

User Release Notes

for eRAD RIS
Version 1
Build 41.1

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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 41 and subsequent server releases. This version of eRAD RIS is referred to as Build 1.3.41.

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 1.41.1 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
Ris.exe.config	MModalDataTransferValue	None	Override the user preference for M*Modal's Data Transfer. See feature Reporting – Ability to Configure MModal Transfer Task in this document for more details

5. New Features and Enhancements

Reporting – Talked to Doctor Macro

Radiologists often call the referring physicians office while reading cases with time sensitive findings. In these cases they contact the referrer to let them be notified and take any required actions before the report has been drafted, QAed, signed and distributed.

After contact with the referring office the radiologist add details to the report. To support such calls we have added custom fields in the Template/Macro editor to insert a “Talked to Doctor” statement in the report.

Fields added are (with examples)

TimeStamp12 - 4:30pm

TimeStamp24 – 16:30

Today - 11-20-2013

ReferringShort – Dr. Last

ReferringLong – Dr. First Last

The screenshot shows a 'Field Attributes' dialog box with the following fields and options:

- Name :
- Cue :
- Grammar :
- Default :
- Dataset :
- Table :
- Column :
 - ReferringLong
 - ReferringShort
 - SignsAndSymptoms
 - Technique
 - TechNotes
 - TimeStamp12
 - TimeStamp24
 - Today

Figure 5.1 – Custom fields added for creation of Talked to Doctor macro

Reporting – Open Patient Folder when Signing

Users currently have two main layouts. Either they are signing or dictating. Reason for this is that most signing tasks don't require the full patient folder detail, pacs images or dictation. So the signing layout is typically much smaller or less detailed than the dictation layout.

Users on occasion do want to display the Patient Folder and other detail similar to dictation when signing reports.

We now provide the user ability to load the dictation layout (patient folder) when signing reports. This is a manual click to load the dictating (patient folder) layout.

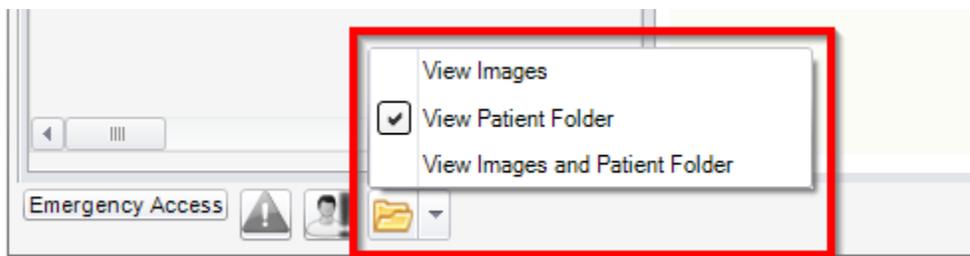


Figure 5.2 – Signing mode layout options

In the example above you can see that the Load Images button has been converted to be a split button with the additional options for “View Patient Folder” and “View Images and Patient Folder” with the “View Patient Folder” currently set as the default. This new dropdown button acts like other dropdown buttons for the reporting screen. Click the arrow to open other options and select option as desired. Holding the CTRL+<option> will render it the default and save in your user preferences.

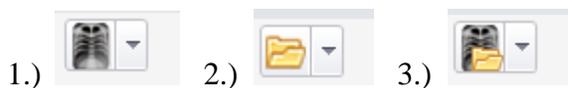


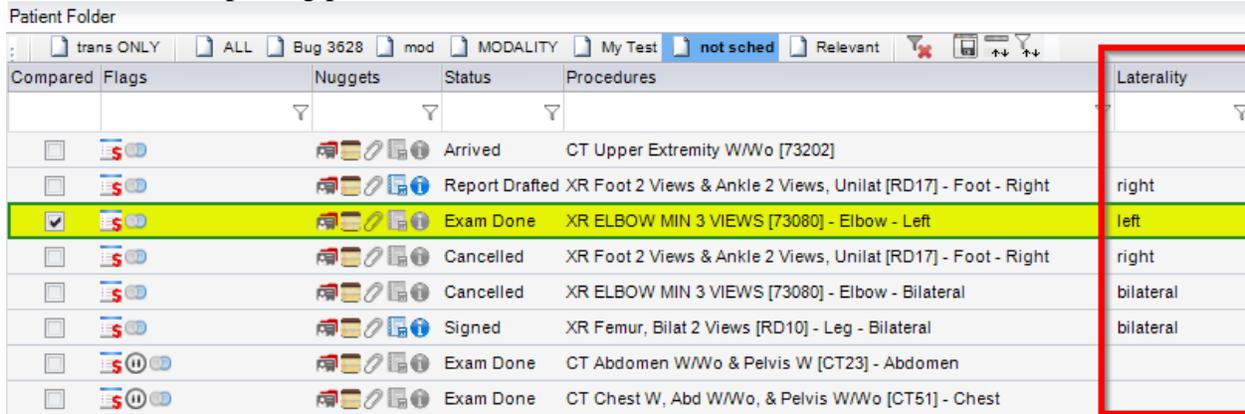
Figure 5.3 – Options available as default

The three images above show the icon when set as default action for 1.) View Images 2.) View Patient Folder 3.) View Images and Patient Folder

When the Sign Report window is reloaded with the next study either from the work list or from the Submit/Sign/Suspend/Skip and Continue option the users Signing Layout will be used. What this means is that it will load the dictation layout when clicking Load Patient Folder but it won't be sticky.

Reporting – Add Laterality to the Patient Folder

The patient folder within the reporting window had the laterality in the procedure description, but it was desired to have this in its own column. In 41.1 this column has been added to the patient folder. The column can be filtered, sorted, removed from current view, etc... as other columns in the reporting patient folder.



Compared	Flags	Nuggets	Status	Procedures	Laterality
<input type="checkbox"/>			Arrived	CT Upper Extremity W/Wo [73202]	
<input type="checkbox"/>			Report Drafted	XR Foot 2 Views & Ankle 2 Views, Unilat [RD17] - Foot - Right	right
<input checked="" type="checkbox"/>			Exam Done	XR ELBOW MIN 3 VIEWS [73080] - Elbow - Left	left
<input type="checkbox"/>			Cancelled	XR Foot 2 Views & Ankle 2 Views, Unilat [RD17] - Foot - Right	right
<input type="checkbox"/>			Cancelled	XR ELBOW MIN 3 VIEWS [73080] - Elbow - Bilateral	bilateral
<input type="checkbox"/>			Signed	XR Femur, Bilat 2 Views [RD10] - Leg - Bilateral	bilateral
<input type="checkbox"/>			Exam Done	CT Abdomen W/Wo & Pelvis W [CT23] - Abdomen	
<input type="checkbox"/>			Exam Done	CT Chest W, Abd W/Wo, & Pelvis W/Wo [CT51] - Chest	

Figure 5.4 – Reporting patient folder with new Laterality column

Reporting – Laterality Check when Transcribing Reports

In previous versions a laterality check was performed when signing and when verifying reports. In 41.1 the laterality check is performed for transcription as well as signing. Transcription users will need to have the User Preference Laterality Check selected to enable this feature.

