Nuance®

PowerScribe® 360

PowerScribe 360 Reporting System Administrator Guide

Version 4.0

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Contents

Chapter 1

Introduction to PowerScribe 360 Reporting

Objectives

In this chapter you will:

- Describe the *PowerScribe 360 Reporting* system
- Review the system's speech capabilities
- Identify the servers used in a *PowerScribe 360 Reporting* implementation
- Describe the documentation resources available for the *PowerScribe 360 Reporting* implementation

Introduction

This system administrator guide for *PowerScribe® 360 Reporting* provides instructions for setting up the *PowerScribe 360 Reporting* system, creating users, configuring system, site, and user preferences, running reports, and many other administrative functions.

The guide includes instructions for the configurations you must set and maintain as system administrator; as reference material, it also describes some configurations usually performed by Nuance personnel. In addition, it gives instructions for managing orders through the Order Entry portal. And, it includes provider training instructions (in two sections, Introduction and Pre-Enrollment, and Intermediate and Advanced), and editor training instructions.

PowerScribe 360 Reporting

PowerScribe 360 Reporting is a front-end speech recognition solution for academic centers, hospitals, and imaging centers with unique workflow, data-driven reporting, and communication needs. It includes:

- Structured speech recognition technology optimized specifically for the radiology domain.
- Industry-leading diagnostic imaging workflow management. Radiologists and other users can create reports with a variety of dictation styles, with peer review integrated into the process. Users can access report content with ease, and the system permits creation, delivery and auditing of critical messages.
- Data extraction tools for analyzing productivity and outcomes.

PowerScribe 360 Reporting offers industry-leading radiology workflow management. Designed to address the needs of healthcare networks with multiple RIS, PACS, 3D, and teleradiology systems, the software seamlessly integrates these elements. The system has the ability to launch an unlimited number of legacy and Web-based PACS viewers while intelligently returning orders to the appropriate RIS system from a single workstation. RIS/PACS workflow might be contained in a single environment, or a third-party system can handle order lists, routing, editing, and electronic signature workflow.

PowerScribe 360 Reporting offers four dictation styles to accommodate provider preferences:

- **Real-Time Speech Recognition with Self Editing**: *Once and done* real-time speech recognition allows radiologists to view text as it is dictated. To navigate within and correct documents, they can use keyboard, mouse, and standard word processing tools, or they can use voice commands and microphone controls. The software immediately recognizes spoken changes and additions anywhere in the report.
- **Real-Time Speech Recognition with AutoText**: Radiologists can use AutoText, that is, standard text, to maximize efficiency. AutoText entries are categorized and mapped to procedure codes; they are triggered by factors such as the patient's age or gender. The appropriate AutoText can be loaded automatically for any exam. Users can use speech commands to navigate within and edit the standard text blocks.

- **Real-Time Speech Recognition with Auto-Structured Reporting**: Auto-structured reporting eliminates the need for the radiologist to follow a structured format. In Findings Mode, the *PowerScribe 360 Reporting* software automatically converts free-form dictation to a structured report. This intelligent phrase recognition and automatic organization tool can greatly reduce the time spent using conventional structured macros.
- **Real-Time Speech Recognition with Editor Editing**: A combination of front-end speech recognition with editor workflow and editing, this method can be used in conjunction with any of the above reporting styles.

Audio Retention

PowerScribe 360 Reporting maintains an audio and text backup on the workstation only while a report is open for editing; it deletes the backup when the user finishes work on the report. If the application closes down unexpectedly, the backup remains in the Temp folder and the user is prompted to restore the report upon logging in again. Although the audio file remains on the workstation until the report is reopened, it is associated with the original user's profile and is not accessible to others. The *Dragon* speech recognition software stores *.dra* files in the local cache of the speech profile; these files are encrypted and are not accessible to unauthorized users.

PowerScribe 360 Reporting Servers and Workflow

***Note:** Before you begin, make sure that PowerScribe 360 Reporting has been installed on your network, and is ready to be configured and used. Details for installing individual PowerScribe 360 Reporting products are contained in the Installation Guide.*

Server Software

In a typical *PowerScribe 360 Reporting* installation, the following software applications, services, and file structure reside on the server:

Database Server Software

- Microsoft Windows Server
- Microsoft SQL Server

IIS Web Server

The *PowerScribe 360 Reporting* Portal application is installed on the IIS Web server. Refer to your installation guide for instructions.

Bridge Service

The *PowerScribe 360 Reporting* Bridge service exchanges orders and results with other information systems such as an RIS. The Bridge runs as a standard Windows service.

Client Admin Application

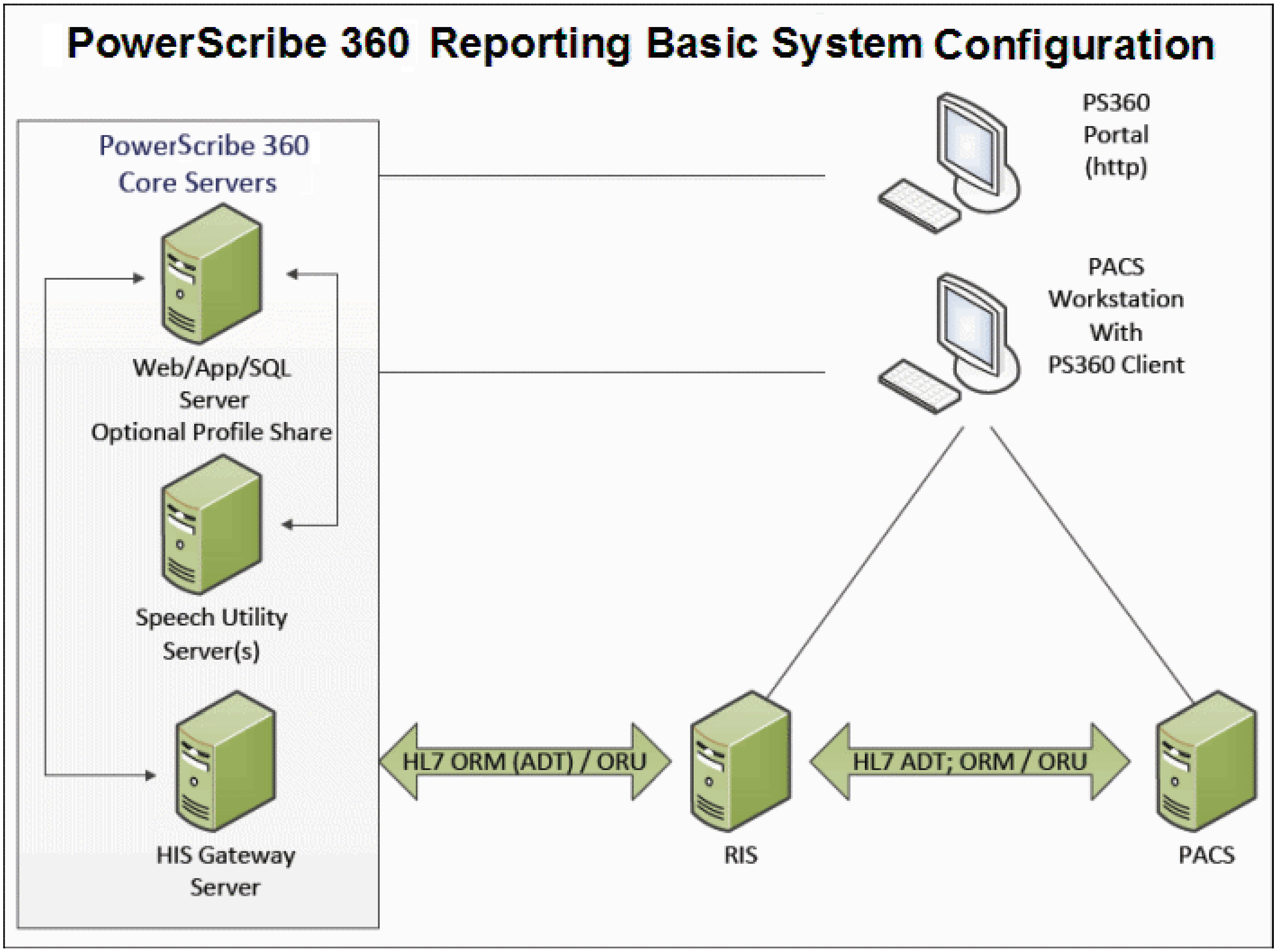
The Client Admin Application allows administrators to configure the *PowerScribe 360 Reporting* Client application, which is downloaded and installed on users' workstations.

Shared Distribution Folders

- Dragon speech files
- *Dragon NaturallySpeaking* CD image
- Software downloads folder
- Software publication folder

The diagrams in this section introduce the various servers that are part of your *PowerScribe 360 Reporting* system, and show how dictation and data flow through the system.

PowerScribe 360 Reporting Workflow



1. Order data flows from the RIS system to the *PowerScribe 360 Reporting* HIS Bridge and into the *PowerScribe 360 Reporting* SQL database
2. The radiologist selects an order from a worklist and begins dictation at the workstation.
3. The dictation is converted to text directly on the workstation.
4. If the radiologist wants to edit his own work:
   a. He edits and electronically signs the completed report.
   b. The completed report is sent to the *PowerScribe 360 Reporting* server.
   c. The *PowerScribe 360 Reporting* server sends completed reports to the *PowerScribe 360 Reporting* HIS Bridge for HL7 upload to the RIS system. The RIS systems manage document distribution beyond this point.

   OR

If the provider does not want to edit his own work:

a. He sends the speech-recognized report as well as the dictated audio to the *PowerScribe 360 Reporting* server.

b. The editor selects the dictation from a worklist and begins listening to the audio using the traditional editor tools. The editor can either edit the speech-recognized text or transcribe it from scratch.

c. The edited document goes back to the *PowerScribe 360 Reporting* server and is placed in the provider's queue for signature.

d. The *PowerScribe 360 Reporting* server sends completed report to the *PowerScribe 360 Reporting* HIS Bridge for HL7 upload to the RIS system as an ORU message. The RIS system manages document distribution.

Note: *The provider can begin editing his own work, but later send the partially-edited report for further editing by an editor, if desired.*

PowerScribe 360 Reporting Administrator Portal and Client Applications

Administrators, dictation users, editors, technologists, front desk, and order entry personnel use the features described below.

PowerScribe 360 Reporting Administrator Portal

The *PowerScribe 360 Reporting* Administrator Portal is a Web-based application you can use to perform system maintenance and other tasks. The portal you see when you log in depends on the role that has been assigned to your user ID. As system administrator, you have been granted administrative privileges, and you therefore see the standard Administrator Portal Web page upon logging in. Order entry clerks see only the order entry portal, and do not see any of your administrative functions. Front-desk personnel can log in to the Portal to enter order data into the system. Radiologists can find and edit their reports through yet another portal. As system administrator, you are responsible for setting up users and assigning the roles that determine what they can do and see in the Portal application.

In the *PowerScribe 360 Reporting* Portal, you can: set site and global preferences, set up providers and administrator users, find and view AutoText entries, develop worklists, and perform system maintenance. You can view system activity, find orders and reports, and run a variety of productivity reports. You can also view and manage patient and physician records.

PowerScribe 360 Reporting Client

Radiologists and editors use the *PowerScribe 360 Reporting* client application to find, view, dictate, and edit reports. There are two separate installation procedures: one for the transcriptionist and one for the radiologist. If you install the client for an editor, a modified version of the speech software is installed. If installing for a radiologist, the full client is installed, which includes all of the *Dragon* files necessary for speech recognition.

As system administrator, you can use the *PowerScribe 360 Reporting* Client to create and maintain AutoText entries, which are standard blocks of text providers or editors can insert in their reports.

PowerScribe 360 Reporting Client Portal

This Internet-based portal allows dictation providers to edit and sign reports; it does not provide speech-recognition capability, therefore they do not use it for dictation. Technologists can use this portal to enter values in custom fields.

Optional Modules

In addition to the core product, *PowerScribe 360 Reporting* offers several optional, purchasable modules:

- **Clinical Guidance**: 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.
- **Quality Check**: Checks your reports for common errors in consistency, identifies these errors, and allows you to review and/or correct them prior to signing your report. The Quality Check feature checks for laterality and gender discrepancies, as well as critical test results.
- **mPower** (previously named **Montage**): Provides search and performance analytics.
- **Peer Review**: An orderly and efficient method for conducting peer reviews and forwarding the data to the American College of Radiology (ACR).
- **Mobile Radiologist and Mobile Clinician**: Allows radiologists and clinicians to perform reporting tasks on their mobile devices.
- **Workflow Orchestrator**: Combines the efficiencies of worklists, multiple HL7 feeds, and master mode to streamline your reporting tasks.
- **Data integrations**: Integrates your RIS/LIS/HIS (including DICOM) with *PowerScribe 360 Reporting.*

For more information on these optional modules, contact your Nuance account executive.

Documentation Resources

As system administrator, you should become familiar with the following documentation:

- Online help for the *PowerScribe 360 Reporting* Administrator Portal and *PowerScribe 360 Reporting* client applications
- Video tutorials for many procedures are on the *PowerScribe 360 Reporting* installation DVD
- Quick reference cards for providers:
  - *PowerScribe 360 Reporting AutoText QRC for Providers* (L-3319)
  - *PowerScribe 360 Reporting Peer Review QRC for Providers* (L-3321)
  - *PowerScribe 360 Reporting Provider QRC* (L-3323)
  - *PowerScribe 360 Reporting Using the PowerMic II QRC* (L-3322)
  - *PowerScribe 360 Reporting Using the Philips SpeechMike 5276 QRC* (L-3324)
  - *PowerScribe 360 Reporting Voice Commands QRC for Providers* (L-3325)
  - *PowerScribe 360 Reporting Portal Access QRC for Providers* (L-3326)
  - *PowerMic II Button Assignment QRC* (L-3332)
  - *Phillips SpeechMike Button Assignment QRC* (L-3333)
- Quick reference card for editors:
  - *PowerScribe 360 Reporting Editor QRC* (L-3320)
- Quick reference cards for system administrators:
  - *PowerScribe 360 Reporting Admin Portal QRC* (L-3335)
  - *PowerScribe 360 Reporting Creating AutoText QRC for Administrators* (L-3336)
  - *PowerScribe 360 Reporting Custom Fields QRC for Administrators* (L-3337)
  - *PowerScribe 360 Reporting Best Practices for Speech Recognition QRC* (L-3550)

Advanced system administrators should also become familiar with the *PowerScribe 360 Reporting Software Installation Service Manual* (PN 889617) before using this guide.

Chapter 2

Navigating in the Portal and Creating Administrators

Objectives

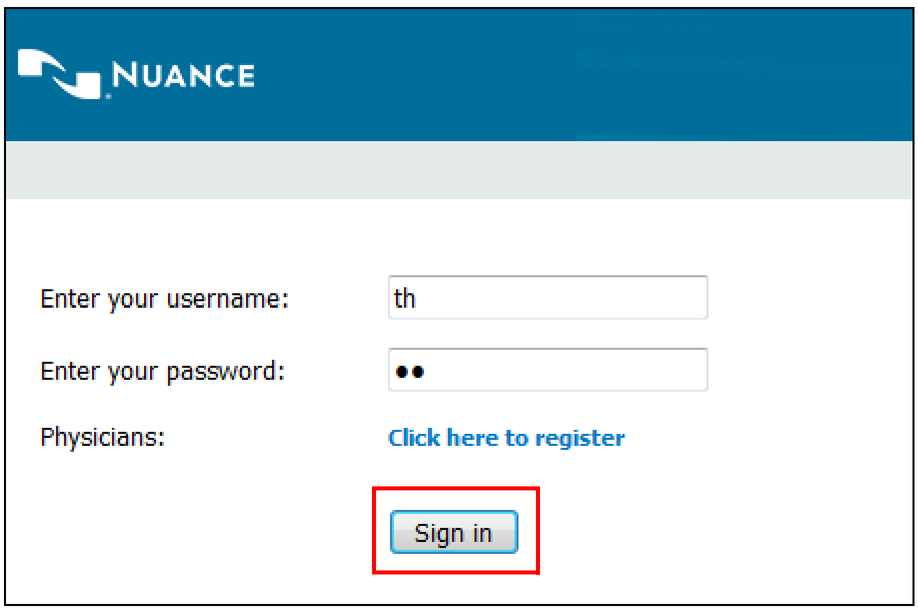
In this chapter you will:

- Demonstrate logging in and navigating in the Administrator Portal.
- Describe the purposes of administrator users.
- Demonstrate creating an administrator.

Logging in to the Portal

To log in:

1. Open Internet Explorer and type the following URL:
   http://<PowerScribe 360 server name>/radportal/login.aspx
   (Replace ***<PowerScribe 360 server name>*** with the name of the server where the *PowerScribe 360 Reporting* Portal is installed.)
2. Type your username. (The default administrator username is **admin**.)
3. Type your password. (The default administrator password is **nuance**.) At your first login, you are required to change your password. Follow the prompts to change the password, and then continue.
4. Click **Sign in**.



Notes:

- *As a security precaution, the* ***Sign in*** *window reappears if the system is idle for an extended period of time. Re-enter your user name and password to continue.*
- *For PowerScribe 360 Reporting Administrator Portal administrators, the session timeout period is 60 minutes; for security reasons, this setting cannot be changed in the Administrator Portal. For users who have been assigned roles, the default is 'never' and this preference can be changed for individual users or at the system level.*
- *For information about assigning roles to users, refer to* *Roles on page 116**.*

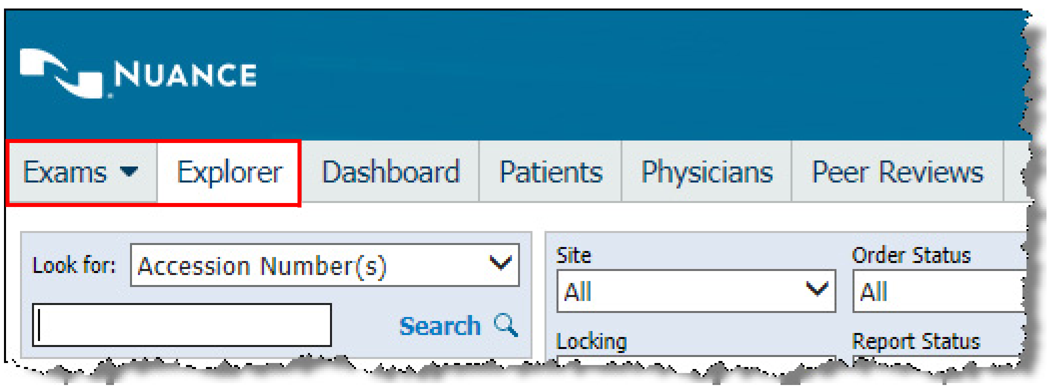
Navigating in the Administrator Portal

This section assumes that you are an administrator authorized to log into the Administrator Portal. Other users see other portals upon logging in.

Logging In for the First Time

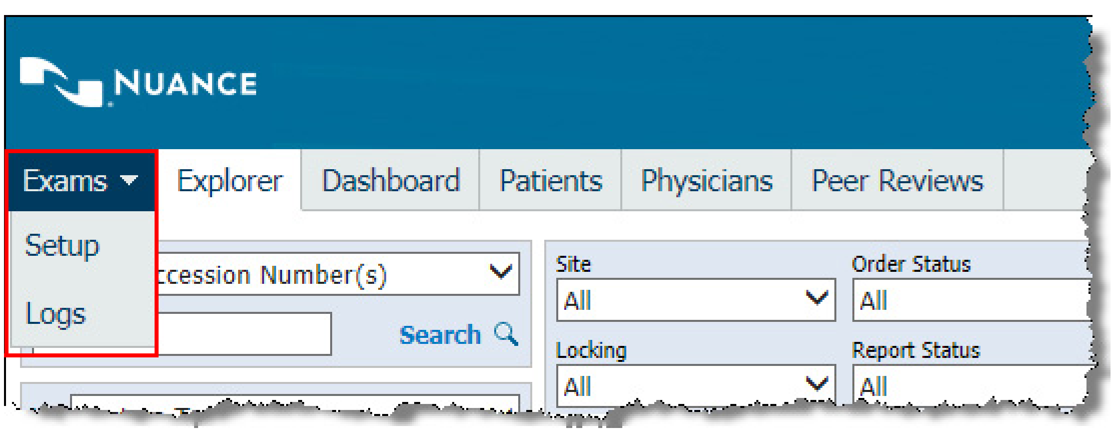
The very first time you sign in to the **Portal** as an administrator, you see the **Explorer** tab of the **Exams** group.

Note: *On all subsequent logins, you return to the group and tab on which you last worked.*



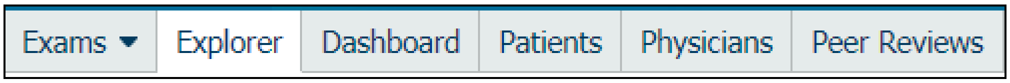
Choosing a Group

The **Administrator Portal** is divided into three main *groups*: **Exams**, **Setup**, and **Logs**. To select a different group, move your mouse cursor over the current group heading, located at the far left of the menu bar. The group list opens, allowing you to select a new group. The following illustration shows the Administrator Portal's groups with the **Exams** group selected.



Overview of the Administrator Portal and Its Groups

Exams Group



The **Exams** group contains the following menu tabs:

- **Explorer**: Provides access to all the orders and reports in the system. From this page, you can search for reports based on criteria such as patient name, MRN, or accession number; view and print reports; and take specific actions on reports, such as resetting a report's priority, editing diagnosis codes, or changing the patient MRN. In addition, you can associate or dissociate multiple orders with a report, and view the audit trail for a selected order or report. Refer to *Speech Configuration Options, beginning on page 180*.
- **Dashboard**: Provides a real-time view of activity in the system. You can see all users logged in to the system, the activity they are performing, and recent messages sent to and received from the RIS.
- **Patients**: Provides access to all the patient information in the system. You can search for patients, and modify their demographic, visit, and insurance information.
- **Physicians**: Provides access to all the referring physicians in the system. You can search for referring physicians and modify their demographic and insurance information. *Creating a Physician Account, beginning on page 123* and *Modifying a Physician Account, beginning on page 125*.

  Caution: *Do not use the* ***Physicians*** *tab for creating radiologist accounts for dictation. Use the* ***Accounts*** *tab in the* ***Setup*** *group for creating dictation users. In addition, do not use the* ***Physicians*** *tab to create accounts for access to the Administrator Portal; use the* ***Accounts*** *tab in the* ***Setup*** *group for these accounts as well.*

- **Peer Reviews**: Allows you to view reports and edit existing peer review ratings.

Note: *Peer Review is a purchasable feature. Contact your Nuance account executive for more information.*

Setup Group

The **Setup** group contains the following menu tabs:

- **Accounts**: Provides access to all user accounts in the system. Here you can search for specific accounts, modify the properties of existing accounts (including user preferences), create new accounts, and perform other account activities.
- **AutoText**: Provides access to all AutoText entries (also referred to as macros, templates, or shortcuts) used in the system. You can search for AutoText containing specific text, modify AutoText, import AutoText entries, and perform other tasks.
- **Bridge**: Defines the settings of the RIS interface, and allows you to start and stop the service.

  Caution: *Do not make changes to the **Bridge** tab unless Nuance technical support has advised you to do so.*

- **Procedures**: Allows you to manage your organization's procedure information. From here you can import and export your site's Procedure Master Translator (formerly known as the ChargeMaster), categorize procedure codes by anatomy and modality, and perform other tasks.
- **Sites**: Your system might have a single site, or multiple sites. A site is typically mapped to an RIS or HIS; orders are unique within a site. All the accession numbers and MRNs within a site are unique. On the **Sites** tab you can manage site-level preferences.
- **Speech**: On this tab you can set default values for the system, assign the default acoustic model and language model, set up system-wide formatting options, see which workstations have updated their formatting options and when the updates occurred; and manage custom words. (Note that all of these settings can be changed for individual providers.)
- **System**: Use this tab to configure system-wide preferences. Preferences you set at the site or account level will override those at the system level. You can also use the **System** tab to import providers and accounts with roles into the system, and add insurance information. To set system preferences and other settings, refer to *Configuring the System, beginning on page 23*.

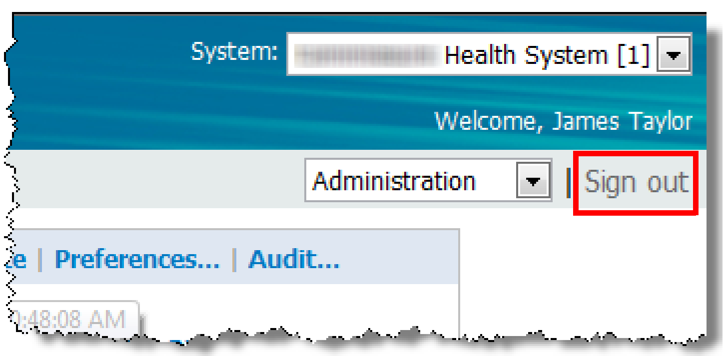
Logs Group

The **Logs** group contains the following menu tabs:

- **ACO/LMO**: View events that occurred on the speech server during acoustic or language model optimization.
- **Bridge**: View events that occurred on the bridge service. You can export the events to an *.xml* file for further analysis.
- **Communications**: View communications from *PowerScribe 360 Reporting* for fax, email, critical findings (*PowerScribe 360 Critical Results*), and support requests.
- **Exceptions**: This is where most system errors are logged. You can search for errors on specific criteria, and then use the information for troubleshooting.
- **Reports**: View statistical reports designed to help administrators. Reports provide detailed information on turnaround times, provider and transcriptionist productivity, use of AutoText, and many other aspects of system activity. (Note that if the reporting package has not been installed on your system, this tab is named **Statistics**.)

Signing Out of the Administrator Portal

When finished working in the **Portal** click the **Sign out** link (located in the upper-right portion of the menu bar) to return to the sign-in window, or just close your browser.



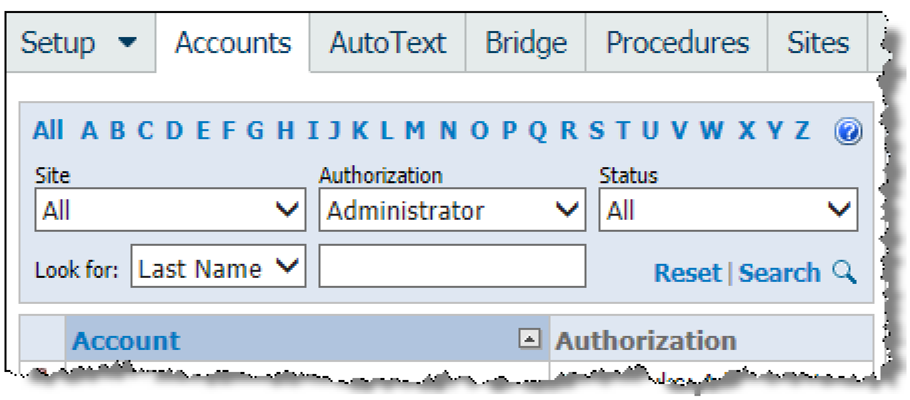
Creating Administrator Accounts

In the *PowerScribe 360 Reporting* system, administrators are users who have been granted some or all of the administrator rights. An administrator might also be a user who has been assigned to a specific role in the *PowerScribe 360 Reporting* system.

You can configure a user as either a *system* administrator or a *site* administrator. A system administrator has access to all sites in the system. Create a site administrator if you want to limit the user's administrative rights to specific sites. Both administrator types contain the same set of privileges from which you can select.

Administrators cannot edit their own administrative rights. If there is a need for an administrator's rights to be modified, another administrator must edit the account.

Searching for an Administrator Account



To perform a filter search:

1. Select **Administrator** from the **Authorization** drop-down list.
2. If desired, use one or both of the following criteria:
   - Select a **Site** to find administrators at a particular site in the system.
   - Select an option from the **Status** drop-down list to search for administrators by logon status, or whether the account is active or inactive.
3. Click **Search**. Any administrators who meet your criteria appear in the list.

To search with the Look for field:

1. In the **Look for** field, select **Last Name**, **First Name**, **Email**, **Identifier**, or **Username.**
2. Enter all or part of the text for which you want to search.

*__Tip:__ In the __Look for__ text field, you can use an asterisk (*) as a wild-card character. For example, if you do not know the exact last name of an administrator but you know the name ends in the letters MAN, type __*man__ and click __Search__.*

Note: In order to search using a partial name, you must include the asterisk (*) wild-card character. Using the previous example of MAN without the wild-card character, the search would have failed to return anything unless someone actually had the last name of MAN.

3. Click **Search**. Any users who meet your criteria appear in the list.

To search for an administrator using the alphabet links:

1. Select **Administrator** from the **Authorization** drop-down list.
2. Use the **A** through **Z** links to display accounts with last names beginning with a particular letter.

Click **Reset** to return all search fields (**Site**, **Authorization**, **Status**, and **Look for**) to their defaults.

Creating an Administrator Account

To create an administrator account:

1. In the **Setup** group, click the **Accounts** tab. The left side of the window lists all the users in the system, and the right side displays a form you can use to create a new user.

   *Note: If a user's information already appears on the right, click **Clear**. **Clear** simply removes the data from the window; it does **not** delete the user from the system.*

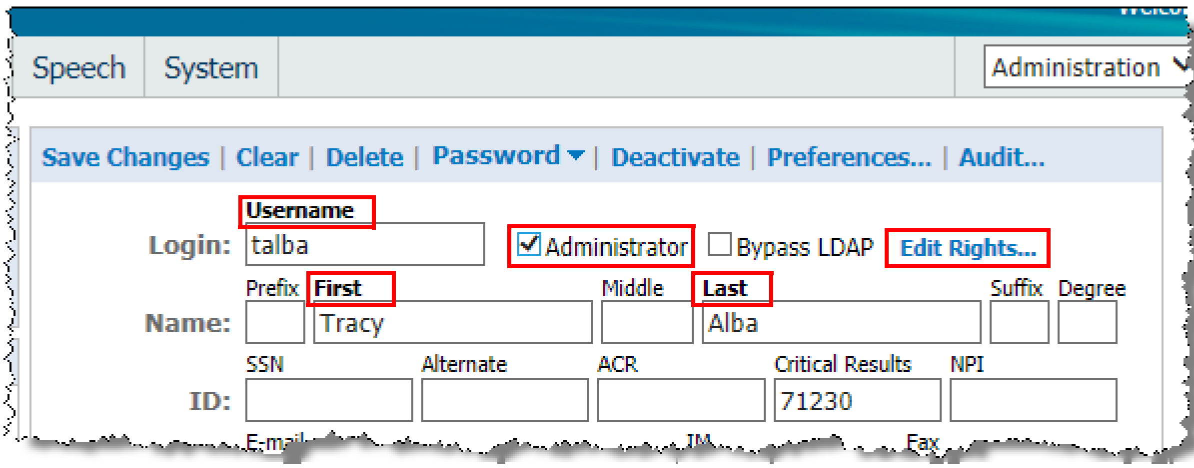
2. Enter a **Username** (not case sensitive) and **Password** (case sensitive) for the user.

   *Tip: If your system is configured to require users to change their passwords at their first login (that is, if the **Setup > System > Preferences > Security tab > Forced password change interval** preference is set to anything other than **Never**), consider creating a basic password for all users to use at first, allowing each user change to a more secure one at first login.*

3. Enter a **First** name and a **Last** name for the user.

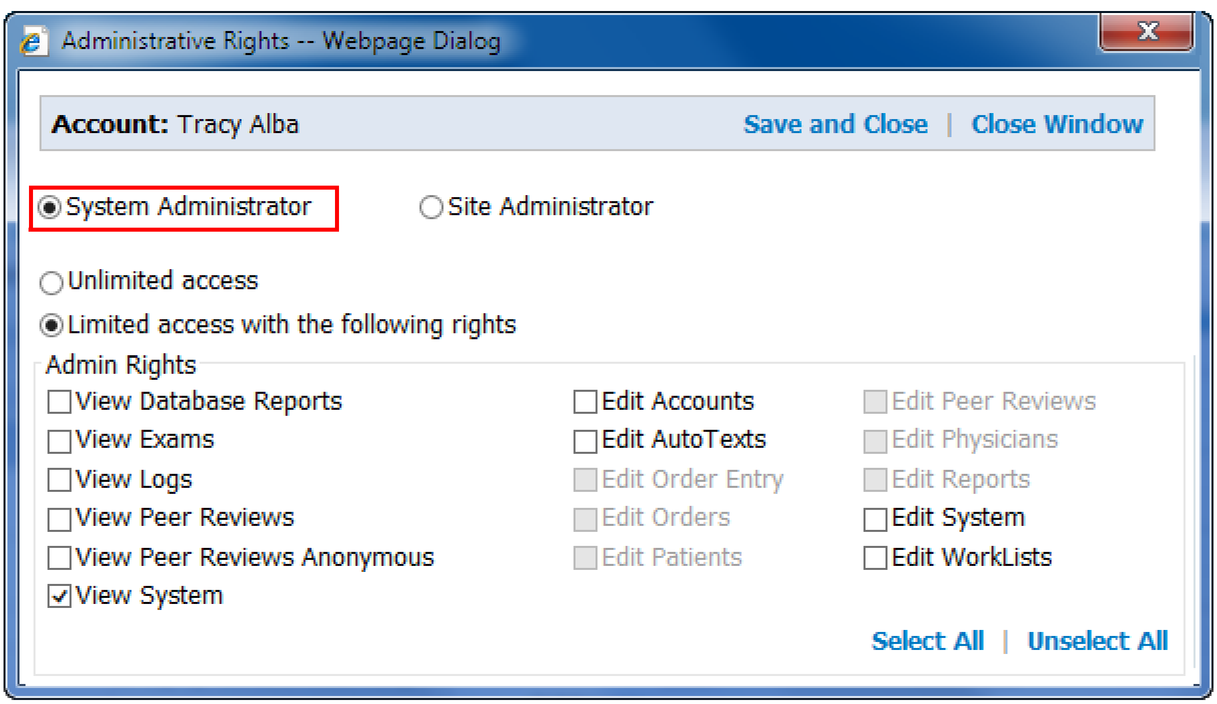
   *Note: The field names labeled in **bold** text (**Username**; **Password**; **First**; and **Last**) are required fields. All other fields are optional.*

4. Select the **Administrator** check box.

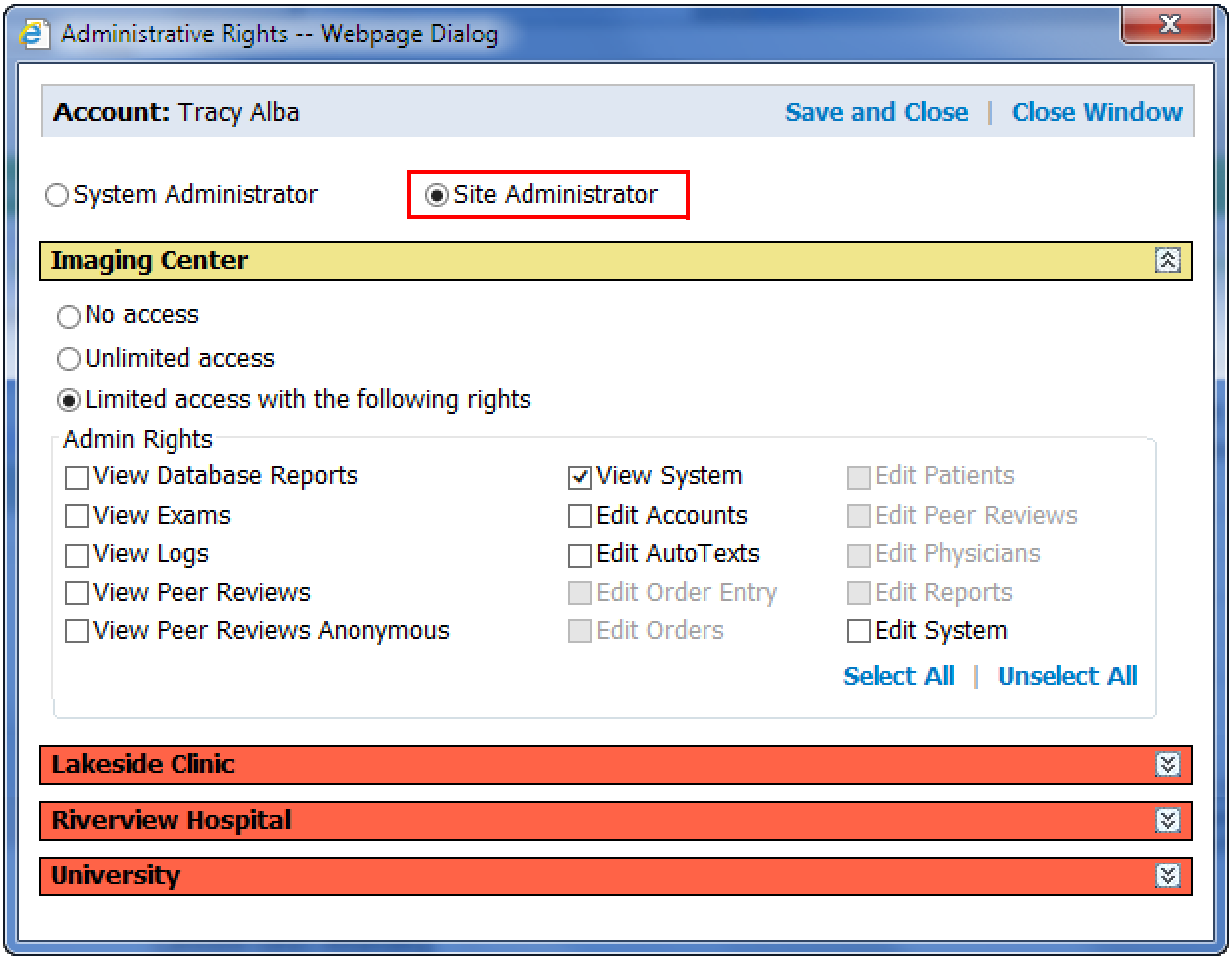


5. **Optional**: Fill in the **ID**, **Contact**, and **Address** information for the user.
6. Click the **Create New** link to save the user account. (The Create New link changes to **Save Changes**.) You can now edit the administrator's rights.
7. Click the **Edit Rights** link, to the right of the **Administrator** check box. The **Administrative Rights** dialog box opens

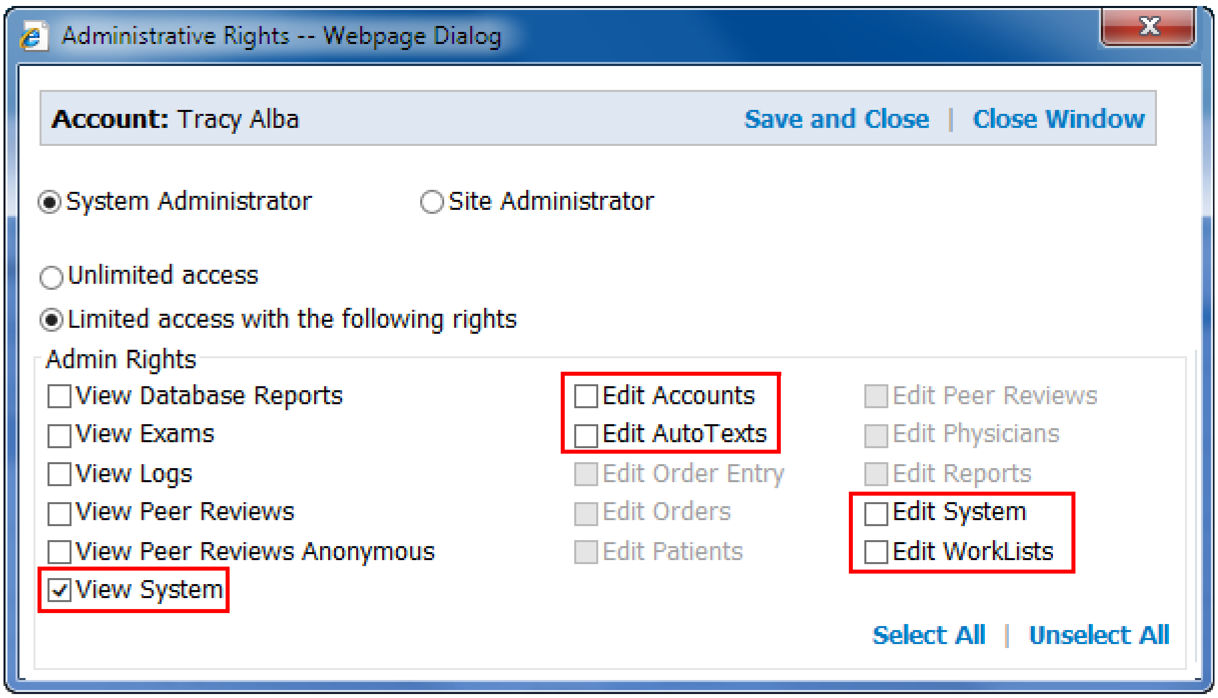
   By default, the **System Administrator** user type is selected.



To create a site administrator, click the **Site Administrator** button and open the site you want to configure by clicking the open icon at the far right side of the site name. In the illustration below, the Imaging Center site is open for editing. Lakeside Clinic, Riverview Hospital, and University are available for configuration as well. Initially, **No access** is selected for all sites to prevent unintended access.



Note: For ***View Exams****,* ***View Peer Reviews****, and* ***View System****, you must first select the* ***View*** *right before the* ***Edit*** *rights become available. For example, when you select* ***View System****, the* ***Edit Accounts****,* ***Edit AutoTexts****,* ***Edit System****, and* ***Edit Worklists*** *selections become available. In other words, you must have View rights before you can have Edit rights. This applies to both System and Site administrator accounts.*



8. To limit an administrator's rights, select the **Limited access with the following rights** option. Note that the rights fall into two categories: **View** rights and **Edit** rights. Refer to the table below to select the user's rights.

Admin Right	Function
View Rights	
View Database Reports	Allows access to Reporting Services.
View Exams	Allows read-only access to Explorer, Dashboard, Patients, and Physician pages.
View Logs	Allows read-only access to Communications, Exceptions, Statistics, Bridge, and ACO/LMO pages.
View Peer Reviews	Allows read-only access to Peer Reviews page.
View Peer Reviews Anonymous	Allows read-only access to Peer Reviews page, prevents display of radiologist names (reviewers and reviewees) and disables report preview, unless the user has the **View Exams** right. In the latter case, the report data are available, but not the reviewer.
View System	Allows read-only access to System, Sites, Bridge, Accounts, Speech, and AutoText pages.

Admin Right	Function
Edit Rights	
Edit Accounts	Allows managing user accounts. (You must first select the **View System** right.) ***Note:*** *Only system administrators can edit Accounts; site administrators have view-only rights.*
Edit AutoTexts	Allows managing site and account AutoText. (You must first select the **View System** right.) ***Note:*** *Only system administrators can edit AutoText; site administrators have only view and export rights.*
Edit Order Entry	Allows managing order entry requests, including authorization. (You must first select the **View Exams** right.)
Edit Orders	Allows editing order properties (for example, priority) and metadata that are order-related, like custom fields. It also allows deleting unreported orders and unlocking orders. (You must first select the **View Exams** right.)
Edit Patients	Allows editing patient data. (You must first select the **View Exams** right.)
Edit Peer Reviews	Allows managing peer reviews, including verifications and transmissions to the ACR. (You must first select the **View Peer Reviews** right.)
Edit Physicians	Allows editing physician data. (You must first select the **View Exams** right.)
Edit Reports	Allows editing report properties (for example, resetting the status to Draft or associating/dissociating orders to or from a report) and metadata that are report-related, like diagnosis (ICD-9) codes. It also allows changing or resetting the radiologist and transcriber of a report, assigning orders to radiologists, deleting a report, and holding/resending a report. (You must first select the **View Exams** right.)
Edit System	Allows editing global system, site and Bridge properties, preferences, and general configuration. Allows access to the Speech tab in the Setup group. (You must first select the **View System** right for the administrator to use this right.) ***Note:*** *Only system administrators can edit system-level items; site administrators do not see the System tab at all. However, site administrators can add and manage items on the Bridge tab.*
Edit Worklists	Allows creating and editing worklists. (You must first select the **View System** right.) ***Note:*** *Only system administrators can edit worklists; since worklists appear on the System tab, they are not available to site administrators.*

To give the administrator full rights, select the **Unlimited access to all system functions** option. This option gives the user all the rights shown in the **Admin Rights** group box below, as well as any other administrative rights. Select this option if you want no limits to this user's rights.

Caution: *It is recommended that you* ***not*** *select this option, but assign administrators only the specific rights they need.*

9. When finished, click **Save and Close**.

Practical Exercise

Test your work: Log out of the Portal, and log back in as the new administrator user you just created.

Chapter 3

Configuring the System

Objectives

In this chapter, you will:

- Describe the three-level configuration hierarchy
- Configure system options, including:
  - Basic system settings
- Configure BI-RADS codes, if applicable

Introduction to System Configuration

This chapter provides instructions for configuring your entire system. System settings are found on the **System** tab of the **Setup** group, or in the **Configuration** dialog box you can access from that tab. For information on optional BI-RADS code configuration, refer to *Configuring BI-RADS Codes*, beginning on page 38.

Configuring the Basic System Settings

Most of the settings described in this section are configured only by Nuance personnel. The information in this section is provided for your reference.

Configuring the LDAP Settings

If an LDAP server exists, such as Microsoft Active Directory or ADAM, it can be used for authenticating user login. This eliminates the need to maintain passwords in *PowerScribe 360 Reporting* or to synchronize them with other systems such as PACS (Picture Archiving and Communication System).

To configure the LDAP settings:

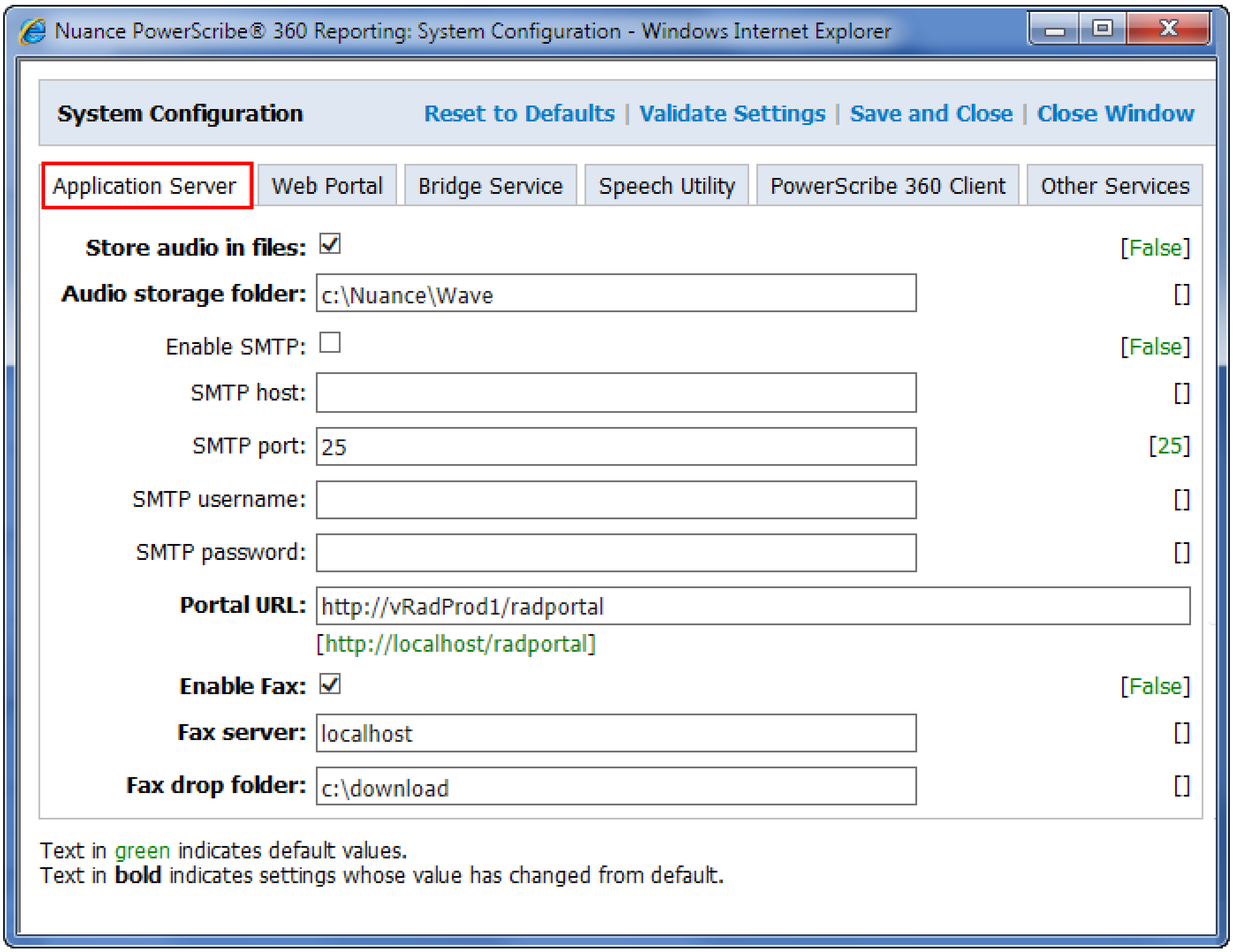
1. Select the **System** tab in the **Setup** group.
2. In the **Path** field, specify the parts of the LDAP path, not including the user name. These parts are the distinguished name attributes (for example, ‘O=County Hospital;C=US’).
3. In the **Domain** field, specify the host name or IP address of the LDAP server.
4. In the **Authentication** field, select the authentication method used by the LDAP server.
5. Enter the default administrator user name and password for your LDAP system.
6. Enter the user name pattern for your LDAP system.
7. Select the **Active** box to use the configured LDAP settings. If you do not select this option, the Nuance internal username/password authentication is used.
8. Click **Save Changes**.

Configuring the Application Server

__Note:__ Most of the settings on the __Application Server__ tab are configured only by your Nuance representative. You should not change them unless you are directed to do so.

To configure the application server:

1. In the **Setup** group, select the **System** tab.
2. Click **Configuration**. The **System Configuration** dialog box opens.
3. Select the **Application Server** tab.



4. Enter or select the appropriate settings for the application server:
   - In most cases, the **Store audio in files** option is set to the appropriate value during system installation, and you do not need to change it. If your providers are using self-edit and you do not want to store the *.dra* files for playback, or if you do not have sufficient room for storage, your Nuance representative might direct you not to select this option.

- If you select the **Store audio in files** option, supply a drive and folder location in the **Audio storage folder** field. This folder is the one set up by your Nuance representative on the server where RAS (Radiology Application Service) is located; be sure to use the exact server name and path to this folder.
- Modify the SMTP settings only if your email configuration has changed. For example, the host address might be *smtphost.mycompany.com*.
- In the **Portal URL** field, enter the address of the Administrator Portal page, for example, **http://<server>/<folder name>**.

Note: *After you convert to PowerScribe 360 Reporting, the address shown in the illustration on the previous page will be incorrect. Your Nuance representative will enter the new URL here.*

- To allow users to fax (specifically, *PowerScribe 360 Reporting* uses Microsoft Faxing) reports or orders from the **Explorer** page in the Portal (see *Faxing an Order or Report*, beginning on page 488.):

  a. Select **Enable Fax.**

  b. Leave the **Fax server** field blank if the fax server is on the same computer as the Portal application software, as is typical. Otherwise, enter the network location of the fax server, for example, **http://<server>/<folder name>**.

  c. The fax drop folder will have been set up either on the local computer or on a remote system. Enter the folder's location, for example, **C:\<folder name>**.

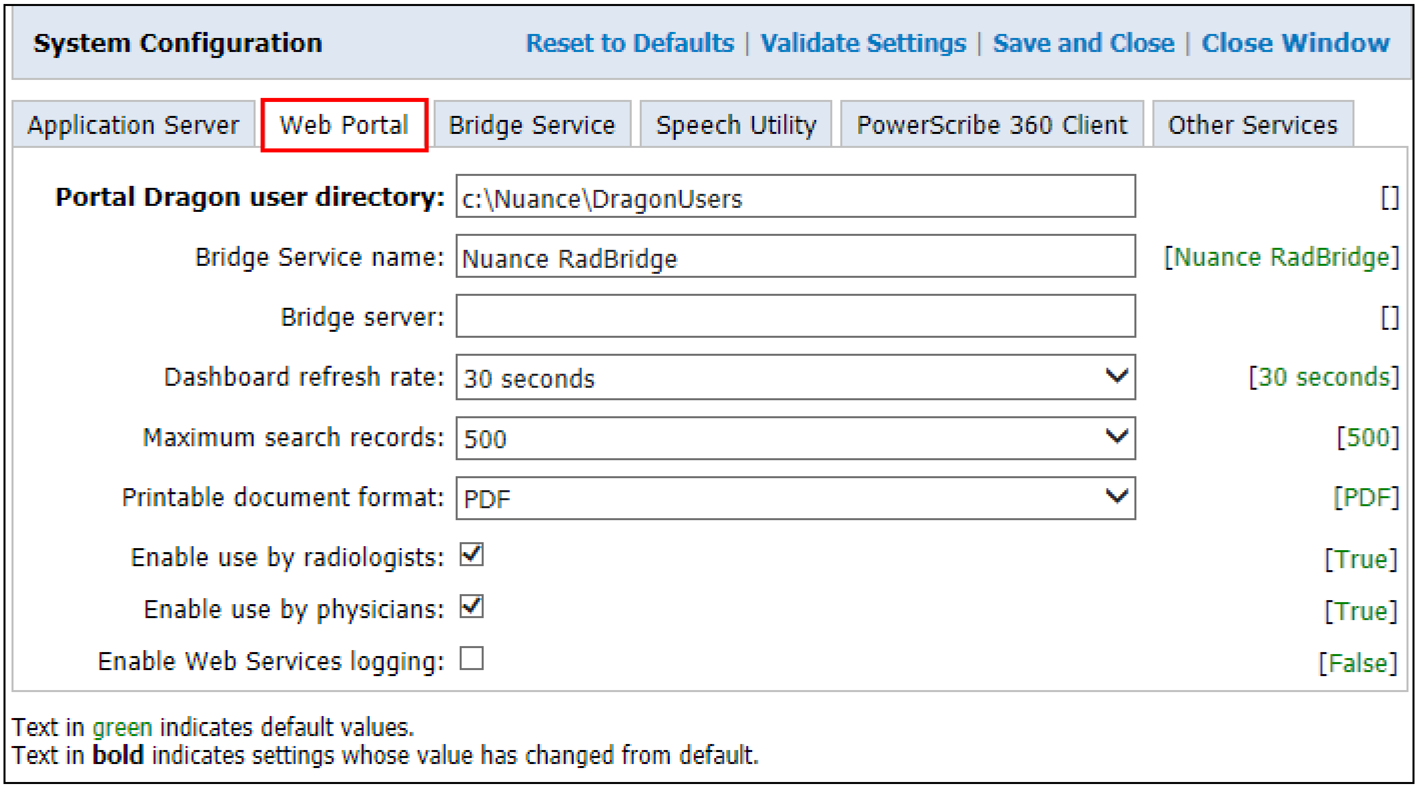
5. Click **Save and Close**.

Configuring the Web Portal

Note: *The settings on the **Web Portal** tab are configured by your Nuance representative. You should not change them unless you are directed to do so.*

To configure the Web Portal:

1. In the **Setup** group, select the **System** tab.
2. Click **Configuration**. The **System Configuration** dialog box opens.
3. Select the **Web Portal** tab.



4. Enter or select the appropriate settings for the Web Portal:
   - In the **Portal Dragon user directory** field, enter the location of the folder your Nuance representative created to store the Dragon user information. This folder usually resides on the Portal server. Use this format: **<server>****<foldername>**.
   - Do not change the default value in the **Bridge Service name** field, **Nuance RadBridge**, unless directed to do so.
   - In the **Dashboard refresh rate** field, select the interval at which you want the **Dashboard** tab to reload.

     Best Practice!

     Best Practice: *Set this value to 30 seconds or greater. Anything less than 30 seconds will constantly refresh and possibly not show any results.*
   - Select the desired value in the **Maximum search records** field.

Best Practice!

Best Practice: *Setting this value to 500 can improve the response time of your database searches. Note that this value affects both the client and administrator Explorer window.*

- Select one of the following **Printable document formats**: **PDF**, **DOC**, or **DOCX**.
- Select **Enable use by radiologists** if you want your *radiologists* to be able to access the client using the Web Portal. Note that providers cannot use speech recognition to edit their reports when using the Web Portal. They can view reports and manually edit them using their keyboard and mouse. Consider using this method for sites that would like to provide system access at home for its providers without having to load the full *PowerScribe 360 Reporting* client on the each provider's home computer. Providers must be connected to the hospital's *PowerScribe 360 Reporting* system, either by VPN or SSL, to use this feature.
- Select **Enable use by physicians** if you want *physicians* to be able to use the Web Portal. This allows the attending, consulting, referring physicians access to the portal to view reports once they are in a preliminary status in the system. These physicians can view only their own reports. VPN or SSL access is required for this feature to work properly.
- Select **Enable Web Services logging** to log events from the Web Services. Default value is **False** (no logging).

5. Click **Save and Close** to save the settings.

Configuring the Bridge Service

The *PowerScribe 360 Reporting* HIS Bridge service exists to share patient information and orders with HIS or RIS systems. The Bridge service receives inbound order and patient information and stores it in the *PowerScribe 360 Reporting* database. As radiologists create reports and sign them, the Bridge service sends them out to the HIS or RIS systems in the proper format for the receiving systems.

To activate and use the Bridge service, your Nuance representative will need to create a Bridge link and specify the type of data that is to be transferred. Various options control the way the data is transferred.

Configuring Bridge Logging to the Database

You can select the **Enable Bridge logging to database** option to activate extensive logging of the Bridge service to the database, including the complete HL7 message sent and received. It is suggested that you enable this option only while the interface is first being tested, and then disable it after testing is complete, to maximize database performance and conserve data storage space. Whether or not you enable this option, you can always search for and view individual Bridge events on the **Bridge** tab of the **Logs** group; the **Log** text box might appear empty when this option is disabled.

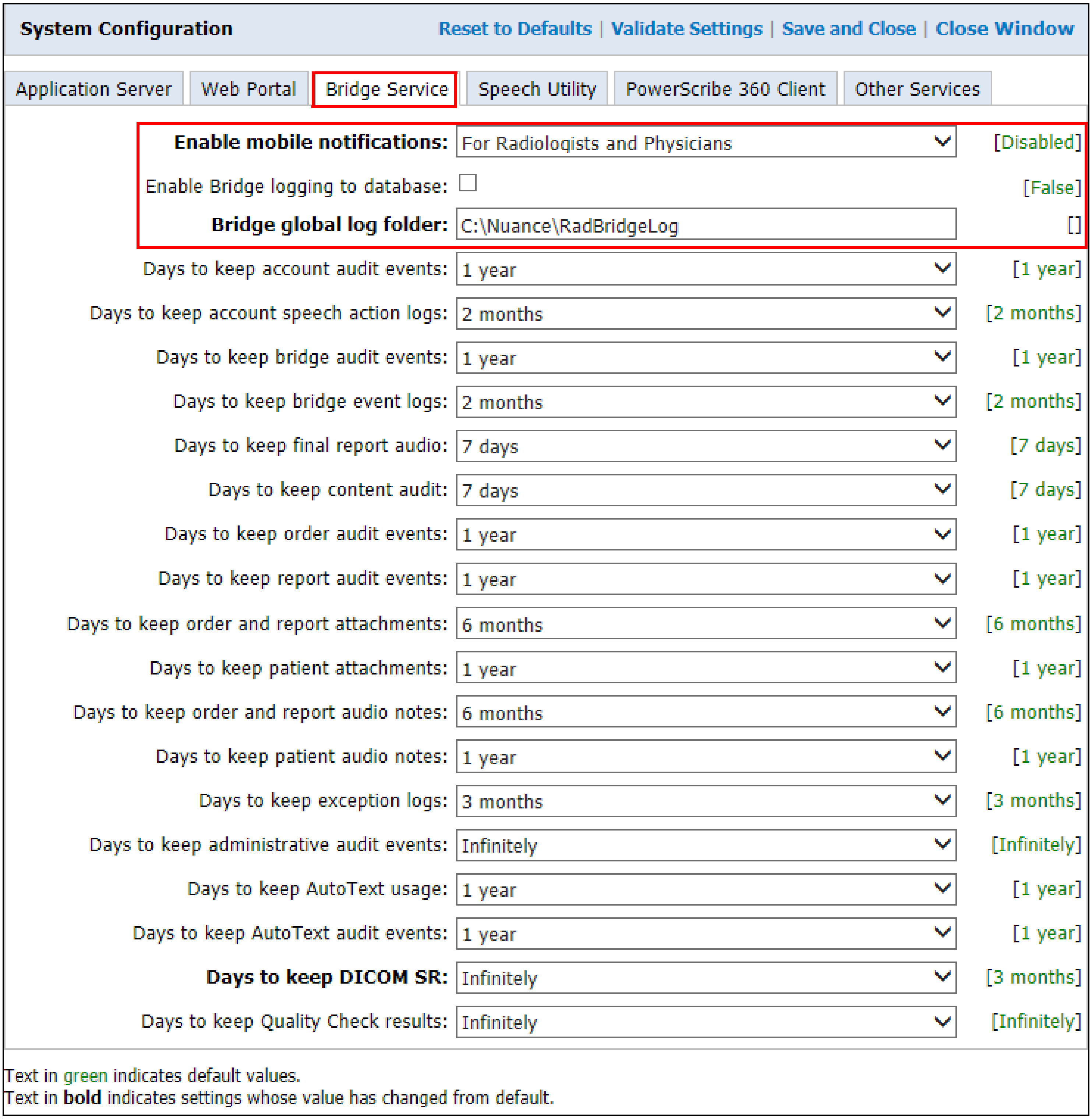
To configure the Bridge service:

1. In the **Setup** group, select the **System** tab.
2. Select the **Bridge Service** tab in the **System Configuration** dialog box.
3. To select the type of user who should receive mobile notifications, select one of the choices from the **Enable mobile notifications** drop-down list: **For Radiologists**; **For Physicians**; **For Radiologists and Physicians**; or select **Disabled** to send no mobile notifications.
4. To enable Bridge logging of both inbound and outbound messages, select **Enable Bridge logging to database**. Or, to disable logging, remove the check mark from this option.

   Note: *Since this feature is resource intensive, select the Enable Bridge logging to database check box* ***only during testing****. Clear this check box when you move to your production environment.*

5. In the **Bridge global log folder** field, enter the location where the logs are stored, for example, **C:\<server>\<folder name>**. In most cases, you do not need to change the default setting.
6. The remaining settings on this tab govern the number of days the system is to store various event log and audio files. In most cases you do not need to change the default settings.
   - Note that if you set a large value for items such as the **Days to keep final report audio** or **Days to keep content audit** (for example, one month or more), you must ensure that you have allocated sufficient disk space for storing the *.dra* audio files.

- If your order and report attachments are *.jpg* files or other large files, you should consider reducing the number of days to keep the attachments.



The following table describes the events shown in the bridge service tab.

Event	Description
Days to keep account audit events	Number of days to keep individual user's account audit trail. This audit trail retains events that appear in the **Account > Audit** area for each user, including Logon, Logoff, and Change Password events.
Days to keep account speech action logs	Speech action logs are located in the **Logs > ACO/LMO** tab.
Days to keep bridge audit events	Bridge audit events are located in the **Logs > Bridge** tab. Includes **Inbound**, **Outbound**, and **Failed Today** logs.
Days to keep bridge events logs	Number of days to retain bridge event logs
Days to keep final report audio	***Best Practice**: Set to no more than 7 days*. If you want to set this value to more than 7 days, your project manager needs to consult with the Nuance technical liaison to ensure that the database can handle the extra amount of data.
Days to keep content audit	Number of days to retain audit information
Days to keep order audit events	For each accession number, the event log is located in **Exams > Explorer**.
Days to keep report audit events	
Days to keep order and report attachments	For attachments in the client, such as an image or a requisition.
Days to keep patient attachments	For attachments on patients when using order entry
Days to keep order and report audio notes	Only pertains to audio notes; text notes are never purged
Days to keep patient audio notes	Only pertains to audio notes; text notes are never purged
Days to keep exception logs	Exceptions that appear in the client or in the administrator module. Can be used as a tool to resolve issues when working with Nuance technical support. Located in **Logs > Exceptions**.
Days to keep administrative audit events	Number of days to keep administrative audit events
Days to keep AutoText usage	Number of days to keep AutoText usage events
Days to keep AutoText audit events	Number of days to keep AutoText audit events
Days to keep DICOM SR	Number of days to retain DICOM Structured Reports
Days to keep Quality Check results	Number of days to retain Quality Check results

7. Click **Save and Close**.

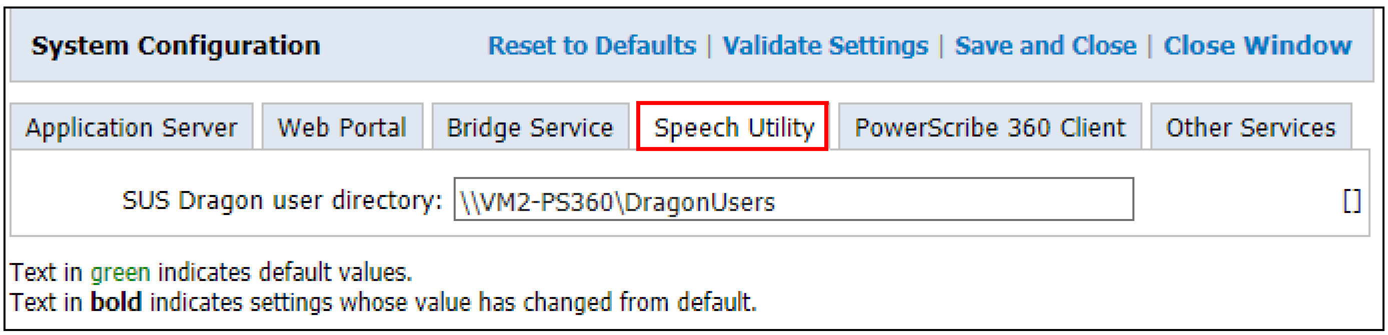
Configuring the Speech Utility Server

Note: *Your Nuance representative sets the option on the* ***Speech Utility*** *tab. You should not change it unless you are directed to do so.*

The **Speech Utility** tab defines where the Dragon users are stored on the application server.

To configure the speech utility:

1. In the **Setup** group, select the **System** tab.
2. Click **Configuration**. The **System Configuration** dialog box opens.
3. Select the **Speech Utility** tab.



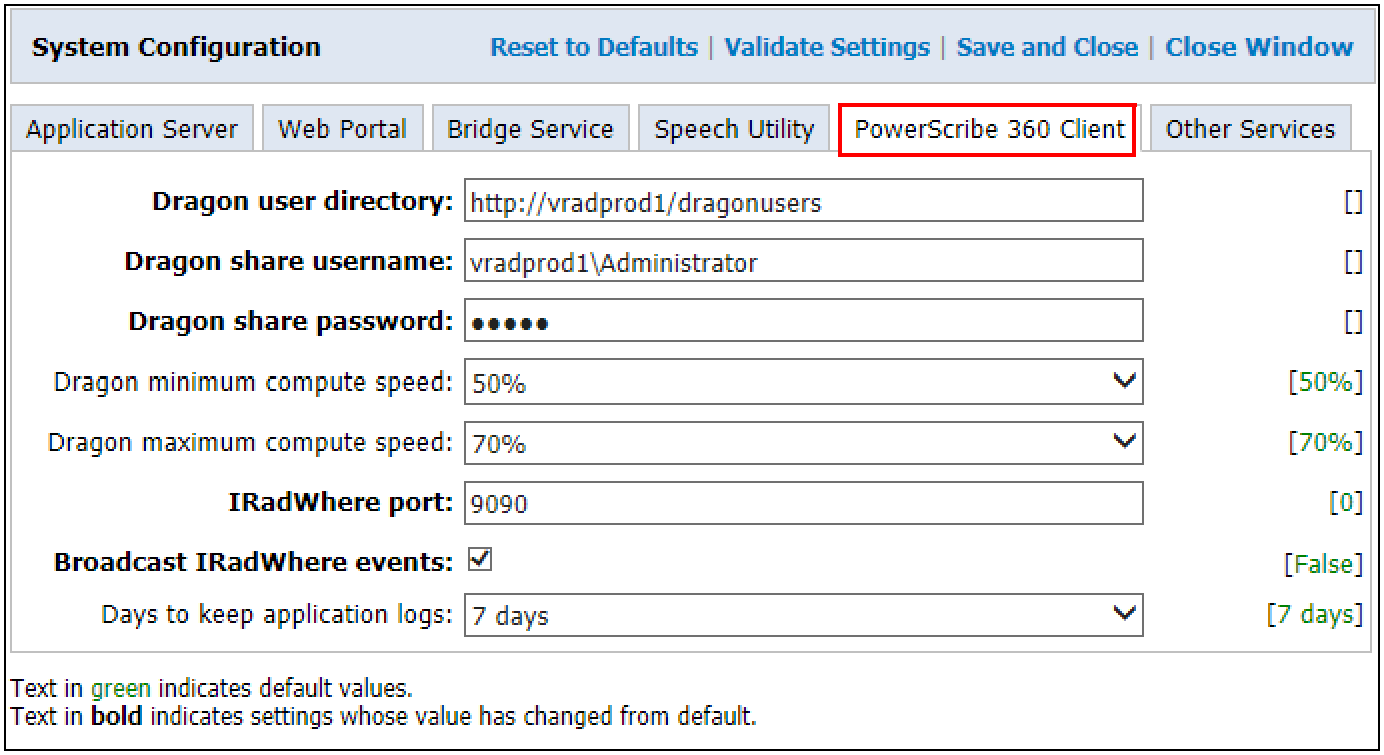
4. Enter the address of the Dragon user directory in the following format: **\\<server>\DragonUsers**. Replace <*server*> with the name of your application server.
5. Click **Save and Close** to save the setting.

Configuring the PowerScribe 360 Reporting Client

Note: *Your Nuance representative sets the options on the* ***PowerScribe 360 Reporting Client*** *tab. You should not change them unless you are directed to do so.*

To configure the PowerScribe 360 Reporting client application:

1. In the **Setup** group, select the **System** tab.
2. Select the **PowerScribe 360 Reporting Client** tab in the **System Configuration** dialog box.

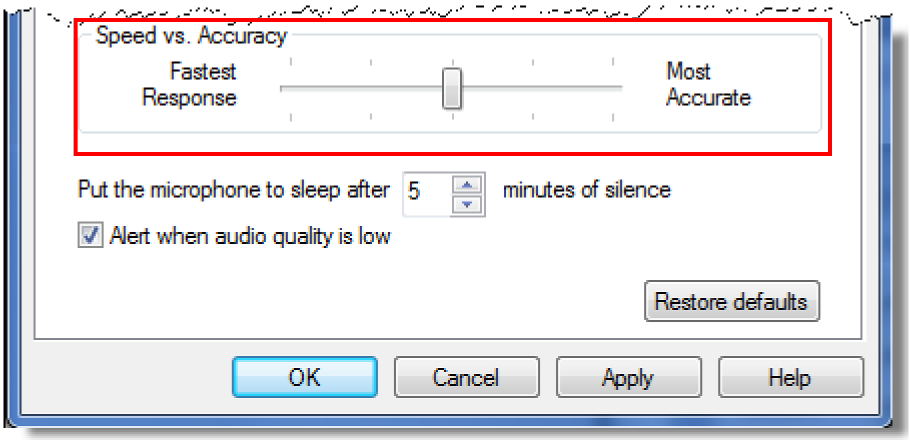


3. Configure the client settings as directed by your Nuance representative:
   - Enter the Dragon user directory location in the following format: **<*server*>\DragonUsers**. Replace <*server*> with the name of the application server.
   - If your organization uses WebDAV (Web-based Distributed Authoring and Versioning):
     – Enter the Dragon share username.
     – Enter the Dragon share password that was set up in the WebDAV configuration in IIS.
   - The **Dragon minimum compute speed** and the **Dragon maximum compute speed** fields adjust the **Speed vs. Accuracy** slider in the *PowerScribe 360*

Reporting client's Dragon options. The following information describes the impact the minimum and maximum settings have on performance:

– Maximum position for **Fastest Response** should be close to, or just to the left of, what is shown in the illustration below. Moving the slider towards **Fastest Response** tells the system to work with a smaller version of the vocabulary, which creates a faster response time.

– Maximum position for **Most Accurate** should not go beyond approximately 70% on the slider bar. Moving the slider towards **Most Accurate** tells the system to work with a larger version of the vocabulary, which can result in a slight delay in response time. You should not move the slider towards **Most Accurate** unless you have speech recognition issues.



Note: *You cannot set the slider beyond the maximum value defined by your system administrator (in the* ***Dragon maximum compute speed*** *parameter located in the Administrator Portal). If your administrator has not increased the maximum compute speed to* ***70%****, and you have moved the slider all the way to the right (towards* ***Most Accurate****), a message box opens displaying the value to which the maximum compute speed value has been set on the system, and explaining that your* ***Speed vs. Accuracy*** *slider has been reset to that value.*

- The **IRadWhere port** setting specifies the TCP/IP port on which the *PowerScribe 360 Reporting* client application listens for incoming requests for PACS desktop integration. This setting must match the value your Nuance representative configured during setup of the RadWhere Connector Components, which were installed at the same time as the *PowerScribe 360 Reporting* client application. In most cases you should not change this setting.
- The **Broadcast IRadWhere events** setting determines whether the PACS desktop integration is to send all reporting events to the client connected through the desktop API. By default, *PowerScribe 360 Reporting* does not send events to the same client that initiated the request. This setting is dependent on the specific PACS vendor's requirements.
- Select a value for the **Days to keep application logs** parameter. Default is **7 days**.

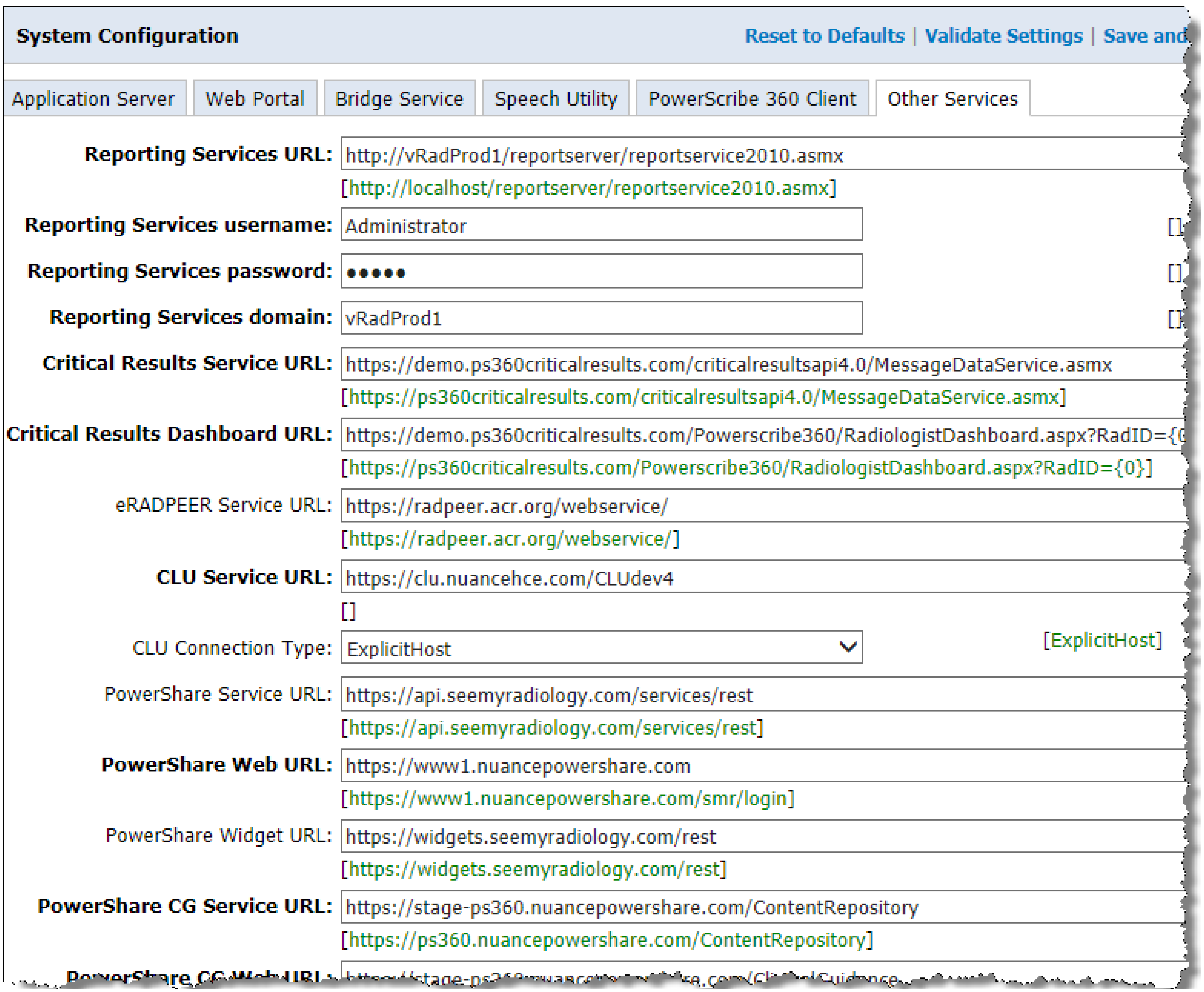
4. Click **Save and Close** to save your settings.

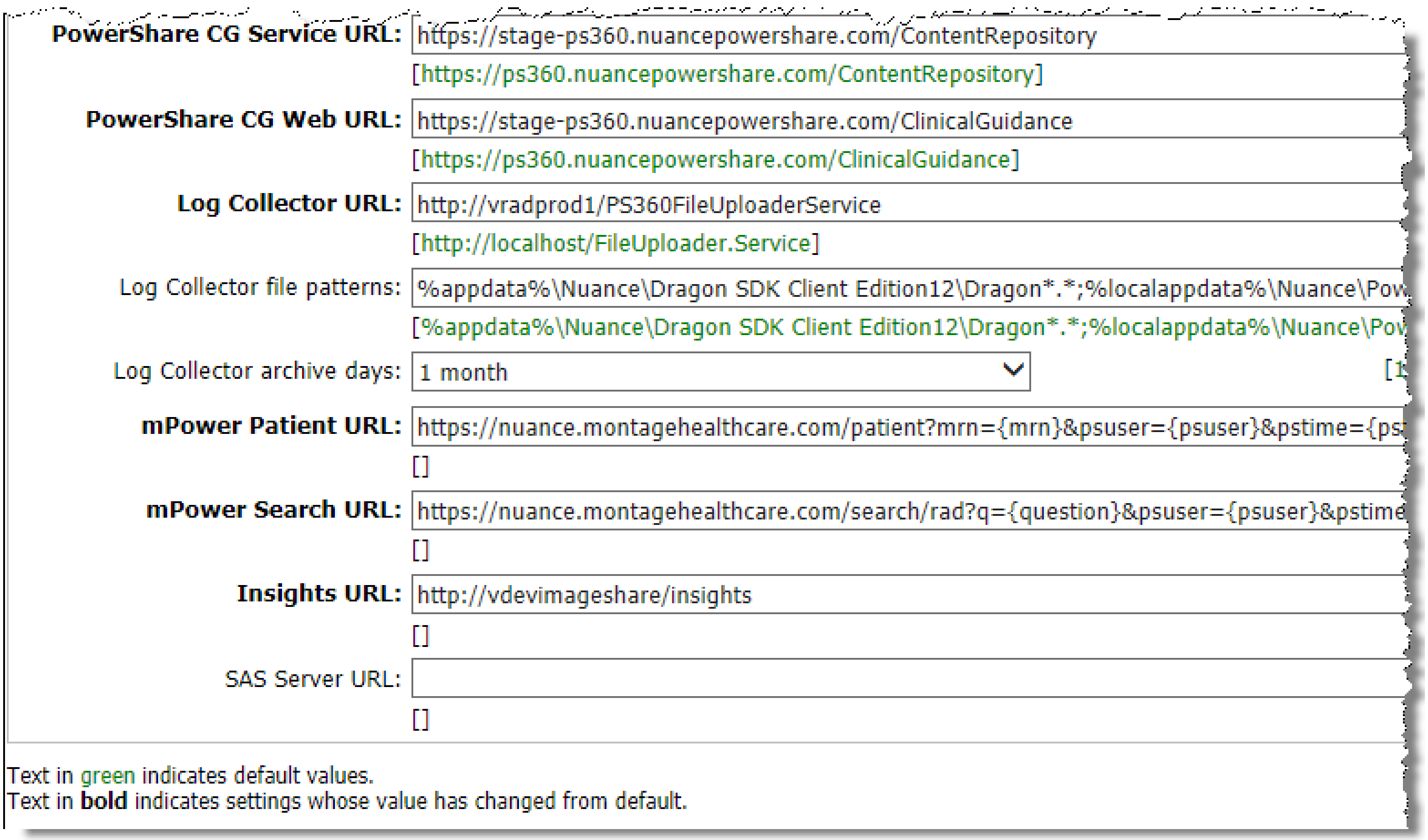
Configuring Other Services

Note: *Your Nuance representative sets the options on the* ***Other Services*** *tab. You should not change them unless you are directed to do so.*

To configure the other services:

1. In the **Setup** group, select the **System** tab.
2. Click **Configuration**.
3. Select the **Other Services** tab in the **System Configuration** dialog box. (See the example illustrations on this page and the next page; we divided the illustration in half due to the number of items on this tab.)





4. Configure the Reporting Services items:

Best Practice!

Best Practice*: If your organization purchased the reporting option, be sure to configure the Reporting Services items described below. The reporting module includes Author Productivity, Editor Productivity, and TAT types of reports.*

- Enter the **Reporting Services URL**.
- Enter the **Reporting Services username** and **password** that was configured by your Nuance representative when your system was set up.
- Enter the **Reporting Services domain** in the following format: **http://localhost/reportserver/ReportService2010.asmx**. If the reporting services are not on the Portal server, replace 'localhost' with the name of the server on which they reside.

5. If your organization purchased the *PowerScribe 360 Critical Results* option, enter or verify the **Critical Results Service URL** and the **Critical Results Dashboard URL**. (*PowerScribe 360 Critical Results* is a purchasable feature. Contact your Nuance account executive for more information.)

6. If your organization has an eRADPEER account with the ACR (American College of Radiology), enter the **eRADPEER Service URL**.

7. If your organization purchased the *Quality Check* consistency checker option, enter or verify the **CLU Service URL** and the **CLU Connection Type**. (*Quality Check* is a purchasable feature. Contact your Nuance account executive for more information.)

8. If your organization purchased the *PowerShare Network* option, enter the *PowerShare Network* information for your system. (*PowerShare Network* is a purchasable feature. Contact your Nuance account executive for more information.)
9. Set the log collector information for your organization.
10. If your organization purchased the *mPower* (previously known as Montage) search and analytics option, enter or verify the **mPower Patient URL** and the **mPower Search URL**. (*mPower* is a purchasable feature. Contact your Nuance account executive for information.)
11. Enter the Insights URL.
12. Enter the SAS Server URL. (Note that this field appears only if it was selected during installation.)
13. Click **Save and Close** to save your settings.

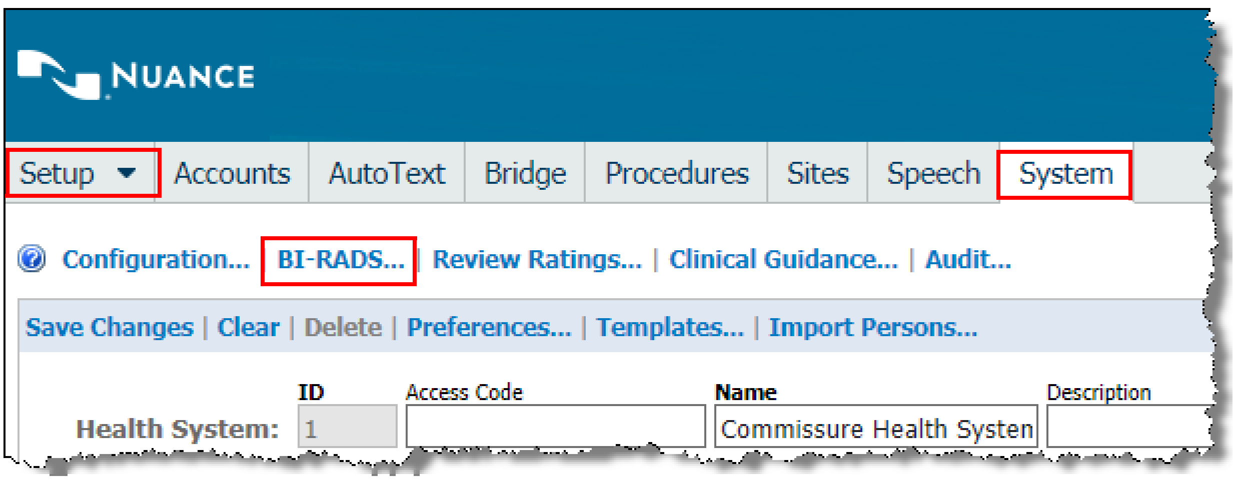
Configuring BI-RADS Codes

You can configure the BI-RADS codes and the text of the corresponding BI-RADS statements that appear on mammography reports.

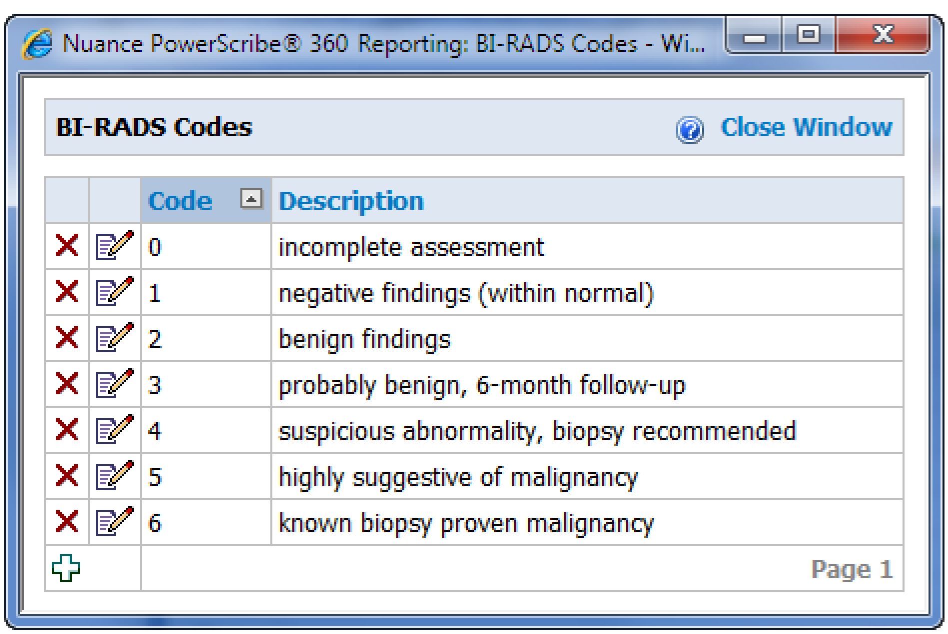
Only a single BI-RADS code can be assigned to a study. If you need to use codes that represent follow-up recommendations, you should use custom fields for both BI-RADS codes and any other codes, rather than using the feature described in this section.

To create a BI-RADS code:

1. Select the **System** tab in the **Setup** group.
2. Click the **BI-RADS** link.



The **BI-RADS Codes** dialog box opens.



3. Click the plus sign. A new row is added to the table.
4. Type the code and description.
5. Click the **Save** icon to save your changes.

To edit a BI-RADS code:

1. In the **Setup** group, select the **System** tab.
2. Click **BI-RADS...**. The **BI-RADS Codes** dialog box opens.
3. Click the **Edit** icon next to the code you want to modify. The code and description are opened for editing.
4. Type your changes to the code, description, or both.
5. Click the **Save** icon to save your changes.

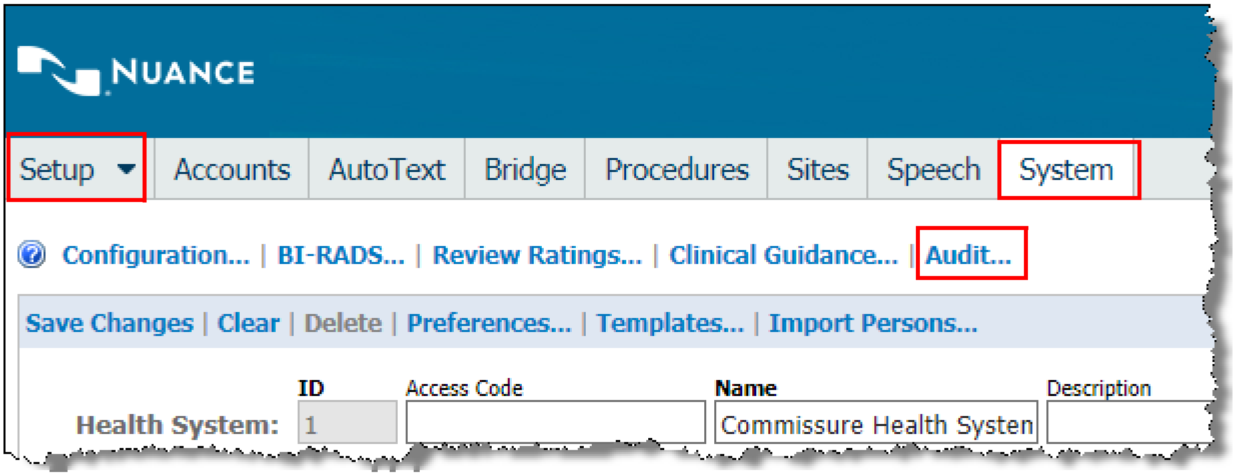
To delete a BI-RADS code:

1. In the **Setup** group, select the **System** tab.
2. Click **BI-RADS...**. The **BI-RADS Codes** dialog box opens.
3. Click the **Delete** icon next to the code you want to delete. A confirmation message appears.
4. Click **OK** to delete the item.

Auditing System Events

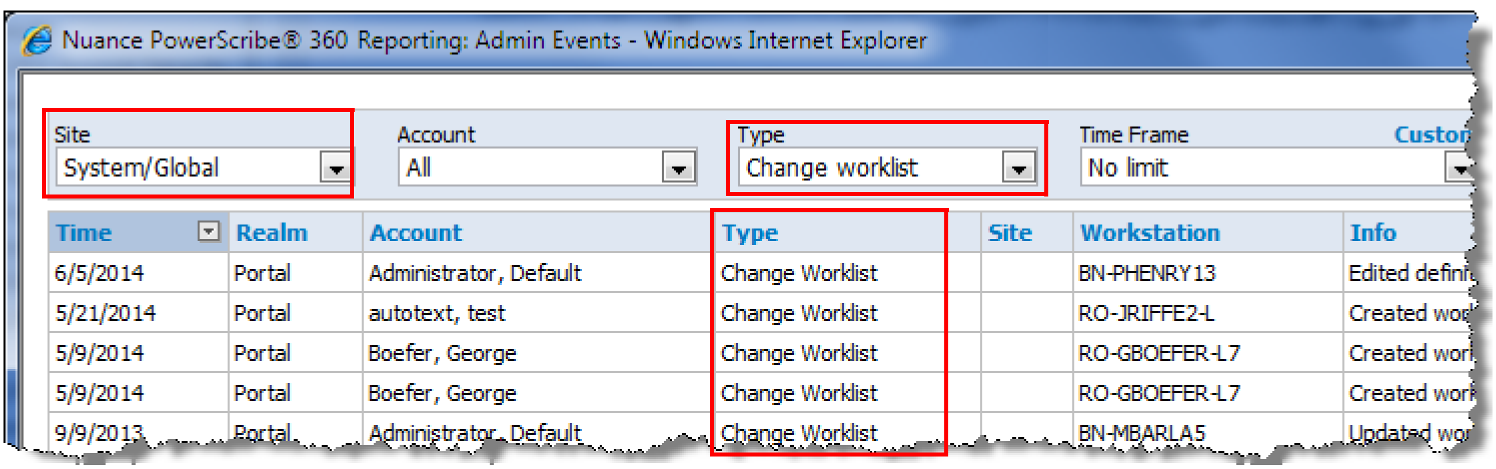
Administrators can now audit several types of events at both the system and site levels.

- To view the audit log at the system level, click **Setup** > **System** > **Audit**.



Filter your audit event list by:

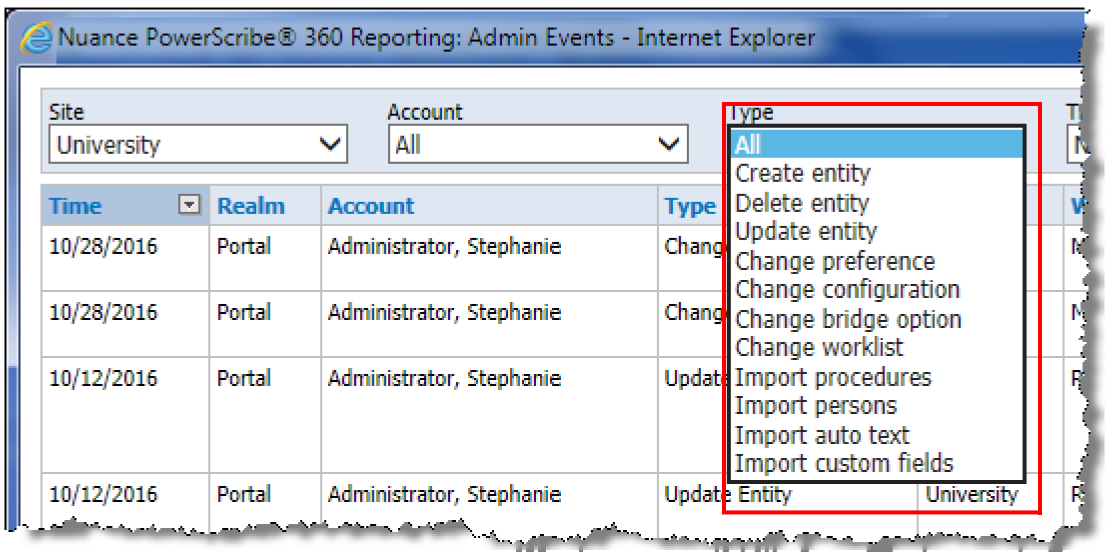
- **Site:** Select one or all sites (the Site-level audit list shows only the current site)



*Note: To view **Change worklist** events, select **System/Global**, located at the bottom of the Site drop-down list.*

- **Account**: Select an administrator account or select all administrators
- **Type**: Select a specific type of event or select all events:
  - **Create/Delete/Update Entity**: Shows create, delete, and update events for entities such as **systems and sites**

- **Change preference**: Shows changes in system- or site-level preferences performed by the selected administrators
- **Change configuration**: Shows changes made to any of the tabs in the **Setup > System > Configuration** window
- **Change bridge option**: Shows changes made in the **Setup > Bridge** tab
- **Change worklist**: Shows changes made to any worklists in the system (**Setup > System > Worklists**)
- **Import procedures/persons/auto text/custom fields**: Shows any activity involving the import procedures within the system.



- **Time Frame**: Select a time from the drop-down list, or click **Custom** and create your own filter

Account-level audit logs contain a large list of **Type** items (to view an account-level audit log, click **Setup > Accounts**, select the account you want to view, and click the **Audit** link):

All	Create	Delete
Change Password	Change Role	Logon
Logoff	Activate	Deactivate
Reset Speech	Checkpoint Speech	Bad Logon Attempt
Change Preferences	Set Speech to Mock Profile	Delete Speech Profile
Set Speech Language	Set Speech Acoustics	Delete Speech Acoustics
Optimize Speech Acoustics	Optimize Speech Language	Import Speech Vocabulary
Optimize Speech Merge	Train Speech	Change Username
Change Personal Info	Change Admin Rights	Change Sections
Change Supervisors	Change Specialties	Launch PowerShare Study

Chapter 4

Setting Preferences

Objectives

In this chapter, you will:

- Review the preference hierarchy
- Set default preferences for the system, sites, and accounts

Introduction to System, Site, and Account Preferences

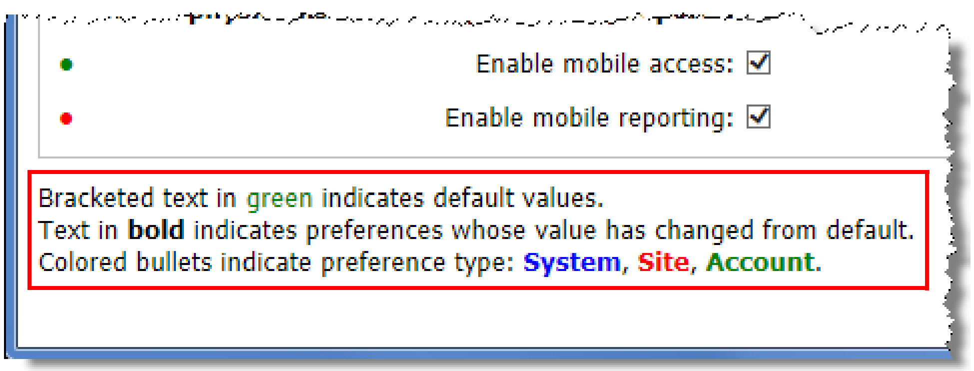
This chapter provides instructions for configuring preferences for the system, for sites, and for accounts.

About System, Site, and Account Preferences

Preferences have a hierarchical relationship:

- System preferences are defaults for the entire system.
- A site preferences can override the system default, affecting only reports for that site.
- A user account preference can override the system preference for a particular user.
- When you change a preference at the system level, any user accounts you add after the change have the new preference as the default.

When viewing the System preferences (**Setup** > **System** > **Preferences** link), the bottom of each tab displays a reminder that System-, Site-, and Account-level preferences have color coded bullets to distinguish the category for each. There are also reminders about default values and how they are indicated. (See the example illustration below.)



Caution: *If the user is logged in to PowerScribe 360 Reporting, the changes you make in the Administrator Portal to his or her preferences do not take effect immediately. (You see a message indicating this.) The user must exit the application (using* ***File > Exit****) and log in again to have the new preferences reloaded, and must restart PowerScribe 360 Reporting to have the new system and site preferences reloaded. If you change a system preference and you want the change to be reflected immediately in one or more user accounts, you must modify the preference in each user account (or the user must modify her own preference in the client application).*

Configuring the Preferences

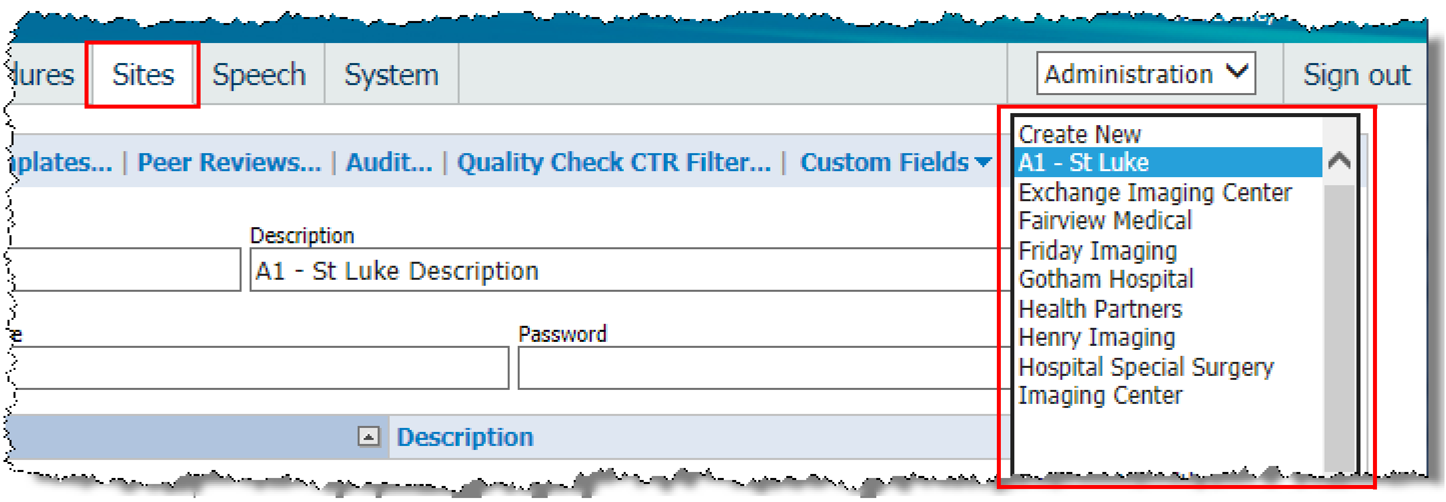
Note: *For any user accounts that require different settings, follow the procedures in* *Configuring Account Preferences, beginning on page 143.*

To configure the preferences:

1. To set preferences for the *system*:
   a. Select the **System** tab in the **Setup** group.
   b. Click the **Preferences** link. The **System Preferences** dialog box opens.

   OR

   To set preferences for a single *site*:
   a. Select the **Sites** tab in the **Setup** group.
   b. Select the site you want to configure from the drop-down list.



   c. Click **Preferences**. The **Site Preferences** dialog box opens.

2. Use each of the tabs to set the preferences for the system or site. The colored bullet to the left of each preference indicates the lowest level at which it can be configured: system (blue), site (red), or account (green).

   Tip: *To set all the values on a tab to 'true', click* ***Check All****. Likewise, select* ***Uncheck All*** *to set all the values on the currently selected tab to 'false.' Click* ***Restore Defaults*** *to set all values to their original defaults.*

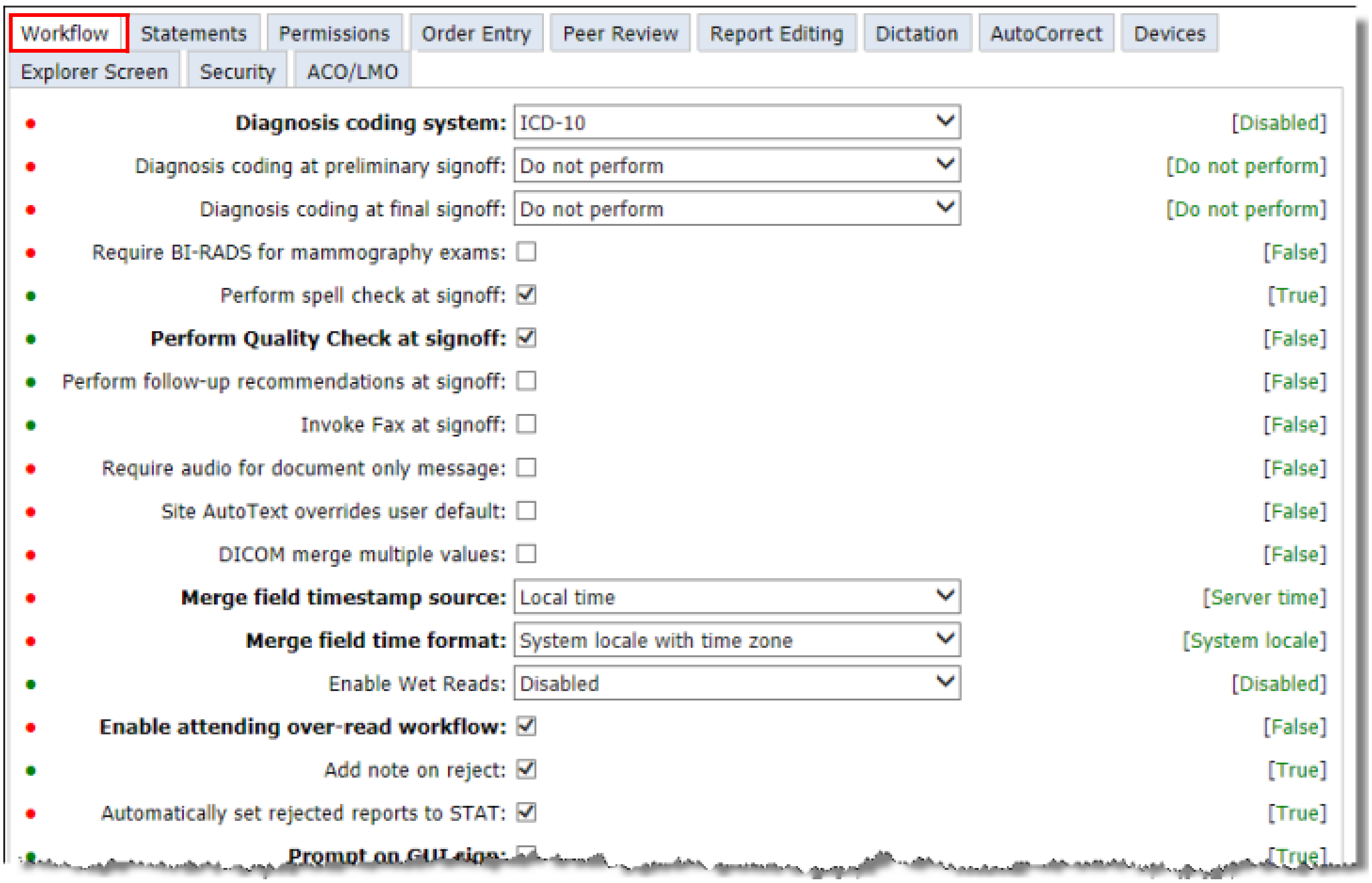
- *Workflow Preferences, beginning on page 47*
- *Statements Preferences, beginning on page 56*
- *Permissions Preferences, beginning on page 59*
- *Peer Review Preferences, beginning on page 64*
- *Report Editing Preferences, beginning on page 66*

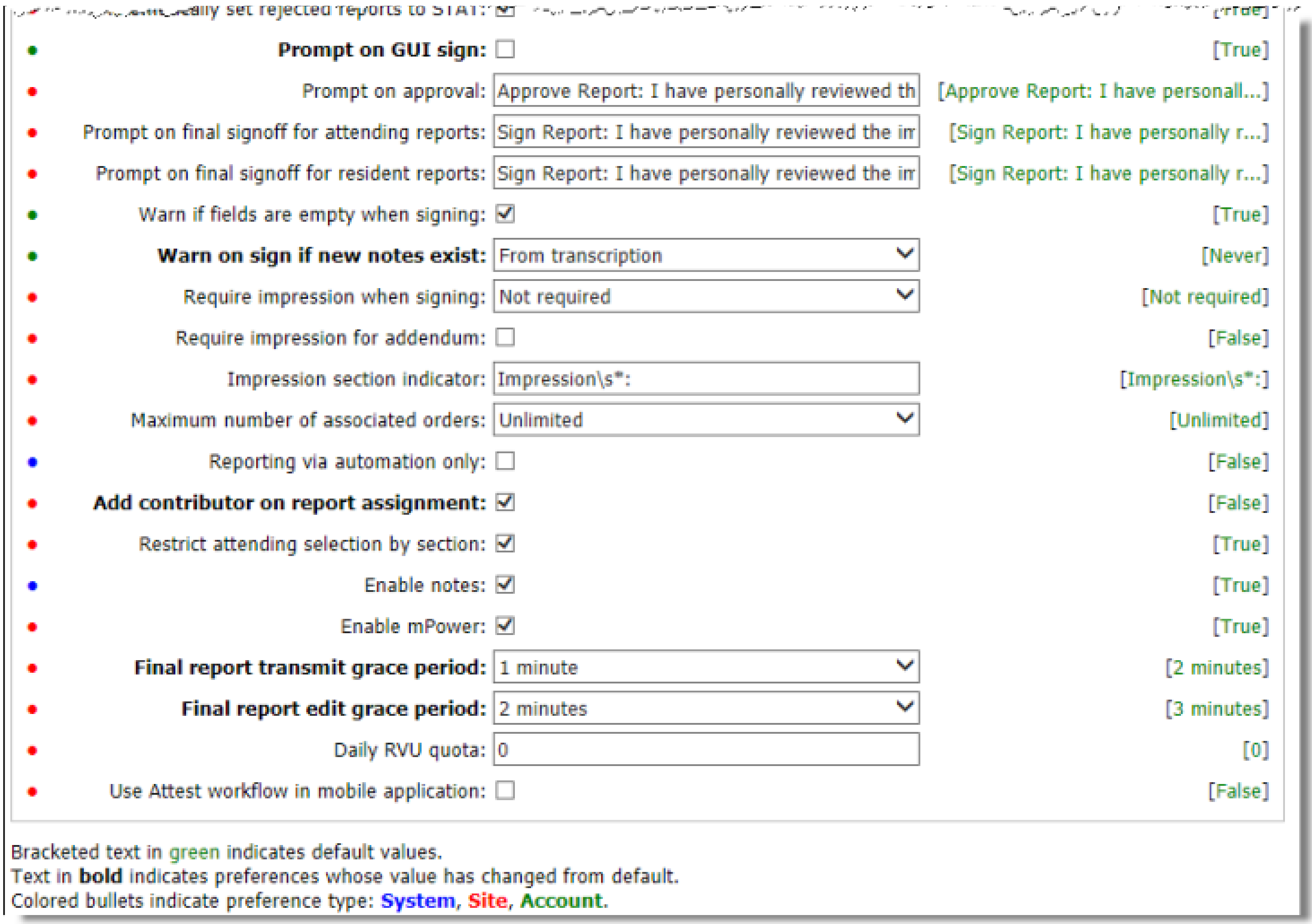
- *Dictation Preferences, beginning on page 72*
- *AutoCorrect Preferences, beginning on page 77*
- *Devices Preferences, beginning on page 78*
- *Explorer Screen Preferences, beginning on page 88*
- *Security Preferences, beginning on page 93*
- *Scheduling ACO and LMO, beginning on page 96*

3. When you have finished setting preferences, click **Save and Close** to save your changes.

Workflow Preferences

Note: *Due to its size, the* ***Workflow*** *preferences tab image is divided into two halves. The second half appears on the next page of this guide.*




set rejected reports to STAT: [True]
Prompt on GUI sign: [True]
Prompt on approval: Approve Report: I have personally reviewed th [Approve Report: I have personall...]
Prompt on final signoff for attending reports: Sign Report: I have personally reviewed the im [Sign Report: I have personally r...]
Prompt on final signoff for resident reports: Sign Report: I have personally reviewed the im [Sign Report: I have personally r...]
Warn if fields are empty when signing: [True]
Warn on sign if new notes exist: From transcription [Never]
Require impression when signing: Not required [Not required]
Require impression for addendum: [False]
Impression section indicator: Impression\s*: [Impression\s*:]
Maximum number of associated orders: Unlimited [Unlimited]
Reporting via automation only: [False]
Add contributor on report assignment: [False]
Restrict attending selection by section: [True]
Enable notes: [True]
Enable mPower: [True]
Final report transmit grace period: 1 minute [2 minutes]
Final report edit grace period: 2 minutes [3 minutes]
Daily RVU quota: 0 [0]
Use Attest workflow in mobile application: [False]
Bracketed text in green indicates default values.
Text in bold indicates preferences whose value has changed from default.
Colored bullets indicate preference type: System, Site, Account.

Workflow Preferences: Click Setup > System > Preferences > Workflow tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Diagnosis coding system	Select **ICD-10**; **ICD-9**; or **Disabled**.	Disabled
• Site	Diagnosis coding at preliminary signoff	Controls whether *PowerScribe 360 Reporting* requires diagnosis (ICD-9/ICD-10) coding when a resident approves a report. *Note that this preference does* ***not*** *apply when an attending saves a report as preliminary.* • **Do not perform**: Diagnosis coding is not invoked at preliminary signoff. • **Do not require codes**: Diagnosis coding is invoked, if not already set for all the accessions of the report, but the user is allowed to cancel without assigning codes. • **Require codes**: The report cannot be approved unless at least one code is entered for each order in the report. ***Note:*** *This setting may override the behavior of the* ***Diagnosis coding at final signoff*** *preference as noted below.*	Do not perform

Workflow Preferences: Click Setup > System > Preferences > Workflow tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Diagnosis coding at final signoff	Controls whether *PowerScribe 360 Reporting* requires diagnosis (ICD-10 or ICD-9) coding when the Attending provider signs a final report. ***Note:*** *Note, this setting is ignored if the* ***Diagnosis coding at preliminary signoff*** *preference is set to* ***Require codes*** *and at least one code is not entered for each order in the report. That is, if coding is required at preliminary signoff, but the report was not approved by a resident, coding will be required at final signoff regardless of the setting of this preference.* • **Do not perform**: Diagnosis coding is not invoked at final signoff. • **Do not require codes**: Diagnosis coding is invoked, if not already set for all the accessions of the report, but the user is allowed to cancel without assigning codes. • **Require codes**: The user cannot sign the report without entering one or more codes for each order in the report. ***Note:*** *If codes were entered by the Resident, this setting will cause diagnosis coding to be invoked so that the Attending can review the codes entered by the Resident.*	Do not perform
• Site	Require BI-RADS for mammography exams	If selected, requires that a BI-RADS code be entered in mammography exams.	False
• Account	Perform spell check at signoff	Automatically spell checks a report when the user signs or approves it. If the system finds errors, it prompts the user to correct them.	True

Workflow Preferences: Click Setup > System > Preferences > Workflow tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Perform Quality Check at signoff ***Note:*** *Quality Check (formerly known as 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.	False
• Account	Perform follow-up recommendations at signoff	Allows administrators to manage follow-up recommendations when radiologists are signing reports. • If enabled, the follow-up recommendation dialog box is presented to the radiologist at signoff. • If disabled, the follow-up recommendation is performed, stored, not presented to the radiologist, and not delivered to the RIS/HIS.	False
• Account	Invoke FAX at signoff	Automatically opens the **Fax** dialog box when a user signs or approves a report. Allows user to select the person(s) to whom the report is faxed.	False
• Site	Require audio for document only message	If selected, this check box requires the user to include an audio statement even though the *PowerScribe 360 Critical Results* message is marked as document only.	False
• Site	Site AutoText overrides user default	If you select this option, the system always uses the site AutoText as the default, even if the user has a matching AutoText entry, that is, one whose procedures and properties (such as age and gender) match those of the exam. Otherwise, it uses the user's AutoText.	False

Workflow Preferences: Click Setup > System > Preferences > Workflow tab			
Type	**System Preference**	**Definition**	**Default**
• Site	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.	False
• Site	Merge field timestamp source	Indicates the time zone of the merge fields. Choices are **Local time** or **Server time**.	Server time
• Site	Merge field time format	Expands the **Merge field timestamp source** preference. Choose either **System locale**; **System locale with time zone**; **24-hour clock**; or **24-hour clock with time zone**.	System locale
• Account	Enable Wet Reads	Select an option: **Allowed**: Radiologist can create a report either as a wet read or a draft. Provider can send these reports to an editor (if they are assigned the **Allow correctionist workflow** permission). **Always**: All reports are automatically wet reads (as opposed to drafts). Provider *cannot* send these reports to an editor. **Disabled**: Provider cannot create reports as wet reads.	Disabled
• Site	Enable attending overread workflow	When selected, allows the radiologist to select a different radiologist to review and sign a report that lies outside of the original radiologist's areas of expertise.	False
• Account	Add note on reject	When the radiologist rejects a corrected/ transcribed report, the **Insert Note** dialog box automatically opens, allowing her to create a note for the transcriptionist. This preference also applies when an attending physician rejects a report approved by a resident.	True
• Site	Automatically set rejected reports to STAT	When a user rejects a report, its priority is changed to STAT.	True

Workflow Preferences: Click Setup > System > Preferences > Workflow tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Prompt on GUI sign	Clearing this check box allows the normally displayed prompt to be bypassed when signing a report. If this check box is selected, when a radiologist signs a report, he is prompted to confirm his signature. (Selecting this check box also causes a prompt to appear when residents click **Approve** and when transcriptionists click **Finish**.) Note that this preference affects signing from both the Explorer and Report Editor screen.	True
• Site	Prompt on approval	Text that appears when approving a report. You can change the text for each site.	Approve Report: I have personally reviewed the images and I agree with this <report>.
• Site	Prompt on final signoff for attending reports	Text that appears when an attending provider signs their own report. You can change the text for each site.	Sign Report: I have personally reviewed the images and agree with this <report>.
• Site	Prompt on final signoff for resident reports	Text that appears when an attending provider signs a report created by a resident. You can change the text for each site.	Sign Report: I have personally reviewed the images and agree with the resident's interpretation.
• Account	Warn if fields are empty when signing	The radiologist or resident is warned when signing or approving a report if the report contains empty fill-in or merge fields.	True
• Account	Warn on sign if new notes exist	Controls whether the user is alerted during the signing process if new notes have been added since the last time he opened the report. • **Never**: New notes do not trigger a warning. • **From Transcription**: Notes are shown only when added by the transcriptionist. • **Always**: Any new notes trigger a warning, including those from other radiologists, or notes the system automatically adds on certain actions, such as when an order is assigned to a radiologist.	Never

Workflow Preferences: Click Setup > System > Preferences > Workflow tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Require impression when signing	The system can warn radiologists if they sign or approve a report without including an Impression section. This preference works in conjunction with the **Impression section indicator** preference. • **Not required**: No warning • **Warn if not present**: Warn, but allow the report to be signed/approved anyway • **Require impression**: Do not allow the report to be signed or approved without an impression.	Not required
• Site	Require impression for addendum	If selected, radiologists will be warned that the addendum must include an Impression section.	False
• Site	Impression section indicator	The regular expression that is to mark the impression area in the report. The system searches the report text for this expression and treats the text immediately following it as the impression. Examples: Impression\s*: Conclusion\s*: ***Note:*** *Make sure that this field is not blank. The best practice is to use the default,* ***Impression\s****.*	Impression\s*
• Site	Maximum number of associated orders	The number of orders that can be associated with a report. Select **Unlimited** or a number between one and ten. If your system allows only one accession number per report, select **1** here.	Unlimited
• System	Reporting via automation only	You can select this preference only where *PowerScribe 360 Reporting* is driven by another application such as PACS. If you select this option, users cannot create new reports or perform order associations/dissociations using the user interface; these functions can only be accessed and performed by another application through automation. In this mode, users can open and addend only the reports they own.	False
• Site	Add contributor on report assignment	When a report already containing some text is acquired by or assigned to another radiologist, the original radiologist is automatically added as a contributor to the report.	False

Workflow Preferences: Click Setup > System > Preferences > Workflow tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Restrict attending selection by section	If you enable this preference, when a resident to whom you have not directly associated an attending provider logs in, the list from which to choose an attending provider contains only those who belong to the same section(s).	True
• System	Enable notes	Users are allowed to create notes for orders, reports, and patients.	True
• Site	Enable mPower	Select this preference to enable the mPower feature. (mPower is a purchasable feature. Contact your Nuance account executive for additional information.)	True
• Site	Final report transmit grace period	The number of minutes the RadBridge software is to wait before sending the final report to the RIS. (Preliminary reports are sent immediately.) This delay allows the attending physician time to re-open and correct the report, if necessary. Once the final report is sent to the RIS, it can no longer be edited; any changes must be made through an addendum. *The **RadBridge service** must be **restarted** for this setting to take effect. A momentary interface outage will occur during the RadBridge service restart, but the PowerScribe 360 core system functionality will remain available.*	2 minutes
• Site	Final report edit grace period	The number of minutes or hours after which a final report can no longer be edited; after this period, any changes to the report must be made with an addendum. *The **RadBridge service** must be **restarted** for this setting to take effect. A momentary interface outage will occur during the RadBridge service restart, but the PowerScribe 360 core system functionality will remain available.*	3 minutes
• Site	Daily RVU quota	The number of work Relative Value Units (RVU) required of radiologists each day	Zero (0)
• Site	Use Attest workflow in mobile application	Allows the **Sign** button to change to **Attest and Sign** in the mobile application.	False

Statements Preferences

Statements Preferences: Click Setup > System > Preferences > Statements tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Final electronic signature	The character string that is automatically appended to a final report when an attending physician signs it. The string might include merge fields, for example, “Finalized by *<627: Signer name>*.” You can make the string span multiple lines by using **\n** to indicate a new line. The preliminary electronic signature, attending attestation statement, and final electronic signature all appear on final reports that were initiated by residents.	Blank initially
• Site	Approval electronic signature	The character string that is automatically appended to a preliminary report when a resident approves it. The string might include merge fields, for example, “Approved by *<640: Dictator Name>* on *<608: Report Preliminary Date>*”. You can make the string span multiple lines by using **\n** to indicate a new line. The preliminary electronic signature, attending attestation statement, and final electronic signature all appear on final reports that were initiated by residents.	Blank initially

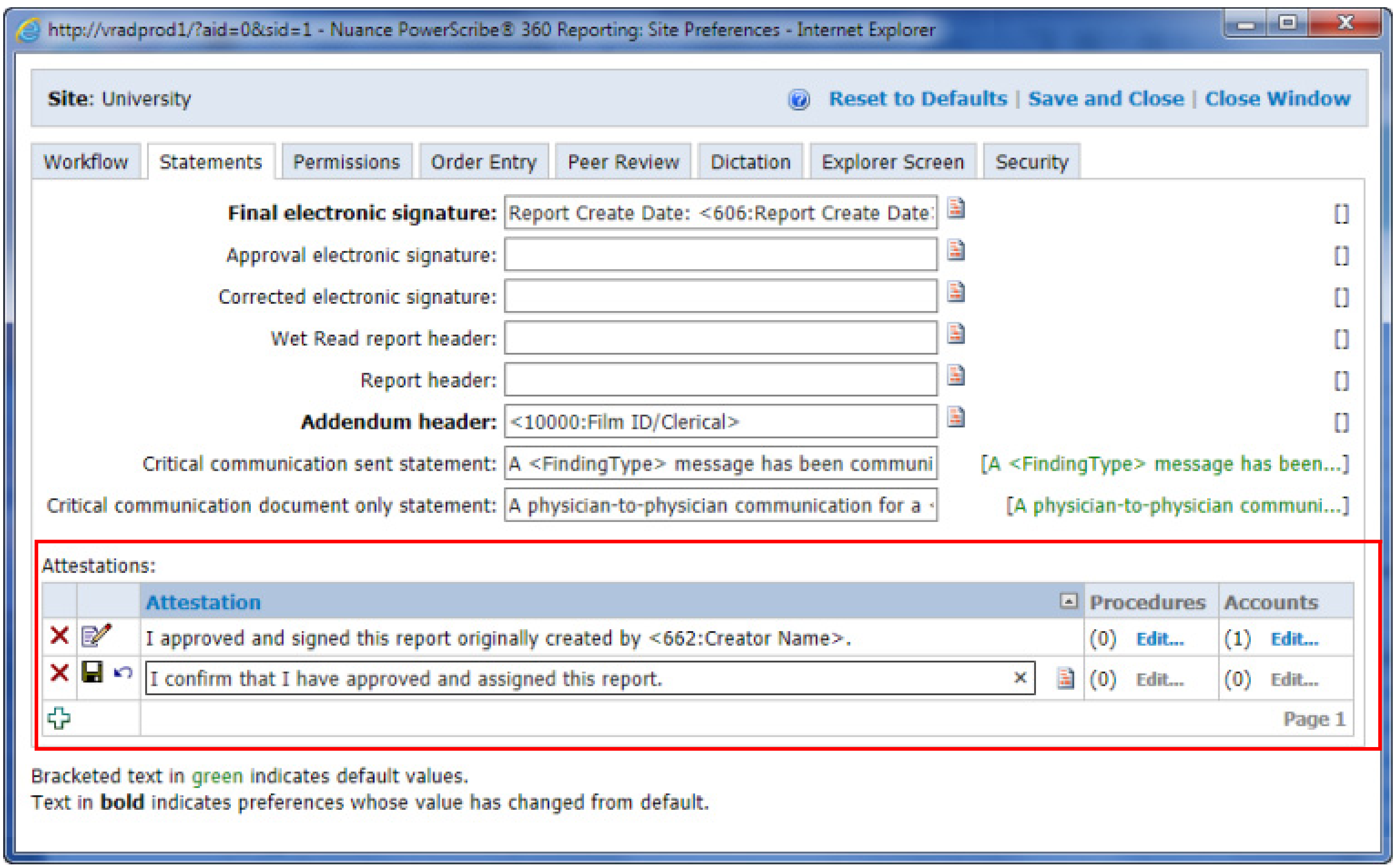
Statements Preferences: Click Setup > System > Preferences > Statements tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Corrected electronic signature	The character string that is automatically appended to a dictated report when an editor corrects it. The string might include merge fields, for example, “Corrected by *<672: Editor name>* on *<609: Report Corrected Date>*. You can make the string span multiple lines by using **\n** to indicate a new line.	Blank initially
• Site	Wet Read report header	Type the header text you want to appear on wet read reports in this field.	Blank initially
• Site	Report header	Type the header text you want to appear on your reports in this field.	Blank initially
• Site	Addendum header	Type the header text you want to appear on your addendums in this field.	Blank initially
• Site	Critical communication sent statement	The statement that is automatically added to a report when a critical finding is communicated through *PowerScribe 360 Critical Results*. The recipient and date/time of the message are automatically appended to this statement.	A <FindingType> message has been communicated to <RecipientName > via the PowerScribe 360 Critical Results application on <102:Current Date>, Message ID <MessageID>.
• Site	Critical communication document only statement	The statement that is automatically added to a report when a document only message is sent.	A physician-to-physician communication for a <FindingType> message has been documented in the PowerScribe 360 Critical Results application on <102:Current Date>, Message ID <MessageID>.

Site-Level Statements Preferences

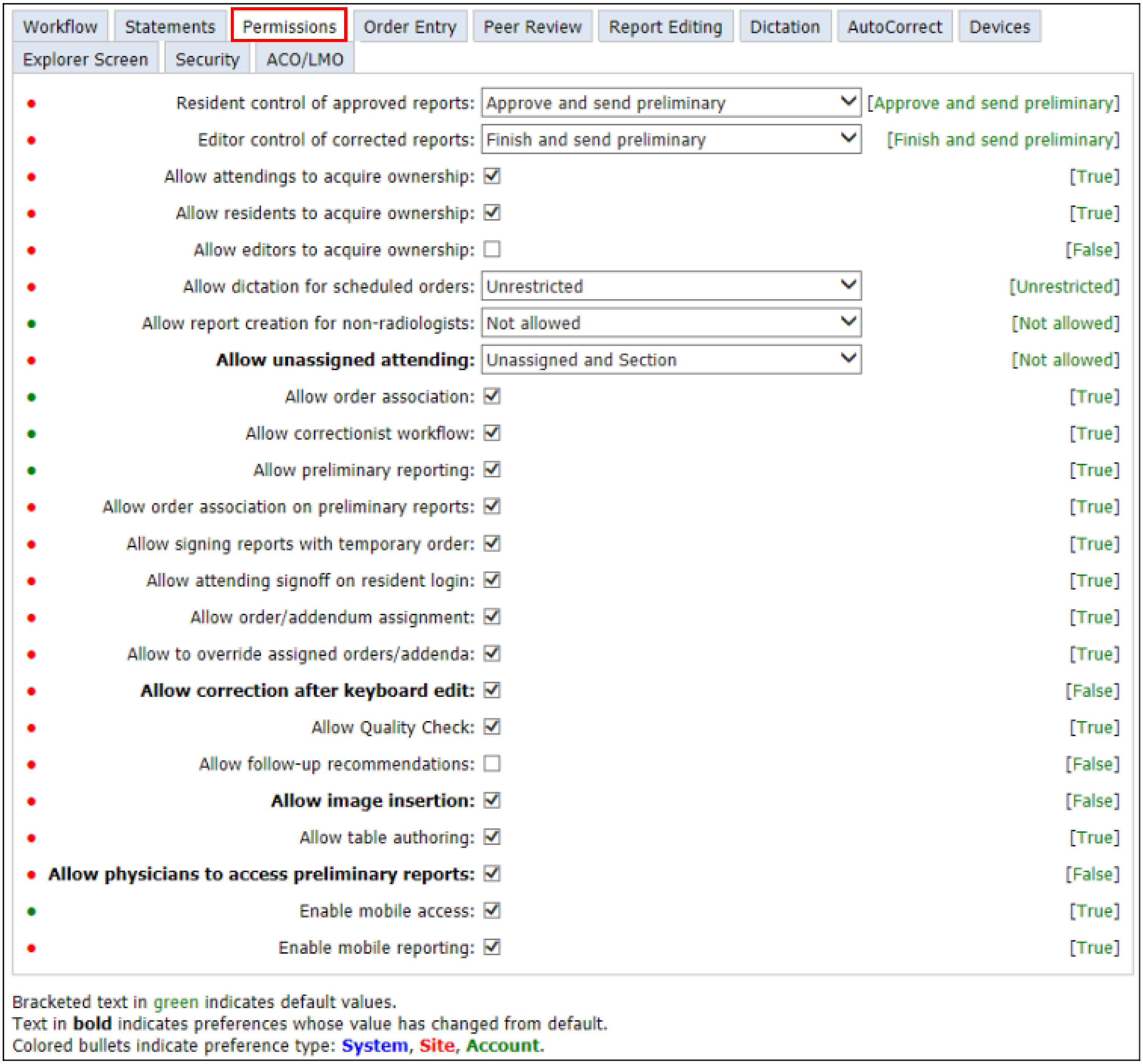
The Site level **Statements** preferences tab contains an additional feature for adding attestation statements for sites: Administrators can create and assign custom site-level *attestation statements* that are automatically appended to the end of reports sent from Resident users to their Attending provider. Once the Attending provider reviews the report and clicks the **Attest & Sign** button, the attestation statement created by the administrator appears at the end of the report.

Administrators can assign procedures or user accounts to an attestation statement to make it more specific, if needed.

If an attestation statement has no procedures or accounts assigned to it, it becomes a default statement.



