What's New in **PowerScribe 360 | Reporting,** Version 3.0

PowerScribe[®] 360 | Reporting, version 3.0, is the latest version of Nuance's leading speech-recognition reporting solution for radiologists. This latest version gives you more control of your reports with the goal of making the dictation process more accurate and more efficient.

PowerScribe 360 | *Reporting* 3.0 offers:

- improved application viewing and tools;
- additional integration options for quality and consistency; and
- enhanced patient care.

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Nuance[®] PowerScribe[®] 360

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New Features for Providers

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Color Scheme of Client Windows

Providers can now change the colors on the three *PowerScribe 360* | *Reporting* client application windows (Explorer, Report Editor, and AutoText Editor) from the default white background to another color of your choice, such as a soft gray.

To change colors, click **Tools > Preferences > Fonts and Colors** and select the **Apply custom colors to entire application** check box. With this check box selected, the **Normal Background** and **Plain Text** colors (in the **Enable custom colors** list) are applied to all areas in the application. You can change both of these colors to ones that are more suitable to your dictating environment.

Batch Sign/Batch Approve Reports from the Explorer Window

Note: This feature must be enabled by your administrator in order for you to use it.

You can now select and sign (or approve in the case of a resident) multiple reports at the same time from the Explorer window in the dictation client. Reports that are ready for signature/approval will be signed/approved at the same time.

If any of the reports in your batch selection contain required custom fields or diagnosis codes that have not been filled in, you'll have an opportunity to complete the fields before signing/approving.

Keep in Mind: Passwords and Batch Signing/Batch Approving

Batch signing/approving does **not** override the need for entering your password. If you are required to enter a password before signing/approving your reports, you will be prompted to do so, but only **once** for the group of reports that you have selected for batch signature/approval. If you are not required to enter a password before signing/approving your reports, the batch signature/approval feature signs/approves all of the selected reports with a single click of the **Sign** (or **Approve**) button.



Note: Batch signing/approval does not override additional prompts that you might see at signing/approval, such as required custom fields or missing fields. If applicable, you must respond to these prompts as well during batch signing/approval.



Compare Revisions

Note: You can only compare revisions that still exist on your PowerScribe 360 | Reporting system. Ask your administrator about increasing the number of days to retain content.

You can now view and compare different versions of a report to see how they differ from one another. This allows attendings to compare their original reports with the corrected reports returned to them from editors, and easily see what was changed, added, or deleted. In addition, residents can compare their original reports with the final reports signed by attendings.

To compare report revisions, select a report in Explorer, or open a report in Report Editor, and click **Tools > Compare Revisions**. The **Compare Report Revisions** window opens. From here you can select and compare your report versions, two at a time.

Note: Tables are not displayed in revisions (if created in the report).

You can view the revisions either collectively or side by side:

Compare revisions collectively window: In this view the two individual versions you select appear on the right side of the window, one above the other. The left side of the window shows the combined revised version, with deleted text shown in red strike-through and added text in blue underline.

mpare Report Revisio	ons				? ×
Report Information					
Accession:	8675309		Report Status:	Draft	
Patient Name:	Samuel A Sung		Modified Date:	12/18/2014 9:49 AM	
Procedures:	Left FOOT MIN 3 VIEWS		Attending:	Atul Mistry	
Exam Date:	2/26/2013 1:20 PM		Resident:	Phil Resident	
Report					
Date	1 Account	Status			
12/18/2014 9:49 AM	Atul Mistry	Edt			
12/17/2014 2:01 PM	Atul Mistry	Save Draft			
12/17/2014 2:00 PM	Atul Mistry	Edit			
EXAM:MRILEFI	year-old female with an specific injury. Patient	ikle pain times one complains of			
on hard surfaces	with tenderness to pa	alpation at the	Edited By: Atul	Mistry Date: 12/18/2014 9:49 AM	
plantar aspect of tenderness over	the foot and midfoot re the course of the poste	egion and erior tibialis tendon.	EXAM:MRI LE	EFT FOOT	4
FINDINGS: Received for sec examination perf	cond opinion interpretat	tions is an MRI	CLINICAL: A month, without moderate to s on hard surfa plantar aspect	49-year-old female with ankle pain t ut a specific injury. Patient complair severe pain, worse with standing or ices, with tenderness to palpation a ct of the foot and midfoot region and	times one ns of walking it the
Compare revisions s	ide by side				ОК

Compare revisions side by side window: In this view the two reports you selected from the list appear side by side in the viewer. Here again, red strike through text indicates what was removed, and blue underlined text shows text that was added.

Report Information				
Accession:	8675309		Report Status:	Draft
Patient Name:	Samuel A Sung		Modified Date:	12/18/2014 9:49 AM
Procedures:	Left FOOT MIN 3 VIEWS		Attending:	Atul Mistry
Exam Date:	2/26/2013 1:20 PM		Resident:	Phil Resident
Report				
Date	1 Account	Status		
12/18/2014 9:49 AM	Atul Mistry	Edt		
12/17/2014 2:01 PM	Atul Mistry	Save Draft		
12/17/2014 2:00 PM	Atul Mistry	Edit		
mpression: lere	un misu y Dute. 12/17/2014 2		EXAM:MRI LE	Mistry Date: 12/18/2014 9:49 AM <u>FT FOOT</u> 49-year-old female with ankle pain times one t a specific injury. Patient complains of
mpression: lere	un misu y Dute. 12/17/2014 2		Edited By: Atui EXAM:MRI LE CLINICAL: A month, withou moderate to s on hard surfa plantar aspect tenderness of	Mistry Date: 12/18/2014 9:49 AM <u>FT FOOT</u> <u>49-year-old female with ankle pain times one</u> <u>ut a specific injury. Patient complains of</u> <u>severe pain, worse with standing or walking</u> <u>ces, with tenderness to palpation at the</u> <u>t of the foot and midfoot region and</u> <u>ver the course of the posterior tibialis tendon.</u>
mpression: lere			Edited By: Atui EXAM:MRI LE CLINICAL: A month, withou moderate to s on hard surfa plantar aspect tenderness of FINDINGS: Received for examination p	Mistry Date: 12/18/2014 9:49 AM <u>FT FOOT</u> 49-year-old female with ankle pain times one at a specific injury. Patient complains of severe pain, worse with standing or walking ces, with tenderness to palpation at the t of the foot and midfoot region and ver the course of the posterior tibialis tendon. second opinion interpretations is an MRI performed on right foot.

Voice Commands for Compare Revisions

"Compare revisions": Opens the Compare Report Revisions window in the collective mode.

"Compare revisions side by side": Switches to the compare revisions side by side view.

"Compare revisions collectively": Switches to the compare revisions collectively view.

View Open Orders

Two new preferences allow you to view a list of open orders for a patient from the Order Data tab in the Report Editor. The preferences, **Open orders maximum age** and **Open orders property match**, are described under *Provider Preferences*, beginning on page 10 in this document. (Another new account preference, **Warn if open orders when signing**, is impacted by these two settings. Again, see *Provider Preferences* in this document.)

To configure these preferences, click **Tools > Preferences > Reporting >General**.

Viewing the Open Orders

From the **Open Orders** section of the Order Data tab, you can view open orders based on the criteria you selected in the two preferences. In addition, you can choose to show all orders from this tab. The improved user interface now displays more information about each open order, instead of a simple list. The additional information includes Accession, Procedure, Order Status, Time, Location, and Patient Class.

The illustration below shows an example of the Open Orders section. In the example there are two open orders. The **Show all orders button** is available. When selected, this button shows all orders for the patient.



In addition to filtering the open orders, the new preferences also control which orders will trigger a warning on sign if the **Warn if open orders when signing** account preference is enabled. Filtered orders (those **not** shown when the report is opened) will not trigger the warning.

Editors: Changing the Attending Provider

Editors can now change the attending provider in a report.

To change the attending provider:

- On the menu bar, click **Tools > Change Attending**. The **Select Attending** dialog box opens. (If your system contains multiple sites, the dialog box title shows which site is currently selected. Different sites generally have different attending providers.)
- 2. Select a new attending from the drop-down list and click **OK** to continue.

Tables

Note: This feature must be enabled by your administrator in order for you to use it.

Note: Displaying tables in downstream applications, such as the RIS/HIS, should be tested to ensure that the tables display properly.

You can now insert tables into your reports and AutoText on the fly. Tables are useful for displaying various types of information, especially measurements and dosages.

To insert a table in either a report or AutoText, click **Insert > Table**, select the number of rows and columns for the table, and click **OK**.

Your tables can contain dictated or typed text, or you can add merge fields to the cells. Merge fields can be pulled in from data integrations or DICOM measurements.

Best Practice: Always put either a fill-in field in the cell and/or a merge field. This allows for easy navigation through the table.

The illustration below shows the table management tools available when you right-click anywhere in a table.



