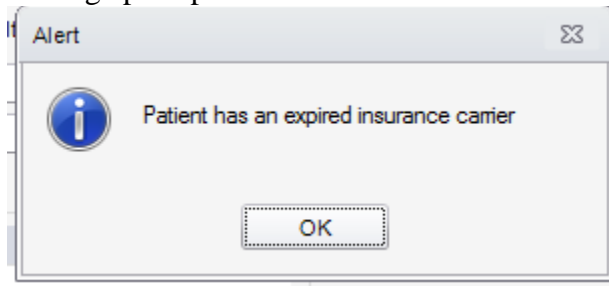


Figure 5.17 – Expired insurance alert

Also an Insurance Carrier may be set to inactive in the Carrier lookup table with patients active studies assigned to this carrier. Accessing this study in schedule, reschedule, registration, view / edit, etc... they will be prompted that an inactive carrier is selected

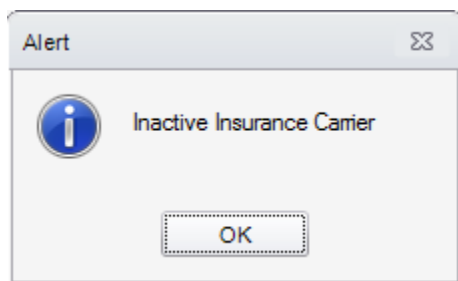
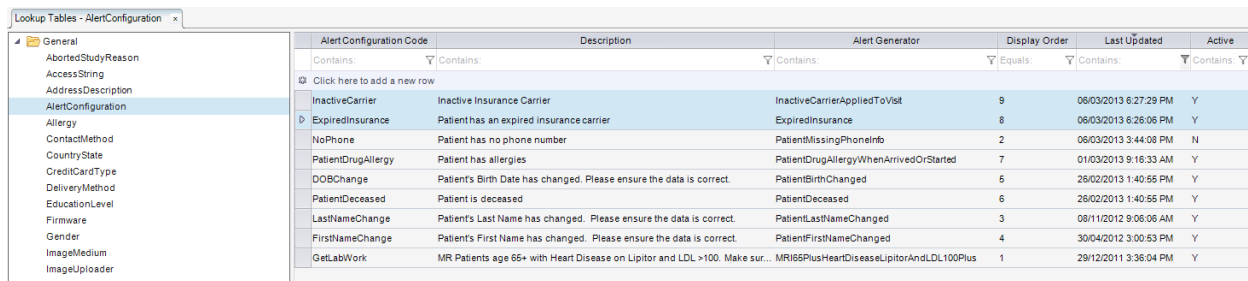


Figure 5.18 – Inactive carrier alert

The alerts are added / activated in the AlertConfiguration lookup editor. The messages that prompt the user are configurable, as what is entered in the Description field of the alert. To add the alert, open the AlertConfiguration lookup table. Add an Alert Configuration Code. The message you want the user to see is entered in the Description field. The Alert Generators column is a list box that will contain all of the possible systems alerts. To add expired insurance, select ExpiredInsurance, and the inactive carrier alert you must select InactiveCarrierAppliedToVisit.



Alert Configuration Code	Description	Alert Generator	Display Order	Last Updated	Active
InactiveCarrier	Inactive Insurance Carrier	InactiveCarrierAppliedToVisit	9	06/03/2013 6:27:29 PM	Y
ExpiredInsurance	Patient has an expired insurance carrier	ExpiredInsurance	8	06/03/2013 6:26:06 PM	Y
NoPhone	Patient has no phone number	PatientMissingPhoneInfo	2	06/03/2013 3:44:08 PM	N
PatientDrugAllergy	Patient has allergies	PatientDrugAllergyWhenArrivedOrStarted	7	01/03/2013 9:16:33 AM	Y
DOBChange	Patient's Birth Date has changed. Please ensure the data is correct.	PatientBirthChanged	5	28/02/2013 1:40:55 PM	Y
PatientDeceased	Patient is deceased	PatientDeceased	6	28/02/2013 1:40:55 PM	Y
LastNameChange	Patient's Last Name has changed. Please ensure the data is correct.	PatientLastNameChanged	3	08/11/2012 9:06:06 AM	Y
FirstNameChange	Patient's First Name has changed. Please ensure the data is correct.	PatientFirstNameChanged	4	30/04/2012 3:00:53 PM	Y
GetLabWork	MR Patients age 66+ with Heart Disease on Lipitor and LDL >100. Make sur...	MRI65PlusHeartDiseaseLipitorAndLDL100Plus	1	29/12/2011 3:36:04 PM	Y

Figure 5.19 – AlertConfiguration lookup displaying new alert codes

Assign Radiologist at Scheduling / Registration

Before build 40 the radiologist could only be assigned in the Perform Exam window before the study was in a status before exam done. Once in exam done status a radiologist could be assigned in various reporting windows, and also from radiologists work lists context menu as well as the Patient Folder work list as long as the study was in at least a status of exam done.

Now in the New Appointment and Registration windows the Radiologist can be assigned to the study. On the procedure picker row a next to the Attachment button is an expandable list.

The screenshot shows the 'New Appointment and Registration' window. At the top, there's a 'Reception WL (14)' button and a 'Register : Fred James # 13820 *' field. Below these are tabs for 'Patient', 'Contacts / Demographics', 'MU', 'Order', 'Exam', and 'Image Request (0)'. The 'Exam' tab is active, showing a table with columns: 'Studies', 'Duration', 'Room', and 'Scheduled Date'. The first row contains 'CT 3 Phase x', '60', 'CT1EL', and '03-06-2013 4:55 PM'. To the right of the 'Scheduled Date' column is an 'Assign to Radiologist' button. Below the table is a link that says 'Click here to add another study'.

Figure 5.20 – Assign Rad from new appointment / registration windows

Selecting the Assign to Radiologist will open a window of the same name. The list of available Radiologists is populated when the “Studies” and “Room” fields are populated.

The screenshot shows the 'Assign to Radiologist' dialog box. It has a title bar with the text 'Assign to Radiologist' and a close button. Inside, there's a list of radiologists. The first item is '(unassigned)'. Below it are several names: Adam Doucette, adam radtest, Adam Radtest, adam radtest2, Adam Yeo, Andrew Waite, aszdfasdf stuart, Blair King, Bob Barton, Clifton Harding, Dale Yeo (which is highlighted), Darcy Aiken, and Darcy Nove. At the bottom of the dialog are two buttons: 'Assign' and 'Cancel'.

Figure 5.21 – Assign to Radiologist window

Access is controlled by the new access string “**Clinical.Schedule.AssignRadiologist**”

Assign Radiologist in New Outside Read

When creating an Outside Read users can now assign a Radiologist within the New Outside Read window.

The field becomes enabled when the procedure is added to the Studies list. The list of available Radiologists is based on the procedure and modality type selected.

The screenshot shows the 'New Outside Read' window with the 'Order' tab selected. The 'Studies' list contains 'CT Chest W Abdomen W'. The 'Body part' is set to 'Chest', 'Modality type' is 'CT', and 'Exam date' is 'mm-dd-yyyy'. The 'Assigned radiologist' dropdown menu is open, showing a list of radiologists: 'MacDougall, Spencer', 'Mills, Terry', 'Harding, Clifton', 'John, Harry', 'Noye, Darcy', 'Graves, Laurie', and 'Bass, Doug'. The 'Assigned radiologist' field is highlighted with a red box.

Figure 5.22 – Assigned radiologist field in New Outside Read window

Similar to the Assigned Radiologist field in the Perform Exam window, if the Referring selected has preferred radiologist(s) defined, that radiologist(s) name will be prefixed with “Preferred:” If the referring is selected before a value is chosen in the Assigned Radiologist field, and that referring has a preferred radiologist, the Assigned Radiologist field will be auto populated with the preferred radiologist. If the referring has multiple preferred radiologists, the preferred radiologist will not be selected.

Scheduling – Retain Attachments on Reschedule

In previous versions of eRAD RIS, when an scheduled study that has exam level attachments was rescheduled, the RIS was not carrying those scans over to the rescheduled study.

Going forward, when a study is being rescheduled all documents that are associated at the exam level to that study and are of the appropriate scan type, we will create a new association for the newly created study that will be scheduled.

If the study has documents attached at the exam level and at the time of rescheduling the option to schedule later is selected, the RIS will prompt the user to store the attachments at the patient level.

Patient Allergy Notifications

If a patient has allergies, the users of the RIS should be aware. In build 40 we have added two notifications for patient allergies.

The first is a new flag. If the patient has an allergy added to the Allergies grid under the MU tab, when the study is saved, the flags column on the work lists will be updated to include the new icon 🚩. This ICON is added regardless of the allergy selected, it is not limited to only drug allergies.