Permissions Preferences

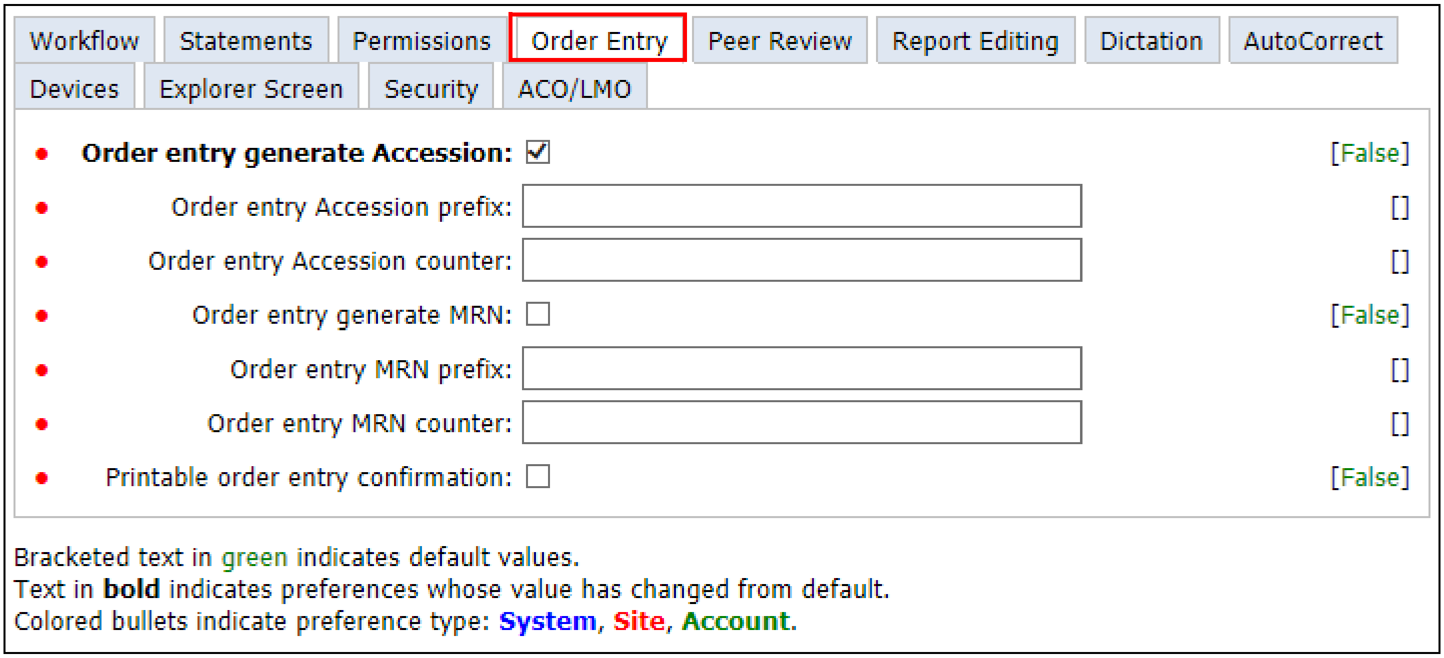


Permissions Preferences: Click Setup > System > Preferences > Permissions tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Resident control of approved reports	Determines how residents manage their approved reports. Choices are **Approve and send preliminary**; **Approve only**; or **On demand**.	Approve and send preliminary
• Site	Editor control of corrected reports	Determines how editors manage their corrected reports. Choices are **Finish and send preliminary**; **Finish only**; or **On demand**.	Finish and send preliminary
• Site	Allow attendings to acquire ownership	Attending physicians can transfer ownership of reports dictated by others to themselves.	True
• Site	Allow residents to acquire ownership	Residents can transfer ownership of reports dictated by others to themselves.	True
• Site	Allow editors to acquire ownership	Transcriptionist/editors can transfer ownership of reports corrected by others to themselves.	False
• Site	Allow dictation for scheduled orders	Reports can be created for orders in Scheduled status. If you do not select this preference, an order must be in Completed or Temporary status for a report to be created.	True
• Account	Allow report creation for non-radiologists	Determines what types of reports, if any, users other than radiologists can create. Choices are: **Reports and addendums**; **Reports only**; **Addendums only**; or **Not allowed**. (Replaces the **Allow report creation** check box preference in previous versions.)	Reports and addendums
• Site	Allow unassigned attending	Determines what to display in the Section Queue for providers. Choices are **Unassigned**, **Section**, **Unassigned and Section**, or **Not allowed**.	Not allowed
• Account	Allow order association	Controls whether the provider has the right to add unreported orders to existing reports, or to dissociate an order from a multi-accession report. This function is available only if your RIS/HIS permits multiple accessions per order.	True
• Account	Allow correctionist workflow	Select this option to activate the **Correct** function for radiologists.	True
• Account	Allow preliminary reporting	Select to allow the preliminary reporting feature.	True
• Site	Allow order association on preliminary reports	User can add or remove orders to/from reports that have already reached preliminary status (Pending Signature) and have been sent to the RIS. (With some RIS, adding orders to a preliminary report results in an error.)	True

Permissions Preferences: Click Setup > System > Preferences > Permissions tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Allow signing reports with temporary order	Attending physicians can sign and finalize reports associated with one or more temporary orders. (With some RIS, signing a temporary order results in an error because the report date precedes the order date.)	True
• Site	Allow attending signoff on resident login	The attending radiologist can enter her password and finalize reports while the resident is logged in without interrupting the resident's session. This is accomplished by holding down the **Shift** key and selecting **Approve**; the system displays a confirmation prompt.	True
• Site	Allow order/addendum assignment	If selected, the My Reports pane in the Explorer screen contains a link to retrieve orders or addenda assigned to the logged-in user. Selecting this option also enables the Assign Order function, which allows one radiologist to assign an order to another radiologist.	True
• Site	Allow to override assigned orders/addenda	If you select this preference, a radiologist can create a report for an order or addenda that has been assigned to another radiologist, or associate such an order/addenda to an existing report. In this case the system displays a confirmation prompt informing the user of the current assignment. The system ignores this preference unless you also select the **Allow order/addendum assignment** preference.	True
• Site	Allow correction after keyboard edit	If you do not select this preference, the user cannot send a dictated report to correction when manual edits have been made to the dictated text. This prevents editors from receiving reports that might have missing audio, therefore, it is recommended that you select this preference.	False
• Site	Allow Quality Check	Allows users to run the Quality Check consistency checker. (*Quality Check* is a purchasable feature. Contact your Nuance account executive for more information.)	True
• Site	Allow follow-up recommendations	Select to enable the follow-up recommendations feature.	False

Permissions Preferences: Click Setup > System > Preferences > Permissions tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Allow image insertion	When selected, allows radiologists to insert images into their reports. When not selected, radiologists can still use the Capture Image tool; however, the image appears in the Attachments pane, and the image name appears as a link at the bottom of the report. Clear (uncheck) this check box when a site's outbound HL7 interface does not support Rich Text Format (RTF).	False
• Site	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, or voice commands for adding and manipulating tables. Default is False (unchecked). ***Note:*** *Table authoring will be available in the AutoText editor screen 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.*	True
• Site	Allow physicians to access preliminary reports	Allows physicians to access their preliminary reports	False
• Account	Enable mobile access	Allows users to use the Mobile Reporting application	True
• Site	Enable mobile reporting	Allows users to perform speech-enabled report editing. Enables the Mobile Radiologist speech recognition engine versus the local iOS/ Android speech recognition.	True

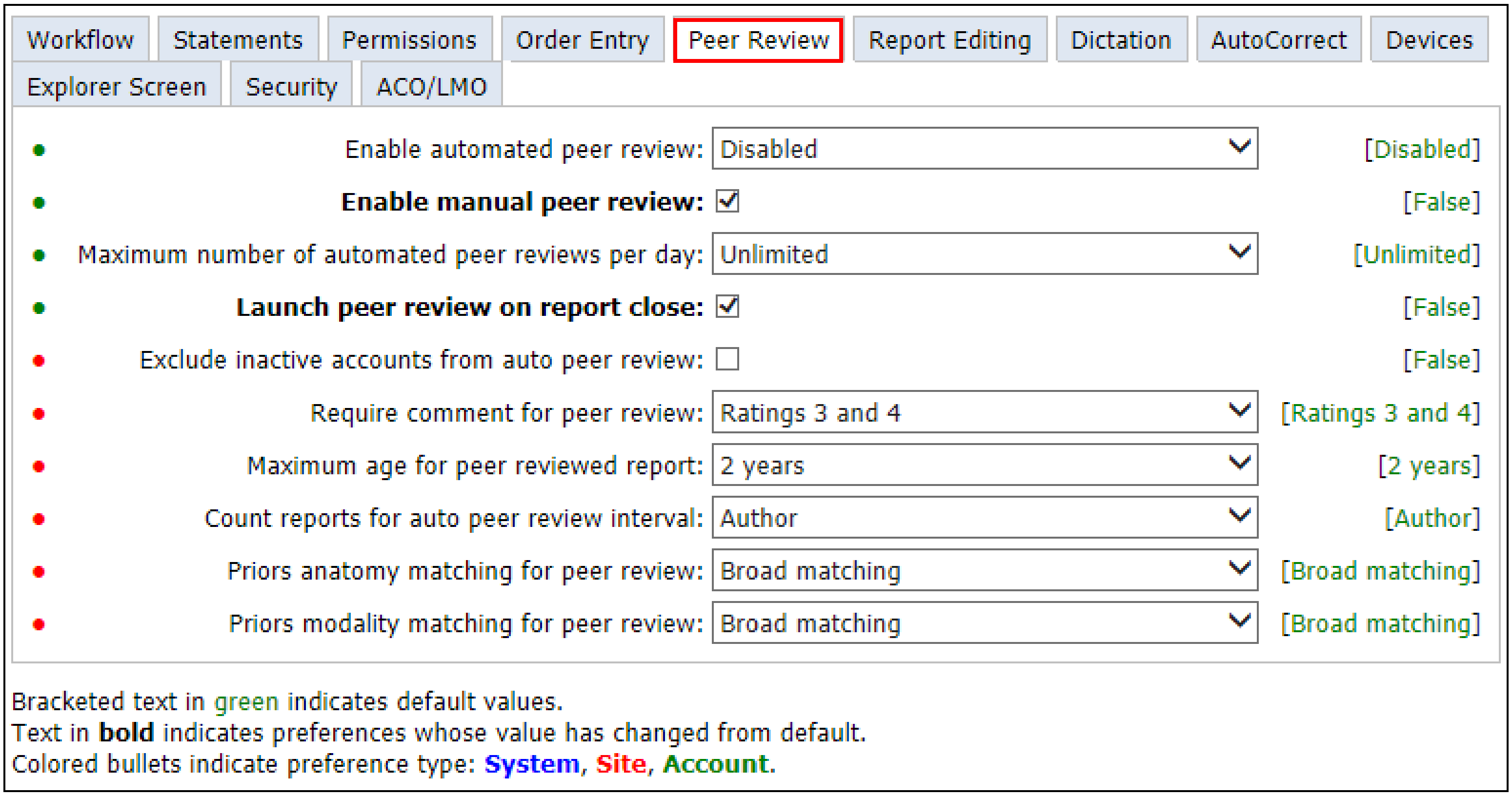
Order Entry Preferences



Order Entry Preferences: Click Setup > System > Preferences > Order Entry tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Order entry generate Accession	Select to allow the order entry system to automatically generate accession numbers.	False
• Site	Order entry Accession prefix	Enter a prefix that will appear before each of your accession numbers.	Blank
• Site	Order entry Accession counter	Enter the starting value for your accession numbers.	Blank
• Site	Order entry generate MRN	Select to allow the order entry system to automatically generate MRNs.	False
• Site	Order entry MRN prefix	Enter a prefix that will appear before each of your MRNs.	Blank
• Site	Order entry MRN counter	Enter the starting value for your MRNs.	Blank
• Site	Printable order entry confirmation	Select if you want to allow printing order entry confirmation messages.	False

Peer Review Preferences

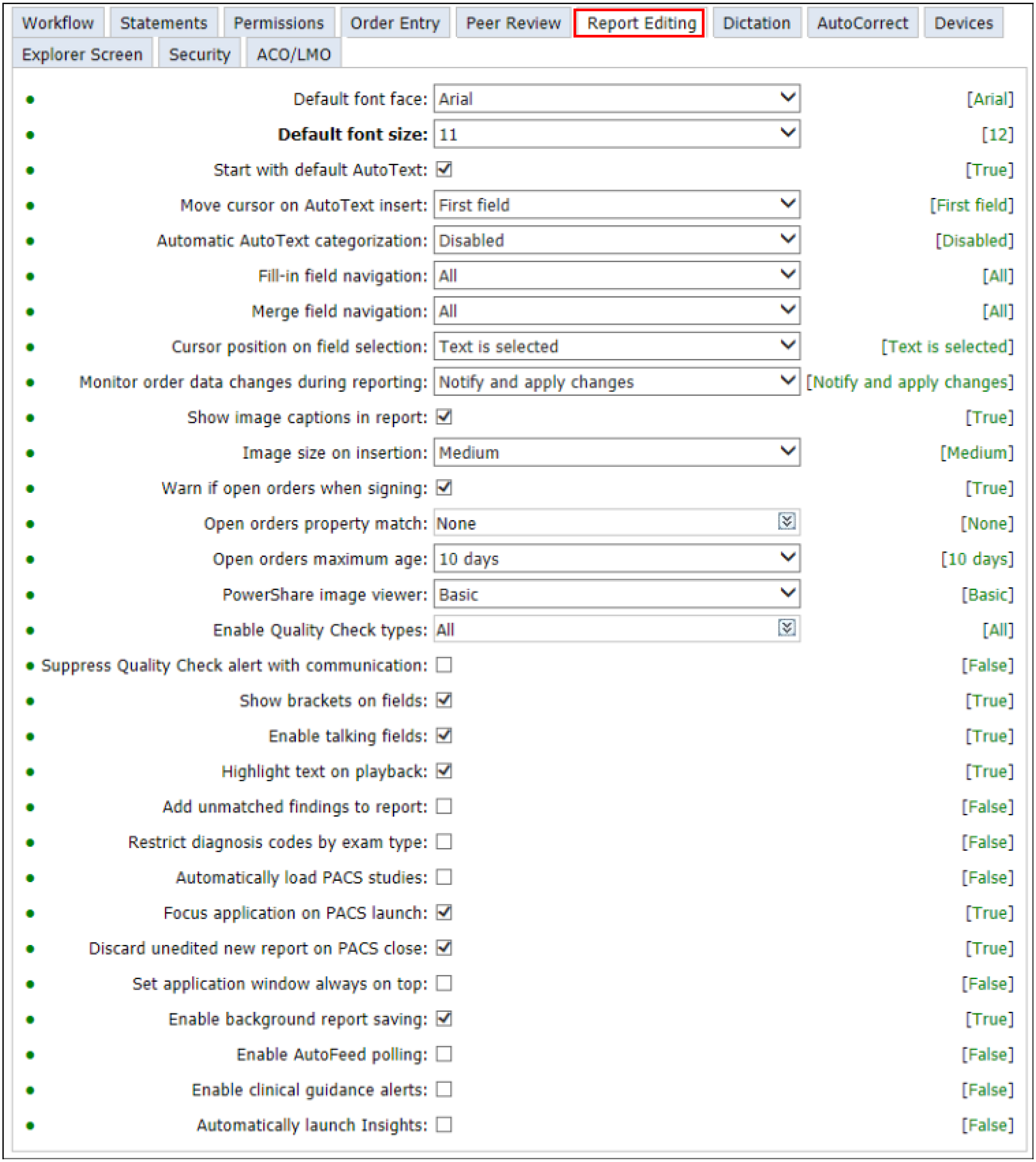
__Note:__ Peer review is an optional feature. If your organization has not purchased this feature, you do not need to configure these preferences.



Peer Review Preferences: Click Setup > System > Preferences > Peer Review tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Enable automated peer review	Select an option: **Disabled**: The radiologist is not included in the peer review process. **Allow to cancel**: The radiologist can cancel an automatic peer review if he does not want to complete it. **Required**: The radiologist must complete the peer review before being allowed to create a new report.	Disabled
• Account	Enable manual peer review	Select to allow manually generated peer reviews. If not selected, only system-prompted peer reviews are allowed, and the peer review button in the client application is hidden.	False

Peer Review Preferences: Click Setup > System > Preferences > Peer Review tab			
Type	**System Preference**	**Definition**	**Default**
Account	Maximum number of automated peer reviews per day	Select a specific number from the drop-down list, or select **Unlimited**.	Unlimited
Account	Launch peer review on report close	Select to allow radiologists to finish dictating their current report before performing an automatically initiated peer review. If not selected, radiologists must perform the peer review when the new report is first opened.	False
Site	Exclude inactive accounts from auto peer review	Select to exclude reports created by radiologists no longer at the facility from the peer review process.	False
Site	Require comment for all peer review	Select to require providers to include a comment for peer review ratings 1 and 2. (Peer review ratings 3 and 4 still automatically require comments.)	False
Site	Maximum age for peer reviewed report	Indicate at what point an exam becomes ineligible for peer review. For example, you might not want peer review to be performed on exams over two years old. ***Note:*** *You can override this setting for individual sites.*	2 years
Site	Count reports for auto peer review interval	Allows you to determine whose user account will be incremented when a peer review is performed; especially useful when resident workflow is predominately used by an Attending. The default behavior is to increment the resident's user account (i.e., the Author of the report) even though the Attending signs the report. The Author and Signer option will increment both the resident's account and the Attending's account. Signer only will increment the Attending's account. Choose either **Author**, **Author and Signer**, or **Signer only**.	Author
Site	Priors anatomy matching for peer review	Choose one of the following: **Broad matching**, **Exact matching**, or **Include All**.	Broad matching
Site	Priors modality matching for peer review	Choose either **Broad matching** or **Exact matching**.	Broad matching

Report Editing Preferences



Report Editing Preferences: Click Setup > System > Preferences > Report Editing tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Default font face	Specifies the typeface to use when viewing and editing reports.	Arial
• Account	Default font size	Specifies the font size to use when viewing and editing reports.	12
• Account	Start with default AutoText	If you select this option, and an AutoText entry has been designated as the default for a particular type of exam, the AutoText is automatically inserted when a provider creates a new report for an exam of that type.	True
• Account	Move cursor on AutoText insert	This specifies where the cursor is placed after the user inserts AutoText. Select an option: • **End of AutoText**: Cursor moves to the right of the AutoText • **First empty field**: Cursor moves to the first empty field in the document. • **First field**: Cursor moves to the first field in the document.	First field
• Account	Automatic AutoText categorization	Allows automatic inclusion of procedures to an AutoText that is inserted into a report. The choices for this preference are: • **Always**: Procedures for the orders associated with the report are automatically added to any/all AutoText inserted into the report. • **Prompt**: User is prompted to accept the automatic categorization. • **Disabled**: No automatic categorization occurs.	Disabled
• Account	Fill-in field navigation	Select the status of fields to which your **Tab** button/key navigates. This allows you to skip fill-in fields that already have content. Choices are **All**; **Empty**; **None**; or **Unmodified** (meaning it still contains its default value).	All
• Account	Merge field navigation	Select the status of fields to which your **Tab** button/key navigates. This allows you to skip merge fields that already have content. Choices are **All**; **Empty**; **None**; or **Unmodified** (meaning it still contains its default value).	All
• Account	Cursor position on field selection	Select where to position the cursor in a field that you select or move to. Choices are **Text is selected**; **Cursor at the end**; or **Cursor at the beginning**.	Text is selected

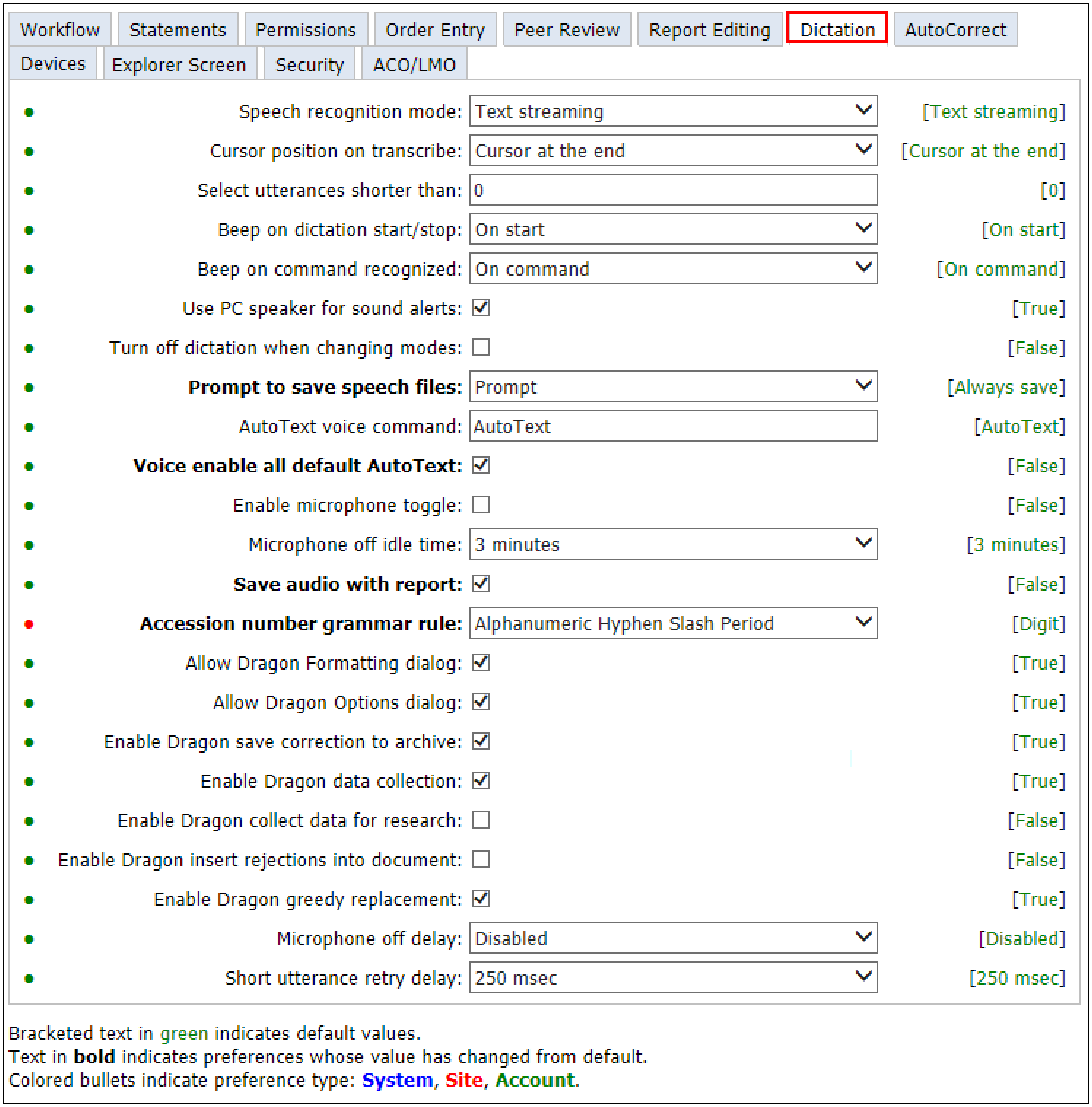
Report Editing Preferences: Click Setup > System > Preferences > Report Editing tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Monitor order data changes during reporting	Notifies users if the order data has changed while they are dictating a report. Choices are: • Notify and apply changes • Apply changes without notification • Disabled	Notify and apply changes
• Account	Show image captions in report	When selected, captions appear under any images you insert into your reports.	True
• Account	Image size on insertion	Default width of your inserted images. Choose either **Small** (1.4 inches), **Medium** (2.0 inches), or **Large** (3.1 inches).	Medium
• Account	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. 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.	True
• Account	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.	None
• Account	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.)	10 days

Report Editing Preferences: Click Setup > System > Preferences > Report Editing tab			
Type	**System Preference**	**Definition**	**Default**
• Account	PowerShare image viewer ***Note:*** *PowerShare is a purchasable option. Please contact your Nuance account representative for more information.*	Select either **Basic** or **Advanced** for the type of viewer to use when using *PowerShare* (which is an optional feature). ***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.*	Basic
• Account	Enable Quality Check types	Allows you to include some, all, or none of the three available consistency checks (Critical Text Results; Gender Mismatches; and Laterality Mismatches)	All
• Account	Suppress Quality Check alert with communication	Controls alerts for Actionable Findings/Critical Results that already have a communication statement.	False
• Account	Show brackets on fields	Place square brackets around all fill-in fields. This feature does not cause actual bracket characters to be inserted in the text.	True
• Account	Enable talking fields	If you select this option, the software announces the name of the active field through the PowerMic II or SpeechMike, if one of these is the default sound device selected in Windows. The name is spoken when a user takes any of the following actions: • Moves the cursor into a field • Selects a field in the field pane • Navigates into the field using the microphone buttons or **Tab** key This helps the user know which field to dictate without having to glance at the report. For example, the user might be dictating in a PACS window with the *PowerScribe 360 Reporting* window minimized. ***Note: Talking Fields*** *requires that Dragon Text-To-Speech (TTS) be installed on the user's workstation. Note that field names are not spoken while the dictation mode is active.*	True

Report Editing Preferences: Click Setup > System > Preferences > Report Editing tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Highlight text on playback	Each section of the report text is highlighted as it is played back.	True
• Account	Add unmatched findings to report	Applies to **Findings Only** dictation mode in the *PowerScribe 360 Reporting* client application. When the user clicks **Apply Findings**, the software creates a new item in the field pane for each unmatched finding. The fields are named *Unmatched1, *Unmatched2, and so on. If you do not select this option, any unmatched findings remain in the **Findings Only** window.	False
• Account	Restrict diagnosis codes by exam type	The list of ICD-9 codes is restricted to those that are appropriate for the exam. ***Note:*** *This behavior is controlled through a check box in the* ***Diagnosis Coding*** *dialog box.*	False
• Account	Automatically load PACS studies	If you select this option and a **PowerScribe-driven** PACS integration is configured, as soon as a report is opened in *PowerScribe 360 Reporting*, the corresponding study is automatically opened in the PACS selected for the site.	False
• Account	Focus application on PACS launch	If you select this option and a **partner-driven** PACS integration is configured, *PowerScribe 360 Reporting* is brought to the front of all applications and activated when a dictation request is received from the PACS. ***Note:*** *This function does not work with all PACS systems.*	True
• Account	Discard unedited new report on PACS close	Allows the radiologist to delete a report that contains an AutoText template without being prompted, minimizing their interruptions. Permitted only if the radiologist did not create any content (audio or text) for the report. ***Note:*** *Reports created manually will still prompt you before allowing deletion.*	True

Report Editing Preferences: Click Setup > System > Preferences > Report Editing tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Set application window always on top	This preference keeps the *PowerScribe 360 Reporting* application the top application in an environment with multiple applications present, and prevents you from having to switch between applications during the session. The preference is remembered per-user, regardless of workstation they are using. Note that this preference is applied only after login.	False
• Account	Enable background report saving	If you select this option, the user, on closing a report, is taken immediately back to the Explorer screen (or to next report, in AutoFeed mode) while the report is being saved to the database. You can de-select this option for users who want to see the save operation completed before beginning new work.	True
• Account	Enable AutoFeed polling	Determines whether the system automatically looks for new reports when the AutoFeed queue is empty.	False
• 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.	False
• Account	Automatically launch Insights	Select to automatically open the read-only Insights window when a report is opened. The Insights window displays information about the patient, the user, the order, procedure codes, and categories.	False

Dictation Preferences



Workflow | Statements | Permissions | Order Entry | Peer Review | Report Editing | Dictation | AutoCorrect
Devices | Explorer Screen | Security | ACO/LMO

Preference	Value	Default
Speech recognition mode:	Text streaming	[Text streaming]
Cursor position on transcribe:	Cursor at the end	[Cursor at the end]
Select utterances shorter than:	0	[0]
Beep on dictation start/stop:	On start	[On start]
Beep on command recognized:	On command	[On command]
Use PC speaker for sound alerts:	☑	[True]
Turn off dictation when changing modes:	☐	[False]
Prompt to save speech files:	Prompt	[Always save]
AutoText voice command:	AutoText	[AutoText]
Voice enable all default AutoText:	☑	[False]
Enable microphone toggle:	☐	[False]
Microphone off idle time:	3 minutes	[3 minutes]
Save audio with report:	☑	[False]
Accession number grammar rule:	Alphanumeric Hyphen Slash Period	[Digit]
Allow Dragon Formatting dialog:	☑	[True]
Allow Dragon Options dialog:	☑	[True]
Enable Dragon save correction to archive:	☑	[True]
Enable Dragon data collection:	☑	[True]
Enable Dragon collect data for research:	☐	[False]
Enable Dragon insert rejections into document:	☐	[False]
Enable Dragon greedy replacement:	☑	[True]
Microphone off delay:	Disabled	[Disabled]
Short utterance retry delay:	250 msec	[250 msec]

Bracketed text in green indicates default values.
Text in **bold** indicates preferences whose value has changed from default.
Colored bullets indicate preference type: **System**, **Site**, **Account.**

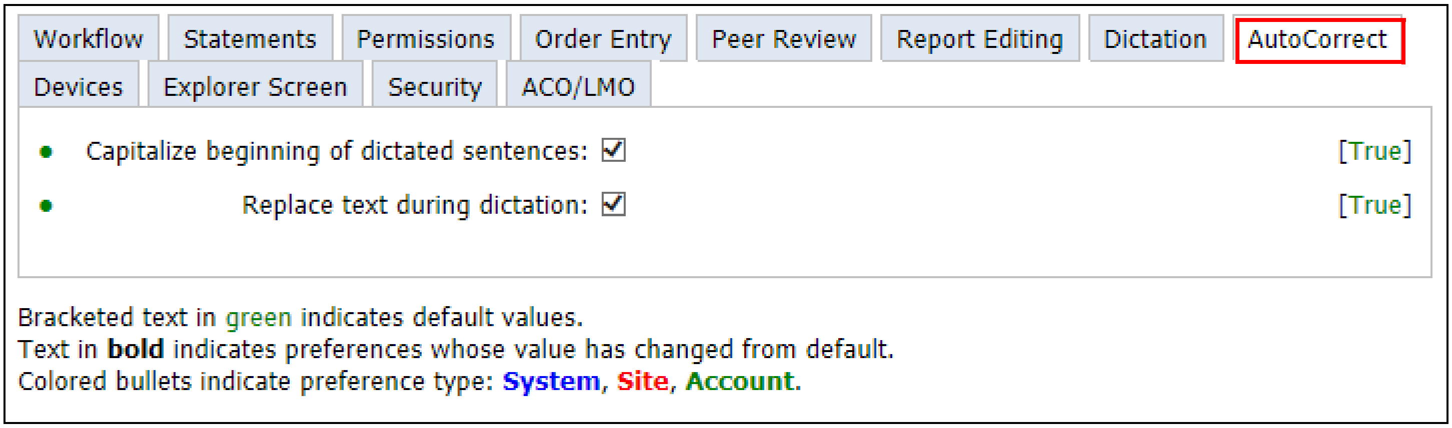
Dictation Preferences: Click Setup > System > Preferences > Dictation tab			
Type	**System Preference**	**Definition**	**Default**
Account	Speech recognition mode	Controls how speech recognition is performed. • **Text streaming**: Automatically displays the dictated text as the provider dictates. • **Press to transcribe**: Requires the provider to press a button on the microphone. Note: In this mode, the Enable Microphone Toggle preference has no effect; commands to toggle the microphone are ignored. • **Disabled**, which means speech recognition is not loaded. The user, therefore, cannot record or play back audio. This setting is typically used for technologists.	Text streaming
Account	Cursor position on transcribe	Controls the position of the cursor after the provider presses the **Transcribe** button on the microphone. • **Cursor at the end**: The cursor appears at the end of the transcribed text. • **Cursor at the beginning**: The cursor appears at the beginning of the transcribed text. • **Text is selected**: The transcribed text is highlighted.	Cursor at the end
Account	Select utterances shorter than	When the provider dictates audio shorter than the number of seconds you indicate here (for example, when she dictates short words, or the values in fill-in fields), the dictated content is automatically selected when she issues the "transcribe" command. She can then quickly edit the dictated content or move on to the next field. ***Note:*** *This preference is available only when you have selected either* ***Cursor at the beginning*** *or* ***Cursor at the end*** *as the* ***Cursor position on transcribe*** *preference.*	0
Account	Beep on dictation start/ stop	An audible tone sounds when the provider starts and stops dictation. Select **No beep**, **On start**, or **On start and stop**. ***Note:*** *Beep on stop is available only in Text Streaming mode; it is always suppressed in Press to Transcribe mode.*	On start

Dictation Preferences: Click Setup > System > Preferences > Dictation tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Beep on command recognized	An audible tone sounds when the software recognizes a voice command. Choose either **On command**, **On AutoText insertion**, **On command and AutoText insertion**, or **No beep**.	On command
• Account	Use PC speaker for sound alerts	Uses the computer's built-in speaker for beeps in the above two preferences.	True
• Account	Turn off dictation when changing modes	If you select this option, dictation is automatically toggled off when the user switches screens, such as when moving from the Explorer screen to the Report screen, or when opening or closing dialog boxes that accept dictation input.	False
• Account	Prompt to save speech files	Controls saving modified speech files when a user logs out of the application. • **Prompt**: The software prompts the user to save the speech files or not save them. • **Always save:** The software saves the speech files without prompting. • **Never save**: The software does not save the speech files. Learning does not continue and new words added are not saved; the user must actively save any new words. A user who has worked with the system for awhile and is satisfied with speech recognition accuracy might want to change this option to **Never save**.	Always save
• Account	AutoText voice command	The word or phrase you specify here is used as the voice command for inserting AutoText into a report. (The word **Macro** might be preferable for users accustomed to older speech-reporting applications.)	AutoText
• Account	Voice enable all default AutoText	Select to allow insertion of AutoText marked as Default into Report Editor using voice commands, regardless of relevance.	False
• Account	Enable microphone toggle	If you select this option and the start/stop button has been configured to turn the microphone on and off, the provider can press the start/stop button once to turn the microphone on, use voice commands to start and stop recording, and then press the start/stop button to turn the microphone off. In **Press to Transcribe** recognition mode, this preference has no effect.	False

Dictation Preferences: Click Setup > System > Preferences > Dictation tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Microphone off idle time	The time the microphone is allowed to be idle before the system automatically turns it off.	3 minutes
• Account	Save audio with report	Set to **True** if a radiologist wants to save the report as a draft, re-open it later and be able to play the audio. In addition, set to **True** when a transcriptionist finishes a report with a note requesting clarification from the radiologist and the radiologist wants to listen to the report audio.	False
• Site	Accession number grammar rule	This preference allows fine-tuning of the speech-recognition rule used to identify accession numbers, for optimal accuracy. For example, an accession number might include digits only, or digits plus hyphens and slashes. • **Digit** • **Digit hyphen slash** • **Alphanumeric** • **Alphanumeric hyphen slash** • **Alphanumeric hyphen slash period**	Digit
• Account	Allow Dragon Formatting dialog	The user can access the Dragon **Formatting** tab, and modify the formatting settings for the application.	True
• Account	Allow Dragon Options dialog	The user can access the Dragon **Options** tab, allowing him to modify the options settings for the application.	True
• Account	Enable Dragon save correction to archive	Select this option if you want the speech recognition engine to collect correction data in the acoustic archive.	True
• Account	Enable Dragon data collection	This option controls whether or not Dragon audio files (.DRA) are collected in the Dragon local cache and subsequently available for ACO/LMO.	True
• Account	Enable Dragon collect data for research	Select this option if you want the speech recognition engine to collect correction data for research purposes.	False
• Account	Enable Dragon insert rejections into documents	Select this option to insert the audio from rejected segments (dictation in which Dragon cannot understand what the user says) without any corresponding text.	False

Dictation Preferences: Click Setup > System > Preferences > Dictation tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Enable Dragon greedy replacement	If selected, replaces an entire word that has been only partially selected. For example, if a provider highlights only the letters **im** in **super*im*posed infection**, and then dictates **“mild”**, the resulting text would show **mild infection**.	True
• Account	Microphone off delay	With this option enabled, the microphone does not turn off immediately when the provider presses the off switch. This delay prevents dictation from being lost when a provider presses the switch while still speaking.	Disabled
• Account	Short utterance retry delay	Fine tunes the handling of dictation in Press to Transcribe mode to help ensure that short utterances are not lost. ***Note:*** *Adjust this parameter only in rare scenarios when a user is experiencing unique speech-related issues,* ***and only when directed by Nuance support****.*	250 msec (milliseconds)
• Account	Speech recognition engine	Allows you to select either **Local** (Dragon Medical Network Edition) or **Cloud** (Dragon Medical SpeechKit). ***Note:*** *This preference appears only when* ***Cloud Speech*** *is enabled during product installation.*	Local

AutoCorrect Preferences



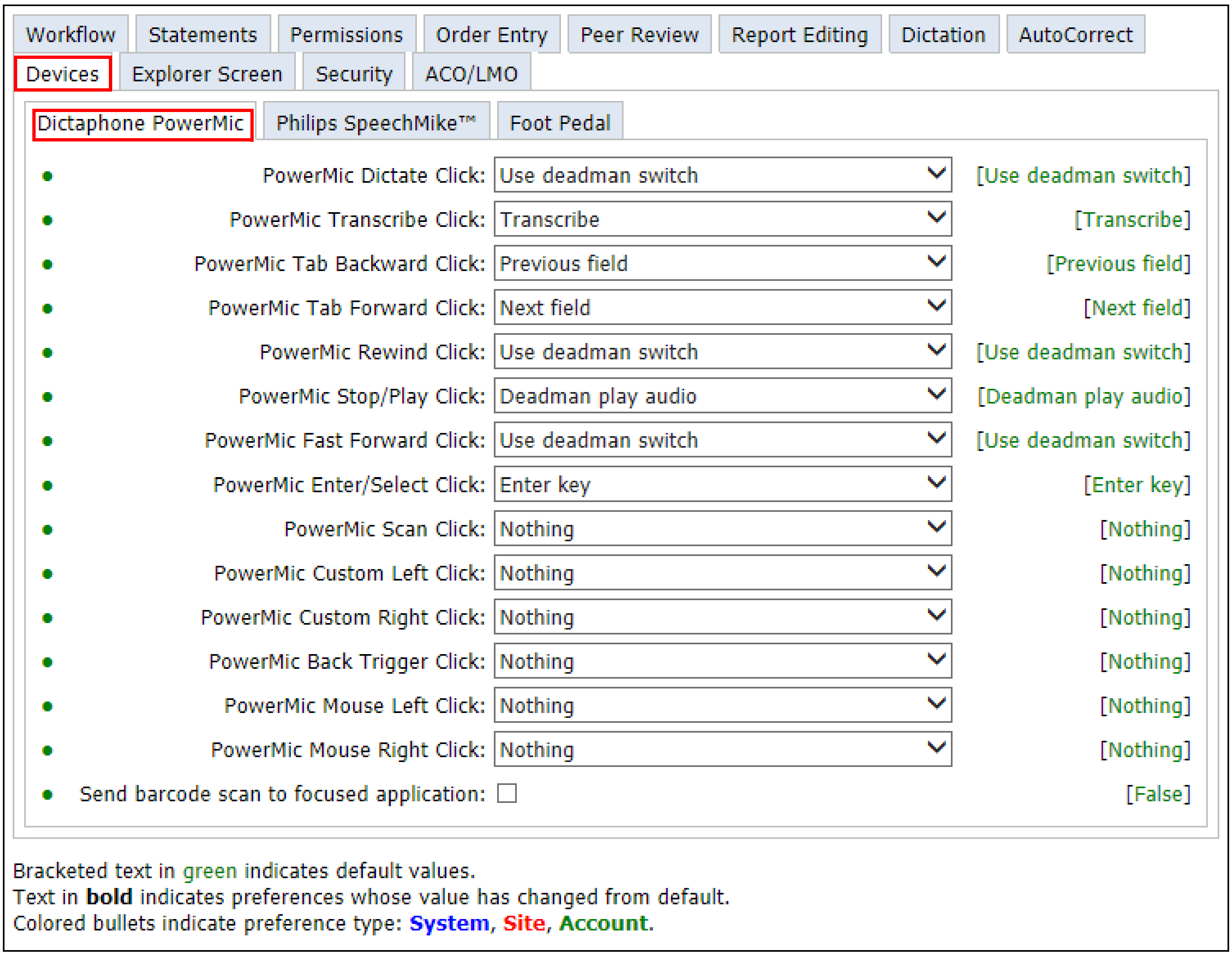
AutoCorrect Preferences: Click Setup > System > Preferences > AutoCorrect tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Capitalize beginning of dictated sentences	Automatically capitalizes the first letter of the first word of a new sentence. Can be modified for individual user accounts.	True
• Account	Replace text during dictation	Select to replace text during dictation for all users. Can be modified for individual user accounts.	True

Devices Preferences

Note: *When you configure these preferences at the system level, they become the defaults for all users. However, an administrator can assign preferences for individual users, or each user can set their own preferences in the PowerScribe 360 Reporting client application.*

Dictaphone PowerMic

Select the desired action for each of the buttons on the PowerMic. The default options appear in green at the right of the window.



Barcode Scan Check Box

Note: *The "focused" application is the one in which you are currently working. For example, you might have your PACS application, PowerScribe 360 Reporting, and a messaging application open on your workstation at the same time. If you click (or select with keystrokes) your PACS application, it becomes the one that is in "focus" since it is the one that you are working in right now.*

Send barcode scan to focused application: Select this check box to allow the provider to scan barcodes into other applications (your PACS, for example) as long as *PowerScribe 360 Reporting* is not in focus. If the *PowerScribe 360 Reporting* application is not in focus, the scanned barcode is sent to the application which currently is in focus. If the *PowerScribe 360 Reporting* application is in focus, it accepts the scanned barcode. By default this check box is not selected.

Dictaphone PowerMic Button Actions

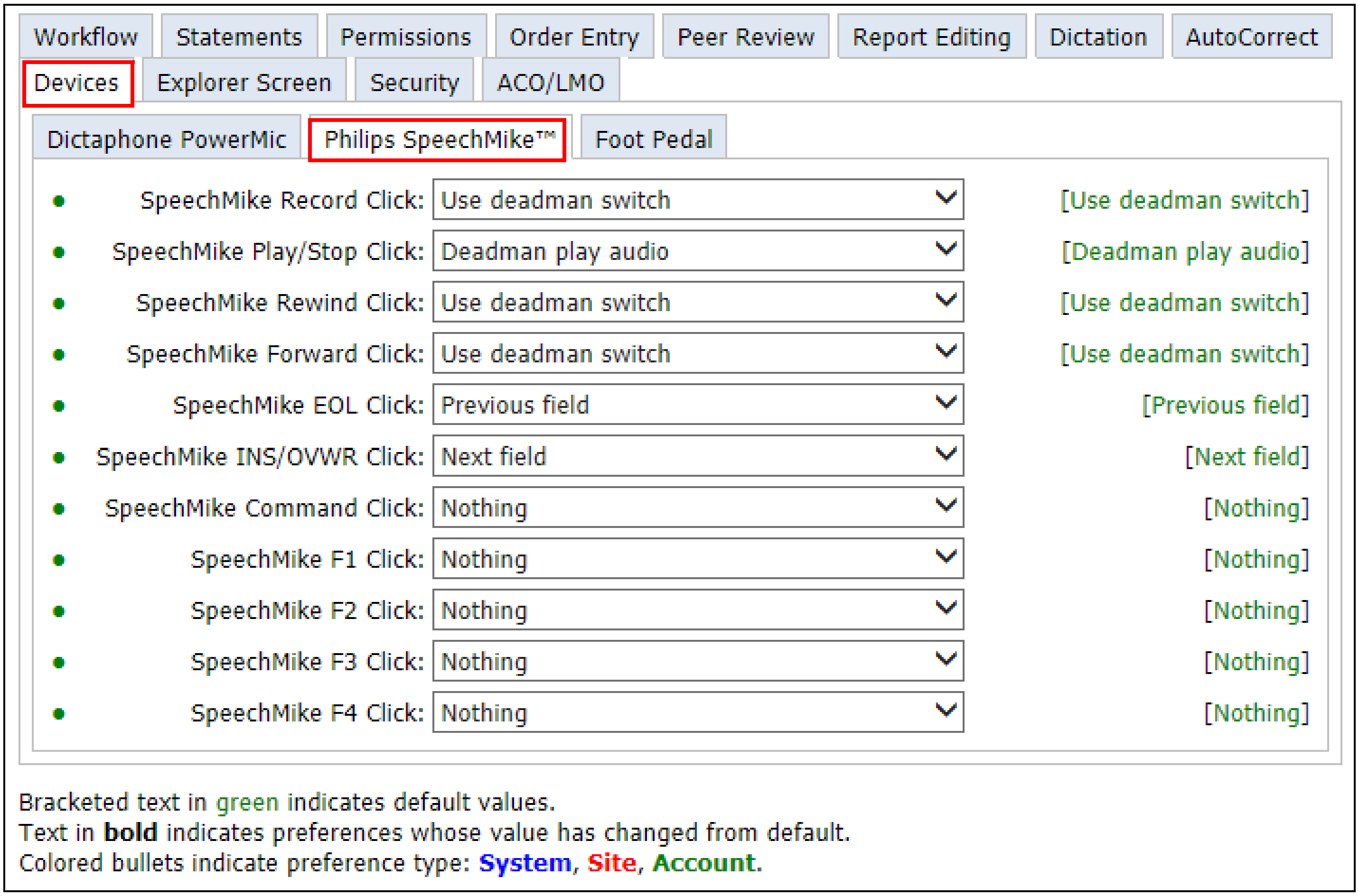
The following table shows the programmable buttons on the PowerMic, along with all the possible actions that can be assigned to each button.

Dictaphone PowerMic Preferences: Click Setup > System > Preferences > Devices > Dictaphone PowerMic tab		
Button	**Action/Setting**	
Transcribe, **Enter/Select**, **Trigger** (on back of mic), and **Scan** buttons	Nothing New line Delete key Delete last utterance Toggle visibility Deadman play audio Enter key Correct report Sign as preliminary Overread and prelim	Sign report New paragraph Delete last word Toggle play audio on off Save as draft Transcribe Backspace STAT Overread report
Dictate button	Toggle dictation on off	Use deadman switch
Tab Backward, **Custom Left**, **Mouse Left Click** and buttons	Nothing Sign report New paragraph Delete last word Toggle play audio on off Save as draft Enter key Correct report STAT Previous field or table cell Overread and prelim	Previous field New line Delete key Delete last utterance Select backward Deadman play audio Backspace Previous discrepancy Sign as preliminary Overread report

Dictaphone PowerMic Preferences: Click Setup > System > Preferences > Devices > Dictaphone PowerMic tab		
Button	**Action/Setting**	
Tab Forward, **Custom Right**, and **Mouse Right Click** buttons	Nothing Sign report New paragraph Delete last word Toggle play audio on off Save as draft Enter key Correct report STAT Next field or table cell Overread and prelim	Next field New line Delete key Delete last utterance Select forward Deadman play audio Backspace Next discrepancy Sign as preliminary Overread report
Rewind button	Toggle rewind on off Previous field Previous field or table cell	Use deadman switch Select backward
Fast Forward button	Toggle fast forward on off Next field Next field or table cell	Use deadman switch Select forward
Stop/Play button	Toggle microphone on off Deadman microphone	Toggle play audio on off Deadman play audio

Philips SpeechMike

Select the desired action for each of the buttons on the SpeechMike. The default options appear in green at the right of the window.



Philips SpeechMike Button Actions

The following table shows the programmable buttons on the Philips SpeechMike, along with all the possible actions that can be assigned to each button.

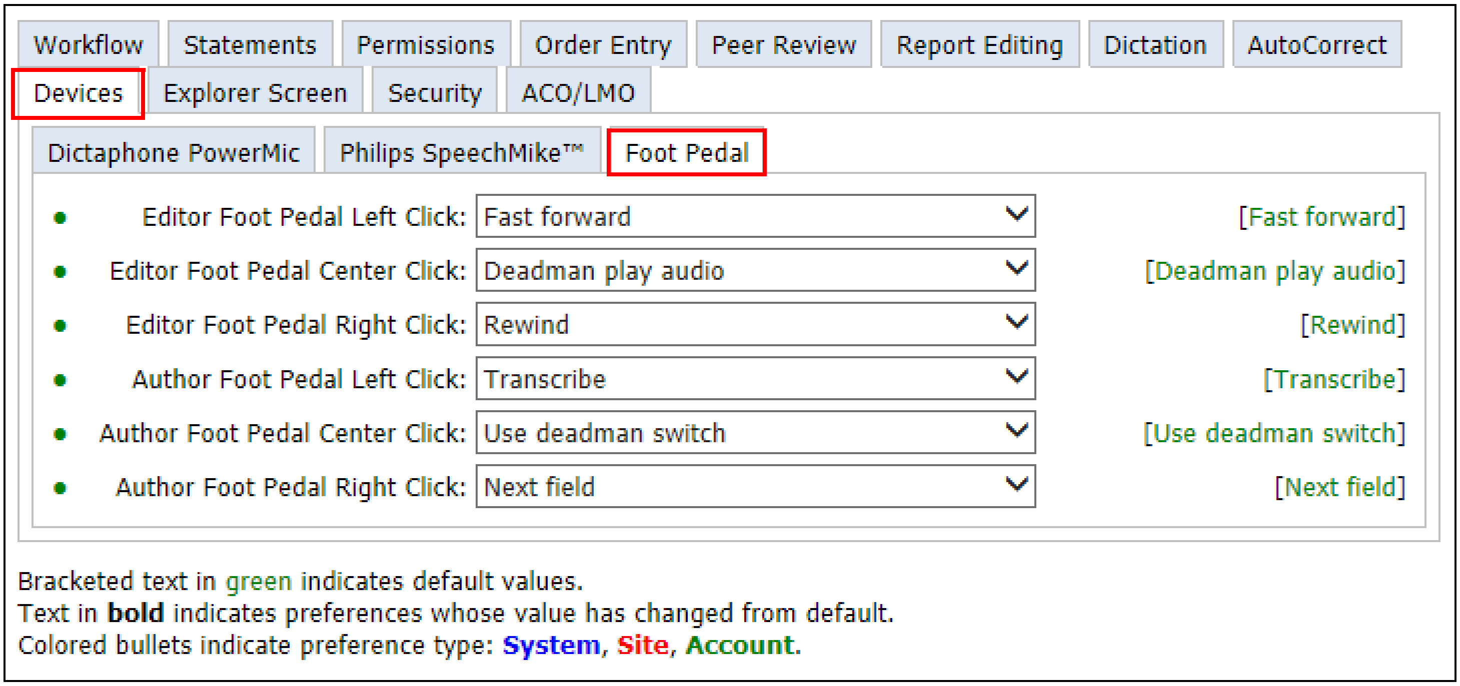
Philips SpeechMike Preferences: Click Setup > System > Preferences > Devices > Philips SpeechMike tab		
Button	**Action/Setting**	
Record button	Toggle play audio on off	Use deadman switch
Play/Stop button	Toggle microphone on off Toggle audio play on off	Deadman microphone Deadman play audio
Rewind button	Toggle rewind on off Use deadman switch Previous field or table cell	Previous field Select backward
Forward button	Toggle fast forward on off Next field Next field or table cell	Use deadman switch Select forward
EOL button	Nothing Sign report New paragraph Delete last word Toggle play audio on off Save as draft Enter key Correct report STAT Previous field or table cell Overread and prelim	Previous field New line Delete key Delete last utterance Select backward Deadman play audio Backspace Previous discrepancy Sign as preliminary Overread report
Ins/Ovr button	Nothing Sign report New paragraph Delete last word Toggle play audio on off Save as draft Enter key Correct report STAT Next field or table cell Overread and prelim	Next field New line Delete key Delete last utterance Select forward Deadman play audio Backspace Next discrepancy Sign as preliminary Overread report

Philips SpeechMike Preferences: Click Setup > System > Preferences > Devices > Philips SpeechMike tab		
Button	**Action/Setting**	
Command button (on back of microphone)	Nothing New line Delete key Delete last utterance Toggle visibility Deadman play audio Enter key Correct report Sign as preliminary Overread and prelim	Sign report New paragraph Delete last word Toggle play audio on off Save as draft Transcribe Backspace STAT Overread report
F1, **F2**, **F3**, and **F4** buttons	Nothing Next field New line Delete key Delete last utterance Select forward Toggle visibility Deadman play audio Enter key Previous discrepancy Sign as preliminary Next field or table cell Overread and prelim	Previous field Sign report New paragraph Delete last word Toggle play audio on off Select backward Save as draft Transcribe Backspace Next discrepancy Previous field or table cell Overread report

Foot Pedal

The foot pedal preferences govern how the software responds when the user presses each of the controls on the foot pedal.

Note that there are separate preferences for Editors and Authors. For example, you can configure the right pedal to fast forward the audio for a transcriptionist, and configure it to go to the next field for a dictation user.



Foot Pedal Actions

The following table shows the programmable foot pedals, along with all the possible actions that can be assigned to each pedal.

Foot Pedal Preferences: Click Setup > System > Preferences > Devices > Foot Pedal tab		
Pedal	**Action/Setting**	
Editor Foot Pedal Left **Editor Foot Pedal Center** **Editor Foot Pedal Right** (all three Editor foot pedals have the same options)	Previous field Toggle play audio on off Rewind Previous discrepancy Previous field or table cell	Next field Deadman play audio Fast forward Next discrepancy Next field or table cell

Foot Pedal Preferences: Click Setup > System > Preferences > Devices > Foot Pedal tab		
Pedal	**Action/Setting**	
Author Foot Pedal Left **Author Foot Pedal Right**	Previous field Toggle play audio on off Transcribe Fast forward Next discrepancy Next field or table cell	Next field Deadman play audio Rewind Previous discrepancy Previous field or table cell
Author Foot Pedal Center	Toggle dictation on off	Use deadman switch

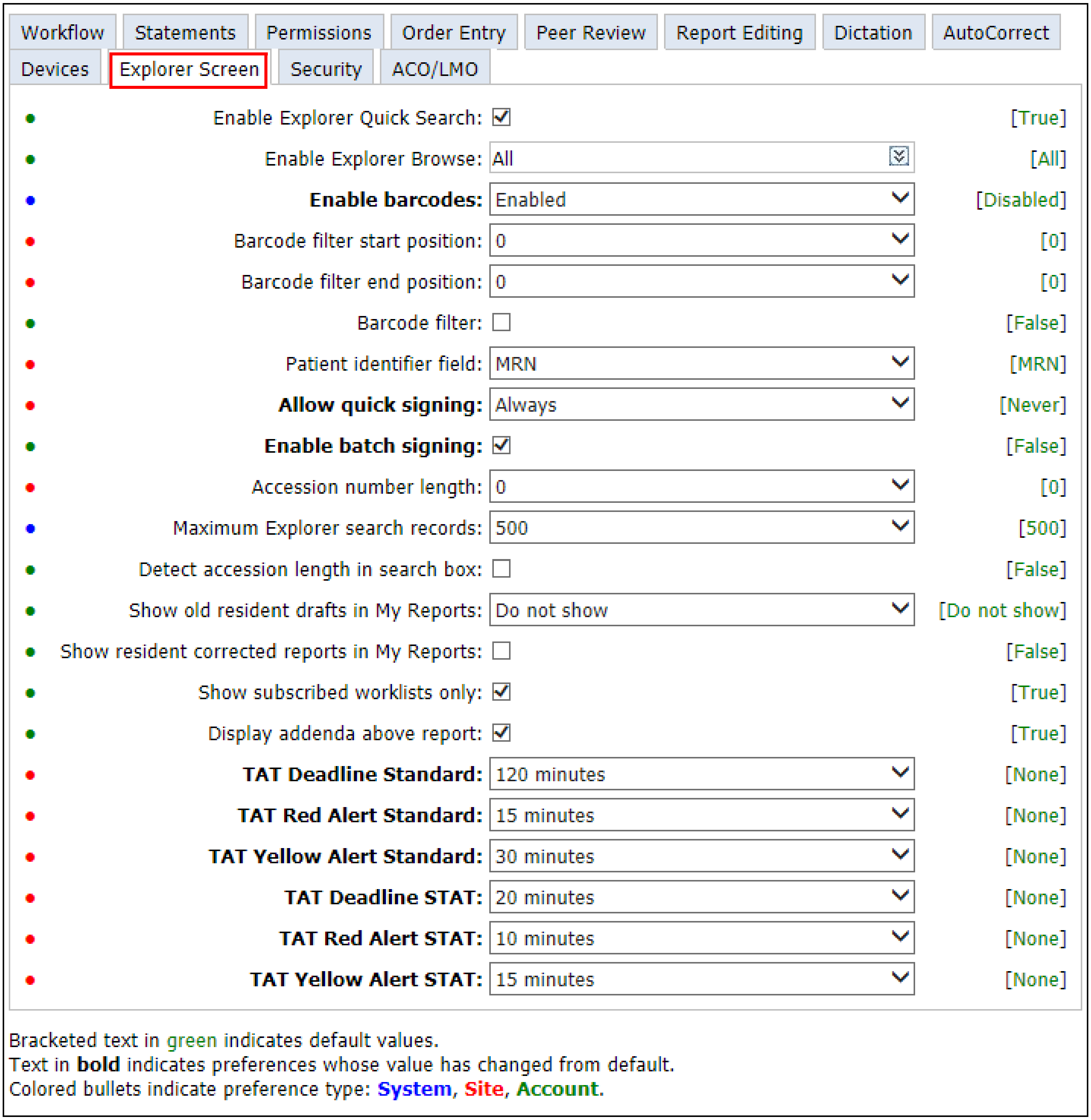
Descriptions of Action for the Devices

The following list briefly describes each of the possible actions:

- **Nothing**: No action occurs when the user presses the button.
- **Sign Report**: Electronically sign the current report.
- **Use deadman switch**: Continue the action while the user holds the button down, stop when the button is released.
- **Toggle [action]**: Begin the action when the user presses and releases the button. Stop the action when the user presses the button again. Toggle actions include:
  - Toggle **dictation** on off
  - Toggle **play audio** on off
  - Toggle **rewind** on off
  - Toggle **fast forward** on off
  - Toggle **microphone** on off
- **Toggle visibility**: Toggles the application window (useful for single-workstation integrated PACS environments).
- **Previous field**: Highlights the previous field in the report.
- **Next field**: Highlights the next field in the report.
- **New line**: Inserts a new line into the report.
- **New paragraph**: Inserts a new paragraph into the report.
- **Delete key**: Deletes forward from current position.
- **Delete last word**: Deletes the last word dictated.
- **Delete last utterance**: Deletes the last group of words recognized (similar to the “scratch that” function).
- **Save as draft**: Saves current report to the draft folder.
- **Transcribe**: Convert the audio to text.
- **Deadman play audio**: Continue playing back audio while the user holds the button down, stop playing back audio when the button is released.
- **Enter key**: The key acts like the **Enter** key on the computer keyboard.
- **Backspace**: The key acts like the **Backspace** key on the computer keyboard.
- **Correct report**: Sends the report to an editor for correction/transcription
- **STAT**: Marks the dictation as a STAT report
- **Select backward**: Selects the previous word based on the current cursor location.
- **Select forward**: Selects the next word based on the current cursor location.
- **Next discrepancy**: Highlights the next discrepancy when using the Quality Check consistency checker (which is a purchasable option)

- **Previous discrepancy**: Highlights the previous discrepancy when using the Quality Check consistency checker (which is a purchasable option)
- **Previous field or table cell**: Highlights the next field or cell in a table
- **Next field or table cell**: Highlights the previous field or cell in a table
- **Overread report**: Assigns the current report to another user for final validation to ensure the quality of the report.
- **Overread and prelim**: Same as **Overread report** but sends the report to the RIS/HIS as Preliminary with the person you selected as the overreader as the report's signer.

Explorer Screen Preferences



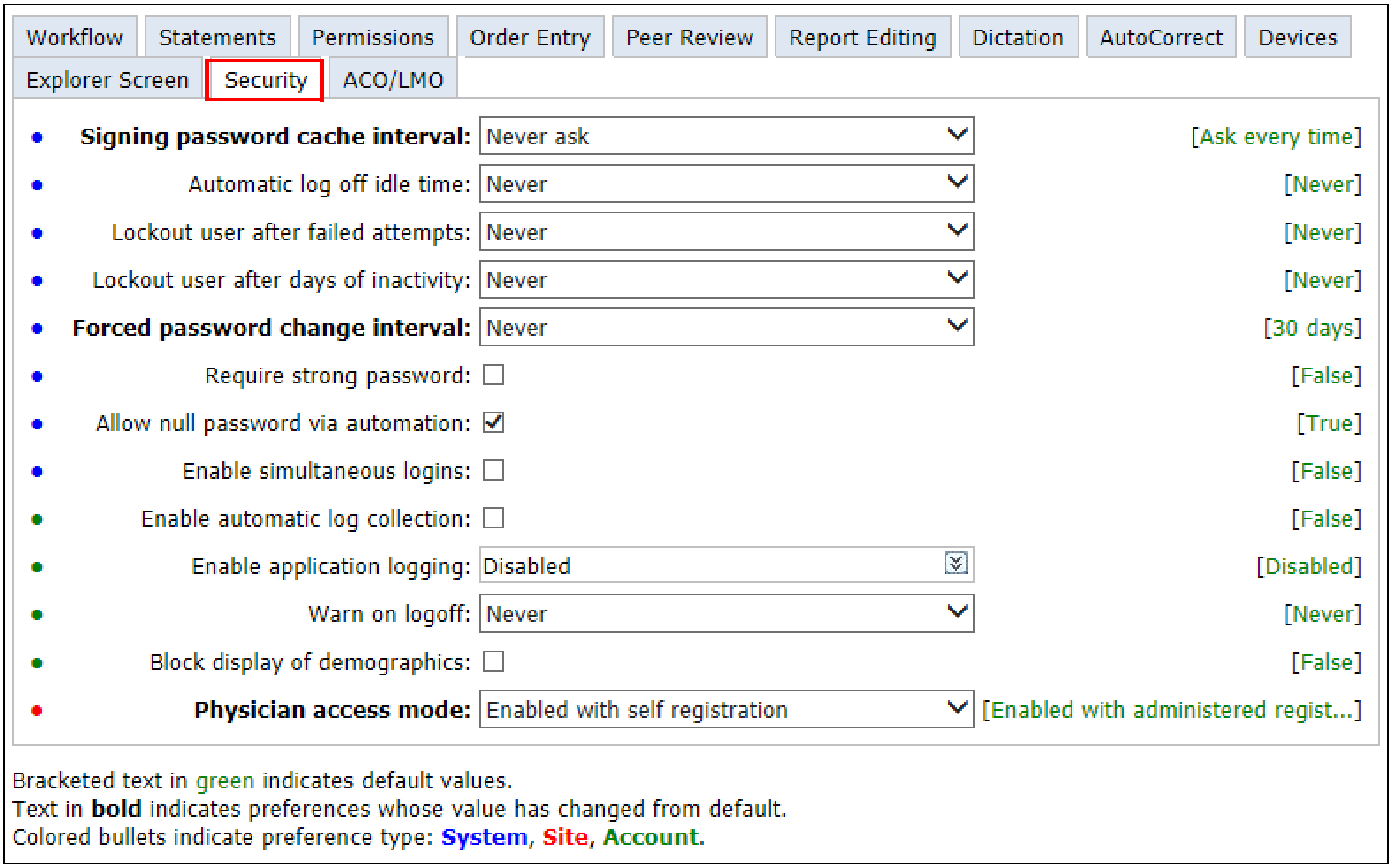
Explorer Screen Preferences: Click Setup > System > Preferences > Explorer Screen tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Enable Explorer Quick Search	Select to display the Quick Search section in the left side of the Explorer window	True
• Account	Enable Explorer Browse	Allows you to select which of the Browse filters to display to the users. Choose one of the following: Time Frame; Status; Site; Location; Radiologist; Ordering Provider; Modality; Anatomy; Section; Patient Age; Patient Class; All; None	All
• System	Enable barcodes	Select to allow barcode scanning. Choose one of the following: Enabled; Disabled; PowerMic II Only ***Note:*** *If you select PowerMic II Only, and the provider is using a PowerMic II, the barcode filter setting will not apply when* ***manually typing*** *into the accession field.*	Disabled
• Site	Barcode filter start position	The position of the first valid character in scanned data such as the MRN or accession number. Use this preference in conjunction with the **Barcode filter end position** to filter out control characters. For example, if the scanned data contains one control character to the left of the actual MRN or accession number, enter 1 as the start position. Enter 0 if there are no leading control characters. (You must also select **Enable barcodes** and **Barcode filter**.)	0

Explorer Screen Preferences: Click Setup > System > Preferences > Explorer Screen tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Barcode filter end position	A *zero-based* (starts with zero, not one) index value that indicates the position of the last valid character in scanned data. Use this preference in conjunction with the **Barcode filter start position** to filter out control characters. For example, if the MRN is 10 characters long and there are *no* leading control characters, enter **9** (which actually indicates the *tenth* character, since this value is a zero-based). If the MRN is 10 characters long and there is one leading control character, enter **10** (which actually indicates the *eleventh* character position, to take into consideration the leading control character). (You must also select **Enable barcodes** and **Barcode filter**.)	0
• Account	Barcode filter	Allows the system to filter out control characters from barcode-scanned data. If you select this option, use the **Barcode filter start position** and **Barcode filter end position** to specify where the valid data begins and ends. This option activates the **Barcode Filter** item in the *PowerScribe 360 Reporting* client application's **Tools** menu and the corresponding toolbar button.	False
• Site	Patient identifier field	Select **MRN**, **Dept number**, or **Both**. The selection you make here configures the entire system to use the selected item as the identifier for patients. For example, if you select Both, the system uses the combined MRN and Department Number as the patient identifier.	MRN
• Site	Allow quick signing	Allows the normally displayed prompt to be bypassed when signing from Explorer. (Applies only to **Pending Signature** reports; for example, an attending signing a resident's reports). Changed from a check box to three choices: **Never**; **Always**; **Attending reports only**.	Never
• 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.	False

Explorer Screen Preferences: Click Setup > System > Preferences > Explorer Screen tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Accession number length	The length of an accession number, for sites that use a fixed number of characters/digits. It enables the **Detect accession length in search box** feature described below.	0
• System	Maximum Explorer search records	The number of records that can be retrieved from the database during a search. Select No Limit, 100, 200, 300, 400, 750, 1000, 2000, 3000, or 5000.	500
• Account	Detect accession length in search box	If you select this option, when the user enters an accession number in the **Quick Search** area, the system automatically begins the search when it receives the correct number of digits. This preference is applicable only if you have set the **Accession Number Length** preference to a value greater than zero. Automatic detection is not used when the **Barcode filter** preference (described above) is enabled.	False
• Account	Show old resident drafts in My Reports	Allows attending radiologists to see (and sign) their residents' drafts when they click the **Drafts** link in the **My Reports** section. This option helps ensure that a report is not lost if the resident does not complete it in a timely fashion. Attending physicians can choose to show all resident drafts, or only those that are older than a certain number of hours.	Do not show
• Account	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.	False
• Account	Show subscribed worklists only	Determines whether the View "All" worklists option is available to the user.	True
• Account	Display addenda above report	Controls whether addenda are displayed before the report body for previewed reports. (Previewed reports include the report preview at the bottom of the Explorer screen, as well as the report preview in all instances of the Prior Reports Control.)	True
• Site	TAT Deadline Standard	TAT (turnaround time) for standard reports that do not have a Red or Yellow status. Selectable values range from **5 minutes** to **4 weeks**, or **None**.	None

Explorer Screen Preferences: Click Setup > System > Preferences > Explorer Screen tab			
Type	**System Preference**	**Definition**	**Default**
• Site	TAT Red Alert Standard	TAT for standard reports that have a Red alert status. Selectable values range from **1 minute** to **24 hours**, or **None**.	None
• Site	TAT Yellow Alert Standard	TAT for standard reports that have a Yellow alert status. Selectable values range from **1 minute** to **24 hours**, or **None**.	None
• Site	TAT Deadline STAT	TAT for STAT reports that do not have a Red or Yellow status. Selectable values range from **5 minutes** to **4 weeks**, or **None**.	None
• Site	TAT Red Alert STAT	TAT for STAT reports that have a Red alert status. Selectable values range from **1 minute** to **24 hours**, or **None**.	None
• Site	TAT Yellow Alert STAT	TAT for STAT reports that have a Yellow alert status. Selectable values range from **1 minute** to **24 hours**, or **None**.	None

Security Preferences



Security Preferences: Click Setup > System > Preferences > Security tab			
Type	**System Preference**	**Definition**	**Default**
• System	Signing password cache interval	This setting controls how often to request a password confirmation when a radiologist signs or approves a report. This preference is ignored for transcriptionist/editors; they are not prompted for a password. Select **Ask every time**, **Never ask**, a number of minutes (5, 10, 15, 20, 25, 30, 45, 60, or 90), or of hours (2, 3, 4, 5, 6, or 12).	Ask every time

Security Preferences: Click Setup > System > Preferences > Security tab			
Type	**System Preference**	**Definition**	**Default**
• System	Automatic log off idle time	The amount of time the user can stay logged into the system when there is no activity at the workstation. Select **Never**, or a number of minutes (15, 30, 45, 60, or 90), or hours (2, 3, 4, 5, 8, 12, 18, or 24). ***Note:*** *For administrators with access to the Administrator Portal, the idle time is fixed at 60 minutes.*	Never
• System	Lock out user after failed attempts	Select **Never**, or select the number of attempts.	Never
• System	Lock out user after days of inactivity	Select **Never**, a number of days (7, 15, 30, or 45), a number of months (2, 3, 4, 5, or 6), or one year.	Never
• System	Forced password change interval	The period of time after which the user is prompted to create a new password.The user is not allowed to reuse an older password, and empty passwords are not permitted. This preference is disregarded when LDAP authentication is used. Select **Never**, a number of days (7, 15, 30, or 45), a number of months (2, 3, 4, 5, or 9), or one year. Selecting a value other than **Never** activates the **Force Reset** item in the **Password** menu on the **Accounts** tab.	30 days
• System	Require strong password	The system will reject any password that does not contain at least six characters, with at least one letter and one digit.	False
• System	Allow null password via automation	A third-party system (for example, PACS) can log in a user to *PowerScribe 360 Reporting* without specifying a password. This option can be useful for single sign-on scenarios where the PACS is not capable of sending the password.	True
• System	Enable simultaneous logins	Allows a user to log in at more than one workstation simultaneously. ***Caution****: For security purposes, Nuance recommends that you do not enable this preference.*	False
• 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.	False

Security Preferences: Click Setup > System > Preferences > Security tab			
Type	**System Preference**	**Definition**	**Default**
• Account	Enable application logging	Allows you to log application activity. Choose either Disabled; Grammar rules; Cursor moves; Recognition mode changes; Field navigation; Report workflow; Speech session; Stray toolbars; Microphone button; NBest choices; Performance; RAS; IRadWhere; or All. 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.	Disabled
• Account	Warn on logoff	The software displays a warning message when the user exits the application or if the application is closed automatically.	Never
• Account	Block display of demographics	The patient's **Name** and **MRN** appear as **n/a**, and are not displayed when the user views the report. (This option is usually activated for users with Editor or Technologist roles—assuming they do not need to see this patient information—so as to meet HIPAA requirements.)	False
• Site	Physician access mode	This preference controls the way physicians access the system. • **Disabled**: Physicians do not have access. • **Enabled with administered registration**: New Portal accounts for physicians are created by only administrators. • **Enabled with self-registration**: A link in the login page allows a physician who already has one or more record in the database (typically originating from a HL7 feed) to create a Portal account and map it to the record(s) by providing his site identifier. • **Enabled with self-registration and OE access**: At the time of the registration, the Order Entry User role is automatically assigned to the new physician account, allowing access to the Order Entry pages. If a physician account does not have that role, she can only access Explorer, to browse for patients' reports.	Enabled with administered registration

Scheduling ACO and LMO

You can schedule the ACO and LMO processes for all users, or for individual users. Scheduling has two aspects: setting an interval for ACO and for LMO, and, if desired, limiting the time frame in which the server is permitted to run the ACO process. You can apply the schedule at the system level to all users, or modify the schedule for individual user accounts.

About the ACO and LMO Intervals

An interval is the period of time between two processes. The interval for ACO or for LMO might be daily, weekly, monthly, every three weeks, or some other time period. You can also disable either process by selecting 'Disabled' rather than an interval. Once you have set the intervals for these processes at the system level, you can tailor the intervals for individual user accounts.

Factors to Consider in Setting ACO and LMO Intervals

Because an LMO process runs quickly and does not tie up resources, you can schedule an LMO for every user every day. At minimum, you should schedule LMO:

- At least every week for providers new to dictating (that is, those who do not already have a user profile or who have not yet dictated five full hours of audio).
- At least every month for providers with more experience dictating (those who already have a user profile and have already dictated a minimum of five hours of audio).

Some factors to consider when deciding how often to run LMO include:

- How much dictation a provider or group of providers generates
- How often you add new words to vocabularies (page 185)

In the ACO process, the speech software measures the amount of dictation collected for each provider. If sufficient data has been collected for a particular provider, it runs the process. For example, if the interval for ACO is Weekly, the software checks once a week for accumulated dictation. If not enough data exists to run ACO for a particular provider, the system does not run ACO for that provider, but might run it for others.

The ACO process, by contrast with LMO, is time-intensive—it runs for one hour to process one hour of dictation. In deciding how often to run ACO, consider:

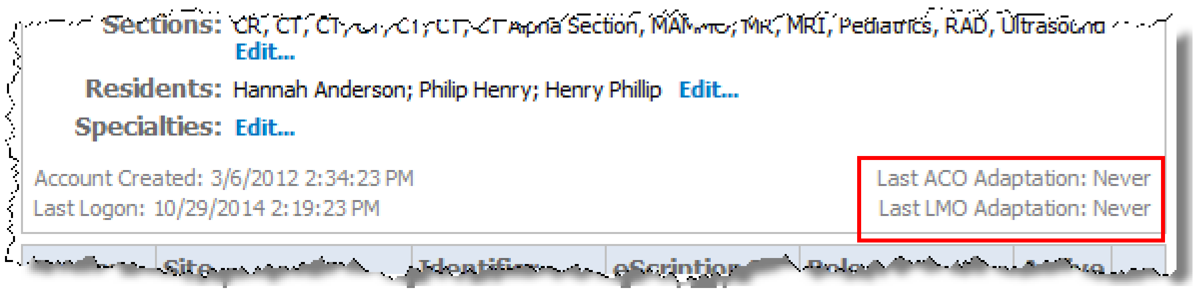
- Whether or not a particular provider has an accent. An accented provider might benefit from running ACO frequently.
- Whether the speech engine often fails to interpret a particular provider's speech accurately. In this case, increasing the ACO frequency might be warranted.
- How much dictation a provider or group of providers generates. A provider who seldom dictates might need ACO to be run less often than weekly or monthly.

For a provider to benefit most from the ACO process, you should set the schedule so that the process runs whenever he or she has dictated five hours of audio. A medical practitioner is unlikely to dictate continuously for five hours, but might produce that much audio over a period of a month or two, dictating as needed.

At minimum, ACO should run for a given provider every six months. This allows the system to adjust the profile for natural variations that occur over time in a person's speech pattern.

One suggested method for scheduling LMO and ACO is as follows:

1. Set the interval to **Every day** for LMO at the system level.
2. Keep the default interval of **Weekly** for ACO at the system level.
3. When a new dictation provider is added to the system, or when a provider begins dictating with speech recognition, determine when this user's the first ACO has been run. You can get this information by viewing the audit data for the user (page 168), or by checking the user's account, which shows the date and time of the most recent ACO and LMO.

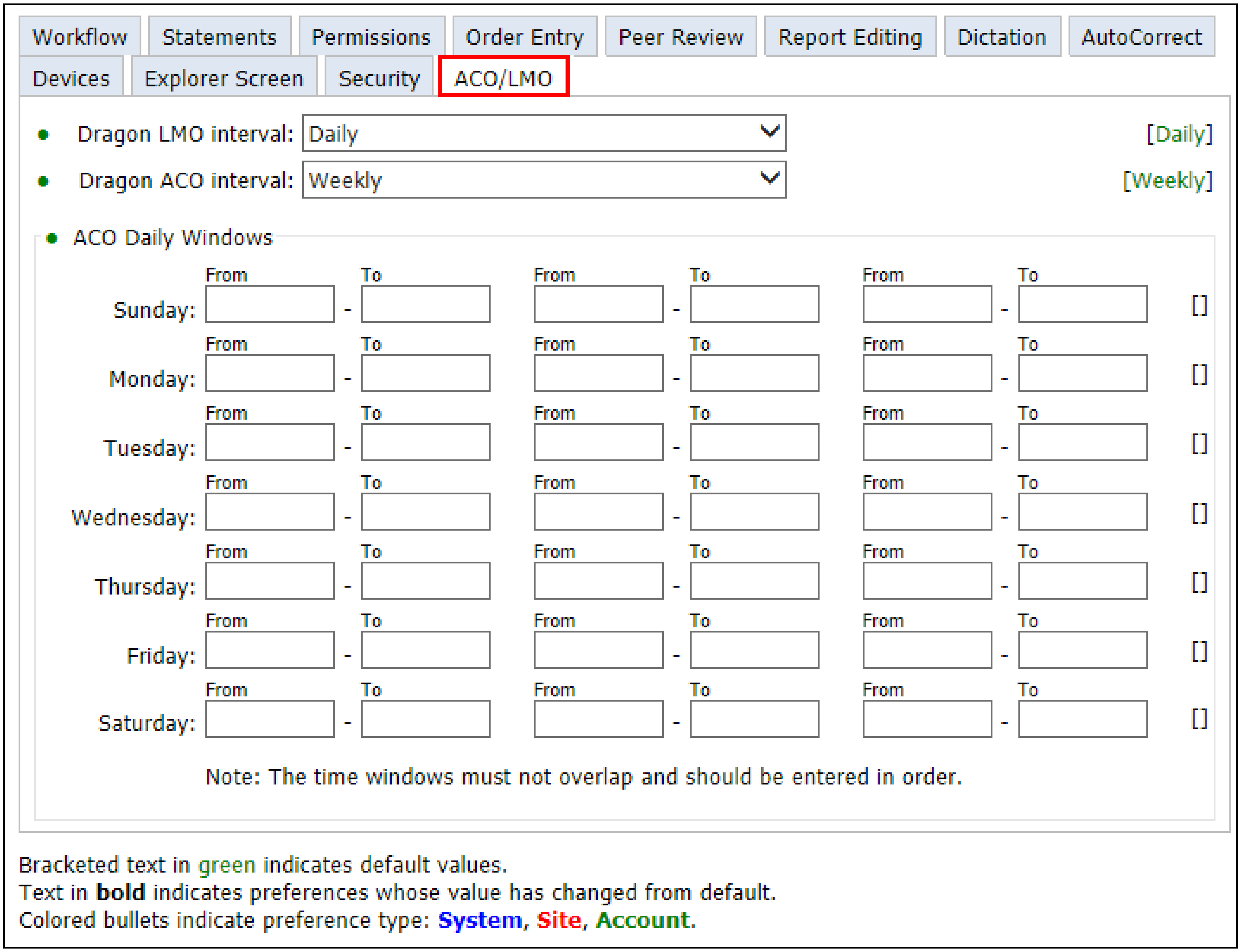


4. When the ACO has run for that user, modify the interval in the user's account to **Monthly**.

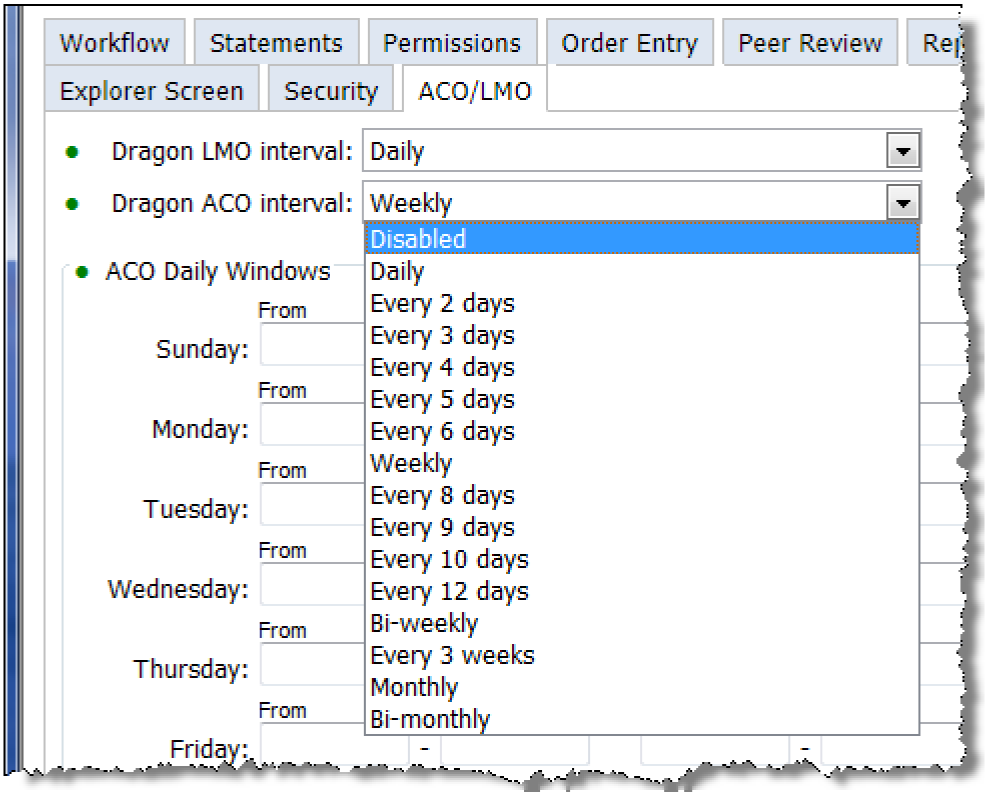
About Setting the ACO Time Window(s)

It is recommended that you *not* schedule specific time slots for ACO. If you define daily windows for the ACO process, it can run **only** during the specified periods. Furthermore, even if the process is ready to run during the specified time frame, other jobs with higher priority might prevent it from running during that time.

To allow ACO to run at any time, do not set the time windows; leave all of the **ACO Daily Windows** fields blank. The system prioritizes jobs based on when the ACO was last run.



Leaving the ACO time parameters blank does not disable the process, but removes any limitations on when it can run. If you need to disable ACO, select **Disabled** as the **Dragon ACO Interval**:



Type	System Preference	Definition	Default
• Account	Dragon LMO interval (days)	Set the amount of time between language model optimizations, or select **Disabled** if you do not want to run LMO.	Weekly
• Account	Dragon ACO interval (days)	Set the amount of time between acoustic model optimizations, or select **Disabled** if you do not want to run ACO.	Weekly
• Account	ACO daily windows	Configure the time(s) during which you want the ACO to run.	None

Scheduling or Disabling ACO and LMO

You can schedule ACO and LMO at the **system** or **individual user** level.

To schedule or disable ACO and LMO at the *system* level:

1. In the **Setup** group, select the **System** tab.
2. Click **Preferences**, and then select the **ACO/LMO** tab.
3. Set the **Dragon LMO Interval** to **Every day**.
4. Set the **Dragon ACO Interval** to **Weekly**.
5. Click **Save and Close**.

To schedule or disable ACO and LMO for an *individual user*:

1. In the **Setup** group, select the **Accounts** tab.
2. Select the provider whose optimization schedule you want to modify.
3. Click **Preferences**, and then select the **ACO/LMO** tab
4. Set the **Dragon LMO Interval** to **Every day**.
5. Set the **Dragon ACO Interval** to **Weekly**.
6. Click **Save and Close**.

Type	Description
Reset speech	The administrator performs a checkpoint restore (page 175). For this event, the **Info** column indicates whether the entire profile is restored, or just the acoustics.
Checkpoint speech	The user creates a checkpoint (backup of the current speech profile), or the system creates one automatically after the user performs training.
Set speech to mock profile	The administrator creates a profile from the prototype (page 175).
Delete speech profile	The administrator removes the user's profile (page 177).
Set speech language	The administrator assigns a language model to the account.
Set speech acoustics	The administrator assigns an acoustic model to the account.
Delete speech acoustics	The administrator selects **Reset acoustics and retrain** from the **Roaming Profile** menu.
Optimize speech acoustics	The ACO process runs for the account.
Optimize speech language	The LMO process runs for the account.
Import speech vocabulary	The *PowerScribe 360 Reporting* client application detects new words and adds them to the user's profile.

***Tip:** Look for **Speech Utility** in the **Realm** column to find ACO or LMO-related events. You can click the **Realm** column heading to sort the list by this column.*

7. When you have finished reviewing the LMO and ACO events for this account, click **Close Window**.

__Tip:__ You can also use the ACO/LMO tab in the Logs group to view LMO and ACO activity.

Chapter 5

Configuring Sites

Objectives

In this chapter, you will:

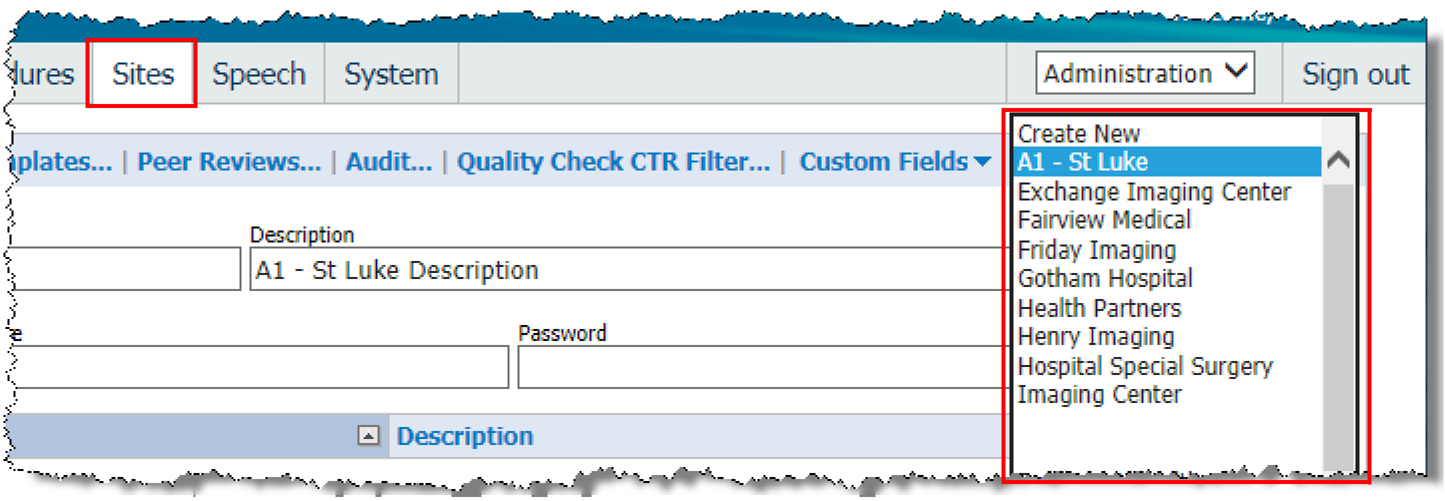
- Review the available site configuration options
- Define PACS
- Describe the purpose and use of sections
- Describe the purpose and use of custom fields
- Explain how locations are used

Introduction to Site Configuration

In a single-site installation, you need only configure one site. In a multiple-site installation, you have the option of configuring settings differently for one or more sites, depending on your organization's needs.

Site Settings

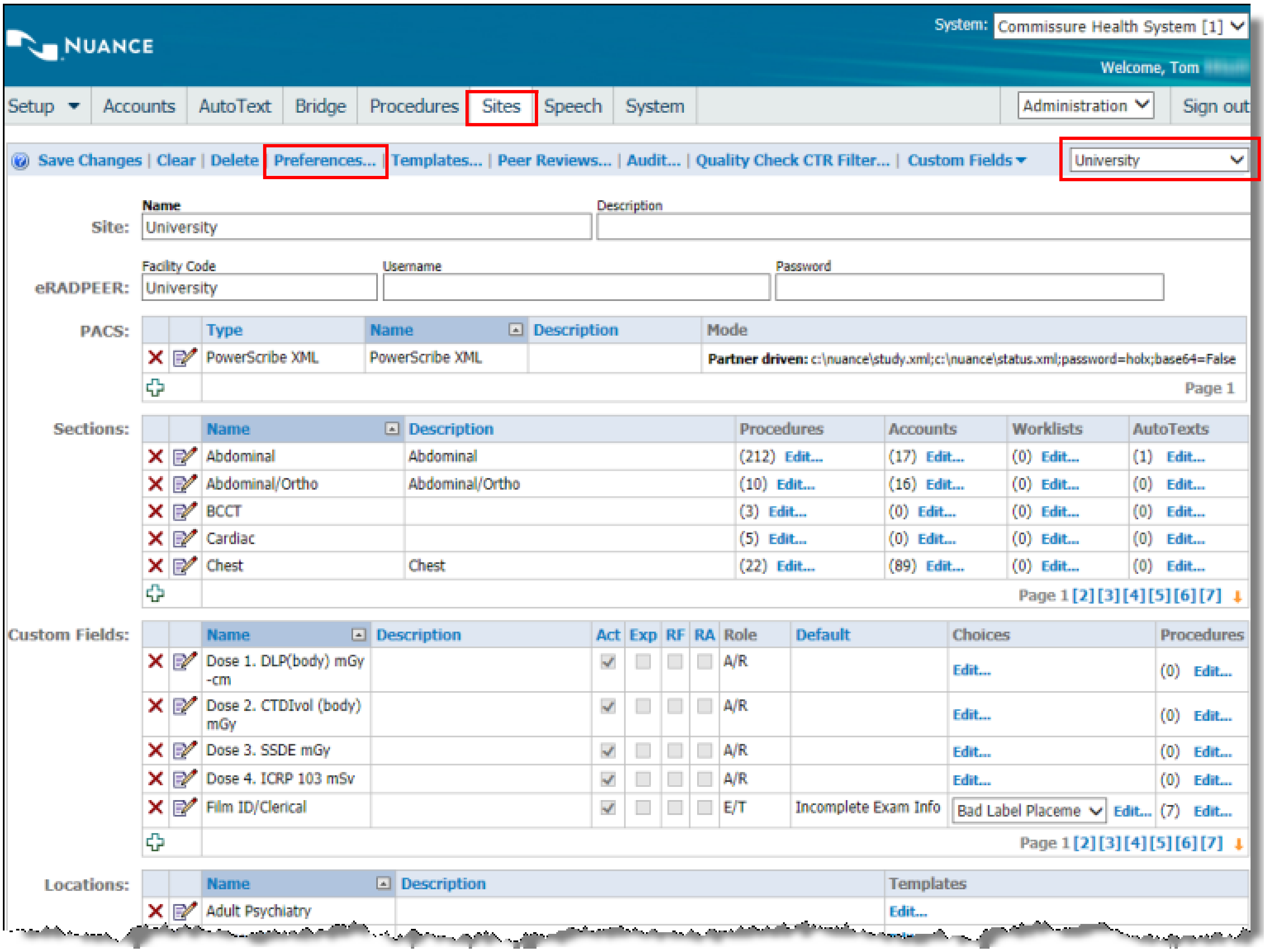
Site settings include each site's name and description, PACS (Picture Archiving and Communications System) setup, sections, locations (if applicable), and custom fields. These configurations are on the **Sites** tab in the **Setup** group. This tab contains a drop-down list from which you can select the site you want to configure.



In a single-site installation, you need only configure one site on this tab.

Site Preferences

If your facility has multiple sites, you might want to configure some preferences differently for one or more sites; any setting you make at the site level overrides the corresponding system preference and affects only that site. You can use the **Preferences** link on the **Sites** tab to tailor the site's configuration as needed.



For example, suppose you have created an attestation statement at the system level; this statement appears on all reports in the system. If you do not change this preference at the site level, reports at all sites contain this statement. You might require, however, that reports at one site display a different attestation statement. Or, you might require that the report transmission grace period be longer at a particular site than at the others.

Refer to Chapter 4 for information on setting your system, site, and user account preferences.

Configuring Sites

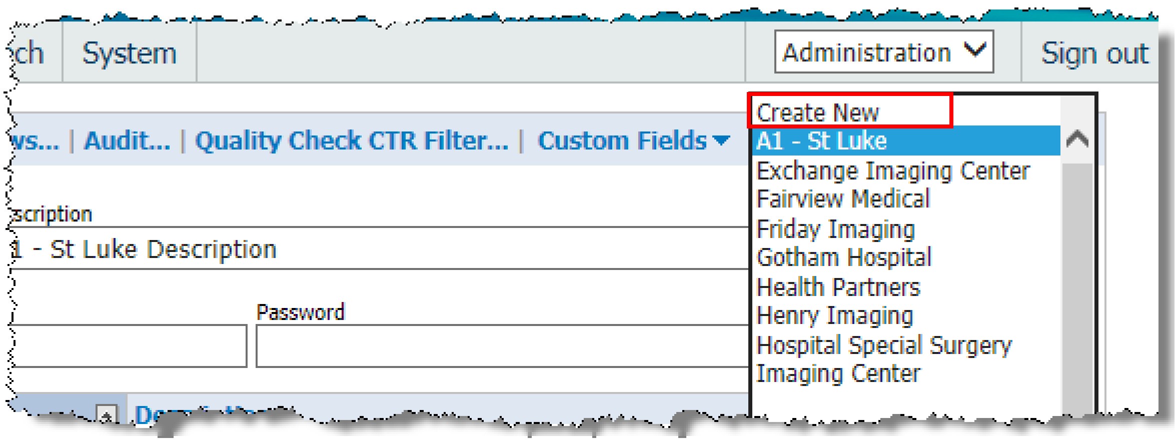
Follow the procedure below to configure an individual site in your system.

Creating the Site

Follow this procedure to create and configure a new site.

To create the site:

1. In the **Setup** group, select **Sites**.
2. From the drop-down list at the upper right, select **Create New**.



3. Enter a name for the site in the **Name** field. If desired, add a **Description**.

> ***Caution:*** *Site names can contain* ***only alphabetic and numeric characters****; apostrophes and any other type of punctuation or special characters are* ***not*** *permitted.*

4. Click **Save and Close** to save the site, or continue with the procedures below.

Adding eRADPEER Information to a Site

Enter the Facility Code, Username, and Password for the eRADPEER account for this site.

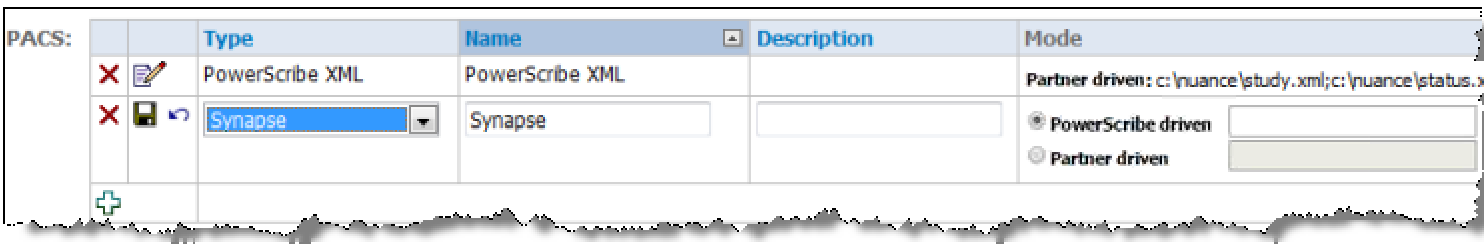
Adding a PACS to a Site

In most cases, your Nuance representative configures the site for your PACS. If you need to perform this configuration, consult with your Nuance representative.

To add a PACS:

1. In the **Setup** group, select **Sites**.

2. Click the plus sign next to **PACS**.
3. From the **Type** drop-down list, select the type of PACS integration you want to add to this site. For example, you might select Synapse.
4. In the **Name** field, type the name by which this PACS will be known in your system. By default, the PACS has the same name as its type.
5. If desired, type a description of the PACS.
6. Select **PowerScribe driven** or **Partner driven** mode. (If the PACS is in both PowerScribe driven and Partner driven modes, you will need to create two separate entries.)
7. In the text field next to the selected mode, enter any information required for this integration type.



8. Click the **Save** icon to add this PACS to the site.

Adding Sections to a Site

Sections are automatically populated upon importing the Procedure Master Translator. Sections can also be added as needed. For example, to control the work a user receives, you can associate a particular section with a user account and also with one or more worklists. To use sections, you will need to define them in the site.

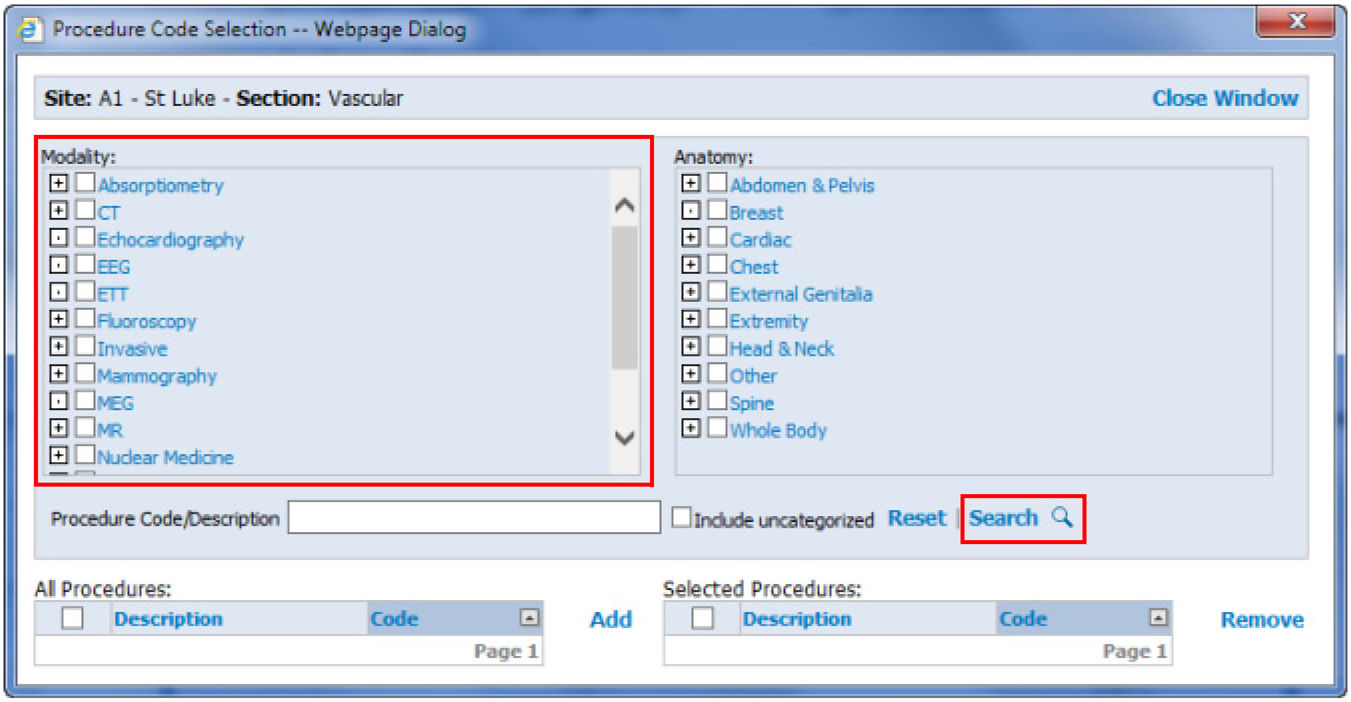
Tip: *Create an* ***Editor*** *section for those who will send to the editor. You can then use this section to subscribe the editors to the Editor worklist.*

To add a section:

1. In the **Setup** group, select the **Sites** tab.
2. Click the plus sign in the **Sections** area. A line for a new section is added.

3. Enter a **Name** for the new section.
4. If desired, enter a **Description** of the section.
5. Click the **Save** icon to save the section.

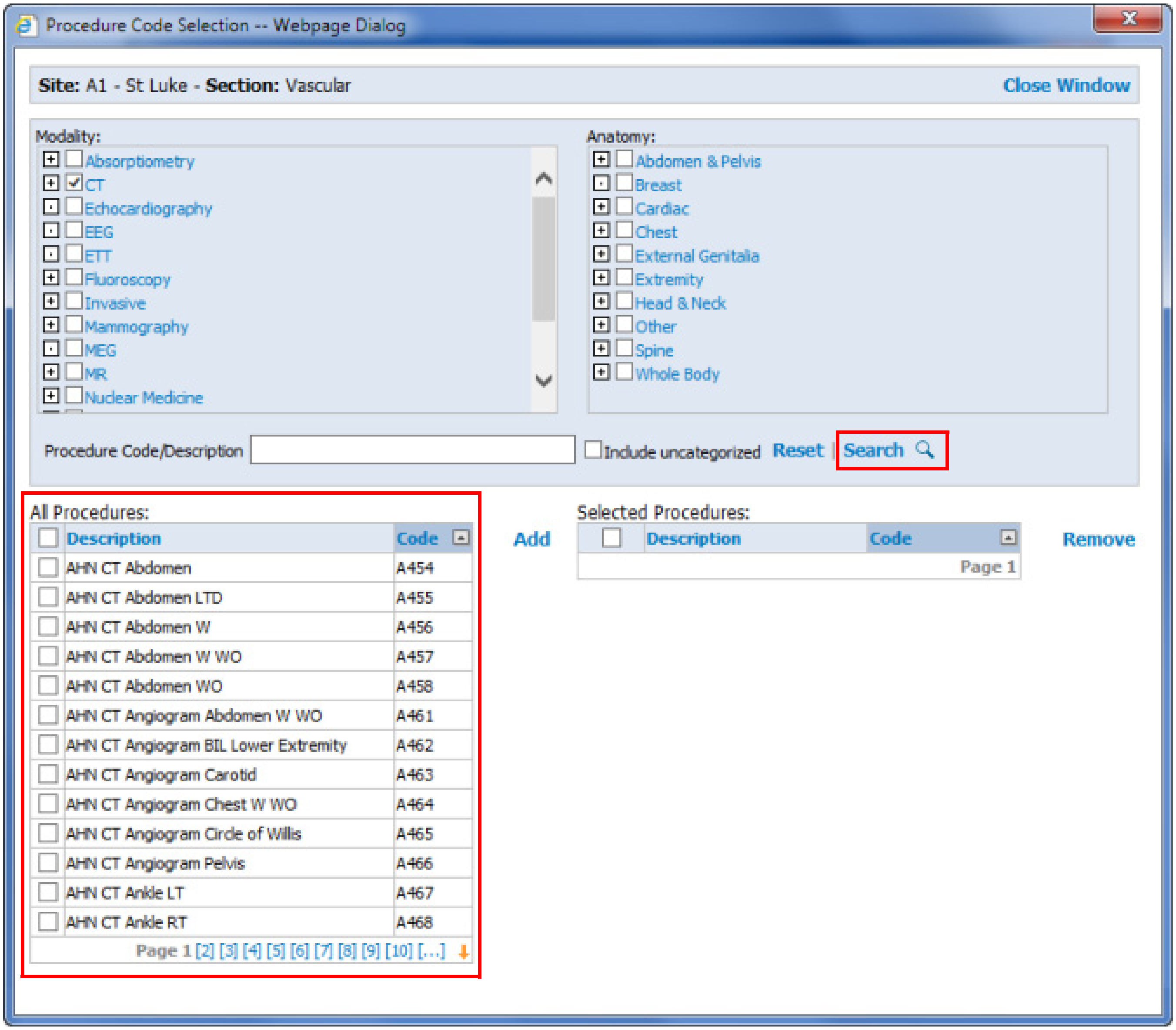
6. To associate this section with one or more procedure codes, click **Edit** in the **Procedures** column next to the new section. The **Procedure Code Selection** dialog box opens.



Find the procedure(s) you want to associate with this section:

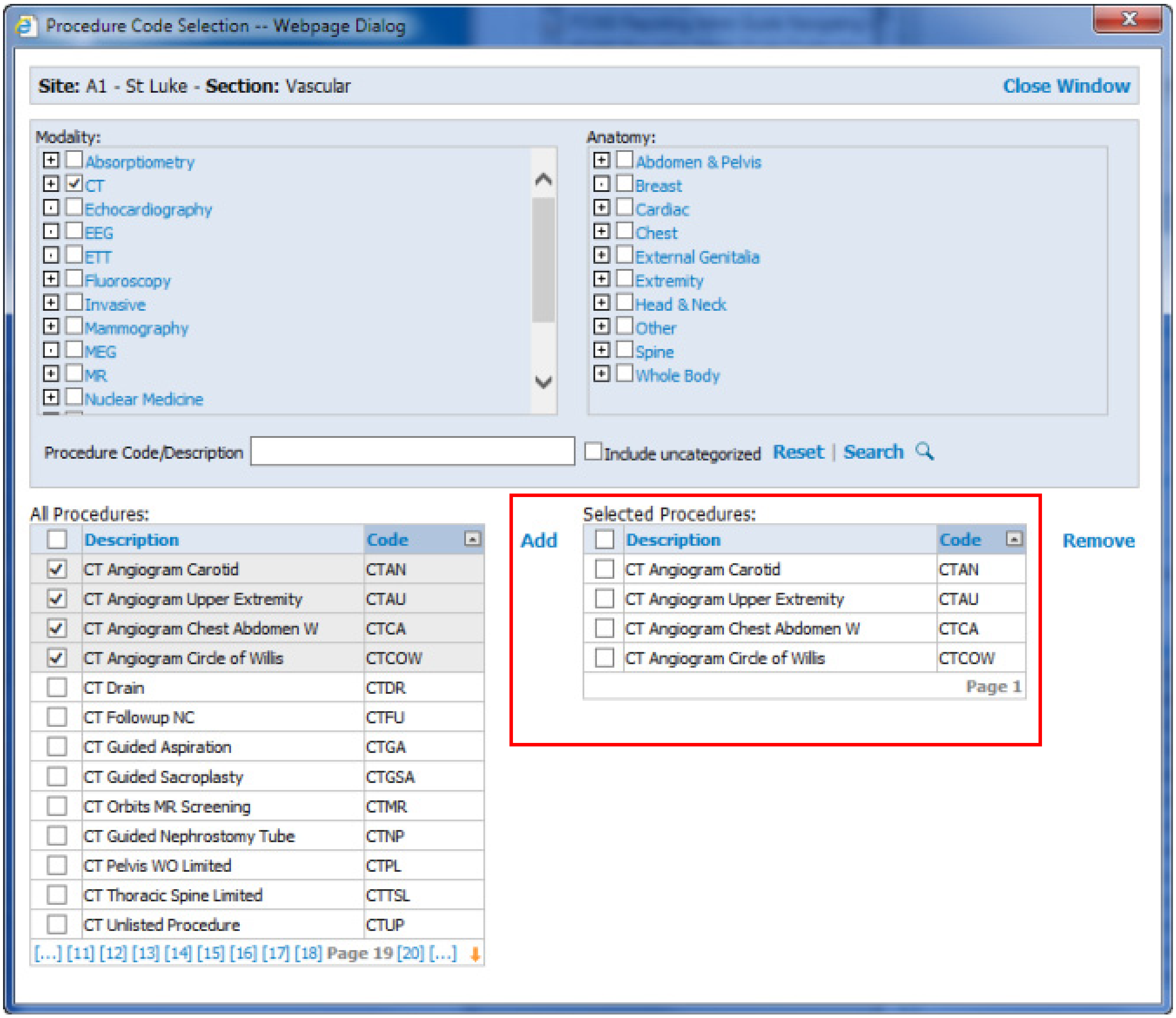
a. Place a check mark next to any modality or anatomy whose codes you want to display.

b. Click **Search**. Any procedures connected to the items you chose appear in the **All Procedures** list.



c. In the **All Procedures** list, place a check mark next to each procedure you want to add to this section.

d. Click **Add**. The procedure(s) appear in the **Selected Procedures** list at the right.

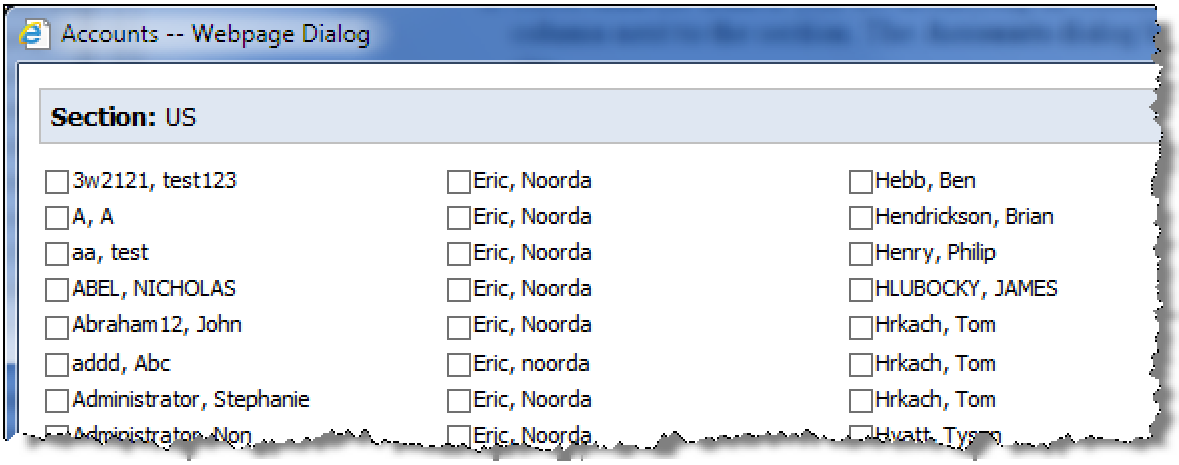


e. Click **Close window**. The count is increased by the number of procedures you added.

Tip: *For more information on procedure codes, refer to Introduction to Procedure Master Translators, beginning on page 192.*

7. To associate one or more user accounts with this section:

   a. Click **Edit** in the **Accounts** column next to the section. The **Accounts** dialog box displays the accounts in this site.



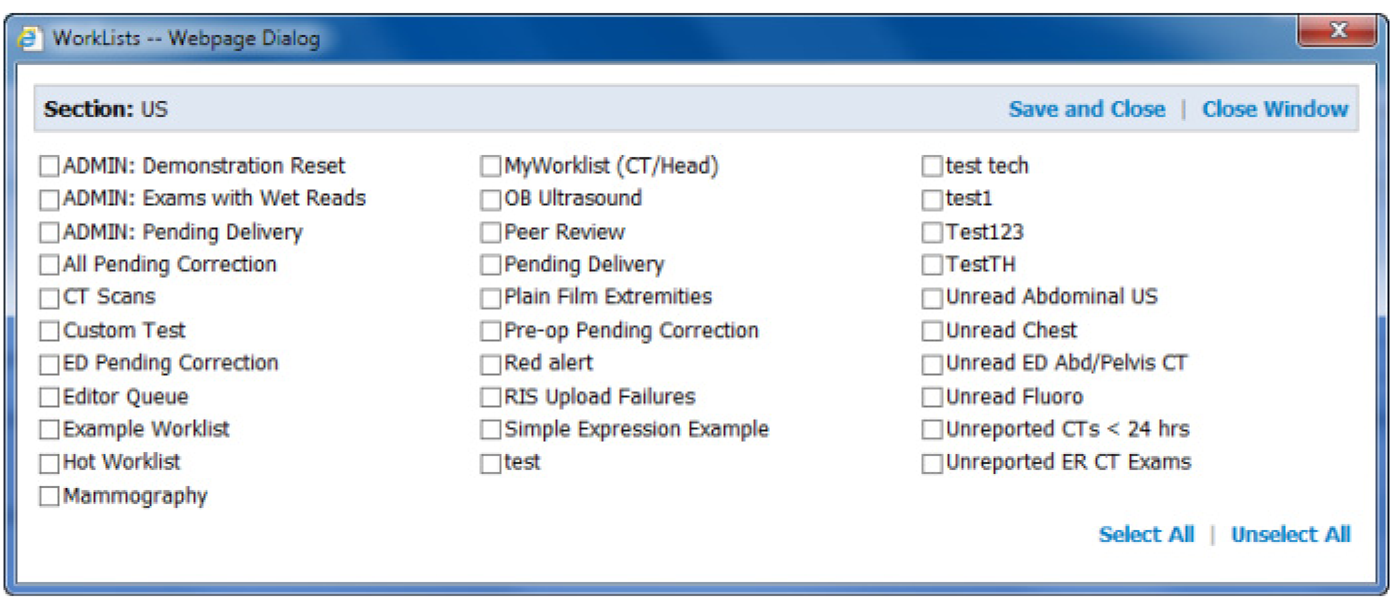
   b. Select the accounts you want to associate with this section.

   c. Click **Save and Close**. The count in the **Accounts** column is increased by the number of user accounts you chose. In each of these accounts, the section is added in the **Sections** field (**Accounts** tab in the **Setup** group).

Tip: *Associating one or more accounts with a section allows you to control providers' access to worklists; refer to Using Sections to Control Worklist Access, beginning on page 430 for more information on this concept.*

8. To associate one or more worklists with this section:

   a. Click **Edit** in the **Worklists** column next to the section. The **Worklists** dialog box opens.



b. Select the worklists you want to associate with this section.

c. Click **Save and Close**.

Tip: *You can also associate sections with a worklist. Refer to Chapter 16 for information about creating worklists.*

9. To associate one or more AutoText with this section:

   a. Click **Edit** in the **AutoTexts** column next to the section. The **AutoTexts** dialog box opens.

   b. Select the AutoText you want to associate with this section.

   c. Click **Save and Close**.

Tip: *For more information about creating and managing AutoText, see Managing AutoText in the Administrator Portal, beginning on page 289 of this admin guide.*

Adding Custom Fields to a Site

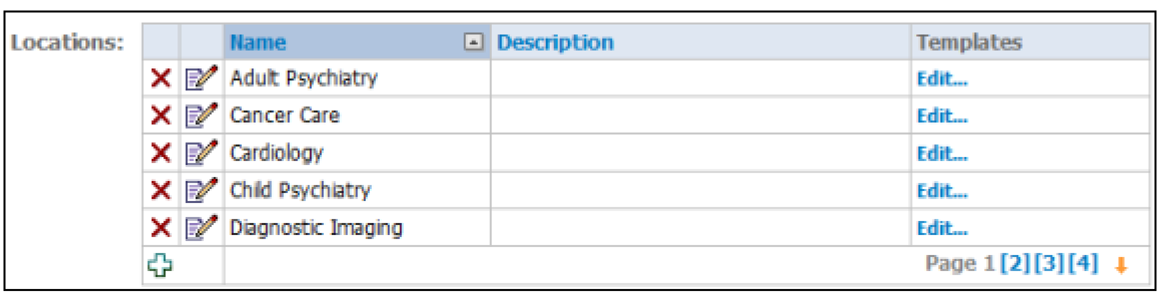
Tip: *For more information, see Custom Fields, beginning on page 325.*

Custom fields are data items (also called metadata) associated with a particular order. These might include measurements, radiation dosage information, flags, and so on.

Adding Locations to a Site

To add a location to the site:

1. In the **Setup** group, select the **Sites** tab.
2. Click the plus sign in the **Locations** area. A new location line is added.



3. Enter a name and optional description for the site location.
4. Click the **Save** icon to save the location.

Tip: *The Edit link in the Templates column allows you to create and maintain print, fax, and fax cover sheet templates for a site location. Refer to Creating Templates for the Site, beginning on page 113.*

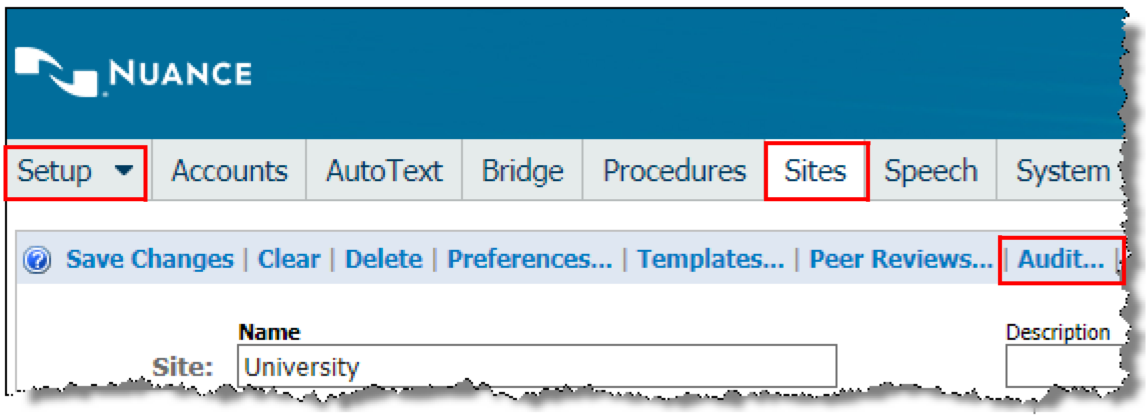
Creating Templates for the Site

To create print and fax templates at the site level, or for locations within a site, refer to Introduction to Templates, beginning on page 501.

Auditing Site Events

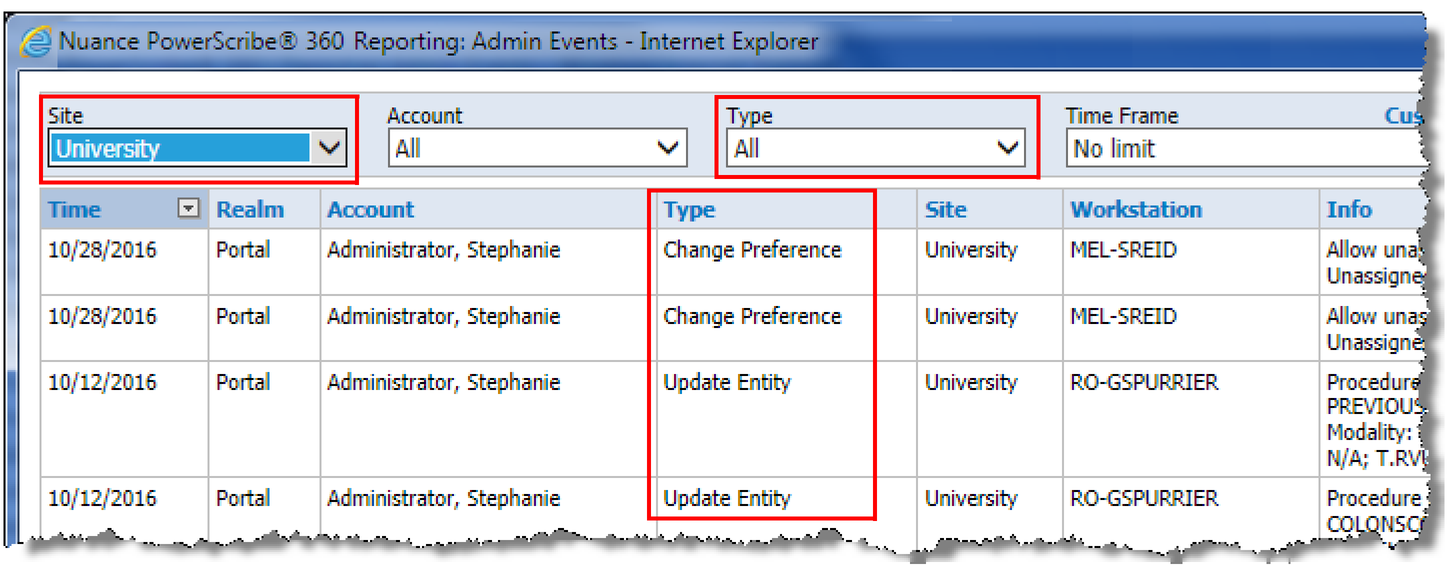
Administrators can now audit several types of events at both the system and site levels.

- To view the audit log at the site level, click **Setup > Sites > Audit**.



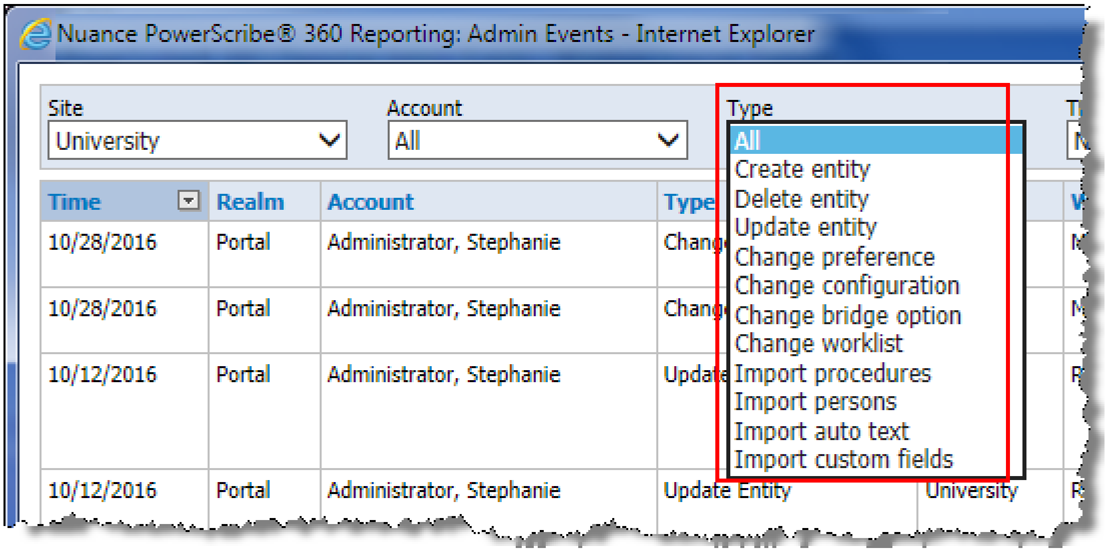
Filter your audit event list by:

- **Site:** The Site-level audit list shows only the current site



- **Account**: Select an administrator account or select all administrators
- **Type**: Select a specific type of event or select all events:

*Note: Although the **Change configuration** and **Change worklist** items are visible in the **Type** drop-down list at the **Site** level, audit results for these items are displayed only at the **System** level, and not at the **Site** level.*



– **Create/Delete/Update Entity**: Shows create, delete, and update events for entities such as **systems and sites**

– **Change** preference: Shows changes in system- or site-level preferences performed by the selected administrators

– **Change configuration**: Shows changes made to any of the tabs in the **Setup** > **System** > **Configuration** window. Available at system level only; see note above.

– **Change bridge option**: Shows changes made in the **Setup** > **Bridge** tab

– **Change worklist**: Shows changes made to any worklists in the system (**Setup** > **System** > **Worklists**). Available at system level only; see note above.

– **Import procedures/persons/auto text/custom fields**: Shows any activity involving the import procedures within the system.

- **Time Frame**: Select a time from the drop-down list, or click **Custom** and create your own filter

Several account-level items are available in the account audit log (to view an account-level audit log, click **Setup** > **Accounts**, select the account you want to view, and click the **Audit** link):

- Change Username
- Change Admin Rights
- Change Supervisor
- Change Personal Info
- Change Sections
- Change Specialties

Managing Procedure Codes in the Site

To import, edit, and map procedure codes at the site level, refer to *Introduction to Procedure Master Translators, beginning on page 192*.

Chapter 6

Creating Provider, Transcriptionist/Editor, and Other Accounts

Objectives

In this chapter you will:

- Define the roles you can assign to accounts
- Create provider and transcriptionist/editor accounts
- Create front desk, technologist, and order entry user accounts
- Import physicians, patients, and non-administrative users
- Define the preferences you can assign to users
- Describe multiple-site user access
- Discuss user auditing
- Maintain a user account and manage speech profiles

Creating Users

This section provides instructions for creating dictation providers, transcriptionist/editors, and other accounts. You create users on the **Accounts** tab of the **Setup** group.

Roles

To understand how to create users in *PowerScribe 360 Reporting*, you need to be familiar with the various *roles* you can assign to them.

Roles determine which features users see when they log into the Portal. A user might have the same role in all sites to which she has access, or a different role in each site. As administrator, you can assign users the following roles:

- **Attending**: An attending radiologist is certified and is authorized to create and sign his own medical reports and those authored by residents.
- **Resident**: A provider who is not yet certified. Residents can author medical reports but are not authorized to sign them; they can only approve the reports, which are later signed by an attending provider. In most cases, the resident has a designated attending radiologist (or group of attending radiologists) who eventually signs the report.
- **Fellow**: A fellow is a visiting physician who has been invited to serve at a healthcare institution. A fellow's role is similar to a resident's, but a fellow might have the privileges of an attending provider if certified in a specialty. When logging in as a fellow, the user can select either the attending or resident role. Depending on your facility, a fellow might have signing privileges on some reports but resident privileges (non-signing) on others.
- **Editor**: An editor transcribes recorded dictation. In addition, an editor can listen to dictated audio and correct errors in the output of automated speech recognition. An editor can create a draft report without dictation; the draft report is then finalized by a radiologist.
- **Front Desk**: A Front Desk user has limited rights on the Portal. For example, Front Desk users can scan patient insurance cards, and so on.
- **Order Entry**: Users assigned the Order Entry role can use the Web-based portal application only to enter, modify, or update orders in the system.
- **Technologist**: Before the radiologist dictates a report on an order, a technologist might supply some data that has not been sent in HL7 as part of the order. Alternately, a technologist can create a draft report without dictation; the report is then finalized by a radiologist.

Providers

A provider can create reports in the *PowerScribe 360 Reporting* client application, and can edit reports in the Administrator Portal.

Physicians

A physician can log in only to the Portal. In the Portal, she can perform order entry and view reports. A physician can see only the **Explorer** and **Profile** tabs in the Portal.

Administrators

In the *PowerScribe 360 Reporting* system, administrators are users who have been granted some or all of the administrator rights. An administrator might also be a user who has been assigned to a specific role in the *PowerScribe 360 Reporting* system. (See *Creating an Attending, Resident, or Fellow Account*, beginning on page 117.)

As an administrator, you are not able to edit your own administrative rights. If there is a need for your rights to be modified, another administrator must edit your account.

Creating an Attending, Resident, or Fellow Account

Use the following steps to create a provider account with the **Attending**, **Resident**, or **Fellow** role.

Notes:

- *If you have to add more than a few provider accounts, you can use the **Import** feature located under the **System** tab. Refer to "Importing Persons" on page 129.*
- *If the Bridge service receives a report and does not find its provider in the system, it automatically creates a new, inactive user account with the provider's last name and RIS identifier as the user ID. To prevent creation of these 'dummy' accounts, ensure you have created all the necessary accounts before the Bridge service begins receiving reports from the RIS.*

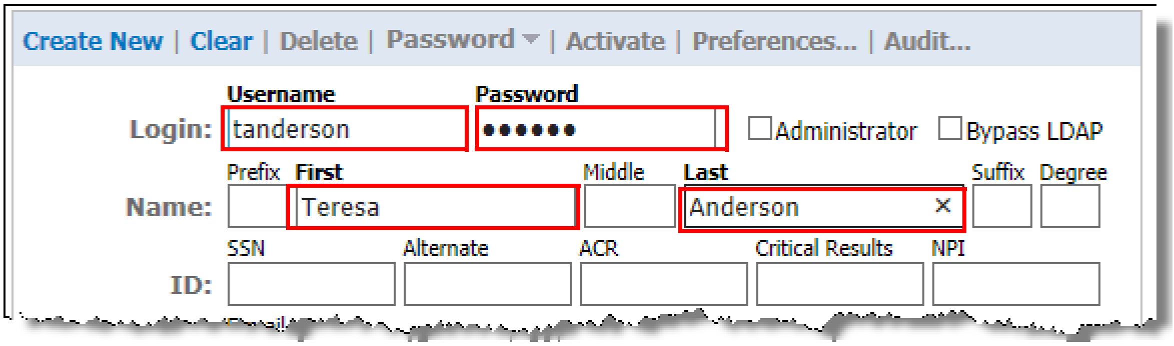
To create a provider account:

1. In the **Setup** group, click the **Accounts** tab.
2. Enter a **Username** for the user.
3. Enter a **Password**.

   Tip: *If your system is configured to require users to change their passwords at their first login (that is, if the **Setup > System > Preferences > Security tab > Forced password change interval** preference is set to anything other than **Never**), consider creating a basic password for all users to use at first, allowing each user change to a more secure one at first login.*

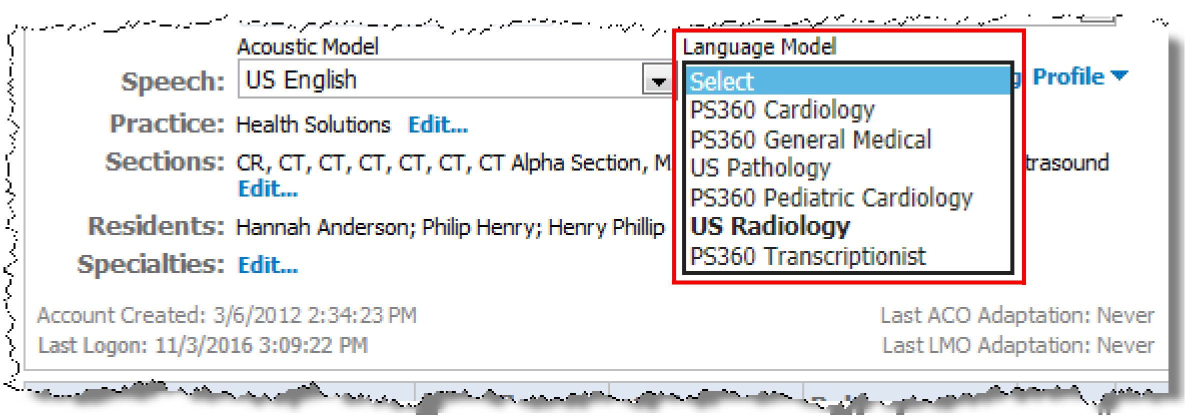
4. Enter a **First** name and a **Last** name for the user.

*Note: The field names labeled in **bold** text are required fields. All other fields, such as the user's ID and email address, are optional and appear only on this tab. Only users with access to this tab have the ability to see these data items; they are not displayed in any reports.*



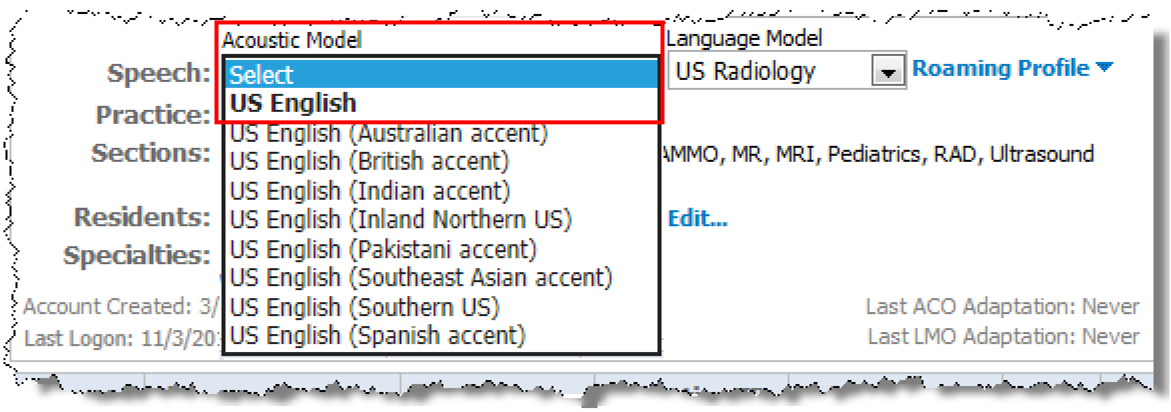
5. **Optional**: Fill in the **ID**, **Contact**, and **Address** information for the user.
6. Click **Create New**. The **Practice**, **Sections**, and **Specialties** fields become active, and an area to assign a role now appears.
7. If this user requires a language model other than the default:
   - If the workstation on which this user will work was set up primarily as a transcription workstation ('T' was selected during client installation), select **PS360 Transcriptionist**.
   - If the workstation was set up for both transcription and dictation ("R" was selected during client installation), select **US Radiology**.

Note: If any other language model is selected for a user, ensure that the language model (e.g., PS360 Cardiology) was installed on the system properly.



8. Again in the **Speech** item, select an **Acoustic Model** from the list.

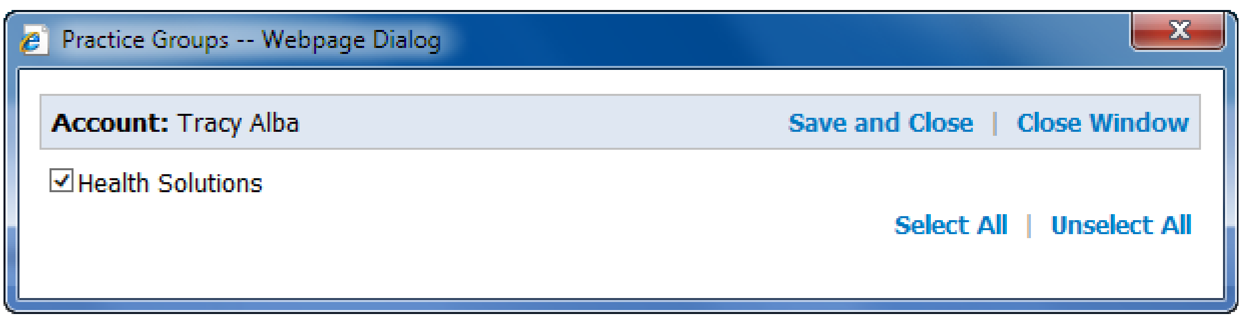
   Note: *Select an accent acoustic model for users who have strong accents. The* ***US English*** *model works well for most users, including those with moderate accents.*



9. If applicable, assign the user to a practice group. Typically, radiologists do not belong to practice groups.

   a. In the **Practice** item, click **Edit**. The **Practice Groups** dialog box opens.

   b. Select one or more practice groups to assign to the user.



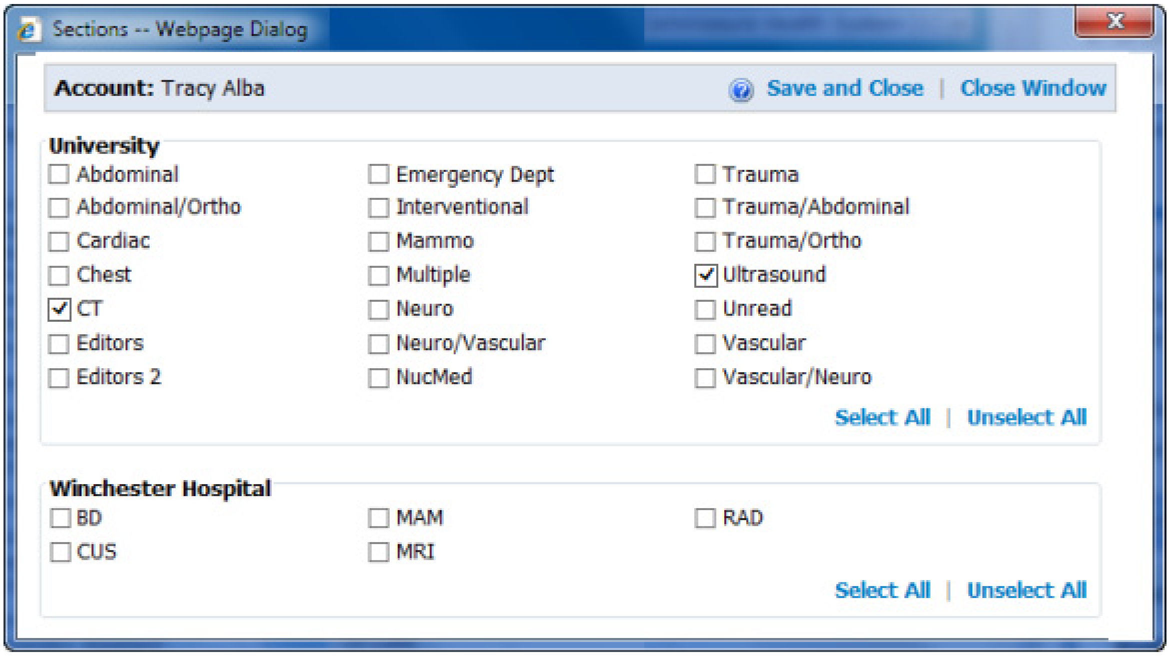
   c. Click **Save and Close**. Your selections now appear next to the **Practice** item.

10. If applicable, assign one or more sections to the user. The sections you assign to users affect what they can do and see in the *PowerScribe 360 Reporting* applications. For example, you can use sections to control which worklists a user can see. Or, you might use sections to associate a group of residents with a particular attending provider, to group radiologists who work only for certain facilities, or to group a number of radiologists who usually perform the same type of exams.

    Tip: *You define sections in the site. For more information about creating and using sections, refer to* *"Adding Sections to a Site" on page 107.*

a. In the **Sections** item, click **Edit**. The **Sections** dialog box opens.

b. Select one or more sections in one or more sites (if more than one site exists).

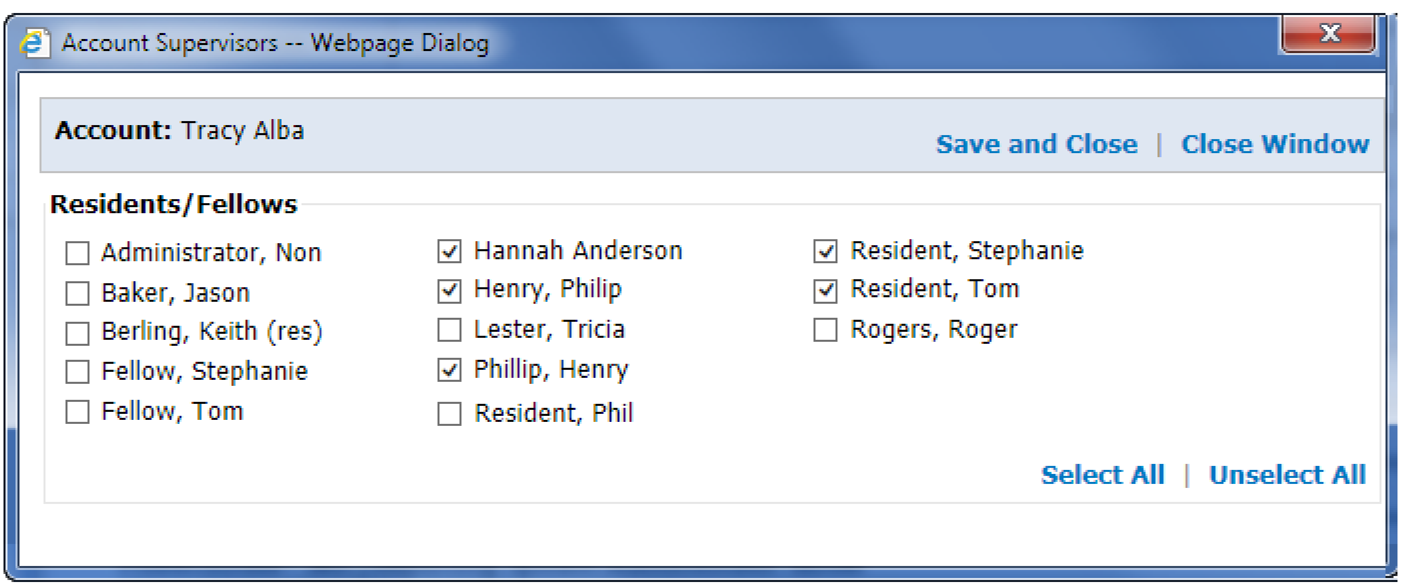


c. Click **Save and Close**. Your selections now appear next to the **Sections** item.

11. If applicable, select one or more residents for whom this radiologist will act as an account supervisor.

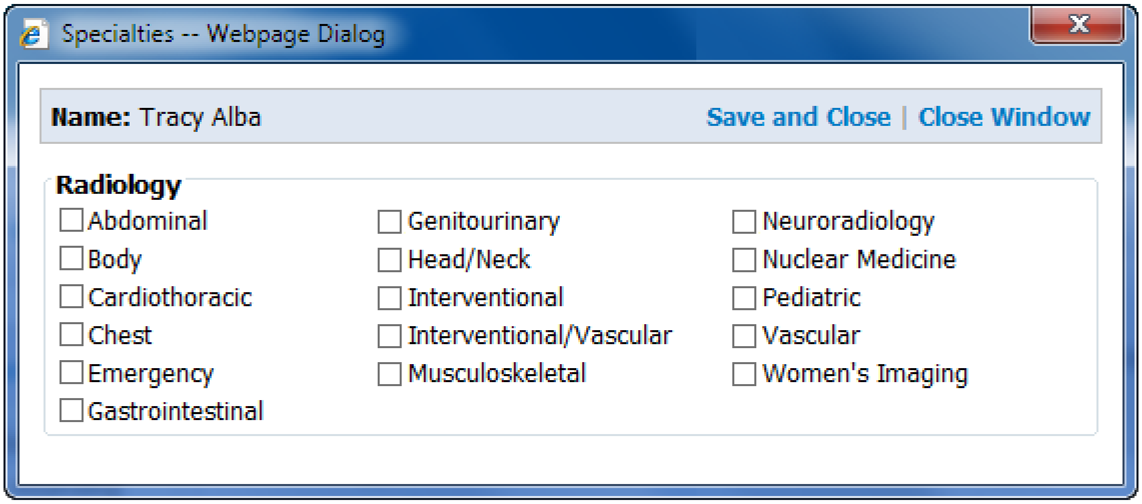
a. In the **Residents** item, click **Edit**. The **Account Supervisors** dialog box opens.

b. Select one or more residents for this user to supervise.



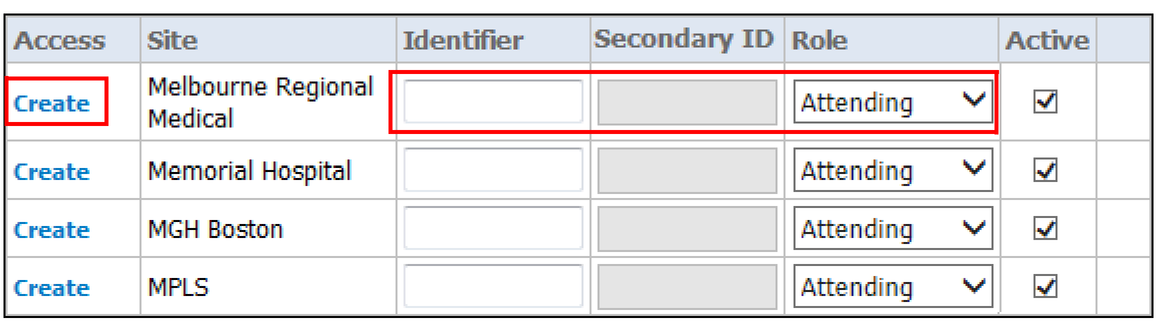
c. Click **Save and Close**. Your selections now appear next to the **Residents** item.