Insert Table	? X
Number of columns:	5
Number of rows:	2
Remember dimens	ions for new tables
ОК	Cancel

Table Tool	Description						
Insert	Use to insert columns to the left or right of the current column, or to insert rows above or below the current row.						
Delete	Use to delete the column, row, or table where your cursor currently resides.						
Select	Use to select the cell, row, or table where your cursor currently resides.						
No Border	Select to hide the table borders.						
All Borders	Select to show the table borders.						
View Gridlines	Select to view the table gridlines (when the table borders are hidden).						
Column Size	Select this item to open the Column Size dialog box. From here you can manage the width of all the columns in your table. You can select from inches, millimeters, or centimeters for your measurement gauge, and move from one column to another without exiting the dialog box.						

The following table describes the tools:

Add your row and column labels, if needed. Then begin entering data into the table. Example tables are shown below.

EXAM: OBSTETRIC ULTRASOUND

Patient	JANE R TURNAGES	Date:	11/9/2006 8:37 PM
MRN:	7353030	Doctor:	KISHA NICOLE DAVIS, MD
DOB:	9/2/1981	Radiologist:	KENNETH BUTLERS, MD

FINDINGS: Abdominal cavity appears normal. The fetal stomach appears normal. The fetal blac abdominal wall appears intact. The spine was visualized from cervical to sacral region, within th ultrasound equipment, without evidence of a neural tube defect. Active movement from the extre body motion was also observed during this examination. The placenta appears within normal lin cord with normal insertion site.

MEASUREMENTS:			
	(cm)	Age (wk)	Percentile
Biparietal Diameter	6.0	24.5	40
Femur Length	4.3	24.1	25
Head Circumference	22.8	24.8	45
Abdominal Circumference	20.0	24.6	45

IMPRESSION: Singleton IUP 24 weeks 2 days by sonogram. Anterior placenta. Cephalic prese

Voice Commands for Navigating Tables

Table Voice Command	Function	Examples
"Go To Next <table item="">"</table>	Navigates to the next cell, row, or column	"Go to next cell" "Go to next column"
"Move To Next <table item="">"</table>	Navigates to the next cell, row, or column	"Move to next row" "Move to next cell"
"Go To Previous <table item="">"</table>	Navigates to the previous cell, row, or column	"Go to previous cell" "Go to previous column"
"Move To Previous <table item="">"</table>	Navigates to the previous cell, row, or column	"Move to previous row" "Move to previous cell"
"Go <direction> <number> <table item="">"</table></number></direction>	Navigates to a specified cell, row, or column	"Go up three rows" "Go right three columns" "Go left two cells"
"Select <cell row="" table="">"</cell>	Selects the current cell, row or table	"Select cell" "Select table"
"Select Next <cell row="">"</cell>	Selects the next cell or row	"Select next row" "Select next cell"
"Select Previous <cell row="">"</cell>	Selects the previous cell or row	"Select previous row" "Select previous cell"
"Insert <column row="" table="">"</column>	Inserts the elements to the left for column, above for row (or displays the Insert Table dialog box for "Insert table")	"Insert row" "Insert column" "Insert table"

Clone AutoText to Multiple Users

Note: This feature applies only to providers who have administrative privileges in the application.

You can now select an AutoText and distribute it to several users. From the AutoText Editor, right click on an AutoText and select **Clone**.

			\checkmark	1	9	Name 1	Modality	A	Anatomy	[
Browse		۲				JT DICOM OB GYN w pick and table		New		
Owner:	Taylor, James	-						Open		- 1
								Clone		- 1
Name:							X	Delete	_	- 1
Text:							_			
Modality:	All	•								
Anatomy:	All	•								
Procedure:	All	•								

The **Assign Owners** dialog box opens. Add one or more Available Owners to the Selected Owners list and click **OK**.

Assign Owners			? 🗙
Available Owners:		Selected Owners:	
Anderson, Teresa	*	Alba, Tracy	
Attending, David		Close, Lisa	
Attending, PeerReview			
Attending1, PeerReview			
autotext, test			
Baker, Jason			
Barla, Murali K			
Berish, Linda			
Brown, Hannah			
Burd lim	Ŧ		
(Add	Clear	Clear All
		ОК	Cancel

Provider Preferences

The following table shows the new preferences (as well as changed or moved preferences) that you can manage from your workstation.

Access your preferences by clicking **Tools > Preferences**.

Tab Name	Preference	Description
	Show resident corrected reports in My Reports	With this check box selected, when a resident dictates a report and sends it to an editor for correction, and the editor finishes the report, it becomes visible to the Attending provider. This preference applies to an Editor workflow.
	Enable clinical guidance alerts Note: Clinical Guidance is a purchasable option. Please contact your Nuance account representative for more information.	Select this check box to receive an alert when there is a clinical guideline that covers the finding(s) based on your most recently dictated phrase. This gives you the opportunity to review the guideline and use it for recommendations.
Reporting, General Tab	Open orders maximum age	Do not display (in the Report Editor Order Data tab) orders older than this value. Select a number of hours or days from the drop-down list. (Relative to the age of the order for the current report, or the oldest order if there are multiple orders in the current report.)
		Show (in the Report Editor Order Data tab) only orders that match the selected properties of the order(s) in the current report. Choices include Modality, Location, Section, which are described below:
	Open orders property match	• Modality : The modality of the report you are currently dictating on, keep in mind the modalities that will show up are what are in the Nuance PowerScribe 360 Reporting database.
		• Location : The location should match for where the patient's study was performed.
		• Section : The section is your modality in your PACS system or RIS system.
	Warn on logoff	Moved to Workflow tab
Reporting, Editor Tab	Show brackets on fields Highlight text on playback Fill-in field navigation Merge field navigation Cursor position on field selection Move cursor on AutoText insert	<i>New tab</i> . Contains preferences (listed at left) that were previously shown on the Reporting > General tab.
Reporting, Fonts and Colors	Apply custom colors to entire application	Applies Normal Background and Plain Text custom colors to other areas in the application.
Tab	Guidance Output	Allows you to change the color of the clinical guidance output text contained in your reports.

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Tab Name	Preference	Description
Dictation Tab	Prompt to save speech files (changed, not new)	Changed from radio buttons to a drop-down list. Also changed the text displayed for the choices to clarify each selection.
	Warn if open orders when signing	Controls whether the system warns radiologists signing (or residents approving) a report when there are unreported orders for the patient that are not filtered by the Open orders property match and Open orders maximum age preferences (located on the Reporting > General tab). The radiologist or resident might want to add one or more of the open orders to the report before signing or approving it. Note that the warning applies only to the open orders that are displayed when the report is first opened.
Workflow Tab		Now suppresses the warning if the new note(s) was opened in the current session. Also, changed from radio buttons to a drop-down list.
	Warn on sign if new notes exist (changed, not new)	Note: New notes are now automatically displayed in the left-hand pane of the Report Editor window for easy viewing. In order for the warning to be suppressed upon signing, double click the note to open and view it in the Report Note dialog box. Also, if you log out of the application and then log back in, the system will not take into consideration whether the note was reviewed prior to your log out.
	Warn on logoff	Moved from Reporting > General tab
Dictaphone PowerMic Tab	Previous field or table cell Next field or table cell	Assignable tasks that allow you to move between cells in a table that you have inserted into your report or AutoText.
	Custom Left and Custom Right buttons (changed, not new)	Changed default values for both of these buttons to Nothing .

Create Addendum in the Client Portal

If you log in to the portal as a provider to review and sign your reports, you can now create an addendum to your Final reports from the client portal.

From the client portal, select a final report, click the **Report** tab, and then click the **Create Addendum** link.

N.	JANCE														
Explorer															
Quick Sea	irch	*	۵ 🖻	1		cession	Procedure	SR	Exan	n Date 🖃	Patient	Site	MRN	Status	Attending
Site:	All	~	~		41	13240	RIGHT FOOT 2	0	11/6/	2006	JACSON, JOH	V C University	5418043	Final	Attending, Steph
Look for:	Accession Numbers	~					VIEWS								
4113240		Search	Order	1	Report	Note	Attach	mer	nts	Custom I	Fields (2)	Priors (16)			
Signin Signed Touch Drafts Annot Assign Pendin Wet R	ig queue d today ed today ated ned orders ing Correction leads		Fi Au	Last tent Con inal Con	Stati Modifie Modifie Attendir tributo Transfe Exporte orrectio Duratic Signe Dra	ad: 4/1 ad: 4/1 ad: 4/1 ad: 4/1 ad: 4/1 ad: 5ter rs: noo ar: Sen ad: Yes an: Self an: 00: ad: 4/1 ft: 4/1	al 5/2015 4:21 5/2015 4:21 phanie Atter rda eric t -edit 00:03 5/2015 4:21 5/2015 4:20	::43 ::43 ndin ::43	PM PM g PM PM	CL CC te th FI Th ar Th	AM: MRI RIG INICAL: A 40 mplains of m nderness to p e course of th NDINGS: here is edema kle. here is edema ered biomecl)-year-old m oderate to s palpation at ne posterior of the subc hanics with	ale with a severe pa the plant tibialis te cutis adip cutis adip crural fas	ankle pa in, wors ar aspec- indon. ose spa ose spa cial stra	ain times one m se with standing ct of the foot ar ce extending al ce posterior to l ins.
Worklists	orklist (38)	8	Sign	Be	egan Ed Create rkstatio	it: 3/2 d: 3/2 n: MEL	2/2013 2:24 2/2013 2:24 -SREID	:36	PM PM		ere is tendin ild tendon thi mediately dis	osis of the p ckening. The stal to the tip	osterior t ere is pos p of the n	tibialis t sible pa nedial n	endon as it rou artial surface tec nalleolus (axial
Custom To	est 🗸	View	Create	e Ad	dendu	m	Sign as Pr	elin	ninar	y Sign	Discard C	hange Att	ending	. Prin	table
Browse		8	-				. معمد ا	~~ ~	.		-				

Additional Features

- PowerMic II button options: Two new options, Next Field/Table Cell and Previous Field/ Table Cell, are now available for several PowerMic II buttons. These two new items allow you to assign buttons to navigate between table cells.
- **PowerMic II/Headset microphone combinations**: You can use the PowerMic II in combination with the following headset microphone adapters:
 - VXi X100
 - VXi X200

These two adapters support many types of headset microphones. For more information on the VXi adapters and the headset microphones they support, *click here*.

