



eRAD RIS

CUSTOMER RELEASE NOTES

Build v3.2021.3.15

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Publication History

Revision	Author	Description
March 31, 2021	Kevin Brooks / Hilary Saltmarsh	<ul style="list-style-type: none">▪ Commercial release.

SUMMARY

Intended Audience

The intended audience for this CUSTOMER RELEASE NOTES document is the RIS Administration team for all eRAD RIS customers.

This document describes the purpose, configuration, and operation of new features made available with this release, identifies issues resolved in the release, and highlights any unresolved known limitations.

This information should be used by all customers to determine how these changes affect their organization's workflow, and to plan their organization's upgrade strategy for eRAD RIS.

Additional technical details and deploy instructions are available to the Service Team in the SERVICE RELEASE NOTES edition of this document.

Who Is Affected

This release of eRAD RIS v3.2021.3.15 includes both feature enhancements and a variety of resolved issues.

Notable enhancements are the UI updates to phone number and email entry, improvements when working with multiple digital forms, and some adjustments to the UM workflow.

This version also includes the merge of our Online Registration module into RIS.

This version contains new features and bug fixes that are recommended to be applied on eRAD RIS v3.2021.2.15.5 or v3.2021.3.1 installations.



Pleased carefully review these release notes even if your system will not be upgraded immediately, to identify and communicate any issues that may affect your organization.

NEW SETTINGS

Summary of all settings that were added, updated, or removed.

RIS

Changes to Access Strings

The following settings were added or updated with this release:

Setting	Default	Purpose
Clinical.AUCReview	Value=[None Full], Default=[None]	Controls access to the "AUC Review" screen. Added in v2021.3.15 #29104 Note: This setting is for future functionality and should remain set to NONE at this time.
Config.LookupEditor.AUCPriorityClinicalArea	Value=[None Full], Default=[None]	Controls access to the "AUC Priority Clinical Area" lookup table editor. Added in v2021.3.15 #29110 Note: This setting is for future functionality and should remain set to NONE at this time.

Changes to SysConfig Settings

The following settings were added or updated with this release:

Setting	Default	Purpose
ORPAPIEnabled	Value=Boolean, Default=[FALSE]	When True, URL calling to the Online Registration Portal is enabled. Added in v2021.3.15 #28748
ORPAPIIntegrationKey	Value=String, Default=Blank	String of random characters used to login to the Online Registration Portal MORF page. Added in v2021.3.15 #28748
ORPClientKey	Value=String, Default=Blank	A short unique string of random characters identifying a specific installation of the Online Registration Portal, e.g. 4329fuir3jg3. Added in v2021.3.15 #28748
ORPDaysUntilExpiry	Value=Days as Number, Default=[2]	Number of days until the c_pending_questionnaire entry for a patient is removed in the Online Registration Portal. Added in v2021.3.15 #28748
ORPEXternalBaseURL	Value=String, Default=Blank	The base URL of the Online Registration Portal landing page used for patient access, e.g. https://myradiologyconnectportal.com/Online_Forms_Test/DigitalForms/PatientKioskLanding . Added in v2021.3.15 #28748
ORPFormsMaxDays	Value=Days as String, Default=Blank	Number of days into the future the Online Registration Portal will search for pending forms for a patient. Added in v2021.3.15 #28748
ORPFriendlyName	Value=String, Default=Blank	A human-readable name identifying the Online Registration Portal environment. Added in v2021.3.15 #28748
ORPTokenSalt	Value=String, Default=Blank	String added to the last name and date of birth when generating a unique login token, for improved security in the Online Registration Portal. Added in v2021.3.15 #28748

Setting	Default	Purpose
ORPUserID	Value=String, Default=Blank	User ID used for all actions in the Online Registration Portal, such as when a form is saved. Used as the "Last Updated By" User ID and in Audit Logs. Added in v2021.3.15 #28748
PPEnableAppointmentConfirmationRequest	Value=Boolean, Default=[True]	When True, users may enter an email/SMS for appointment confirmation from the Patient Portal. When False, this option is hidden. Supports site group override. Added in v2021.3.15 #29250
RPEnableAppointmentConfirmationRequest	Value=Boolean, Default=[True]	When True, users may enter an email/SMS for appointment confirmation from the Provider Portal. When False, this option is hidden. Supports site group override. Added in v2021.3.15 #29250

Digital Forms

Changes to web.config

With the inclusion of Online Registration to the eRAD RIS, there are multiple changes to the Digital Forms web.config file.

Additions to <namespaces>

```
<add namespace="Thin.Helperdas"/>
```

Additions to <system.webServer>

```
<remove name="BundleModule"/>
    <add name="BundleModule" type="System.Web.Optimization.BundleModule"/>
</modules>
```

```
<remove fileExtension=".woff" />
    <mimeTypeMap fileExtension=".woff" mimeType="application/font-woff" />
<remove fileExtension=".woff2" />
<mimeTypeMap fileExtension=".woff2" mimeType="application/font-woff2" />
```

```
<httpProtocol>
    <customHeaders>
        <!--<add name="Origin" value="http://localhost:64683"/>-->
        <add name="Access-Control-Allow-Origin" value="*" />
    </customHeaders>
</httpProtocol>
```

Additions to <runtime>

```
<dependentAssembly>
    <assemblyIdentity name="WebGrease" publicKeyToken="31bf3856ad364e35" culture="neutral"/>
    <bindingRedirect oldVersion="0.0.0.0-1.5.2.14234" newVersion="1.5.2.14234"/>
</dependentAssembly>
<dependentAssembly>
    <assemblyIdentity name="Telerik.WinControls" publicKeyToken="5bb2a467cbec794e" culture="neutral"/>
```

```

    <bindingRedirect oldVersion="0.0.0.0-2017.1.221.40" newVersion="2017.1.221.40"/>
</dependentAssembly>
<dependentAssembly>
    <assemblyIdentity name="Telerik.WinControls.UI" publicKeyToken="5bb2a467cbec794e"
culture="neutral"/>
    <bindingRedirect oldVersion="0.0.0.0-2017.1.221.40" newVersion="2017.1.221.40"/>
</dependentAssembly>
<dependentAssembly>
    <assemblyIdentity name="Telerik.Common" publicKeyToken="5bb2a467cbec794e" culture="neutral"/>
    <bindingRedirect oldVersion="0.0.0.0-2017.1.221.40" newVersion="2017.1.221.40"/>
</dependentAssembly>

<dependentAssembly>
    <assemblyIdentity name="Newtonsoft.Json" publicKeyToken="30ad4fe6b2a6aeed" culture="neutral" />
    <bindingRedirect oldVersion="0.0.0.0-7.0.0.0" newVersion="7.0.0.0" />
    <codeBase version="7.0.0.0" href="lib\Radar_SignalR\Newtonsoft.Json.dll" />
</dependentAssembly>