12. If applicable, select one or more specialties for this user. This information is stored in the user's profile but is not used by the *PowerScribe 360 Reporting* application at this time.
    a. In the **Specialties** item, click **Edit**. The **Specialties** dialog box opens.
    b. Select any specialties that apply to this provider.



    c. Click **Save and Close**. Your selections now appear next to the **Specialties** item.
13. For each site that this user must access:
    a. Enter an **Identifier**. For example, enter the ID for this provider in the RIS. Ensure that this identifier is accurate, otherwise the RIS can reject reports.
    b. If the provider is a fellow and sometimes logs in as a resident, enter their resident ID in the **Secondary ID** field.
    c. Choose a **Role**. In this example, choose Attending, Resident, or Fellow, depending on the type of provider you are creating.
    d. Click **Create**.

***Note:** You might want to assign an attending provider to a Resident or Fellow user. After you finish creating the resident or fellow, refer to Assigning an Attending Provider to a Resident or Fellow, beginning on page 122.*



Access	Site	Identifier	Secondary ID	Role	Active
Create	Melbourne Regional Medical			Attending	☑
Create	Memorial Hospital			Attending	☑
Create	MGH Boston			Attending	☑
Create	MPLS			Attending	☑

When you click the **Create** button to add the identifier to the site, the **Create** link becomes a **Delete** link, allowing you to remove a user from a specific site if needed.

In addition, the **Save** icon appears in the right column. If you make changes to an identifier or a role, click the icon to save the changes.

Access	Site	Identifier	Secondary ID	Role	Active	
Delete	Melbourne Regional Medical	tand		Attending	☑	
Delete	Memorial Hospital	tand		Attending	☑	
Create	MGH Boston			Attending	☑	
Create	MPLS			Attending	☑	

Assigning an Attending Provider to a Resident or Fellow

To assign an attending provider to a resident or fellow:

1. In the **Setup** group, select the **Accounts** tab.
2. Select the resident or fellow to whom you want to assign an attending provider.
3. Click **Edit** next to the word **Attendings**. The **Account Supervisors** dialog box opens.
4. Select the attending provider, or providers, you want to assign to the resident or fellow. Or, click **Select all** to assign all the providers in the list.
5. Click **Save and Close**. The attending provider is assigned to the resident or fellow.

Creating a Transcriptionist/Editor Account

To create a transcriptionist/editor:

1. In the **Setup** group, click the **Accounts** tab. The left side of the page lists all the users in the system, and the right side displays a form you can use to create a new user.

   Note: *If a user's information already appears in the right side of the window, click Clear. Remember that Clear simply removes the data from the window; it does not delete the user from the system.*

2. Enter a **Username** and **Password** for the transcriptionist.
3. Enter a **First name** and a **Last name** for the transcriptionist.

   Note: *The field names in bold text are required fields. All other fields, such as the user's ID and email address, are optional and appear only on this tab. Only users with access to this tab have the ability to see these data items; they are not displayed in any reports.*

4. Select the **Administrator** check box if you want to give this transcriptionist administrative rights.
5. Select **PS360 Transcriptionist** from the **Language Model** drop-down list.
6. Click **Create New** to save the user; this action allows you to edit the user's administrative rights, if applicable.
7. If you are granting this user administrative rights:
   a. Click the **Edit Rights** link at the right of the **Administrator** check box. The **Administrative Rights** dialog box opens.
   b. Select the **Limited access with the following rights** option. Use the table that begins on page 19 to help make your choices. Note that the rights fall into two categories: Edit rights and View rights. If you grant an Edit right, you should also grant the corresponding View right.
   c. When finished, click **Save and close**.
8. For each site that this user must access, enter an **Identifier** (and an **eScription ID**, if applicable). Then select **Editor** as the role, and click **Create**.

__Note:__ Once you click the __Create__ button to add the identifier to the site, the Create link becomes a __Delete__ link, allowing you to remove a user from a specific site if needed.

Access	Site	Identifier	Secondary ID	Role	Active
Create	Cooke County Hospital	12345		Editor	☑
Create	Davis Hospital			Attending	☑

9. Add the editor to the Editor Section. (See *Adding Sections to a Site*, beginning on page 107.)

Creating a Physician Account

Physicians are accepted from the HL7 feed; you can also maintain them on the **Physicians** tab in the Administrator Portal. Physicians cannot access the *PowerScribe 360 Reporting* system unless you create accounts for them. The **Physicians** grid in the **Accounts** tab is a shortcut you can use to do this. If you assign a physician Order Entry rights in a site, she can access the *PowerScribe 360 Reporting* order entry system (RadPort) for that site.

To create a physician account:

1. In the **Setup** group, click the **Accounts** tab.
2. Enter a **Username** and **Password** for the physician.

Tip: *If your system is configured to require users to change their passwords at their first login (that is, if the* ***Setup > System > Preferences > Security tab > Forced password change interval*** *preference is set to anything other than* ***Never****), consider creating a basic password for all users to use at first, allowing each user change to a more secure one at first login.*

3. Enter a **First** name and a **Last** name for the user.
4. Click **Create New**. The **Roles** grid appears by default at the bottom of the tab.

Access	Site	Identifier	Secondary ID	Role	Active
Create	Melbourne Regional Medical			Attending	☑
Create	Memorial Hospital			Attending	☑
Create	MGH Boston			Attending	☑
					Switch to Physicians grid

5. Click **Switch to Physicians grid**. The grid changes.

Access	Site	Identifier
Create	Melbourne Regional Medical	
Create	Memorial Hospital	
Create	MGH Boston	
		Switch to Roles grid

6. For each site to which this physician is to have access:

   a. Enter an **Identifier**. For example, enter the identifier by which this user is known in the HL7 system.

   b. Click **Create**. The **Save** icon appears.

Access	Site	Identifier
Create	Melbourne Regional Medical	
Delete	Memorial Hospital	123456
Create	MGH Boston	
		Switch to Roles grid

   c. Click the **Save** icon.

7. Click **Save Changes** to save the physician account.

Modifying a Physician Account

The **Physicians** tab in the **Exams** group provides access to all the physicians in the system. On this tab, you can use various criteria to find and edit physician accounts.

Note that each physician record is associated with a single site (that is, a single RIS). The same physician might have multiple physician records, one per site, each with a different site identifier. You can link these physicians by creating an account for them for use in *PowerScribe 360 Reporting*.

To modify a physician account:

1. In the **Exams** group, select the **Physicians** tab.
2. Find the physician you want to modify.

Click **All** to see all physicians, or select a letter from the alphabet to see physicians whose last names begin with that letter.

To search by name or identifier:

a. Select a site, if applicable.

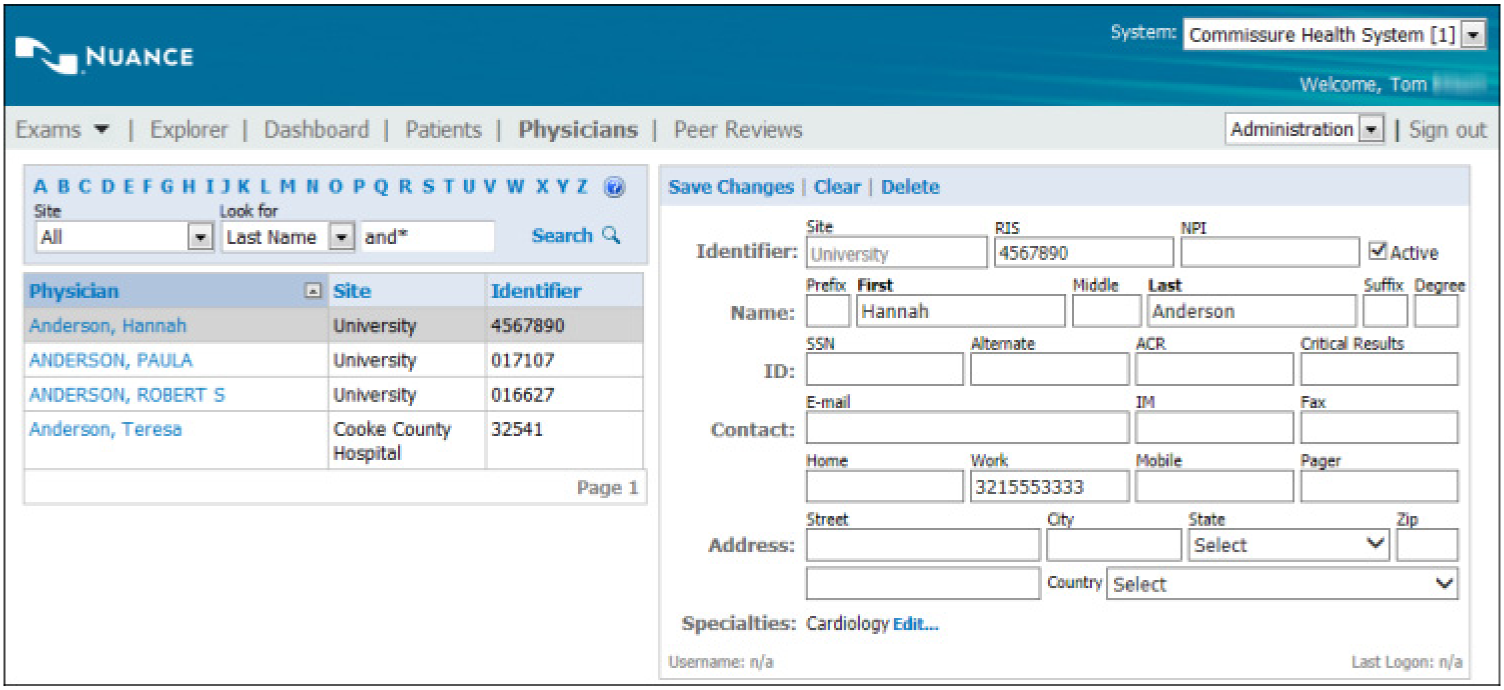
b. Select **Last Name** or **Identifier**.

c. Enter all or part of the physician's last name or identifier.

d. Click **Search**. Any physicians who meet your criteria appear in the list.

Tip: *In the **Look for** text field, you can use an asterisk (*) as a wild-card character. For example, if you do not know the exact last name of a physician but you know the name ends in the letters MAN, type ***man** and click **Search**.*

3. Select the physician you want to modify.



4. *If you are creating a new physician from this window*: Select a site from the **Site** drop-down list,
5. Type the **RIS** identifier for this physician. (**Required**)
6. Enter the **NPI** (National Provider Identifier) for this physician.
7. Type the physician's **First** and **Last** names. (**Required**)
8. Enter any other information you have for this physician.
9. If desired, indicate the specialties for this physician. Click the **Edit** link, select one or more specialties, and then click **Save and close**.
10. When finished entering the information for this physician, click **Save Changes**.

Creating a Front Desk or Technologist Account

Creating a Front Desk Account

A Front Desk user has limited rights on the Portal. For example, Front Desk users can scan patient insurance cards, enter patient name and address, and so on.

To create a Front Desk user:

1. In the **Setup** group, click the **Accounts** tab. The left side of the page lists all the users in the system, and the right side displays a form you can use to create a new user.

   Note: *If a user's information already appears in the right side of the window, click Clear. Remember that Clear simply removes the data from the window; it does not delete the user from the system.*

2. Enter a **Username** and **Password** for the Front Desk user.
3. Enter a **First name** and a **Last name** for the Front Desk user.
4. Click **Create New** to save the user. The user's name appears in the list at the left of the page.
5. For each site this user must access:

   a. Enter an **Identifier**.

   b. Select **Front Desk** as the role.

   c. Click **Create**.

Access	Site	Identifier	Secondary ID	Role	Active
Create	Melbourne Regional Medical	12345		Front Desk	☑
Create	Memorial Hospital			Attending	☑

   The user's site access information is added to the list at the left of the page.

	Account	Authorization
	Devaro, Franklin	University: Front Desk
		Page 1

Note: *Once you click the* ***Create*** *button to add the identifier to the site, the* ***Create*** *link becomes a* ***Delete*** *link, allowing you to remove the user's access to a specific site if needed.*

Creating a Technologist Account

Before the radiologist dictates a report on an order, a technologist might need to supply some data that has not been sent in HL7 with the order. Alternately, a technologist can create a draft report without dictation; the report is then finalized by a radiologist.

To create a technologist account:

1. In the **Setup** group, click the **Accounts** tab. The left side of the page lists all the users in the system, and the right side displays a form you can use to create a new user.

   Note: *If a user's information already appears in the right side of the window, click Clear. Remember that Clear simply removes the data from the window; it does not delete the user from the system.*

2. Enter a **Username** and **Password** for the technologist.
3. Enter a **First name** and a **Last name** for the technologist.
4. Click **Create New** to save the user. The user's name appears in the list at the left of the page.
5. Click **Preferences…**. The **Preferences** dialog box opens.
6. On the **Dictation** tab, select **Disabled** as the **Speech recognition mode** preference. This action stops the technologist from begin prompted to train upon logging in.
7. Click **Save and Close** to close the **Preferences** dialog box.
8. For each site this user must access:

   a. Enter an **Identifier**.

   b. Select **Technologist** as the role.

   c. Click **Create**.

Access	Site	Identifier	Secondary ID	Role	Active
Create	Melbourne Regional Medical	65748		Technologist	☑
Create	Memorial Hospital	46342		Technologist	☑

The user's site access information is added to the list at the left of the page.

Account	Authorization
Wagner, Walter	University: Technologist
	Page 1

Note: *Once you click the* ***Create*** *button to add the identifier to the site, the* ***Create*** *link becomes a* ***Delete*** *link, allowing you to remove the user's access to a specific site if needed.*

Importing Persons

Use this feature to import referring physicians, patients, or non-administrative users into the *PowerScribe 360 Reporting* system from an Excel (*.xls, not .xlsx*) file. Importing allows you to add or modify many users at one time. This features is especially useful for importing accounts when converting from *RadWhere*.

This section provides separate procedures for importing patients, physicians, and non-administrative accounts. You can, however, import both physicians and non-administrative accounts from the same spreadsheet in a single procedure.

Importing Patients

Creating the Excel File

To import patients into your system, you must create an Excel spreadsheet file with, at the minimum, columns representing the site name, MRN, first name, and last name. The columns can be in any order. The spreadsheet can be with or without column heading labels.

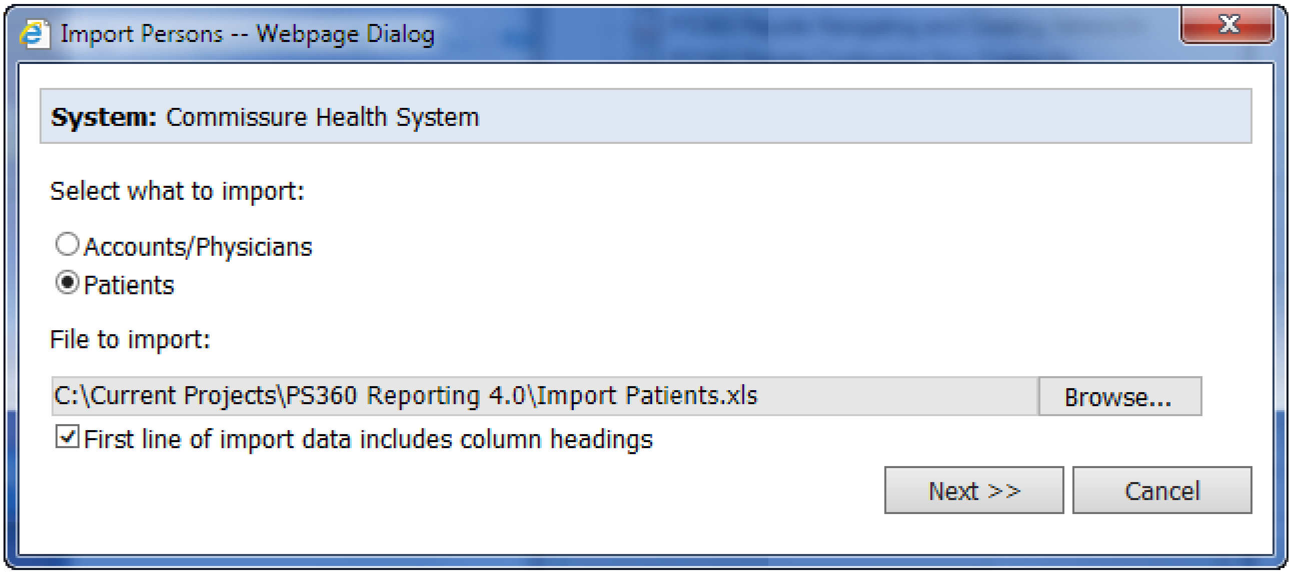
	A	B	C	D	E
1	**Site**	**Last Name**	**First Name**	**MRN**	**DOB**
2	UniversityA	Gray	Elizabeth	1234567	2/16/1944
3	UniversityA	White	Michael	2345678	4/11/2004
4	UniversityA	Scarlett	Arunna	3456789	12/1/1992
5	UniversityA	Magenta	Martin	4567890	3/16/1998

Importing the Patients

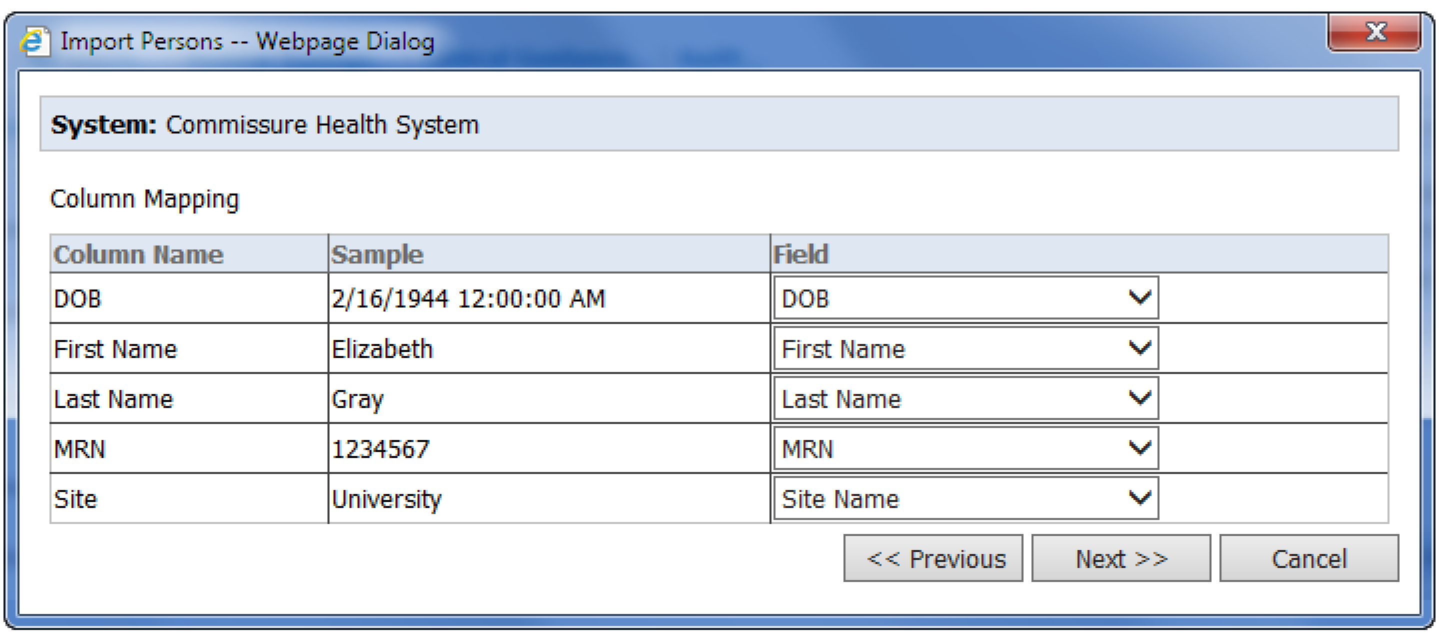
To import the patients:

1. Select the **System** tab in the **Setup** section.

2. Click **Import Persons...**. The **Import Persons** dialog box opens.



3. Select **Patients**.
4. Click **Browse** and then navigate to and select the Excel file containing the patients you want to import. Click **Open**.
5. Select **First line of import data includes column headings** if your Excel file contains a row of heading labels.
6. Click **Next**. A dialog box displays the columns (by name, if you specified heading labels in Step 5), a sample of each column's contents, and a **Field** drop-down list for each column.

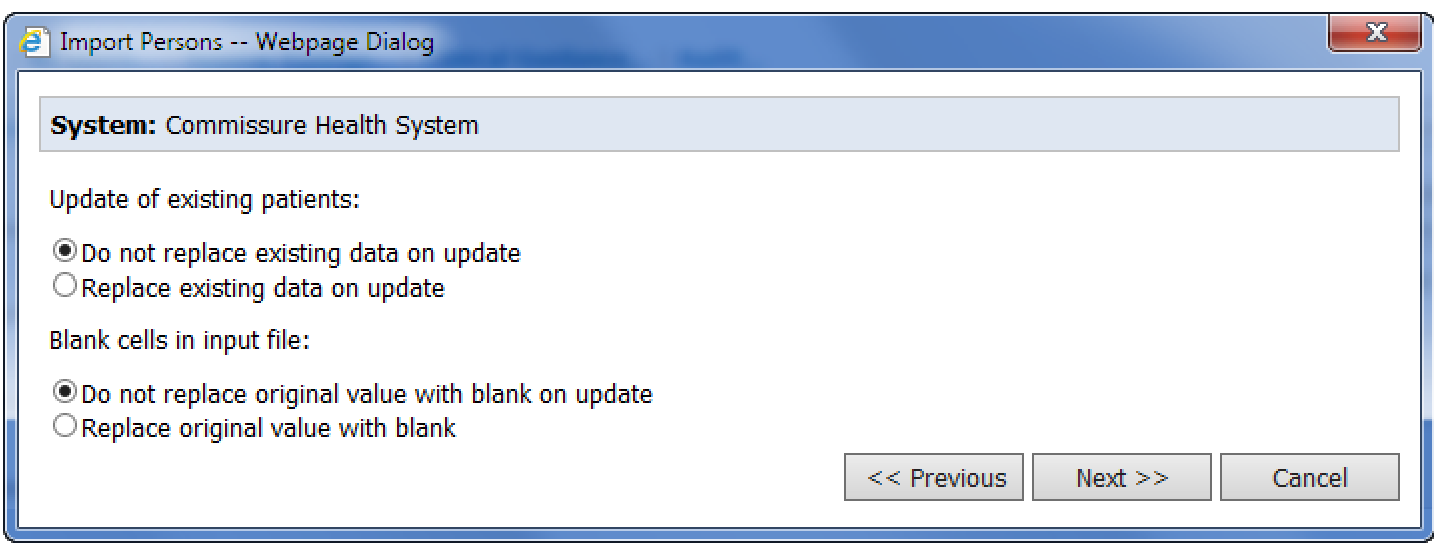


7. For each column, select the database field in which you want to insert the data. For example, map the column containing site names to the Site Name field in your database. For any columns you don't want to include, select **Skip Column**.

   You can map data to the following columns in the patient database.

Column	Column	Column
Last Name*	**First Name***	**Site Name***
MRN*	MPI	DOB
Gender	SSN (Social Security Number)	Dept Num (Department Number)
Alternate ID	Deceased Date	Middle Name
Prefix	Suffix	Degree
Street	Street2	City
State	Zip	Country
Home Phone	Work Phone	Mobile Phone
Pager Phone	FAX	Email
IM	Insurance Plan Identifier	Insurance Company Identifier
Group Number	Group Name	Insured Group Employer ID
Insured Group Company ID	Tax Identifier	Plan Effective Date
Plan Expiration Date	Insured Relationship	Insured DOB
Insured Identifier		
*Required		

8. Click **Next** >>. The next dialog box in the import procedure opens.



9. Indicate what you want the import software to do when a patient in the spreadsheet already exists in the database.

   Select **Do not replace existing data on update** if you do not want the data in the spreadsheet to replace that in the database. For example, if the software finds a patient with the same MRN in the database as in the import list, it will not replace the patient's name or other information with that in the spreadsheet.

   OR

   If you do want to replace existing data, select **Replace existing data on update**.

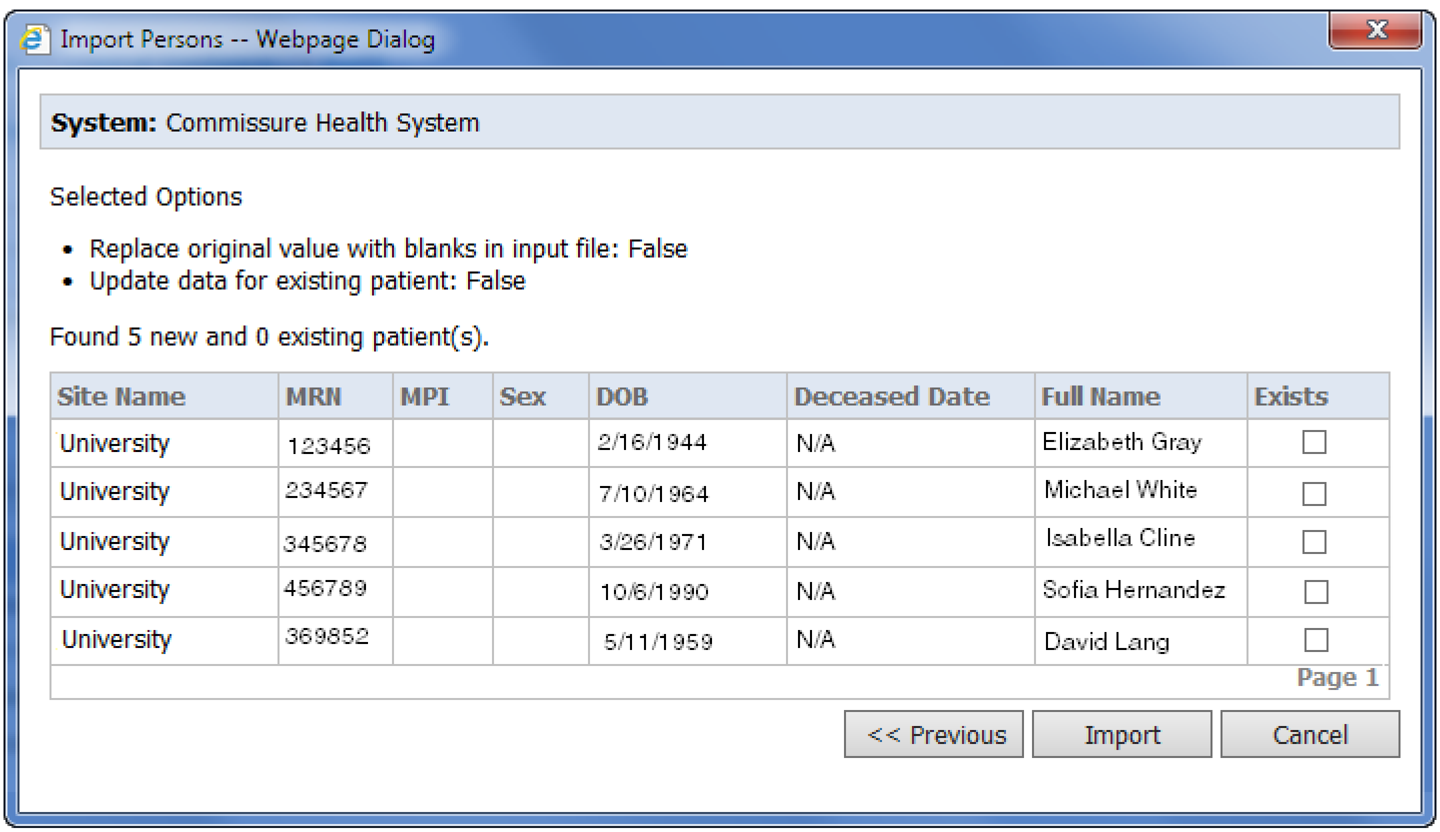
10. Indicate how the import software should treat blank columns in the spreadsheet.

    If you do not want any existing values to be replaced with spaces, select **Do not replace original value with blank**. For example, if the address and phone number columns in the spreadsheet are blank, the patient's address and phone number in the database will remain intact.

    OR

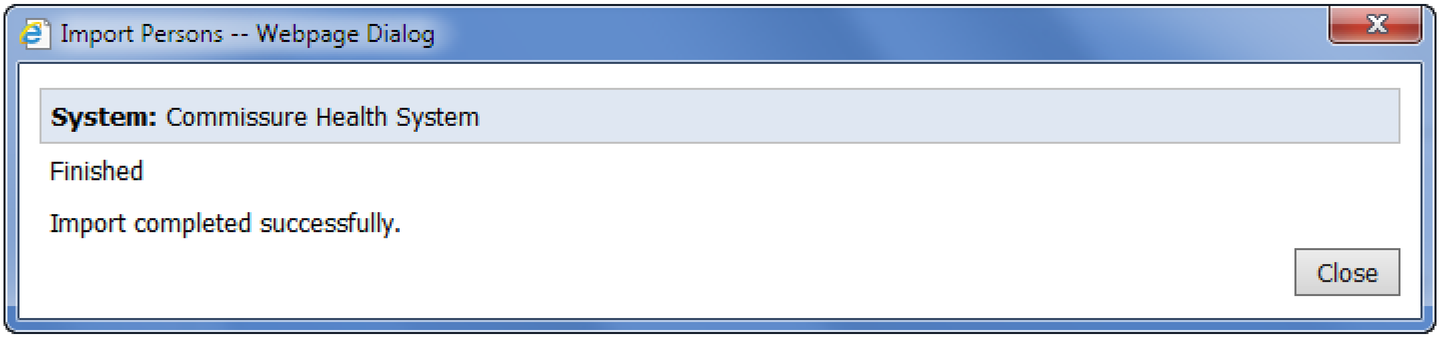
    To replace an existing value in the database with spaces when the corresponding spreadsheet column is blank, select **Replace original value with blank on update**.

11. Click **Next** >> to continue. The system displays the results found. Any patients who already exist appear with a check mark in the **Exists** column.



Your preferences for the import appear at the top of the dialog box. To change your preferences, click **<<Previous** to go back to the last step.

12. Click **Import**. The patients are imported, and a confirmation message appears.



Importing Referring Physicians

Creating the Excel Spreadsheet

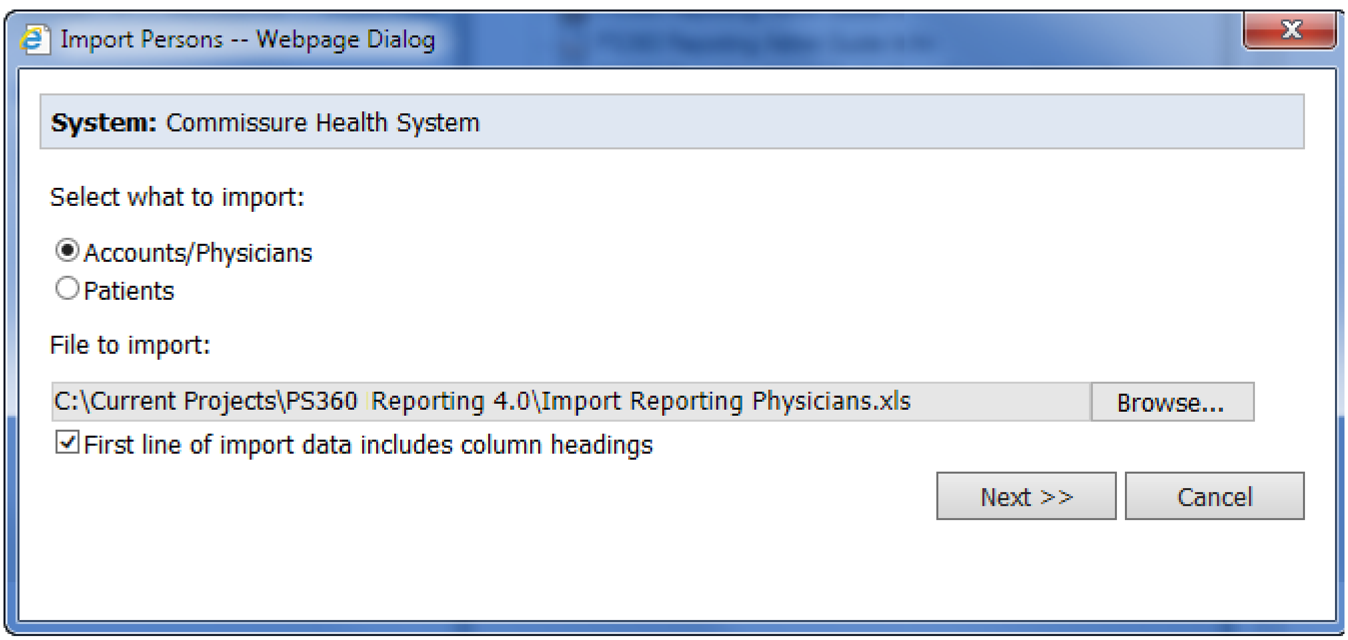
To import physicians, you must provide, at the minimum, the physician's First name, Last Name, Site Name, and Identifier. Leave the Login Name column blank or omit the Login Name column. The columns can be in any order. For example:

	A	B	C	D	E	F
1	**Site**	**First Name**	**Last Name**	**Identifier**	**Work Phone**	**Dept Name**
2	UniversityA	Tracy	Alba	1234567	3215559999	Internal Medicine
3	UniversityA	Richard	Patterson	2345678	3215558888	Internal Medicine
4	UniversityA	Janice	Oppenheimer	3456789	3215557777	Cardiology
5	UniversityA	Hannah	Anderson	4567890	3215553333	Cardiology

Importing the Physicians

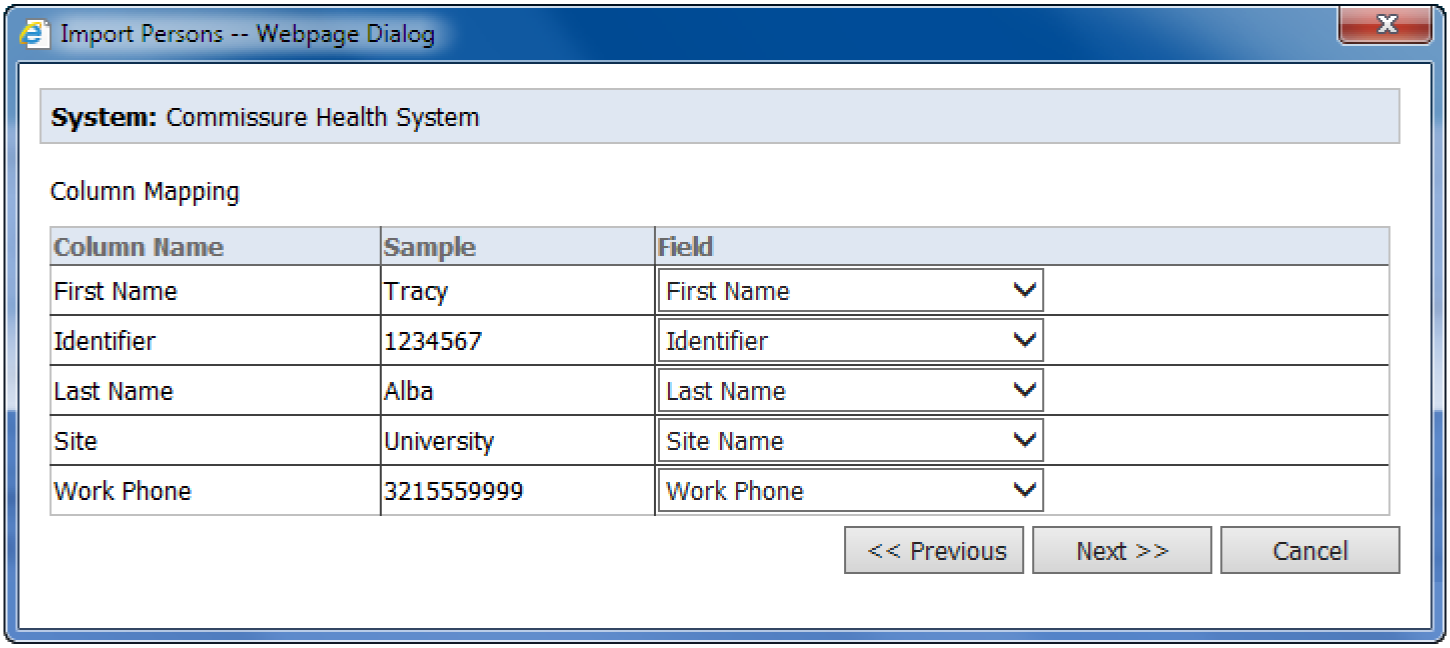
To import the physicians:

1. Select the **System** tab in the **Setup** section.
2. Click **Import Persons...**. The **Import Persons** dialog box opens.



3. Select **Accounts/Physicians**.
4. Click **Browse...**, and then navigate to and select the Excel file containing the physicians you want to import. Click **Open**.
5. Select **First line of import data includes column headings** if your Excel file contains a row of heading labels.

6. Click **Next**. A dialog box displays the columns (by name, if you specified heading labels in Step 5), a sample of each column's contents, and a **Field** drop-down list for each column.



7. For each column, select the database field in which you want to insert the data. For example, map the column containing site names to the Site Name field in your database. For any columns you don't want to include, select **Skip Column**.

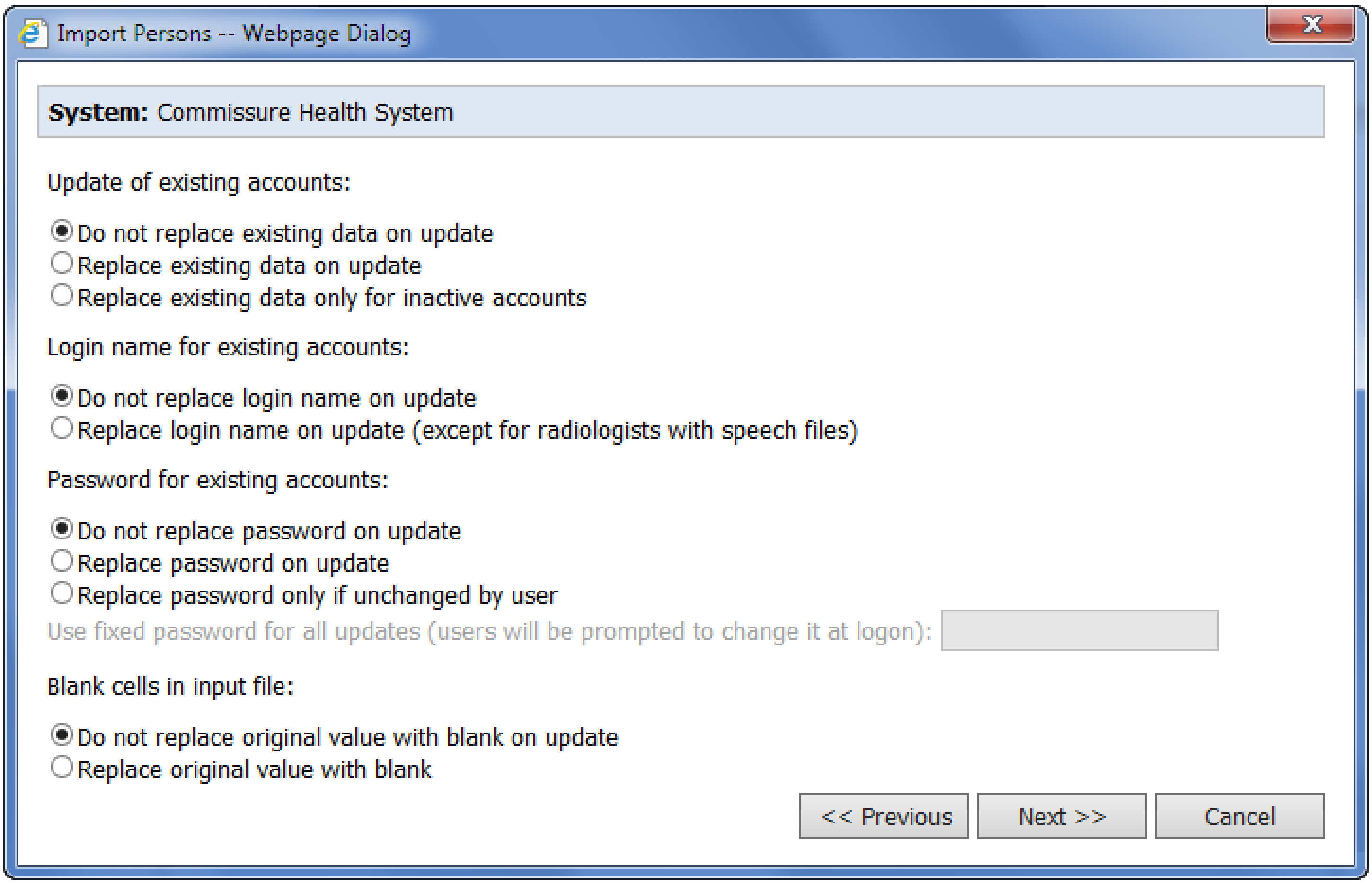
Note: *At minimum you must map columns to First Name, Last Name, Site Name, and Identifier.*

You can map data to the following columns in the physician database:

Column	Column	Column
Last Name*	**First Name***	**Site Name***
Identifier*	NPI	Role
Is Physician	Veriphy ID	ACR ID
Practice Group	Specialties	Middle Name
Prefix	Suffix	Degree
Street	Street2	City
State	Zip	Country
Home Phone	Work Phone	Mobile Phone
Pager Phone	Fax	Email
IM	Insurance Plan Identifier	Insurance Company Identifier

Column	Column	Column
Group Number	Group Name	Insured Group Employer ID
Insured Group Company ID	Tax Identifier	Plan Effective Date
Plan Expiration Date	Insured Relationship	Insured DOB
Insured Identifier		
*Required		

8. Click **Next** >>. The next dialog box in the import procedure opens.



9. Indicate what you want the import software to do when a physician in the spreadsheet already exists in the database.

   Select **Do not replace existing data on update** if you do not want the data in the spreadsheet to replace that in the database. For example, if the software finds a physician with the same site name and identifier in the database as in the import list, it will not replace the physician's name or other information with that in the spreadsheet.

   OR

   To replace the existing data, select **Replace existing data on update**.

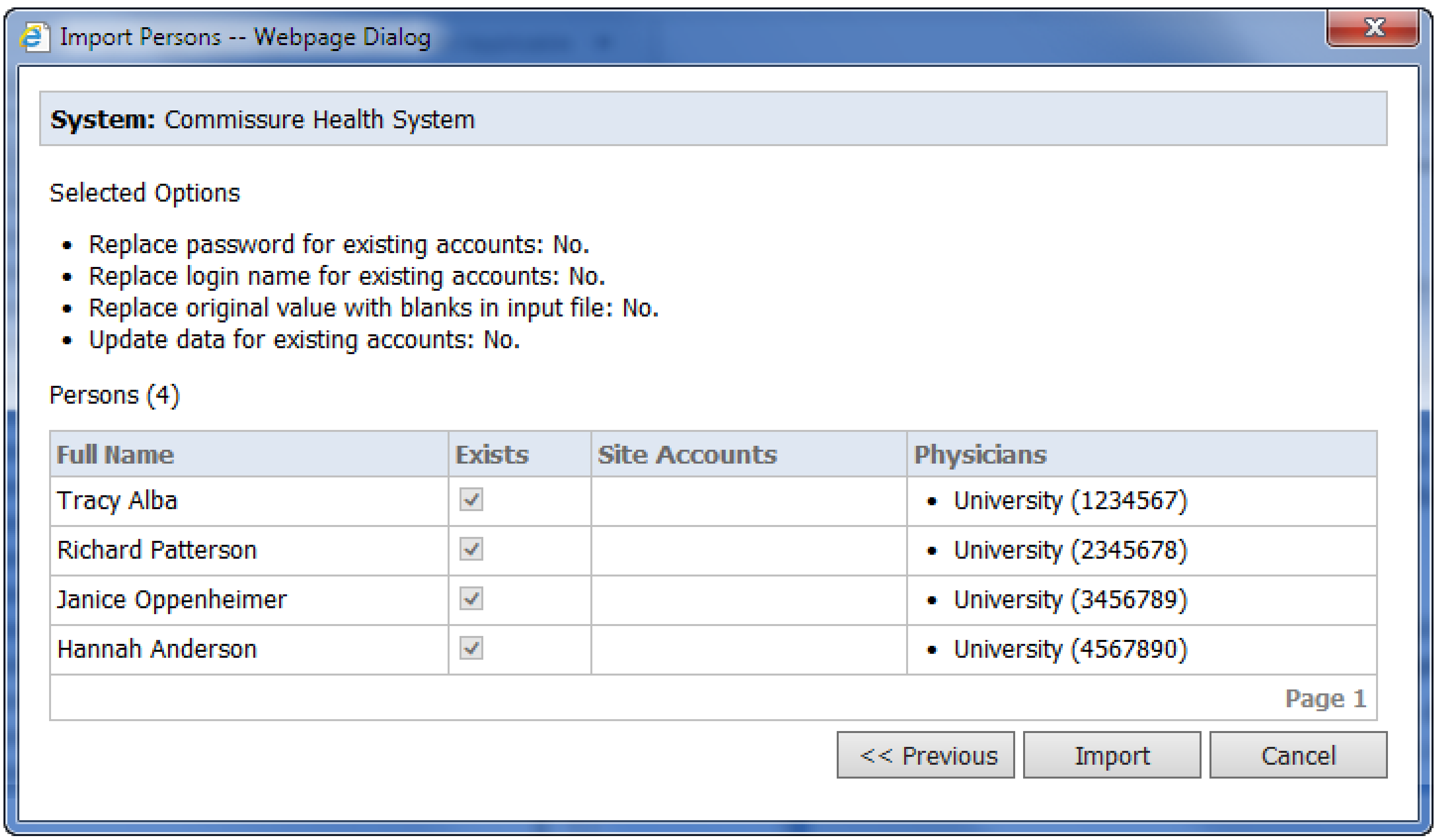
10. Indicate how the import software should treat blank columns in the spreadsheet.

    If you do not want any existing values to be replaced with spaces, select **Do not replace original value with blank**. For example, if the phone number and address columns in the spreadsheet are blank, the physician's address and phone number remain intact in the database.

    OR

    To replace an existing value in the database with spaces when the corresponding spreadsheet column is blank, select **Replace original value with blank on update**.

11. Click **Next >>** to continue. The system displays the results found. Any physicians who already exist appear with a check mark in the **Exists** column.



Your preferences for the import appear at the top of the dialog box. To change your preferences, click **<<Previous** to go back to the last step.

12. Click **Import**. The physicians are imported, and a confirmation message appears.

Importing Non-Administrative Accounts

Creating the Excel File

For importing accounts, you must provide, at a minimum, the Site Name, Identifier, First Name, Last Name, Login Name, Role, and Password. Available roles include Attending, Editor, Fellow, Front Desk, Order Entry, Resident, and Technologist.

Tip: *You can omit the Password column if you intend to assign the same password to all the imported accounts.*

To give an account access to more than one site, you must include a separate row for each site. For example, a provider might be a Fellow at one site, but an Attending at another.

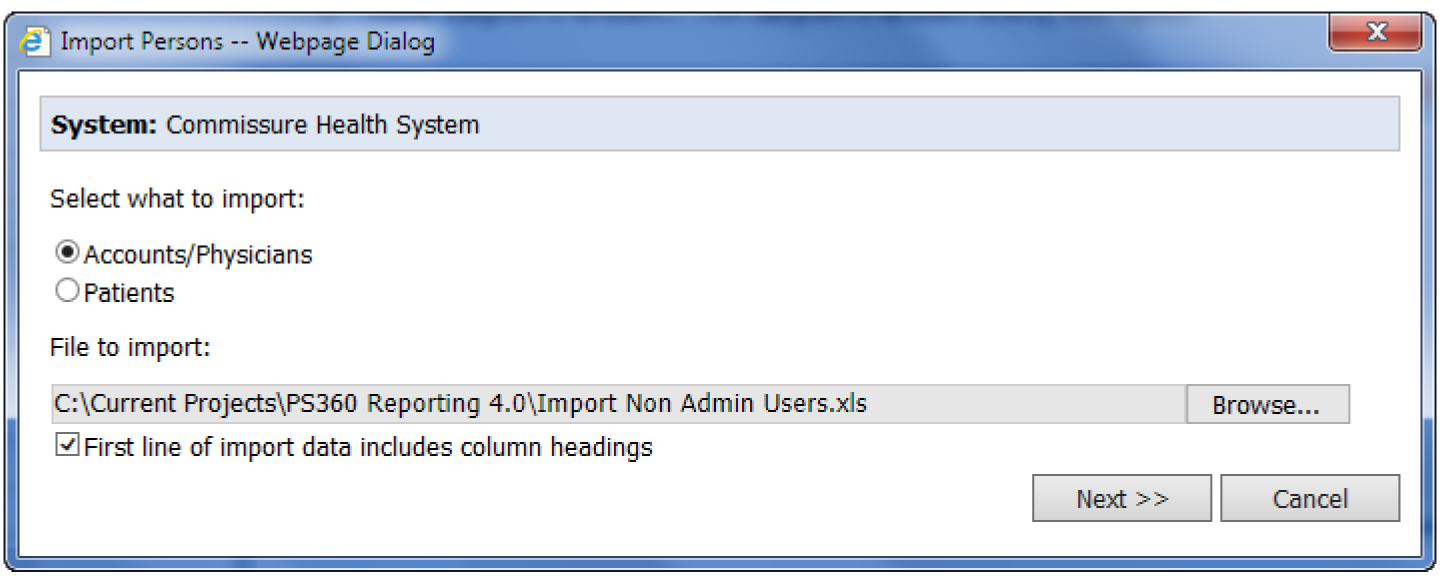
	A	B	C	D	E	F	G
1	**Site**	**First Name**	**Last Name**	**Identifier**	**Role**	**Login**	**Password**
2	UniversityA	Jason	Baker	1111112	Fellow	jbaker	jbaker
3	Lakeside Clinic	Jason	Baker	1111112	Attending	jbaker	jbaker
4	UniversityA	Irma	Woods	1111113	Technologist	iwoods	iwoods
5	UniversityA	Walter	Wagner	1111114	Technologist	wwagner	wwagner

To give an account access to more than one site, you must include a separate row for each site.

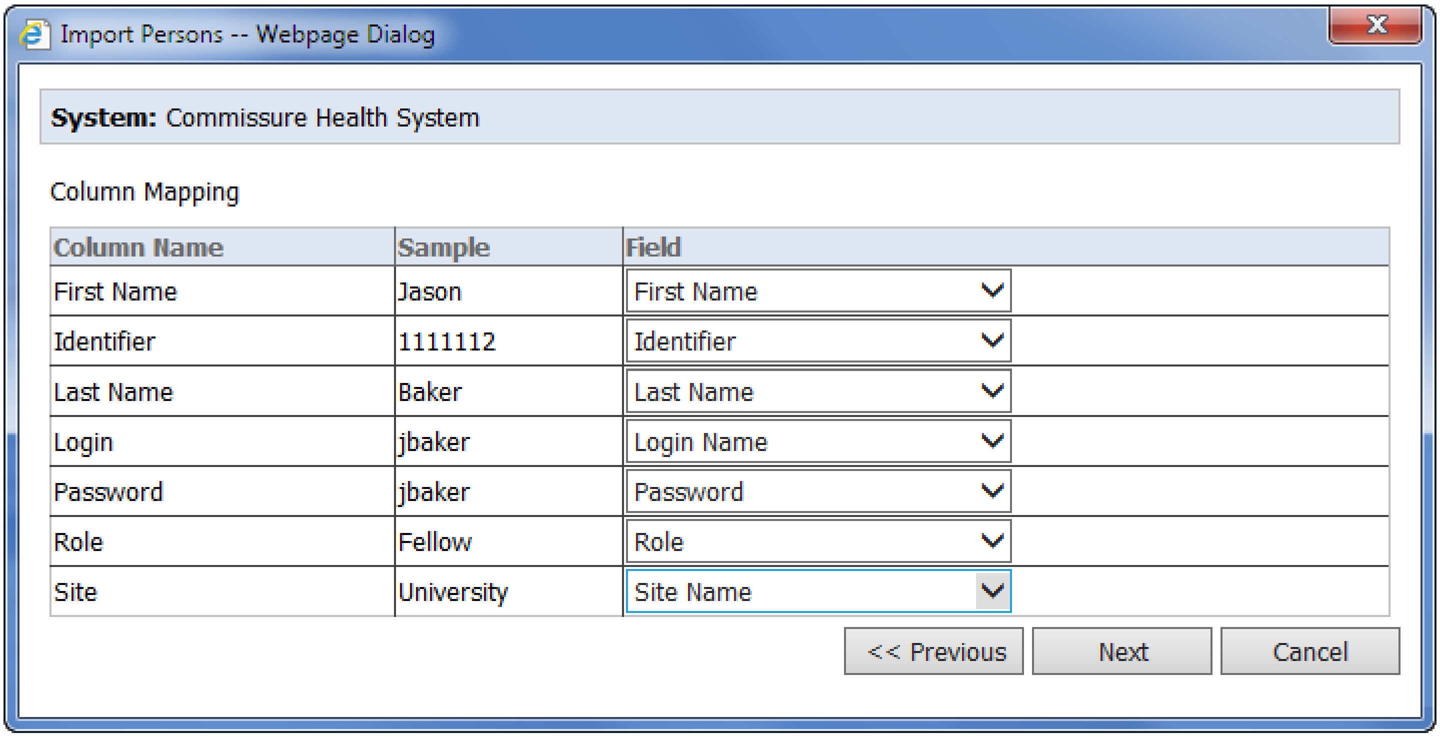
Importing the Non-Administrative Accounts

To import the non-administrative accounts:

1. Select the **System** tab in the **Setup** section.
2. Click **Import Persons...**. The **Import Persons** dialog box opens.



3. Select **Accounts/Physicians**.
4. Click **Browse...**, and then navigate to and select the Excel file containing the accounts you want to import. Click **Open**.
5. Select **First line of import data includes column headings** if your Excel file contains a row of heading labels.
6. Click **Next**. A dialog box displays the columns (by name, if you specified heading labels in Step 5), a sample of each column's contents, and a **Field** drop-down list for each column.



7. For each column, select the database field in which you want to insert the data. For example, map the column containing site names to the Site Name field in your database. For any columns you don't want to include, select **Skip Column**.

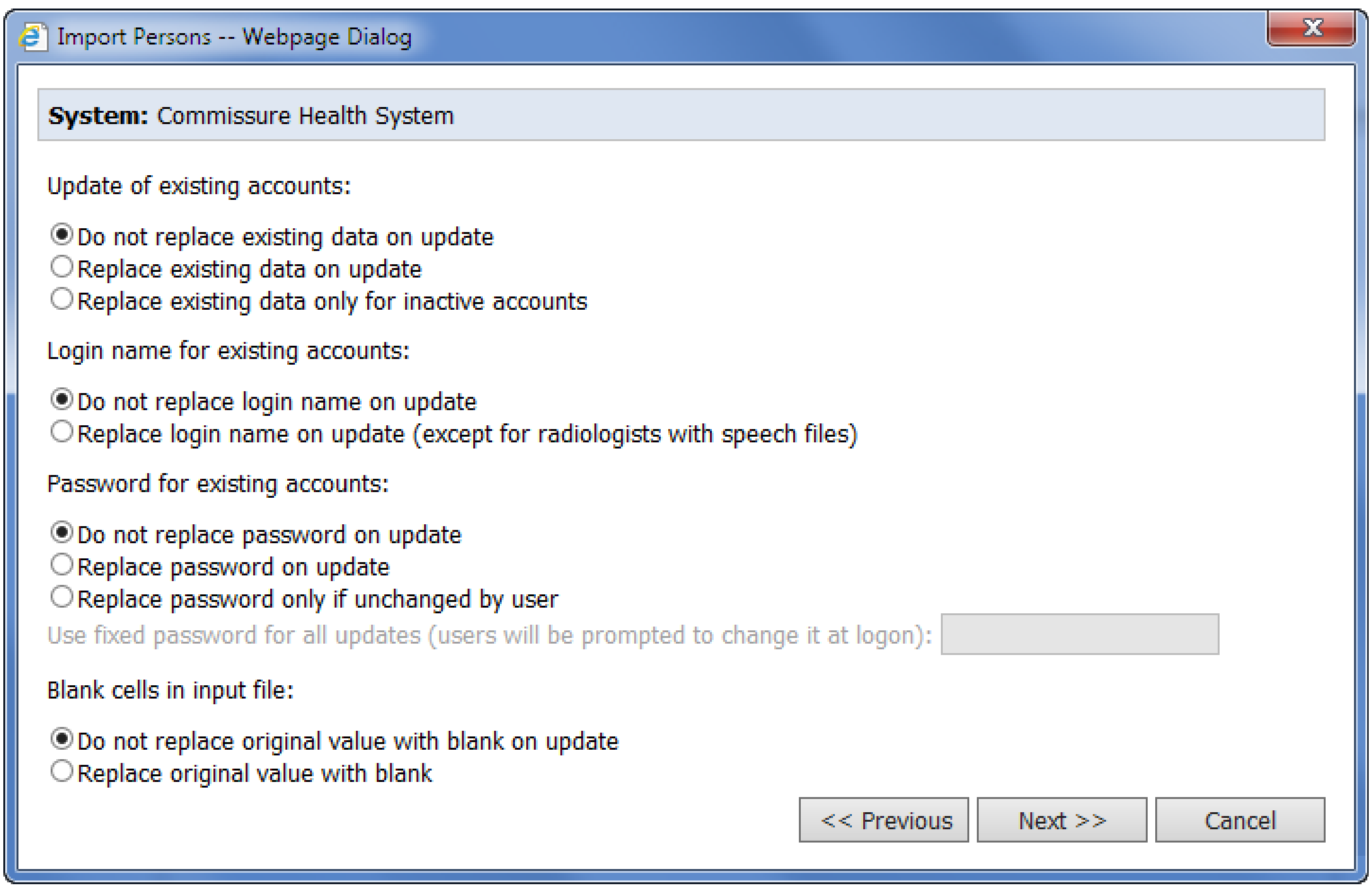
   Note: *At minimum you must map columns to First Name, Last Name, Site Name, Identifier, Login Name, and Role.*

   You can import data into the following columns in the account database:

Column	Column	Column
Login Name*	**Password****	**Last Name***
Identifier*	**Role***	**First Name***
Veriphy ID	ACR ID	Practice Group
Specialties	**Site Name***	NPI
Is Physician	Middle Name	Prefix

Column	Column	Column
Suffix	Degree	Street
Street2	City	State
Zip	Country	Home Phone
Work Phone	Mobile Phone	Pager Phone
Fax	Email	IM
Insurance Plan Identifier	Insurance Company Identifier	Group Number
Group Name	Insured Group Employer ID	Insured Group Company ID
Tax Identifier	Plan Effective Date	Plan Expiration Date
Insured Relationship	Insured DOB	
*Required **You can omit the password if you intend to assign the same password to all imported accounts.		

8. Click **Next** >>. The next dialog box in the import procedure opens.



9. Indicate what you want the import software to do when an account in the spreadsheet already exists in the database.

   Select **Do not replace existing data on update** if you do not want the data in the spreadsheet to replace that in the database. For example, if the software finds an account with the same Site Name and Identifier in the database as in the import list, it will not replace the account's address or other information with that in the spreadsheet.

   OR

   If you do want to replace existing data, select **Replace existing data on update**.

   OR

   If you want to replace the existing data only in the case of user accounts that have been deactivated, select **Replace existing data only for inactive accounts**.

10. Indicate how the import software should treat login names, where it finds an existing account (that is, an account with the site name/identifier) in the database.

    Select **Do not replace login name on update** if you never want the import to change the account's login name.

    OR

    Select **Replace login name on update (except for radiologists with speech files)**. This option allows the import to change users' login names, but preserves the login names of users for whom the system has begun collecting data for speech recognition.

11. Indicate how the import software should treat users' passwords, where it finds an existing account in the database.

    Select **Do not replace password on update** if you never want the import to change existing accounts' passwords.

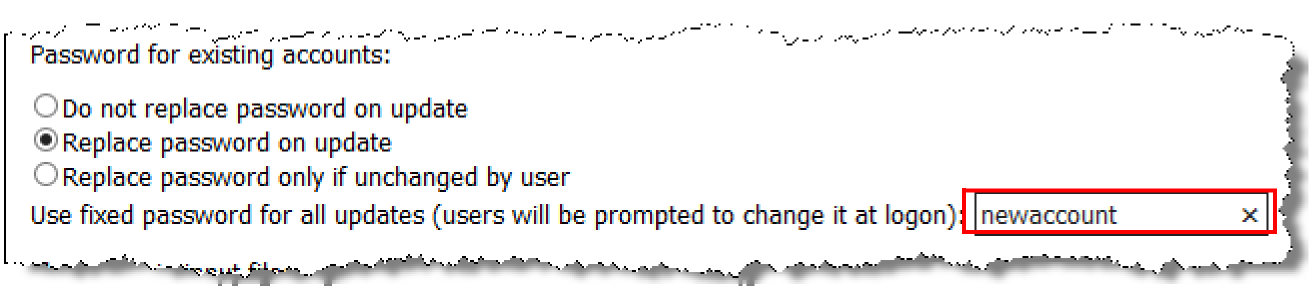
    OR

    Select **Replace password on update** if you want the import process to change passwords for existing accounts.

    OR

    Select **Replace password only if unchanged by the user** if you want the import process to change the passwords only in accounts where the user has not yet logged in.

    If you selected either of the **Replace password** options, you can assign the same password to all existing users, or to existing users who have not logged in. To use this option, specify the password you want to use (see example below).



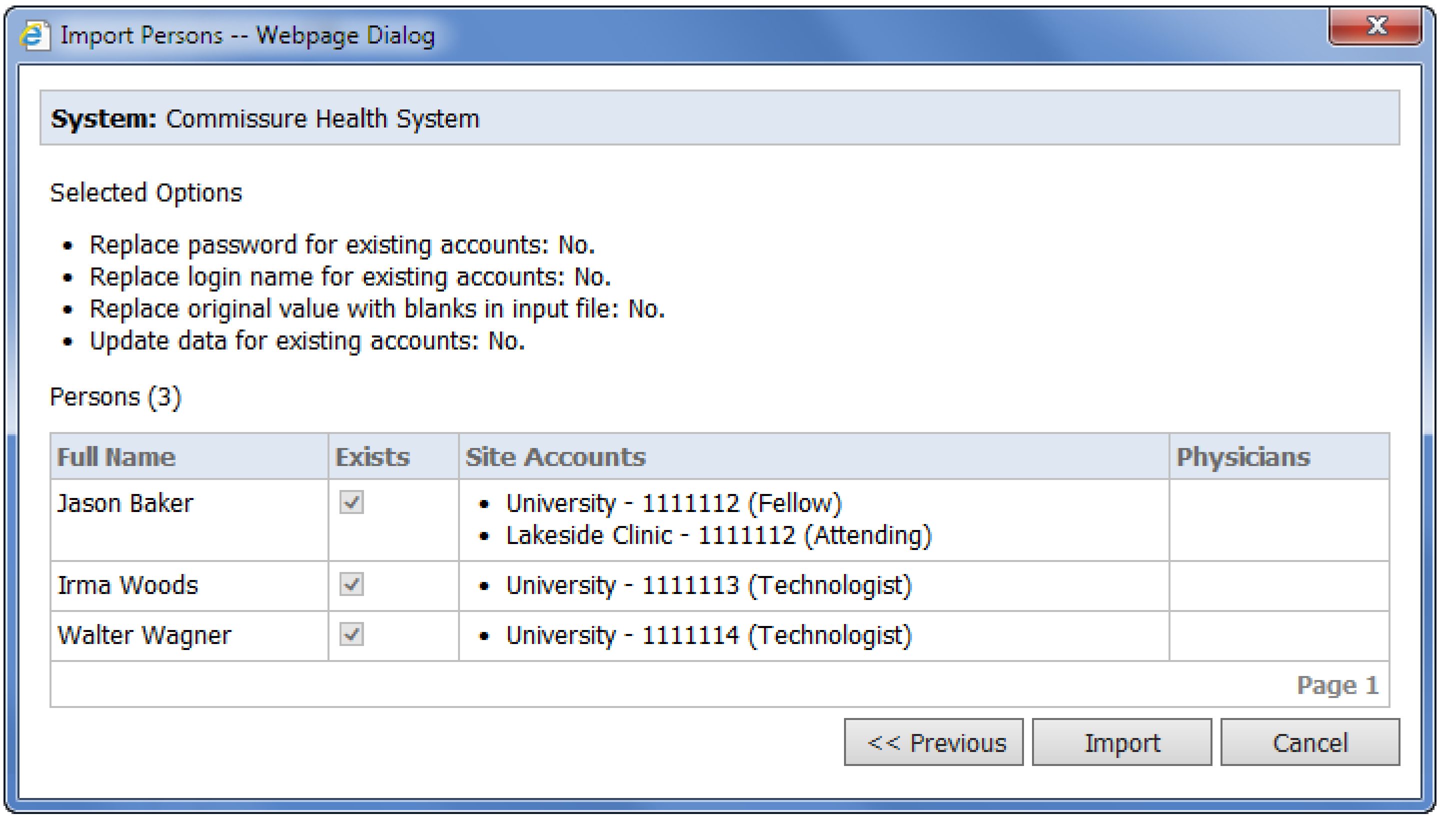
12. Indicate how the import software should treat blank columns in the spreadsheet.

    If you do not want any existing values to be replaced with spaces, select **Do not replace original value with blank**. For example, if the phone number column in the spreadsheet is blank, the provider's phone number remains intact in the database.

    OR

    To replace an existing value in the database with spaces when the spreadsheet column is blank, select **Replace original value with blank on update**.

13. Click **Next** >> to continue. The system displays the results found. Any accounts that already exist appear with a check mark in the **Exists** column.



Your preferences for the import appear at the top of the dialog box. If you want to change your preferences, you can click <<**Previous** to go back to the last step.

14. Click **Import**. The accounts are imported, and a confirmation message appears.

Configuring Account Preferences

You can set preferences for the entire system, for the site, and for individual user accounts. To change a user's preferences, follow the procedure below.

Refer to *Configuring the Basic System Settings*, beginning on page 24 for some important points regarding the relationship between system, site, and account preferences.

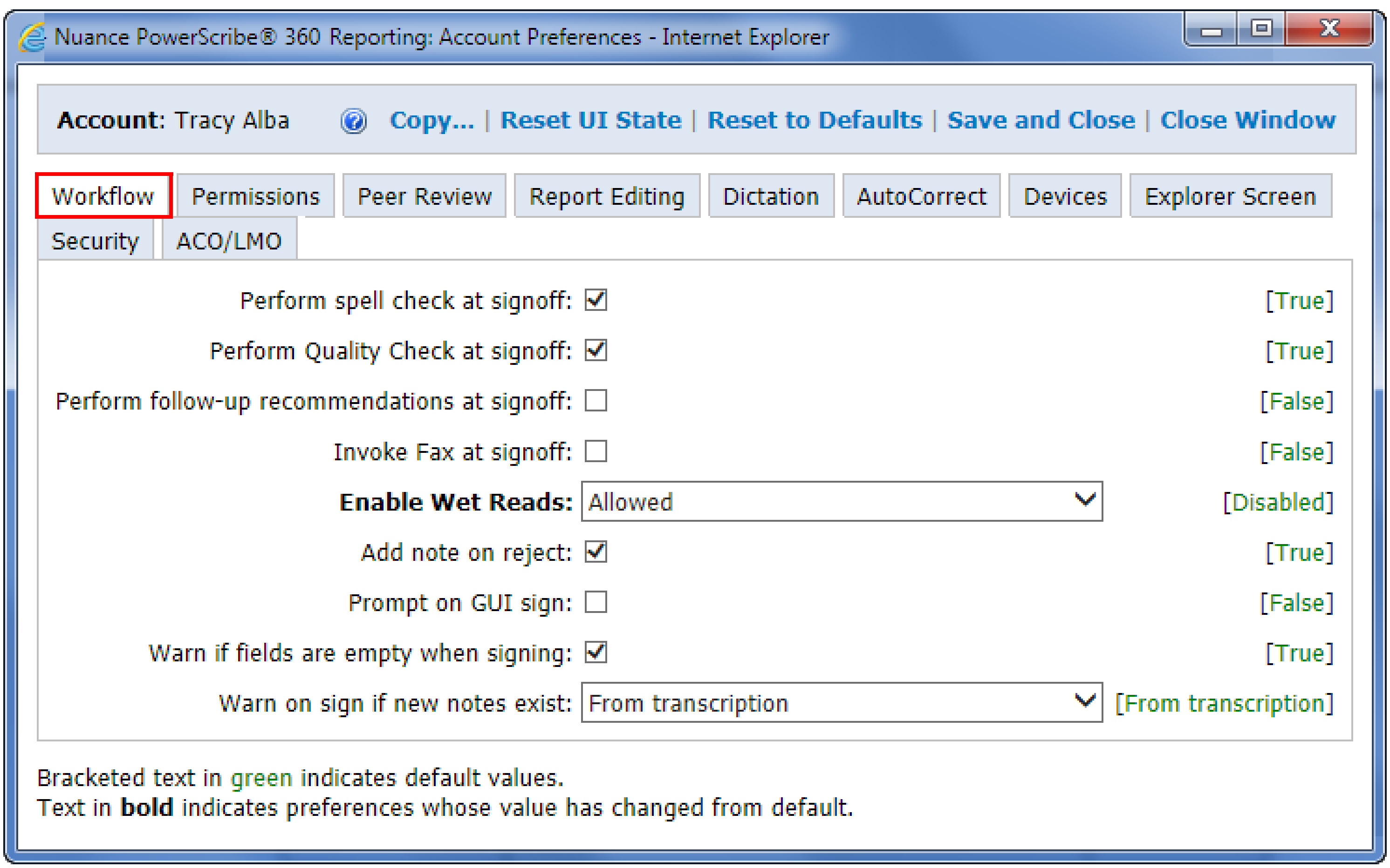
For information on setting system, site, or user account preferences, refer to *Chapter 4*.

Tip: *You can copy the entire set of preferences from one user to another. Refer to Copying User Account Preferences, beginning on page 167.*

To assign user preferences:

1. From the **Setup** group, click the **Accounts** tab and select a user for whom you want to set preferences.

2. Click the **Preferences** tab. The **Account Preferences** dialog box opens with the **Workflow** tab selected by default.



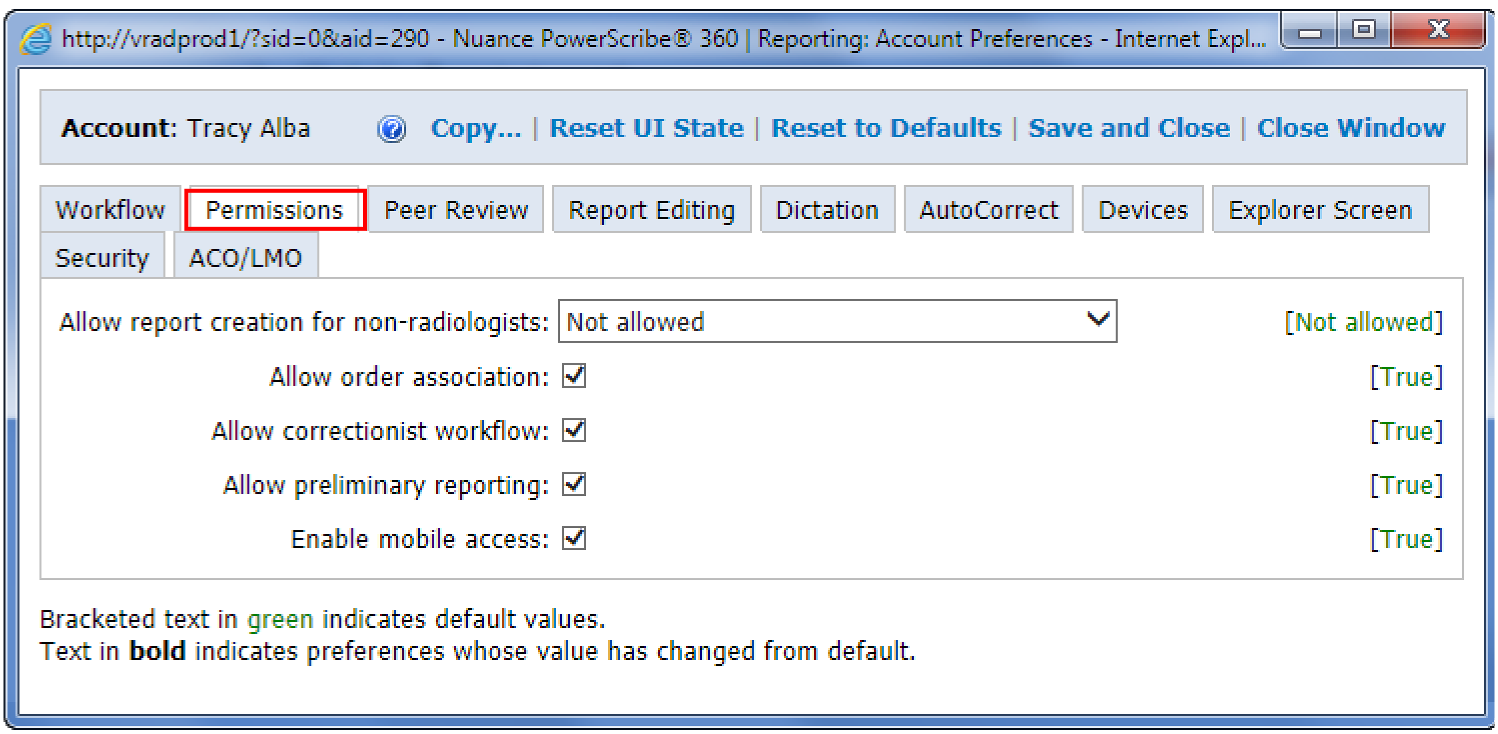
Tip: *If a user has managed to accidentally hide windows or move toolbars in their application, click the* ***Reset UI State*** *link to return these items to their original positions and locations in the user's client application windows.*

Use the following table to select preferences on the **Workflow** tab.

Account Preference	Definition	Default
Perform spell check at signoff	Automatically spell checks a report when the provider signs it. If the system finds errors, it prompts the user to correct them.	True
Perform Quality Check at signoff	Runs the Quality Check feature when a report is signed. ***Note:*** *Quality Check is a purchasable option. Please contact your Nuance account representative for more information.*	True
Perform follow-up recommendations at signoff	Determines whether to display the follow-up recommendations dialog box at report signoff.	False
Invoke Fax at signoff	Automatically opens the **Fax** dialog box when a provider signs a report. Allows user to select the person(s) to whom the report is faxed.	False
Enable Wet Reads	Select an option: **Allowed**: Radiologist can create a report either as a wet read or a draft. Provider can send these reports to an editor (if they are assigned the **Allow correctionist workflow** permission). **Always**: All reports are automatically wet reads (as opposed to drafts). Provider *cannot* send these reports to an editor. **Disabled**: Provider cannot create reports as wet reads.	Disabled
Add note on reject	When the radiologist rejects a corrected/transcribed report, the **Insert Note** dialog box automatically opens, allowing her to create a note for the transcriptionist. This preference also applies when an attending provider rejects a report approved by a resident.	True
Prompt on GUI sign	When a radiologist signs a report by clicking the **Sign** button, he is prompted to confirm his signature. This preference also causes a prompt to appear when residents click **Approve** and when editors click **Finish**.	False

Account Preference	Definition	Default
Warn if fields are empty when signing	The radiologist or resident is warned when signing or approving a report if the report contains empty fill-in or merge fields.	True
Warn on sign if new notes exist	Controls whether the user is alerted during the signing process if new notes have been added since the last time he opened the report. • **Never**: New notes do not trigger a warning. • **From Transcription**: Notes are shown only when added by the transcriptionist. • **Always**: Any new notes trigger a warning, including those from other radiologists, or notes the system automatically adds on certain actions, such as when an order is assigned to a radiologist.	From transcription

3. Click the **Permissions** tab.

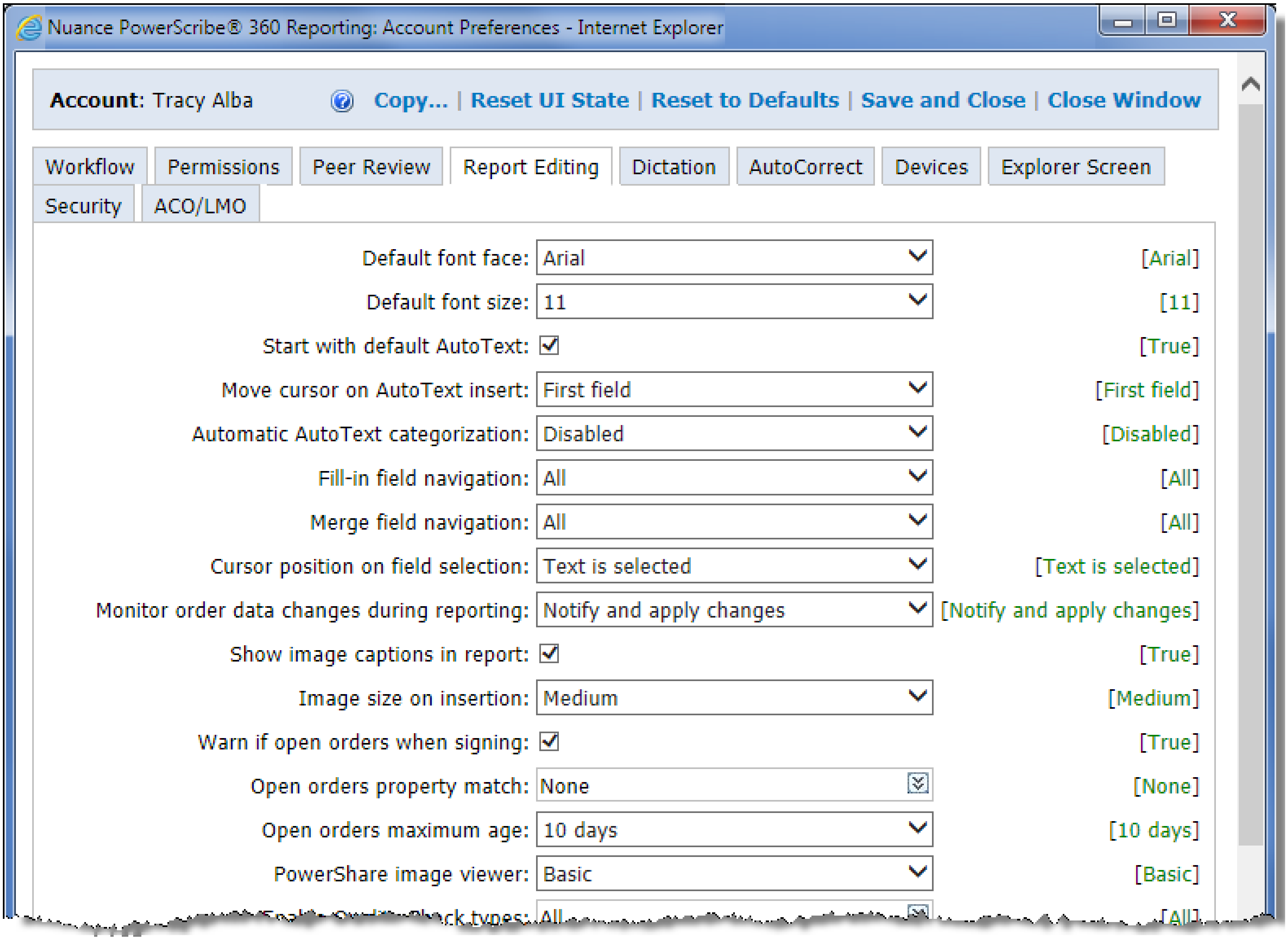


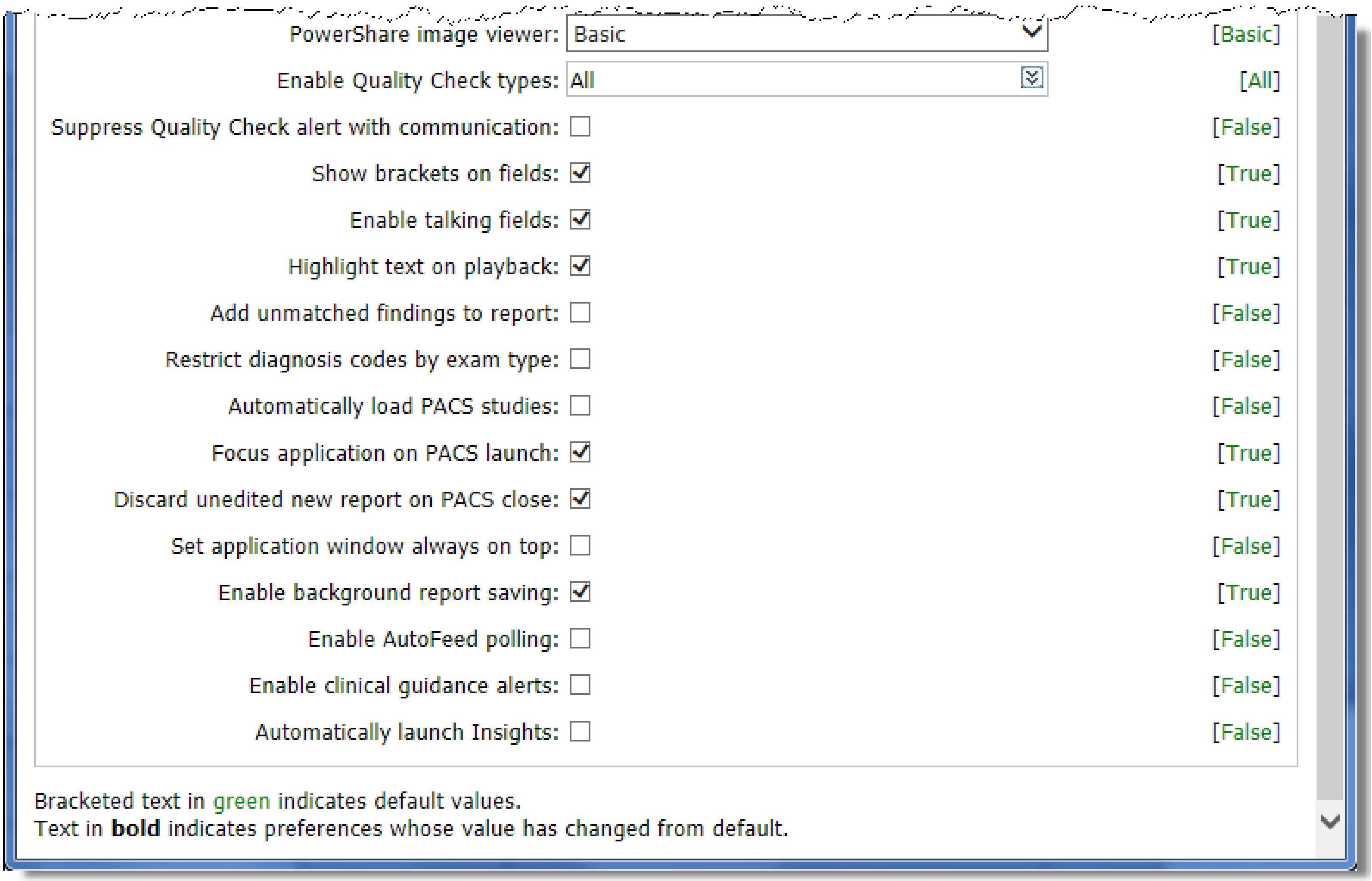
Refer to the table below to select preferences on the **Permissions** tab.

Account Preference	Definition	Default
Allow report creation for non-radiologists	Determines what types of reports, if any, users other than radiologists can create. Choices are: **Reports and addendums**; **Reports only**; **Addendums only**; or **Not allowed**. (Replaces the **Allow report creation** check box preference in previous versions.)	Not allowed
Allow order association	Controls whether the provider has the right to add unreported orders to existing reports, or to dissociate an order from a multi-accession report. This function is available only if your RIS/HIS permits multiple accessions per order.	True
Allow correctionist workflow	Select this option to activate the **Correct** and **Reject** functions for radiologists.	True
Allow preliminary reporting	Select this option to allow the user to create and save preliminary reports.	True
Enable mobile access	Allows users to sign reports and use Assisted Diagnosis from their mobile devices	True

***Note: Peer Review** is a purchasable option. Contact your Nuance account executive for information.*

4. Click the **Report Editing** tab. (For better visibility, the illustration for this tab is shown on this page and the next.)





Refer to the following table to set preferences on the **Report Editing** tab.

Account Preference	Definition	Default
Default font face	Specifies the font typeface to use when viewing and editing reports.	Arial
Default font size	Specifies the font size to use when viewing and editing reports.	11
Start with default AutoText	If you select this option, if an AutoText entry has been designated as the default for a particular type of exam, the AutoText is automatically inserted when a user creates a new report for an exam of that type.	True (selected)

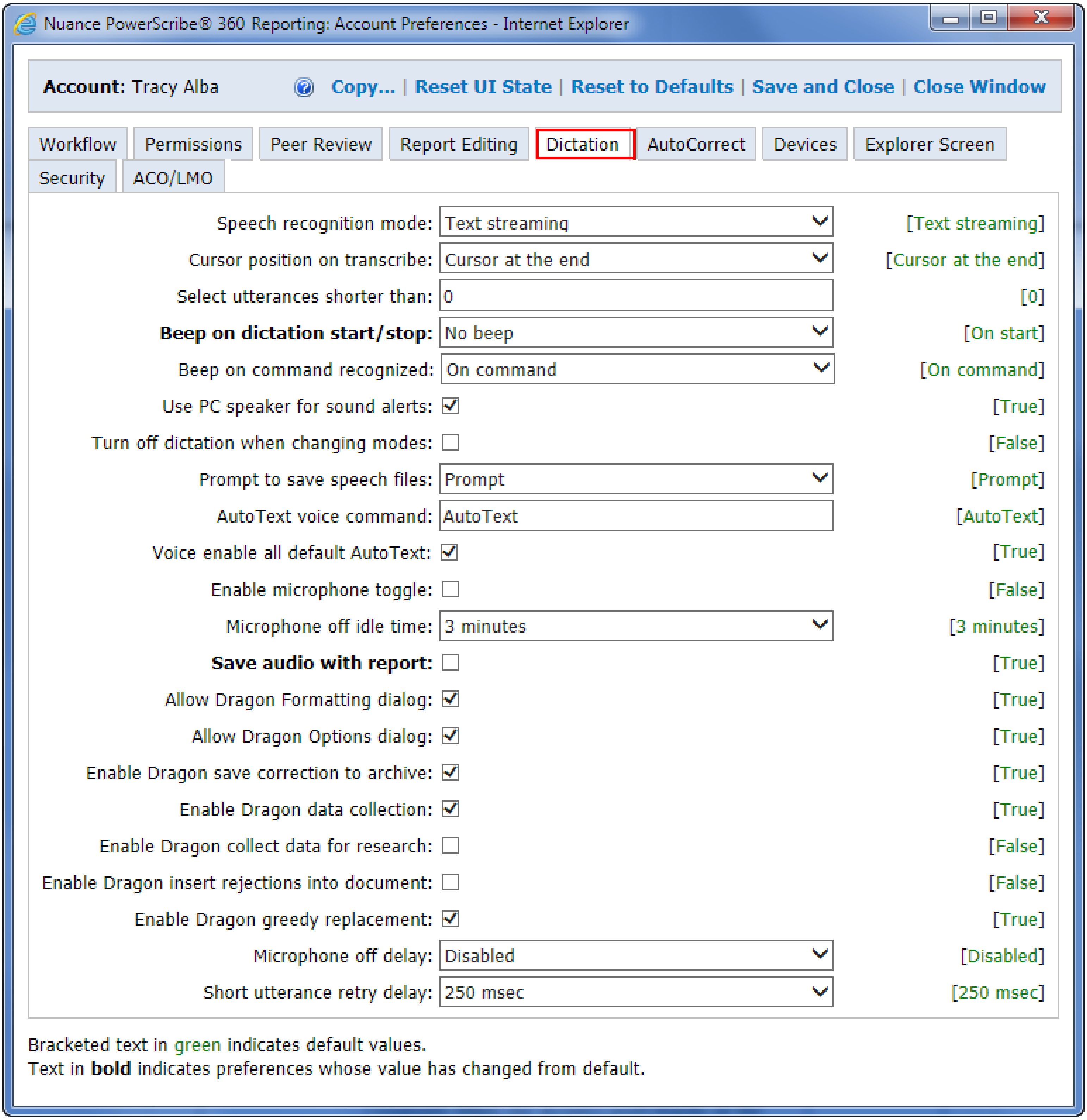
Account Preference	Definition	Default
Move cursor on AutoText insert	This specifies where the cursor is placed after the user inserts AutoText. Select an option: • End of AutoText: Cursor moves to the right of the AutoText • First empty field: Cursor moves to the first empty field in the document. • First field: Cursor moves to the first field in the document.	First field
Automatic AutoText categorization	Allows providers to automatically include procedures in their AutoText. The choices for this preference are: • **Always**: Procedures in the report's order(s) are added to any AutoText that providers insert. • **Prompt**: Provider is prompted to accept categorization prior to the addition of any procedure(s). • **Disabled**: Do not perform auto-categorization of AutoText.	Disabled
Fill-in field navigation	Select the status of fields to which your **Tab** button/ key navigates. This allows you to skip *fill-in fields* that already have content. Choices are **All**; **Empty**; **None**; or **Unmodified**.	All
Merge field navigation	Select the status of fields to which your **Tab** button/ key navigates. This allows you to skip *merge fields* that already have content. Choices are **All**; **Empty**; **None**; or **Unmodified**.	All
Cursor position on field selection	Select where to position the cursor in a field that you select or move to. Choices are **Text is selected**; **Cursor at the end**; or **Cursor at the beginning**.	Text is selected
Monitor order data changes during reporting	Notifies users if the order data has changed while they are dictating a report. Options are: • Notify and apply changes • Apply changes without notification • Disabled	Notify and apply changes
Show image captions in report	When selected, captions appear under any images providers insert into their reports.	True (selected)
Image size on insertion	Default size of your inserted images. Choose either **Small**, **Medium**, or **Large**.	Medium

Account Preference	Definition	Default
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. 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.	True
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.	None
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.)	10 days
PowerShare image viewer	Select either the **Basic** or the **Advanced** *PowerShare* image viewer from the drop-down menu.	Basic
Enable Quality Check types	Select one or more of the Quality Checks (currently **Critical Test Results**, **Gender Mismatches**, and **Laterality Mismatches**), or select **All**. ***Note: Quality Check** is a purchasable option. Contact your Nuance account executive for information.*	All
Suppress Quality Check alert with communication	Controls alerts for Actionable Findings/Critical Results that already have a communication statement.	False
Show brackets on fields	Place square brackets around all fill-in fields.	True

Account Preference	Definition	Default
Enable talking fields	If you select this option, the name of the field is spoken out loud when a user takes one of the following actions: • Moves the cursor into a field • Selects it in the field pane • Navigates into it using the microphone buttons or **Tab** key ***Note: Talking Fields*** *requires that Dragon Text-To-Speech (TTS) be installed on the user's workstation. Note that field names are not spoken while the dictation mode is active.*	True
Highlight text on playback	Each section of the report text is highlighted as it is played back.	True
Add unmatched findings to report	Applies to **Findings Only** dictation mode in the *PowerScribe 360 Reporting* client application. When the user clicks **Apply Findings**, the software creates a new item in the Field pane for each unmatched finding. The fields are named *Unmatched1, *Unmatched2, and so on. If you do not select this option, any unmatched findings remain in the **Findings Only** window.	False
Restrict diagnosis codes by exam type	The list of ICD-9 codes is restricted to those that are appropriate for the exam. ***Note:*** *This behavior is controlled through a check box in the* ***Diagnosis Coding*** *dialog box.*	False
Automatically load PACS studies	If you select this option and a **PowerScribe-driven** PACS integration is configured, as soon as a report is opened in *PowerScribe 360 Reporting* the corresponding study is automatically opened in the PACS selected for the site.	False
Focus application on PACS launch	If you select this option and a **partner-driven** PACS integration is configured, *PowerScribe 360 Reporting* is brought to the front of all applications and activated when a dictation request is received from the PACS. ***Note:*** *This function works only with some PACS systems.*	True

Account Preference	Definition	Default
Discard unedited new report on PACS close	Allows the radiologist to delete a report that contains an AutoText template without being prompted, minimizing their interruptions. Permitted only if the radiologist did not create any content (audio or text) for the report. ***Note:*** *Reports created manually will still prompt you before allowing deletion.*	True
Set application window always on top	This preference keeps the *PowerScribe 360 Reporting* application the top application in an environment with multiple applications present, and prevents you from having to switch between applications during the session.	False
Enable background report saving	If you select this option, when the user approves or signs a report, he is taken immediately back to the Explorer screen (or to next report, in AutoFeed mode) without waiting to see that the report has been saved to the database.	True
Enable AutoFeed polling	If selected, the system automatically polls for reports when a provider's AutoFeed queue is empty.	False
Enable clinical guidance alerts	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.	False
Automatically launch Insights	Select this check box to automatically open the read-only Insights window when a report is opened. The Insights window displays information about the patient, the user, the order, procedure codes, and categories.	False

5. Click the **Dictation** tab.



Use the following table to assign preferences on the **Dictation** tab.

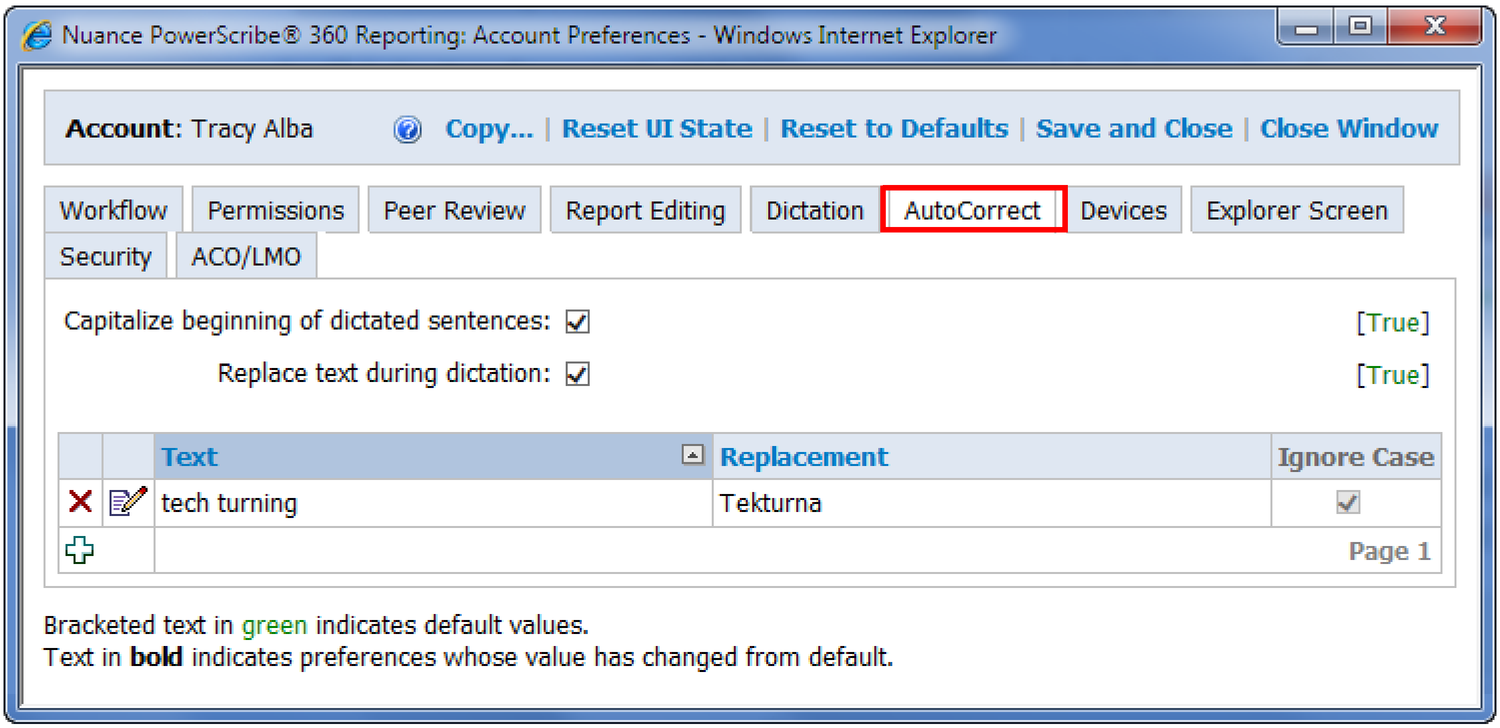
Account Preference	Definition	Default
Speech recognition mode	Controls how speech recognition is performed. • **Text streaming**: Automatically displays the dictated text as the provider dictates. • **Press to transcribe**: Requires the provider to press a button on the microphone. • **Disabled**, which means speech recognition is not loaded. The user, therefore, cannot record or play back audio. This option is typically assigned to technologist accounts. ***Note:*** *Do not select* ***Disabled*** *for editors; they need to be able to play back the audio to perform edits.*	Text streaming
Cursor position on transcribe	Controls the position of the cursor after the provider presses the **Transcribe** button on the microphone. • **Cursor at the end**: The cursor appears at the end of the transcribed text. • **Cursor at the beginning**: The cursor appears at the beginning of the transcribed text. • **Text is selected**: The transcribed text is highlighted.	Cursor at the end
Select utterances shorter than	When the provider dictates audio shorter than the number of characters you indicate here (for example, when she dictates short words, or the values in fill-in fields), the dictated content is automatically selected when she issues the “transcribe” command. She can then quickly edit the dictated content or move on to the next field. ***Note:*** *This preference is available only when you have selected either* ***Cursor at the beginning*** *or* ***Cursor at the end*** *as the* ***Cursor position on transcribe*** *preference.*	0
Beep on dictation start/stop	Choose whether an audible tone sounds when the provider starts and/or stops dictation. Select either **No beep**, **On start**, or **On start and stop**.	On start

Account Preference	Definition	Default
Beep on command recognized	An audible tone sounds when the software recognizes a voice command. Choose one of the following options: **On command** **On AutoText insertion** **On command and AutoText insertion** **No beep**	On command
Use PC speaker for sound alerts	Uses the computer's built-in speaker for beeps in the above two preferences.	True
Turn off dictation when changing modes	If you select this option, dictation is automatically toggled off when the user switches screens, such as when moving from the Explorer screen to the Report screen, or when opening or closing dialog boxes that accept dictation input.	False
Prompt to save speech files	Controls saving modified speech files when a user logs out of the application. • **Prompt**: The user is asked whether or not to save. • **Always save:** Speech files are saved without prompting. • **Never save**: Speech files are never saved. Learning does not continue and new words added are not saved; the user must actively save any new words. It is recommended that you select **Prompt** or **Always save**. For a user who has used the system for awhile and is satisfied with speech recognition accuracy, you might change this option to **Never save**.	Always save
AutoText voice command	The word or phrase you specify here is used as the voice command for inserting AutoText into a report. (The word **Macro** might be preferable for users accustomed to older speech-reporting applications.)	AutoText
Voice enable all default AutoText	Select to enable voice commands for all AutoText marked as default, regardless of relevance.	True
Enable microphone toggle	If you select this option and the start/stop button has been configured to turn the microphone on and off, the provider can press the start/stop button once to turn the microphone on, use voice commands to start and stop recording, and then press the start/stop button to turn the microphone off.	False

Account Preference	Definition	Default
Microphone off idle time	The time the microphone is allowed to be idle before the system automatically turns it off.	3 minutes
Save audio with report	Controls whether the dictated audio is saved to the server. The default is False to minimize system load. Set this preference to **True** for: • Self-edit radiologists who want to play back their dictations • Radiologists who send their reports for transcription ***CAUTION***: Enable this option for self-edit radiologists *only* if they need to play back their dictations. This option adds considerable overhead to the server and delays opening and saving of reports.	True
Allow Dragon Formatting dialog	The user can access the Dragon **Formatting** tab, and modify the formatting settings for the application.	True
Allow Dragon Options dialog	The user can access the Dragon **Options** tab, allowing her to modify the options settings for the application.	True
Enable Dragon save correction to archive	Select this option if you want the speech recognition engine to collect correction data in the acoustic archive.	True
Enable Dragon data collection	If you select this option, the software selects data for troubleshooting purposes; if recognition is unsatisfactory, a Nuance representative can use a log file to analyze the problem.	True
Enable Dragon collect data for research	Select this option if you want the speech recognition engine to collect correction data for research purposes.	False
Enable Dragon insert rejections into document	*Do not change this preference unless you are instructed to do so by Nuance.*	False
Enable Dragon greedy replacement	If selected, replaces an entire word that has been only partially selected. For example, if a provider highlights only the letters **im** in **super*im*posed infection**, and then dictates **"mild"**, the resulting text would show **mild infection**.	True

Account Preference	Definition	Default
Microphone off delay	*Do not change this preference unless you are instructed to do so by Nuance.*	Disabled
Short utterance retry delay	*Do not change this preference unless you are instructed to do so by Nuance.*	250 milliseconds

6. Click the **AutoCorrect** tab. (Administrators can access individual user AutoCorrect rules, and either edit or delete the rules.)



Use the following table to assign preferences on the **AutoCorrect** tab.

Account Preference	Definition	Default
Capitalize beginning of dictated sentences	Automatically capitalizes the first letter of the first word of a new sentence. ***Note:*** *Using this function can disrupt audio playback functionality; you should not enable it for radiologists who use a correctionist workflow.*	True
Replace text during dictation	If selected, the system automatically replaces words or phrases with different words or phrases during dictation. This feature is useful if the speech engine consistently makes the same mistakes over and over despite efforts to re-train.	True

To add a new AutoCorrect rule:

a. Click the **Create new item** icon .

b. In the **Text** field, type the text that you want to replace.

c. In the **Replacement** field, type the text that you want to appear (instead of the word or words you entered in the **Text** field).

d. Select the **Ignore Case** check box to ignore the case (uppercase or lowercase) of your text.

e. Click the **Commit changes** icon .

To change an AutoCorrect rule:

a. Click the **Edit item** icon to the left of the rule you want to modify.

b. Make the appropriate changes to the text.

c. Click the **Commit changes** icon .

To remove an AutoCorrect rule:

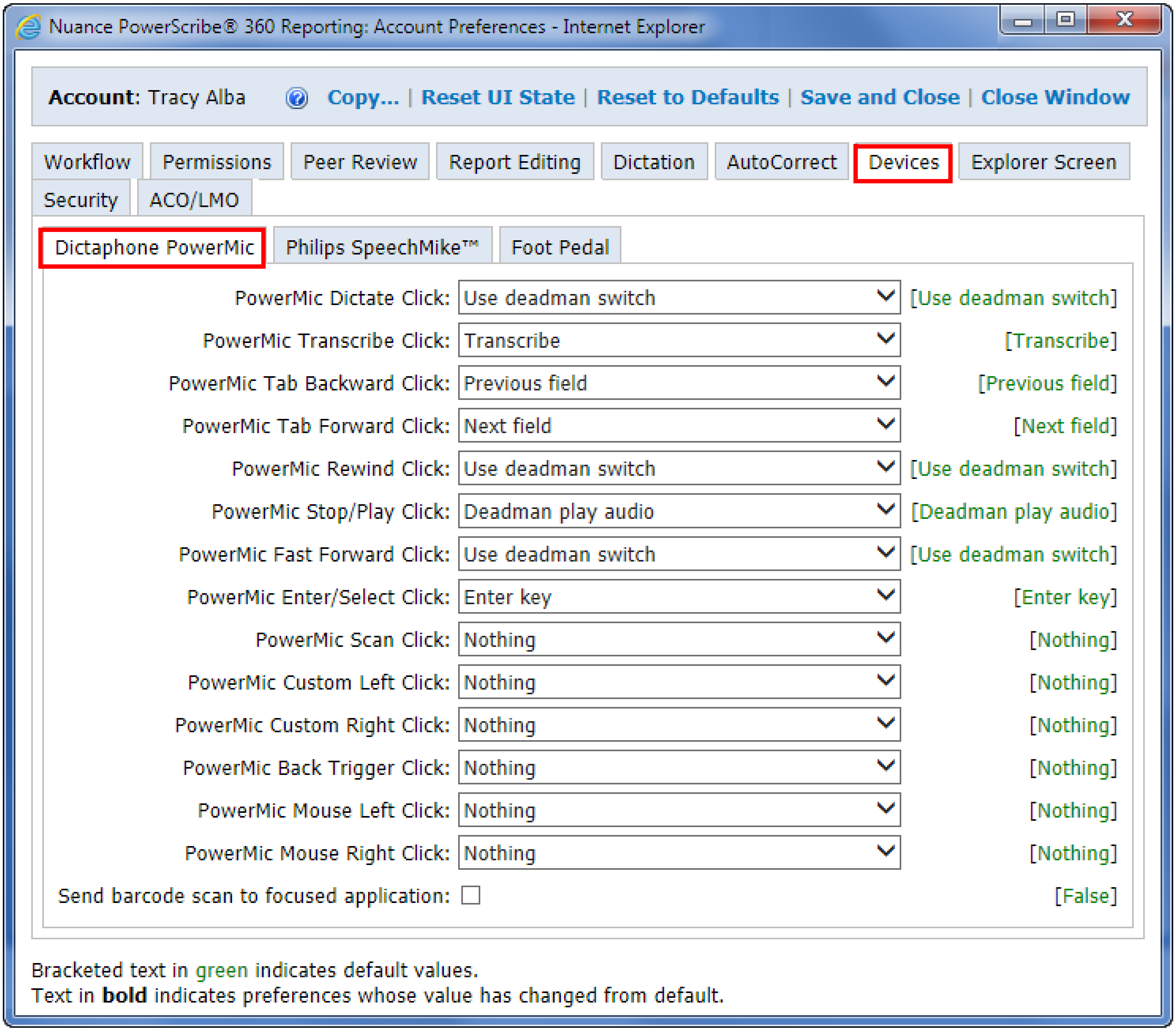
- Click the **Delete item** icon to the left of the rule you want to remove.

To return without changing or deleting an AutoCorrect rule:

- Click the **Cancel update** icon to the left of the rule that you were modifying.

7. Click the **Devices** tab.
8. Click the **Dictaphone PowerMic** tab only if the provider is using a PowerMic. Otherwise, continue with Step 9 or Step 10, whichever is appropriate for the provider's needs.

Note: All of the buttons on the Dictaphone PowerMic are configurable. Each drop-down list indicates the valid functions for each button.

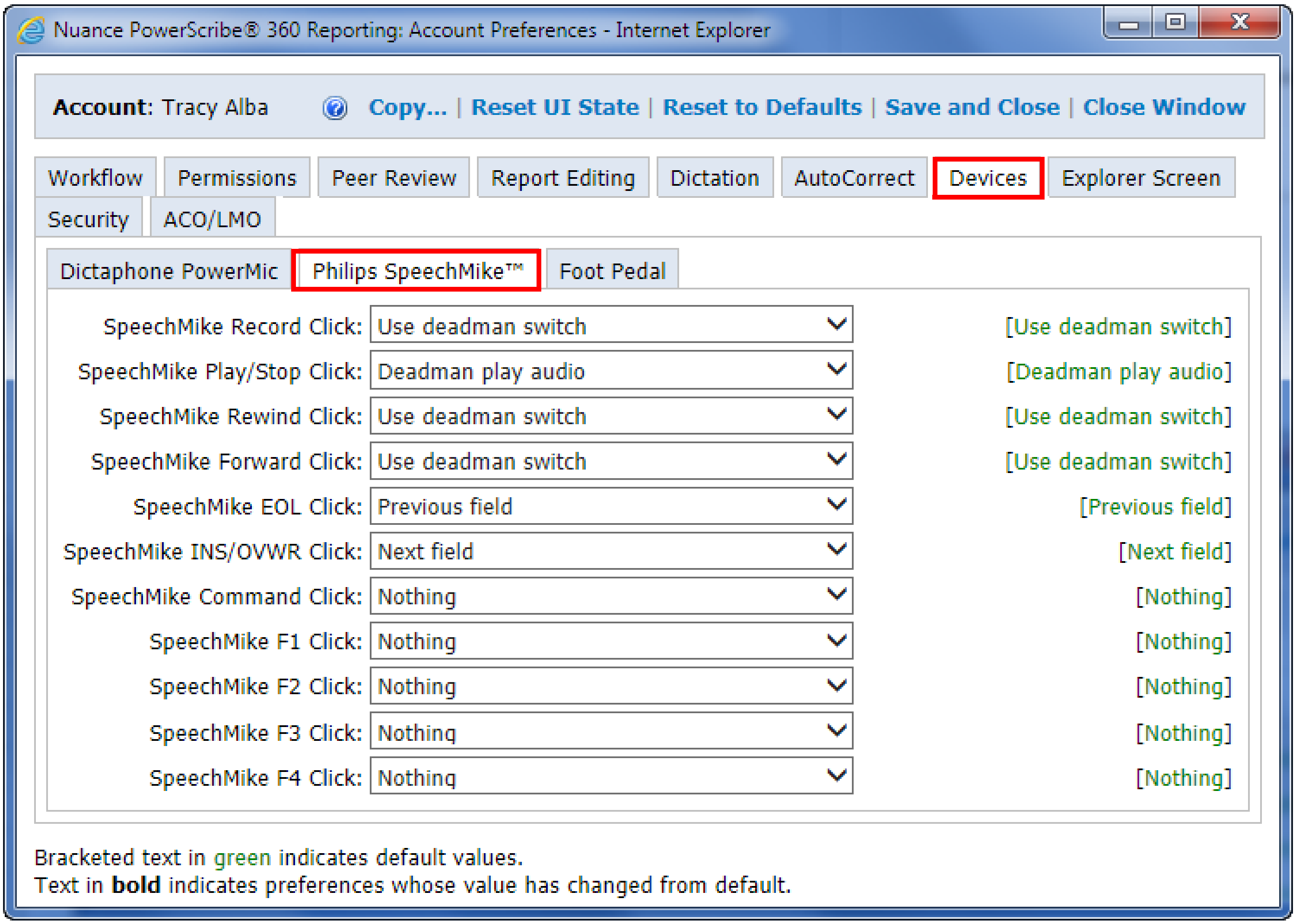


Actions you can assign to PowerMic buttons include:

- **Nothing**: No action.
- **Sign Report**: Electronically sign the current report.
- **Use deadman switch**: Continue the action while the user holds the button down, stop when the button is released.
- **Deadman play audio**: Plays recorded audio for as long as button is held
- **Toggle [action]**: Begin the action when the user presses and releases the button. Stop the action when the user presses and releases the button again. Toggle items include **Toggle dictation on off**; **Toggle play audio on off**; **Toggle rewind on off**; **Toggle microphone on off**; and **Toggle fast forward on off**.
- **Toggle visibility**: Toggles the application window (useful for single-workstation integrated PACS environments).
- **Next field**: Selects next field in reports that have multiple fields
- **Previous field**: Selects previous field in reports that have multiple fields
- **New line**: Inserts a new line into the report.
- **New paragraph**: Inserts a new paragraph into the report.
- **Delete key**: Deletes forward from current position.
- **Delete last word**: Deletes the last word dictated.
- **Delete last utterance**: Deletes the last group of words recognized (similar to the “scratch that” function).
- **Save as draft**: Saves current report to the draft folder.
- **Transcribe**: Convert the audio to text.
- **Enter key**: The key acts like the **Enter** key on the computer keyboard.
- **Backspace**: The key acts like the **Backspace** key on the computer keyboard.
- **Next discrepancy**: Highlights the next discrepancy located by the Assure consistency checker (which is a purchasable option).
- **Previous discrepancy**: Highlights the previous discrepancy located by the Assure consistency checker (which is a purchasable option).
- **Correct report**: Send report to an editor for transcription or editing
- **STAT**: Mark a report as STAT
- **Sign as preliminary**: Allows you to mark a report as **Preliminary Sign**.
- **Next field or table cell**: Assignable tasks that allow you to move to the next cell in a table that you have inserted into your report or AutoText.
- **Previous field or table cell**: Assignable tasks that allow you to move to the previous cell in a table that you have inserted into your report or AutoText.
- **Overread report**: Assigns the current report to another user for final validation to ensure the quality of the report.
- **Overread and prelim**: Same as Overread report but sends the report to the RIS/HIS as Preliminary with the person you selected as the overreader as the report’s signer.

9. Click the **Philips SpeechMike** tab only if the provider is using a SpeechMike. Otherwise, continue with Step 10.

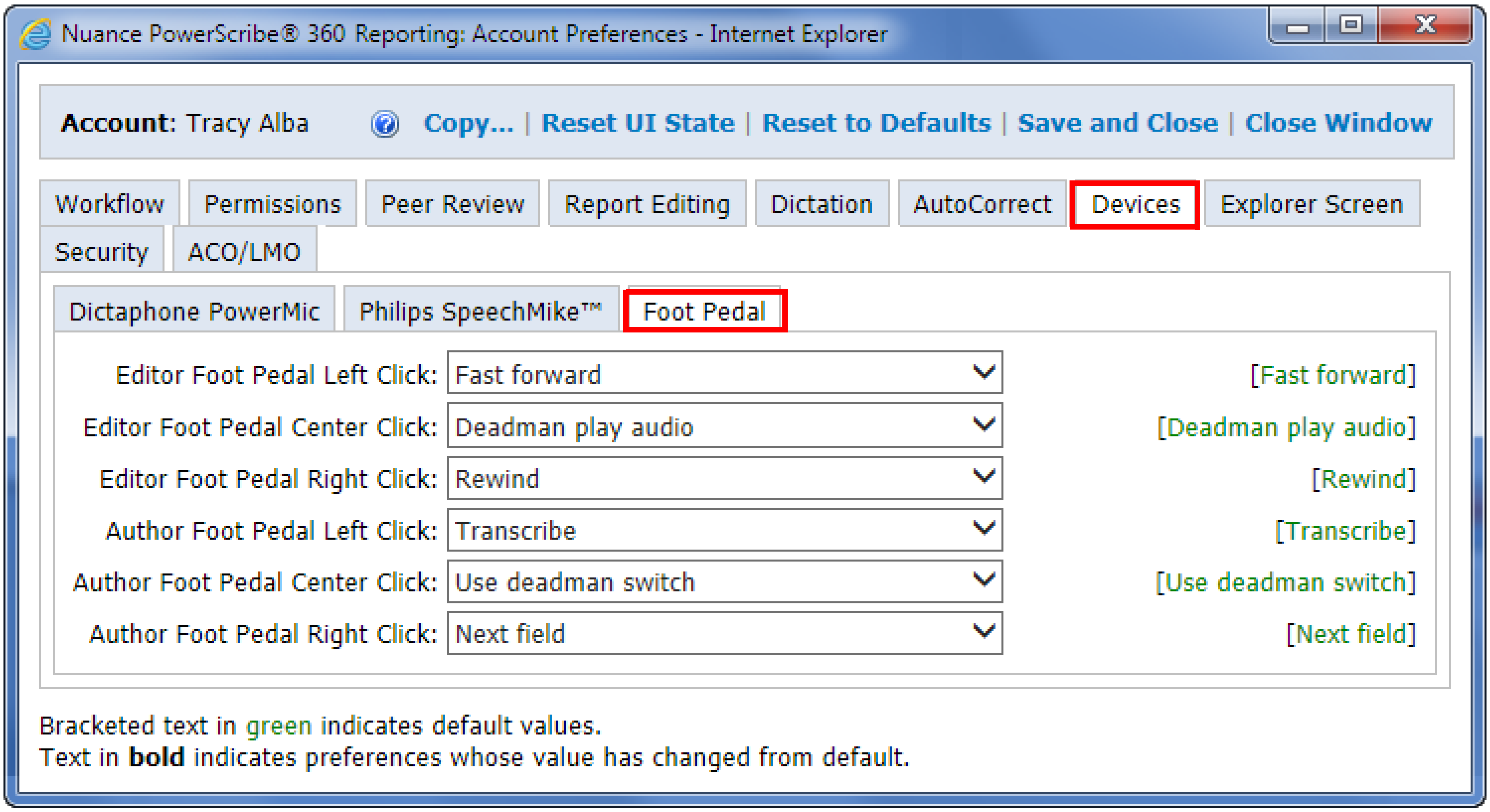
   Note: *All of the buttons on the Philips SpeechMike are configurable. Each drop-down list indicates the valid functions for each button.*



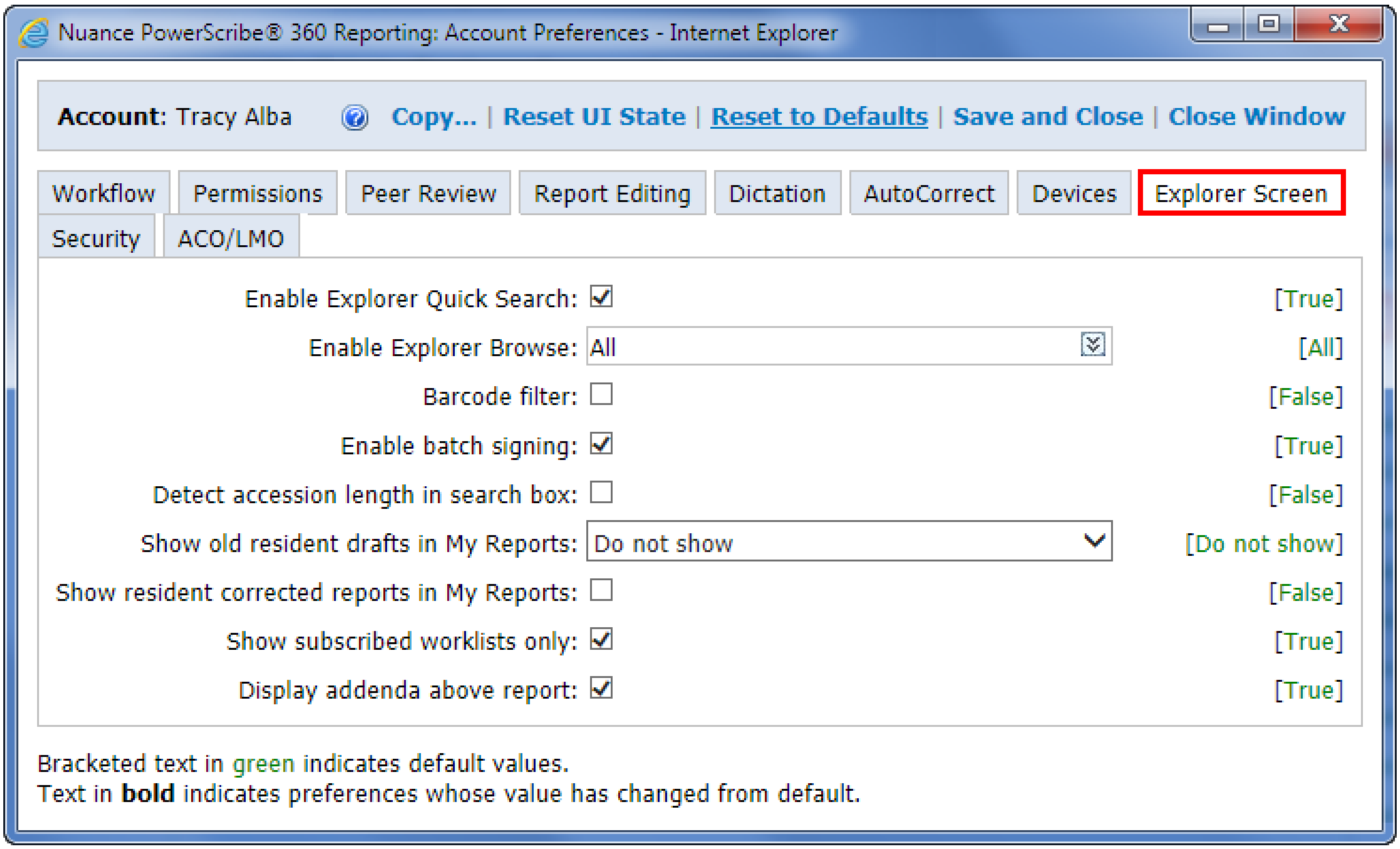
10. Click the **Foot Pedal** tab. (If the user does not have a foot pedal, skip this step, go to Step 11, and configure the **Explorer Screen** settings.)

__Note:__ All of the buttons on the foot pedal are configurable. Each drop-down list indicates the valid functions for each button.

Notice that each button on the foot pedal can be configured for either an editor, an author, or both.



11. Click the **Explorer Screen** tab.

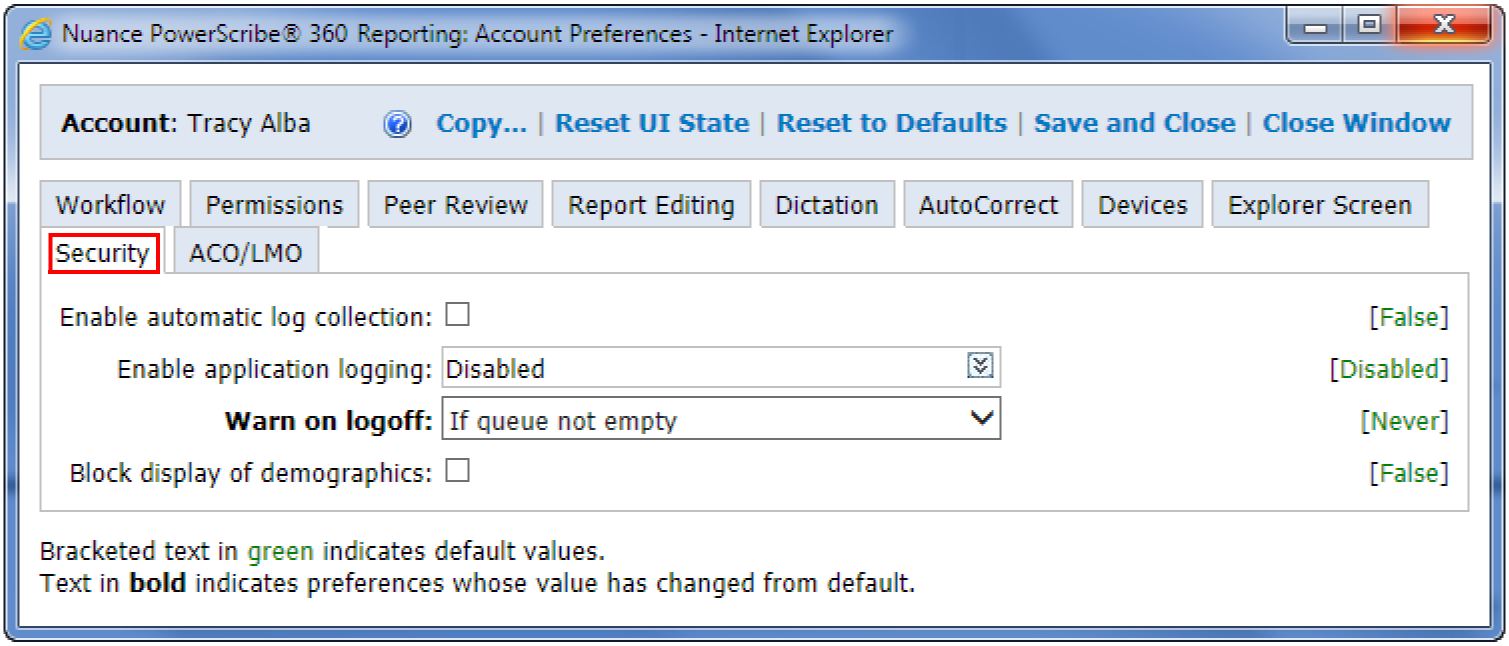


Refer to the following table to set preferences on the **Explorer Screen** tab.

Account Preference	Definition	Default
Enable Explorer Quick Search	Determines whether the Quick Search section of the Explorer window is visible to providers. If not selected, the Quick Search section is hidden from the specified user. Only administrators can access and change this setting.	True
Enable Explorer Browse	This drop-down box determines which sections of the **Browse** area in the Explorer window are visible to providers. You can choose: • **None**: Hides the **Browse** section from the specified user • **Combination of one or more filters**: Select individual filters to show to the user. Including one or more filters makes the **Browse** section visible to the specified user, showing only the filters you selected.**All**: Shows the **Browse** section and all its filters to the specified user	All

Account Preference	Definition	Default
Barcode filter	Enables the barcode filtering as configured by the administrator. Selecting this option activates the corresponding menu and toolbar button in the *PowerScribe 360 Reporting* client application.	True
Enable batch signing	Select this check box to allow attending providers to sign several reports at the same time.	False
Detect accession length in search box	If you select this option, when the user enters an accession number in the **Quick Search** area, the system automatically begins the search when it receives the correct number of digits. This preference is applicable only if you have set the **Accession Number Length** preference to a value greater than zero. Automatic detection is not used when the **Barcode filter** preference (described above) is enabled.	False
Show old resident drafts in My Reports	Allows attending radiologists to see (and sign) their residents' drafts when they click the **Drafts** link in the **My Reports** section. This option helps ensure that a report is not lost if the resident does not complete it in a timely fashion. Attending providers can choose to show all resident drafts, or only those that are older than a certain number of hours.	Do not show
Show resident corrected reports in My Reports	Select this check box to show reports that were corrected by a resident and returned to the attending provider in the provider's My Reports list.	
Show subscribed worklists only	Select this check box to show users only worklists to which they are subscribed.	False
Display addenda above report	If selected, displays addenda at the beginning of previewed reports. Previewed reports appear at the bottom of the Explorer window and in the Prior Reports tab in the Report Editor window.	True

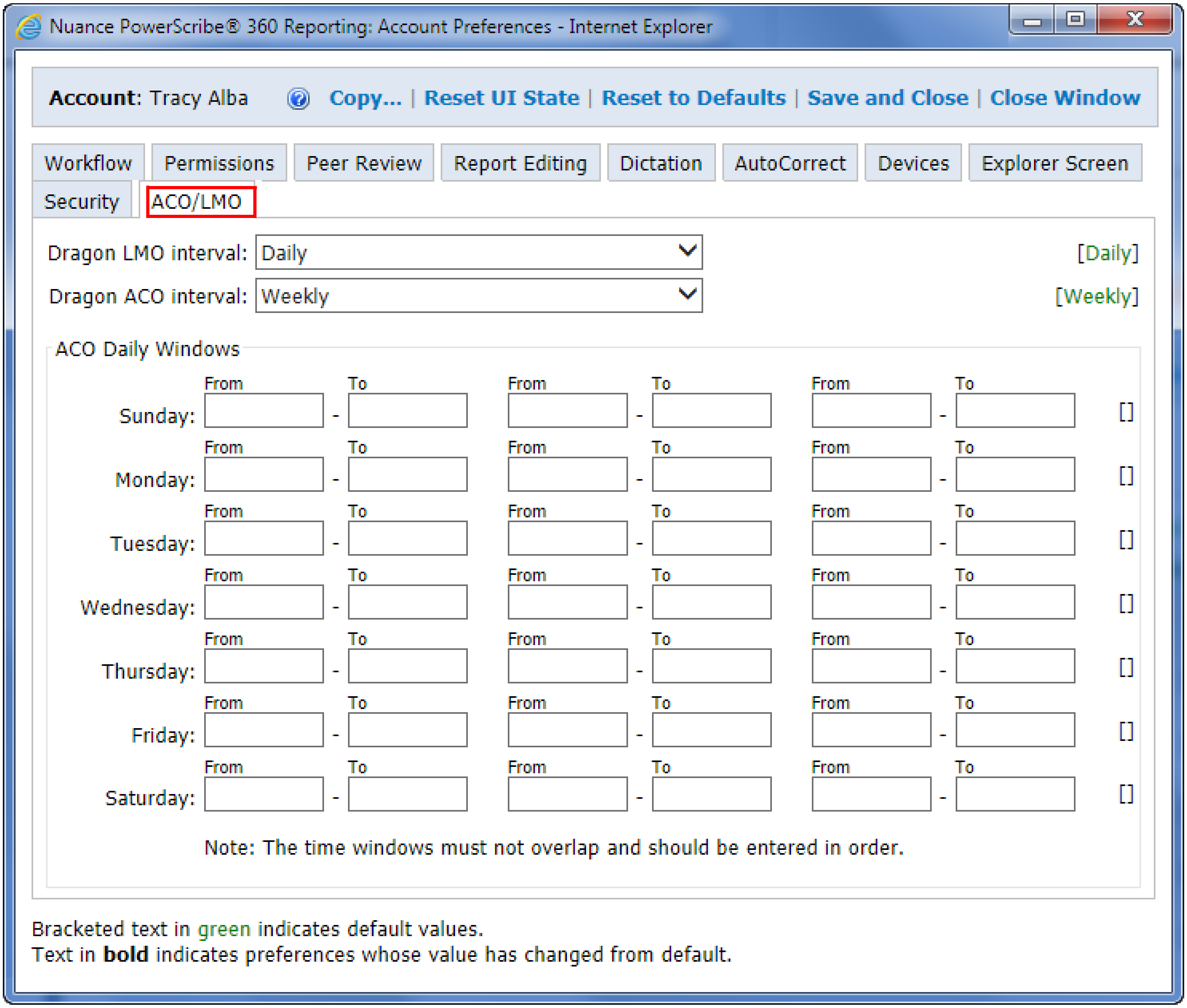
12. Click the **Security** tab.



Use the following table to assign preferences on the **Security** tab.

Account Preference	Definition	Default
Enable automatic log collection	Select this check box to enable the Collect logs feature automatically when the user logs off of the client application.	False
Enable application logging	Used for troubleshooting purposes, choose one or more selections from **Disabled**, **Grammar rules**, **Cursor moves**, **Recognition mode changes**, **Field navigation**, **Report workflow**, **Speech session**, **Stray toolbars**, **Microphone button**, **NBest-Choices**; **Performance**, **RAS**, **IRadWhere**, or **All**. 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.	Disabled
Warn on logoff	The software displays a warning message when the user exits the application or if the application is closed automatically. Choose from **Never**, **Always**, or **If queue not empty**.	Never
Block display of demographics	The patient's **Name** and **MRN** appear as **n/a**, and are not displayed when the user views the report. (This option is usually activated for users with editor or technologist roles—assuming they do not need to see this patient information—so as to meet HIPAA requirements.)	False

13. Click the **ACO/LMO** tab.



Use the following table to help you make your choices on the **ACO/LMO** tab.

Account Preference	Definition	Default
Dragon LMO interval	Set the amount of time between language model optimizations, or select **Disabled** if you do not want to run LMO.	Daily
Dragon ACO interval	Set the amount of time between acoustic model optimizations, or select **Disabled** if you do not want to run ACO.	Weekly
ACO daily windows	Configure the time(s) during which you want the ACO to run.	None

14. When you have finished assigning preferences, click **Save and Close**.

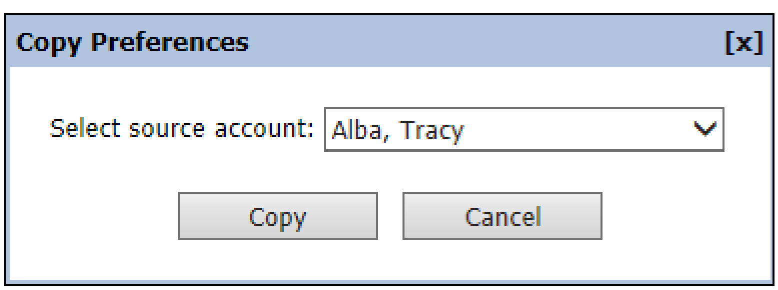
Copying User Account Preferences

To copy preferences from an existing user account:

1. Follow the procedure beginning on page 116 to create a new user, and modify the account preferences as needed. Or, edit an existing user's preferences. When you have finished setting preferences, save your changes to the account.
2. Begin creating another new user, or edit an existing user account.
3. On the **Accounts** tab, click **Preferences**.

The **Account Preferences** dialog box opens.

4. In the **Account Preferences** dialog box, click **Copy**. The **Copy Preferences** dialog box opens.



5. From the drop-down list, select the name of the user whose preferences you want to copy.
6. Click **Copy**. The preferences are copied to the user account you are creating or editing.

Auditing User Activity

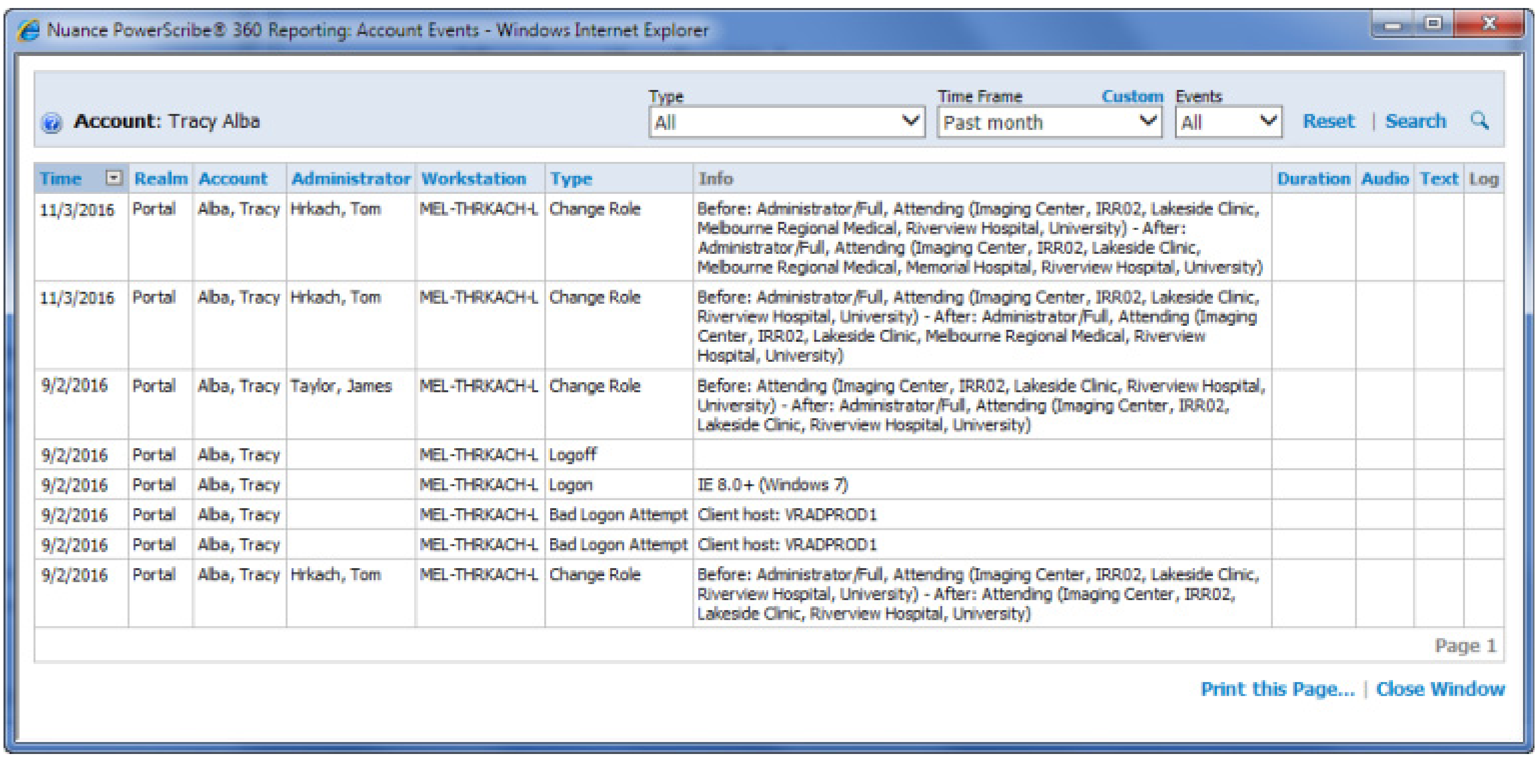
The **Accounts** tab of the **Setup** group allows you to monitor activity by the users in your system. The **Account Events** window shows such activities as password changes, deactivation of users, and changes to preferences.

LMO and ACO events appear in the **Account Events** window only when they are successful. Any failed LMO or ACO processes appear in the **Exception** tab in the **Logs** group. To see all activity on the Speech Utility Server, refer to the **ACO/LMO** tab in the **Logs** group.

Viewing the Audit Log

To view the audit log:

1. Find the user account whose events you want to audit. Refer to *Searching for Existing Users*, beginning on page 172.
2. With the user account displayed, click **Audit**. The **Account Events** window opens, and displays all activity for this user.