New Features for Administrators

- List of New or Modified Preferences (beginning on page 13)
- Setup > Bridge Tab (beginning on page 17)
- Exams > Explorer Tab (beginning on page 18)
- *Exams > Patients Tab* (beginning on *page 18*)
- Exams > Physicians Tab (beginning on page 19)
- Show Addendum at the Top of Printed Reports (beginning on page 19)
- New Management Report (beginning on page 22)
- Software Version Support (beginning on page 23)

List of New or Modified Preferences

Several new preferences have been added to the Admin Portal. To access preferences at the system level, click **Setup > System > Preferences**.

The following table shows only those tabs with additions or changes. The **Type** column in the righthand side of the table shows whether a preference can be configured at the Site or Account level. To access Site-level preferences, click **Setup** > **Sites** > **Preferences**. To access Account-level preferences, click **Setup** > **Accounts**, then search for and select the account you want to modify and click the Preferences link.

Tab Name	Preference	Description	Туре
	Perform consistency check at signoff Note: Quality Check (formerly Assure) is a purchasable option. Please contact your Nuance account representative for more information.	Runs the Quality Check consistency check feature when a report is signed.	• Account
	Report header	Type the header text you want to appear on your reports in this field. You can include merge fields and fill- in fields in the header.	• Site
	Addendum header	Type the header text you want to appear on your addendums in this field. You can include merge fields and fill- in fields in the header.	• Site
Workflow	DICOM merge multiple values	Controls the behavior of DICOM merge fields when multiple DICOM SRs are available for an order and contain the same measurement. When set to True (check box selected), all of the values from the multiple DICOM SR are merged into a comma separated list. The values are in order based on the DICOM study/series/instance where the most recent instance is first. When set to False (check box cleared), only the value from the most recent DICOM SR instance is merged.	• Site
	Warn if recent open orders when signing	Replaced by the Report Editor preference <i>Warn if open orders</i> <i>when signing</i> . (See Report Editor section of this table.)	N/A

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Tab Name	Preference	Description	Туре
Permissions	Allow table authoring	Enables/disables table creation for reports on a site. Clear (uncheck) this check box when a site's outbound HL7 interface does not support Rich Text Format (RTF). When cleared, the user will not have access to the toolbar, menu, context menu, and voice commands for adding and manipulating tables. Default is False (unchecked). Note: Table authoring will be available in the AutoText editor window when this preference is selected for any of the user's accessible sites. Note: This preference cannot prevent the user from adding tables via copy/paste, or by inserting an AutoText that contains tables.	• Site
Peer Review	Maximum number of automated peer reviews per day Note: Peer Review is a purchasable option. Please contact your Nuance account representative for more information.	Select a specific number from the drop-down list, or select Unlimited .	• Account

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Tab Name	Preference	Description	Туре
	Warn if open orders when signing (Replaces the Workflow preference <i>Warn if recent open</i> <i>orders when signing</i>)	Controls whether the system warns radiologists signing (or residents approving) a report when there are unreported orders for the patient that are not filtered by the Open orders property match and Open orders maximum age preferences. The radiologist or resident might want to add one or more of the open orders to the report before signing or approving it.	• Account
		Note: The warning applies only to the Open Orders that are displayed when the report is first opened.	
	Open orders property match	Show (in the Report Editor Order Data tab) only orders that match the selected properties of the order(s) in the current report. Choices include Modality, Location, Section, and others.	• Account
Report Editing	Open orders maximum age	Do not display (in the Report Editor Order Data tab) orders older than this value. Select a number of hours or days from the drop-down list. (Relative to the age of the order for the current report, or the oldest order if there are multiple orders in the current report.)	• Account
	PowerShare image viewer Note: PowerShare is a purchasable option. (See PowerShare Integration, beginning on page 35)	Select either the Basic or the Advanced <i>PowerShare</i> image viewer from the drop-down menu. Note: The PowerShare Advanced Viewer requires Java 6 update 32 or higher in order to run. If providers have applications running on their workstations that require an older version of Java, there is a potential for existing installed applications to operate improperly or to stop functioning altogether.	• Account
	Enable clinical guidance alerts Note: Clinical Guidance is a purchasable option. Please contact your Nuance account representative for more information.	Select this check box to alert the user that there is a clinical guideline that covers the finding(s) that he or she documented in their report. This gives the user the opportunity to review the guideline and use it for recommendations. The alert appears once the provider dictates a relevant phrase.	• Account

Tab Name	Preference	Description	Туре
Devices	PowerMic Custom Left Click	Changed default value to Nothing.	 Account
Devices	PowerMic Custom Right Click	Changed default value to Nothing.	 Account
	Enable batch signing	Select this check box to allow attending providers to sign several reports at the same time, or to allow residents to approve several reports at the same time.	• Account
Explorer Screen	Show resident corrected reports in My Reports	With this check box selected, when a resident dictates a report and sends it to an editor for correction, and the editor finishes the report, it becomes visible to the Attending provider. This preference applies to an Editor workflow.	• Account
	Enable automatic log collection	Select this check box to enable the Collect logs feature automatically when the user logs off of the client application.	• Account
Security	Enable application logging (Changed, not new.)	Added Stray Toolbars; Performance; RAS; and Microphone Button as selections. With the Microphone Button item selected, events are written to the log file on DOWN, UP, and HOLD actions for each button. Events are logged for PowerMic, SpeechMike, and foot pedal devices.	 Account
ACO/LMO	Dragon LMO interval	Changed default value to Daily .	• Account

Setup > Bridge Tab

The following items have been added to or modified in the **Bridge** tab **Options** section:

• Send dictated status updates (modified): Choices have been changed to Never; Immediately for new reports; When saving as Draft; and Always excluding Draft.



Note: These choices have been modified due to the new **Send pending correction reports** option (see below).

• Send pending correction reports (new): Choices are Dictated status (no text); Preliminary result (with text); and Never. Default is Never.



Note: The **Send pending correction reports** option takes precedence over **Send dictated status updates** option. For example, even if **Send dictated status updates** is set to **Never**, a status update will be sent for Pending Correction reports if **Send pending correction reports** option is set to **Dictated status (no text)**.

• Send results for scheduled orders (new): Allows an administrator to upload reports for orders that are still in the Scheduled state in order to get the report to the ordering clinician. This is a true/false check box; default is **False**. (Please test this feature with your RIS/HIS; some RIS/HIS do not allow this functionality.)

Setup > System Tab

The **Synchronize Physicians** link has been removed. Synchronization between *PowerScribe 360* | *Reporting* and *PowerScribe 360* | *Critical Results* now occurs automatically when critical test result messages are sent (using the *PowerScribe 360* | *Critical Results* application).

Worklists

The **DICOM SR Count** field is now available as a selection when creating Worklists.

Exams > Explorer Tab

Procedure Description Displays in Order Association Dialog Box

When adding or replacing orders in **Exams > Explorer** using the **Actions > Associate** link, you will see a new column in the Order Association dialog box called **Procedure** which displays the procedure description.

Ord	er Association V	Webpage Dialog				X
You Pleas	nave chosen to a se select one or n : Only unreporte	dd one or more orders to the nore orders from the list belo d accessions for patient <u>AARC</u>	selected report, wh w and click Finish to <u>ON AARON</u> are availa	ich is associated of proceed. able for selection.	with accessior	4 041825 .
	Accession	Procedure	Patient	Status	Resident	Attending
	41237995	TR HIP 1 VIEW	AARON, AARON	Completed		
	41237997	TR HIP MIN 2 VIEWS	AARON, AARON	Completed		
	41238102	CHEST 2VWS PA/LATERAL	AARON, AARON	Completed		
	41238103	CHEST 2VWS PA/LATERAL	AARON, AARON	Completed	8	
						Page 1
			[<< Previous	Finish	Cancel

Exams > Patients Tab

A read-only Site identifier has been added to the Patient tab. (See image below.)

r Reviews				
Patient	Visits	Insurance		
Save Cha	nges	Delete		
Identi	fier	Site University	MF P/	AT14467
		Gender	DO	B

Exams > Physicians Tab

The Create New entry area has been modified to clarify the entries in the Identifier section.

