



Exa® PACS/RIS 1.4.31_P0

Customer Release Notes

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New Features

Summary

- Users can now configure CAD to display at selected steps of a DM.
- Users can now associate appointment types or study descriptions to DM groups such that matching studies automatically open in the Exa PACS/RIS viewer with the DM group applied.
- In the Alberta configuration, improved the process by which AEs configured to match on ULI validate incoming DICOM studies.
- The functioning of the Find Slots and the reschedule bucket features is now modified by authorization rules.
- With the Patient Portal redesign, patients can reset their passwords through an email-based verification system.
- Users can now configure reschedule reasons, and select one when rescheduling a study or order.
- With the Patient Portal redesign, the email address for representative accounts can be the same as that of a patient within Exa PACS/RIS.
- Users can now draw on images added to study forms.
- Users can now configure provider organizations, and associate provider groups and locations to them.
- Users can now add images to study forms.
- Added a tool set for drawing on images added to study forms. The tools include Ellipse, Rectangle, X-mark, Color Picker, Clear, and Delete.
- Users can now open transcription templates by using voice commands.
- In Exa PACS/RIS Viewer, users can now double-click an image in a multi-frame layout to open it in a 1x1 layout.
- HL7 now supports multiple study flags.
- Added the nVoq speech recognition platform for dictation.
- Users can now send approved reports directly from the patient chart.
- Users can now pre-configure schedule block reasons, and select from a list of those reasons when creating schedule blocks.
- There are now separate user rights for modifying schedule templates and schedule blocks (schedule rules that define schedule blocks).
- Exa PACS/RIS now better handles cases where the accession number of an inbound study already exists in the database.
- With the Patient Portal redesign, the email address replaced the user name as a sign-in credential.

Summary

- With the Patient Portal redesign, patients can add or delete a secondary email address for their account.
- With the Patient Portal redesign, built an email verification process for setting up accounts and resetting passwords. The system also performs various validations to prevent email duplication and other account-related conflicts.
- With the Patient Portal redesign, added a middleware solution for security measures such as preventing unauthorized viewing of PHI, and ensuring that URLs no longer contain database IDs.
- Users can now open an insurance company's website from the Claims screen.
- In the US configuration, users can now configure delay reasons and assign them to claims.

Customer Requested Improvements

Summary

- Users can now add indicator code 16 for HMO Medicare Risk to claims.
- The Alberta configuration now supports encounter numbers, and new claims now default to encounter number 1.
- Removed the ability to DICOM-send on all send AEs at once.
- Added a Triangulation tool; clicking one series with the tool opens the corresponding slice in any other opened series of the same study.
- Added a Denied Authorization status for insurance authorization.
- Added a Pending Authorization status for insurance authorization.
- Users can now assign multiple study flags to an exam.
- With the Patient Portal redesign, the representative email address replaced the user name as a sign-in credential for representatives.
- The change from user name to email address for signing in to the patient portal is now reflected throughout the program.
- When the user opens a series in a DM, the Next and Previous shortcut keys no longer jump to step 1 of the DM before moving to the next or previous step.
- When configuring separate monitors for current and prior studies, users can now select to mirror thumbnail bars (place the thumbnail bar in the left monitor on the left side of the screen, and place the thumbnail bar in the right monitor on the right side of the screen).
- Users can now view and print the appointment confirmation screen from the patient portal.
- Users can now share DMs with users and user groups (including Active Directory users and groups).
- The Patient Messages feature is now obsolete and was removed.

Summary

- Series descriptions on the thumbnail toolbar are no longer limited to 8 characters.
- New appointment types now have a default exam count value of 1.
- Expanded the keyboard keys that can be mapped to keyboard shortcuts to include arrow keys (Up, Down, Left, Right) and basic math operators (+, -, *, /).
- Exa PACS/RIS viewer tools have been added to multiple toolbars, shortcut menus, and other controls for easier access.
- Added a user right for the Break the Glass function.
- When the user selects a patient from search results in the Claim Creation screen, the screen now lists all of the patient's claims for the past 12 months.
- The Claim Creation screen now shows a list of up to the last 10 patients whose records were opened by the current user.
- Studies on the Claim Creation screen are now sorted by study date in descending order.
- In the Ontario configuration, users can now search for patients by health number.
- Users can now select an option to adjust the span sensitivity to Fast, Slow, or Auto, in which the sensitivity automatically adjusts to the number of images in the target series.
- In the Alberta configuration, users can now perform query/retrieve operations by ULI.
- In the Alberta configuration, KM staff can now configure Exa PACS/RIS to require the AHS signing authority name (issuer) to perform a query by account number.
- Users can now specify whether patients have consented to receiving appointment reminders by email and/or text message.
- Users can now print the patient statement from the claim inquiry screen.
- Users can now select whether to print insurance providers on the patient activity statement.
- Exa PACS/RIS now supports the Y-X1700 and Y-X1771 SRT codes for MG DICOM tags.
- Users can now select an option that allows them to start spanning from the current image regardless of the position of the span tool cursor.
- Obsolete fields were removed from the patient portal.
- Dispatched exams can now be grouped by dispatch ID for easier order management and billing.
- Added the ability to auto-split series by MR diffusion (b-) values.
- When uploading an attorney EOB payment file, if Exa PACS/RIS only matches one payer, it now auto-selects that payer. Otherwise, it enables the user to select the payer.
- Users can now print patient statements directly from the payment reconciliation and other screens.