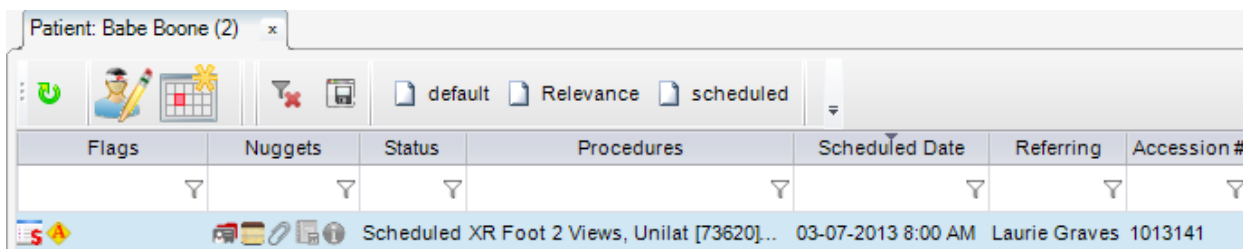


Figure 5.23 – Patient Folder work list display allergy flag

The second is a new alert that will prompt the user when the Technologist opens the study is Perform Exam data window. Again regardless if the allergy is drug related, the user will see the alert in the form of a pop up window.

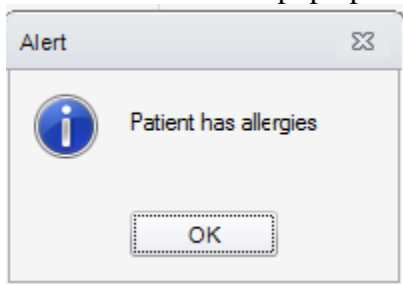


Figure 5.24 – Allergy alert

Lookup Tables - AlertConfiguration		Alert Configuration Code	Description	Alert Generator	Display Order	Last Updated	Active
General		Contains:	Contains:	Contains:	Equals:	Contains:	Contains:
AbortedStudyReason		Click here to add a new row					
AccessString		InactiveCarrier	Inactive Insurance Carrier	InactiveCarrierAppliedToVisit	9	06/03/2013 6:2...	Y
AddressDescription		ExpiredInsurance	Patient has an expired insurance carrier	ExpiredInsurance	8	06/03/2013 6:2...	Y
AlertConfiguration		NoPhone	Patient has no phone number	PatientMissingPhoneInfo	2	06/03/2013 3:4...	N
Allergy		PatientDrugAllergy	Patient has allergies	PatientDrugAllergyWhenArrivedOrStarted	7	01/03/2013 9:1...	Y
ContactMethod		DOBChange	Patient's Birth Date has changed. Please ensure the data is correct.	PatientBirthChanged	5	26/02/2013 1:4...	Y
CountryState		PatientDeceased	Patient is deceased	PatientDeceased	6	26/02/2013 1:4...	Y
CreditCardType		LastNameChange	Patient's Last Name has changed. Please ensure the data is correct.	PatientLastNameChanged	3	08/11/2012 9:0...	Y
DeliveryMethod		FirstNameChange	Patient's First Name has changed. Please ensure the data is correct.	PatientFirstNameChanged	4	30/04/2012 3:0...	Y
EducationLevel		GetLabWork	MR Patients age 65+ with Heart Disease on Lipitor and LDL >100. Make s...	MRI65PlusHeartDiseaseLipitorAndLDL100Pl...	1	29/12/2011 3:3...	Y
Firmware							
Gender							
ImageMedium							
ImageUploader							

Figure 5.25 – Alert configuration

As with the other alerts that can be configured in eRAD RIS, an entry can be added and set to active or inactive in the AlertConfiguration lookup table. The Description is a free form field that the administrator may enter. The Alert Generator to select is PatientDrugAllergyWhenArrivedOrStarted

Specialty Read and Referring Protocol Note Changes

When a referrer is added on the Order tab, the specialty read and referring protocol notes have been changed in build 40. Previously when the user would hover the mouse over the icon a tooltip would pop up with the associated notes.

We have changed this to be a pop up window when the associated icon is selected.

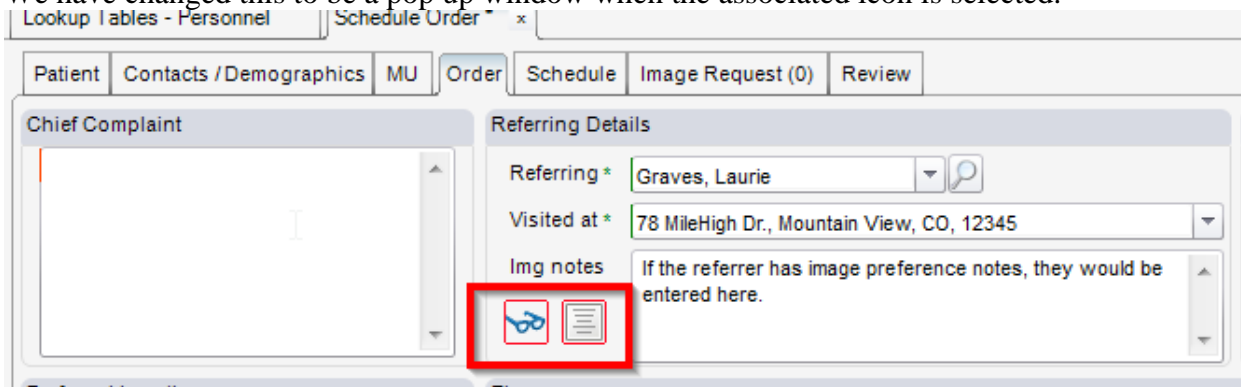



Figure 5.26 – Specialty Read and Referring Protocol Note icons.

Selecting the Specialty Read icon  will open the associated notes for the referrer.

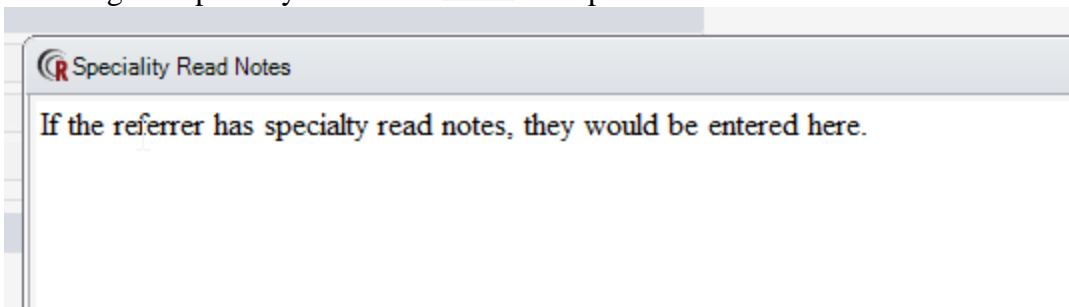


Figure 5.27 – Specialty Read Notes window.

Selecting the Referring Protocol Notes icon  will open the associated notes for the referrer.

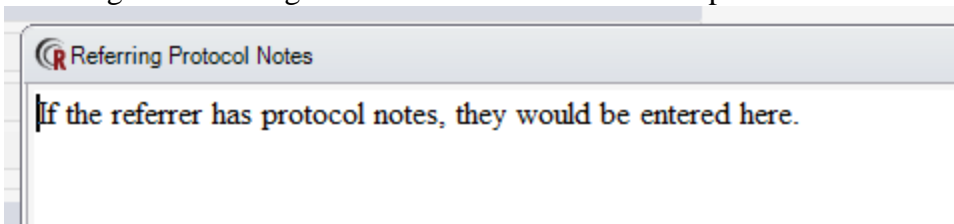
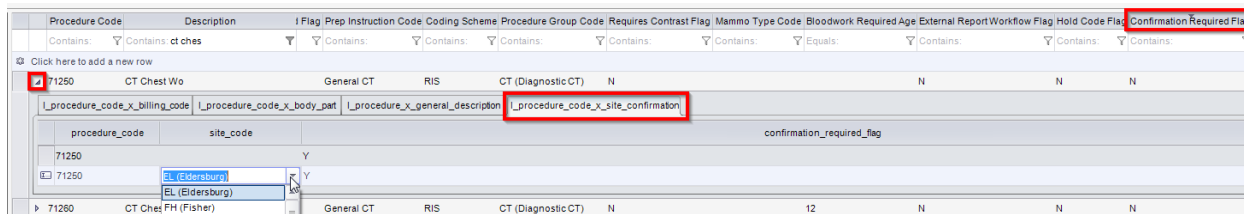


Figure 5.28 – Referring Protocol Notes window

Site Specific Confirmation Flag

Previous to build 40, the confirmation flag could be set at the procedure level. Added in this build is the ability to override the procedure and have the confirmation flag set for that procedure for a specific site.

Opening the ProcedureCode lookup table you can see the pre-existing Confirmation Required Flag column. Expanding the procedure assignment capabilities to see a new tab titled l_procedure_code_x_site_confirmation tab.



Procedure Code	Description	I Flag	Prep Instruction Code	Coding Scheme	Procedure Group Code	Requires Contrast Flag	Mammo Type Code	Bloodwork Required Age	External Report Workflow Flag	Hold Code Flag	Confirmation Required Flag
71250	CT Chest Wo	General CT	RIS	CT (Diagnostic CT)	N	N	N	N	N	N	N
<div> <div>l_procedure_code_x_billing_code</div> <div>l_procedure_code_x_body_part</div> <div>l_procedure_x_general_description</div> <div>l_procedure_code_x_site_confirmation</div> </div>											
71250											confirmation_required_flag
71250											Y
71250											Y
71250											Y
71250	CT Chest FH (Fisher)	General CT	RIS	CT (Diagnostic CT)	N	12	N	N	N	N	N

Figure 5.29 – Assigning confirmation required for procedure to site level.