```

Additions to <appsettings>

```

<add key="KioskCompleteAlertCodes" value="Prereg"/>
<add key="StyleStripRegex" value="((font-family|height|width|position|left|top|z-index|font-weight|font-size|border|outline|margin-top|margin-bottom|padding).*?(;|%))"/>
<add key="Localization" value="true"/>
<add key="KioskMode" value="false"/>
<add key="Theme" value="Radnet"/>

```

NEW FEATURES

Insurance Management

Feature #29500 - Send Patient Phone Number field to ImaginePay

Summary

This enhancement to Insurance Management will begin sending the Patient Phone Number field to ImaginePay.

With this change, RIS will attempt to transmit the patient's primary mobile number if one exists when a payment is processed through ImaginePay. Otherwise, the patient's alternate mobile phone number will be sent, or their alternate (non-mobile) phone number. RIS does not indicate that the contact method is "TEXT," if a non-mobile number is sent.

Configuration Instructions

No System Administrator actions are necessary to enable this feature.

Patient Demographics

Feature #23717 - Enhancements to Phone Number and Email entry UI

Summary

This enhancement to Patient Demographics updates the RIS user interface (UI) for entering patients Phone Number and Email values in a more efficient manner.

Previously, the UI for entering these values was updated to be more flexible, but the re-design introduced some inefficiencies that slowed the data entry process (for example, marking a second phone number as a mobile number).

Phone () - [Edit]
☒ Mobile ☐ No alternate
 Email [Edit]

With this change, the number of clicks required to enter and modify these values has been reduced.

Phone (in order of preference)

Description	Phone	Cell?
Mobile	?	<input checked="" type="checkbox"/>
Alternate	?	<input type="checkbox"/>
Click here to add a new row		

Email (in order of preference)

Email
Click here to add a new row

For both controls, special attention has been paid to tab navigation between the fields for efficient data entry.

Feature Description

Phone Control

The updated Phone control supports the following features:

- Quick entry of **Mobile** and **Alternate** phone numbers.

Note that the text of these labels cannot be edited (although the entered number can be removed if needed).

- Entry of additional numbers via data migration or manual entry, with free text entry of the **Description** label.

Note descriptions must be unique ("Mobile" and "Mobile2" or "Spouse's Mobile" would be acceptable).

- Direct editing and visual indication if a number is a **Cell?** number that supports SMS messaging.

Note that RIS always uses the **Mobile** number for messaging - refer to the **RADAR MESSAGING** section below.

- Sorting of numbers in order of preference, with easy access to re-ordering controls to support patient preferences, such as "Please call my house number first, then my mobile number. Calling my work number is a last resort."

Note that RIS does not necessarily text the "first" cell number in the list - refer to the **RADAR MESSAGING** section below.

Entering the same number more than once for a patient is permitted.

The previous **No alternate** phone number checkbox is no longer necessary and has been removed.

Email Control

The updated Email control operates similarly to the Phone control.

The primary email is the first one on the list.

Entering the same email more than once for a patient is permitted.

The previous **Primary** checkbox is no longer necessary and has been removed.

Mobile vs Home vs Work Numbers

Internally, RIS designates three special numbers as "Mobile", "Home" and "Work":

- The **Mobile** number in the phone control corresponds to RIS's internal "Mobile" number.
- The **Alternate** number in the phone control corresponds to RIS's internal "Home" number.
- The highest-level additional phone number corresponds to RIS's internal "Work" number.

Note that if a patient has only a **Mobile** and **Alternate** number then the "Work" number will remain blank.

RADAR SMS Messaging

Previously, RIS allowed phone numbers to be re-ordered and any phone number marked as "mobile." RIS would automatically store the 'highest' ordered mobile number internally as the **c_patient.mobile_phone_number**, which is the value that RADAR utilizes for text communication.

With this change, the (blue) **Mobile** field is a fixed field and will always be used as the recipient of any text messages originating from RIS. Re-ordering of cell numbers, even placing them "above" the mobile number, will not alter the number internally stored at **c_patient.mobile_phone_number**.

So, in the following example, despite the spouse's number being promoted to the top of this list, it will **not** be the one texted; the **Mobile** number will be used by default:

Phone (in order of preference)			
Description	Phone	Cell?	
Spouse's Mobile	(202) 456-6213	<input checked="" type="checkbox"/>	↑
Alternate	(202) 456-1414	<input type="checkbox"/>	↓
Mobile	(202) 456-1111	<input checked="" type="checkbox"/>	+
Click here to add a new row			

Configuration Instructions

No System Administrator actions are necessary to enable this feature; however, optional configuration is available:

- Phone number entry uses standard phone number input mask unless disabled in System Configuration: `PhoneNumberFormatDisabled = True`
- While neither the **Mobile** or **Alternate** numbers are required in the phone control, validation rules should be configured to ensure that at least one number was entered. For example:

Data Mapping	
DataSetName	Patient
DataTableName	c_patient_phone
FieldName	(ComputedExpression)
General	
ActiveFlag	True
AlertType	PreventSave
IgnoreNulls	True
MessageTemplate	Patient phone was not provided
Name	PhoneRequired
Negated	False
PracticeCode	
ValidatorType	RangeValidator
Misc	
EntLibValidator	
Misc Parameters	
AdditionalRowFilter	
DefaultValue	
DomainMembers	
RegexPattern	
Range Parameters	
LowerBound	1
LowerBoundUnit	None
UpperBound	1000
UpperBoundUnit	None
Status Filters	
IntendedUIAction	UI_PatientUpdated
OnOrAfterStatus	
Table Expressions	
Expression	Count(patient_phone_key)
ExpressionFilter	
ActiveFlag Identifies whether this rule is enabled	

- Similarly, a validation rule can ensure at least one email was entered. For example:

Data Mapping	
DataSetName	Patient
DataTableName	c_patient_email
FieldName	(ComputedExpression)
General	
ActiveFlag	True
AlertType	PreventSave
IgnoreNulls	True
MessageTemplate	Email Address was not provided
Name	EmailRequired
Negated	False
PracticeCode	
ValidatorType	RangeValidator
Misc	
EntLibValidator	
Misc Parameters	
AdditionalRowFilter	
DefaultValue	
DomainMembers	
RegexPattern	
Range Parameters	
LowerBound	1
LowerBoundUnit	None
UpperBound	1000
UpperBoundUnit	None
Status Filters	
IntendedUIAction	UI_PatientUpdated
OnOrAfterStatus	
Table Expressions	
Expression	Count(patient_email_key)
ExpressionFilter	

PACS Integration

Feature #28154 – Intelrad PACS integration option to always send Accession Number

Summary

This enhancement to PACS Integration adds a PACS configuration option to allow sites to concurrently support integrations with both the Intelrad PACS viewer and GE's PACS-IW viewer by forcing the Accession Number to be used (even if an External Study Identifier value exists), as is required by Intelrad.