Time	Realm	Account	Administrator	Workstation	Type	Info	Duration	Audio	Text	Log
11/3/2016	Portal	Alba, Tracy	Hrkach, Tom	MEL-THRKACH-L	Change Role	Before: Administrator/Full, Attending (Imaging Center, IRR02, Lakeside Clinic, Melbourne Regional Medical, Riverview Hospital, University) - After: Administrator/Full, Attending (Imaging Center, IRR02, Lakeside Clinic, Melbourne Regional Medical, Memorial Hospital, Riverview Hospital, University)				
11/3/2016	Portal	Alba, Tracy	Hrkach, Tom	MEL-THRKACH-L	Change Role	Before: Administrator/Full, Attending (Imaging Center, IRR02, Lakeside Clinic, Riverview Hospital, University) - After: Administrator/Full, Attending (Imaging Center, IRR02, Lakeside Clinic, Melbourne Regional Medical, Riverview Hospital, University)				
9/2/2016	Portal	Alba, Tracy	Taylor, James	MEL-THRKACH-L	Change Role	Before: Attending (Imaging Center, IRR02, Lakeside Clinic, Riverview Hospital, University) - After: Administrator/Full, Attending (Imaging Center, IRR02, Lakeside Clinic, Riverview Hospital, University)				
9/2/2016	Portal	Alba, Tracy		MEL-THRKACH-L	Logoff					
9/2/2016	Portal	Alba, Tracy		MEL-THRKACH-L	Logon	IE 8.0+ (Windows 7)				
9/2/2016	Portal	Alba, Tracy		MEL-THRKACH-L	Bad Logon Attempt	Client host: VRADPROD1				
9/2/2016	Portal	Alba, Tracy		MEL-THRKACH-L	Bad Logon Attempt	Client host: VRADPROD1				
9/2/2016	Portal	Alba, Tracy	Hrkach, Tom	MEL-THRKACH-L	Change Role	Before: Administrator/Full, Attending (Imaging Center, IRR02, Lakeside Clinic, Riverview Hospital, University) - After: Attending (Imaging Center, IRR02, Lakeside Clinic, Riverview Hospital, University)				

3. If desired, select one or more criteria by which to filter the events list:

- Select an event type from the **Type** drop-down list. The table below shows the available event types.

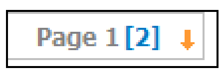
Type	Description
Create	The account is added to the system.
Delete	The account is removed from the system.
Change password	The user assigns a new password to the account.
Change role	The administrator modifies the role(s) that define this user's system access.
Log on	The user signs on to the system.
Log off	The user signs off the system.
Activate	The administrator reinstates an inactive account. Refer to page 174 for more information about activating and deactivating accounts.
Deactivate	The administrator makes the account inactive.
Reset speech	The administrator performs a checkpoint restore (page 175). For this event, the **Info** column indicates whether the entire profile is restored, or just the acoustics.
Checkpoint speech	The user creates a checkpoint (backup of the current speech profile), or the system creates one automatically after the user performs training.
Bad logon attempt	The user entered an incorrect user name or password.
Change preferences	The user or administrator changes one or more preferences that affect the account.
Set speech to mock profile	The administrator creates a profile from the prototype (page 175).
Delete speech profile	The administrator removes the user's profile (page 177).
Set speech language	The administrator assigns a language model to the account.
Set speech acoustics	The administrator assigns an acoustic model to the account.
Delete speech acoustics	The administrator selects **Reset acoustics and retrain** from the **Roaming Profile** menu.
Optimize speech acoustics	The ACO process runs for the account.
Optimize speech language	The LMO process runs for the account.
Import speech vocabulary	The *PowerScribe 360 Reporting* client application detects new words and adds them to the user's profile.
Train speech	The user used the train speech function.
Change Username	An administrator changed the user name in a user's profile.
Change Personal Info	An administrator changed the personal information in a user's profile.

Type	Description
Change Admin Rights	An administrator changed the Administrator rights in a user's profile.
Change Sections	An administrator changed the Sections information in a user's profile.
Change Supervisors	An administrator changed the Supervisors information in a user's profile.
Change Specialties	An administrator changed the Specialties information in a user's profile.
Launch PowerShare study	The user accessed the PowerShare site to view a study.

- Select a period of time from the **Time Frame** drop-down list. Or, to enter a date range, click **Custom**, select the start date from a calendar to insert it in the first text box. Then click the second text box and select an end date from the calendar. To revert back to choosing a time frame from a list, click **List**.
- Select **All**, **Admin**, or **Account** from the **Events** drop-down list. If you select **Admin**, the search retrieves events caused by an administrator, such as a change to a preference, or the deactivation of a user account.

Click **Search** to filter the events by your criteria. Only the events that meet your criteria are shown.

If the search yields more than one page of results, click the page number at the bottom right corner of the grid to navigate to a specific page. To view the entire list, click the small down arrow at the right of the page number list. The arrow then reverts to an up arrow; click the up arrow to see the results one page at a time.



The table below describes each of the columns in the **Account Events** window.

Column	Description
Time	The time of day when the event occurred.
Realm	The application that was running when the event occurred.
Account	The first and last name of the account owner.
Administrator	The administrator who acted on the account in the Administrator Portal, if applicable.
Workstation	The identifier of the computer where the event occurred.
Type	The event; for example, "Log off" or "Change password." Refer to the table on page 168 for descriptions of the event types.
Info	Information about the changes made. For example, if the event is a change to a user preference, this column shows the preference before and after the change.

Column	Description
Duration	The time it took to complete an acoustic or language model adaptation.
Audio	The length of the audio used in an acoustic or language model adaptation.
Text	The number of characters in the text used in an adaptation.
Log	Contains a link to the zipped *Dragon* log for an adaptation.

Tip: *Click on any column heading to sort the list; click the heading again to sort in reverse order.*

Printing the Audit Log

You can send a copy of the audit log for a particular user to a printer on your network.

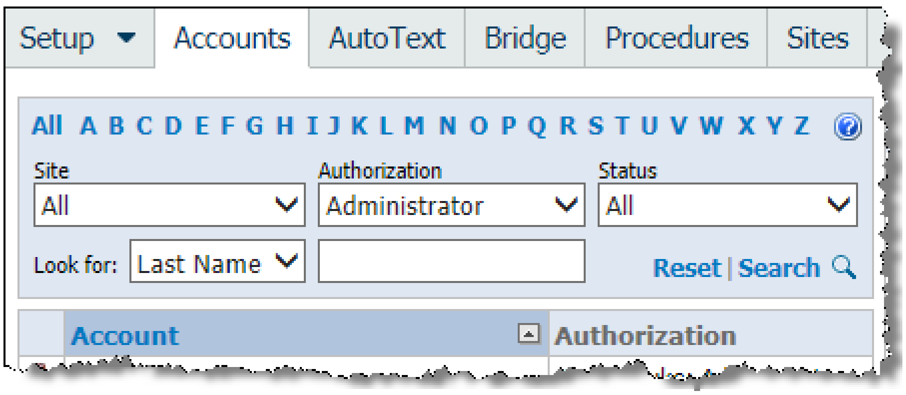
To print the audit log:

1. With the audit log displayed, click **Print this page…**. A standard **Print** dialog box opens.
2. Select the printer you want to use. To ensure that all the columns appear on the page, be sure to select landscape mode in the printer's properties.
3. Click **Print**. The log is sent to your printer.

Maintaining User Accounts

The **Accounts** tab in the **Setup** group allows you to search for and modify users, including their roles in the system.

Searching for Existing Users



To display all existing users,

Click the **All** link at the left of the alphabet.

To find users whose last names begin with a specific letter

Click one of the **A** through **Z** links.

To perform a filter search:

1. Select one or more of the following criteria:
   - Select a **Site** to find users at a particular site in the system.
   - Select an option from the **Authorization** drop-down list to search by user role or whether the user is an administrator.
   - Select an option from the **Status** drop-down list to search for users by logon status, or whether the account is active or inactive.
2. Click **Search**. Any users who meet your criteria appear in the list.

To search with the Look for field:

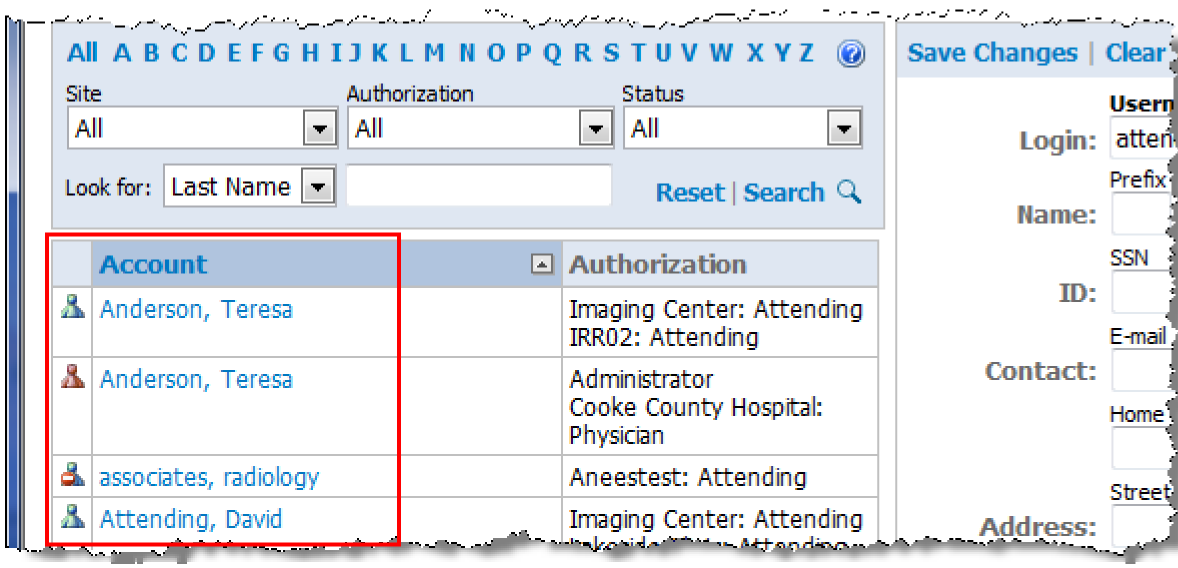
1. In the **Look for** field, select **Last Name**, **First Name**, **Email**, **Identifier**, or **Username.**
2. Enter all or part of the text for which you want to search.

   Tip: *In the **Look for** text field, you can use an asterisk (*) as a wild-card character. For example, if you do not know the exact last name of a provider but you know the name ends in the letters MAN, type ***man** and click **Search**.*

3. Click **Search**. Any users who meet your criteria appear in the list.
4. Click **Reset** to return all search fields (**Site**, **Authorization**, **Status**, and **Look for**) to their defaults.

Using the Results Area to View or Modify an Existing User

After you perform a search, the results appear below the search criteria.



To view the details of an account, click the user's name in the **Account** column. The user's information appears in the right side of the window.

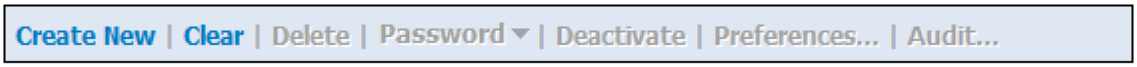
Account Icons

The icons to the left of the account name identify whether an account *has* administrative rights (red icon) or *does not have* administrative rights (blue icon). A red circle with a white dash on an icon indicates an *inactive* account. For information on deactivating an account, refer to page 174.

Option Tabs for Users

Just above the user information portion of the window is a group of tabs that allow you to modify an existing user, or create a new user. These tabs are slightly different depending upon which of these two tasks you intend to perform.

Creating a New User



- **Create New**: Click this link after you've finished entering the information for a new user. (When the window refreshes, this tab becomes the **Save Changes** tab. In addition, the other dimmed tabs become active.)
- **Clear**: Removes the contents of the user information area. This link does *not* delete a user. It simply removes the information you've typed and allows you to begin again.

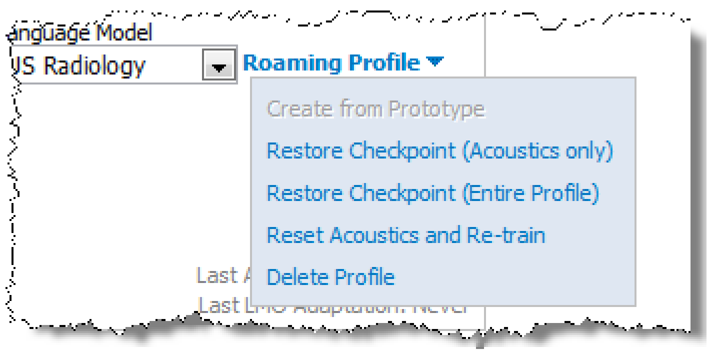
Modifying an Existing User

- **Save Changes**: Click this link after you've made changes to the user.
- **Clear**: Removes the contents of the user information area. This link does *not* delete a user. It simply removes the information you've typed and allows you to begin again.
- **Delete**: Deletes a user from the system. A dialog box containing the following text opens: **Deleting this account will cause all its data, including its speech profile to be lost. Are you sure you want to continue?** You can click either **OK** or **Cancel**.
- **Password**: Allows you to change or force a reset of the user's password.
- **Deactivate**: Deactivates the user's account. When clicked, this button changes to **Activate**, allowing you to reactivate the account if you choose to do so. Use **Deactivate** as an alternative to **Delete** to simplify system maintenance and preserve data integrity.
- **Preferences**: Opens the **Account Preferences** dialog box. (See *Configuring Account Preferences*, beginning on page 143.)
- **Audit**: Opens the **Account Events** dialog box. From here you can view and print information about a user's activities in the system. Refer to *Auditing User Activity*, beginning on page 168.

Managing Speech Profiles

As administrator, you can use the **Roaming Profile** menu to:

- Create a roaming profile for a user from a prototype, if one exists in your system.
- Restore a user's entire speech profile from a backup, or restore only the acoustic portion of the profile.
- Reset the user's acoustic model and begin training again.
- Delete a roaming profile.



Creating a Roaming Profile

You can assign a 'dummy' *Dragon* profile to a user who does not use speech recognition; with this profile, the user does not have to go through speech training on application startup. A prototype (trained) profile must exist in the Administrator Portal for this option to be available; this profile is put in place by Nuance personnel during system installation. (The folder where the prototype profile is located is: **[DragonUserDirectory]\PS360_TrainedProfile**.)

Note: *You do not need to perform this procedure for transcriptionist/editor users; the 'Transcriptionist' language model is assigned to them by default at initial login.*

To create a roaming profile:

1. Find the user account in which you want to create the profile.
2. Float your mouse cursor over the **Roaming Profile** link.
3. Select **Create from Prototype**. The profile is created in the user account.

Restoring a Profile

As administrator, you can overwrite a user's current roaming speech profile with the last profile backup, or checkpoint.

Every time a user performs training, or selects the **Checkpoint Speech Files** option from *PowerScribe 360 Reporting* client application's **Speech** menu, the software makes a backup of his or her speech profile. The system keeps only the most recent backup. If necessary, you can restore the entire speech profile from the backup. Or, you can restore only the acoustic portion of the profile; use this option when you want to retain any vocabulary changes the user has made in the profile.

To restore the entire speech profile:

1. Find the user account in which you want to restore the speech profile.
2. Float your mouse cursor over the **Roaming Profile** link.
3. Select **Restore Checkpoint (Entire Profile)**.
4. Click **OK** at the confirmation message. The profile is restored.

To restore only the acoustic portion of the profile:

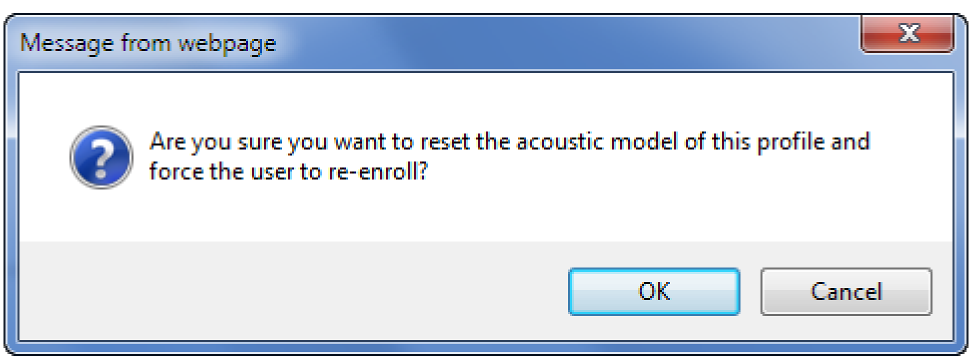
1. Find the user account in which you want to restore the speech profile.
2. Float your mouse cursor over the **Roaming Profile** link.
3. Select **Restore Checkpoint (Acoustics Only)**.
4. Click **OK** at the confirmation message. The acoustic portion of the profile is restored.

Resetting the Acoustic Model

As administrator, you can reset a given user's acoustic model, while keeping intact any added, trained, or disabled words. You might take this action when there are enough recognition issues to warrant the user's restarting the training process from scratch, but you want to retain any vocabulary changes the user has made.

To reset a user's acoustic model:

1. Find the user account in which you want to reset the acoustic model.
2. Float your mouse cursor over the **Roaming Profile** link.
3. Select **Reset Acoustics and Re-Train**. A confirmation message appears.



4. Click **OK**. The user is prompted to begin training again at the next login.

Deleting a Speech Profile

You might need to delete a user's speech profile if you want her to re-train without saving any added or trained words. If you use this option, the user is warned at the next login that a new profile will be generated, and will have to re-enroll.

To delete a speech profile:

1. Find the user account whose speech profile you want to delete.
2. Float your mouse cursor over the **Roaming Profile** link.
3. Select **Delete Profile**. A confirmation message appears.
4. Click **OK** to delete the profile.

Chapter 7

Profiles and Vocabulary Management

Objectives

In this chapter, you will:

- Configure speech options
- Manage words in the system-wide vocabulary

Speech Configuration Options

Overview of Speech Recognition

Speech recognition is a technology that interprets human speech patterns and converts them accurately into written text. The speech recognition process uses these files:

- The acoustic model (AM) represents how patterns of individual sounds are likely to occur in speech for an individual provider.
- The language model (LM) represents the words providers are likely to say, how those words are pronounced, and how they are used.

Tip: *To increase accuracy for a user with a very strong accent, you can assign an accented acoustic model, preferably before the user trains. The appropriate accented model can help such users achieve better speech recognition. Models are now available for a variety of accents. Refer to page 119 for information on assigning an acoustic model to a user.*

Acoustic Optimization (ACO) is the process in which the system learns how the provider pronounces various sounds and modifies the provider's acoustic model to increase recognition accuracy. It compares the dictation to the corrected speech-recognized text to improve overall speech recognition.

Language Model Optimization (LMO) is the process in which the system analyzes signed reports, extracts words, and adds them to the language model. It improves speech recognition by identifying the words a provider says frequently.

What Qualifies a Report to Be Used for ACO?

All final reports with 30 seconds or more of audio will be used with the following exceptions:

- Specific words or phrases modified via keyboard correction are ignored.
- Specific words or phrases that are dictated over are ignored.
- Words or phrases entered or changed by a user other than the final author are ignored.

What Qualifies a Report to Be Used for LMO?

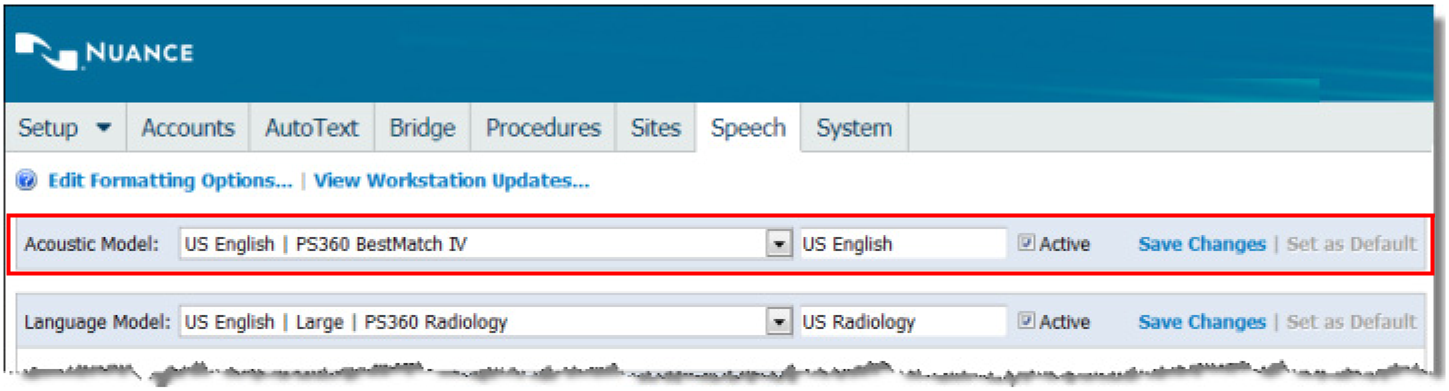
- Any final report with over 100 characters of text will be processed.

Assigning a System-Wide Acoustic Model

The system-wide acoustic model is the default for all sites and providers. You can override the default for a particular provider by assigning an acoustic model to the provider's account. Changing the system-wide acoustic model affects only users added to the system after the change. Jobs with multiple contributors, that is, jobs containing dictation by more than one provider, are not included in the acoustic optimization or language model optimization processes.

To assign a system-wide acoustic model:

1. In the **Setup** group, select the **Speech** tab.
2. From the **Acoustic Model** drop-down list, select the appropriate acoustic model for the system.



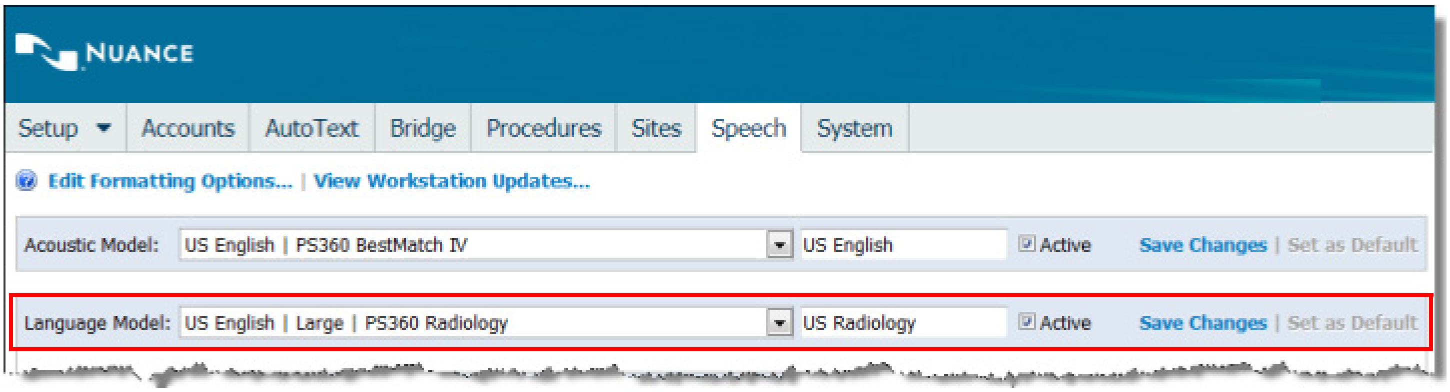
3. Click **Set as Default**.
4. Click **Save Changes**.

Assigning a System-Wide Language Model

The system-wide language model is the default for all sites and providers. You can override the default for a particular provider by assigning a language model to the provider's account. Changing the system-wide language model affects only users added to the system after the change. Jobs with multiple contributors, that is, jobs containing dictation by more than one provider, are not included in the acoustic adaptation or language model adaptation processes.

To assign a system-wide language model:

1. In the **Setup** group, select the **Speech** tab.
2. From the **Language Model** drop-down list, select the appropriate language model for the system.



3. Click **Set as Default**.
4. Click **Save Changes**.

ACO and LMO Intervals

ACO and LMO run at the intervals you specify. You can set the intervals for the entire system and for individual users.

The current recommendations for ACO and LMO are as follows:

- **ACO**: At the system level, schedule the process to run weekly.

  Note: *Some users who dictate more than they use AutoText might need to be set to run ACO more often; for example, every two days.*

- **LMO**: At the system level, schedule the process to run daily. This job runs very quickly and does not consume many system resources.

Scheduling ACO and LMO

Set the schedule for the entire system. Later, you can change the schedule for individual providers.

To schedule ACO and LMO for the system:

1. In the **Setup** group, select the **System** tab.
2. Click **Preferences**, and then select the **ACO/LMO** tab.
3. Set the **Dragon LMO Interval** to **Every day**. This should not be changed or disabled.
4. Set the **Dragon ACO Interval** to your preferred interval. The recommended setting is **Weekly**.
5. Click **Save and Close**.

To schedule ACO and LMO for an individual provider:

1. In the **Setup** group, select the **Accounts** tab.
2. Select the provider whose optimization schedule you want to modify.
3. Click **Preferences**, and then select the **ACO/LMO** tab.
4. Set the **Dragon LMO Interval** to your preferred interval. It is recommended that you leave this setting at **Every day**.
5. Set the **Dragon ACO Interval** to your preferred interval.
6. Click **Save and Close**.

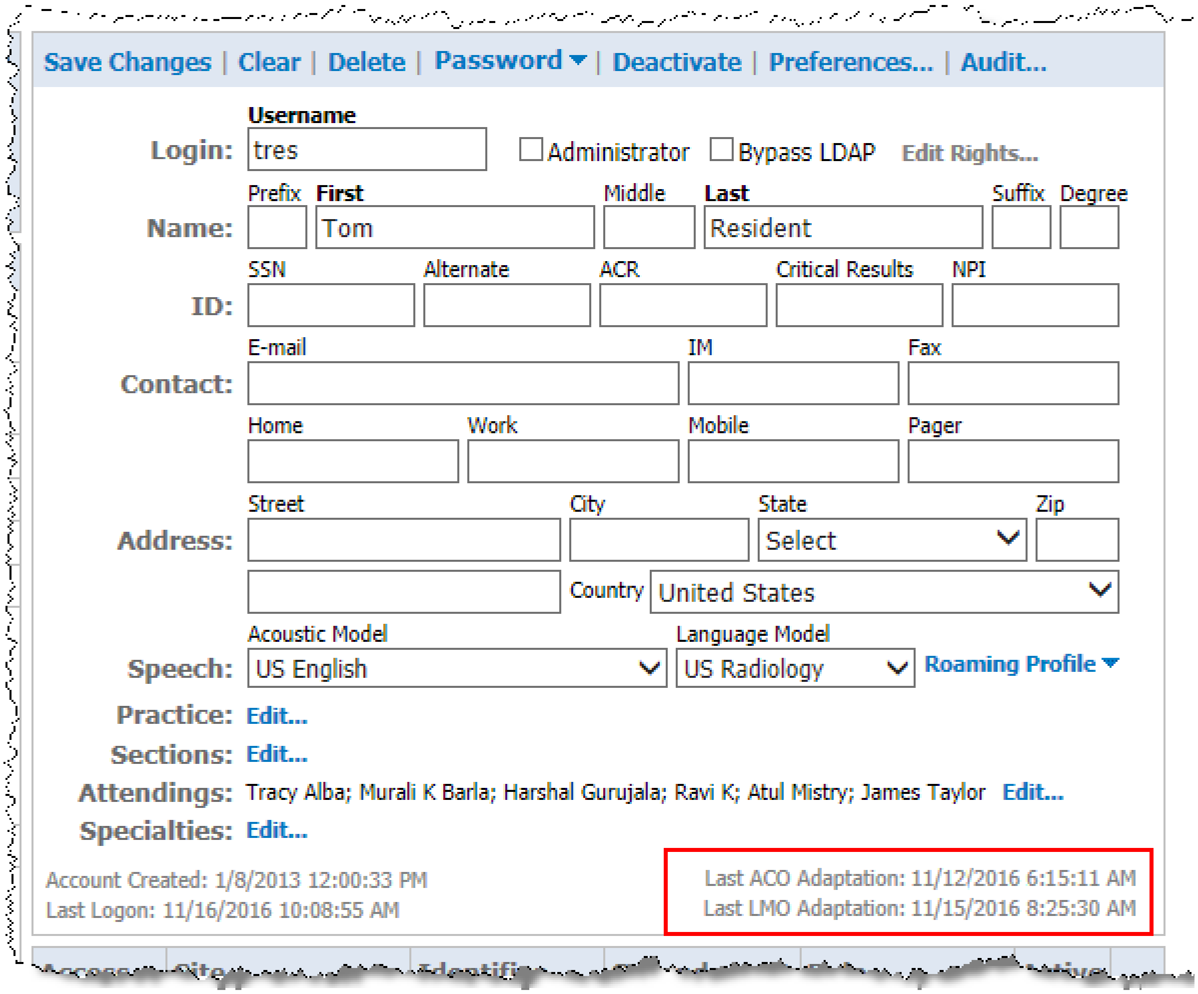
Monitoring ACO and LMO Activity

If a dictator complains about recognition, you can monitor ACO and LMO by viewing the dictators profile.

To view a user's LMO and ACO activity:

1. In the **Setup** group, select the **Accounts** tab.
2. Select the provider whose LMO and ACO activity you want to view.

3. Look at the lower-right portion of the user's profile screen. You can see the last time a user went through ACO/LMO.



Note: *Depending on the user's dictation style (they do not add words, or add spoken / trained forms of words), they may not run ACO and /or LMO regularly.*

If you are concerned about ACO for a user, you can force ACO to run to confirm that there is no technical issue, using the following steps:

1. Open the user's vocabulary editor.
2. Search for the word **tomato** (you can use any other word you wish).
3. If there are multiple entries for the same word or phrase, delete any additional entries that have been added, which can be identified by a plus sign + next to them.
4. Select the word **tomato** from the vocabulary and add a spoken form for the word. A spoken form is how the word sounds when the user speaks it. (For example, **tomato** can be **"ta mate oh"** or **"to mot oh"** depending on the speakers accent.)
5. Click the **Train** button and have the user speak the word (usually twice) until the little LED flashes green.

6. Click **OK** to close the vocabulary editor.
7. Check the user's profile in 24 hours to verify if ACO has run.

Note: *If you have a concern about a user who is not running ACO or LMO, contact your system administrator or open a ticket with Nuance support.*

Vocabulary Management

Adding custom words to your language models can improve speech recognition. Custom words might include place names, or the names of drugs or persons. For example, if a new drug comes on the market, you can add the drug name to all the language models in your system. Adding words at the system level eliminates the need for providers to add the words themselves.

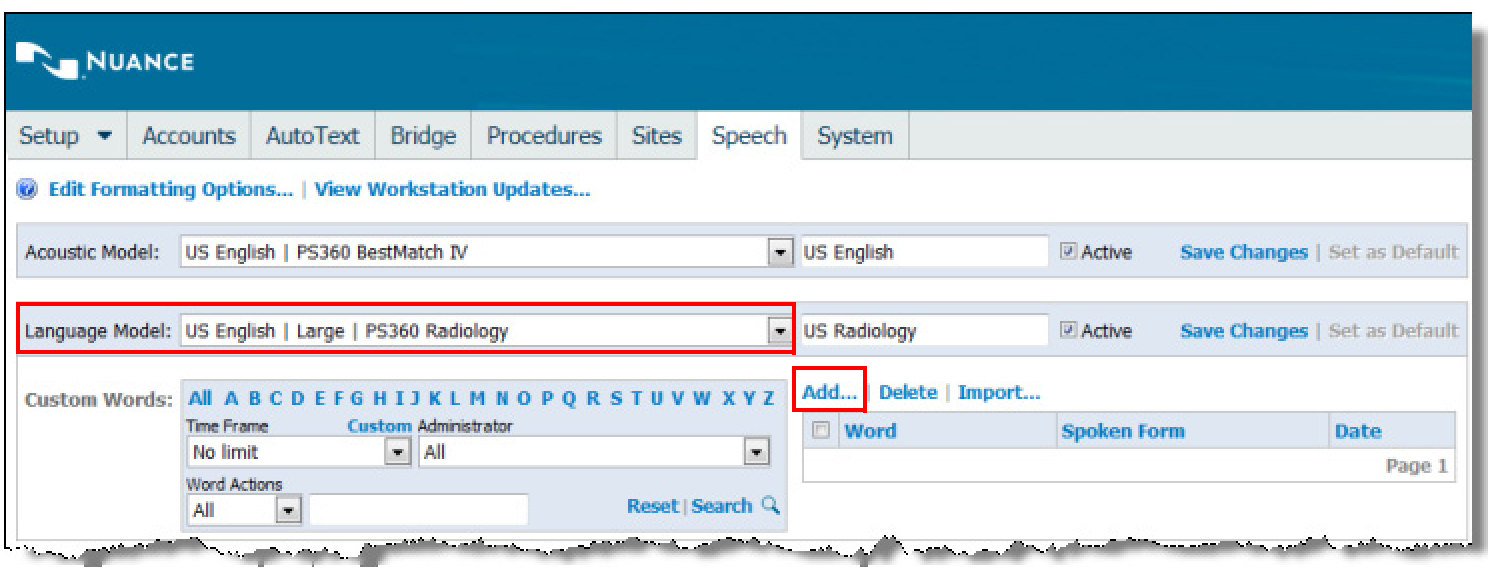
You can add individual custom words or import a list of words from a file. Importing words saves time when you have many words to import, or when you need to add the same words to more than one language model. You can also delete one or more words. Adding or deleting words from one language model does not affect the others.

Adding Custom Words

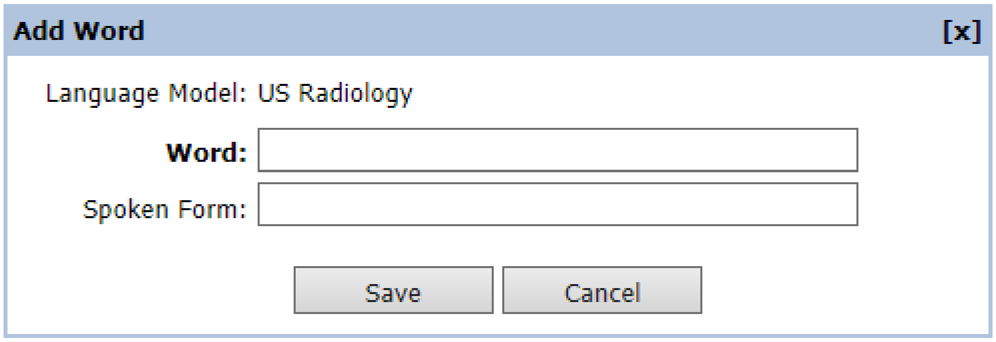
Follow the procedure below to add one or more words to a language model.

To add custom words:

1. In the **Setup** group, select the **Speech** tab.
2. Select the language model to which you want to add the word(s).
3. Click **Add**.

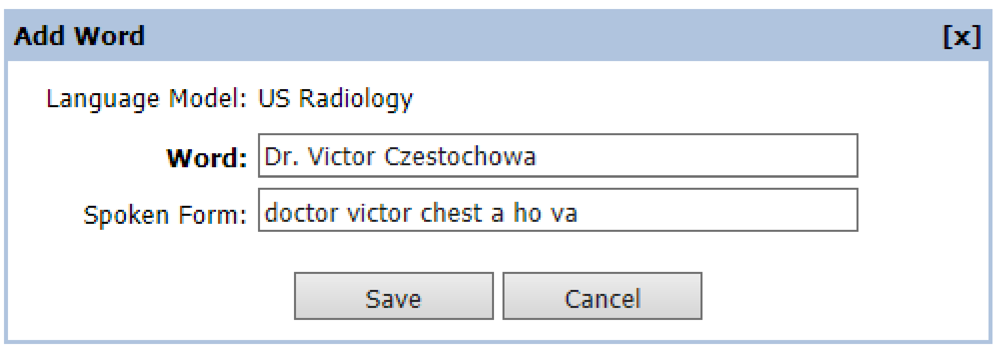


The **Add Word** dialog box opens.



4. In the **Word** field, type the word or phrase you want to add.
5. If desired, spell the word phonetically in the **Spoken Form** field. That is, spell the word the way it sounds. This helps the speech software to recognize the word when it is dictated. You might want to provide a spoken form for a word that is frequently being mis-recognized, or for a name with an uncommon spelling.

   Note: *The combined length of the* ***Word*** *and* ***Spoken Form*** *fields cannot exceed 127 characters.*



6. Click **Save**. The word or phrase is saved in the selected language model, and appears in the list along with the date and time it was added.

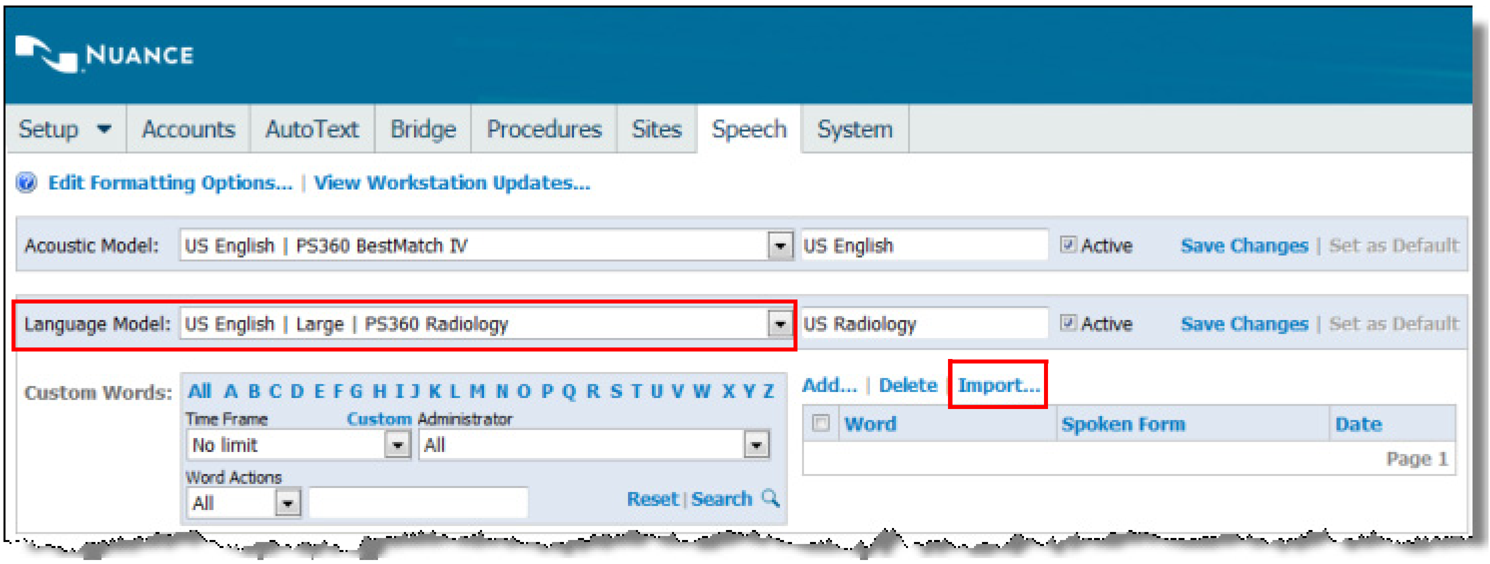
Importing Custom Words

You can import custom words from a text file. Use one word per line; use a back slash to separate a word from its optional spoken form. You can specify more than one spoken form for a word. For example:

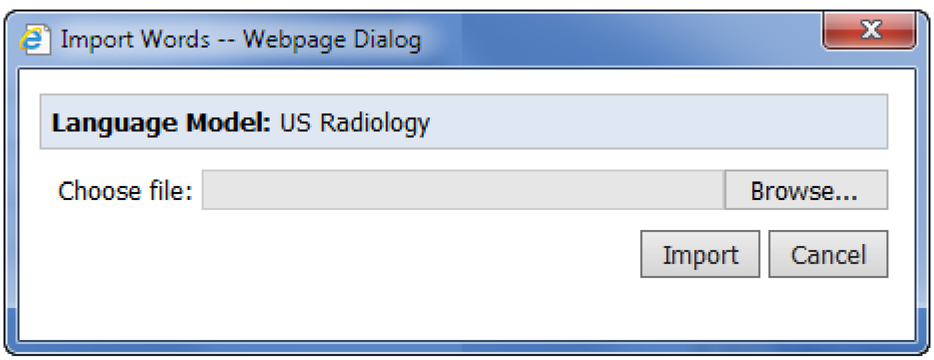
```
Epstein-Barr
cirrhosis
Dr. Hannah Wagner\doctor hannah vog ner
Dr. Joseph Gneirig\doctor joseph ny rig
Dr. Joseph Gneirig\doctor joseph nigh rick
```

To import words:

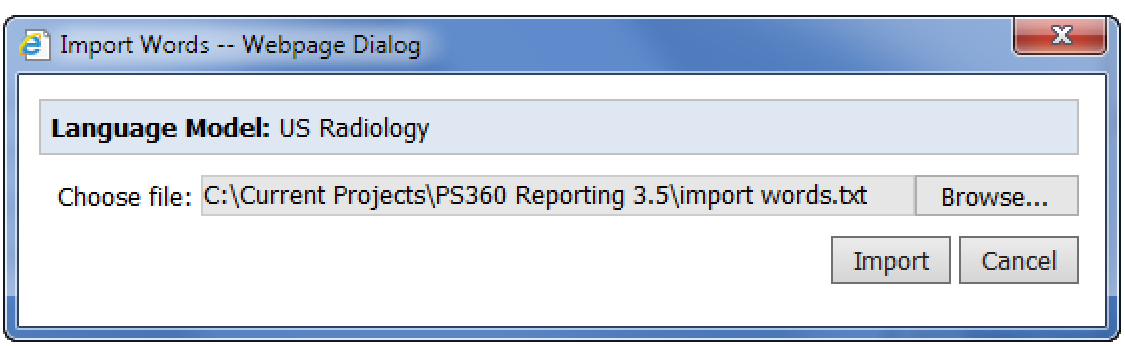
1. In the **Setup** group, select the **Speech** tab.
2. Select the language model into which you want to import the words.
3. Click **Import**.



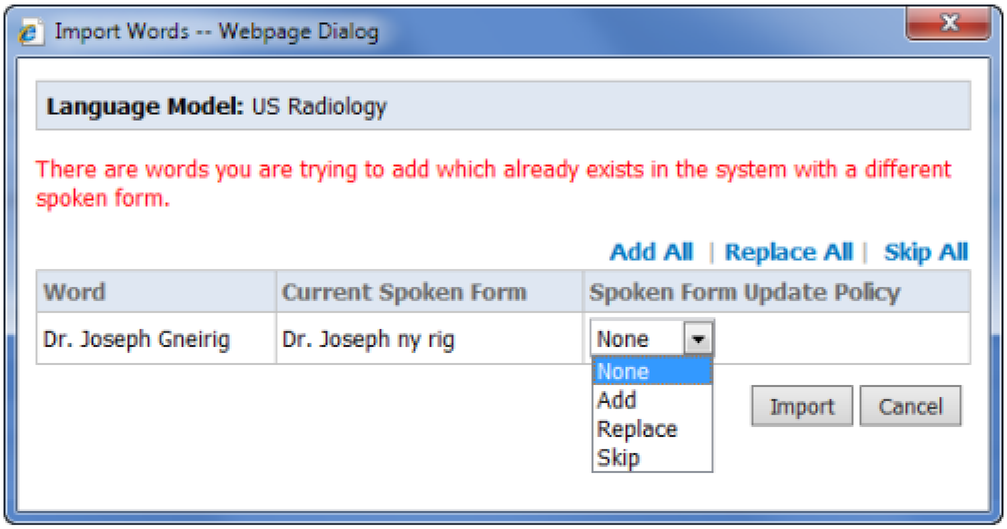
The **Import Words** dialog box opens.



4. Click **Browse**.
5. Navigate to and select the file you want to import.
6. Click **Open**. The file name and path appear in the **Choose file** field.



7. Click **Import**.
8. If you attempt to import a spoken form for a word that is already in the system with another spoken form, you see a warning message.



a. Select an option:

- **None**: Do not add the new spoken form.
- **Add**: Add the new spoken form.
- **Replace**: Discard the existing spoken form, and add the new one in its place.
- **Skip**: Do not add the word.

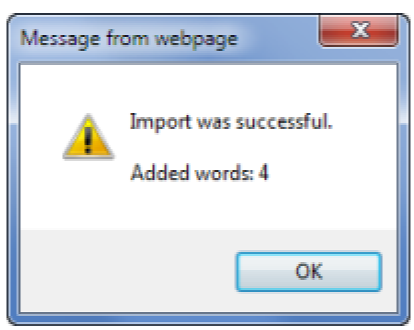
b. Click **Import** to continue

OR

Click **Add All**, **Replace All**, or **Skip All**.

The words in the file are imported into the selected language model, and appear in the list. Any words already in the language model are skipped, unless you are adding a new spoken form.

A message box indicates the number of words added and skipped.



Searching for Words

Follow the procedure below to search for a custom word in a language model.

To search for a word:

1. In the **Setup** group, select the **Speech** tab.
2. Select the language model.
3. To see all the words in the selected language model, click **All**.

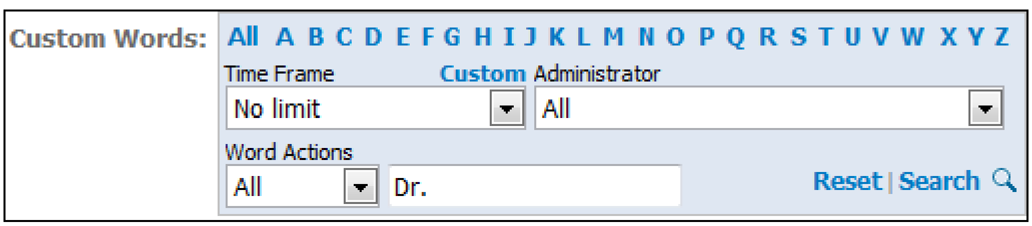
   OR

   Select a letter in the alphabet to see words beginning with that letter.

   OR

   Use any of the search criteria to find the word:

   - In the field to the right of **Word Actions**, type all or part of the word or its phonetic spelling.
   - From the **Time Frame** field, select the period of time in which the word was added, if you know it. Or, click **Custom** and enter a specific date range.
   - If you know which administrator acted on the word, select the **Administrator** from the drop-down list.
   - From the **Word Actions** drop-down list, select **All** to see all words, select **Additions** to see words that were added, or select **Deletions** to see words that were deleted.

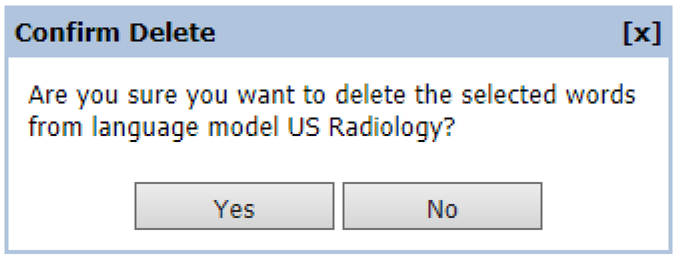


4. Click **Search**. Any words that meet your criteria appear in the list at the right. You can click on the **Word**, **Spoken Form**, or **Date** heading to sort the list by the selected column; click the column heading again to reverse the sort order.

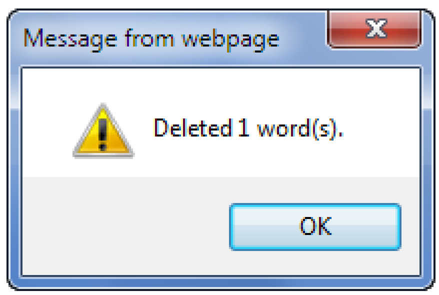
Deleting Words

To delete one or more words:

1. In the **Setup** group, select the **Speech** tab.
2. Find the word you want to delete, using the procedure above.
3. Place a check mark next to the word(s) you want to delete.
4. Click **Delete**. A confirmation message appears.



5. Click **Yes** to remove the word from the selected language model. A message indicates the number of words deleted.



6. Click **OK**. The word is removed from the language model, and appears crossed out in the list.

Chapter 8

Working with Procedure Codes

Objectives

In this chapter, you will:

- Define the purpose of Procedure Master Translators (formerly known as ChargeMasters)
- Illustrate the importance of mapping procedure codes to modality and body regions.
- Create a Procedure Master Translator
- Define the required formatting elements for the Procedure Master Translator
- Tell why it's required to send your copy of the Procedure Master Translator to Nuance for review
- Demonstrate importing a Procedure Master Translator
- Demonstrate making changes to your imported Procedure Master Translator

Introduction to Procedure Master Translators

In this chapter we will examine what Procedure Master Translators, or PMT (formerly known as ChargeMasters) are used for in *PowerScribe 360 Reporting*.

Your *PowerScribe 360 Reporting* system uses imported procedure codes, along with modality and anatomy (also referred to as *body region*) mapping information in many areas. For example:

- In the **AutoText Categories** dialog box, where you assign procedure codes to an AutoText entry, you search for procedure codes by modality and anatomy. The mapped data causes the codes to appear correctly in the **Procedures** list for the data you choose here.
- Browse functions when logged into the client. Categories include Modality, Body Region and Sections (which are your modalities in the system).
- You can create Worklists to pull specific search criteria including: modality, body region, and or specific procedure codes. For example, a worklist could include a request to "show me all CT scans of the brain."
- When you set up peer review (purchasable option), you select the modalities and intervals for the peer review process. The code and mapping data causes the modalities to appear correctly in the list.
- When you create custom fields, you need to associate the fields with the appropriate procedure codes where applicable. In the **Procedure Code** selection dialog box, the correct display of codes, modalities, and anatomies depends on the procedure code data you imported and mapped.

Note: *Your organization is responsible for ensuring that the modalities and anatomies are mapped correctly in PowerScribe 360 Reporting.*

About the PowerScribe 360 Reporting Database

The purpose of the PMT is to map your institution's procedures and descriptions to the Nuance terms for modality and anatomy.

When your system is installed, modalities and anatomies (pre-determined by Nuance) already exist in the database. Sections should accurately depict what your organization uses for modalities. The Nuance modalities will always be used to determine AutoText mappings and peer review mappings. You can, however, use sections in worklists or to run a query.

Create a Procedure Master Translator

Use the information in this section to provide your Nuance representative with an Excel worksheet that will act as your Procedure Master Translator.

***Tip:** If you attended a PowerScribe 360 Reporting administrator training class you received an Excel worksheet template that you should use as a starting point.*

Your Procedure Master Translator must include the following columns (the first two columns typically come from the billing system or RIS/HIS):

- **Procedure Code**: A ***unique*** identifier of the exam (procedure codes cannot be duplicated in *PowerScribe 360 Reporting*). Also referred to as catalog codes, exam codes, charge codes, or mnemonics. The procedure code information is obtained by analyzing your HL7 message when an order is generated. Determine what the code is and find the source of these codes. Any actively dictated code must be included in this file.
- **Procedure Description**: The description that is listed on the order for the procedure code. This field is limited to 100 characters.
- **Category Modality**: Type of equipment used to conduct the study. (Refer to *Modality and Anatomy Tables*, **beginning on page 615** of this document.)
- **Category Anatomy**: Name of the body region involved in the study. Use the most specific appropriate term here. (Refer to *Modality and Anatomy Tables*, beginning on page 615 of this document.) If more than one body region is involved, enter each region separated by a comma.
- **Section Name**: The name your facility uses to describe a modality. Often refers to how your facility's dictation responsibilities are divided. For example, CT, MR, Neuro, MSK, Peds. In many cases this name could be a department name in your facility. For example, the *PowerScribe 360 Reporting* system uses **Radiography** for x-rays; your system might use **CR**.
- **Bilateral**: When the body region is inherently bilateral, and the image always shows both the left and right sides, enter **Yes**. For Quality Check users, a yes in this field prevents the laterality mismatch alert from appearing when a report contains both **"left"** and **"right"** dictation.
- **Mammo**: If the procedure is a mammography exam ***that will use BI-RADS codes***, enter **Yes**. Otherwise leave this field blank.
- **Clinical/CPT Code**: The clinical codes that might already be used in your billing system. If possible, retrieve an export of those codes.

The illustration below shows an example of what your PMT worksheet should look like.

Note: *Row 2 of the worksheet template provided to you by Nuance contains a description of the content expected in each column. After completing the worksheet,* ***delete row 2 before saving****.*

	A	B	C	D	E	F	G	H
1	Procedure Code	Procedure Description	Category Modality	Category Anatomy	Section Name	Bilateral	Mammo	Clinical/CPT Code
2	*This is obtained from analysing your HL7 message when an order is generated. Determine what the code is and find the source of these codes. Any actively dictated code needs to be included in this file.*	*This describes what the Procedure Code represents. There is a 100 character limit for this column.*	*Equipment used to conduct the study. Use the Modality and Anatomy document provided.*	*Body region involved in the study. If more than one, enter each separated by a comma or as a new line entry. Use the Modality and Anatomy document provided.*	*What area is responsible for dictating the exam? Neuro, MSK, Peds, etc. This frequently follows the Modality used.*	*When the body region is inherently bilateral, and the image always shows both the left and right sides, enter Yes.*	*Is the procedure a mammo-graphy based exam? If Yes, enter Yes. If not, leave it blank.*	*Standard CPT code. Usually obtained from your billing department.*
3	70450	CT HEAD/BRAIN W/O DY	CT	Head	CT			70450
4	70460	CT HEAD/BRAIN W/DYE	CT	Head	CT			70460
5	78815	PET IMAGE W/CT SKULL-	PET	Whole body	PET			78815
6	78816	PET IMAGE W/CT FULL B	PET	Whole body	PET			78816
7	557973	MM SCREENING MAMM	Mammography	Breast	MA		Yes	46650
8	557614	MM SCREENING MAMM	Mammography	Breast	MA		Yes	46650
9	451301	MR SACRUM WO CONT	MR	Lumbar Spine	MR			66123
10	451403	MR SOFT TISSUE NECK V	MR	Max-Face	MR			32112
11	457151	MR SOFT TISSUE NECK V	MR	Neck	MR			32113
12	2909146	US Scrotum (Contents)	US	Testis	US			76870
13	2909453	XR Femur Left	Radiography	Thigh	CR			73550
14	2909456	XR Femur Right	Radiography	Thigh	CR			73550
15	CXR2VPAL	Chest 2 View PA & Lat	Radiography	Chest	CR			71020
16	73521	XR Hip Bilateral	Radiography	Hip	CR	Yes		73521

Note: *If upgrading from version 2.0 or earlier, once your current database is copied over, Nuance can export the data so you do not have to start from scratch to create the PMT.*

Additional Information

You can include the following information (by creating additional columns in your Procedure Master Translator):

- Relative Value Units (RVUs)
- Diagnostic Codes (ICD-9 or ICD-10)

Assign RVUs

You have the option of assigning professional, technical and global RVUs to each of your procedure codes for display in the radiologist's dashboard.

Note: *If you decide to use RVUs, the Global RVU is a required item. You cannot use Prof and/or Tech without using Global.*

To assign RVUs:

- Add the columns **Prof RVU**, **Tech RVU** and **Glob RVU** to your Procedure Master Translator. Each value must be a decimal number with up to 3 places to the left and two places to the right of the decimal point.

Note: *Providers can see the quota values in the client application dashboard (if a quota is set in the administrator preferences).*

Diagnostic Codes

For information on adding diagnostic codes to your PMT, see *Map Procedure Codes to Diagnostic Codes*, beginning on page 630.

Check the PMT Worksheet Formatting

To ensure that your PMT worksheet will be imported properly, check the worksheet you created for the following formatting requirements before sending the PMT to Nuance for validation.

- Column headings must be in row 1 of the worksheet.
- Alphanumeric procedure codes should be entered first, followed by numeric-only codes.
- Separate multiple anatomy, section, and clinical code entries with a comma and a space. For example, **CT, Neuro** or **71245, 73550**.
- No special formatting is allowed, which includes cell colors, cell shading, or font colors.
- No apostrophes are allowed in the worksheet.
- No formulas are allowed in the worksheet, including drop-down lists. Remove any formulas from the worksheet.
- Place all of the procedure code information on a single worksheet. Do not create multiple worksheets in the Excel workbook.
- Save the worksheet as an .**xls** document, **not xlsx**. (In Excel, click **File > Save As** and select **Excel 97-2003 Workbook (*.xls)** from the **Save as type** list.)
- Name your worksheet as follows: <Hospital Name> - PS360 <Version> - PMT - <mm-dd-yyyy>.xls.

  Example: **PowerScribe Hospital - PS360 version 3.5 - PMT - 04-10-2016.xls**

Send the PMT Worksheet to Nuance

After completing your PMT worksheet and checking the formatting items listed above, email the worksheet to **diagnosticproservices@nuance.com** and **carbon copy your Nuance project manager**.

Once received, the Optimization Consultant (OC) team:

- Validates the modality and anatomy information to verify that it matches the *PowerScribe 360 Reporting* database terminology, and that the PMT contains all of the required information.
- Conducts a test import of the PMT that checks for errors and/or warnings.
- Returns a validated file to you, or requests additional information and modifications, or provides suggestions for improvement.

Importing the Procedure Master Translator

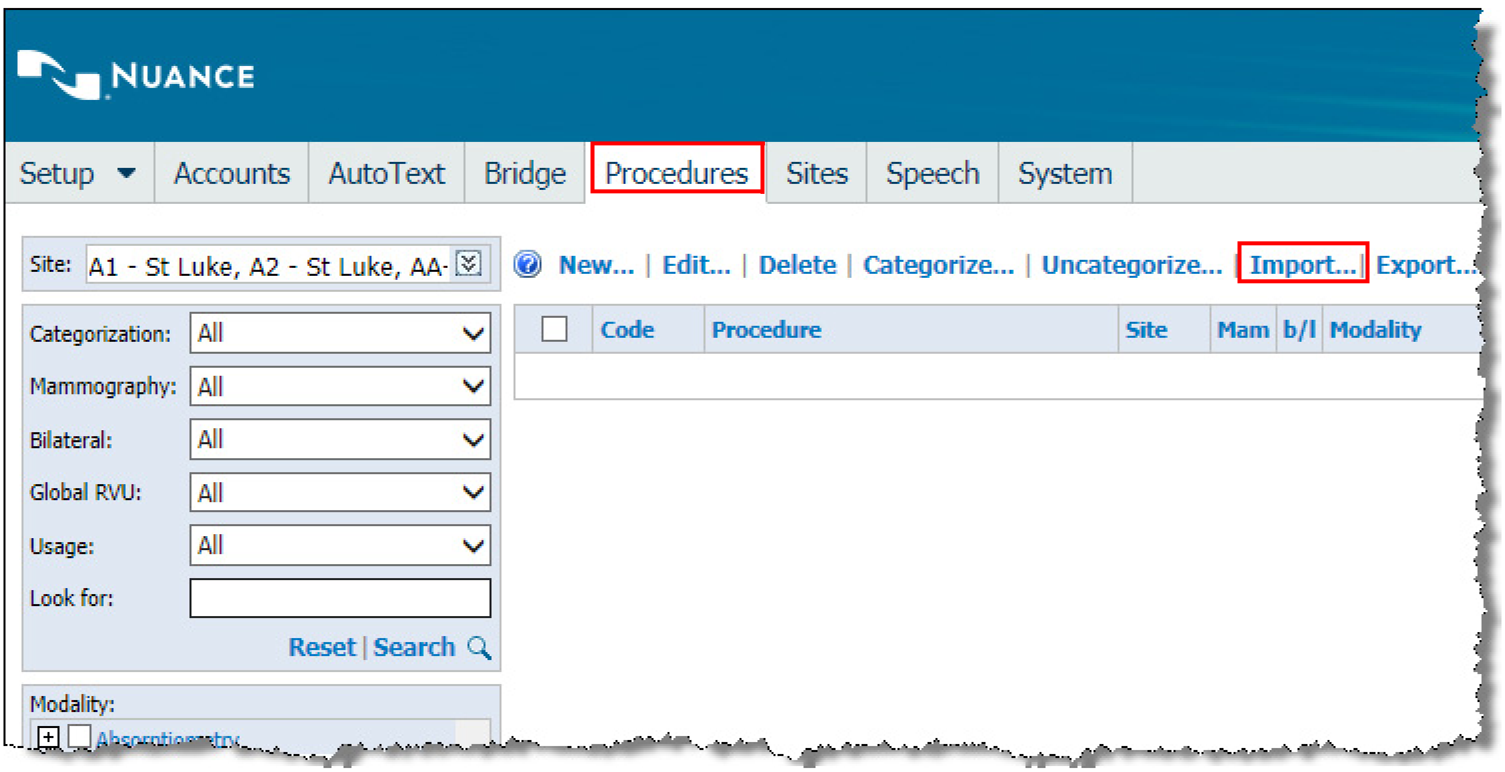
After creating your Procedure Master Translator, your Nuance Optimization Consultant must approve it and then guide you through the importing process. Schedule an appointment with your Nuance Project Manager to perform these two tasks.

Please do not import your initial Procedure Master Translator on your own. Your project manager will set up a call to work directly with a Nuance Optimization Consultant to ensure that the Procedure Master Translator is imported accurately.

The following directions are provided so that you understand the import process, especially for future importing of updated or new procedure codes.

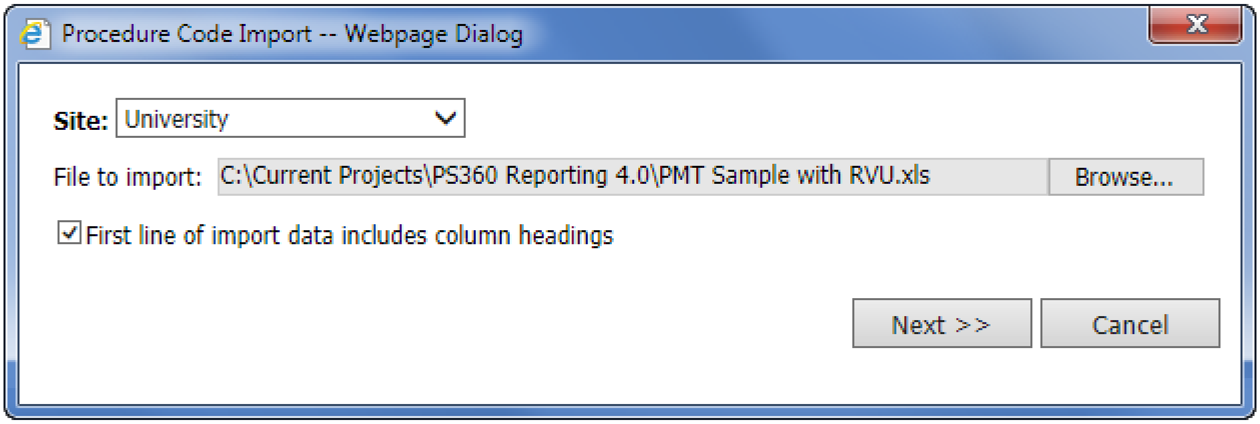
To import a Procedure Master Translator:

1. In the **Setup** group, click the **Procedures** tab.



2. Click the **Import** link. The **Procedure Code Import** dialog box opens.
3. Select the appropriate site from the **Site** drop-down list.

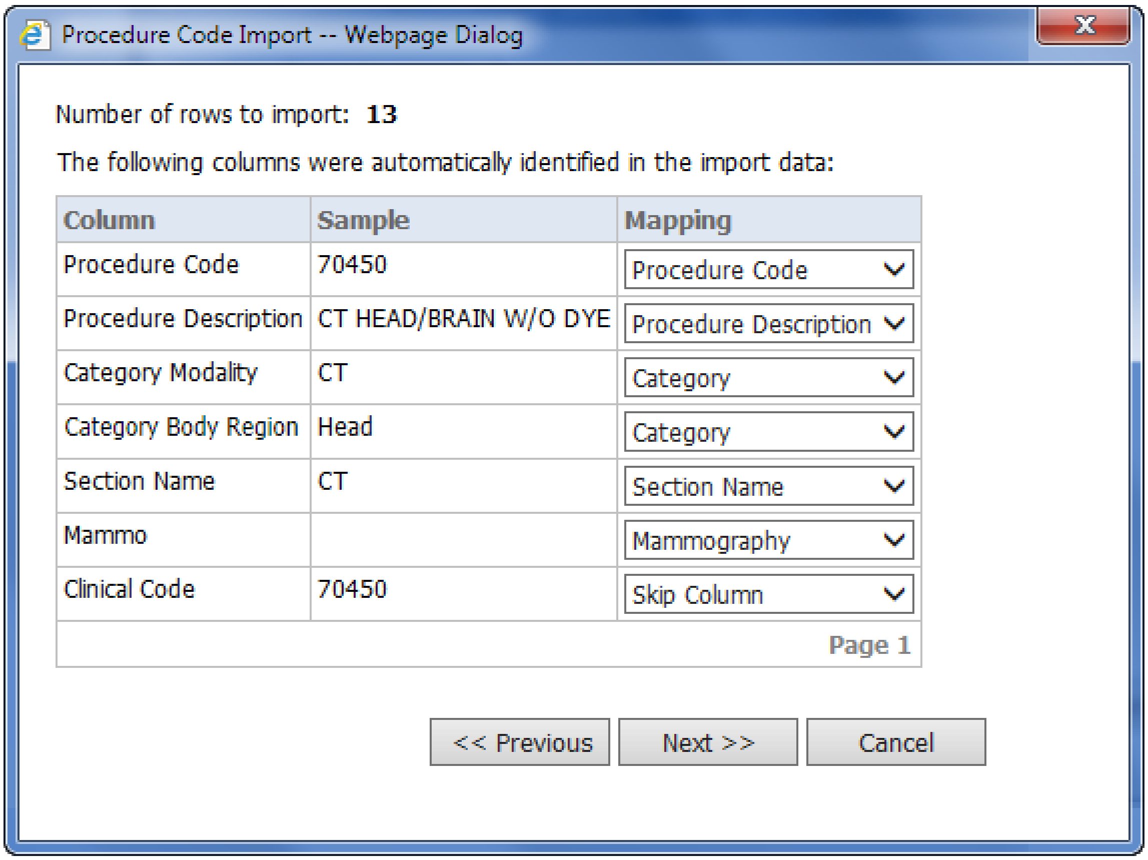
4. Click **Browse**. Navigate to and select the Procedure Master Translator file you want to import, and click **Open**. The path and file name appear in the **File to import** text box.



5. If your Procedure Master Translator file contains a heading row with column names, select the **First line of import data includes column headings** check box.
6. Click **Next** to continue. The dialog box displays:
   - The number of codes the software found in the Excel spreadsheet
   - The name of each column, along with a sample of that column's contents.

Note: *If your Procedure Master Translator has a heading row with column names, the software uses these names. Otherwise, it uses the Excel identifier for the column name; for example,* ***F6***

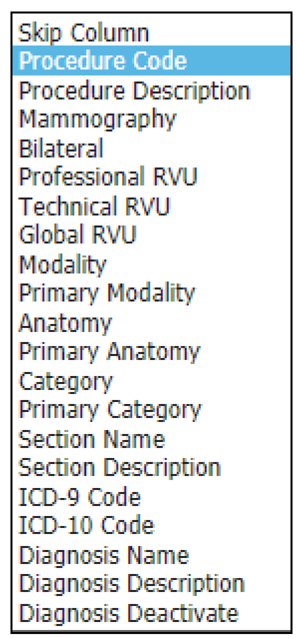
- A drop-down list where you will indicate how you want the software to map the contents of each column during the import.



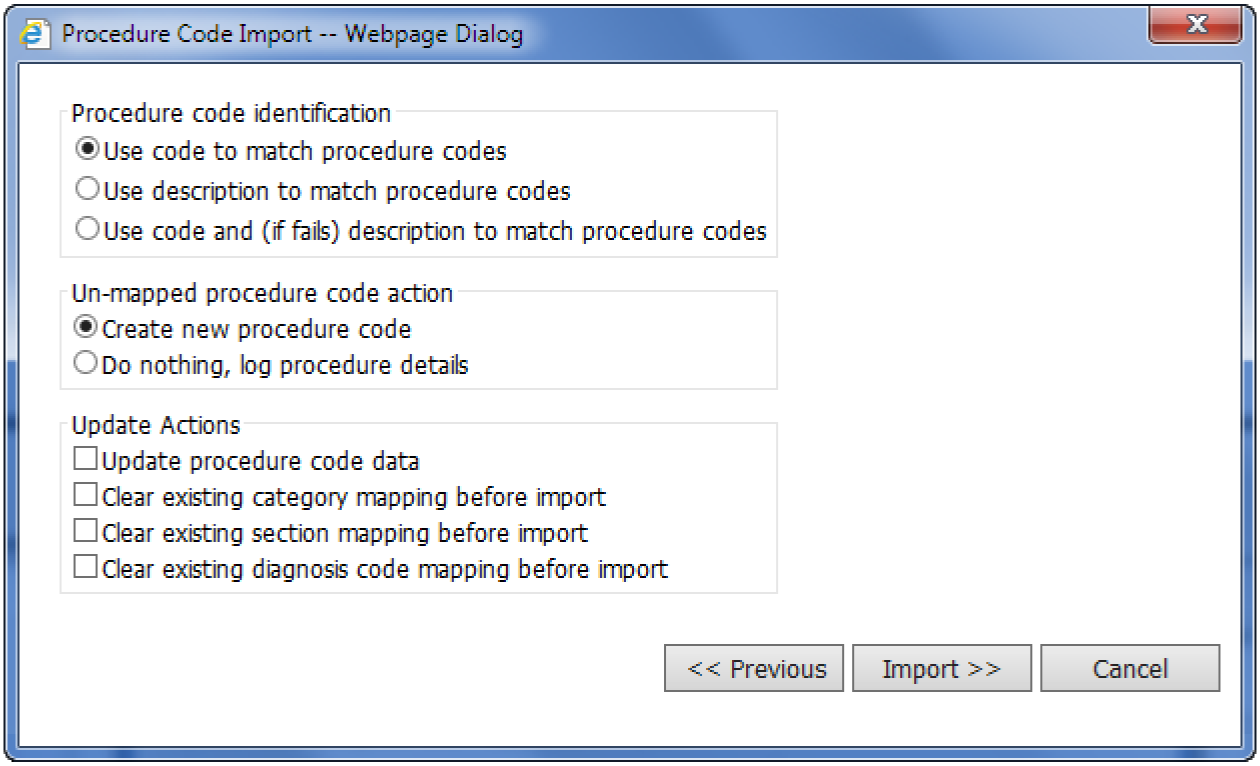
7. From each drop-down list in the **Mapping** column, select the name of the *PowerScribe 360 Reporting* database column to which the software is to map the corresponding Procedure Master Translator column. For any column in your Procedure Master Translator that is *not* to be processed, select **Skip Column**.

Note: *Somewhat counter-intuitively, both* ***Modality*** *and* ***Body Region*** *must be mapped to the* ***Category*** *selection in the drop-down list. In addition, for* ***Clinical Code*** *or* ***CPT Code****, select* ***Skip Column****.*

Mappings List



8. Click **Next**. This dialog box shows the default options you can use to control how the software handles the procedure codes you are importing.

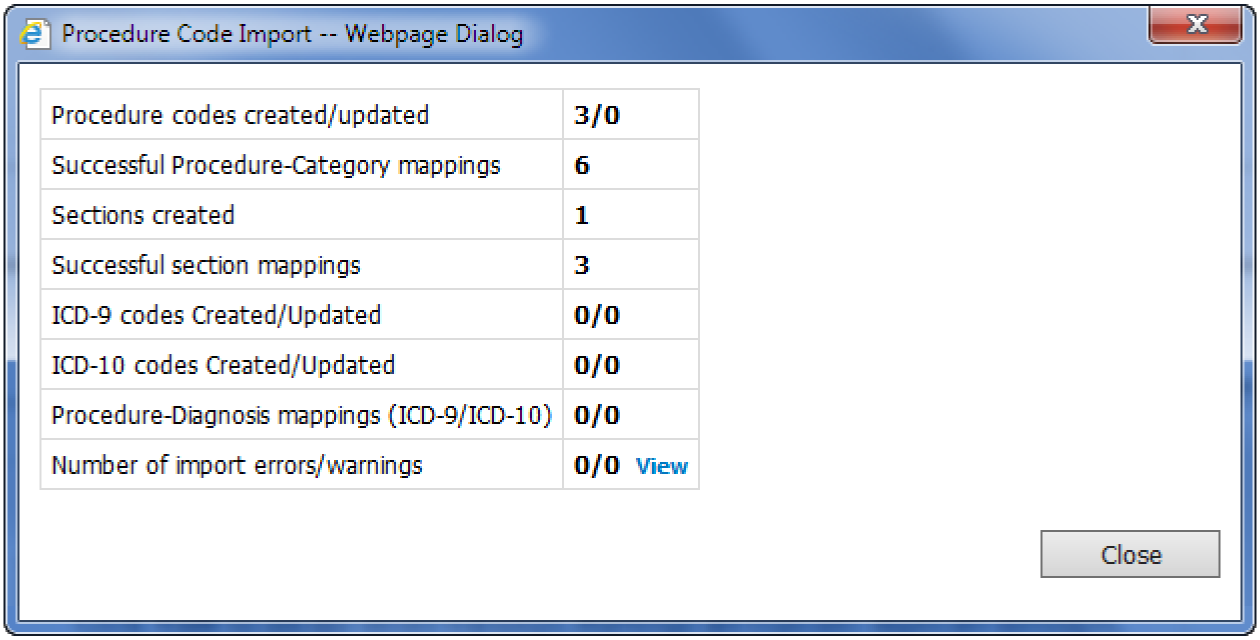


9. In the **Procedure code identification** section, select **Use code to match procedure codes**.
10. In the **Un-mapped procedure code action** section, select **Create new procedure code**.
11. In the **Update Actions** section, do not select any of the options for an initial import of your Procedure Master Translator.

    The table below explains the **Update Actions** options.

Update Action	Description
Update procedure code data	Updates only the description. It would not update the code; it would create a new entry.
Clear existing category mapping before import	Category mapping includes both the body region and modality mapping in the Nuance system.
Clear existing section mapping before import	Section mapping is cleared from procedure code to the section.
Clear existing diagnosis code mapping before import	Diagnosis coding mapping would be from procedure code to diagnostic code mapping.

12. Click **Import.** The system imports the data from your Procedure Master Translator into the database. When it has finished, it displays a report like this one:



The **Number of import errors/warnings** appears in the bottom row of the report. Click **View** to see the errors/warnings. *Warnings* are typically duplicate messages, meaning that the code or section was mapped previously, whereas an *error* truly is an error or something did not exist.

Note: *If you are unsure about the significance of an error or warning, contact your Nuance representative.*

13. Click **Close**.

Using Procedure Master Translators to Add or Modify Codes

In most cases you do not need to add individual procedure codes to your system because they are added automatically as new orders are received through HL7.

The following methods can be used to modify the procedure codes in the system.

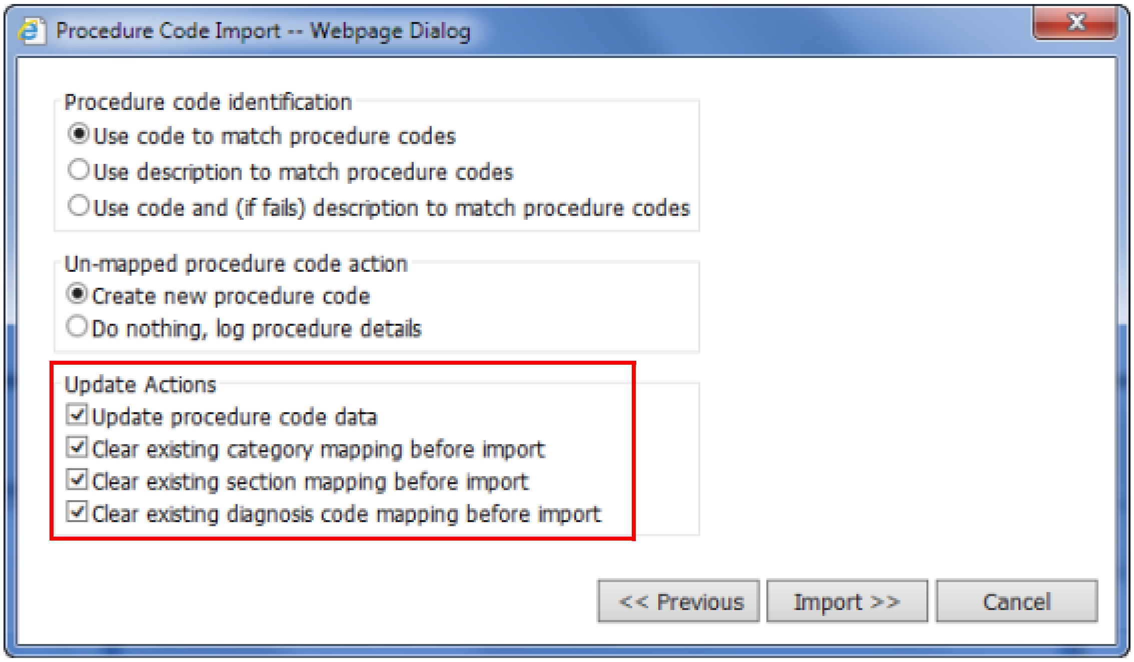
Best Practice Method: Modify and Rename Your Most Recent PMT Worksheet, then Re-Import

In order to maintain the integrity of your PMT worksheet, use the following steps when adding, removing, or changing information. Updating the most current worksheet using these steps ensures that you always have an up-to-date backup copy of your latest changes.

1. Using Excel, open the most recent copy of your PMT worksheet.
2. Enter your changes as required:
   - Add new procedure codes to the bottom of your existing list of codes.
   - Modify existing procedure codes as needed.
3. Use the **Save As** function in Excel to save your worksheet as described earlier in this chapter (in the *Check the PMT Worksheet Formatting*, beginning on page 195). By renaming your most recent copy (using the current date at the end of the name) and performing a **Save As**, you create a series of PMT worksheets that contain the changes you have made over time.

   Tip: *Using the current date is the key to the name change; the rest of the name can remain the same.*

4. From the *PowerScribe 360 Reporting* Administrator Portal, begin the import process of this newest version of the PMT using the steps shown in *Importing the Procedure Master Translator*, beginning on page 197 of this chapter. However, when you reach the **Update Actions** section, select all four of the check boxes as shown below.



Alternate Method: Manually Manipulate Procedure Codes

__Note:__ Although this method does allow you to manage procedure codes manually, it renders your most recent PMT Excel worksheet invalid, since you now have data in your system that is not in your PMT worksheet. As a best practice, Nuance recommends that you modify your PMT worksheet with your changes and re-import as described above.

Create Procedure Codes

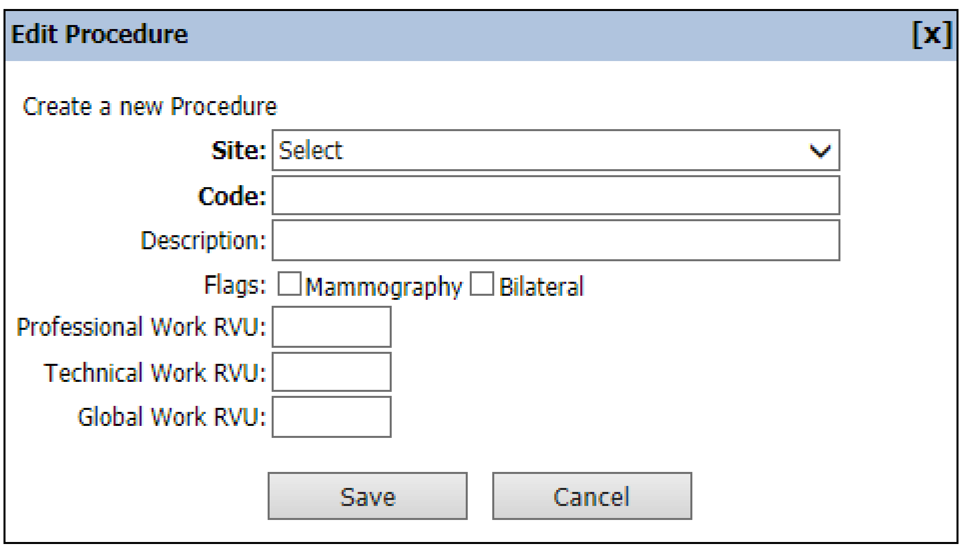
__Note:__ This method is rarely used because PowerScribe 360 Reporting automatically receives the procedure codes when the procedures are ordered (from within PowerScribe).

The steps below show the second method for adding or modifying procedure codes:

To create a procedure code:

1. In the **Setup** group, select the **Procedures** tab.
2. Click the **New** link. The **Edit Procedure** dialog box opens.

   __Note:__ Both the __Site__ and __Code__ fields are required (indicated by bold text titles).



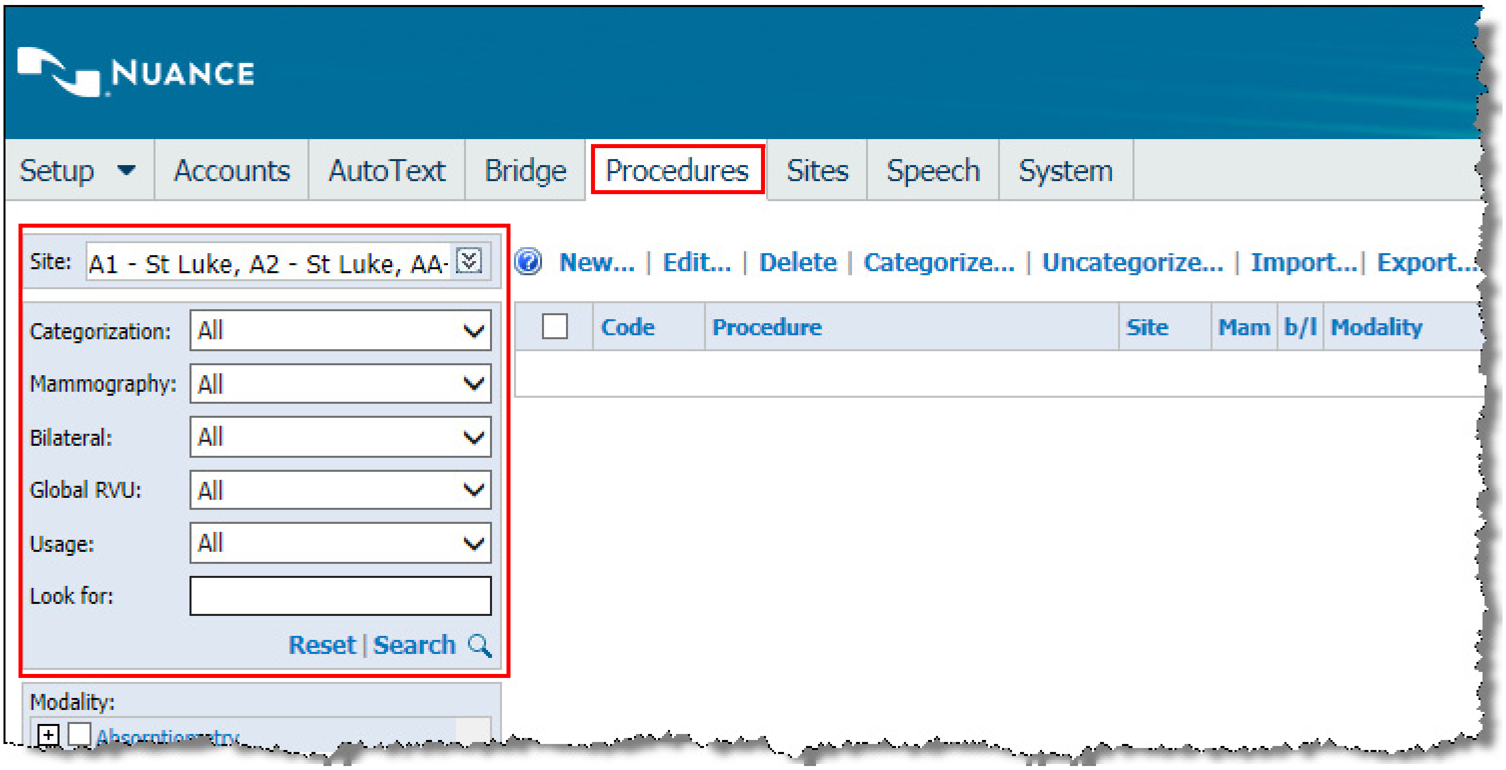
3. Select the appropriate site from the **Site** drop-down list.
4. In the **Code** field, enter the new procedure code.
5. Fill in the information for the remaining fields (Description, Mammography and Bilateral check boxes, and RVU information) if any are required for this site.
6. When finished, click **Save**.

Edit Procedure Codes

If there are changes to one of your facility's procedure codes, or to a small number of them, you can edit the codes manually in the *PowerScribe 360 Reporting* Administrator Portal rather than importing a Procedure Master Translator. For example, you might need to change the description associated with a single code.

To search fro a procedure code:

1. In the **Setup** group, select the **Procedures** tab.



2. Search for the code you want to edit. To narrow your results, use the search filters in the left portion of the window:
   - **Site**: From this drop-down list, select one or more sites.
   - **Categorization**: Choose **Uncategorized**, **No Modality**, **No Anatomy**, or **All**.
   - **Mammography**: Choose **Set**, **Not Set**, or **All**.
   - **Bilateral**: Choose **Set**, **Not Set**, or **All**.
   - **Global RVU**: Choose **Set**, **Not Set**, or **All**.
   - **Usage**: Choose **Never**, **At least once**, or **All**.
   - **Look for**: Type the first few letters of the procedure code, followed by an asterisk * (which acts as a wild-card character).

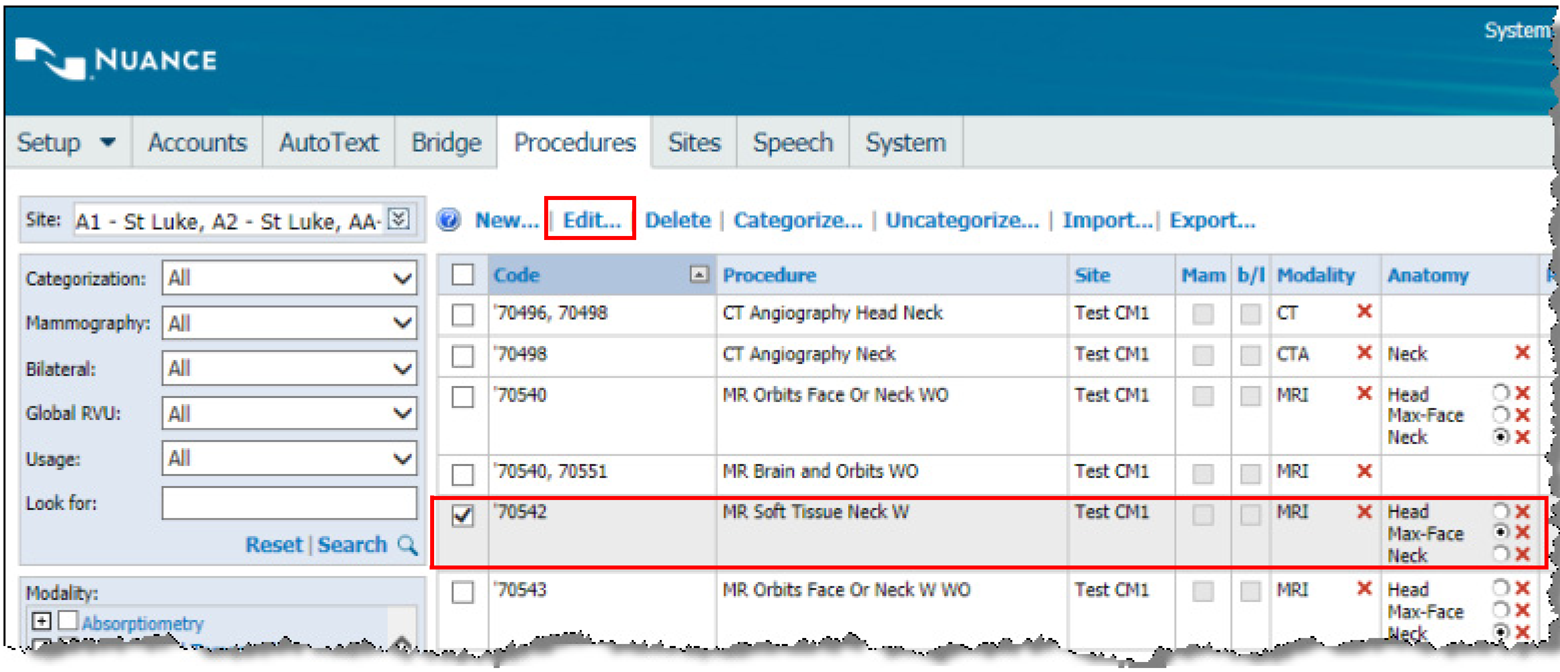
> ***Note:*** *These filters are* ***additive****, which means that if you select an item from more than one filter, both (or all) of the criteria will be considered, possibly reducing the number of results.*

- **Modality** and **Anatomy** lists: These two areas are separate from the filters mentioned above and have their own **Search** button. Make one or more selections to locate the procedure you want to edit. As shown in the note above, both these lists are additive as well.

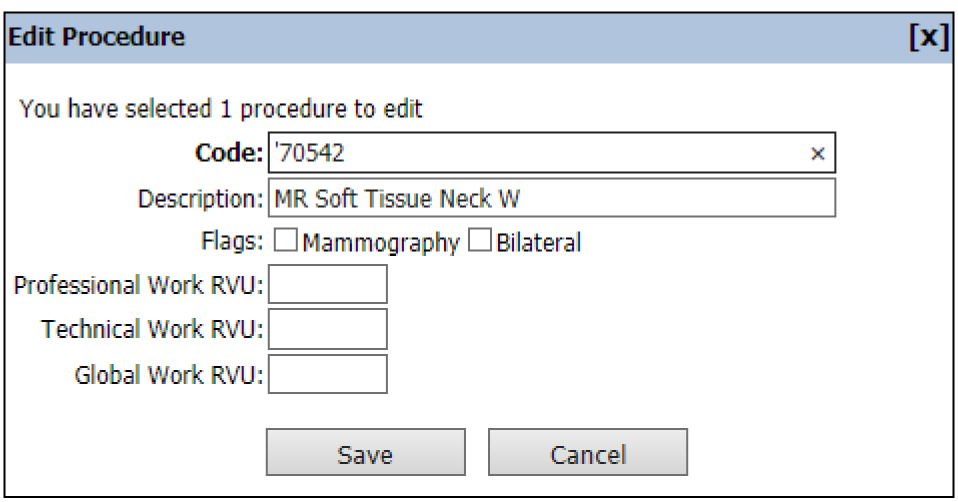
3. Click the **Search** link. The codes that meet your criteria appear in the list.

To edit a procedure code:

1. Click the check box to the left of the code that you want to edit.



2. Click the **Edit** link. The **Edit Procedure** dialog box opens.



3. Make the necessary changes to the code, description, or both. Select or clear the **Mammography** and Bilateral check boxes as needed, and add **RVU** information, as applicable. (Note that the **Code** field is the only required field.)
4. Click **Save** to save your changes.

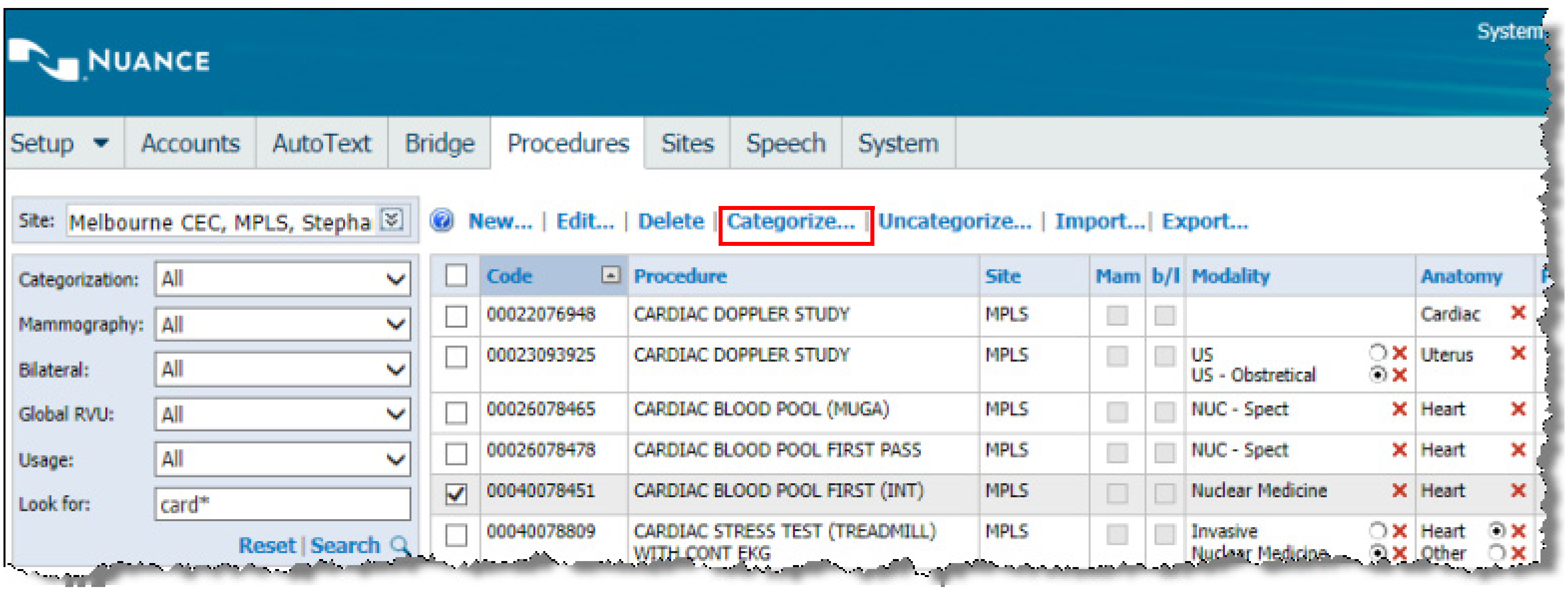
Categorize and Uncategorize Procedure Codes

If you need to categorize, uncategorize, or re-categorize only a few codes, you can select a code through the *PowerScribe 360 Reporting* Administrator Portal and categorize it manually.

Categorize Procedure Codes

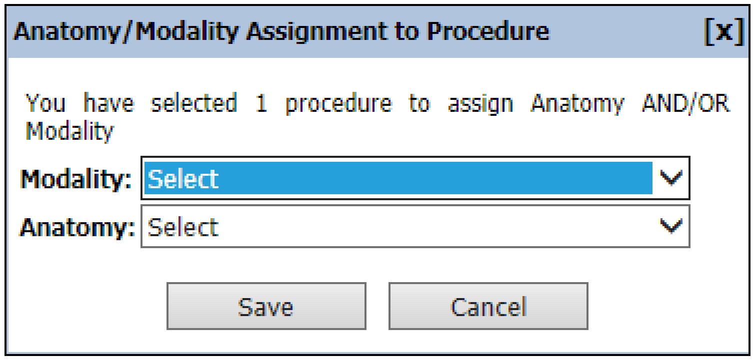
To categorize procedure codes:

1. Search for one or more procedure codes. (Follow steps 1 through 3 shown in *Edit Procedure Codes*, beginning on page 205.)
2. From the search results list that appears, select the code, or codes, that you want to categorize.



Note: Select more than one code to assign the same modality and anatomy to multiple codes.

3. Click the **Categorize** link. The **Anatomy/Modality Assignment to Procedure** dialog box opens.



4. Make your selections from the **Modality** and/or **Anatomy** drop-down lists. (These lists are quite extensive; use the scroll bar to move through the entire list.)

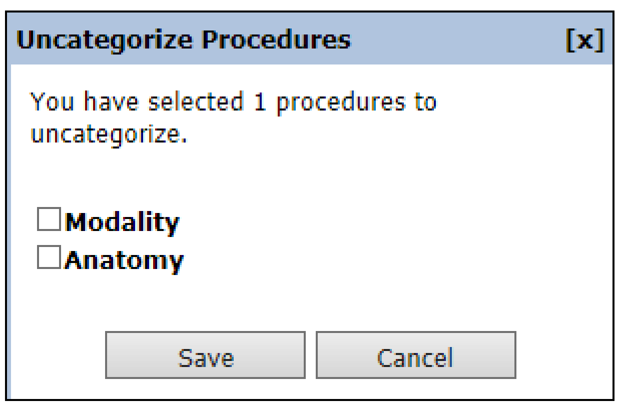
   Note: *The items in the Modality and Anatomy lists come from the PowerScribe 360 Reporting system.*

5. When finished, click **Save** to save your changes.

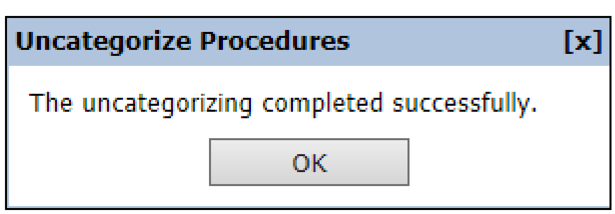
Uncategorize Procedure Codes

To uncategorize a procedure code:

1. Follow the steps shown above to locate the code you want to uncategorize.
2. Select the code and click the **Uncategorize** link. The **Uncategorize Procedures** dialog box opens.

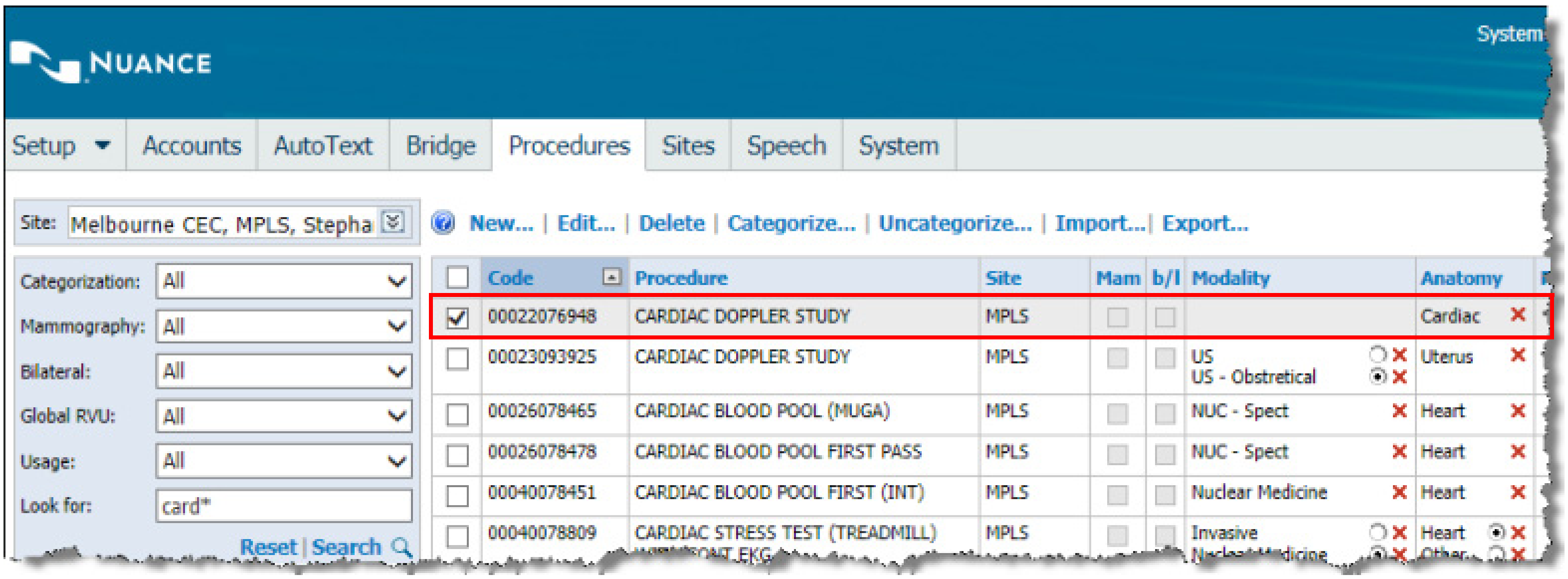


3. Select the **Modality**, **Anatomy**, or both check boxes to uncategorize.
4. When finished, click **Save** to save your changes. A message opens confirming that the uncategorize was successful.

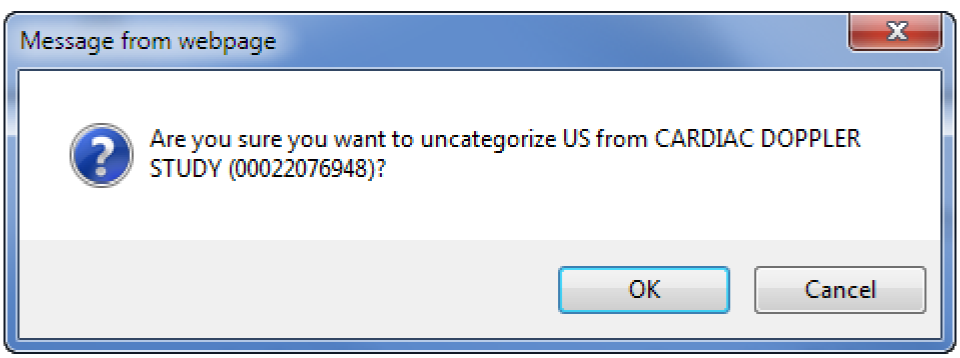


Another way to uncategorize a procedure code:

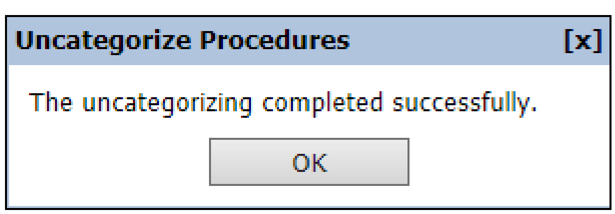
1. Search for one or more procedure codes. (Follow steps 1 through 3 shown in *Edit Procedure Codes*, beginning on page 205.)
2. From the search results list that appears, locate the code that you want to uncategorize.
3. Click the red **X** in the **Modality** or **Anatomy** column.



4. At the message box that opens, click **OK** to uncategorize the modality or anatomy, depending upon what you selected. The message box describes the action that will be taken if you click **OK**. (See example below.)



5. At the successful uncategorizing message box, click **OK**.

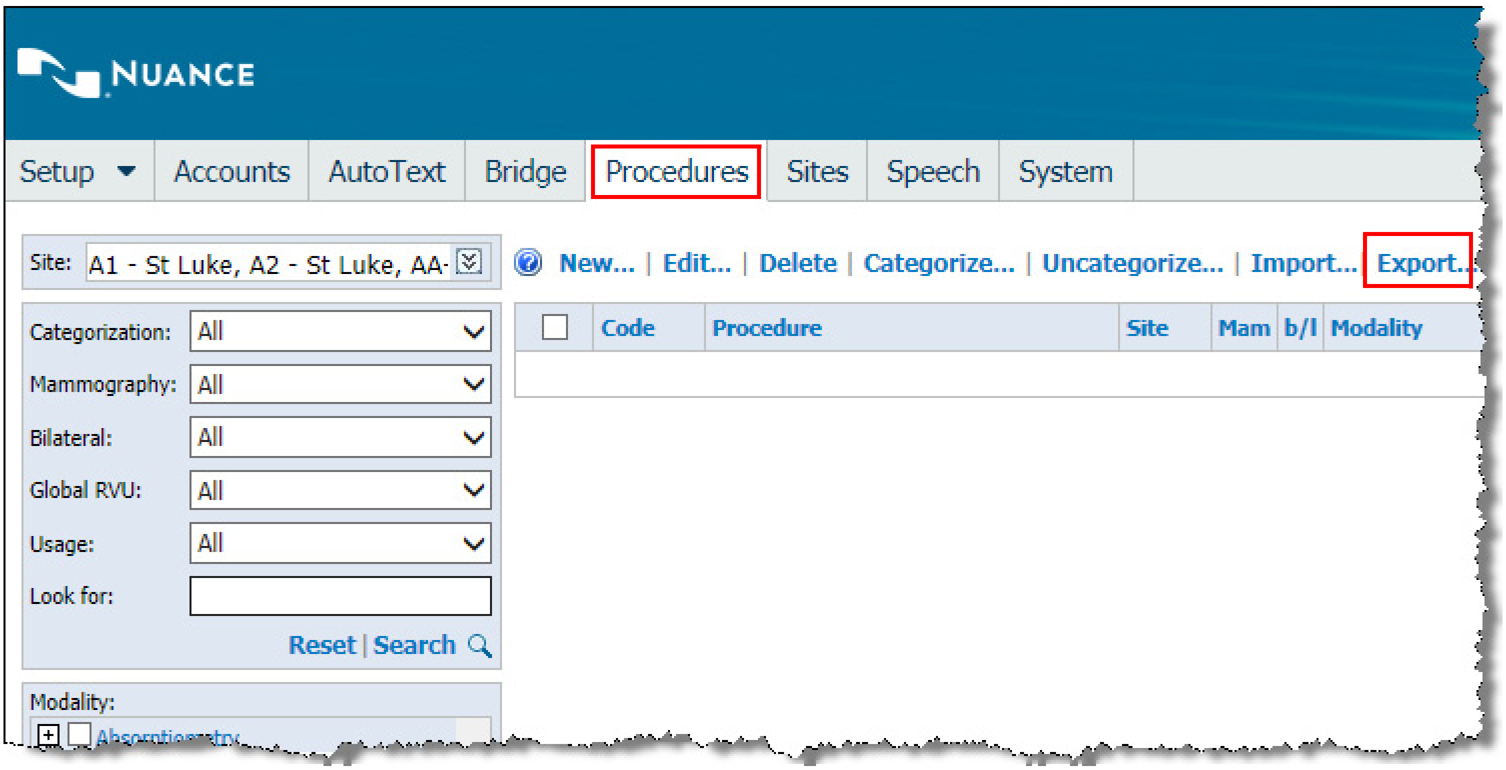


Export Procedure Codes, Diagnosis Codes, Anatomy/Modality, and Section Data

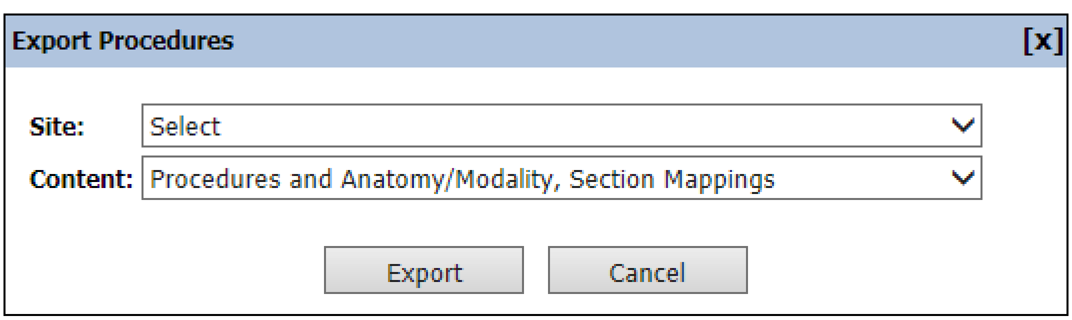
Use the Export link to send a site's procedure code, diagnosis code, anatomy/modality, and section data to an Excel spreadsheet. You can use the spreadsheet to import this information into another site, or just keep it for reference purposes.

To export procedure codes and other data:

1. In the **Setup** group, select the **Procedures** tab.
2. Click the **Export** link.

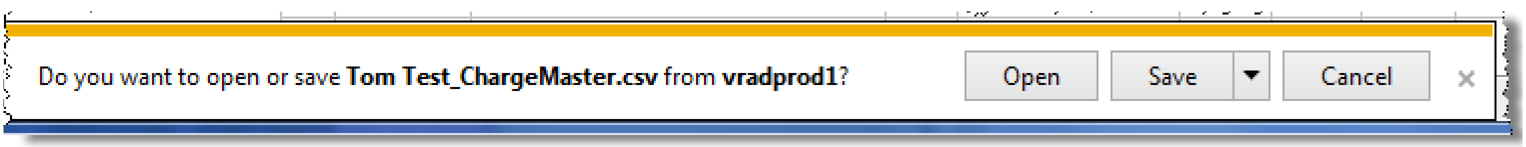


The **Export Procedures** dialog box opens.

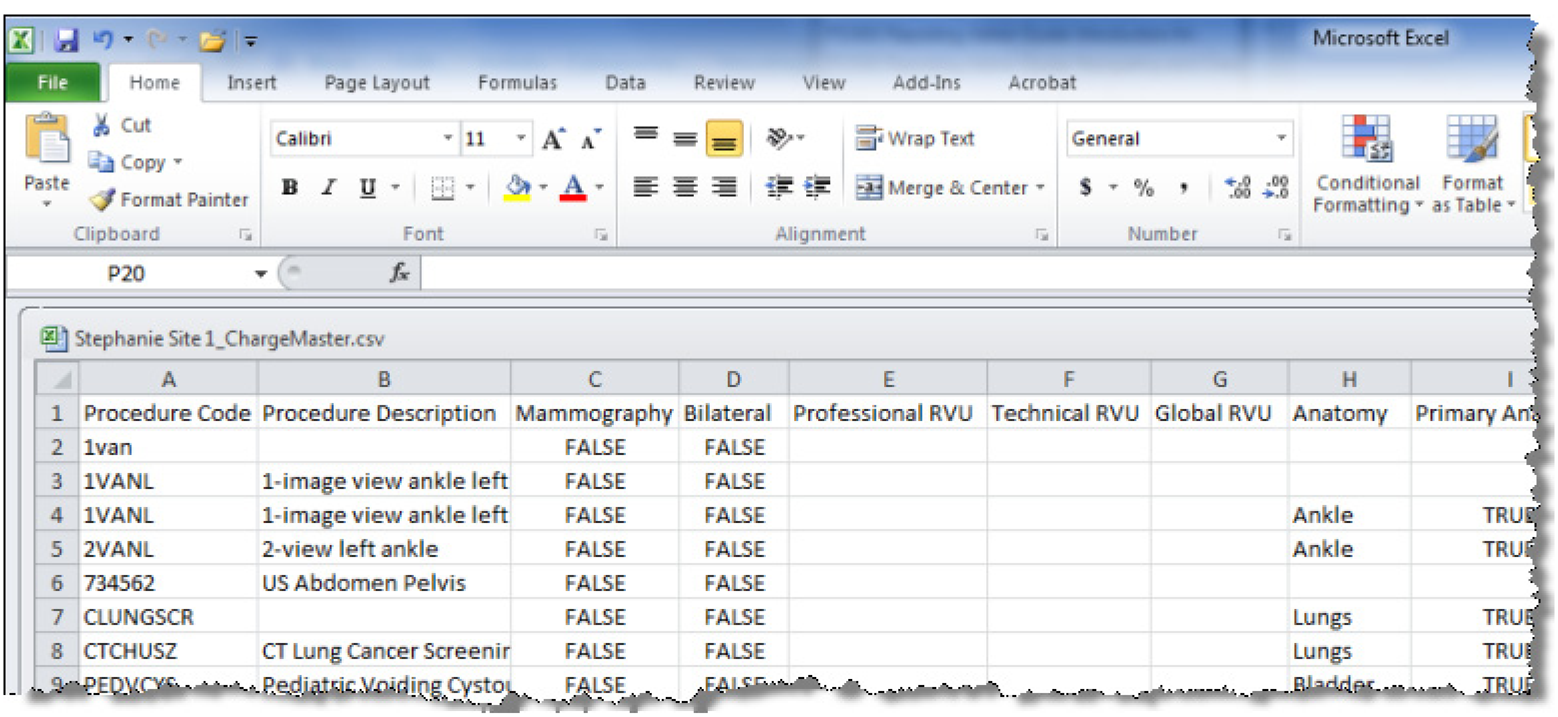


3. From the **Site** drop-down list, select the site whose data you want to export.

4. From the **Content** drop-down list, select the type of data you want to export from the site you selected to an Excel spreadsheet. Choose one of the following selections:
   - Procedures
   - Procedures and Anatomy/Modality, Section Mappings
   - Procedures and Diagnosis Code Mappings
   - Procedures and Anatomy/Modality, Section, Diagnosis Code Mappings
   - ICD-9 Diagnosis Codes
   - ICD-10 Diagnosis Codes
5. After making your selection, click **Export**. A standard Windows Save/Open bar opens at the bottom of the window.



   - **Save**: Saves the file to your Windows **Downloads** folder.
   - **Save As**: Opens a standard Windows save dialog box from which you can select a location to save the file.
   - **Save and Open**: Saves the file to Downloads and opens the file in Excel for viewing.
   - **Open**: Opens the data file in Excel as a comma separated values (CSV) file. The content of the file is determined by the selection you made in the Content drop-down list. An example of exporting the Procedures content selection is shown below.



Chapter 9

Provider Training— Introduction and Pre-Enrollment

Objectives

In this chapter you will:

- Demonstrate using the microphone and its proper positioning.
- Define the purpose of audio setup and reason for re-running it.
- Set expectations for reading the training screens
  - Do not dictate punctuation marks or paragraph breaks
  - Do not dictate capital for acronyms.
  - Do not dictate slashes or dashes for dates (Demonstrate all methodologies)

Using Your Microphone

You can use *PowerScribe 360 Reporting* with either a headset or a hand-held microphone. A headset is more practical if you dictate for long periods of time, or if you are in an environment that is not conducive to holding a microphone in your hand, such as pathology.

***Note:** If you use more than one microphone, you must perform the audio setup and general training steps (shown later in this section) for each device.*

Types of Microphone Supported

- Nuance PowerMic
- Philips SpeechMike

***Note:** The Philips SpeechMike requires a driver that **must be installed before you plug the microphone into your computer**. Either install the driver from the CD that came with the Philips microphone, or download it from the Philips Web site.*

Connecting the Headset or Handheld Microphone

USB Microphones

USB microphones do not connect to a sound card. If you have a USB microphone, plug it into one of your computer's USB ports. If you experience trouble plugging in your USB device, follow the instructions that came with it.

Microphone Jacks

Microphone jacks are located on your computer, sound card, or monitor. Consult your computer documentation if you need help locating your microphone jack.

Positioning a Handheld Microphone

To position your handheld microphone correctly for optimal speech recognition:

1. Hold the microphone in a comfortable position. Be sure not to hold it in an awkward, tiring position.
2. Point the microphone head close to and directly in front of your mouth.
3. Hold the microphone consistently every time you use it.
4. Do not use a microphone stand or holder because it will be harder to keep a consistent position and the stand could conduct noise.
5. Do not dictate into the side of the microphone.

Positioning a Headset Microphone

To position your headset microphone correctly and consistently for optimal speech recognition:

1. Adjust the headset so that it fits comfortably on your head.
2. Move the microphone element to the side of your mouth to avoid noise from breathing (about a thumb's width from the side of your mouth).
3. Confirm that the front of the microphone points toward the side of your mouth. The front of the microphone might be indicated by a colored dot, or some other label.

Using a Headset with the PowerMic II Microphone

Nuance sells the VXi TalkPro USB1 Computer USB Headset - Monaural for use with *PowerScribe 360 Reporting*.

MFG. P/N	Nuance P/N	Description
VXI 203008	5000078-001	HEADSET WITH MICROPHONE, USB1

The above headset will work as an input device for *PowerScribe 360 Reporting* when used either standalone or in conjunction with a PowerMic II microphone.

Any headset attached to the VXi x100 or x200 audio adapter will support the PowerMic II/Headset combination.

Regarding the VXi X100 or X200 USB adapters, the **V**, **P**, and **G** series refer to the type of quick disconnect that attaches to the different headsets.

X100 USB Adapters

X100-V USB Adapter (202926) - Compatible with VXi V-series, TalkPro SP or TuffSet headsets

X100-P USB Adapter (202927) - Compatible with VXi P-series or Plantronics headsets

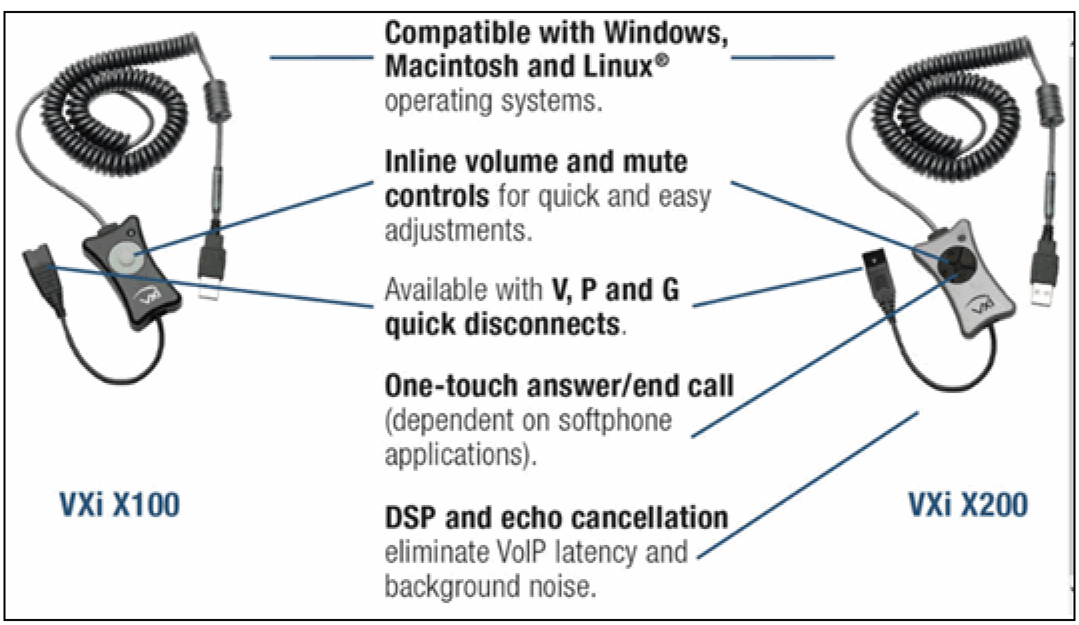
X100-G USB Adapter (202928) - Compatible with VXi G-series or GN Netcom/Jabra headsets

X200 USB Adapters

X200-V USB Adapter (202930) - Compatible with VXi V-series, TalkPro SP or TuffSet headsets

X200-P USB Adapter (202931) - Compatible with VXi P-series or Plantronics headsets

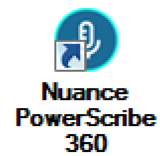
X200-G USB Adapter (202932) - Compatible with VXi G-series or GN Netcom/Jabra headsets



Logging On and Logging Off

You can start the *PowerScribe 360 Reporting* application from an icon on your desktop, or in some installations, from within a PACS system.

To log on to PowerScribe 360 Reporting:



1. Double-click the **Nuance PowerScribe 360** desktop icon (shown at right).
2. Type the user name and password provided by your administrator.
3. If this is your first login:
   - Depending on your system configuration, you might be prompted to change your password on your first login. Type the new password in both fields and then click **OK**.
   - You are prompted run the Audio Setup Wizard to create your speech files (shown later in this section)
4. If you have more than one role at this site (for example, if you are both a resident and an attending physician), you are prompted to specify the role you want to use for this session. Select the role and click **OK**.

   There is a short delay while the speech files are loaded onto your workstation. Once they have been loaded, the **Nuance PowerScribe 360 Reporting** window opens.

To log off:

- To log out and close the application completely, click on the **X** (close window icon), in the upper right corner of the application, or select **File > Exit** from the menu bar.

  OR

- To log off and return to the logon window, click **File > Log Off**.

Initial Voice Training

Before you can begin dictating in *PowerScribe 360 Reporting*, you must perform two voice training tasks:

- Audio Setup
- General Training

General Training Dictation Guidelines

- Read the training screens in the environment in which you will be working.
- Do not dictate punctuation.
- You do not need to dictate dashes or slashes when dictating dates with those types of formats.
- Dictate acronyms, units of measure, blood pressures, dosages, and so on as you normally would.
- Speak in continuous phrases. Using this approach provides contextual clues about what you said and helps the software choose between homophones like **":"** the punctuation mark, and **"colon"** the body part.
- Speak naturally at your normal rate, not too quickly or too slowly.
- *Do not* Dictate. Only. One. Word. At. A. Time.
- Fast dictation is acceptable as long as the words are spoken clearly and not slurred.
- Avoid clearing your throat and yawning while you are dictating. Do not talk through a yawn or when you clear your throat; please stop dictating.
- Eliminate utterances (urs, ahs, coughing) and similar sounds.
- Do not chew gum or eat while dictating.

Audio Setup

Audio Setup automatically adjusts the volume level of your microphone to its optimal setting, providing the *PowerScribe 360 Reporting* system with the best possible audio input, which in turn improves your speech recognition results.

Running **Audio Setup** is a very important first step in ensuring the best possible speech recognition by the system.

You must run **Audio Setup** the first time you log in to the system. In addition, if the microphone has been unplugged from the system (and then plugged back in) you must re-run the wizard.

Audio Setup is a two-step process:

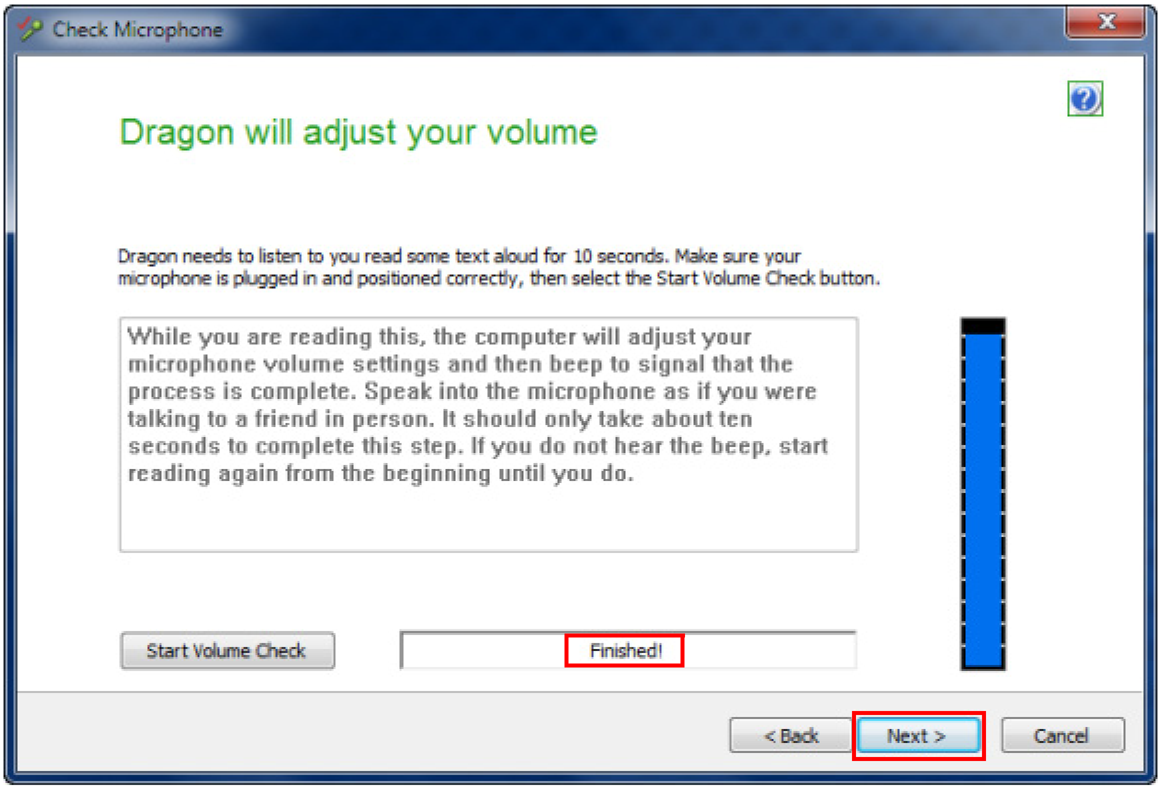
- **Volume Check**: Adjusts the volume level of your microphone based on the loudness or softness of your voice as well as the dictation room's ambient noise levels.
- **Quality Check**: Ensures that you have a high quality sound available from your microphone.

***Note:** If necessary, you can run **Audio Setup** by clicking **Speech > Audio Setup** on the menu bar once you are logged into the PowerScribe 360 Reporting client.*

To use Audio Setup (at your first login):

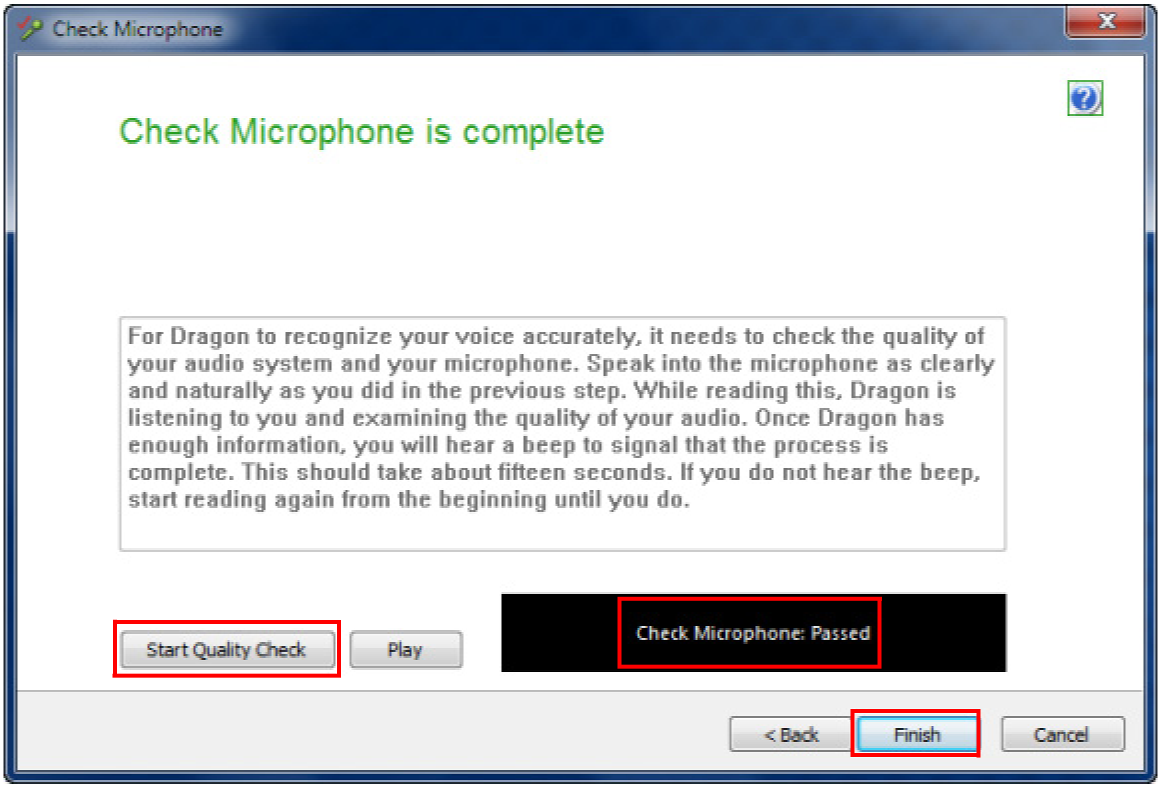
1. Log into the *PowerScribe 360 Reporting* client application. In a few seconds, the **Check Microphone** window opens.
2. Review the text in this dialog box, adjust your microphone position if necessary, and click **Next**.

3. Click the **Start Volume Check** button and begin dictating the text in the box (**"While you are reading this …"**). The system is adjusting your microphone volume while you are dictating this text.



4. When you hear a beep and see the word **Finished!**, click **Next**.

5. In the next window, click the **Start Quality Check** button and begin dictating the text in the box (**“For Dragon to recognize your voice accurately…”**).



6. When you see the **Check Microphone Passed** message (in the black text box) click **Finish** to complete the audio setup.

General Training

Immediately after running **Audio Setup** the first time, you must go through a process called **general training**, which is the initial voice training for the system, before you can access the application. This training can last anywhere from 10 to 15 minutes.

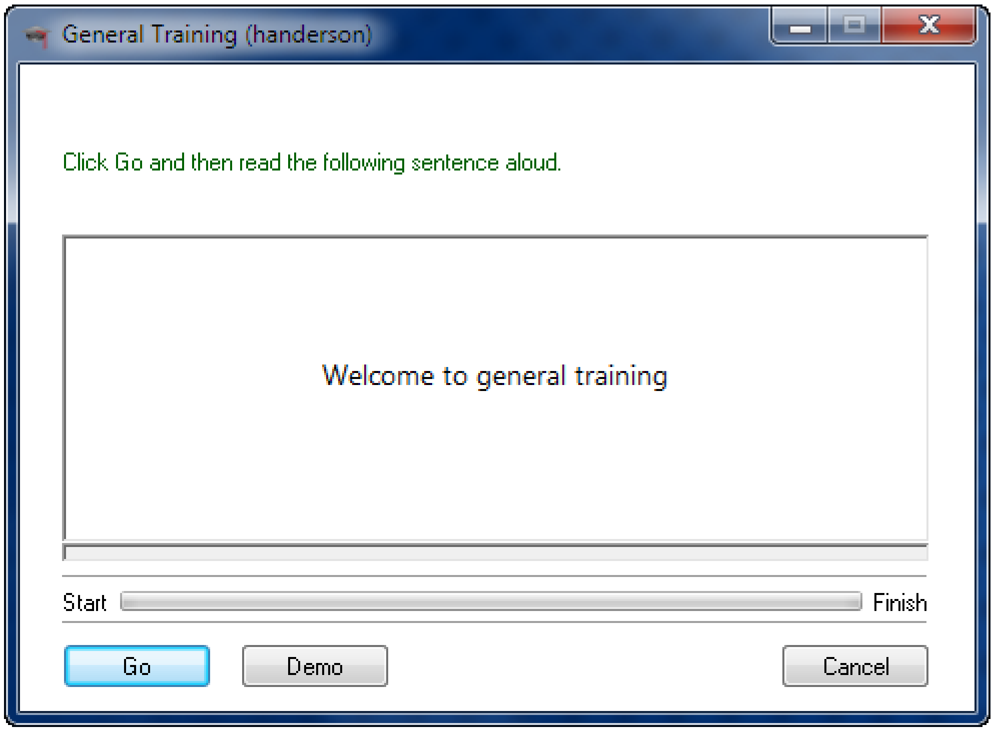
The purpose of general training is to give the system an opportunity to listen to the way that you pronounce the sounds that make up your words. For example, for the word *radiology*, the system hears *ray-dee-awl-u-gee* or something close to that. When you choose a general training script, you can choose any of the scripts available. The system is listening to the *sounds that make up the word*, not the word itself.

The dialog boxes for this training appear automatically on the first login, right after you complete **Audio Setup**.

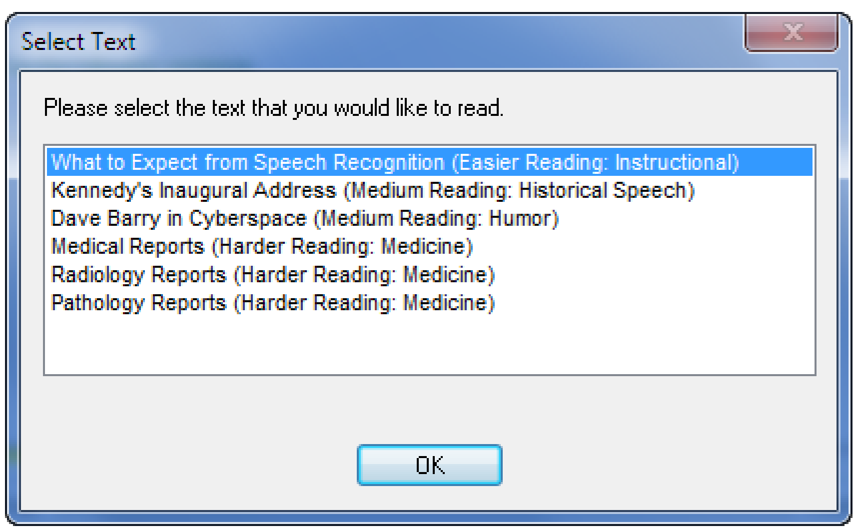
Note: *You can repeat general training by clicking* ***Speech > General Training*** *on the menu bar once you are logged into the PowerScribe 360 Reporting client.*

To perform the General Training voice training (at your first login):

1. After completing the initial **Audio Setup**, the **General Training** dialog box opens.

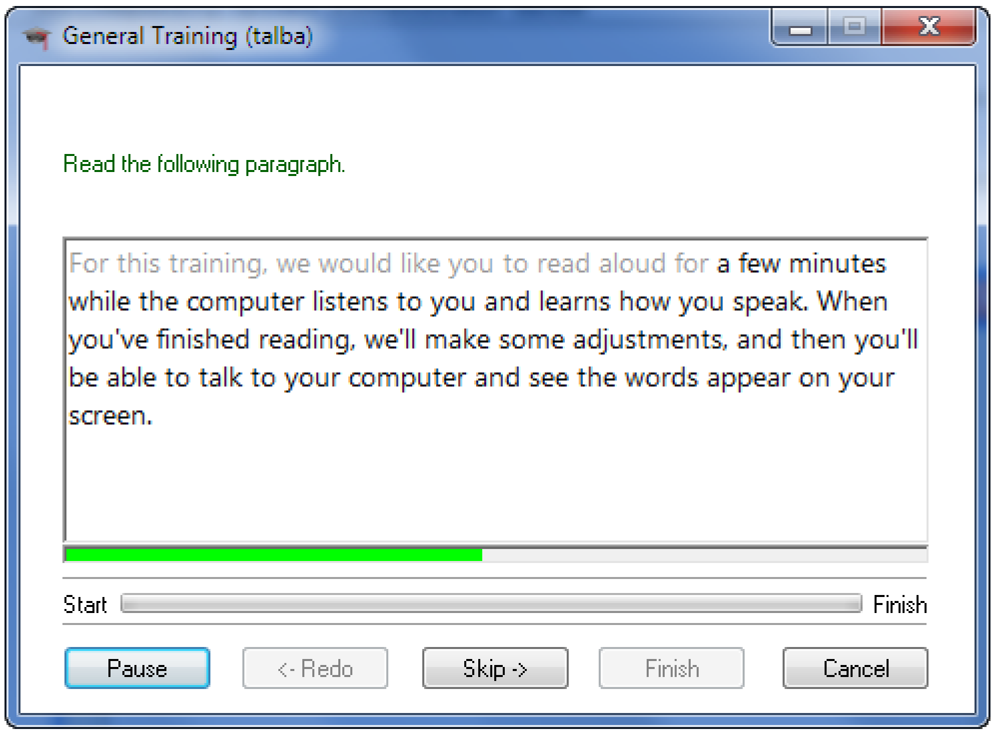


2. Click **Go** and dictate the sentence **“Welcome to general training”** into your microphone. (There is one more short dictation in this section of the training: **“Training is about to begin.”**)
3. In the **Select Text** dialog box, select the training text you would like to use.



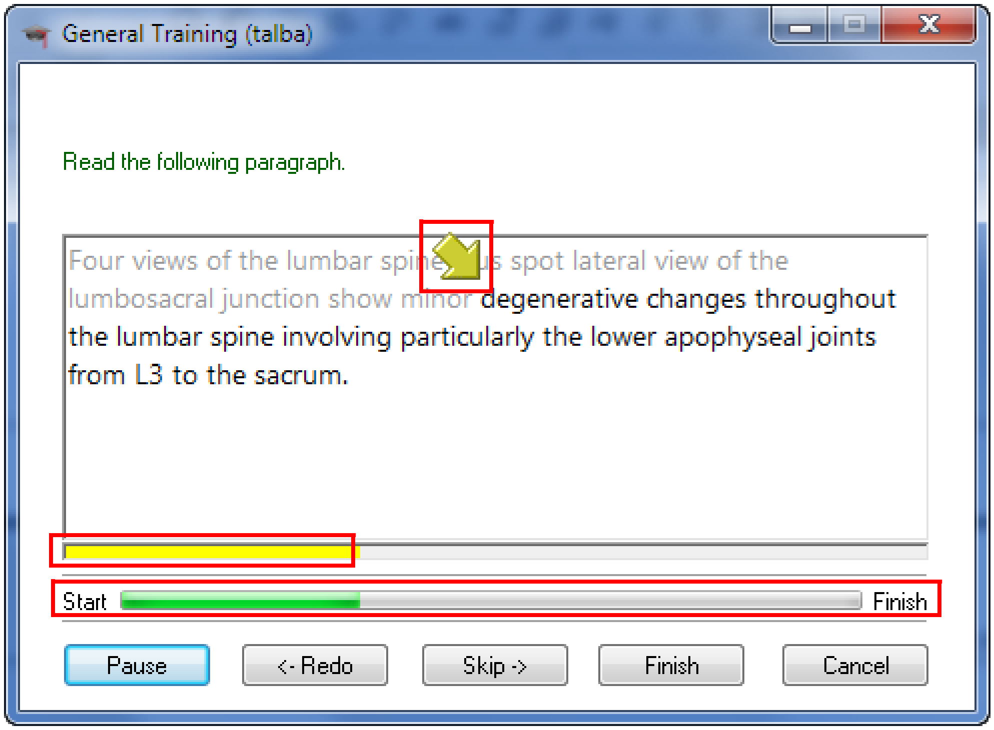
4. Click **OK**.
5. Before you begin reading the text, review the following guidelines:
   - Do not dictate punctuation you see on the screen.