If the flag for the procedure is set to N, but for site EL is set to Y, when procedure code # 71250 is scheduled for an EL room, confirmation will be required.

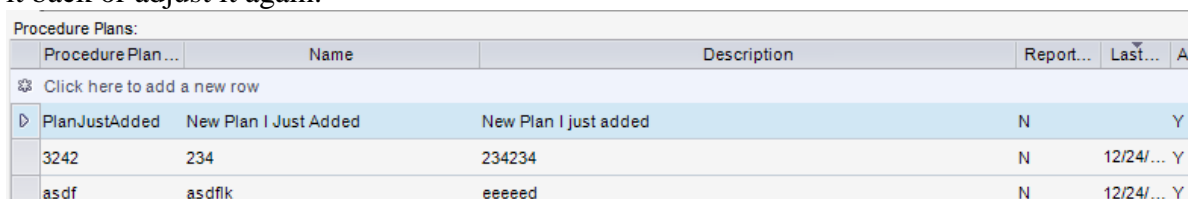
Alternatively, if the confirmation required flag is set to Y for the procedure, we can override confirmation to have it not required for a specific site.

Administration – Adding Rows to Lookup Enhancements

Previously we added new rows at the bottom of the lookup editor and after saving the rows the rows appear in the grid according to the DB or UI sort order. This can make it seem like the rows are jumping into a random grid location. The solution to these issues has two parts.

1. Rows will be added to the top of the grid preventing the user from having to continually scroll down to the bottom of the file.
2. Data will be sorted by last updated date so that the more recently updated rows will always be at the top of the list.

Having the last updated date (as read-only) in the lookup tables will allow them to see entries they recently modified. Often we change an entry, and then in testing realize we want to change it back or adjust it again.



ProcedurePlan...	Name	Description	Report...	Last...	Action
Click here to add a new row					
PlanJustAdded	New Plan I Just Added	New Plan I just added	N		Y
3242	234	234234	N	12/24/...	Y
asdf	asdfik	eeeeed	N	12/24/...	Y

Figure 5.30 – Adding rows to lookup from top of work list

As you can see in the above, new rows are added at the top so that the user doesn't have to continually scroll down the grid and even after a save the last updated or newly added row will be at the top.

Administration – Referring Address Enhancements

Referring addresses in previous versions of eRAD RIS had to be added one at a time, unless the user was cloned from another user and the addresses were carried to the next user.

A new lookup table has been added under the User folder. From this lookup the administrator can add in Referring Practices and with each Referring Practice, multiple addresses can be associated. Access to the ReferringPractice lookup table is controlled by access string **Config.LookupEditor.ReferringPractice**

Name	Description	Active
QE practice	This is a test practice for QE	Y
QE Practice 2	QE Practice 2	Y
QE Practice 3	QE Practice 3	Y
QE Practice 4	QE Practice 4	Y
QE Practice 5	QE Practice 5	Y

Address	Active
250 Water St. Summerside, MD	N
45 South Dr. address2	Y
251 Water St. Summerside, md	Y
252 Water St. PO BOX 639021-R	Y
253 Water St. Summerside, md	N

Figure 5.31 – Referring Practice lookup table

The Referring Practice and addresses can be set to inactive / active.

The Personnel editor has a new type ahead field on the General tab that looks at the Referring Practice table. When the Referring Practice is added, it will also add all of the addresses that are associated with the practice including inactive ones.

General | Resource | Account | Notes | Attachments | Preferences

First name * Prefix Birth date

Last name * Suffix Gender *

Middle name ☒ Active person

Contact information

Mobile #

Email

Referring practices

Referring Practice (QE Practice 2)	250 Water St. Summerside, MD 20124	Phone: (902) 555-5555	Fax to 9025555555 Print Reports	<input checked="" type="checkbox"/>
Referring Practice Address (QE practice)	45 South Dr. address2 Summerside, MA 02145		Print Reports	Y

Figure 5.32 – Personnel editor adding referring practices

The referring added will have the practice name to differentiate what address belongs to what practice. As before, addresses can be removed if they are not required for this user.

Editing a referring practice address has limited capabilities from the personnel editor. The address can be changed to Active/Inactive, and the deliver to options can be flagged if it for referring, CC physician or both.

GUI Worklist Refactor

The worklists function very similar to how they did before with a few minor changes. We only show the filter compare text such as ‘starts with:’ or ‘equals:’ when a filter is applied or the filter is focused. Filters now default to ‘StartsWith’ instead of ‘Contains’ because the ‘contains’ search prevents the DB indexes from being used. In addition columns such as Last Name and MRN don’t support the ‘contains’ filter.

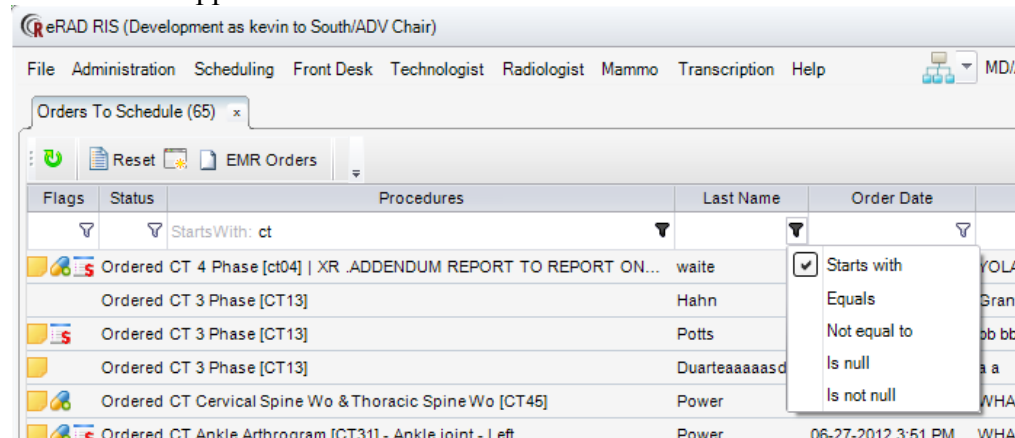


Figure 5.33 – Filtering options have changed

The amount of worklist items that can be displayed or retrieved is configurable in the SystemConfig lookup as shown in the following. The default value is 100. It cannot be set to more than 500. Any number greater than 500 entered as a value will be interrupted as 500.

System Config Code	Value	Default	Description
Contains: maxw	Contains: ▼	Contains: ▼	Contains: ▼
Click here to add a new row			
MaxWorklistItem	500	100	(value = int) The maximum number of worklist items that can ben returned. Default is 100 worklist items. The maximum is 500 worklist item... 07

Figure 5.34 – New system config code entry

Using a value of 100, if the worklist has more than 100 rows then we only display the first 100 based on the view’s sort column/primary key and a status area is introduced at the top of the worklist to explain that we are only displaying the first 100 of the results:

Flags	Status	Procedures	Order Date	Referring	Last Name	First Name	MRN	Filler Order Number	Practice	Site	Patient
		Ordered PT/CT.OR Tumor Img Sk Th (Outside Read) [PT2]	05-05-2011 4:06 PM	WILLIAM SINTON JR	Procsal	Cathern	11308	1005006	ADV	FH	Outpa
		Ordered PT/CT Myocardial Multi Study [78492]	05-05-2011 4:10 PM	WILLIAM BLEAM	Lendt	Kimberlie	5572	1005156	ADV		
		Ordered PT/CT Myocardial Multi Study [78492]	05-05-2011 4:12 PM	WILLIAM BLEAM	Buss	Mickey	2944	1005244	ADV		Emerg
		Ordered PT/CT Myo Imag Perf Study [78459]	05-05-2011 4:22 PM	WILLIAM NYLAND	Hussein	Drusilla	5754	1005338	ADV		Outpa
		Ordered PT/CT Myo Imag Perf Study [78459]	05-05-2011 4:22 PM	WILLIAM JONES	Ganzer	Marybelle	5763	1005347	ADV		
		Ordered PT/CT Myocardial Multi Study [78492]	05-05-2011 4:23 PM	WILLIAM BLEAM	Szarek	Charles	6733	1005372	ADV		Emerg
		Ordered PT/CT Myo Imag Perf Study [78459]	05-05-2011 4:24 PM	WILLIAM NYLAND	Landenberger	Magan	5830	1005414	ADV		Outpa

Figure 5.35 – Work list displaying subset based on system config value.

