



Exa[®] PACS|RIS

34.1.0

Customer Release Notes

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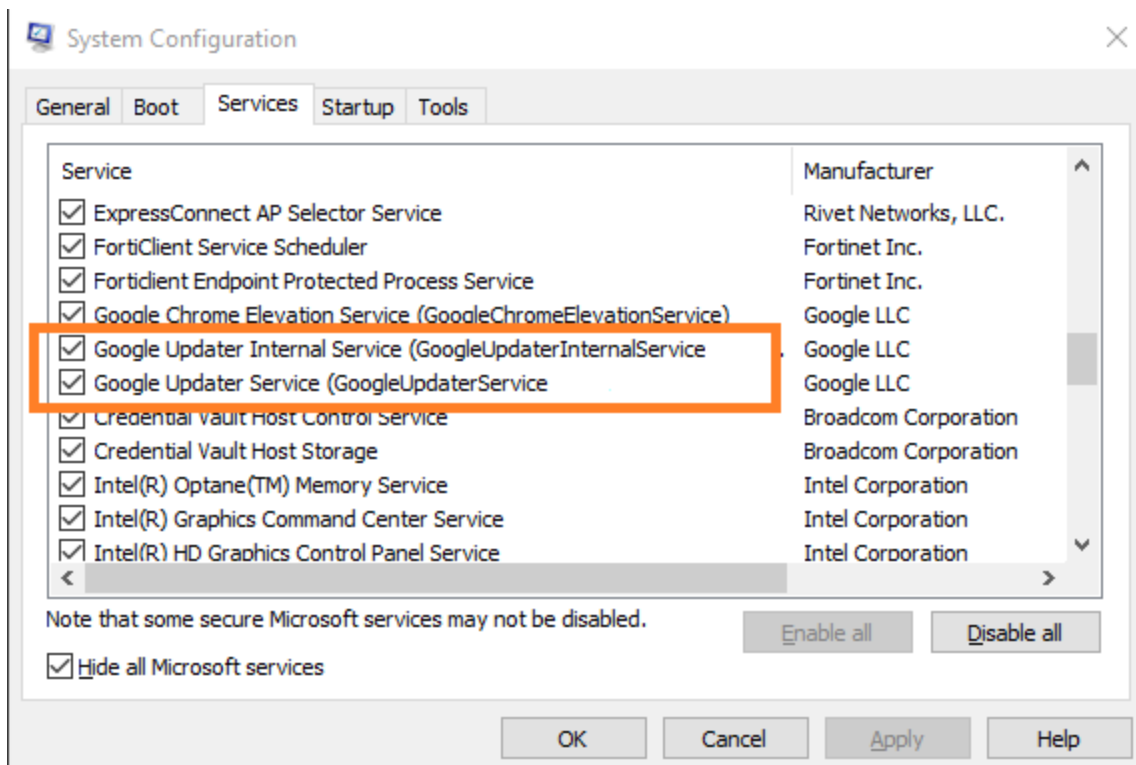
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Browser recommendations

To ensure uninterrupted functioning of your Exa platform product, we strongly recommend the following:

- Manage and deploy updates to Chromium in a test environment prior to full deployment.
- On all clients, turn off automatic updates in Google Chrome by following these steps:
 1. In Windows, press Windows + R.
 2. In the Run dialog, type `msconfig` and press Enter.
 3. In System Configuration, on the Services tab, select the Hide all Microsoft services checkbox.
 4. Clear the following checkboxes as shown in the figure below:
 - Google Updater Internal Service
 - Google Updater Service



5. Select Apply, OK.
6. If prompted, restart your computer.

Specifications in this release

This version of your Exa platform product was validated using the product versions listed below.

Application	Version
Google Chrome (client browser)	Version 138.0.7204.50 (Official Build) (64-bit)
Windows Server	Windows Server 2022 Standard
Windows Client	Windows 10 Pro (19045.5011,19045.4651) Windows 11 Pro (22631.4391,22631.4317)

For system requirements, see the dedicated system requirements document.

New Features

Summary

- No new features in this release.

