User Release Notes

for eRAD RIS
Version 1
Build 41

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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 40 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 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.

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4. New Access Strings and Configuration Settings

Setting Placeholder	Setting	Default	Purpose / Controls Access to
Access string / User Group Permission tables	Clinical.PersonMerge	None	Controls access to the Personnel Merge window access from the Administration menu. Allows the user to "Suggest" a person merge.
Access string / User Group Permission tables	Clinical.PersonMergeAdmin	None	Controls access to the options of Complete or Reject a Person merge.
Access string / User Group Permission tables	WL.PersonMergeRequest	None	Provides access to the Personnel Merge WL accessed under the Administration menu.
Access string / User Group Permission tables	View.Custom.Layout	None	Controls access to the View menu options of Save as Custom Layout and Delete Custom Layouts…
Access string / User Group Permission tables	WL.Rad.CriticalResults	None	Controls access to the All Critical Results work list menu item under the Radiologist Menu
Access string / User Group Permission tables	WL.Rad.MyCriticalResults	Full	Controls access to the Critical Results work list menu item under the Radiologist Menu
Access string / User Group Permission tables	Clinical.CTRNNotification	None	Controls access to the CTRN button in the reporting window
Access string / User Group Permission tables This access string has been removed.	View.Administration **OBSOLETE**	n/a	This access string is no longer used and has been removed. The access string view.preset.administration has replaced this one.

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Access string / User Group Permission tables	View.Preset.Administration	None	Access to preset layout administration submenu
Access string / User Group Permission tables	View.Preset.Administration.PresetSigning	None	Access to preset layout administration for Signing
Access string / User Group Permission tables	View.Preset.Administration.PresetEditing	None	Access to preset layout administration for Editing
Access string / User Group Permission tables	View.Preset.Administration.PresetDictationNormal	None	Access to preset layout administration for Dictation Normal
Access string / User Group Permission tables	View.Preset.Administration.PresetDictationMinimal	None	Access to preset layout administration for Dictation Minimal
Access string / User Group Permission tables	View.Preset.Administration.PresetDictationFull	None	Access to preset layout administration for Dictation Full
Access string / User Group Permission tables	UserPreference.Theme.AllowDarkMode	None	Controls if user has the 'enable dark mode' checkbox in user preferences screen
Access string / User Group Permission tables	Clinical.UserPreferences.ReportingAutoSave	None	Controls access to the user preference "Enable Autosave Reports"
Access string / User Group Permission tables	Clinical.PatientMergeMixer **Replaces** Clinical.PatientMerge	None	Controls access to the Patient Merge window
Access string / User Group Permission tables	DataNugget.Attachments **Replaces** DataNugget.Documents	None	Controls access to the nugget for attachments
Access string / User Group Permission tables	Flag.Allergy **Replaces** Flag.DrugAllergies	Full	Controls access to see the Allergy flag
Access string / User Group Permission tables	WL.Rad.PendingSignature **Replaces** WL.PendingSignature	None	Controls access to the Pending Signature menu option under the Radiologist menu

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Access string / User Group Permission tables	WL.Rad.TentativelySigned Replaces WL.TentativelySigned	None	Controls access to the Signed, Pending Release
Access string / User Group Permission tables	MT.ReportDraftedProblem Replaces MT.ReportDraftedProblemAll	None	Controls access to the 'All Problem' menu option under the Transcription menu
The following access strings were added in B41 for work lists, buttons, etc… that existed in previous versions but missing access string to control function/accesss			
Access string / User Group Permission tables	WL.Rad.PendingEdit	None	Controls access to the Pending Edit menu option from the Radiologist menu
Access string / User Group Permission tables	Clinical.Confirmation	None	Controls access to the Confirmation button and context menu option of the Confirmation work list.
Access string / User Group Permission tables	Clinical.MarkForAddendum	None	Controls access to the context menu options of Request Addendum and Cancel Addendum Request
Access string / User Group Permission tables	Clinical.ChangeSupervisingRadiologist	None	Controls access to the context menu option for Change Supervising Radiologist
Access string / User Group Permission tables	Clinical.TemplateEditing	None	Controls access to the Edit Template option in the reporting window\template browser data pane
SystemConfig lookup	SignAndSymptomsRequiredByTech	False	Determines in the Signs and Symptoms text box in the Perform Exam window on Documentation tab is required. Possible values: True or

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			False.
SystemConfig lookup	HeightRequiredOnArrival	False	Determines if the Height field is required at the time of Arrival from the Registration window. Possible values: True and False
SystemConfig lookup	WeightRequiredOnArrival	False	Determines if the Weight field is required at the time of Arrival from the Registration window. Possible values: True and False
SystemConfig lookup	ProcessPostEventInterval	60	The number in seconds to sleep between each call to stored procedure c_ProcessPostEvent
Ris.exe.config	<add name="Rolling Flat File Trace Listener" type="Microsoft.Practices.EnterpriseLibrary.Logging.TraceListeners.RollingFlatFileTraceListener, Microsoft.Practices.EnterpriseLibrary.Logging, Version=5.0.414.0, Culture=neutral, PublicKeyToken=31bf3856ad364e35" listenerDataType="Microsoft.Practices.EnterpriseLibrary.Logging.Configuration.RollingFlatFileTraceListenerData, Microsoft.Practices.EnterpriseLibrary.Logging, Version=5.0.414.0, Culture=neutral, PublicKeyToken=31bf3856ad364e35" rollFileExistsBehavior="Increment" rollInterval="Hour" fileName="verbose_log/trace.log" formatter="Text Formatter" /> **This is entered under <SpecialSources>** <allEvents switchValue="Verbose" name="All Events"> <listeners> <add name="Rolling Flat File Trace Listener" /> </listeners>	None	See new feature "Verbose trace logging to a flat file" For more details on this ris.exe config change. This is not a required change.

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5. New Features and Enhancements

Reporting – Radiologist Notifications

Under User Preferences, we have renamed the configuration section to **Feedback**. Also we have divided the configuration into logical sections based on when, in the user's workflow the feedback occurs.

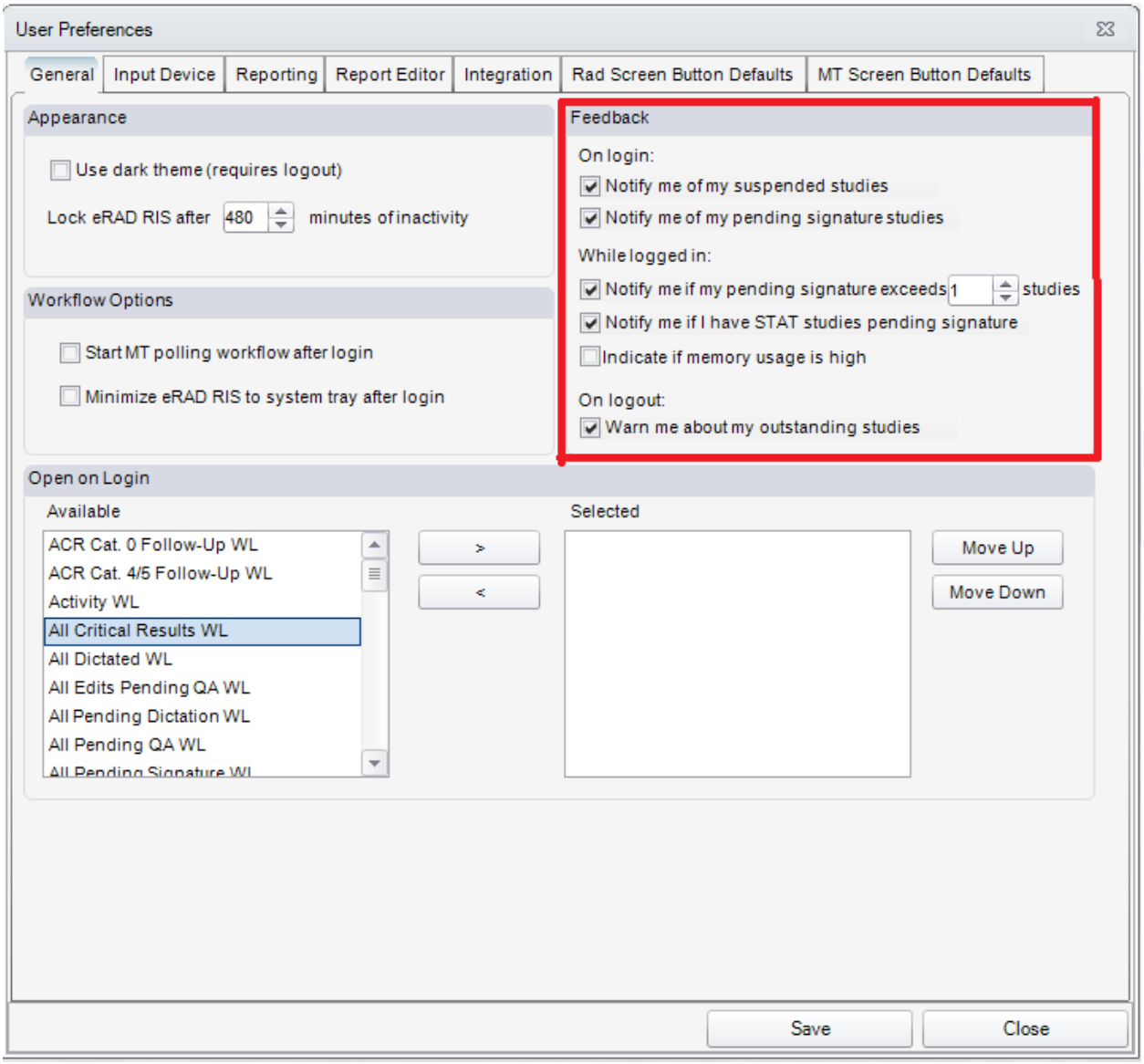

Figure 5.1 – User Preferences\General Tab\Feedback options

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On Login

Users can now subscribe to two optional notifications that occur on login.

Pending Signatures - the notification will display the user's pending signature count. The action button will take the user to the pending signatures work-list.

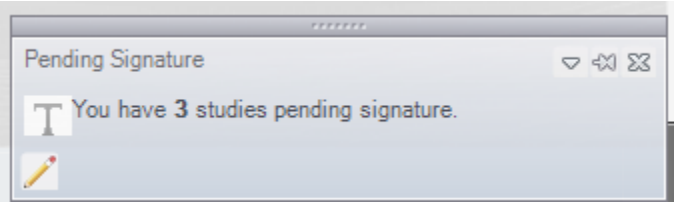

Figure 5.2 – Prompt on login for outstanding reports to be signed

Suspended Studies - the notification will display the user's suspended studies count. The action button will take the user to the suspended work-list.

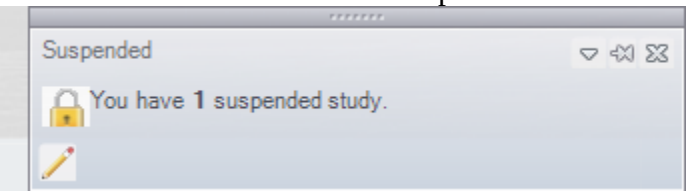

Figure 5.3 – Prompt on login for exams you have in suspended status

While Logged In

Users can now subscribe to three feedback options that occur during their session.

Pending Signatures - the notification will display the user's pending signature count. The action button will take the user to the pending signatures work-list. This happens when the signature count exceeds the pre-set value. This notification is only executed with the pending signature work list open. The work-list can be open in a background tab.

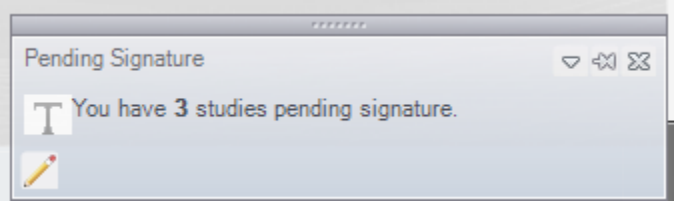

Figure 5.4 – Prompt when pending signature count reaches defined threshold.

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STAT Pending Signature Studies - the notification will display when the user has a STAT case enter their pending signature list. This notification is only executed with the pending signature work list open. The work-list can be open in a background tab.

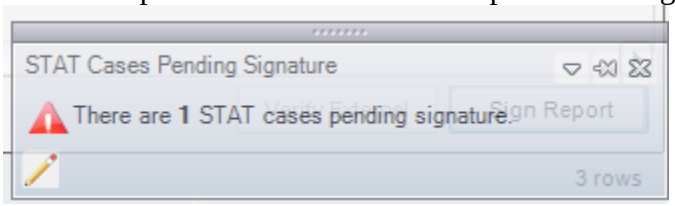

Figure 5.5 – Prompt on STAT cases pending signature

High Memory Indicator – If memory usage is high the user is displayed an indicator.

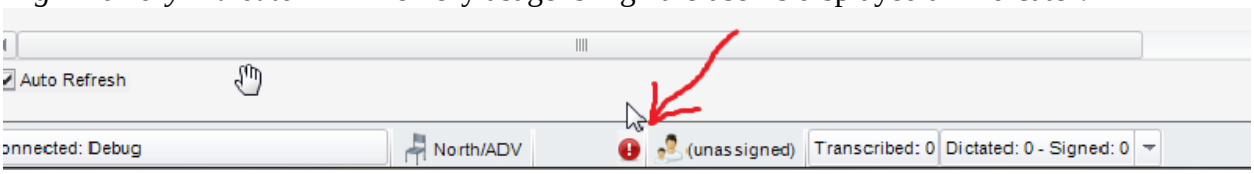

Figure 5.6 – Status bar indicator

Mouse over the indicator shows a message.

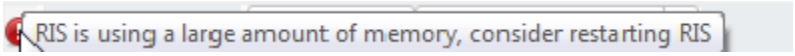

Figure 5.6a – Message displayed on mouse hover

On Logout

Users can now subscribe to one optional warning that occurs on logout.

Outstanding Studies – the outstanding studies prompt will occur on log out if the user has any pending signature, pending release or suspended exams. The example below shows all 3, however if one of these counts is 0 the line will not be in the message.

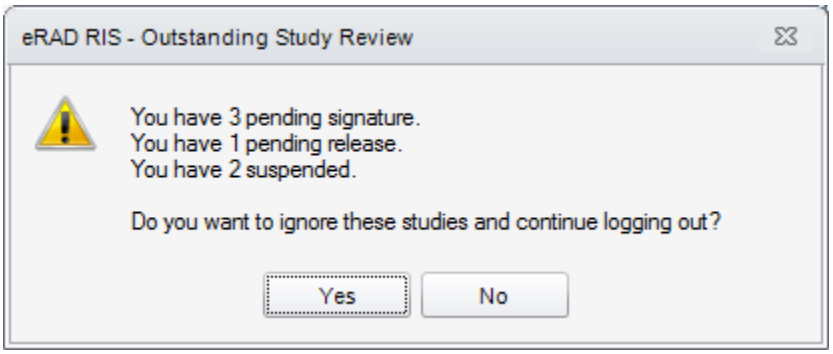

Figure 5.7 – Notification on logout

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Reporting - Dark Theme

There is now a darker theme that can be used by the radiologist. This is controlled by a new user preference titled "Use dark theme (requires logout)". The user preference itself is controlled by a new Access String titled **"UserPreference.Theme.AllowDarkMode"**

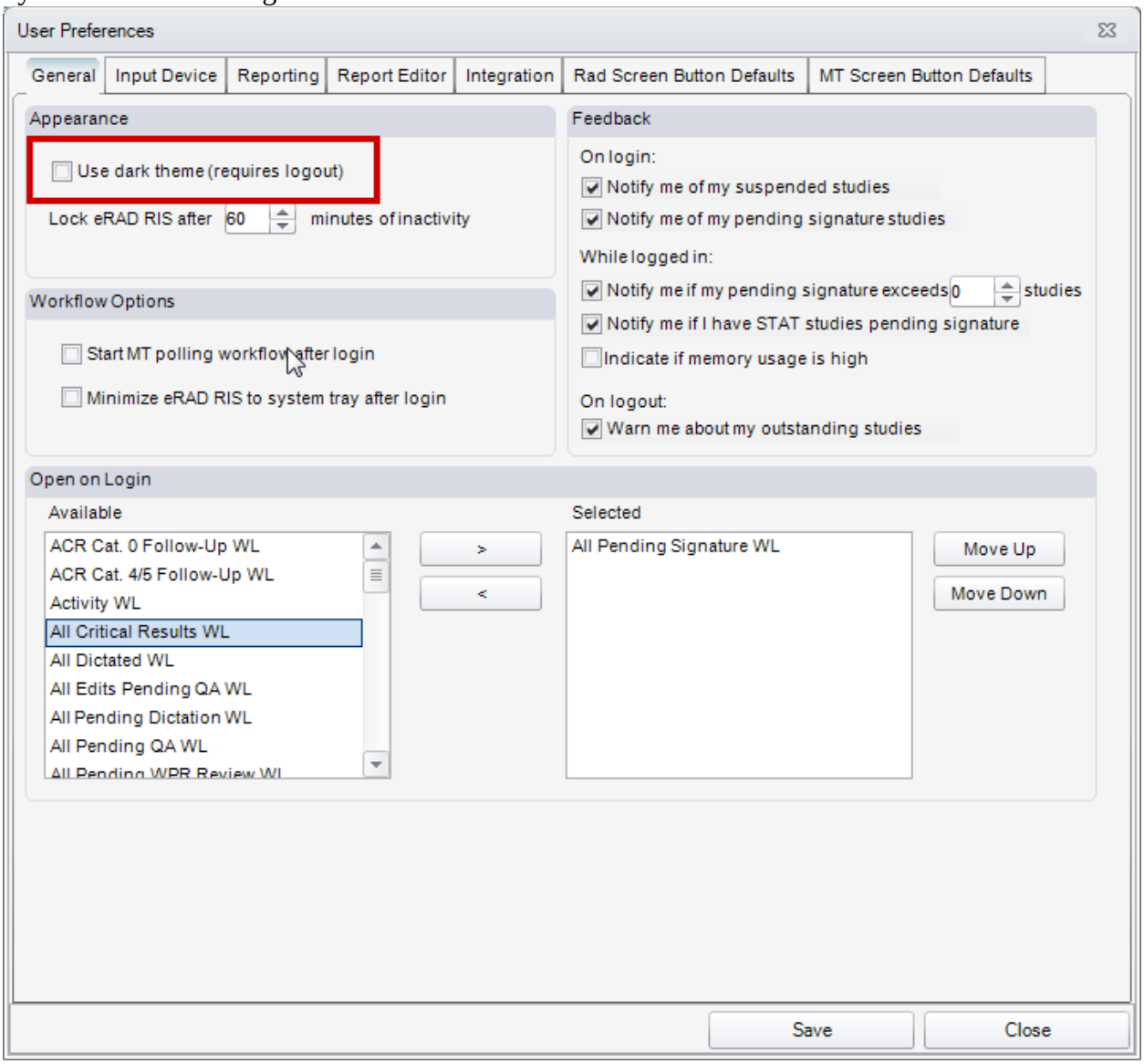

Figure 5.8 – Preferences showing Dark Mode

After selecting/unselecting the new user preference, the user must logout and login for it to take effect.

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Reporting – Editor Field Background Color

Within the reporting window, the user can open the context menu (right click) on the editor. This will present the user with a list of options. Selecting the "Editor Appearance" option will open the "Editor Appearance" window. A new option of "Field Background" color has been added. Adjusting this color will change the color of the fields within the editor template. This will apply to any fields that are inserted with a Macro too.

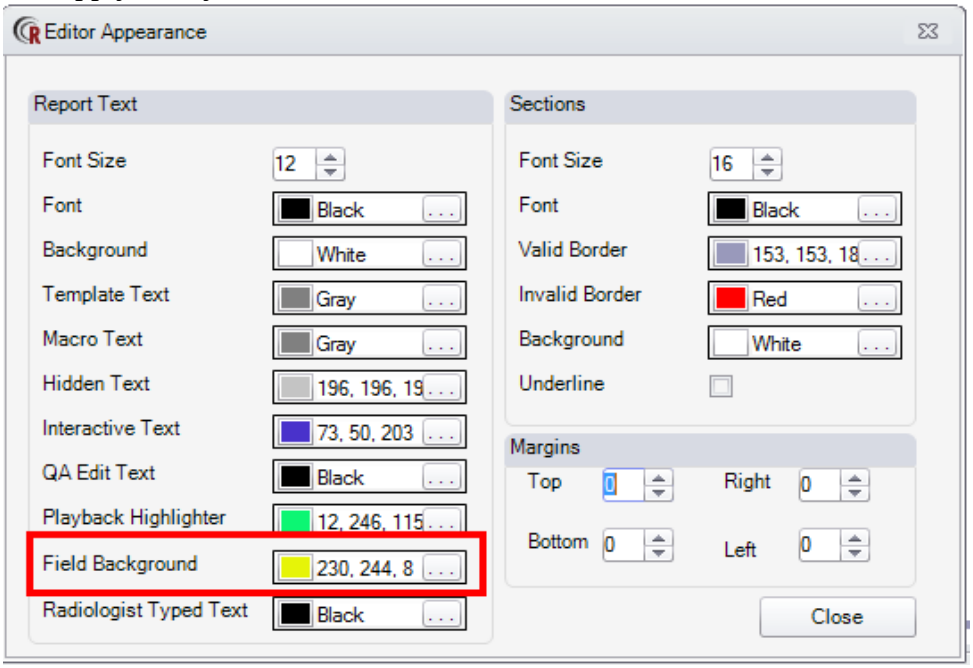

Figure 5.9 – Editor Appearance window showing option for Field Color.

With the color selected above for Field Background and fields within the template will appear in that color

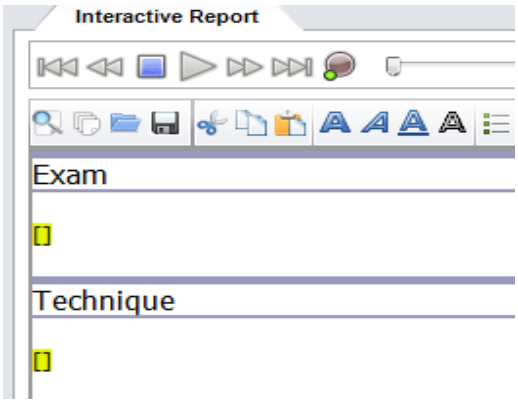

Figure 5.10 – Field Color in editor

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Reporting – Radiologist Edit Text Color

Within the reporting window, the user can open the context menu (right click) on the editor. This will present the user with a list of options. Selecting the "Editor Appearance" option will open the "Editor Appearance" window. A new option has been added.

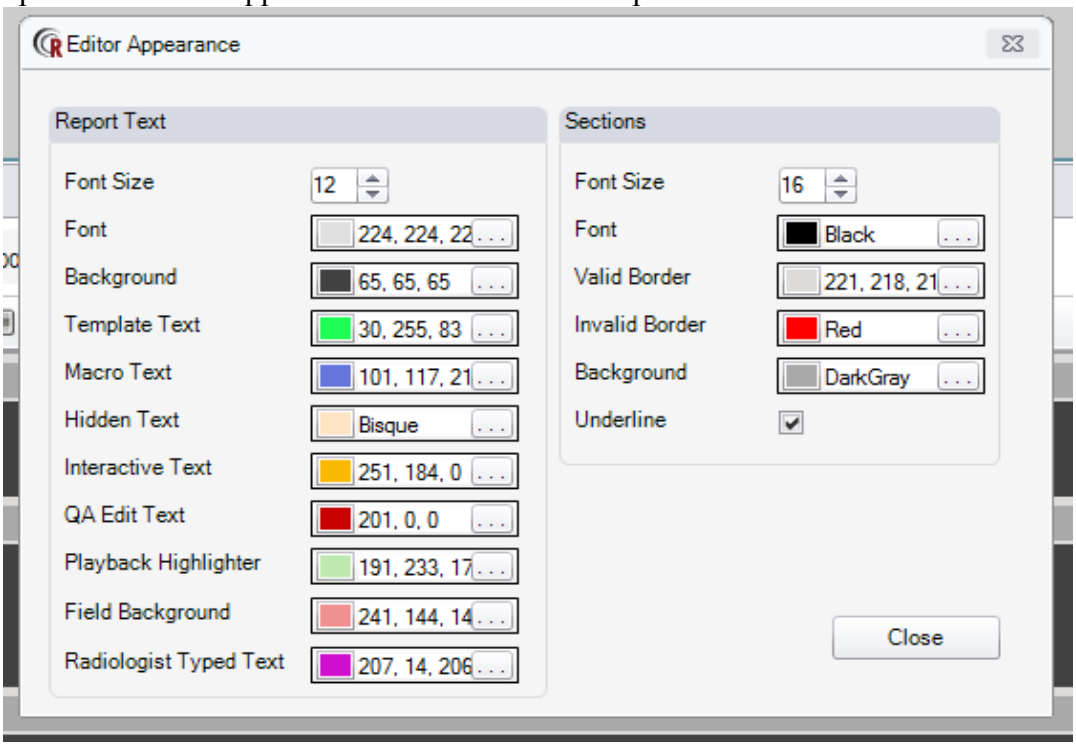

Figure 5.11 – Editor Appearance window with new Radiologist Typed Text option

This new option controls the color of the manually entered/edited text by the radiologist

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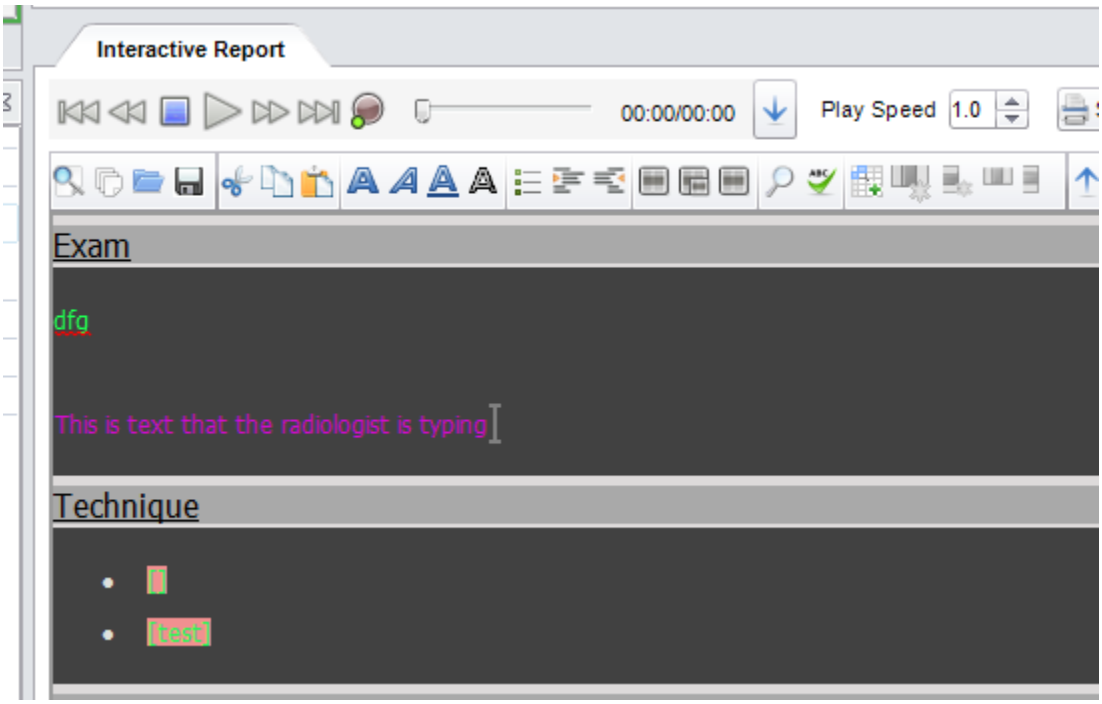

Figure 5.12 – Editor displaying the text color when manually entered by the radiologist.

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Reporting – Editor Margins

Within the reporting window, the user can open the context menu (right click) on the editor. This will present the user with a list of options. The "Margins" section of the Editor Appearance window has been added. This will allow the user to set their margins within the editor.

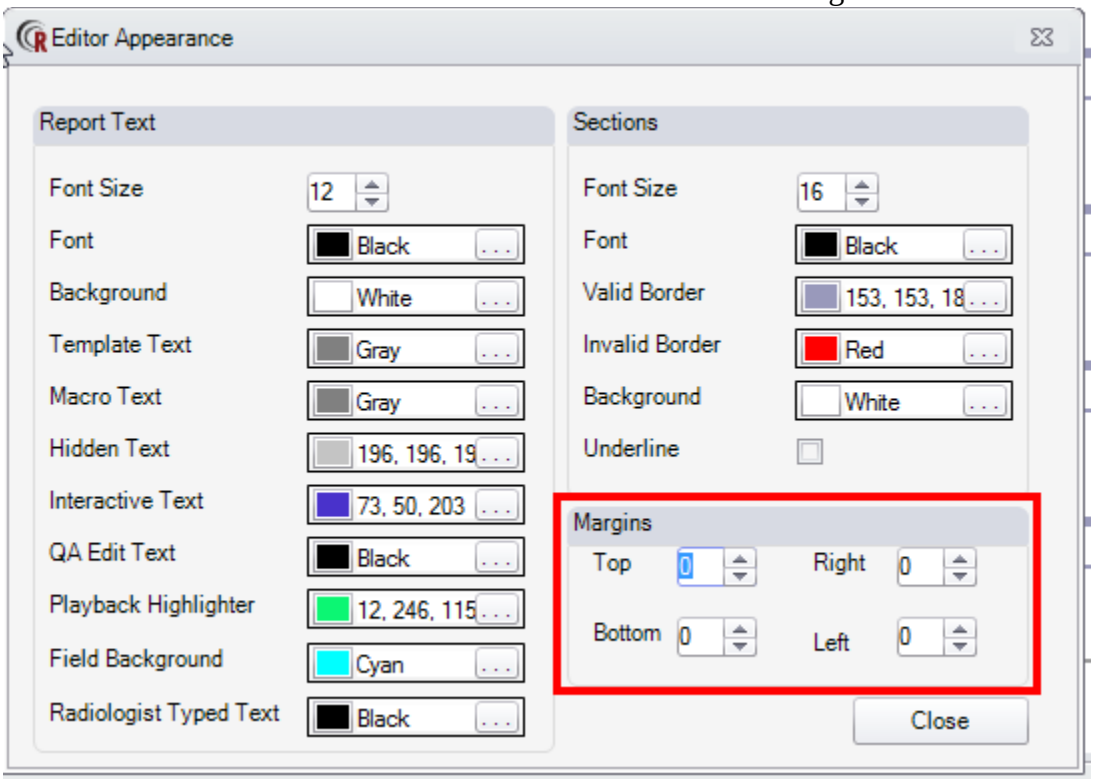

Figure 5.13 – Editor Appearance window displaying new Margins options

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Reporting – New SpeechMike mapping options

We have added two new SpeechMike function key options that can be assigned. The options of Undo and Redo have been added. These new options can also be made the default action of the keyboards left and right arrow keys

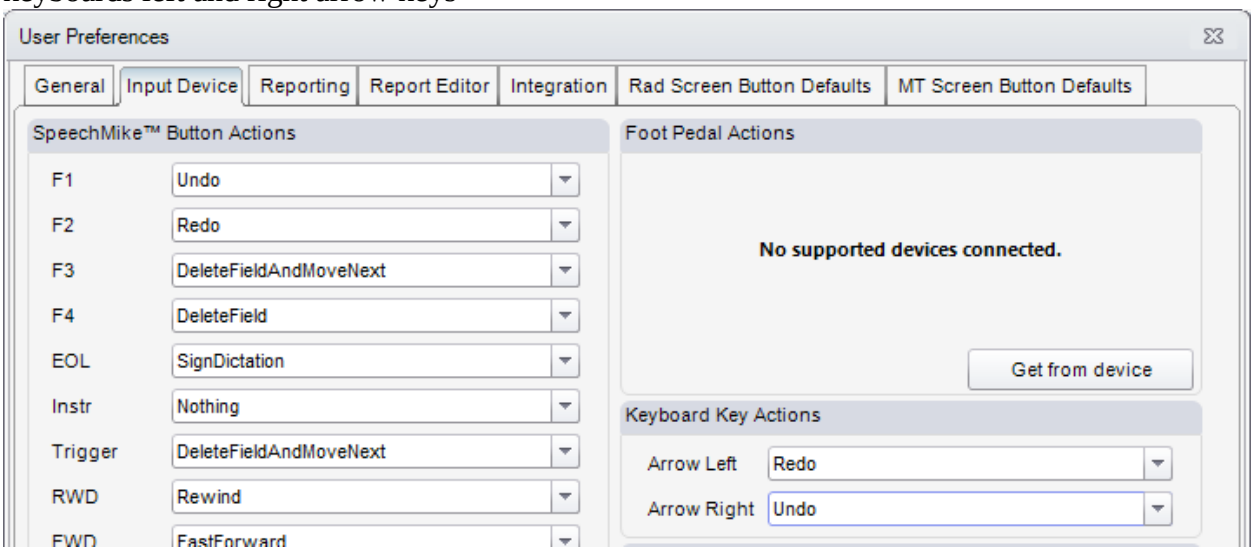

Figure 5.14 – The Undo and Redo options added for SpeechMike buttons and Keyboard arrow actions

It should be noted that these options can also be set as default Foot Pedal Actions and also mapped as an xKey command manually using the existing xKeys set up.

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Reporting – Delete Last Word

This new feature titled “DeleteWordLeftOfCursor” can be mapped as SpeechMike button, keyboard left/right arrow key, Foot Pedal button and also implemented as an xKeys command manually using the preexisting xKeys set up.

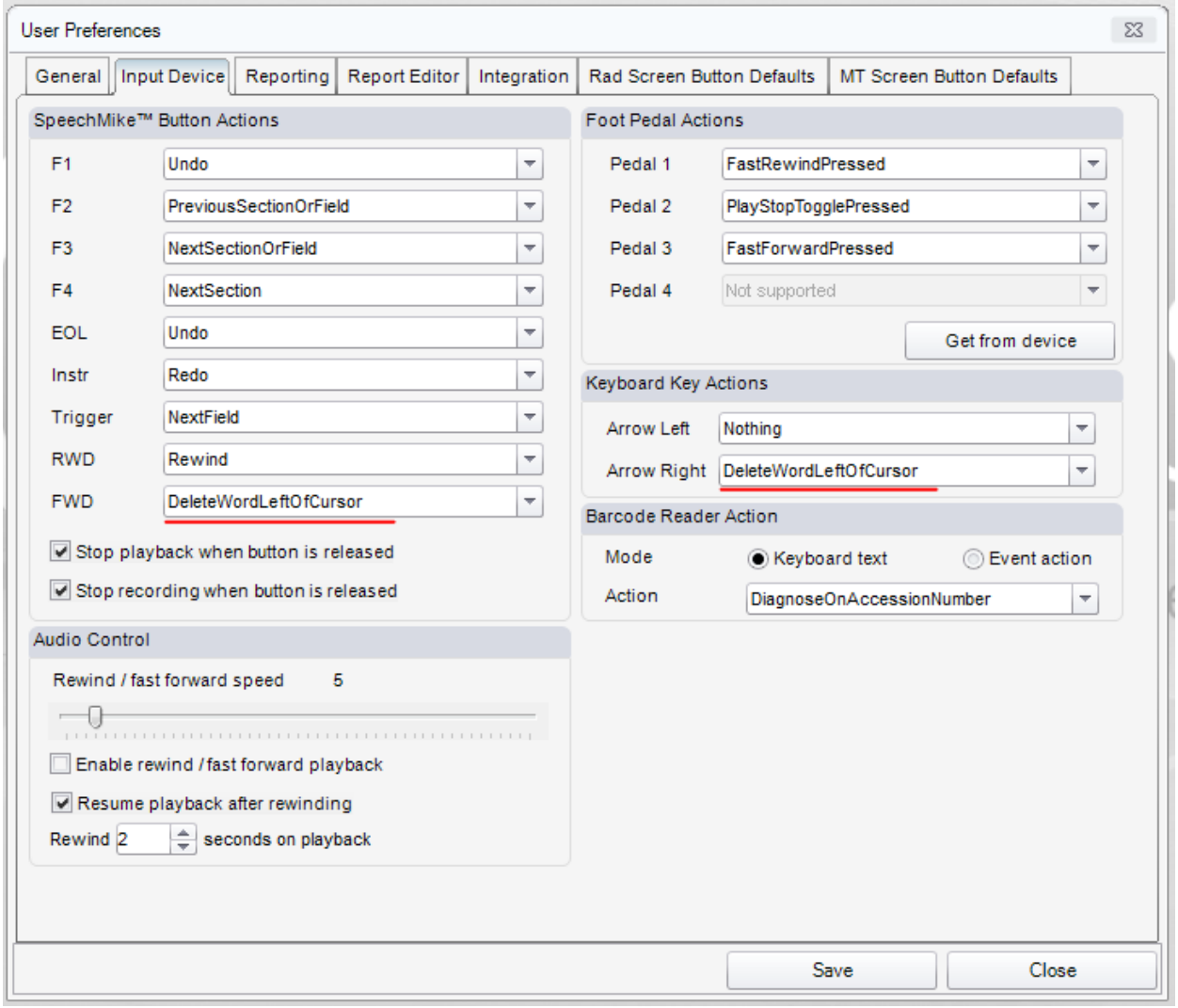

Figure 5.15 – DeleteWordLeftOfCursor function in user preferences

Support has been added for itemized lists. If you reach the end of a list item while deleting the last word, the empty item will be removed and the cursor will go to the end of the previous item.