To view specific items the user needs to reduce the result set by specifying additional search criteria. For example, in the following we are filtering the Procedure column for studies that start with ‘PT’

Flags	Status	Procedures	Order Date	Referring	Last Name	First Name	MRN	Filler Order Number	Practice	Site	Patient
		Ordered PT/CT.OR Tumor Img Sk Th (Outside Read) [PT2]	05-05-2011 4:06 PM	WILLIAM SINTON JR	Procsal	Cathern	11308	1005006	ADV	FH	Outpa

Figure 5.36 – Work list filtering

Then after clicking “Search” or pressing <enter> the worklist will look as follows:

Flags	Status	Procedures	Order Date	Referring	Last Name	First Name	MRN	Filler Order Number	Practice	Site	Patient
		Ordered PT/CT.OR Tumor Img Sk Th (Outside Read) [PT2]	05-05-2011 4:06 PM	WILLIAM SINTON JR	Procsal	Cathern	11308	1005006	ADV	FH	Outpa
		Ordered PT/CT Myocardial Multi Study [78492]	05-05-2011 4:10 PM	WILLIAM BLEAM	Lendt	Kimberlie	5572	1005156	ADV		
		Ordered PT/CT Myocardial Multi Study [78492]	05-05-2011 4:12 PM	WILLIAM BLEAM	Buss	Mickey	2944	1005244	ADV		
		Ordered PT/CT Myo Imag Perf Study [78459]	05-05-2011 4:22 PM	WILLIAM NYLAND	Hussein	Drusilla	5754	1005338	ADV		
		Ordered PT/CT Myo Imag Perf Study [78459]	05-05-2011 4:22 PM	WILLIAM JONES	Ganzer	Marybelle	5763	1005347	ADV		
		Ordered PT/CT Myocardial Multi Study [78492]	05-05-2011 4:23 PM	WILLIAM BLEAM	Szarek	Charles	6733	1005372	ADV		

Figure 5.37 – Work list display after search performed

The Reception and Technologist WLs now require a site selection. The site selection is displayed at the top of the worklist next to the day selection as shown in the following:

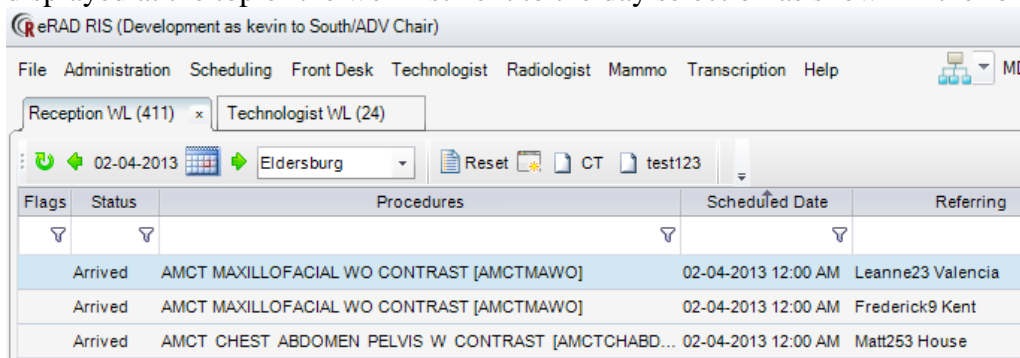


Figure 5.38 – List box filter for sites on Reception and Technologist work list

Several columns such as 'Flags', 'Status' and 'Modality Type' now have a "Select Values..." option under the filter button as shown in the following:

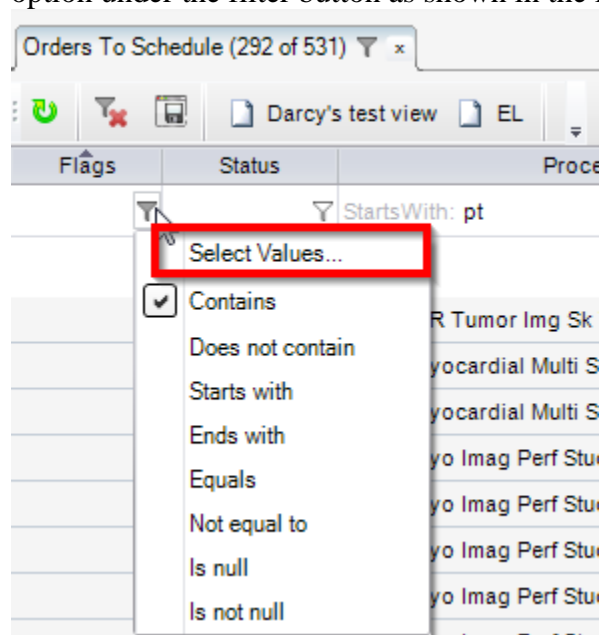


Figure 5.39 – New filter option

The ‘Select Values...’ option displays a popup which allows you to select specific values you would like to match. The following is an example of the ‘Select Values...’ popup for the Flags column:

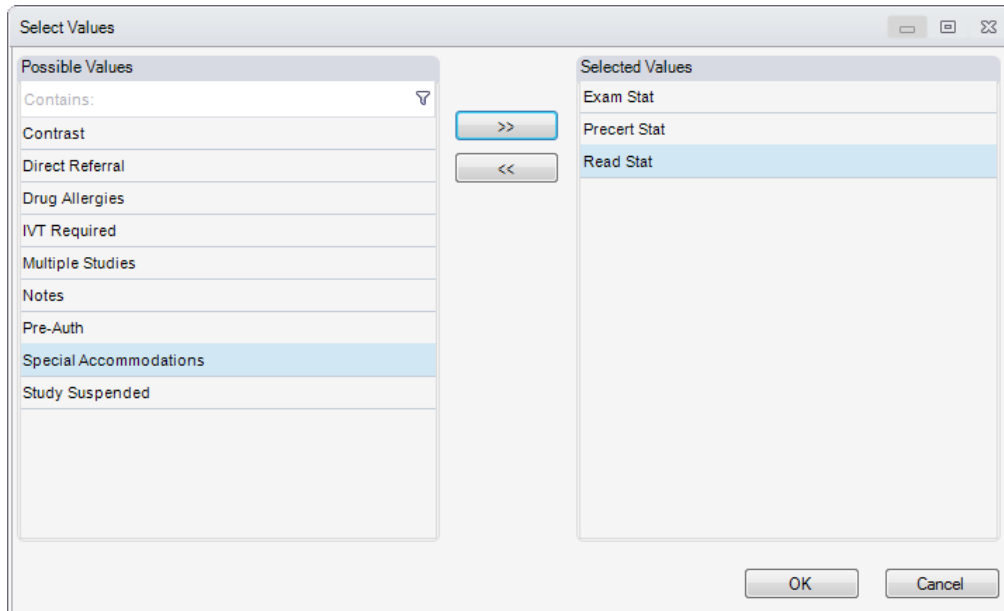


Figure 5.40 – Select values work list filter options

Scheduling – Restrictions Enhancement for Appointment Book

In previous versions of eRAD RIS, scheduling restrictions such as holiday's, room closures and restrictions would display similar to an appointment with a different background color.

In build 40 we are not displaying the items that could restrict an appointment from being scheduled as an alternative color to the appointment calendar.

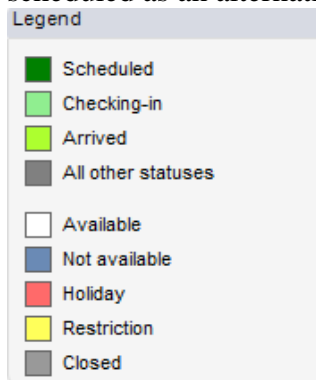


Figure 5.41 – Appointment Book legend

The description is displayed as the type of restriction (Holiday, Closed or Restriction), if there is a description configured it will appear on the next line, and will word wrap to fit inside the available space, at the point of painting the background, until finished or the interval will repeat again. The date span will appear on its own line, based on the restriction the date could be formatted in different ways.

The advantage of this will allow for the repeating of the description at set intervals to be user friendly. With the color change, we still display what the color change would relate to when it is not the normal template available/unavailable, but we have also include a legend for the different background colors.

PACS IW Integration

A particular customer required eRAD RIS integration with PACS IW. We also needed to preserve the current integration with eRAD PACS.

We used to associate the PACS server at the site level. This has been moved to the Practice level.

The screenshot shows the 'Edit Practice' form. The 'PACS Server' dropdown menu is open, displaying a list of servers: 'helen' (selected), 'eRAD PACS', and 'PACS IW Test Server'. The form also includes fields for 'Practice Code', 'Description', 'Phone #', 'Fax #', 'Time Zone' (set to '(UTC-04:00) Atlantic Time (Canada)'), and a 'MU Required' checkbox.

Figure 5.43 – Practice lookup displaying new PACS Server list box

This allows the decision of which PACS server should be launched to be based on the selected practice of the org picker. In order to temporarily change from one PACS server to another the user simply changes the selected practice in the org picker.

Also the PACSServer lookup table has a new column “PACS Server Type Code”.

Pacs Server Code	Description	Protocol	Url	Port	Display Order	Pacs Ae Title	Pacs Server Type Code	Last Updated	Active
eRAD PACS	eRAD PACS	dicom	10.10.10.10	104	1	PBUILDER	ERAD	07/03/2013 2.2...	N
eRAD PACS	eRAD PACS	http	10.10.10.10	80	1		ERAD	07/03/2013 2.2...	Y
PACS IW Test Server	PACS IW Test Server	http	10.10.10.10	80	1		ERAD	07/03/2013 2.2...	N
PACS IW Test Server	PACS IW Test Server	http	10.10.10.10	80	1		IW	26/02/2013 3.4...	Y

Figure 5.44 – PACSServer lookup table

The c_study table now has an external_identifier_column that will hold the NCDStudyId from PACS IW when it is received. Integration with eRAD will continue to be by MRN and accession number.