- Site now shows a drop-down list arrow allowing you to select the site more easily.
- The **RIS** field indicates that the identifier for this field should be the physician's RIS identifier.

NUANCE							9	System: 🤇
xams 🔻 Explorer Das	nboard Patie	nts Physicians	5 Peer Reviews	5				
A B C D E F G H I J K L M Site Look for All Last Nam	NOPQRST e 💌 and*	°UVWXYZ @ Search ♀	Create New C	Site	Delete	RIS r 💌		NPI
Physician	Site	Identifier	Name	Prefix	First		Middle	Last
Anderson, Hannah	University	4567890	Name:	CEN		Alternate		ACR
ANDERSON, PAULA	University	017107	ID:	3314		Anemate		ACK
ANDERSON POREPT S	University	016627		-				78.4

In addition, the **Insurance** tab has been removed from this window.

Show Addendum at the Top of Printed Reports

New merge fields are available for printable templates that allow a report's addenda to appear at the top of the report, rather than near the end, allowing report recipients to be alerted immediately to the most recent information about a patient.



Note: The new merge fields can also be used to create other highly customized print templates, including control over the headers and separators that appear with each section.

New Print Template Merge Fields

Simple Approach

<maintextreverse> - Prints report with addendums at top in reverse chronological order, using hard coded headers and separator lines between each addendum and the original report.

Complex Approach (for customers who want more control of separators)

<addendum-start></addendum-start>	<addendum-end></addendum-end>	<addendumtext></addendumtext>
<originalreport-start></originalreport-start>	<originalreport-end></originalreport-end>	<originalreporttext></originalreporttext>
<report-start></report-start>	<report-end></report-end>	<reporttext></reporttext>

Ż

Note: <originalreport> may be used as a synonym for <originalreporttext>, <report> is a synonym for <reporttext>, and <addendum> is a synonym for <addendumtext>.

Note: <originalreportextt> refers to the original report only when an addendum exists. Thus, both the <originalreporttext> and <reporttext> tags may be used in the same template to

customize the output for the original report when addendums exist, such as to add a different banner.



Note: If an addendum exists, but the report template does not include an <addendumtext> tag, the template is considered invalid since the addendum(s) cannot be included in the printout. Since this represents a potential patient safety issue, the custom tags will be ignored and <maintext> will be implied.

Two example templates (**Simple Reverse Template** and the **Complex Reverse Template**) and their example results are shown below, using the new merge fields to position the addendum text at the top of a printed report.

Simple Reverse Template Example and Result

Nuance PowerScribe® 360 Reporting: S	System Templates - Internet Explorer)
System: Commissure Health System	n Save and Close Close Wi	indow
Print Template Fax Template Co	over Sheet	
Select Template: University Simple R	teverse Template V New Edit Delete Download	ā
Patient Name: <302:Patient Name>		
Accessions: <502:Accession Numbers>		
Sign Date: <report date="" sign=""></report>		
<maintextreverse></maintextreverse>	Patient Name: O'F16 M16 L16	
Note: The template is shown in plai	Sign Date: 8/19/2014 11:32 AM EDT	
	Addended on 8/19/2014 11:32 AM EDT by Tracy Alba.	
	Impression:	
	The right leg has the fracture	- }
	Original Report signed on 8/19/2014 11:30 AM EDT by Tracy Al	ba.
	Exam: Right leg X-Ray	
	Technique: Standard departmental protocol was employed.	
	History: RFS-45: R'eason For Study RFS-45	
	Comparison:	

What's New in PowerScribe 360 | Reporting, Version 3.0

Complex Reverse Template Example

Ø Nuance PowerScrit	be® 360 Reportir	ng: System Templates -	Internet Explorer	- • ×
System: Commi	issure Health Sys	tem	Save and Close	Close Window
Print Template	Fax Template	Cover Sheet		
Select Template:	University Comp	lex Reverse Templat	ne ✔ New Edit Delete Dov	vnload 🖹
Patient Name: <3	02:Patient Name>			
Accessions: <502:	Accession Number	s>		
Sign Date: <report< th=""><th>rt Sign Date></th><td></td><td></td><td></td></report<>	rt Sign Date>			
<addendum-start: ADDENDUM #<ad <addendumtext></addendumtext></ad </addendum-start: 	> Idendum Sequence	> - CREATED ON: <re< th=""><th>eport Create Date></th><th></th></re<>	eport Create Date>	
<addendum-end> <originalreport-sta ORIGINAL REPOR <originalreporttex <originalreport-en <report-start></report-start></originalreport-en </originalreporttex </originalreport-sta </addendum-end>	art> T CREATED ON: <i t> id></i 	Report Create Date>		
<pre></pre>) ON: <report crea<="" th=""><th>ate Date></th><th></th><th>Nuance PowerScribe</th></report>	ate Date>		Nuance PowerScribe
Creporcenus		Patient Name:	O'F16 M16 L16	
		Accessions:	FO-45	
Note: The templa	ate is shown in	Sign Date:	8/19/2014 11:32 AM EDT	
		ADDENDUM #1 - Impression: The right leg has t	CREATED ON: 8/19/2014 11:30 AM EDT	
		ORIGINAL REPO	RT CREATED ON: 5/3/2012 9:29 AM EDT	
		Exam: Right leg X-Ray		
		Technique: Standard departm	ental protocol was employed.	
		History: RFS-45: R'eason	For Study RFS-45	
	Ļ	Comparison: None	and we share the second strends to second strends and the second strends and the second strends and the second	

New Management Report

The following management report is now available:

Author productivity - RVU: This report provides statistics on Relative Value Unit (RVU) measurements, by site and author.

The following illustration is an example of the report's results:

Author productivity - RVU								
Created From:	5/1/2015 12:00:00	Created To:	5/13/2015 11:59:59 PM					
Site (Daily RVU Quota):	University (10)							
Author:	uthor: All							
Based on data as of Wednesday, Ma	ny 13, 2015 11:19 AM ED	Τ						
		Reports (Count)		RVU	Average			
Author 🗧	Dictated 🗘	Approved ‡	Signed 🗘	Sum 🗘	TAT ÷			
Attending, Stephanie	0	0	3	0	27.18:53:03			
Totals:	0	0	3	0	9.06:17:41			

What's New in PowerScribe 360 | Reporting, Version 3.0

Software Version Support

Client operating system:

- Windows 8.1 32-bit and 64-bit
- Windows 7 SP1 32-bit and 64-bit

Server operating system:

- Windows Server 2012 R2 32-bit and 64-bit
- Windows Server 2012 32-bit and 64-bit
- Windows Server 2008 R2 SP1 32-bit and 64-bit
- Windows Server 2008 SP2 32-bit and 64-bit

SQL Server:

- MS SQL Server 2014, single server and clustered
- MS SQL Server 2012 R2 32-bit and 64-bit
- MS SQL Server 2012 32-bit and 64-bit
- MS SQL Server 2008 R2 SP1 32-bit and 64-bit
- MS SQL Server 2008 SP2 32-bit and 64-bit
- MS SQL Server 2008 32-bit and 64-bit

Virtual machines:

- Microsoft Hyper-V for single servers and clustering for Windows 2012, 2012R2
- VMware ESX v4 (all) and ESXi v5 (up to current) for single servers and clustering for Window 2008, 2008 R2

Note: Clustering with VMware is not supported on Windows Server 2012 or 22012R2.

Browser support:

• Internet Explorer 11; Internet Explorer 10; Internet Explorer 9; Internet Explorer 8



Note: You can run Internet Explorer 9, 10, and 11 in non-compatibility mode when using the portals (for administrators or radiologists).

New Features For Providers: Purchasable

- *Quality Guidance* (beginning on *page 24*)
- PowerShare Studies (beginning on page 31)
- PowerShare (beginning on page 33)
- DICOM Fields Highlight (beginning on page 33)
- DICOM Decimal Rounding (beginning on page 33)

Quality Guidance

Nuance continues to demonstrate its industry leadership and strength in Radiology with *PowerScribe 360* | *Reporting*, version 3.0, and the introduction of *Quality Guidance*. This enterprise-wide solution harnesses *PowerShare* to ease the transition from volume to value-based care by enabling the creation of more accurate, complete, and high-quality reports that include consistent evidence-based follow-up recommendations. Version 3.0 builds upon Nuance's proven real-time reporting solution for quick and efficient workflow that improves productivity and reduces turnaround time.

Quality Guidance consists of two components: **Clinical Guidance** and **Quality Check** (previously known as Assure), which are both described in the next sections.