Customer Requested Improvements

Summary

- You can now send faxes through Concord Technologies, and manage those fax jobs in a dedicated queue.
- You can now ask KM staff to add a logo to the sign-in page of the patient, physician, and attorney portals.
- When locally caching studies, priors IDs are now automatically included, and all approved and read studies and their priors are now automatically deleted from local cache at 2 am.
- When adding a study to an order in process, the program now automatically assigns a status to the new study that best matches the order.
- The session interval setting range is now from 1 to 2880 minutes. Only users with rights can modify the session interval, and it can no longer be modified in the My Profile screen.
- Redesigned the user interface for newly verifying insurance eligibility, estimating coverage, and viewing the most recently generated results.
- KM staff can now configure two-factor authentication to only validate sessions through authenticator apps and not by emailing tokens.
- Information related to faxes now appears in various parts of the program, and a new Inbound Document Queue is now available to manage received documents.
- In password management settings, strengthened the user password requirements. NOTE: When upgrading to version 34.1.0, all users must reset their passwords upon sign-in.
- In Exa Advanced Visualization, users can now link 2D viewports such that adjusting the window/level in one plane automatically applies the same adjustments in the other 2 planes.
- In EAV, you can now manually enter an angle at which to rotate cross reference lines.
- In EAV, you can now double-click in any viewport to switch between the current layout and a 1 x 1 layout.
- In EAV, a tool is now available to adjust the slab thickness, and you can also enter a numeric slab thickness manually.
- Improved the progress bar that appears when downloading studies from AHI on demand.
- Added an optional Multifactor Authentication (MFA) function to Patient Portal.
- A fully functional Exa viewer can now be opened by third-party systems via URL with specified parameters.

Other Improvements

Summary

- You can now specify a range of percentages of the default 10 GB job size (from 10% to 95%) for AHI migration jobs.
- You can now configure the program automatically check insurance eligibility and request an estimation of costs when a study arrives at a specified status.
- You can no longer sign into Patient Portal from Patient Kiosk, however you can obtain a check-in code in Patient Portal.
- With EAI, you can now assign keyboard shortcuts to most tools, and use a Set Center Point tool to set the center point of cross-reference lines.
- When a patient's portal account is permanently disabled (such as due to too many unsuccessful sign-in attempts), KM staff can now more easily reactivate the account.
- The audit log now contains detailed information about Peer Review events such as time when the draw is initiated, number of studies assigned, and accession numbers, and assigned users.
- Staff can now more easily re-enable representative portal accounts that were disabled due to such things as unsuccessful sign-in attempts.
- Send and Receive application entities can now be configured to support DICOM TLS and to enforce certificate verification.
- In EAV, the Reset Frame tool now also resets cross reference lines and the slab thickness on 2D and MPR series.
- In EAV, cine play is now available.
- Exa Clear now displays 3 buttons depending on user rights: 1) Check Eligibility (check eligibility only, using the current study or patient), 2) Imagine Simplicity (check eligibility and estimation using the current study or patient), and 3) View Results (from the most recent eligibility and/or estimation check).
- Default modality-level mouse button settings now also apply to EAI, except for the following: Context, Triangulation, Hounsfield, and Magnify.
- Added API access to third-party fax tools.
- Various improvements to performance and the UI.

Bug Fixes

Summary

- You can now perform a successful DICOM send even when other send jobs in the transfer queue are in Error status.
- Worklist filters based on study flags now consistently display the correct studies.
- While viewing a study in EAV, if the client becomes disconnected from the EAV server, a user-friendly notification now appears.
- When viewing PT studies with BQML units for SUV in EAV, measurements now consistently appear.
- When viewing MPR series, after rotating the Axial plane and selecting the 3D cursor, the cursor no longer appears in the 3D model and now appears in the correct position in other planes.