The PACS menu on the main menu bar is controlled by whichever PACS integration manager is in use at the time. Selecting the Enable or Disable menu items affects all integration managers. Selecting a practice that is not associated to a PACS server will disable all integration and remove the integration menu entirely.

On the initial opening of a study where the org picker's practice is associated to PACS IW, login is attempted using the username and password that logged into RIS. If these credentials fail, the user is prompted for additional credentials. On successful login, the study continues to open in the PACS.

Calls to IW to display images are triggered by either the View Images action accessed from the context menu on the Patient Folder work list. Also when opening the Dictate window the images for the study will be opened. From the patient history list in the Dictate window, the user can double click on a row to open the images for that study if they were not already loaded a relevant prior.

Attaching priors after the initial opening is very problematic. If study 1 is opened with 4 and 7 as priors on the initial open IW opens a session with 1, 4, and 7. If the RIS then uses the DisplayStudyContext to try to append 10 as a prior, the view session loses 4 and 7 and ends up with only 1 and 10 loaded.

Closing the RIS window from which studies were opened (either dictation or patient folder) will cause the images to close in PACS.

Opening a second active dictation window will result in a second instance of IW. Changing between tabs in RIS will focus the related IW viewer window. Switching between the PACS viewer windows will cause the tab focus in RIS to change, however the event coming from the viewer doesn't seem to be as reliable as it should be. Particularly in cases of minimizing and restoring the RIS does not always receive the event indicating that the viewer session is now active.

User Action	eRAD PACS Behaviour	PACS IW Effect Behaviour
User opens first study via: - Right-click -> View Images on the main patient folder.	Login attempt with RIS credentials. Upon failure, RIS prompts for additional credentials. On successful	Same

<ul style="list-style-type: none"> - View Images button on Tech window - Opening Dictation window 	login, the attempt to open images continues.	
Opening study via <ul style="list-style-type: none"> - Right-click -> View Images on the main patient folder. - View Images button on Tech window - Opening Dictation window 	<p>eRAD PACS is instructed to open images using the MRN+Accession number of the given study. Additional priors can be sent using their accession numbers as well.</p> <p>eRAD PACS returns a list of opened accession numbers as well as data indicating which studies could be found but weren't opened (ie. In Archive).</p>	<p>PACS IW is instructed to open a study's images using NCDStudyID, which is an internal IW identifier. Additional NCDStudyIDs can be sent to load priors.</p> <p>IW gives no indication on whether or not a study opened successfully.</p>
Adding priors after initial opening of a study via: <ul style="list-style-type: none"> - Double click in the Reporting Patient Folder - A second Right-click-> View images from main patient folder 	PACS provides a call to add priors to the open session based on MRN+Accession(s). It reports back on which studies were opened or at least found.	Instructing IW to add a prior to a given session results in all other priors being removed from the session. No result is returned and no query method is provided to see what is available.
Opening a second PACS integrated window, ie. Tech, Patient Folder, or Dictation	PACS bookmarks its currently opened study and then replaces it with the one associated to the new tab.	IW opens a new window with the new study and gives it focus. It is visible in the task bar and the previous window remains available.
Switch between two PACS integrated tabs, ie. Some combination of patient folder, tech, and dictation windows.	eRAD PACS bookmarks its currently opened study and replaces it with the one associated to the new tab.	IW will focus on the window associated to this form.
Close the PACS associated window	The open session in PACS is closed. If the RIS focuses on another PACS related form, PACS will load the related bookmarked images.	The PACS IW session will close. If the RIS focuses on another PACS related form, IW will focus on the related session window.

Switch between active sessions in the PACS.	Action not possible in the PACS	IW raises an event to tell the RIS which window now has focus. This event is not entirely reliable, particularly in cases of Minimizing and Restoring the IW windows. Upon receiving the event RIS will switch its focus to the appropriate tab.
Close the session in the PACS		

Table 5.1 – Actions in eRAD PACS compared to PACS IW.

Meaningful Use - Image Medium Request Enhancements

There have been minor changes to the Image Request window. The “Copied” radio button had been relabelled “Ready”. When the “Ready” button is selected and the window is saved, it is also saved to the database.

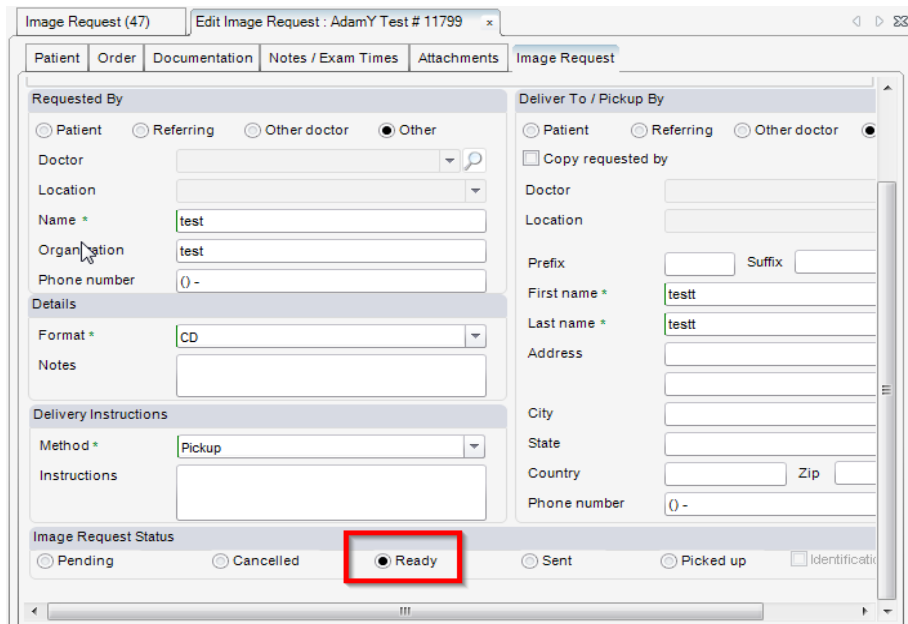


Figure 5.45 – Image Request window

We will report off this new date and if the patient does not return within 3 business days to pick up the request the statistic will not count.

Auto Resolving BI-RADS® 0 and 4/5 Exams

In previous versions of eRAD RIS we would auto-resolve whenever the follow up order was scheduled. This has been changed. Auto resolve for exams on the ACR Cat. 0 Follow-up WL will now occur when the scheduled study is Report Signed.

Exams on the ACR Cat. 4/5 follow-up work list will auto resolve when the user enters a biopsy and indicates “No Surgery Required”.

Manually Resolve BI-RADS® 0 and 4/5 Exams

The label for “Lost to Follow Up” has been renamed to “Follow Up Resolved”. This checkbox appears on the mammography tab in View/Edit and on the Contact screen on the Follow Up screen.

When the user checks the checkbox, we check the permission Clinical.ManuallyResolveMammoFollowUp and if the user is authorized, we then show a dialog box prompting for a manual resolution reason:

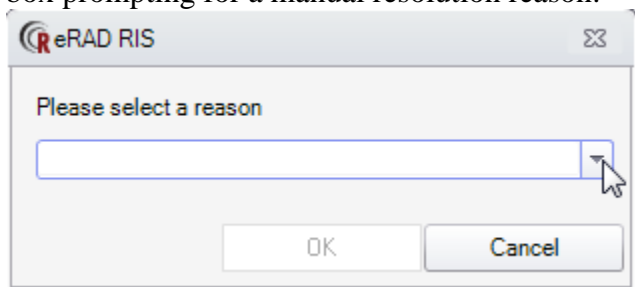


Figure 5.46 – Follow up reason

The list of reasons is specified in a new lookup table accessible from Administration > Configure > Mammography > FollowUpReason

Management Report – Cancelled Reasons

The report has parameters to select the Date Range, Cancelled Reasons (default is Weather), and also if you'd like to see the ones that have been rescheduled or not (Default is to see both).