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Reporting – Message Prompt on Submit

A new user preference option of "Enable submit warning" has been added under the Reporting tab of the User Preferences window.

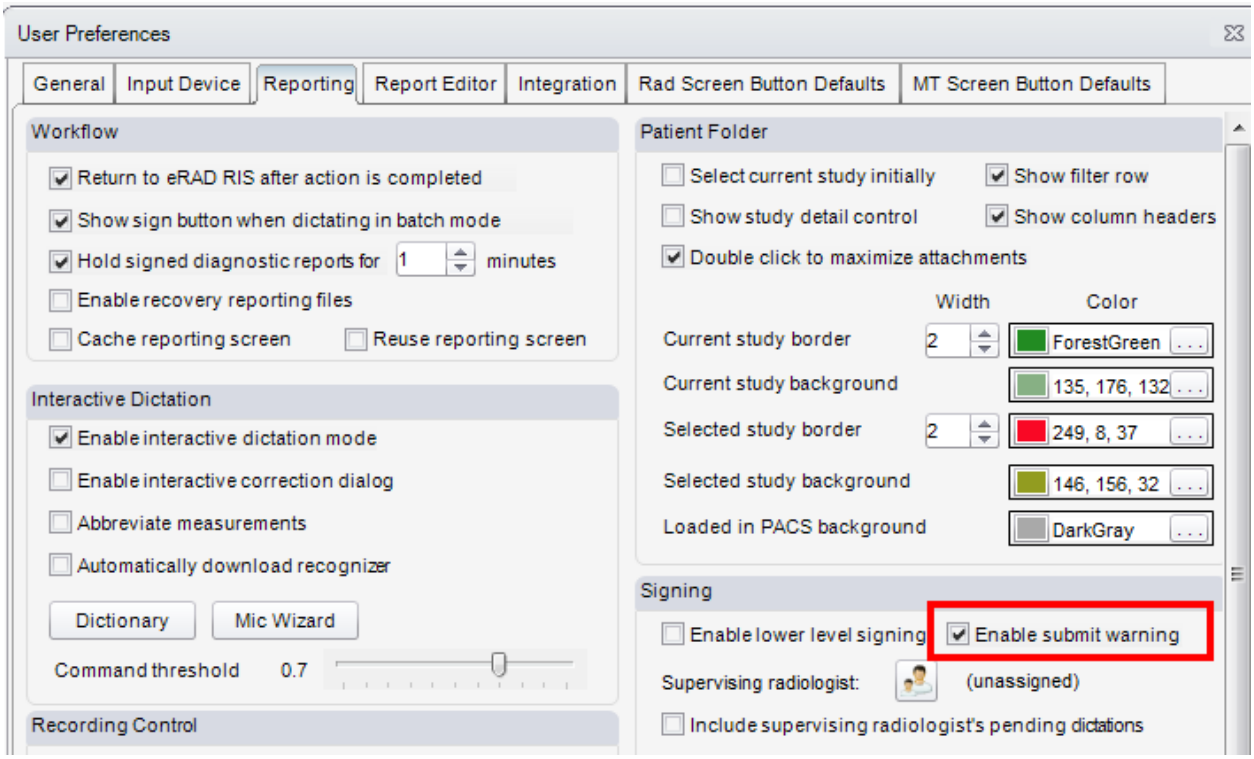

Figure 5.16 – User Preference of "Enable submit warning"

When enabled, and the user is in Signing mode and the Submit button is selected, they will receive a message prompt asking if this was the intended action.

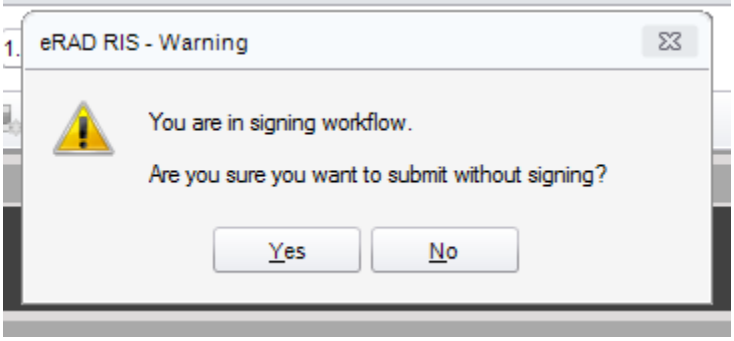

Figure 5.17 – Submit warning message from signing workflow.

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Reporting – Addendum Show All Templates

In previous versions of eRAD RIS when dictating an addendum, the user only had access to one template titled “Addendum”. We have added the “Show All Templates” option when creating an addendum. This was previous only available when creating the report initially.

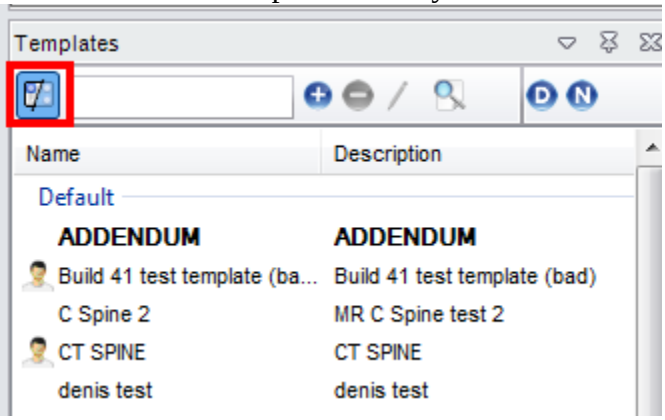

Figure 5.18 – Show All available on Addendums

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Reporting – Reject Addendum Request

It had been requested that the Radiologists wanted a way to reject addendum requests from within the reporting (dictate) window.
This is now possible. The last split button for Close/Skip now has 2 additional options that will be available if the current study open in the Dictate window is flagged as "*Request Addendum". The 2 new options are "*Reject addendum request and continue" and "Reject addendum request and close". These 2 new options are prefixed with an asterisk, which informs the user that they cannot be set as default.

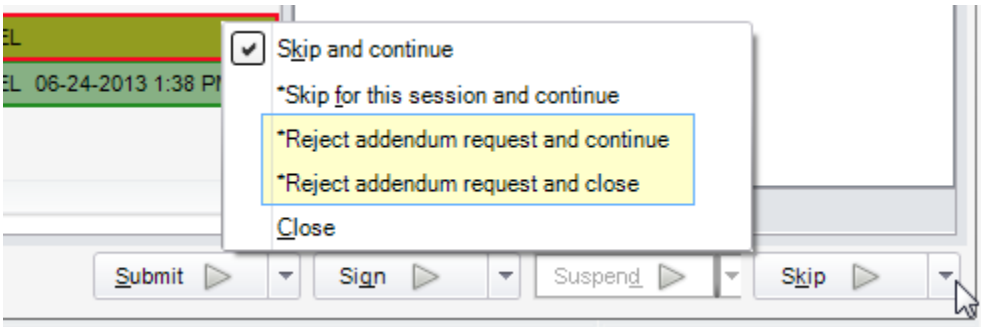

Figure 5.19 – New options added to the Close split button in reporting window

If one of these options is selected, the user will be prompted with the Reject Addendum window. In this window the user can enter in notes and reject the addendum or cancel the window

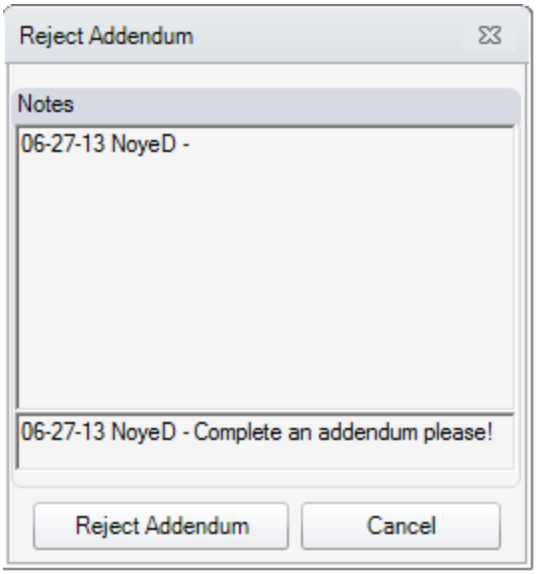

Figure 5.20 – Reject Addendum window.

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Reporting – Verify Report from All Signed Pending Release WL

The Verify Report button has been added to the All Signed, Pending Release WL.

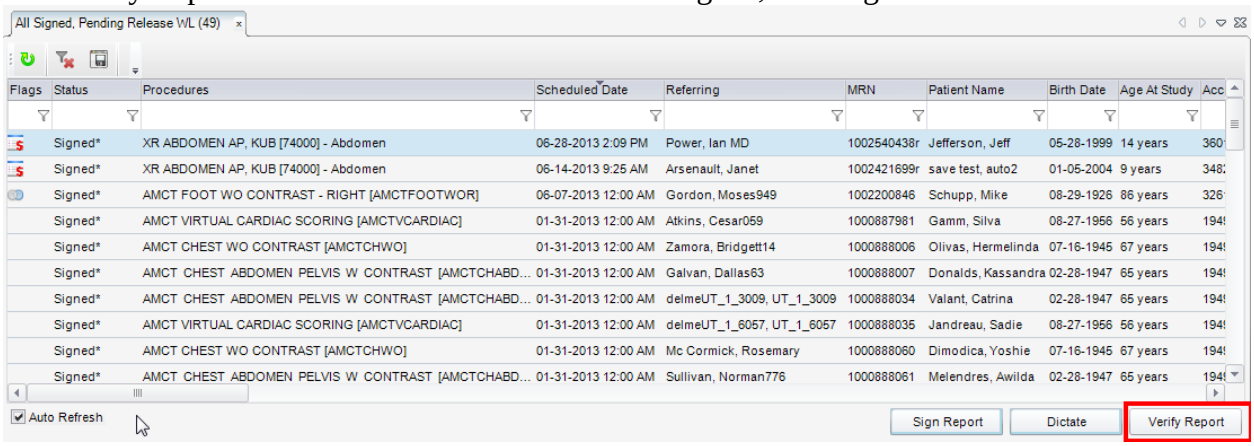

Figure 5.21 – All Signed, Pending Release with Verify Report option

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Reporting – Create Template from Current Report

In build 41 users can now create a Template from the current report in the reporting window.
This is similar to the existing feature of creating a macro from the selected text.
When the user has a template configured with desired text, formatting, macros inserted, etc…
they now have the option to create a template from this report.
From the context menu in the report editor select Create Template From…
This will open the Editing Template: New window

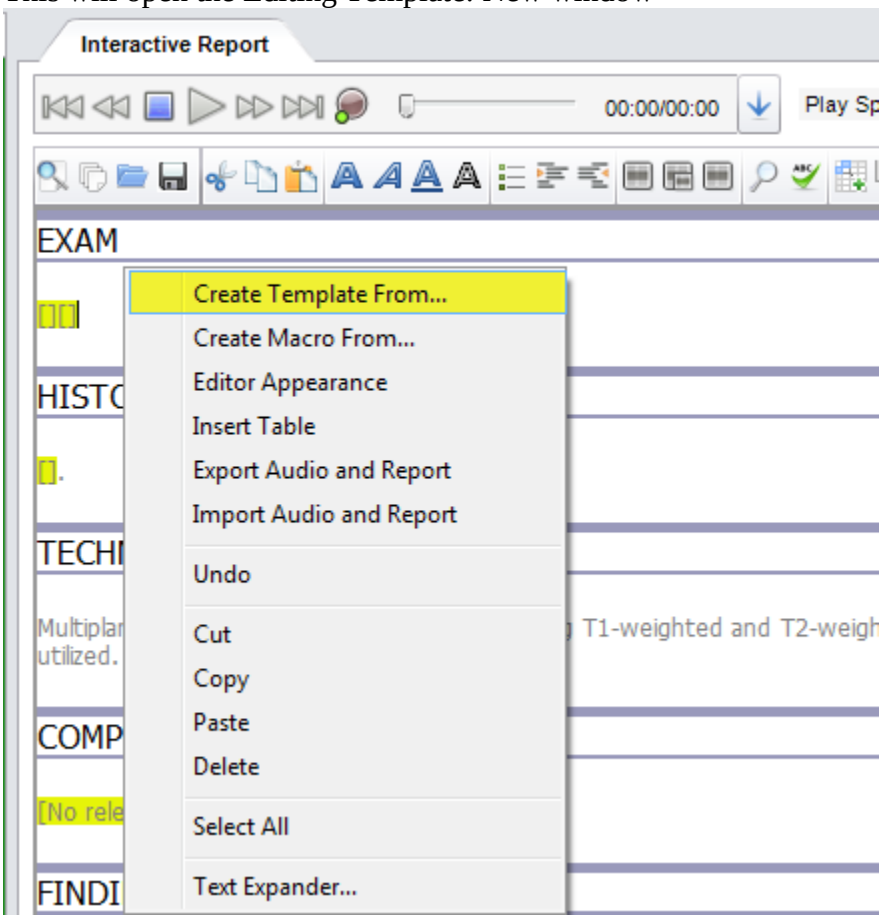

Figure 5.22 – Create Template option in reporting window

Once the edit template window is open, the user can create a new template as before.

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Reporting – Support Multiple Layouts

In build 40 we introduced the concept of having multiple default layouts. These layouts could not be altered and saved by the user or an admin.
We have taken this concept a step further in build 41 allowing the user to create a custom layout and save. Once the user has a desired layout, from the view menu select Save as Custom Layout. This feature is controlled by new access string "**View.Custom.Layouts**" with a default of None.

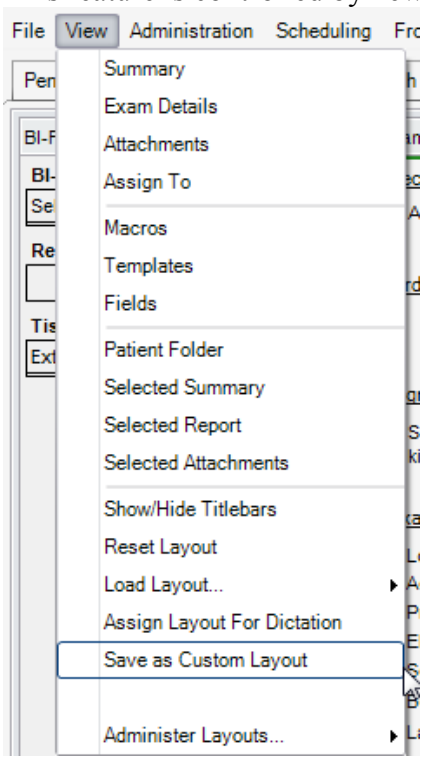

Figure 5.23 – Saving custom layout

Selecting the View menu option of "Save as Custom Layout" a new window will open allowing the user name this layout

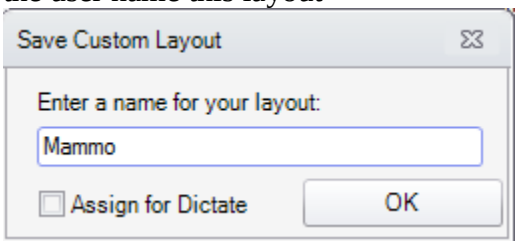

Figure 5.24 – Save custom layout

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The next the reporting window is accessed, the custom layout can be loaded from the current load layout menu; they appear below the standard admin pre-sets.

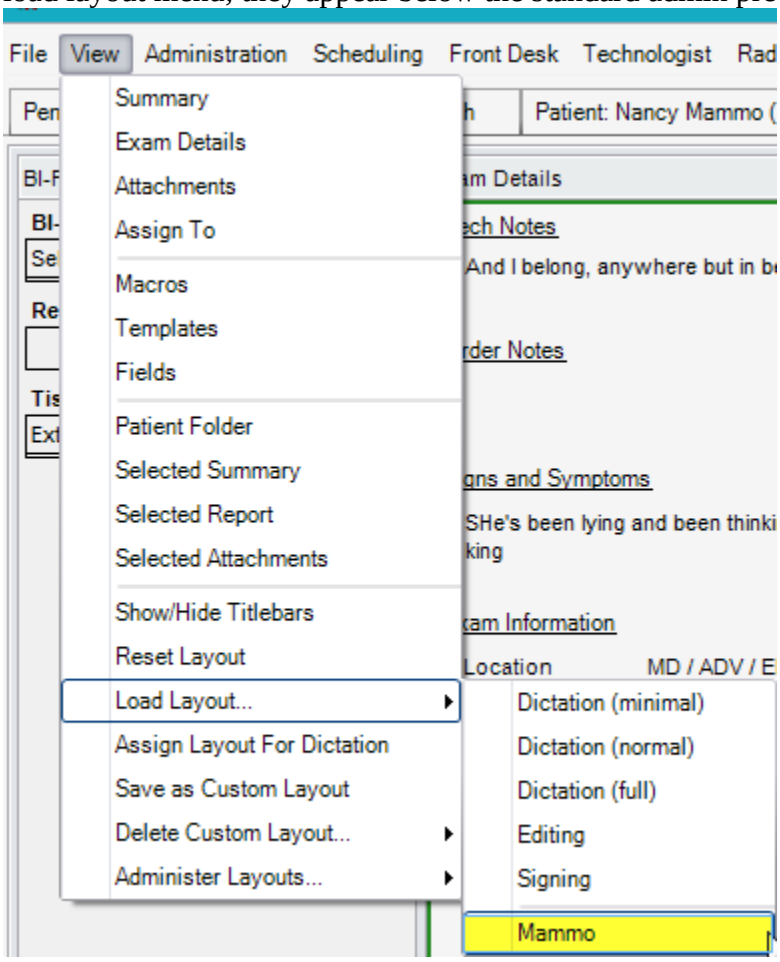

Figure 5.25 – Displaying how to load a custom layout

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Custom layouts can be removed using the View menu “Delete Custom Layout option.

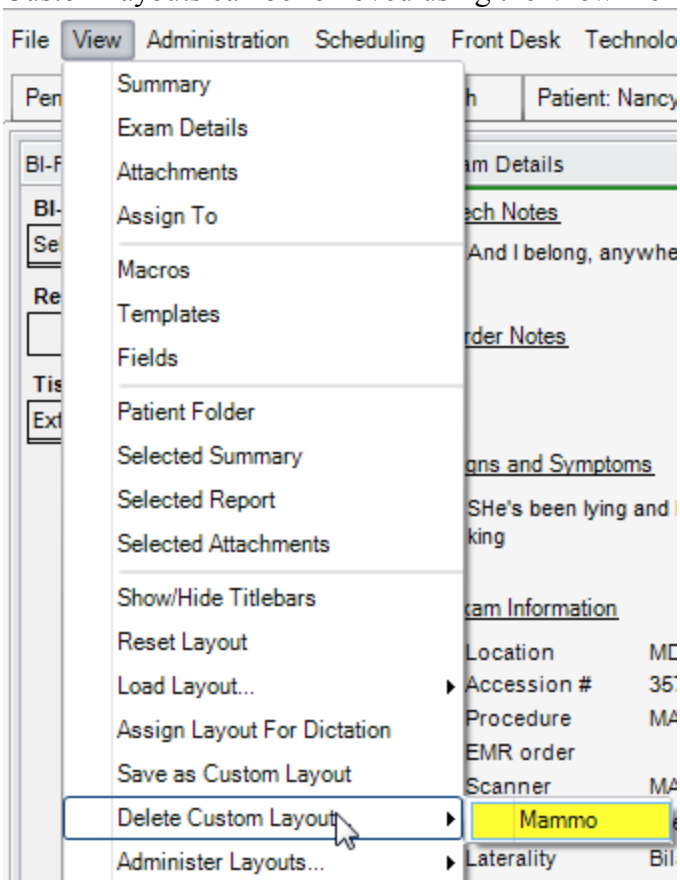

Figure 5.26 – Displaying how to remove a custom layout.

Before the layout is removed, the user is prompted with a confirmatory message.

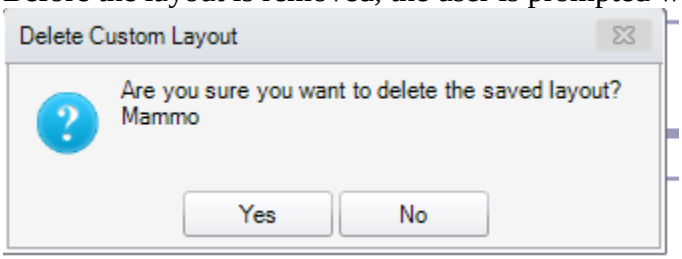

Figure 5.27 – Confirmatory message displayed when deleting a custom layout

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In addition to the Custom Layouts, in build 40.008 an administration user was given the ability to administer layouts, meaning they could configure a layout and save it as Dictation (minimal), Dictation (normal), Dictation (full), Save as Editing and Save as Signing.

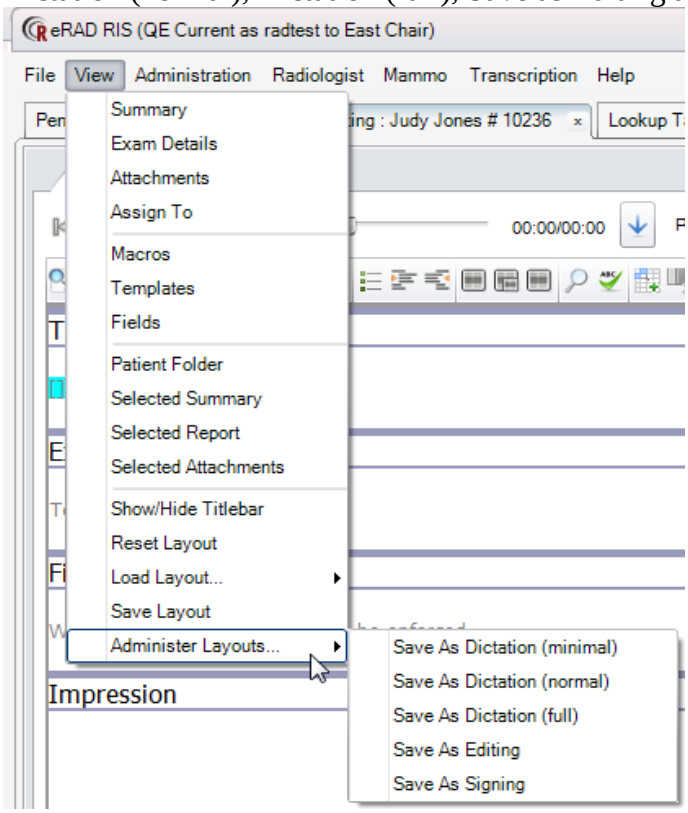

Figure 5.28 – Administer Layouts…

Access to all of these was controlled by one access string titled **View.Administration**. The View.Administration access string has been removed and replaced with the following

View.Preset.Administration - Access to preset layout administration submenu
View.Preset.Administration.PresetSigning - Access to preset layout administration for Signing
View.Preset.Administration.PresetEditing - Access to preset layout administration for Editing
View.Preset.Administration.PresetDictationNormal - Access to preset layout administration for Dictation Normal
View.Preset.Administration.PresetDictationMinimal - Access to preset layout administration for Dictation Minimal
View.Preset.Administration.PresetDictationFull - Access to preset layout administration for Dictation Full

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Reporting – Set Problem Flag without Rejecting Report

The verify reports window in the QA work flow previously had all the on screen controls and forms locked down until your reject the report.
Now we have enabled the Problem radio button option, notes box and assign to drop down.

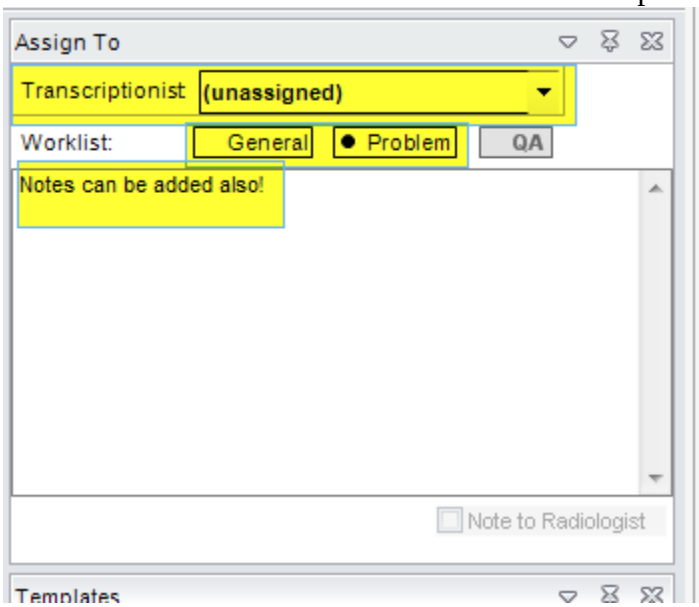

Figure 5.29 – Set problem flag in QA window without rejecting the report

This will allow the user to set a problem flag and note from the QA verify report work flow without having to reject the report.

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Reporting – Warn when Submitting From Sign Reports Window

When in the Sign Reports window, the user also has the option to submit the report and change the status to Report Drafted. It may happen on occasion that the Submit button is selected mistakenly instead of the Sign button. We have introduced a confirmatory message on the selection of the Submit button from the Sign Reports window. Selecting Yes will complete the Submit action, while selecting No will return the user to the Sign Reports window on the current study.

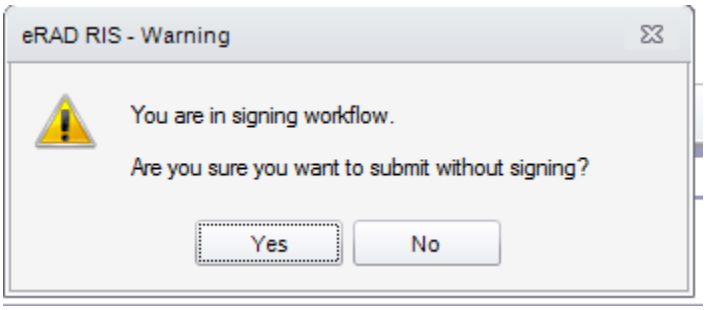

Figure 5.30 – Submit confirmatory message from Sign Report window.

This message is controlled by a new user preference. The user preference "Warn submit warning" which is located under the Reporting tab, when selected will ensure that the user is informed they have selected the Submit button.

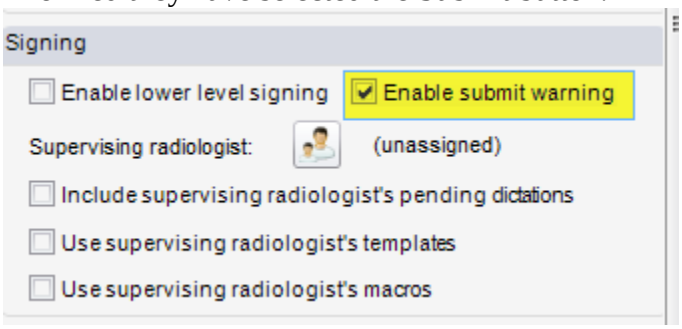

Figure 5.31 – Enable submit warning user preference

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Reporting – Report Verification Checks on QA Windows

When signing off a report a series of report checks are completed before the study can be advanced to "Signed" status. It has been requested that these report checks also happen when verifying reports in the QA work flow.
The report checks includes

- Section validation against document model.
- Report formatting (sections, fields, etc…)
- BI-RADS, Recommendation, and Tissue Density
- Auto spell check (this is optional driven by user preference)

Reporting – View Patient's Phone Number in Reporting Window

The reporting window now has the patient's home and mobile phone numbers displayed under the Exam Details data pane > Patient Information section.

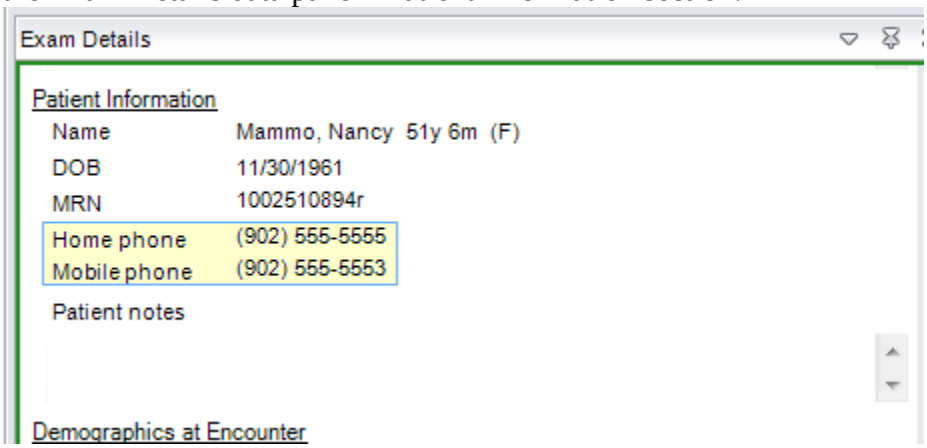

Figure 5.32 – Patients home and mobile numbers displayed in the reporting window

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Reporting - View Attachments in Full Screen Launched via Double Clicking

This new feature is driven by a new user preference titled “Double click to maximize attachments” located under the Reporting tab of the User Preferences window.

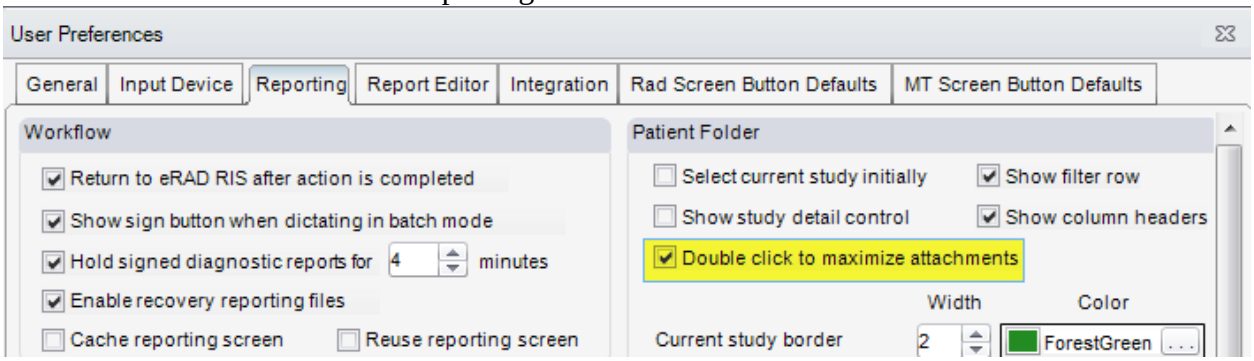

Figure 5.33 – Displaying new user preference “Double click to maximize attachments”

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 RAD Floating Dockable 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.

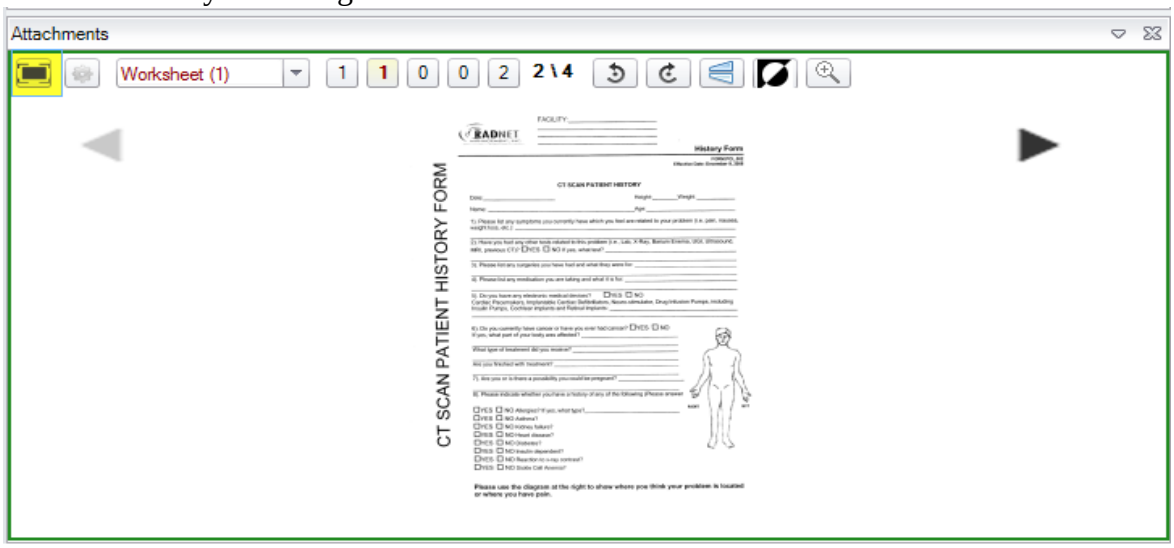

Figure 5.34 – Attachment data pane displaying button open in Full view mode

In addition to the double click to maximize the user can also click on the full screen icon shown in the above screen shot (top left).

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Reporting – Document Model to be Stored in TemplateMacro Table

All along the document model has been stored in the template itself. In this build we will now be storing the document model in the Macro Template database table. If there happens to be a template that does not have a document model, the user will find a new context menu item in the TemplateMacro table titled *Load Document Model Value. Selecting this menu option will extract the document model from the template and insert the value in the new column of Base Template.

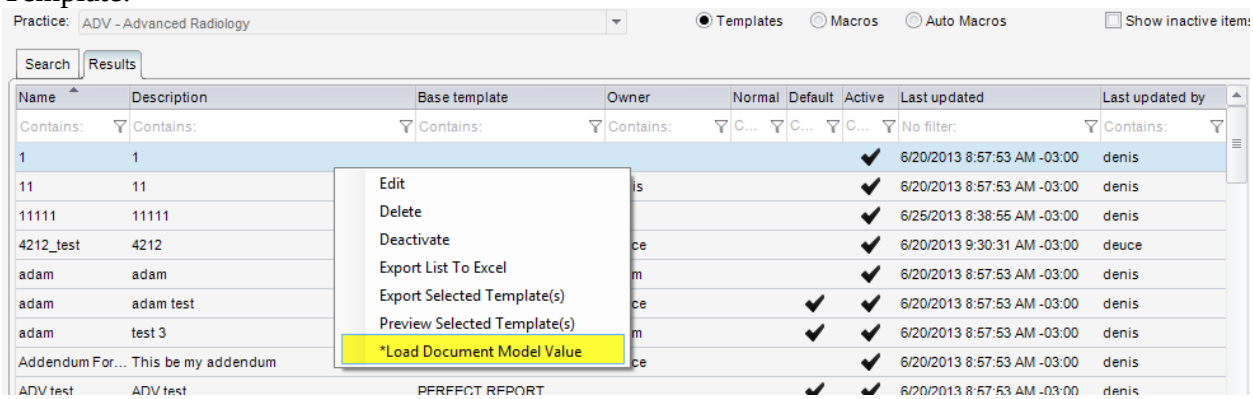

Figure 5.35 – TemplateMacro table displaying context menu option of Load Document Model Value

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Reporting – TemplateMacro Editor Enhancements

The look and feel of this lookup table is quite different in build 41. First thing you may notice when opening the TemplateMacro lookup table is that there are now two tabs.
The First tab allows you to set criteria to search/filter on (Practice, Users, Procedures and Scanners) and the second tab is similar to the old worklist of template/macros. However in this new version, the worklist is filtered based on the criterion that was listed in the first tab. Also there is additional information on the templates and macros in the work list as well as visible below in a grid.
This should add exceptionally more control for the administrators when it pertains to finding and working with a set of macro/templates.
Filter tab shown here with no filters set (include ALL in the results)

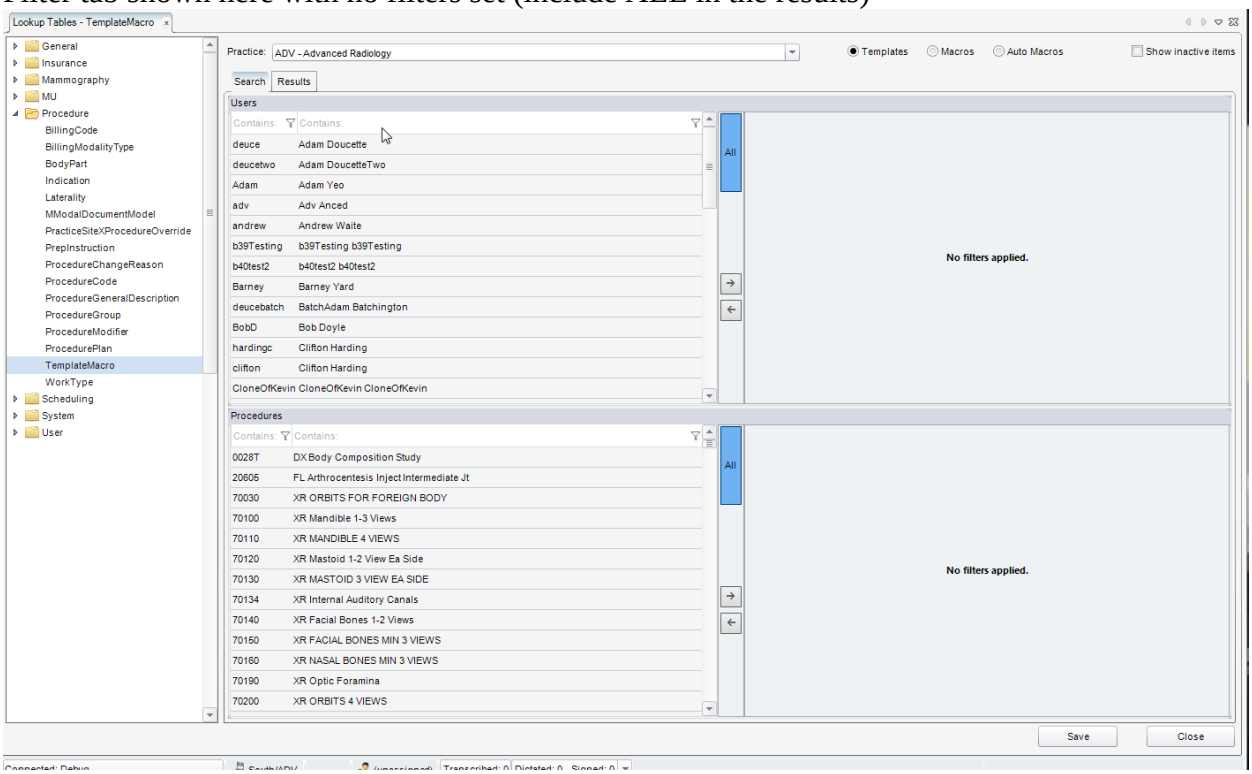

Figure 5.36 – New and improved TemplateMacro lookup editor window

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A look at the Results tab below you will see that additional columns have been added so the user can see the template row selected is a Normal or Default template. The others columns are like before with the Name and Description of the template, what the Base template is, the owner, if the template is active and last updated date and user.
Also notice the details section below where assignments are displayed in a quick view fashion.