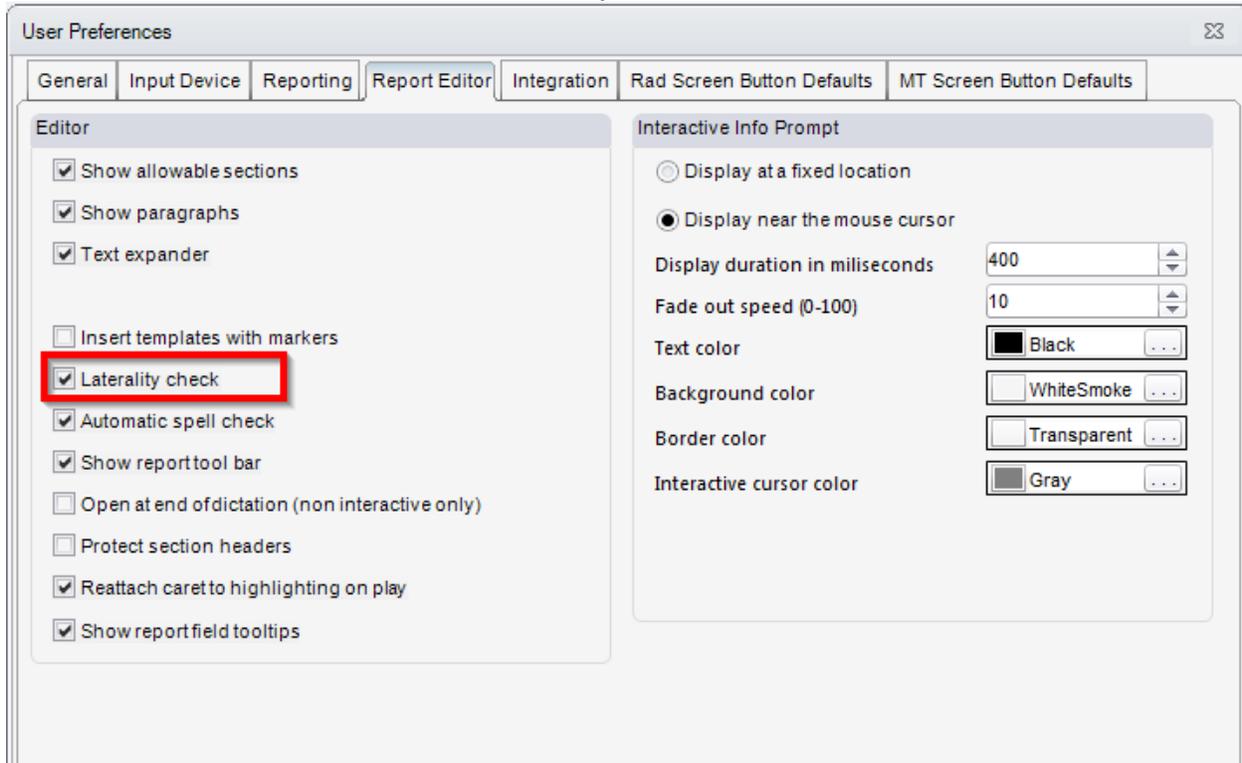


Figure 5.5 – User Preference Laterality check

If your procedure contains laterality and your report has a conflicting left or right the user will be informed via message on selecting the Transcribe button.

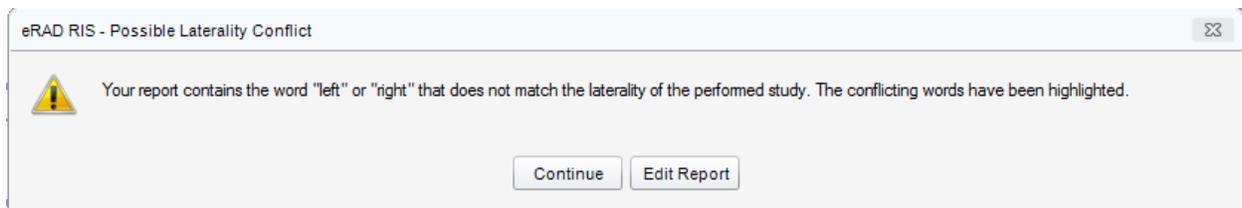


Figure 5.6 – Laterality conflict on Transcribe message.

Selecting Continue will ignore the conflict and complete transcription. The Edit Report button will leave the editor window open and highlight the conflicting and matching literalities.

The report in my example was on a procedure with a left laterality in the screenshot below the conflicting laterality of “right” and matching laterality of ‘left’ are left highlighted in the report.

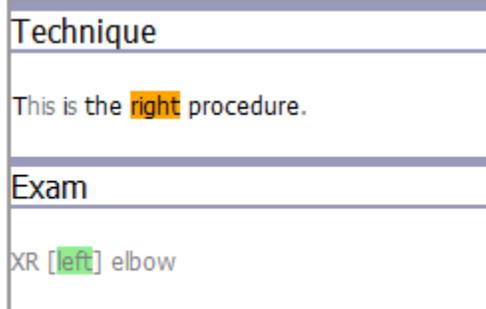


Figure 5.7 – Conflicting and matching literalities are highlighted in report

Reporting – Remove Content Tags from CDA when Creating Macros/Templates

eRAD RIS offers the ability for a user to copy an existing report as a template for future reports. This functionality is inhibited by the fact that the new template they create contains mm:status and mm:part that should be stripped out.

As a result of the mm:status and mm:part still contained in the template, some of the jumping problems we have encountered on play back were related to time stamps being saved in templates and macros at the time of save. To correct this we found we could manually remove the time stamps from the underlying document.

We are now using the convertCdsToCda method to remove the time stamps and unneeded tags.