Scheduled date	Procedure(s)	First Name	Last Name	Acc #	Rescheduled?	:
Reason: Employee Error						1/6
12-26-12 10:00 AM	US Scrotal [76870] - Scrotum			109035	N	
12-26-12 05:00 PM	MA Digital Screening Mammo [G0202] - Breast - B			97502	N	
12-26-12 02:20 PM	MA Digital Diagnostic Mammo Bilat W Breast US [G0204BRUS] - Breast - B			126824	N	
12-26-12 02:30 PM	US Breast Hold Code [76645HOLD] - Breast			126823	N	
12-26-12 10:10 AM	CT Chest Abdomen and Pelvis WO [CT312] - Chest			129204	N	
12-26-12 10:20 AM	CT Chest WO [71250] - Chest			129211	Y	
Reason: Inclement Weather						26/38
12-26-12 01:00 PM	MR Cervical Spine WO [72141] - Cervical spine			129200	Y	
12-26-12 01:30 PM	MR Lumbar Spine WO [72148] - Lumbar spine			129199	Y	
12-26-12 01:00 PM	MR Hand WO [73218HAN] - Hand - L			130824	Y	
12-26-12 09:50 AM	MA Digital Diagnostic Mammo Callback Unilat [G0206CB] - Breast - L			98264	Y	
12-26-12 10:30 AM	US Breast Hold Code [76645HOLD] - Breast			98263	Y	
12-26-12 03:30 PM	MR Neuroquant Brain WO [MR110] - Head			134421	Y	
12-26-12 01:30 PM	MA Digital Screening Mammo [G0202] - Breast - B			104946	Y	
12-26-12 02:10 PM	MA Digital Diagnostic Mammo Callback Unilat W Breast Us			132906	N	

Figure 5.47 – Cancelled Reasons Report

Management Report – Unknown Referring Report Enhancements

Enhancements to the Unknown Referring report are

- Adding a date range based on scheduled date
- Add Void in the Ignored Status parameter

The screenshot displays the 'Unknown Referring' report configuration window. At the top, there are fields for 'From:' (12/14/2012) and 'To:' (12/21/2012), each with a calendar icon. Below these are 'Practice:' (American Radiology Services) and 'Site(s):' (Annapolis, Bel Air, Bel Air PE) dropdown menus. A section labeled 'Ignored Statuses:' contains a dropdown menu currently showing 'Cancelled, Discontinued, Ab'. A list of checkboxes is visible below this, with the following options: (Select All), Cancelled, Discontinued, Aborted, Scheduled, and Void. The 'Void' checkbox is checked. On the left side of the window, a list of report entries is partially visible, including '360f7a46-e' and 'ofdad24105'. To the right of the 'Ignored Statuses' list, a description of the report is shown, mentioning 'Medical Associates, Calvert Medical Imaging Center, F...' and 'Owings Mills Women's Center, Quarry Lake, Tin...'. The description also states 'requested by physician is "Unknown referring" f...' and 'orted, Scheduled, Void'.

Figure 5.48 – Unknown Referring report enhancements

Management Report – Modality Duration Override Report

The parameters for the report are

- Practice(s)
- Site(s)

This report lists modality duration overrides for the selected location





Practice(s): Advanced Radiology

Site(s): Eldersburg, Fisher, Lutherville, C

1 of 1

100%

Find | Next



Modality Duration Override

Practice(s): Advanced Radiology
Site(s): Eldersburg, Fisher, Lutherville, OutsideMed, PowerVille
Description: This report lists modality duration overrides for the selected location.

Modality	Procedure Code	Override Duration	Regular Duration
CT1EL			
	CT13	50	30
	BPTBD	2	15
CT1PO			
XR1FH			

Modality Duration Override

Confidential and Proprietary
Page 1 of 1

Date Run: 12/21/2012 2:41 PM
RMISdale

Figure 5.49 – Modality Duration Override report

Management Report – RTAT by Radiologist

This report displays report turnaround times for all practices within the RIS install for the procedure groups (*excluding mammo), and date range selected. There are three tables within this report that break down statistics of:

1. Radiologist: Pending Dictation - Pending Transcription (% of reports completed in < 3 hours)
2. Radiologist: Pending Transcription - Pending Signature (% of reports completed in < 8 hours)
3. Radiologist: Pending Dictation- Signed (% of reports completed in < 8 hours)

The report has groupings for each practice in the install and expands using the + symbol to show the accession numbers that are hitting the targets for each table within the report.

The report has parameters to select the practice(s), and site(s).

- RTAT dataset
- L_procedure_group_dataset
- Radiologist dataset

RTAT by Radiologist

Date: 2/28/2013

Procedure Groups: Diagnostic CT,DEXA,Evaluation Mgmt,Fluoroscopy,MRI and MRA,Nuclear Med,OTHER,EPET Procedures,PET,Diagnostic Imagt,Radiation Oncol,Intervntnl Rad,Intervntnl Surg,Ultrasound Vasc,Plain Film/Xray/CR
Excluding exams signed on weekends

Pending Dictation - Pending Transcription (% of reports completed in < 3 hours)		
Radiologist	ADV	# Signed Exams
⊞ Kevin Lloyd Molyneaux	0.00 %	1
Total	0.00 %	1

Pending Transcription - Pending Signature (% of reports completed in <= 8 hours)		
Radiologist	ADV	# Signed Exams
⊞ Kevin Lloyd Molyneaux	100.00 %	1
Total	100.00 %	1

Pending Signature - Signed (% of reports completed in <= 8 hours)		
Radiologist	ADV	# Signed Exams
⊞ Kevin Lloyd Molyneaux	100.00 %	1
Total	100.00 %	1

Figure 5.50 – RTAT by Radiologist report

Management Report – Continuing Experience Radiologist

The report has parameters to select the Date Range and the amount of addendums per exam.

From :	01/03/2013	To :	07/03/2013
Addendum Version:	0 (Original study)		

1	of 1	100%	Find	Next
---	------	------	------	------

User ID	Month	Year	CT	CCA	DX	MA	BRE	ST	MR	MB	MC	US	UB	UBX	UO	UV	NM	PT	XR	FL
adam	March	2013	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
dale	March	2013	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
darcy	March	2013	5	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
darcyn	March	2013	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
gordon	March	2013	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
hardingc	March	2013	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ian	March	2013	2	0	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0
jessie	March	2013	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
radtest	March	2013	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Figure 5.51 – Continuing Experience Radiologist report

Management Report – Continuing Experience Technologist

The report has parameters to select the Practice(s), Site(s) and date range.

Practice(s):

Advanced Radiology

Site(s):

Eldersburg, Fisher, Lutherville, I

From Date

01/03/2013

To Date

07/03/2013

1 of 1

100%

Find | Next

User ID	Month	Year	CT	CCA	DX	MA	ST	MR	MB	MC	US	UB	UBX	UO	UV	NM	PT	XR	FL
andrew	March	2013	1	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
bettyg	March	2013	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
dale	March	2013	4	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
denis	March	2013	14	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
harold	March	2013	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ian	March	2013	2	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
OutsideReadTech	March	2013	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
romane	March	2013	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
techtest	March	2013	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

Figure 5.52 – Continuing Experience Technologist report

6. RIS Release Version Numbers

Build	Patch	UI Version	Core Version	WS Version	DB Version	Notes
37	-	1.2.37.12843	1.2.37.12782	1.2.37.12843	1.2.37.12843	Full version release. Core install required.
37	1	1.2.37.13040	1.2.37.13040	1.2.37.13039	1.2.37.13003	Core install required. GUI.zip, web service and database updates
37	2	1.2.37.13069	1.2.37.13040	1.2.37.13069	1.2.37.13003	GUI.zip and Web service updates
37	3	1.2.37.13069	1.2.37.13040	1.2.37.13069	1.2.37.13003	Just WebAPI updated, no version changes. . Web service updates
37	4	1.2.37.13171	1.2.37.13040	1.2.37.13165	1.2.37.13171	GUI.zip, web service, and database updates
37	5	1.2.37.13347	1.2.37.13040	1.2.37.12979	1.2.37.12979	Bug was discovered with version numbers, this is why it appears we went backwards in the version number but we really did not.
37	6	1.2.37.13665	1.2.37.13040	1.2.37.13580	1.2.37.12979	GUI.zip and Web service updates
37	7	1.2.37.13807	1.2.37.13040	1.2.37.13799	1.2.37.13807	GUI.zip and Web service updates. Also MIRTH mapping changes
37	8	1.2.37.13807	1.2.37.13040	1.2.37.13827	1.2.37.13807	Web service update
37	9	1.2.37.13807	1.2.37.13040	1.2.37.13839	1.2.37.13807	Web service update
37	10	1.2.37.13895	1.2.37.13040	1.2.37.13895	1.2.37.13895	GUI.zip, Web service and database updates
37	11	1.2.37.14161	1.2.37.13040	1.2.37.14161	1.2.37.14161	GUI.zip, Web service, database updates and SQL Management reporting
37	12	1.2.37.14267	1.2.37.13040	1.2.37.14161	1.2.37.14267	GUI.zip, Web service and database updates
37	13	1.2.37.14326	1.2.37.13040	1.2.37.14326	1.2.37.14326	GUI.zip, Web service and database updates
38	-	1.2.38.14486	1.2.38.14486	1.2.38.14486	1.2.38.14486	Full version release. Core install required.