- If you want to take a break, click the **Pause** button (which then changes to a **Go** button you click to resume dictation).
- If you stumble over a phrase, click **Redo** and begin dictating again from the yellow arrow.
- Do not click **Skip** until you've read all the text on the screen, and the text color has changed from black to light gray.
- Once you have successfully read the text on the screen (all the text is light gray), the next screen opens automatically.



6. As you read the text in each dialog box:
   - A yellow arrow points to your current location in the dictation. Words that you've already dictated are grayed out as you speak.
   - The bar directly below the text box is a volume level indicator. It moves to the right as your volume increases. Try to keep it in the green areas, avoiding the red area (which would appear in the far right side of the line). This bar turns yellow when you stop speaking.

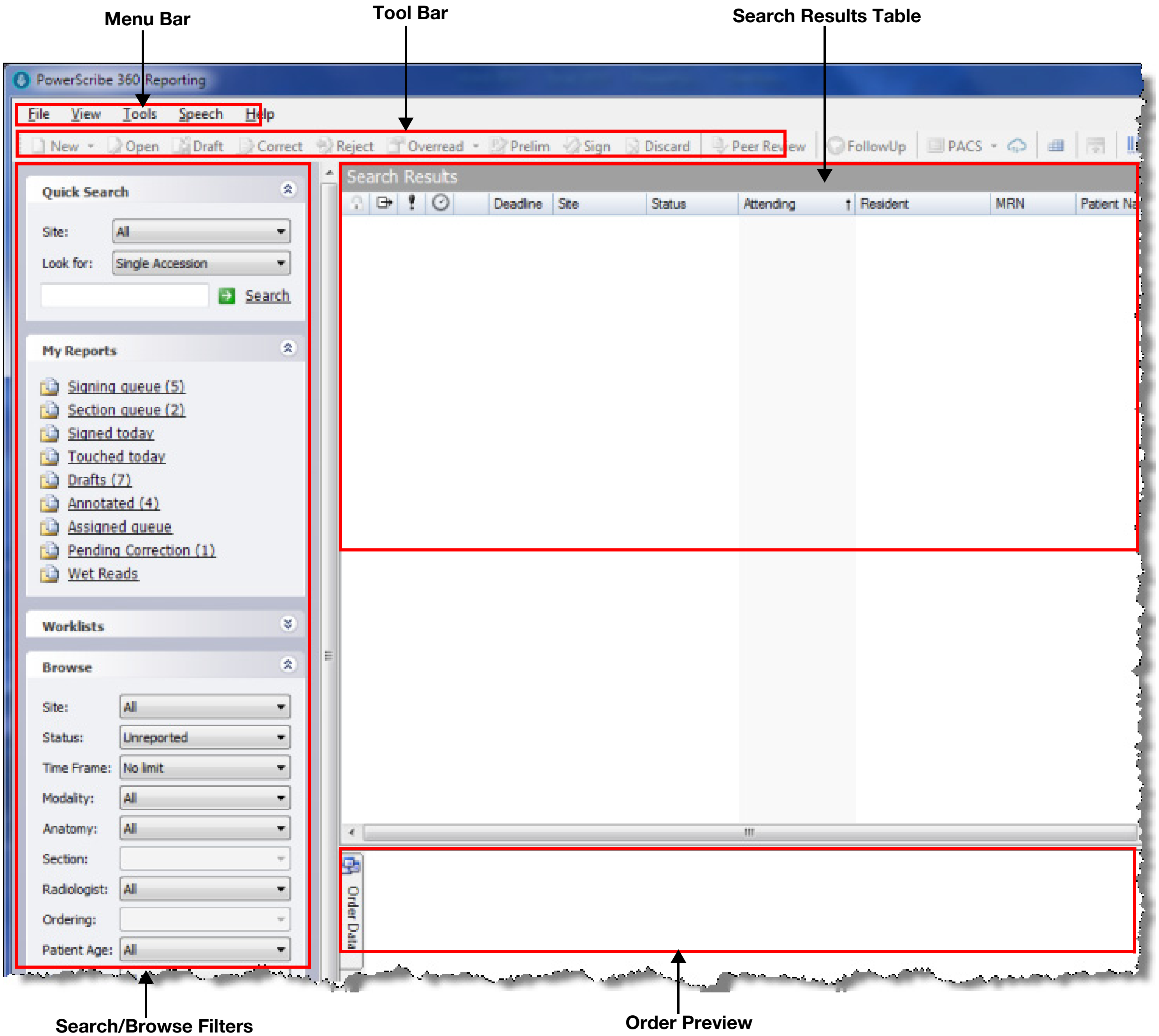
- The green dashed line (between the words **Start** and **Finish**) indicates your progress in the training. In the illustration above you can see that the user is almost finished.



__Note:__ If you are unable to complete one of the training pages (the yellow arrow stops moving or appears to be stuck on a word), click the __Skip__ button to move to the next training page and continue dictating. Providers with strong accents or pronunciation issues might encounter this occasionally during general training.

7. At the congratulations dialog box, click **OK**. The system displays an **Adapting user files** message while it finishes adapting your voice files. Once this process is finished, your login proceeds and the application opens, displaying the Explorer window (see illustration on next page).

View of the Initial PowerScribe 360 Reporting Explorer Window



Best Practice: *In* ***Speech > Options > View****, Set the* ***Auto-hide delay*** *to* ***Never show****. Also, in* ***Speech > Options > Correction****, clear the “****Select” commands bring up Correction menu*** *check box.*

Chapter 10

Provider Training—Intermediate and Advanced

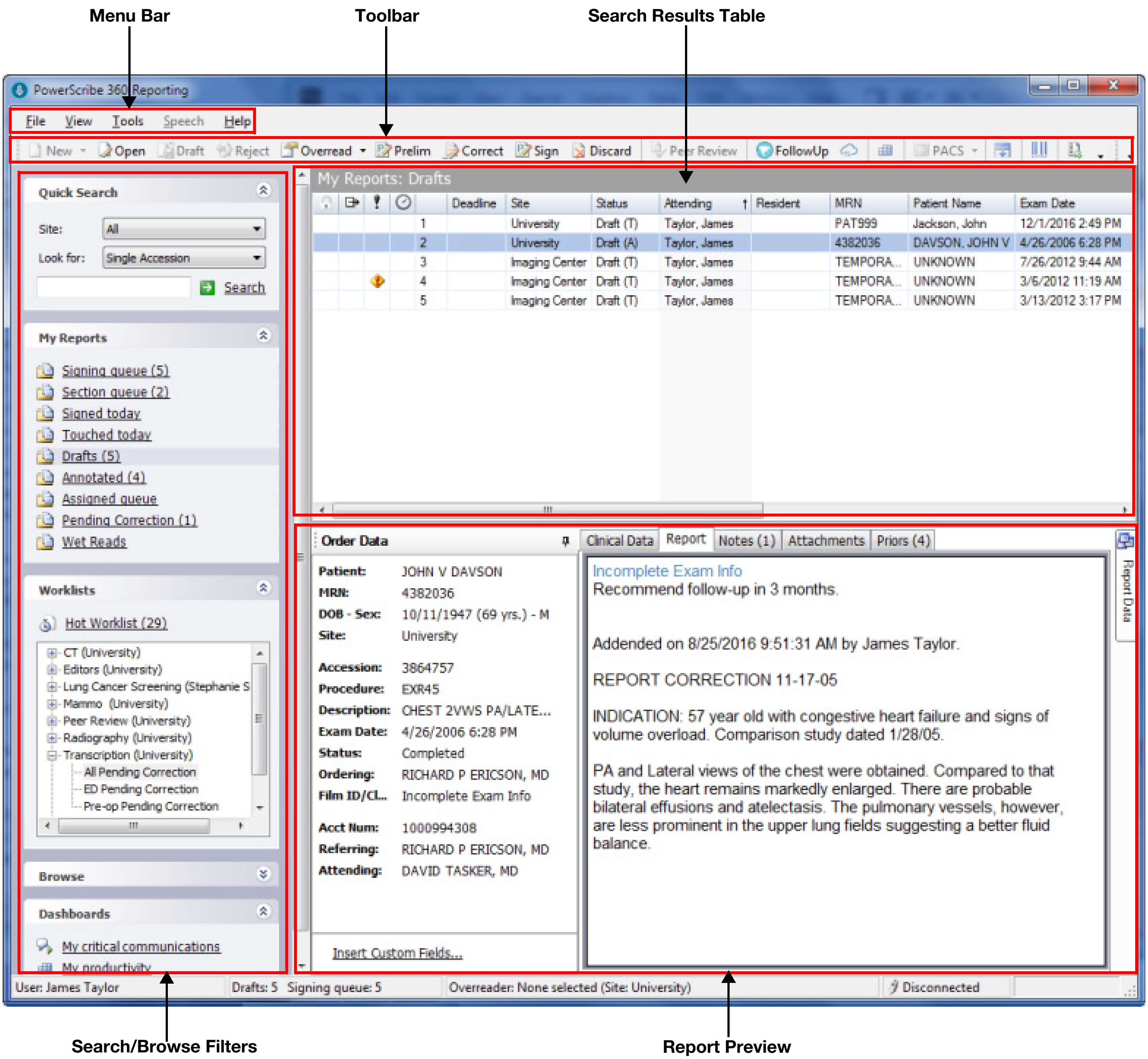
Objectives

In this chapter you will:

- Review screen elements
- Create a test report
- Create a test report containing AutoText
- Select facility-specific topics to cover with your providers
- Select advanced topics to cover with your providers

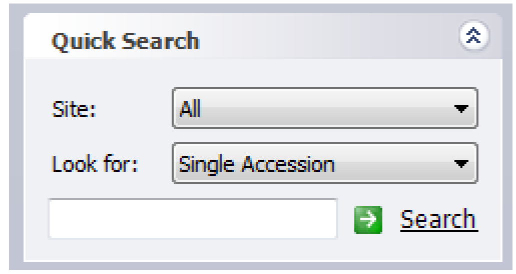
Explorer Window Screen Elements

By default, the first window you see after logging in to the *PowerScribe 360 Reporting* client is the **Explorer** window. **Explorer** is where you access your reports and worklists, and search for orders and reports. The following illustration shows the main components of the **Explorer** window.

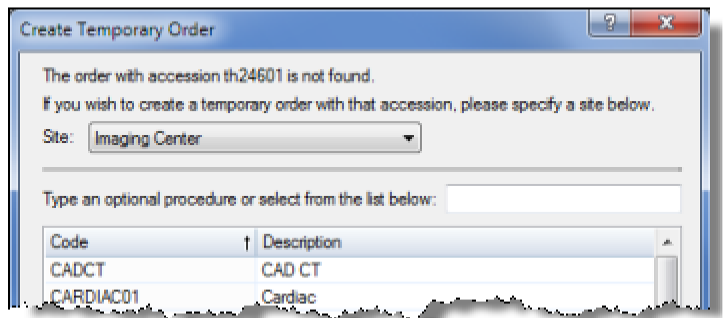


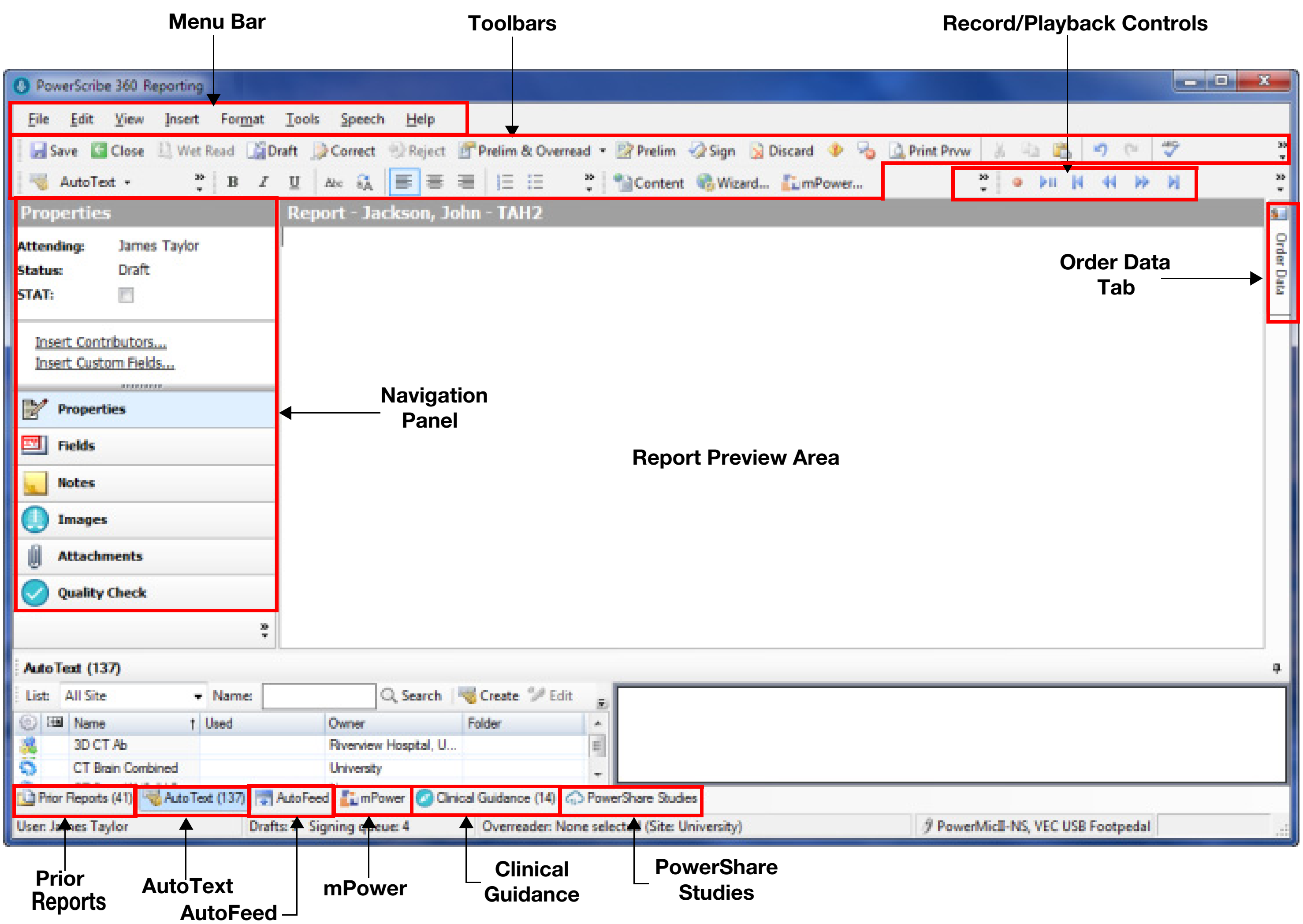
Create a Test Report

Initiate a Report



1. In the **Quick Search** section, make sure that the **Look for** field shows **Single Accession**.
2. Enter your initials followed by **123**.
3. Click **Search**. Since this is a test report, a message window opens allowing you to create a temporary order.
4. Click **OK** to create the order. The **Report Editor** window opens.





Dictate and Edit the Report

Note: *As a best practice, have providers hold the microphone in their left hand and use the mouse with their right. For left-handed providers, it's mouse left, microphone right.*

1. Make sure your cursor is in the report preview portion of the window.
2. Dictate something you would normally dictate on a regular basis. Doing this lets you evaluate the quality of your speech recognition since the time you completed the general training.

   If you can't think of anything, use the following findings and impression text as an example:

   FINDINGS: The thoracic vertebral bodies are normal in height and alignment with normal CT density. Disc spaces are unremarkable with no disc bulge or focal disc herniation and the visualized spinal cord is intact. Visualized soft tissues are unremarkable.

   IMPRESSION: No abnormality seen in CT scan of thoracic spine.
3. When finished, review the text you dictated and look for any dictation errors.
4. If you find an error, use the voice command **"Select <x>"** to highlight the word you want to change or delete. Using the text in the example above, you could say **"Select unremarkable"** to highlight the word *unremarkable*.

   Note: *Do not pause or take a breath between the command **"Select"** and the word you want to select. For example, if **"Select unremarkable"** does not immediately highlight **unremarkable**, the system interpreted what you said as dictation instead of a voice command. This occurs when you pause too long between the command itself and the word you want to select.*
5. With the text highlighted, you can now either dictate the correct word to replace it, or you can use another voice command **"Scratch that"** to delete the word completely.

   Note: *If you selected the word you want to delete with your mouse instead of the **"Select <x>"** voice command, you must use either the **"Scratch that"** or the **"Delete that"** voice command to remove the word. Otherwise, the audio file still contains the word, even though the text portion is gone. Using the voice command removes both the text and the audio.*
6. Now use a new voice command, **"Select <a> through <b>"** to highlight a range of consecutive words. For example, in the impression section shown above, say **"Select no abnormality through spine"** to highlight all of the impression text.

   Note: *You can use more than one word as a starting or ending point; in this example we used **"no abnormality."** In some cases, a single word, especially articles such as **"a"** or **"the"** can cause the wrong text to be selected since they frequently occur more than once in many reports.*

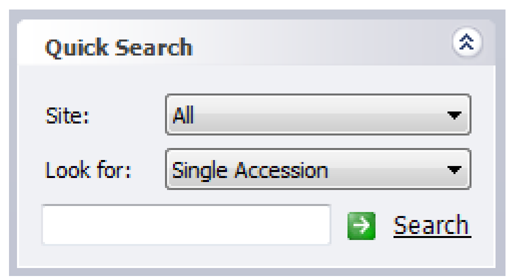
7. Once again, either dictate the correct phrase to replace it, or say **“Scratch that”** to remove the text and audio completely.
8. When finished, click the **Draft** button on the toolbar to save your report and place it in your **Drafts** report queue.

Find, Open, and Sign the Draft Report

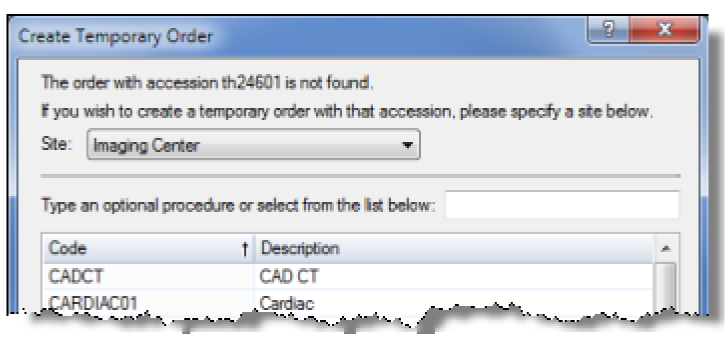
1. In the **My Reports** section of the **Explorer** window, click the **Drafts** link. The report you just created is listed in the search results table. (Notice the number in parentheses next to the **Drafts** link. This indicates the number of draft reports that are in your queue.)
2. Double-click the report listing in the results table. The **Report Editor** window opens once again, displaying the contents of your report.
3. Sign your report either by clicking the **Sign** button on the toolbar, or by pressing the button on your microphone that performs the sign function. If you are prompted to sign the report with a message box, click **Yes**. The report is signed and you return to the **Explorer** window.

Create a Report That Contains AutoText

Initiate a Report



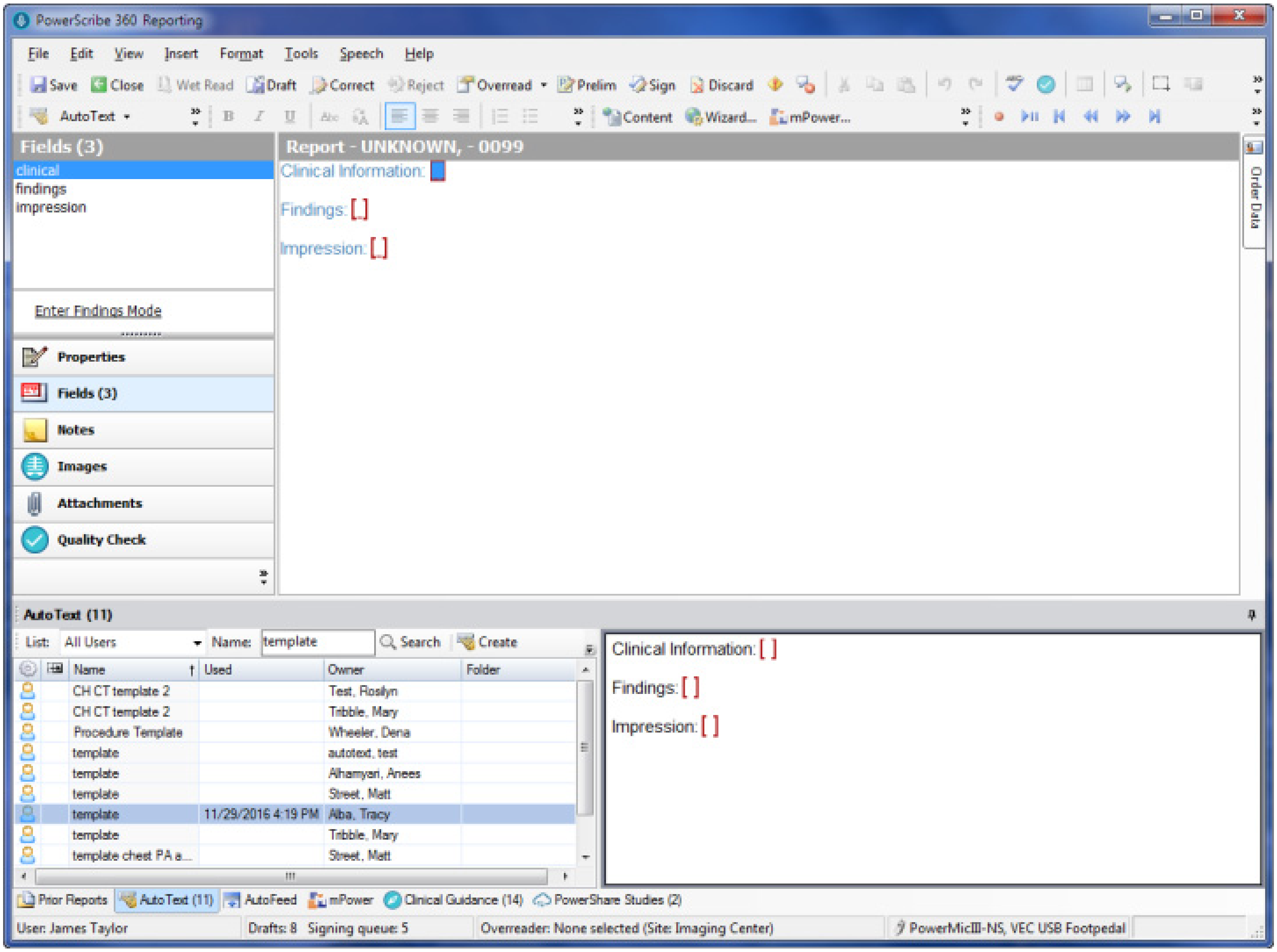
1. In the **Quick Search** section, make sure that the **Look for** field shows **Single Accession**.
2. Enter your initials followed by **456**.



3. Click **Search**. Since this is a test report, a message window opens allowing you to create a temporary order.
4. Click **OK** to create the order. The **Report Editor** window opens.
5. The **AutoText** tab is located at the bottom-left corner of the window. You should see an AutoText named **template**.
6. Use the voice command **“AutoText template”** to insert the AutoText into the report. (**“AutoText”** is a *trigger word* that tells the system to insert an AutoText. Your

organization might have chosen a different trigger word. Other choices are **"Macro,"** **"PowerScribe,"** or **"Dictaphone"** or a custom trigger word.)

This example AutoText contains three *fields* into which you can dictate: **Clinical Information**, **Findings**, and **Impression**.



7. Use the **Tab** buttons on your microphone to select the fields. You can tab forward and backward
8. Tab to the Clinical Information field and dictate **"Diabetes."**
9. Press the forward tab button to move to the **Findings** field and dictate the following:

   The thoracic vertebral bodies are normal in height and alignment with normal CT density. Disc spaces are unremarkable with no disc bulge or focal disc herniation and the visualized spinal cord is intact. Visualized soft tissues are unremarkable.
10. When finished, press the forward tab button again to move to the Impression field and dictate the following:

    No abnormality seen in CT scan of thoracic spine.

11. Practice your editing voice commands to see that they work with AutoText as well:
    - In any field, say **“Select <x>”** to select a word
    - Say **“Scratch that”** to delete the selected word (text and audio) from your report.
    - Say **“Select <a> through <b>”** to highlight a phrase or sentence.
12. When you have finished editing, sign your report either by clicking the **Sign** button on the toolbar, or by pressing the button on your microphone that performs the sign function. If you are prompted to sign the report with a message box, click **Yes**. The report is signed and you return to the **Explorer** window.
13. Click the **Signed Today** link in the **My Reports** section of the **Explorer** window to see the two reports you created and signed.

Facility-Specific Features Check List

Not everyone has the same set of training requirements. Use the following check list to create a list of topics to cover for each customer.

☐	**Addendums** For information on this feature, see *Addendums* beginning on page 235.
☐	**Multiple Accession Numbers** For information on this feature, see *Multiple Accession Numbers* beginning on page 235.
☐	**Send to Editor Options** For information on this feature, see *Send to Editor Options* beginning on page 236.
☐	**Report Transmit Grace Period** For information on this feature, see *Report Transmit Grace Period* beginning on page 236.
☐	**Reject a Report with Note** For information on this feature, see *Reject a Report with Note* beginning on page 237.
☐	**Worklists** For information on this feature, see *Use a Worklist* beginning on page 238.
☐	**Add Contributors** For information on this feature, see *Add Contributors* beginning on page 240.
☐	**Assign Orders** For information on this feature, see *Assign Orders* beginning on page 241.
☐	**Attending Sign from Resident Workstation** For information on this feature, see *Use Attending Sign from Resident Workstation* beginning on page 241.
☐	**AutoFeed** For information on this feature, see *AutoFeed* beginning on page 242.

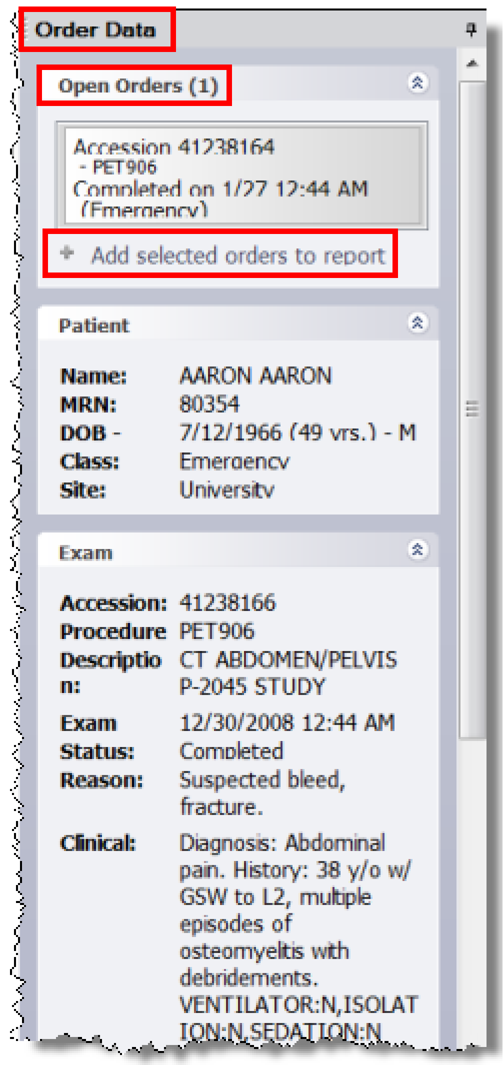
Addendums

If providers want to modify a report whose transfer status is either **Queued** or **Sent** (or any status other than **Ready**), they must create an addendum to the report.

Multiple Accession Numbers

Customers whose RIS or HIS support multiple accession numbers per order can use **Quick Search** in the **Explorer** window to find an order that contains multiple accession numbers.

To find an order that contains multiple accession numbers:



1. In the **Quick Search** portion of the **Explorer** window, select either **Single Accession** or **Multiple Accession** from the drop-down list.
2. Enter any one of the accession numbers and click **Search**.
3. In the results grid, double-click the report to open it.

   On the right side of the **Report Editor** window, the **Order Data** tab shows all of the accession numbers associated with the order (one in the example here).
4. To add accession numbers: In the **Open Orders** area, select one or more accession numbers and click the **Add selected orders to report** link.
5. To remove one or more accession numbers from the order, select the number in the **Accessions** field and click the **Remove this order from report** link, located at the bottom of the **Order Data** window.
6. Continue dictating the report based on the remaining accession numbers.
7. When finished, sign or save the report.

Send to Editor Options

In some cases you might choose to send your reports to an editor instead of self-editing them. The editor corrects the report and returns it to you for signature.

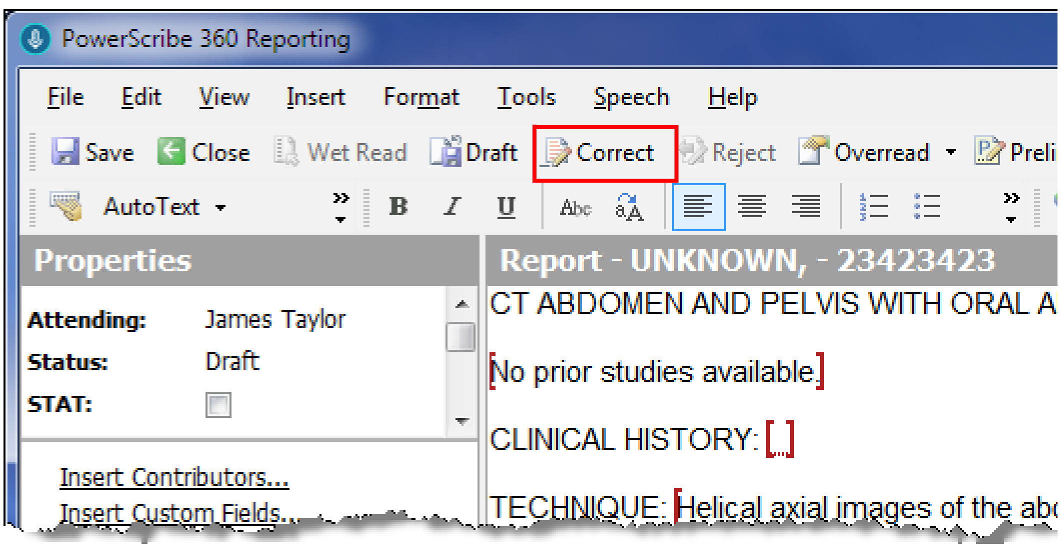
Before sending a report to an editor, you can mark the report as STAT by clicking the STAT icon in the toolbar.

If you change your mind and want to self-edit the report, you can retrieve the report by clicking the **Pending Correction** link (under **My Reports** in the **Explorer** window) and opening the report once again.

Note: *If an editor has already opened the report, it will not appear in the* ***Pending Correction*** *queue and you can not access it.*

To send a report to an editor:

1. Create or open a report to send to an editor.
2. Say **"Correct Report"** or click the **Correct** icon in the task bar.



The report is saved and sent to the editing queue. It is also added to the **Pending Correction** section of your **My Reports** search area (located below **Quick Search**). The **Report Editor** closes and you return to the **Explorer** window.

Report Transmit Grace Period

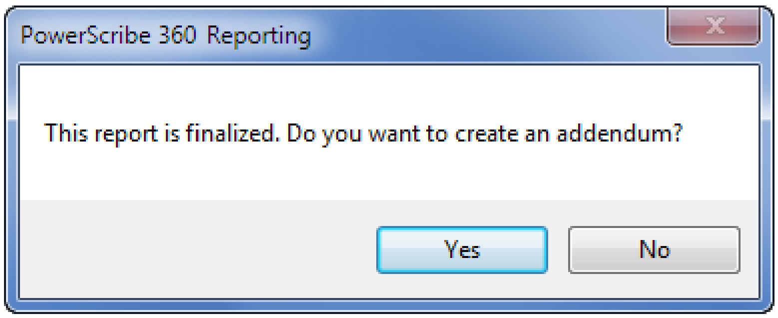
Many customers configure their *PowerScribe 360 Reporting* system to allow providers a specific amount of time during which they can recall a report for further dictation or editing before it is uploaded to their RIS.

With this feature enabled, a provider can retrieve a report from their **Signed today** queue if it has a **Report Transfer Status** (the column with the icon) of **Ready**, indicated by a single green arrow .

To open and edit a Ready report:

1. From the Explorer window, click the **Signed today** link under **My Reports**.
2. In the results grid, find the report you want to revise, making sure it is in the **Ready** state.
3. Double-click the report to open it in the **Report Editor**.
4. Make the necessary revisions and sign the report once again.

If a provider double-clicks a report that has any other transfer status (**Queued** , **Sent** , and so on), he sees the following message box:



In these cases, the provider must create an addendum to the report in order to make changes or add to it.

Reject a Report with Note

Attending providers and residents can choose to reject a report. Rejecting a report returns a report to the last person who worked on it, and changes the report status from **Corrected** to **Pending Correction**.

The following table shows which users can reject a report.

User	Reject Privilege
Attending	Sends a report back to a Resident or an Editor for further corrections
Resident	Sends a report back to an Editor for further corrections
Editor	Editors cannot reject a report.

To reject a report:

1. In either **Explorer** or **Report Editor**, select the report you want to reject.
2. Click the Reject icon Reject in the toolbar (or click **File > Reject**). The **Report Note** dialog box opens, allowing you to either dictate or type a reason for rejecting the report.

3. Add a note to the report and click **OK** to return the report to the resident or editor for further work.

Note: *Click* ***Tools*** *>* ***Preferences*** *>* ***Workflow*** *and make sure the preference* ***Warn on sign if new notes exist*** *is set to either* ***Always*** *or* ***From Transcription****. This ensures that you are notified when a new note has been added to a report that you are about to sign.*

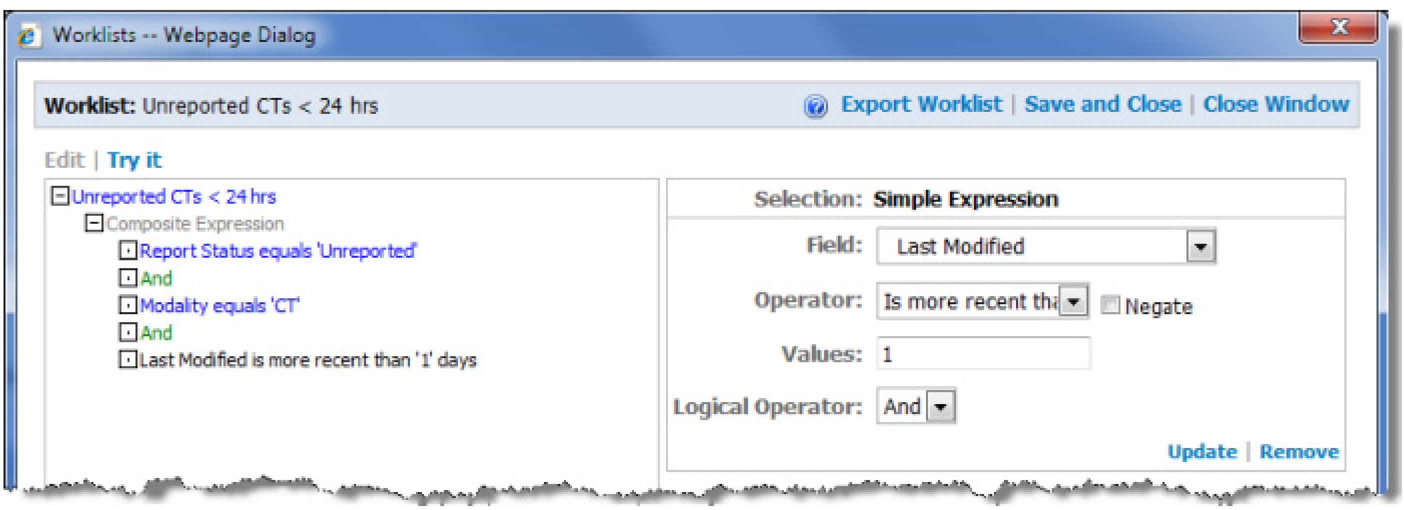
Use a Worklist

Worklists are filters your site administrator has configured; each worklist retrieves a specific set of orders, reports, or both. Worklists are very powerful, allowing virtually any combination of search criteria, and can span multiple sites if configured to do so. For example, a worklist might show all unreported pediatric CT exams from the Emergency Department that are more than one hour old.

Worklists are closely related to *sections*. An administrator assigns you to sections (for example, Abdominal, Chest, Thoracic, and so on). The administrator then associates the sections with worklists. You can filter which worklists appear in this list by changing your **Sections** preferences.

Example Worklist

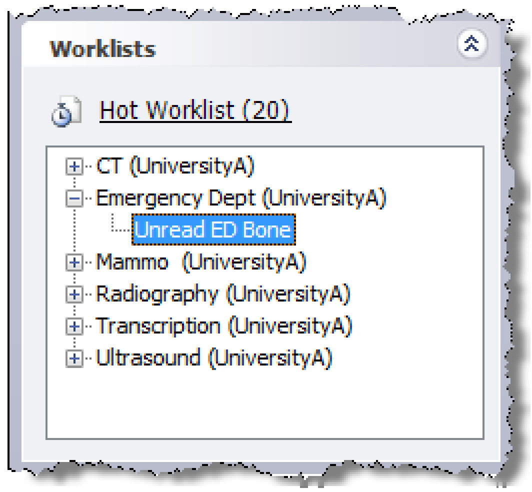
The following illustration shows an example worklist created by an administrator.



The worklist is entitled **Unreported ER CT Exams**. The left side of the window contains all of the statements that make up the worklist expression. Notice in this example that the administrator is concerned with **Report Status**, **Modality**, and the date the report was **Last Modified**. Administrators can create worklists built on just about any criteria needed.

To use a worklist to filter your Explorer screen results:

1. Expand one or more of the worklist groups in the **Worklists** search area.
2. Select a worklist as your filter.



The results filtered by the worklist appear in the **Explorer** window.

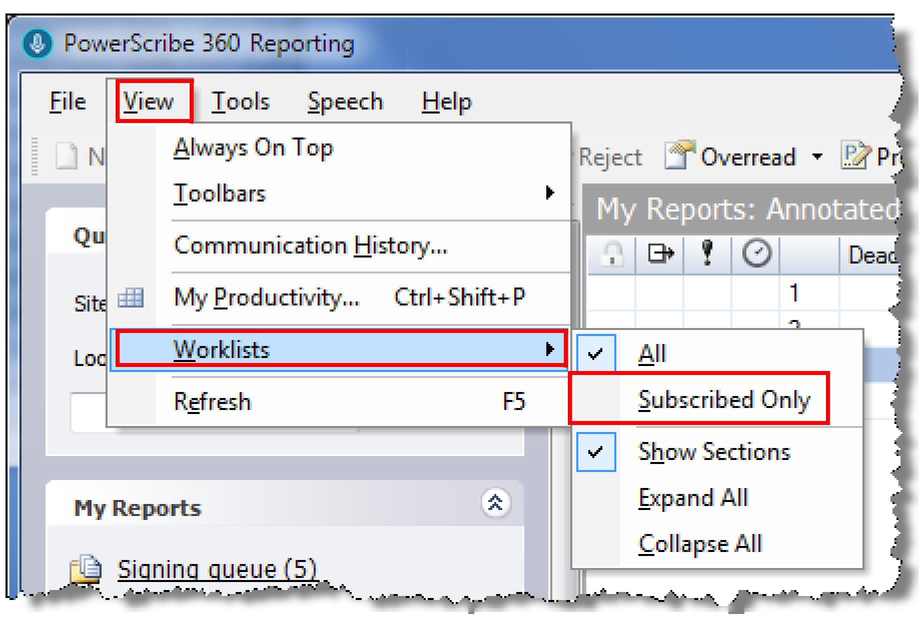
Limiting Which Worklists You View

Note: *Your system administrator can set a privilege that allows you to choose to see either all of the worklists, or only subscribed worklists. If you do not have this permission, you will not see the All and Subscribed items shown in the illustration below.*

Depending upon how worklists are used at your facility, you can view all worklists, or you can limit the worklists that appear by selecting **Subscribed Only** from the menu bar.

To limit the worklists that appear in the Worklists search drop-down list:

- Click **View** > **Worklists** and select **Subscribed Only**.



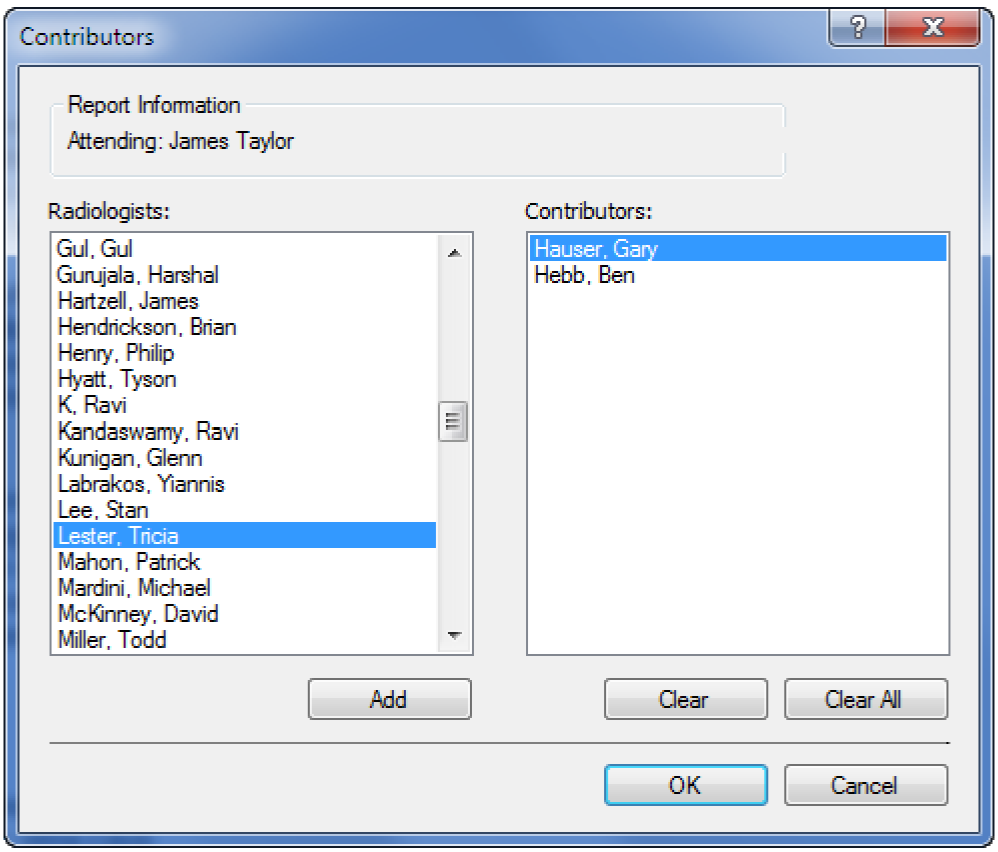
Add Contributors

Use the **Contributors** dialog box to identify additional radiologists who helped create the report (other than the attending and resident).

Note: *Adding a contributor to a report does* ***not*** *send a copy of the report to the contributor.*

To insert a contributor into your report:

1. In the **Report Editor** window, select **Properties** from the navigation panel and click the **Insert Contributors** link (or click **Insert > Contributors** from the menu bar). The **Contributors** dialog box opens.



2. From the **Radiologists** list, select the name, or names of the radiologists you want to add as contributors and click **Add**.
3. To remove a contributor, select the name from the **Contributors** side of the dialog box and click **Clear**. To remove all contributors from the list, click **Clear All**.
4. When your contributors list is correct, click **OK**. The names you selected appear in the **Contributors** section of **Properties**.

Assign Orders

You can assign an *unreported* order to a radiologist. Assigned orders appear in the **Assigned queue** under **My Reports**.

To assign an order:

1. Select an unreported order to assign.
2. Click **Tools > Assign**. The **Assign Orders** dialog box opens.

3. Select a radiologist from the drop-down list; the note is optional.
4. Click **OK** to assign the selected order.

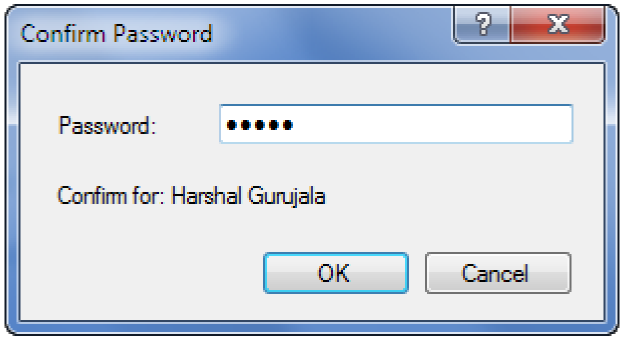
Use Attending Sign from Resident Workstation

If your *PowerScribe 360 Reporting* system administrator has selected a specific permission for your site (**Allow attending signoff on resident login**), an attending provider can sign a report from your workstation while you are logged into the workstation.

To have an attending provider sign a report from your workstation:

1. In the **Explorer** window, select the report you want the provider to sign. (Or you can open the report in **Report Editor** if you choose.)
2. If you need to do so, click **Tools > Change Attending** and select the attending provider who is about to sign your report.

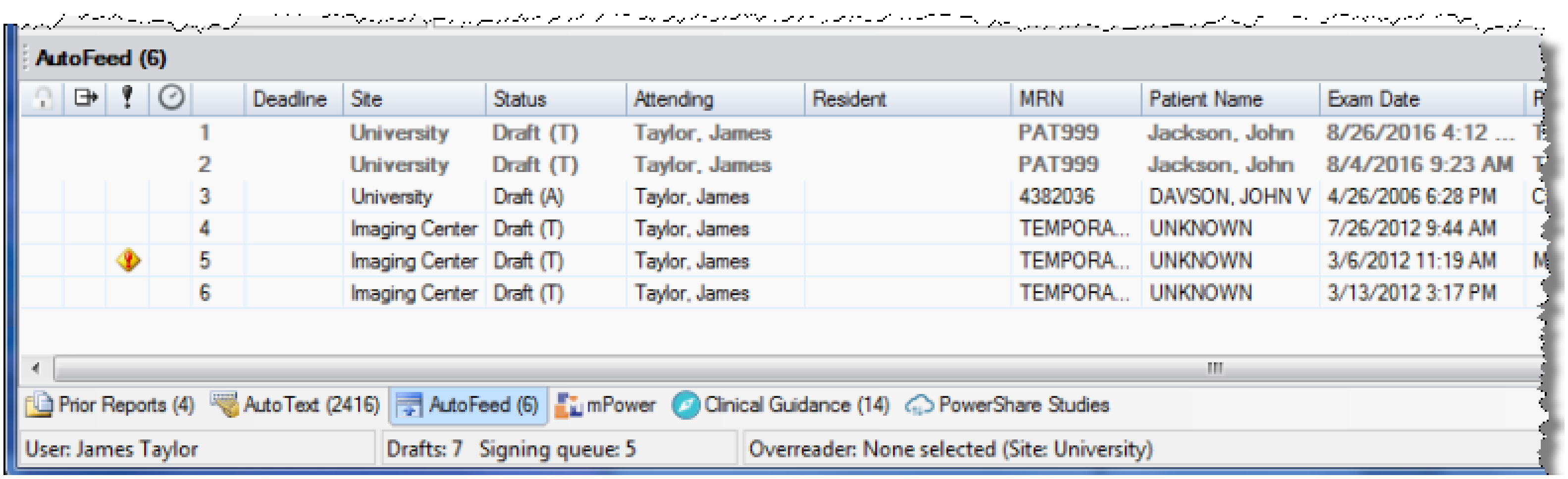
3. Press the **Shift** key and click the **Approve** button (or press **Shift+F12**). The **Confirm Password** dialog box opens with the attending provider's name shown next to the words **Confirm for**.



4. Have the attending provider enter her password and click **OK**.

AutoFeed

The AutoFeed tab shows a list of files that are in your orders queue, based on the type of search you performed in the Explorer window. As the reports from your search are loaded into your computer sequentially, the information turns from black to a gray text. In the illustration, the first two reports in the list have already been loaded; the others have not.



Example

If you selected the **Signing Queue** link (from the **My Reports** section) in **Explorer**, and then clicked the **Start AutoFeed** icon (in **Explorer**), the **Report Editor** opens, and the **AutoFeed** section also opens, showing the reports from your signing queue. The first report in the list appears in the **Report Editor** window. After you sign the first report, the second report automatically opens in the **Report Editor**, and so on.

Note: *If you decide to start with a report other than the first one in your* ***Explorer*** *search results list, AutoFeed does* ***not*** *return to* ***Explorer*** *and pull in those first few reports. To access those first reports, you must return to the* ***Explorer*** *window and start AutoFeed again.*

If you did not click the **AutoFeed** icon in the **Explorer** window and want to view the queue, click the AutoFeed tab in the bottom left corner of the main screen. Note that the **AutoFeed** tab has a push-pin which allows you to hide the tab, or keep it open during your session.

Other AutoFeed Features

- From the **Report Editor** window, you can turn AutoFeed off or on by clicking the AutoFeed icon on the tool bar. If you turn off AutoFeed, you are returned to the **Explorer** window when you finish the current report.
- If there are no more orders or reports in your original query, you are returned to the **Explorer** window when you finish the last report.
- To view a list of upcoming reports from your query, click the AutoFeed tab located in the lower-left portion of the Report Editor window near the Prior Reports and AutoText tabs. (Note that this is a read-only list; you cannot select a report from it.)
- With this feature selected, a report that is in the process of being saved appears in the **Explorer** window in a gray italicized font.
- If you attempt to open a report that is being saved, you will get a message box explaining that the report is being saved.
- If you attempt to log out of the application while a report is being saved, a message box opens asking you to Please wait.
- If you decide to log out of the application during the save, you are notified that you might lose some of your data. Best practice: wait until the save is completed.

Advanced Training Topics

Not everyone has the same set of training requirements. Use the following check list to create a list of advanced training topics to cover for each customer.

☐	**Review of Editing Techniques** For information on this feature, see *Review of Editing Techniques* beginning on page 245.
☐	**Additional Voice Commands** For information on this feature, see *Additional Voice Commands* beginning on page 245.
☐	**Training Pronunciation** For information on this feature, see *Training Pronunciation: The Train Words Dialog Box* beginning on page 246.
☐	**Using the Vocabulary Editor** For information on this feature, see *Using the Vocabulary Editor* beginning on page 249.

Note: *AutoText is considered an advanced training topic. For information on creating and using AutoText, see Chapter 8 of this manual, AutoText – Beginning and Advanced.*

Review of Editing Techniques

The following is a short review of the report editing voice commands and best practice tips presented earlier in this section:

- **“Select <x>”**: Use to select one or two words. Once selected you can either replace them by dictating, or delete them by using the “Scratch That” voice command.
- **“Scratch that”**: Deletes the selected word or words completely.
- **“Select <a> through <b>”**: Use to highlight a range of consecutive words. You can use more than one word as a starting or ending point. In some cases, a single word, especially articles such as **“a”** or **“the”** can cause the wrong text to be selected since they frequently occur more than once in many reports.
- As a best practice, have providers hold the microphone in their left hand and use the mouse with their right. For left-handed providers, it’s mouse left, microphone right.
- Do not pause or take a breath between the command **“Select”** and the word you want to select. For example, if **“Select unremarkable”** does not immediately highlight **unremarkable**, the system interpreted what you said as dictation instead of a voice command. This occurs when you pause too long between the command itself and the word you want to select.
- If you selected the word you want to delete with your mouse instead of the **“Select <x>”** voice command, you must use the **“Scratch that”** voice command to remove the word. Otherwise, the audio file still contains the word, even though the text portion is gone. Using the voice command removes both the text and the audio.

Additional Voice Commands

The following table explains additional voice commands that more advanced users might find useful.

Voice Command	Description

Training Pronunciation: The Train Words Dialog Box

The two most commonly used methods that allow you to train words or phrases that are consistently misrecognized are **Train Phrase** and **Vocabulary Editor**. In each method, training takes place in the **Train Words** dialog box.

This section first introduces you to the steps required to train a word or phrase, and then shows you methods you can use to access the **Train Words** dialog box, where you will use the steps to train your word or phrase.

Specific Steps for Training a Word or Phrase

Once you are in the **Train Words** dialog box (no matter which method you use to get there), be sure to use the following steps to train your word or phrase.

1. Say the word out loud two times, pronouncing the word as you would in one of your dictations.
2. After practicing the word twice, click **Go** to begin recording, and dictate the correct pronunciation of the word. The word or phrase is removed from the text box.
3. Click **Go** *a second time* to begin recording, and dictate the correct pronunciation of the word a second time. The gray dot below the text field briefly flashes green.
4. When finished, click **Done** to save your work and exit.

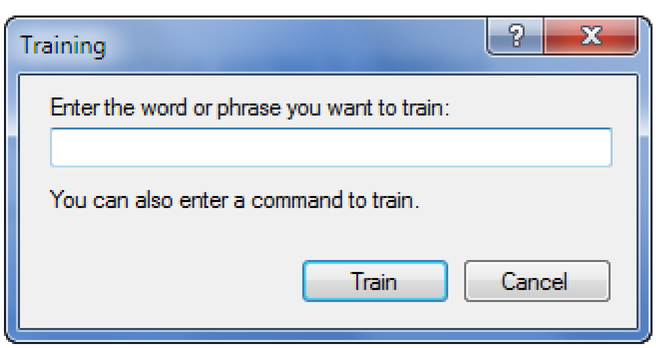
Methods for Accessing the Train Words Dialog Box

This section shows the two most commonly used methods (**Train Phrase** and **Vocabulary Editor**) to access the **Train Words** dialog box, as well as an alternate, less commonly used method (**Add Word**).

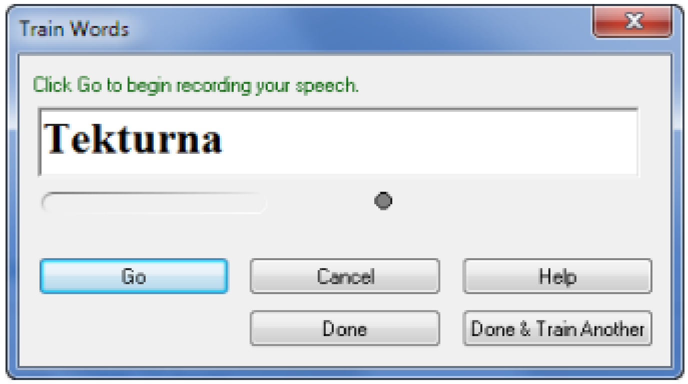
Use Train Phrase

1. Say **“Train Phrase”** (or click **Speech > Train Phrase**).

__Note:__ If you say __“Train Phrase”__ with no text selected, or if you select __Speech > Train Phrase__ from the menu bar, the __Training__ dialog box opens. Type the word or phrase you want to train, and click __Train__ to open the __Train Words__ dialog box.

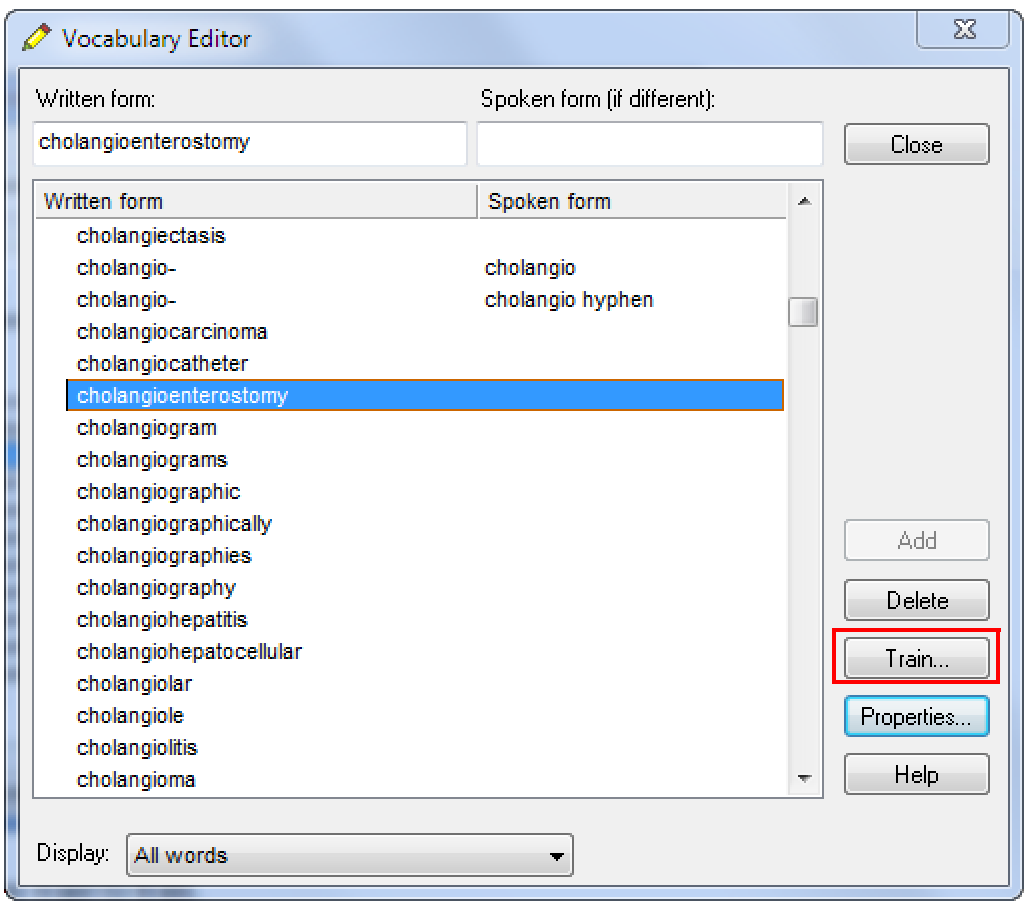


The **Train Words** dialog box opens, displaying the word or phrase you want to train.



Use Vocabulary Editor

1. Select **Speech** > **Vocabulary Editor** from the menu bar. The **Vocabulary Editor** dialog box opens.



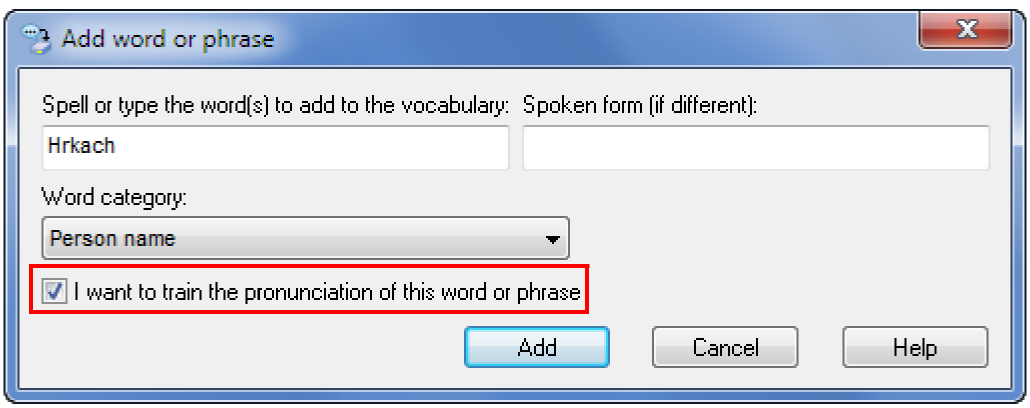
2. Select the word you want to train.

3. Click **Train**. The **Train Words** dialog box opens, displaying the word or phrase you chose to train.

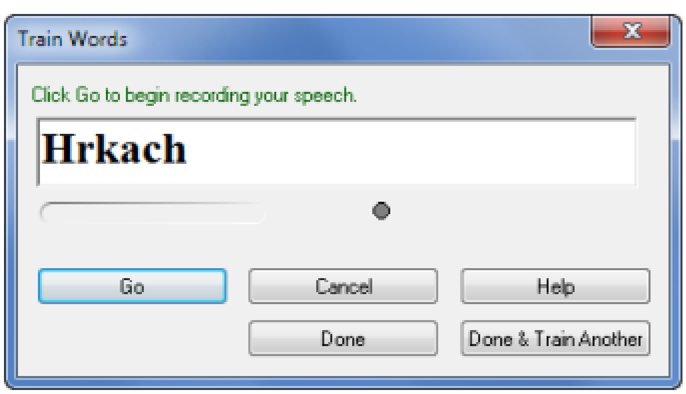
Alternate Method: Add Word

A less frequently used method of adding and training words is through the **Add Word or Phrase** dialog box.

1. Click **Speech > Add Word**. The **Add Word or Phrase** dialog box opens.
2. Enter the word you want to add and select a category, if applicable.
3. To train the word from this dialog box, select the **I want to train the pronunciation of this word or phrase** check box.



4. Click **Add**. The **Train Words** dialog box opens.

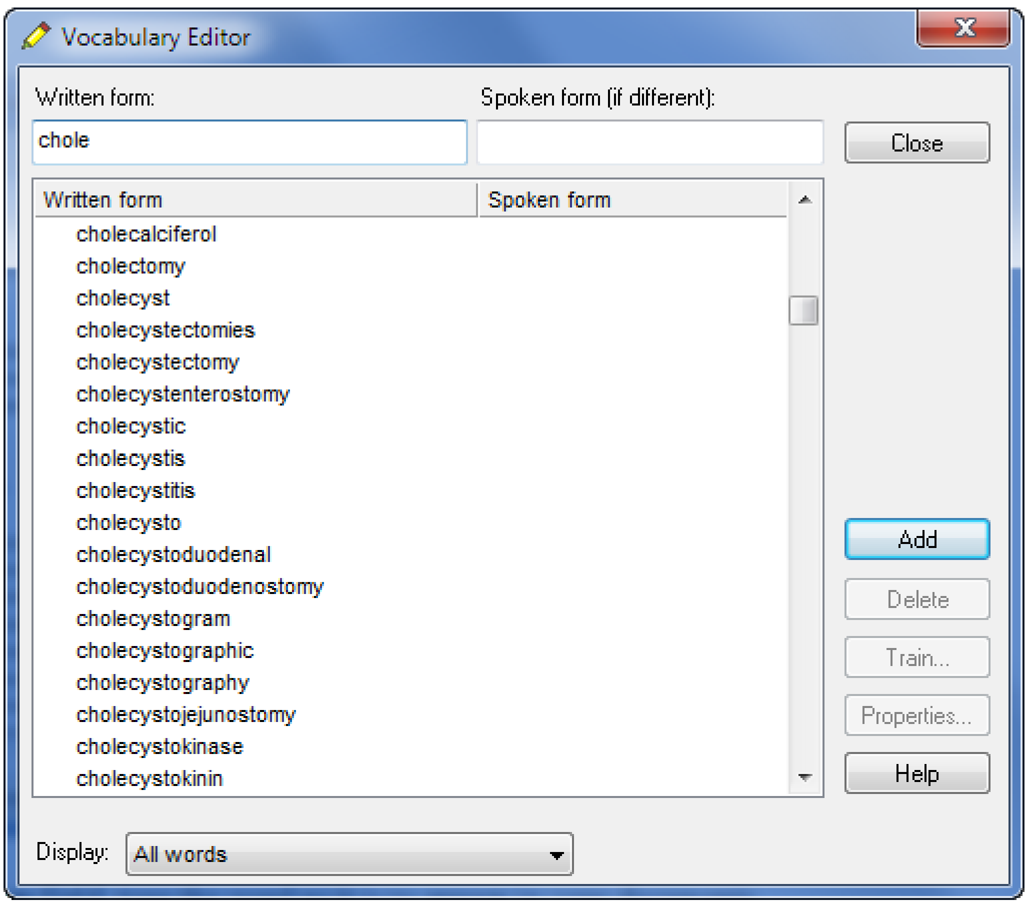


Using the Vocabulary Editor

Along with being an access point to the **Train Words** dialog box for training pronunciation, the **Vocabulary Editor** allows you to add words to the speech vocabulary and modify word properties. The **Vocabulary Editor** provides access to the written form and spoken form (if different) of all words in the vocabulary.

To add a word to the speech vocabulary:

1. Select **Speech** > **Vocabulary Editor** from the menu bar. The **Vocabulary Editor** dialog box opens.



2. In the **Written form** field, type the word as it is to appear in your documents.
3. If the word is pronounced differently than it is spelled, type the word phonetically in the **Spoken form** field.
4. Click **Add**. The word and its pronunciation are added to the vocabulary.

To modify the properties of a word in the vocabulary:

Caution: *Modifying the properties of an* ***existing*** *word in the* ***Vocabulary Editor*** *is intended for advanced users. Use extreme care when making changes to word properties, because unexpected results can occur.*

1. Select **Speech > Vocabulary Editor** from the menu bar. The **Vocabulary Editor** dialog box opens.
2. Select the word you want to change and click **Properties**.
3. Make the changes as needed.
4. Click **OK**.

Chapter 11

AutoText for Providers

Objectives

In this chapter you will:

- Learn about AutoText basics, naming conventions, and best practices
- Create AutoText with:
  - Text fill-in fields
  - Numeric fill-in fields
  - Pick lists
  - Fill-in fields with default text or numeric values
  - A reference to another AutoText
  - Procedure relevancy
- Use merge fields and custom fields in AutoText
- Create default AutoText
- Search for AutoText
- Clone AutoText

Introduction to AutoText

A good place to begin learning about AutoText is by asking the following questions.

What Is AutoText?

AutoText is standard text providers or editors can insert into reports. AutoText are sometimes referred to as macros or templates. They can be of any length and can contain plain text, standard headings, numbered lists, fill-in fields, data retrieved from the RIS, or other items.

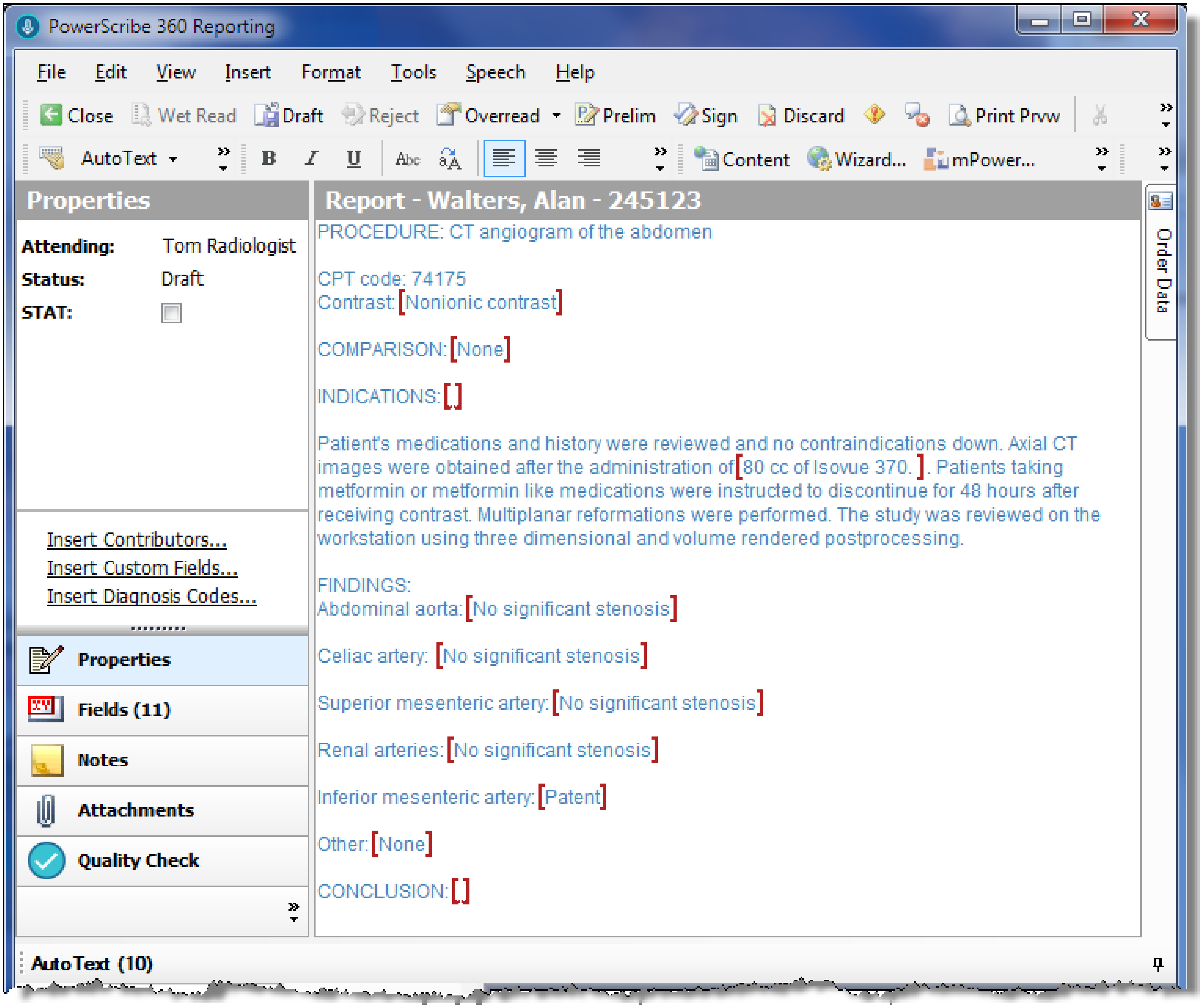
Who Can Create AutoText?

Radiologists and other providers can create their own AutoText, for sharing with other users or for their own personal use. (Administrators can create and edit AutoText on behalf of a site or a user.)

Where Do I Create AutoText?

You create AutoText in the AutoText Editor section of the *PowerScribe 360 Reporting* client application.

The illustration below shows an example report (in the Report Editor) that contains an AutoText with fill-in fields.



Note: *In this example, there are brackets around some fields. You can set brackets on or off in the AutoText preferences: Select* ***Tools > Preferences****, and then in the* ***Reporting*** *node, select* ***Show brackets on fields****.*

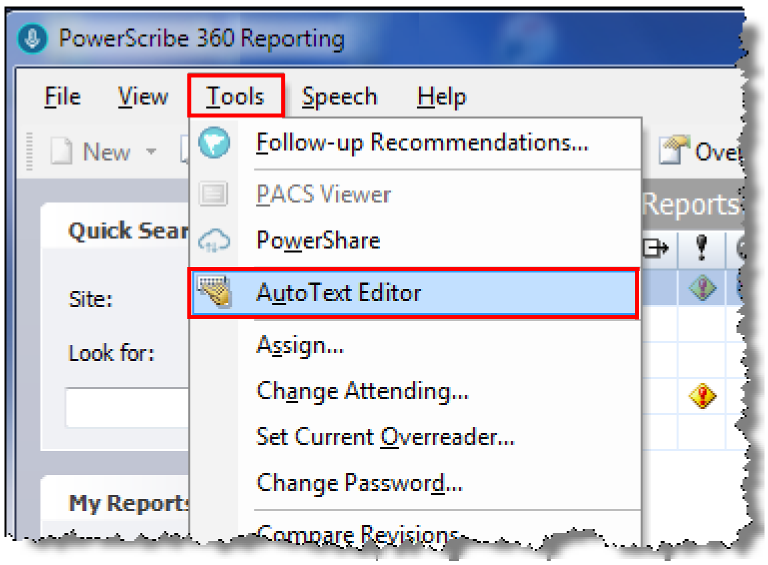
Creating an AutoText

This section provides instructions for creating an AutoText containing only text. Other sections discuss creating AutoText with fill-in fields, pick lists, merge fields, and other advanced features.

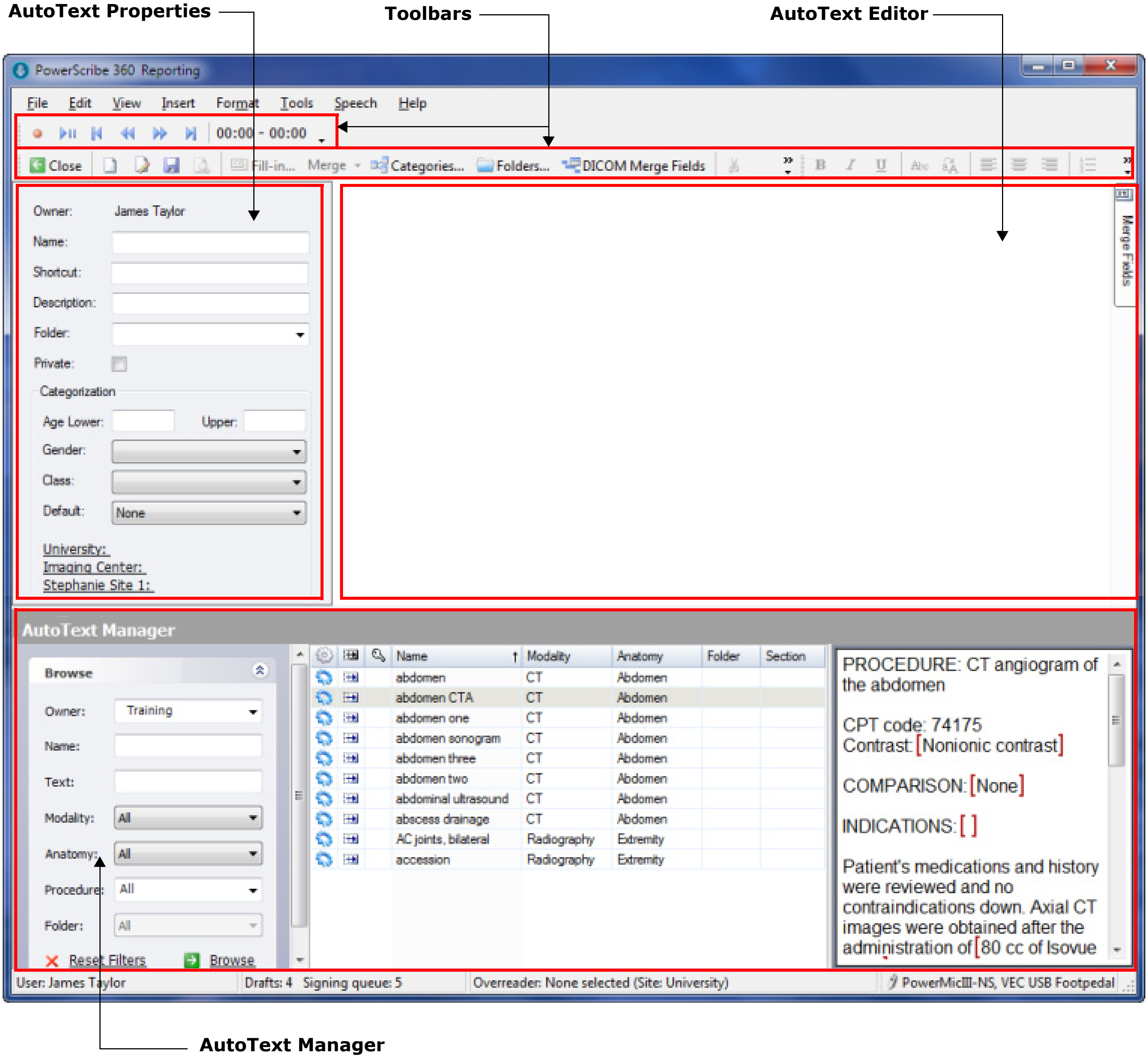
To create an AutoText, log in to the *PowerScribe 360 Reporting* client application and use the AutoText Editor.

To open the AutoText Editor:

1. Select **Tools > AutoText Editor** from the menu bar. (If you are already editing a report in Report Editor, click the AutoText icon  to open the AutoText Editor.)



The **AutoText Editor** window opens.



2. In the AutoText Properties area, type a **Name** for the AutoText. This is the word or phrase you can dictate to invoke the AutoText.

   Tip: *Remember to follow these naming conventions to ensure that the speech software can distinguish the AutoText name from other dictation:*

   - Use at least two syllables.
   - Use lowercase, except for initials. For example, type **CT chest**.
   - All AutoText belonging to an account must have unique names.

3. Optional: In the **Shortcut** field, type the characters the transcriptionist/editor or dictation user can type to invoke the AutoText, if applicable.

   Tip: *Remember to follow these naming conventions for shortcuts:*

   - Do not include any spaces in the shortcut. (Valid examples include **ctchest**, **mrihead**)
   - Shortcuts for AutoText belonging to an account must be unique.

4. Optional: Type a **Description** of the AutoText.
5. If needed, assign the AutoText to a folder using the **Folder** drop-down list. (For more information on working with folders, see Managing AutoText Folders, beginning on page 259 of this guide.)
6. If needed, select the **Private** check box. Marking an AutoText as **Private** prevents other non-administrative users from seeing it.
7. Set a **Lower** and **Upper** age limit in years, if applicable. If you set an age limit, the AutoText is available only for reports where the patient's age falls within the specified range. For example, you might select a lower value of **0** and an upper value of **13** for an AutoText that is exclusively for use in pediatric reports. A range from **0** to **13** years includes all patients up to 12 years, 23 months of age.

   Note: *If you create an AutoText that specifies an age limit (for example, **0** to **13** years) you must create at least one additional AutoText to cover all of the remaining ages (for example, **14** to **110**).*

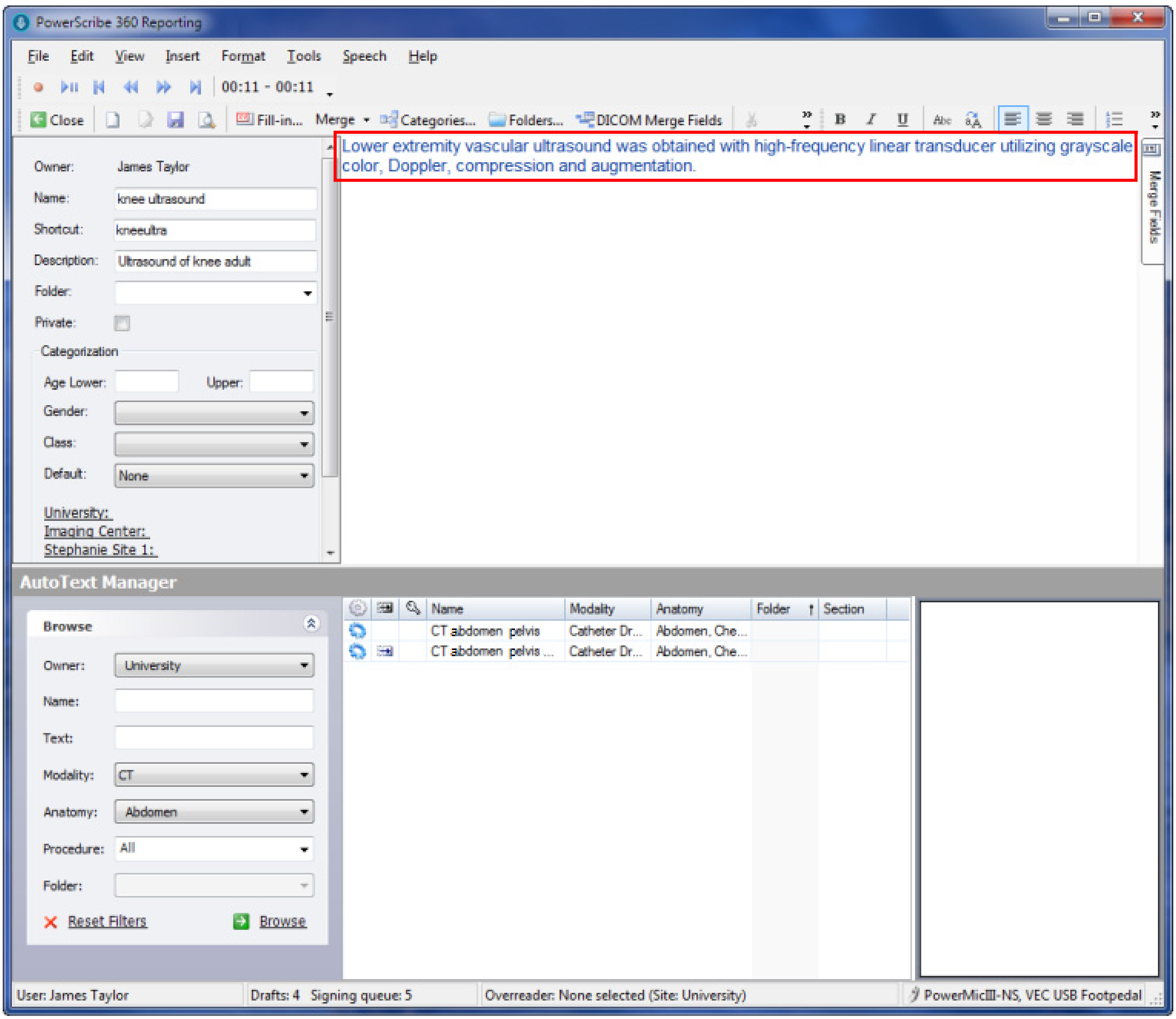
8. From the **Gender** drop-down list, select either **Male** or **Female**, if the AutoText is gender-specific. If you select a gender, the AutoText is available only during dictation of reports for patients of the indicated gender. Otherwise, it is available for all reports.

   Note: *If you create an AutoText that specifies a gender (for example, **Male**) you must create an additional AutoText for **Female**.*

9. From the **Class** drop-down list, select a patient class, if applicable.

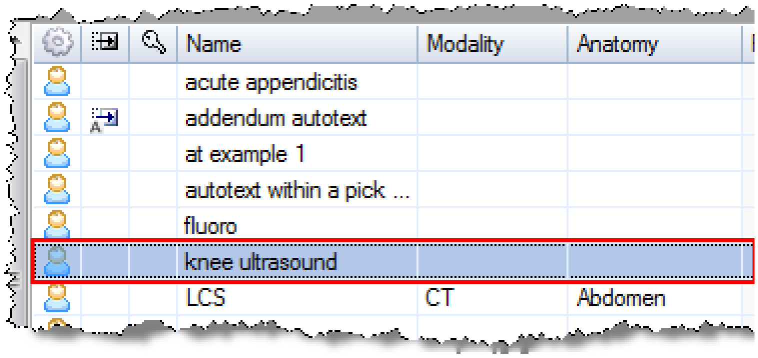
   Note: *If you create an AutoText that specifies a class (for example, **Inpatient**) you must create at least one additional AutoText and select **Not Applicable** as the class.*

10. From the **Default** drop-down list, select the appropriate item. Marking an AutoText as a default automatically launches the AutoText in Report Editor based on relevancy. Choose from the following:
    - **Addendum**: Make this AutoText a default only for an addendum.
    - **Report**: Make this AutoText a default only for a report.
    - **None**: Don't make this AutoText a default.
11. If needed, associate one or more procedure codes with the AutoText. (Refer to Creating AutoText Relevant to a Procedure, beginning on page 279.)
12. Dictate or type the AutoText. The text appears in the work area.



13. When you have finished defining the AutoText, say **“Save AutoText”** (or click the **Save** icon in the toolbar, or press **Ctrl+S**).

    The AutoText is stored in the system and appears in the list at the bottom of the window.



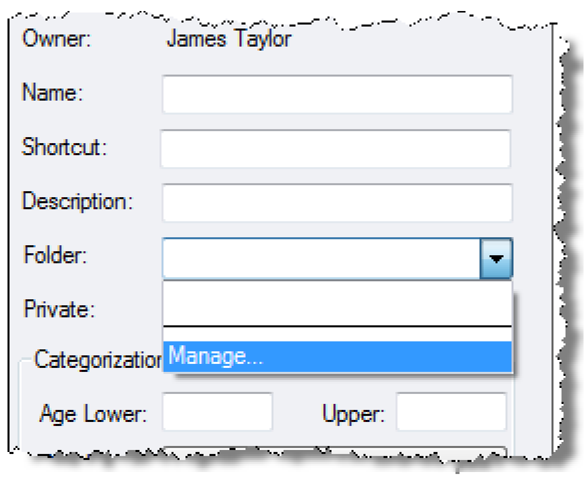
14. Test the AutoText by using it in a dictation.

Managing AutoText Folders

To help you organize your personal AutoText, you can now create one or more AutoText folders, and then assign AutoText to those folders. You can access the AutoText folders from the Report Editor window when creating and editing your reports.

Create an AutoText Folder from the AutoText Editor

1. Log in to the client application and open the AutoText Editor.
2. Click the drop-down arrow next to **Folder** and select **Manage**.

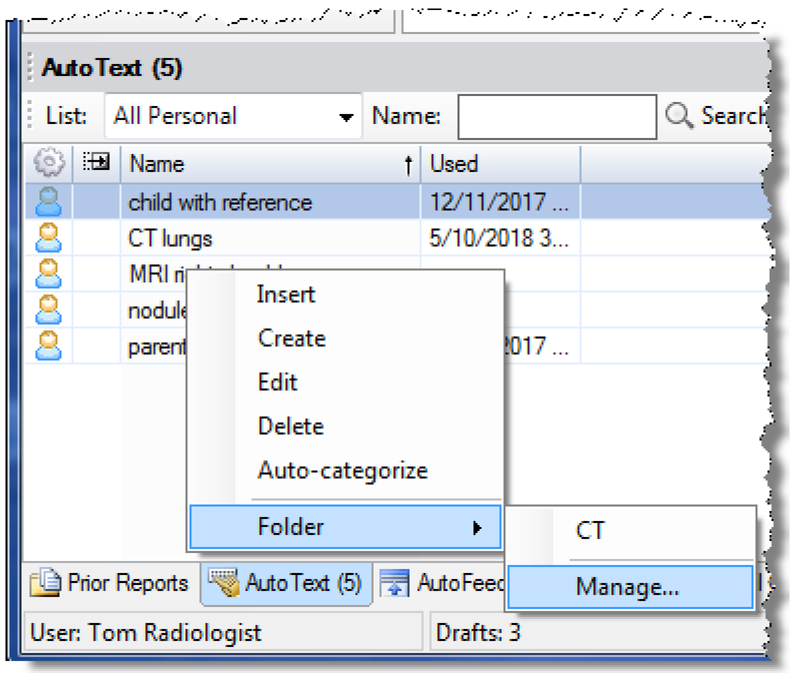


__Note:__ You can also click the __Folders__ button 

in the task bar to open the __AutoText Folder Manager__ dialog box.

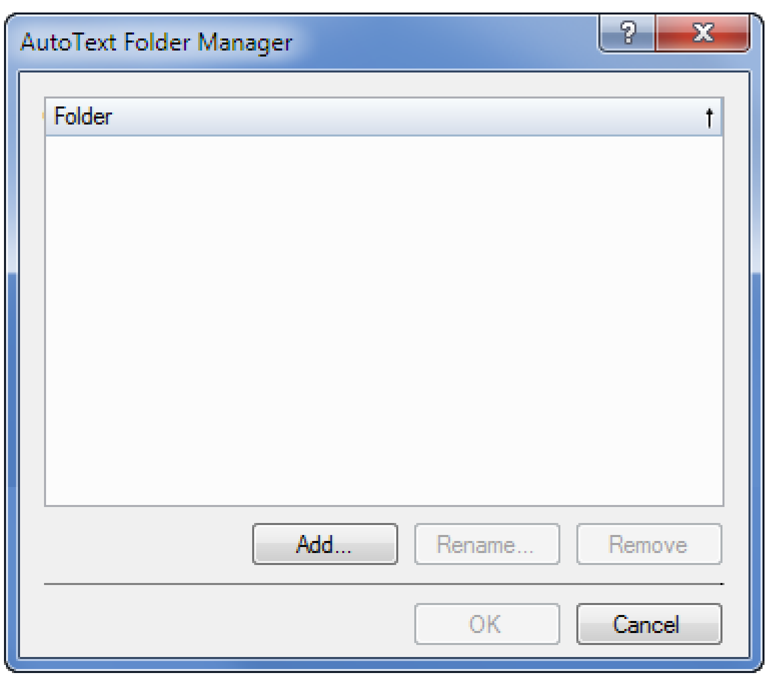
Create AutoText Folder from the Report Editor

1. From Report Editor, click the **AutoText** tab at the bottom of the window.
2. Right-click an AutoText and click **Folder**.
3. Click **Manage**.

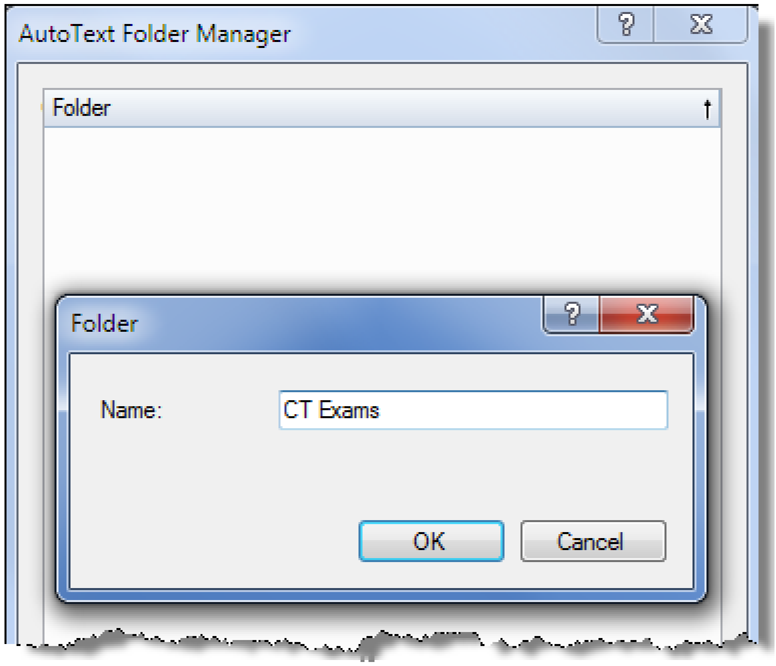


AutoText Folder Manager

1. The **AutoText Folder Manager** dialog box opens.



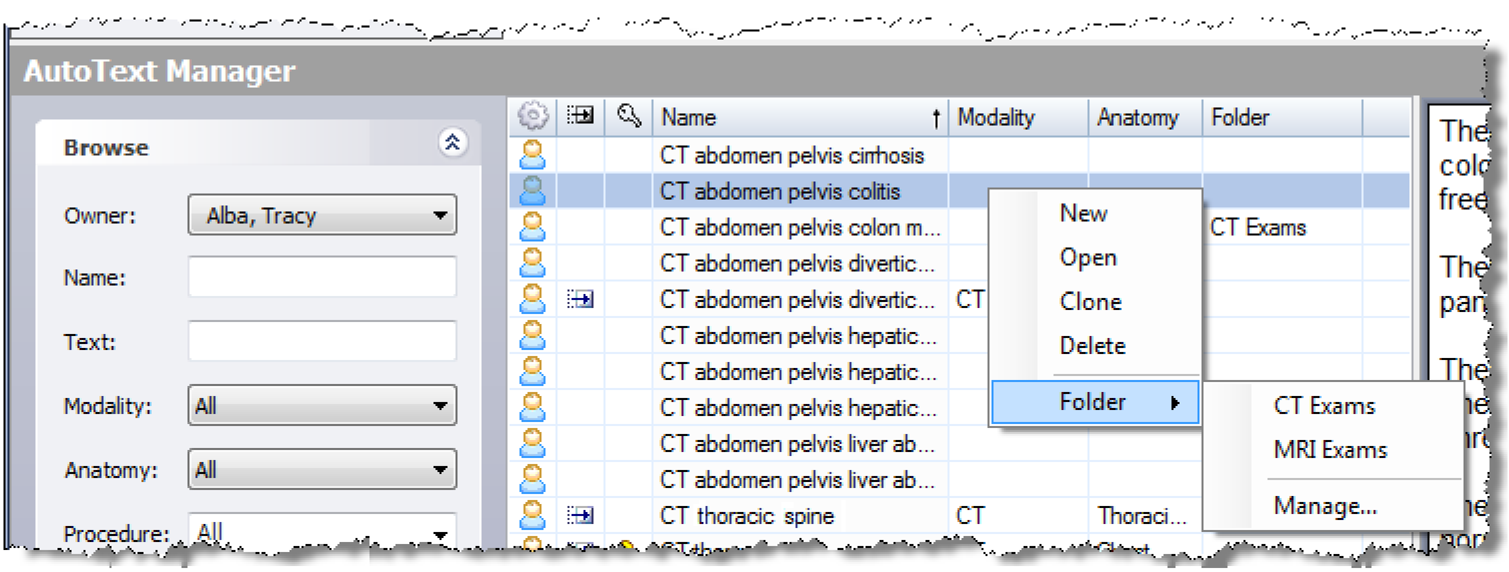
2. Click **Add**, enter a name for the folder, and click **OK**.



3. Repeat step 3 to create additional folders.
4. When finished, click **OK**. The folders you created now appear in the **Folder** drop-down list.

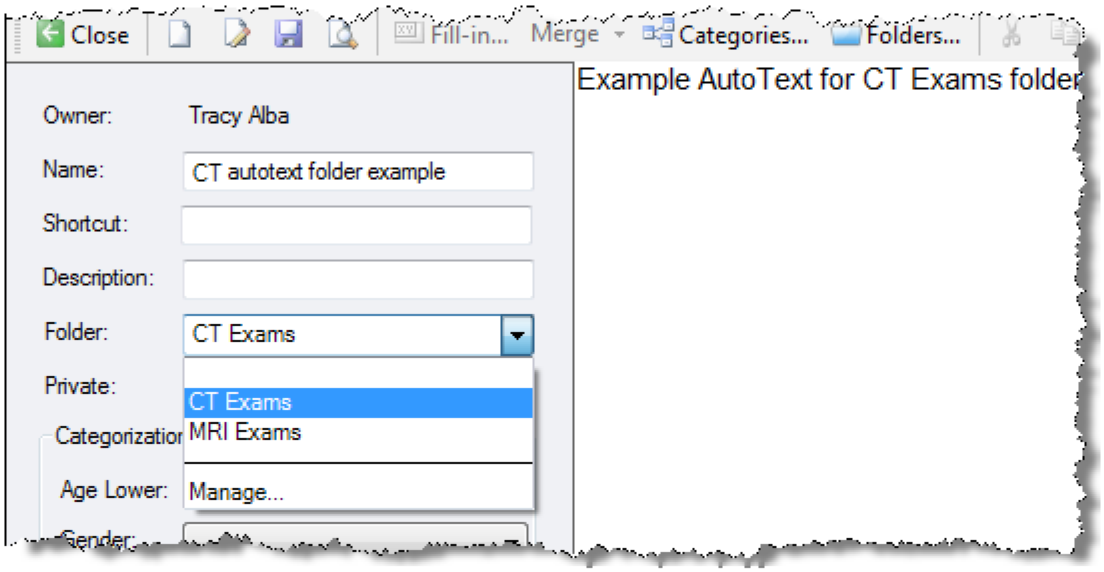
Assign an Existing AutoText to a Folder

1. From either the AutoText Editor or the Report Editor, locate the AutoText you want to assign to the folder.
2. Right-click the AutoText name and select **Folder**.
3. Select one of the folders you created. The folder name appears in the **Folder** column of the AutoText Manager table.

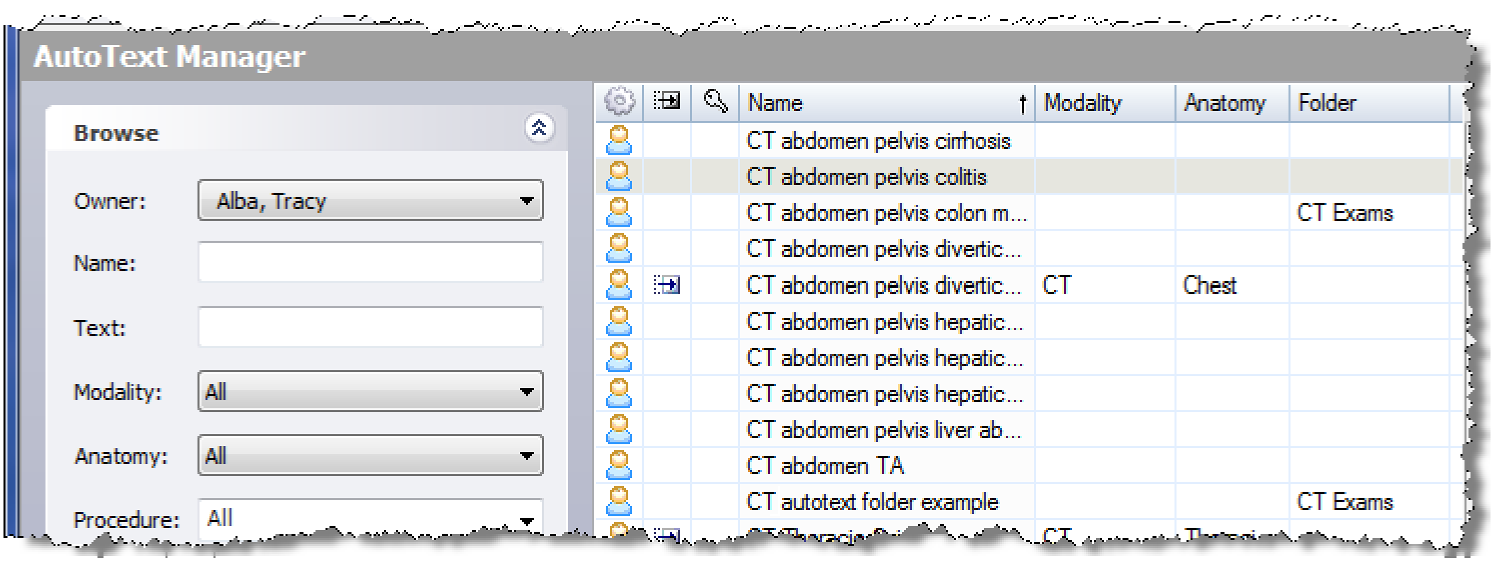


Assign a New AutoText to a Folder

1. In the AutoText Editor, create your new AutoText.
2. From the **Folder** drop-down list, select the name of the folder into which you want to place the AutoText.



3. Click **Save**. The AutoText appears in the AutoText Manager list with the folder name displayed in the **Folder** column.



Creating AutoText with Fill-In Fields

In this section you will create AutoText that contain text fill-in fields, numeric fill-in fields, pick lists, other AutoText, and default values.

A fill-in field is a simple way for you to insert variable information, for example, a dosage or a measurement, within a block of standard text. You can either dictate or type the information in the field. A fill-in field is also a way to reference other AutoText.

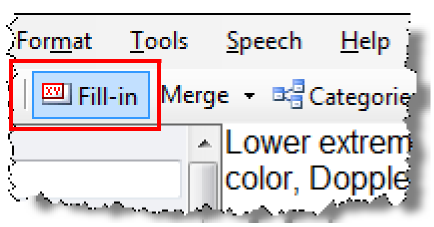
The procedures below assume that you have created a new AutoText and that the AutoText is open for editing in the *PowerScribe 360 Reporting* client application's **AutoText Editor**.

Creating a Text Fill-In Field

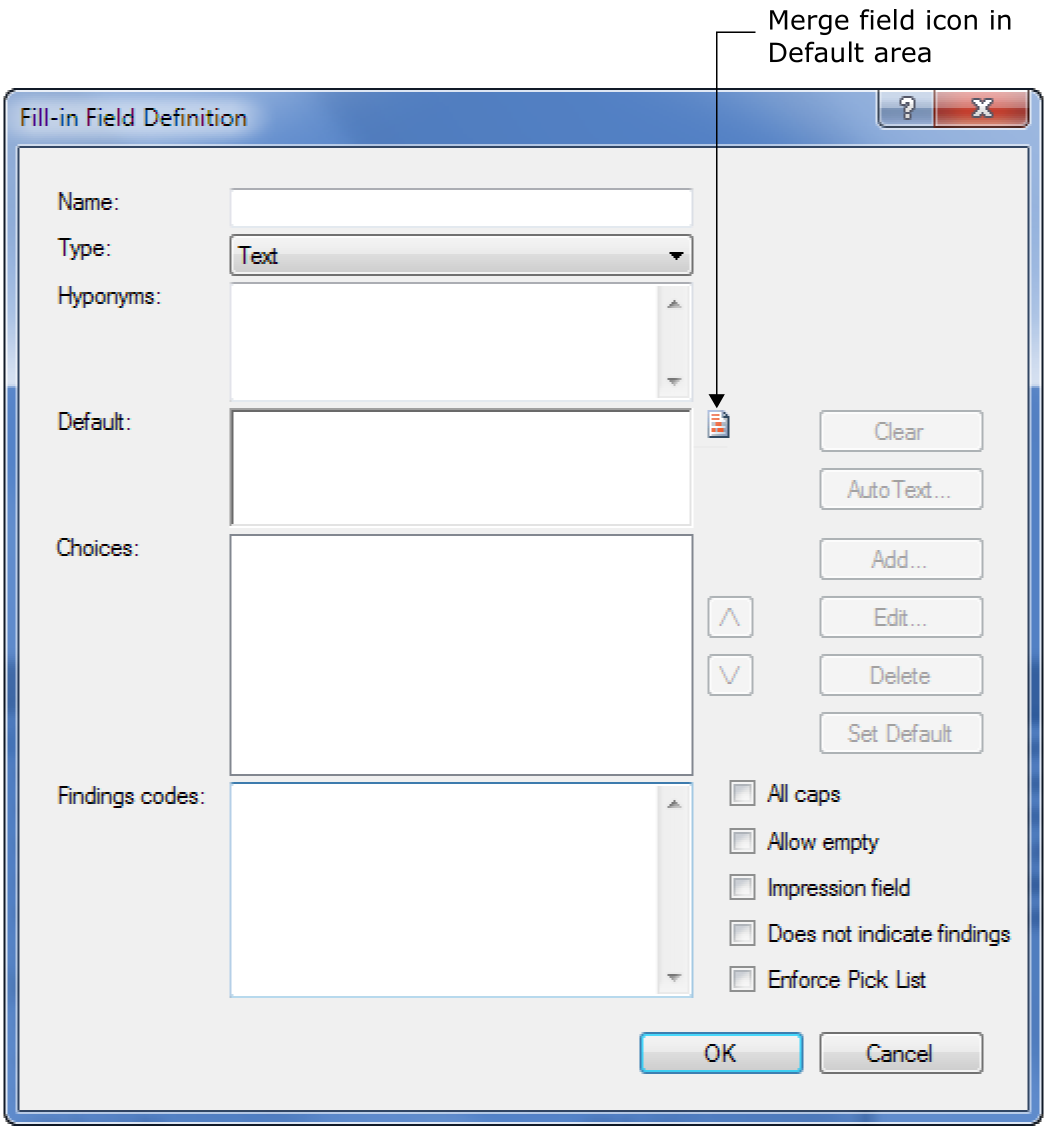
A text fill-in field contains alphanumeric characters. If you know the value you will most often enter or dictate in a particular fill-in field, you should assign a default value to the field. For more information on using default values in fields, refer to Creating Default AutoText, beginning on page 276.

To create a text fill-in field:

1. With the AutoText open for editing, click to place the insertion point at the position where you want the fill-in field.
2. Say **"Insert Field"** (or click the **Fill-in** button in the toolbar).



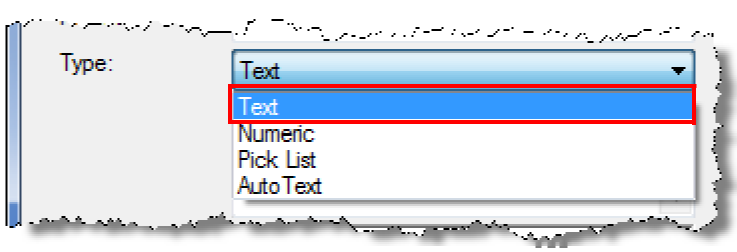
The **Fill-in Field Definition** dialog box opens.



3. Type a **Name** for this fill-in field. This name does not appear in the final document, but is used by the software to reference the field.

Tip: If you select the Enable Talking Fields preference, the field name you provide here is announced through the PowerMic or SpeechMike when you navigate to the field. Refer to *page 69* *for more information about talking fields.*

4. Select **Text** from the **Type** drop-down list.



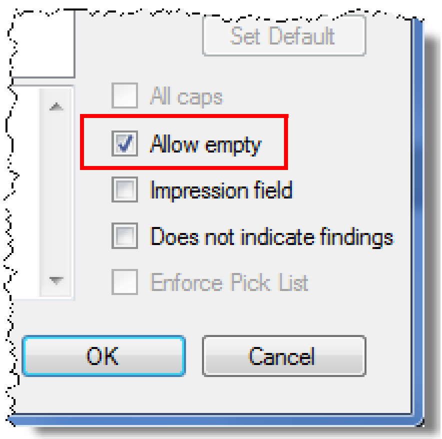
5. If you want to assign a default value to this fill-in field, in the **Default** text box, type the text that is to be the default value in this fill-in field.

Tip: To include a merge field as part of your default text, click the icon to the right of the Default text box and select a merge field from the list that appears.

6. Select the **All Caps** option if you want the entire contents of this field to appear in capital letters if you dictate over it.

Note: *In most facilities, the Impression field is in all caps. (Refer to Creating an Impression Field, beginning on page 320.)*

7. To have the option to leave this field blank, select the **Allow Empty** check box.



8. Click **OK**. The field appears in the AutoText.

Creating a Numeric Fill-In Field

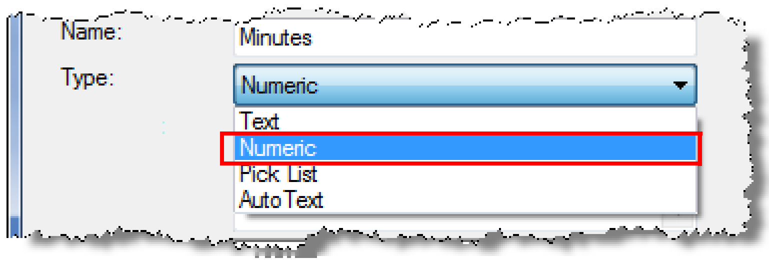
Use a numeric fill-in field to dictate a number. For example, use a numeric field for a dosage, a percentage, or a number of days.

Tip: *You can enter text values in numeric fill-in fields. Defining a field as numeric, however, causes the speech recognition software to expect numbers when that field is active (that is, while it contains the cursor and is accepting input), improving recognition.*

To create a numeric fill-in field:

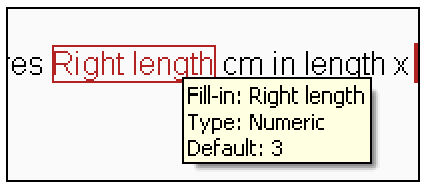
1. With the AutoText open for editing, click to place the insertion point at the position where you want the fill-in field.
2. Say **"Insert Field"** (or click the **Fill-in** button in the toolbar).
3. Type a **Name** for this fill-in field. For example, type **Minutes** for a field in which you must indicate for how long a procedure was performed. This name does not appear in the final document, but is used by the software to reference the field and appears in the left column of the *PowerScribe 360 Reporting* client window during dictation.

4. Select **Numeric** from the **Type** drop-down list.



5. If you want to assign a default value to this fill-in field, in the **Default** text box, type the number that is to be the default value in this fill-in field.

Tip: *While editing the AutoText, float your mouse cursor over a field to see any default value you have defined for it.*



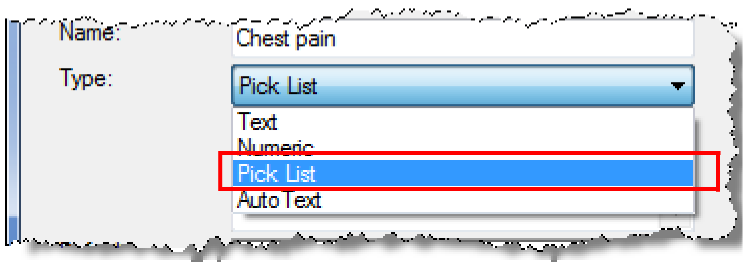
6. To have the option to leave this field blank, select the **Allow Empty** check box.
7. Click **OK**. The field appears in the AutoText.

Creating a Pick List Fill-in Field

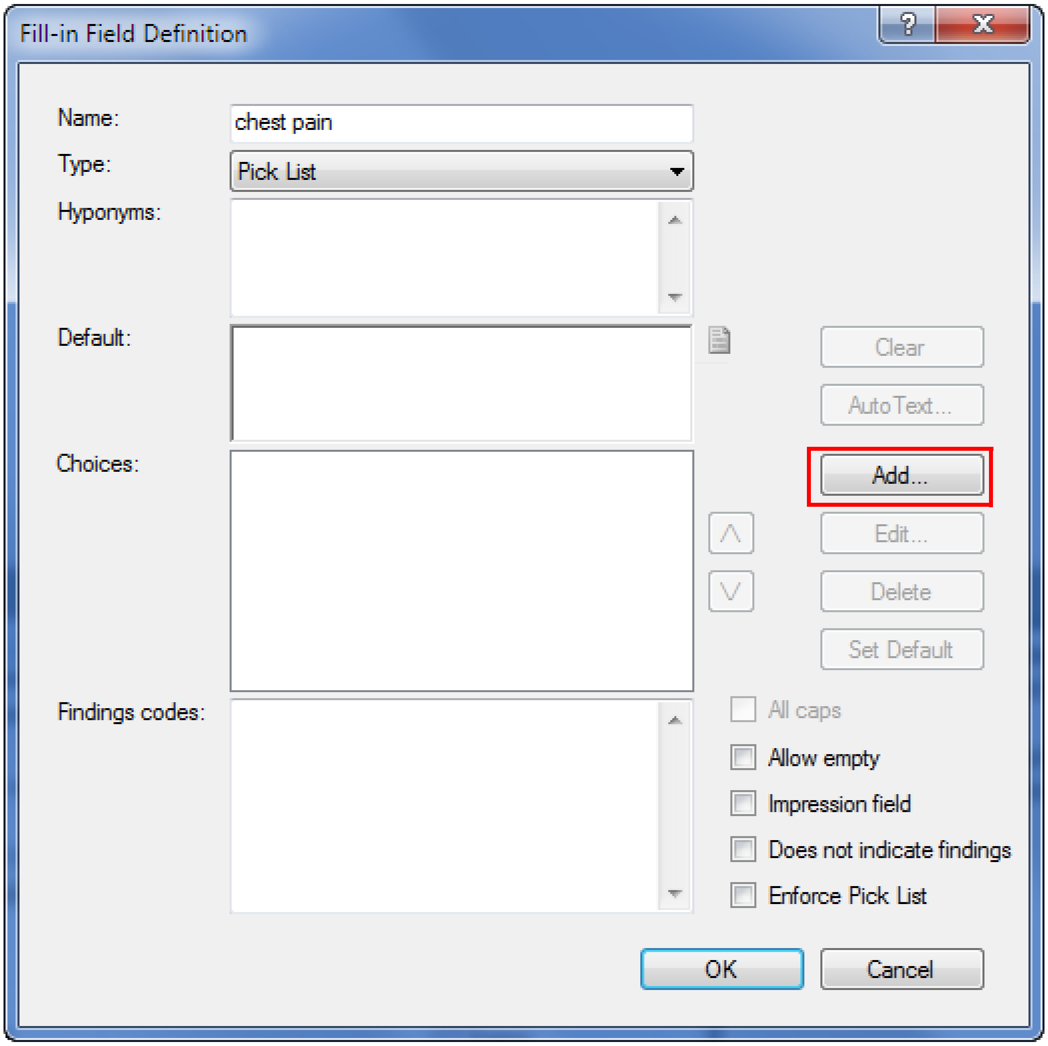
A pick list is a set of choices from which you select one. The choices appear in the AutoText, separated by slashes, while you are creating or editing it. You can then tab to the field and dictate the desired choice; while the field is selected, the available options appear in the left column of the dictation window.

To create a fill-in field with a pick list:

1. With the AutoText open for editing, click to place the insertion point at the position where you want the pick list.
2. Say **"Insert Field"** (or click the **Fill-in** button in the toolbar).
3. Type a **Name** for this pick list. This name does not appear in the final document, but is used by the software to reference the field and appears in the left column of the *PowerScribe 360 Reporting* client window during dictation.
4. Select **Pick list** from the **Type** drop-down list.



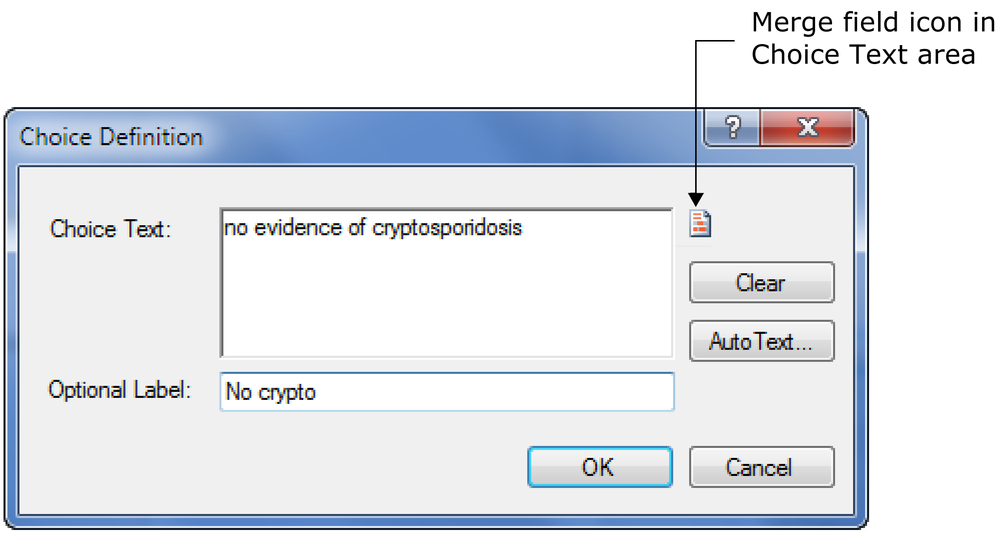
5. Click **Add**. The **Choice Definition** dialog box opens.



6. In the **Choice Text** text box, type the first choice you want to place in the list.

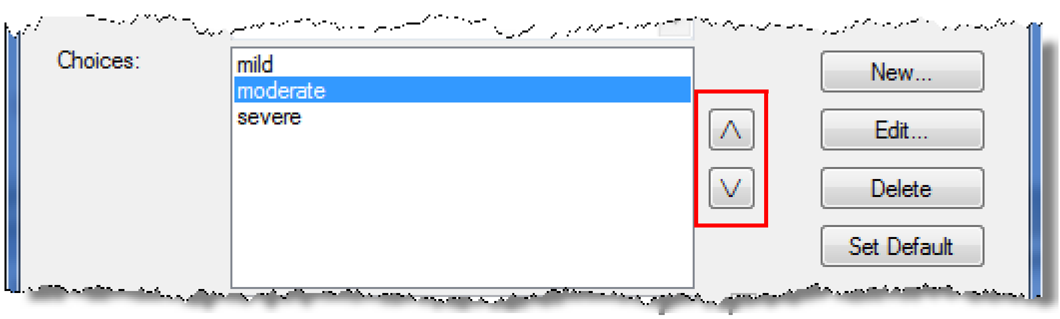
Tip: You can also click the ***Merge Fields*** *icon and select a merge field to use as a pick list choice.*

If the choice is too long to be displayed easily in the list, enter a shorter **Optional Label**. Be sure to use a label that clearly identifies the item. When dictating a report, you can dictate the Optional Label to select the choice, and the report will display the Choice Text.



7. Click **OK**. The choice appears in the list.
8. Repeat Steps 6 and 7 for each choice you want to add to the list.

> ***Tip:*** *You can rearrange the items in the pick list. Select an item and click the Up or Down arrow; repeat this process until the list is organized in the order you want you to see it.*



9. If you want to assign a default value to this fill-in field, select the item that you want to become the default value and click the **Set Default** button.
10. If you want to enforce the pick list choices so that radiologists cannot replace the field, select the **Enforce Pick List** check box.
11. Click **OK**. The field appears in the AutoText.

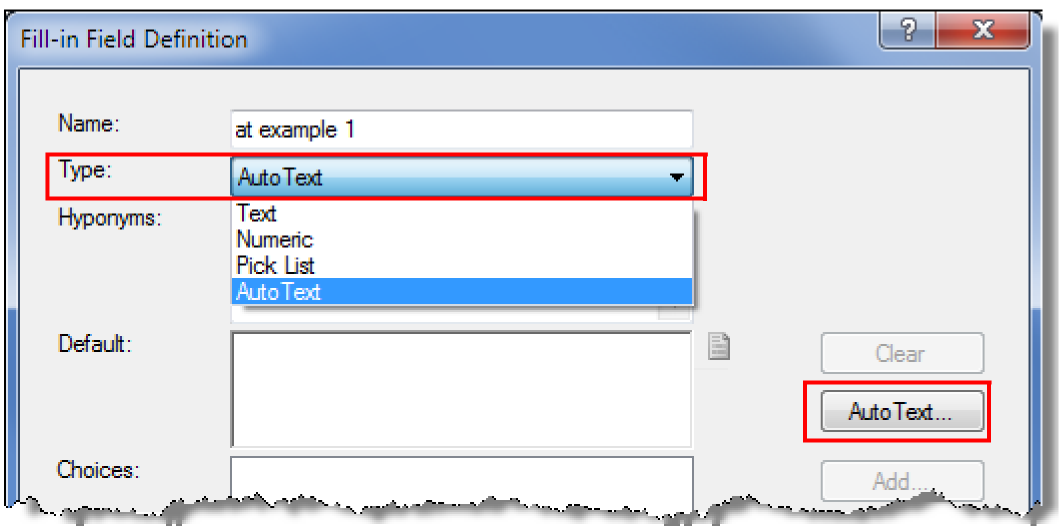
Creating a Fill-in Field That References an Existing AutoText

You can create fill-in fields that reference an existing AutoText allowing the referenced AutoText content to be used within the field. You can use either the **AutoText** type or the **Pick List** fill-in field type to reference an AutoText.

Note: *If a referenced AutoText is deleted or renamed, the reference is no longer valid and the field will be empty when inserted into a radiology report.*

Using the AutoText Type

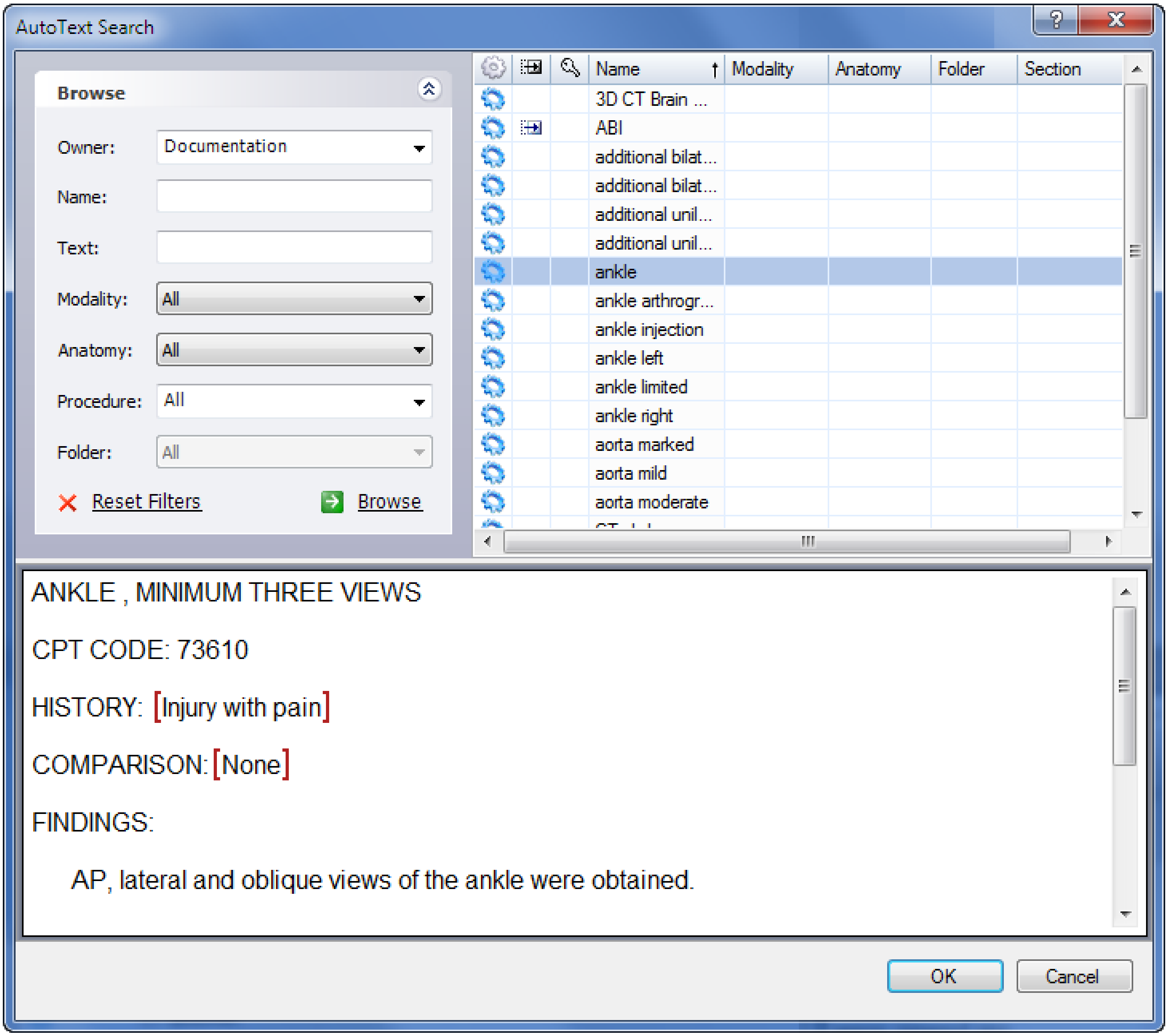
1. Open the AutoText Editor and either start a new AutoText or open an existing one that you want to modify.
2. With your mouse cursor in the AutoText creation area, click the **Fill-in** button [Fill-in...] to open the **Fill-in Field Definition** dialog box.
3. Give the fill-in field a name and select AutoText from the **Type** drop-down list. Notice that the **AutoText** button on the right becomes active.



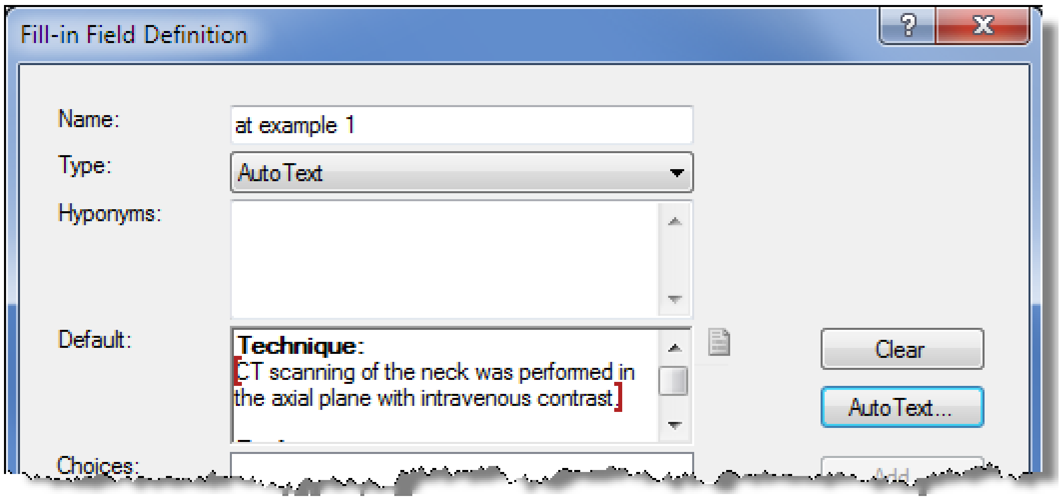
4. Click the **AutoText** button to open the **AutoText Search** dialog box.

5. Using the **Browse** section, search for and select an AutoText. The AutoText content opens in the preview section (bottom) of the dialog box.

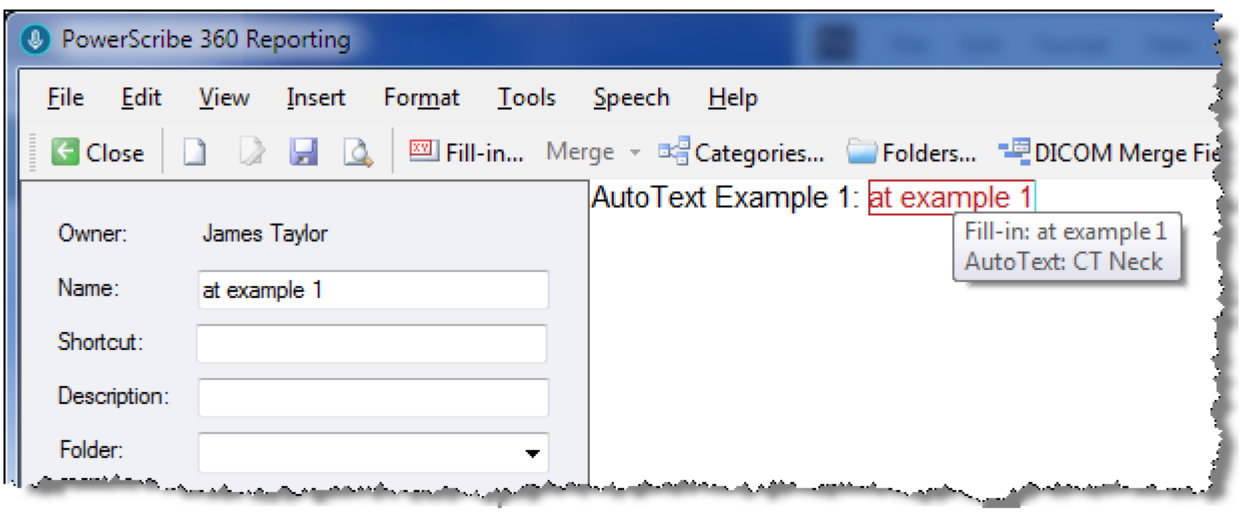
Note: *The AutoText Search displays only AutoText that do not contain references to other AutoText.*



6. When finished, click **OK** to place the selected AutoText into the **Default** portion of your fill-in field definition.



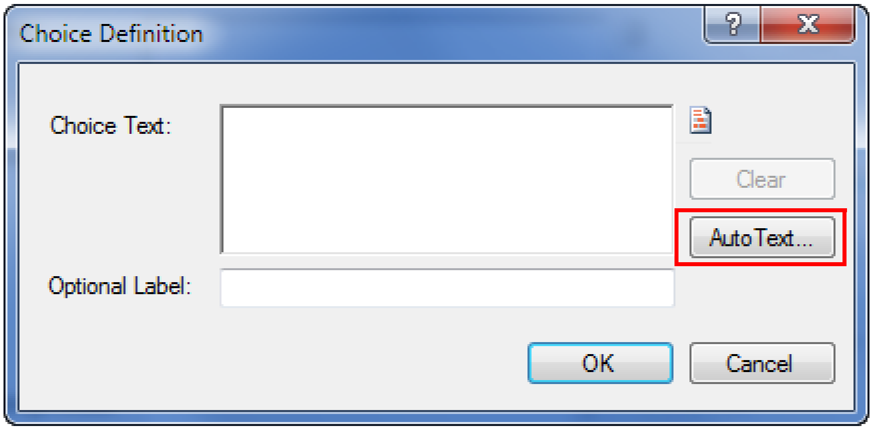
7. Click **OK** to return to your AutoText Editor. The fill-in field definition you just created appears in your AutoText at your cursor location. Placing your mouse cursor over the field displays the type and content.



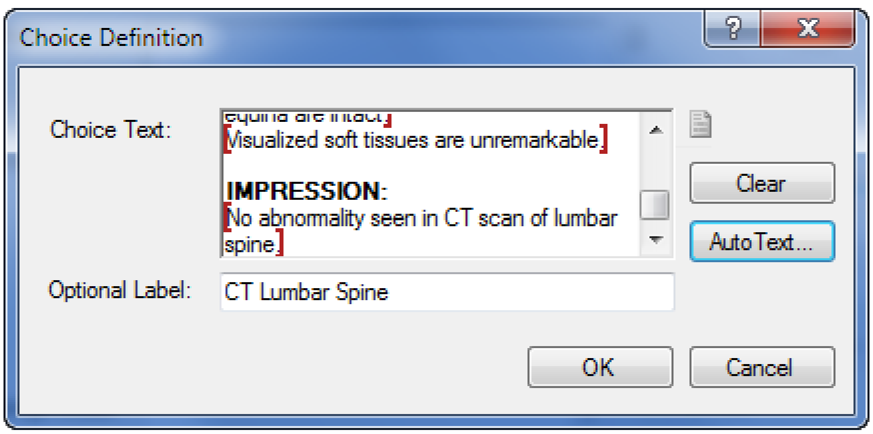
Using the Pick List Type

1. Open the AutoText Editor and either start a new AutoText or open an existing one that you want to modify.
2. With your mouse cursor in the AutoText creation area, click the **Fill-in** button Fill-in... to open the **Fill-in Field Definition** dialog box.
3. Give the fill-in field a name and select **Pick List** from the **Type** drop-down list.

4. Click the **Add** button to open the **Choice Definition** dialog box.

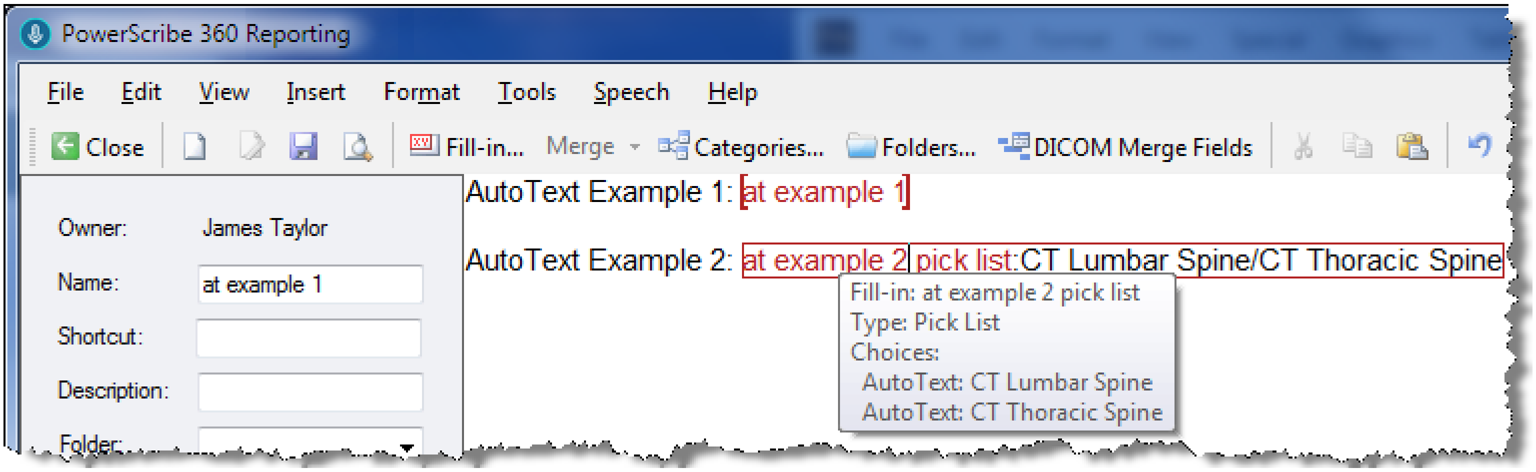


5. Click the **AutoText** button to open the **AutoText Search** dialog box.
6. Using the **Browse** section, search for and select an AutoText. The AutoText content opens in the preview section (bottom) of the dialog box.
7. When finished, click **OK** to return to the **Choice Definition** dialog box. The AutoText appears in the **Choice Text** area.



8. Click **OK** to return to the **Fill-in Field Definition** dialog box.
9. Repeat steps 4 through 8 to create one or more additional pick list choices.

10. When finished, click **OK** to return to your AutoText Editor. The fill-in field definition you just created appears in your AutoText at your cursor location. Placing your mouse cursor over the field displays the type and choices.

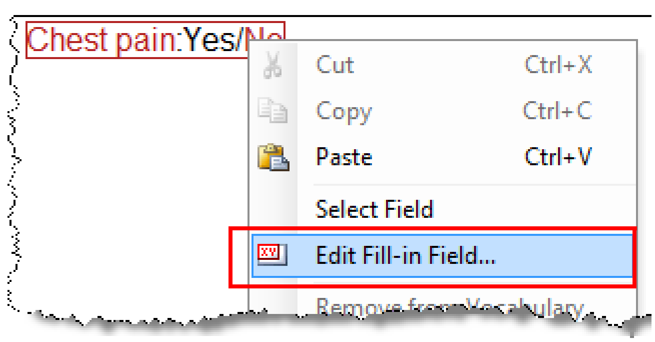


Editing a Fill-In Field

You can modify the properties of a fill-in field you have placed in an AutoText.

To edit a fill-in field:

1. Open the AutoText for editing.
2. Right-click the field you want to edit.
3. Select **Edit fill-in field** from the shortcut menu to open the **Fill-in Field Definition** dialog box.



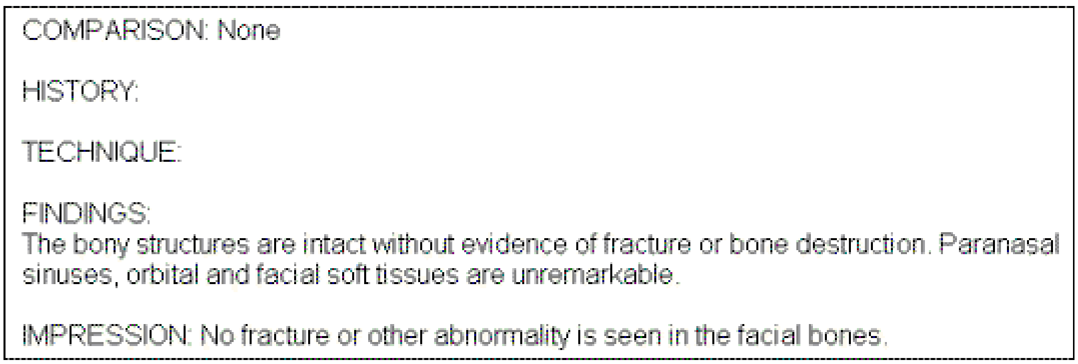
4. Modify the field’s properties as desired.
5. Click **OK** to return to the AutoText Editor.

Creating AutoText with Merge Fields

Merge fields are data items retrieved from your RIS or HIS. You can use merge fields in AutoText to display patient information or other data, eliminating the need for you to enter or dictate this information.

To create AutoText with merge fields:

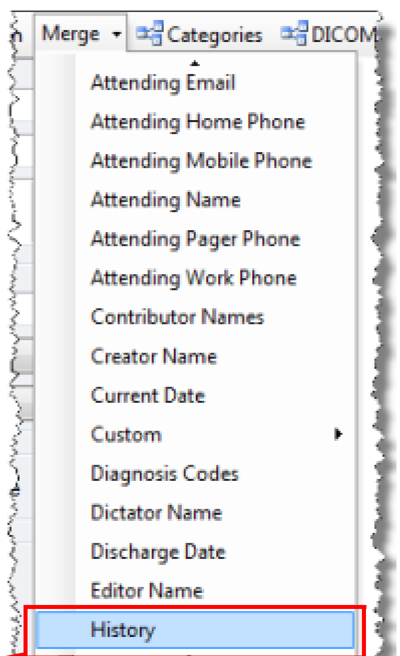
1. With the AutoText open for editing, click to place the insertion point at the position where you want the merge field.