Clinical Guidance

Note: Clinical Guidance requires a PowerShare account, which is included with the Quality Guidance solution. (Note that this account is **not** a PowerShare image sharing account.)

The new clinical guidance component allows you to insert recommended text on specific topics such as liver lesions, thyroid nodules, and so on. Clinical guidance collects structured information about findings and determines appropriate report text based upon established, industry-standard best practices.

When *PowerScribe 360* | *Reporting* detects a specific phrase (based on context word/keyword combinations) that relates to a topic covered in clinical guidance, a **Relevant clinical guidance** pop-up notification appears on your screen briefly, explaining what guidance is available.



The context/keyword phrase can be either a dictated phrase, or a phrase already in the text of an existing report from a resident or editor. Either of these cases will trigger the pop-up notification.

Context/Keyword Combinations That Will Trigger a Clinical Guidance Notification

The following table shows the context words and keywords that trigger the **Relevant clinical guidance** pop-up notification. The pop-up appears when one of the following context/keyword combinations is detected in the report.

Clinical Guidance Support Item	Context	Context Words		Vords
Adnexal Mass	Adnexa Ovary	Pelvis Ovarian	Mass Cyst	Lesion
Adrenal Nodule	Adrenal		Nodule Lesion Incidentaloma	Mass Tumor
Liver Lesion	Liver Hepatobiliary	Hepatic	Lesion Hypodensity	Mass
Pulmonary Nodule	Lung	Pulmonary	Nodule	Lesion
Renal Lesion	Renal Kidneys	Kidney Nephric	Mass Cyst Hypodensity	Lesion Tumor Hyperdensity
Thyroid Nodule	Thyroid		Nodule Lesion	Cyst

Opening the Clinical Guidance Panel

You can open the Clinical Guidance panel using any of the following methods:

• Use a voice command with the trigger words, "clinical guidance" followed by one of the names for the guidance type; for example, "clinical guidance adnexal mass". (See the table below.)

The following table lists the voice commands that will open a specific clinical guidance panel.

Clinical Guideline	Phrases That Will Open the Guidance Panel
Adnexal Mass	"Clinical guidance adnexal mass" or "Clinical guidance adnexal cyst" or "Clinical guidance adnexal cystic mass" or "Clinical guidance ovarian cyst" or "Clinical guidance ovarian cystic mass"
Adrenal Nodule	"Clinical guidance adrenal nodule"
Liver Lesion	"Clinical guidance liver lesion"
Pulmonary Nodule	"Clinical guidance pulmonary nodule" or "Clinical guidance lung nodule" or "Clinical guidance pulmonary nodule"
Renal Lesion	"Clinical guidance renal lesion" or "Clinical guidance renal mass" or "Clinical guidance renal cyst"
Thyroid Nodule	"Clinical guidance thyroid nodule" or "Clinical guidance thyroid lesion"

• Click the **Relevant clinical guidance** notification box (before it closes).

Properties	والمحاطرين ومقرب المساوية	Report - FURMAGES, JANE R - 4093554		~~~~~		ساعاتهم بياو والمالية سوين م
Attending:	James Taylor Draft	INDICATION: 77-year-old female with pelvic pain a pelvic mass on CT scan from 11/14/05.	nd large	right sid	ded	
STAT: [Insert Contrib Insert Custom	utors Fields	TECHNIQUE: Gray scale and color flow doppler so of the pelvic contents were performed from a trans Due to limited image quality, transvaginal scanning performed. No prior ultrasounds are available for c Limited comparison is made to a prior CT scan fro	onograph sabdomir y was the omparise om 11/14	nic evalu nal appr en on. /05.	uation oach.	
Properties	5	FINDINGS: The		T I I	_	
Fields pelvic mass id transabdomina Relevant clinical guidance is available:						
Notes		TRANSVAGIN, Adnexal Mass				
Attachme	ents	discomfort, and courses are communed out of a				
Assure	2	The uterus is anteverted and anteflexed measuring Neither ovary is specifically identified. Within the rid) 4.6 x 2. oht adne:	0 x 3.7 xa	cm.	
Clinical Guidan	ce (6)					
Guidance	† Description		Modality	Age	Gender	Attachments
Adnexal Mass	Incidental cy	stic adnexal mass seen on CT.	CT	18+	Female	
Adrenal Nodule	Discrete lesi	on within either adrenal gland measuring at least 10 mm that has not	CT	19+	Both	
Liver Lesion	Hepatic lesio	on seen incidentally on CT.	CT	19+	Both	
Pulmonary Nodule	Solitary pulm	onary nodule seen incidentally on CT.	CT	35+	Both	
Renal Lesion	enal Lesion Incidental renal mass detected on CT.			19+	Both	
Thyroid Nodule	Thyroid nod	le incidentally detected on CT or MRI.	CT	19+	Both	
Prior Reports (1) 🤫 Auto Text (12) 📑 AutoFeed 👔 Montage 式 Clinical Guidance (6)	Share Stud	ies h-thomas	5	

• Click the **Clinical Guidance** tab at the bottom of the window and double-click the guidance from the list that appears.

	بريسويه المراضية المحال المحسب والمربي والمتحاف المحاوية والمحافية والمحافية والمحافية والمحافية والمحافية والم		معري مد		مرابع ما ما ما المان ^{- م} مسم مرجع المار - الما ال ^{مار م} مرجع ما
Clinical Guidance (6)					
Guidance †	Description	Modality	Age	Gender	Attachments
Adnexal Mass	Incidental cystic adnexal mass seen on CT.	CT	18+	Female	
Adrenal Nodule	Discrete lesion within either adrenal gland measuring at least 10	CT	19+	Both	
Liver Lesion	Hepatic lesion seen incidentally on CT.	CT	19+	Both	
Pulmonary Nodule	Solitary pulmonary nodule seen incidentally on CT.	CT	35+	Both	Algorithm flow Aderxal Mass CT
Renal Lesion	Incidental renal mass detected on CT.	CT	19+	Both	chart from JA White aper Ag
Thyroid Nodule	Thyroid nodule incidentally detected on CT or MRI.	CT	19+	Both	
🕒 Prior Reports 🛛 🧠 Auto	Text (61) 🐺 AutoFeed 📲 Montage 🗐 Clinical Guidance (6)	Powe	erShare	Studies	

• Icons that appear in the Attachments column contain resource material related to the corresponding Clinical Guidance.

Working Within the Clinical Guidance Panel

When the clinical guidance panel opens, you can enter values and make selections from the dropdown lists to fill in the guidance text that will appear on the right side of the panel.



Voice Commands Available Within the Clinical Guidance Panel

The following table lists the voice commands you can use when working within any of the clinical guidance items.

Voice Command	Description
"Clinical guidance <guideline name="">"</guideline>	Opens the named guidance panel. (See the previous table for a list of the context words and keywords that will open the clinical guidance panel.)
"Guidance field <guideline field="" name="">"</guideline>	Allows you navigate to fields on the left-hand side of the guidance panel
"Insert sections" or "Insert guidance"	Inserts the guidance text into the report
"Update sections" or "Update guidance"	Updates the report text with changes you made in the guidance panel
"Remove sections" or "Remove guidance"	Removes guidance text from the report (Must have guidance panel open to use this command)
"Hide guidance"	Closes the guidance panel
"Next field" or "Previous Field"	Allows you navigate between the fields on the left-hand side of the guidance panel

Clinical Guidance Icons

- Red diamond (**Value is required**): You must enter a value for this field.
- A Yellow triangle (**Default value needs review**): Check the value that appears in this field.
- Green circle (**Value has been set**): You have selected a value for this field.

The example illustration below shows an adnexal mass clinical guidance panel filled out. (The various guidance items each have their own set of relevant parameters.)

Note: The text on the right side of the panel appears only after **all** of the required fields on the left side of the panel have been filled in. Required fields are shown in **bold text**.

Guidance: Adnex	al Mass 🖁	
Eiza in cmi	2	Include: Findings, Impression, Citation 👻 🍽 Insert 💥 Remove
JIZE III CIII.	2	FINDINGS
Side:	Left -	A 2 cm indeterminate, cystic-appearing lesion is seen in th
Lesion Character	Suspicious	left adnexa (series 2, image 5).
Menarche Stage:	Late-Postmenopausal (>5 year af 🝷	IMPRESSION
Series:	2	An indeterminate, cystic-appearing left adnexal lesion
		ultrasound at this time is recommended.
Image:	5	
		CITATION:
		Recommendations for adnexal lesion management based on Patel et al., J Am Coll Radiol 10:675-81 (2013).

Inserting the Clinical Guidance Text

• The **Include** drop-down list allows you to decide what items to include in your report: **Findings**, **Impression**, and/or **Citation**.

Note: Any selection changes you make to the Include list remain as such until you change them again.