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38	1	1.2.38.14748	1.2.38.14748	1.2.38.14748	1.2.38.14748	Core install required
38	2	1.2.38.15182	1.2.38.14748	1.2.38.14748	1.2.38.14748	GUI.zip update only
38	3	1.2.38.15251	1.2.38.14748	1.2.38.14748	1.2.38.14748	GUI.zip update only
38	4	1.2.38.15327	1.2.38.14748	1.2.38.15290	1.2.38.14748	GUI.zip and Web service updates
38	5	1.2.38.15513	1.2.38.15513	1.2.38.15513	1.2.38.15451	Core install required. GUI.zip, Web service and database updates.
38	6	1.2.38.15618	1.2.38.15513	1.2.38.15513	1.2.38.15618	GUI.zip and database updates
38	7	1.2.38.15768	1.2.38.15513	1.2.38.15768	1.2.38.15618	GUI.zip and Web Service updates
39	-	1.3.39.15389	1.3.39.15389	1.3.39.15377	1.3.39.15355	Full version release. Core install required.
39	1	1.3.39.16026	1.3.39.15943	1.3.39.15943	1.3.39.15957	Core install required. GUI.zip, Web service and database updates
40	-	1.3.40.16659	1.3.40.16659	1.3.40.16659	1.3.40.16659	Core install required. Full version release

7. Resolved Defects

Bugs Suggested Features and Support Issues resolved in build 1.40. The extract is taken from Redmine bug tracking system and only displays defects resolved in 1.40.

Bug #	Priority	Subject	Category	Found Version
3370	Normal	Appointment Book not filter practices that the user is assigned to	Thick Client GUI	1.39
2899	Urgent	Fax Service is not using all of the available fax ports	Web Services/DB	1.37
3007	Urgent	Inbound Reporting bypasses Core business rules in GetData	Thick Client GUI	1.38
1375	High	hit eRx button on Patient tab get exception	Thick Client GUI	1.38.14391
1620	High	Error when scheduling an exam with an image request	Thin Client GUI	1.37
1956	High	IVT Verified/Approved.	Thick Client GUI	1.37
1980	High	Too many modality restrictions kills the appointment book.		1.37
2074	High	Patient distribution history - New button throws exception	Thick Client GUI	1.38
2101	High	Index out of bound scheduling..	Thick Client GUI	37.11
2136	High	Administration - lookup making changes (refreshes you to the top of the grid)		37.12

2193	High	Image request not saving "Same as requested by"	Thick Client GUI	1.38.14426
2351	High	When user reschedules an order that contains scans at the 'Exam' level, RIS is not carrying those scans over to the newly scheduled exam as it should be.	Thick Client GUI	38.14486
2467	High	When lab work for BUN or Creatine (maybe others too, but those were all I could find) tests are on the lab work worklist, orders placed after are bypassing the worklist regardless of the state of the 'skip lab worklist' check box.		38.14748
2478	High	Title bar color does not change if Practice is set to transparent	Admin Tools	1.39
2504	High	Book X attachments for Order B are not associated with correct procedure at time of scheduling	Thick Client GUI	1.38.002
2671	High	Failure to "save as order" on a cancelled appointment.	Thick Client GUI	1.39.15268
2699	High	Inserting template is navigating all fields twice	Thick Client GUI	1.39
2775	High	Mammo letter config lookup active column values incorrect	Admin Tools	1.39
2865	High	PersonSearch does not properly use database indexes and triggers excessive load	Web Services/DB	1.39
2883	High	My Views - If view has hidden columns, a reset to does not restore hidden columns	Thick Client GUI	1.39

2916	High	Exception on logout	Thick Client GUI	1.38.007
2948	High	IVT - Remove insurance can throw error	Thick Client GUI	1.39.001
2953	High	ORDER PLACER or EMR order not showing up on Orders to Schedule worklist	Modality Worklist	1.39.001
3006	High	Not able to cancel an EMR / order	Thick Client GUI	39.1
3092	High	Unable to add new value to static lookup tables in an upgrade and get those values pushed to the client	Thick Client GUI	1.38
3321	High	referring portal returns order cc PERSON_KEYS instead of order cc person "IDs"	Web Services/DB	1.39
956	Normal	When in "pending signature" WL, there is no context menu option for "Sign Report"	Thin Client GUI	1.35
1085	Normal	Scheduling an aborted exam, removing a completed exam from the order and adding a new procedure	Thick Client GUI	1.35
1140	Normal	Unknown referring billing exception not in billing notes	Thick Client GUI	1.35
1154	Normal	Removing procedure from study cell can throw exception if Scheduled Date field is selected.	Thick Client GUI	1.36
1168	Normal	User is able to add multiple procedures in one row.	Thick Client GUI	1.36

1258	Normal	Arriving multiple studies for one day, the Relation to Patient is not captured to the other studies	Thick Client GUI	1.36
1329	Normal	Procedures with multiple billing codes can be orphaned if procedure row is removed	Thick Client GUI	1.36
1754	Normal	Entering / Editing Availability templates - object reference error	Admin Tools	1.1.2.37.13347
1775	Normal	Filter work list using Customer filter does not allow "is null" or "is not null"	Thick Client GUI	1.1.2.37.13580
1804	Normal	View / Edit a cancelled exam prompts for required fields on Documentation tab	Thick Client GUI	1.2.38.13666
1844	Normal	After patient merge, data nugget does not update correctly		1.37
1873	Normal	Object error in system config lookup	Admin Tools	1.1.2.38.13809
1882	Normal	Image request > Referring Location is not saved from Image request WL > edit	Thick Client GUI	1.1.2.37.13842
1887	Normal	Patient History Control leaking memory		1.37
1958	Normal	Carrier type and address information on IVT WL		1.37
2034	Normal	Null exception when delivery address key is missing.		37.1
2073	Normal	Error changing scan associations in perform exam window	Thick Client GUI	1.2.37.14267
2080	Normal	Modality Type lookup object reference error	Admin Tools	1.2.37.14267
2125	Normal	No Scheduling credit for entering Outside Reads	Thick Client GUI	37.12

2178	Normal	RED X appearing on Insurance Policies grid	Thick Client GUI	1.2.38.14412
2194	Normal	Tech Only - External Report Workflow	Thick Client GUI	1.38.14426
2270	Normal	Template configuration issue	Mgt Reports	1.37
2280	Normal	Scanning - error import a scanned document on to multiple exams. (River Ranch)		v38
2306	Normal	Sales Marketing Dashboard	Mgt Reports	1.37
2444	Normal	Dataset Visualizer - copy function is available in the context menu, but the function does not work.	Thick Client GUI	38.001
2470	Normal	Reporting - CDS Management console mystery button removal	Thick Client GUI	1.37
2484	Normal	Resolve - inactive insurances are still showing on patients record although the user is not aware that it is no longer active	Thin Client GUI	1.3
2491	Normal	The way we extract report text from XML is expensive on the CPU	Web Services/DB	1.38
2493	Normal	Management Report - RTAT Summary Poor Performance	Mgt Reports	1.39
2502	Normal	Management Report - copay vs collected issue	Mgt Reports	1.38
2505	Normal	Outside Read procedure label partially hidden	Thick Client GUI	1.38.002
2509	Normal	Create/Edit Report not in context menu in Report Drafted WL	Thick Client GUI	1.39

2512	Normal	Verify Edits context missing on Edits Pending QA WL	Thick Client GUI	1.39
2513	Normal	Create Edit Report missing from context on Pending Review WL	Thick Client GUI	1.39
2515	Normal	Create/Edit Report not in context menu in Problem WL	Thick Client GUI	1.39
2521	Normal	Reporting - next/previous field or section	Thick Client GUI	1.37
2540	Normal	scan document association	Thick Client GUI	1.39
2543	Normal	When "Sedation" was added to the reception worklist, users were not able to see 'sedation' on the worklist or in the column chooser.	Thick Client GUI	38.15182
2548	Normal	When you double-click an outside read that is in cancelled status, RIS throws an error because the double click action is opening the reschedule window	Thick Client GUI	38.001
2568	Normal	View menu disappears	Thick Client GUI	1.39
2646	Normal	Reporting - field navigator using section headers are not navigating if report contains 0 fields	Thick Client GUI	1.39
2648	Normal	Reporting - Attachments are not realigned when the data pane is resized	Thick Client GUI	1.39

2654	Normal	Mammo Annual Radiologist Summary - data returned by querying the view is inconsistent with the data returned in the report.	Mgt Reports	39.15226
2668	Normal	Management report - Radiologist Dictation Activity is displaying an error message upon execution	Mgt Reports	39.15226
2702	Normal	SNOMED CT Concept IDs did not make the QE drop for B39 I_smoking_status table	Thick Client GUI	39.1533
2709	Normal	Configuration - Create Duplicate User - You are warned twice.	Admin Tools	1.1.3.39.15330
2710	Normal	Configuration - Create Duplicate User - Causes Error	Admin Tools	1.1.3.39.15330
2713	Normal	Report History tab name	Thick Client GUI	1.39
2725	Normal	Radiologist Dashboard - Completed Exams 7 Day trend is showing Dec. 8, even though it is not in the last 7 days.	Mgt Reports	39.15355
2735	Normal	Billing Exceptions WL - responsible party information problem	Thick Client GUI	39.15355
2741	Normal	Lookup Editor - Column Header Alignment is Messed up.	Admin Tools	1.39
2743	Normal	Personnel Editor - Tab/NewLine issues in notes fields	Admin Tools	1.39
2746	Normal	Organization Picker Problem	Thick Client GUI	1.39
2747	Normal	Reporting - Fields Navigator - Previous section does not highlight position in Fields tool window	Thick Client GUI	1.39