Reporting – Ability to Configure MModal Transfer Task

The ris.exe.config now has an app setting to override the user preference for M*Modal's Data Transfer Config: **MModalDataTransferValue**

Acceptable values are any sum of the following options:

SUBMIT_TRAINING_INFO: Upload log of user interaction (including recorded audio) to server for profile building. Applicability: only for local recognition; ignored for remote recognition. constant value = **1**

SUBMIT_ERROR_LOGS: Whether to automatically submit an error report for debugging after an uncontrolled shutdown, or when encountering another non fatal error. Applicability: all modes; requires storage manager for crash log uploads (non-fatal error reports can be submitted without). constant value = **2**

STORE_USER_SETTINGS: If set, store user preferences (including audio gain etc) on CDS server, and retrieve on next startup. Applicability: all modes. constant value = **4**

UPDATE_PROFILES: If set, checks at session creation whether an updated user profile is available on the server. If yes it is downloaded in a background thread and used as soon as it becomes available. Until then the recognizer would use either a speaker independent profile, or an older locally cached profile version (only if an IStorageManager is configured). Applicability: local recognition; ignored for remote. constant value = **8**

UPDATE_RECOGNIZER: If set, check in regular intervals whether an updated compatible recognizer version is available on the server. If yes, the recognizer mode is downloaded in a background thread and used when the local recognizer is next instantiated (i.e. not switched out in a running session). Applicability: local recognition; ignored for remote. Requires an IStorageManager, ignored if none is configured. constant value = **16**

WRITE_DEBUG_LOG: Like SUBMIT_TRAINING_INFO, but leaves information in a local IStorageManager for debug purposes instead of (or in addition to) uploading it to a server. Applicability: local recognition; ignored for remote recognition constant value = **32**

If the value is not present or invalid, we resort to existing logic. This would be to check the user config for auto download, if present use 29 else 13

13 = SUBMIT_TRAINING_INFO, STORE_USER_SETTINGS, UPDATE_PROFILES
29 = SUBMIT_TRAINING_INFO, STORE_USER_SETTINGS, UPDATE_PROFILES,
UPDATE_RECOGNIZER

0 (zero) is a valid option. Zero will disable the calls.

Reporting – MT Edit Text Color

MT edit text color has been set up as a user preference that is accessible in your editor preferences. Once a color is chosen it will take effect the next time the editor window is opened. (Doesn't take effect in current editor window)

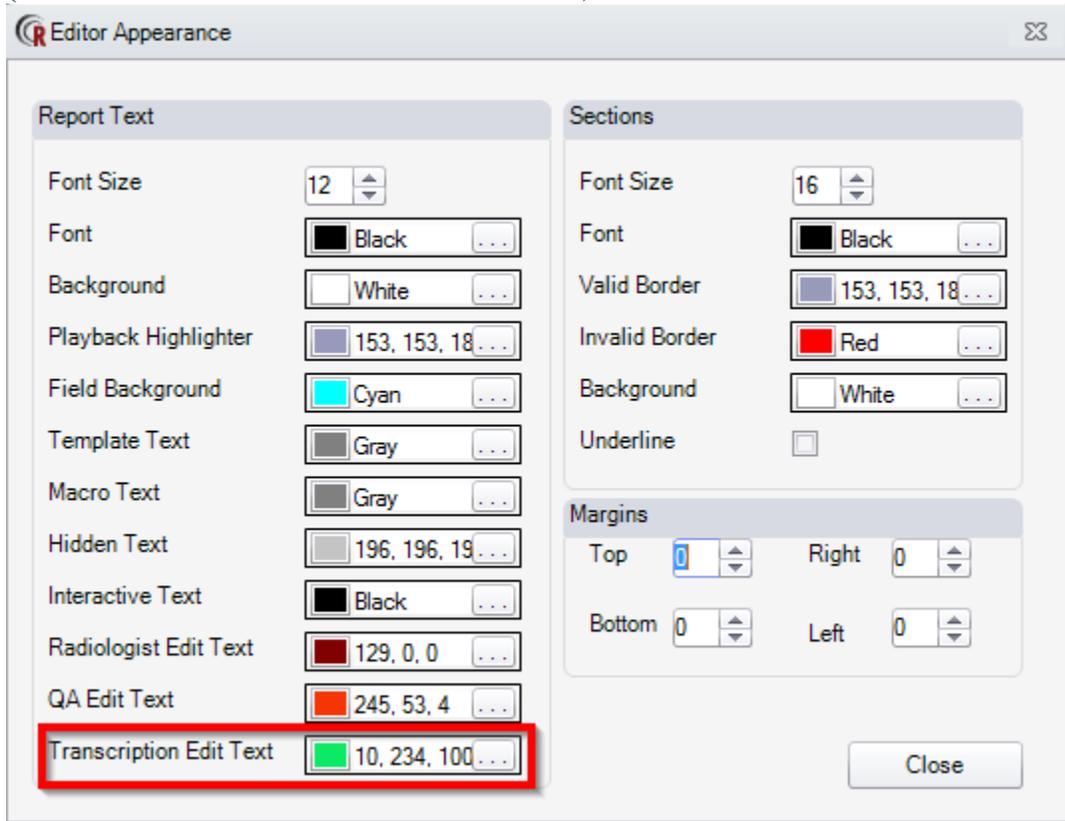


Figure 5.8 – Transcription Edit Text color in Editor Appearance window

Double Click to Launch Attachments in Full Screen

In the user preferences we have a setting for “Double click to maximize attachments”. With this set double clicking on an attachment will maximize the tool window to the current screen. Once maximized you can double click to restore it to its previous location or in the case of a reporting floating window you can close the window with the “X” in the top right corner (when in full screen maximized mode).

If you are to save your layout with this configuration, the full screen maximized toggle will not save with the layout manager.

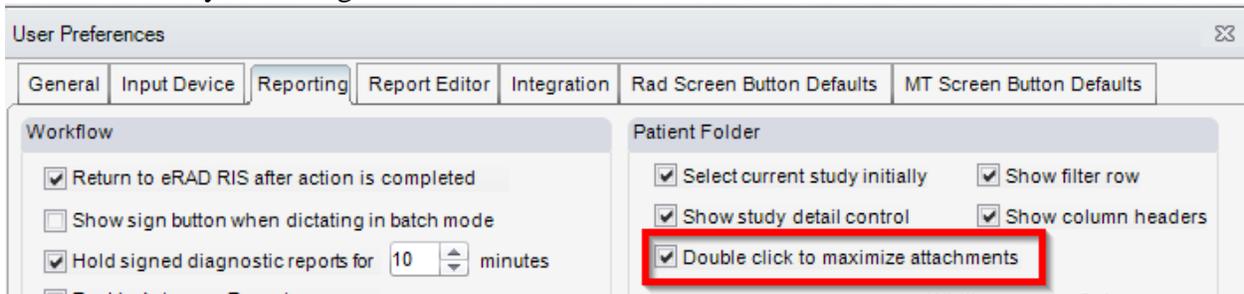


Figure 5.9 – User preference to enable double click to maximize attachments

In addition to the double click to maximize the user can also use the button in the upper left of the Attachments or Selected Attachments data pane to open in full screen.