Feature Description

Previously, RIS integration would "fall back" the external_study_identifier value when absent and use the accession_number value instead, as required for Intelrad integration.

However, sites wishing to integrate with PACS-IW will be populating this external_study_identifier column with NCD values from PACS IW. To support this workflow, the Intelrad integration needs to be configurable so as to look directly at accession_number.

With this change, a new PACS configuration option called `UseAccessionNumber` can be used in the `ConfigOptions` field of the PACS Server lookup table.

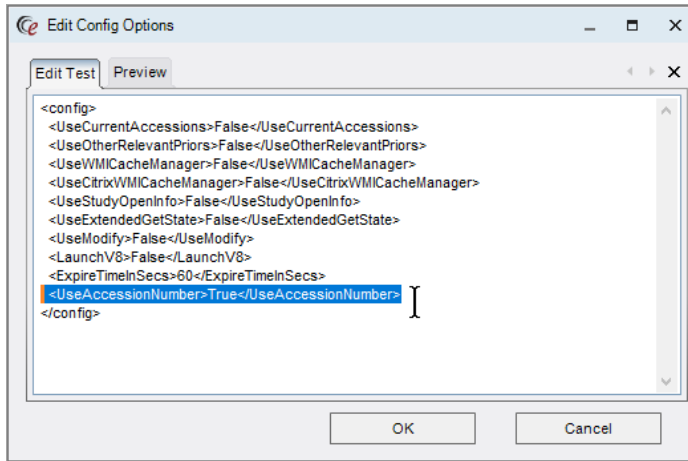
- The default value of `False` maintains the existing behavior of attempting to use external_study_identifier and then fall back to accession_number.
- When set to `True`, it will force the use of accession number even if the study has an external_study_identifier value.

Configuration Instructions

RIS Client

Changes to PACSServer Configuration

- Update the `PACSServer` for each PACS-IW server by updating the `Config Options` to enable the `UseAccessionNumber` option:



Setting	Default	Purpose
UseAccessionNumber	Value=[True False], Default=[False]	When True, integration forces the use of Accession Number.

Digital Forms

Feature #28187 - Enhanced support for multiple digital forms per order

Summary

This enhancement to Digital Forms adds a dropdown that allows users to access all copies of a digital forms when more than one identical form is associated to an order, as well as introducing functionality to work with multiple duplicate forms at once. By selecting `All Studies` (or `All Orders`) from this dropdown, user input will be propagated across the identical forms and any values that differ between those digital forms will be visually identified.

WHEN A DIGITAL FORM APPLIES TO MULTIPLE STUDIES, THE DEFAULT BEHAVIOR IS TO UPDATE ALL FORMS WITH USER INPUT AT THE SAME TIME.

Background

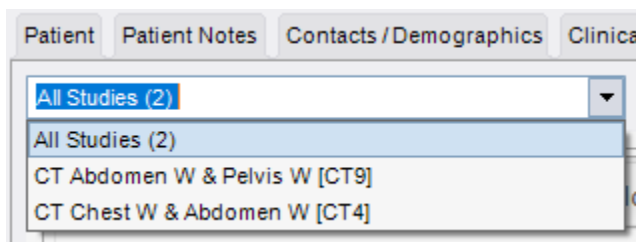
Previously, when using the Scheduling and Registration screens, orders with two or more studies that both used an identical digital form would only display one copy of the form (the one associated to the lowest order_key). If the data needed to be different on the other order, the PSR would have to open the study in the View/Edit window to edit that instance of the form.

Feature Description

With this change, digital forms in RIS have been enhanced to support viewing and editing answers for multiple orders or studies in both Scheduling and Reception. When enabled, via a new `Clinical.DigitalForms.FormSelection` RIS Access String, a new dropdown will be displayed at the top of the digital form tab to select which version of the order's digital form is being displayed/edited. This allows the PSR to quickly switch between the different instances of the data form.

Previously, it could be a tedious process to switch between multiple forms to complete them, especially when many values on the form were identical.

With this change, an additional option in the dropdown (selected by default), allows the PSR to select to edit `All Studies` (or `All Orders`) concurrently. When selected, any form input is duplicated across all the identical digital forms. For example, if the patient's height is entered while `All Studies` is selected, RIS will automatically copy that value to all the identical digital forms in that order. Any existing height values on the other forms will be overwritten, but no other values are modified.



When values between the forms differ, such as the name being "John" on one form, blank (i.e., not yet answered) on another, and "Jane" on a third form, then no value will be displayed, and the field will be highlighted with red shading to indicate the conflict. Hovering these shaded fields will display a tooltip that indicates the differing values between the forms.

If the PSR then enters a value while "All Studies" is active, RIS will update all three forms with the new value and remove the colored shading.

BECAUSE THERE IS CONFLICT IN THE USER INPUT BETWEEN THESE TWO STUDIES, RIS DOES NOT DISPLAY ANY VALUE IN THE COMBINED VIEW.

Configuration Instructions

No System Administrator actions are necessary to enable this feature.

Utilization Management

Feature #28950 - Changes to UM workflow after UM is finalized

Summary

This enhancement to Utilization Management (UM) updates how the UM workflow handles procedure codes that are modified after UM was completed. Procedure codes that were **replaced** will not require UM to be re-done for the new replacement procedure, while procedure codes that were **added** (and meet the rules to require UM) will be treated as a new procedure with a UM Clock that starts at 0.

Feature Description

It is common at RadNet for a procedure code that has been through UM Review to be replaced with a different Procedure Code at some later point in the workflow. For example, an MR Brain W might have completed UM Review, but at the time of registration, it is changed to an MR Brain W WO (or sometimes even a more significant change like a CT Head W).