2748	Normal	When doing walk-in, and you scan a document at the order level, RIS is throwing an error upon check-in / Save / Arrive	Thick Client GUI	39.15371
2752	Normal	Patient Merge: ShowID Button does not auto select thumbnail		1.39
2753	Normal	Image Request - Unable to send request when required field are populated	Thick Client GUI	1.1.3.39.15371
2761	Normal	Sales Mgmt Reports - 6 and 13 Mth Variance Data	Mgt Reports	1.39
2762	Normal	Scanning - Printing - Right Click - "Print Forms" item is misleading	Thick Client GUI	1.1.3.39.15376
2763	Normal	Reporting - deleting local dictation file prematurely when getting a save exception	Thick Client GUI	1.37
2773	Normal	carrier related forms not printing on checkin using right click change status to	Thick Client GUI	1.38
2782	Normal	ICM Dashboard - Need plan and Unknown Referring returning no results	Mgt Reports	1.39
2785	Normal	Reporting - Hide Titlebar for Fields tool window throws exception	Thick Client GUI	1.3.39
2826	Normal	carrier editor confusing	Thick Client GUI	1.39
2849	Normal	xKeys integration broken	Thick Client GUI	39
2856	Normal	dbnull error when processing outsidersrules	Thick Client GUI	1.38

2859	Normal	c_audit table shows visit key as -1 or less when after scheduling a new exam	Web Services/DB	1.39
2860	Normal	c_audit table shows visit_key as null for study retrievals	Web Services/DB	1.39
2867	Normal	Mgmt Report Referring Physician Search Details	Mgt Reports	1.39
2868	Normal	Mgmt Reports - 6/13 Mth Variance Data	Mgt Reports	1.39
2874	Normal	c_businessdays procedure results	Web Services/DB	1.39
2878	Normal	MU Automated Measures Report	Mgt Reports	1.39
2891	Normal	Age is calculated wrong in Daily Schedule report	Mgt Reports	38
2901	Normal	Reporting - Macro explorer selection is selecting wrong template	Thick Client GUI	1.38
2902	Normal	unkown referring with no address throws exception on save	Web Services/DB	1.39
2906	Normal	Lock not immediately released if user receives a row out of date error when opening IVT	Thick Client GUI	1.39
2909	Normal	Billing codes are not showing in exams.	Thick Client GUI	38
2933	Normal	Patient Folder - Scroll wheel move through scan documents doesn't include report	Thick Client GUI	1.39
2949	Normal	Management Report - Transcription Dashboard	Mgt Reports	1.38
3001	Normal	multi sign - supervising dictations worklist shouldn't be chair enabled.	Thick Client GUI	1.39.001

3094	Normal	RIS sending status of DC to PACS for a discontinued study. PACS wants CA	HL7	1.38
3117	Normal	tech worklist includes discontinued exams	Web Services/DB	1.39
1236	Low	Patient Folder Preview window issue on patient search	Thick Client GUI	1.36
1482	Low	Personnel editor - create new validates fields on search	Admin Tools	1.37
1738	Low	Prep Instructions Issue	Thick Client GUI	1.37
1797	Low	Perferred Language field is not marked as required when on the patient tab	Thick Client GUI	1.1.2.38.13666
2003	Low	Data Nuggets appear across monitors, or only show partial screen if....		1.37
2032	Low	Pinned billing codes disappear from view	Thick Client GUI	1.2.37.14161
2070	Low	Internal Person Search - Can search with blank criteria causing exception	Thick Client GUI	1.1.2.38.14194
2075	Low	Error when entering access strings for a user group	Admin Tools	37.11
2089	Low	Referring Search	Thick Client GUI	1.38.14194
2091	Low	Confirmation Review tab	Thick Client GUI	1.38.14194
2169	Low	UserGroupPermission - Able to enter non validate access strings		1.38

2173	Low	Configure Save button	Thick Client GUI	1.38.14391
2679	Low	CDS Management Console	Thick Client GUI	1.39
2703	Low	Management Reports - IVT User Activity Report - hardcoded to filter out radiologists, which is not necessary	Mgt Reports	39.1533
2721	Low	printed scan docs have page numbers that start at 0	Thick Client GUI	39.1533
2722	Low	plus and minus on the numeric keyboard should zoom in and out on document viewer	Thick Client GUI	39.1533
2749	Low	Reporting - Fields Navigator - Selecting section before field changes cursor selection	Thick Client GUI	1.39
2779	Low	Change Document Type window shouldn't have a minimize or maximize button.		1.1.3.39.15389
2784	Low	Copy cell that is empty throws exception	Thick Client GUI	1.3.39

8. Known Limitations

The following are Bugs Suggested Features and Support Issues found in build 1.40. Bugs reported in previous versions are not captured as Known Limitation in this document.

#	Status	Priority	Subject	Resolved Build
2775	New	High	Mammo letter config lookup active column values incorrect	
2727	New	High	PACS errors flipping between open dictate windows	
2699	Resolved	High	Inserting template is navigating all fields twice	40
2532	New	High	access to changing the access strings needs to read only.	
2478	Resolved	High	Title bar color does not change if Practice is set to transparent	40
2782	Resolved	Normal	ICM Dashboard - Need plan and Unknown Referring returning no results	40
2777	New	Normal	Appointment book - double click on open time	
2761	Resolved	Normal	Sales Mgmt Reports - 6 and 13 Mth Variance Data	
2759	New	Normal	Distribution WL - Message box should display in the center of the screen	
2757	New	Normal	Problem with doing multiple Verify Externals in a row.	
2754	New	Normal	Patient Folder context menu for Report History	

2752	Resolved	Normal	Patient Merge: ShowID Button does not auto select thumbnail	40
2750	New	Normal	Reporting - Select command does not work for words that are at the start or end of a field	
2747	Resolved	Normal	Reporting - Fields Navigator - Previous section does not highlight position in Fields tool window	40
2746	Resolved	Normal	Organization Picker Problem	40
2744	New	Normal	null exception when attempting to show/hide titlebars on report document	
2743	New	Normal	Personnel Editor - Tab/NewLine issues in notes fields	
2741	Resolved	Normal	Lookup Editor - Column Header Alignment is Messed up.	40
2737	New	Normal	Patient Folder - multiselect is true and it should be false	
2734	New	Normal	Reporting - Floating data panes do not stay on top	
2728	New	Normal	Study locked in PACS message on initial load	
2713	Resolved	Normal	Report History tab name	40
2695	New	Normal	parameter not specified error in preview report for tables	
2690	New	Normal	Show/Hide Titlebar issue	
2683	New	Normal	Patient folder > Study detail column color bleeds outside of row	

2677	New	Normal	Create Report from Reset Open skipped rows	
2676	New	Normal	Reset open skipped rows - If you dictate and save, it does not remove skipped row from list	
2672	New	Normal	Appointment book cannot obtain lock error	
2661	New	Normal	Template Macro Editor - Double click template or macro	
2660	New	Normal	Template Macro Editor - Adv Assignment - user not defaulting	
2648	New	Normal	Reporting - Attachments are not realigned when the data pane is resized	
2647	New	Normal	Reproting window - can't save layout to default Attachments tab	
2646	New	Normal	Reporting - field navigator using section headers are not navigating if report contains 0 fields	
2645	New	Normal	Overbook Reason title change	
2643	New	Normal	Multiple loads of Selection Aware controls	
2641	New	Normal	Duplicating report fields	
2637	New	Normal	Next field command selecting multiple fields	
2635	New	Normal	Unchecking No Longer Menstruating doesnt enable pregnancy fields	
2632	New	Normal	Perform Exam window doesnt update with changes made in another window	

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2630	In Progress	Normal	PACS - Close call could fail if user has been logged off	
2628	New	Normal	Reporting screen not drawing in, if user make worklists active	
2568	In Progress	Normal	View menu disappears	
2561	New	Normal	reception WL retrieval time is slow	
2540	New	Normal	scan document association	
2536	New	Normal	Report Permissions,	
2534	New	Normal	Mammo followup - Newly entered data does not carry forward	
2533	New	Normal	Scheduling order from follow up mammo work list doesnt return to work list	
2515	Resolved	Normal	Create/Edit Report not in context menu in Problem WL	40
2513	Resolved	Normal	Create Edit Report missing from context on Pending Review WL	40
2512	Resolved	Normal	Verify Edits context missing on Edits Pending QA WL	40
2511	New	Normal	size and location information is not saved when client is close while minimized	
2509	Resolved	Normal	Create/Edit Report not in context menu in Report Drafted WL	40
2493	New	Normal	Management Report - RTAT Summary Poor Performance	
2751	New	Low	Object overlap on Order tab	

2749	Resolved	Low	Reporting - Fields Navigator - Selecting section before field changes cursor selection	40
2729	New	Low	Able to bring up two menus at once	
2679	New	Low	CDS Management Console	
2664	New	Low	Billing Exception - Post button	
2658	New	Low	Stored function c_getcontrastrequiredflag could return wrong value if multiple study items exist	
2652	New	Low	administration -> management report screen doesn't show any folders if permissions aren't configured	
2535	New	Low	Region, unable to deactivate	