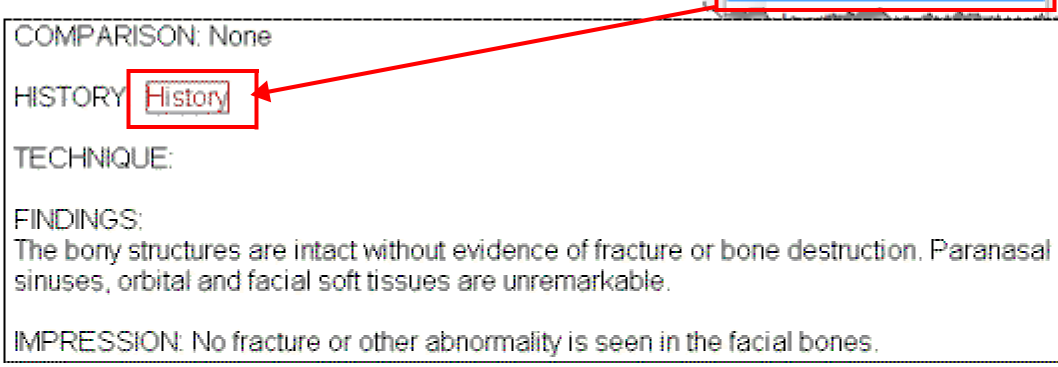


2. Select the down arrow next to the **Merge** button in the menu bar, and select the desired item from the list of fields. (You can also drag and drop the merge fields into the AutoText.)

   Note: *The table in Appendix A shows the full list of merge fields. Merge field data might contain data from the RIS or HIS or created in PowerScribe 360 Reporting. In addition to the fields shown here, the list might also contain custom fields; refer to* *Custom Fields, beginning on page 325.*

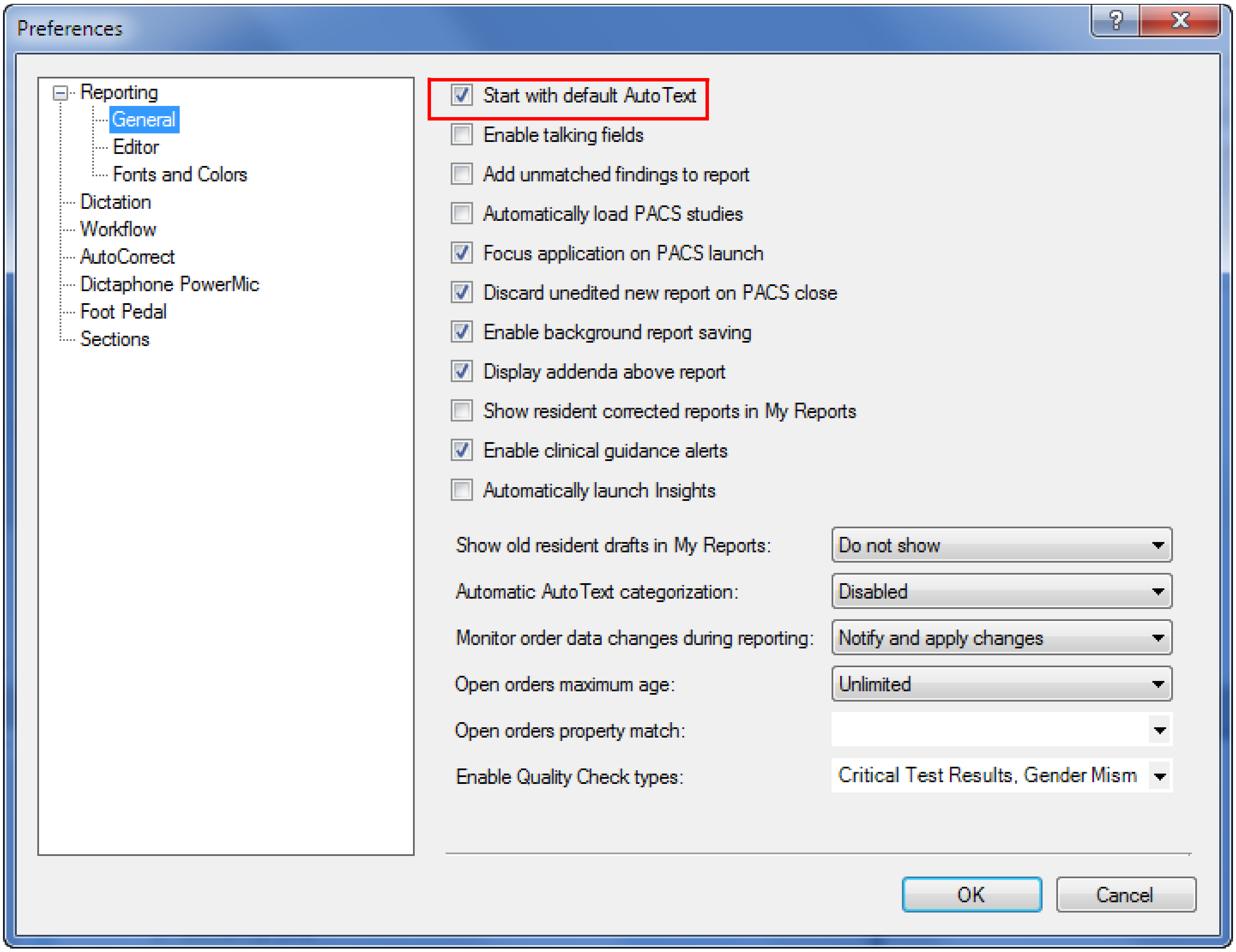
   The name of the merge field appears in the AutoText. The data item will appear in the





Creating Default AutoText

A default AutoText is one that is invoked automatically for a particular procedure, if the **Start with default AutoText** preference (**Tools** > **Preferences** > **Reporting** > **General**) is enabled.

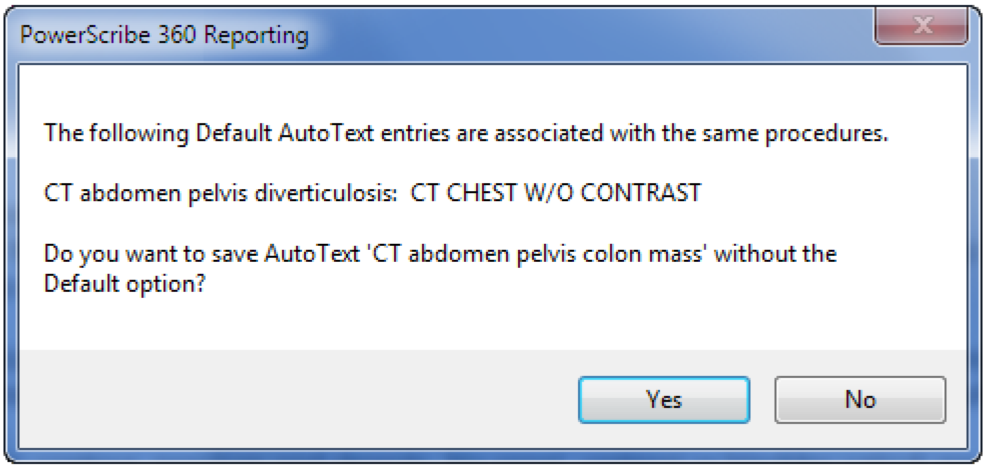


You can associate a default AutoText with a procedure code (or codes). Doing so causes the software to display the default AutoText to you when you initiate a report for the procedure.

If you do not associate an AutoText with a procedure code, the AutoText can be used as a generic or basic AutoText that can be relevant to all procedures.

Notes:

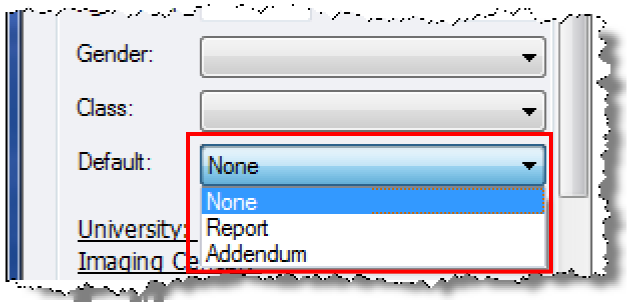
- *You cannot associate more than one default AutoText with the same procedure code, unless there exists another factor, such as age or gender, to differentiate between the AutoText. If you attempt to do so, you see a warning message similar to this one when you attempt to save the AutoText:*



- *Where a personal AutoText and a site AutoText have the same name and both are relevant to a report, if the site AutoText is marked as a default, but the personal AutoText is not, the site AutoText is used.*

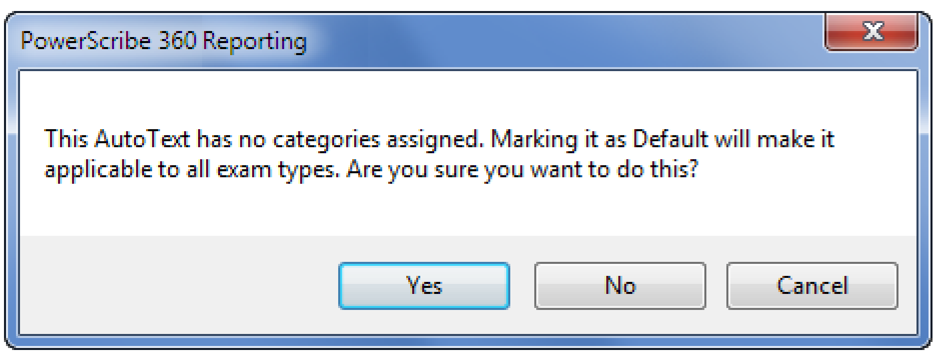
To create a default AutoText:

1. With the AutoText open for editing, click the **Default** drop-down list, and select either **Report** or **Addendum**.



2. Follow the procedure on Creating AutoText Relevant to a Procedure, beginning on page 279 to associate the AutoText with one or more procedure codes. If you take this action, the AutoText automatically loads only when you begin a report on one of those procedures.

Caution: If you do not associate this AutoText with any procedure codes, it will load when you begin any report. If you attempt to save the AutoText without associating it with any procedure codes, you see the warning message below. It is strongly recommended that you click Cancel to close the message box, and then add at least one procedure code to the AutoText before saving it unless you intend to use the AutoText as a generic or basic AutoText relevant to all procedures.



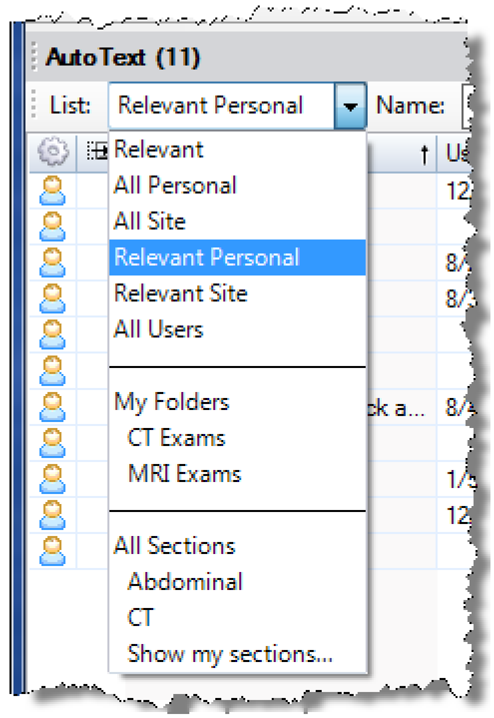
In this example, the icon to the left of the AutoText name indicates that this AutoText has been designated as the default for the procedure code (or codes) you specified.

3. Test the AutoText by using it in a report.

Creating AutoText Relevant to a Procedure

Note: When an AutoText is uncategorized, it is relevant to all procedures. However, in order to gain the benefits of relevancy, we are assigning specific procedures to AutoText in this section.

You might want to insert an AutoText into a report without having to select from a large number of AutoText not related to the procedure. (See the image at right, which is the AutoText tab in the Report Editor window.) To make it easier to locate the desired AutoText, you can filter your AutoText so that only those relevant to a particular procedure appear in the drop-down list:



- **Relevant Personal**: Related to a specific procedure and belongs to a particular user.
- **Relevant Site**: Related to a specific procedure and used by any user in the site.
- **Relevant**: Both personal and site relevant.

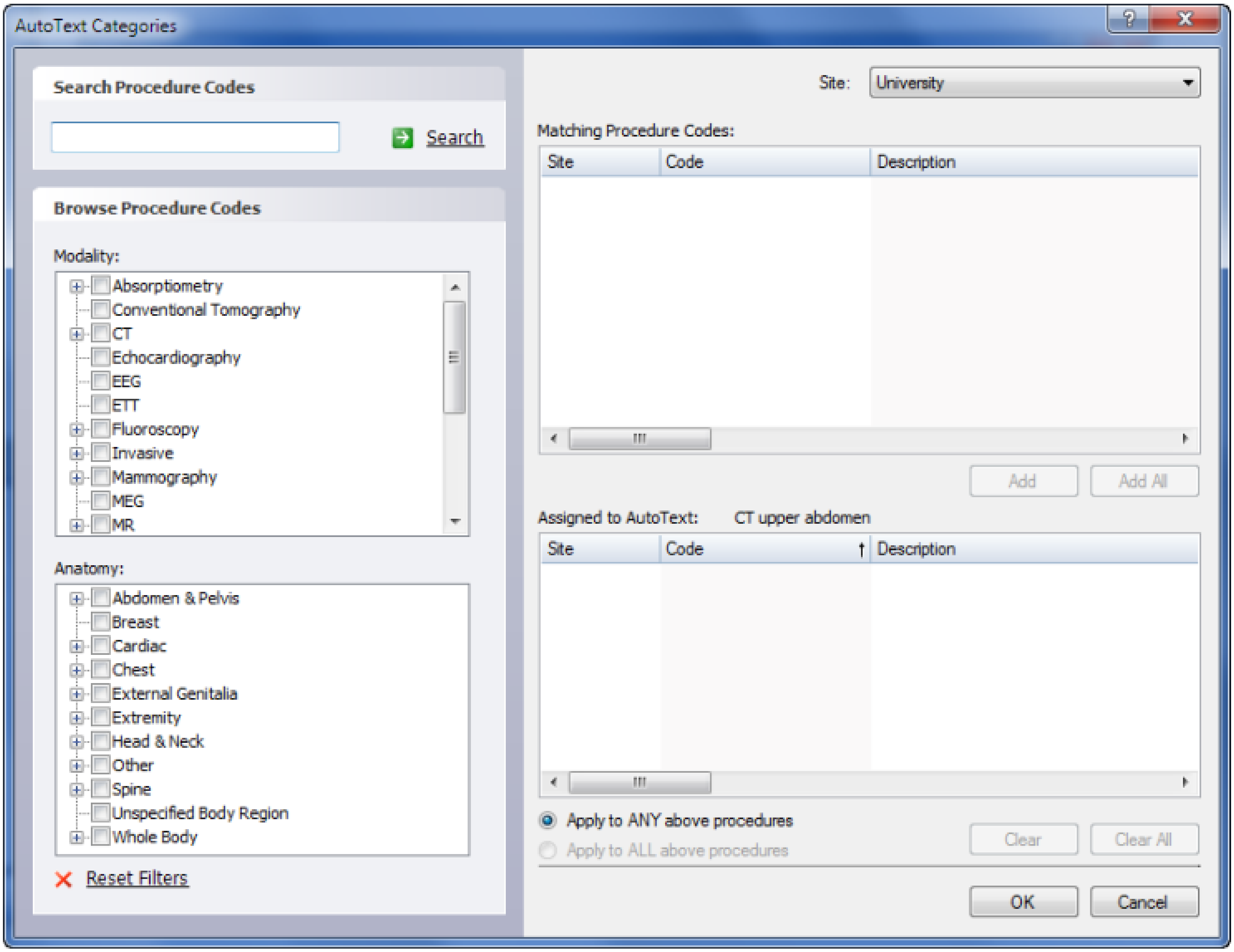
***Tip:** The most important relevancy criterion for an AutoText is the exam procedure, but other criteria include the patient's age and gender.*

***Note:** Where both a personal AutoText and a site AutoText have the same name, and both are relevant, the site AutoText does not appear in the Relevant Site list, but the personal AutoText appears in the Relevant Personal list. The voice command to invoke the AutoText will insert the personal AutoText.*

Follow this procedure to associate an AutoText with one or more procedure codes in the AutoText Editor.

1. With the AutoText open, click the **Categories** [Categories] tool in the toolbar, or select a site name in the **Categories** group box.

   The **AutoText Categories** window opens.



2. Select a site from the **Sites** drop-down list at the upper right, if the appropriate site is not already selected. (You can also select **All** to include procedure codes from all sites.)
3. Use any method to find the procedure code(s) you want to associate with this AutoText:
   - Enter all or part the procedure code or procedure name and click **Search**, OR
   - Click to place a check mark next to a **Modality**, OR
   - Click to place a check mark next to an **Anatomy**.

   Any procedure codes found appear in the **Matching Procedure Codes** list at the upper right.

4. Select one or more procedures from the list. Hold down the **Ctrl** key and click each desired item, or hold down the **Shift** key and select the first and last desired item; then click **Add**. Or, click **Add All** to add the entire list. The selected procedure codes appear in the **Assigned to AutoText** list.
5. For AutoText marked as **Default**, determine whether to apply to any or all of the procedures you just selected.

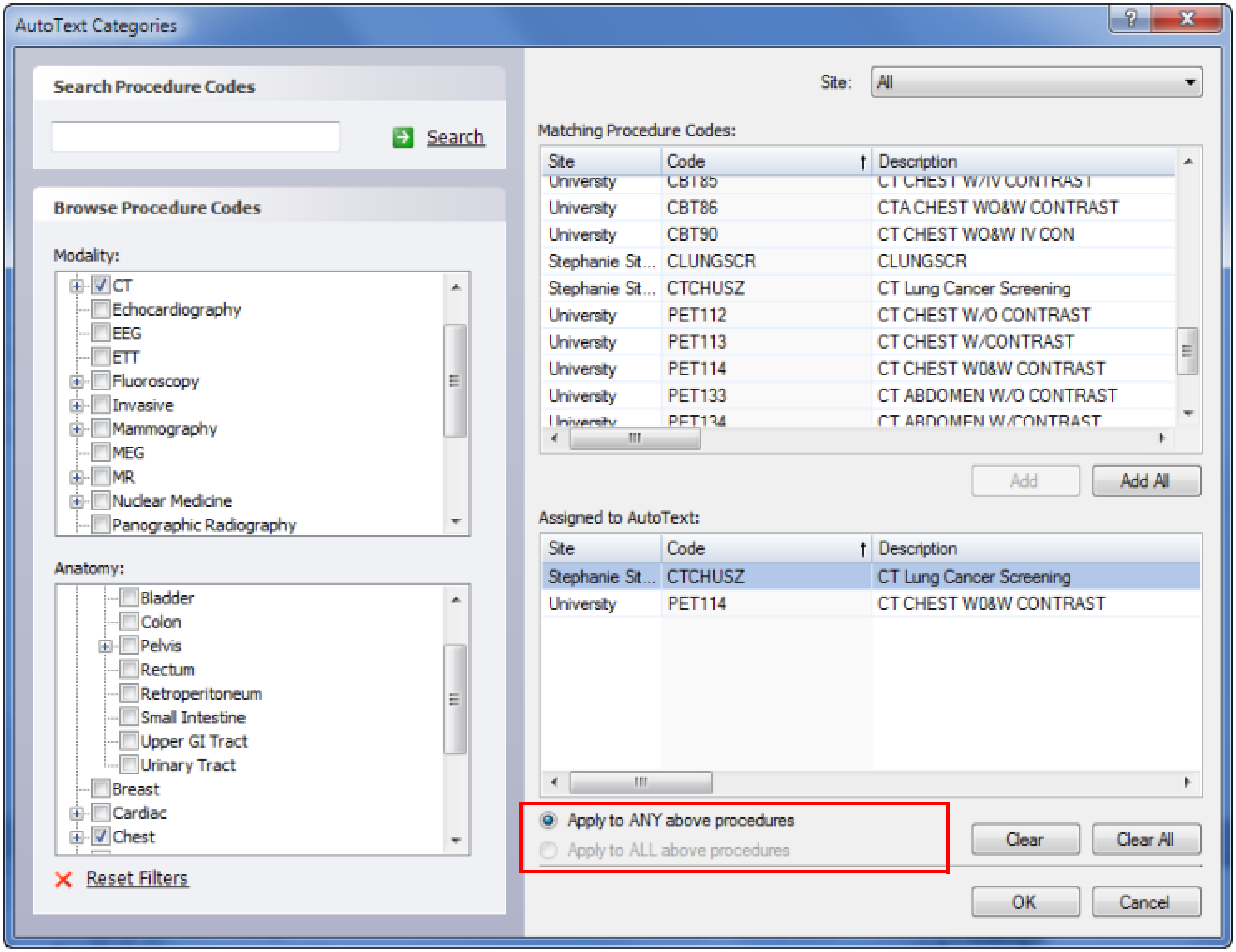
   Note: *ANY* *and* ***ALL*** *only apply when the* ***Default*** *value for the AutoText is either* ***Report*** *or* ***Addendum****.*

   - Selecting **ANY** assigns the AutoText as the default when any of the selected procedure codes associated with the AutoText are present in the report when initiating dictation. (Note that **ANY** is always the default selection.)
   - Selecting **ALL** assigns the AutoText as the default when all of the selected procedure codes associated with the AutoText are present when initiating dictation.

Information for Both ANY and ALL Selections

- When initiating a report, if there is a relevant AutoText marked **ANY** and another relevant AutoText marked **ALL**, the AutoText marked **ALL** will take priority as the default.
  – **Example**: **AT1** is associated with **ANY** selected procedures **123** and **ABC**. **AT2** is associated with **ALL** selected procedures **123** and **ABC**. If you open an order with **123**, the default AutoText will be **AT1**. If you open an order with **ABC**, the default AutoText will be **AT1**. If you open a report with both **123** and **ABC**, the default AutoText will be **AT2**.
- The site-level preference (**Setup > System or Sites > Preferences > Workflow** tab) **Site AutoText overrides user default** takes precedence over both **ANY** and **ALL** personal AutoText matches.
  – **Example**: A site selects this preference. The site has an AutoText named **site autotext** that is associated to **ANY** of the selected procedure codes (in this example **ABC** and **123**). A user on the site has personal AutoText: **AT1** is associated to **ANY ABC** and **123**, and **AT2** is associated to **ALL ABC** and **123**. If you open an order with **ABC** and **123**, **site autotext** is used, and not your personal AutoText.
- You cannot save an **ANY** (or an **ALL**) AutoText with procedure codes that are associated previously with another **ANY** (or **ALL**) AutoText. If you attempt to do so, you receive a warning with an error that includes both the name of the conflicting AutoText and the matching procedure codes.

- If the check box for **Site AutoText overrides user default** is not selected (False), there is no scenario where a site-level AutoText should appear when there is a relevant personal AutoText.



6. Click **OK**. The procedure codes are associated with the AutoText.

Searching for AutoText

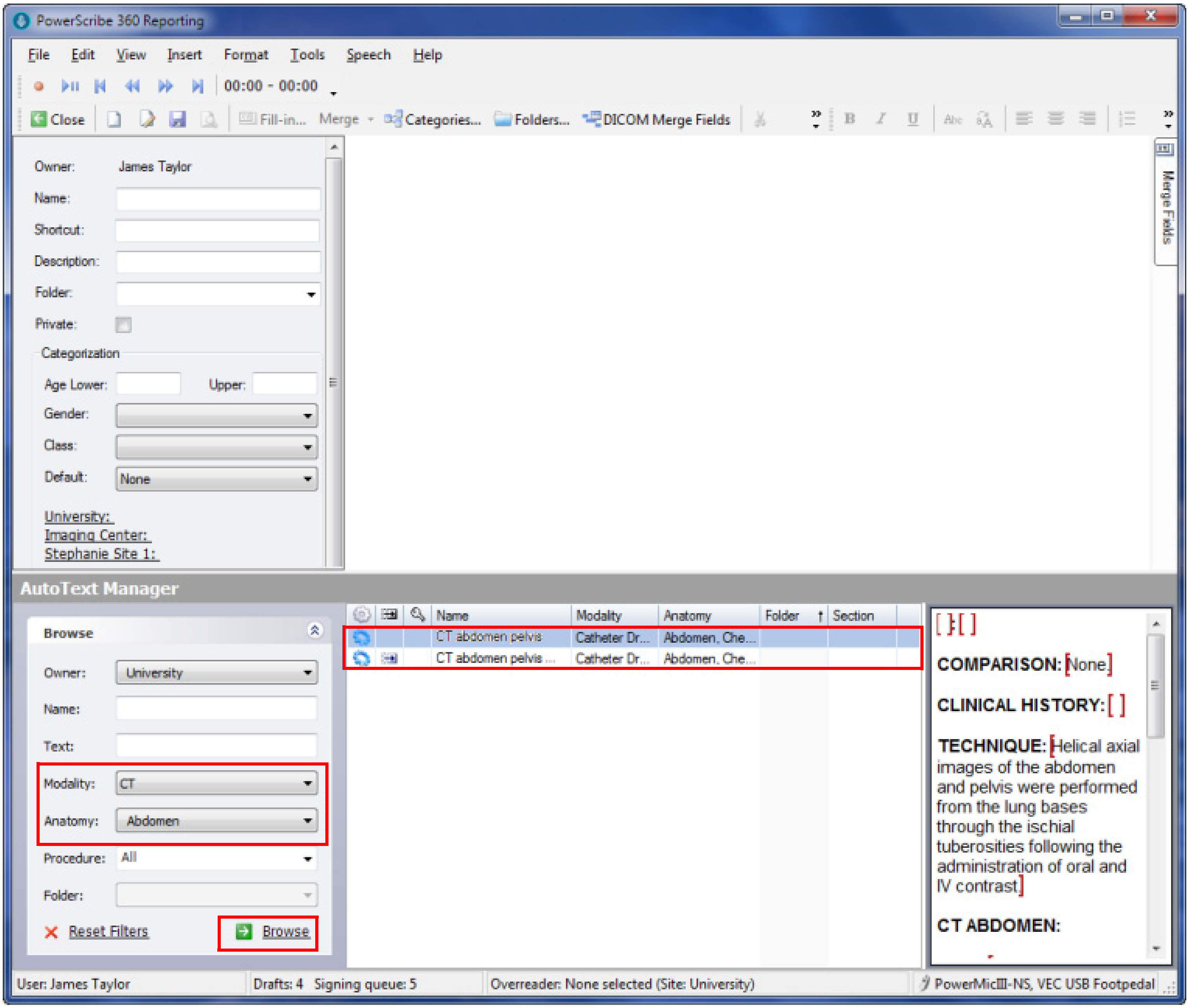
Follow the procedure below to search for one or more AutoText in the AutoText Editor.

To search for AutoText:

1. Select **Tools > AutoText Editor** from the menu bar.
2. In the **Browse** pane, use one or more criteria to find the AutoText:
   - Use the **Owner** drop-down list to filter the search by AutoText owner. Choose one of the following options:
     - **All**: Searches all sites and user accounts for AutoText.
     - **All Sites**: Searches all sites for AutoText; does not search the user accounts.
     - **Multi-Site**: Searches for AutoText that are associated with more than one site.
     - **<Individual sites>**: Allows you to select an individual site to search for AutoText.
     - **All Users**: Searches all users for AutoText; does not search the sites.
     - **<Individual user accounts>**: Allows you to select an individual user account to search for AutoText.
   - Use the **Name** field to search by AutoText name or by the shortcut used to invoke it. You can use a wild-card character (*) to search by any part of the name or shortcut.
   - Use the **Text** field to search for an AutoText containing the entered search text. You can enter part of the text without using a wild-card character.
   - Use the **Modality** drop-down list to filter the search by type of exam (for example, **CT** or **MRI**).
   - Use the **Anatomy** drop-down list to filter the search by body region (for example, **Chest** or **Head & Neck**).
   - Use the **Procedure** drop-down list to filter by procedure. This list is empty if you have not selected a modality or anatomy, because without narrowing this criterion, there would be too many AutoText to fit in a drop-down list. It is also empty if there are no mappings between procedure codes and modalities/anatomies.
   - Use the **Folder** drop-down list to filter by one of the folders you or another user created.

   Note: *The* ***Folder*** *list is unavailable (grayed out) if you select* ***All Users*** *or any one of the* ***Site*** *options in the* ***Owner*** *drop-down list.*

3. Click **Browse**. Any AutoText that meet your criteria appear in the list.

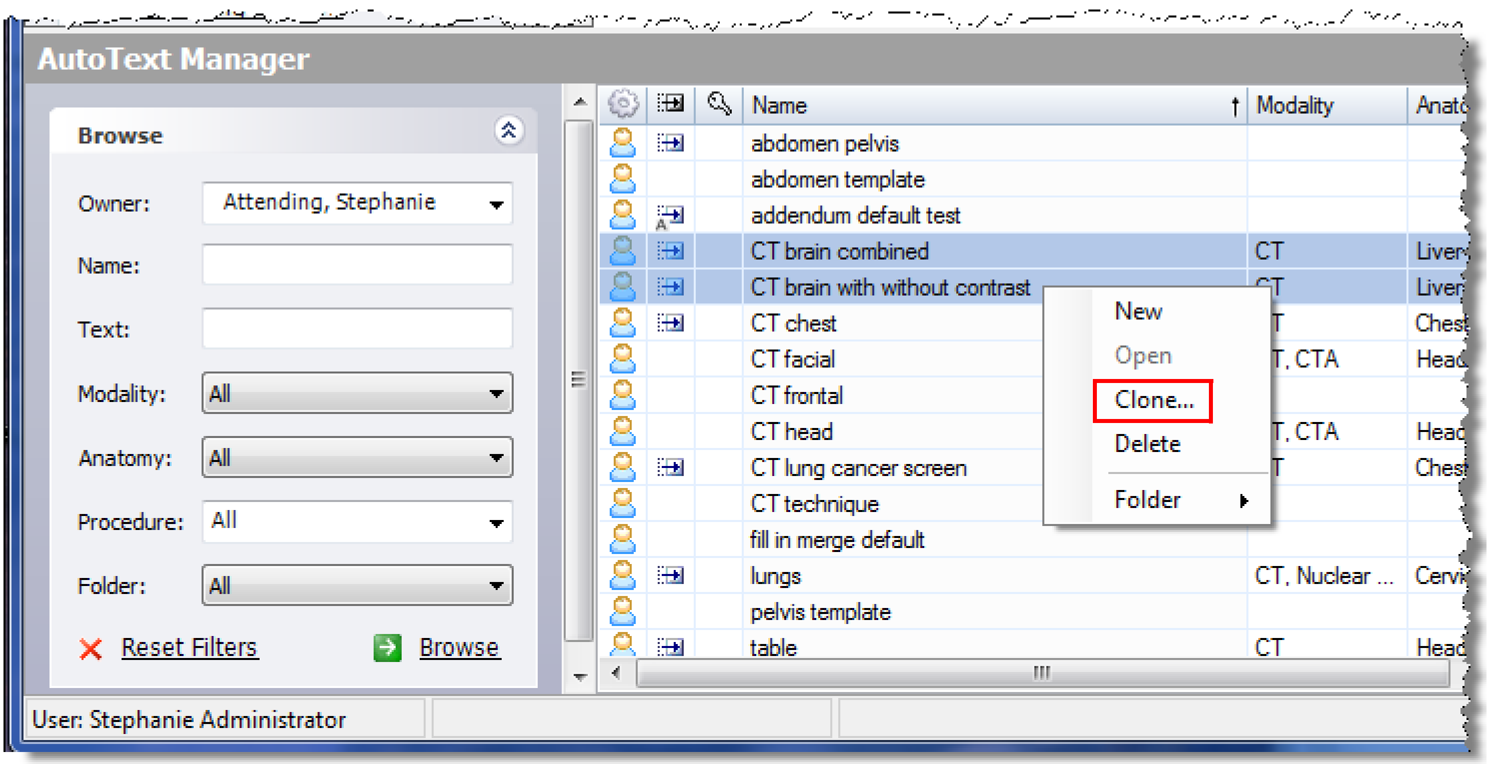


Cloning AutoText

Tip: *To select more than one AutoText, use your Windows Shift and/or Ctrl keys.*

Cloning allows you to open (copy), modify, and save an existing AutoText from another user or another site. By cloning you can create a new AutoText without starting from scratch; the AutoText you clone acts as a template for the new one you are about to create.

1. From the AutoText Manager area, search for and select the AutoText you want to clone. You can select an AutoText from any user or site to which you have access using the **Owner** drop-down list.
2. Right-click the AutoText you selected and click **Clone**. The AutoText content appears in the edit window, and its attributes are filled in on the left side of the window.



3. Modify the content and/or attributes of the AutoText and save your changes.

Chapter 12

AutoText for Administrators

Objectives

From the Administrator Portal you will:

- Find, view, and edit AutoText properties.
- Associate AutoText with procedure codes.
- Organize site AutoText by section
- Export AutoText from one site and import them to another.
- Delete AutoText.
- Audit AutoText events.
- Print AutoText.

From the client application you will:

- Create multi-site AutoText.
- Assign sections to site AutoText.

Introduction to AutoText

AutoText is standard text providers or transcriptionists can insert into reports. AutoText are sometimes referred to as macros or templates. They can be of any length and might contain plain text, standard headings, numbered lists, fill-in fields, data retrieved from the RIS, or other items.

Providers can create their own AutoText for sharing with other users or for their own personal use.

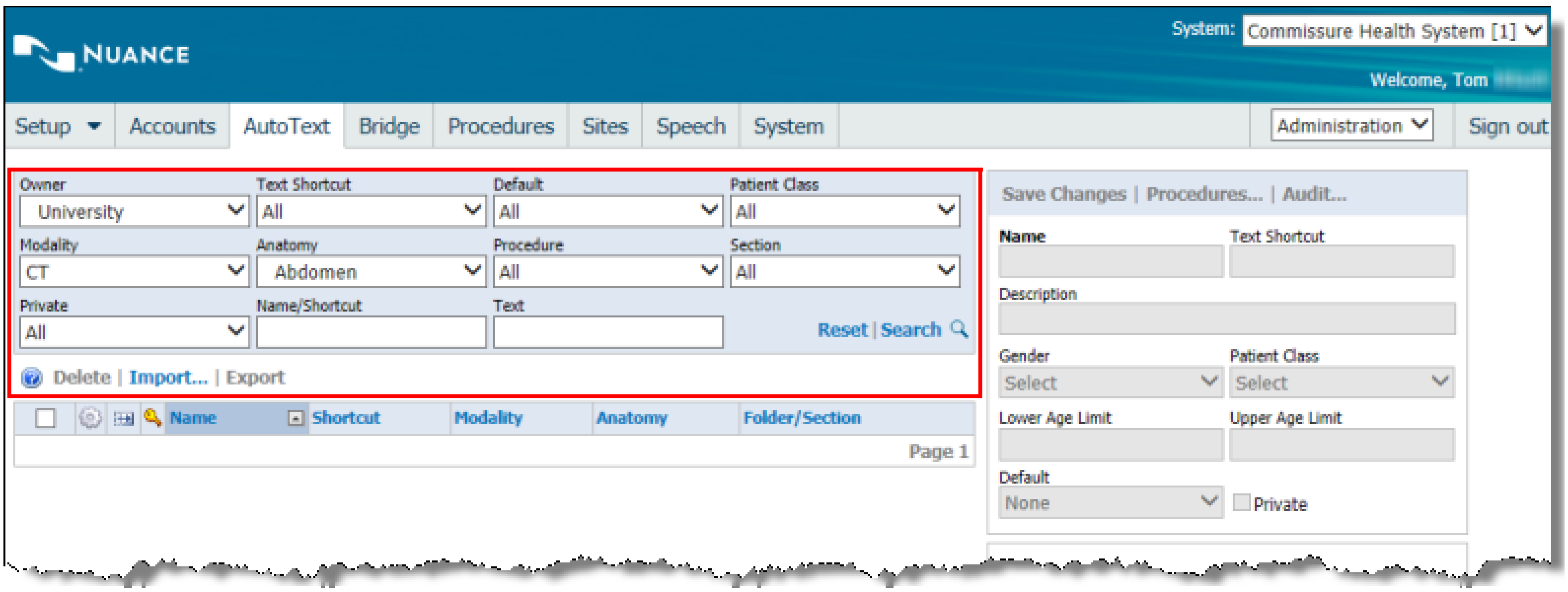
As an administrator, you can create AutoText using the *PowerScribe 360 Reporting* client application. You can create AutoText at a site level, which allows you to work on the behalf of a site for structured reporting. (For information on how to create AutoText in the client application, see *AutoText for Providers*, beginning on page 251 of this guide.)

Once you create these AutoText, you can manage them from the Administrator Portal.

Managing AutoText in the Administrator Portal

Navigating to the AutoText Tab

As administrator, you can manage AutoText through the **AutoText** tab in the **Setup** group. This tab provides access to all AutoText in the system.



From this tab, you can:

- Search for AutoText (page 290)
- Add or remove procedure codes from AutoText (page 292)
- Import and export AutoText (page 298)
- Delete AutoText (page 308)
- Audit AutoText creation and changes (page 309)

You cannot use this tab to add new AutoText or change the content of existing AutoText; you must use the *PowerScribe 360 Reporting* client application for those functions. Refer to *Creating an AutoText*, beginning on page 254.

Searching for AutoText in the Administrator Portal

The **AutoText** tab in the **Setup** group allows you to search on various criteria to find a specific AutoText.

To search for AutoText in the Administrator Portal:

1. On the **AutoText** tab of the **Setup** group, use one or more criteria to find the AutoText:
   - Use the **Owner** drop-down list to filter the search by AutoText owner.
     - **All**: Searches all sites and user accounts for AutoText.
     - **All Sites**: Searches all sites for AutoText; does not search the user accounts.
     - **Multi-Site**: Searches for AutoText that are associated with more than one site.
     - **<Individual sites>**: Allows you to select an individual site to search for AutoText.
     - **All Users**: Searches all users for AutoText; does not search the sites.
     - **<Individual user accounts>**: Allows you to select an individual user account to search for AutoText.
   - In the **Text Shortcut** field, select **Text Shortcut**, **None**, or **All**. Select **Text Shortcut** to search for those that contain a text shortcut. Select **None** to search for those that do not contain a text shortcut. Select **All** to include all AutoText in your search, regardless of text shortcuts.
   - In the **Default** field, select **Default**, **Not default**, **Default for report**, Def**ault for addendum**, or **All**.
   - Use the **Patient Class** list to search by a patient class such as **Inpatient**, **Outpatient**, **Obstetrics**, and several others.
   - Use the **Modality** drop-down list to filter the search by type of exam (for example, **CT Scan** or **MRI**).
   - Use the **Anatomy** drop-down list to filter the search by body region (for example, **Chest** or **Head**).

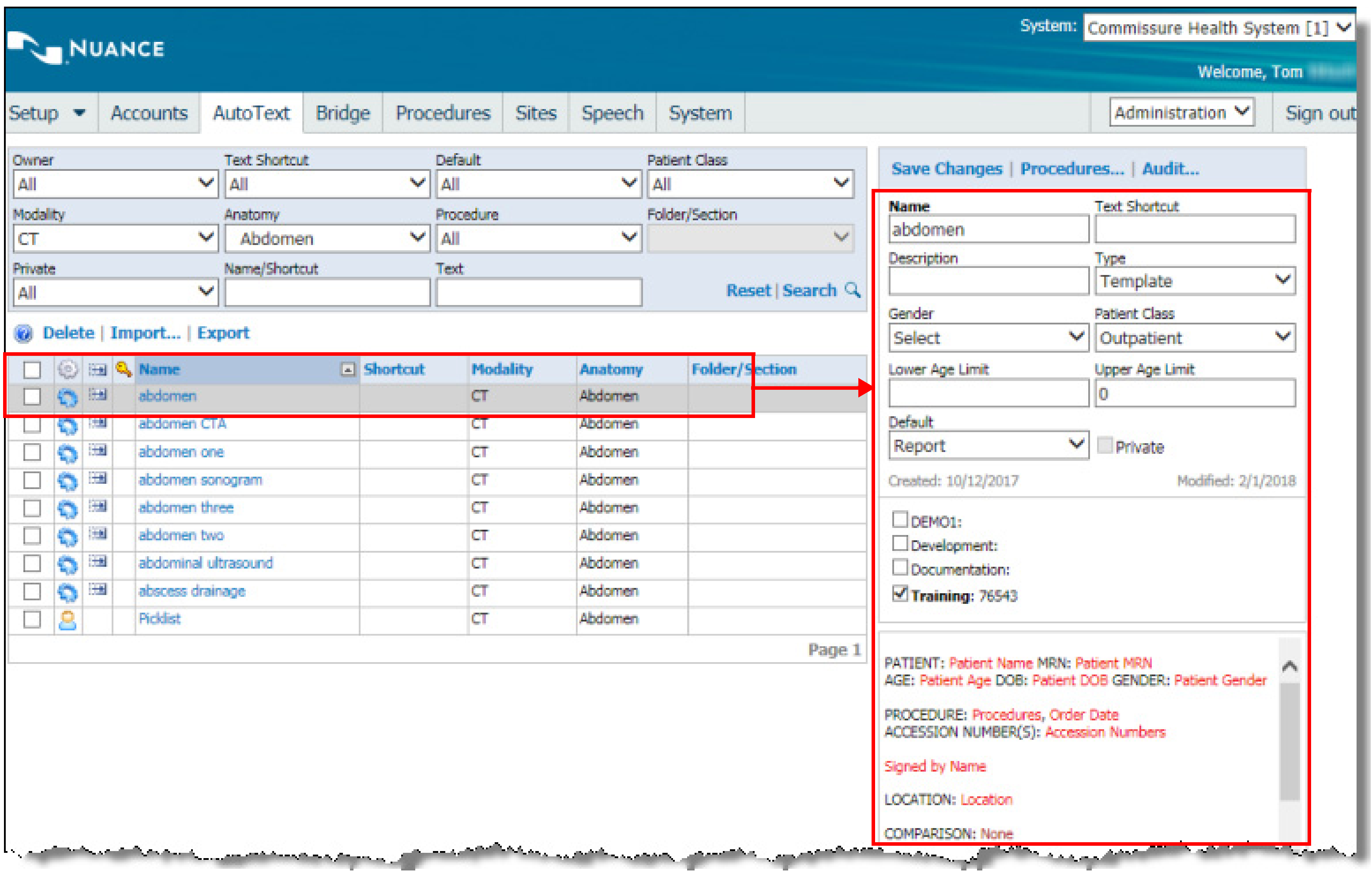
     Note: *For Modality and Anatomy search to function, you must map the site's procedure codes to Modality and Anatomy. Refer to Introduction to Procedure Master Translators, beginning on page 192.*

   - Use the **Procedure** drop-down list to filter by procedure. This list is empty if you have not selected a modality or anatomy, because without narrowing this criterion, there would be too many entries to fit in a drop-down list. It is also empty if there are no mappings between procedure codes and modalities and anatomies.
   - **Folder/Section**: Depending upon the selected Owner, this field displays a list of either available folders or sections based on the following guidelines:
     - If you select an *individual site*, the field is labeled **Section** and the drop-down list displays the sections associated with the site (as well as the **All** and **None** options).

- If you select an *individual user account*, the field is labeled **Folder** and the drop-down list displays the folders associated with the user (as well as the **All** and **None** options).
- If you select **All**, **All Sites**, **Multi-Site**, or **All Users**, the Folder/Section drop-down is grayed out and unavailable.

- Use the **Private** drop-down list to look for AutoText marked as **Private** or **Public**. Leave the filter set to **All** to include both private and public AutoText.
- Use the **Name/Shortcut** field to search by AutoText name or by the shortcut used to invoke it. You can use a wild-card character (*) to search by any part of the name or shortcut.
- Use the **Text** field to search for an AutoText containing the entered search text. You can enter part of the text without using a wild-card character.

2. Click **Search**. Any AutoText that meet your criteria appear in the list. Click the link in the **Name** column to see a preview of the AutoText (in the lower right pane).



Modifying AutoText Attributes

As an administrator, you can modify any of the AutoText attributes: Name, Text Shortcuts, Description, Gender, Patient Class, Age Limits, Default, and the Private check box.

In addition, you can assign more than one site to the AutoText by selecting the site name check boxes (located directly below the attributes section).

If you need to modify the content (text, fill-in fields, merge fields, and so on) of either a site or user AutoText, log in to the client application and perform the changes there.

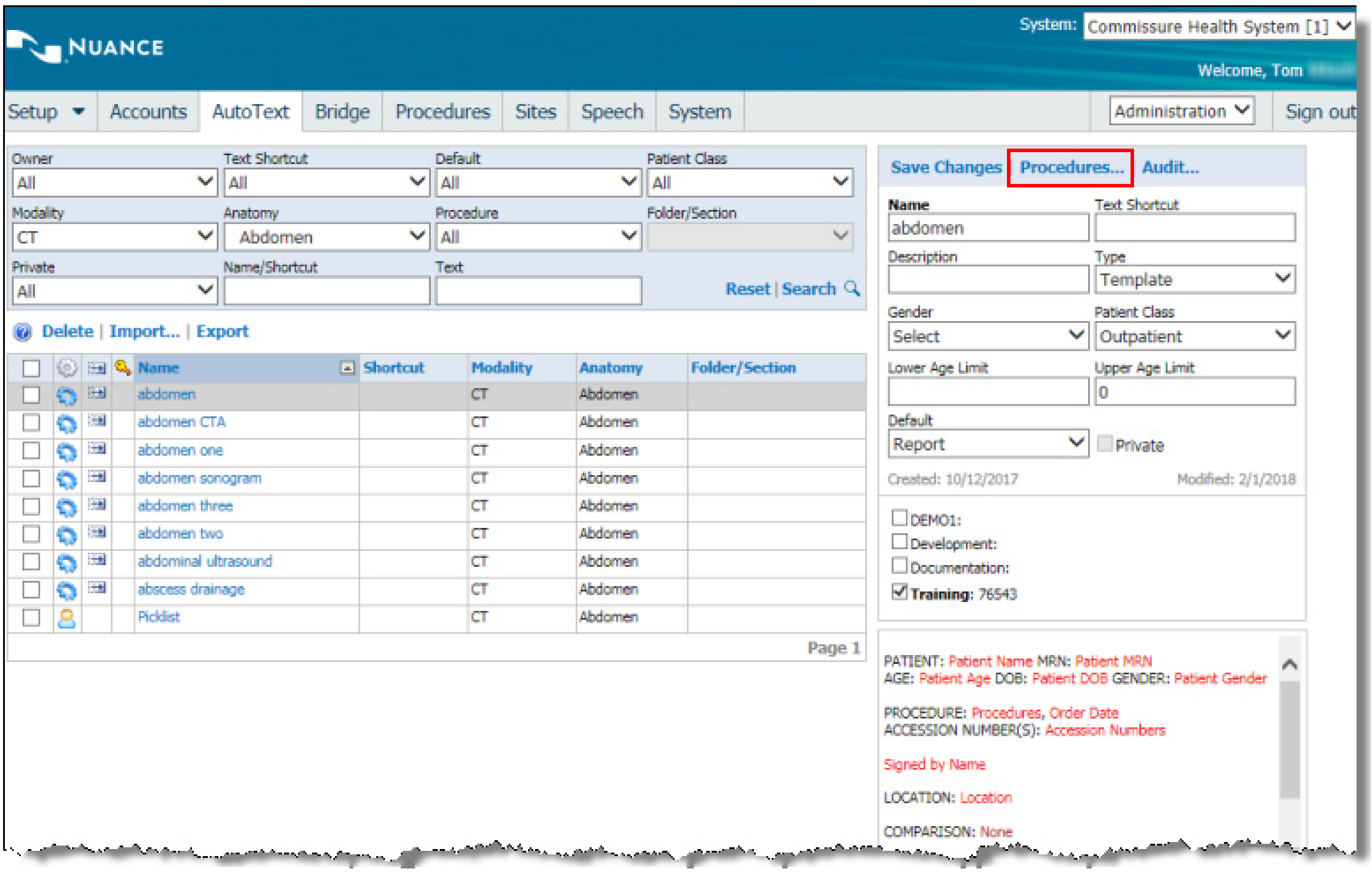
For information on how to create, modify, and manage AutoText in the client application, see *Managing AutoText in the Client Application*, beginning on page 310 of this chapter.

Adding or Removing Procedures from an AutoText

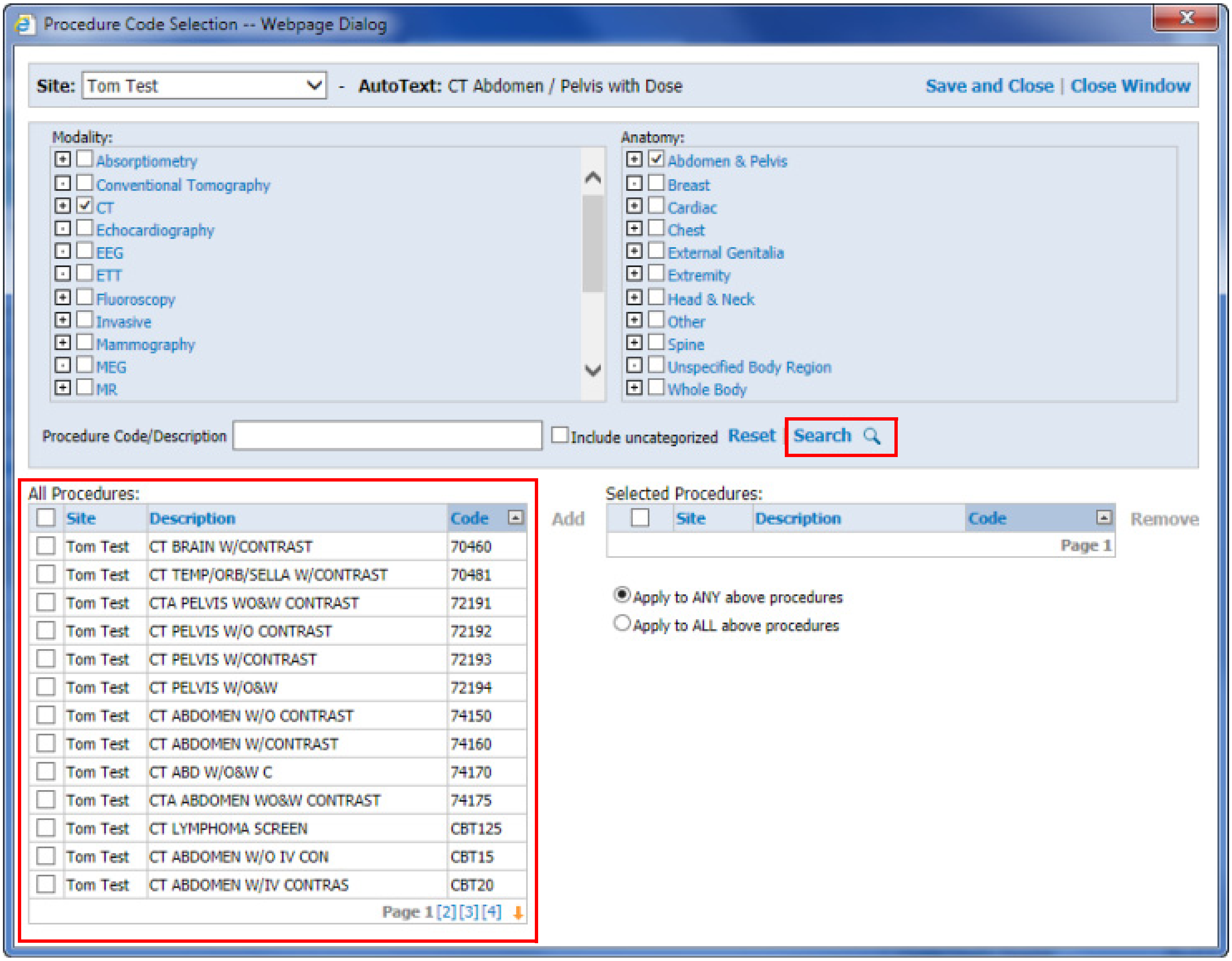
The *PowerScribe 360 Reporting* Administrator Portal allows you to associate procedure codes with an AutoText and to remove procedure codes. To take these actions in the *PowerScribe 360 Reporting* client, refer to *Creating AutoText Relevant to a Procedure*, beginning on page 279.

To add procedures to an AutoText:

1. Find the AutoText. (Refer to *Searching for AutoText in the Administrator Portal*, beginning on page 290.)
2. Click the **Name** of the AutoText you want to modify. The AutoText properties are displayed in the pane at the right.

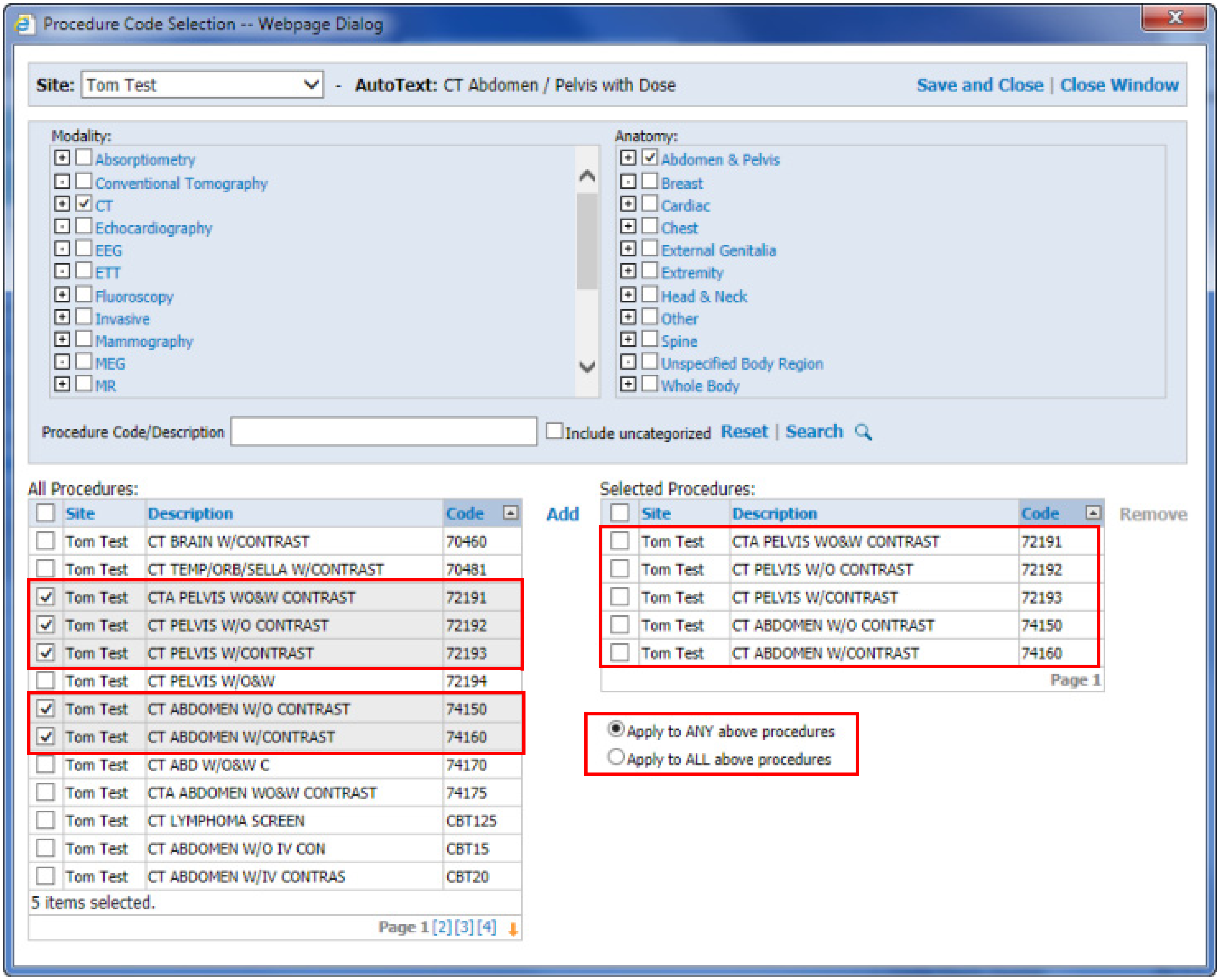


3. Click **Procedures**. The **Procedure Code Selection** window opens.
4. Find the procedures you want to associate with this AutoText. Place a check mark next to any modality or anatomy whose codes you want to display. Then click **Search**. Any procedures connected to the items you chose appear in the **All Procedures** list.



5. In the **All Procedures** list, place a check mark next to each procedure you want to add to this AutoText.

6. Click **Add**. The procedure(s) appear in the **Selected Procedures** list at the right.



7. Determine whether to apply to **ANY** or **all** of the procedures you just selected.

*Note: **ANY** and **ALL** only apply when the **Default** value for the AutoText is either **Report** or **Addendum**.*

- Selecting **ANY** assigns the AutoText as the default when one or more (but not all) of the selected procedure codes associated with the AutoText are present in the report when initiating dictation. (Note that **ANY** is always the default selection.)
- Selecting **ALL** assigns the AutoText as the default when all of the selected procedure codes associated with the AutoText are present when initiating dictation.

Information for Both ANY and ALL Selections

- When initiating a report, if there is a relevant AutoText marked **ANY** and another relevant AutoText marked **ALL**, the AutoText marked **ALL** will take priority as the default.
  - **Example**: **AT1** is associated with **ANY** selected procedures **123** and **ABC**. **AT2** is associated with **ALL** selected procedures **123** and **ABC**. If the user opens an order with **123**, the default AutoText will be **AT1**. If the user opens an order with **ABC**, the default AutoText will be **AT1**. If the user opens a report with both **123** and **ABC**, the default AutoText will be **AT2**.
- The site-level preference (**Setup > System or Sites > Preferences > Workflow** tab) **Site AutoText overrides user default** takes precedence over both **ANY** and **ALL** personal AutoText matches.
  - **Example**: A site selects this preference. The site has an AutoText named **site autotext** that is associated to **ANY** of the selected procedure codes (in this example **ABC** and **123**). A user on the site has personal AutoText: **AT1** is associated to **ANY ABC** and **123**, and **AT2** is associated to **ALL ABC** and **123**. If the user opens an order with **ABC** and **123**, **site autotext** is used, and not the user's personal AutoText.
- You cannot save an **ANY** (or an **ALL**) AutoText with procedure codes that are associated previously with another **ANY** (or **ALL**) AutoText. If you attempt to do so, you receive a warning with an error that includes both the name of the conflicting AutoText and the matching procedure codes.
- If the check box for **Site AutoText overrides user default** is not selected (False), there is no scenario where a site-level AutoText should appear when there is a relevant personal AutoText.

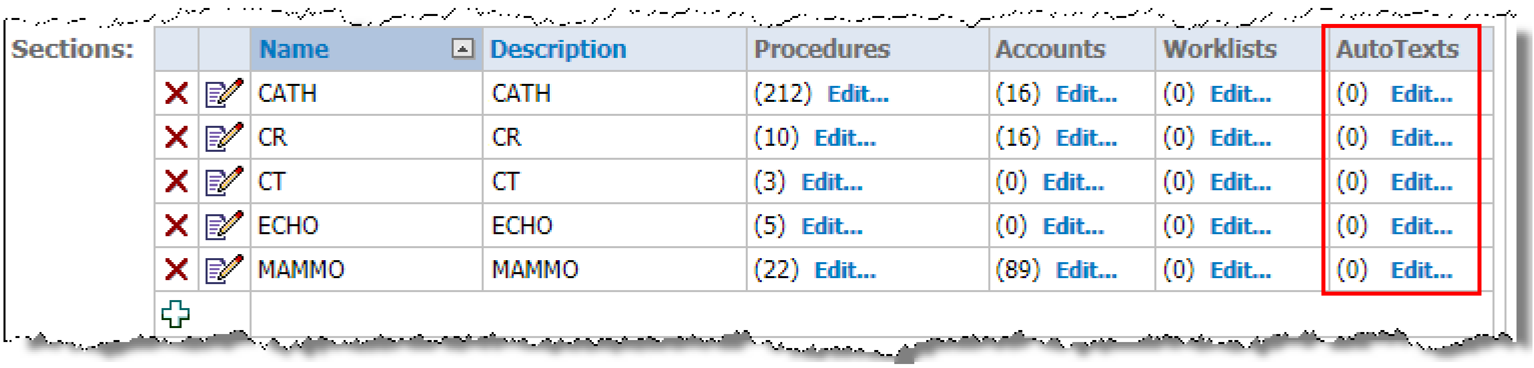
8. Click **Close Window** when you are finished adding codes.

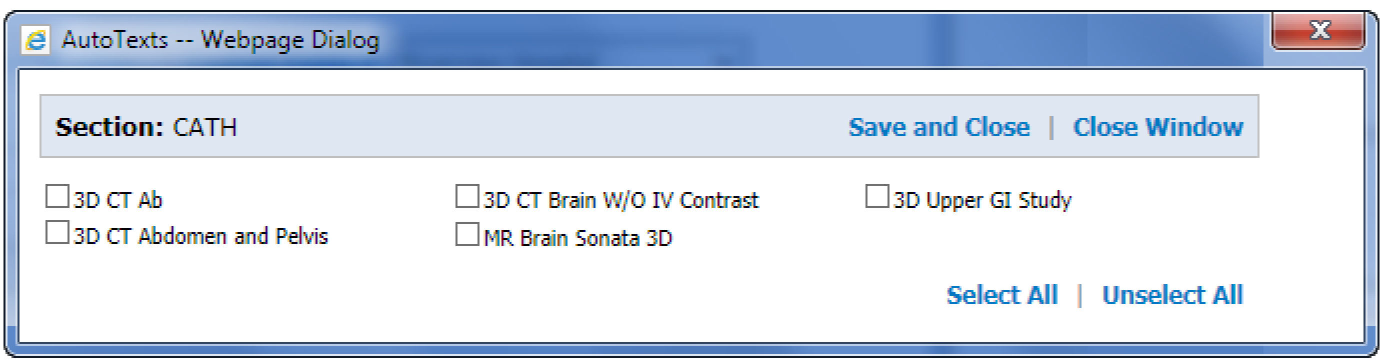
To remove procedures from an AutoText:

1. Find the AutoText you want to modify. (Refer to *Creating an AutoText*, beginning on page 254.)
2. Click the **Name** of the AutoText you want to modify. The AutoText properties appear.
3. Click **Procedures.** The **Procedure Code Selection** window opens.
4. In the **Selected Procedures** list at the lower right, place a check mark next to each procedure you want to remove from this AutoText.
5. Click **Remove**. The procedures are removed.
6. Click **Close Window**.

Organize Site AutoText by Section

You can add site-level AutoText to sections in your site for a method of organization that will benefit radiologists when searching for Site-level AutoText in the client application. The **AutoTexts** column in the Sections area allows you to click one of its **Edit** links and select one or more AutoText to assign to that section.





Importing and Exporting AutoText

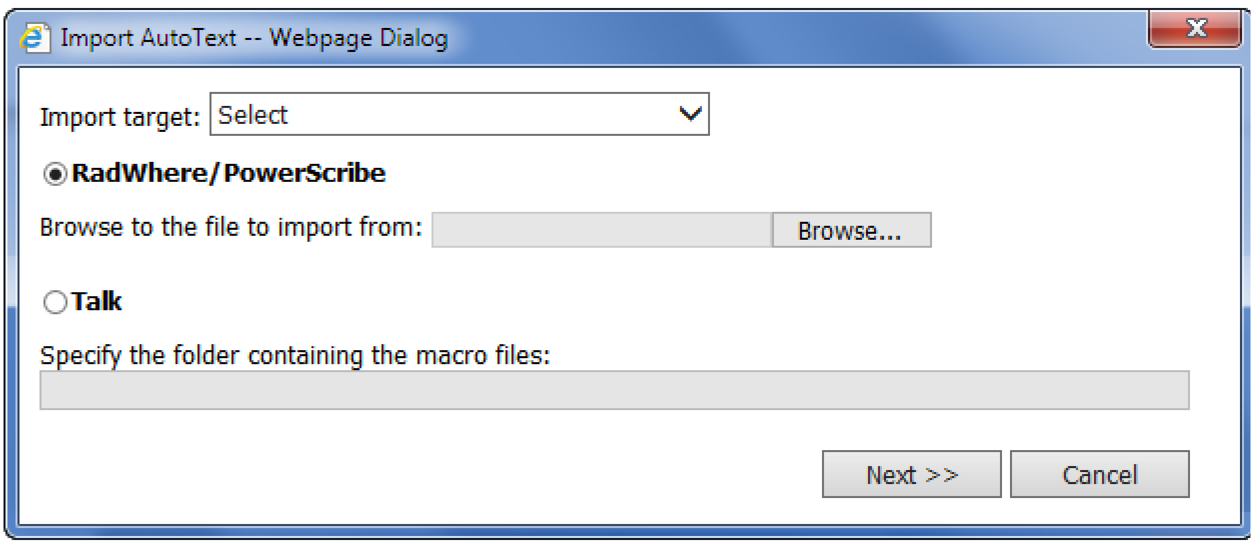
You can import *.xml* files you have exported from within *PowerScribe 360 Reporting*; this allows you to copy AutoText from one site or user account to another. You can also import AutoText or macros from the *RadWhere* application or from the Agfa *TalkStation* application. Refer to *Exporting AutoText*, beginning on page 306.

Importing AutoText from RadWhere or PowerScribe 360 Reporting

Follow this procedure to import AutoText you have exported from a *PowerScribe 360 Reporting* user account or site, or from the *RadWhere* application.

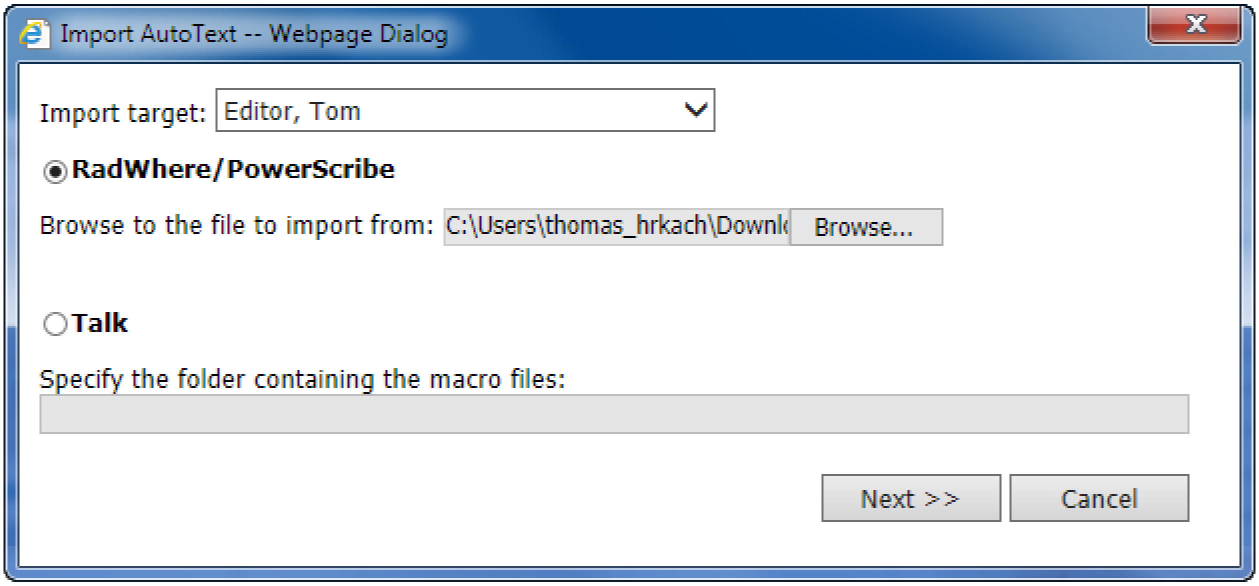
To import AutoText from RadWhere or PowerScribe 360 Reporting:

1. On the **AutoText** tab of the **Setup** group, click **Import...**. The **Import AutoText** dialog box opens.

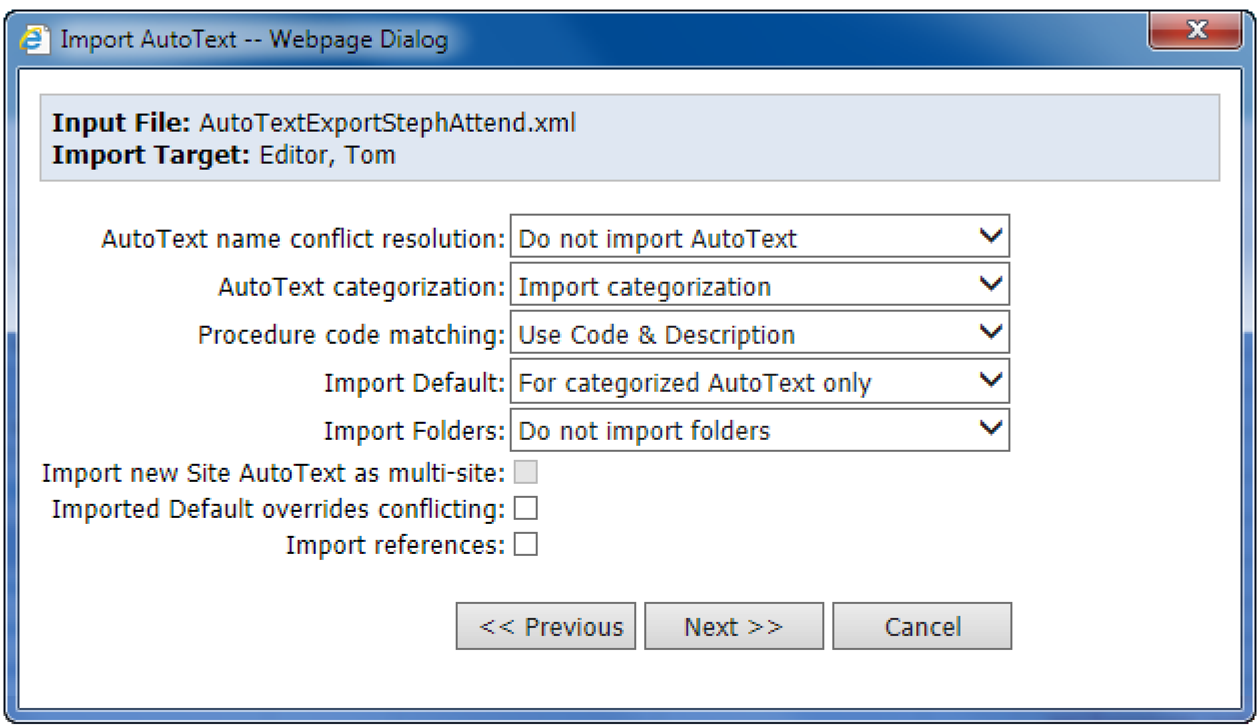


2. Select the **Import target** from the drop-down list. For example, you can import AutoText to a single user account. Or, you can import them to a site for use by all users at the site.
3. Select **RadWhere/PowerScribe**.

4. Click **Browse...** and then navigate to and select the *.xml* file you want to import.



5. Click **Next**. A dialog box opens that allows you to make decisions about resolving name conflicts, importing categories, procedure code matching, default conflicts, and folders.



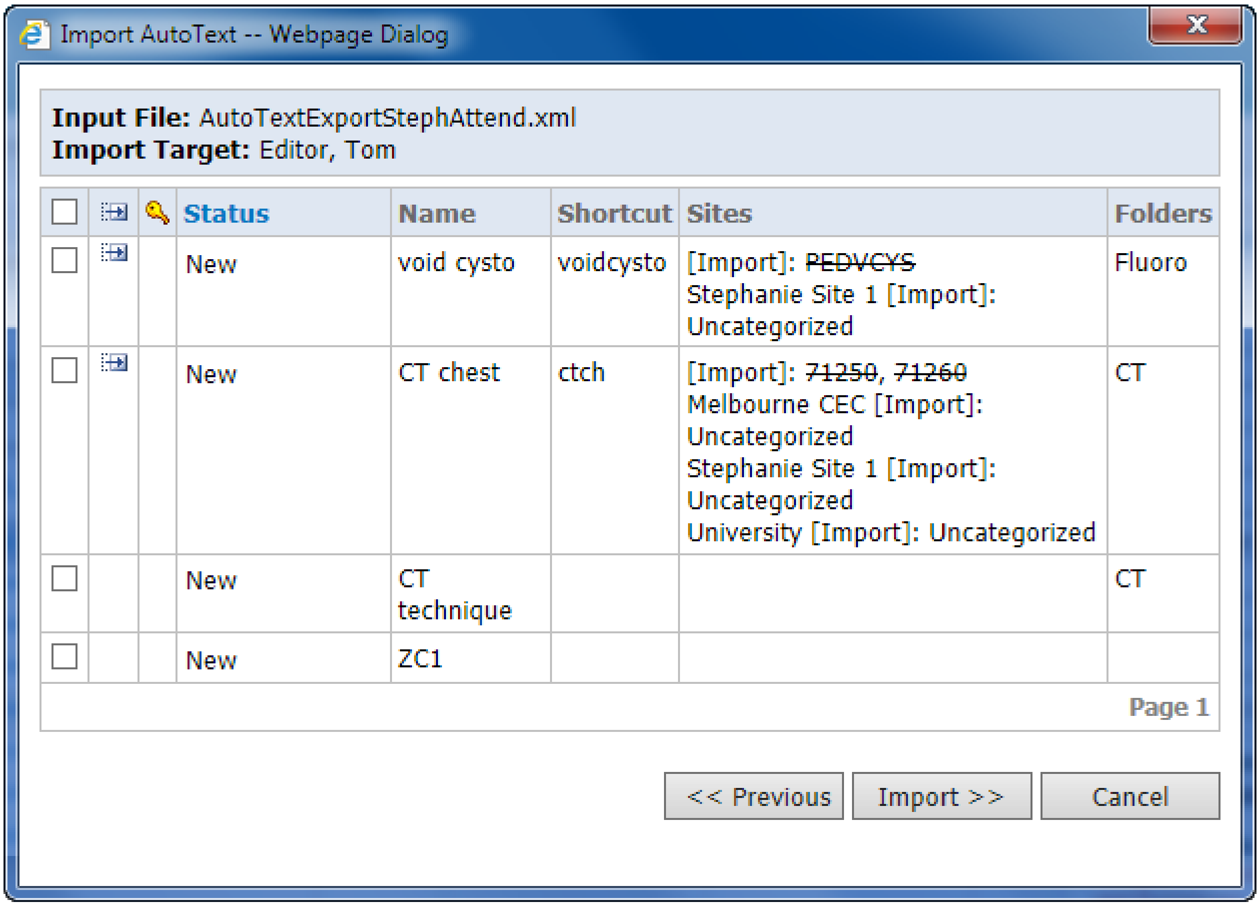
The following table explains the selections and their impact on one another:

Importing AutoText Preferences		
Item	**Selection**	**Description/Availability**
AutoText name-conflict resolution	Rename and Import AutoText	Allows you to rename an imported AutoText that has the same name as an existing AutoText.
	Overwrite existing AutoText	Overwrites an existing AutoText that has the same name.
	Do Not Import AutoText	Does not import an AutoText that has the same name as an existing AutoText.
AutoText categorization	Import categorization (Only available when **Rename and Import AutoText** is selected)	Imports the procedure categorization of an AutoText when a matching procedure code and/or description exists in the import target. The behavior of this selection is dependent on what is selected for **Procedure code matching** (described below).
	Reset existing categorization (Only available when **Overwrite existing AutoText** is selected)	Resets the existing categorizations to that of the imported AutoText.
	Merge categorization (Only available when **Overwrite existing AutoText** is selected)	Retains the current procedure categorizations and imports the new procedure categorizations.
	Do not import categorization	Select this option to NOT import procedure categorization even though a matching procedure might exist in the import target.
Procedure code matching	Use Code & Description	Imports the AutoText categorizations when both the Procedure Code and the Procedure Description are identical to those in the target site.
	Use Code	Imports the AutoText categorizations when the Procedure Code is identical to the Procedure Code in the target site.
	Use Description	Imports the AutoText categorizations when the Procedure Description is identical to the Procedure Description in the target site.

Importing AutoText Preferences (cont.)		
Item	**Selection**	**Description/Availability**
Import Default	For categorized AutoText only	Imports the AutoText Default attributes when the imported AutoText is categorized to matching procedures.
	Clear imported settings	Retains the original Default attributes and does NOT import Default attributes of categorized AutoText.
Import Folders (or Import Sections)	Create missing folders	Creates any folders that are associated with the imported AutoText but are missing from the target user or site.
	Do not create missing folders	Does NOT create folders that are associated with the imported AutoText but are missing from the target user or site.
	Do not import folders (or Do not import sections)	Does NOT import folders or sections that are associated with the imported AutoText.
	Import sections	Imports sections that are associated with the imported AutoText (only if the target site already contains the exact named sections).
Import new Site AutoText as multi-site	Check box	Allows you to import an AutoText from one site to another site and retain both sites, making it a shared multi-site AutoText (rather than an individual site AutoText in each of the sites).
Imported Default overrides conflicting	Check box	Select this check box to have the imported Default AutoText override any existing Default AutoText with which they conflict.
Import references	Check box	Select this check box to import AutoText references that are part of new AutoText fill-in fields. The referenced AutoText must be imported at the same time as the primary or parent AutoText containing the references.

6. Click **Next**. The software reads the file and determines the status of each AutoText in relation to those already in the system.

A table displays the AutoText found in the file.



The **Status** column displays each AutoText's status with relation to those already in the system.

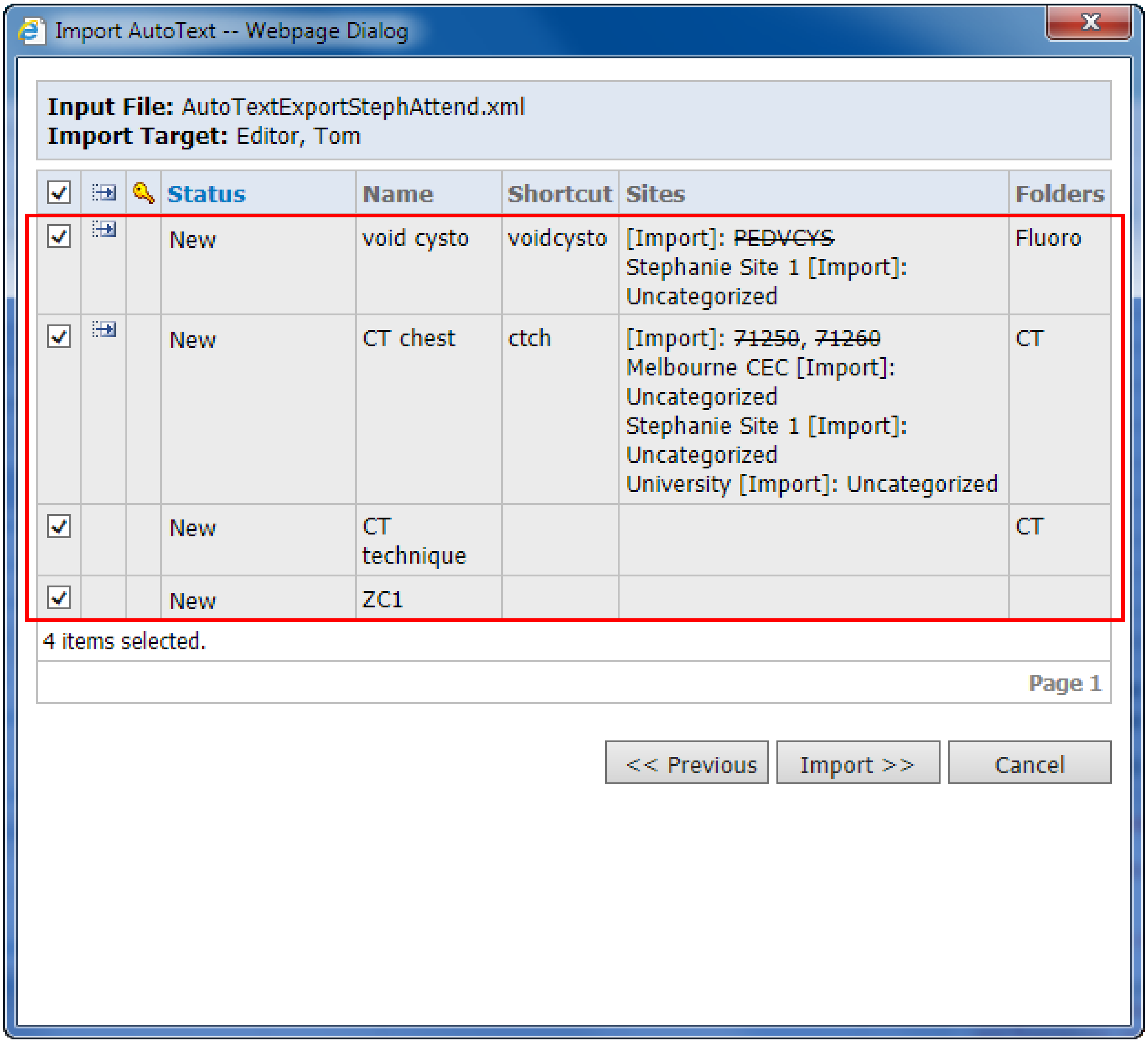
- **New**: The AutoText is being added to the system for the first time.
- **Conflicting**: The AutoText has the same names/shortcut combination as an AutoText already in an account or site in the system. You have the opportunity to change the name, to overwrite the existing name with the new one, or to omit the AutoText from the import process.
- **Unmodified**: The AutoText exists in the system, with the same name/shortcut or with a different one, and has not been changed.
- **Modified**: An AutoText with the same internal ID exists in the system, with the same name/shortcut or with a different one, and has been changed.

To change a conflicting AutoText name:

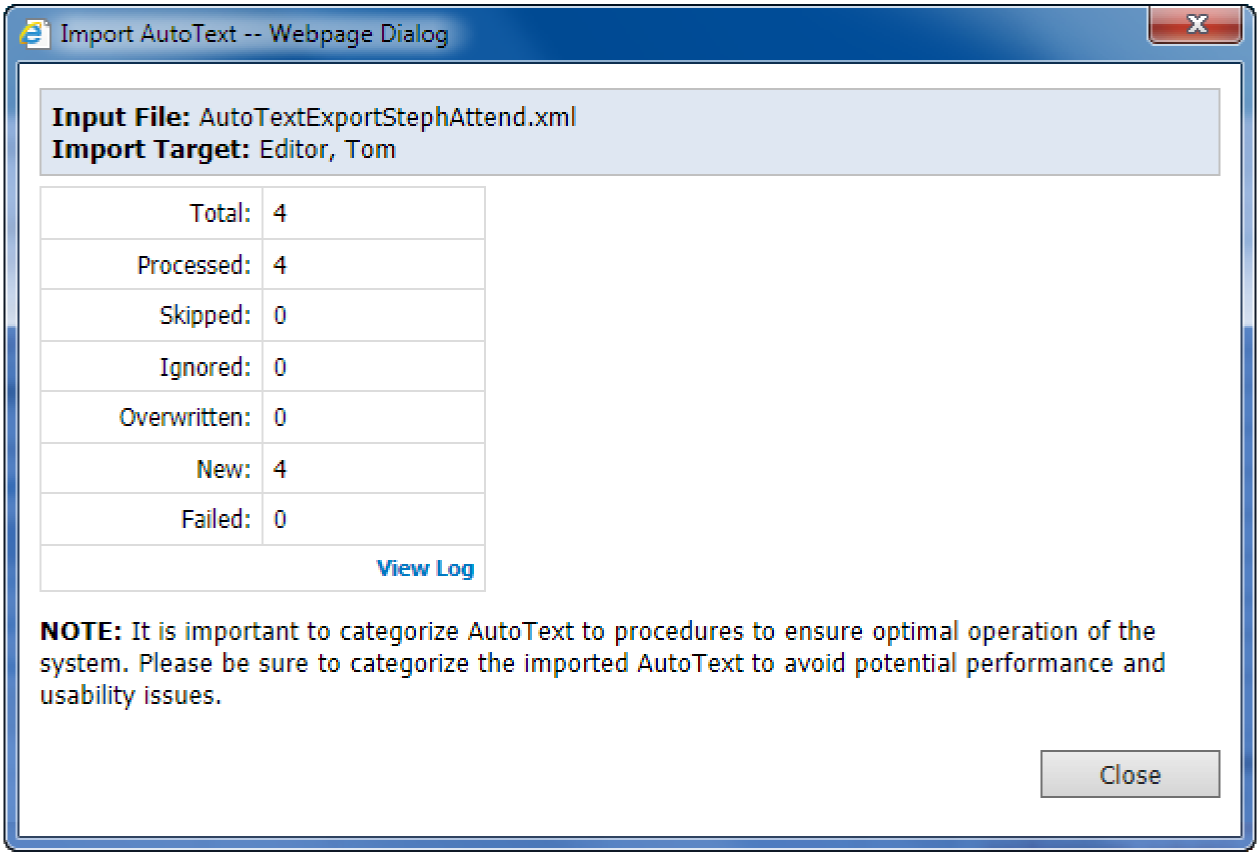
a. Type the new name in the **Name** column.

b. Click the **Save** icon.

7. Place a check mark next to each AutoText you want to import, or check the box in the heading to import all the AutoText in the list.



8. Click **Import**. The AutoText are imported. A message box indicates the results of the import process.



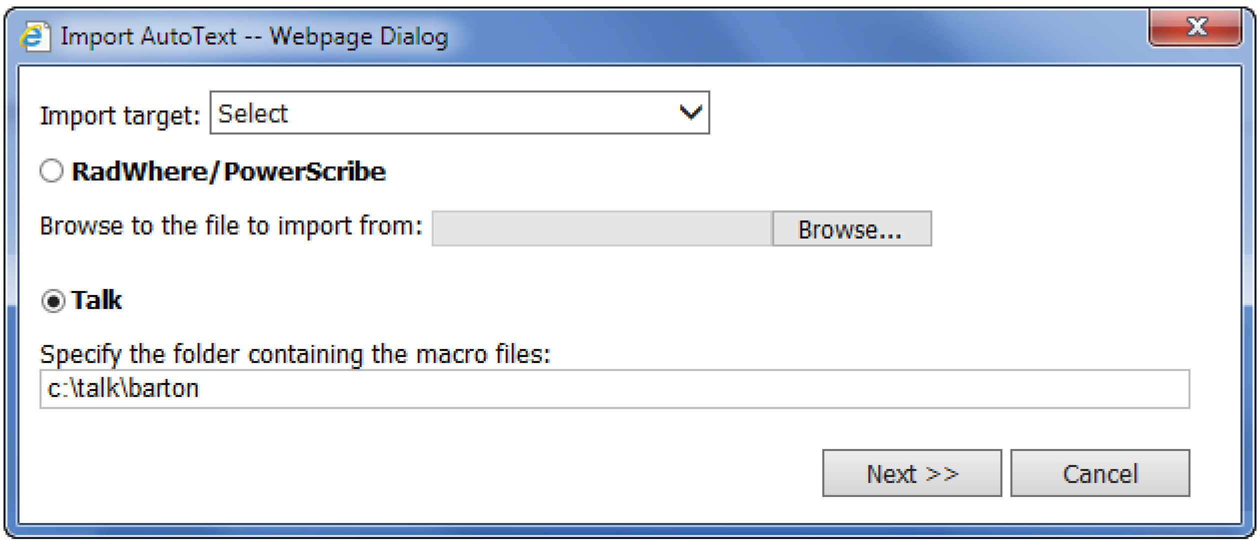
- **Processed**: AutoText found in the import file.
- **Ignored**: AutoText you chose not to import.
- **Renamed**: Conflicting AutoText that were imported with new names.
- **Overwritten**: Conflicting AutoText that were imported and replaced existing AutoText.
- **New count**: New AutoText that were added to the site/account
- **Modified**: Modified AutoText that were imported.
- **Failed**: AutoText that could not be imported.
- **View Log** link: Displays details about the import event, including any error messages.

Importing Macros from the Agfa TalkStation Application

In the TalkStation application, all macros for a particular user are stored in a single folder. Therefore you need only specify the path and folder name; all macros in any files in the folder are imported.

To import macros from the Agfa TalkStation application:

1. On the **AutoText** tab of the **Setup** group, click **Import...**. The **Import AutoText** dialog box opens.

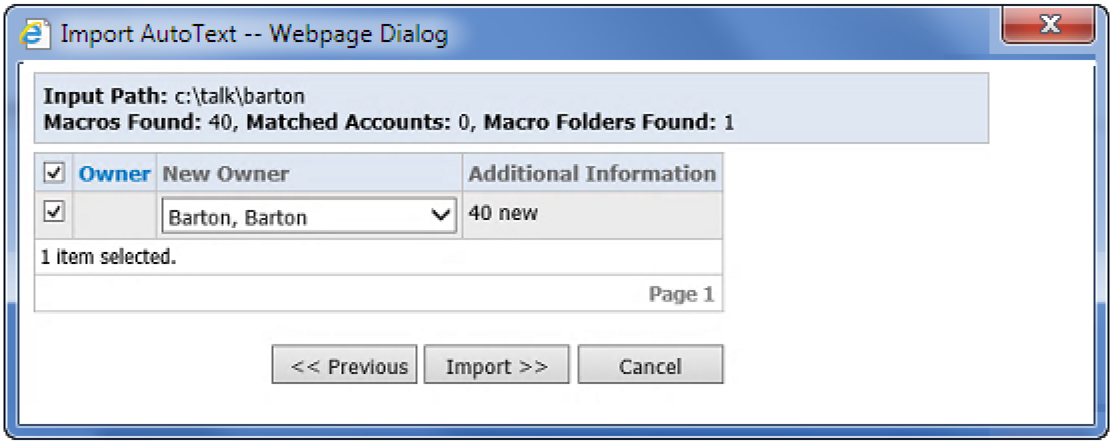


2. Select the import target from the drop-down list. You can import macros to a single user account, or you can import them to a site for use by all users in the site.
3. Select **Talk**.
4. Specify the path and folder name. The Admin Portal must have read access to the path you specify.

   Note: *For a network drive, use the original UNC path name. Or, you can copy the files from the network location to a folder on your own computer. In either case,* ***the Administrator Portal must have read access to the path you specify.***

5. Click **Next**. The software reads the file and determines the status of each macro found in relation to those already in the system.
   - **New**: The macro is being added to the system for the first time.
   - **Conflicting**: The macro has the same names/shortcut combination as an AutoText already in an account or site in the system. You have the opportunity to change the name, to overwrite the existing AutoText with the new one, or to omit the AutoText from the import process.
6. Place a check mark next to each macro you want to import.

7. Click **Import**. The macros are imported, and handled according to the options you selected. A message box indicates the number of AutoText processed.



Exporting AutoText

You can export selected AutoText to an *.xml* file. You can then import the *.xml* file to add the AutoText to another user or site.

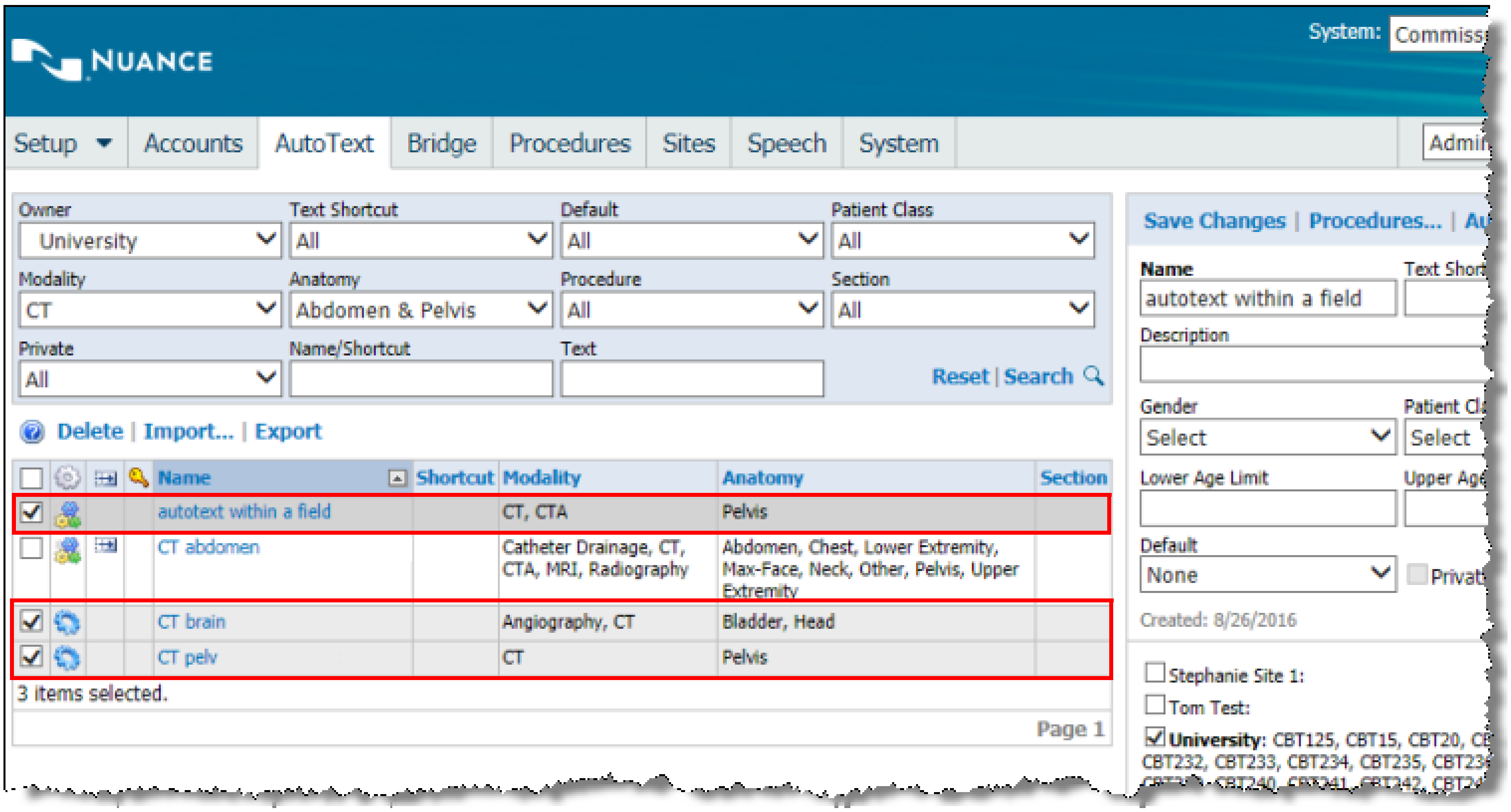
If you export an AutoText that has been associated with one or more procedure codes and procedure descriptions, its procedure codes and procedure descriptions are exported. If that AutoText is then imported back to the same system—for example, from one account to another— then the procedure codes and procedure descriptions are all imported along with it.

On the other hand, if it is imported to another system, which has its own procedure codes and procedure descriptions, the procedure codes and descriptions found in the .xml file are compared to those in the new system. If no matches in procedure codes and/or descriptions are found, the imported AutoText appear as uncategorized (that is, they have no associated procedures). You will need to review the AutoText in the new system and ensure that they are associated with the correct procedure codes and procedure descriptions.

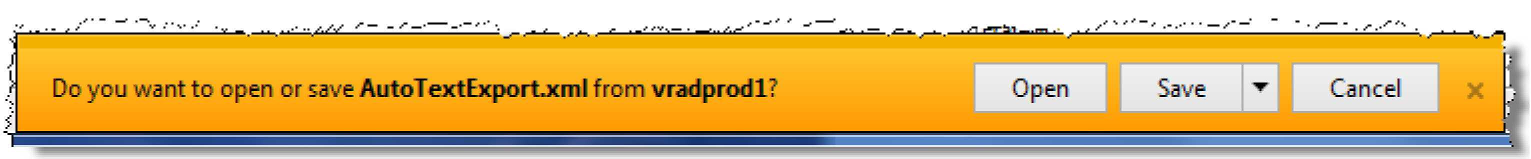
To export AutoText:

1. Find the AutoText you want to export. Refer to *Searching for AutoText in the Administrator Portal*, beginning on page 290.

2. Place a check mark next to each AutoText you want to export. To export all the AutoText in the list, place a check mark in the heading.



3. Click **Export**. You are prompted to open or save the file *AutoTextExport.xml*.



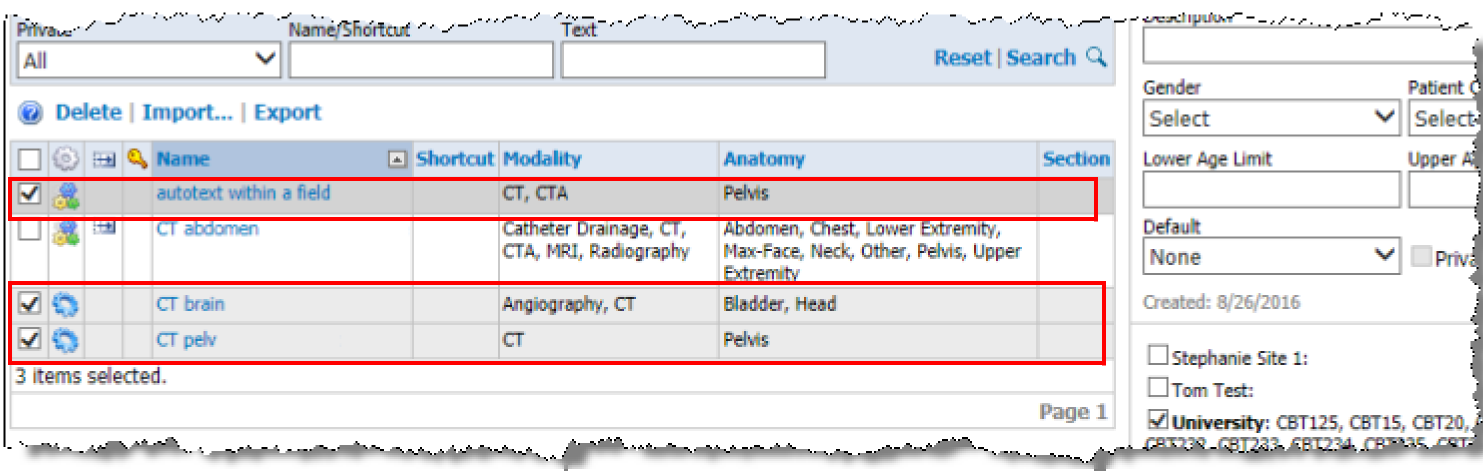
4. Click **Save** to save the export file to the **Downloads** folder on the computer. To save the export file to a different location, click the arrow to the right of the **Save** button and select **Save As**. A window opens allowing you to navigate to and select the folder to which you want to save the *.xml* file. The file is stored at the location you specified.

Deleting AutoText

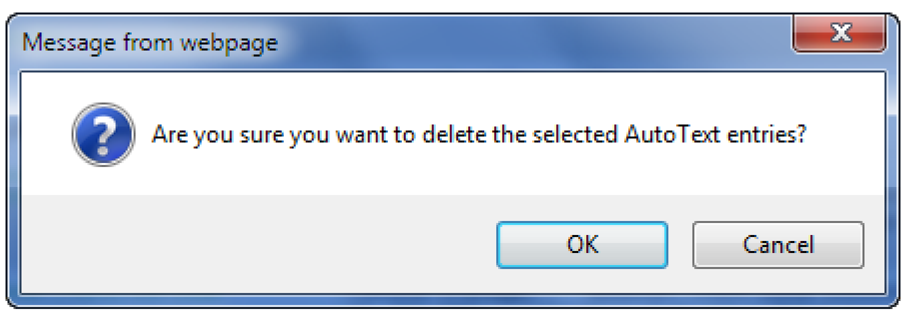
In the *PowerScribe 360 Reporting* Administrator Portal, you can delete AutoText which removes the AutoText from the system.

To delete an AutoText:

1. Use the search feature to find the AutoText you want to delete. Refer to *Searching for AutoText in the Administrator Portal*, beginning on page 290.
2. Place a check mark next to each AutoText you want to delete.



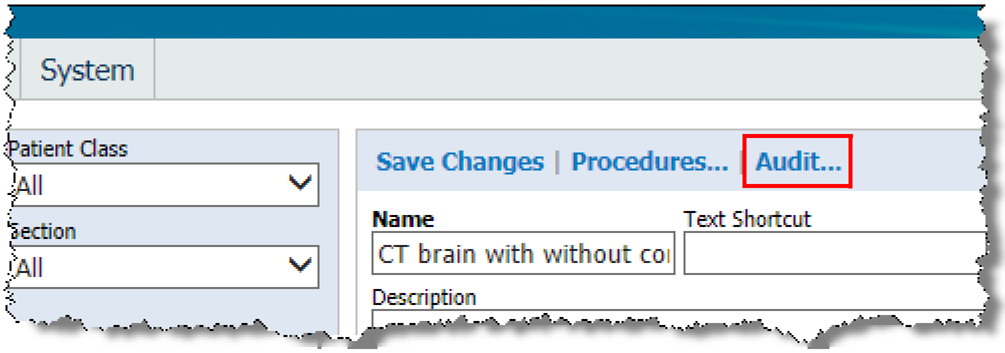
3. Click **Delete**. You see a confirmation message.



4. Click **OK**. The items you selected are deleted from the system.

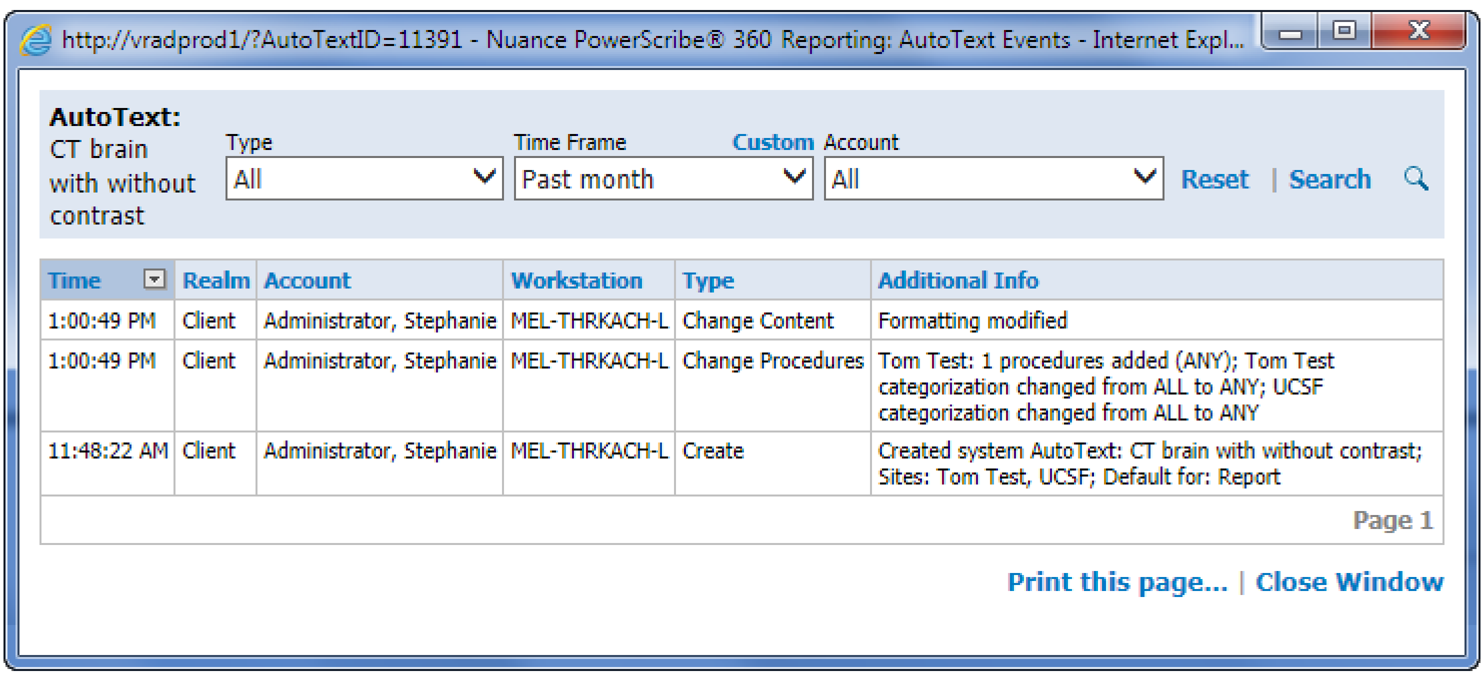
Auditing AutoText

You can view an audit trail of AutoText from creation to present. From the AutoText tab, locate the AutoText you want to audit and click its Name. Then click the Audit link.



Audit Filters

- The **Type** drop-down shows the various audit changes that are captured in the audit, including changes to properties, procedures, content, default status, and owner.
- The Time Frame field allows you to select a date range for audit events.
- The Account drop-down includes All and each User Account.



Printing AutoText

You can print a list of AutoText belonging to an individual user, for the system, or through the report management feature in *PowerScribe 360 Reporting*. Refer to *Running the AutoText—Verbiage Report*, beginning on page 545.

Managing AutoText in the Client Application

As an administrator, you can create, modify, and manage AutoText for a user, one or more sites, or yourself.

For information on how to work with AutoText in the client application, see *AutoText for Providers*, beginning on page 251 of this guide.

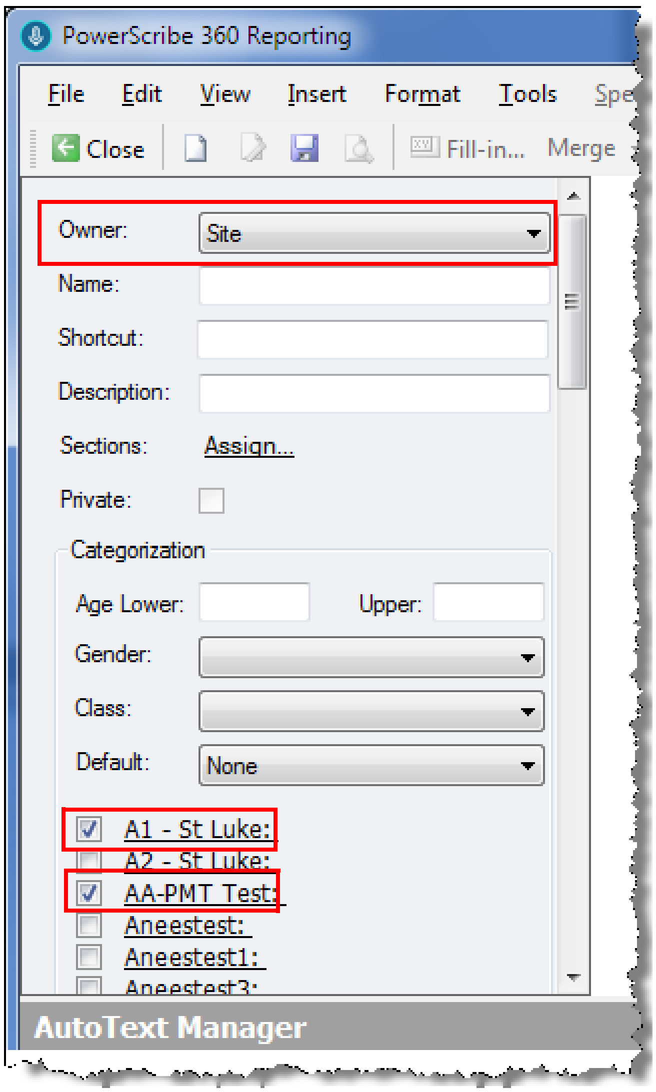
For information about structured reporting and findings mode (if these topics apply to your site), see *Creating and Using AutoText for Findings Mode*, beginning on page 315 of this guide.

Note: *The information in this section is unique to your role as an administrator. You must have an* ***Administrator-only*** *role to perform the tasks shown in the remainder of this section. If you log in with a role that contains both Administrator and Attending rights, you will* ***not*** *be able to perform these tasks.*

Create a Multi-Site AutoText in the Client Application

If you log in to the client application as an administrator, you can create site-level AutoText.

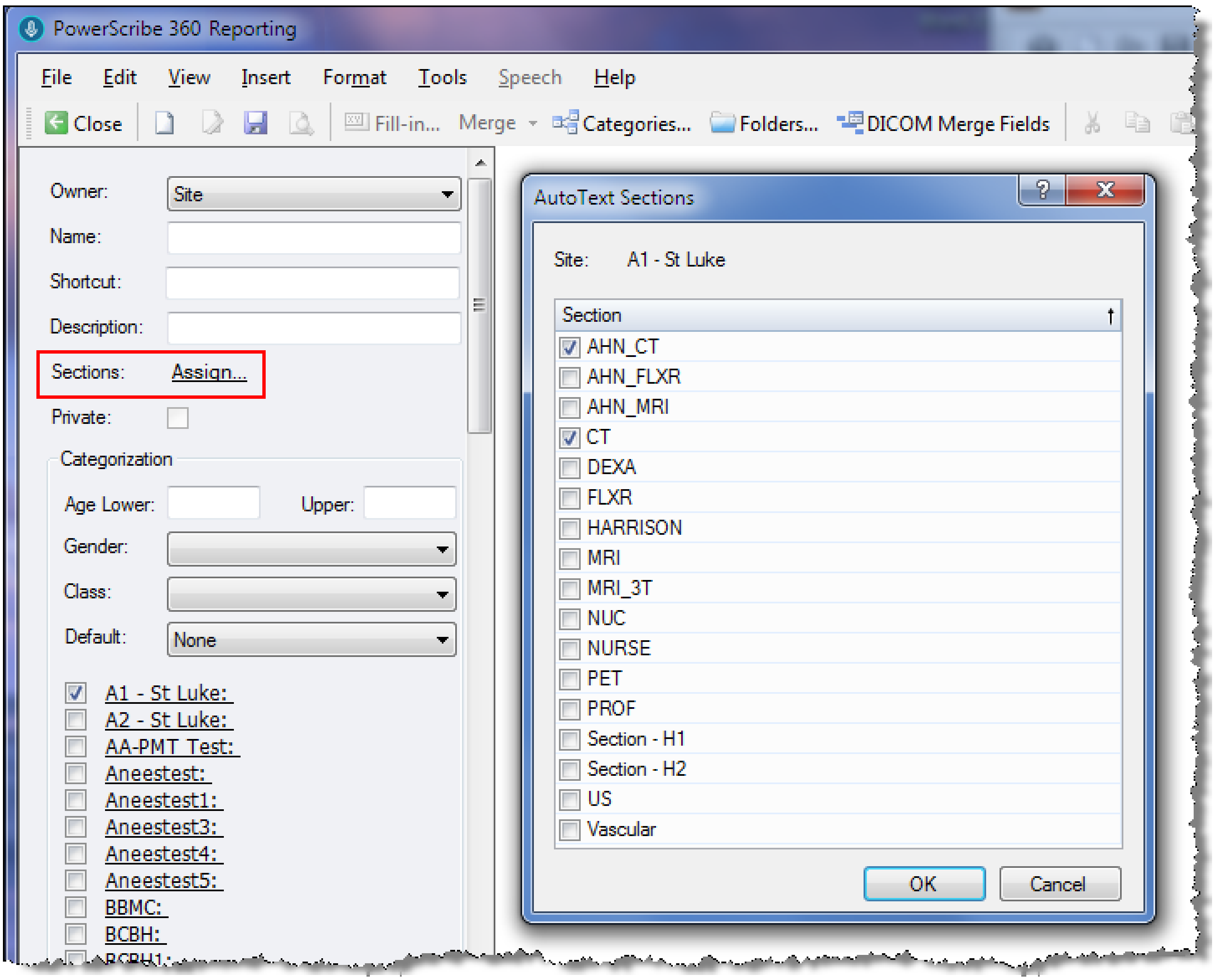
1. From the AutoText Editor window, click the **Owner** drop-down list and select **Site** (which appears at the top of the list by default). The list of sites for your system now displays a selectable check box to the left of each site.
2. Select one or more sites to which you want to assign the AutoText and continue creating the AutoText as you normally would. (See the illustration below for an example.)



Assign Sections to Site AutoText

Once you select a site (or sites) for the AutoText, you can assign it to a section or sections within the site.

1. From the **Owner** drop-down list, select **Site**.
2. Select one or more sites. The **Sections: Assign** link becomes available.
3. Click the **Assign** link. The **AutoText Sections** window opens.



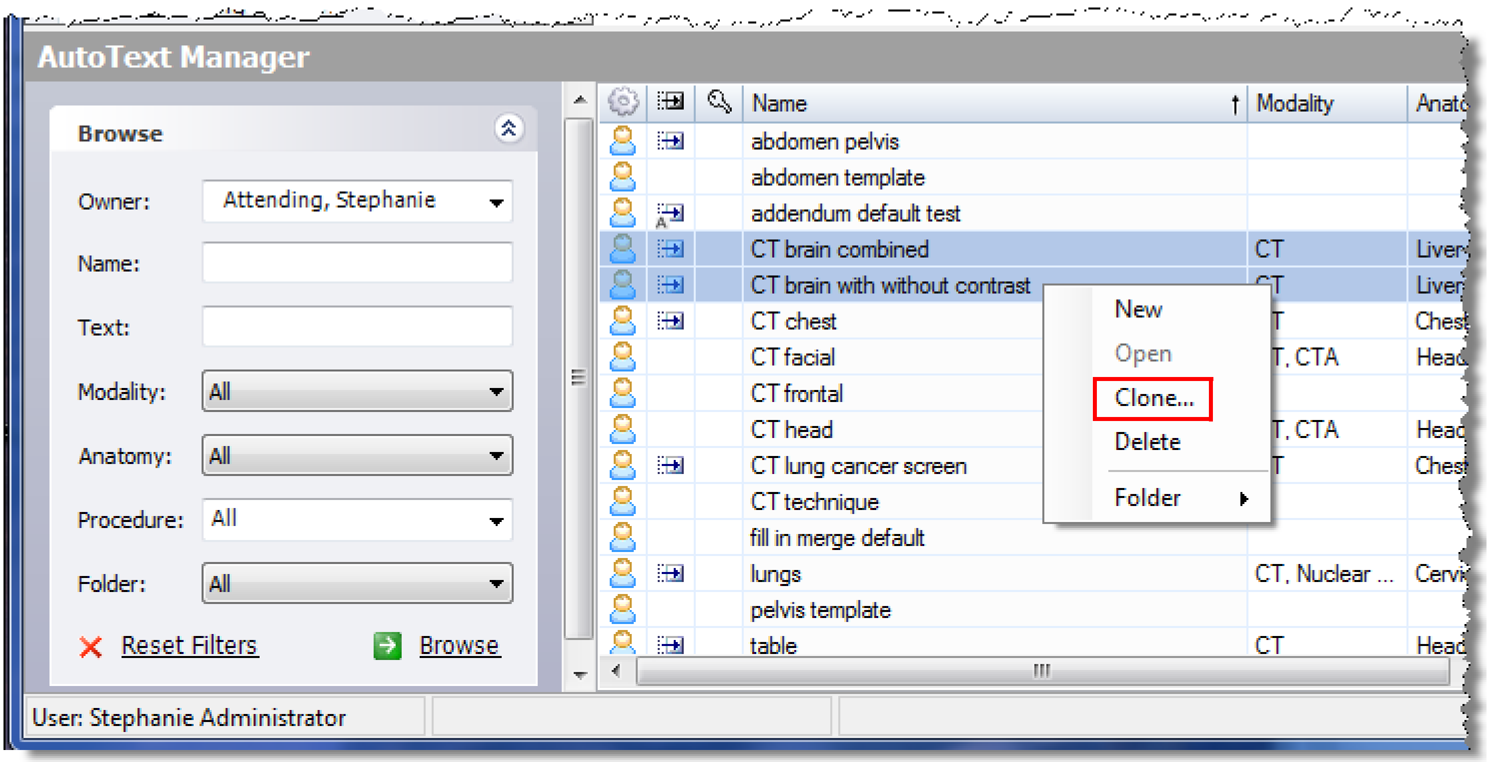
4. Select one or more sections by selecting the section check boxes.
5. When finished click **OK**.

Clone AutoText

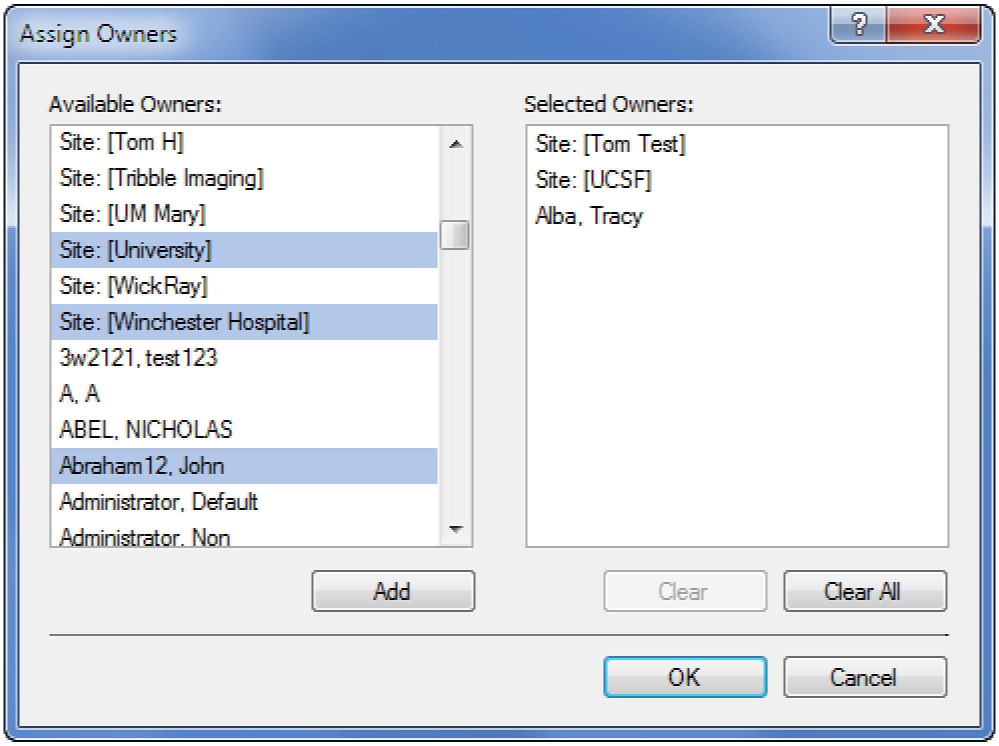
Tip: *When selecting more than one AutoText, site, or user, use your Windows Shift and Ctrl keys to make multiple selections.*

Cloning an AutoText allows you to select one or more AutoText and assign ownership to other sites and users.

1. From the AutoText Manager area, search for and select one or more AutoText you want to clone.
2. Right-click the AutoText you selected and click **Clone**.



The **Assign Owners** dialog box opens.



3. Select one or more owners (sites or user accounts) and click **Add**.
4. When finished, click **OK**. Depending upon factors, such as selecting more than one AutoText; default status; categorization; or if the AutoText already exists in the selected site or user account, one or more dialog boxes open asking how you want to manage these factors.

Chapter 13

Creating and Using AutoText for Findings Mode

Objectives

In this chapter you will:

- Create AutoText to work with Findings Mode
- Use AutoText with Findings Mode in Report Editor

Creating AutoText to Work with Findings Mode

In Findings Mode, the *PowerScribe 360 Reporting* software automatically converts free-form dictation to a structured report. This feature is helpful when a facility requires a structured report format, but many providers are accustomed to, or prefer, free- form dictation. To support this mode, the fields embedded in AutoText are mapped to certain key words, called hyponyms. Hyponyms might be whole words, such as *cardiac*, *thoracic*, and *renal*, or fragments such as *hepat* and *cirrho*. The system considers the field's name as the first hyponym.

When a provider dictates a word that is a hyponym of one of the fields in the report, the software identifies the surrounding sentence or phrase as belonging to that field, and when the provider applies findings, it inserts the dictation in the field. For example, if the provider dictates **"Hepatic..."**, and a field named **Liver** has been defined with *hepat* as one of its hyponyms, the system takes the sentence containing "hepatic" and places it in the **Liver** field.

Findings mode works only with AutoText that is structured with a single fill-in field per anatomical region. The AutoText need not include actual section headings for the anatomical regions; all that is required is that there be a single field per region.

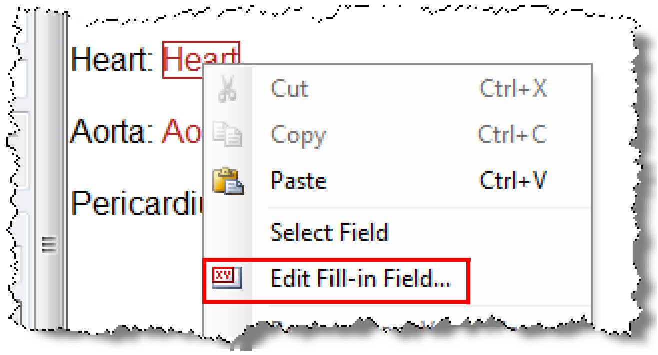
Adding Hyponyms to Fill-in Fields in AutoText

The system considers the field name to be the first hyponym, so you do not need to include the field name in the **Hyponyms** list. You should, however, include all variations of the name, to ensure that dictation containing any of the variations is captured and placed in this field. For a field named **Thorax**, you might include the word *thoracic* or the fragment *thorac*. For a field for pericardium findings, you might need to add the word *pericardial*. You can use uppercase, lowercase, or both; the system does not consider case in hyponyms.

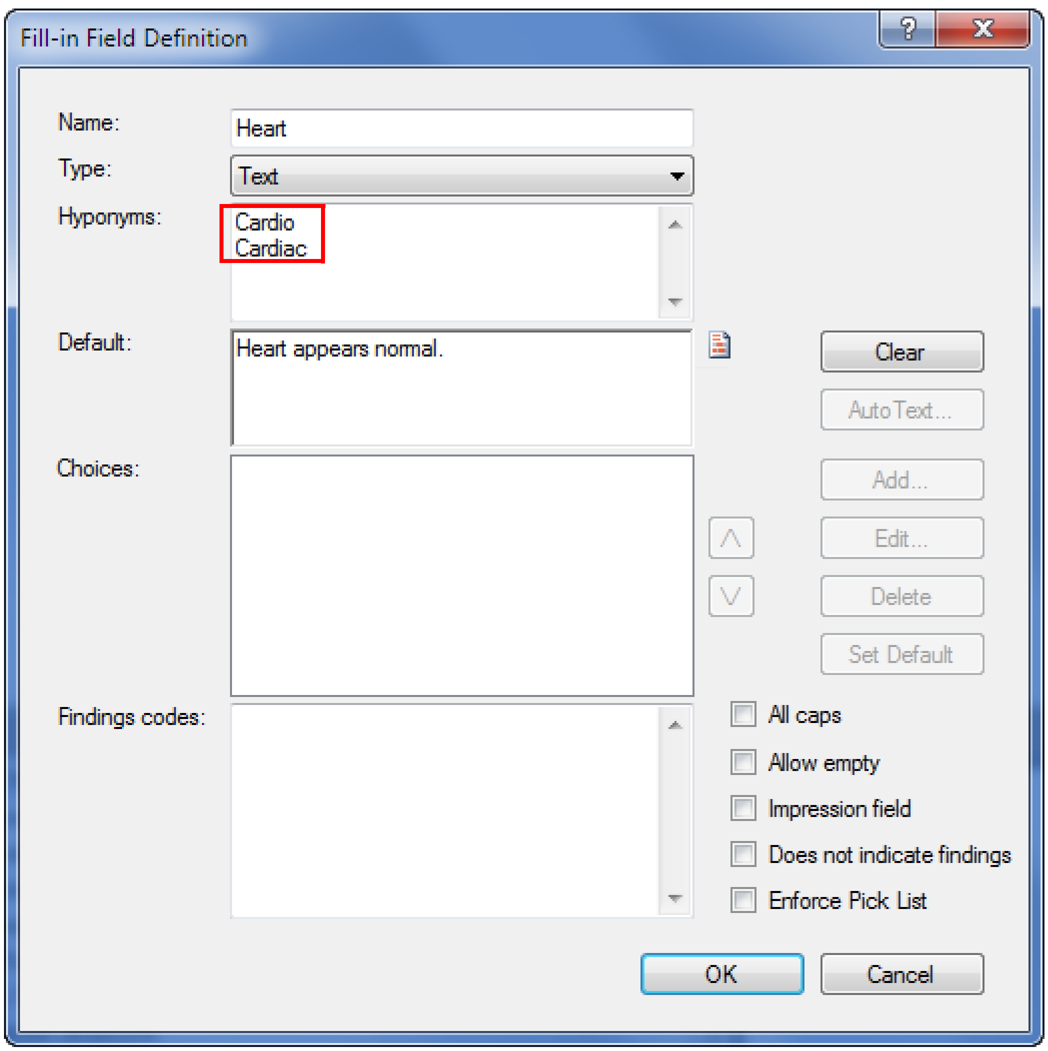
To add hyponyms to a field:

1. In the *PowerScribe 360 Reporting* client, select **Tools > AutoText Editor** from the menu bar. The **AutoText Editor** window opens.
2. Double-click the AutoText that contains the field to which you want to add one or more hyponyms. The AutoText opens for editing.

3. Right-click the field and select **Edit Fill-in Field**.



4. Type the new hyponyms in the **Hyponyms** text box. Place each word, fragment, or phrase on a separate line.



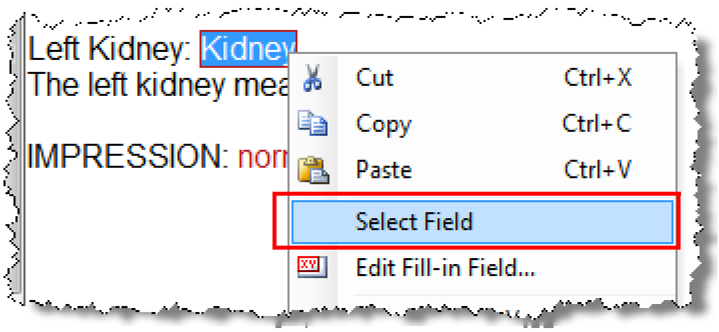
5. Click **OK**.
6. Click **Close**, and click **Yes** to save the AutoText.

Copying and Pasting a Field and its Hyponyms

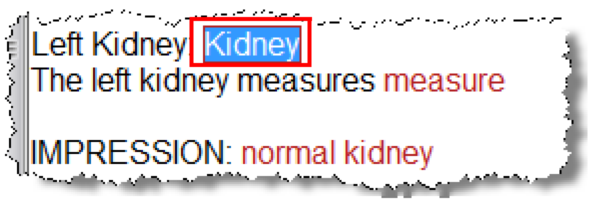
When you copy a field, its hyponyms are copied along with it.

To copy a field:

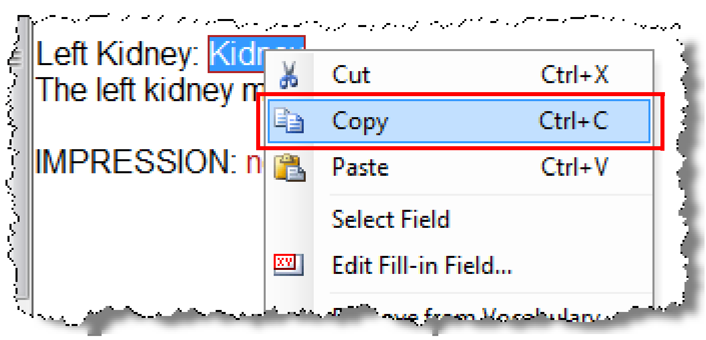
1. In the *PowerScribe 360 Reporting* client, select **Tools > AutoText Editor** from the menu bar.
2. Double-click the AutoText that contains the field you want to copy. The AutoText opens for editing.
3. Right-click the field and select **Select Field**.



The field is highlighted.



4. Right-click the field and select **Copy**, or press **Ctrl+C**.



The field, with its properties, is copied to the Windows clipboard.

5. Find the AutoText in which you want to insert the field. (Refer to *Searching for AutoText*, beginning on page 283.)
6. Double-click the AutoText to open it.
7. Place the insertion point at the position where you want to insert the field.

8. Right-click and select **Paste**. The field appears in the AutoText.

   To view the new field's properties, right-click the field and select **Edit Fill-in field**.

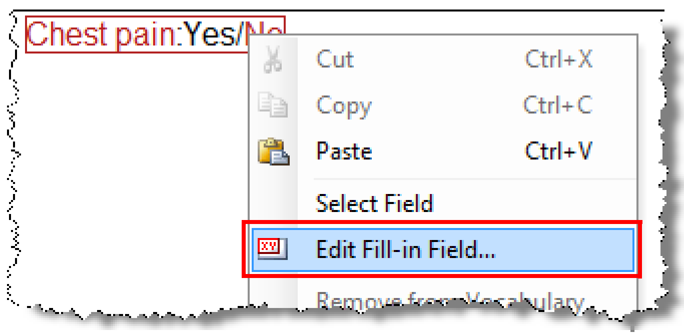
   The **Fill-in Field Properties** dialog box displays the field's hyponyms and its other properties.
9. Click **OK**.
10. Click **Close**, and click **Yes** to save the AutoText.

Omitting a Field from Findings Mode

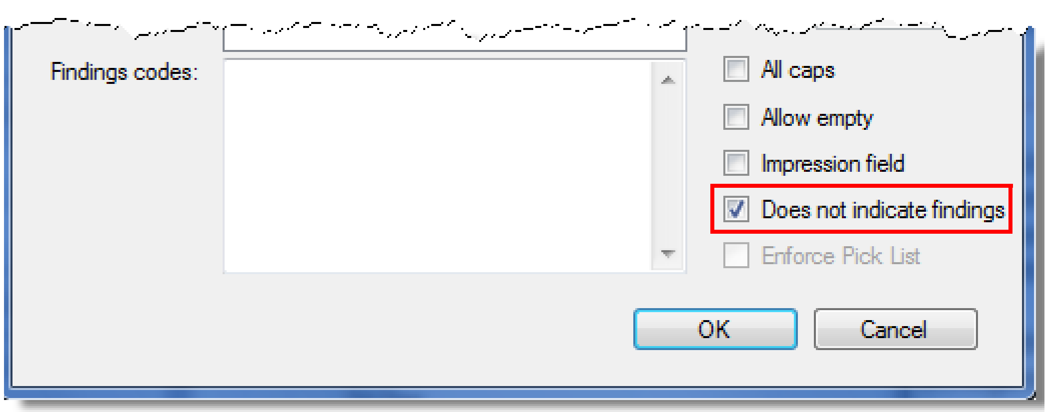
Some fields never contain findings and should not have findings applied to them.

To omit a field from findings mode:

1. In the *PowerScribe 360 Reporting* client, select **Tools > AutoText editor** from the menu bar.
2. Double-click the AutoText in which you want to omit a field from findings mode. The AutoText opens for editing.
3. Right-click the field and select **Edit Fill-in Field…**.



   The **Fill-in Field Properties** dialog box displays the field's properties.
4. Select **Does not indicate findings**.



5. Click **OK**. When you apply findings, the software will not attempt to find matching text for this field.

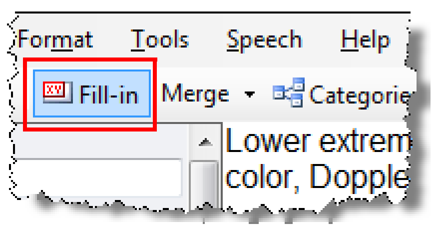
Creating an Impression Field

The impression field contains your final remarks about the study. Some facilities use “summary,” “conclusion,” or another term for this field.

When you dictate the word “impression,” “summary,” or “conclusion,” the software identifies the verbiage following it as the impression, and places it in the Impression field when it applies findings. It does not search this part of the dictation for text to match with the other fields in the document.

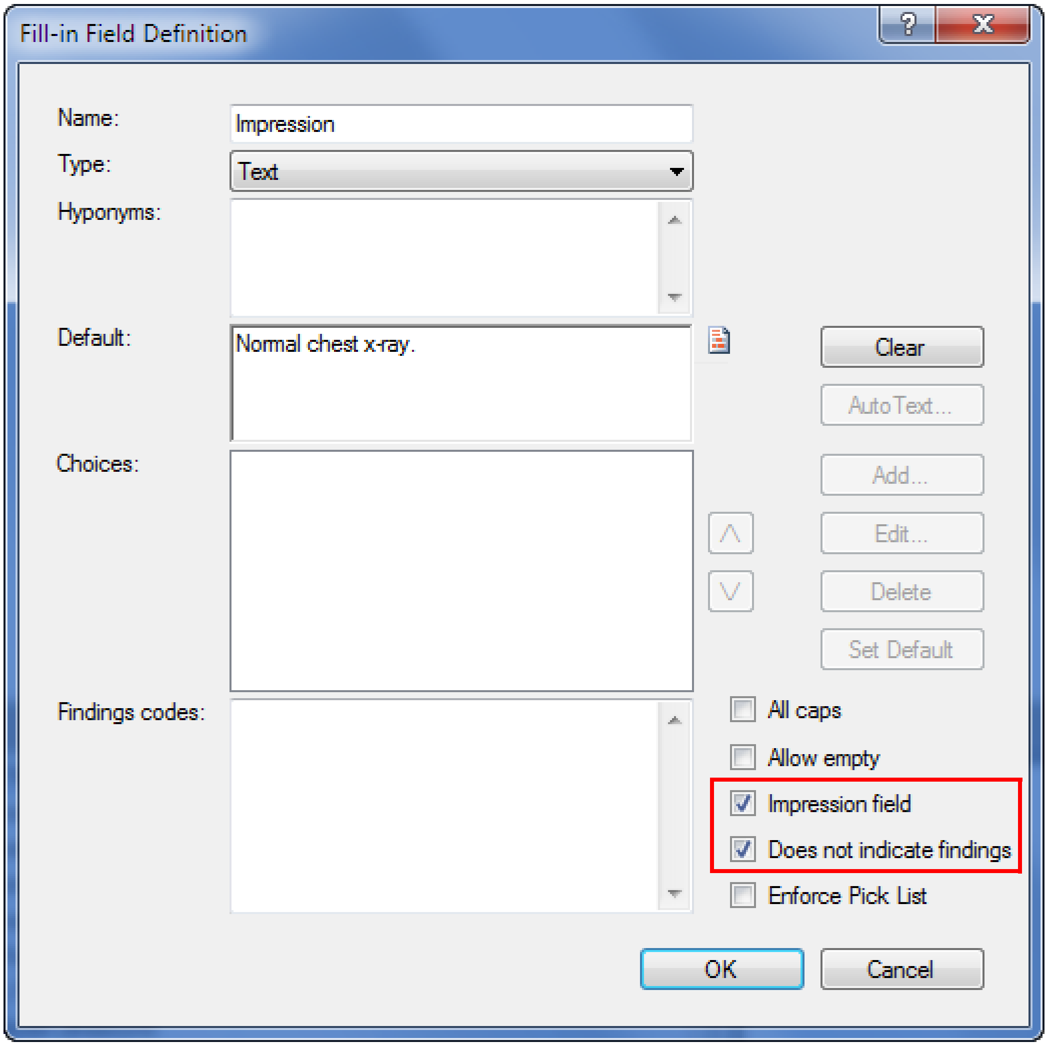
To create an impression field:

1. In the *PowerScribe 360 Reporting* client, select **Tools > AutoText Editor** from the menu bar.
2. Double-click the AutoText in which you want to create an impression field. The AutoText opens for editing
3. If desired, type the word Impression, Summary, Conclusion, or another term in the AutoText as a heading for the field.
4. Say **“Insert field”** (or click the **Fill-in** icon on the tool bar, or select **Insert > Fill-in** field from the menu bar).