Previously, the UM workflow considered this change to be a new procedure that must go through UM Review again with a Created Date matching the originally ordered procedure (and thus a UM Clock that was already well underway). Additionally, these orders would not fall back to the UM Review WL, so the UM team was unaware there was a new review to be done, impacting turnaround times.

With this change:

- If a procedure code is **replaced** (i.e., the procedure is removed via the “black x” and replaced with a different procedure or the procedure is changed from the Documentation tab on View/Edit or Perform Exam screens), UM will NOT be re-run for the new replacement procedure.
 - The UM `Status`, `Resolution`, `Owner`, `UM Review Hours` (and clock), and all authorization date timestamps for the original procedure are copied to the new replacement procedure.
- If a new UM-required procedure code is **added** (i.e. a new line item is added to the order and it meets the rules to require UM), that procedure will be treated as a brand new UM procedure instead of re-using the original UM Required date.
 - The `Status` for this new procedure will have the initial UM Status (e.g., Received).
 - The Authorization Dates details (recently updated with Feature #27036) will populate as follows:

Authorization Dates		
Request received	12-09-2020 01:59 PM	
Order created	12-09-2020 02:00 PM	Macl [redacted]
UM required	12-09-2020 01:57 PM	
UM complete	12-09-2020 03:09 PM	Macl [redacted]
UM review hours	1	
Last updated	12-09-2020 03:09 PM	Macl [redacted]

- The `Request received`, `Order created`, `UM required`, and `Last updated` timestamps for the new procedure will all reflect the date/time when the new procedure code was added to the order.
- `UM complete` will be blank.
- `UM review hours` will be calculated based on the new procedure’s UM Required Date.

- As with other procedures requiring UM Review and not in a Final UM Status, the order will now appear on the UM WL with a UM Required flag.

Configuration Instructions

No System Administrator actions are necessary to enable this feature.

AUC

A second stage of Appropriate Use Criteria (AUC) development is underway and new features are being added incrementally to support several new workflows that will enhance the basic AUC workflow that is currently available.

This functionality will be described at a later time when all of the related feature development is available. As incremental development is completed, a number of new Configuration Settings and Access Strings will be added to eRAD RIS. Because the features that are part of this incremental development effort are intended to be enabled together, please leave all new AUC Access Strings and System Configuration settings at their default setting, which will disable the features until the related development is available. The functionality of the entire second stage of AUC development will be described at that time.

Included in this release are Features #29104 and #29110.



This is an incremental delivery item. As indicated in the New Settings section, please leave all related Access String and System Configuration settings at their default setting, which will disable the features until additional functionality is available.

Online Registration Portal

Feature #28748 - Merge Online Registration into RIS

Summary

This enhancement integrates the work of the recent Online Registration Portal project into the core RIS product rather than delivering it as an independent component. All functionality is available including new features from Online Registration Version 10.

Background

The Online Registration Portal (ORP) has always been a component of the RIS ecosystem, unable to function without the core RIS product installed and operating. To ensure rapid development and deployment of new features in this portal, it was kept independent of the RIS development/deployment process.

The portal now has a mature and stable feature set and no longer needs new features added rapidly, and RIS is now on a bi-weekly deployment, so the decision was made to merge the feature set into the bi-weekly RIS deployment. In other words, when any changes are new features need to be added to the ORP, they will be added in the next RIS build instead of to a new ORP deployment.

Feature Description

This release of RIS + ORP includes features from the final previously un-released Version 10 of Online Registration. Features from ORP build 1 to build 9 are separately documented.

With this change:

- The installation process for the two components has been merged.

- A single Digital Forms Editor can be used for internal and external digital forms.
- The configuration settings for Online Registration have been slightly renamed and migrated into the standard RIS System Configuration table.

Note that it is still necessary to host two instances of the digital forms service – one for external access, and one for internal RIS use.

New Features from Online Registration Version 10

This release of RIS + ORP includes the following features from the final but previously un-released Version 10 of Online Registration.

Ability to attach digital forms to studies that occurred in the past

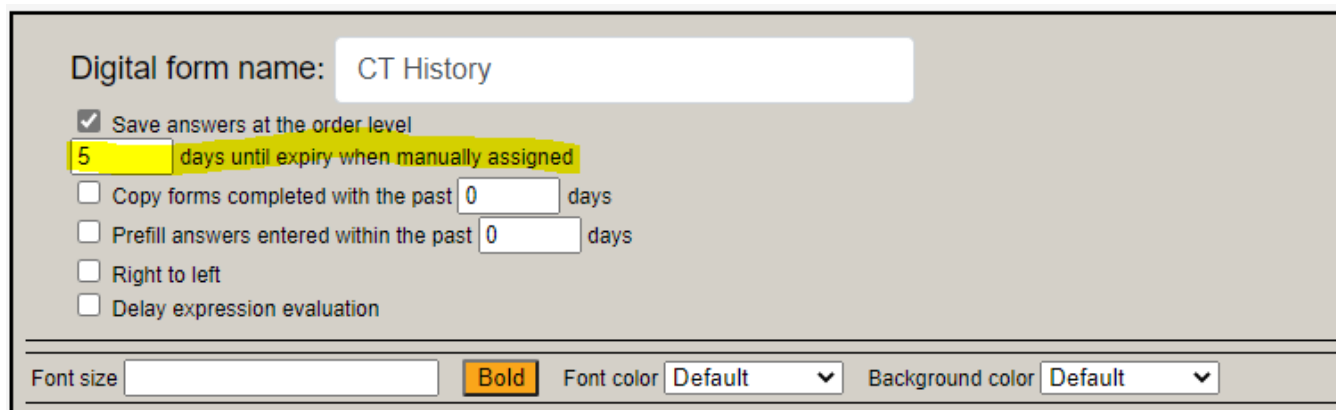
Previously, the patient could only complete Online Registration forms for studies that were a configurable number of days in the future, and more importantly, the study that the forms were related to had to be in a status of Scheduled or Arrived. If the exam had gone beyond these statuses, the portal would not let the patient complete those forms. With the Manage Online Registration Forms (MORF) tool, a user could attempt to add additional forms for the patient to complete after the study was signed, but because of this status check, the patient would not be able to complete them.

With this new feature, it is now possible for the PSR to select a digital form and add it to an older completed study (in Signed status for example). Once this is done, when the patient connects to the Online Registration Portal, they will be able to enter data onto this form.