Summary

- When viewing an MG study with priors in a multi-monitor setup with at least one portrait monitor, overlay fonts no longer change as you move through DMs.
- When viewing an MG study that has a SIGMOID DICOM tag, restored the ability to apply a WL value to a series without error.
- When viewing a stacked series in a DM, if Skinline is enabled, scrolling to the next stacked series no longer erroneously applies skinline detection.
- When viewing a CD-burned study that contains ROI or FH ROI annotations, the value of Pixels shown in the annotation is no longer zero (0).
- When viewing a cardio SR and attempting to approve it, the approval now consistently succeeds without timing out.
- When turning Exa Advanced Visualization mode ON and OFF multiple times, all planes now consistently appear (are not blank).
- When the referring provider in an inbound study fails to match a routing rule with a provider group filter, the study status now changes, the routing rule is ignored, and errors no longer occur.
- When studies in the transfer queue are of equal priority, they are now processed based on the queued date.
- When selecting Wait for ACK in an outbound HL7 profile, the setting now remains selected after reopening the profile.
- When querying modality worklist, the results now consistently include all modalities configured for the AE being queried.
- When panning a plane in EAV, the image no longer floats away from the cursor.
- When opening SDE report templates from the worklist, the bottoms of the templates are now consistently visible without having to click on the template.
- When opening and closing studies in Exa Client viewer under various conditions, the study lock symbol on the worklist is now consistently correct.
- When KM staff change the QC server interval, QC batches now consistently process at intervals matching the new settings.
- When importing studies to AHL, the OtherInternalServiceException error no longer occurs.
- When Exa Trans auto-opens in a monitor, if you maximize it in another monitor and then return it to the original monitor, it stays in its correct position and state after the next study opens.
- When entering a path in the Cache Directory box in the local service settings, you can now enter a backslash (\).
- When editing a facility and selecting the Send Reports to Fax No., Email Report Link, or Email Attachment checkbox without entering an email address or fax number, a warning now appears and prevents saving.
- When dragging an MG study with an LUT into a viewer cell, the correct W/L is now consistently applied.
- When DICOM-sending, studies that have only blocked SOP classes are no longer sent.
- When DICOM-sending studies that have both blocked and non blocked SOP classes, consistently the blocked studies are no longer sent, and the non-blocked studies are sent.
- When DICOM-printing MG and BTO studies containing horizontal and vertical line annotations in a 4 x 3 layout, the line annotations now remain in the correct position.

Summary

- When deleting studies in local cache based on disc usage, the oldest studies are now consistently deleted first (in FIFO order).
- When creating a portal account, you can now include special characters in the patient's email address.
- When creating a portal account, you can now copy the patient's email address to the clipboard.
- When configuring the Studies by Modality Room report, after clearing the All Flag checkbox, you can now reselect it.
- When configuring reports, restored the ability to clear the All Modalities checkbox.
- When clicking URLs generated from Epic studies, all images from the study now appear in the OHIF viewer.
- When attempting to save a provider resource, the program now consistently warns you if the email address was not entered.
- When adding an LCM rule, the Study Age field no longer accepts a value greater than 999.
- When adding an appointment type, the Modality Room dropdown list is now consistently available.
- When adding a schedule rule, options in the Modality Rooms dropdown list are now sorted alphabetically.
- When adding a schedule rule to the Quick Block schedule template, the Modality Rooms field is no longer hidden.
- When a user is required to change password on next sign-in, after doing so, the My Profile dialog now consistently closes.
- When a study is missing data, outbound HL7 messages now display the correct error message rather than Timeout expired.
- When a study is in an AHI filestore but its priors are in a non-AHI filestore, or vice versa, the program consistently loads only the items in the AHI filestore in the viewer.
- When a DM includes prior logic with the Any criterion, all priors hang consistently and you are able to use bracket keys to scroll through them.
- When a client PC has multiple hard drives, Exa Trans now always installs in the drive containing Windows.
- Upgrades from version 1.4.33_P2 to 34.0.2 no longer fail.
- Restored the ability to use an encrypted URL to load AHI studies that were not prefetched.
- Restored the ability to transfer priors on a study status change with routing rules.
- Restored the ability to open studies in the Exa Client viewer that had been migrated from AHI.
- Restored the ability to generate the PDF and Excel versions of the Patient Statement report.
- Restored the ability to create a provider resource without entering an email address.
- Restored the ability to create a facility without error.
- Restored the ability to add Delete Image and Delete Series commands to the shortcut menu in the viewer.
- Restored the ability for the Exa platform to receive encrypted URLs from Epic systems.
- Restored the ability for facility admin users to delete both private and global DMs.
- Restored functionality of the Autosave Viewer Settings on Close option.
- Resolved background errors occurring when opening the activity log in Patient Portal.