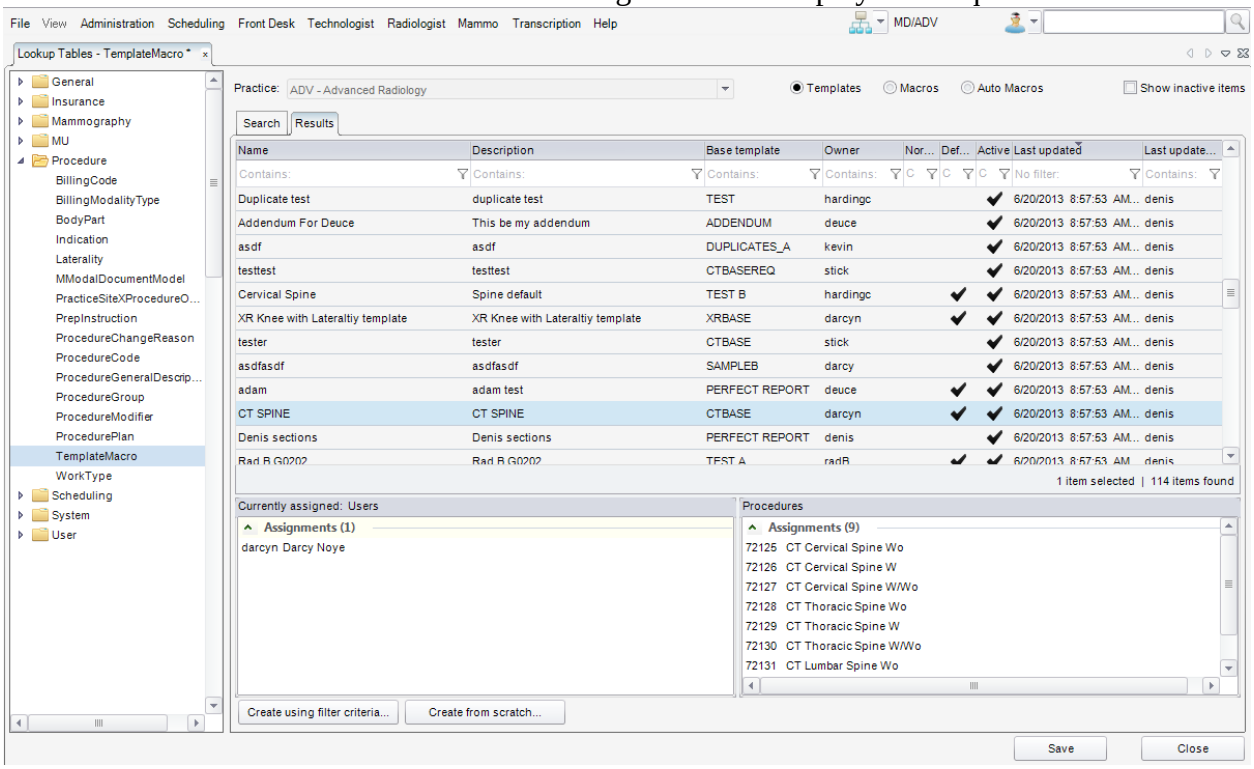

Figure 5.37 – Results tab of the TemplateMacro lookup editor

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When the Auto-Macros option is selected from the top radio button group, a Scanners grid is added to both the search and results sections.

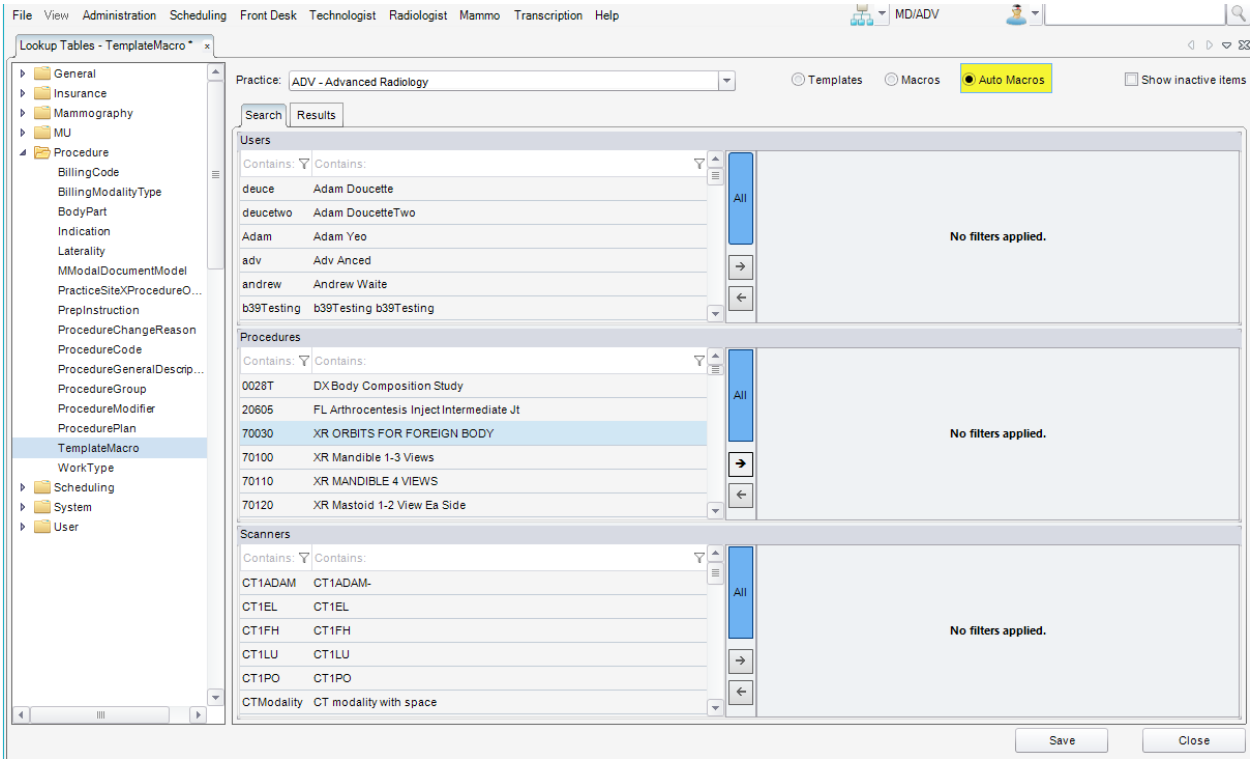

Figure 5.38 – Auto Macros search tab

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On the Results tab the Normals and Defaults columns do not appear as they are not relevant to Auto-Macros. Also the Scanners details are listed in the quick view area of the window.

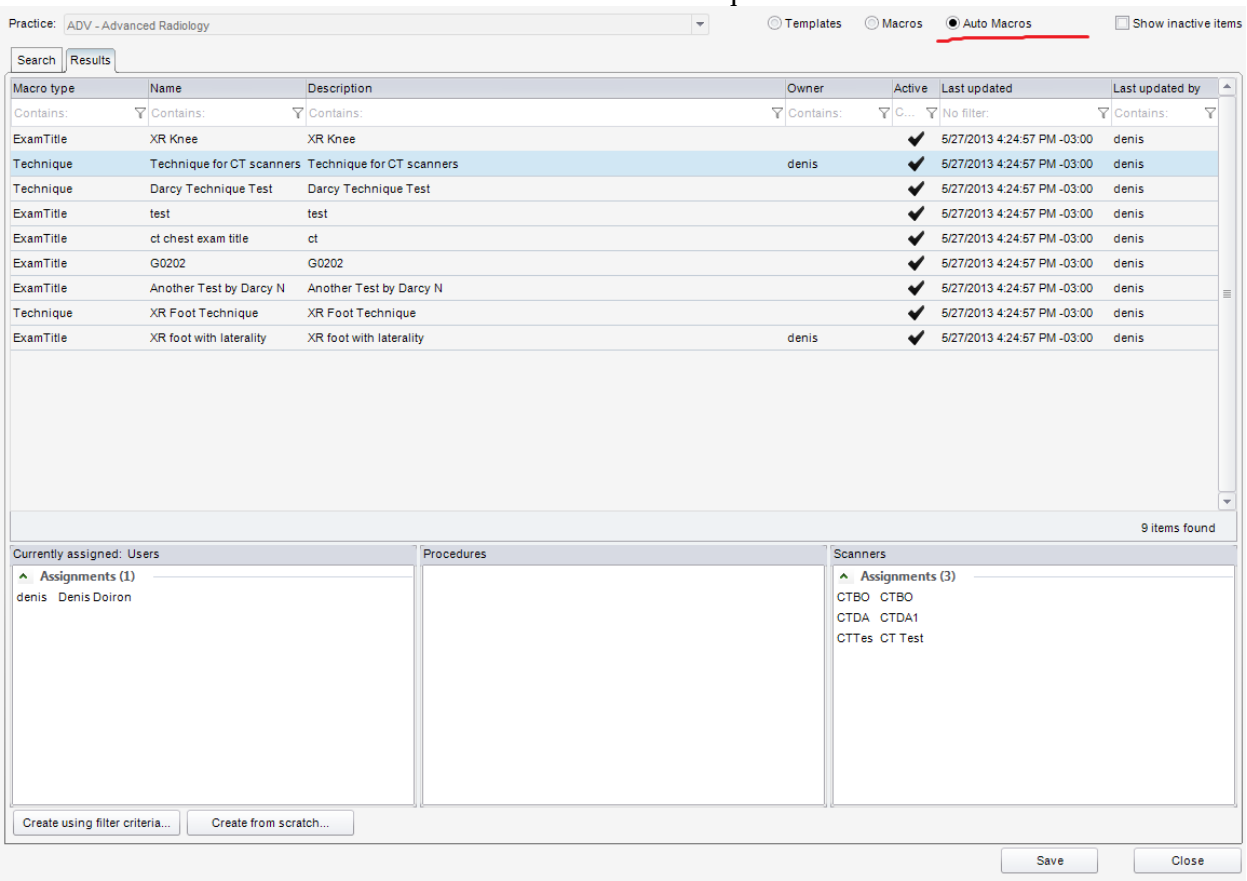

Figure 5.39 – Auto-Macros Results tab

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Filter/Search screen allows you to double click items to move them to the filter list as well as use the on screen arrow buttons. Items on the right will be used to filter on. If you select the **All** button, the filter is removed from use and the items are returned to the left. However if you select **All** again, the previously filtered on items will return. This will persist so long as you don't close the window or change types.

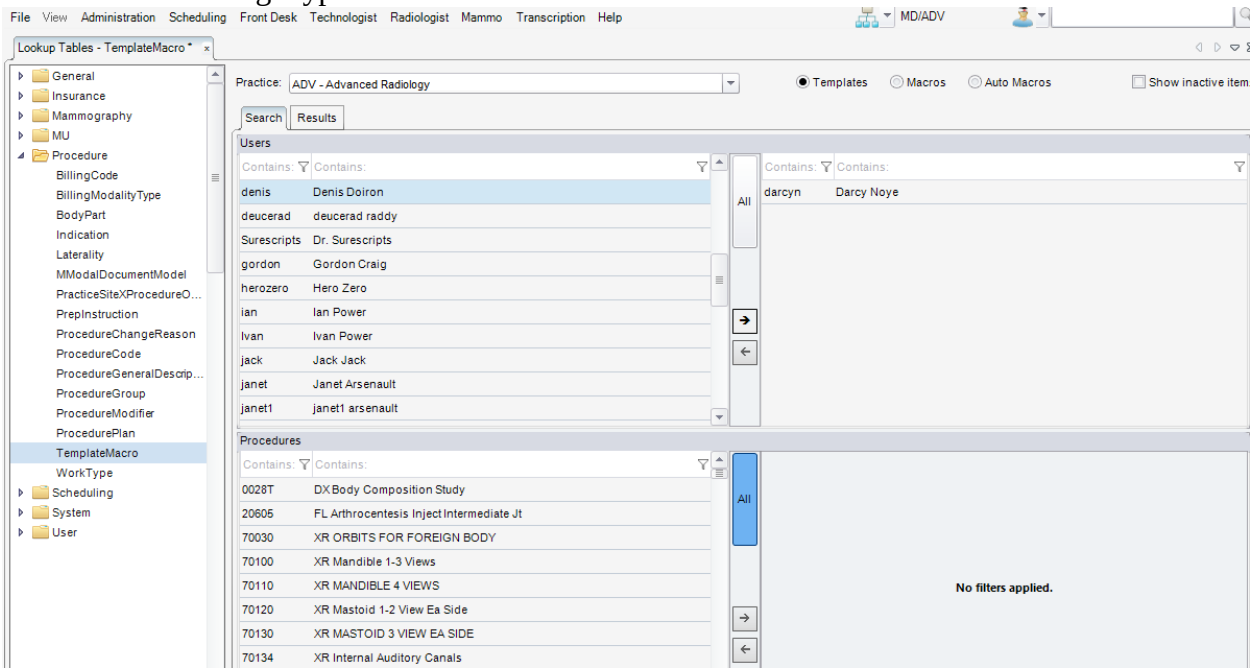

Figure 5.40 – Displaying the search tab of TemplateMacro editor

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Here we see the results screen using the above filters. The work list is filtered based on the one filter we applied in the figure above. Also notice the details section below lists the assignments on a template/macro in two groups. Matched assignments and assignments (like before). In his case if an assignment is a match to the criteria you searched on, then it is listed under Matched Assignments

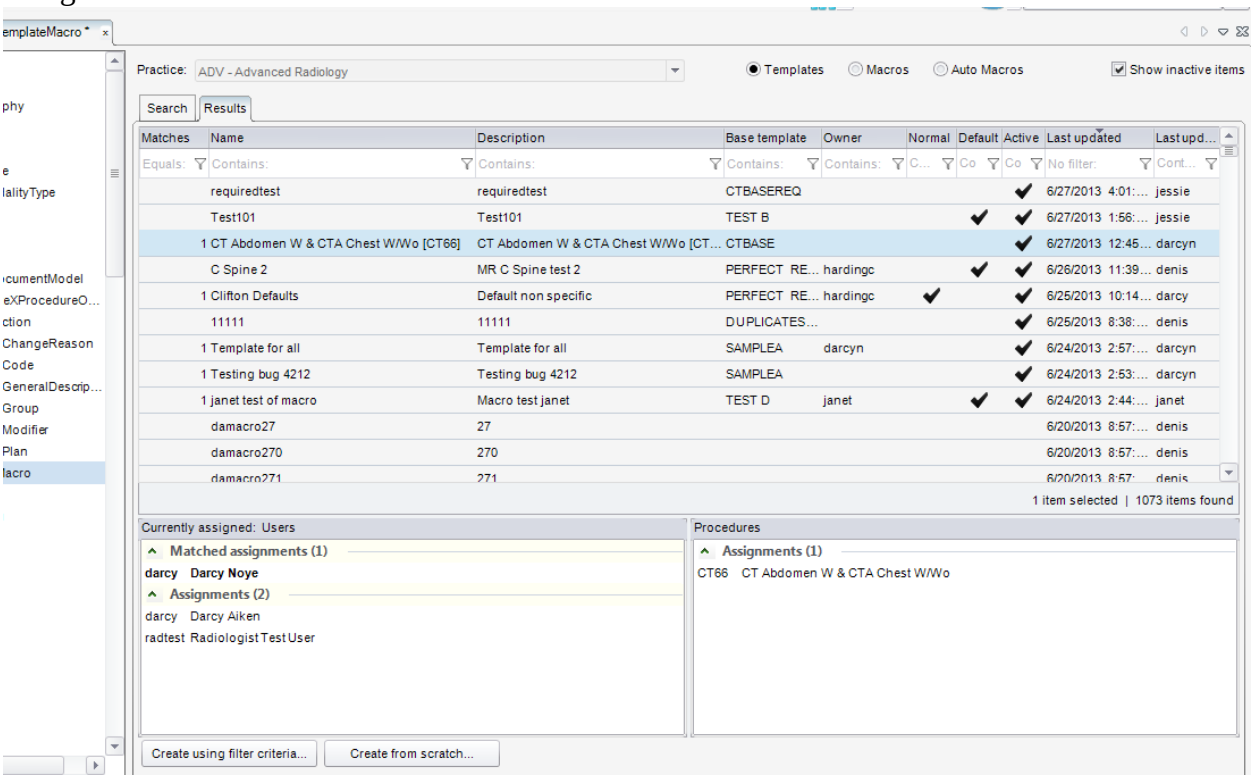

Figure 5.41 – Results displayed on the entered filtered criteria of the Search tab.

If the "Show Inactive items" check box is selected, the inactive templates will also appear in the results.

Loading the results screen based on a filtered criteria, you will have a "Create using filter criteria…" button as well as a "Create from scratch…" button. The "Create from scratch" option is the same as we had in previous versions. The "Create from filter criteria" button is new and uses the filter criteria to prepopulate assignments when creating a new template/macro.

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In addition to the new design of the TemplateMacro editor, some new context menu items have also been introduced.
The first is the ability to export the templates, preview the templates and export the list to excel.

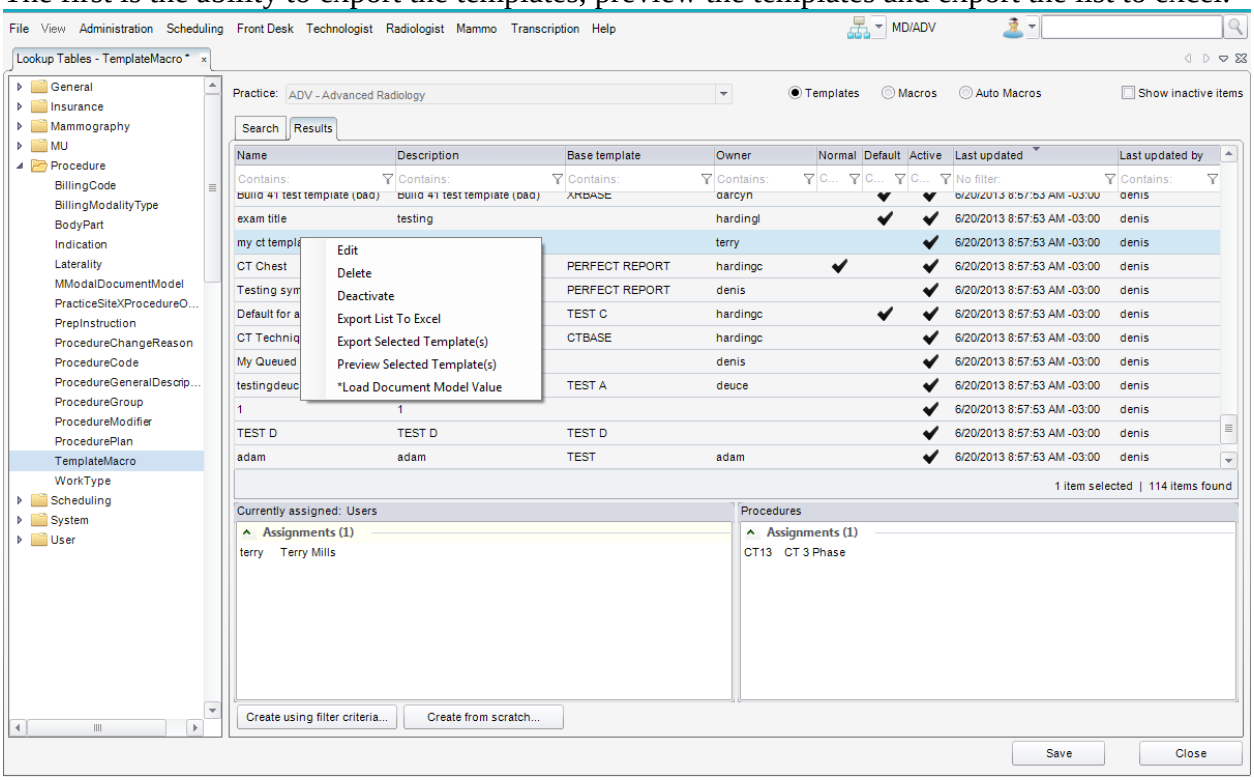

Figure 5.42 – Context menu in the TemplateMacro lookup table window

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The style sheet and the report were adjusted so that we would show empty sections and fields. Since we are previewing templates and macros, we want to show everything it contains.
The user can preview one or multiple reports.

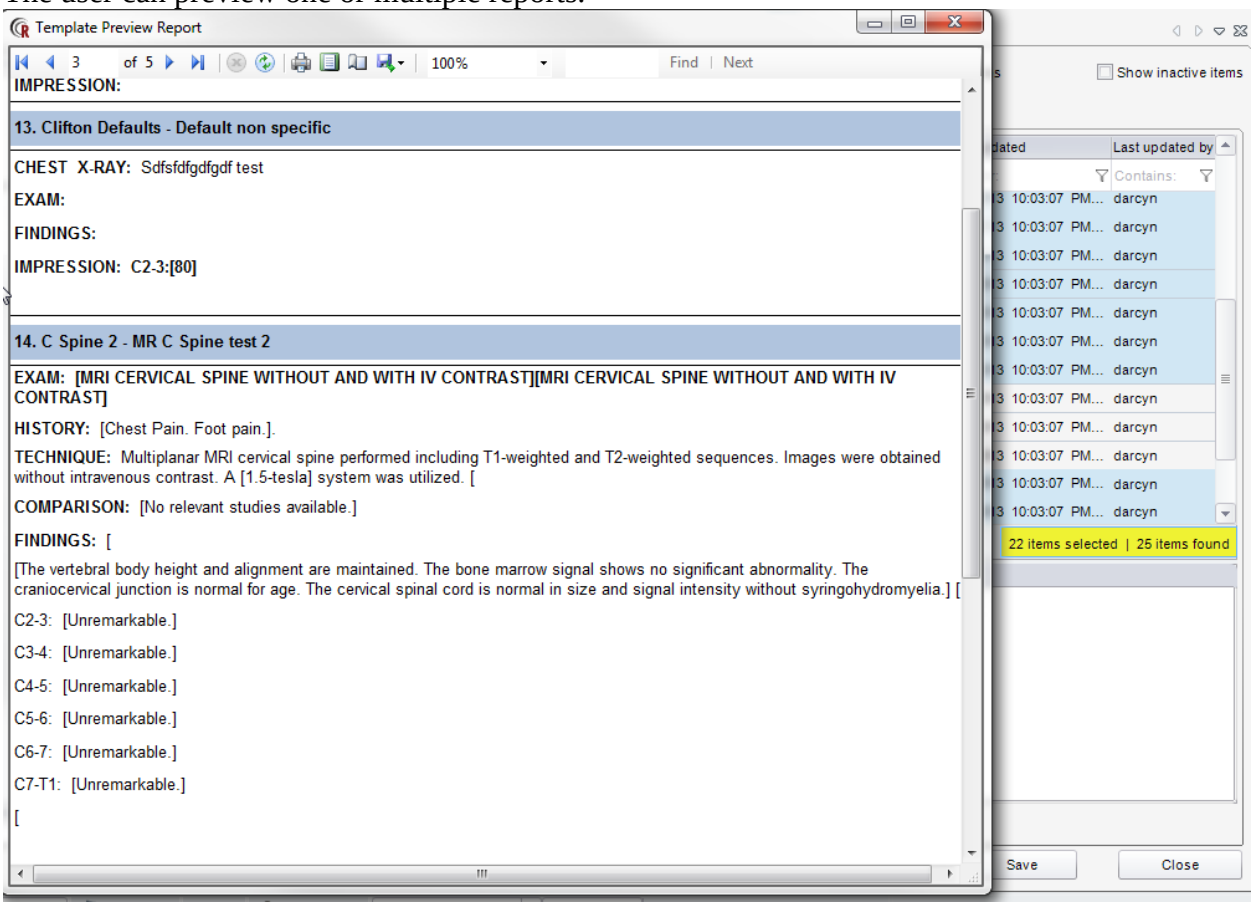

Figure 5.43 – Template preview

In the example above you can see that it tells me in the on the TemplateMacro lookup results tab how many rows I have selected compared with the total number of rows in my list (22 items selected | 25 items found)

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For exports, users are prompted for a directory to save to, and then all files are saved in that location. In this case this exports the documents in their raw form, which is a CDA document, an XML representation of the document and all of its contents.

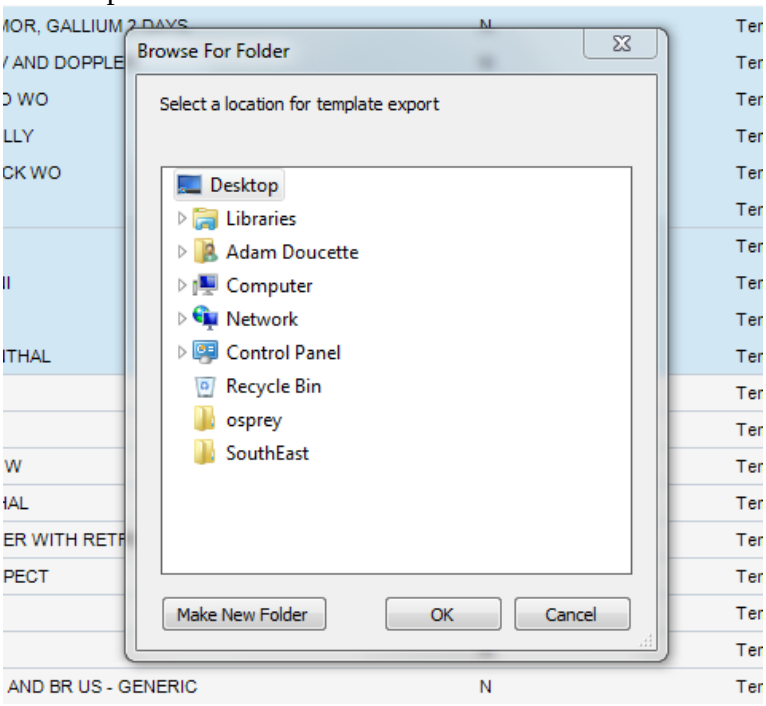

Figure 5.44 – Exporting templates

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Reporting – Verbose Trace Logging to a Flat File

We now log verbose log statements to a subdirectory entitled **verbose_log**. By default config, the files are named trace.log and when they are rolled hourly the names will get tagged with the date, such as **trace.2013-03-14.14.log.1**, **trace.2013-03-14.14.log.2**, etc.
They are configured in the ris.exe.config

```
      <add name="Rolling Flat File Trace Listener"
type="Microsoft.Practices.EnterpriseLibrary.Logging.TraceListeners.RollingFlatFileTraceLi
stener, Microsoft.Practices.EnterpriseLibrary.Logging, Version=5.0.414.0,
Culture=neutral, PublicKeyToken=31bf3856ad364e35"

listenerDataType="Microsoft.Practices.EnterpriseLibrary.Logging.Configuration.RollingFlat
FileTraceListenerData, Microsoft.Practices.EnterpriseLibrary.Logging, Version=5.0.414.0,
Culture=neutral, PublicKeyToken=31bf3856ad364e35"
          rollFileExistsBehavior="Increment" rollInterval="Hour"
          fileName="verbose_log/trace.log" formatter="Text Formatter" />
```

Also under the specialSources directive, we need to add the listener for use.

```
        <allEvents switchValue="Verbose" name="All Events">
          <listeners>
            <add name="Rolling Flat File Trace Listener" />
          </listeners>
        </allEvents>
```

The *rollInterval* can be changed to any of the following values:

Member Name	Description
None	No Interval
Minute	Minute Interval
Hour	Hour Interval
Day	Day Interval
Week	Week Interval
Month	Month Interval
Year	Year Interval
Midnight	At Midnight

Table 5.1 – Possible rollInterval values

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Reporting - Autosave

If a Radiologist user has a report open for dictate or signing, RIS has the ability to temporarily autosave the report and audio files.
This feature can be enabled or disabled via configuration. The new user preference is titled "Enable Autosave Reports" and is controlled by a new access string titled **"Clinical.UserPreferences.ReportingAutoSave"** that has a default of None

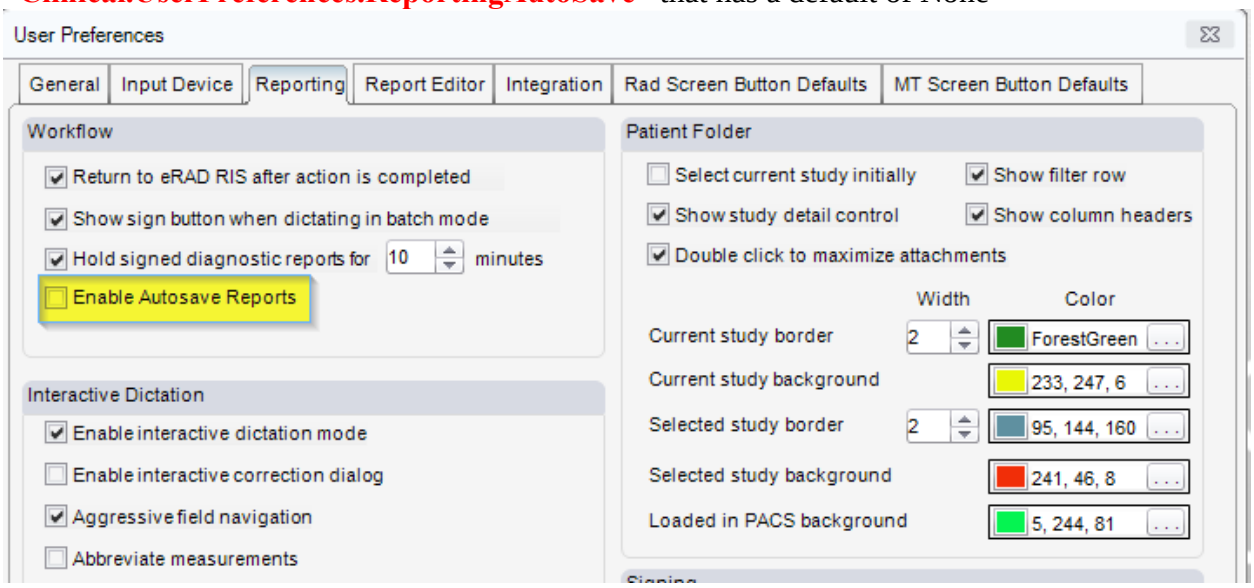

Figure 5.45 – User preference "Enable Autosave Reports"

The files are stored in the *application_path + /Reporting/autosave/**username**/* where **username** would be the logged in user's username.

The files have the following naming convention:
MODE-#-ACCESSION

Both audio and report files have the base filename. The report has no extension and the audio file has the extension of **.audio**.

The **MODE** is either DICT or SIGN, depending on the mode in which the report was open.
-#- is a delimiter used by the system

ACCESSION would be replaced with the accession number of the report in question.
Here is an example of an actual set of files:

DICT-#-1070954
DICT-#-1070954.audio

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When a radiologist opens an exam for dictation or signing the auto save fires up in the background and begins saving both the report file and dictation every 5 seconds. If the exam window is dismissed properly; application closed, action button, Xed out, basically as long as RIS doesn't crash, these files are cleaned up and deleted.

In the event that RIS crashes or does not get to properly close (killed from task manager) while a radiologist has the reporting window open, these files do not have the opportunity to clean up. As a result they remain saved.

When a user with saved recovery files logs into eRAD RIS, the Select Recovery Files window is presented to them:

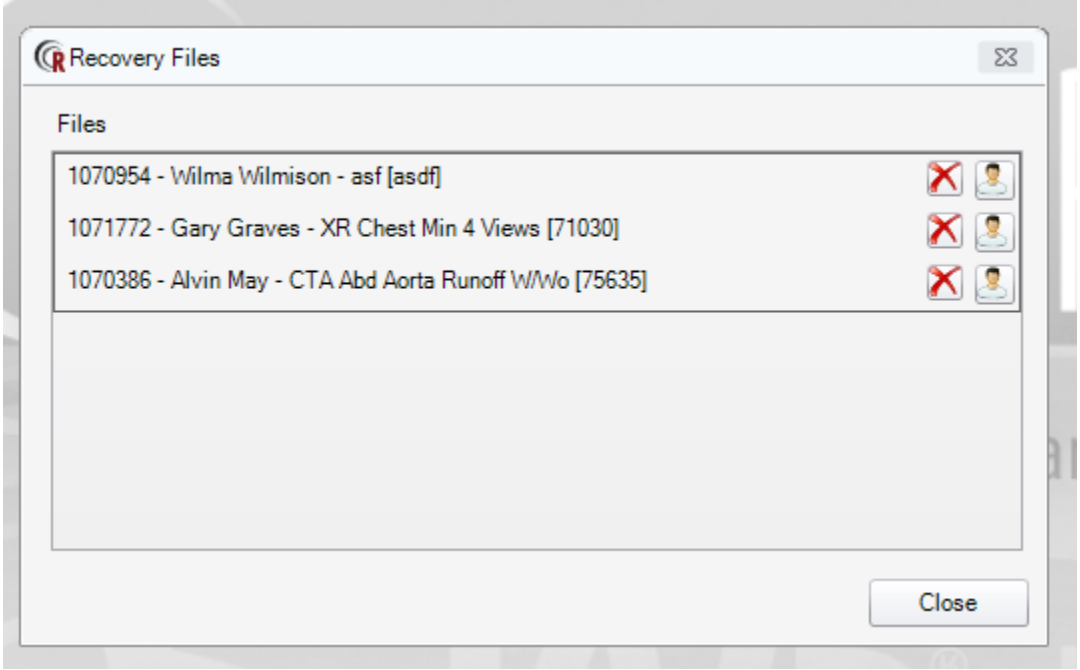

Figure 5.46 – Recovery Files window on login

Here the user is shown the accession number, patient name and exam type of each available recovery. They have two actions that can be taken on each recovery item. The X button will delete the files and remove the item from the current list. The Doctor button will launch the exam, restore the report and audio files from the save location as well as remove the item from the list.

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If the recovery files window is dismissed, it can be reopened from the main radiologist menu:

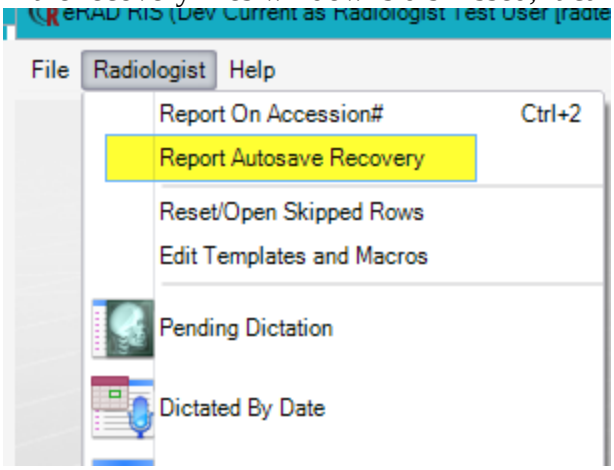

Figure 5.47 – Autosave Recovery menu option

In the event that another user has altered the interpretation (and committed it to the database) you will be presented the following while trying to recover your reading:

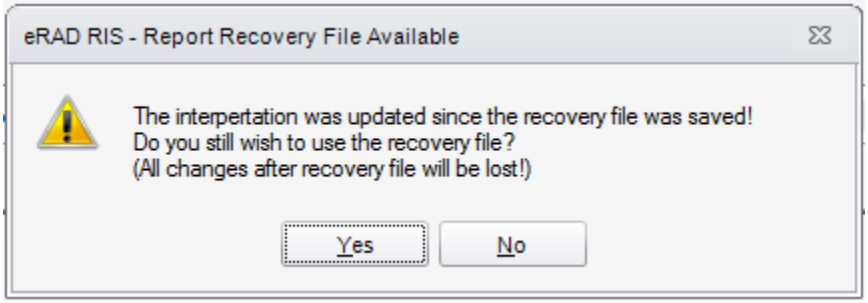

Figure 5.48 – Confirmatory message presented if the study has already been updated

If you chose to open the report with recover then the previous changes will be overwritten. If you do not SAVE during this session your override will be unwound, as it was not committed yet.
If you chose to not use the recovery file then you will open the report normally loading the most recent interpretation.