5. Enter a **Name** for the impression field.

*Note: Typing the name **impression**, **summary**, or **conclusion** automatically selects the **Impression field** and the **Does not indicate findings** check boxes.*

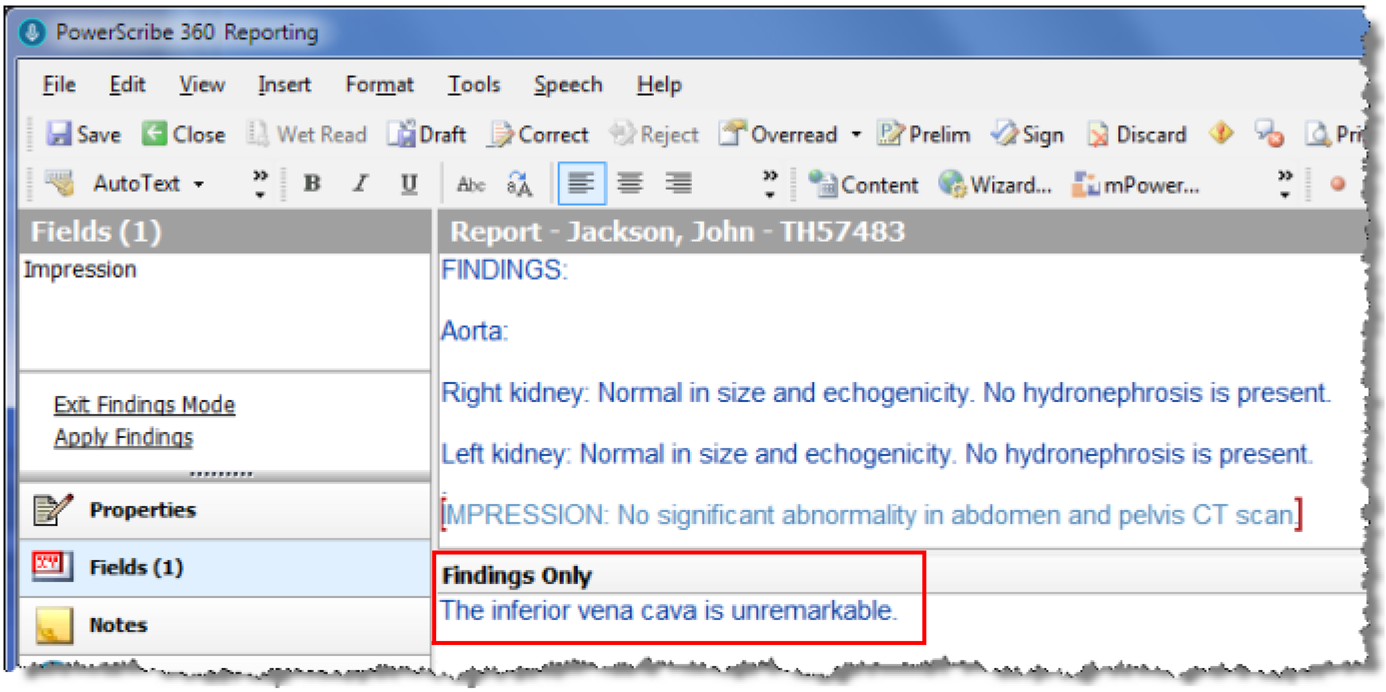


6. Select **Text** as the **Type**.
7. If desired, enter a value in the **Default** text box.
8. Click **OK**.

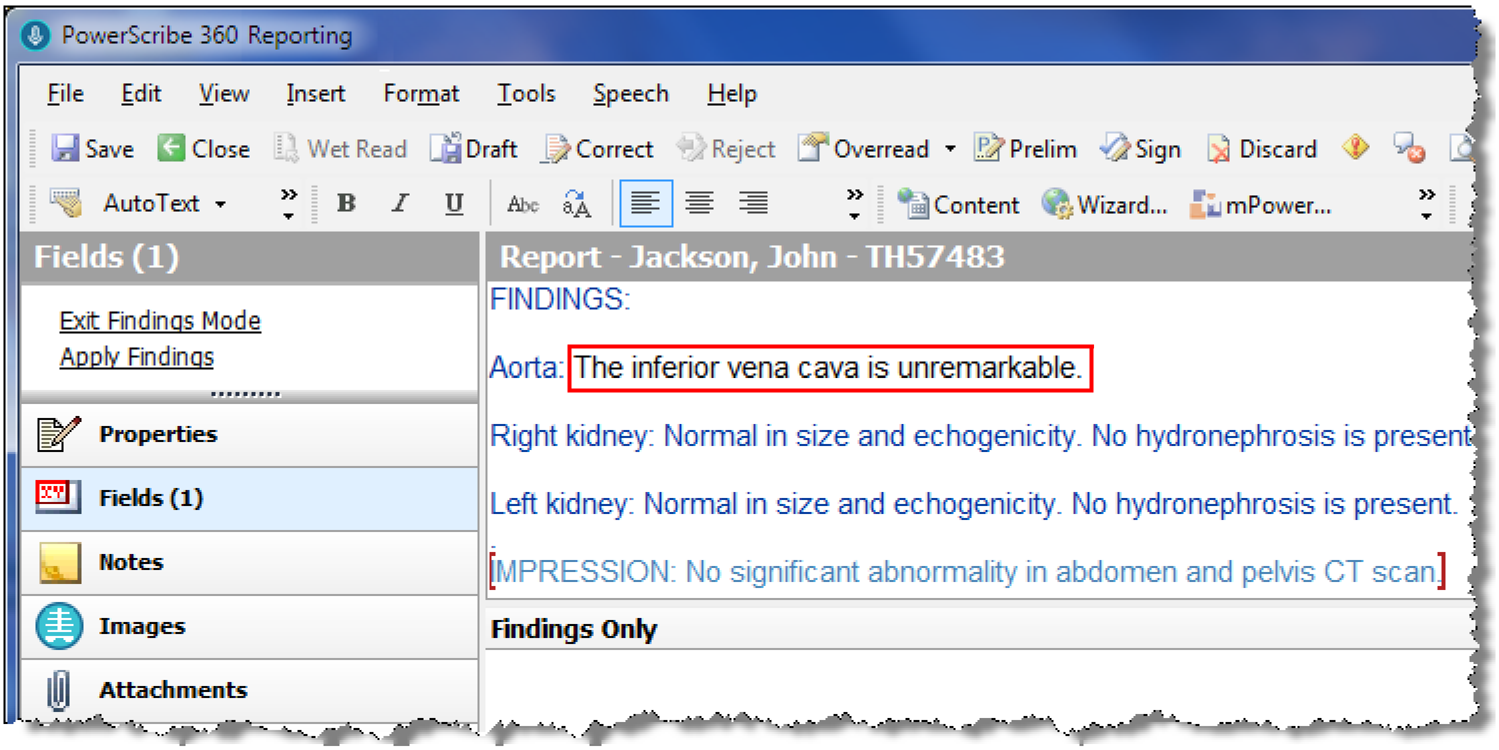
Using AutoText for Findings Mode

In the *PowerScribe 360 Reporting* client application:

1. The provider begins a report using structured AutoText.
2. To start Findings Mode, the provider dictates **“Findings mode”** (or clicks **Enter Findings Mode**). A special **Findings** box opens below the report body.
3. The provider dictates the study’s findings. She does not need to follow the order in which the anatomical regions appear in the AutoText, and does not need to use the exact words shown in any headings or field labels.



4. The provider dictates **"Apply findings"** (or clicks **Apply Findings**). The software captures any dictation that matches the hyponyms assigned to the fields in the AutoText and places it automatically in the appropriate fields.



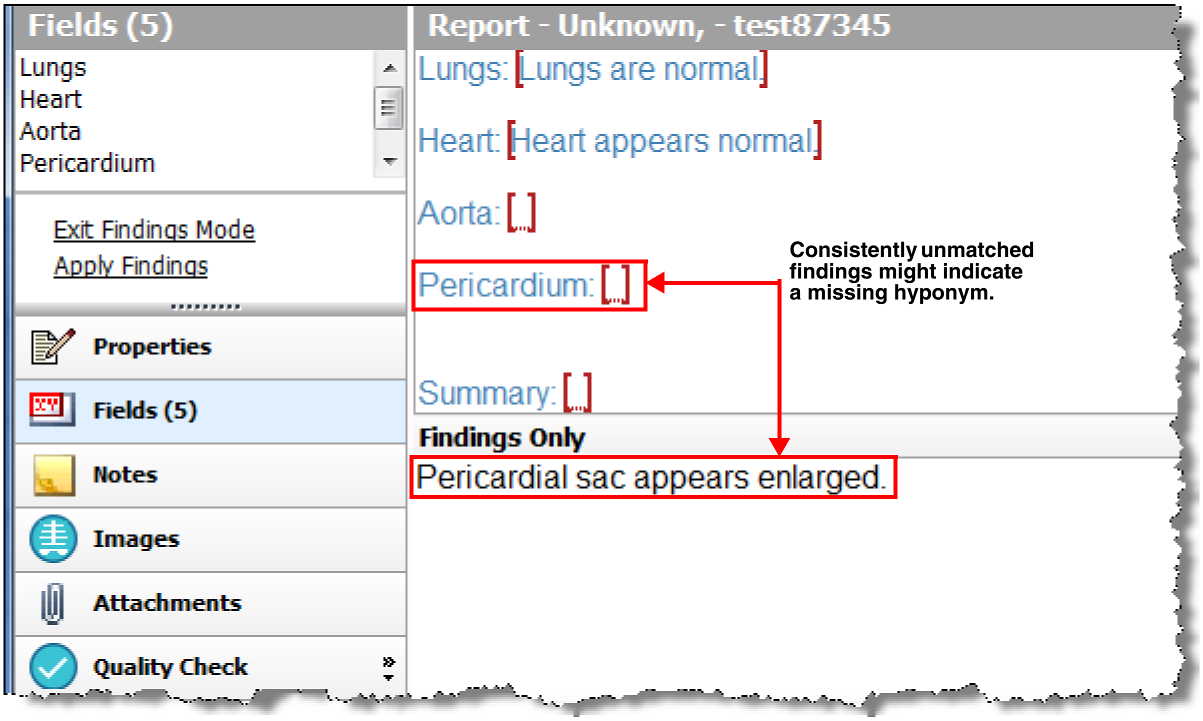
After applying the findings, the provider can use the AutoText as usual; he can select and dictate over any field to change its content.

Note: *Enter and apply Findings Mode only once per report. If the provider enters Findings Mode a second time (after Applying Findings), anything dictated and applied to a section of the report that contained prior dictation will be overwritten with the new dictation. In addition, dictation in Findings Mode is not saved as an audio file, so it is expected that the provider will self-edit the report rather than send to editor when using Findings Mode.*

Any dictation in the **Findings** box that does not match any of the hyponyms is either placed in the **Fields** list with a field name of **Unmatched1**, **Unmatched2**, and so on, or it remains in the **Findings** box, from where you can drag it to the appropriate place in the report.

Tip: *The **Add Unmatched Findings to Report** preference determines how the software handles unmatched dictation. Refer to page 70 to configure this setting at the system or account level. In the PowerScribe 360 Reporting client, select **Tools > Preferences**, and under the **Reporting** node, select **Add Unmatched Findings to Report**.*

If the client consistently fails to apply a particular finding to a field, you might be able to correct the problem by adding one or more hyponyms to the field. (See *Adding Hyponyms to Fill-in Fields in AutoText*, beginning on page 316 in this chapter.)



Chapter 14

Custom Fields

Objectives

In this chapter you will:

- Manage custom fields in the Administrator Portal
- Create custom fields for populating exam data in AutoText.
- Create custom fields for exporting in the HL7 message.

Introduction to Custom Fields

Custom fields are data items (also called metadata) associated with a particular order. You can use custom fields:

- as merge fields to populate exam data in an AutoText, such as measurements, radiation dosage information, flags, and so on.
- to export an HL7 message to the RIS, such as when a mammography exam requires a follow-up letter to the patient.

Custom fields can be automatically populated with data by an interfaced RIS and/or imaging machine. In addition, radiologists, editors, technologists, and administrators can populate data in custom fields. As an administrator, you can define custom fields for each of your facility's sites.

Export and Import Custom Fields

If you have existing custom fields in a site, and want to use those custom fields for another site, you can export and import custom fields between sites. Exporting/importing maintains the custom field properties and options. If a procedure code matches in the new import target (Site), the procedure association is maintained as well.

Export Custom Fields

To export custom fields from a site to a csv file:

1. Click **Setup** > **Sites** and select a site from the drop-down list.
2. Click the **Custom Fields** link and select **Export**. A bar at the bottom of the window asks if you want to open or save the csv file. By default, the file names of exported custom fields csv files appear as **<Site Name>_CustomFieldsExport.csv**. For example, **University_CustomFieldsExport.csv**.
3. Choose either **Open** or **Save**. In most systems you will have a **Save As** option, allowing you to change the file name and its location.

The file is copied to the location you selected and ready to be used for importing by another site.

The following illustrations show a partial example of an exported custom fields worksheet.

Tom H_CustomFieldsExport.csv

	A	B	C	D	E	F	G	H	
1	Name	Description	Active	Required	Required Prelim	Exportable	Input Type	Default Value	Pro
2	Alert	Significant finding ale	TRUE	TRUE	TRUE	TRUE	Single Choice		
3	Alert	Significant finding ale	TRUE	TRUE	TRUE	TRUE	Single Choice		
4	Alert	Significant finding ale	TRUE	TRUE	TRUE	TRUE	Single Choice		
5	Alert	Significant finding ale	TRUE	TRUE	TRUE	TRUE	Single Choice		
6	BIRADS	BIRADS	TRUE	FALSE	FALSE	FALSE	Single Choice		
7	BIRADS	BIRADS	TRUE	FALSE	FALSE	FALSE	Single Choice		
8	BIRADS	BIRADS	TRUE	FALSE	FALSE	FALSE	Single Choice		
9	BIRADS	BIRADS	TRUE	FALSE	FALSE	FALSE	Single Choice		
10	Carotid 0.1 R	Right Systolic CCA	TRUE	FALSE	FALSE	FALSE	Single Choice		

	I	J	K	L	M	N	O	P
Value	Procedure	Choice Value	Choice Label	Choice Active	Export Value	Display Order	Role	Choice Default
		No alert necess	N/A	TRUE		0		FALSE
		Requires a STAT	Red	TRUE		0		TRUE
		Requires that re	Orange	TRUE		0		FALSE
		Requires that re	Yellow	TRUE		0		FALSE
		BIRADS 1	BIRADS1	TRUE		0		FALSE
		BIRADS 2	BIRADS 2	TRUE		0		FALSE
							Attending	
							Technologist	
	71020							

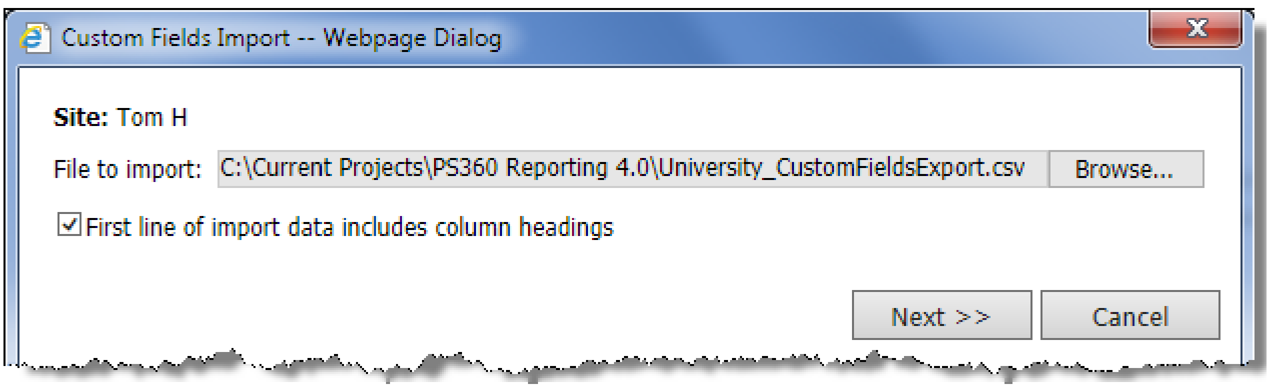
Import Custom Fields

Note: *The following fields are limited to a specific number of characters (shown below). Keep these lengths in mind when creating custom fields so that the export/import process works properly.*

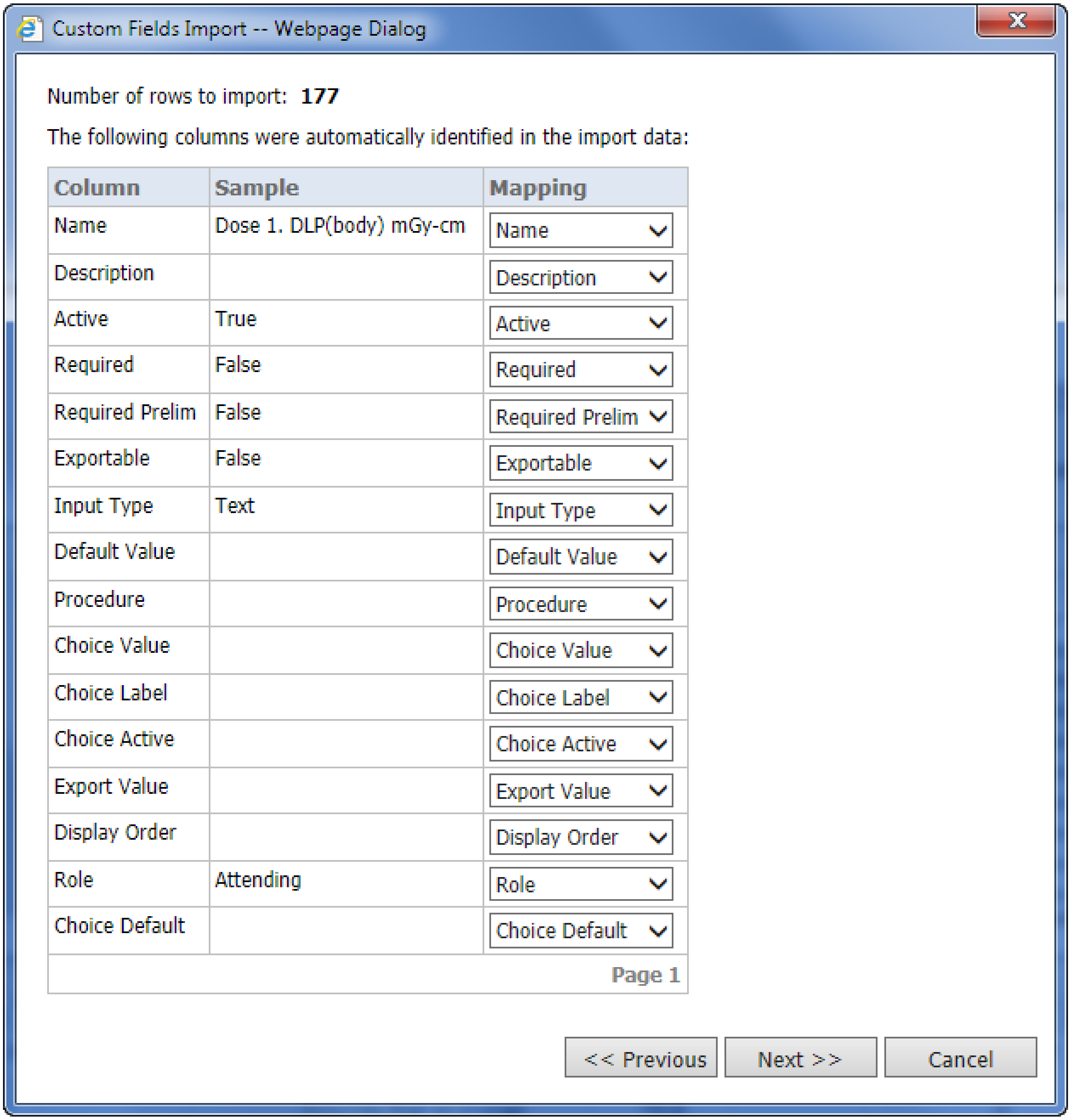
Name: *80*	***Description***: *100*	***Group***: *30*
Procedure: *100*	***Choice Value***: *896*	***Choice Label***: *30*
Export Value: *500*		

To import custom fields from another site's csv file:

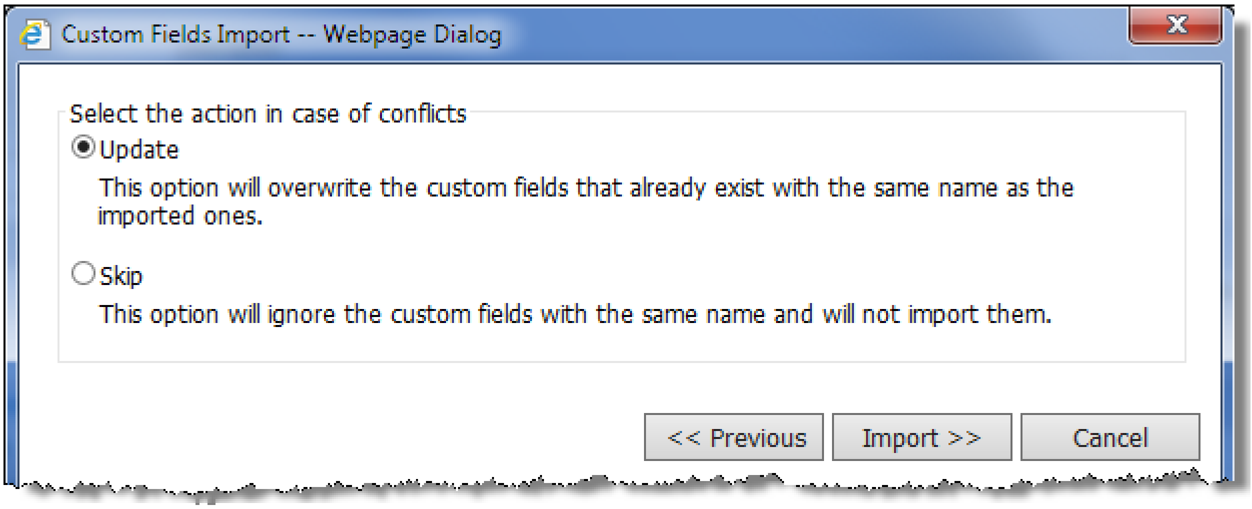
1. Click **Setup** > **Sites** and select a site from the drop-down list.
2. Click the **Custom Fields** link and select **Import**.
3. Browse to and select the file you want to import and click **Open**.
4. Click **Next**.



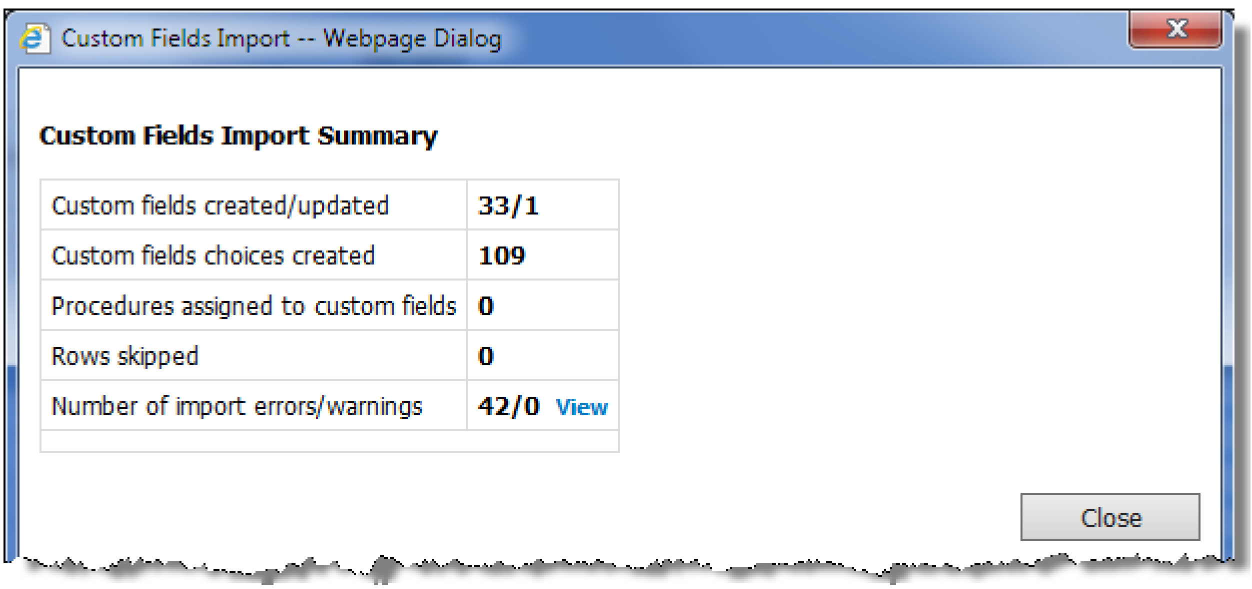
5. From the column mapping dialog box, make sure that the column names match the mapping item in the drop-down list.



6. Click **Next**. The conflict action dialog box opens.



7. Select either **Update** or **Skip**, based on the descriptions shown.
8. Click **Import**. After the import, the custom fields import summary dialog box opens.



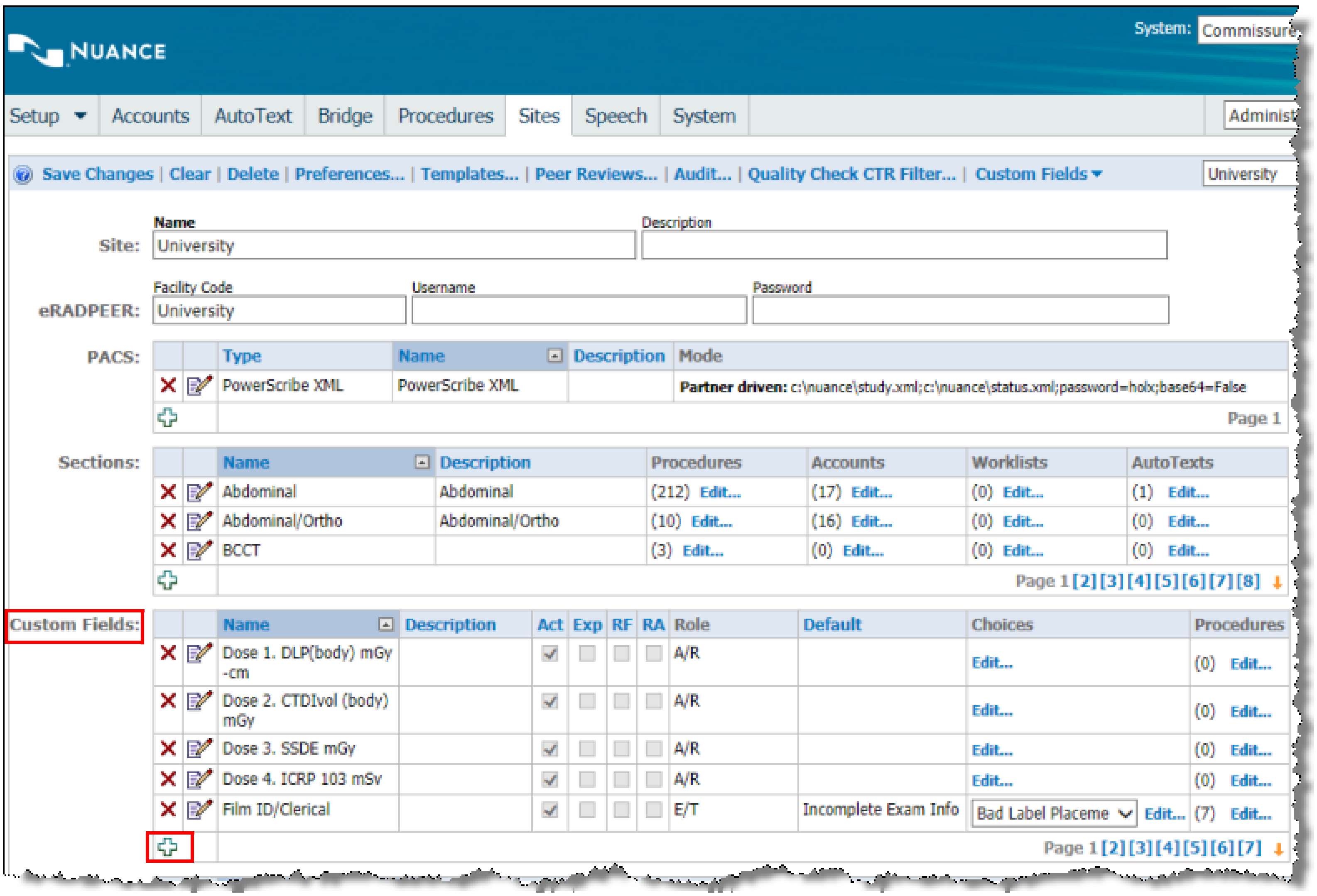
9. If there are any errors or warnings, click the **View** link to see a list of the errors/ warnings that might need to be addressed.
10. When finished, click **Close**.

Creating Custom Fields

You can create a custom field as a **free-text** field or as a **pick list**. For example, you could create a free-text field for assigning an exam measurement, while a pick-list field would be appropriate for selecting a significant findings alert. If the custom field is marked as **required**, it must be populated with a value by the radiologist prior to signing the report.

Create a Free-Text Custom Field

1. In the Administrator Portal, click **Setup** > **Sites**.
2. From the drop-down list at the upper right, select a site.
3. In the **Custom Fields** section, click the **Create new item** icon to begin creating a custom field.



4. Type a **Name** for your custom field (see *Practical Examples for Using Custom Fields*, beginning on page 346). Maximum field length is 80 characters.
5. Type a **Description** (optional). Maximum field length is 100 characters.
6. **Act** (active) is automatically selected, which causes the field to appear in the merge field **Custom** drop-down listing in the *PowerScribe 360 Reporting* client application.
7. If applicable, select **Exp** which causes the data in the field to be exportable in the HL7 message by the Bridge to the RIS.
8. If applicable, select **RF** which requires that the radiologist populates the field with a value prior to signing a *final* report.

> ***Note:*** *If the custom field you are creating applies only to specific procedure codes,* ***do not select this check box until you have assigned the specific procedure codes****.*

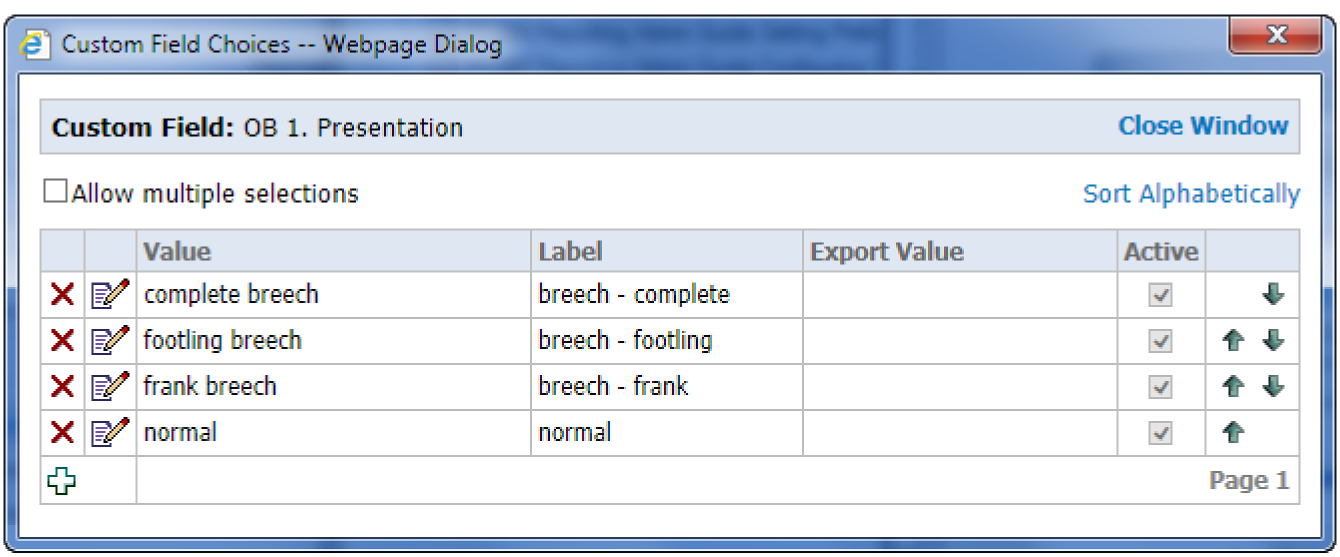
9. If applicable, select **RA** (Resident Approved) which makes the custom field required for resident-approved reports. (Replaces the RP field in previous versions.)
10. To assign the custom field to one or more specific roles in the system, click the **Role** drop-down list and choose **Attending**, **Resident**, **Editor**, and/or **Technologist**.
11. If applicable, enter a value in the **Default** field. This will be the value that appears in the custom field by default.

> ***Tip:*** *If you plan to provide a list of choices for this custom field, you can skip this step and Create a Pick List Custom Field, described in the next topic.*

12. Click the **Commit changes** icon to save the new field.

Create a Pick List Custom Field

1. In the **Choices** column for one of your custom fields, click **Edit**. The **Custom Field Choices** dialog box opens.
2. Click the **Create new item** icon.

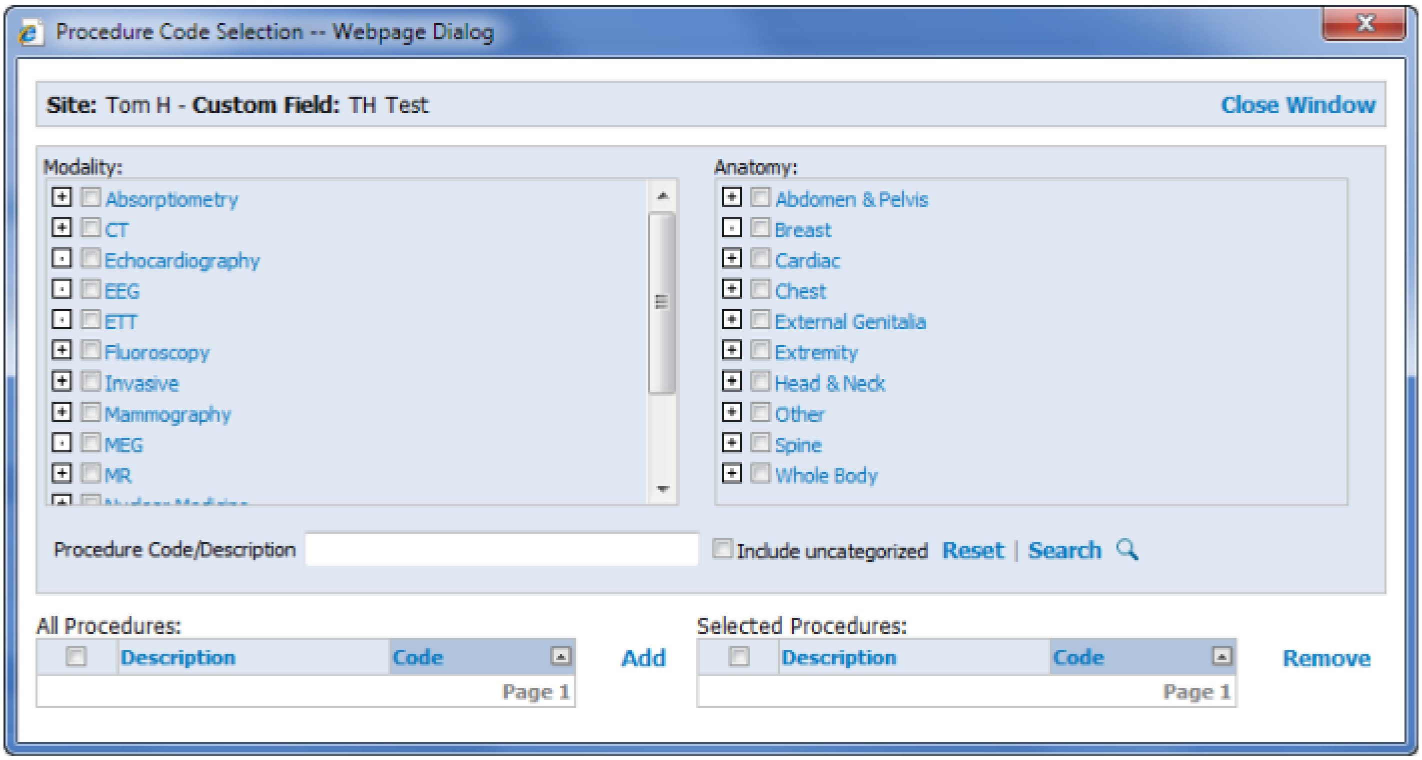


3. Enter the first **Value**. The value can be used as a custom merge field in AutoText. Maximum field length is 896 characters.
4. Enter a corresponding **Label** which will display in a drop-down list of choices for the user to see and select (either by voice or mouse click). Maximum field length is 30 characters.
5. Enter an **Export Value**. The export value is sent in the OBX5 segment of the HL7 message during the report upload, allowing more flexibility to configure the **Value** field as a custom merge field in AutoText. (Your RIS may limit what you enter here because the text in the **Value** field is exported in the HL7 message.) Maximum field length is 500 characters.
6. Set the **Active** check box as needed.
7. To allow a user to select more than one of these choices when using the custom field, select the **Allow multiple selections** check box. With this check box selected, the user will see individual check boxes for each custom field choice.
8. Click the **Commit changes** icon to save the new choice.
9. Repeat steps 2 through 8 for each new choice to add to the pick list.
10. If required, use the up and down arrow indicators in the far right column to reorder your choices. Or, click the **Sort Alphabetically** link if that option suits your needs.
11. Click **Close Window** link to return to the **Custom Fields** section.

Associate Procedure Codes with a Custom Field

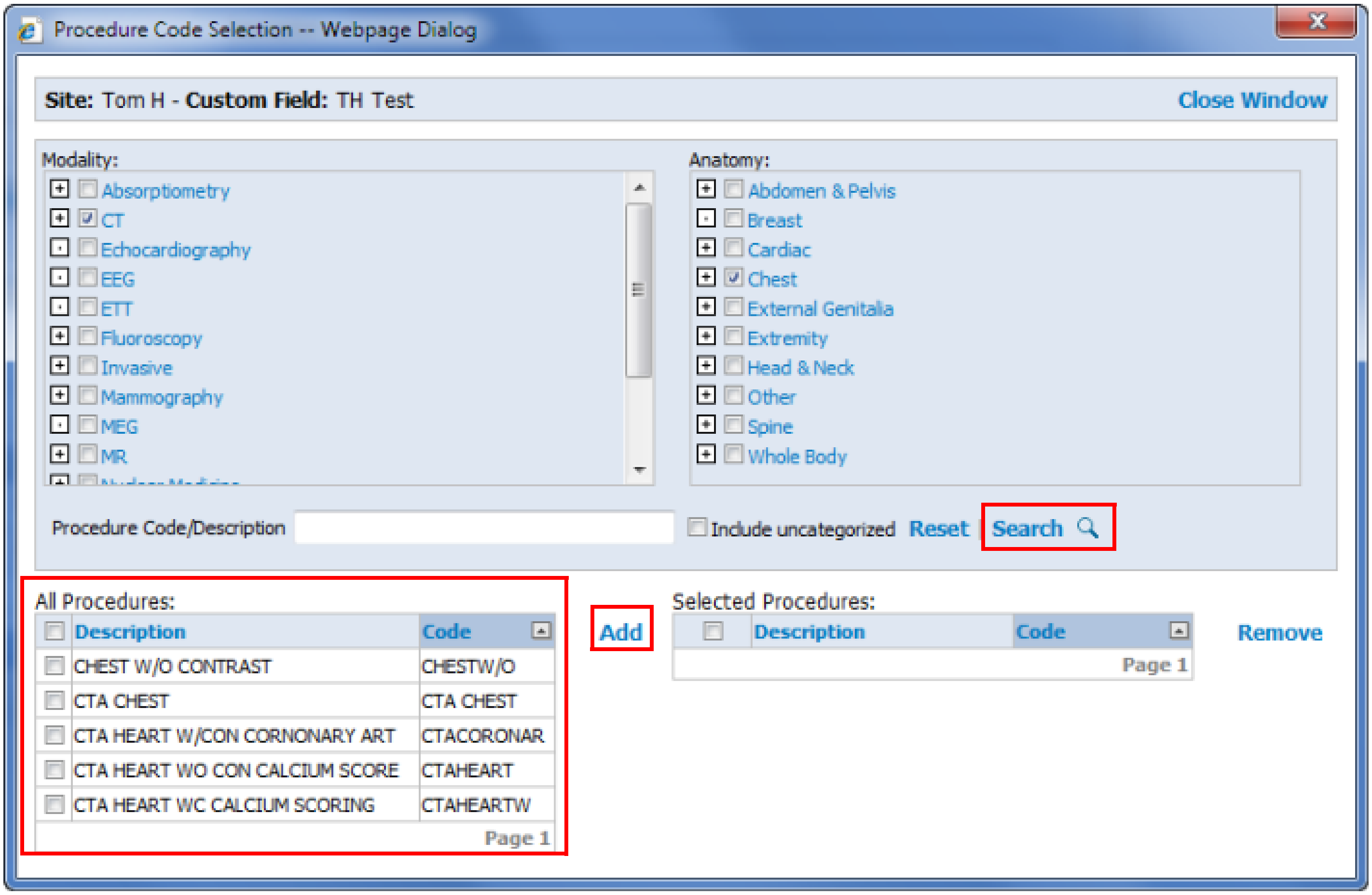
Associating one or more procedure codes with a custom field ensures that the custom field is available to populate with exam data applicable to the associated procedures. For example, when custom fields are built for carotid ultrasound measurements, those fields are available to populate when carotid ultrasound procedures are performed on patients.

1. After creating a free-text or pick-list custom field as described above, click **Add** under the **Procedures** column in the row of the newly created custom field. The **Procedure Code Selection** dialog box opens.



2. Enter the search parameters for the procedures you want to associate with the custom field using one of the following methods:
   - Select a **Modality** and **Anatomy**.
   - Type a procedure code or procedure description in the **Procedure Code/ Description** field.

3. Click **Search** to display the applicable procedures in the **All Procedures** list.



4. In the **All Procedures** list on the left, select each procedure you want to associate with the custom field and click **Add**. The procedures appear in the **Selected Procedures** list on the right.

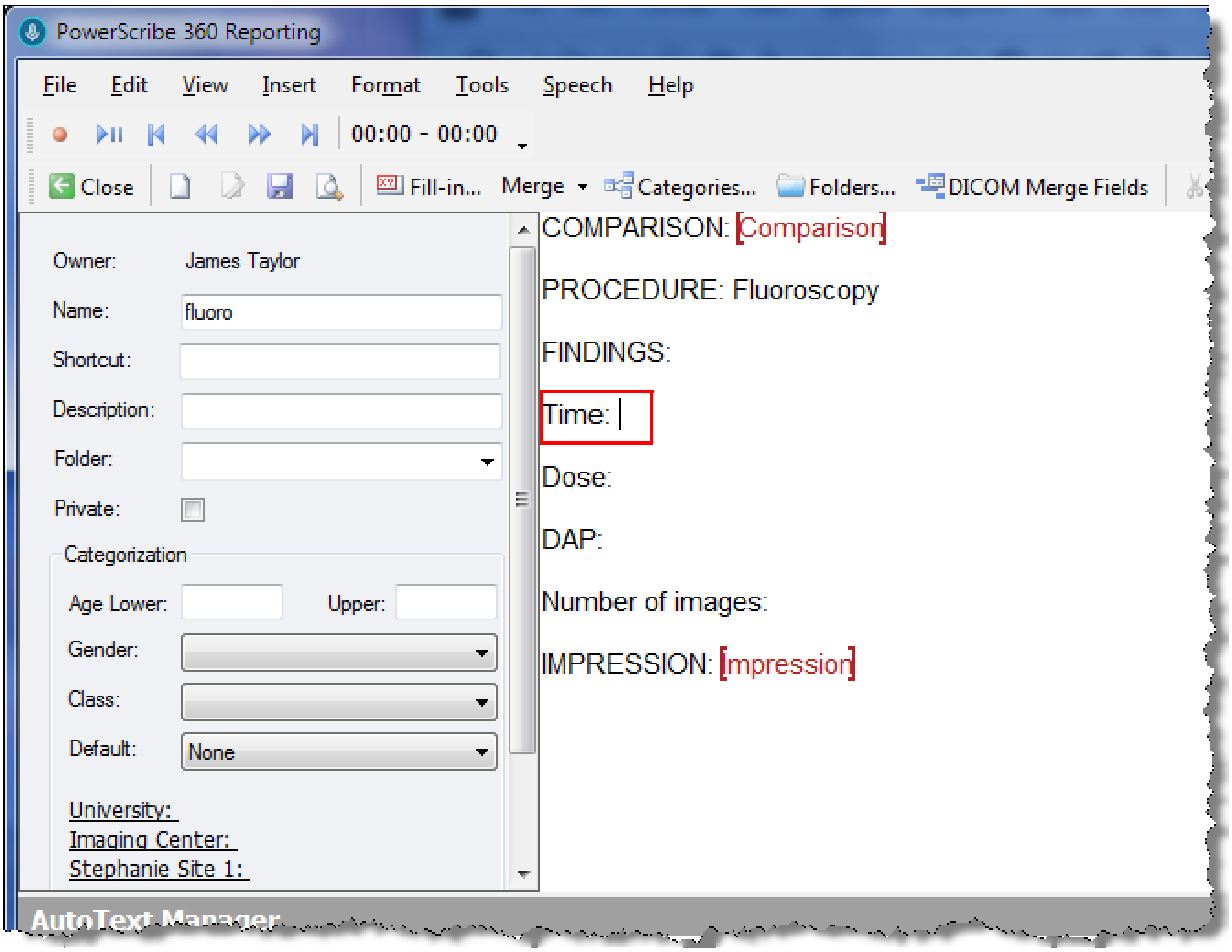
   To dissociate a procedure code from a custom field, select the procedure code to remove in the **Selected Procedures** list and click **Remove**.

5. Click **Close Window** in the upper right to return to the **Custom Fields** section.

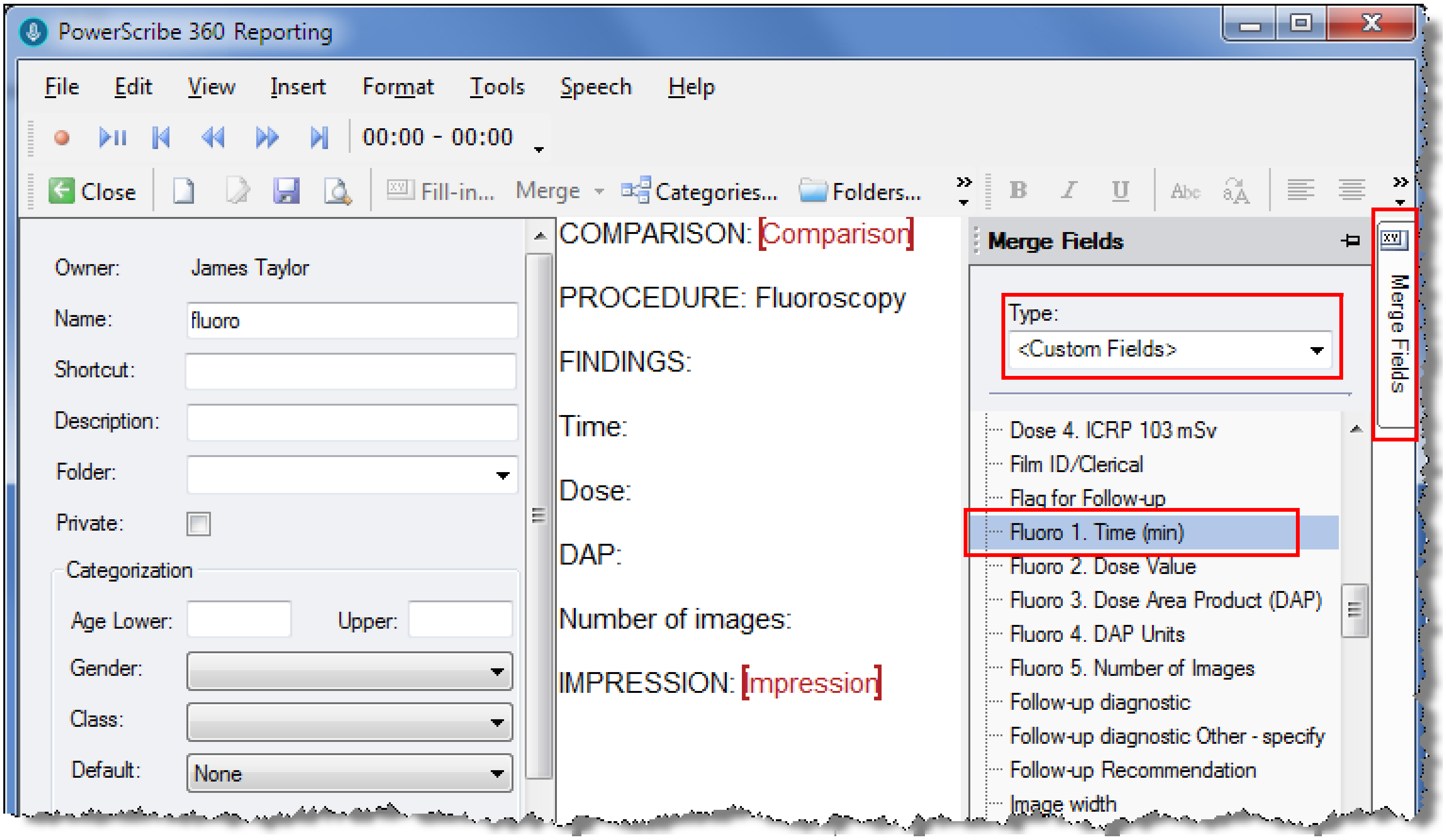
Inserting Custom Fields into AutoText

In order to have custom fields populate exam data into an AutoText, create an AutoText containing those custom fields as merge fields.

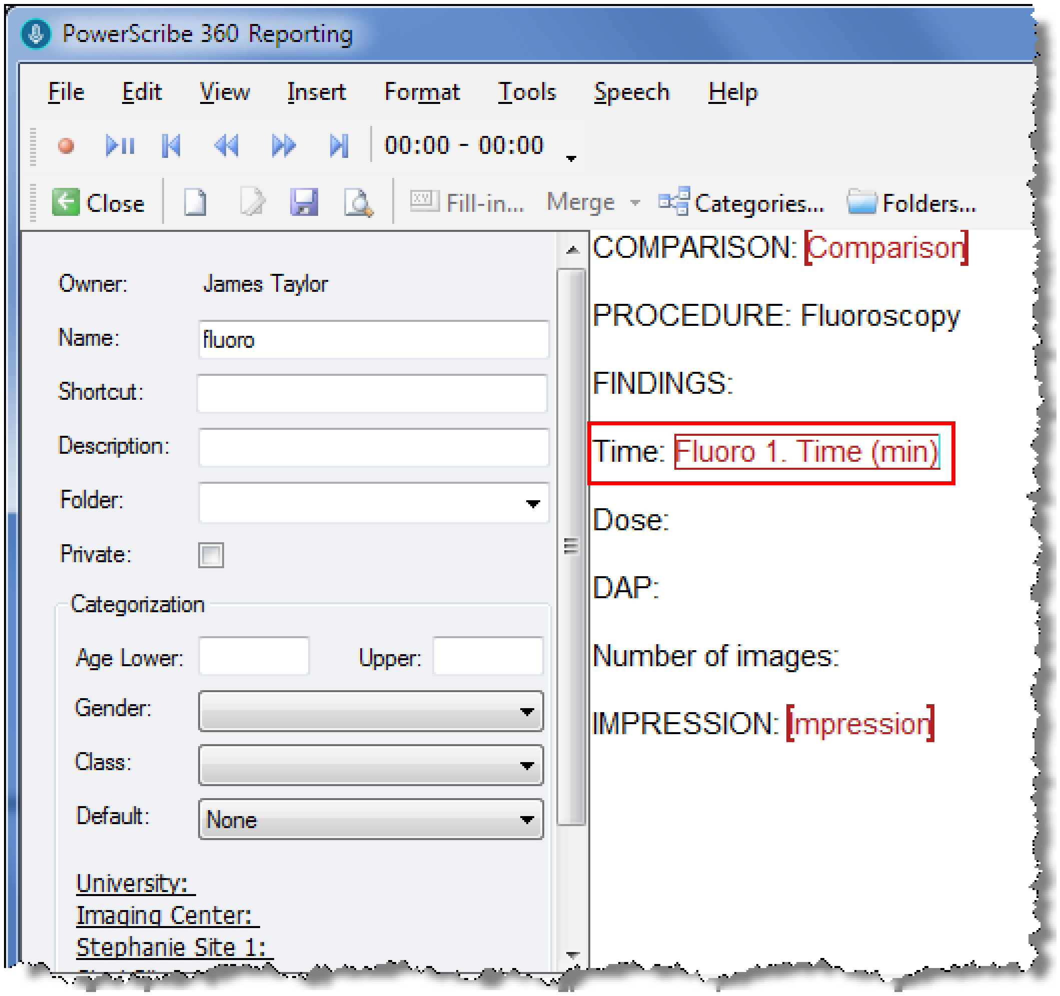
1. From the client application AutoText Editor screen, place your cursor where you want to insert the custom field. In this example, the cursor is to the right of the **Time** field.



2. Click the **Merge Fields** tab located on the right side of the AutoText Editor window.
3. Select **<Custom Fields>** from the **Type** menu.
4. Locate and double-click the **Fluoro 1. Time (min)** item.



The field appears in the AutoText.



5. Repeat steps 1 through 4 to insert the same or other custom fields into the AutoText, selecting the appropriate custom field for each item.

   Note: *When you insert the same custom field into the AutoText multiple times, they are considered linked custom fields. When one instance of the custom field is populated in the report, all instances of that custom field are populated as well.*

6. Save and close the AutoText.

Assigning Values to Custom Fields

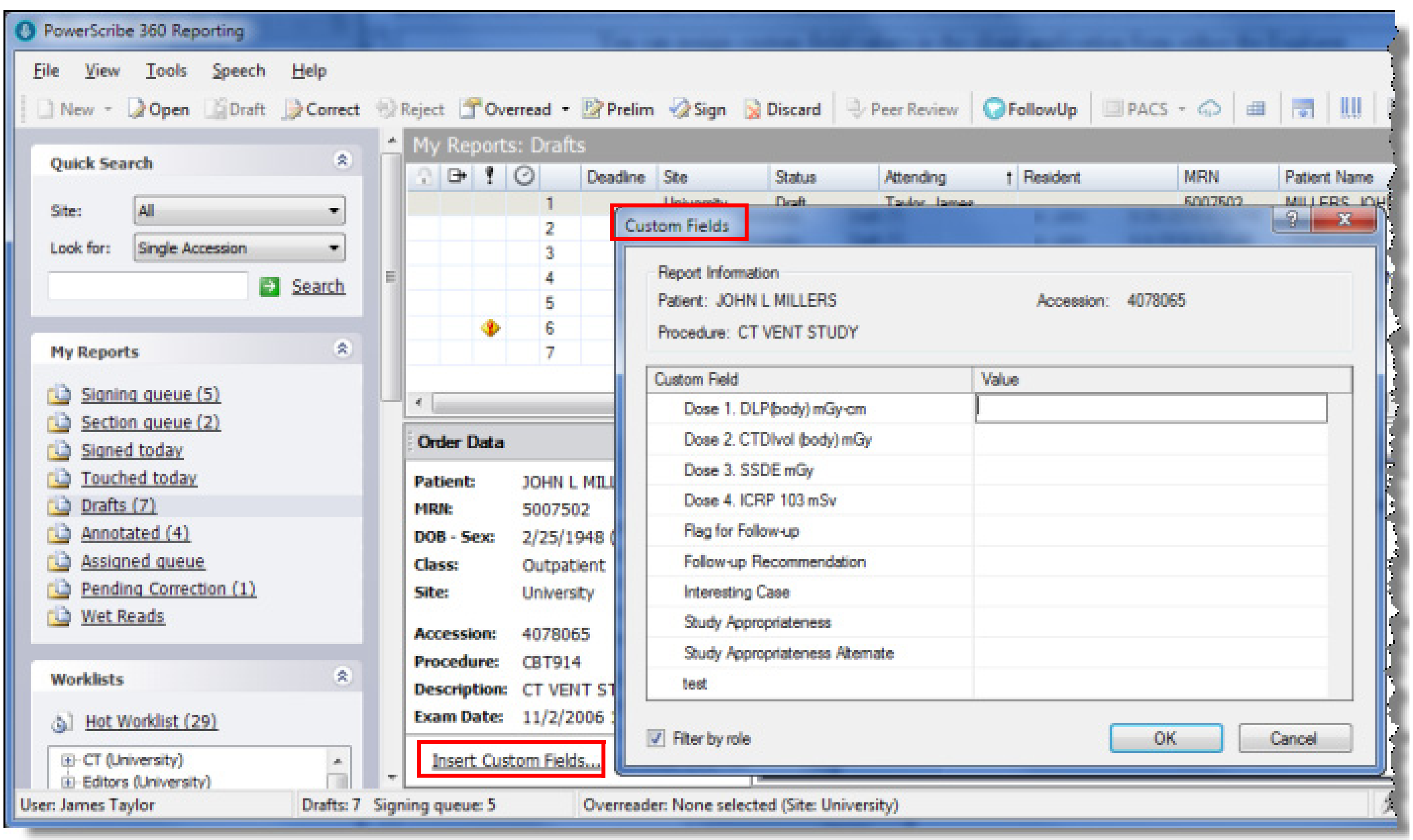
Assigning values to custom fields may be very useful for reporting in that it can alleviate the radiologist from having to dictate exam measurements. Editors and technologists can assign values to custom fields on unreported orders using the *PowerScribe 360 Reporting* client. Radiologists can also use the client to assign values to custom fields during the reporting stage. Alternatively, editors and technologists can use the *PowerScribe 360 Reporting Administrator Portal* to assign values to custom fields on unreported orders. Administrators can assign values to custom fields at any time using the administrator portal.

Assigning Custom Fields Using the PowerScribe 360 Reporting Client

You can assign custom field values in the client application from either the Explorer screen or the Report Editor screen.

Assigning Custom Fields from the Explorer Screen

1. Search for and select the applicable exam. With the exam highlighted, click the **Insert Custom Fields** link on the **Order Data** tab. The **Custom Fields** dialog box opens.

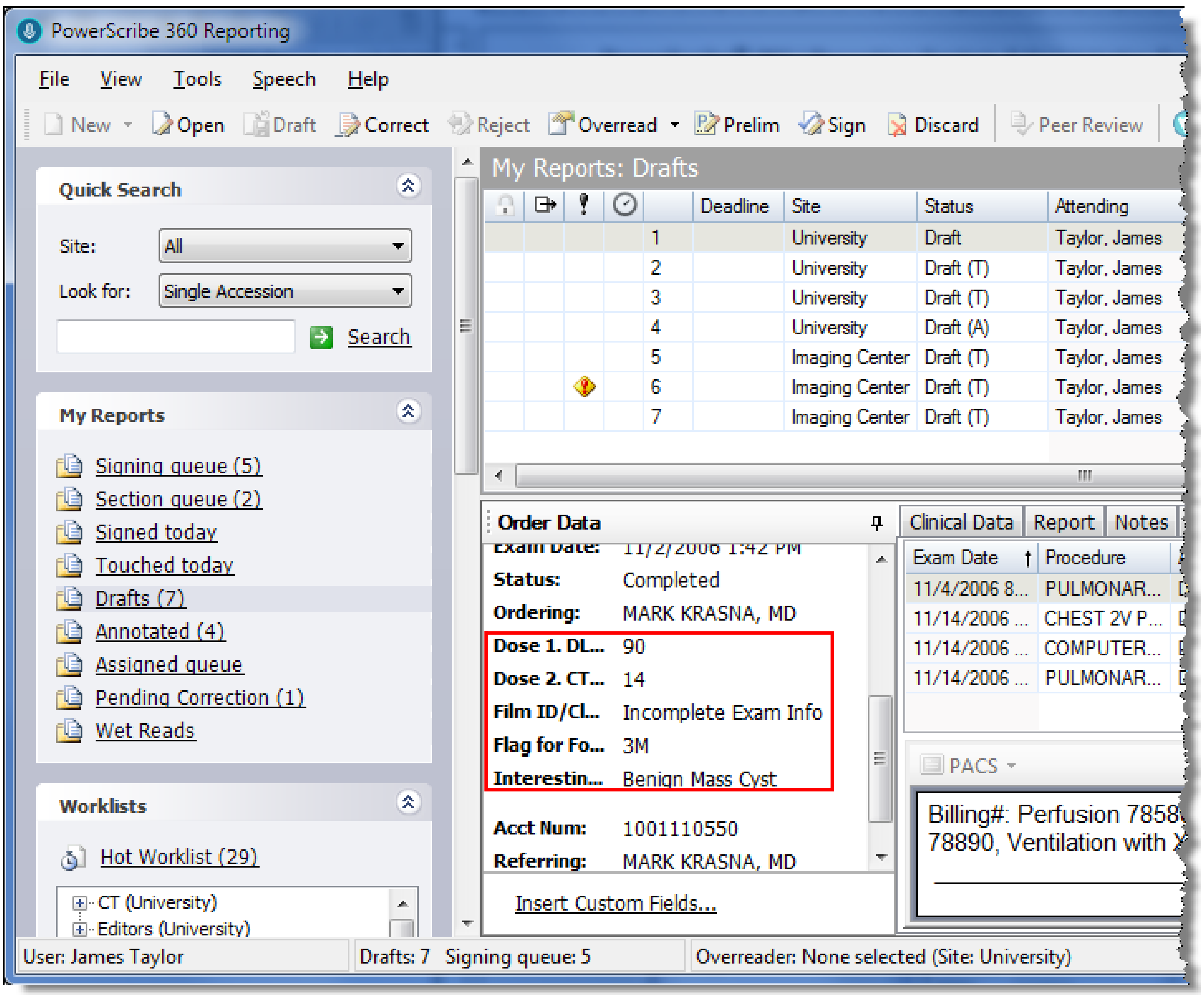


2. Click the **Value** column to assign a value to the custom field. Some custom fields are set up with drop-down lists while others require that you dictate (or type in) a value.

   Note: *You do not have to assign values to all the custom fields; only for those that pertain to your report.*

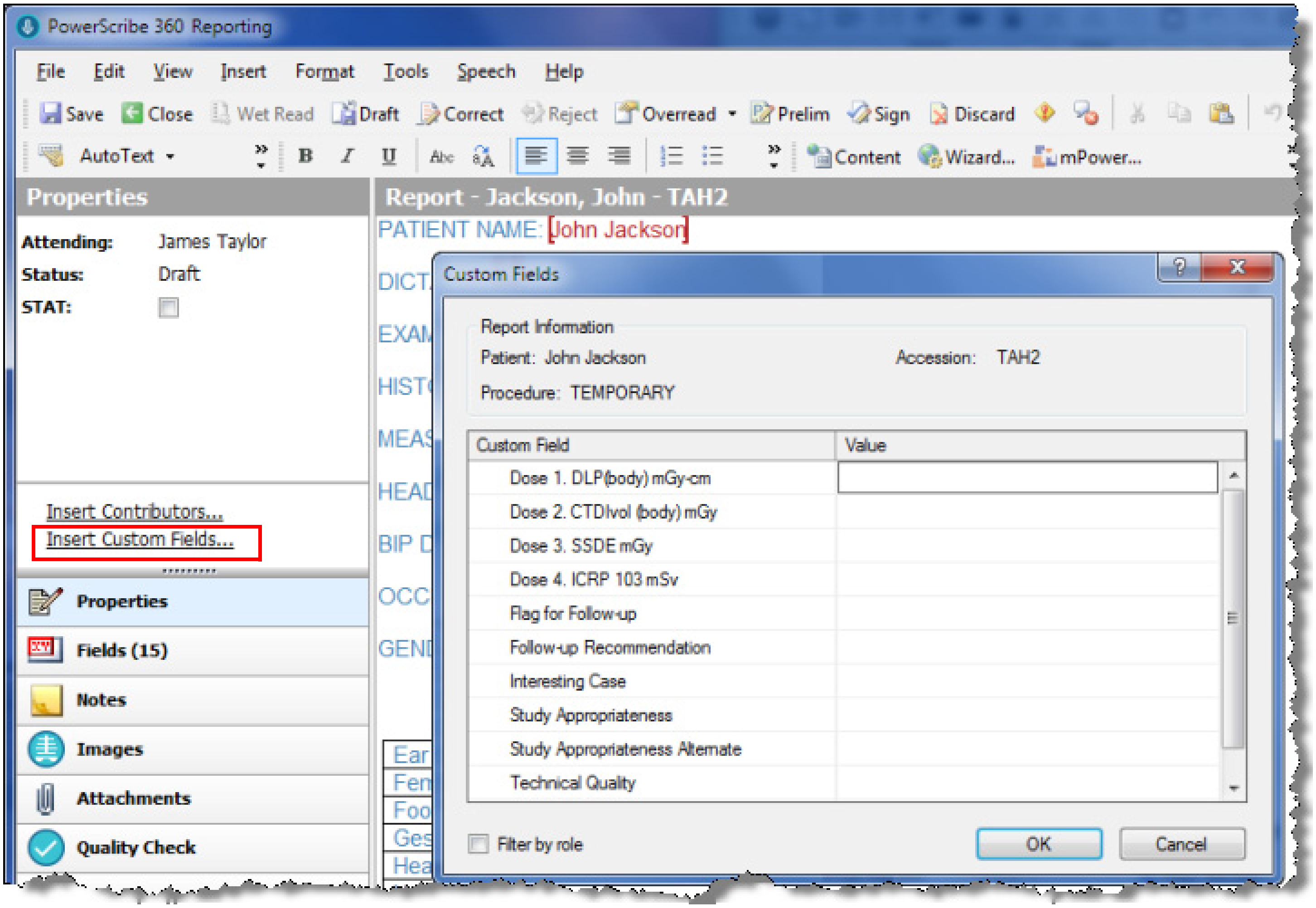
3. To view only custom fields that relate to your current role in the system (Attending, Resident, Editor, and Technologist), select the **Filter by role** check box. Selecting this check box allows you to work with only the custom fields in a report that relate to your particular role.

4. When finished populating the custom fields for your report, click **OK**. The image below shows the populated custom fields in the **Order Data** tab.



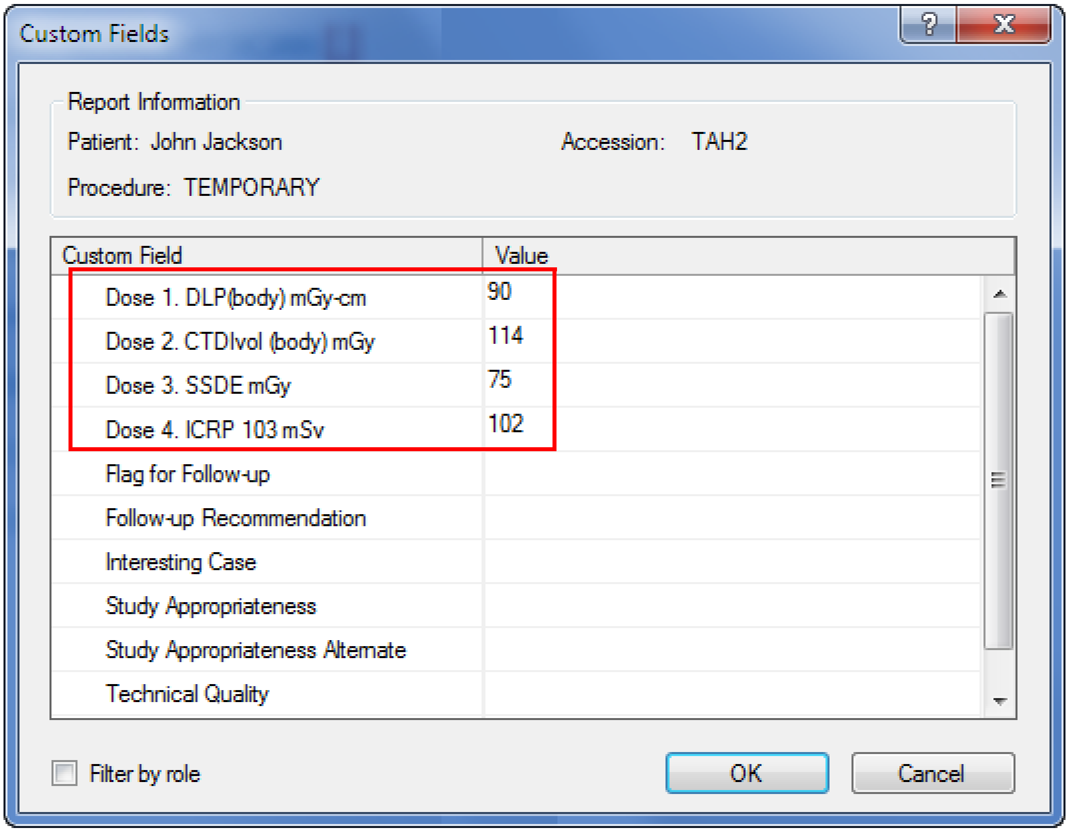
Assigning Custom Fields from the Report Editor Screen

1. Select **Properties** from the navigation panel and click the **Insert Custom Fields** link (or click **Insert > Custom Fields** from the menu bar). The **Custom Fields** dialog box opens.

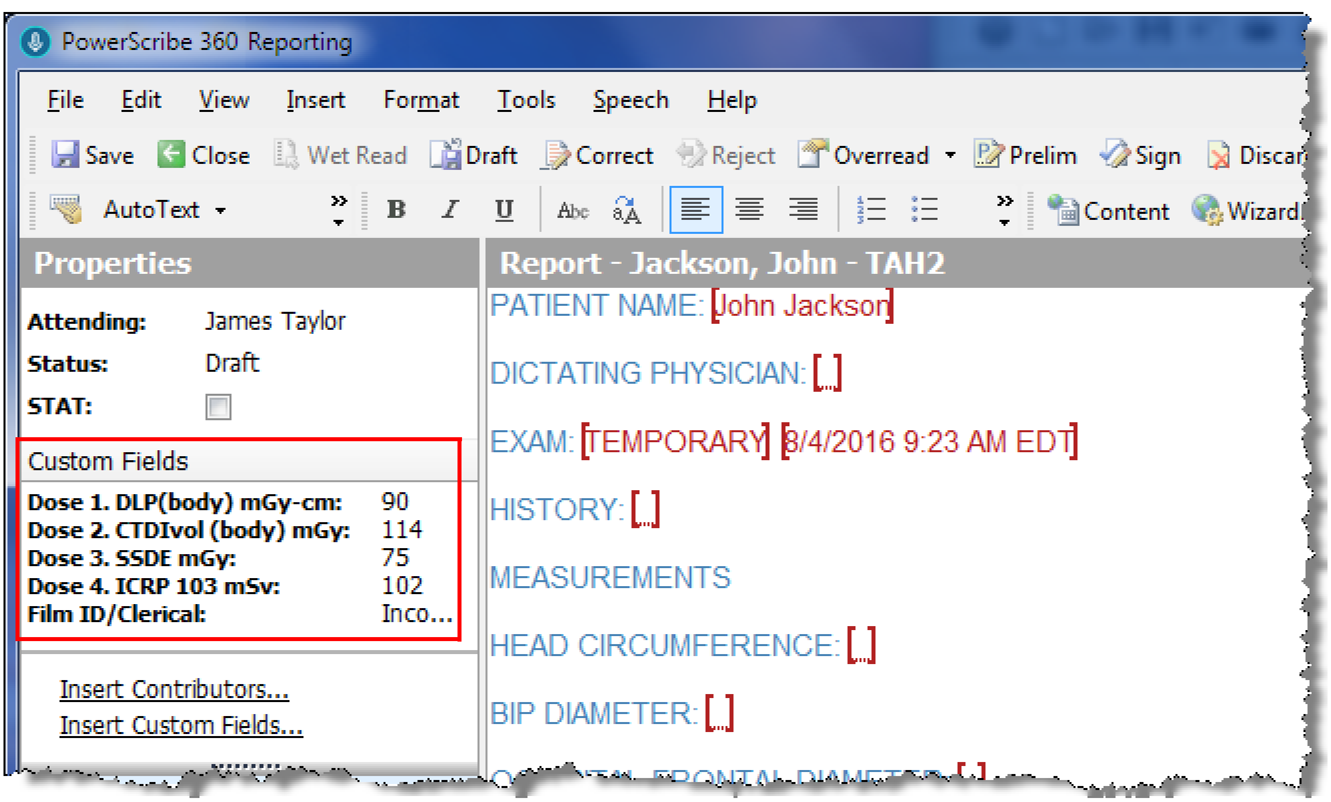


2. Click the **Value** column to assign a value to the custom field.

3. When finished populating the custom fields for your report, click **OK**.



The custom fields appear in the **Custom Fields** section of **Properties** in the navigation panel.

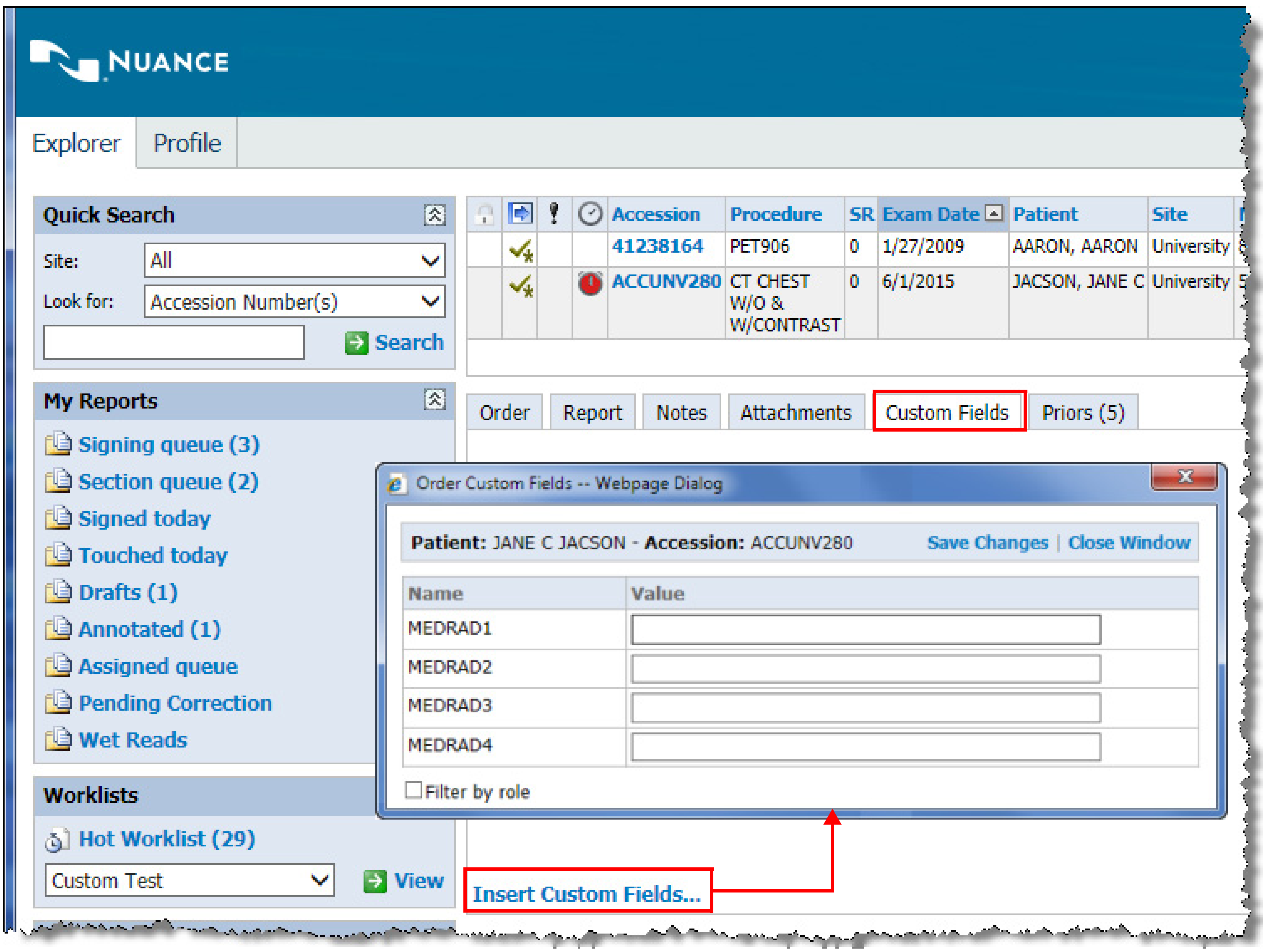


Assigning Custom Fields Using the PowerScribe 360 Reporting Administrator Portal

The portal view differs depending on the role of the user (i.e., whether the user is an editor, technologist or administrator). An administrator can populate or change custom fields at any stage of reporting, even after the report is final.

Assigning Custom Fields as an Editor or Technologist

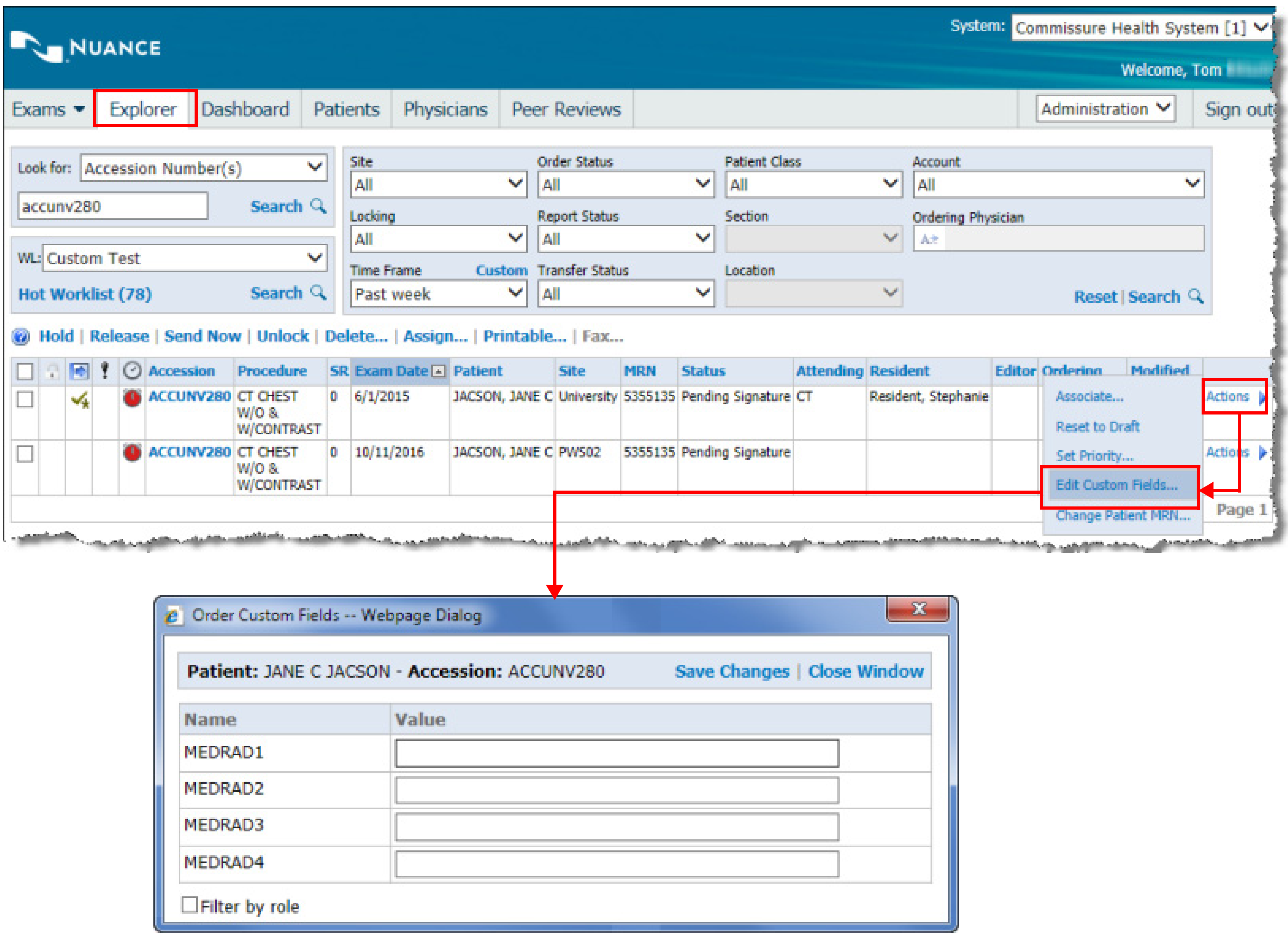
1. As an editor or technologist logged into the portal, search for the applicable exam under the **Explorer** tab. Select the **Custom Fields** tab and click **Insert Custom Fields**, which opens the **Order Custom Fields** dialog box.



2. Click the **Value** column to assign a value to the custom field.
3. If applicable, select the **Filter by Role** check box.
4. When finished populating the custom fields for your report, click **Save Changes** and **Close Window**.

Assigning Custom Fields as an Administrator

1. Log in to the portal as an administrator, search for and select the applicable exam under the Explorer tab.
2. Click **Actions** and select **Edit Custom Fields**, which opens the **Order Custom Fields** dialog box.

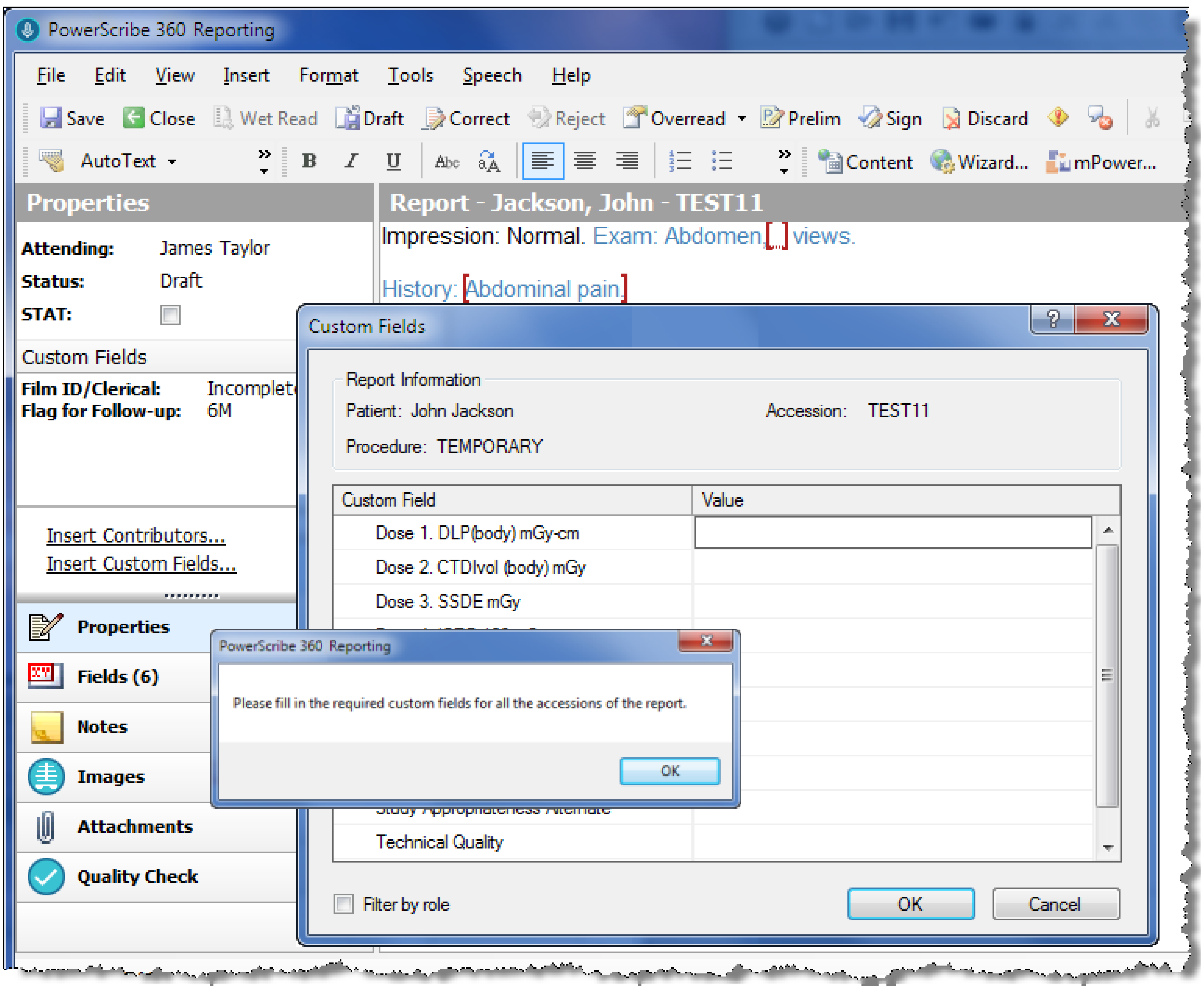


3. Click the **Value** column to assign a value to the custom field.

4. When finished populating or changing the custom fields, click **Save Changes** and **Close Window**.

Attempting to Sign a Report without Assigning Values to Custom Fields

If a custom field is required (which means that the **RF** and/or **RA** check boxes were selected when the field was created), the radiologist must assign a value to the custom field prior to signing the report. If the radiologist attempts to sign a report containing an empty, required custom field, the **Custom Fields** dialog window opens. If the radiologist clicks OK or Cancel without assigning a value to the custom field, a message window opens stating **Please fill in the required custom fields for all the accessions of the report**.

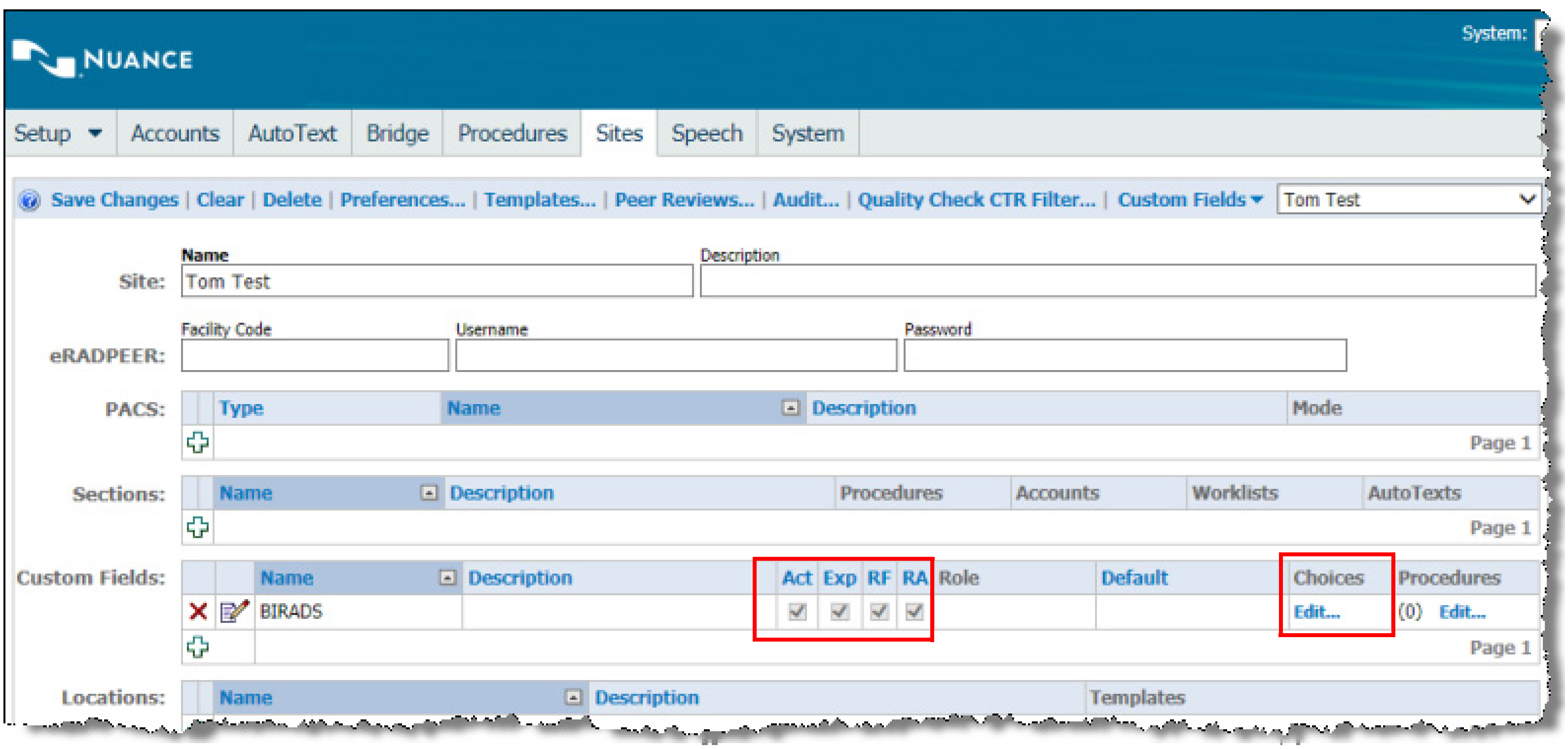


Practical Examples for Using Custom Fields

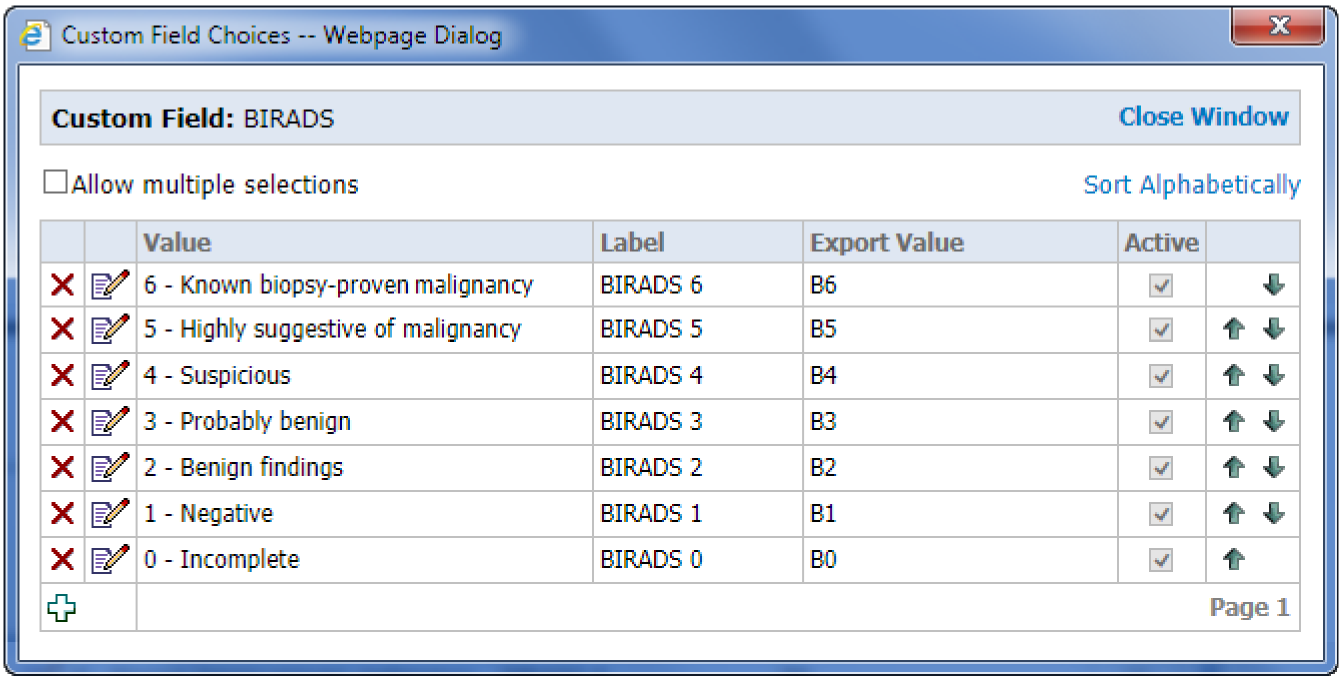
Example 1: Mammography BI-RADS

Custom fields can be used for mammography BI-RADS when a hospital requires two separate codes, one to convey the BI-RADS score, and the other to send an HL7 message to the RIS to trigger a follow-up letter to the patient when her score indicates a level of suspicion for the possibility of breast cancer. The BI-RADS value as well as the HL7 follow-up message are selected from pick-list custom fields by the radiologist during reporting and prior to signing the report.

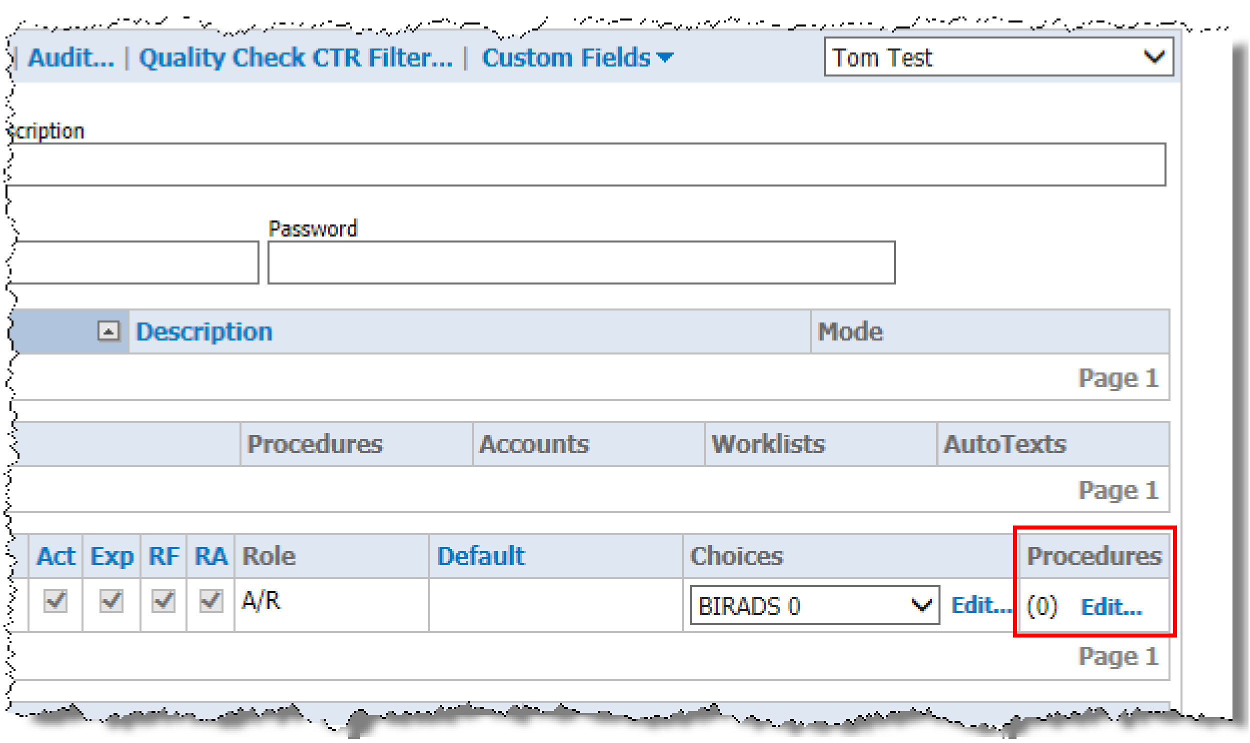
1. Create a new pick-list custom field named **BIRADS**.
2. Select the **Act**, **Exp**, and **RF** and/or **RA** check boxes.
3. If required, select one or more **Roles** from the drop-down list: Attending, Resident, Editor, or Technologist.
4. Under **Choices**, click the **Edit** link.



5. Edit the **Choices** column to enter each **Value**, **Label**, and **Export Value** as pick list selections.
6. If required, use the up/down arrow icons in the far right column to reorder your choices. (Another reordering option is to click the **Sort Alphabetically** link.)

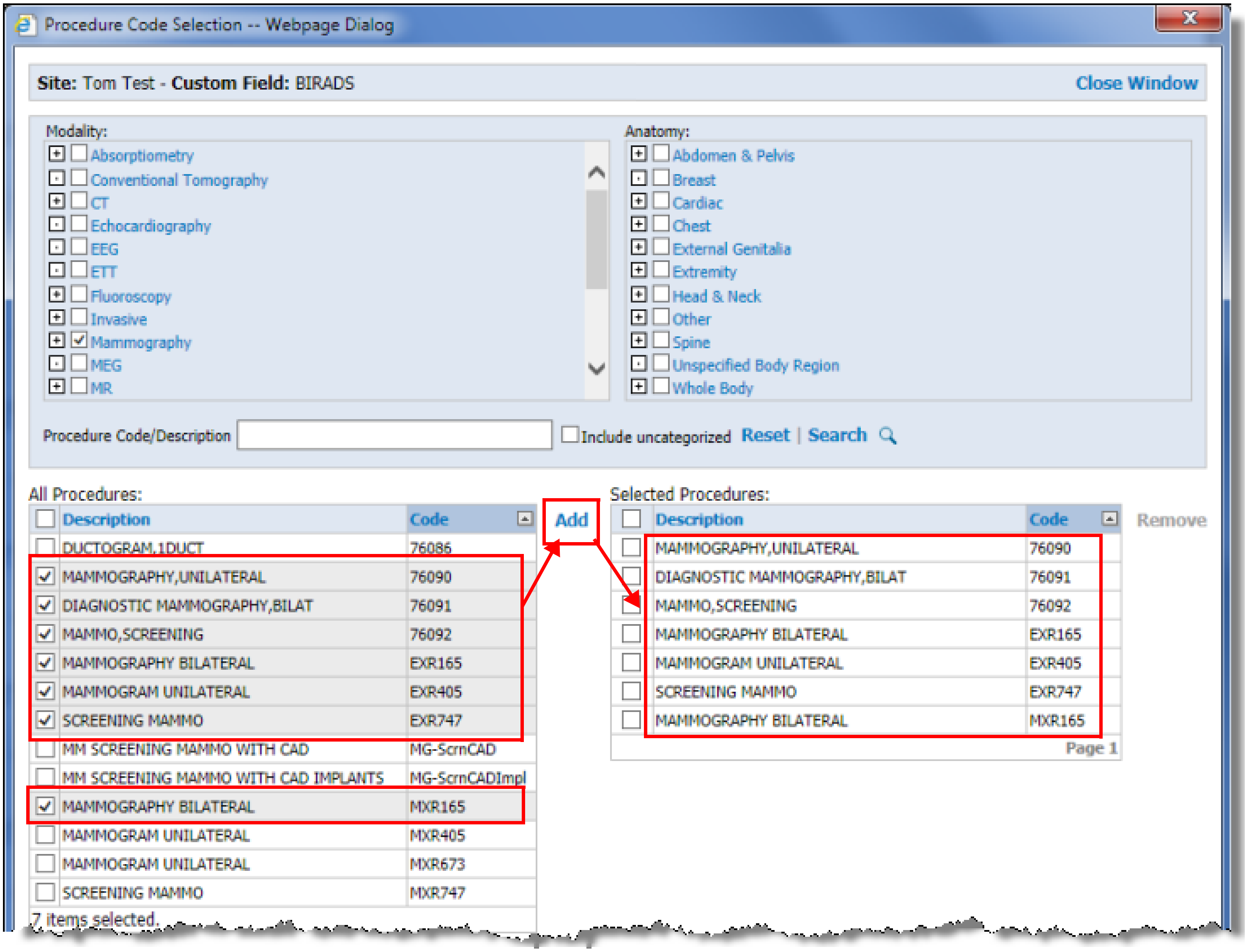


7. Click the **Close Window** link.
8. Under the **BIRADS** custom field's **Procedures** column, click **Edit**.



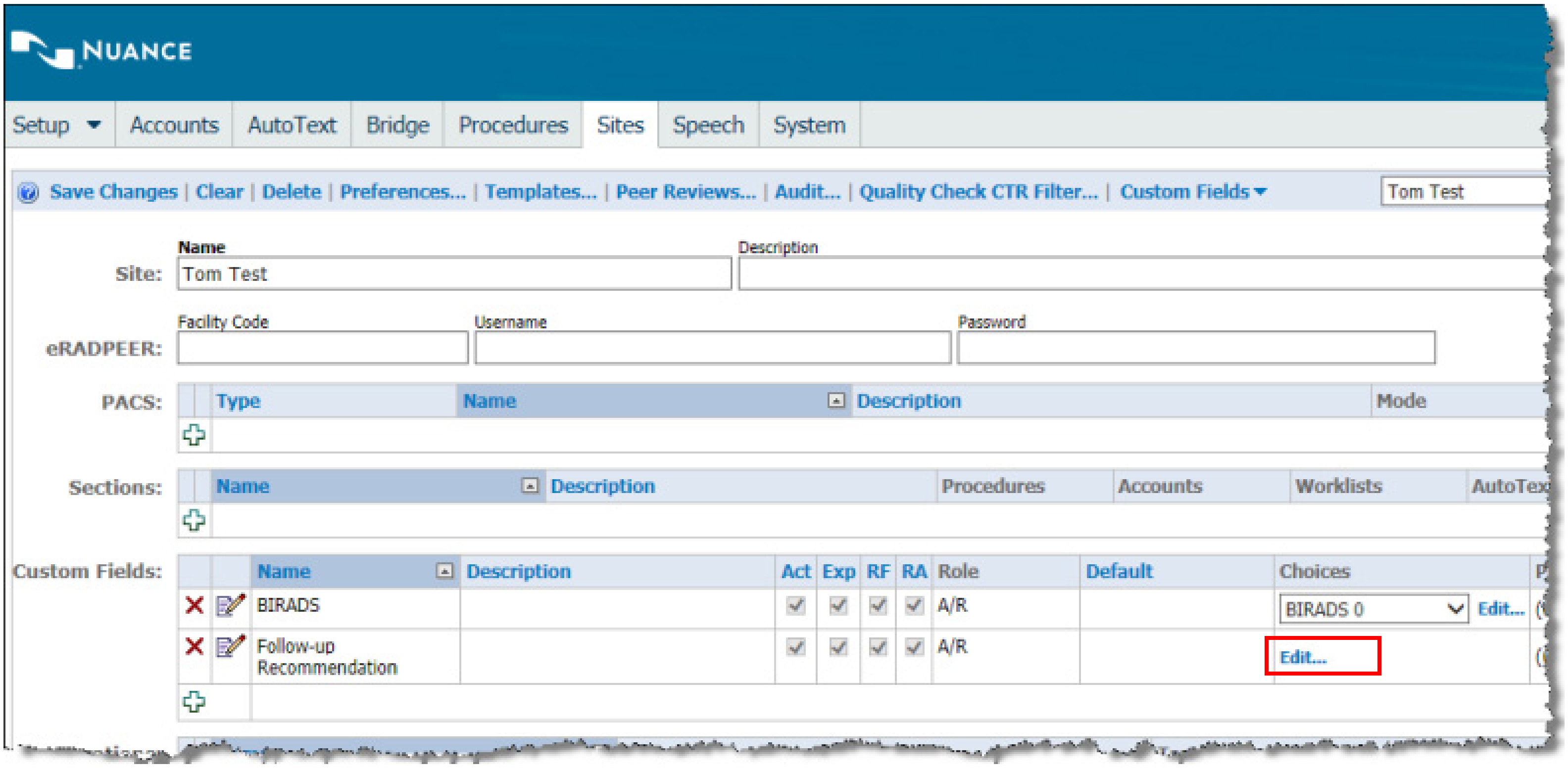
The **Procedure Code Selection** dialog box opens.

9. Search for and select the applicable mammography procedures.
10. Click **Add** to copy the procedures to the **Selected Procedures** column.



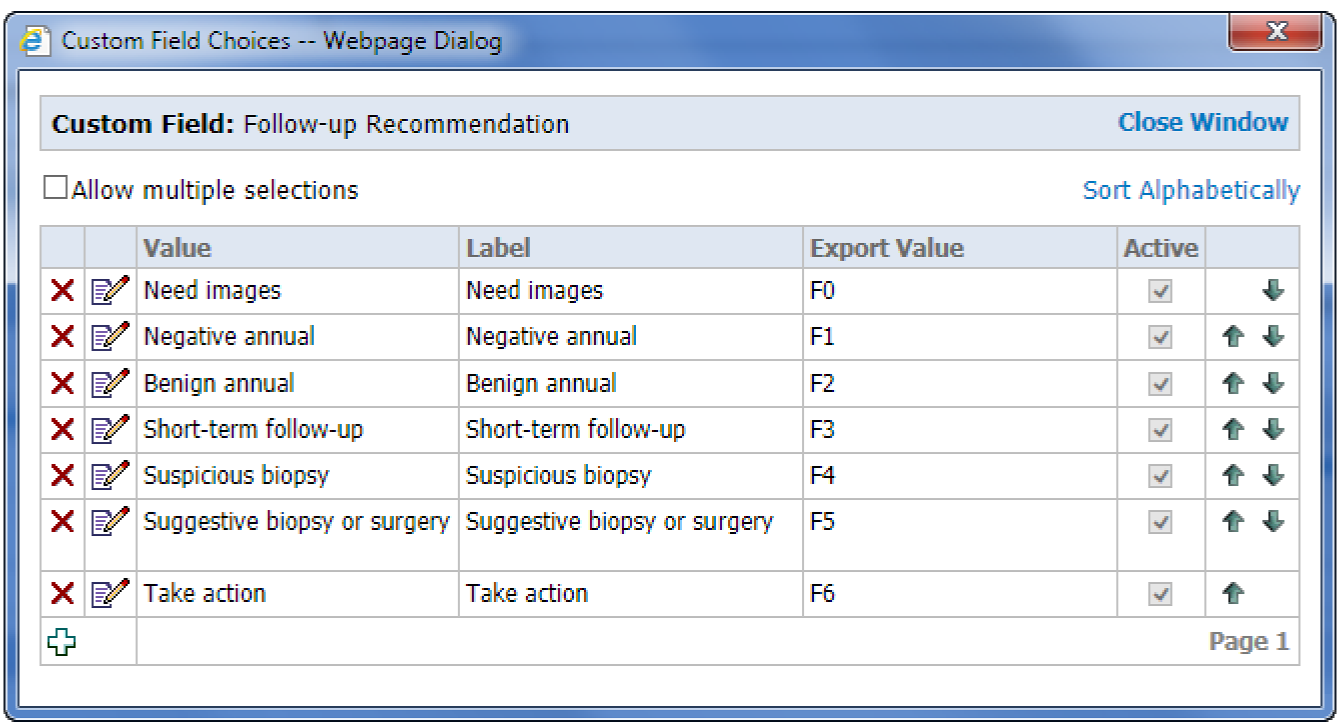
11. Click the **Close Window** link. The procedures you selected are now associated with the **BIRADS** custom field.
12. Create and save a pick-list custom field named **Follow-up Recommendation** with the **Act**, **Exp**, and **RF** and/or **RA** check boxes selected.
13. If required, select one or more **Roles** from the drop-down list: Attending, Resident, Editor, or Technologist.

14. Under **Choices**, click the **Edit** link.

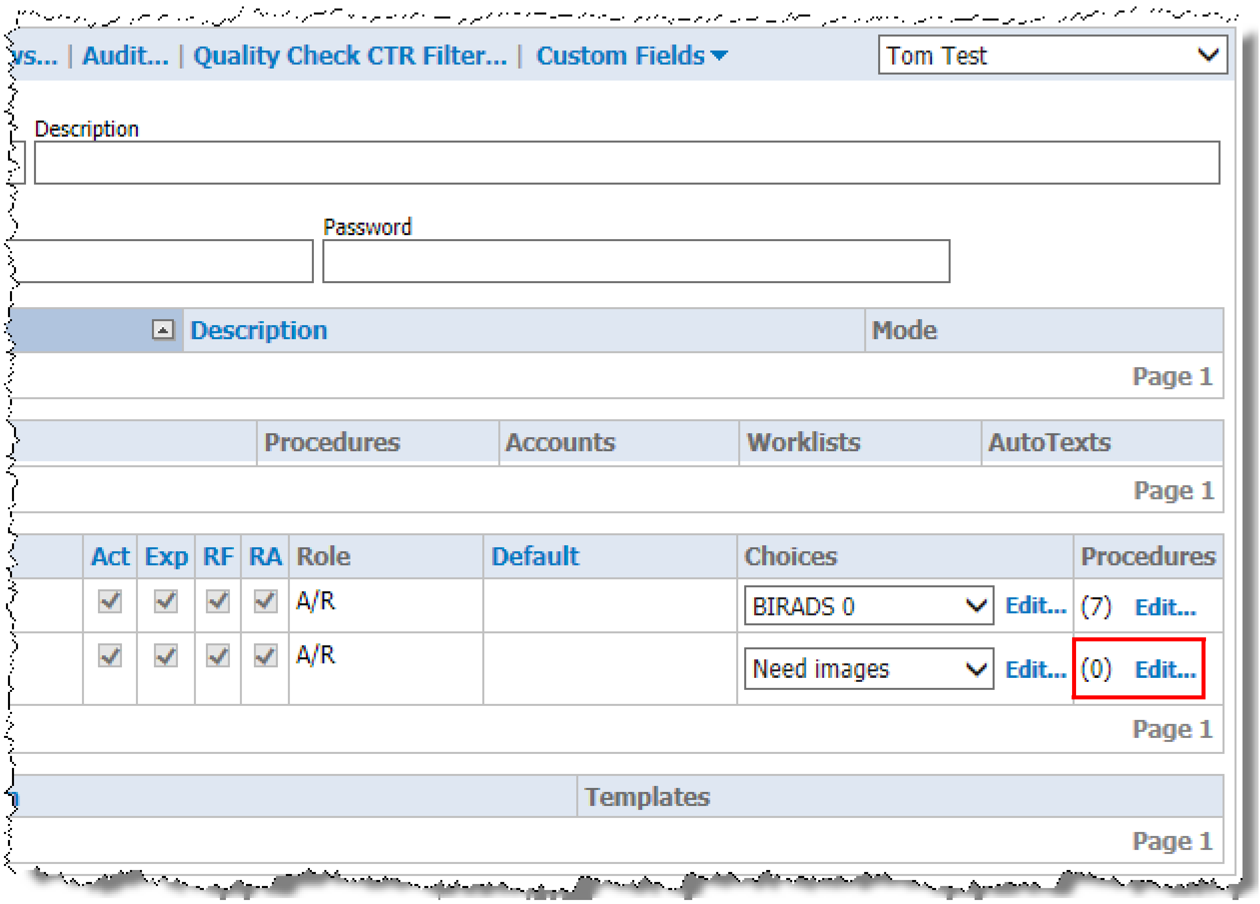


15. Enter a value, label, and export value (if needed) for each pick-list selection.

16. If required, use the up/down arrow icons in the far right column to reorder your choices. (Another reordering option is to click the **Sort Alphabetically** link.)

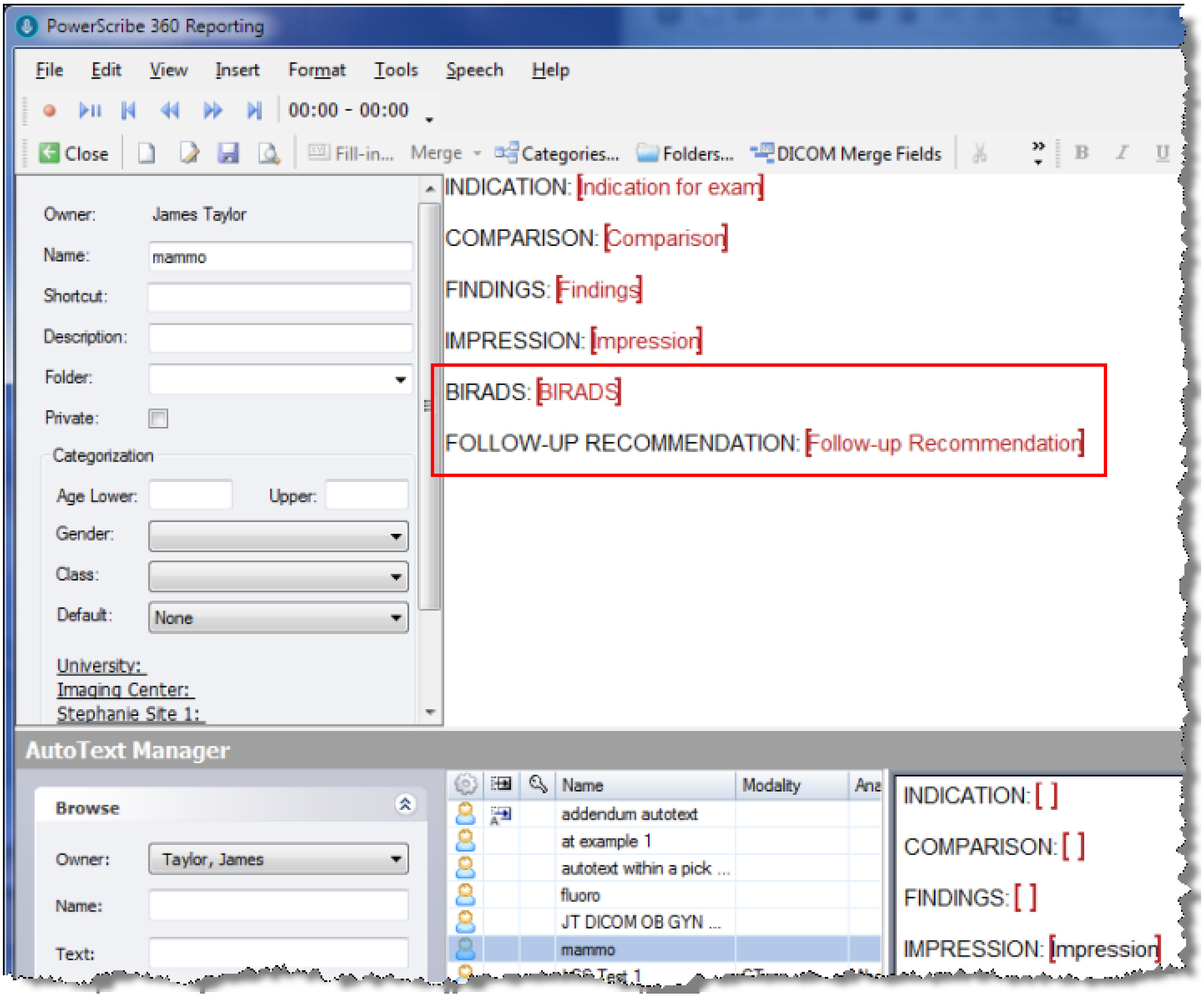


17. Click the **Close Window** link.
18. Under the **Follow-up Recommendation** custom field's **Procedures** column, click **Edit**.



19. Repeat steps 9 through 11 above to search for, select and add the applicable mammography procedures to associate them with the **Follow-up Recommendation** custom field.

Note: *If you want to have the BI-RADS and Follow-up Recommendation text appear in the dictated report, create an AutoText containing those fields as either custom merge fields or pick list fill-in fields (see Creating a Pick List Fill-in Field, beginning on page 267).*

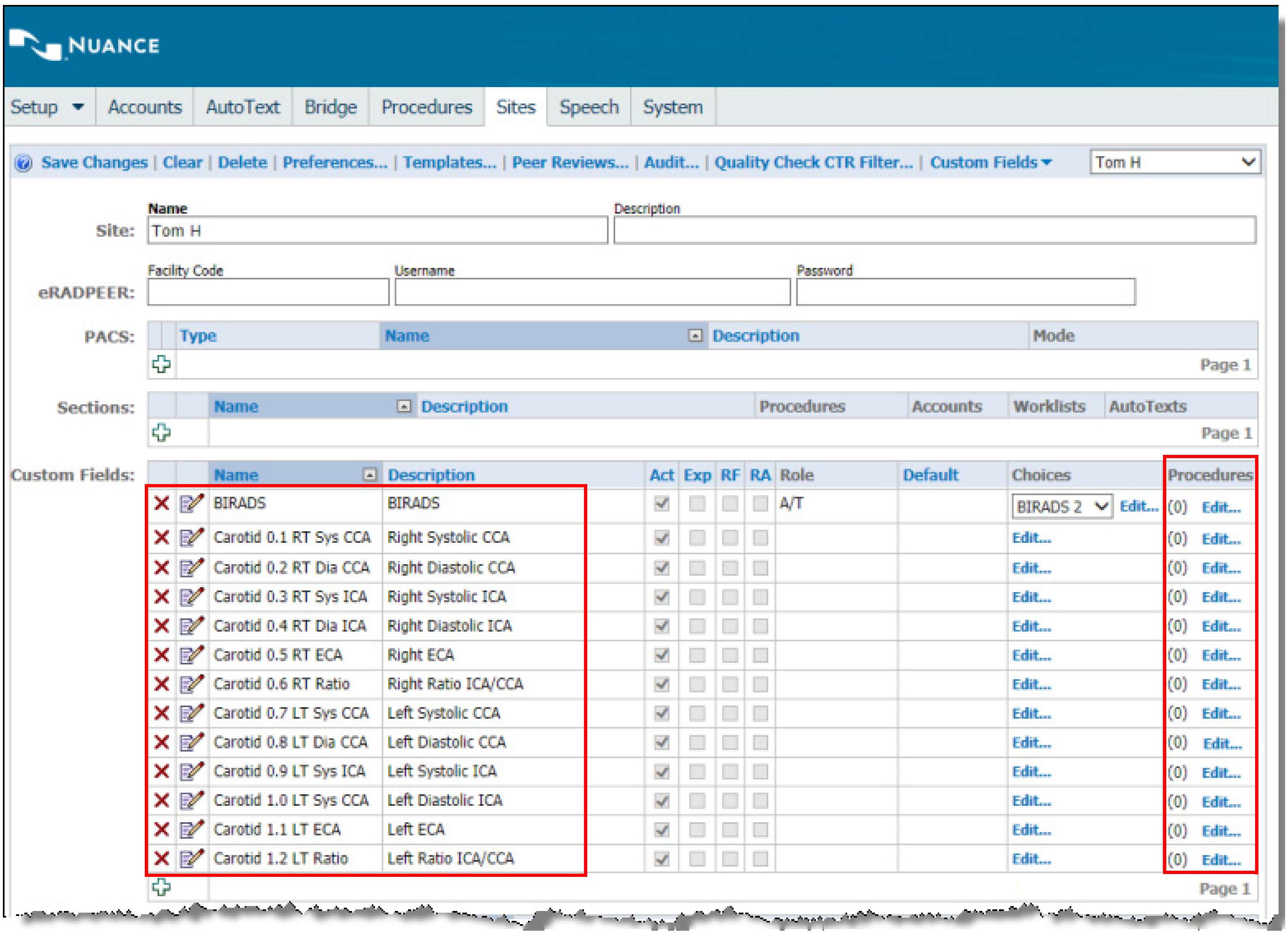


Example 2: Carotid Ultrasound

Using AutoText custom fields that contain *exam data*, such as carotid ultrasound measurements, can help reduce report turnaround times. Exam data can be added automatically by an imaging machine, or manually by a technologist, so the radiologist does not have to dictate the measurements during reporting.

1. Create and save several free-text custom fields, one per carotid artery measurement, with **Act** (Active) check box selected.

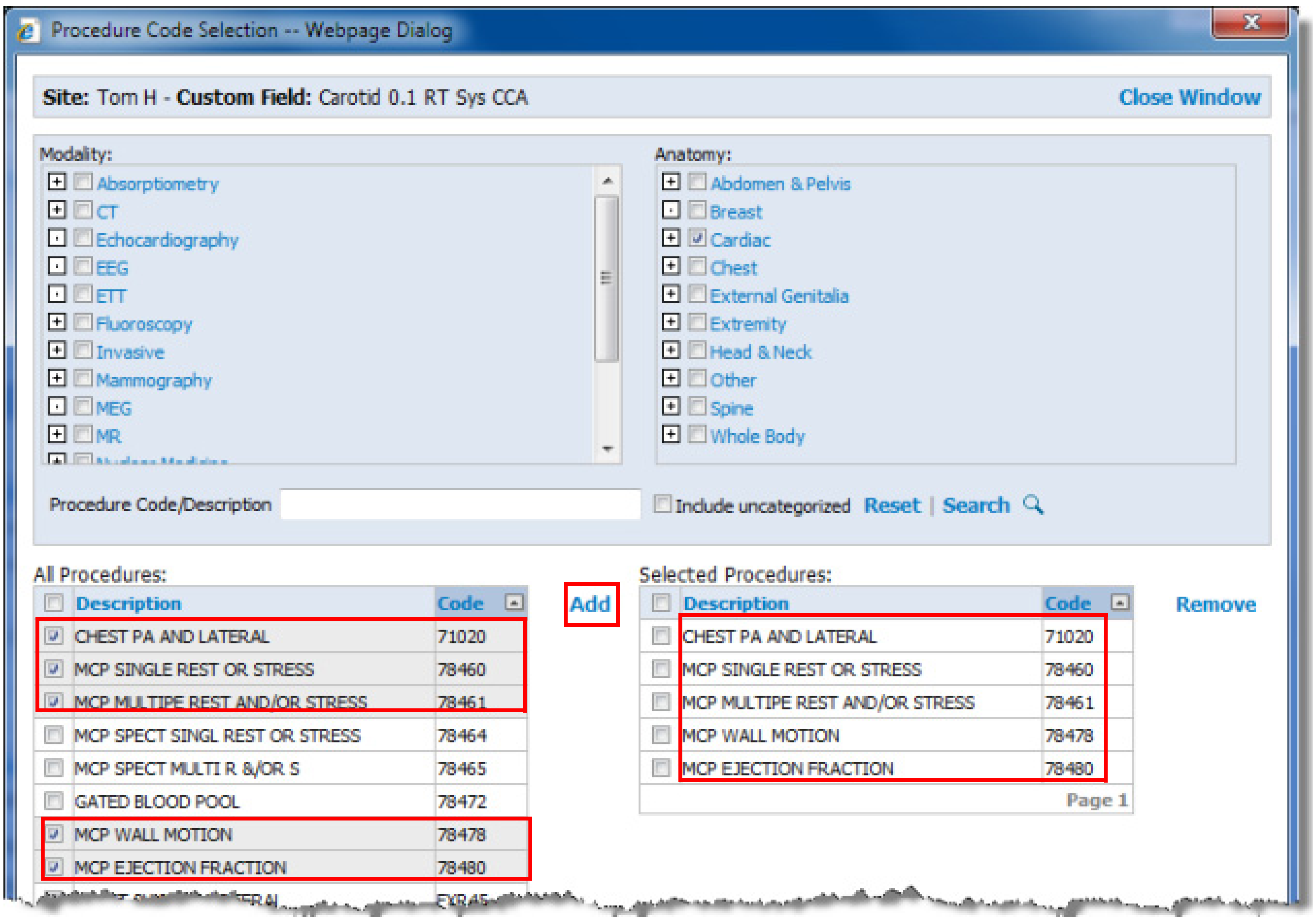
   Tip: *Begin the* ***Name*** *of each custom field with the same word (****Carotid*** *in this example) followed by a numeric sequence (****0.1****,* ***0.2****, and so on, in this example). Doing this causes the fields to appear in a logical sequence in the client application* ***Custom Fields*** *drop-down list.*



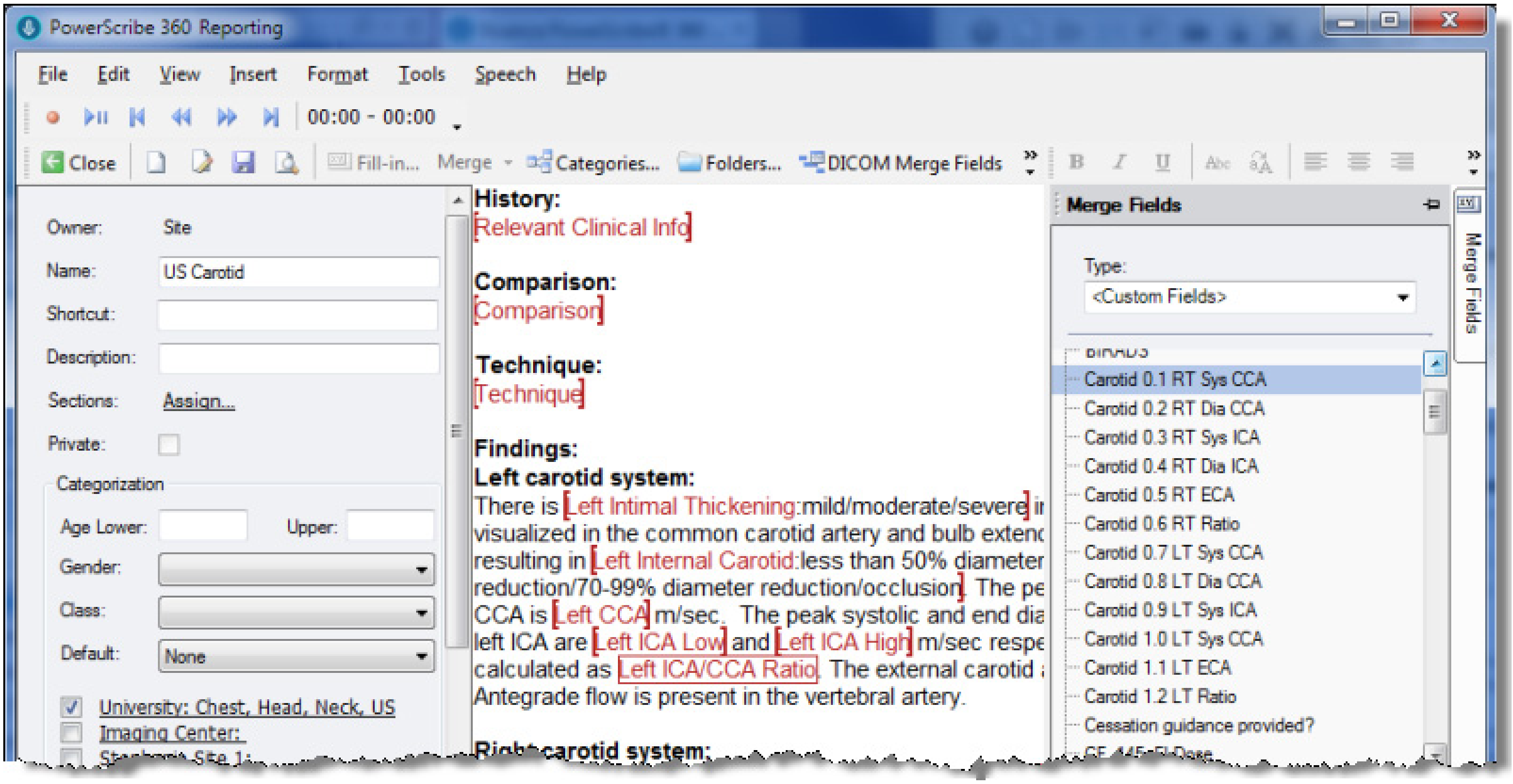
2. Under the custom field's **Procedures** column, click **Edit**.

The **Procedure Code Selection** dialog box opens.

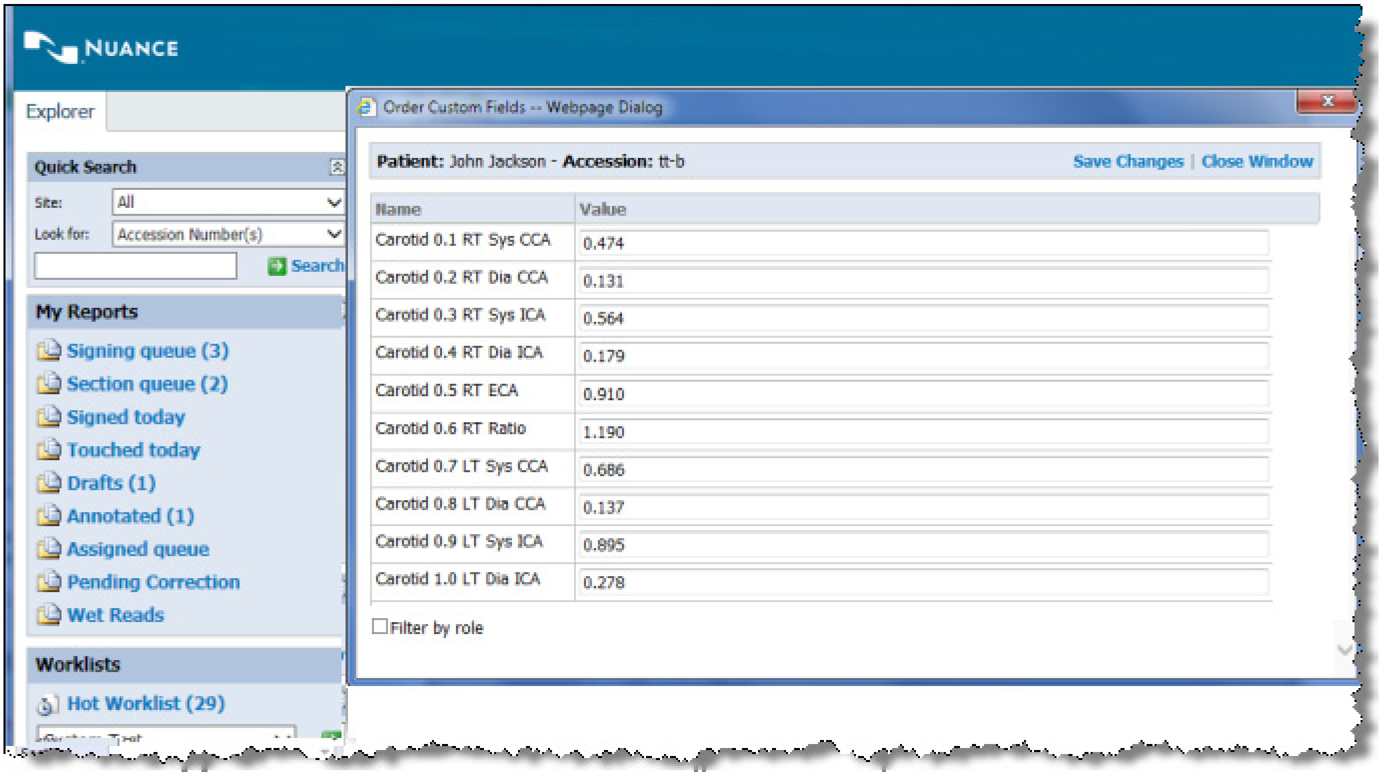
3. Search for and select the applicable carotid procedures.
4. Click **Add** to copy the procedures to the **Selected Procedures** column.



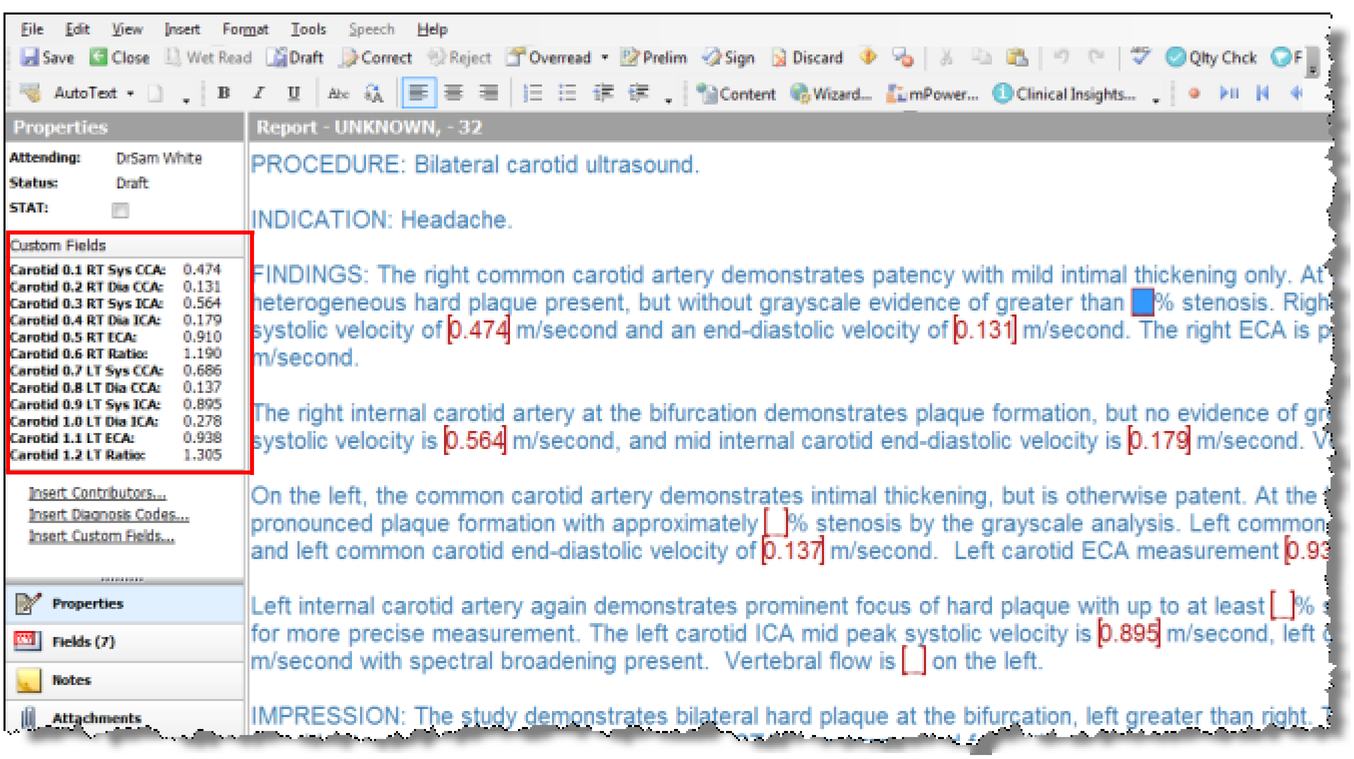
5. Using the client application, create a **carotid** AutoText and insert the custom fields as merge fields.



6. Assign values to the custom fields for the exam accession number.



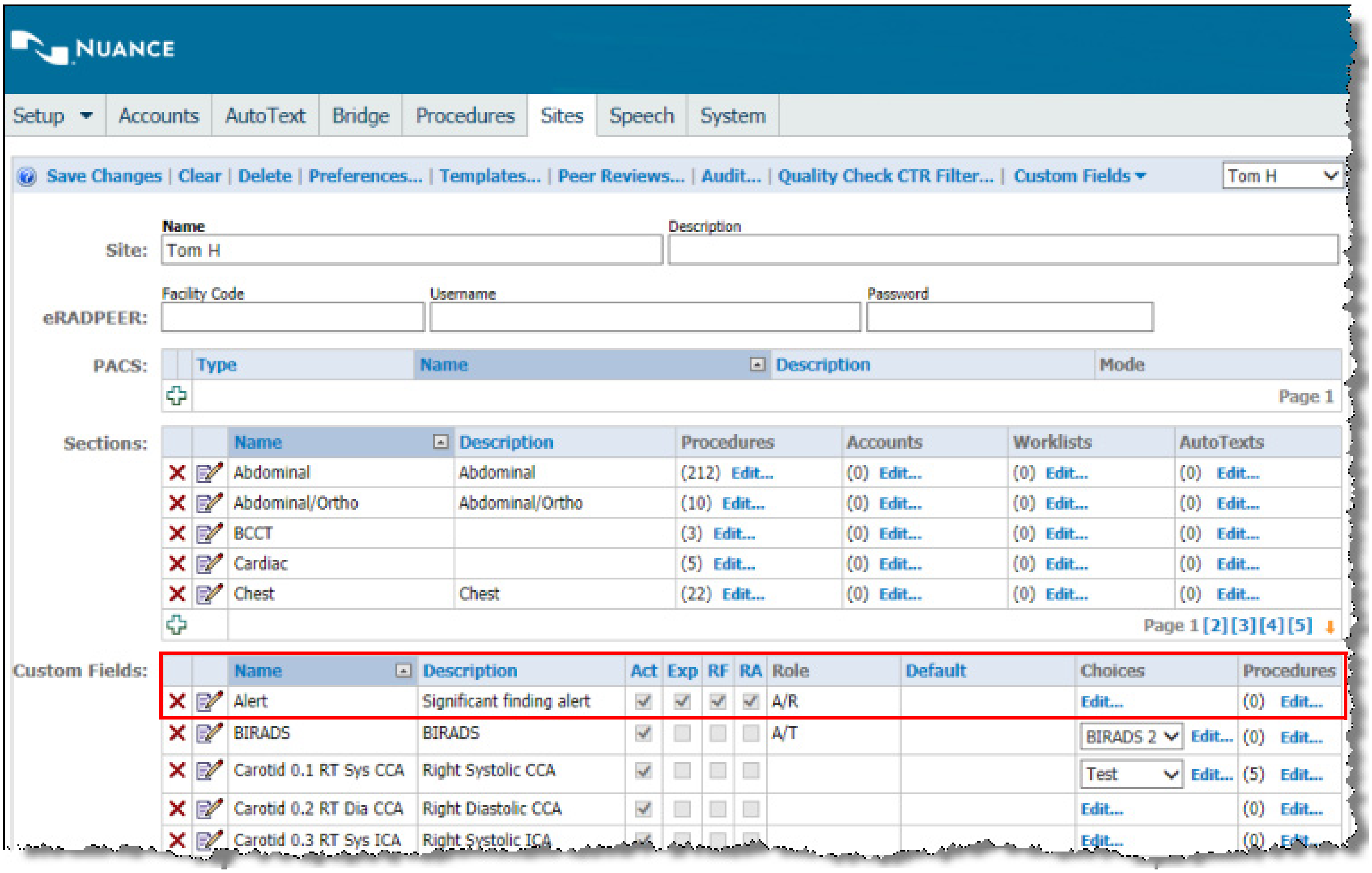
7. The following illustration shows the pre-populated carotid custom fields in the AutoText prior to report dictation.