One thing that needed to be considered during the development was how long to keep this newly added form active so that the patient could fill it out. So, if the patient never filled it out and had a new appointment in a year's time, you would not want this form to display at that time. It was decided to add a new `ORPDaysUntilExpiry` RIS System Config value (with a default of 2 days) and allow this value to be overridden on for any particular form.

Digital Forms Editor change:

In addition, this duration can be overridden on the form level. A new field to the digital form itself that would denote how many days after assignment to a study, that the form would remain active and able to be filled in.



Support switching a form from Order level to Study level without losing data

In the Digital forms Editor, it is possible to change a form from saving data at the order level, to saving it at the study level and vice-versa. When this is done, any data that was previously entered by a patient seems to disappear (it actually still is in the database, but it is not accessible).

With this new feature, the digital forms infrastructure will now check at the configured level for data. If no data is found, it will then check at the other level. If data is found, it will display it.

Show which server the Digital Forms Editor is connected to

Currently, there is no easy way to know which server your Digital Forms Editor is connected to. With this change, the server name now appears in several locations. It will appear in the tab title of the editor, on the login page of the editor, and on the page that lists the digital forms.

Compress exported digital forms

Exporting digital forms can sometimes create large files. With this new feature the file is zipped by the system so that they can be more easily transported between systems. In addition the .zip file can be directly imported by the digital forms editor.

Support type-ahead question picker in the expression editor and the manage rules screen

In the past, it could be difficult to locate the proper question in the drop down of questions in the Digital Forms Editor ruleset builder and expression editor. Now, this control supports type-ahead. Simply type in the first number of characters of the question, and the list will narrow until the specific one is selected.

The screenshot displays the Digital Forms Editor interface. On the left, a 'Select question' dropdown menu is open, showing a list of questions. The '2nd number (second_number)' option is highlighted in blue. The list includes: 'State Dropdown (state_dropdown)', 'State Typeahead (question_2)', '1st number (first_number)', '2nd number (second_number)', and '3rd Number (sum)'. On the right, the 'Expression' field contains the text '\$A + \$B'.

Improve error messages from the expression builder

Previously the expression editor would return a simple “syntax error” for an incorrectly formatted expression. With this change, error messages are improved and include additional technical details to give the administrator a better sense of what the problem with the expression is.

Configuration Instructions

Service Team assistance is required to enable this feature.

Changes to RIS System Configuration Settings

- A new feature was added to this version of RIS which requires a new configuration setting: `ORPDaysUntilExpiry` is new with this release.
- During the normal RIS upgrade process a migration script will update all existing configuration settings to the new format. No intervention is needed.
- The existing configuration settings that were previously stored in `z_configuration` have now been slightly renamed and added to the core RIS SysConfig table.

The following related settings were added or updated:

Setting	Default	Purpose
ORPAPIEnabled	Value=Boolean, Default=[FALSE]	When True, URL calling to the Online Registration Portal is enabled. Added in v2021.3.15 #28748
ORPAPIIntegrationKey	Value=String, Default=Blank	String of random characters used to login to the Online Registration Portal “Manage Online Registration Forms” (MORF) page. Added in v2021.3.15 #28748
ORPClientKey	Value=String, Default=Blank	A short unique string of random characters identifying a specific installation of the Online Registration Portal, e.g. 4329fuir3jg3. Added in v2021.3.15 #28748
ORPDaysUntilExpiry	Value=Days as Number, Default=[2]	Default number of days that the patient will be able to fill in a form that was manually added after the original study had already been completed. Added in v2021.3.15 #28748

ORPEXternalBaseURL	Value=String, Default=Blank	The base URL of the Online Registration Portal landing page used for patient access, e.g. https://myradiologyconnectportal.com/Online_Forms_Test/DigitalForms/PatientKioskLanding. Added in v2021.3.15 #28748
ORPFormsMaxDays	Value=Days as String, Default=Blank	Number of days into the future the Online Registration Portal will search for pending forms for a patient. Added in v2021.3.15 #28748
ORPFriendlyName	Value=String, Default=Blank	A human-readable name identifying the Online Registration Portal environment. Added in v2021.3.15 #28748
ORPTokenSalt	Value=String, Default=Blank	A random string that gets added to the encryption process for generating a unique login token for improved security. Added in v2021.3.15 #28748
ORPUserID	Value=String, Default=Blank	The "User ID" that is recorded in the audit trail for all actions that occur in the Online Registration Portal, such as when a form is saved by a patient. Added in v2021.3.15 #28748

Patient & Provider Portals

Feature #29250 - Option to suppress email/SMS entry for appointment confirmation from the Portals

Summary

This enhancement to the Patient and Provider Portals introduces a configuration option to remove the ability to enter email/SMS values in the confirmation step of the Make Appointment workflow with an optional override for each portal.

Previously, a patient or referring provider would enter these values to request text/email confirmations be sent to the patient when making an appointment on the portal. However, some customers are utilizing a RADAR-based Patient Appointment Communication workflow where all patients will receive these communications via another mechanism and would like to disable this option as it creates duplicate messages.

The screenshot shows a light blue background with two sections. The first section, 'Email Confirmation', has an envelope icon and a checkbox labeled 'Yes. Send this appointment confirmation via unsecured email. This email will contain personal health information.' Below this is a text input field containing 'name@email.com' and a blue 'REMOVE' button. The second section, 'Text Message Confirmation', has a speech bubble icon and a text input field containing '(000) 000-0000' with a blue 'REMOVE' button. Below the text input field is a blue link labeled 'ADD ANOTHER'.

With this change, the data entry UI for this action in the Make Appointment workflow (shown above) can be hidden at the organization level (System Configuration) or separately for each portal instance for the Patient and Provider Portals.

Configuration Instructions

System Administrators must complete the following actions to enable this feature:

RIS Client

Changes to RIS System Configuration Settings

To configure the default system behavior for this functionality:

- To hide the email/SMS data entry UI during the confirmation step while making an appointment, set the respective configuration settings to **False** for the Patient or Provider Portal.