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Reporting - Bypass QA From Reporting Screen

The reporting window Sign split button has 2 new options that can be selected but not defaulted. When "*Sign for immediate release and continue" or "*Sign for immediate release and close" is selected the report will be moved directly to signed status bypassing QA workflow and bypassing Hold signed diagnostic reports.

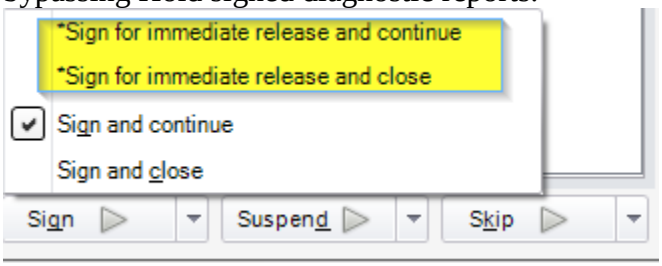

Figure 5.48a – New options for Sign split button in reporting window

A change was also made to the Quality Review Distribution editor.

a. Added ability to turn on/off QA at practice level, for stat and non-stat studies separately
   i. All/None option that will turn all practices to the relevant value.
b. Quality review distribution rows are now filtered by practice using a drop down.

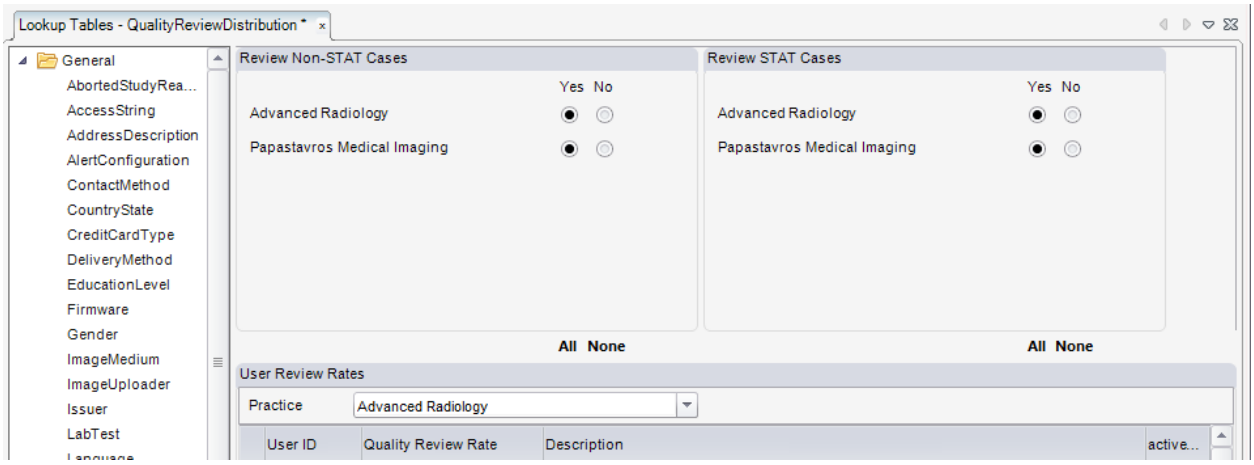

Figure 5.48b – Additions to the Quality Review Distribution lookup table

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CTRM Integration Support

A new button was created on the reporting screen located in the lower left, that will be available if the user has full access permission to the "**Clinical.CTRNNotification**" access string. The CTRN notification has two primary states, when the study does not have any notifications currently saved in the dataset it will appear greyed out; , if there is currently a notification that has been created it will be appeared pressed and with color; .

From within the notification screen the currently selected referring physician will be selected by default, with phone numbers and email address listed to be used. An additional referring can be selected, either from the dropdown or by searching from the available referring in the database.

When a referrer is selected the configured notification Phone Number, SMS (cell Phone) Number and email address will be used to populate the text box. If the referrer has chosen to be contacted by one of these options, it will be checked by default.

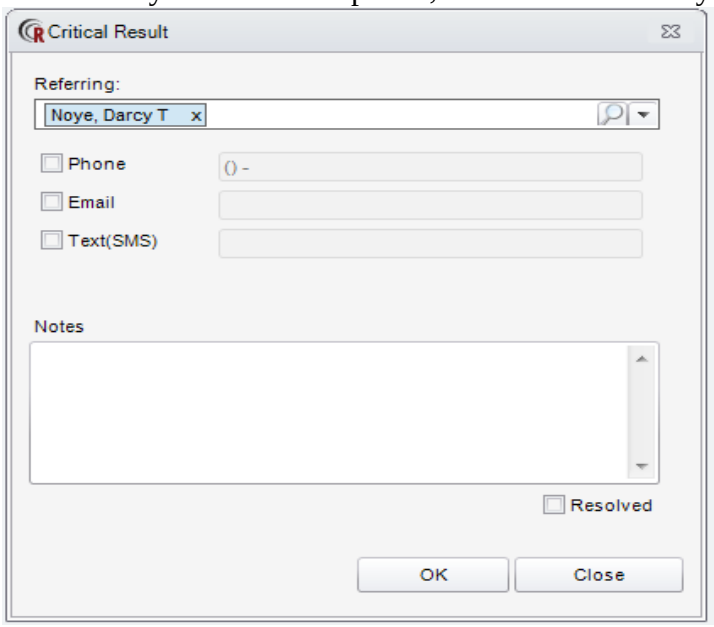

Figure 5.49 – Critical Result window

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We have also added to new work lists located under the Radiologist menu.

The first is titled **Critical Results**, controlled by access string **"WL.Rad.MyCriticalResults"**

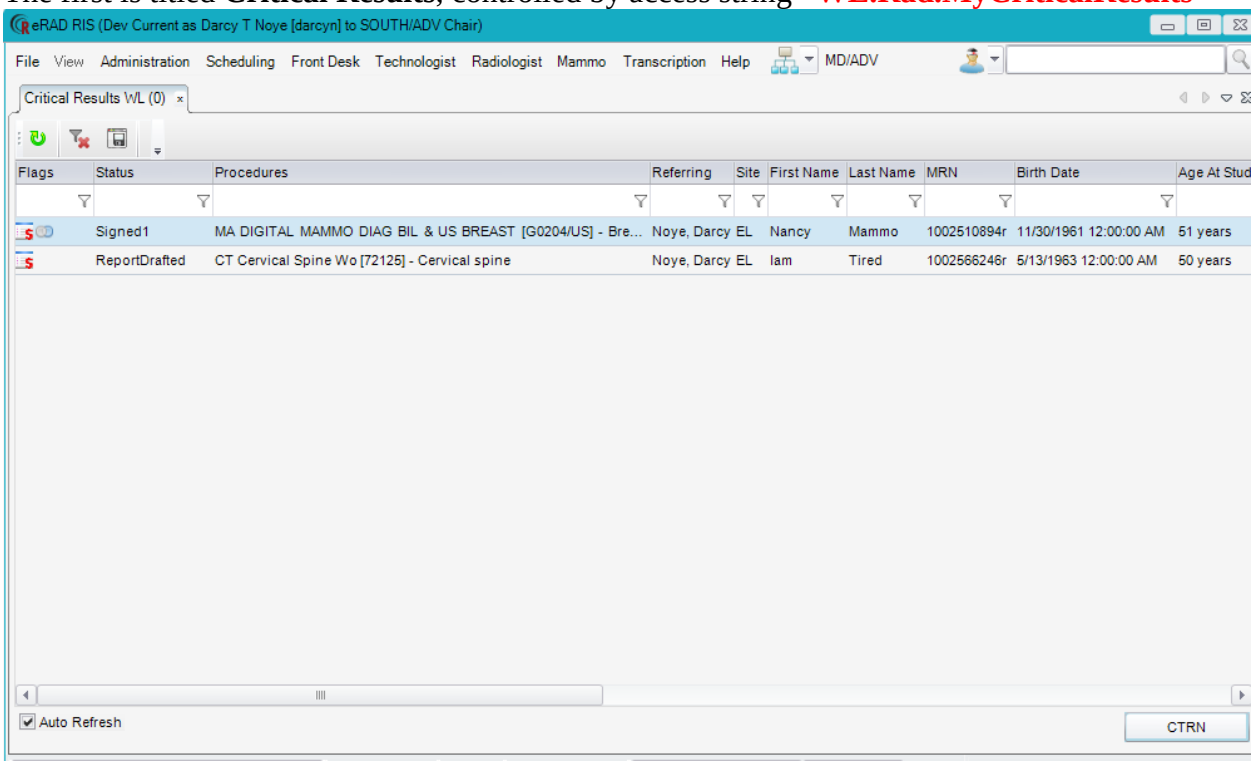

Figure 5.50 – Critical Results WL

The second is titled **All Critical Results**, controlled by access string **"WL.Rad.CriticalResults"**.

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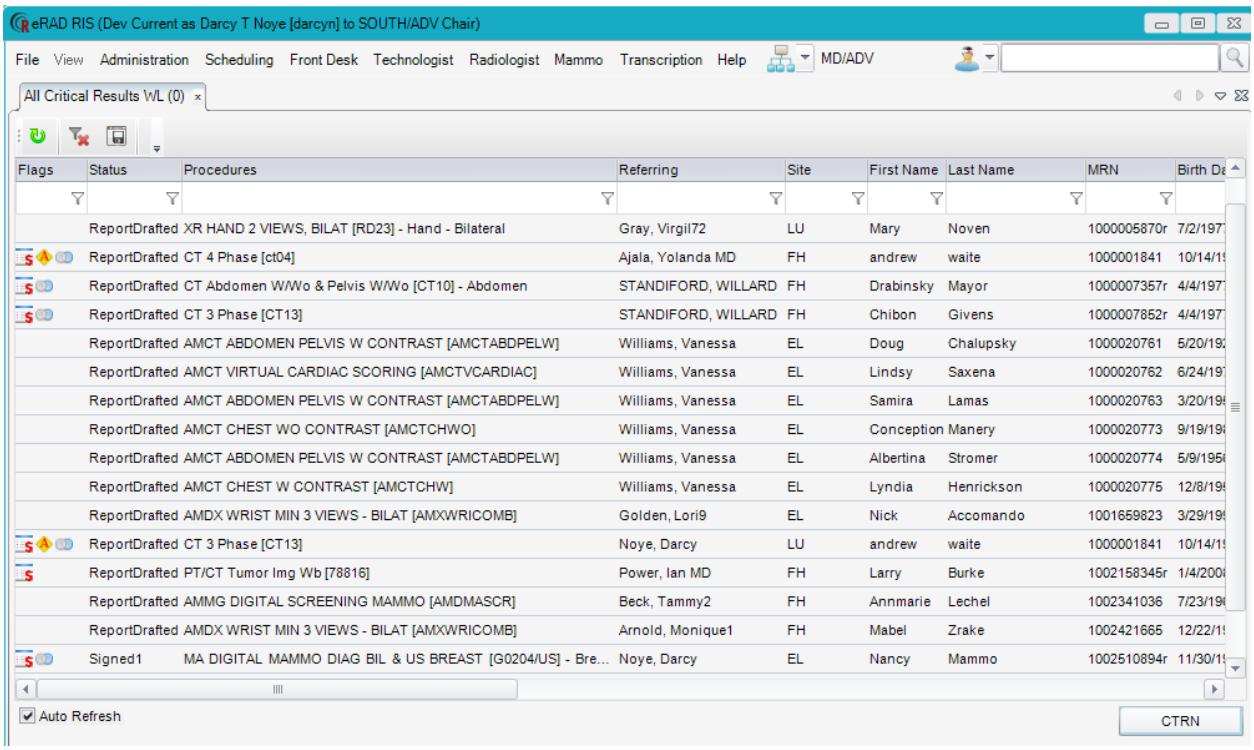

Figure 5.51 – All Critical Results

Each work list has a context menu that consists of CTRN and Audit History.

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Increase Weighting of Laterality in Relevancy Calculation

Now placing more weight on the ordering of relevant studies if the matching study's laterality matches, as shown in the following example where the Right Knee, gets a score of 69 instead of 100.

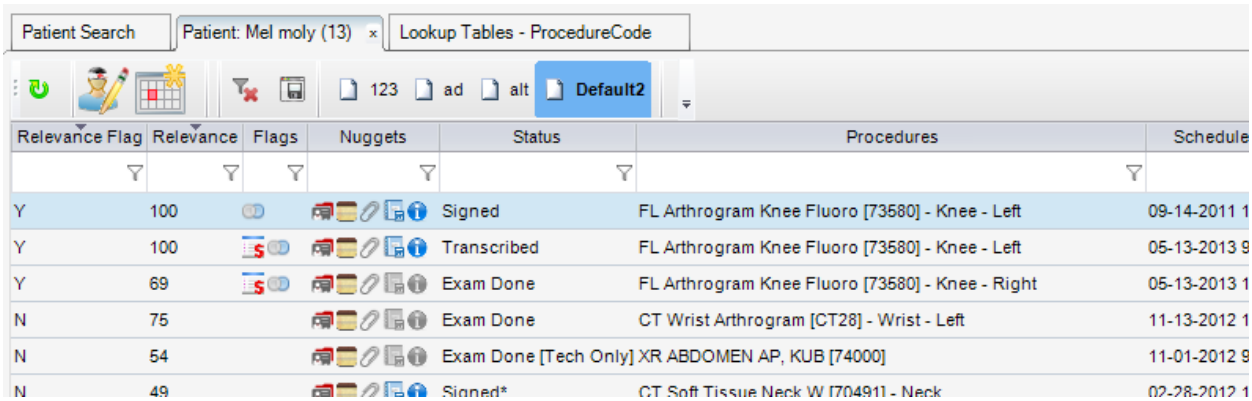

Figure 5.52 – Relevancy calculation

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Personnel Merge

There is now a Personnel Merge option on the Administration menu. The new menu option is controlled by the access string "Clinical.PersonMerge". The Personnel Merge screen is modeled after the Patient Merge screen, in that the user can search for 2 people (e.g. referring physicians), choose which one is the Source (i.e. the person that will be marked as deleted), which one is the Destination (i.e. the person that will survive the merge), and there is also a limited ability to choose some criteria from the Source that will be used to update the destination (currently only the NPI can be retained from the source).

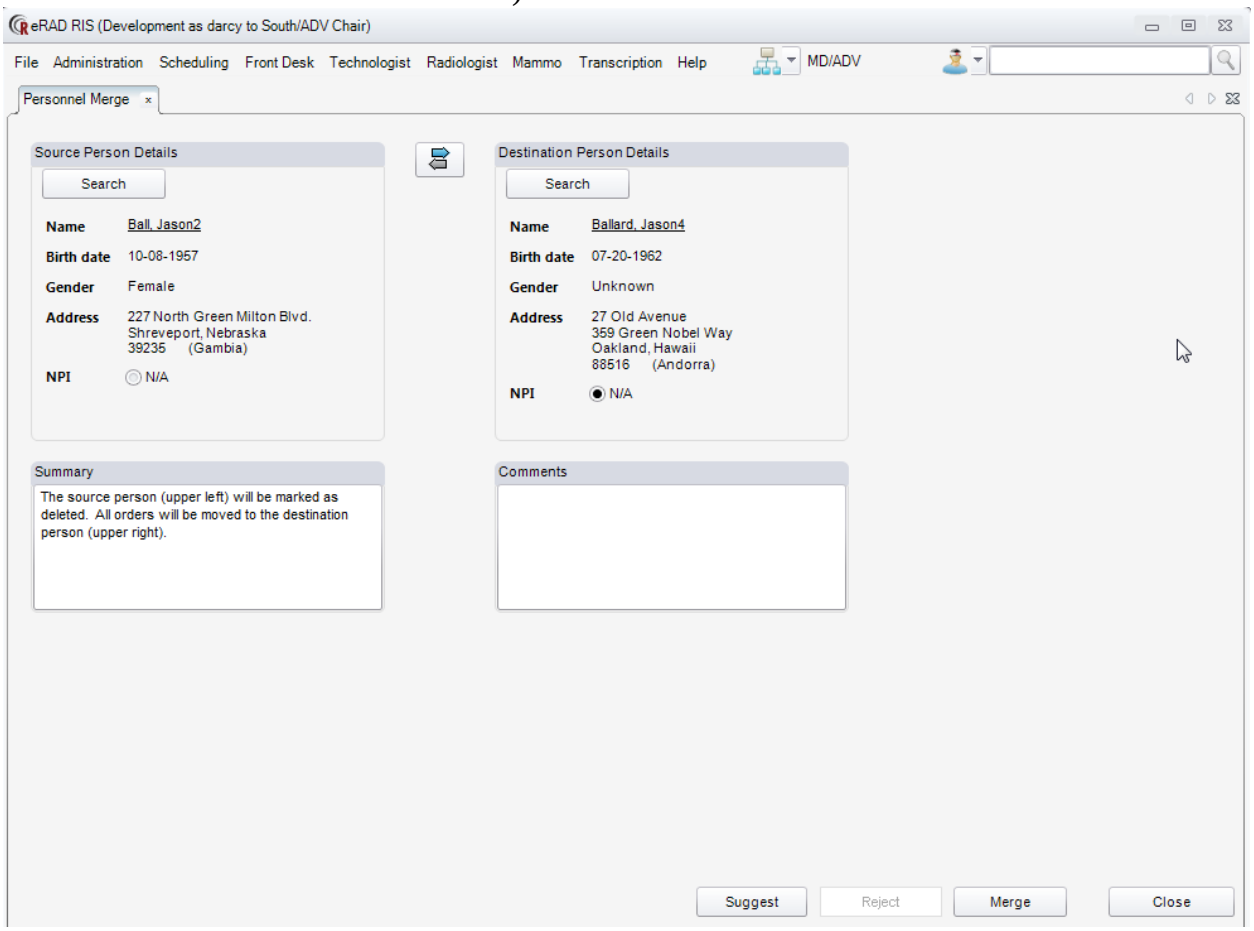

Figure 5.53 – Personnel Merge window

The Person Detail panels show the Name, Birth date, Gender, Address, NPI and User ID if applicable. As in the Patient Merge screen, there is a switch button located in between the two person detail panels that allows the user to swap the source person and the destination person.

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Merge Suggestions

A comment section is designed for users that do not have sufficient authorization to perform a merge, but would like to leave a comment or detailed explanation for the RIS Administrator who will perform the merge at a later date. When the user clicks the Suggest button, the screen will save their suggestion and close. The details of the merge suggestion will then appear on the Personnel Merge Request Worklist.

Personnel Merge Request Worklist

The Personnel Merge Request Worklist displays all of the outstanding Merge Suggestions. Access to this work list item is controlled by access string "WL.PersonMergeRequest". Items on this worklist will disappear when one of the following occurs:

a) The merge is performed
b) The merge is rejected
c) Any merge occurs that results in the source or destination person being marked as deleted (i.e. an alternate/conflicting merge took place)

The administrator who performs the action on the suggested merges will need the access string "Clinical.PersonMergeAdmin". These actions are to complete or reject the merge.

Reject Merge Suggestions

A RIS Administrator or other authorized user can open the Personnel Merge Request worklist and then double-click any row (or click Personnel Merge) to open the Personnel Merge screen and see the details of the Suggested Merge. The administrator can Reject the Merge if it is felt that the suggestion was inappropriate, and the row will disappear from the worklist. The ability to reject a merge is controlled by access string "Clinical.PersonMergeAdmin".

Effect of a Merge on Source Person Record

The source person will be marked as deleted, and no longer be returned in Internal Person Search results. Additionally, their NPI will be set to Null.
For a referring physician, all orders that are marked as being "Requested By" or "CC" for this physician, will be marked as "Requested By" or "CC" as the new physician (destination person of the merge).
The addresses associated with the source person will be moved to the Destination Person, but marked as inactive. A RIS Administrator or other authorized personnel can make the

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determination as to which addresses should be set as active. We make no effort to determine which addresses may be duplicated between the source and the destination.

Effect of a Merge on Destination Person Record

The destination person's internal notes will be updated to show that a person merge took place. The message will be similar to the following:

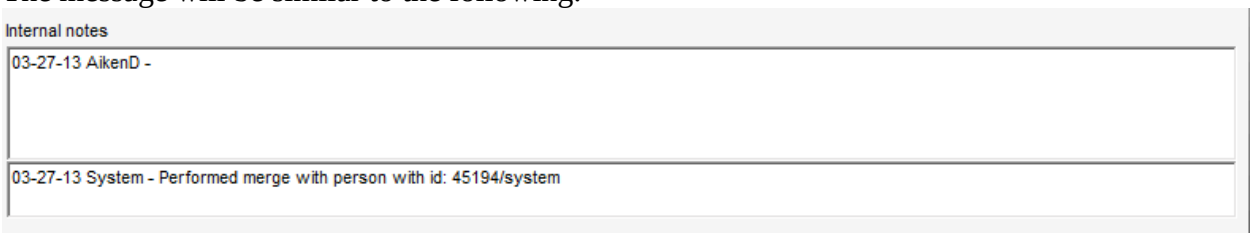

Figure 5.54 – Destination person notes after person merge

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Auto Open Work List Tabs

This feature will allow the user to pre-set which worklists they would like to have automatically open at the time of login. The worklists to be open at login can be set up in 2 ways.

The first is from the context menu of the work list tab itself. The user can select the option to Open on Login. This context menu option will only be available for work list. If context menu of a data window is accessed, this menu option will be disabled.

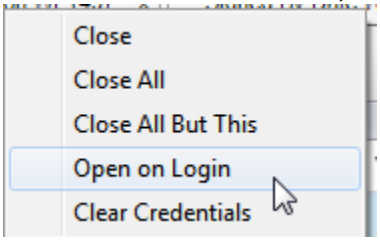

Figure 5.55 – Open on Login context menu option

Once selected, the menu item will become checked

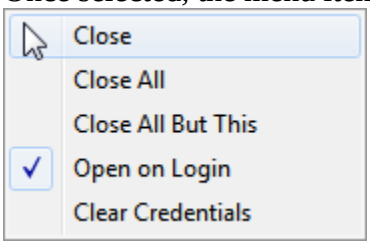

Figure 5.56 – Open on Login selected

This tab will then automatically open when the user launches eRAD RIS. This is identified by the small icon will appear in the tab header to indicate that it has been set to automatically open.

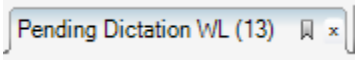

Figure 5.57 – Work list tab displaying icon for Open on Login

Multiple worklist tabs may be selected, although the system will limit you to approximately 7 tabs, based on the length of the tab name. The selected tabs are automatically saved to each user's preferences, so the same tabs will auto load on any workstation the user uses.
The user also has a new feature to allow all RIS tabs to be re-arranged by dragging them. When any auto-open tabs are re-arranged, their loading order is adjusted so that on re-loading, this order will be reflected. If the maximum number of tabs to Open on Login has been reached, the user will be informed with a pop up message.

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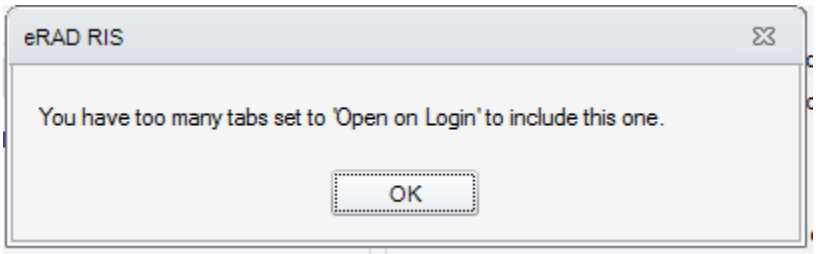

Figure 5.58 – Message informing maximum number of tabs to open on login has been reached

In addition, the ability to manipulate these screens has been added to the user preferences screen:

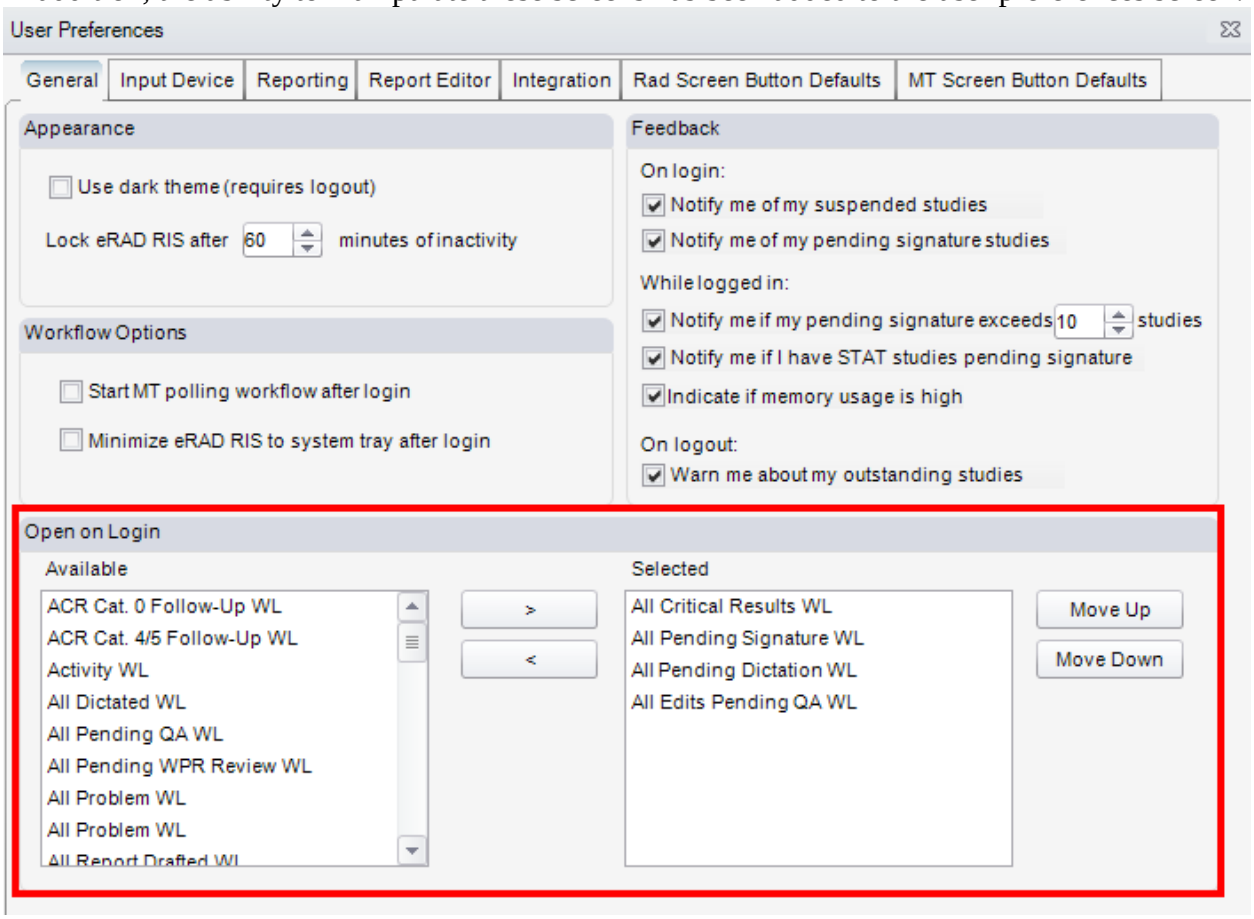

Figure 5.59 – User preference window displaying Open on Login

This screen allows the user to re-arrange the loading order for the tabs by using the up and down and also to add or remove tabs from the list of all available tabs that can auto-open. By design,

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the list of available worklists is a complete set of all worklists, but if the user does not have permission to the worklist, it will not open on his/her workstation.

Lastly, if the user closes one or all of the work lists they have set to be Open at Login and they wish to load those work lists again, they can select the File menu option of Auto-Open Worklists. If the user has one of the four work lists open, the other 3 will load in their pre-defined order.

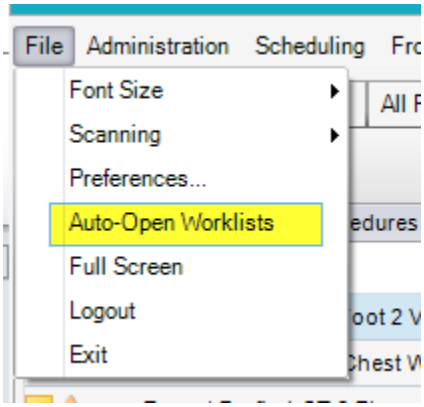

Figure 5.60 – File menu option to Auto-Open Worklists

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Enhance Work List Filtering

Under the filter icon menu you will see a new option of "Select Values…" that will open the self-titled Select Values window. Columns such as Flags, Status, Procedures, and Modality Type to name a few will have this option.

Figure 5.61 – Select values filter option

Once the filter is applied, it defaults to contains, from Starts with.

The Procedures column is somewhat unique as this columns Select Values list will have the Modality Type, Body Part and Laterality values available for selection. A double click on the Possible Values / Selected Values item will move the value to opposite side. The arrows will also perform this action, but allow the user to multi select values to be moved to the opposing side.

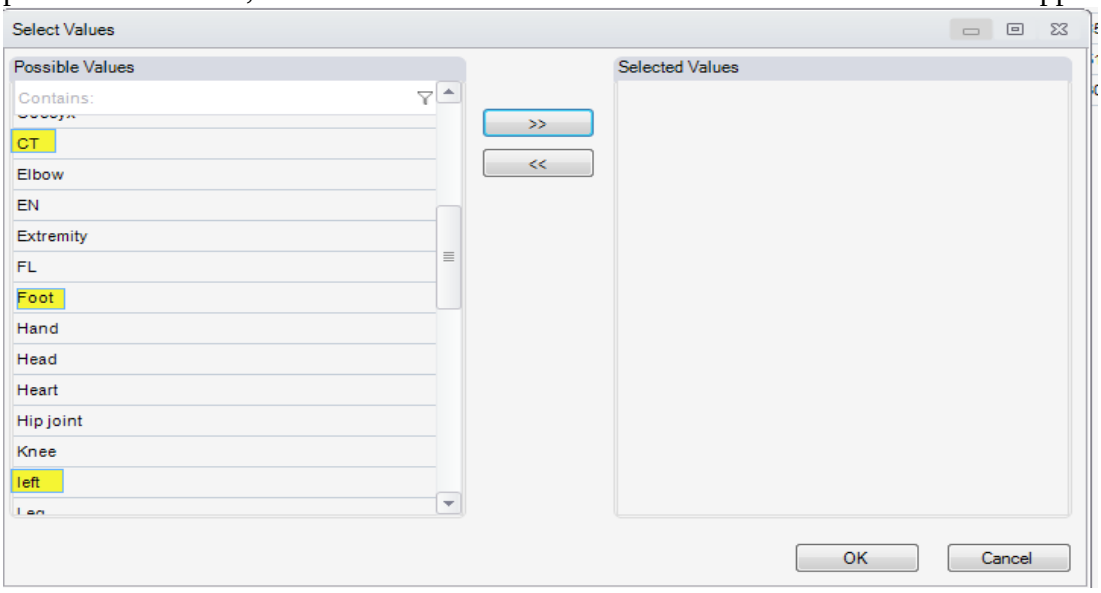

Figure 5.62 – Select Values window

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Patient Merge Requests Work List Enhancement

An additional column titled “Duplicate” was added to the Patient Merge Request. If the Source Patient Id and Destination Patient Id are suggested more than once in the same merge request, this column will have a check mark to indicate that it is a duplicate entry.

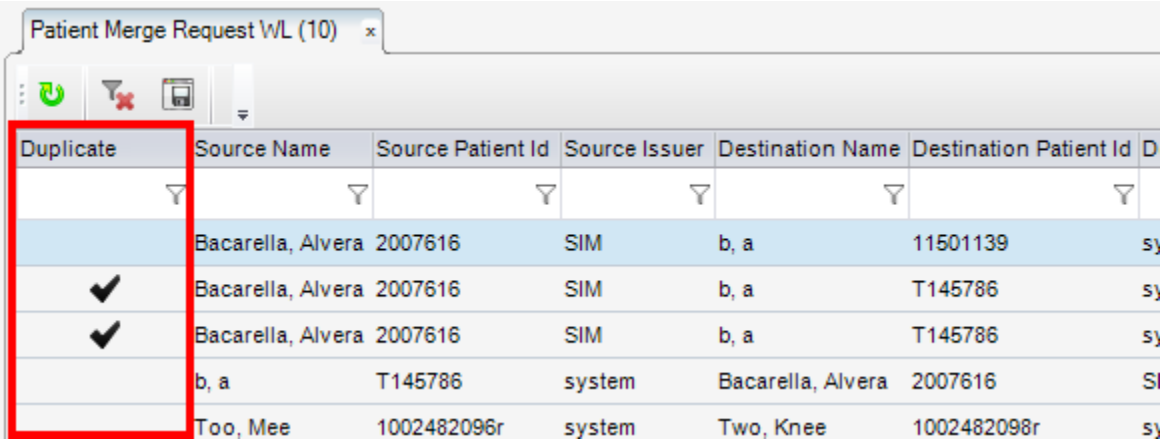

Figure 5.63 – Patient Merge Requests WL

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Remove Date Filter from Activity Work List

In the previous build the Activity work list was controlled and displayed in a daily view. The user would be required to move from day to day to see what was on the Activity work list. This date control has been removed. The Activity work list will now display all studies that are not completed.

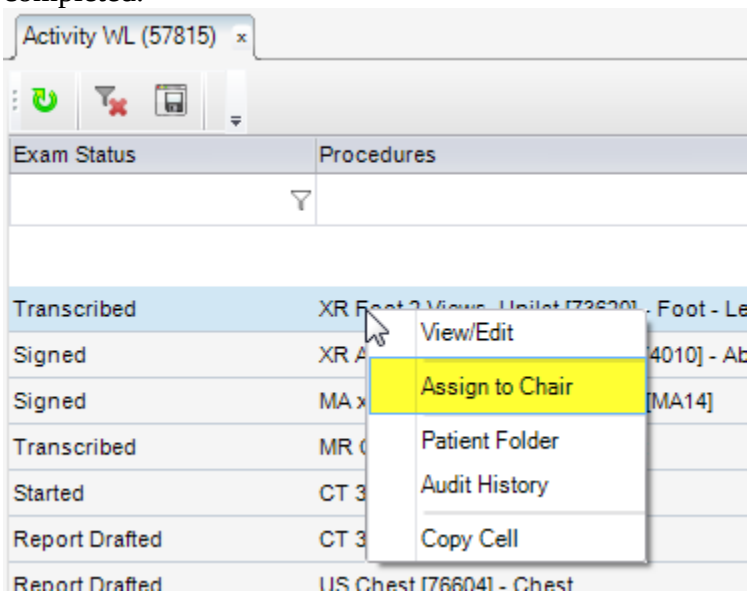

Figure 5.64 – Activity WL

Additionally, a new column was added to the Chair lookup table called "Hold_On_Activity_WL_Flag". When this flag is set to "Y", any updates to a study assigned to that chair will remain in the activity worklist until the study is removed from that chair. Note, any studies assigned to a chair that just had the "Hold_On_Activity_WL_Flag" changed will not be automatically added or removed to or from the activity WL. An update to the study row has to occur for it to recognize whether it should or should not appear on the activity WL.

All studies recently updated and assigned to a chair with this flag will appear on the activity WL until it is unassigned from the chair or its status changes from "Cancelled", "Discontinued" and "Void".

The Assign to Chair context menu option is also available.

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IVT – Insurance Verification PreCert tab Enhancements

At the top of the Insurance Verification PreCert tab will now have the Patients date of birth and the Referring physician.

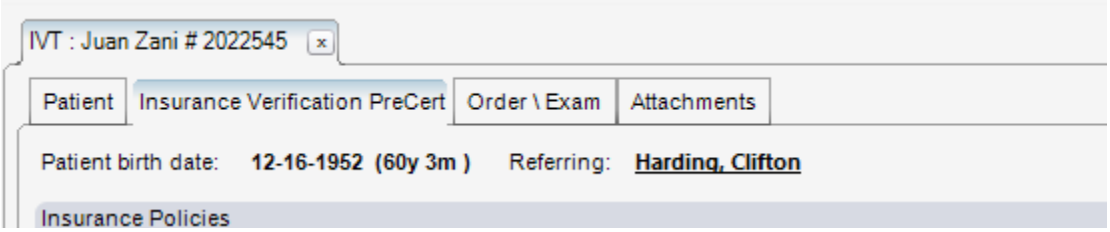

Figure 5.65 – Insurance Verification PreCert enhancements

Scheduling - MRN Added to Appointment Book

From with the Appointment Book, if the user hovers over the study, it would display details of the study. The MRN has been included with this information that is presented to the user.