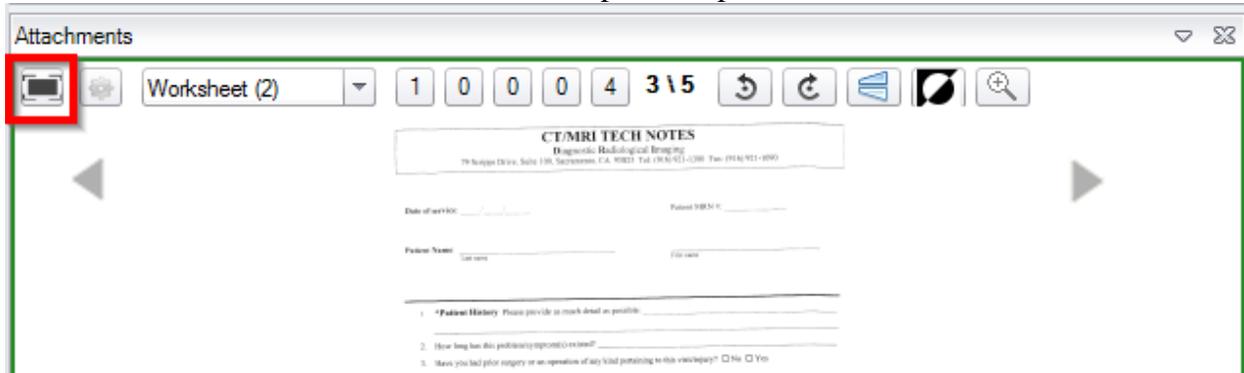


Figure 5.10 – Button on Attachments data pane to launch in full screen.

Attachments “Show Me Everything” Option

The attachment types dropdown can be configured to display only those attachments they want to see appear in the Attachments data pane or data nugget. We have added an option to enable the users to have access to the remaining attachments that may be associated with the patient.

Two new options will appear in the attachment types dropdown

- + Show More
- Show Less

By default the attachment data nugget opens with only the scan document types the user wants to see, which is configurable via the '  button'. By choosing "+ Show More" the attachment data nugget will reopen and display all attachment types regardless of user preference.

These options will not display if there are no additional attachments.

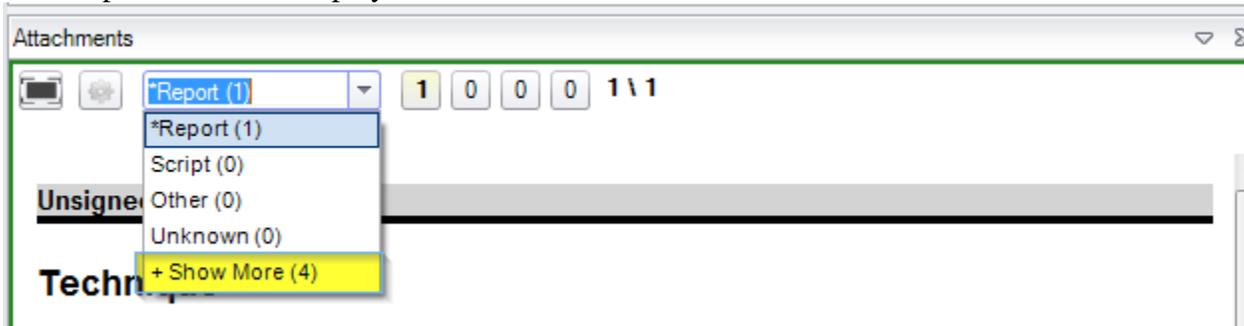


Figure 5.11 – Show more attachments

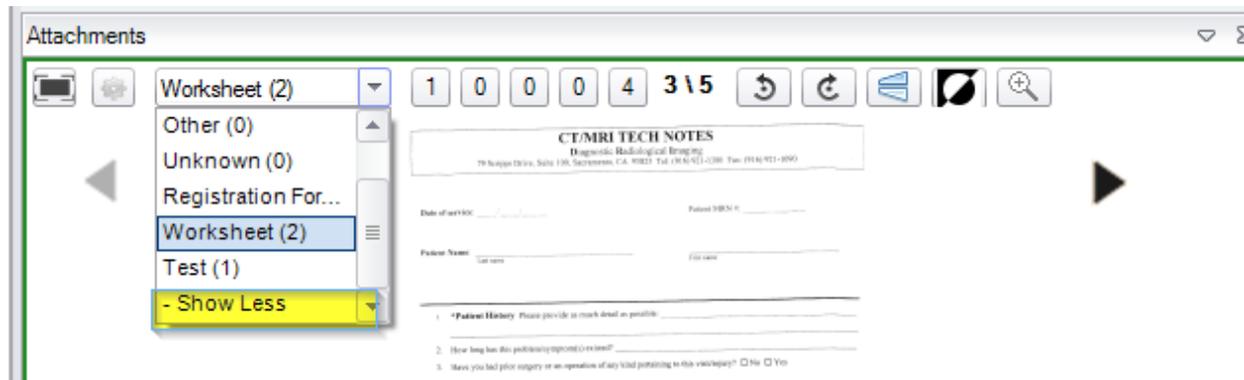


Figure 5.12 – Show less attachment options.

Relevancy Calculation Adjustable via Configuration

In production we have procedure codes that because of legacy data have very different names even on different modality types, but those procedures are actually exactly the same and should match exactly when assigned a relevancy score. Previous to B42 this was not possible because the relevance calculation was based entirely on word matching. A score was assigned based on the number of matching words and words that are modality type, body part or laterality are given great weight in the matching. Furthermore the administrator can setup the site so that only studies done on the same modality are considered relevant.

A new window titled Relevance Override has been added and is accessed from the “Override...” button on the Relevance lookup table.