Guidance: Adnex	al Mass 👖			
🛇 Size in cm:	2		Include: Findings, Impression, Citation	👻 🎑 Insert 🔀 R
Side:	Left		FINDIN V Impression	
Juc.	Len	-	A 2 cm Citation	ing lesion is se
Lesion Character:	Suspicious	•	leit auf	
Menarche Stage:	Late-Postmenopausal (>5 year af	•	IMPRE	
Series:	2		An inde measuring z cm is seen. Further	eft adnexal lesi evaluation with
Image:	5		ultrasound at this time is recomm	ended.

- The **Insert** icon allows you to insert the clinical guidance text into your report. Sections are inserted into your report based on the following guidelines:
 - **Findings**: The text is inserted **at the current cursor location** in your report.

- Impression: If your report contains an Impression heading, the clinical guidance Impression text appears in that section (after any existing text that might already be in that section). If your report does **not** contain an Impression heading, the Impression text appears at the bottom of the report, just above the Citation text.
- **Citation**: The Citation text is inserted at the bottom of your report.
- $\sqrt{}$
- **Note:** The section headings themselves (**Findings**, **Impression**, **Citation**) are **not** inserted when you insert the clinical guidance text; only the text that appears beneath each heading is inserted.
- The **Remove** icon removes the inserted text from the report if you change your mind.
- Once you insert the guidance text into the report, you can edit the text if necessary. To open the Clinical Guidance panel again, edit the clinical guidance you inserted:
 - Click the clinical guidance text you inserted into the report, or
 - Double-click the clinical guidance item from the list on the Clinical Guidance tab.

The **Insert** button changes to **Update**. The **Update** button allows you to update the report with changes made in the Clinical Guidance panel.

Best practice: Edit the parameters in the Clinical Guidance panel rather than in the report itself. When finished click **Update** to insert the edited guidance.



Note: If you make an update in the Clinical Guidance panel and you attempt to close the report without updating, a warning appears, giving you the opportunity to save your changes before closing the report.

PowerScrib	e 360 Reporting
2	You have made changes in the Clinical Guidance window but have not applied those updates to the report text. If you continue those changes will be lost. Click OK to continue and discard those changes. Click Cancel to go back and edit the report.
	OK Cancel

- You can select a color for your clinical guidance text to help you distinguish it from other text in your reports. (Go to Tools > Preferences > Reporting > Fonts and Colors. Select the Enable custom colors check box, scroll down to and select Guidance Output, and pick a color.)
- You can use common *PowerScribe 360* | *Reporting* voice commands to move between fields (Next Field/Previous Field), dictate into numeric fields, and dictate your selection from the drop-down lists that appear in some of the guidance items.

Quality Check (previously known as Assure)



Note: PowerScribe 360 | Reporting, version 3.0 has not been re-branded with this new name. The next release of the product will use the name Quality Check (instead of Assure) throughout the application.

Identify Whether a Critical Test Results (CTR) Communication Has Already Occurred

If your institution has *PowerScribe 360* | *Critical Results*, and it was used to communicate a CTR message to the ordering clinician, *PowerScribe 360* | *Reporting* knows that a message was sent. Therefore, Quality Check will not alert the radiologist that a CTR is present in the report during the current session only. If the radiologist has already communicated with the ordering clinician as to the results of their interpretation, then notifying them that there is a critical finding to communicate is redundant.

Notes on Quality Check

- Quality Check now supports identification of both CTRs as defined by the Massachusetts Coalition for Prevention of Medical Errors, and Actionable Findings as defined by the American College of Radiology (ACR).
- Quality Check now checks for laterality mismatches between sections. For example: The Findings section of a report states that a cyst was found on the left kidney and that the right kidney appeared normal. However, the Impression section states that a cyst was found on the right kidney and that the left kidney was normal. In this case, Quality Check would notify the user of the mismatch.

PowerShare Studies

Note: Although not technically a purchasable option, PowerShare Studies requires a PowerShare image sharing license, which is purchasable. (Customers with an existing PowerShare license can access the PowerShare Studies functionality without any additional purchase.)

You can now view prior and current *PowerShare* studies (referred to as just *studies* for the rest of this section) for your patient without leaving the *PowerScribe 360* | *Reporting* client application.

From the Report Editor, click the **PowerShare Studies** tab at the bottom of the window. A list of PowerShare studies that match the patient first and last names, and date of birth, appears in the list. The following illustration shows an example of the **PowerShare Studies** tab and window.



Note: The PowerShare Studies window contains a warning that the results are based solely upon first name, last name, and date of birth (DOB). You can verify that the study is for your patient by reviewing additional fields on the study itself, such as MRN, anatomy, and so on.

PowerShare Studies	s (1)					
Warning! Results below	reflect only First/La	ast Name and DOB ma	tching. Please verify patie	ent accuracy.		
Study Date	1 Description	Modality	Anatomy	Institution	Accession	Referring Physicia
8/10/2004 12:00 AM	THORACIC	MR		QA Test 1		BUTLER

Tip: The number in parentheses on the right side of the **PowerShare Studies** tab provides a quick look at the number of studies available. If none are available, the parentheses/number are not shown.

Viewing a Study

To view a study, double-click the study to open the *PowerShare* viewer. The viewer opens in a separate browser window, and displays the study you selected. The following illustration is an example of a study open in the *PowerShare* viewer.



PowerShare

You can now access Nuance *PowerShare* directly from the *PowerScribe 360* | *Reporting* client application, allowing you to quickly and securely access and share the medical images you need for better decision-making, easier referrals and improved care coordination.

To connect to *PowerShare* from the Explorer or Report Editor windows in the *PowerScribe* 360 | *Reporting* client application, select **Tools > PowerShare** or click the PowerShare icon (shown at right).



DICOM Fields Highlight

With the Merge Fields tab pinned open in the AutoText Editor and the appropriate DICOM type selected, DICOM fields that you select in your AutoText are highlighted in the Merge Fields list.

IP DIAMETER: Bip. Diameter			Merge Fields
OCCIPITAL-FRONTAL DIAMETER: OCCIPITAL-FRONTAL DIAMETER			Type:
ENDER: Gender:male/female			OB-GYN Single Gestation
			⊕ Amniotic Sac
Ear length, mean	EAR LENGTH MEAN		- Fetal Biometry
Femur length, mean	FEMUR LENGTH MEAN		- EAR LENGTH MEAN
Foot length, mean	FOOT LENGTH MEAN		FEMUR LENGTH MEAN
Gestational age	GESTATIONAL AGE	1	- FOOT LENGTH MEAN
Head circumference, mean	HEAD CIRCUMFERENCE MEAN	1	GESTATIONAL AGE
Heart area, mean	HEART AREA MEAN		- HEAD CIRCUMFERENCE MEAN
Heart circumference, mean	HEART CIRCUM Merge: HEART AREA	MEAN	HEART AREA MEAN
Length of middle phalanx of the	LENGTH OF MIDDLE PHALANX		HEART CIRCUMPERENCE MEAN
5th digit, mean	OF THE 5TH DIGIT MEAN	E	- LENGTH OF MIDDLE PHALANX OF 1
Mandible diameter, mean	MANDIBLE DIAMETER MEAN	1	MANDIBLE DIAMETER MEAN

DICOM Decimal Rounding



Note: Only users with an Administrator role can edit this setting.

You can now set the decimal rounding for your DICOM measurements using the DICOM SR Template Manager. You can set the number of decimal places to round (between zero and five) when you add a new template, or when you modify an existing template.

To access the Template Manager:

- 1. Log in to the *PowerShare 360* | *Reporting* client application as a user with administrator rights.
- 2. Open the AutoText Editor.
- 3. Click the **DICOM Merge Fields** item in the task bar. The **DICOM Merge Field Manager** dialog box opens.

- 4. Click the Manage DICOM SRs link. The DICOM SR Template Manager dialog box opens.
- 5. Select an existing report template name and click **Edit**. The **Template Properties** dialog box opens.

DICOM SR Template Manager	r		8	X
Name		† Report Template		
Adult Echocardiography Proce	edure	Adult Echocardiography Procedure Report		
MAMMO DIGITAL DIAGNOS	TIC R2 - 2785769	Mammography CAD Report		
OB-GYN Pelvic		OB-GYN Ultrasound Procedure Report		
OB-GYN Single Gestation		OB-GYN Ultrasound Procedure Report		
OB-GYN- Ultrasound		OB-GYN Ultrasound Procedure Report		
	Template Propertie	s ? x		
	Name:	Adult Echocardiography Procedure		
	Description:	Adult Echocardiography Procedure		
	Decimal Places:	2 V 0 1 OK Cancel 3 4 5		
		Add Edit	Remo	ve
		ОК	Cano	el

6. Select the number of decimal places for the template and click **OK** to save your changes.

New Features for Administrators: Purchasable

- *PowerShare Integration* (beginning on *page 35*)
- *Quality Guidance* (beginning on *page 36*)
- PowerShare Studies (beginning on page 41)
- Management Reports (beginning on page 42)

PowerShare Integration

PowerShare allows providers to quickly and securely access and share the medical images they need for better decision-making, easier referrals and improved care coordination. When configured in the Administrator Portal, providers can access *PowerShare* directly from the *PowerScribe 360* | *Reporting* client application.