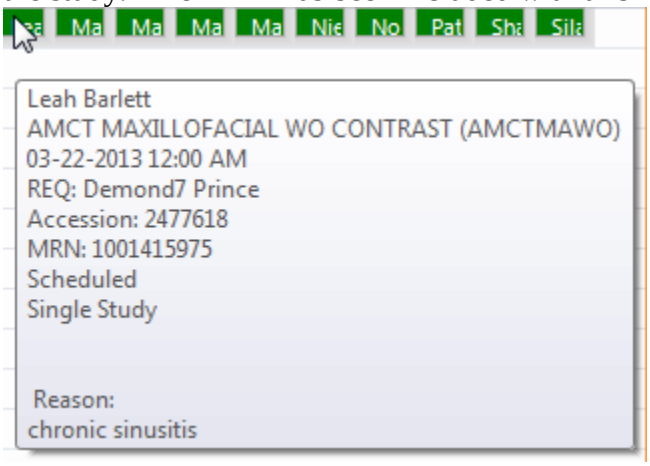

Figure 5.66 – MRN included in the hover value in Appointment Book

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Scheduling – Repeating Modality Restrictions

The modality lookup table has an additional option added to the modality restriction grid. The Repeat column has a list of values that include days of the week, weekday, weekend, all week and full range.

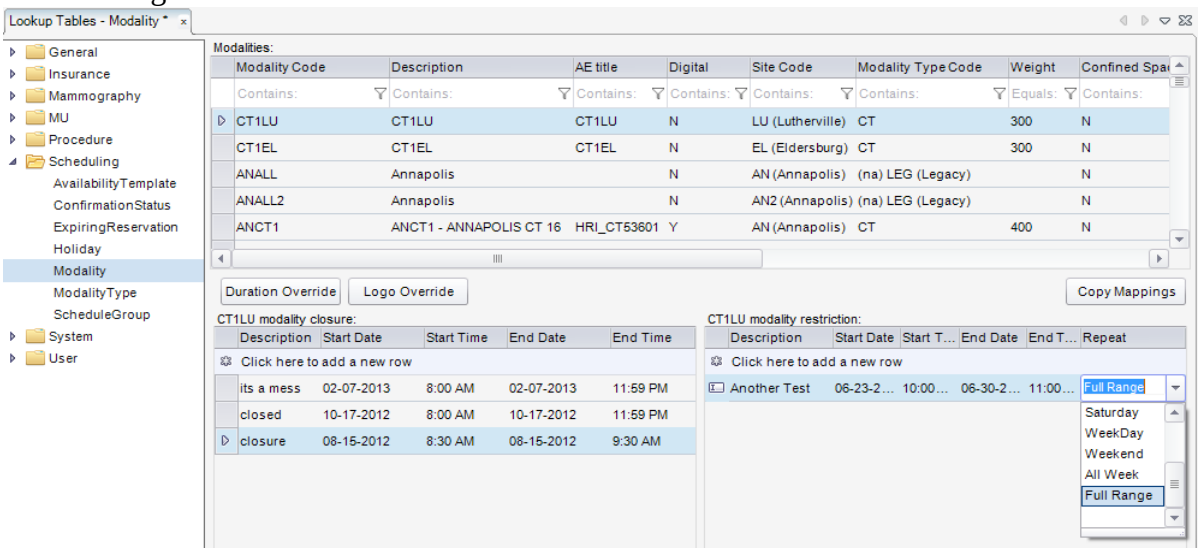

Figure 5.67 – Modality repeat restriction

An example of this would be restriction on the weekend between 7am – 5pm, selecting the Weekend option would apply the restriction to Saturdays and Sundays in your specified date range.

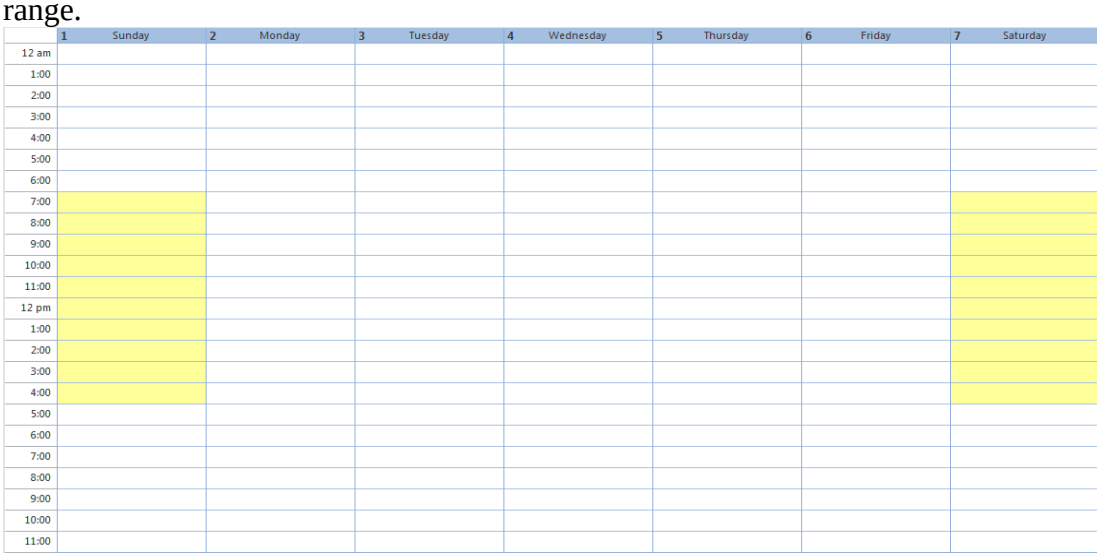

Figure 5.68 – Calendar displaying the configured weekend restriction

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Scheduling – Ability to Check-In Procedures Separately

We will now scan for studies that span more than 3 hours between the end of one study and the start of the next and display a slightly modified version of the prompt to allow for the selection of individual studies; with the study that was opened from the WL would be a disabled checked box which does require that study to be opened.

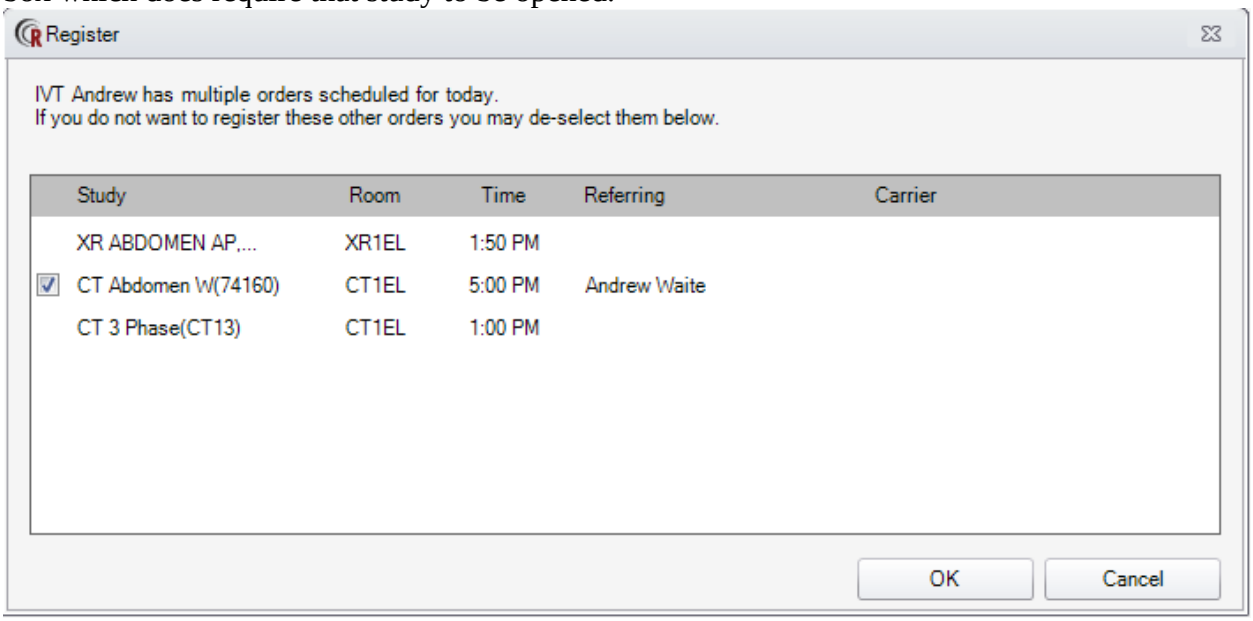

Figure 5.69 – Ability to unselect order to be checked in.

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Scheduling – Enter Follow-Up Information

The scheduling windows, including Schedule Order, Confirmation, Register, etc… will now include the Contact Log tab. On this tab the user can add contact log information. Add new contact information the user can select a pre-defined contact type and notes pertaining to the contact. The tab will display each contact attempt with the date, Contact by, captures the logged in user, and the contact type. The first column will display a Notes icon to let the user know if there were notes entered in the Contact Details.

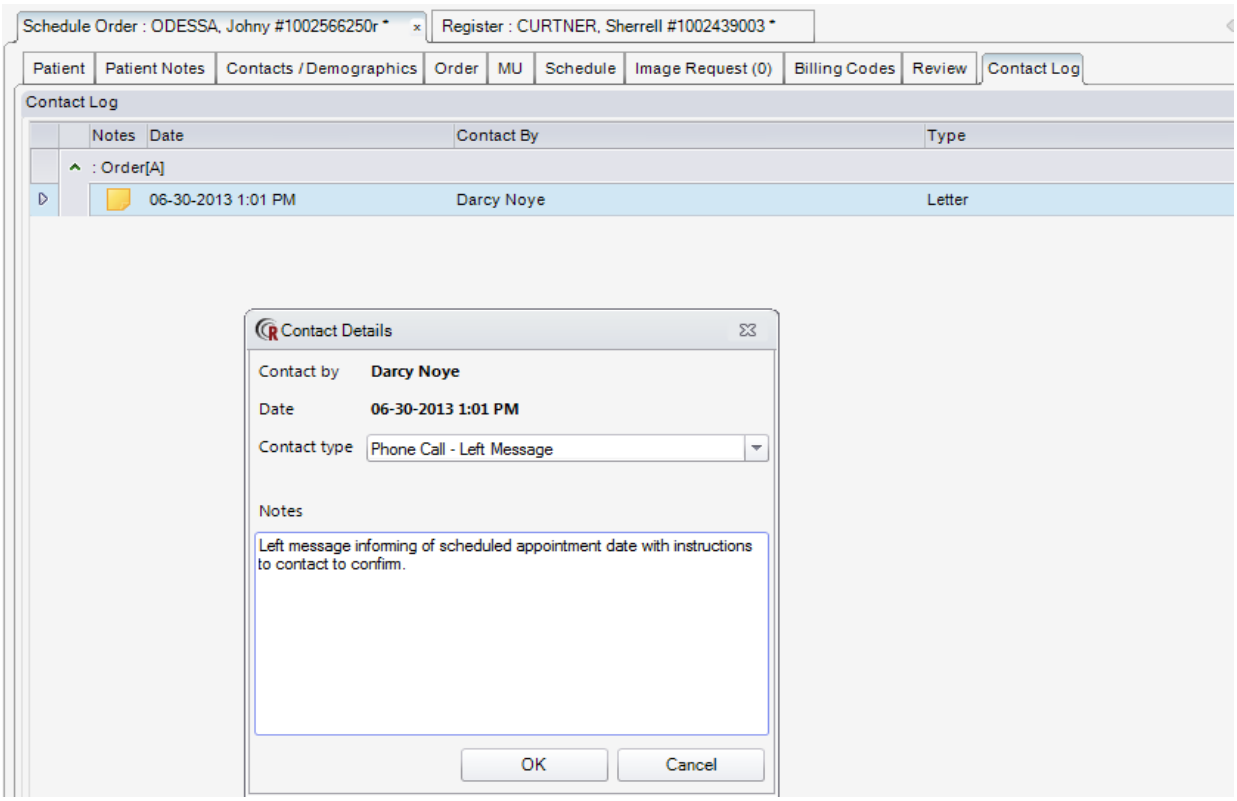

Figure 5.70 – Contact log

The Orders to Schedule WL and the IVT WL have two additional columns added to show Last Follow Up Date and Last Follow Up Type

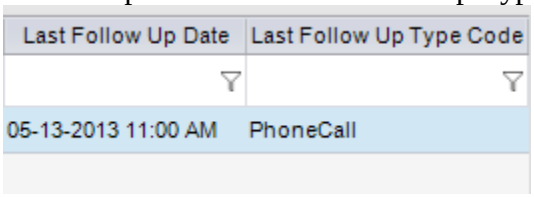

Figure 5.71 – New columns added to Orders to Schedule and IVT WL's

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Scheduling – Import EMR Scheduled Procedures Filtering

Scheduling an order from and EMR, the ordered procedure will sometimes have to be matched up that ordered procedure with an eRAD RIS procedure.

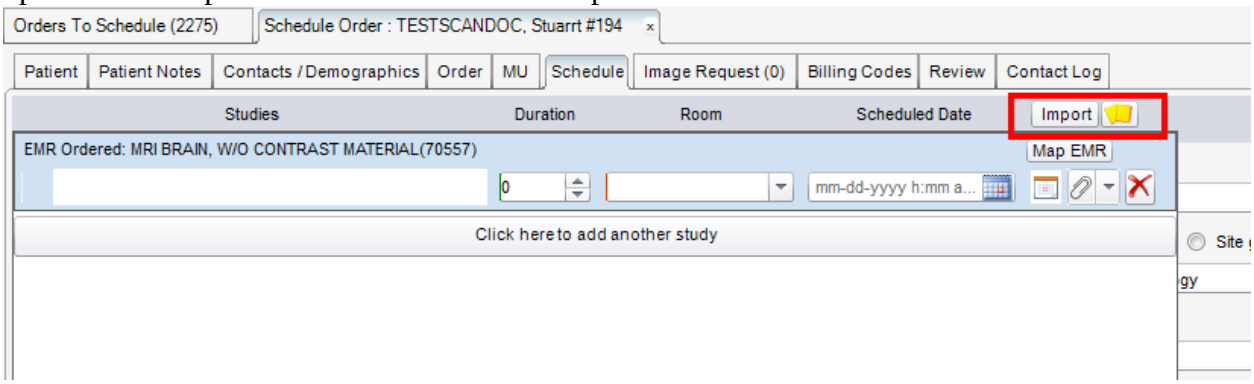

Figure 5.72 – Import procedure

This list could be extensive, showing too many rows in the Import Scheduled Procedures window. A checkbox has been added to the bottom of the import window.

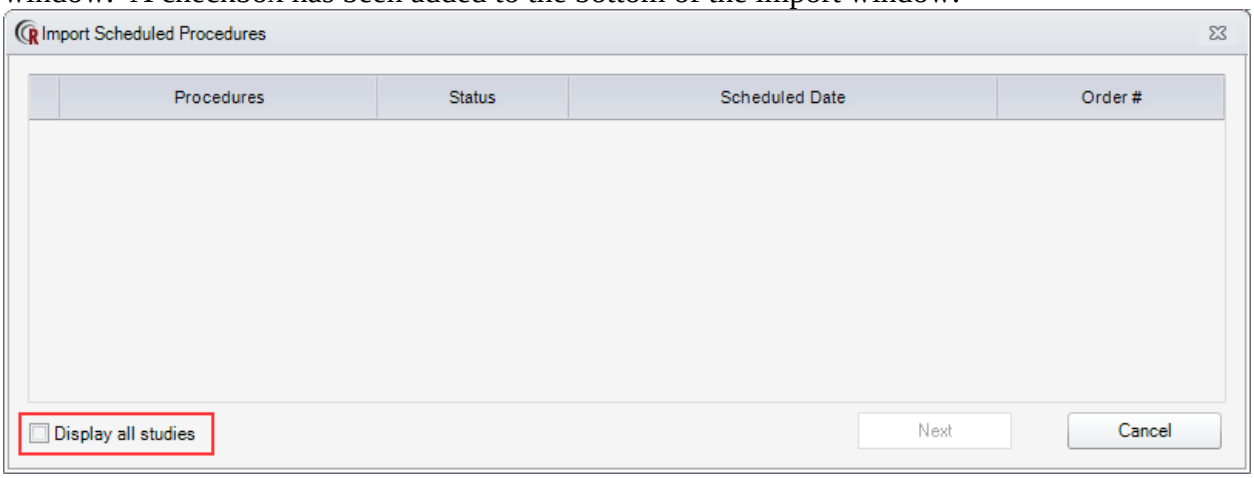

Figure 5.73 – Import Scheduled Procedures window

By default we will display studies that have occurred in the last 2 days, in the appropriate status. If there are more studies that to be displayed then the check box will be enabled to allow for a larger list of items.

Upon checking, the grid will display all studies in a valid status that have been performed in the 60 days or scheduled within the next year.

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Signs and Symptoms Field and Renaming Chief Complaint

In previous versions a field titled Chief Complaint was present on all Order tabs. This fields name has been changed to “Reason for Exam”. An additional change has also been made to all Order tabs. A new field titled “Scheduling Notes” has been included, and is positioned to the right of Order Notes field.

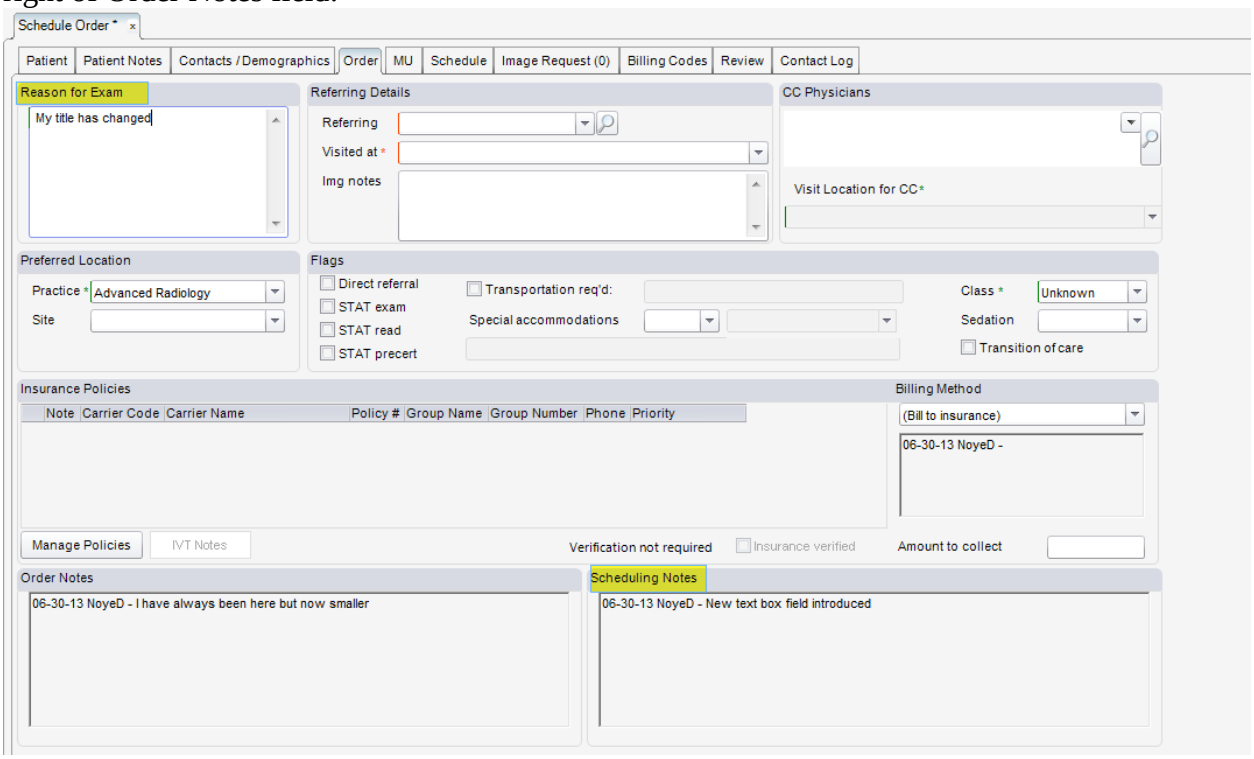

Figure 5.74 – New Scheduling Notes field and Chief Complaint changed to Reason for Exam

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Another new field titled "Signs & Symptoms" is being added to the Documentation tab of the Perform Exam window. If the Signs & Symptoms field is required will be determined by a new system configuration setting "**SignAndSymptomsRequiredByTech**" which has a default value of False (not required).

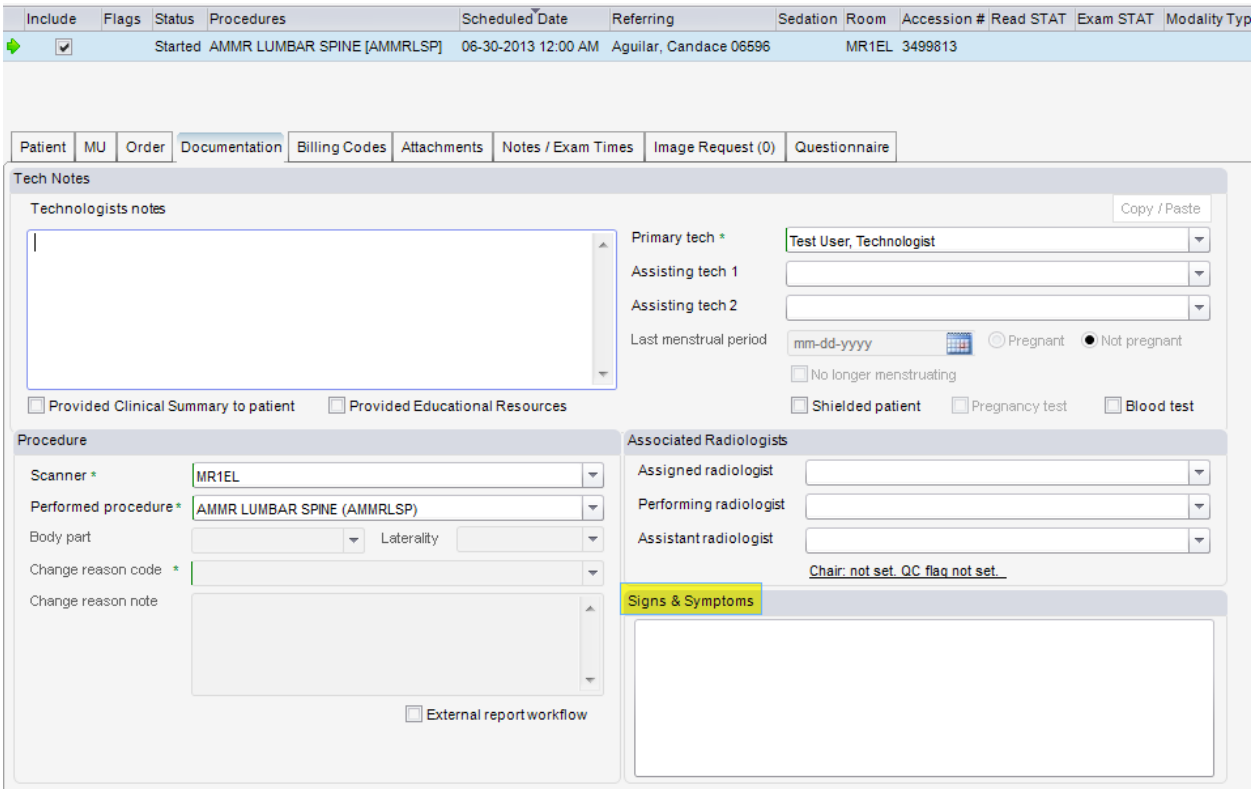

Figure 5.75 – Signs & Symptoms field on Documentation tab

NOTE:
Macro and report document templates will have to be manually changed if "Signs and Symptoms" are to be used in diagnostic reports.

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Direct Referral Enhancements

In previous versions the Direct Referral flag was set on Referring Physician Personnel account. If the referrer selected on the Order tab had the Direct Referral flag, a label would appear next to the Referring field.

In build 41 this has changed. In addition to the referrer personnel account that may have the flag, a "Direct referral" check box has been added to the Order tab in the Flags section of this window that will always be present.

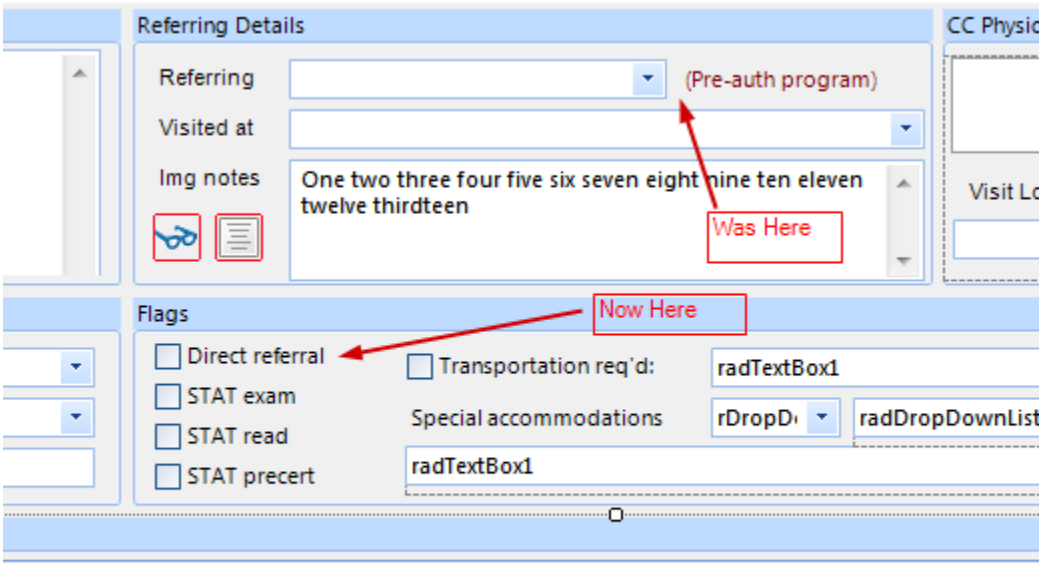

Figure 5.76 – Direct referral flag added to the Order tab

If the referrer selected for the order has the Direct referral flag set in the Personnel editor, the Direct referral label on the order tab will be bolded, but not required to be selected.

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Allow Cancellation of Outside Reads

In previous versions the user did not have the ability to cancel the study if the study was an Outside Read. An appropriateness check was added for studies that are Exam Done status and area also an Outside Read.

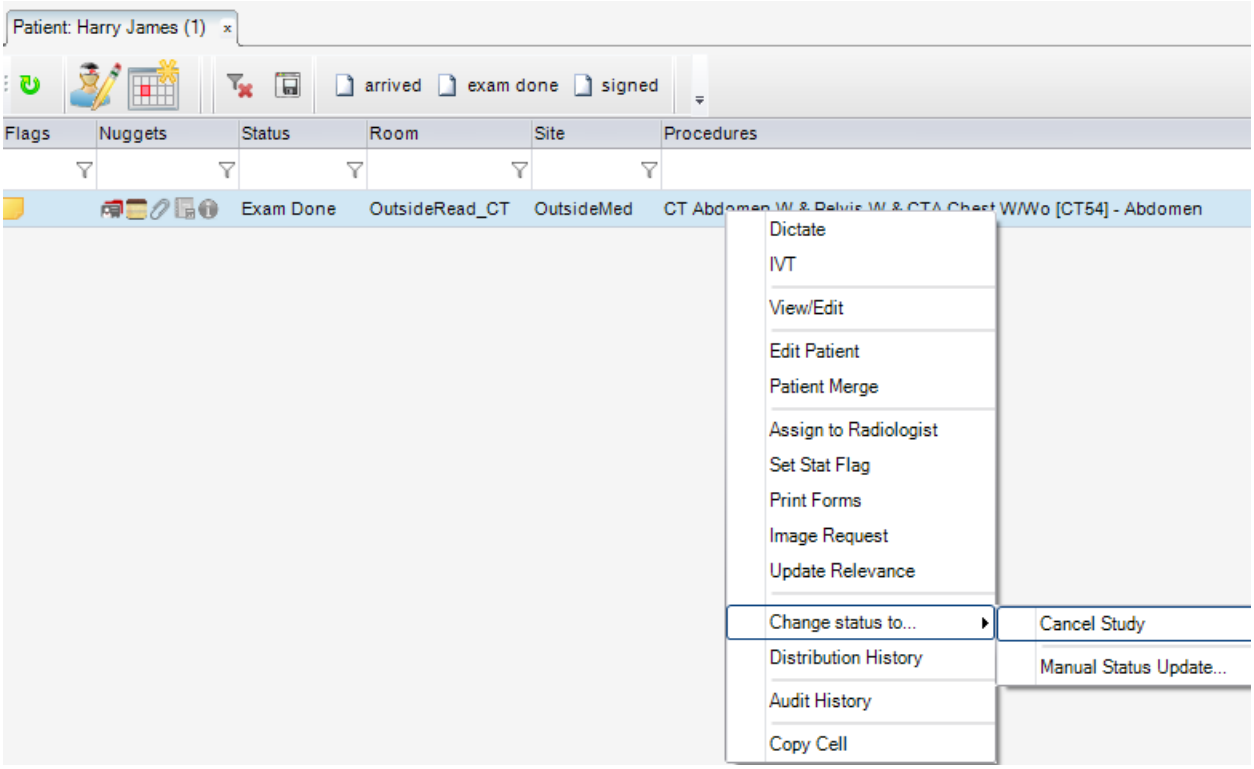

Figure 5.77 – Cancelling and Outside Read

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Abort Reason added To View/Edit

In previous versions if the study was aborted from the Perform Exam window, the user would be prompted with the Abort Exam window and would be required to select a predefined reason for aborting the exam.
If the study was already completed, the user could abort the study from the view edit window, but they were not required to select a reason for aborting the study.
In build 41, we have added this to the View/Edit > Abort window and the user will be prompted with the same Abort Exam window that is produced in the Perform Exam window.

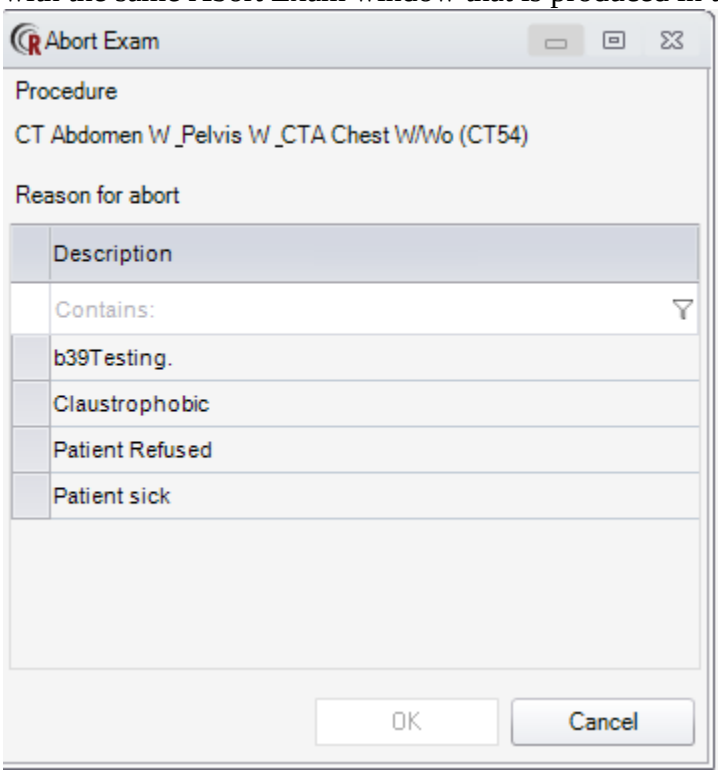

Figure 5.78 – Abort exam reason

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Ability to Add Attachments and Check-In another Patient

The Attachment Viewer window is now a non-modal window, meaning that a user can have the be scanning attachments for patient A and have the ability to Check-In, Schedule, create Walk-In, etc… on patient B.
With the Attachment Viewer open the user can change tabs/enter information within the same study window or can access another patient in the Register window, patient search, etc…

Print Diagnostic Report to Local Printer

Studies with a report now have a context menu "Report/Print Report", which can be used to print the report without having to preview the report.

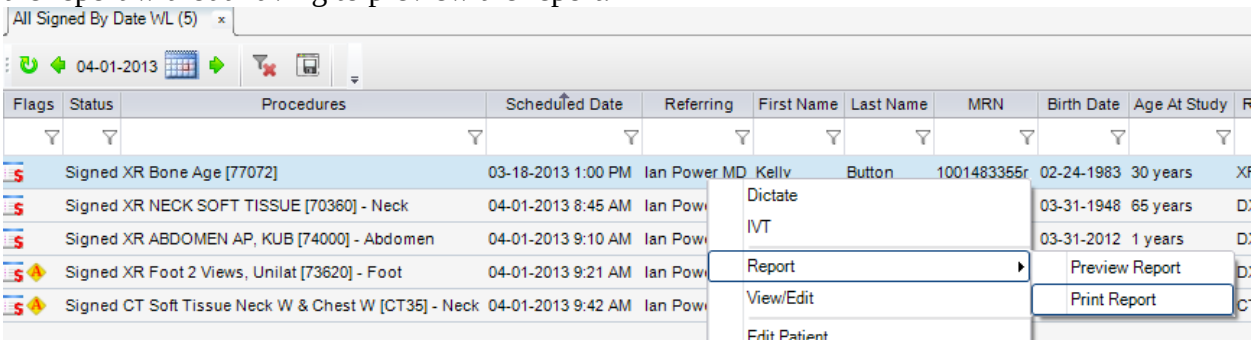

Figure 5.79 – Report context menu and sub menu

Also multi-select for this feature is supported so you can select multiple studies and print the reports for all of them at once.
When you select the "Print Report" feature you are prompted with a print dialog and your selection of printer for that first print dialog will apply to all documents that will be printed (in the multi select case).

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Mammography Enhancements

Item #1

In the Follow Up window on the Contact Log tab, the check box labelled "Follow Up Resolved" has been relabelled "Resolved".

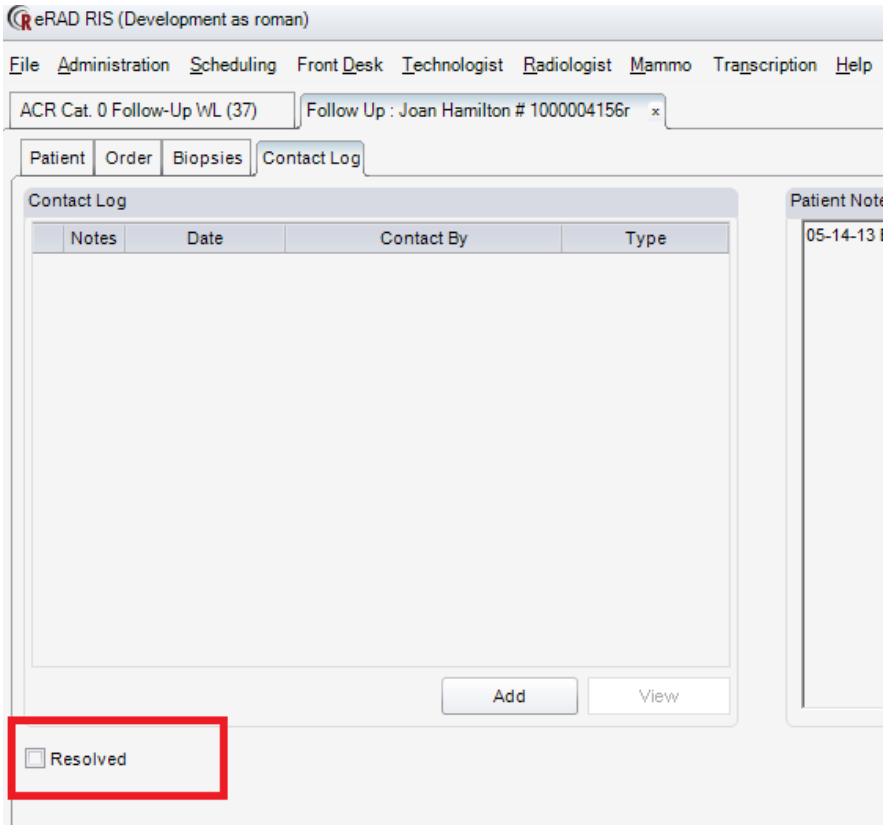

Figure 5.80 – Check box renamed "Resolved"

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Item #2

Added "Breast Density Required Flag" to the procedure code lookup table (if set to "N" Breast Density drop down will not be visible or required). During upgrade to v41 all existing procedures that are BIRAD enabled will be set to "Y" for breast density required flag.