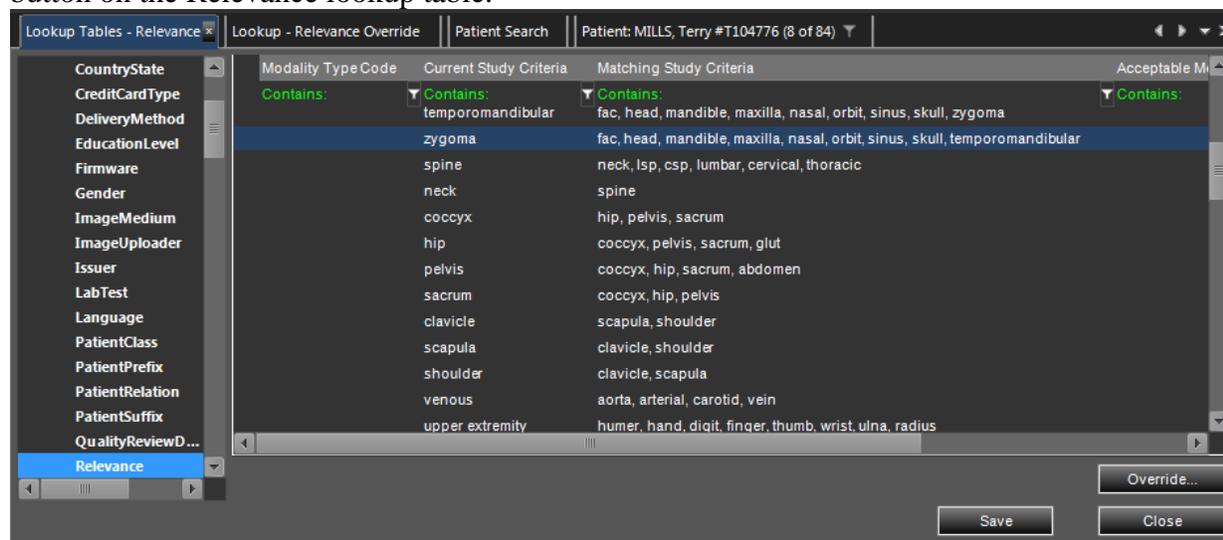


Figure 5.13 – Accessing the Relevancy Override window

When procedures in the patient’s history have a matching relevancy override the configuration defines how much weight will be assigned as part of the procedure matching score (value between 0 and 100) and if the outcome will produce a Matching or Non-Matching Relevance Flag.

This solution also allows laterality to be an option part of the matching criteria. If the laterality is blank then it isn’t considered as part of the matching criteria; however, if laterality is selected as “Same” then the rule only applies if the laterality of both procedures is identical. If the laterality is selected as “Different” then the rule only applies when the laterality differs and can be used to lower the score or make it Not Relevant, which could be useful when you want to give a high score when the laterality matches but a significantly lower score when the laterality is different.

Procedure Code X	Procedure Code Y	Laterality	Adjusted Score	Override Relevancy	Last Updated	
76645MA1 US zBREAST & MA DIGITAL MAMMO CB DIAG BI sample1 XR Chest 2 Views PA and Lateral	G0206CB/US MA DIGITAL MAMMO CB DIAG UNI & US BREAST... sample2 AMDX CHEST 2 VIEWS		100	Relevant	08-19-2013 2:...	Y
71275 CTA Chest W/Wo	71270 CT Chest W/Wo		100	Relevant	08-19-2013 2:...	Y
71275 CTA Chest W/Wo	71250 CT Chest Wo		90	Relevant	08-19-2013 2:...	Y
71275 CTA Chest W/Wo	71260 CT Chest W		90	Relevant	08-19-2013 2:...	Y
71275 CTA Chest W/Wo	CT1 CT Chest Wo & Abdomen Wo		90	Relevant	08-19-2013 2:...	Y
MA511 MA Digital Needle Loc 3 Sites Unilateral W Clip	MA510 MA Digital Needle Loc 2 Sites Unilateral W Clip		0	NotRelevant	08-19-2013 2:...	Y

Figure 5.14 – Relevance Override

When the user clicks on the “Override...” button a tab opens up for the “Relevance Override” table, which allows you to specify two procedures (X and Y). When calculating relevancy if the studies match based on X and Y then the adjusted score will be applied and the relevancy flag will be set based on the selected value in the “Override Relevancy” column.

Note: The “Adjusted Score” and “Override Relevancy” columns are optional. If the “Adjusted Score” is blank then the score will remain as it was calculated without the override but the relevancy flag override would apply. Also, if the “Override Relevancy” column is blank only the score will be adjusted.

In the above Relevance Override configuration the procedures 76645MA1 and G0206CB/US are interesting. One is a US Breast & MA MAMMO CB and the other is a MA Mammo CB and US Breast. The default word matching produces a relevance score that is very close but not exact therefore some installations of RIS will want to correct for this. The following screen shots shows the relevancy results for a test patient’s history – the first screen is with the override rule inactive and in the second screen shot the rule has been activated.

Relevance...	Relev...	Flags	Nuggets	Status	Procedures	Scheduled Date
Y	100			Signed	MA DIGITAL MAMMO CB DIAG UNI & US BREAST [G0206CB/US] - Breast - Left	12-13-2012 2:52 PM
Y	72			Signed	MA DIGITAL MAMMO CB DIAG UNI & US BREAST [G0206CB/US]	07-19-2011 10:15 AM
Y	65			Signed	MA Digital Mammo Diag Uni [G0206] - Breast	11-16-2012 8:43 AM
Y	64			Signed	MA DIGITAL MAMMO SCREEN BIL [G0202] - Breast	08-19-2012 1:37 PM
Y	64			Signed	MA DIGITAL MAMMO SCREEN BIL [G0202] - Breast	08-18-2012 12:54 PM
Y	64			Signed	MA DIGITAL MAMMO SCREEN BIL [G0202] - Breast	08-18-2012 12:54 PM
Y	64			Signed	MA DIGITAL MAMMO SCREEN BIL [G0202] - Breast	08-17-2012 1:36 PM
N	68			Signed	US zBREAST & MA DIGITAL MAMMO CB DIAG BI [76645MA1] - Breast - Bilateral	08-18-2012 9:05 AM