Configuration

Setup > System Tab

The following item has been added to the **Setup > System** tab:

• **PowerShare License Token**: Enter the license token for the *PowerShare* application in this field. The token allows access to PowerShare Studies and/or the Clinical Guidance features.

NUANCE					
Setup 🔻 Accounts	s Auto	Text Bridge	Procedures	Sites Speech	System
Configuration B	I-RADS	. Review Rating	s Audit		
Save Changes Clear	Delete	Preferences T	emplates Imp	ort Persons Syr	nchronize Phy
	ID	Access Code	Name		Description
Health System:	1		Commiss	sure Health Systen	
	Path			Domain	Authentication
LDAP:	DC=Nua	ance, DC=com, OU	I=Corp Accounts,	bn-dc1.nuance.co	Basic
	Customer 1	ID			Security Code
Critical Results:	90				1C72369B-2
PowerShare:	License To	ken			
Worklists:		Name			Description
and the second s	AN PAN	and the lot of the second states	in the second second second	And And And And	A 44.4 10 10 10

Setup > System > Configuration Link

The **Other Services** tab on the **Configuration** link contains the following items *PowerShare*:

- PowerShare Service URL: Default value is https://api.seemyradiology.com/services/rest
- **PowerShare Web URL**: Default value is https://www1.nuancepowershare.com
- PowerShare Widget URL: Default value is https://widgets.seemyradiology.com/rest

Quality Guidance

Nuance continues to demonstrate its industry leadership and strength in Radiology with *PowerScribe 360* | *Reporting*, version 3.0, and the introduction of *Quality Guidance*. This enterprise-wide solution harnesses *PowerShare* to ease the transition from volume to value-based care by enabling the creation of more accurate, complete, and high-quality reports that include consistent evidence-based follow-up recommendations. Version 3.0 build upon Nuance's proven real-time reporting solution for quick and efficient workflow that improves productivity and reduces turnaround time.

Quality Guidance consists of two components: **Clinical Guidance** and **Quality Check** (previously known as Assure), which are both described in the next sections.

Clinical Guidance

Clinical Guidance (an application enabled through the PowerShare license token) allows providers to access clinical guidelines that cover the finding(s) that they document in their report. This gives them the opportunity to review the guideline and to insert report text based upon established best practices. (For more information from the client perspective, see *Quality Guidance*, beginning on page 24.)

Clinical Guidance Guidelines

Clinical Guidance guidelines are available for download from *PowerShare*. To view and download the guidelines, click **Setup > System > Clinical Guidance**.

Nuance PowerScrib	e® 360 Rej	oorting: C	linical Guidan	ce - Internet Explorer	
Clinical Guidanc	e			View Guidance Details Clos	e Window
The following Clinic when they restart t Update All	al Guidance the client.	e rules ai	re available. /	Any updates to the installed rules will be available to users	
Guidance	Installed	Latest	Released	Latest Version Details	
Adnexal Mass	3	3 NEW	04/28/2015	Incidental cystic adnexal mass seen on CT	Actions
Adrenal Nodule	3	3 NEW	04/28/2015	Discrete lesion within either adrenal gland measuring at least 8 mm that has not been previously characterized.	Actions)
Liver Lesion	3	3 NEW	04/28/2015	Hepatic lesion seen incidentally on CT.	Actions
Pulmonary Nodule	3	3 NEW	04/28/2015	Solitary pulmonary nodule seen incidentally on CT.	Actions
Renal Lesion	3	3 NEW	04/28/2015	Incidental renal mass detected on CT.	Actions

Nuance[®] PowerShare[®] Network

3

Thyroid Nodule

3 NEW

The following **Actions** are available (when you click the **Actions** link) for each guidance item.

04/28/2015 Thyroid nodule incidentally detected on CT or MRI.

- **Update**: Allows you to download the guideline from PowerShare.
- **Versions**: Allows you to select a different version of the guideline (if other versions are available).
- **Deactivate (Activate)**: Allows you to deactivate a guideline so that it is no longer available to users, or to activate a new guideline.
- **More Info**: Opens the corresponding attachments (in pdf format) from the ACR Incidental Findings Committee and the Fleischner Society.



Actions Actions

• In addition, the **View Guidance Details** link (near the top of the dialog box) allows you to view the release notes and the corresponding application flowchart diagram for each guideline by clicking **View Rule Logic**.



Configuration

You must configure two URLs to allow Clinical Guidance to communicate between *PowerScribe* 360 | *Reporting* and *PowerShare*:

 Select Setup > System > Configuration > Other Services and populate the PowerShare CG Service URL and the PowerShare CG Web URL. (See example below.)

PowerShare CG Service URL:	https://ps360.nuancepowershare.com/ContentRepository
	[https://ps360.nuancepowershare.com/ContentRepository]
PowerShare CG Web URL:	https://ps360.nuancepowershare.com/ClinicalGuidance
	[https://ps360.nuancepowershare.com/ClinicalGuidance]
and the second states and the second se	hisse // under date date and the der Santisa.

Preference

Clinical guidance has one preference, located on the **Report Editing** tab in system preferences:

• **Enable clinical guidance alerts**: This is an account-level preference that can be set for individual accounts. In addition, this can be turned on or off from within the client application by the provider. Default value is **True**.

Quality Check (previously known as Assure)



Note: PowerScribe 360 | Reporting, version 3.0 has not been re-branded with this new name. The next release of the product will use the name Quality Check (instead of Assure) throughout the application.

Quality Check and Critical Test Result (CTR) Communications

The following item has been added to the **Sites** tab:

Assure CTR Filter: This filter allows you to select the critical test results that should be ignored by Quality Check. The selected items will **not** be flagged as CTRs when detected in the report text. Currently the list includes about 150 items from which you can select. (See image below for partial list example.)

es Sites Speech Syst	tem	
s Peer Reviews Audit	Assure CTR Filter	
- Anno and		آفست

Ø Nuance PowerScribe® 360 Reporti	ing: Assure Critical Test Result Filter - I	internet Explorer					
Site: University							
Select the critical test results that should be ignored by the Assure Report Checker. The ch when detected in the report text.							
2nd tri placenta accreta/other	Carotid artery dissection	Lobar/lung co					
2nd tri previa or poss previa	Carotid/vert stenosis-no Sx	Lung lesion/p					
3rd tri placenta previa, other	Cerebral hematoma	🗌 Lung nodule 🖣					
Abdominal infection/intervene	Cerebral hemorrhage	Malignancy lik					
Abdominal/pelvic to observe	Cervical spine fracture	Malpositioned					
Abn routine OB US, no Rx	Closed loop obstruction	Mild ascites, P					
Abnormal cord doppler/IUGR	Cord hemorrhage/infarct	Minor Fx, low					
Abnormal IUP for short FU	Critical carotid stenosis	Misplaced/mig					
Abruptio placenta	Critical stenosis/occlusion	Mod/large plee					
Abscess	Deep vein thrombosis	Moderate peri					
Abscess, any location	Depressed skull fracture	Moderate pleu					
Active post-traumatic bleeding	Discitis	Necrotizing fas					

Identify Whether a CTR Communication Has Already Occurred

If your institution has *PowerScribe 360* | *Critical Results*, and it was used to communicate a CTR message to the ordering clinician, *PowerScribe 360* | *Reporting* knows that a message was sent. Therefore, Quality Check will not alert the radiologist that a CTR is present in the report during the current session only. If the radiologist has already communicated with the ordering clinician as to the results of their interpretation, then notifying them that there is a critical finding to communicate is redundant.

Notes on Quality Check

- Quality Check now supports identification of both CTRs as defined by the Massachusetts Coalition for Prevention of Medical Errors, and Actionable Findings as defined by the American College of Radiology (ACR).
- Quality Check now checks for laterality mismatches between sections. For example: The Findings section of a report states that a cyst was found on the left kidney and that the right kidney appeared normal. However, the Impression section states that a cyst was found on the right kidney and that the left kidney was normal. In this case, Quality Check would notify the user of the mismatch.

Quality Check System Configuration

The following tab in system configuration (**Setup > System > Configuration** link) has an additional item:

Bridge Service Tab

• Days to keep Assure results: Allows you to select the length of time to keep Assure CTR information. Default value is Infinitely.

Preference

A new Account-level preference has been added to the

Workflow tab, **Perform consistency check at signoff**, which runs the Quality Check consistency check feature when a report is signed.

Workflow	Permissions Order Entry Peer Review Report Editing Dict
•	Diagnosis coding system: ICD-9
• Di	iagnosis coding at preliminary signoff: Require codes
•	Diagnosis coding at final signoff: Require codes
• Requi	re BI-RADS for mammography exams: 🗹
•	Perform spell check at signoff: 🗌
•	Perform consistency check at signoff:
·	Invoke, Enx, at signoff:



PowerShare Studies

PowerShare studies is one of the applications that is enabled through the *PowerShare* license token (described above). With PowerShare Studies, providers using the *PowerScribe 360* | *Reporting* client application can look for a patient's prior or current studies (referred to as just *studies* for the rest of this section) in *PowerShare* from within the client application. (For more information from the client perspective, see *PowerShare Studies*, beginning on page 31.)