System Config Code	Value	Default
Contains: appointmentcon	Contains:	Contains:
PPEnableAppointmentConfirmationRequest	True	True
RPEnableAppointmentConfirmationRequest	True	True

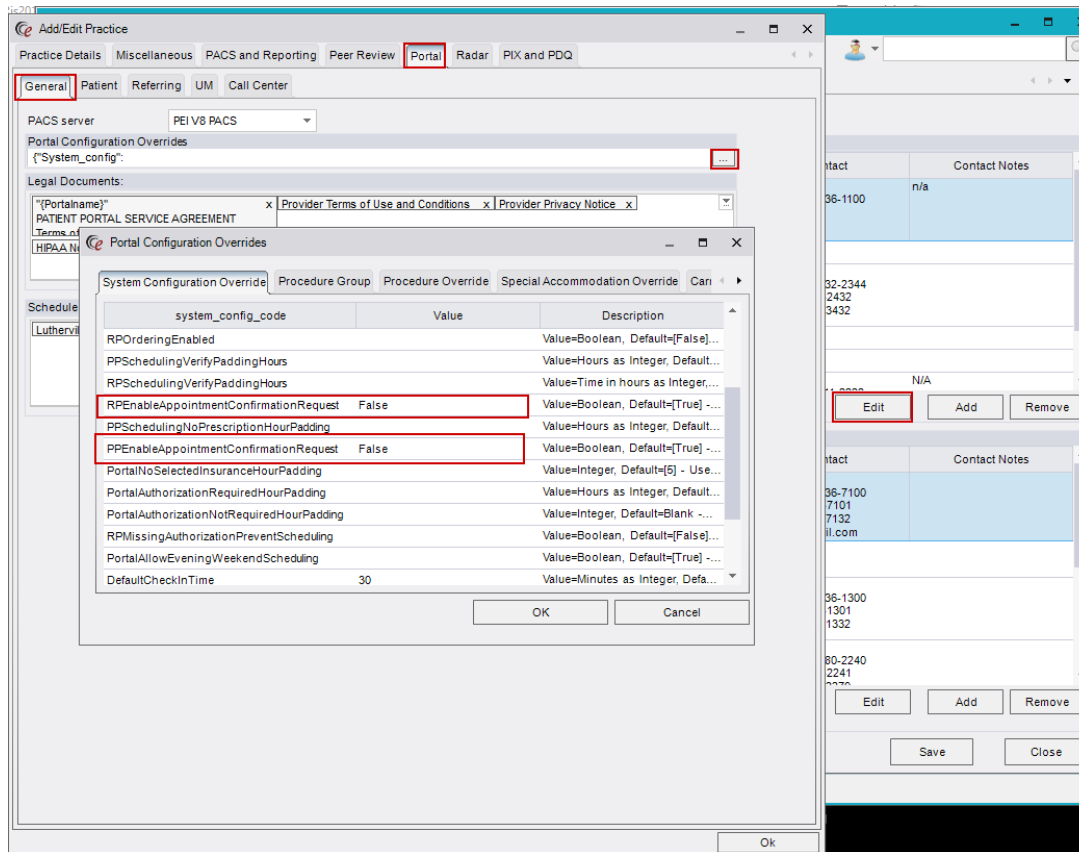
The following settings were added or updated with this release:

Setting	Value and Default	Purpose
RPEnableAppointmentConfirmationRequest	Value=Boolean, Default=[True]	When True, users may enter an email/SMS for appointment confirmation from the Provider Portal. When False, this option is hidden. Supports site group override. Added in v2021.3.15 #29250
PPEnableAppointmentConfirmationRequest	Value=Boolean, Default=[True]	When True, users may enter an email/SMS for appointment confirmation from the Patient Portal. When False, this option is hidden. Supports site group override. Added in v2021.3.15 #29250

Changes to Organization Configuration Settings

To override the default behavior of this configuration of this functionality at the practice level:

- Open the **Organization** RIS Lookup Table Editor » **Edit** organization » **Portal** tab » **Referring** tab » **Portal Configuration Overrides** and locate any existing entry.
- Update or add an entry for the corresponding configuration setting for the Patient or Provider Portal.



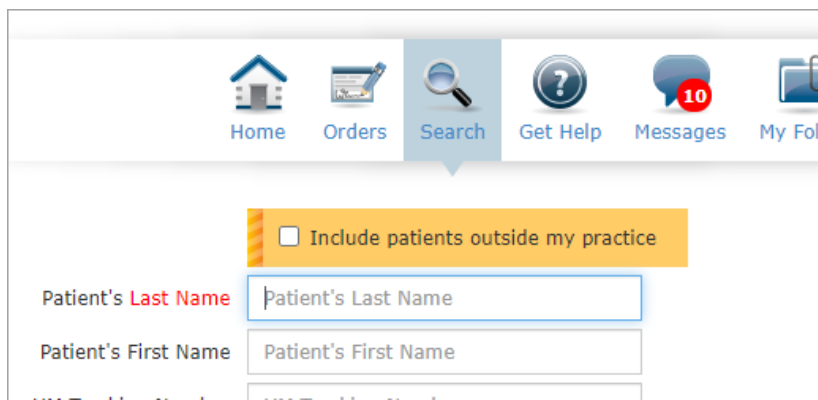
Provider Portal

Feature #17256 - Option to disable "break the glass" feature in the Provider Portal patient search

Summary

This enhancement to the Provider Portal introduces a configuration option to disable the "break the glass" feature when performing a patient search in the Provider Portal with an optional override for each portal instance.

Previously, the search screen included an "Include patients outside my practice" checkbox that allows the user to expand their search for all patients within the RIS database. This can be helpful when patients are referred to a specialist who has a portal account but did not refer the patient for their imaging.



With this change, configuration is available to remove the checkbox from the UI, meaning provider users would only be able to see search results for patients associated with their medical practice.

Configuration Instructions

System Administrators must complete the following actions to enable this feature and Service Team assistance is required for some actions:

RIS Client

Changes to Organization Configuration Settings

To override the default behavior of this configuration at the portal instance level:

- Open the `Organization` RIS Lookup Table Editor » `Edit` organization » `Portal` tab » `Referring` tab » `Portal Configuration Overrides` and locate any existing entry.
- Update or add an entry to set the `IncludePatientsOutsidePractice` value as `True`, `False`, or `System Default` as desired.