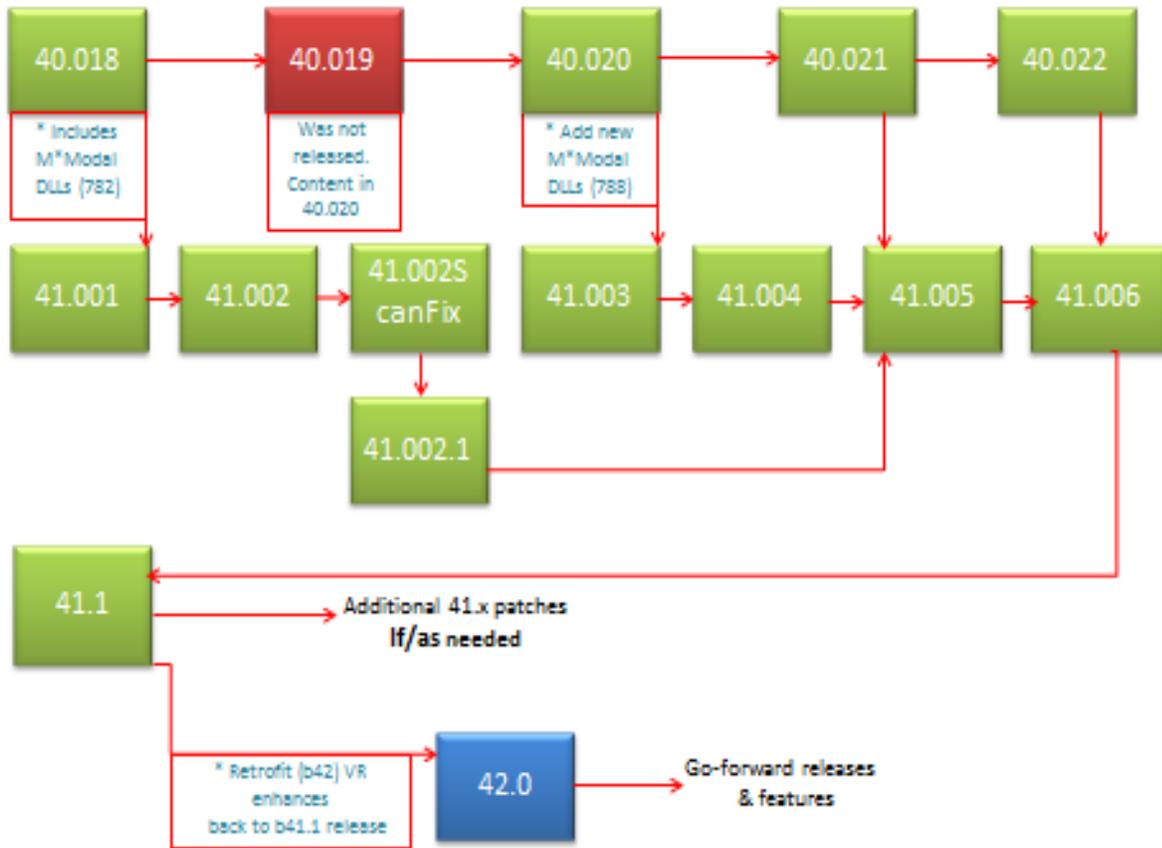
Relevance...	Relev...	Flags	Nuggets	Status	Procedures	Scheduled Date
Y	100			Signed	MA DIGITAL MAMMO CB DIAG UNI & US BREAST [G0206CB/US] - Breast - Left	12-13-2012 2:52 PM
Y	99			Signed	US zBREAST & MA DIGITAL MAMMO CB DIAG BI [76645MA1] - Breast - Bilateral	08-18-2012 9:05 AM
Y	72			Signed	MA DIGITAL MAMMO CB DIAG UNI & US BREAST [G0206CB/US]	07-19-2011 10:15 AM
Y	65			Signed	MA Digital Mammo Diag Uni [G0206] - Breast	11-16-2012 8:43 AM

Figure(s) 5.15 – Before and After Override applied

Note: that in the first screen shot without the Relevance Override, the 76645MA1 doesn't even show up as relevant because in the base relevancy rules there is a rule that says only MA modality type studies are relevant to MA studies. In the second screen shot the rule for 76645MA1 and G0206CB/US says the procedure matching will get a score of 100% but since the procedure matching only accounts for half of the total score (the other half is used to sort by date), therefore we see the score increase from 68 to 72 and 76645MA1 actually gets placed before the older G0206CB/US study because it's a recent prior.

6. Code Stream

eRad RIS – source code evolution



Legend:

Green = Released software

Red = Will not be released

Blue = Future release

7. 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.
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

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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
40	1	1.3.40.16849	1.3.40.16659	1.3.40.16744	1.3.40.16727	GUI.zip, Web service, database updates and SQL Management reporting
40	2	1.3.40.16868	1.3.40.16659	1.3.40.16868	1.3.40.16727	GUI.zip and Web Service
40	3	1.3.40.16868	1.3.40.16659	1.3.40.16868	1.3.40.16727	DB updated only
40	4	1.3.40.16967	1.3.40.16659	1.3.40.16932	1.3.40.16961	GUI.zip, Web service, database updates
40	5	1.3.40.17087	1.3.40.16659	1.3.40.17069	1.3.40.17087	GUI.zip, Web service, database updates
40	6	1.3.40.17146	1.3.40.16659	1.3.40.17146	1.3.40.17146	GUI.zip, Web service, database updates
40	7	1.3.40.17268	1.3.40.16659	1.3.40.17268	1.3.40.17259	GUI.zip, Web service, database updates
40	8	1.3.40.17364	1.3.40.16659	1.3.40.17362	1.3.40.17343	GUI.zip, Web service, database updates
40	9	1.3.40.17370	1.3.40.16659	1.3.40.17370	1.3.40.17370	GUI.zip, Web service, database updates
40	10	1.3.40.17435	1.3.40.16659	1.3.40.17435	1.3.40.17370	64 BIT web service. GUI.zip, Webservice.
40	11	1.3.40.17435	1.3.40.16659	1.3.40.17525	1.3.40.17370	Web service update
40	12	1.3.40.17685	1.3.40.16659	1.3.40.17685	1.3.40.17648	GUI.zip, Web service, database updates
40	13	1.3.40.17776	1.3.40.16659	1.3.40.17776	1.3.40.17648	GUI.zip, Web service
40	14	1.3.40.18063(3GB)	1.3.40.16659	1.3.40.18063	1.3.40.18063	GUI.zip, Web service, database updates
40	14.1	1.3.40.18063(3GB)	1.3.40.16659	1.3.40.18107	1.3.40.18063	Web service
40	15	1.3.40.18127(3GB)	1.3.40.16659	1.3.40.18127	1.3.40.18127	GUI.zip, Web service, database updates
40	16	1.1.3.40.18585 (3GB)	1.3.40.16659	1.3.40.18585	1.3.40.18646	GUI.zip, Web service, database updates