Notes

- *PowerShare Studies* displays studies that exist in your *PowerShare* repository. It does not automatically search for and display studies from other systems' *PowerShare* repositories.
- Results from *PowerShare Studies* are based only upon First Name/Last Name and date of birth (DOB) matching. A message warns providers to verify the patient using additional information, and not only these two items.

Preference

One preference is available for *PowerShare Studies*, located in **Setup > System > Preferences > Report Editing** tab:

• **PowerShare Image viewer**: Select either the **Basic** or **Advanced** viewer. Since this is an account-level preference, you can set it for individual accounts as well.

Management Reports

The following management reports are now available. To access these reports, click **Logs** > **Reports** from the *PowerScribe 360* | *Reporting* Admin Portal. (For detailed information on these reports, refer to the *PowerScribe 360* | *Reporting* Administrator Guide, document number L-3804-001.)

Assure - by author



Note: The next release of the product will use the name Quality Check (instead of Assure) throughout the application.

This report provides information about any quality checks that were run during a specific time frame, based on a specific radiologist.

The following illustration is an example of the report's results:

					Assu	ıre - by	autho	or					
Si	gned Fron	n: 1/1/20	15 12:0	0:00 AM				Signed To:	5/1	2/2015 11:5	9:59 PM	I	
	Autho	r: All Acco	ounts										
	Site	e: PWS02,	Univer	sity									
Based on dat	a as of Tuesda	ay, May 12, 2019	5 9:47 AM	EDT									
	Papart	Assure Exe	ecuted	Assure Fi	nding	Gender Mi	smatch	Latera Misma	lity tch	CTR/ Actionable	Finding	Communie Statem	cation ent
Author ‡	Count \$	Reports ‡	% ‡	Reports 🗧	% ‡	Reports ‡	% ‡	Reports ‡	% ‡	Reports ‡	% ‡	Reports ‡	% ‡
	1	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
	4	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
	1	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Attending, S	1	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%
Totals:	7	0	0%	0	0%	0	0%	0	0%	0	0%	0	0%

Assure - detailed results



Note: The next release of the product will use the name Quality Check (instead of Assure) throughout the application.

This report provides detailed information about any quality checks that were run during a specific time frame.

The following illustration is an example of the report's results:

					Assure	e - detailed	results				
Sigi	ned F	rom:	1/1/2015 12:00	0:00 AM			Signed	To: 5/12	/2015 11:59:59	9 PM	
	Acco	unt:	All Accounts				Accessio	on:			
	Moda	ality:	All Modalities				Anaton	ny: All A	natomies		
	Rep	orts:	All			CTR/#	Actionable Findin	gs: All			
	Ch	eck:	All								
	1	Site:	PWS02, Univers	sity							
Based on data .	as of Tu	iesdav, Mi	w 12. 2015 1:32 PM	EDT							
								Mis	match		
Accession \$	A ‡	Proces	lure 🗘	Site 🗘	Resident 🗘	Attending 🗘	Processed 🗘	Gender 🗘	Laterality 🗘	CTR/Actionable Finding	Comm ‡
Accession 4113240	A ÷	Proces RIGHT	fure : FOOT 2 VIEWS	Site 🗘 PWS02	Resident 🗘	Attending 🗘	Processed ‡	Gender ‡	Laterality 🗘	CTR/Actionable ÷ Finding	Comm 🗘
Accession + 113240	A ÷	Proces RIGHT RIGHT	foot 2 views	Site ÷ PWS02 University	Resident 🗘	Attending ÷	Processed 🗘	Gender 🗘	Laterality 🗘	CTR/Actionable Finding	Comm 🗘
Accession 4113240 4120682	A :	Proces RIGHT RIGHT HICKMA INSERT	foot 2 views Foot 2 views AN CATHETER ION	Site PWS02 University University	Resident 🗘	Attending \$ Attending, Steph Attending, Steph	Processed 🗘	Gender 🗘	Laterality 🗘	CTR/Actionable Finding	Comm 🗘
Accession : 4113240 4120682 8675309	A ‡	Process RIGHT RIGHT HICKMA INSERT Left FO	foot 2 views Foot 2 views Foot 2 views AN CATHETER TON OT MIN 3 views	Site PWS02 University University University	Resident ÷	Attending \$ Attending, Steph Attending, Steph Henry, Philip	Processed ÷ 2/10/2015 3:04 PM	Gender ‡	Laterality 🗘	CTR/Actionable Finding	Comm 🗘
Accession 4113240 4120682 8675309	A ≎	Proces RIGHT RIGHT HICKM INSERT Left FO	Iure Contractions FOOT 2 VIEWS FOOT 2 VIEWS AN CATHETER TON OT MIN 3 VIEWS OT MIN 3 VIEWS	Site PWS02 University University University University	Resident ÷	Attending, Steph Attending, Steph Attending, Steph Henry, Philip Henry, Philip	Processed ♀ 2/10/2015 3:04 PM 12/18/2014 3:16 PM	Gender ≑	Laterality 🗘	CTR/Actionable ÷	Comm 🗘
Accession : 4113240 4120682 8675309	A ÷	Proces RIGHT RIGHT HICKM INSERI Left FO Left FO	Hure Contractions FOOT 2 VIEWS FOOT 2 VIEWS AN CATHETER TON OT MIN 3 VIEWS OT MIN 3 VIEWS OT MIN 3 VIEWS	Site PWS02 University University University University University	Resident ÷ Resident, Phil Resident, Phil Resident, Phil	Attending, Steph Attending, Steph Attending, Steph Henry, Philip Henry, Philip	Processed ♀ 2/10/2015 3:04 PM 12/18/2014 3:16 PM 12/18/2014 9:48 AM	Gender ‡	Laterality 🗘	CTR/Actionable Finding	Comm 🗘

Assure - session listing



40884

40885

40886

23506

23506

23506

Note: The next release of the product will use the name Quality Check (instead of Assure) throughout the application.

This report lists any quality check sessions that occurred during the selected time frame. The following illustration is an example of the report's results:

	Assure - session listing									
Assure Servi	ce URL:	https://hce	.escriptionasp.com/C	LUdev4/	Assure	License ID:	f8aa	a7b9f-ad22-4fb5-ab4	1-7eabe3b0183c	:
Processe	d From:	1/1/2015 1	2:00:00 AM		Pr	ocessed To:	5/1	2/2015 11:59:59 PM		
A	ccount:	All Account	S			Accession:				
	Site:	University								
Based on data as o	of Tuesday, Ma	ay 12, 2015 3:5-	4 PM EDT							
NUS DocID 🗘	Accessio	ns ‡ A ‡	Resident 🗘	Attending	\$	Report Created	÷	Assure Check 🗧	Error Message	\$
40871	23506		Garces, Alberto	Henry, Philip		6/20/2012 11:34	АМ	2/7/2015 1:17 PM		
40872	23506		Taylor, James	Henry, Philip		6/20/2012 11:34	АМ	2/7/2015 1:22 PM		
40873	23545		Garces, Alberto	Henry, Philip		6/20/2012 11:46	AM	2/7/2015 1:32 PM		
40874	23545		Taylor, James	Henry, Philip		6/20/2012 11:46	АМ	2/7/2015 1:33 PM		
40875	41238177		Garces, Alberto	Henry, Philip		9/18/2013 3:50 P	M	2/7/2015 1:36 PM		

Henry, Philip

Henry, Philip

Henry, Philip

Taylor, James

Garces, Alberto

Taylor, James

Married Aller

6/20/2012 11:34 AM

6/20/2012 11:34 AM

6/20/2012 11:34 AM

2/8/2015 3:41 PM

2/8/2015 3:41 PM

2/8/2015 3:42 PM

Clinical Guidance - detailed results

This report contains detailed information on the use of the clinical guidance guidelines. The following illustration is an example of the report's results:

	C	linical Guidanc	e – detailed res	ults	
Signed From:	5/20/2015 12:00:0	00 AM		Signed To:	5/21/2015 11:59:59 PM
Account:	All Accounts			Accession:	
Modality:	All Modalities			Anatomy:	All Anatomies
Guidance:	All			Modified:	All
Site:	University				
Based on data as of Thursday,	. May 21, 2015 3:56 PM ED	Τ			
Accession 🗘 A 🗘 Proce	dure 🗘	Site 🗧 Resident	🗘 Attending 🗘	Signed 🗘	Guidance 🗘 Modified
ACCUNV272 BILATI 73520	ERAL HIPS W/PELVIS	University	Attending, Stephanie	5/21/2015 10:59	9:11 AM Adnexal Mass
. And a standard stranger	فالمسجى سأنبط كالمري سيكاري	a series of the	han an a	and the second	and a split to be specific to a second state of the second states