Summary

- When printing a patient statement, users can now print the mailing address of a selected recipient.
- Patient statements now exclude certain information such as the address if the patient is a minor.
- Added the Check Eligibility/View Estimate button to various screens.
- Created a custom invoice form for a customer with fields specific to Alberta, Canada.
- Added a Notes field for ordering facilities.
- With the Patient Portal redesign, staff can now lock and unlock Patient Portal accounts.
- When the user signs in or refreshes the worklist, Exa PACS/RIS now updates the worklist with the most recent studies from local cache, if used.
- When updating a study in a multi-study order, HL7 messages are now only triggered for the updated study.
- Users can now filter the worklist to display studies that lack an insurance provider.
- Custom function for one customer: For selected facilities and study statuses, the program can now validate the primary insurance when scheduling orders and pre-orders.
- Added an Add Study user right.
- User names can now include periods (.) and hyphens (-).

Other Improvements

Summary

- With the Patient Portal redesign, also updated the Portal Registered Users module within Exa PACS/RIS to include: added columns, an edit button to indicate unlinked accounts, new statuses, the ability to export the account list, and other enhancements.
- When using nVoq, users can use voice commands to perform tasks including: open templates; select, substitute, and delete text; and navigate between bracketed items.
- When editing an appointment card, the Available Date list now shows the first available slot of the selected date.
- When downloading an image from the Exa PACS/RIS viewer, only the selected image is downloaded and not other images in the series.
- When dictating with nVoq, users can press the button on the microphone to start and stop recording.
- Users can now share DM groups with other users or user groups.
- Users can now select SUV units and calculation sequences.
- Users can now inactivate DMs.

Summary

- Users can now change appointed peer reviewers.
- Users can no longer add annotations that extend beyond the image frame.
- Users can assign various Exa Trans2 commands to the buttons on the Nuance PowerMic and the Phillips SpeechMic.
- Simplified the Patient Portal account registration form.
- Redesigned the Portal Registered Users screen for easier reconciliation and linking of Patient Portal accounts.
- Improved the way Hologic CAD markings for density and calcification are displayed.
- Fixed or removed broken links on the Patient Portal home screen.
- By editing a configuration file, users can now show or hide the Exa Trans hypothesis text, and pin (or not pin) the text to the left side of the Exa Trans window.
- Added an Auto DM Wrap option that enables moving directly from the last DM to the first DM, and vice versa.
- Added a Cancellation Reason report.
- You can now specify how pixels are selected for inclusion in an ROI.
- With the Patient Portal redesign, representatives are now denied access to the Authorized Representative screen, and patients can now block access by their authorized representatives.
- Users can now specify when to clear the local cache by percentage of disk drive used space.
- Users can now quickly view a study's ordering facility contact information directly from the worklist and some billing screens.
- Users can now open the document scanning and uploading screen directly from the payment editing screen if editing a patient payment.
- The patient portal log is now unavailable, but may be restored in a later release.
- The Alberta configuration now supports modifiers of up to 6 characters.
- Requirements configured for passwords can now be applied to Patient Portal passwords as well.
- Redesigned the Reason Code manager for improved ease of use.
- Patient Portal email verification links hide the database ID.
- Made security improvements related to the image rendering server.
- In the Portal Registered Users screen, staff can resend the email address verification email.

Summary

- In the Alberta configuration, users can now specify the area and nature of employment-related injuries for inclusion on claims.
- In the Alberta configuration, users can now configure WCB injury codes.
- In the Alberta configuration in particular, receiver rule options and default states were modified to improve handling of the study UID.
- In Patient Portal, consolidated security questions and other account information onto a single My Account page.
- In Canadian configurations, small balance adjustments no longer cause the responsible payer to change.
- Improved the way Exa PACS/RIS adds CAD markings to SRs by evaluating the DICOM tags for manufacturer and model name.
- Improved security with regard to access to Web Trans.
- Improved handling of existing local caches during upgrades.
- iCAD 3D density and calcification certainty percentages ending in point zero (.0) now appear as whole numbers (without the point zero).
- For increased security, Exa PACS/RIS now references a local copy of the latest jQuery JavaScript library.
- Exa PACS/RIS now formats SR CAD markings based on manufacturer (Hologic, iCAD, and CureMetrix).
- Exa PACS/RIS now adds entries to the audit log when the user modifies a study's ordering physician.
- Various improvements to performance and the UI.
- Some viewer tools (HU, SUV, and ROI) have been made temporarily unavailable for use on MPR images.