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40	16.1	1.3.40.18705 (3GB)	1.3.40.16659	1.3.40.18585	1.3.40.18646	GUI.zip
40	17	1.3.40.18780 (3GB)	1.3.40.18756	1.3.40.18756	1.3.40.18646	Core install required for Radiologist User Group. GUI.zip, Core setup, and Web Service updates
40	18	1.3.40.19253(3GB)	1.3.40.18756	1.3.40.18756	1.3.40.19253	GUI.zip, Web Service and database updates
40	19	1.3.40.19909(3GB)	1.3.40.18756	1.3.40.19878	1.3.40.19253	GUI.zip, Web Service, Recognizer files. NOT RELEASED
40	20	1.3.40.20086(3GB)	1.3.40.18756	1.3.40.19878	1.3.40.19253	Gui.zip and Recognizer
40	21	1.3.40.20703(3GB)	1.3.40.18756	1.3.40.19878	1.3.40.19253	Gui.zip
40	22	1.3.40.20898(3GB)	1.3.40.18756	1.3.40.19878	1.3.40.19253	Gui.zip
41	-	1.3.41.19135(3GB)	1.3.41.19135	1.3.41.19135	1.3.41.19135	Full version release
41	1	1.3.41.19356(3GB)	1.3.41.19135	1.3.41.19346	1.3.41.19346	GUI.zip, Web Service and database updates
41	2	1.3.41.19620(3GB)	1.3.41.19135	1.3.41.19620	1.3.41.19346	GUI.zip and Web Service
41	2sf	1.3.41.19620SF(3G)	1.3.41.19135	1.3.41.19620	1.3.41.19346	GUI.zip
41	2.1	1.3.41.20622(3GB)	1.3.41.19135	1.3.41.20617	1.3.41.19346	GUI.zip and Web Service
41	3	1.3.41.20171(3GB)	1.3.41.19135	1.3.41.20171	1.3.41.19346	GUI.zip , Web Service and Recognizer
41	4	1.3.41.20285(3GB)	1.3.41.19135	1.3.41.20171	1.3.41.19346	GUI.zip
41	5	1.3.41.20809(3GB)	1.3.41.20708	1.3.41.20792	1.3.41.20738	GUI.zip, Core install, Web Service and database updates
41	6	1.3.41.20912(3GB)	1.3.41.20708	1.3.41.20792	1.3.41.20738	GUI.zip
41.1	-	1.3.41.20918(3GB)	1.3.41.20791	1.3.41.20918	1.3.41.20739	GUI.zip, Core install, Web Service and DB updates, Help files

8. Resolved Defects

Bugs Suggested Features and Support Issues resolved in build 1.41.1. The extract is taken from Redmine bug tracking system and only displays defects resolved in 1.41.1

Bug #	Priority	Subject	Category	Found Version
5311	Immediate	Insert macro can reset a field back to its default value	Radiology Reporting	1.42
5164	Immediate	Losing default value for fields when saving template/macro	Radiology Reporting	40.02
5585	Urgent	Maximize Attachments - does not close on deactivation of the reporting screen.		1.42
5550	Urgent	DD: Printer rules do not take effect appropriately for outside read sites	Document Distribution	1.41.002
5337	Urgent	Reporting - Dictionary Add / Train changes	Radiology Reporting	1.40.20
5571	High	MERGE - Reporting - Transcription user error on first study opened in create report window	Radiology Reporting	40.02
5542	High	Null reference error when opening appointment book -- "LoadCascadingComboBoxes"	Thick Client GUI	1.41.002.1
5437	High	Reporting - possible wrong document model loading if more than one practice	Radiology Reporting	1.40.20
5418	High	Print Report - Timeout exception handling needed		1.42
5386	High	Patient Folder work list relevancy error	Thick Client GUI	1.41.1

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5382	High	RRR - Offering times that are not available for NucMed procedure plans	Thick Client GUI	1.41.002
5381	High	RRR - Procedure Plan Time Duration not correct	Thick Client GUI	1.41.002
5375	High	Exception when opening a locked studies for dictation and cancelling on the break lock message	Radiology Reporting	41.10
5374	High	Canceling Unscheduled orders not appearing on Patient Folder	Thick Client GUI	1.41.18633
5328	High	multi type ahead (procedure picker) control cuts off portion of text		1.38
5261	High	RIS does not retrieve lookup tables / configuration changes under certain circumstances	Thin Client GUI	1.40
5260	High	Skip and Continue only loads images every other study	PACS Integration	1.41.1
5243	High	The client app config contains LookupTableTimeToLiveInMinutes=400	Thick Client GUI	1.41
5197	High	Wedge processing notes ex. Visit Notes - overwrites existing notes. (MSK)	HL7	41.00
5187	High	B41.002 Scanning errors (RRR)		41.00
5176	High	Signs and Symptoms coming up required when setting is set to False (RRR)	Thick Client GUI	41.00
5120	High	Template / macro - create template from... doesn't retain custom fields		1.42

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5118	High	Concurrency violation on save for byte [] results in second save's data being rejected.	Web Services/DB	1.42
5107	High	patient folder doesn't load unless part of the initial layout on open of rad screen	Thick Client GUI	1.41
5094	High	Next workflow broken when using multiple tabs of different types	Radiology Reporting	1.41
5089	High	Able to sign a report when the field(s) in a template does not have a value.	Thick Client GUI	1.41
5088	High	Infinite loop when validating empty []	Radiology Reporting	1.42
5063	High	Reporting - using re-use causing confusion when getting a message box like "Addendum Requested"	Radiology Reporting	1.41
5060	High	Transcribe next workflow (beeps)	Radiology Reporting	1.41
5054	High	Reporting Screens fail to load if unable to find a good description for the current procedure code	Thick Client GUI	1.40
4983	High	Search for appointment returns slot that should not be available due to room closure		1.40
5582	Normal	Spell check on the fly no longer turned on. Squigly lines are not shown under misspelled words	Radiology Reporting	1.40.21
5568	Normal	Transcription users will get null exceptions when trying to activate ReportTemplateEditor	Radiology Reporting	1.41.005
5533	Normal	null reference in appointment book while painting in the appointments stack trace indicates SetStatusFill	Thick Client GUI	1.40

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5520	Normal	timing issue can cause null reference error loading registration	Thick Client GUI	1.41.002.1
5499	Normal	duplicate "void" payment for the same payment	Thick Client GUI	1.40
5491	Normal	Birad picker either shows on non Birads studies or doesn't show on birad studies.	Radiology Reporting	41.00
5489	Normal	Procedure code assignment screen in template editor keeps button disabled	Radiology Reporting	1.41.002
5473	Normal	Reporting - Attachments data pane default is report	Radiology Reporting	1.41
5442	Normal	Reporting - rad edit text default color is yellow - should be "#810000"	Radiology Reporting	1.40.20
5433	Normal	Reporting - dictating negative 5 percent will render the word percent not the symbol	Radiology Reporting	1.40.20
5370	Normal	Error scheduling exam: "A follow up order already exists for this exam"	Web Services/DB	1.41.003
5331	Normal	Reporting - no wait navigate fails when dictating and then clicking next field > 1 time without pausing	Radiology Reporting	1.40.019
5325	Normal	Send Report -> Delivery Method "Print" does not default to the most appropriate printer	Thick Client GUI	1.41.003
5316	Normal	Reporting - Laterality check causing duplicate words	Radiology Reporting	1.40.020
5270	Normal	Reporting - Automatic spell check "on the fly" marks words as misspelled that are at the beginning of a field	Radiology Reporting	1.40.020