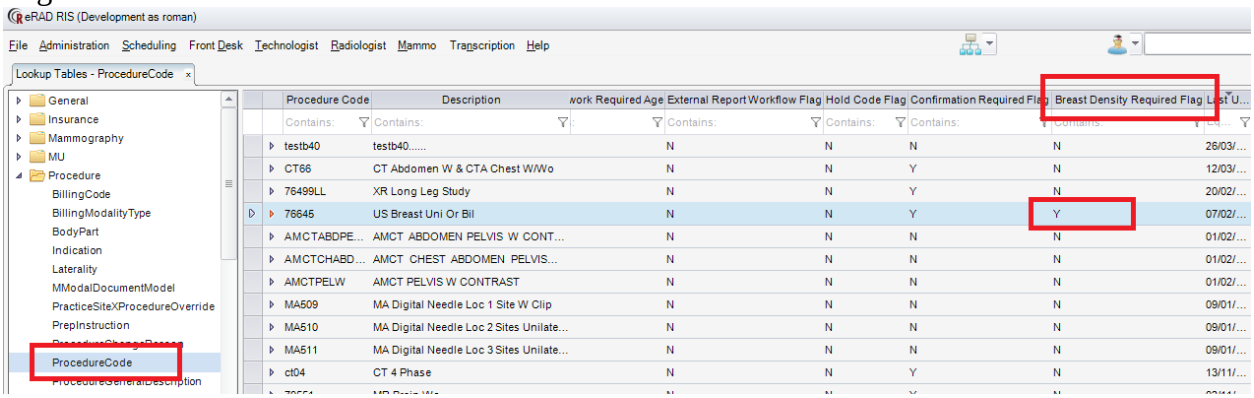

Figure 5.81 – Breast Density Required Flag on Procedure codes

Item # 3

A permission already exists to control if user is allowed to manually "Resolve" a mammo follow-up **Clinical.ManuallyResolveMammoFollowUp**

Item # 4

New management report has been created that will identify patients that have possible orphaned mammography orders. The report looks for any patient that in the system that has a mammography study advanced to a status of scheduled or further. (that still has an outstanding mammography order)

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Mammo Orphaned Orders

Practice: Advanced Radiology
Description: This report will identify patients that have possible orphaned mammography orders. The report looks for any patient that in the system that has a mammography studie(s) advanced to a status of scheduled or further. (that still have an outstanding mammography order). This report does not look at studies that are Signed as these studies normally have a mammography follow up order.

Practice / Site	Patient ID	Study Status in Progress	Orphan Filler Order Number	Orphan Order Request Date	Orphan Order Procedure
⊟ ADV	3				
⊟ EL	1				
	1000005490r	Started	1070395	07-10-2012	US Breast Uni Or Bil [76645] - Breast - Left
⊞ FH	1				
⊞ LU	1				
Total Patients:	**3**				

Mammo Orphaned Orders | Advanced Radiology Confidential and Proprietary | Date Run: 5/14/2013 12:45 PM
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Figure 5.82 – Mammo Orphaned Orders

Item #5

Added RIS logic to bring back the Mammography order if study is Cancelled.

If a study that was generated from a mammography short term follow-up , callback or invitation has been cancelled a new order will be placed back on Mammography orders worklist for follow-up from the original mammo study info.

In case of Discontinued workflow user is given a manual choice to bring the order back for scheduling
via "Would you like to send this to the Orders To Schedule WL?" prompt

"Void" actions is designed to be end of workflow so no action is taken to bring back the Mammo order.

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Item # 6

Added functionality to allow per site Mammography Tracking.
If Mammography Tracking is enabled for a site (default = enabled)..RIS will generate layletters, follow-up orders, all follow-up letters, and will forward studies to the "Mammo Followup worklists".
If tracking is turned off. RIS will still capture the BIRADS, Recommendation and breast density data, but will not generate letters or any follow-up workflow (It is assumed that a third party product or system is responsible for follow-up at the site.)

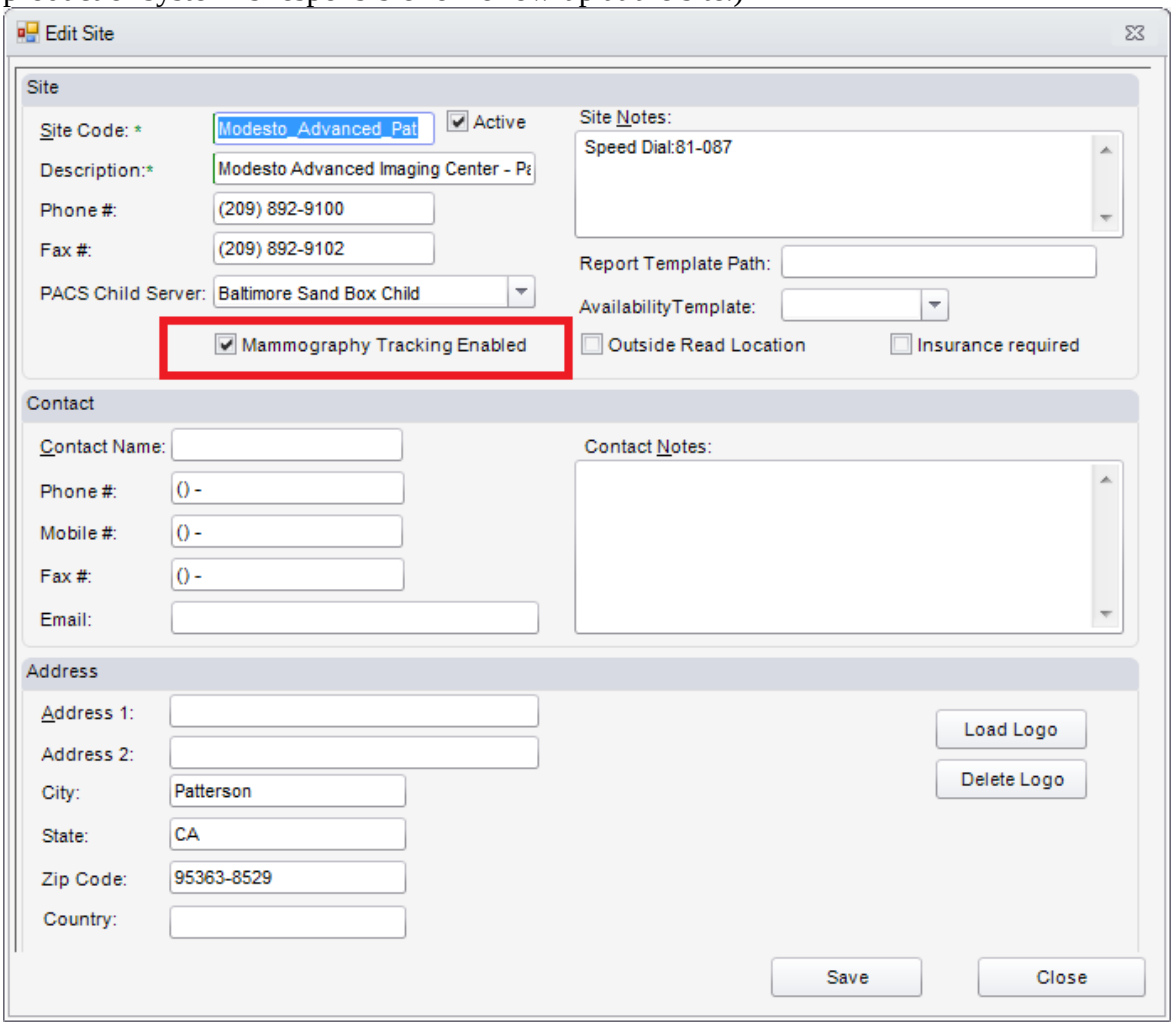

Figure 5.83 – Mammography Tracking Enabled at Site level

Standalone Mammography Tracking

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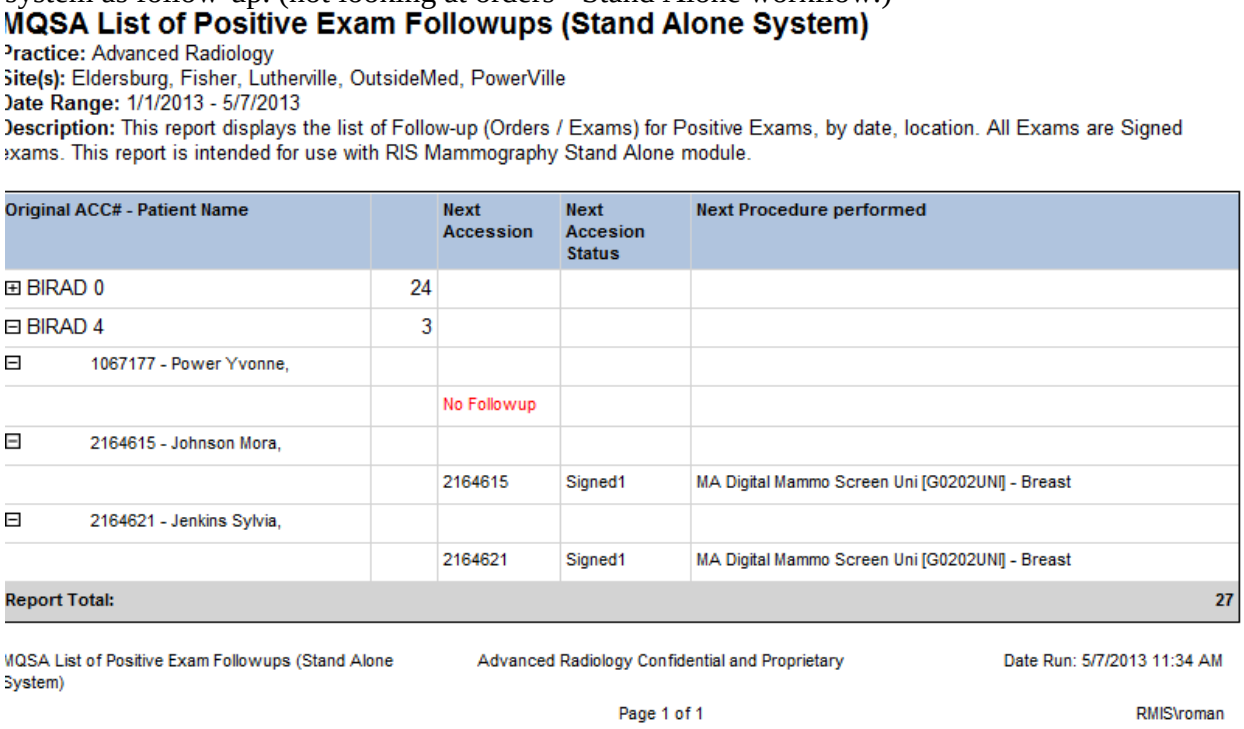
For Standalone mode: Only one management report had to be re-written to function in standalone.

(**Please Read Note**) for standard MQSA Tracking → The below report should be used for tracking standard follow-ups as well as Stand Alone Mode. This report will produce the same results as the standard RIS "MQSA List of Positive Exam Follow-ups" with one major difference. The report below does not look for the relationship to the system generated mammography follow up order. So for rear cases where mammography follow-up order was not used to schedule (user created a new order from scratch) for the mammography study. This report will catch these cases.

"**MQSA List of Positive Exam Follow-ups (Stand Alone System)**" is the new report. The report pulls back follow ups, NOT based on the follow-up order from original exam (RIS Normal Workflow). This new report looks for additional exams/studies for the patient in the system as follow-up. (not looking at orders - Stand Alone workflow.)



MQSA List of Positive Exam Followups (Stand Alone System)

Practice: Advanced Radiology
Site(s): Eldersburg, Fisher, Lutherville, OutsideMed, PowerVille
Date Range: 1/1/2013 - 5/7/2013
Description: This report displays the list of Follow-up (Orders / Exams) for Positive Exams, by date, location. All Exams are Signed Exams. This report is intended for use with RIS Mammography Stand Alone module.

Original ACC# - Patient Name		Next Accession	Next Accesion Status	Next Procedure performed
⊞ BIRAD 0	24			
⊟ BIRAD 4	3			
⊟ 1067177 - Power Yvonne,				
		No Followup		
⊟ 2164615 - Johnson Mora,				
		2164615	Signed1	MA Digital Mammo Screen Uni [G0202UNI] - Breast
⊟ 2164621 - Jenkins Sylvia,				
		2164621	Signed1	MA Digital Mammo Screen Uni [G0202UNI] - Breast
Report Total:				**27**

MQSA List of Positive Exam Followups (Stand Alone System) | Advanced Radiology Confidential and Proprietary | Date Run: 5/7/2013 11:34 AM

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Figure 5.84 – MQSA List of Positive Exam Followups (Stand Alone System) report

Additional Notes:
Patient Correspondence should be tracked through Audit History in RIS / and mammo Follow-up Contact Log.

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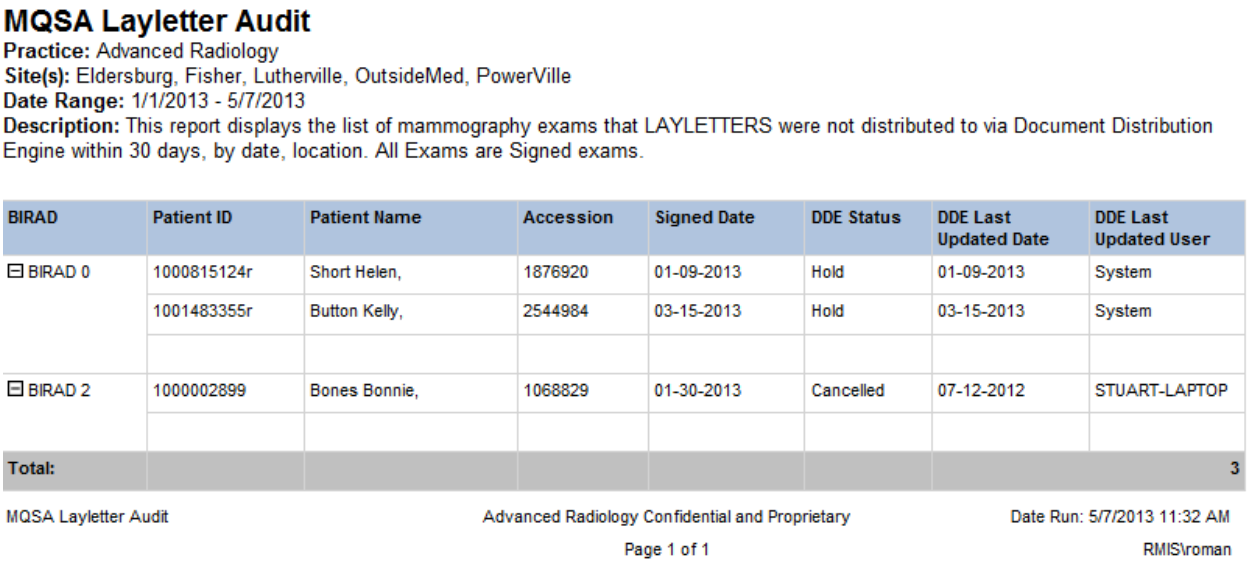
New GENERAL MQSA report has been created to audit historic exams to make sure LAYLETTERS went out within 30 days.
"**MQSA Layletter Audit**" -> This report looks only at letter distribution via Document Distribution Engine.



MQSA Layletter Audit

Practice: Advanced Radiology
Site(s): Eldersburg, Fisher, Lutherville, OutsideMed, PowerVille
Date Range: 1/1/2013 - 5/7/2013
Description: This report displays the list of mammography exams that LAYLETTERS were not distributed to via Document Distribution Engine within 30 days, by date, location. All Exams are Signed exams.

BIRAD	Patient ID	Patient Name	Accession	Signed Date	DDE Status	DDE Last Updated Date	DDE Last Updated User
⊟ BIRAD 0	1000815124r	Short Helen,	1876920	01-09-2013	Hold	01-09-2013	System
	1001483355r	Button Kelly,	2544984	03-15-2013	Hold	03-15-2013	System
⊟ BIRAD 2	1000002899	Bones Bonnie,	1068829	01-30-2013	Cancelled	07-12-2012	STUART-LAPTOP
Total:							3

MQSA Layletter Audit — Advanced Radiology Confidential and Proprietary — Date Run: 5/7/2013 11:32 AM
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Figure 5.85 – MQSA Layletter Audit report

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Administration - Order Level Document Type (Scan Docs)

In a previous sprint order level scanning was added in via the advanced section at the time of scanning but it wasn't possible to associate a default scan type with the order level, because the dropdown item for "OrderLevel" scanning wasn't available in the scantype lookup table. With this sprint that option is now available in the scan doc type lookup as shown in the following:

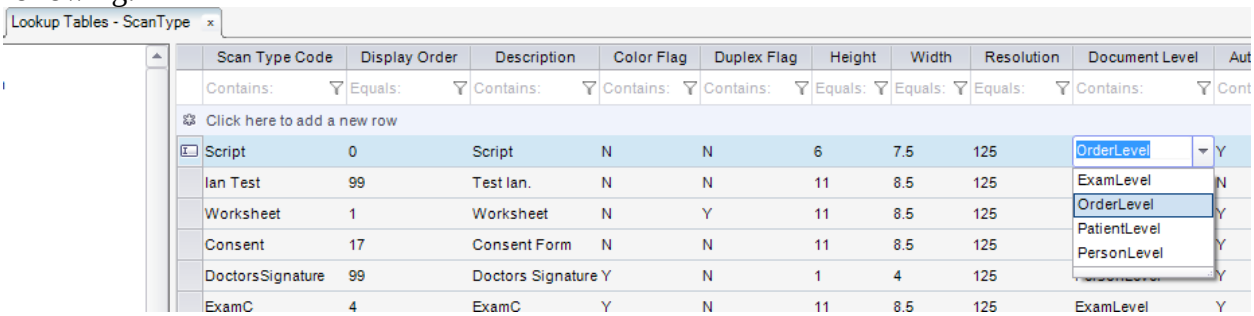

Figure 5.86 – Order Level Document Type

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Administration – Procedure Plan Duration Override

A new field was created in the procedure plan editor that will allow for the selection of a duration override:

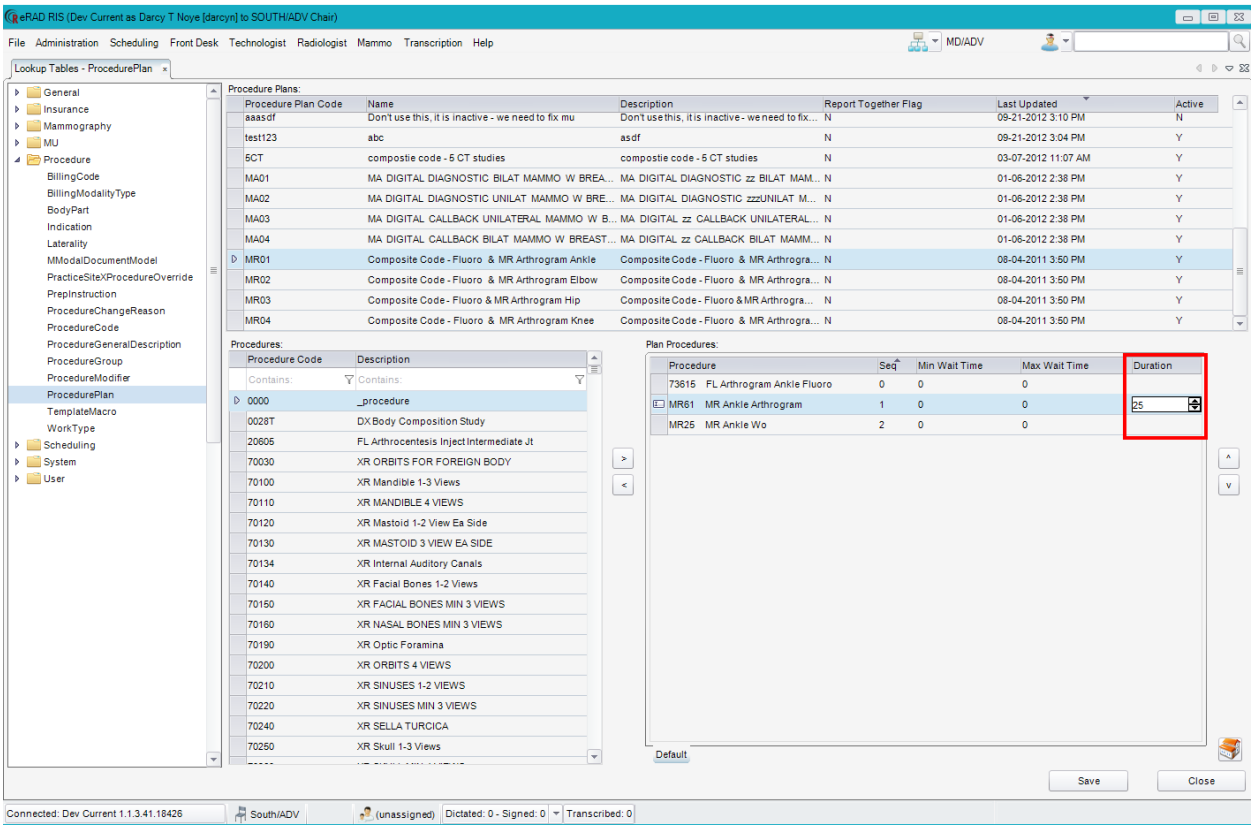

Figure 5.87 – Procedure Plan Duration Override

The default duration value is null, but can range anywhere from 0 and up.

If there are already pre-existing site overrides for the procedure plan then the duration will not propagate across the different sites when a value is provided, but when new site overrides are created then the default duration will be used on the new site overrides.

Currently the order of overrides for duration is

- Procedure duration
- Modality override
- Template time duration
- Procedure plan duration

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Administration - Schedule Group Performance Enhancement

Build 41 includes a Schedule Group lookup editor performance enhancement allowing users to switch and filter quicker between schedule groups.

Administration – Personnel Internal Notes

The notes field text box has been changed to a text box control that will track the date and User ID for the Internal Notes field of the Personnel Editor. User will be familiar with this type of tracking as the notes fields such as Order Notes, Patient Notes, etc… have this tracking.

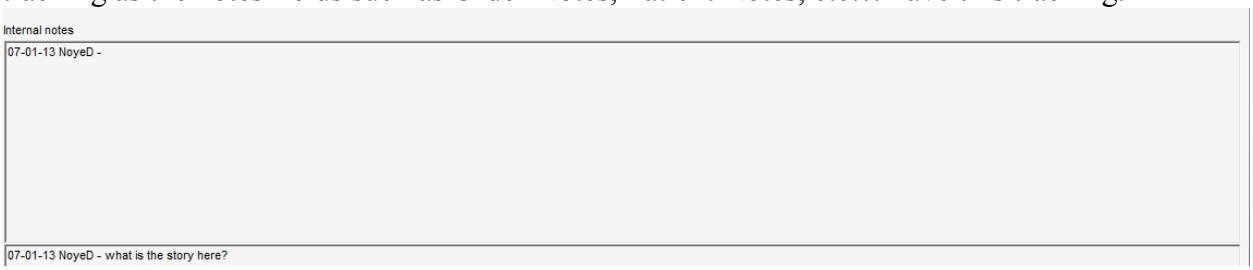

Figure 5.88 – Internal Notes field tracking date and user ID

Administration – Internal Person Search Enhancements

Added middle name to the person search results and sorted the results by last_name, first_name as requested.
Removed the quick search by (City/State) feature.

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Administration – Client IP Address Captured in Audit Table

Added client IP address for all new entries in the audit table for build 41 and going forward.

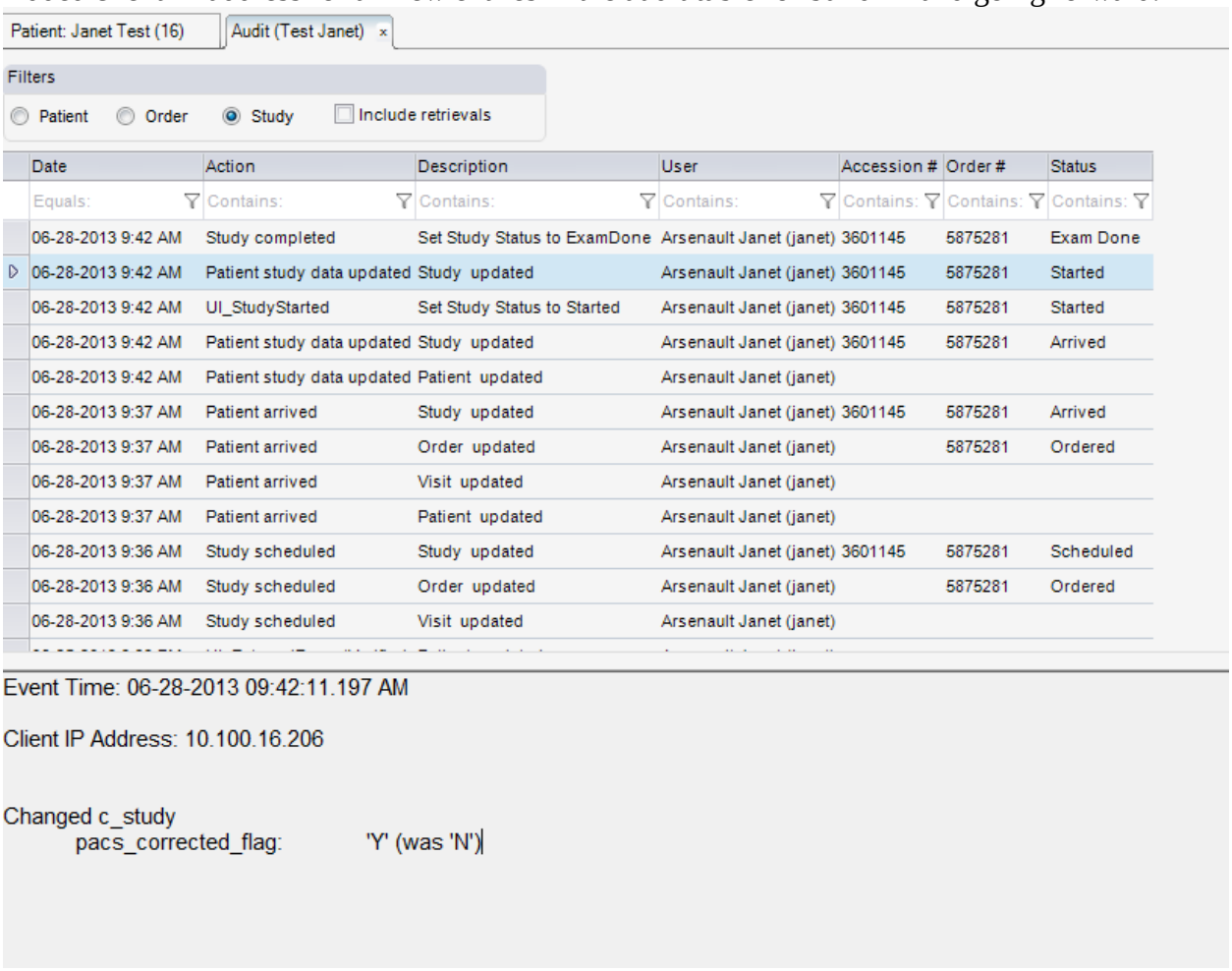

Figure 5.89 – Audit history displaying entry that captured Client IP Address

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Administration – Add Support Phone # to Help About Window

Created a new configuration variable called **"HelpContactInfo"**, the default value for this is empty.

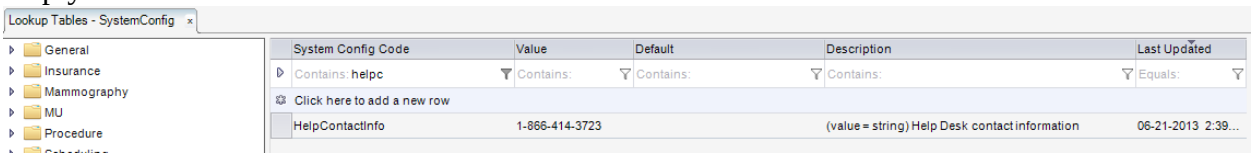

Figure 5.90 – New system config setting HelpContactInfo

The variable will allow for html text to be provided, this will allow for the formatting of the desired phone number, or allow for additional information to be provided also, such as a webpage or email link

Ex: Phone Number: 1-866-414-3723   Contact Help

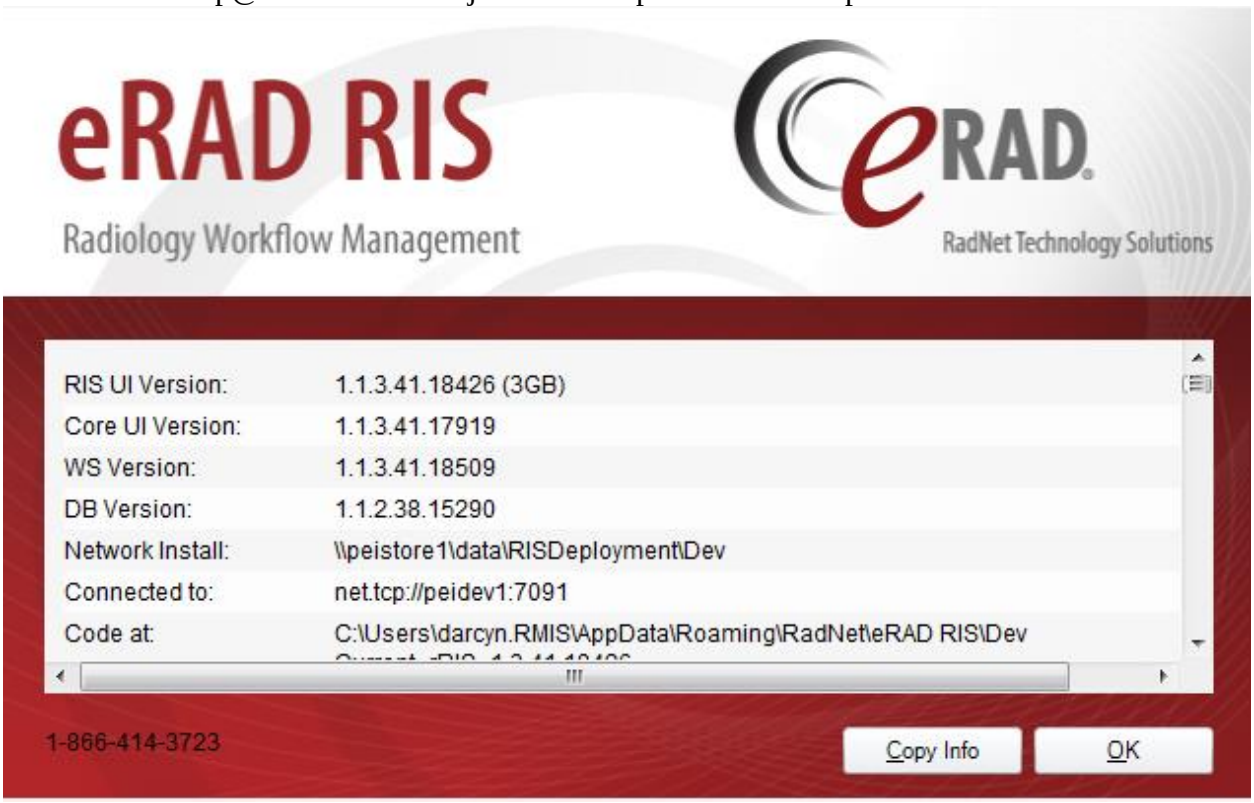

Figure 5.91 – Support phone # added to Help About window

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Administration – Process Events Service

All studies that have been modified via the GUI are stored in c_study_post_processing table. We need the ability for the system to automatically call this procedure.

A sub services to the RIS Core Services was added to wake up every "X" seconds and call the c_ProcessPostEvents stored procedure.

This sub service starts with every RIS Core Service.

A new system configuration setting titled **"ProcessPostEventInterval"** was added to control the frequency of the call to c_ProcessPostEvent. The default is 60 seconds. A value of 0 will mean the events will not be processed.

The ProcessPostEvent sub service may take up to five minutes to detect any changes to the ProcessPostEventInterval configuration setting.

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Administration – Hold Study on Activity Work List

A new column was added to the Chair lookup table called "Hold_On_Activity_WL_Flag". When this flag is set to "Y", any updates to a study assigned to that chair will remain in the activity worklist until the study is removed from that chair. Note, any studies assigned to a chair that just had the "Hold_On_Activity_WL_Flag" changed will not be automatically added or removed to or from the activity WL. An update to the study row has to occur for it to recognize whether it should or should not appear on the activity WL.

All studies recently updated and assigned to a chair with this flag will appear on the activity WL until it is unassigned from the chair or its status changes from "Cancelled", "Discontinued" and "Void".

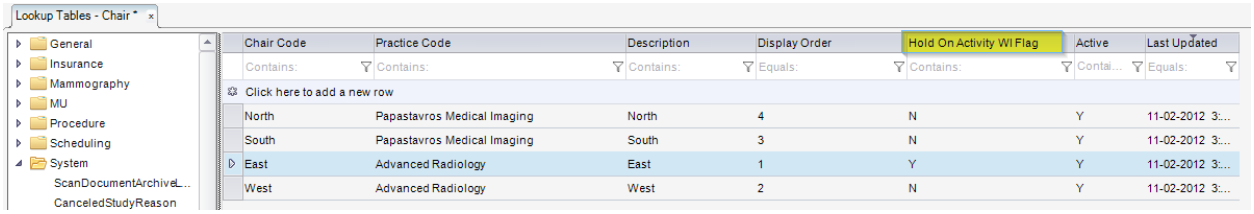

Figure 5.91a – Hold on Activity WL Flag added to Chair lookup table

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Management Reports – Dashboard Color Picker for Practice

The eRAD RIS GUI will display a different color for a practice selected from the Organization picker. This is configured in the Organization lookup Editor on the Practice.
In build 41 we have also added the title bar color to the Dashboard.

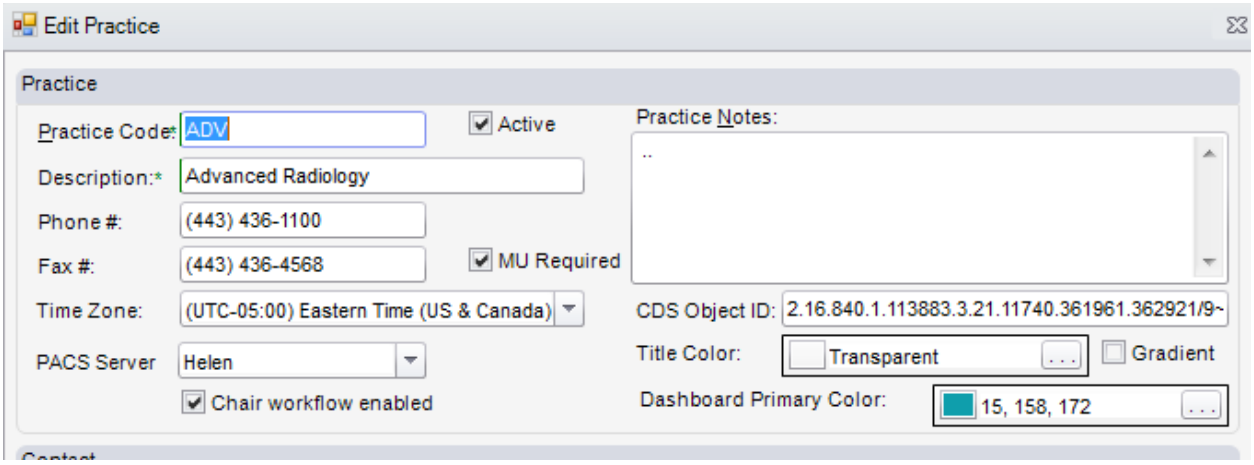

Figure 5.92 – Edit Practice displaying Dashboard Primary Color selector.

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Management Report – ADA added to Special Accommodations

The Special Accommodation lookup table first had to have the flag added.

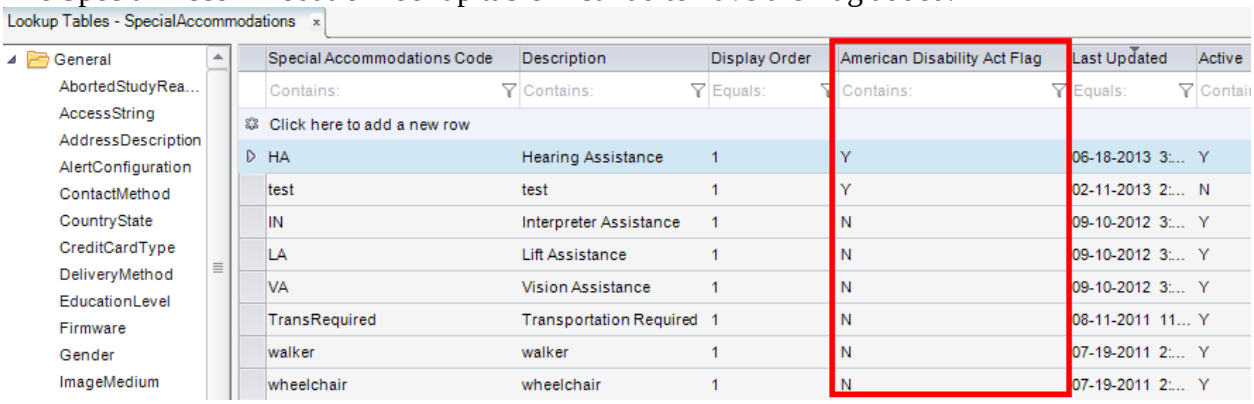

Figure 5.93 – American Disability Act flag (ADA)

When an appointment is created and a value for Special Accommodations is selected that is flagged as an ADA Special Accommodation code, the management report can reflect this flag. The report can be filtered to show only ADA, exclude ADA or both.