RESOLVED ISSUES AND KNOWN LIMITATIONS

Resolved Issues

This release resolves the following issues:

Redmine #	Subject
28848	Resolved Linked Reporting issue where cancelling the non-primary study resulted in the primary study not being added to the All Pending Dictation worklist.
28876	Resolved Scanning issue where the exam date was not appearing on the Disc Producer label.
28962	Resolved Provider Portal issue where "Sort By" preferences in Account settings were not displayed on the Scheduled tab.
29096	Resolved View/Edit issue where the Report tab was not available in View/Edit for signed exams.
29098	Resolved Lookup Tables issue where the InsuranceServiceTypeRule RIS Lookup Table was not populating.
29133	Resolved ICD issue where adding an ICD to the indications tab in the IVT WF returned an error.
29134	Resolved Worklists issue where Materialized Worklists could freeze intermittently due to deadlocks.
29137	Resolved Login issue where some user accounts were being disabled due to a case-sensitive username rule.
29138	Resolved Login issue where the failed login count was not being reset.
29181	Resolved Online Registration Portal issue where adding a non-mobile phone number would set it as the primary number.
29215	Resolved Inbound Document issue where users outside of the RIS time zone were unable to save orders.
29254	Resolved Online Registration performance issue where expired c_pending_questionnaire table values were not being removed.
29255	Resolved Online Registration performance issue due to deadlocks on the c_pending_questionnaire table.
29257	Resolved Online Registration upgrade issue where upgrade scripts failed to add some columns.
29307	Resolved Insurance Eligibility issue where Wellcare payer was missing coverage status and plan name values.
29315	Resolved Patient Demographics issue where new phone numbers were not defaulting to "cell."
29316	Resolved Patient Demographics issue where deleting a patient's phone number or email returned an error.
29317	Resolved UI Look and feel issue where the phone number grid order was changing when adding phone numbers.
29380	Resolved Worklists issue where the database worklist cache expired too often, causing performance issues.
29417	Resolved RADAR Secure PIC issue where sending SecurePIC request returned an error.
29422	Resolved Radiology Reporting issue where the autofeed workflow was skipping rows for previously cached cases.
29450	Resolved Lookup Tables issue where adding a new InsuranceServiceTypeRule would not pass validation.
29463	Resolved Scheduling issue where tabbing to the Nudge icon returned access string error.

Redmine #	Subject
29467	Resolved Document Distribution issue where Document Distribution email jobs could be set to InProgress without a value in job_id.
29490	Resolved Radiology Reporting issue where opening reporting screens returned a time zone error.
29568	Resolved Radiology Reporting issue where the autofeed workflow would return an error when opening the next row.

New Known Limitations

The following new Known Limitations were identified with this release:

- **BUG # 29380 - WORKLISTS ISSUE WHERE THE DATABASE WORKLIST CACHE EXPIRES TOO OFTEN, CAUSING PERFORMANCE ISSUES.**
 - When using different workstation from one day to another, it is possible a workstation will cache the `My Dictate by Date WL` for the same date the study that was just reset.
 - The likelihood of this happening is very low and the issue will self-resolve the following day.
- **BUG # 29606 - CAN SCHEDULE A UM REQUIRED ORDER THAT WAS PREVIOUSLY UM COMPLETE**
 - When a UM-required order is placed and UM is completed, adding a **new** UM-required exam at the time of registration **should** also prevent the user from moving forward with registration (for users without permission to Schedule when UM is required but not completed). Currently, RIS does not block registration in this scenario, although the exam is still identified as UM required and it will still appear on the UM WL.
 - As a workaround, the UM Department may sort the UM worklist by `Status Code` to easily identify if UM is required for patients whose exams are already in progress.

VERSION DETAILS

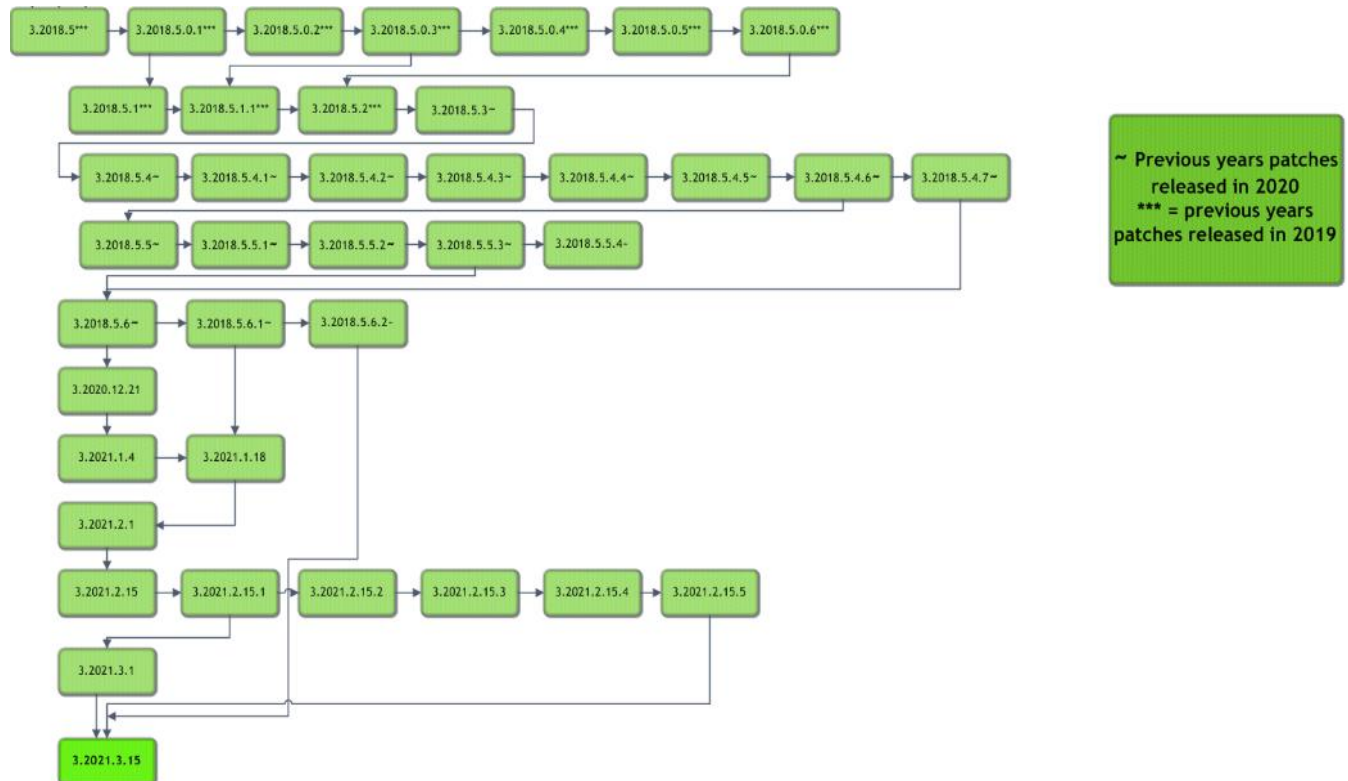
Package Contents

The release package includes the following folders:

@Hotfixes	04/20/12 8:51 AM
_Documentation	03/26/21 10:03 AM
_ReleaseNotes	03/26/21 2:20 PM
Client Application	03/26/21 9:58 AM
DB	03/26/21 9:59 AM
External WebAPI	03/26/21 9:58 AM
Identity Service	03/26/21 9:59 AM
Management Reports	03/26/21 9:59 AM
RIS Service	03/26/21 9:58 AM
Service Tools	03/26/21 10:10 AM
Web Digital Forms	03/26/21 10:00 AM
Web Patient Connect	03/26/21 10:02 AM
Web Referring Connect	03/26/21 10:03 AM
Web UM Connect	03/26/21 10:03 AM
WebHelp	03/26/21 9:58 AM
Build_2021.3.15.zip	03/26/21 10:07 AM
RISServerMasterCert.pfx	03/31/16 1:38 PM

Code Stream

The following source code branches have been merged into this release:



LEGEND:

Light Green = Previously Released software

Gray = Internal version, non-release version

Bright Green = Current Release

eRAD RIS Release Version Numbers

The following table details the version identifiers for components in this release:

Build	Patch	UI Version	Core Version	WS Version	DB Version	Digital Forms	Patient Portal	UM Portal	Provider Portal	Notes
2018.5	5	3.18.5.5(3GB)	3.18.5.5	3.18.5.5	3.18.5.5.0.02404209	3.18.5.5	3.18.5.5.0.1019	3.18.5.5.0.1019	3.18.5.5.0.1019	Full version release
2018.5	5.1	3.18.5.5.1(3GB)	3.18.5.5.1	3.18.5.5.1	3.18.5.5.1.02460669	3.18.5.5.1	3.18.5.5.1.1023	3.18.5.5.1.1023	3.18.5.5.1.1023	GUI, Web Services, DB, Patient/Provider/UM Portals and Digital Forms
2018.5	5.2	3.18.5.5.2(3GB)								GUI
2018.5	5.3	3.18.5.5.3(3GB)	3.18.5.5.3	3.18.5.5.3	3.18.5.5.3.02479332					GUI, Web Services, DB
2018.5	5.4	3.18.5.5.4(3GB)	3.18.5.5.4	3.18.5.5.4	3.18.5.5.4.02587388					GUI, Web Services, DB
2018.5	6	3.18.5.6(3GB)	3.18.5.6	3.18.5.6	3.18.5.6.0.02571320	3.18.5.6.0	3.18.5.6.0.1050	3.18.5.6.0.1050	3.18.5.6.0.1050	Full version release
2018.5	6.1	3.18.5.6.1(3GB)	3.18.5.6.1	3.18.5.6.1	3.18.5.6.1.02601339	3.18.5.6.1	3.18.5.6.1.1070	3.18.5.6.1.1070	3.18.5.6.1.1070	GUI, Web Services, DB, Patient/Provider/UM Portals and Digital Forms
2018.5	6.2	3.18.5.6.2(3GB)	3.18.5.6.2							GUI
2020.12.21	-	3.20.12.21.0(3GB)	3.18.5.6	3.20.12.21.0	3.20.12.21.0.02608693	3.20.12.21.0	3.20.12.21.0.897	3.20.12.21.0.897	3.20.12.21.0.897	Full version release
2021.1.4	-	3.21.1.4.0(3GB)	3.21.1.4				3.21.1.4.0.1075	3.21.1.4.0.1075	3.21.1.4.0.1075	GUI and Patient/Provider/UM portals
2021.1.18	-	3.21.1.18.0(3GB)	3.21.1.18	3.21.1.18.0	3.21.1.18.002652234	3.21.1.18.0	3.21.1.18.0.1081	3.21.1.18.0.1081	3.21.1.18.0.1081	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.1	-	3.21.2.1.0(3GB)	3.21.2.1	3.21.2.1.0	3.21.2.1.002672074	3.21.2.1.0	3.21.2.1.0.1090	3.21.2.1.0.1090	3.21.2.1.0.1090	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.15	-	3.21.2.15.0(3GB)	3.21.2.15	3.21.2.15.0	3.21.2.15.002698266	3.21.2.15.0	3.21.2.15.0.1111	3.21.2.15.0.1111	3.21.2.15.0.1111	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.15	1	3.21.2.15.1(3GB)	3.21.2.15.1	3.21.2.15.1		3.21.2.15.1	3.21.2.15.1.1113	3.21.2.15.1.1113	3.21.2.15.1.1113	GUI, Web Services, Patient/Provider/UM portals and Digital Forms
2021.2.15	2	3.21.2.15.2(3GB)	3.21.2.15.2	3.21.2.15.2		3.21.2.15.2	3.21.2.15.2.1122	3.21.2.15.2.1122	3.21.2.15.2.1122	GUI, Web Services, Patient/Provider/UM portals and Digital Forms
2021.2.15	3	3.21.2.15.3(3GB)	3.21.2.15.3							GUI
2021.2.15	4	3.21.2.15.4(3GB)	3.21.2.15.4	3.21.2.15.4	3.21.2.15.402732838	3.21.2.15.4	3.21.2.15.4.1133	3.21.2.15.4.1133	3.21.2.15.4.1133	GUI, Web Services, DB, Patient/Provider/UM portals and Digital Forms
2021.2.15	5	3.21.2.15.5(3GB)	3.21.2.15.5	3.21.2.15.5	3.21.2.15.502738557					GUI, Web Services and DB
2021.3.1	-	3.21.3.1(3GB)	3.21.3.1	3.21.3.1	3.21.3.1.002712308	3.21.3.1	3.21.3.1.0.1119	3.21.3.1.0.1119	3.21.3.1.0.1119	GUI, Web Services, Patient/Provider/UM portals and Digital Forms
2021.3.15	-	3.21.3.15(3GB)	3.21.3.15	3.21.3.15	3.21.3.15.002747230	3.21.3.15	3.21.3.15.0.1144	3.21.3.15.0.1144	3.21.3.15.0.1144	GUI, Web Services, Patient/Provider/UM portals and Digital Forms