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5264	Normal	MERGE - Report History Window	Thick Client GUI	1.40
5263	Normal	MERGE - Report History Error	Thick Client GUI	1.41
5247	Normal	Constraint error when trying to printing forms on a study that has been dictated	Thick Client GUI	1.41
5228	Normal	error on save: Invalid column name 'inverted_face'	Thick Client GUI	1.41
5226	Normal	object reference error after locking failure	Thick Client GUI	1.41
5168	Normal	Aggressive field cue navigation fails after editing a cue on a template.	Radiology Reporting	1.40.019
5154	Normal	Prompt when creating templates if the word colon is in a cue		1.40.019
5135	Normal	Worklist refresh exception		1.41
5134	Normal	Reporting - Reuse enabled status area messages not populating for action buttons	Radiology Reporting	1.41
5133	Normal	Reporting - MT polling enabled open RIS initially will result in messed up reporting screen	Radiology Reporting	1.41
5132	Normal	Attachments - wide documents that a small height cause an out of memory exception		1.40
5131	Normal	Memory leak fixes discovered in B40		1.40

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5129	Normal	Reporting buttons, when disabled, has a wider seperator.	Thick Client GUI	1.40
5125	Normal	Reporting screen not drawing in, if user make worklists active	Thick Client GUI	1.39
5124	Normal	Interactive "New paragraph" with protected sections headers	Radiology Reporting	1.42
5123	Normal	Ris hangs... For a long time in template editor.	Radiology Reporting	1.41
5122	Normal	Row-level caching - Error trying to save template	Radiology Reporting	1.42
5117	Normal	Reporting Reuse - Next workflow loads cases that are pending saving.	Thick Client GUI	1.41
5115	Normal	Reporting - template/macro editor cue text box too small	Radiology Reporting	1.41
5111	Normal	QA worflow problem flag #2894	Radiology Reporting	1.41
5108	Normal	First chance exception when getting field description in report template editor.	Radiology Reporting	1.40
5097	Normal	xKeys integration - next and prev field doesnt spawn radiologist pop up text		1.42
5093	Normal	Reporting - performance - require two raddocks to support signing and dictating	Radiology Reporting	1.41
5092	Normal	Reporting - reuse enabled and open a screen for signing, skip next will not populate the tab text	Radiology Reporting	1.41

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5090	Normal	Reporting - reuse when skipping reports and there are change we don't get a prompt to save changes	Radiology Reporting	1.41
5087	Normal	Reporting - reuse selected report tool window keeping previous data	Radiology Reporting	1.41
5085	Normal	Reporting - SetAccountRules not called when opening an exam for the default template	Radiology Reporting	1.41
5084	Normal	Report fields control showing as a blank canvas	Radiology Reporting	1.41
5082	Normal	Dictating previous field moves two fields back instead of one.	Radiology Reporting	1.41
5081	Normal	Interactive fast forward light up play and fast forward	Radiology Reporting	1.41
5080	Normal	Audio control allows rewinding and fastforwarding to show at the same time as active.	Radiology Reporting	1.41
5079	Normal	RCW error closing reporting window	Radiology Reporting	1.41
5078	Normal	Recording rewinding in interactive mode falls into a playback/rewind loop.	Radiology Reporting	1.41
5077	Normal	Recording interactive and rewinding	Radiology Reporting	1.41
5076	Normal	Audio starts playing when recording	Radiology Reporting	1.41
5075	Normal	Switching from record to play in batch mode	Radiology Reporting	1.41

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5074	Normal	Interactive record + playback at same time	Radiology Reporting	1.41
5071	Normal	Reporting - notifications need to be placed above action buttons.		1.41
5070	Normal	Template editor, inserting a field into a section header throws an error.	Radiology Reporting	1.40
5069	Normal	Send-to button blanks out the reporting screen	Radiology Reporting	1.41
5066	Normal	Transcriptionist next workflow not properly skipping	Radiology Reporting	1.41
5065	Normal	Protect section headers does not protect against macro insertions	Radiology Reporting	1.40.017
5064	Normal	Reporting - Add patient folder control to reporting window will not display history	Thick Client GUI	1.41
5059	Normal	Reporting - next field navigating two fields when cursor immediately to the left of field	Radiology Reporting	1.40
5056	Normal	Known Limitation - Side by side registration broken from 40.016 - 40.017	Thick Client GUI	40.02
5055	Normal	Reporting - reuse only - macros are not getting reset and old command are staying around on next workflow	Radiology Reporting	1.41
3804	Normal	Double click on patient folder header (Fisher site visit)	Thick Client GUI	40.01
3800	Normal	Pacs IW shortcut for measurement inserts "m" into our report. (Fisher site visit)	Thick Client GUI	40.01

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3774	Normal	Dictating "Item one" in a field will hang the application (Fisher site visit)	Thick Client GUI	40.01
5058	Low	Template / macro - Create using filter criteria	Radiology Reporting	1.41

9. Known Limitations

The following are Bugs Suggested Features and Support Issues found in build 1.41.1. Bugs reported in previous versions are not captured as Known Limitation in this document.

#	Status	Priority	Subject	Resolved Build
5601	New	High	When opening an exam from All Suspended WL to sign the report, get an Error	
5416	New	High	Reporting - Switching between record / playback and playback / record has mixed results	
5387	MModal support	High	Reporting - Field is removed if SpellCheck finds error in default text	
5660	New	Normal	Reporting - Edited text selected does not highlight the same	
5606	New	Normal	When you do an import, in the Attached documents window, in the top left, the types of documents don't include types that are order level.	
5403	New	Normal	Reporting - cannot delete default text from a field in template macro editor	
5401	New	Normal	Cannot re-dock patient folder window because of exception on title bar right-click	
5385	New	Normal	Reporting - Selected summary and attachments are not initially populating	
5368	New	Normal	Reporting - Changing template in reporting window can rearrange sections	
5365	New	Normal	Reporting - Auto macro will be inserted multiple times when the same template is selected for use	

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5358	New	Normal	Reporting - dictated text in a field. Some text is highlighted and some is not.	
5357	New	Normal	MU- Patient Lists MU1, lists medications that were added then deleted in NewCrop	
5350	New	Normal	Reporting - Attachment viewer does not go back into place on double click of title bar	
5330	New	Normal	Reporting / Scanning - Viewing attachments in Attachments data pane rotate image twice and received error.	
5320	New	Normal	Reporting - Attachment viewer in reporting window - double click to open the report will change to the next scan doc.	
5275	New	Normal	Reporting - Adding empty space to field will allow user to sign	
5274	New	Normal	PACS - when viewing an image in patient folder, when you try and view the same image twice image is not displayed	
4418	New	Normal	Security token error on login (after latest build update)	
5546	New	Low	Dark Theme - behavior inconsistent if color setting are not saved in Dictation window.	
5482	New	Low	Open on Login has duplicate WL in list	
5334	New	Low	Attachment data nugget doesn't auto select "+Show More" scan doc when selected	