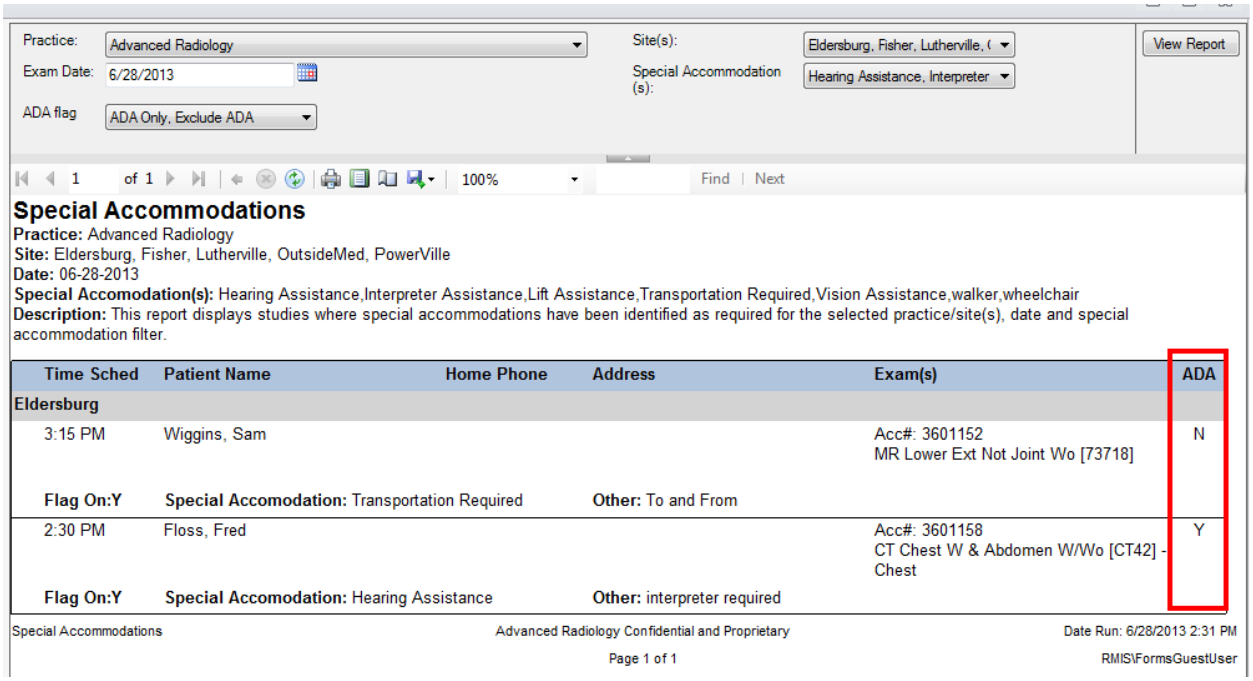

Figure 5.94 – Special Accommodations management report with ADA column

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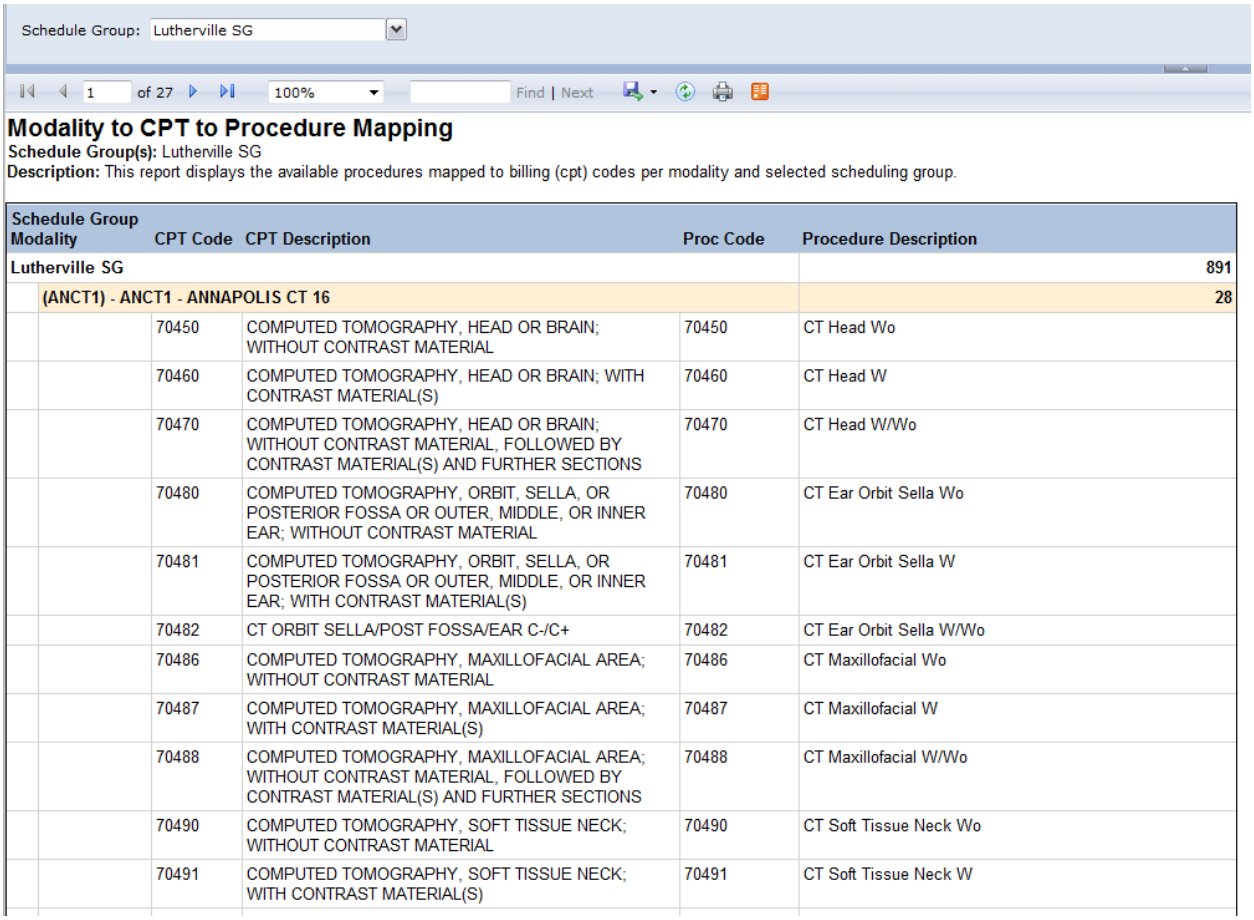
Management Report – Modality to CPT to Procedure Mapping

This management report will identify the mappings to a schedule group to modality to procedure and associated CPT codes



Schedule Group: Lutherville SG

1 of 27 100% Find | Next

Modality to CPT to Procedure Mapping

Schedule Group(s): Lutherville SG

Description: This report displays the available procedures mapped to billing (cpt) codes per modality and selected scheduling group.

Schedule Group Modality	CPT Code	CPT Description	Proc Code	Procedure Description
Lutherville SG				891
(ANCT1) - ANCT1 - ANNAPOLIS CT 16				28
	70450	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL	70450	CT Head Wo
	70460	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITH CONTRAST MATERIAL(S)	70460	CT Head W
	70470	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS	70470	CT Head W/Wo
	70480	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITHOUT CONTRAST MATERIAL	70480	CT Ear Orbit Sella Wo
	70481	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR INNER EAR; WITH CONTRAST MATERIAL(S)	70481	CT Ear Orbit Sella W
	70482	CT ORBIT SELLA/POST FOSSA/EAR C-/C+	70482	CT Ear Orbit Sella W/Wo
	70486	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL	70486	CT Maxillofacial Wo
	70487	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITH CONTRAST MATERIAL(S)	70487	CT Maxillofacial W
	70488	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS	70488	CT Maxillofacial W/Wo
	70490	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL	70490	CT Soft Tissue Neck Wo
	70491	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S)	70491	CT Soft Tissue Neck W

Figure 5.95 – Modality to CPT to Procedure Mapping management report

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Management Report – BI-RAD to Recommendation Mapping

New report created that will show the BI-RAD and Recommendations assigned to that BI-RAD. There are no filters required for this management report

Birad to Recommendation Mapping

Description: This report displays the Birad to recommendation mappings configured within the system.

Birad	Recommendation		Default Recommendation?
Radnet Central			
0	**Need additional imaging evaluation**		
	P	Additional Projections	N
	U	Ultrasound	N
	O	Old films for comparison	N
	Z	Breast MRI	N
	PU	Additional Projections and Ultrasound	N
	PXIF	Additional Projections if no old films can be obtained	N
	UXIF	Additional Ultrasound if no old films can be obtained	N
	PUXIF	Additional Projections and Ultrasound if no old films can be obtained	N
	C0	ADDENDUM FOR COMPARISION - NEED ADDITIONAL IMAGING	N
1	**Negative**		
	N	Normal interval follow up	Y
	F-11M	11 months	N
	F-10M	10 months	N
	F-9M	9 months	N
	F-8M	8 months	N
	F-7M	7 months	N

Figure 5.96 – BI-RAD to Recommendation Mapping management report.

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Management Report – MR Breast Dictated

The MR Breast Dictated report was created to monitor Breast MR. The parameters for the report are Practice, Site, To and From date and Procedure Code.

The report will display the Site, patient name, Procedure, date of service, dictated date, MRN and Accession number.

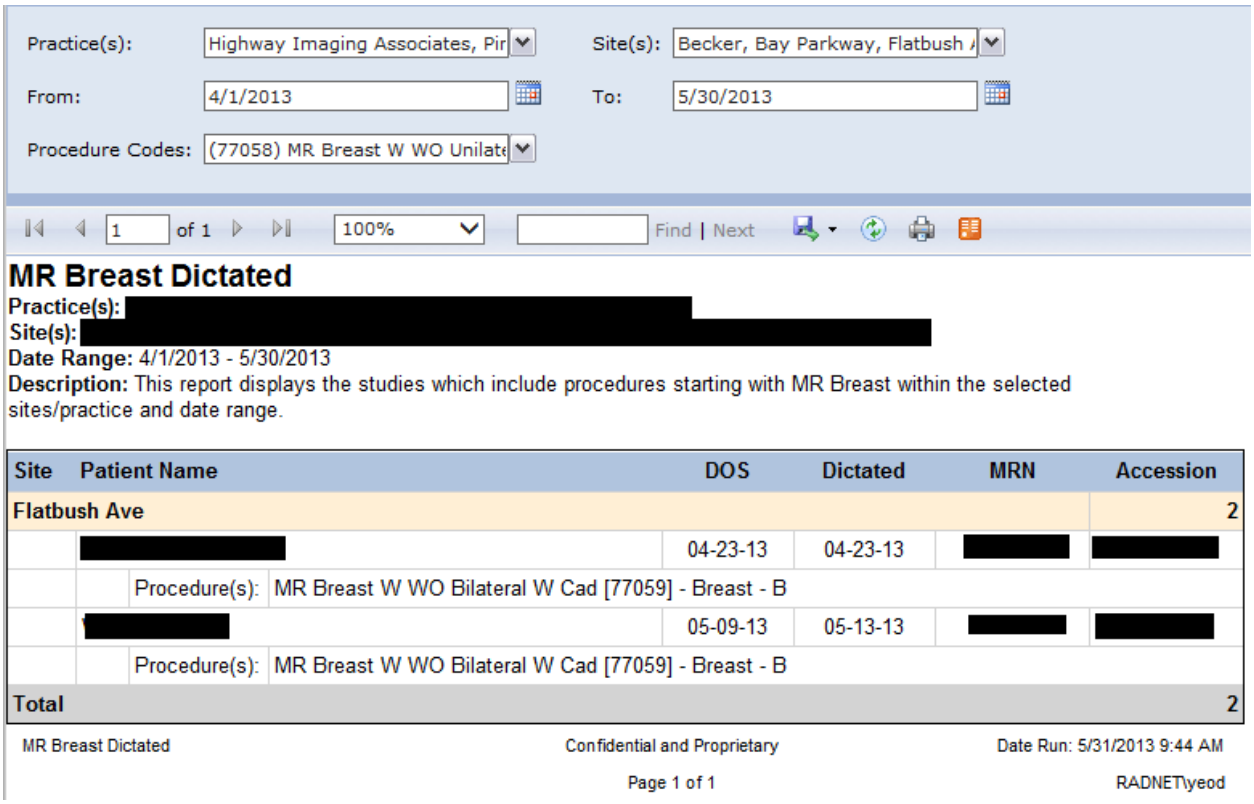

Figure 5.97 – MR Breast Dictated management report

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Management Report – New Sales Mgmt Report for Referring Practice

We need to get all sales data into a rollup table and call this rollup data to improve performance for sales mgmt reports. To do this we created a stored procedure "c_SummaryMaster" that will be called nightly by a job. These new reports will report off this rollup data("c_summary_sales_trend"). I talked to Sean Clark and he is fine if we return 36 months of data only in this rollup table. I confirmed that counts will be based off cpt counts. I will add a note to **create a script** to create this job on the B41 build directory to call this new stored procedure "c_SummaryMaster".

Created a new management report "Sales Referring Practice Raw Data" where the results can be exported to either csv or excel based off the following parameters [a practice_code, multiple sites, multiple referring physician practice, multiple modalities, a monthly variance(6 or 13 variance), and a date. Note: if the report contains more than 65636 rows the report will not be able to export to excel.

PHYSICIAN	MODALITY	LOCATION	SPECIALTIES	November	December	January	February	March	April	May	Total
Jacobson, Kyle8 35939	XR	Lutherville	Accupuncturist | Breast Surgery			1			1		2
JONES, WHAY	CT	Eldersburg	General Practice				1				1
JONES, WHAY	CT	Fisher	General Practice	1							1
JONES, WHAY	CT	Lutherville	General Practice				1				1
JONES, WHAY	MA	Lutherville	General Practice				1				1
JONES, WHAY	MR	Eldersburg	General Practice	1							1

Figure 5.98 – Sales Referring Practice Raw Data

Created a new mgmt. report "Sales Referring Practice Raw Quarter Data " the sales team can export to csv or excel based off the following parameters [a practice_code, multiple sites, multiple referring physician practice, multiple modalities, a monthly variance(6 or 13 variance), and a date.

PRACTICE	PHYSICIAN	MODALITY	Qtr 1 2012	Qtr 4 2012	Qtr 1 2013	Total	Qtr 2 2013	Qtr 1 2012 Avg	Qtr 4 2012 Avg	Qtr 1 2013 Avg	Qtr 2 2013 Avg
ADV	HODGSON, WESLEY	MA	0	1	0	1	0	0.0	0.3	0.0	0.0
ADV	HODGSON, WESLEY	MR	0	1	0	1	0	0.0	0.3	0.0	0.0
ADV	HODGSON, WESLEY	XR	0	2	0	2	0	0.0	0.7	0.0	0.0
ADV	Jacobson, Kyle8 35939	XR	0	0	1	1	1	0.0	0.0	0.3	0.3
ADV	JONES, WHAY	CT	4	1	2	7	0	1.3	0.3	0.7	0.0
ADV	JONES, WHAY	MA	0	0	1	1	0	0.0	0.0	0.3	0.0
ADV	JONES, WHAY	MR	0	1	0	1	0	0.0	0.3	0.0	0.0

Figure 5.99 – Sales Referring Practice Raw Quarter Data

Created a new mgmt. report "Monthly Variance Raw Data" replaces the previous 6/13Mth Variance Report and the sales team can export to csv or excel based off the following parameters [a practice_code, multiple sites, a monthly variance(6 or 13 variance), and a date.

Physician	Physician Last Name	Physician First Name	NPI	Affiliation	Specialty	Location	Modality	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	Total	Mth Avg	May-13
Abbott, Aaron 55833	Abbott	Aaron				Eldersburg	US							0	0.00	1
Abbott, Aaron 55833	Abbott	Aaron				Fisher	CT						2	2	0.33	
Abbott, Aaron 55833	Abbott	Aaron				Fisher	XR						1	1	0.17	
Abbott, Alberto3 24490	Abbott	Alberto3				Fisher	NM							0	0.00	1
Abbott, Alberto3 24490	Abbott	Alberto3				Lutherville	XR							0	0.00	1

Figure 5.100 – Monthly Variance Raw Data

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Created a number of new management reports.
"Sales Referring Practice Data" where the sales team can view data without exporting to csv or excel based off the following parameters [a practice_code, multiple sites, multiple referring physician practice, multiple modalities, a monthly variance (6 or 13 variance), and a date.

PHYSICIAN	May-12	Jun-12	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	Mth Avg	May-13	Var/May 13
HODGSON, WESLEY	0	0	0	0	155	4	0	0	0	0	0	0	**13**	0	(13)
JONES, WHAY	1	6	23	0	54	0	4	0	0	3	0	0	**8**	0	(8)
Jacobson, Kyle8 35939	0	0	0	0	0	0	0	0	1	0	0	1	**0**	0	0
Power MD, Ian	0	0	0	0	0	0	0	0	0	3	7	135	**12**	67	55
Total	**1**	**6**	**23**	**0**	**209**	**4**	**4**	**0**	**1**	**6**	**7**	**136**	**33**	**67**	**34**

Figure 5.101 – Sales Referring Practice Data

"Sales Referring Practice Data by Affiliation" where the sales team can view data without exporting to csv or excel based off the following parameters [a practice_code, multiple sites, multiple referring physician practice, multiple modalities, a monthly variance(6 or 13 variance), and a date.

PHYSICIAN	Affiliation	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Total
Power MD, Ian	chesapeake	0	0	0	3	7	135	67	212
JONES, WHAY	referrer	4	0	0	3	0	0	0	7
Jacobson, Kyle8 35939	Borneo	0	0	1	0	0	1	0	2
Grand Total		**4**	**0**	**1**	**6**	**7**	**136**	**67**	**221**

Figure 5.102 - Sales Referring Practice Data by Affiliation

"Sales Referring Practice Data by Modality" where the sales team can view data without exporting to csv or excel based off the following parameters [a practice_code, multiple sites, multiple referring physician practice, multiple modalities, a monthly variance(6 or 13 variance), and a date.

Advanced Radiology By Modality May 2013								
MODALITY	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	May daily avg
CT	1	0	0	2	1	108	54	**5.40**
MA	0	0	0	1	1	0	0	**0.00**
MR	1	0	0	0	0	0	0	**0.00**
XR	2	0	1	3	5	28	13	**1.30**
Total	**4**	**0**	**1**	**6**	**7**	**136**	**67**	**6.70**

Figure 5.103 - Sales Referring Practice Data by Modality

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"Sales Referring Practice Data by Specialty" where the sales team can view data without exporting to csv or excel based off the following parameters [a practice_code, multiple sites, multiple referring physician practice, multiple modalities, a monthly variance(6 or 13 variance), and a date.

PHYSICIAN	Specialties	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13
JONES, WHAY	General Practice	4	0	0	3	0	0	0
Jacobson, Kyle8 35939	Accupuncturist | Breast Surgery	0	0	1	0	0	1	0
Power MD, Ian	Breast Surgery	0	0	0	3	7	135	67
Grand Total		**4**	**0**	**1**	**6**	**7**	**136**	**67**

Figure 5.104 - Sales Referring Practice Data by Specialty

"Sales Referring Practice Monthly Volume and Daily Avg" where the sales team can view data without exporting to csv or excel based off the following parameters [a practice_code, multiple sites, multiple referring physician practice, a modality. The volume is the number of cpt codes performed for a particular month. The Daily average is valoume /number of business Days.

Year	Month	Volume	Daily Avg
2011	May	3	0.1
	June	5	0.2
	July	5	0.2
	August	5	0.2
	September	2	0.1
	October	5	0.2
	Total	25	0.2
2012	February	2	0.1
	March	4	0.2
	May	2	0.1
	June	4	0.2
	July	24	1.2
	August	2	0.1
	September	16	0.8
	November	3	0.2
	December	19	1.0
	Total	76	0.4
2013	January	4	0.2
	February	12	0.7
	March	3	0.1
	April	10	0.5
	May	7	0.4
	Total	36	0.4

Figure 5.105 - Sales Referring Practice Monthly Volume and Daily Avg

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Management Report – Upload Custom Management Reports

The DeployReports.bat tool has been modified to prompt the user if they would like to upload Custom Management reports. When the customer reports are uploaded the DeployReports.bat tool will create a sub folder called "Uploads" that will be created under the Custom folder. The uploaded custom reports will be placed in the "Uploads" folder. The user will then be responsible to move the report in the Custom folder.

To summarize:

1. In the deployment folder created a folder called Upload Custom Management Reports
2. Modified scripts to prompt: Do you wish to upload Custom Management Reports?
3. Modified scripts to upload from the Upload Custom Management Reports folder to create a folder below Custom called Uploads and Upload the reports there.

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Management Report – Automate Backup of Management Report Deployment

When deploying the newest management reports a backup will now be created to ensure that no existing report that was to be kept. This backup will serve not only as a backup but an easy way to download forms\templates or custom reports to deploy to another installation.

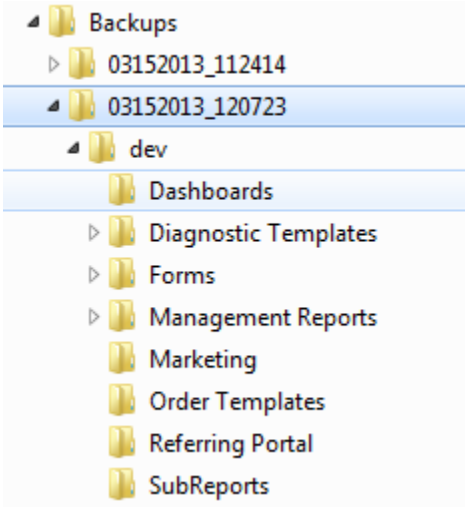

Figure 5.106 – Displaying management report backups

In the example above you can see it creates a folder called backups, below that a folder named the datetime of the backup and below that the report structure for the installation you are deploying to. In this example it backed up the dev deployment on Mar 15 2013 at 12:07.

- Do you wish to create a backup of the existing reports?
- Do you wish to deploy core management reports?
- Do you wish to upload Forms?
- Do you wish to upload Diagnostic Templates?
- Do you wish to upload Custom Management Reports?
- Do you wish to create a datasource?

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Management Report – Mammo Back on Track

This report has been created to allow the user to determine when the "Back on Track" date for the patient's next mammo screening is. Looking at all "ShortTermFollowup" and "CallBack" orders where recommendation is "BACK ON TRACK" (target date cannot be manually adjusted. Staff can cancel the order and generate a new Mammo follow-up order with correct target date).

Mammo Back on Track

Practice: Radnet Central

Site(s): Modesto Advanced Imaging Center, Stockton Diagnostic, Stockton Diagnostic Outside Read, Outside CD

Description: The intention of this report is to identify any patient in the system that has order type of "CallBack" or "ShortTermFollowup" where the mammo orders have come for an original study with a diagnosis of "BIRAD 1 or 2".

Patient	MRN	Study Status	Requested Date	Order Status	Original Accession	Recommendation	Birad
[redacted]		Signed1	07-08-2013	ShortTermFollowUp	29172	4 months	2-Benign finding
		Signed1	04-05-2013	ShortTermFollowUp	10740	10 months	2-Benign finding
		Signed1	04-05-2013	ShortTermFollowUp	10751	11 months	1-Negative
		Signed1	04-07-2013	ShortTermFollowUp	11923	11 months	1-Negative
		Signed1	04-09-2013	ShortTermFollowUp	12458	10 months	1-Negative
		Signed1	06-26-2013	ShortTermFollowUp	24177	6 months	1-Negative
		Signed1	07-09-2013	ShortTermFollowUp	25744	5 months	1-Negative
		Signed1	06-26-2013	ShortTermFollowUp	27608	3 months	2-Benign finding
		Signed1	07-12-2013	ShortTermFollowUp	32782	5 months	2-Benign finding
		Signed1	07-05-2013	ShortTermFollowUp	27012	5 months	1-Negative
		Signed1	04-23-2013	ShortTermFollowUp	12040	8 months	2-Benign finding
Total							11

Mammo Back on Track | Confidential and Proprietary | Date Run: 7/16/2013 11:51 AM

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Figure 5.160a – Mammo Back on Track management report

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Management Report – User ID Parameter on Reports with Practice Code

This feature affects the reports that can be viewed based on what Practices the user belongs to. If the user has access to Practice A and C, but not B when the view a report that is filtered on Practice, they will not be able to view it for Practice B.
Below is the list of reports that use the Practice parameter and were modified:

Management Reports/Billing/Charge Audit Report	Management Reports/Billing/Charge Audit Report no header
Management Reports/Maintenance/Procedure Codes	Management Reports/Meaningful Use/Automated Measures
Management Reports/Meaningful Use/MU Automated Measures Details	Management Reports/Meaningful Use/MU Scorecard
Management Reports/Meaningful Use/Patient Reminder List	Management Reports/Meaningful Use/RRR Meaningful Use
Management Reports/MQSA/Mammo Annual Radiologist Summary	Management Reports/MQSA/Mammo Annual Technologist Summary
Management Reports/MQSA/Mammo Document_Distribution Status	Management Reports/MQSA/Mammo Ignored Reminder List
Management Reports/MQSA/Mammo Radiologist Summary	Management Reports/MQSA/Mammo Technologist Summary
Management Reports/MQSA/MQSA General Exam List	Management Reports/MQSA/MQSA List of Exams Performed by Technologist
Management Reports/MQSA/MQSA List of False Negative Exams	Management Reports/MQSA/MQSA List of False Positive Exams
Management Reports/MQSA/MQSA List of Positive Exam Followups	Management Reports/MQSA/MQSA List of Positive Exams with Outstanding Biopsies
Management Reports/MQSA/MQSA Location Summary Group By BIRAD	Management Reports/MQSA/MQSA Location Summary Group By Procedure
Management Reports/MQSA/MQSA Outcome Report	Management Reports/MQSA/MQSA Radiologist Reporting Summary
Management Reports/Operations/Aborted Exams	Management Reports/Operations/Addended Mammography Exams
Management Reports/Operations/Amount Collected By User	Management Reports/Operations/Appointment Schedule
Management Reports/Operations/Biopsy Results Pending Letter	Management Reports/Operations/Cancellations by Referring
Management Reports/Operations/Cancelled Exams	Management Reports/Operations/Cancelled Reasons
Management Reports/Operations/Check-in Counts	Management Reports/Operations/Chief Complaint Audit
Management Reports/Operations/Confirmation Status Cancelled or Rescheduled	Management Reports/Operations/Confirmed Appointments
Management Reports/Operations/Copay vs Collected	Management Reports/Operations/CPT Quantity
Management Reports/Operations/Daily Log by Status	Management Reports/Operations/Daily Schedule
Management Reports/Operations/Daily Schedule Add Ons	Management Reports/Operations/Front Desk Activity
Management Reports/Operations/Front Desk Trending by Hour	Management Reports/Operations/Image Request History
Management Reports/Operations/IVT 7 Day Trend	Management Reports/Operations/IVT Cancelled
Management Reports/Operations/IVT Idle Time	Management Reports/Operations/IVT Turnaround
Management Reports/Operations/IVT User Activity	Management Reports/Operations/Modality Duration Override
Management Reports/Operations/Need Plan	Management Reports/Operations/NM Therapy Patient Listing
Management Reports/Operations/No Shows	Management Reports/Operations/Open Capacity
Management Reports/Operations/Patient Wait By Room	Management Reports/Operations/Patient Wait Time Trending by Site
Management Reports/Operations/Patient Wait Times	Management Reports/Operations/Patients Without Insurance
Management Reports/Operations/Payments Details	Management Reports/Operations/Payments Received

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Management Reports/Operations/Performed Procedures and Patients	Management Reports/Operations/Performed Procedures Count
Management Reports/Operations/Pre-Auth Daily Count	Management Reports/Operations/Pre-Auth Referring Physician
Management Reports/Operations/Radiologist Queues	Management Reports/Operations/Referrals by Physician
Management Reports/Operations/Referrals by Physician Patient List	Management Reports/Operations/Referring Physician Volumes
Management Reports/Operations/Referring RTAT	Management Reports/Operations/Report Turnaround
Management Reports/Operations/Reschedules and Cancellations	Management Reports/Operations/Room Activity
Management Reports/Operations/Room Closures	Management Reports/Operations/Room Utilization
Management Reports/Operations/RTAT by Radiologist	Management Reports/Operations/RTAT Detail
Management Reports/Operations/RTAT Detail - Monthly	Management Reports/Operations/RTAT Detail Mammo
Management Reports/Operations/RTAT RAD Signing	Management Reports/Operations/RTAT Summary
Management Reports/Operations/Scheduled Counts by Site	Management Reports/Operations/Scheduled vs Completed
Management Reports/Operations/Scheduler Activity	Management Reports/Operations/Scheduler Activity By Hour
Management Reports/Operations/Scheduler Activity by Modality	Management Reports/Operations/Scheduling 7 Day Trend
Management Reports/Operations/Special Accommodations	Management Reports/Operations/Technologist Activity
Management Reports/Operations/Technologist Activity by Modality	Management Reports/Operations/Technologist Unfinished Exams
Management Reports/Operations/Time to Schedule (seconds)	Management Reports/Operations/Transportation Report
Management Reports/Operations/Unknown Referring	Management Reports/Operations/Unread Exams
Management Reports/Operations/Wait Room Times	Management Reports/Operations/Wait Room Turnover
Management Reports/Operations/Wrong Study Ordered	Management Reports/Statistics/Editors/Edited Jobs Activity Report
Management Reports/Statistics/Editors/Edited Jobs By User By Hour	Management Reports/Statistics/Editors/Edited Jobs By User Detail
Management Reports/Statistics/Editors/Editors Activity	Management Reports/Statistics/Radiologists/QA Radiologist Review
Management Reports/Statistics/Radiologists/Radiologist Dictation Activity	Management Reports/Statistics/Radiologists/Radiologist Dictation Activity by Date
Management Reports/Statistics/Radiologists/Radiologist Signing Activity	Management Reports/Statistics/Technologists/Continuing Experience Technologist

Table 5.2 – Management reports with Practice parameter

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Meaningful Use – MU Administration > Configure Directory

For ease of use and the MU lookups have been grouped together in the Configure window. As displayed in the figure below, the lookups grouped under MU are Allergy, FamilyHistory, FamilyRelation, Medication, SearchProviders, SmokingStatus, UnitOfMeasure, Vaccine and VaccineManufacter.

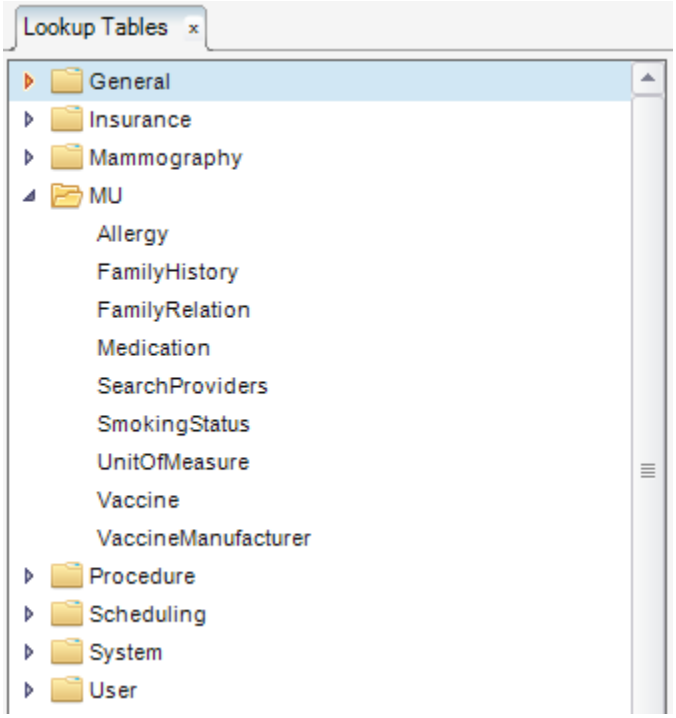

Figure 5.107 – MU Category in containing lookup tables pertaining to MU

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Meaningful Use – Vital Signs, BMI and Growth Chart

Only numeric values can be entered for height/length, weight and blood pressure. These values can be changed on edit. The height/length, weight and blood pressure are all captured on the MU tab available in View/Edit, Scheduling, Registration and Perform Exam windows.

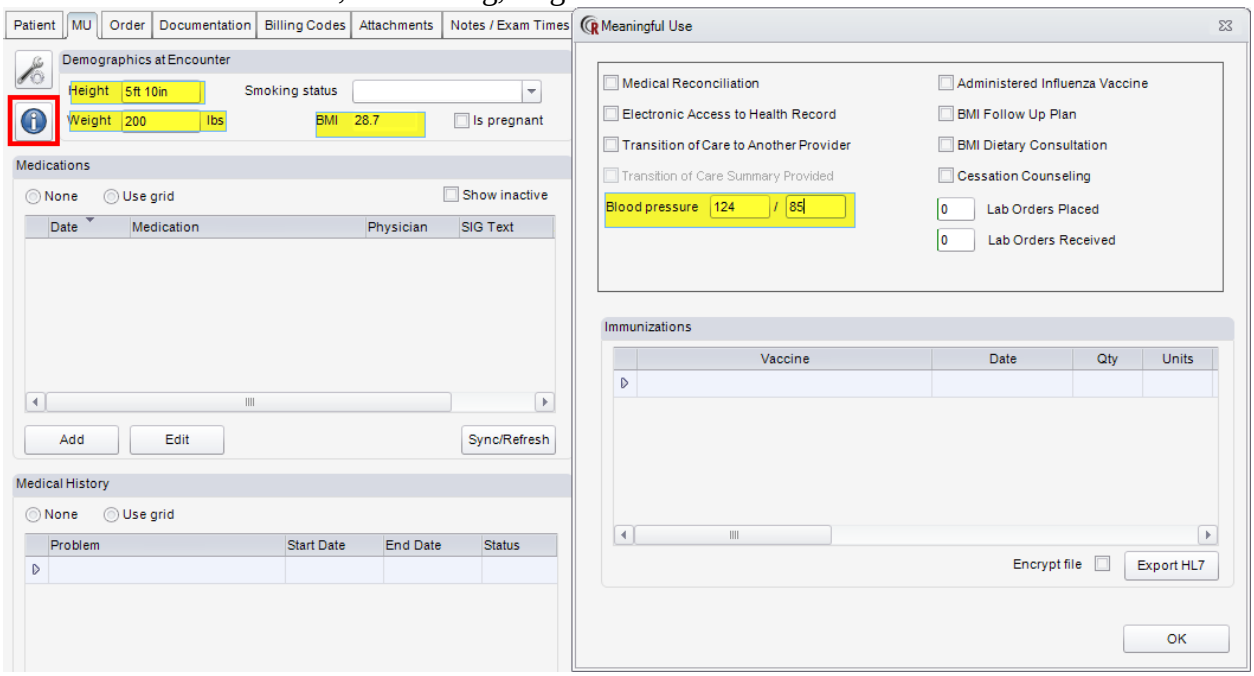
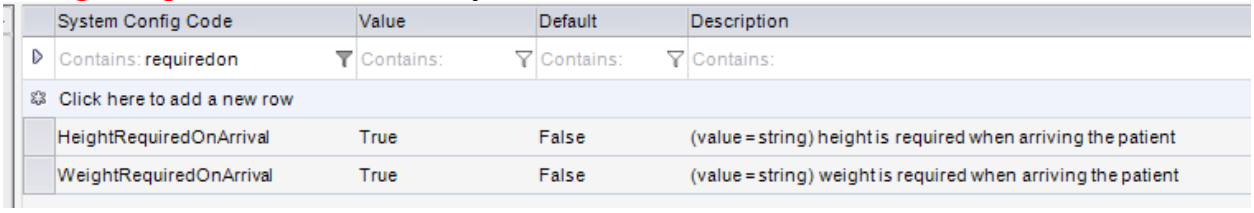


Figure 5.108 – Height, weight, BMI and blood pressure captured

In the figure about the BMI value is auto calculated based on the height and weight values entered. Blood pressure is entered in the Meaningful Use window and is accessed via the Meaningful Use Information button outlined in red.