Summary

- OpalForwarder can now consistently be installed on new workstations.
- On the worklist, in the Status column, descriptions now appear instead of codes.
- On the schedule book, when attempting to schedule two exams for a patient at two different facilities, if the exam times overlap, a warning message now consistently appears.
- On the dispatching dashboard, resolved a server side error occurring when assigning orders.
- On Patient Portal, when a patient representative uploads a document, the representative name now appears in the list of documents instead of the patient name.
- In the viewer, when using a 3D viewer tool and then selecting a different tool, the current tool is now made inactive automatically.
- In the viewer, when opening a CT or MG study that is not cached, the study can now fully open and auto-hang in a DM.
- In the viewer, in MPR mode, when using the 3D cursor in the Sagittal plane, the cursor now appears and moves correctly in all planes and anatomy.
- In the viewer, after changing the layout of an MG study, double-clicking to apply 1-up mode no longer causes the series to shift outside of view (the chest wall remains aligned to the edge of the cell).
- In the Exa PACS|RIS viewer, if a study does not include W/L values, applying an LUT no longer causes the image to turn white.
- In the Exa Client viewer, 3D ROI annotations are no longer available.
- In the Alberta configuration, when creating a patient chart with an insurance policy and setting the relationship to Self, restored the ability to sync the subscriber with patient details.
- In the Alberta configuration, in the Patient area, restored the ability to create a patient chart.
- In Simple MPR, switching between views no longer causes the original axial series to revert to its original position.
- In report templates, the Route merge field now correctly displays the route description rather than the ID.
- In Physician and Attorney Portals, when opening an approved report, the Referring Physician column no longer displays the user name.
- In Patient Portal, when uploading a document to a patient, the correct timezone of the patient's study as scheduled in Exa PACS|RIS now appears.
- In Patient Portal, when the patient signs in who has the same email address as a representative, the representative user's name is now correctly displayed as that of the patient.
- In Patient Portal, when adding insurance, selecting a relationship no longer causes a server side error.
- In Patient Portal, the viewer now consistently shows the correct patient information (matching that of Exa PACS|RIS).
- In Patient Portal, resolved gateway errors occurring when opening the viewer.
- In Patient Portal, on the Past Appointments tab, the approved report icon now appears correctly.
- In Patient Portal, all buttons and background images now appear normally.
- In Patient Kiosk, restored the ability to select checkboxes on study forms.
- In Patient Kiosk, in the Study Form screen, selecting Back now opens the primary (rather secondary) insurance screen.

Summary

- In mammography viewer settings, when Stack by View and Prior is On and Stack Same View is Off, restored the ability to scroll a cell to a prior.
- In Exa Trans, when adding an addendum to an approved report, restored the ability to use the same transcription template for the addendum that was used for the original report.
- In Exa Clear, the Referring Physician pop-up window is no longer blank.
- In EAV, restored the ability to draw annotations inside of other rectangle, ellipse, or ROI annotations.
- In EAV, fixed a problem in which part of the anatomy of some studies was not displayed in each viewport.
- In EAV, after manually adjusting the slab thickness, rotating the reference lines no longer causes slab thickness lines to snap to incorrect positions.
- In Attorney Portal, on the Pending Orders list, restored the ability to filter by the Assigned study status.
- Fixed a problem in which, when DICOM-sending compressed CAD SR data to a server configured with uncompressed transfer syntax, pixel data validation failed with ERROR: DICOM Compression" and the converted file still existed instead of the original file.
- Fixed a problem in which, on certain installations, DX images opened in the viewer with incorrect contrast and W/L.
- Fixed a problem in which, in the Edit Study screen, some users were unable to switch between the Notes and Transcription screens.
- Fixed a problem in which users who signed in were immediately signed out.
- Fixed a problem in which certain imported DX studies appeared blank in the viewer.
- After creating a routing rule, the rule is now consistently available to add to study flows.