The height and weight fields can also now be configured to be required on arrival. This is based on the value of two new system configuration settings **"HeightRequiredOnArrival"** and **"WeightRequiredOnArrival"**. They both have a default value of False



System Config Code	Value	Default	Description
Contains: requiredon	Contains:	Contains:	Contains:
Click here to add a new row			
HeightRequiredOnArrival	True	False	(value = string) height is required when arriving the patient
WeightRequiredOnArrival	True	False	(value = string) weight is required when arriving the patient

Figure 5.109 – Displaying new SystemConfig settings

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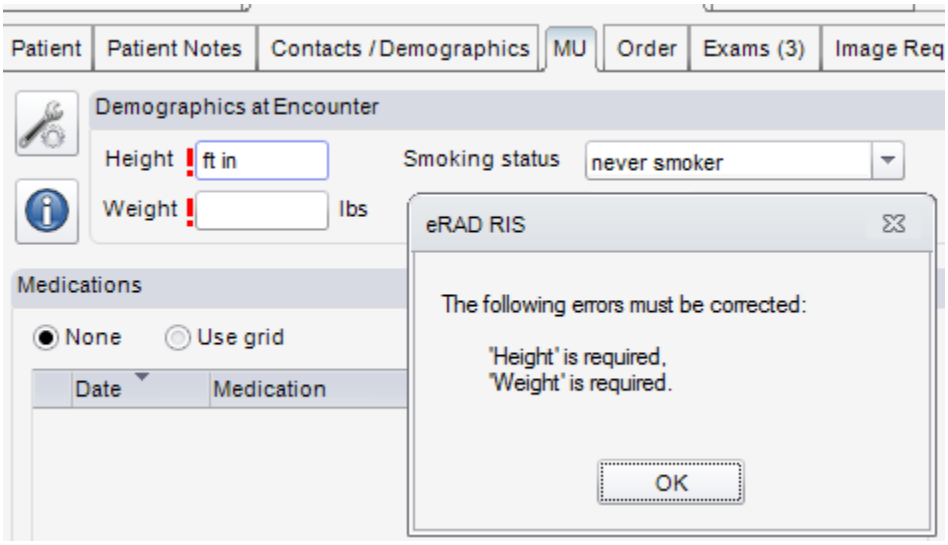

Figure 5.110 – Height and Weight required on arrival

If the patients Height and Smoking status was captured in a previous visit, this data will auto populate in the appropriate fields when the next study is registered.

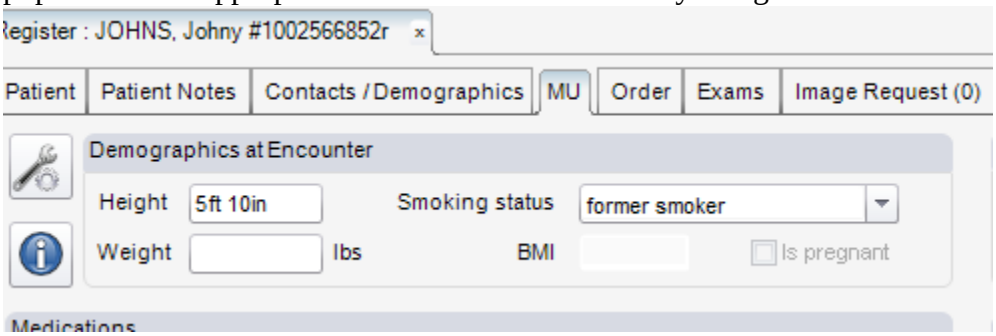

Figure 5.111 – Height and Smoking status auto populates from previous visit

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Meaningful Use – Family Health History

Family health history is meaningful use requirement #170-314-a-13. The user needs to be able to record, access and edit patient's family health history.

To start, two new lookup tables have been introduced under the MU category on the Configure windows.

FamilyRelation lookup was added and is access is controlled by a new access string **"Config.LookupEditor.FamilyRelation"** with a default of none. This table contains the "first degree" relation options for the patient. This table will be pre-populated with build 41 and these values should not change or be altered.

Family Relation Code	Description	Display Order	Last Updated	Active
Contains:	Contains:	Equals:	Contains:	Contains:
Click here to add a new row				
Brother	Brother	5	04-09-2013 2:24 PM	Y
Daughter	Daughter	6	04-09-2013 2:24 PM	Y
Father	Father	2	04-09-2013 2:24 PM	Y
Mother	Mother	1	04-09-2013 2:24 PM	Y
Sister	Sister	3	04-09-2013 2:24 PM	Y
Son	Son	4	04-09-2013 2:24 PM	Y

Figure 5.112 – FamilyRelation lookup table

The second new lookup table is the FamilyHistory table and access is controlled by **"Config.LookupEditor.FamilyRelation"** with a default of none. This table will also be pre-populated with snomed codes and descriptions. These values should not be altered.

Family History Code	Description	Display Order	Last Updated	Active
Contains:	Contains:	Equals:	Contains:	Contains:
Click here to add a new row				
160302006	Family history: Thyroid disorder	1	04-08-2013 3:22 PM	Y
160357008	Family history: Hypertension	1	04-08-2013 1:53 PM	Y
160364005	Family history: Congenital heart disease	1	04-08-2013 1:53 PM	Y
160377001	Family history: Asthma	1	04-08-2013 2:21 PM	Y
275937001	Family history of cancer	1	04-08-2013 1:53 PM	Y
429959009	Family history of heart failure	1	04-08-2013 3:22 PM	Y

Figure 5.113 – FamilyHistory lookup table

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On the GUI side a new data pane titled “Family History” was added on the Patient tab. It replaces the Patient Notes data pane which has been moved to its own tab immediately following the Patient tab.

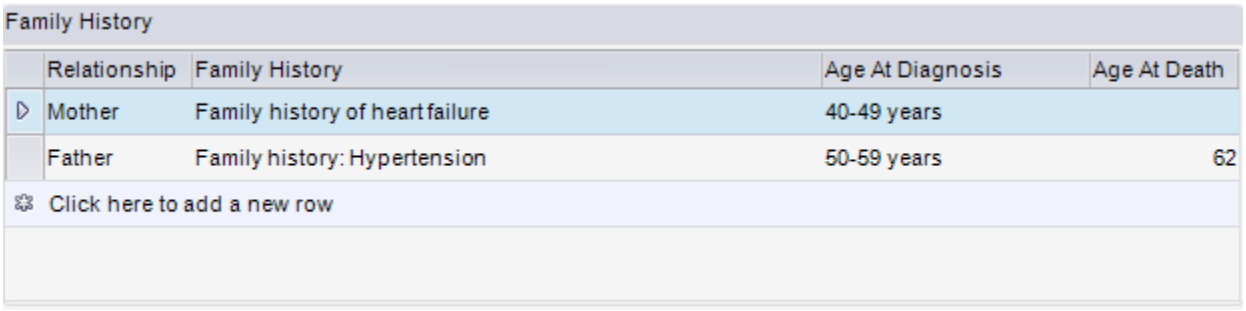

Figure 5.114 – Family History data pane

Relationship - is populated with a new lookup FamilyRelation and we will load with first degree relatives (“Brother”, “Daughter”, “Father”, “Mother”, “Sister”, “Son”).

Family History - is populated with a new lookup FamilyHistory and this table must contain valid snomed ct concept codes. With the build 41 upgrade the following will be marked as active (”Family history: Thyroid disorder”, “Family history: Hypertension”, “Family history: Congenital heart disease”, “Family history: Asthma”, “Family history of cancer”, “Family history of heart failure”).

Age of Diagnosis - Are hard coded with the following values ("Pre-Birth", "Newborn", "In Infancy", "In Childhood", "In Adolescence", "20-29 years", "30-39 years", "40-49 years", "50-59 years", "60 years and older, "Unknown"). Values were added based of the Surgeon General's Family Health History Initiative.

Age of Death - field will take a numeric value for the age the family member passed away.

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Meaningful Use – Immunization Updates

Four new fields have been added to the Immunization data pane. Expiration Data, Route, Administration Site and a Notes field.

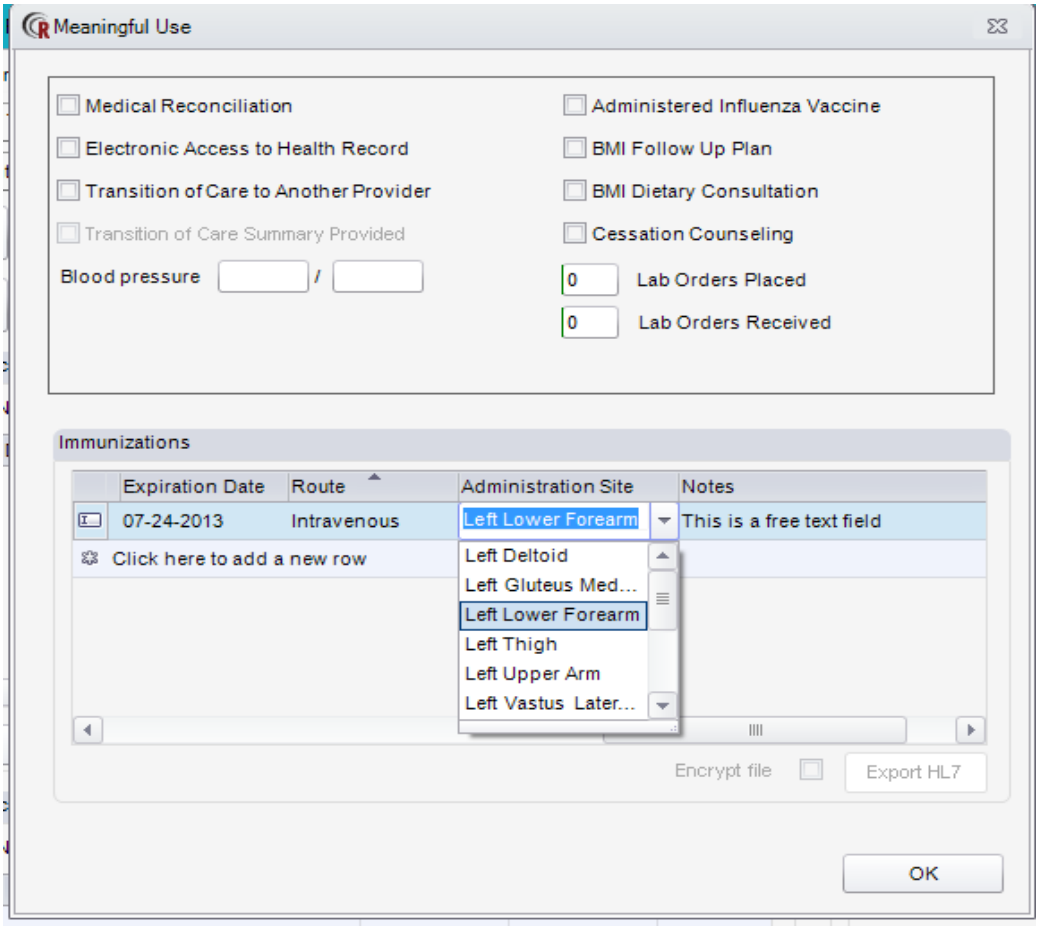

Figure 5.115 – Immunizations data pane additions

The values for Route and Administration Site are taken from hidden lookup tables that Admins will not be able to altered (hard coded values).

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Meaningful Use – CQM Filtered by Practice

In Build 41 we modified all meaningful use stored procedure for calculating cqm measures to pass in a practice code as a parameter so that users can only view data from practices they have access to see (reason for change: B40 change on how management reports work. Management Reports are also filtered by practice the logged in user has access to.)

Lastname, Firstname

It was requested that many fields in the application conform to Lastname, Firstname. Therefore, on all worklists, tabs, combo boxes and fields that refer to people, the names are now formatted Lastname, Firstname. If the person is a user of the RIS system, it will show as Lastname, Firstname (userid). In the case of referring doctors, it will show as Lastname, Firstname Middlename Suffix.

Throughout the code, the name format was changed as appropriate.
User:
The current user of this RIS will have their name in the titlebar of the application as First Middle Last [userid]

RIS tabs (ie, Walk-in, Registration)
RIS tab header will display LASTNAME, Firstname #accession for all work tabs.
Order tab within a workflow tab set
(unchanged) Referring doctor and CC doctors in the order tab for all roles is unchanged from 40:
Last, First M

Perform exam window:
In the mini-patient-history at the top of the screen, referring is: **Last,** (unchanged): **First Middle Suffix**
Assigned radiolgist, performing, assisting…
(unchanged) Last, First

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Radioloigst Dictate Screen:
Assign To Radiologist
Last, First Middle

Audit screen
Tab Title: Last, First #MRN
User who did the audit event:
Last, First (userid)

Worklists columns:
Virtually all worklists in RIS were updated to this new pattern. In most cases, there was dependant code on the _userid column, so these were left intact, and new columns were added to the worklist datasets to represent the names.
Referring column – now formatted to Last, First suffix
Radiologist, Tech, Transcriptionist, : Last, First Middle suffix (userid)
Patient: A new Patient name column was created which is Last, First

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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.**
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
40	16.1	1.3.40.18705	1.3.40.16659	1.3.40.18585	1.3.40.18646	GUI.zip

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		(3GB)				
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
41	-	1.3.41.19135(3GB)	1.3.41.19135	1.3.41.19135	1.3.41.19135	Full version release

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7. Resolved Defects

Bugs Suggested Features and Support Issues resolved in build 1.41. The extract is taken from Redmine bug tracking system and only displays defects resolved in 1.41.

Bug #	Priority	Subject	Category	Found Version
3664	Immediate	Wedge-Mirth speed needs to be improved!!!! CRA CANNOT GO LIVE ON THIS SAME BOX BEFORE THIS IS ADDRESSED	HL7	1.40
4186	Urgent	Multitab next workflow	Radiology Reporting	1.40
4149	Urgent	Reporting - Potiental hazard of loading/saving incorrect dictation	Thick Client GUI	1.39.001
4094	Urgent	RadNet - Support HP ScanJet 3000 s2	Thick Client GUI	1.40.11
3700	Urgent	Billing detail table contains an unneeded copy of the study container	Web Services/DB	1.40
3463	Urgent	RIS Billing interface needs to send unique numeric MRN to MDIV	HL7	1.40
4461	High	Patient Wait Times	Mgt Reports	1.40
4305	High	Get attached user id not populating properly when making addendum requests	Web Services/DB	1.40
4213	High	PACS Caching Framework Busted	PACS Integration	1.40
4133	High	View Edit - Change scan type when patient has study open in reporting window will throw error	Thick Client GUI	1.40.014
4084	High	RRR - Forms 'criteria' - insurance criteria not recognized by right-click print forms from work list	Thick Client GUI	39.16

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3871	High	Magview reports need addendums to be signed in Magview	Thick Client GUI	1.40
4125	High	Scheduling - User not informed at time of scheduling if study doesn't have billing code	Thick Client GUI	1.40
3810	High	Patient folder notes text boxes autosizing. (Fisher site visit)	Thick Client GUI	40.01
3690	High	WCF Services can be enumerated using the http mex binding	Web Services/DB	1.40
3689	High	c_SelectReportBodyAddendums need to add multi-sign information	Web Services/DB	1.40
3550	High	Scheduled study can appear on IVT work list twice	Thick Client GUI	1.40.005
3402	High	Push signature service stops processing all jobs when performed_end_date is null	Web Services/DB	1.38
3336	High	Required sections not being enforced	Thick Client GUI	1.40
2922	High	Reporting - insert macro doesn't select first field in macro moves to first field in report	Thick Client GUI	1.39
2824	High	Reporting - rejected reports should never go back to QA after signing again	Thick Client GUI	1.38
1691	High	Perform Exam - Error on click of complete button: "error determining study keys for status update"	Thin Client GUI	1.2.37.13040
4062	High	DD: Default option on saving new address info should be No when changing fax number.	Document Distribution	1.40
4500	Normal	Reporting - Missing speechmike setup file on Microphone Calibration wizard	Radiology Reporting	1.40.017

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4496	Normal	Management Reports - Cancelled Reasons too slow	Mgt Reports	1.40
4490	Normal	Protect section headers does not protect against macro insertions	Radiology Reporting	1.40.017
4475	Normal	c_mgmt_study_details date of service	Web Services/DB	1.40
4362	Normal	abort study is sending all procedures back to orders to schedule	Thick Client GUI	1.40
4316	Normal	Add access string "Clinical.ResolveRadProblem "	Radiology Reporting	1.40
4306	Normal	Scanning - able to modify scan types even if they don't have access to Config.LookupEditor.ScanType		1.40
4288	Normal	having a (') single quote in a scan type description, causes the attachments data nugget from loading		1.40.15
4252	Normal	Reporting - custom fields list not displayed in logical order	Radiology Reporting	1.40
4217	Normal	Caching - Performance Can Be Improved.		1.40
4206	Normal	errors deserializing lookups when called by multiple threads	Thick Client GUI	1.40.015
4178	Normal	billing message will not build for tech only studies.	HL7	1.40
4156	Normal	ActiveAudioControl.DictationModeCurrent not reflecting actual Dictation Mode	Radiology Reporting	1.40
4131	Normal	Need index on c_visit.insurance_verification_approved_on_date	Web Services/DB	1.40
4089	Normal	Payment Detail Report - does not run at SE	Mgt Reports	1.40
4088	Normal	Scanning - cropping too much for ID cards		1.40

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3996	Normal	HL7 Billing interface change the PID.18 to contain the accession number	HL7	1.40
3994	Normal	Activity WL is showing non active studies	Web Services/DB	1.40
3975	Normal	Verify External - button is greyed out in Patient Folder, even if you have permission	Thick Client GUI	39.10
3973	Normal	Scanning - Color issues	Thick Client GUI	1.40.012
3972	Normal	Blank Modality Lookup --> new site Index out of Range	Thin Client GUI	40.10
3971	Normal	RIS Administrator - permissions	Web Services/DB	39.10
3968	Normal	Mammo - Recall, Call back, Shor term follwup letter configuration.	Thick Client GUI	40.11
3967	Normal	Mammo Letters --> Manual printing of letters	Thick Client GUI	40.11
3965	Normal	Management Reports - RTAT Detail too slow	Mgt Reports	1.40
3959	Normal	screen access counts are inflated	Thick Client GUI	1.40.16638
3951	Normal	MU - Duplicate records for Merge Patients	Thick Client GUI	1.40
3950	Normal	MU - Get the following error when View/Print CQM Measures from rRIS	Thick Client GUI	1.40
3945	Normal	Remove Edit Order		1.00
3929	Normal	RadNet - Ranjan - fix MyView default issue	Thick Client GUI	1.40

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3925	Normal	Reporting - Extra get config file not needed when opening a report.	Thick Client GUI	1.40
3923	Normal	Patch Updates - Unable to easily hide patch builds	Thick Client GUI	1.40
3922	Normal	RIS Referring Physician Search Details	Mgt Reports	1.40
3921	Normal	PatientWorkList - GetConfigFIle / GetConfigFileList are going to the WS too often.		1.40
3915	Normal	ambiguous error on My Pending Signature WL	Web Services/DB	1.40
3906	Normal	Outside Reads: In viewedit the Assigned Radiologist dropdown doesn't have the Rad's for the "site_code" specified.		1.40
3897	Normal	Billing to Modality Type	Thick Client GUI	1.40
3864	Normal	Error on opening attachment window of Schedule Order window	Thick Client GUI	1.40.010
3859	Normal	Mgmt Reports c_study needs a field to store the version of the original signed off reprot	Mgt Reports	1.40
3855	Normal	Remove 6 -Mth / 13 -Mth Variance Report	Mgt Reports	1.40
3854	Normal	CD Import - Cast exception if an image set does not have a study_instance_uid		1.40
3768	Normal	Mammo - Ignored Reminder report - performance	Mgt Reports	40.01

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3760	Normal	Management Report - Radiologist Dashboard	Mgt Reports	1.40
3748	Normal	Quality Review Rate	Thick Client GUI	40.00
3746	Normal	Scanning - Auto cropping needs to be improved		1.40
3736	Normal	Management Reports - remove defaulting of the sites value	Mgt Reports	1.40
3735	Normal	Management Reports - Radiologist Dashboard	Mgt Reports	1.40
3733	Normal	Medication Reconciliation should be checked when medication rb checked	Thick Client GUI	1.40
3726	Normal	Procedure code picker when creating macros/template filter issue	Thick Client GUI	1.40
3697	Normal	ICM Dashboard - Add parameter for Unknown Referring ID	Mgt Reports	1.40
3668	Normal	Managememt Reports - Transcription Dashboard	Mgt Reports	1.40
3653	Normal	mgmt report performance - Edited Jobs By User By Hour	Mgt Reports	1.40
3641	Normal	Reporting - soft return characters showing in the report editor	Thick Client GUI	1.40
3640	Normal	Reporting - insert macro not adding space between period and captial letter.		1.40

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3637	Normal	Internal voice command not working. (next field, insert template/macro, etc)	Thick Client GUI	1.40
3631	Normal	6 -Mth / 13 -Mth Variance Report	Mgt Reports	1.40
3630	Normal	Exam Details pane doesn't contain everything the Summary pane does.	Thick Client GUI	1.40
3625	Normal	Duplicate NPI	Thick Client GUI	1.40
3620	Normal	Reporting - ability to load interactive dictionaries from user management	Thick Client GUI	1.38
3618	Normal	Managememt Reports - QA Radiologist Review	Mgt Reports	1.40
3601	Normal	Opening and Closing Screens is slowed down by the Recently Accessed List		1.40
3599	Normal	l_person_address clustered index	Thick Client GUI	1.40
3596	Normal	Reporting - summary panel not displaying legacy users	Thick Client GUI	1.40
3581	Normal	Report rendering with empty table tags causing a misleading message	Thick Client GUI	1.40
3573	Normal	Reporting - Laterality Check throwing "cannot insert bookmark error"	Thick Client GUI	1.40
3564	Normal	message: "an error occurred while printing forms" when printing some forms from patient history	Thick Client GUI	1.40.16638

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3561	Normal	Missing Access String	Web Services/DB	1.40
3558	Normal	Addendum request generates a new c_interpretation row	Thick Client GUI	1.40
3554	Normal	Errors in the Procedure code table editor		1.40
3542	Normal	Unclear error message thrown when you chose an invalid value for 'State'	Thick Client GUI	39.10
3541	Normal	front desk activity report performance issue	Mgt Reports	1.40
3527	Normal	Error from lookup tables when choosing not to save changes.	Admin Tools	1.40.002
3509	Normal	Notification popup box fade too slow when clicking the "x"	Thick Client GUI	1.40
3453	Normal	Create macro from... Not working if template or macro browser is closed.	Thick Client GUI	1.40
3452	Normal	Document Model Info popup not disabling parent content base		1.40
3442	Normal	Exception filtering lookup	Admin Tools	1.40
3441	Normal	CaptureUIControlHelper not disabling parent form when showing popups	Thick Client GUI	1.38
3430	Normal	Scroll bar is either not displayed or when it is displayed is useless	Thick Client GUI	1.1.3.40.16854

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3414	Normal	RRR - CCR Doc for MU is displaying 'Radnet User' beside the From: section	Thick Client GUI	39.10
3392	Normal	Alergy flag broken in Dev		1.40
3388	Normal	Mgmt MU Reports	Mgt Reports	1.39
3374	Normal	RRR Image Request Worklist is still showing 'Patient Id' as a column header, which should be MRN		39.10
3372	Normal	Bypass PACS correction does not release lock		1.40
3364	Normal	Cancel Order Dialog + Cancel button does not release lock	Thick Client GUI	1.40.16638
3362	Normal	Admin - template macros work list loses filters when editing a template/macro	Thick Client GUI	1.40
3352	Normal	Activity WL - Clear all filters on empty wl will throw exception	Thick Client GUI	1.40
3342	Normal	Referring without a first name preventing study from being worked in rad/mt workflow.	Thick Client GUI	1.40
3320	Normal	Cast error when performing an image request from some Rad WL	Thick Client GUI	1.40
3308	Normal	issue on tech screen when documenting a procedure where the active_flag is N	Thick Client GUI	1.40.16328
3305	Normal	Image Request - Cannot choose referring physician	Thick Client GUI	1.40

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3249	Normal	study item certifications are not using the user defined order item certification precert status values		1.40
3231	Normal	Transcribe/Suspend button not loading defaults properly	Thick Client GUI	1.40
3230	Normal	Reset open skipped rows, open an addendum requested study throws an exception	Thick Client GUI	1.40
3144	Normal	Radiologist Dashboard - Completed Exams 7 Day trend is showing less than 7 days.	Mgt Reports	1.40
3138	Normal	tech can accidentally take exam out of exam done status when completing together	Thick Client GUI	1.40.16328
3084	Normal	Config setting default is rRIS Reports	Thick Client GUI	1.40
3044	Normal	Meaningful Use Close button realignment	Thick Client GUI	1.40
3032	Normal	Register Context menu shouldn't be available on Tentatively Signed studies.	Thick Client GUI	1.40
3026	Normal	Selected Attachments Tool Window	Thick Client GUI	1.40
3022	Normal	PersonHyperLink throws exception due to data received from HL7	Thick Client GUI	1.40
3008	Normal	Poor performance on management report Front Desk Activity Report	Mgt Reports	1.37
2989	Normal	Attachment viewer - inverting resets zoom level	Thick Client GUI	1.39

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2986	Normal	Reporting - WPR error attempting to create WPR dictation	Thick Client GUI	1.39.001
2980	Normal	Report nugget signed on verbiage	Thick Client GUI	1.39
2956	Normal	Reporting - transcribed count at the bottom of the app is not including tentatively signed studies	Thick Client GUI	1.38
2954	Normal	Reporting - WPR workflow suspend dictation does not show on my suspended worklist	Thick Client GUI	1.38
2952	Normal	Reporting - when signing a report and empty fields are present move to the first one	Thick Client GUI	1.38
2912	Normal	RRR - Tech able to enter IVT notes (with no specific IVT permissions)	Thick Client GUI	1.38.0
2688	Normal	Voice navigation which moves the cursor/position in the document does not result in axCdsEditorCtrl1_CursorChangedEvent	Thick Client GUI	1.39
2677	Normal	Create Report from Reset Open skipped rows	Thick Client GUI	1.39
2660	Normal	Template Macro Editor - Adv Assignment - user not defaulting	Thick Client GUI	1.39
2637	Normal	Next field command selecting multiple fields	Thick Client GUI	1.39
2628	Normal	Reporting screen not drawing in, if user make worklists active	Thick Client GUI	1.39
2544	Normal	"Reset" function in worklists does not appear to be working	Thick Client GUI	38.15

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2469	Normal	Red X and application hang in Administration UserGroupPermission		1.38
2426	Normal	When scheduling (outside read, new appointment, walkin) and you enter the letter 'c' into the first name field, then press 'Patient Search' RIS throws an error.	Thick Client GUI	38.14
1864	Normal	BarCode font install not included in eRAD RIS Reporting Services Installation document	Thick Client GUI	1.37
1524	Normal	MU - Grids.. When saving auto select - Use Grid option if validation fails		1.2.37.12739
1248	Normal	Reporting layout can fail to load, causing patient history to not localize correctly	Thick Client GUI	1.35
1530	Normal	Macro editor		1.37
3846	Normal	Change references to all persons (patients and doctors) to be Lastname, Firstname		1.40
3931	Normal	RadNet - Ranjan - resolve "starts with" in Audit history	Thick Client GUI	1.40
3940	Normal	RadNet - Ranjan - fix arrow on next doc when the scanned doc is a report	Thick Client GUI	1.40
3969	Normal	Mammo Letters Worklist	Thick Client GUI	40.11

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3978	Normal	WL Calculated columns missing in B40		1.40
4016	Normal	Performance - Turn off global animations		1.40
4130	Normal	"collection was modified" or "datatable internal index is corrupted" error when opening a radiologist screen	Thick Client GUI	1.40.18063
4408	Normal	Inactive rooms are appearing on the Tech available rooms list		1.40
3870	Normal	Reporting - Assing to Radiologist window	Thick Client GUI	1.40.010
4098	Low	View attachment from View/edit window	Thick Client GUI	40.01
3680	Low	Font size - not saving	Thick Client GUI	1.40
3671	Low	Weight field allows user to enter non-numerical values	Thick Client GUI	1.40
3623	Low	CD Import - better handle null PACS AE Title	PACS Integration	1.40
3544	Low	PatientContactTypeLookup should be hidden	Admin Tools	1.40
3334	Low	patient merge reject does not refresh merge worklist	Thick Client GUI	1.40.16593
3322	Low	View Edit should not be the default aciton on patient folder		1.40

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3261	Low	specialty read and referring protocol notes do not display new line characters	Thick Client GUI	1.40.16328
3246	Low	Date column filters AM/PM switching advances date.	Thick Client GUI	1.40
3146	Low	Required fields dropping there icon when leaving the control.	Thick Client GUI	1.40
3087	Low	Meaningful Use Dialog Close button position is off	Thick Client GUI	1.40
2658	Low	Stored function c_getcontrastrequiredflag could return wrong value if multiple study items exist	Web Services/DB	1.39
2071	Low	Window handle error from Dictate window	Thick Client GUI	1.2.38.14194
1855	Low	Reporting - Exam details - Procedure name my not display completely	Thick Client GUI	1.1.2.38.13809

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8. Known Limitations

The following are Bugs Suggested Features and Support Issues found in build 1.41. Bugs reported in previous versions are not captured as Known Limitation in this document.

#	Status	Priority	Subject	Resolved Build
4575	New	Urgent	Critical Results - Resolving causes error when signing exams	
4574	New	High	Outside Reads - history field changed to signs and symptoms	
4479	Resolved	High	Reporting - using re-use causing confusion when getting a message box like "Addendum Requested"	42
4411	Resolved	High	WorkItemManager failes on reloading a addendum study after WS error	
4379	Resolved	High	All signed by date column sorts	42
4366	Resolved	High	Transcribe next workflow (beeps)	42
4356	QE Rejected	High	Critical Result - CTRN - Unknown referrers added in critical result window display as invalid	
4354	New	High	Long lookup time-to-live is causing problems	
4090	New	High	RIS/PACS desktop integration (no default value on PACS Server type)	
4577	New	Normal	View Edit - open view edit window and save with no changes made logs entry to audit history	

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4576	New	Normal	Personnel - Internal person notes	
4569	New	Normal	suspend button is displayed on the bottom of the reporting screen after opening a suspended case	
4567	Resolved	Normal	Reporting - notifications need to be placed above action buttons.	42
4566	Resolved	Normal	Reporting Reuse - Next workflow loads cases that are pending saving.	42
4560	New	Normal	Some message boxes don't close when hitting X	
4557	Resolved	Normal	Read only mode hides recording button, but can still record using microphone	42
4556	Resolved	Normal	Read only mode not reflecting on minimized dictation controls	42
4555	Resolved	Normal	When opening a study in read only, user should get a prompt	42
4551	Resolved	Normal	Modified GoggleSearchAction to support Multiple passed in params	42
4548	New	Normal	CTRM - Notes field isn't read only	
4547	New	Normal	CTRM - Reopening the Critical Results window caused error	
4544	Resolved	Normal	Send-to button blanks out the reporting screen	42

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4543	Resolved	Normal	RXNorm is not captured from NewCrop	42
4542	Resolved	Normal	Worklist refresh exception	42
4541	Resolved	Normal	autosave - button positions should be switched	42
4540	Resolved	Normal	Autosave - close should prompt to delete	42
4539	Resolved	Normal	Autosave - double click row does nothing	42
4536	Resolved	Normal	Reporting - Reuse enabled status area messages not populating for action buttons	42
4533	Resolved	Normal	Reporting - edit template > make changes > x to close > no prompt presented about changes	42
4532	Resolved	Normal	Reporting - edit template > esc > cancel will close the form instead of cancelling	42
4527	New	Normal	Attachments - Verbal button causing error	
4525	New	Normal	Pre-Auth required before I select my referrer	
4522	New	Normal	intermittent error: transaction was deadlocked on lock resources with another process and has been chosen as the deadlock victim	
4521	Resolved	Normal	Scanning - Editing Document width and height causing error on blanks	42

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4519	New	Normal	if you get an exception while opening a recovered dictation that dictation is lost	
4516	Resolved	Normal	Reporting - MT polling enabled open RIS initially will result in messed up reporting screen	42
4515	New	Normal	If you get an exception while opening a dictation with floating windows the floating windows do not close when the tab closes	
4512	New	Normal	WPR workflow not working with screen reuse	
4511	New	Normal	CDA - ordered List vs unordered lists	
4510	Resolved	Normal	Reporting - editing reports MT's have the microphone selection option available	42
4509	New	Normal	Caching reporting screen - panels stay open after close	
4508	Resolved	Normal	Transcriptionist next workflow not properly skipping	42
4503	New	Normal	Perform Exam - Complete / Start can advance a study when it shouldn't	
4497	New	Normal	Deleting a table in a report leaves the tables but deletes the section header	
4483	New	Normal	Reporting - Add patient folder control to reporting window will not display history	
4481	Resolved	Normal	LogTextBox - Permission for an admin to edit previous log details isn't always available.	42

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4480	Resolved	Normal	b41 Joe Testing - you can backspace in patient notes and erase the date and name	42
4463	New	Normal	Transparency on notifications	
4457	New	Normal	B41 Joe Testing - splitting order - wrong one gets precert	
4450	New	Normal	Auto-open worklist won't open if you cancel the chair selection prompt	
4449	New	Normal	Changes made to set up do not auto refresh appt book. Have to close and relaunch appt book.	
4444	New	Normal	Scanning - Order/Patient/Exam Level can change when re-viewing the document	
4443	Resolved	Normal	External Report Workflow - changing room/procedure resets external flag.	42
4436	New	Normal	Notification wording/layout	
4434	Resolved	Normal	Outside Reads do not fall into external workflow	42
4431	New	Normal	Forms in labels require a rule otherwise they will never be available	
4429	New	Normal	Opening report drafted study in Create/Edit Report marks study dirty on open	
4426	Resolved	Normal	Reports that should have site filter	42

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4423	New	Normal	User preference need to restart application	
4421	New	Normal	Shortcut for Tables not working in report editor (CTRL + T)	
4414	Resolved	Normal	Importing multiples studies into one EMR order throws an already declared exception	
4405	New	Normal	Patient ID still appearing as columns on person merge request WL	
4404	New	Normal	Pending PACS correction WL contains Contributed A/B columns	
4400	New	Normal	EMR Patient Linking causes insurance error when printing forms.	
4395	New	Normal	Report margins should indicate units.	
4392	New	Normal	alignments of MT screen buttons in user preferences are a little miss aligned	
4389	Resolved	Normal	Reporting - Addendum request make notes required on request and reject.	42
4387	QE Rejected	Normal	Reporting - auto save items not sizing appropriately in the list of files to recover	
4386	New	Normal	Report History Error	
4383	New	Normal	External Report Workflow check box looses value on open of view edit	

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4382	New	Normal	Opening Editing - patient name is lower case	
4381	New	Normal	Preview report issue where new changes to report config doesn't take	
4378	New	Normal	Canceling Unscheduled orders not appearing on Patient Folder	
4377	New	Normal	Procedure code picker when creating search macros/template filter issue	
4374	New	Normal	Delete Dictation/Report and Reset Status not available for exam done status with exsisting interpretation rows	
4372	New	Normal	Creating a new appointment from the patient search window causes error.	
4359	New	Normal	Ranjan - Need all dictated by date WL	
4343	New	Normal	Change password of a credential swap user while logged on, means can't swap	
4341	Resolved	Normal	QA worflow problem flag #2894	42
4326	In Progress	Normal	Reporting - Multiple Pending Signature notifications raised	
4322	New	Normal	Dark Mode misses	
4308	New	Normal	Patient Folder - Selected Summary not resizing properly when dragging the pane	

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4299	New	Normal	Administration - MModal Document Model - error on right click preview of expanded rows	
4298	New	Normal	Reporting - Show all templates will bold a template that has no connection with current study	
4274	New	Normal	All Signed By Date WL missing context menu option for Patient Folder	
4267	Resolved	Normal	Report context menu item does not have access string	42
4264	New	Normal	Ris remembers it's position but not based on user login	
4202	New	Normal	Many user-id columns still in transcription worklist	
4198	New	Normal	patient folder doesn't load unless part of the initial layout on open of rad screen	
4197	Resolved	Normal	Hard to find patient first and last name in exam search	
4193	Resolved	Normal	Contact log tab - expanding the contact log to display all rows throughs error	
4185	In Progress	Normal	Login - After logging in as a Rad user the splash screen doesn't always repaint	
4179	New	Normal	Pending dictation WL showing locked items	
4153	Resolved	Normal	Sort on audio length throws error on worklist refresh	42

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4128	New	Normal	Adding insurance policies on new patient	
4118	New	Normal	Reporting - TemplateMacro editor Hitting refresh can duplicate fields or inserted text	
4101	New	Normal	Birad picker, cannot select recommendation as it doesn't load.	
4100	New	Normal	Right click on reporting drop down buttons	
4082	New	Normal	Previewing unsaved addendums from the reporting screen.	
4070	New	Normal	Patient Merge - Patient history does not show orders	
3949	New	Normal	Encrypt audio files used in report recovery autosave	
4435	New	Low	Ranjan - Age format in worklist is different than in data panes - prefer data pane look	
4385	New	Low	Reception WL still refreshing while not on the screen	
4358	New	Low	Ranjan - Terminology updates	
4357	New	Low	B42 - Missing Access Strings	
4324	New	Low	Worklist Auto Open not auto opening	

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4282	New	Low	Template / macro - Create using filter criteria	
4247	New	Low	Open at login user preference (usability)	
4163	New	Low	Perform Exam - Cancelled studies in patient history list have buttons enabled	
4028	New	Low	Locking - not warned about stealing locks with pacs enabled	
4672	New	Normal	Auto Refresh Rate inconsistent	

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