Example 3: Alerts

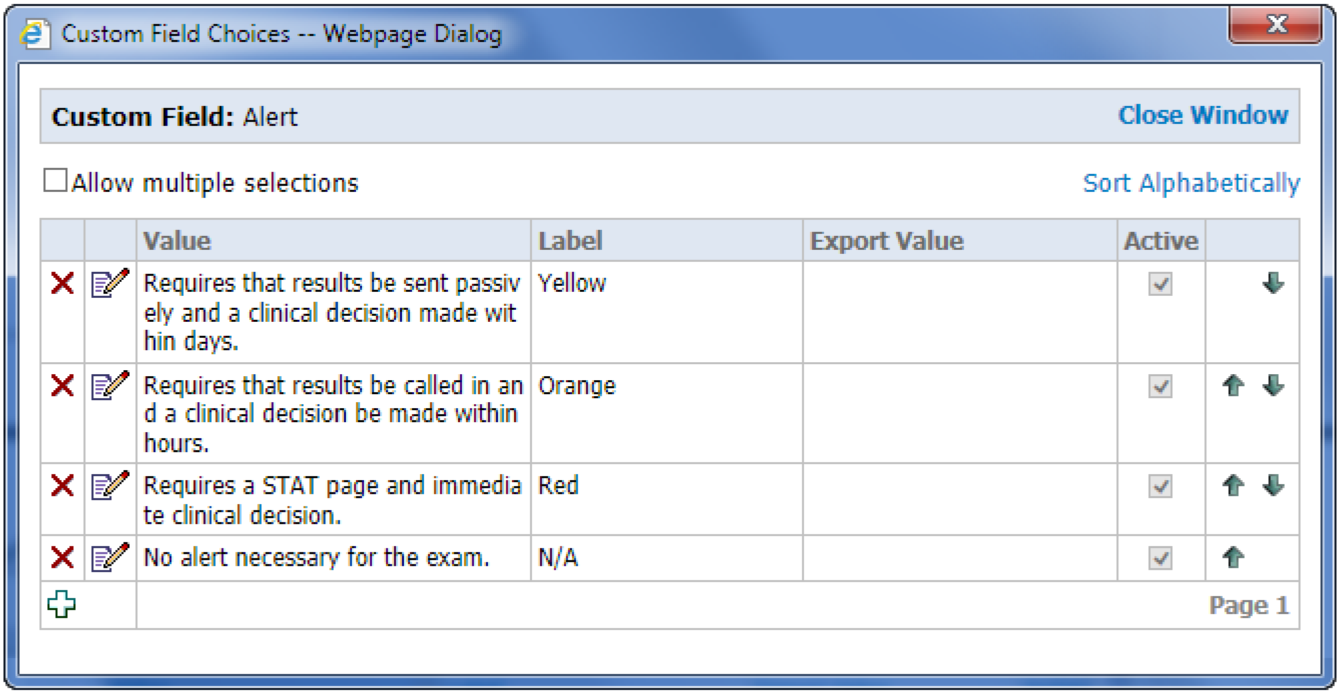
You can use a custom field to send an HL7 message to the RIS in order to communicate an alert for a significant finding. For example, if the results of an exam demonstrate acute appendicitis requiring immediate surgery for treatment, a radiologist can send an HL7 red alert message by using a custom field.

1. Create and save a pick-list custom field named **Alert** with the **Act**, **Exp**, and **RF** and/or **RA** check boxes selected.



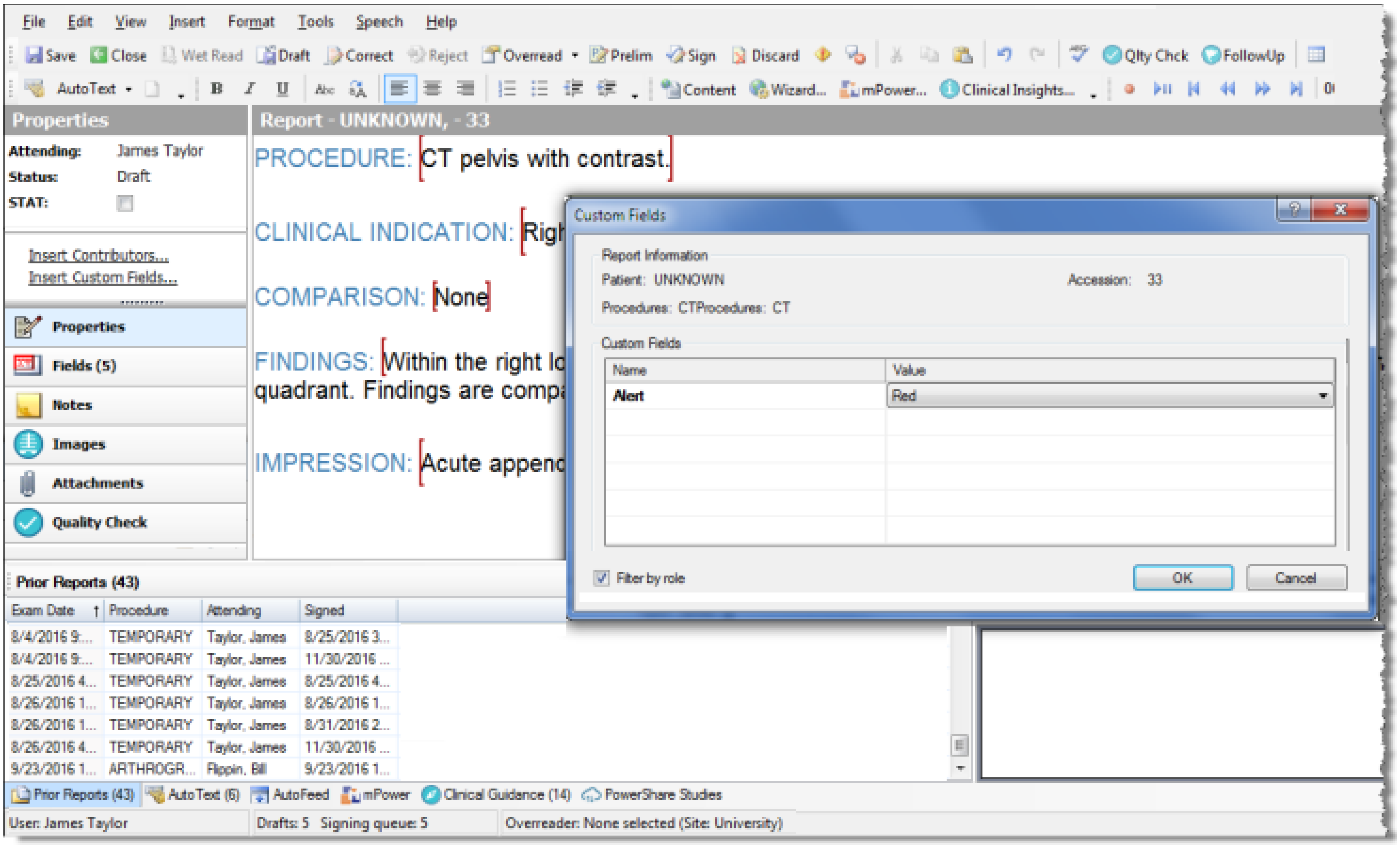
> *Note:* *Because we want the **Alert** custom field to apply to **all** procedures, do **not** add any specific **Procedures** (last column) to this alert.*

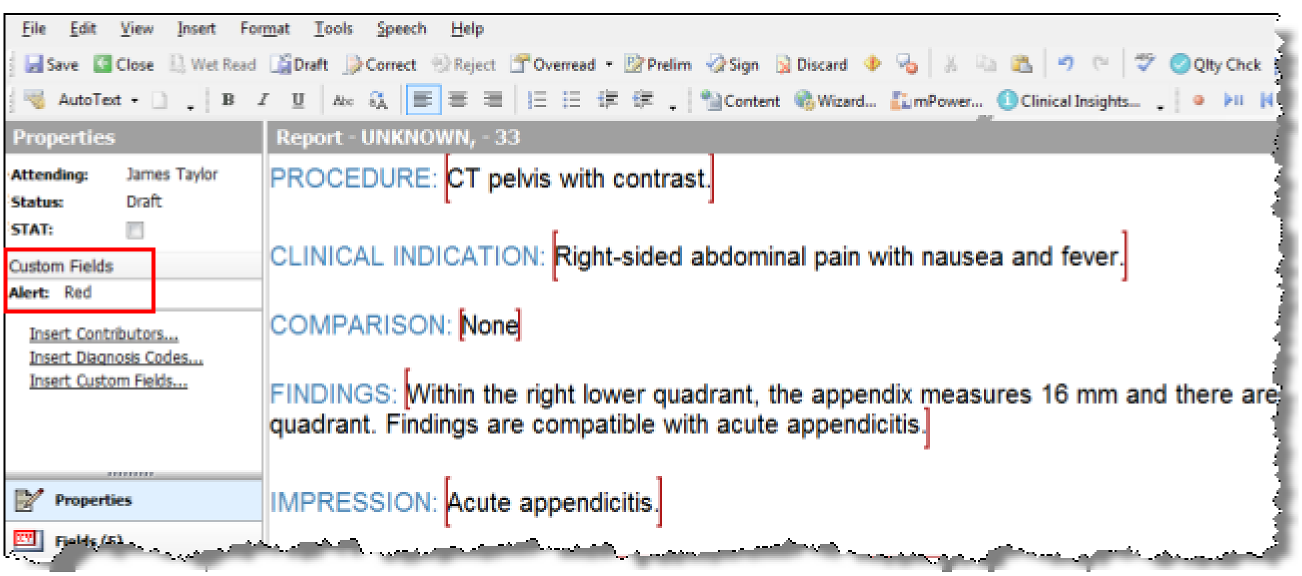
2. Click **Edit** in the **Choices** column to enter each value, label, and export value as pick list selections.



3. If required, use the up/down arrow icons in the far right column to reorder your choices. (Another reordering option is to click the **Sort Alphabetically** link.)
4. Click the **Close Window** link.

The following illustrations show the radiologist selecting a value for the **Alert** custom field, and the results of selecting that field as it appears in under **Properties** to the left.

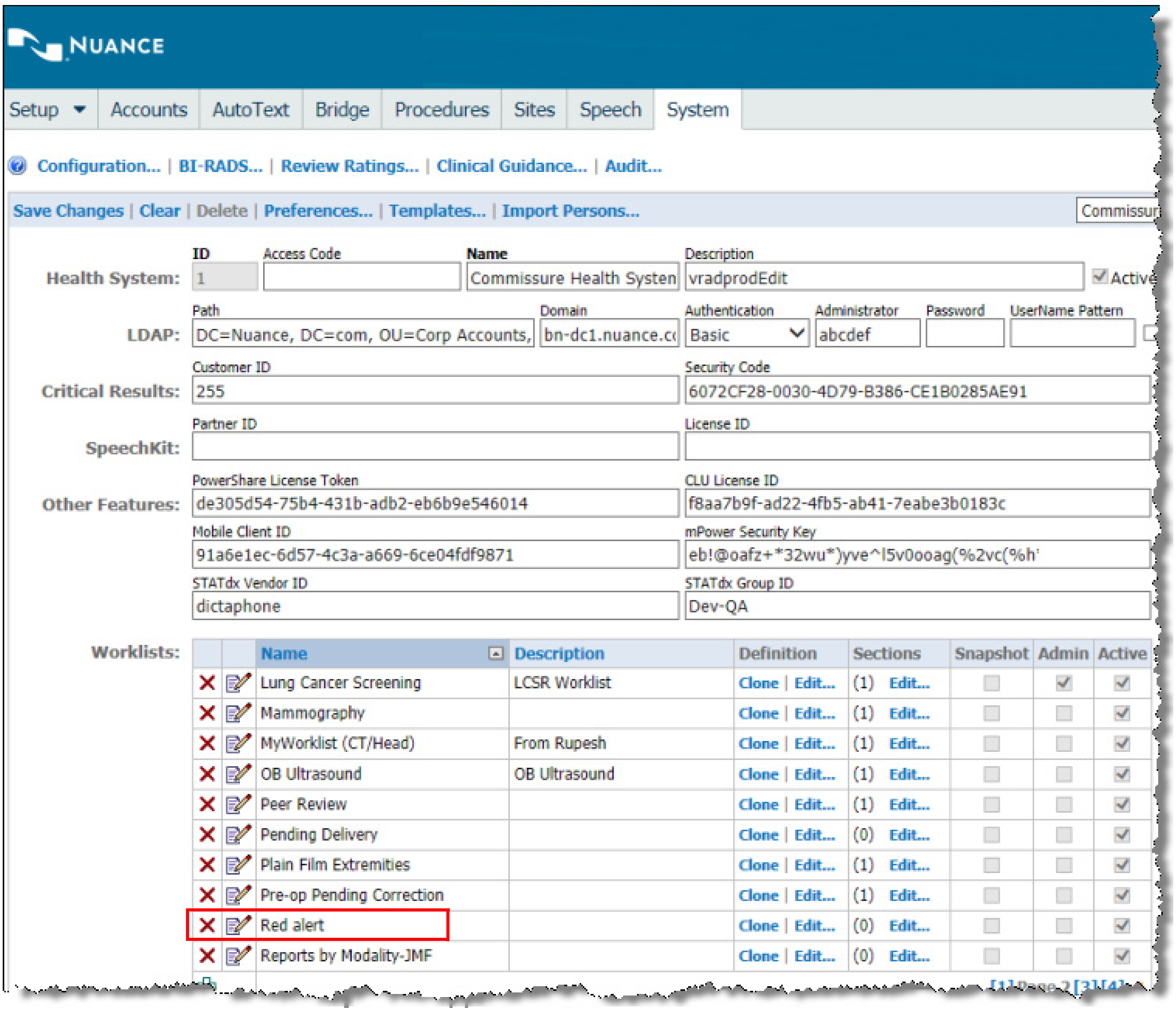




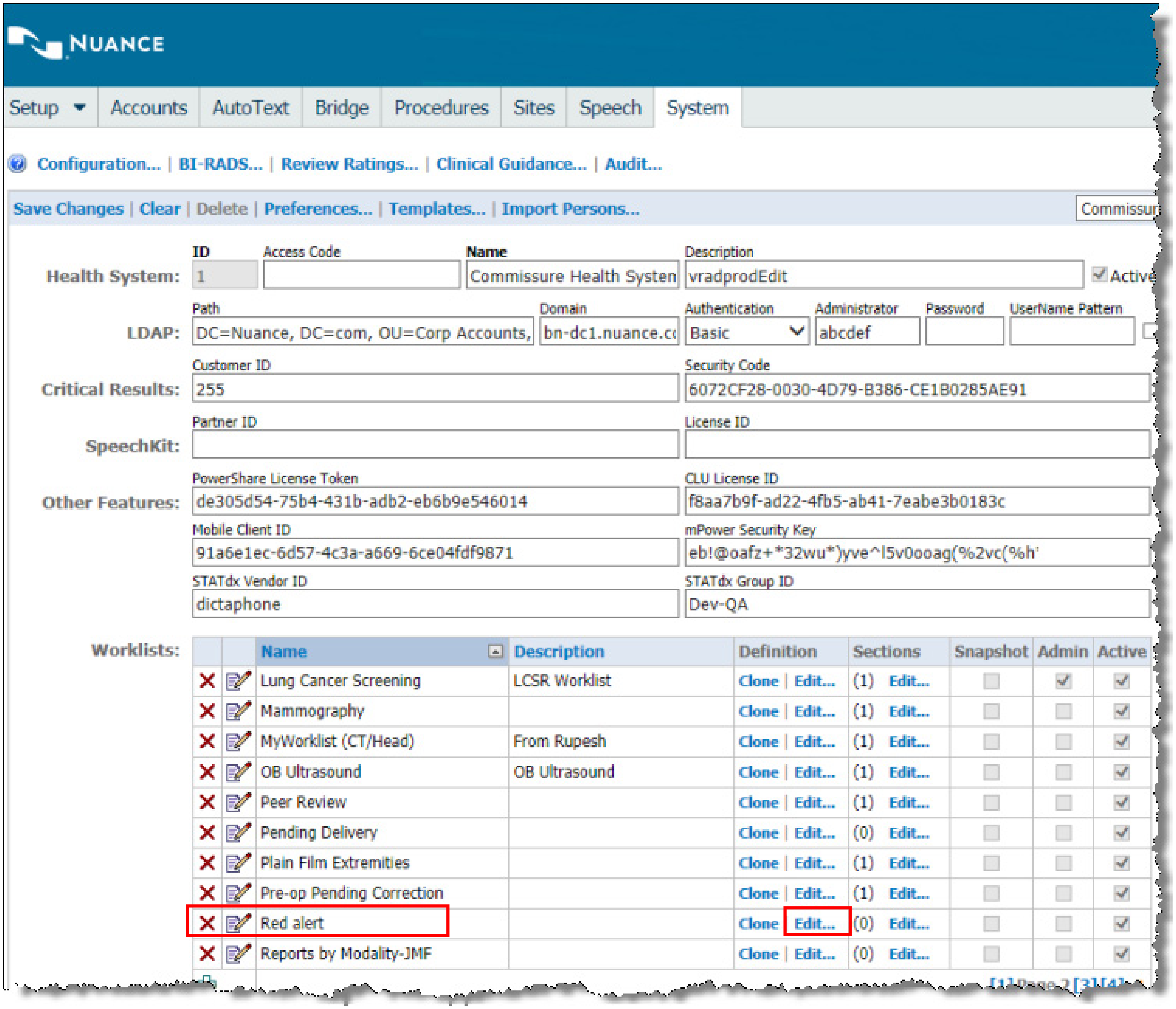
Creating a Custom Fields Worklist

You can create a worklist to retrieve only those orders and reports containing a custom field that was assigned a particular value, such as a red alert for a significant finding requiring immediate treatment.

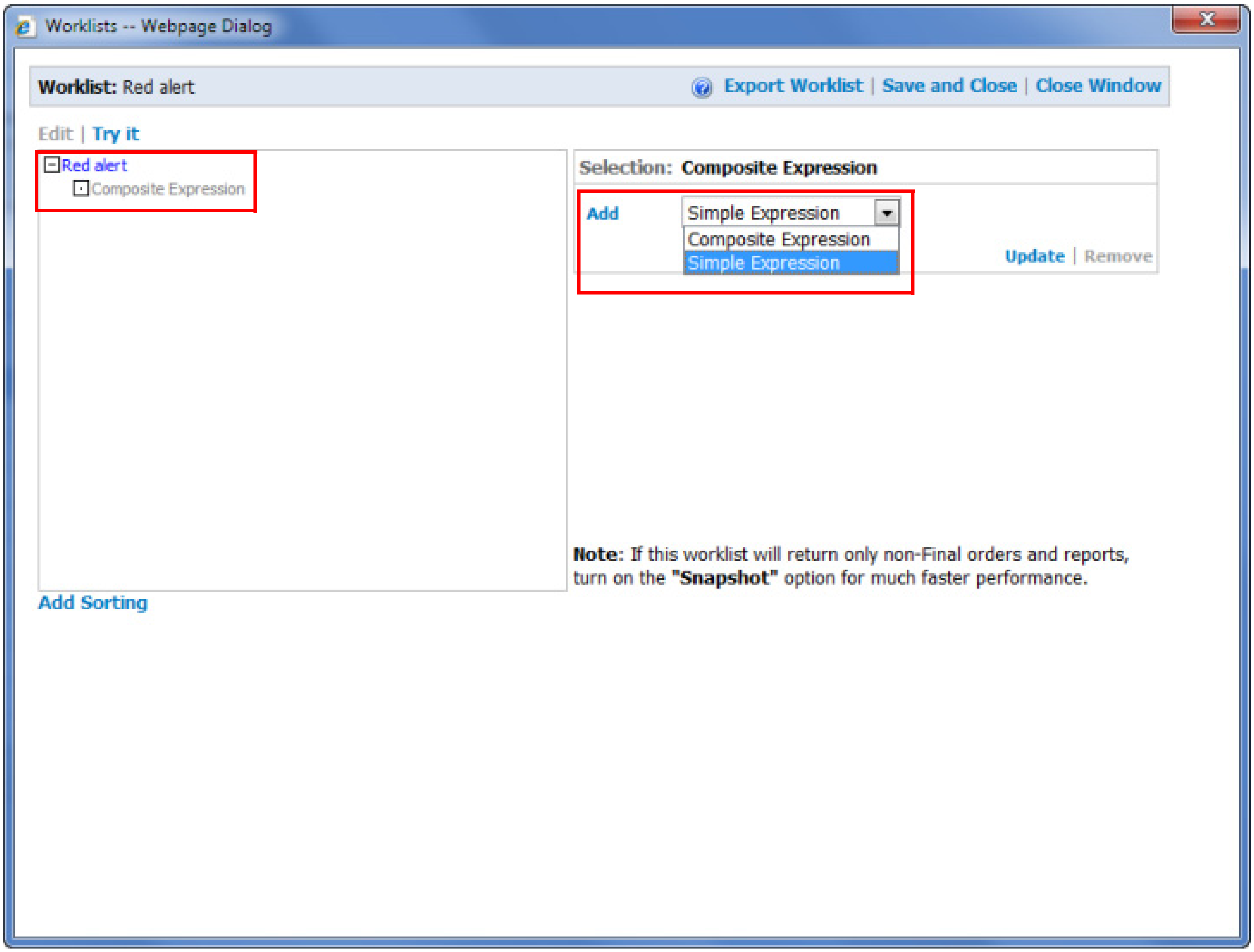
1. From the Administrator Portal, select the **Setup** group and click the **System** tab.
2. In the **Worklists** section, click the **Create New** icon.
3. Enter a **Name** and a **Description** (optional) for the worklist.
4. Click the **Commit Changes** icon.



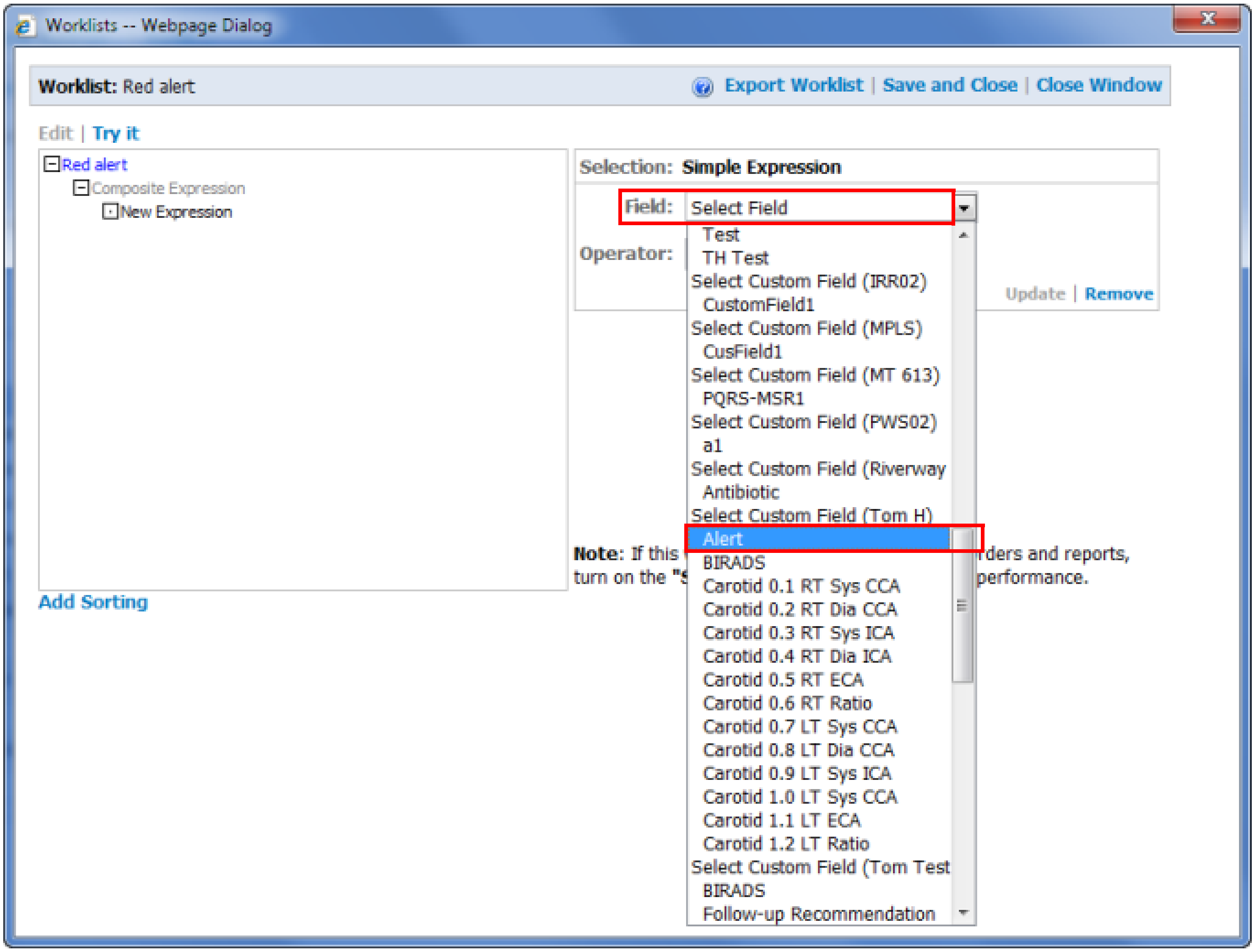
5. In the **Worklists** section on the row where the new worklist was added, click **Edit** under the **Definition** column.



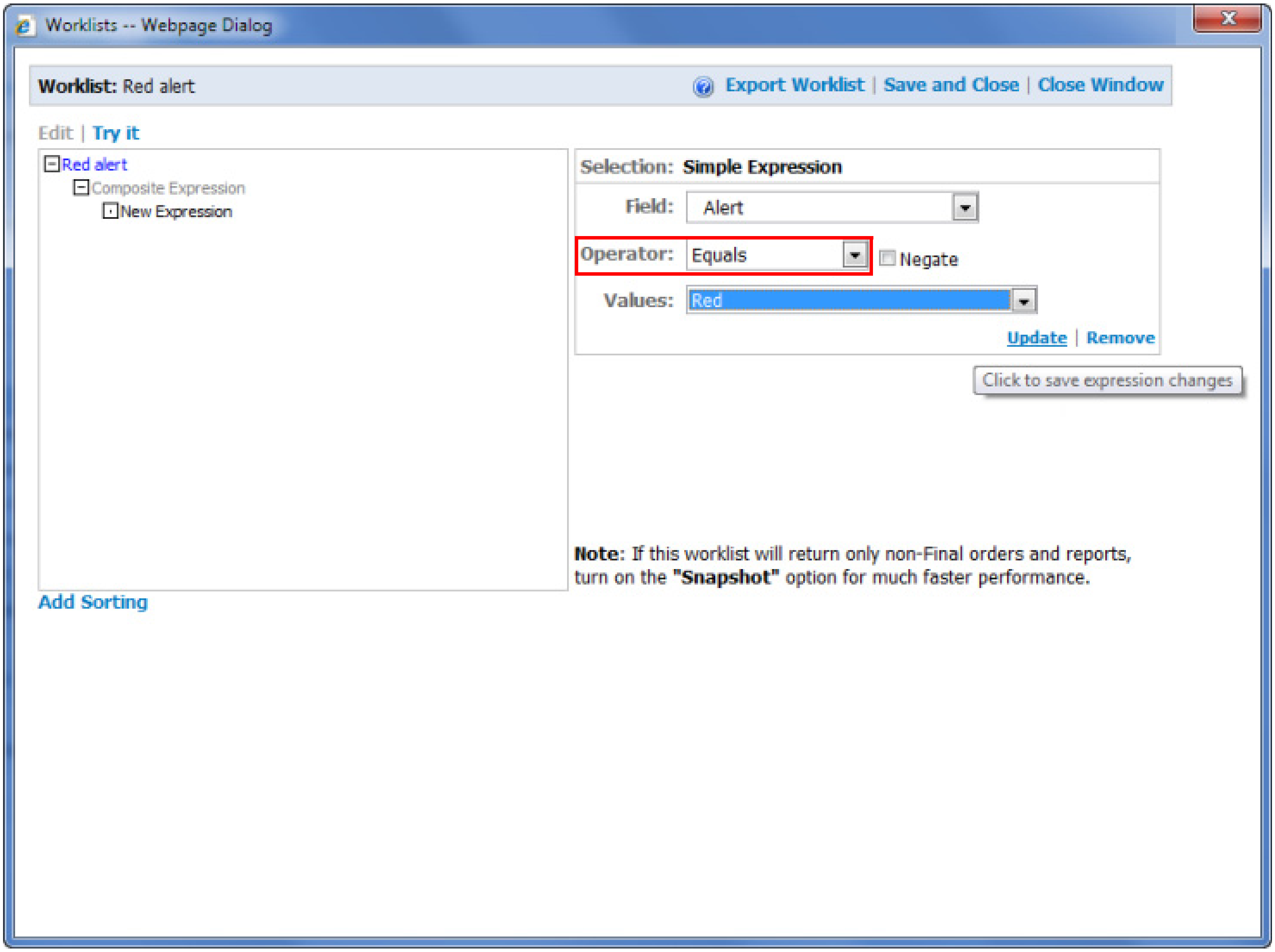
6. The **Worklists** dialog box opens, showing the name of the worklist and the tree structure to be used to design the query. Click the **Composite Expression** link on the left side of the window.
7. From the drop-down list on the right, select **Simple Expression** and click **Add**.



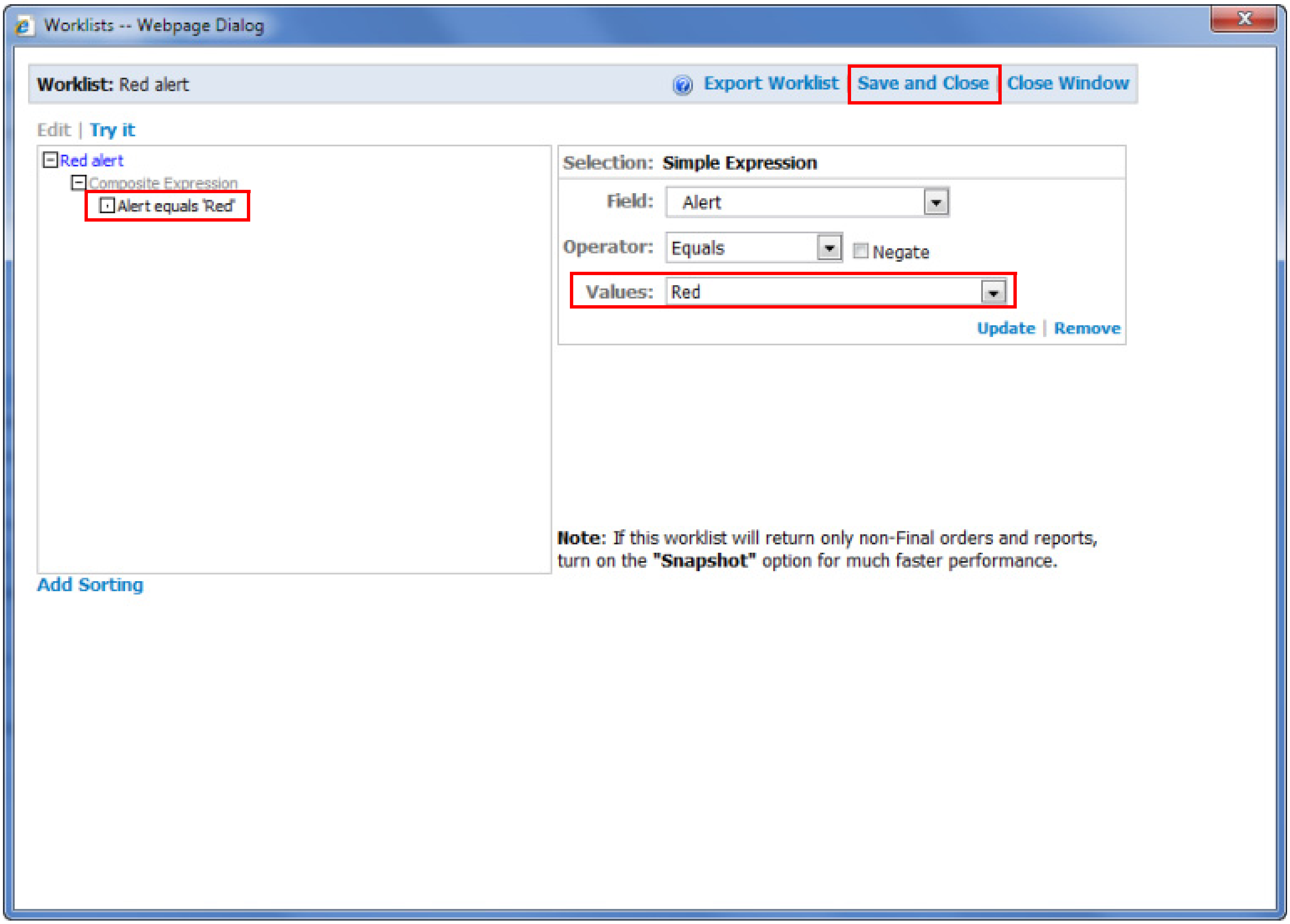
8. Select the applicable field name, such as **Alert** in this example, from the **Field** drop-down list.



9. Select the applicable **Operator** (**Equals** in this example) from the **Operator** drop-down list.



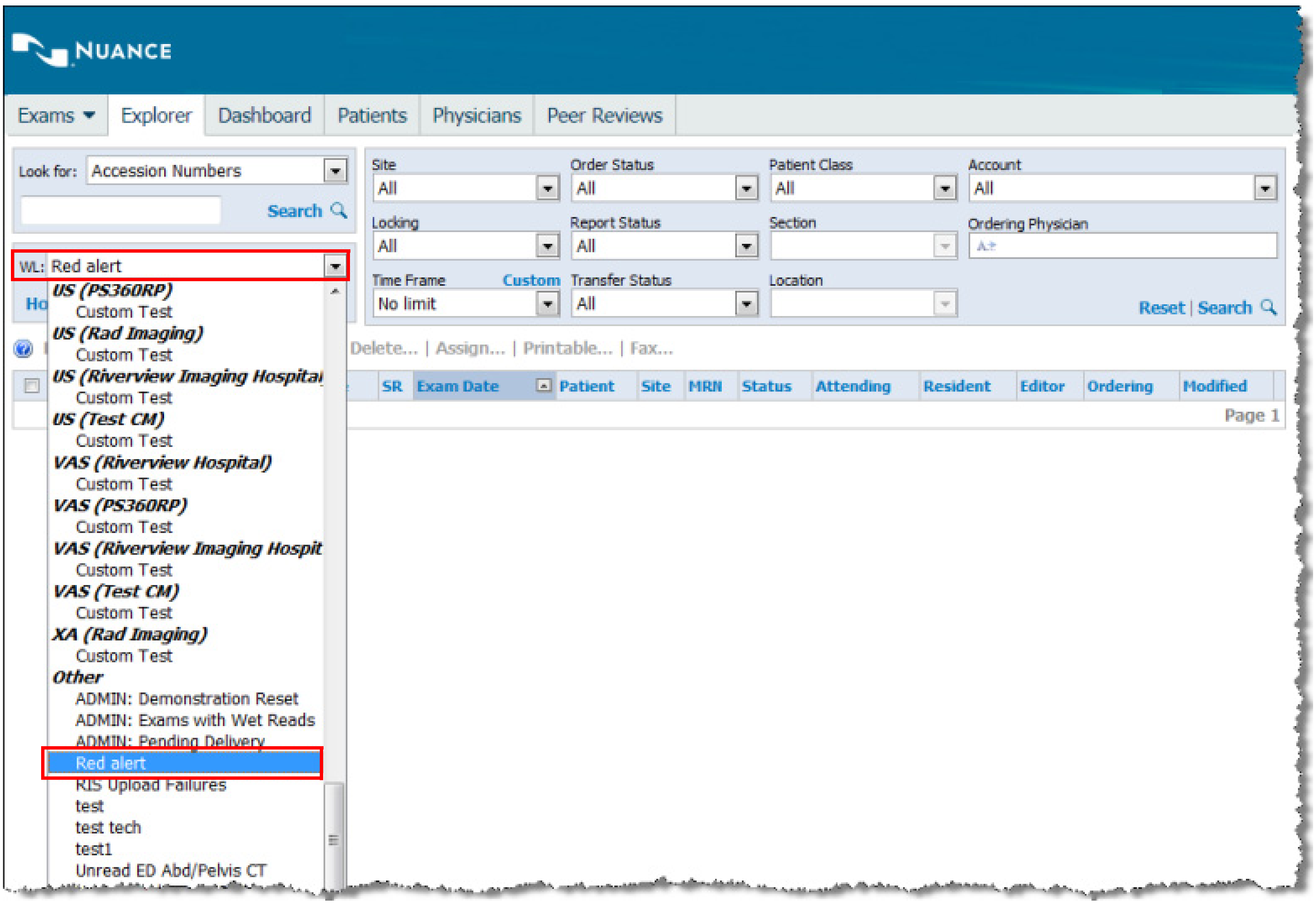
10. Select the applicable **Value** (**Red** in this example) from the **Values** drop-down list.
11. Click **Update**. The newly created expression now appears on the left side of the window.
12. Click **Save and Close**.



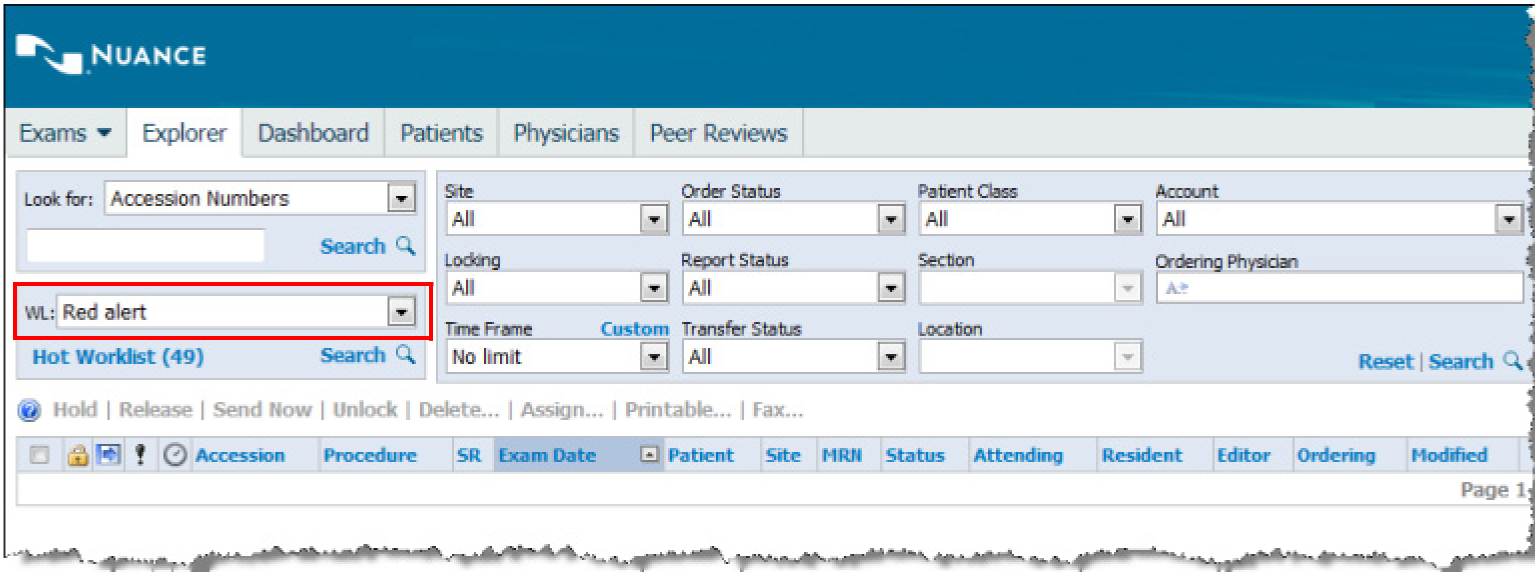
Searching Using the Custom Fields Worklist

You can now search using the newly created custom fields worklist to retrieve those orders and reports containing the particular value, such as **Red alert** in this example.

1. From the Administrator Portal, select the **Exams** group and click the **Explorer** tab.
2. In the **WL** search section, select the applicable worklist from the drop-down list.



3. Click **Search**. Any reports containing the **Red alert** custom field appear in the results grid.



Running the Custom Fields Report

For information on running the Custom Fields management report, see *Report Custom Fields*, beginning on page 553.

Chapter 15

AutoFormatting Rules

Objectives

In this chapter, you will:

- Configure autoformatting options

Setting Autoformatting Rules for Dictated Text

The autoformatting rules, also referred to as post-processing rules, determine how text appears in finished reports. You can change the default settings for these rules to fit your organization's standards. The **Formatting** dialog box allows you to set formatting rules for your entire facility.

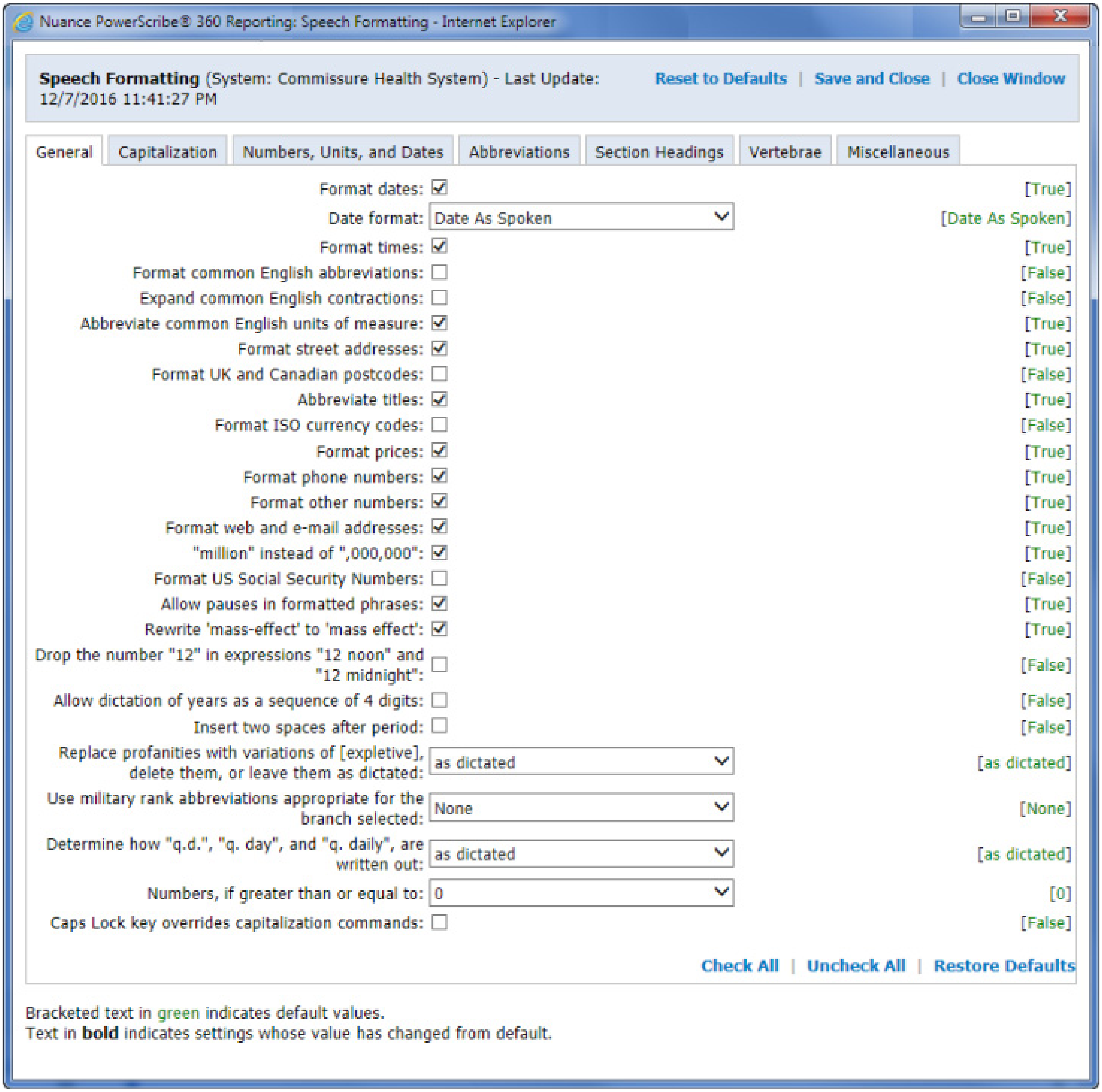
Tips for AutoFormatting Rules

- When administrators configure AutoFormatting rules using the Admin Portal (**Setup > Speech > Edit Formatting Options**), the rules apply to all users in all sites throughout the system.
- Providers who were granted the **Allow Dragon Formatting Dialog** dictation preference can set their own rules. If necessary, remind providers that they can click **Restore Defaults** to return these options to their original settings.
- Administrators can configure an individual provider's AutoFormatting rules, but only by logging into the provider's account using the provider's user name and password.

Configuring the AutoFormatting Rules

To set the autoformatting rules:

1. In the **Setup** group, select the **Speech** tab.
2. Click **Edit Formatting Options**. The **Speech Formatting** dialog box opens.



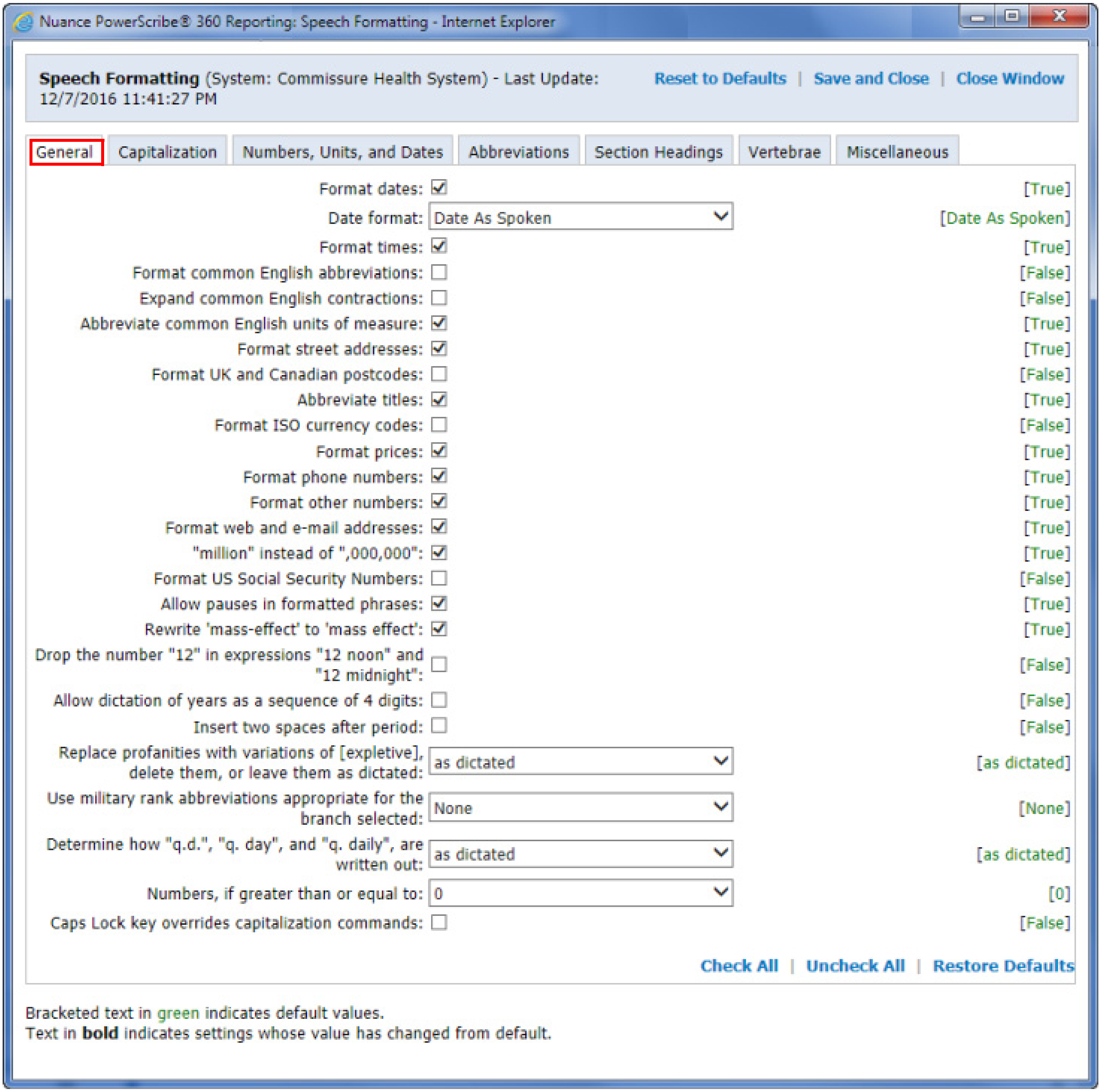
3. Set the options on the **General**, **Capitalization**, **Numbers, Units and Dates**, **Abbreviations**; **Section Headings**; **Vertebrae**; and **Miscellaneous** tabs. On each of these tabs, the green, bracketed text at the far right next to each option shows the default value; True means the check box is selected, False means the check box is cleared. Where the option name is shown in bold text, you have changed the value from the default.
   - General (page 371)
   - Capitalization (page 381)
   - Number, Units, and Dates (page 384)
   - Abbreviations (page 391)
   - Section Headings
   - Vertebrae
   - Miscellaneous (page 402)

   Tips: *To set all the values on a tab to 'True', click* ***Check All****. Likewise, select* ***Uncheck All*** *to set all the values on the currently selected tab to 'False.' Click* ***Restore Defaults*** *to set all values to their original defaults.*

4. Click **Save and Close** to save your changes. The users will see the changes after their next login.

General Tab

This tab contains rules for various items such as dates, numbers, and measurements.



Format Dates

This option determines whether the software converts dictated dates to your selected date format.

☑	Selection	Results
☐	Checked*	The dictated dates are placed in the format you select.
☐	Not checked	The dates are unformatted and appear in the document as dictated.

*** = Default selection**

Date Format

This option controls how the software formats dates when the user dictates the day, month, and year.

☑	Selection	Results
☐	Date as spoken*	No formatting; dates appear as dictated.
☐	Month D, YYYY	March 3, 2013
☐	Month DD, YYYY	May 03, 2013
☐	Mon D, YYYY	Oct 3, 2013
☐	Mon DD, YYYY	Oct 03, 2013
☐	M/D/YYYY	2/4/2013
☐	M/D/YY	2/4/13
☐	MM/DD/YYYY	02/04/2013
☐	MM/DD/YY	02/04/13
☐	MM-DD-YY	03-11-13
☐	D Month, YYYY	27 March, 2013
☐	D/M/YYYY	2/3/2013
☐	D/M/YY	2/3/13
☐	DD/MM/YYYY	02/03/2013
☐	DD/MM/YY	02/03/13
☐	YYYY-MM-DD	2013-05-23

*** = Default selection**

Format Times

Turns on automatic formatting of standard time formats. For example, if the user dictates **"Six thirty PM,"** the software transcribes **6:30 PM**. Dictating standard time runs on a 12-hour clock, letting the user make the distinction between AM and PM.

☑	Selection	Results
☐	Checked*	6:30 p.m.
☐	Not checked	Six thirty p.m.

*** = Default selection**

Format Common English Abbreviations

This option enables the software to recognize most standard abbreviations.

☑	Selection	Results
☐	Checked	Dept. Inst. vs. Corp.
☐	Not checked*	Department Institute versus Corporation

*** = Default selection**

Expand Common English Contractions

Select this option if you want the software to spell out contractions in full, rather than showing them as contractions.

In some situations, a contraction is ambiguous. For example, the phrase **"It's always"** might mean either **"It is always"** or **"It has always,"** depending on the word that follows. In this situation, the software expands the contraction regardless of how you have set this option.

☑	Selection	Results
☐	Checked	He is It is
☐	Not checked*	He's It's

*** = Default selection**

Abbreviate Common English Units of Measure

Use this option to turn on automatic formatting of standard units of measure such as feet and inches.

☑	Selection	Results
☐	Checked*	Patient weighs 150 lbs. 9 mm
☐	Not checked	Patient weighs 150 pounds. 9 millimeters

*** = Default selection**

Format Street Addresses

Turns on automatic formatting of postal addresses.

For UK English users, this option also enables the proper formatting of UK and Canadian post codes. US English users can enable UK and Canadian post codes by selecting the **Format UK and Canadian Postcodes** option.

☑	Selection	Results
☐	Checked*	100 Main Street, New York, NY 10007
☐	Not checked	100 Main Street New York New York 10007

*** = Default selection**

Format UK and Canadian Postcodes

This option applies only to US English. With the option selected, the software properly formats UK and Canadian postal codes.

☑	Selection	Results
☐	Checked	London, W2 4RJ Toronto, Ontario M5H 2L2
☐	Not checked*	London, W24RJ Toronto, Ontario M5 H2 L2

*** = Default selection**

Abbreviate Titles

This option inserts abbreviations for titles.

☑	Selection	Results
☐	Checked*	Mr. Dr.
☐	Not checked	Mister Doctor

*** = Default selection**

Format ISO Currency Codes

You can select this option if you have selected the **Format Prices** option. This setting enables the software to display currency amounts with the international code for the language you have chosen in the Windows Regional and Language Options tool in the Control Panel.

☑	Selection	Results
☐	Checked	USD10
☐	Not checked*	10 dollars

*** = Default selection**

Format prices

Inserts prices and currencies in the proper format with the appropriate currency symbol.

☑	Selection	Results
☐	Checked*	$200 $200.50 €50
☐	Not checked	200 dollars 200 dollars and 50 cents 50 euros

*** = Default selection**

Format phone numbers

Select this option to turn on automatic formatting of telephone numbers.

For US English users: Turns on automatic formatting of North American telephone numbers when the user dictates a sequence of seven or ten numbers.

Notes:

- *Vanity phone numbers such as 1-800-EXAMPLE are not supported.*
- *The automatic formatting of North American telephone numbers is not supported for UK English users.*

For UK English users: Turns on automatic formatting of UK telephone numbers.

Notes:

- *Country code +44 can be dictated as "four four," "forty four," or "double four" with preceding "plus" or "plus-sign." For example, if the user dictates "plus-sign four four two nine two oh seven four seven seven four seven," the software transcribes "+44 29 2074 7747".*
- *Area codes that are dictated without the preceding country code must be dictated with leading zero. For example, when the user dictates "zero two nine two oh eight seven nine three two seven,", the software transcribes "029 2087 9327".*
- *When the user dictates a 6-digit number, the software transcribes the number with no spaces. When the user dictates a seven- or eight-digit number, the software transcribes the number with a space before the last four digits.*
- *The automatic formatting of UK telephone numbers is not supported for US English users.*

☑	Selection	Results
☐	Checked*	212- 555-1000
☐	Not checked	2125551000

*** = Default selection**

Format Other Numbers

This option enables formatting of all numbers not covered by other formatting options, such as negative numbers, numbers with punctuation, fractions, decimals, and Roman numerals.

☑	Selection	Results
☐	Checked*	1,205.7 22,500.7
☐	Not checked	1205 .seven 22,500 .seven

*** = Default selection**

Format Web and E-mail Addresses

Web and email addresses are formatted automatically, allow the user to dictate them in a natural manner. Names are concatenated and the word **at** is converted to the **@** symbol.

☑	Selection	Results
☐	Checked*	doctor@hospital.com
☐	Not checked	Dr. at hospital.com

*** = Default selection**

"million" instead of ",000,000"

Inserts numbers as a combination of text and Arabic numerals.

☑	Selection	Results
☐	Checked*	5 million
☐	Not checked	5,000,000

*** = Default selection**

Format US Social Security Numbers

This option applies only to US English. With this option selected, if the user dictates nine numbers in sequence, automatic formatting of social security numbers is activated.

☑	Selection	Results
☐	Checked	Social security number is 123-45-6789.
☐	Not checked*	Social security number is 123456789.

*** = Default selection**

Allow Pauses in Formatted Phrases

A speaker is likely to pause while dictating a number with many digits. If you select this option, the speech recognition software does not attempt to interpret a number until the speaker finishes dictating all the digits and begins dictating the next word. Then, it uses the context to interpret the number as an MRN, a phone number, a social security number, or another type of number.

☑	Selection	Results
☐	Checked*	A number is not immediately formatted when the speaker pauses.
☐	Not checked	Pauses in number dictation can result in premature number formatting.

*** = Default selection**

Rewrite “mass-effect” to “mass effect”

Removes the hyphen from the term “mass-effect.”

☑	Selection	Results
☐	Checked*	“mass effect”
☐	Not checked	“mass-effect”

*** = Default selection**

Drop the number “12” in expressions “12 noon” and “12 midnight”

Removes the number **12** from time expressions, leaving only either “noon” or “midnight.”

☑	Selection	Results
☐	Checked	“12 noon” or “12 midnight”
☐	Not checked*	“noon” or “midnight”

*** = Default selection**

Allow dictation of years as a sequence of 4 digits

For example, allows providers to dictate “two zero one three” to indicate the year 2013.

☑	Selection	Results
☐	Checked	2013
☐	Not checked*	two zero one three

*** = Default selection**

Insert Two Spaces After Period

Adds two spaces after the end of a sentence instead of a single space.

☑	Selection	Results
☐	Checked	Two spaces after a period.
☐	Not checked*	One space after a period.

*** = Default selection**

Replace profanities with variations of [expletive], delete them, or leave them as dictated

Allows you to decide how to treat profanities.

☑	Selection	Results
☐	Default is **as dictated**	Choose from **as dictated**; **no output**; **[EXPLETIVE]**; or **[expletive]**

*** = Default selection**

Use military rank abbreviations appropriate for the branch selected

Adds the appropriate rank based upon military branch selected.

☑	Selection	Results
☐	Default is **None**	Choose from **Army**; **Navy**; **Air Force**; **Marines**; or **None**

*** = Default selection**

Determine how “q.d.”, “q. day”, and “q. daily” are written out

Choose the preference used by your sites.

☑	Selection	Results
☐	Default is **as dictated**	Choose from **q.d.**; **daily**; **q. day**; **q. daily**; or **as dictated**

*** = Default selection**

Numbers, if Greater Than or Equal to

Numbers below the one you select are spelled out in full. Numbers equal to or greater than this number appear as digits.

☑	Selection	Results
☐	0	The dictated number “zero” appears as *zero*, and the numbers one and higher appear as 1, 2, 3, 4, and so on.

*** = Default selection**

☐	2*	The dictated numbers “zero” and “one” appears as *zero* and *one*, and the numbers two and higher appear as 2, 3, 4, and so on.
☐	10	The dictated numbers “zero” through “nine” appears as *zero* through *nine*, and the numbers ten and higher appear as 10, 11, 12, and so on.
☐	100	The dictated numbers “zero” through “ninety-nine” appear as *zero* through *ninety-nine*, and the numbers one hundred and higher appear as 100, 101, 102, and so on.
☐	No formatting	All numbers are spelled out, except where another formatting rule applies to them.

*** = Default selection**

Caps Lock Key Overrides Capitalization Commands

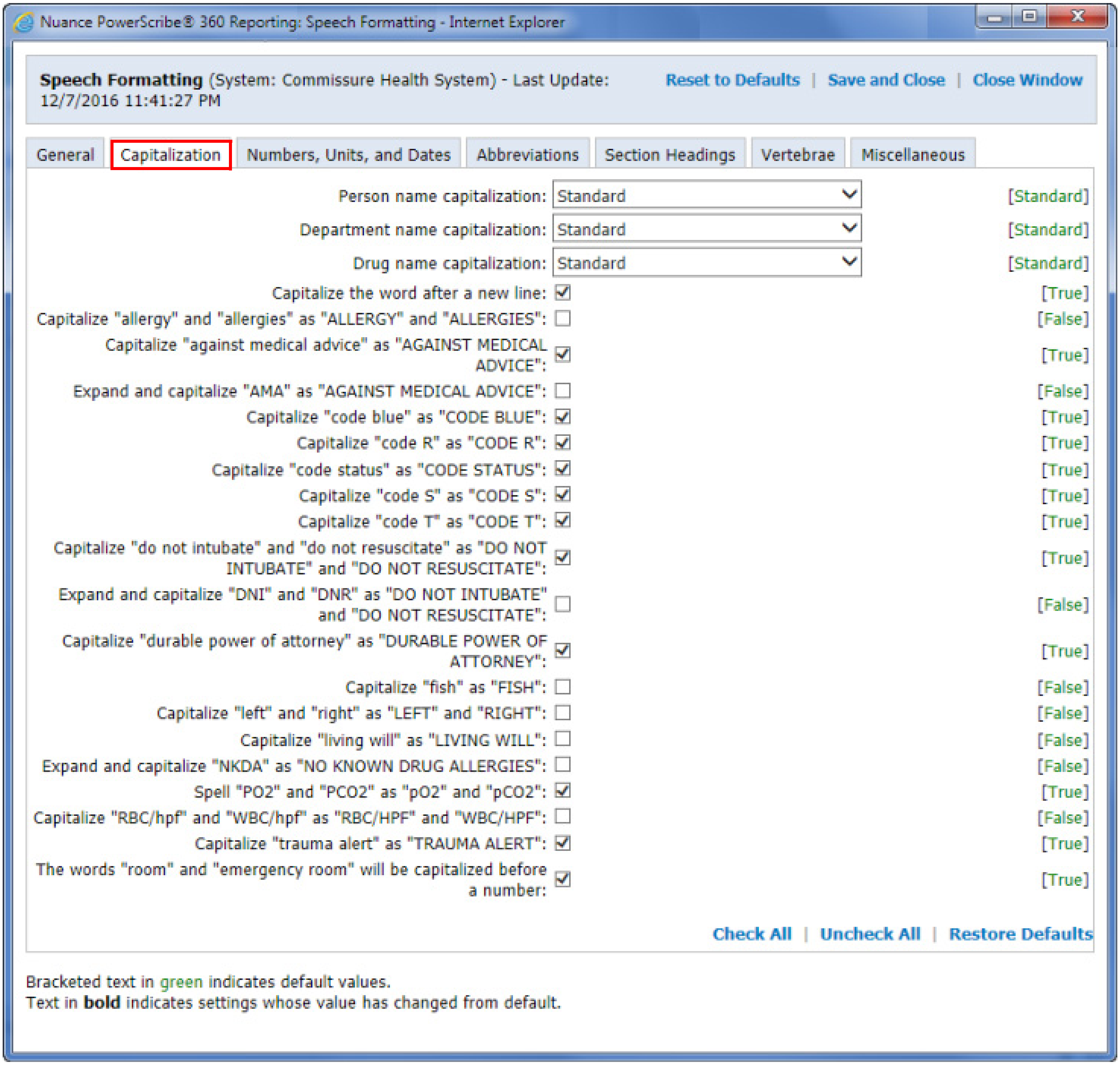
This option provides a reliable way to enter text in all capital letters. If you select this option, when the user activates **Caps Lock** by pressing the **Caps Lock** key or pronouncing the corresponding voice command, the following capitalization commands have no effect: **Cap <word>**, **Caps On**, **Caps Off**, **All-Caps <word>**, **All-Caps On**, **All-Caps Off**, **No-Caps <word>**, **No-Caps On**, and **No-Caps Off**. The **Cap That**, **All-Caps That**, **No-Caps That** and **Capitalize <words>** commands, however, work as they normally do.

☑	Selection	Results
☐	Checked	While **Caps Lock** is on, the **Cap <word>**, **Caps On**, **Caps Off**, **All-Caps <word>**, **All-Caps On**, **All-Caps Off**, **No-Caps <word>**, **No-Caps On**, and **No-Caps Off** commands have no effect.
☐	Not checked*	All capitalization commands work as usual while **Caps Lock** is on.

*** = Default selection**

Capitalization Tab

Use this tab to set capitalization rules for the names of persons, departments, drugs, and so on.



Person Name Capitalization

☑	Selection	Results
☐	Standard*	Jason T. Myers
☐	All caps	JASON T. MYERS

*** = Default selection**

Department Name Capitalization

☑	Selection	Results
☐	Standard*	Nuclear Medicine Department
☐	All caps	NUCLEAR MEDICINE DEPARTMENT

*** = Default selection**

Drug Name Capitalization

☑	Selection	Results
☐	Initial caps	Aspirin Buspar
☐	Standard*	Aspirin BuSpar
☐	All caps	ASPIRIN BUSPAR

*** = Default selection**

Capitalize the Word After a New Line

☑	Selection	Results
☐	Checked*	First word after a line break is automatically capitalized.
☐	Not checked	First word after a line break is not automatically capitalized, unless another capitalization rule applies to it.

*** = Default selection**

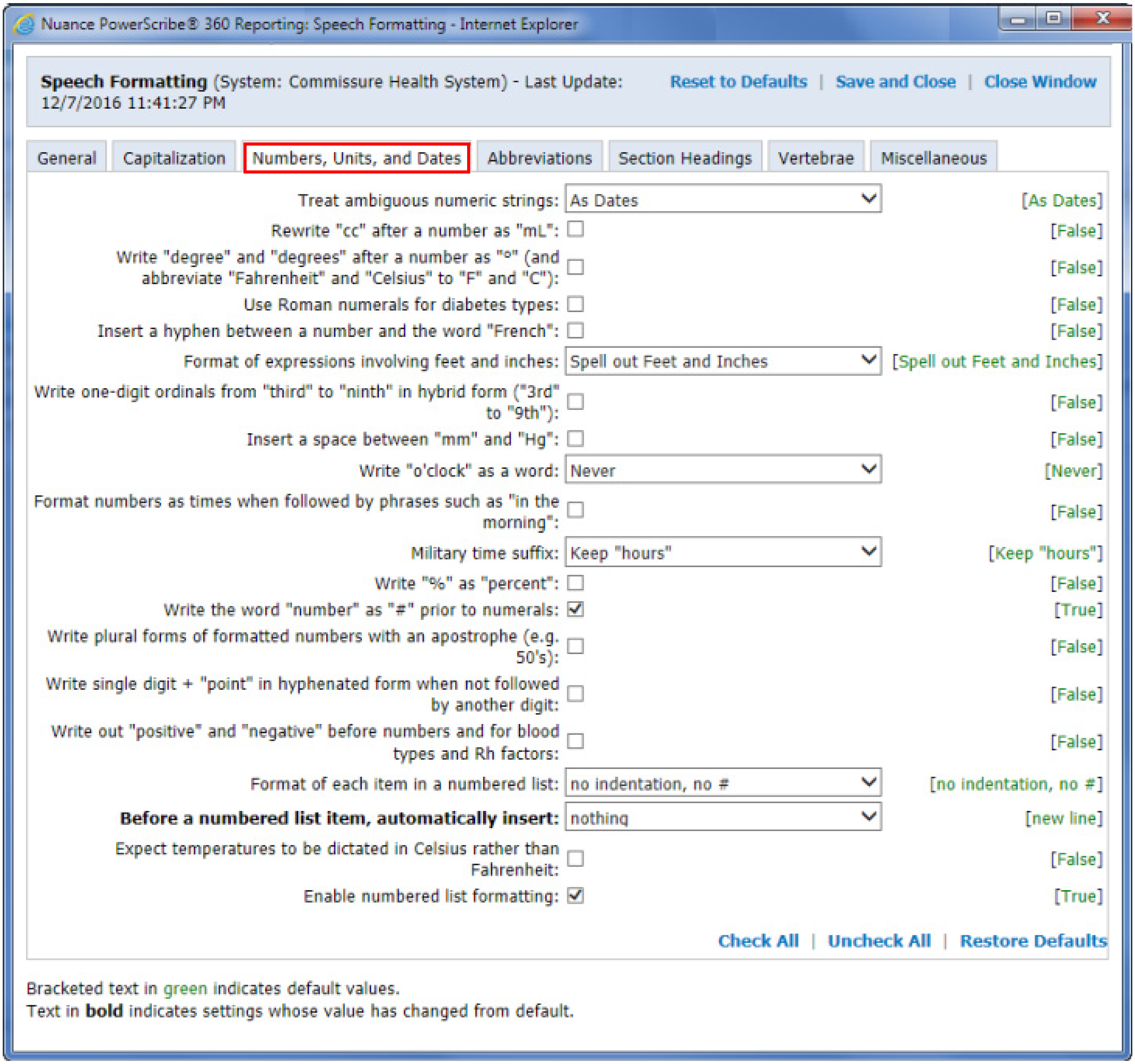
Capitalization/Expansion of Special Words and Phrases

☑	Selection	Results
☐	allergy, allergies	ALLERGY, ALLERGIES
☐	against medical advice*	AGAINST MEDICAL ADVICE
☐	AMA	AGAINST MEDICAL ADVICE
☐	code blue*	CODE BLUE
☐	code R*	CODE R
☐	code status*	CODE STATUS
☐	code S*	CODE S
☐	code T*	CODE T
☐	do not intubate do not resuscitate*	DO NOT INTUBATE DO NOT RESUSCITATE
☐	DNI DNR	DO NOT INTUBATE DO NOT RESUSCITATE
☐	durable power of attorney*	DURABLE POWER OF ATTORNEY
☐	fish	FISH
☐	left and right	LEFT, RIGHT
☐	living will	LIVING WILL
☐	NKDA	NO KNOWN DRUG ALLERGIES
☐	PO2 PCO2*	pO2 pCO2
☐	RBC/hpf WBC/hpf	RBC/HPF WBC/HPF
☐	trauma alert*	TRAUMA ALERT
☐	room; emergency room*	ROOM 25; EMERGENCY ROOM 1

*** = Default selection**

Numbers, Units, and Dates Tab

On this tab you can specify how the software is to treat various numbers and measurements.



Treat Ambiguous Numeric Strings

This option determines whether the software interprets dictated strings of numbers as dates, or as ID numbers.

- If you choose **As Dates**, select the **Format dates** option on the **General** tab, and then select a format from the **Date format** drop-down list. Do not select **Dates as Spoken** as the date format.
- If you choose **As IDs**, the software converts dictated numbers to a series of digits without spaces. For example, if the user dictates **"five six oh nine,"** the software transcribes the string as **5609**. If the user dictates **"eight eight six seven three five five,"** the software transcribes it as **8867355**. The user can then punctuate the series of numbers as desired.

☑	Selection	Results
☐	As IDs	020310
☐	As Dates*	02/03/2010 (depending on date format selected)

*** = Default selection**

Rewrite "cc" after a number as "mL"

Inserts mL after a number if the user dictates **"cc"** followed by a number.

☑	Selection	Results
☐	Checked	3 mL
☐	Not checked*	3 cc

*** = Default selection**

Write "degree" and "degrees" after a number as "°" and abbreviate "Fahrenheit" and "Celsius" to "F" and "C"

Inserts correctly formatted temperatures.

☑	Selection	Results
☐	Checked	98.6° F
☐	Not checked*	98.6 degrees Fahrenheit

*** = Default selection**

Use Roman numerals for diabetes types

Inserts Roman numerals instead of Arabic numerals for diabetes types.

☑	Selection	Results
☐	Checked	Type II diabetes
☐	Not checked*	Type 2 diabetes

*** = Default selection**

Insert a hyphen between a number and the word “French”

Inserts a hyphen when the user dictates, for example, **“Five French”** to describe a type of equipment.

☑	Selection	Results
☐	Checked	19-French sheath
☐	Not checked*	19 French sheath

*** = Default selection**

Format of expressions involving feet and inches

Use this option to determine how the software is to format expressions with feet and inches.

☑	Selection	Results
☐	Spell out **feet** and **inches***	6 feet 2 inches
☐	Symbols with one space	6’ 2”
☐	Symbols surrounded by spaces	6’ 2”
☐	Symbols without spaces	6’2”

*** = Default selection**

Write one-digit ordinals from “third” to “ninth” in hybrid form (“3rd” to “9th”)

This option determines how the software transcribes ordinal numbers.

☑	Selection	Results
☐	Checked	3rd
☐	Not checked*	third

*** = Default selection**

Insert a space between "mm" and "Hg"

The option determines whether the software inserts a space between the abbreviations for **"millimeter"** and **"mercury**."

☑	Selection	Results
☐	Checked	mm Hg
☐	Not checked*	mmHg

*** = Default selection**

Write "o'clock" as a word

Use this option to specify where the software is to spell out the word **"o'clock**."

☑	Selection	Results
☐	Always	At 4 o'clock, the 6 o'clock position
☐	Only before "position"	At 4:00, the 6 o'clock position
☐	Never*	At 4:00, the 6:00 position

*** = Default selection**

Format numbers as times when followed by phrases such as "in the morning"

Note: *This option is not fully implemented in this version.*

Inserts numbers as times when followed by phrases like **"in the morning"** or **"at night**."

☑	Selection	Results
☐	Checked	Numbers followed by these phrases are formatted as times of day: "Ten at night" becomes 10:00 PM.
☐	Not checked*	Numbers followed by these phrases are formatted as times only if they end in 00, 15, 30, or 45, or if they are followed by a.m. or p.m.

*** = Default selection**

Military time suffix

Controls whether the software inserts the word **“hours”** or the abbreviation **“hrs”** after military time.

☑	Selection	Results
☐	Remove “hours”	17:30
☐	Keep “hours”*	17:30 hours
☐	Abbreviate as “hrs.”	17:30 hrs

*** = Default selection**

Write “%” as “percent”

This option inserts the % symbol in place of the word **“percent**.**”**

☑	Selection	Results
☐	Checked	100 percent
☐	Not checked*	100%

*** = Default selection**

Write the word “number” as “#” prior to numerals

Inserts the “#” character in place of the word number prior to a numeral.

☑	Selection	Results
☐	Checked*	#7
☐	Not checked	number 7

*** = Default selection**

Write plural forms of formatted numbers with an apostrophe (e.g. 50’s)

For example, “A patient who was in her 50’s.”

☑	Selection	Results
☐	Checked	50’s
☐	Not checked*	50s

*** = Default selection**

Write single digit + “point” in hyphenated form when not followed by another digit

Note: *This option is not fully implemented in this version.*

Use this option to insert a digit, a hyphen, and the word **“point”** when a dictated digit is not followed by another digit.

☑	Selection	Results
☐	Checked	Restraint changed from 3-point to 4-point
☐	Not checked*	Restraint changed from 3. to 4.

*** = Default selection**

Write out “positive” and “negative” before numbers and for blood types and Rh factors

If you select this option, the software inserts the word **“positive”** or **“negative”** rather than the plus or minus symbol before numbers. For blood types and Rh factors, it spells out the word **“positive”** or **“negative**.”

☑	Selection	Results
☐	Checked	negative 3 blood type A positive Patient is Rh positive
☐	Not checked*	-3 blood type A+ Patient is Rh+

*** = Default selection**

Format of each item in a numbered list

Controls the number format of your numbered lists.

☑	Selection	Results
☐	No indentation, no #*	<Text>
☐	No indentation, number preceded by #	#1
☐	Indentation, no #	<Text>
	Indentation, number preceded by #	#1

*** = Default selection**

Before a numbered list item, automatically insert

Controls line/paragraph break before a numbered list.

☑	Selection	Results
☐	New line*	
☐	New paragraph	
☐	Nothing	

*** = Default selection**

Expect temperatures to be dictated in Celsius rather than Fahrenheit

When the user dictates a temperature, the software transcribes it with the **C** abbreviation.

☑	Selection	Results
☐	Checked	Temperature is 37° C.
☐	Not checked*	Temperature is 37° F.

*** = Default selection**

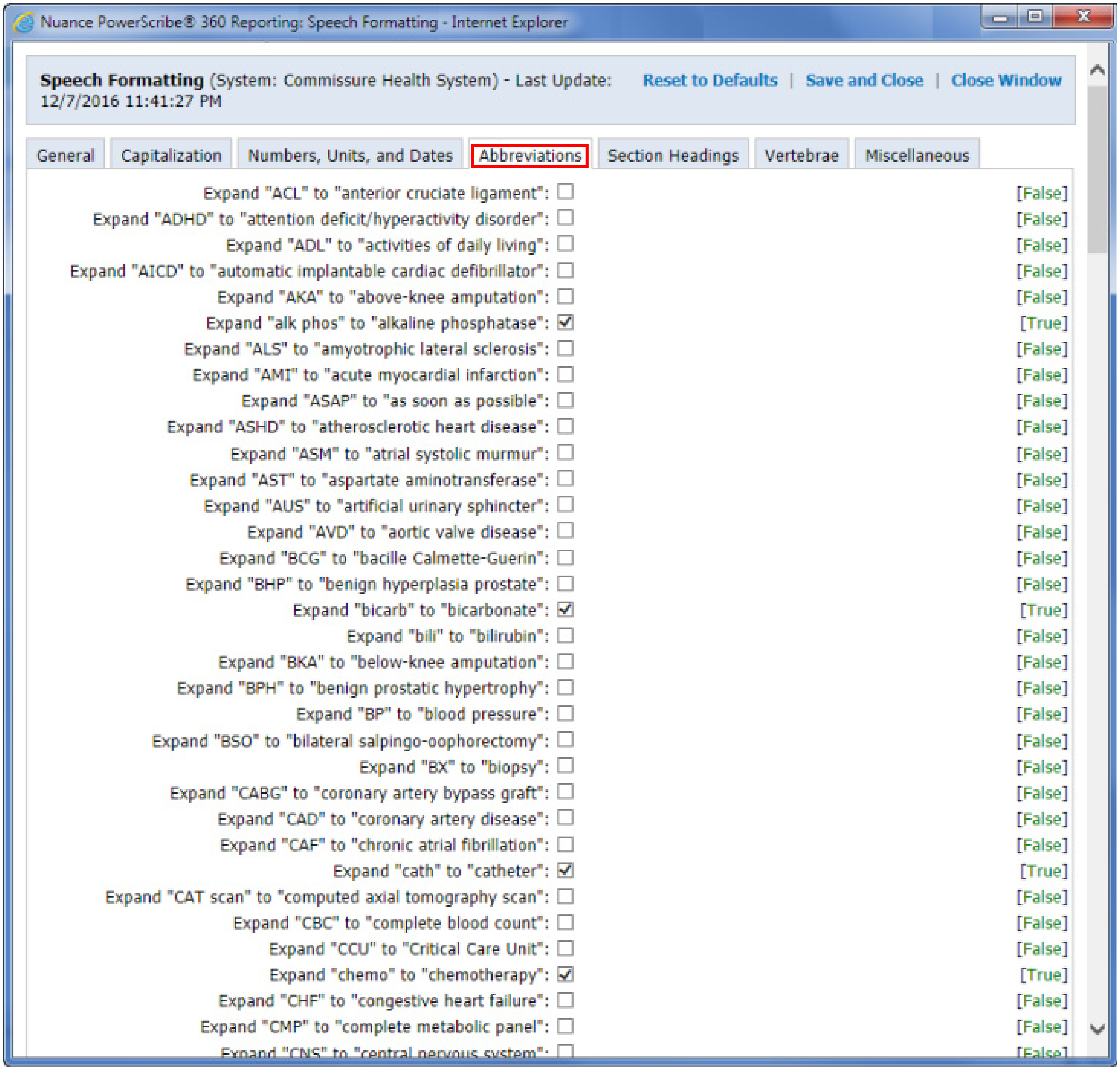
Enable numbered list formatting

Allows (or prevents) a user from formatting numbered lists.

☑	Selection	Results
☐	Checked*	Allow numbered list formatting.
☐	Not checked	Prevent numbered list formatting.

*** = Default selection**

Abbreviations Tab



Use this tab to indicate whether you want the following abbreviations to be expanded.

Selecting the option means the acronym or abbreviation is always expanded when it appears in draft text; otherwise it appears unexpanded (as an acronym or abbreviation.)

☑	Term	Result when item is selected
☐	ACL	anterior cruciate ligament
☐	ADHD	attention deficit/hyperactivity disorder
☐	ADL	activities of daily living
☐	AICD	automatic implantable cardiac defibrillator
☐	AKA	above-knee amputation
☐	alk phos*	alkaline phosphatase
☐	ALS	amyotrophic lateral sclerosis
☐	AMI	acute myocardial infarction
☐	ASAP	as soon as possible
☐	ASHD	atherosclerotic heart disease
☐	ASM	atrial systolic murmur
☐	AST	aspartate aminotransferase
☐	AUS	artificial urinary sphincter
☐	AVD	aortic valve disease
☐	BCG	bacille Calmette-Guerin
☐	BHP	benign hyperplasia prostate
☐	bicarb*	bicarbonate
☐	bili	bilirubin
☐	BKA	below-knee amputation
☐	BPH	benign prostatic hypertrophy
☐	BP	blood pressure
☐	BSO	bilateral salpingo-oophorectomy
☐	BX	biopsy
☐	CABG	coronary artery bypass graft
☐	CAD	coronary artery disease
☐	CAF	chronic atrial fibrillation
☐	cath*	catheter
☐	CAT scan	computed axial tomography scan
☐	CBC	complete blood count
☐	CCU	Critical Care Unit
☐	chemo*	chemotherapy
☐	CHF	congestive heart failure

*** = Default selection**

☑	Term	Result when item is selected
☐	CMP	complete metabolic panel
☐	CNS	central nervous system
☐	coag	coagulation
☐	COPD	chronic obstructive pulmonary disease
☐	CPK	creatine phosphokinase
☐	CPR	cardiopulmonary resuscitation
☐	crit	hematocrit
☐	CT scan	computed tomography scan
☐	CVA	costovertebral
☐	C. diff	Clostridium difficile
☐	C. diff.*	C. difficile
☐	D&C	dilatation and curettage
☐	DC'd	discontinued
☐	DESD	detrusor-external sphincter dyssynergia
☐	DJD	degenerative joint disease
☐	DM	diastolic murmur
☐	DSM	delayed systolic murmur
☐	DTR	deep tendon reflex
☐	DVT	deep vein thrombosis
☐	EBL	estimated blood loss
☐	EBV	Epstein-Barr virus
☐	ECG	electrocardiogram
☐	E. coli*	Escherichia coli
☐	EC	ejection click
☐	EF	ejection fraction
☐	EKG	electrocardiogram
☐	EOMI	extraocular movements are intact
☐	ERT	estrogen replacement therapy
☐	ER	Emergency Room
☐	ESM	ejection systolic murmur
☐	ESWL	extracorporeal shock wave lithotripsy
☐	ex lap*	exploratory laparoscopy
☐	fem-pop*	femoropopliteal

*** = Default selection**

☑	Term	Result when item is selected
☐	flex sig*	flexible sigmoidoscopy
☐	FT4	free T4
☐	gastroc	gastrocnemius
☐	GERD	gastroesophageal reflux disease
☐	GI	gastrointestinal
☐	GSW	gunshot wound
☐	GU	genitourinary
☐	H&H	hemoglobin and hematocrit
☐	HCTZ	hydrochlorothiazide
☐	HIV	human immunodeficiency virus
☐	HPI	history of present illness
☐	HPV	human papilloma virus
☐	HRT	hormone replacement therapy
☐	IBS	irritable bowel syndrome
☐	ICA	internal carotid artery
☐	ICD	implantable cardiac defibrillator
☐	ICU	Intensive Care Unit
☐	IDA	iron deficiency anemia
☐	IDDM	insulin dependent diabetes mellitus
☐	IHD	ischemic heart disease
☐	IHSS	idiopathic hypertrophic subaortic stenosis
☐	IMCU	Intermediate Care Unit
☐	ITP	idiopathic thrombocytopenia purpura
☐	IUD	intrauterine device
☐	IU*	international units
☐	IVP	intravenous pyelogram
☐	KUB	kidney, ureter, and bladder
☐	LAD	left anterior descending
☐	LAE	left atrial enlargement
☐	LAH	left anterior hemiblock
☐	lap chole*	laparoscopic cholecystectomy
☐	LBBB	left bundle branch block

*** = Default selection**

☑	Term	Result when item is selected
☐	LCL	lateral collateral ligament
☐	leuk trase	leukocyte esterase
☐	lites	electrolytes
☐	LLQ	left lower quadrant
☐	LSM	late systolic murmur
☐	LUQ	left upper quadrant
☐	LVEDP	left ventricular end-diastolic pressure
☐	LVH	left ventricular hypertrophy
☐	MCL	medial collateral ligament
☐	MDI	metered dose inhaler
☐	meds	medications
☐	MI	myocardial infarction
☐	MMR	measles/mumps/rubella
☐	MOM	Milk of Magnesia
☐	MRI	magnetic resonance imaging
☐	MVA	motor vehicle accident
☐	MVP	mitral valve prolapse
☐	MVR	mitral valve replacement
☐	neb	nebulizer
☐	NEC	nonejection click
☐	neph	nephrostomy
☐	NICU	Neonatal Intensive Care Unit
☐	NIDDM	non-insulin-dependent diabetes mellitus
☐	nitro*	nitroglycerin
☐	NSAID	nonsteroidal anti-inflammatory drug
☐	NSR	normal sinus rhythm
☐	NSVD	normal spontaneous vaginal delivery
☐	02	oxygen
☐	ObGyn*	OB/GYN
☐	OS	opening snap
☐	OTC	over-the-counter
☐	PCL	posterior cruciate ligament

*** = Default selection**

☑	Term	Result when item is selected
☐	PCN	percutaneous nephrolithotomy
☐	PEC	pulmonary ejection click
☐	PERRLA	pupils are equal, round, and reactive to light and accommodation
☐	PFT	pulmonary function test
☐	PID	pelvic inflammatory disease
☐	PIH	pregnancy-induced hypertension
☐	PMI	point of maximal impulse
☐	postop	postoperative
☐	PRI	PR interval
☐	pro time	prothrombin time
☐	PSA	prostate-specific antigen
☐	PSIS	posterior superior iliac spine
☐	PSM	pansystolic murmur
☐	PTCA	percutaneous transluminal coronary angioplasty
☐	pulse ox	pulse oximetry
☐	PVR	post-void residual
☐	q.h.s.*	daily at bedtime
☐	q.o.d.*	every other day
☐	RBBB	right bundle branch block
☐	rehab*	rehabilitation
☐	RLQ	right lower quadrant
☐	RPOC	retained products of conception
☐	RPR	RPR test
☐	RSR	regular sinus rhythm
☐	RSV	respiratory syncytial virus
☐	SBE	subacute bacterial endocarditis
☐	SDM	systolic-diastolic murmur
☐	sed rate*	sedimentation rate
☐	segs	segments
☐	SEM	systolic-ejection murmur
☐	SIDS	Sudden Infant Death Syndrome

*** = Default selection**

☑	Term	Result when item is selected
☐	SI	sacroiliac
☐	SLE	systemic lupus erythematosus
☐	SLR	straight leg raising
☐	SM	systolic murmur
☐	SOB	shortness of breath
☐	SSRI	selective serotonin reuptake inhibitor
☐	SS	summation sound
☐	STD	sexually transmitted disease
☐	subcu	subcutaneous
☐	SVD	spontaneous vaginal delivery
☐	SVG	saphenous vein graft
☐	SVT	supraventricular tachycardia
☐	TAH/BSO	total abdominal hysterectomy with bilateral salpingo-oophorectomy
☐	TAH	total abdominal hysterectomy
☐	TB	tuberculosis
☐	TEE	transesophageal echocardiogram
☐	temp	temperature (when it occurs before a number)
☐	TIA	transient ischemic attack
☐	tib-fib	tibia-fibula
☐	t.i.w.*	3 times a week
☐	T-max* T-current*	MAXIMUM TEMPERATURE CURRENT TEMPERATURE
☐	TMJ	temporomandibular joint
☐	TM	tympanic membrane
☐	TSH	thyroid-stimulating hormone
☐	TURB	transurethral resection of the bladder
☐	TURP	transurethral resection of the prostate
☐	UA	urinalysis
☐	UC	urine culture
☐	URI	upper respiratory infection
☐	UTI	urinary tract infection
☐	VBAC	vaginal birth after cesarean section
☐	VCUG	voiding cystorurethrogram

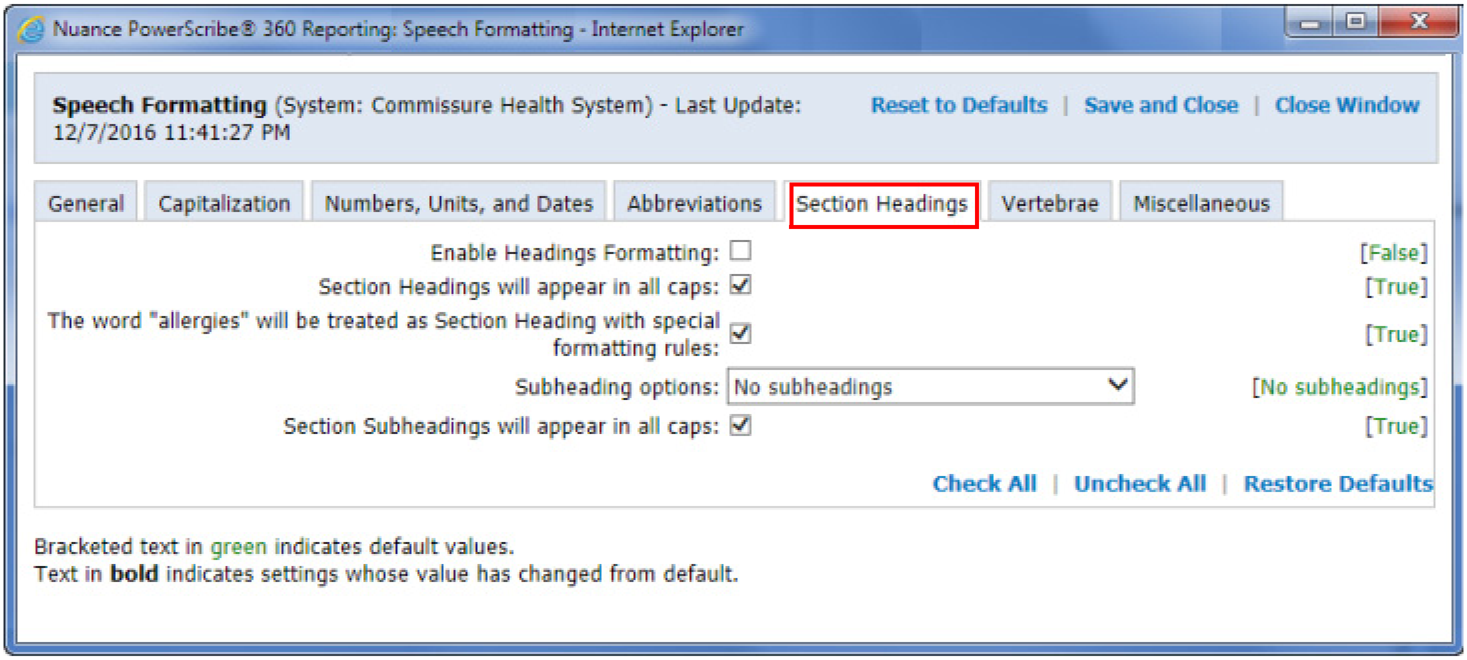
*** = Default selection**

☑	Term	Result when item is selected
☐	A fib and V fib	atrial fibrillation and ventricular fibrillation
☐	VL	vastus lateralis
☐	VMO	vastus medialis oblique
	V tach and sinus tach	ventricular tachycardia and sinus tachycardia
☐	WNL	within normal limits

*** = Default selection**

Section Headings Tab

Use this tab to determine how your section headings and subheadings appear.



Enable headings formatting

☑	Selection	Results
☐	Checked	Allows headings formatting
☐	Not checked*	Prevents headings formatting

*** = Default selection**

Section headings will appear in all caps

☑	Selection	Results
☐	Checked*	IMPRESSION
☐	Not checked	Impression

*** = Default selection**

The word “allergies” will be treated as Section Heading with special formatting rules

☑	Selection	Results
☐	Checked*	
☐	Not checked	

*** = Default selection**

Subheading options

☑	Selection	Results
☐	Default is **No subheadings**	Select either **No subheadings**; **Subheading phrases can be major headings, and vice versa**; or **Subheading phrases may only be used as subheadings**

*** = Default selection**

Section subheadings will appear in all caps

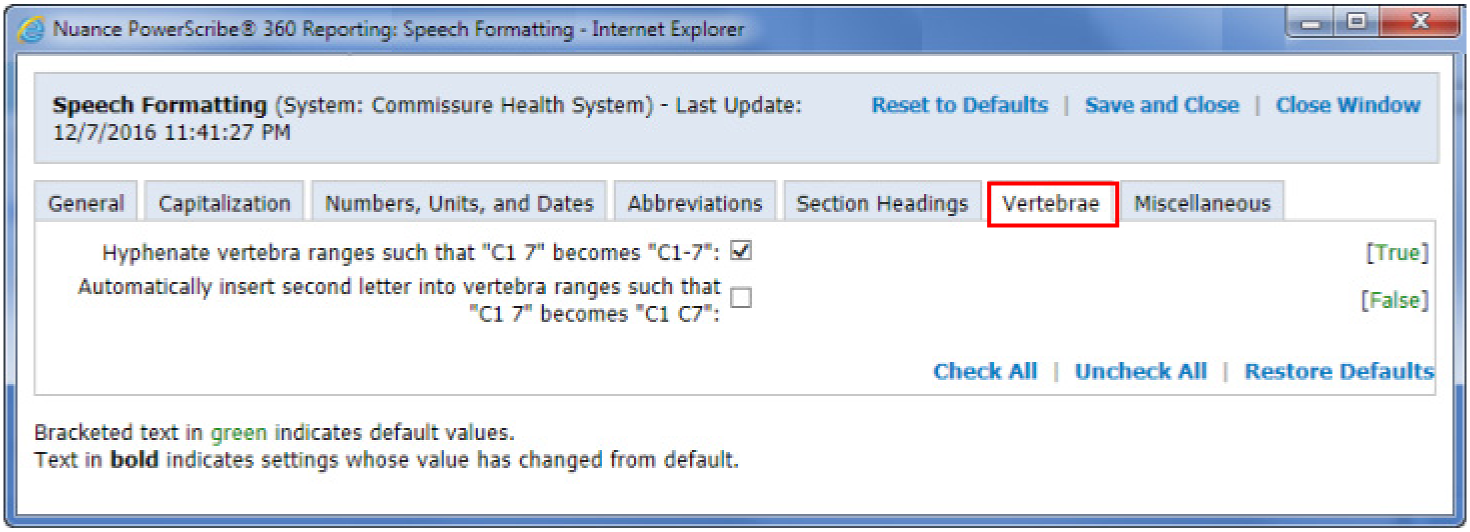
Saying **“paragraph”** inserts two new lines; that is, the result is the same as when saying **“new paragraph”** or **“next paragraph**.”

☑	Selection	Results
☐	Checked*	KIDNEYS
☐	Not checked	Kidneys

*** = Default selection**

Vertebrae Tab

Use this tab to determine how your vertebrae range dictations will appear.



Hyphenate vertebrae ranges such that “C1 7” becomes “C1-7”

☑	Selection	Results
☐	Checked*	C1-7
☐	Not checked	C1 7

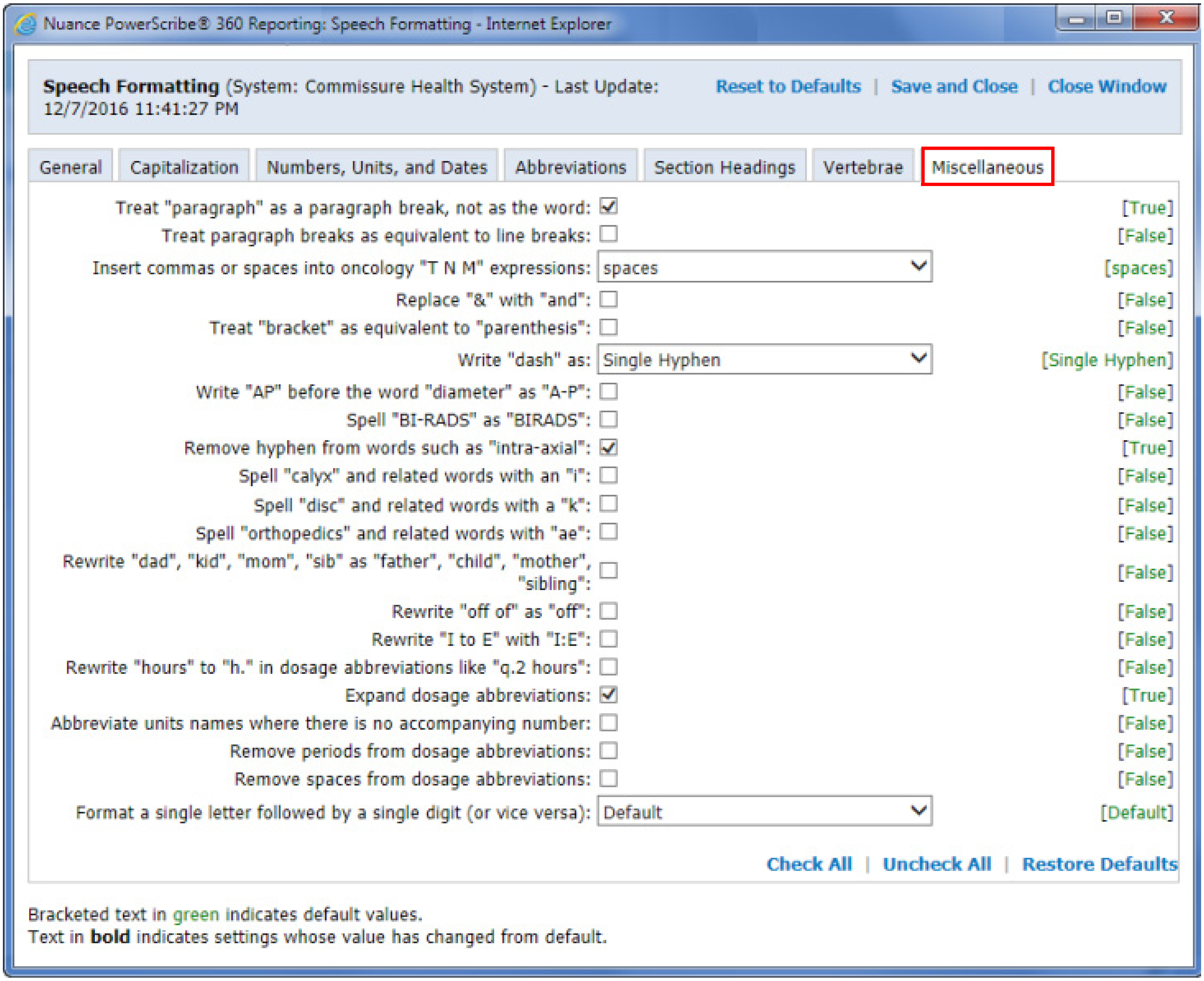
*** = Default selection**

Automatically insert second letter into vertebrae range such that “C1 7” becomes “C1 C7”

☑	Selection	Results
☐	Checked	C1 C7
☐	Not checked*	C1 7

*** = Default selection**

Miscellaneous Tab



Use this tab to set preferences for spelling, punctuation marks, word substitutions, and expansions.

Treat "paragraph" as a paragraph break, not as the word

Saying **"paragraph"** inserts two new lines; that is, the result is the same as when saying **"new paragraph"** or **"next paragraph**."

☑	Selection	Results
☐	Checked*	Patient complains of moderate chest pain for the past two days. No history of trauma. Pulse is 120. Blood pressure is normal.
☐	Not checked	Patient complains of moderate chest pain for the past two days. No history of trauma. Paragraph pulse is 120. Blood pressure is normal.

*** = Default selection**

Treat paragraph breaks as equivalent to line breaks

Saying **"New paragraph"** or **"Next paragraph"** inserts a single line break instead of a paragraph break, that is, the result is the same as when saying **"New line**."

☑	Selection	Results
☐	Checked	Patient complains of moderate chest pain for the past two days. No history of trauma. Pulse is 120. Blood pressure is normal.
☐	Not checked*	Patient complains of moderate chest pain for the past two days. No history of trauma. Pulse is 120. Blood pressure is normal.

*** = Default selection**

Insert commas or spaces into oncology "T N M" expressions

Note: *This option is not fully implemented in this version.*

Determines the delimiter used to separate T N M parameters.

☑	Selection	Results
☐	Default is **spaces**	Choose from **commas**; **spaces**; **no separator**

*** = Default selection**

Replace “&” with “and”

“**And**” is substituted when the user dictates “**ampersand**.”

☑	Selection	Results
☐	Checked	D and C
☐	Not checked*	D & C

*** = Default selection**

Treat “bracket” as equivalent to “parenthesis”

Inserts a parenthesis instead of a square bracket when the user dictates “**open bracket**,” “**close bracket**,” “**left bracket**,” or “**right bracket**.”

☑	Selection	Results
☐	Checked	(emergency room)
☐	Not checked*	[emergency room]

*** = Default selection**

Write “dash” as:

Determines what the software inserts when a user dictates the word “**dash**.”

☑	Selection	Results
☐	Double hyphen surrounded by spaces	The patient -- unless symptoms improve -- should return for another assessment.
☐	Single hyphen*	The patient-unless symptoms improve-should return for another assessment.
☐	Single hyphen surrounded by spaces	The patient - unless symptoms improve - should return for another assessment.
☐	Double hyphen	The patient--unless symptoms improve--should return for another assessment.

*** = Default selection**

Write “AP” before the word “diameter” as “A-P”

This option inserts **“A-P”** when the user dictates **“AP diameter**.**”**

☑	Selection	Results

☐	Checked	A-P diameter
☐	Not checked*	AP diameter

*** = Default selection**

Spell “BI-RADS” as “BIRADS”

With this option selected, the software inserts the acronym **BIRADS** when the user dictates **“BIRADS**.**”** Otherwise, it displays the acronym as **BI-RADS**.

☑	Selection	Results
☐	Checked	BIRADS
☐	Not checked*	BI-RADS

*** = Default selection**

Remove hyphen from words such as “intra-axial”

This option removes the hyphen from certain hyphenated words.

☑	Selection	Results
☐	Checked*	intraaxial
☐	Not checked	intra-axial

*** = Default selection**

Spell “calyx” and related words with an “i”

☑	Selection	Results
☐	Checked	calix coccix
☐	Not checked*	calyx coccyx

*** = Default selection**

Spell “disc” and related words with a “k”

☑	Selection	Results
☐	Checked	disk
☐	Not checked*	disc

*** = Default selection**

Spell “orthopedics” and related words with “ae”

	Selection	Results
	Checked	orthopaedics paediatric encyclopaedia
	Not checked*	orthopedics pediatric encyclopedia

*** = Default selection**

Rewrite “dad”, “kid”, “mom”, “sib” as “father”, “child”, “mother”, “sibling”

	Selection	Results
	Checked	father child mother sibling
	Not checked*	dad kid mom sib

*** = Default selection**

Rewrite “off of” as “off”

	Selection	Results
	Checked	The patient was lifted off the table.
	Not checked*	The patient was lifted off of the table.

*** = Default selection**

Rewrite “I to E” with “I:E”

	Selection	Results
	Checked	I:E
	Not checked*	I to E

*** = Default selection**

Rewrite “hours” to “h.” in dosage abbreviations like “q.2 hours”

☑	Selection	Results
☐	Checked	q.2 h.
☐	Not checked*	q.2 hours

*** = Default selection**

Expand dosage abbreviations

☑	Selection	Results
☐	Checked*	twice daily
☐	Not checked	b.i.d.

*** = Default selection**

Abbreviate units names where there is no accompanying number

☑	Selection	Results
☐	Checked	cc
☐	Not checked*	cubic centimeter

*** = Default selection**

Remove periods from dosage abbreviations

☑	Selection	Results
☐	Checked	tid
☐	Not checked*	t.i.d.

*** = Default selection**

Remove spaces from dosage abbreviations

☑	Selection	Results
☐	Checked	tid
☐	Not checked*	t i d

*** = Default selection**

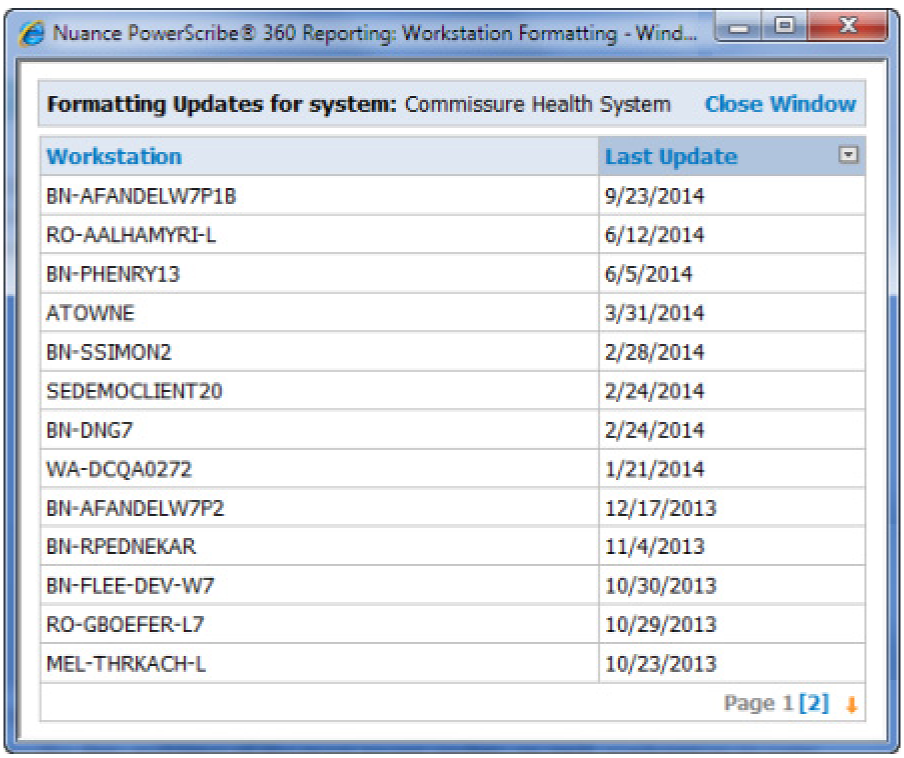
Format a single letter followed by a single digit (or vice versa)

☑	Selection	Results
☐	Default is **Default**	Select either **DigitLetter**, **Digit Letter**; **LetterDigit**; **Letter Digit**; or **Default**
☐	Not checked*	C1-2

*** = Default selection**

Viewing Workstation Updates

The changes you make to the formatting rules above are reflected on the users' workstations next time they log in. To confirm that an update has occurred, you can check the date and time of the most recent update to a workstation.



To view the workstation updates:

1. In the **Setup** group, select the **Speech** tab.
2. Click **View Workstation Updates**. The **Workstation Formatting** dialog box displays the date and time of the most recent update on each workstation in your system.

Chapter 16

Creating Worklists

Objectives

In this chapter you will:

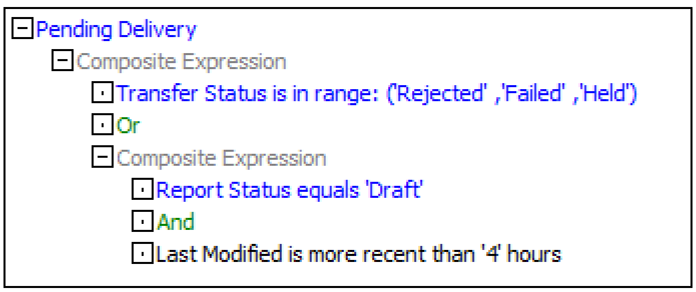
- Define worklists as they are used in *PowerScribe 360 Reporting*
- Review some sample worklists
- Create a worklist using a simple expression
- Create a worklist using a composite expression
- Create a provider worklist
- Use sections to control worklist access

Introduction to Worklists

Worklists are predefined searches that retrieve reports and orders. Administrators can create worklists for providers, for transcriptionists, and for themselves. A user can search for reports and orders by selecting one of these worklists from the **Worklist** drop-down list in the *PowerScribe 360 Reporting* client application; the worklist determines which reports appear in the **Explorer** window, and the order in which they appear. You can save time for transcriptionists, administrators, and providers by creating worklists for frequently-used searches.

Worklists are very powerful, allowing virtually any combination of search criteria, and can span multiple sites. For example, you can create a worklist that shows all unreported pediatric MRI Brain exams performed in the Emergency Room more than an hour ago. Worklists can be simple or complex, depending on your needs.

Here is an example of a worklist:



The worklist above retrieves reports that are pending delivery—that is, reports whose status is rejected, failed, or held—and draft reports created in the last four hours.

About the Worklists in this Chapter

This chapter describes several worklists and gives instructions for creating them. For your reference, the table below shows where to find each of the sample worklists in this chapter.

This worklist...	Retrieves...	Page
Simple expression example	Retrieve RIS upload failures	419
Composite expression example	Editor Queue	423
Provider worklist	Unreported CT exams less than 24 hours old	429

Understanding the Elements of a Worklist

Worklists are composed of expressions. An expression is a clause, or statement, that the software uses to filter reports and orders from the database. The software retrieves only reports that meet the conditions in the expression. Here is an example of an expression:

- Patient class equals Inpatient

The expression contains a field (Patient class), an operator (equals) and a value (Inpatient). In a worklist containing only this expression, the software retrieves all reports or orders for persons treated on an inpatient basis.

A worklist can consist of a single expression like the one above. The real strength of worklists, however, lies in using the logical operators AND and OR to build more complex queries.

Simple and Composite Expressions

A worklist can contain *simple expressions* and *composite expressions*.

A simple expression is the basic building block for creating a query. A simple expression usually contains a field name, an operator, and one or more values.

Here are some examples of simple expressions:

- Transfer status is in range Ready, Sent
- Order date is older than three hours
- MRN starts with 120
- Site is equal to Site 21
- Section is not in range 200, 400
- ‘Order is STAT’ is true

A *composite expression* contains more than one expression; the expressions are connected by logical operators AND or OR. A composite expression might be composed entirely of simple expressions, or it might have other composite expressions nested within it. This concept is similar to using parentheses in a math problem to indicate which operations to perform first.

Here are two composite expressions. Each example contains two simple expressions connected by a logical operator:

- Site equals Site 1
AND
Section is not in range 100, 300
- MRN equals 1234567
OR
Order date is older than seven days

Using OR and AND

You can use the OR and AND logical operators to build complex worklists tailored precisely to your needs.

OR: When you use OR to connect two expressions, the search retrieves reports that meet the conditions in *either expression*. For example: Your worklist is designed to find reports that have MRI as the modality OR brain as the anatomy. The OR operator means that the worklist finds *any* MRI—brain or otherwise (abdomen, pelvis, and so on)—and *any* brain exam—MRI or otherwise (CT, X-ray, and so on)—and returns *all* of those results.

AND: The AND logical operator is much more limiting than OR. When you use AND to connect two expressions, the search retrieves only reports that meet the conditions in *both expressions*. Example: Your worklist is designed to find reports that have MRI as the modality AND the brain as the anatomy. The worklist retrieves only reports for MRI scans of the brain, not other types of scans, and not MRI scans of other regions.

OR and AND in Composite Expressions

Here is an example of a composite expression that contains one embedded composite expression and one simple expression; the expressions are joined with OR.

Example 1

(Status equals Completed
AND
Order Date equals February 2, 2014)
OR
Last name contains *mar*

In Example 1, the software first identifies any reports whose status is 'Completed,' and whose order date is February 2, 2014. Then it identifies those for patients whose last name contains the string *mar*. It retrieves reports that fall into *either* of those groups.

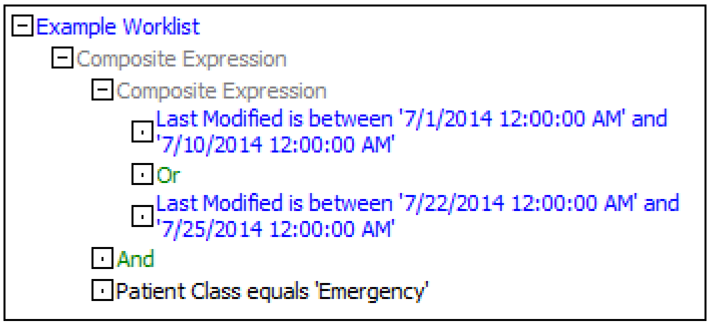
Here is another example of a composite expression; this one also contains one embedded composite expression and one simple expression. The expressions are joined with AND.

Example 2

(Last modified date is between July 1, 2014
and July 10, 2014
OR
Last modified date is between July 22, 2014
and July 25, 2014)
AND
Patient class equals Emergency

In Example 2, the software identifies reports last modified during either of the two date ranges in July. From within this group of reports, it retrieves only those for Emergency patients.

Note that in Examples 1 and 2, the embedded composite expressions are shown here enclosed in parentheses. As in a math problem, the parentheses indicate the order in which the software is to evaluate the expressions. When you build a worklist in the *PowerScribe 360 Reporting* Administrator Portal, however, you do not see parentheses; instead, a tree structure shows this hierarchy. Here is how the expression in Example 2 appears when you have built the worklist in the Administrator Portal:

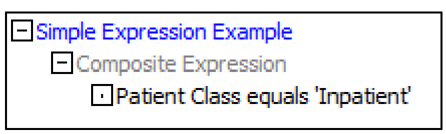


A worklist can contain as many levels of embedded expressions as you need. This feature allows you to build complex searches that retrieve only the orders and reports you want to see.

Understanding How Worklists Filter Reports from the Database

The purpose of a worklist is to retrieve only the reports you want to see, not all the reports in the database. Now that we've looked at the expressions that make up a worklist, let's take a closer look at how a worklist determines whether or not to retrieve a particular report.

For a report to be retrieved by a worklist, the worklist *as a whole* must be true with regard to that report. Here is an example of a worklist containing one simple expression:



When you run this worklist, the software compares this statement with the values in each of the reports in your system. If the Patient Class field in a given report is equal to 'Inpatient,' then the expression "Patient Class equals 'Inpatient'" is true, and therefore the report is accepted and will appear in your results list.

Now let's look at a more complex worklist.

- Example Worklist
  - Composite Expression
    - Composite Expression
      - Last Modified is between '7/1/2014 12:00:00 AM' and '7/10/2014 12:00:00 AM'
      - Or
      - Last Modified is between '7/22/2014 12:00:00 AM' and '7/25/2014 12:00:00 AM'
    - And
    - Patient Class equals 'Emergency'

Let's see how the software determines whether a report satisfies this worklist's conditions. Here is a report that might be found in your database:

```
Site:            Site 1
Exam Date:       7/23/2014
Procedures:      CHEST PA/LATERAL
MRN:             2345664
Patient Name:    Teresa Anderson
Patient Class:   Outpatient
Report Status:   DRAFT
Attending:       Katharine Brown
Last Modified:   7/24/2014

History: Pneumonia follow-up

Today's examination is compared to prior study on July 20. The heart
remains enlarged. There is some infiltrate noted in the left lower
lung zone, but this appears to be slightly improved from the prior
study.  There is no associated pneumothorax.

Impression: Improved left lower lobe aeration relative to prior study.
```

To find out whether the worklist will retrieve this report, let's see how it evaluates the expressions in the worklist and compares them with the values in the report.

The worklist contains two expressions. The first is a composite expression containing two simple expressions connected with OR.

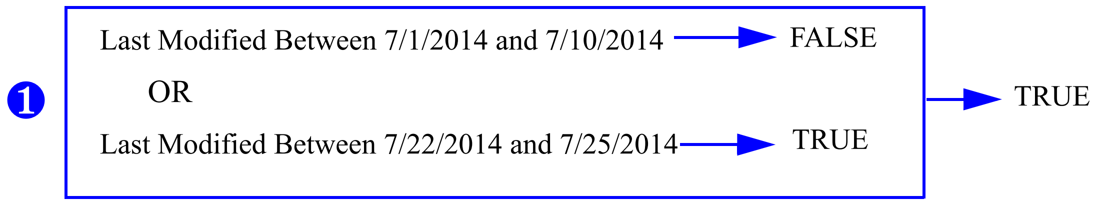
1

Last Modified Between 7/1/2014 and 7/10/2014

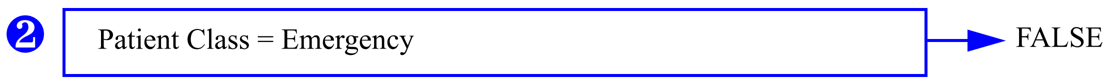
OR

Last Modified Between 7/22/2014 and 7/25/2014

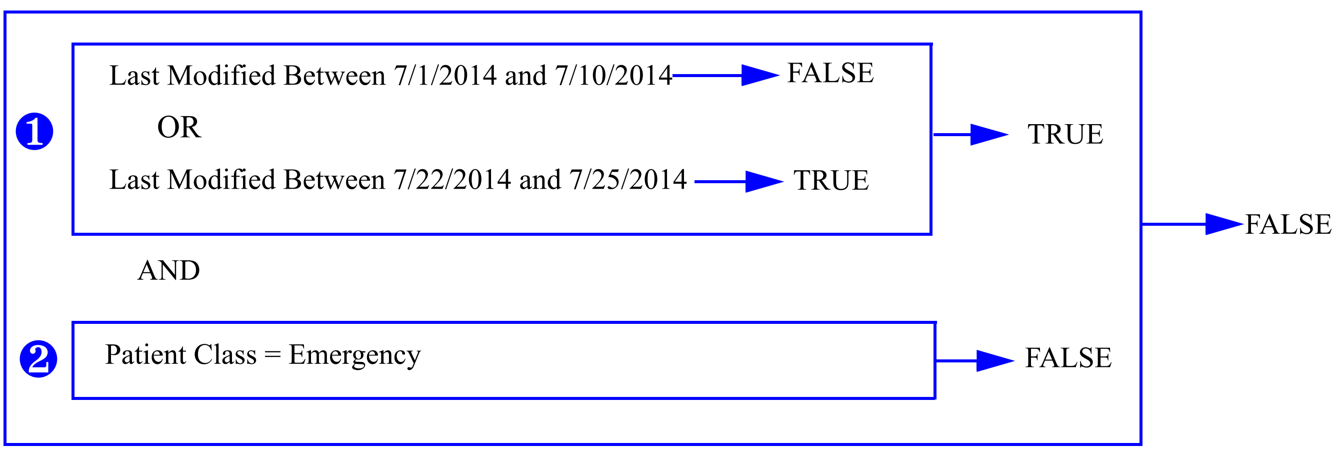
For this OR expression to be true, *either* or *both* of the expressions it contains must be true. Because our report's Last Modified date is 7/24/2014, and this date falls between 7/22/2014 and 7/25/2014, the second of the two expressions is true, therefore Expression 1 is true:



Because the Patient Class of this report is 'Outpatient,' Expression 2 is false:



Because Expression 1 and Expression 2 are connected with AND, they must *both* be true for this worklist's conditions to be met. Expression 1 is true and Expression 2 is false, therefore the worklist's conditions have not been met, and the report does not appear in the results list.



Building Worklists with Simple and Composite Expressions

Now that we've looked at some simple and composite expressions and seen how they are used to filter reports from the database, let's review the procedures for building worklists for two of the searches described in the previous section.

Creating a New Worklist

To create a new worklist, you must assign a name to it and specify some of its properties. The section below describes the features of the **Worklists** area on the **System** tab, where you create and maintain your worklists. The procedure for creating a new worklist begins on page 417.

Elements of the Worklist Area

The illustration below shows the **Worklists** area of the **System** tab. In this example, several worklists have already been created.

Worklists:

		Name	Description	Definition	Sections	Snapshot	Admin	Active
✕	✎	ADMIN: Demonstration Reset		Clone | Edit...	(0) Edit...	☐	☑	☑
✕	✎	ADMIN: Exams with Wet Reads		Clone | Edit...	(0) Edit...	☐	☑	☑
✕	✎	ADMIN: Pending Delivery		Clone | Edit...	(0) Edit...	☐	☑	☑
✕	✎	All Pending Correction		Clone | Edit...	(1) Edit...	☐	☐	☑
✕	✎	CT Scans	CT Scans	Clone | Edit...	(2) Edit...	☐	☐	☑
✕	✎	Custom Test	Custom Field	Clone | Edit...	(58) Edit...	☐	☐	☑
✕	✎	ED Pending Correction		Clone | Edit...	(1) Edit...	☐	☐	☑
✕	✎	Editor Queue		Clone | Edit...	(1) Edit...	☐	☐	☑
✕	✎	Example Worklist		Clone | Edit...	(0) Edit...	☐	☐	☑
✕	✎	Hot Worklist	Hot Worklist	Clone | Edit...	(1) Edit...	☐	☐	☑
✚								Page 1 [2] [3]

Icons

Delete: Delete the worklist from the system.

Create New: Begin creating a worklist.

Edit: Edit the **Name** and **Description** of an existing worklist.

Save or Cancel Update: When you click the **Edit** icon, it turns into this two-icon group. Click the **Save** (disk) icon to save your changes, or the curved arrow to cancel your changes. Again, these actions affect only the **Name** and **Description** of your worklist.

Other Elements

- **Name**: Enter a name for the worklist (required).
- **Description**: Add a description of the worklist (optional).
- **Definition**
  - **Clone**: Copy an existing worklist; you can then modify and rename the copy. This feature is useful when you create a worklist only slightly different from an existing one.
  - **Edit…**: Edit the worklist's definition. (This is where most of the work lies in creating a worklist; refer to *Editing a Worklist*, beginning on page 419.)
- **Sections**
  - **Edit**: Assign sections—groups of related procedure codes—to your worklist. Refer to *Adding Sections to a Site*, beginning on page 107 for more information on sections. You can use sections to control users' access to worklists (page 430).
- **Snapshot**: If your worklist is designed to return unreported orders, non-final reports, or both, select this option to make it run more quickly and efficiently.
- **Admin**: Select this option to hide this worklist from users who do not have administrative rights; only administrators see Admin worklists.
- **Active**: When editing or creating a worklist, select this check box to make the worklist active. If you clear this check box (making it inactive), the worklist is not visible to providers in the client application. When you want providers to be allowed to use the worklist, click **Edit** and select the **Active** check box to make it visible to providers.

Creating a Worklist

Creating a worklist is a two-part process: first you must name the query and save it; then you must edit the worklist to build a query that will retrieve the results you want.

Follow the instructions below to create a new worklist, give it a name, and assign some basic properties. Once you have assigned your worklist a name and saved it, you are ready to edit the worklist to build your query. This chapter provides instructions for building several kinds of worklists, beginning with a simple one consisting of a single expression, and then continuing with more complex worklists for transcriptionists, administrators, and providers.

About Using the Snapshot Option

The **Snapshot** option causes worklists to retrieve their data from a special database table that contains:

- Unreported orders of the last three months with a status of Completed, Scheduled, or Temporary
- Non-final reports or addenda
- Final reports or addenda of the last two days

Using this option causes worklists intended to retrieve orders or reports in these categories to run quickly and efficiently. For optimal performance, it is important that you always select this option for worklists to which it is applicable.

To create a new worklist:

1. From the **Administrator Portal**, select the **Setup** group and click the **System** tab.
2. In the **Worklists** section, click the **Create New** icon.
3. Enter a **Name** and a **Description** for the worklist.
4. Select **Snapshot** if the worklist is to return unreported orders or non-final reports. Using this option makes the worklist retrieve data more quickly and efficiently from the database.
5. Select **Admin** if this worklist is to be seen only by administrators.
6. Click the **Save** icon.
7. Refer to the sections below to build your worklist:
   - *Building a Worklist with One Simple Expression (RIS Upload Failure)*, beginning on page 419
   - *Building a Worklist with One Composite Expression (Editor Queue)*, beginning on page 423
   - *Creating a Provider Worklist (Unreported CT Exams Less Than 24 Hours Old)*, beginning on page 429

Editing a Worklist

Most of the work in creating a worklist lies in editing the tree structure that represents your worklist. After you have named the worklist, you are ready to begin editing it.

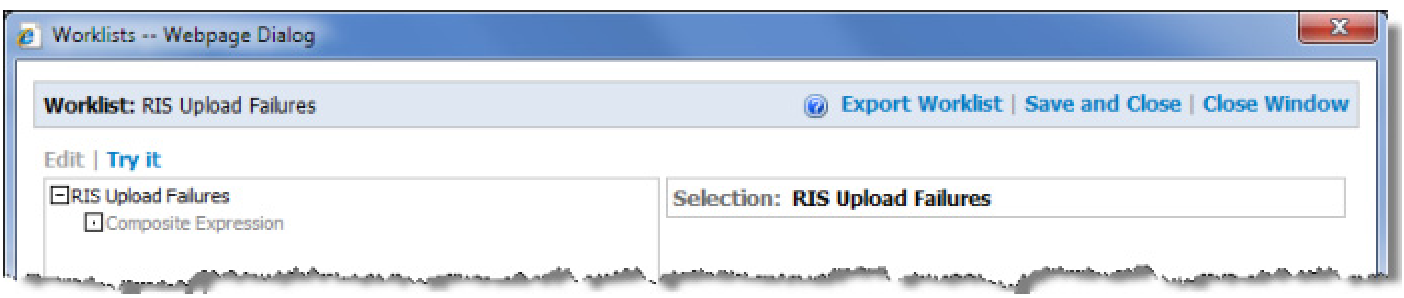
This section provides instructions for creating three worklists, one based on a simple expression, one based on a composite expression, and a provider worklist.

Building a Worklist with One Simple Expression (RIS Upload Failure)

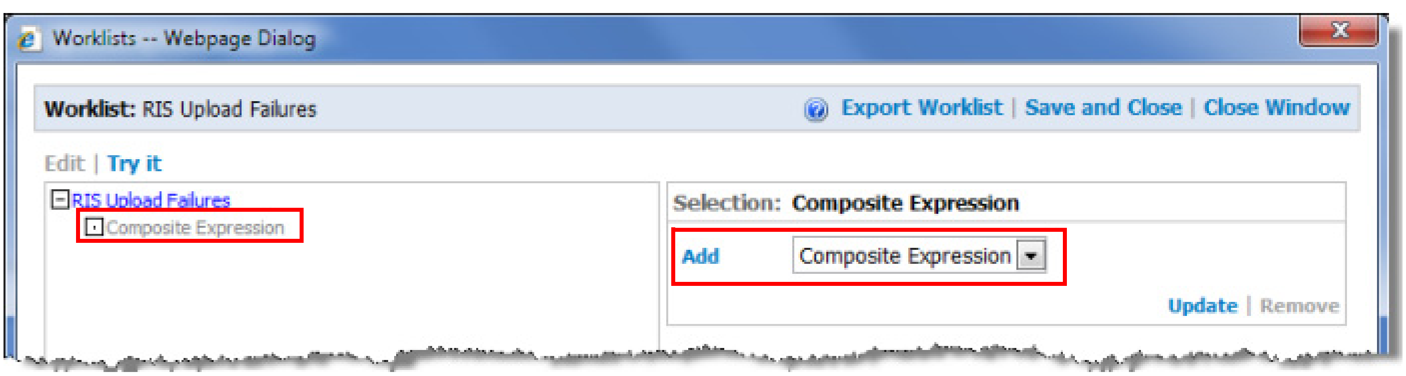
This procedure assumes that you have added (but not yet configured) a new worklist called **RIS Upload Failure** using the procedure shown on page 417.

To build a worklist with one simple expression:

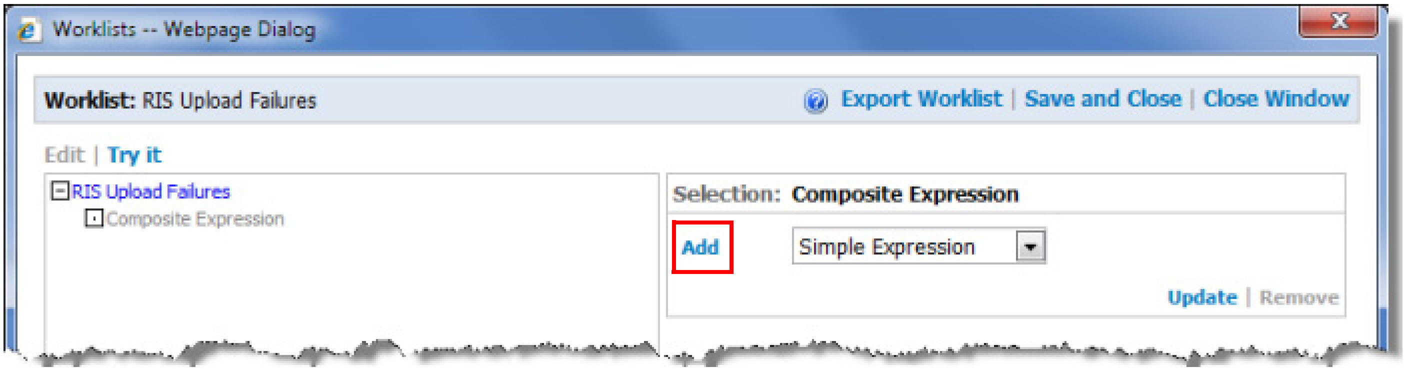
1. In the **Worklists** section, on the row where you added your worklist, click **Edit** under the **Definition** column. The **Worklists** dialog box opens, showing the name you selected and the tree structure in which you will design the query.



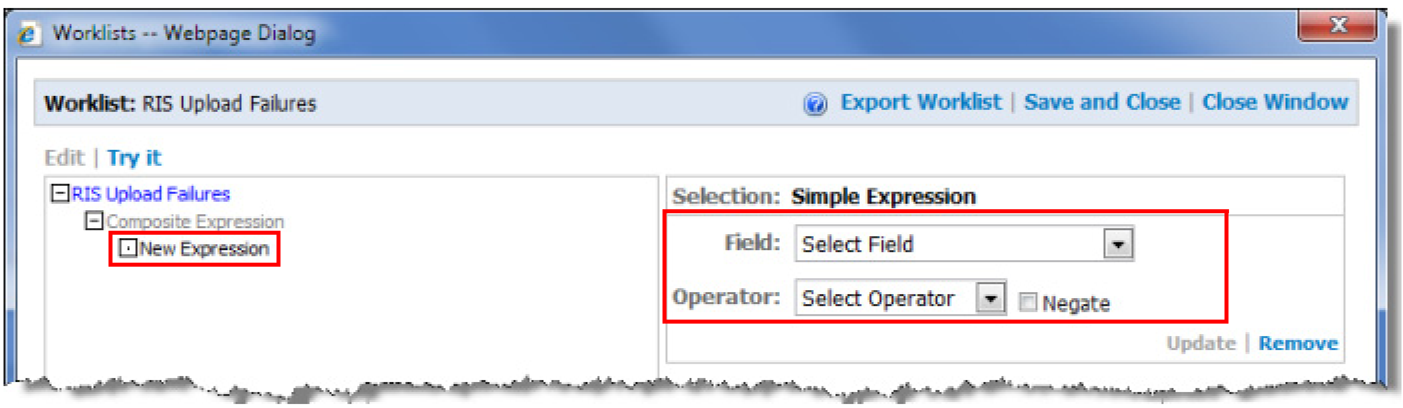
2. Click the **Composite Expression** link on the left side of the window. A drop-down list appears at the right.



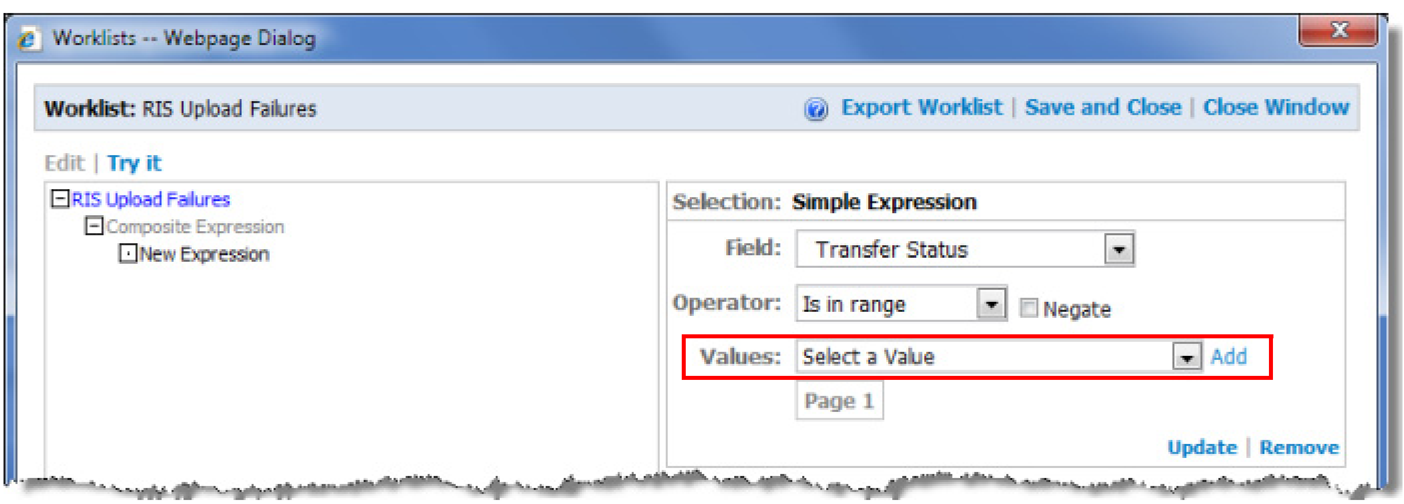
3. Select **Simple Expression** from the drop-down list and click **Add**.



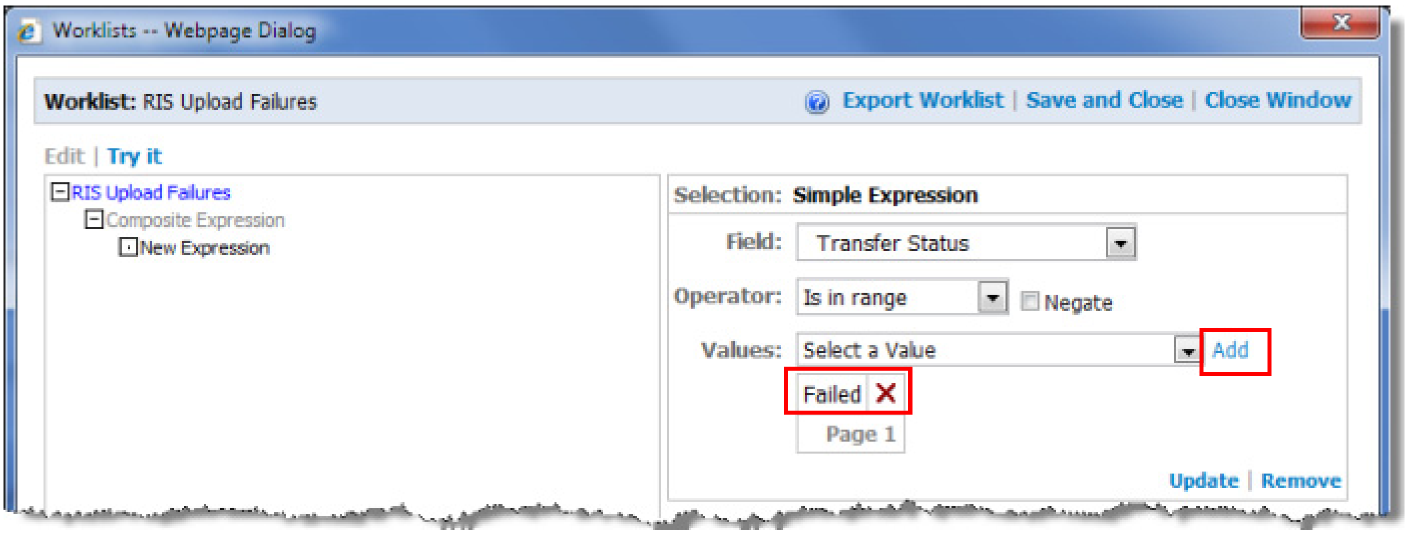
This places a new expression in the tree, and presents some options in the work area at the right.



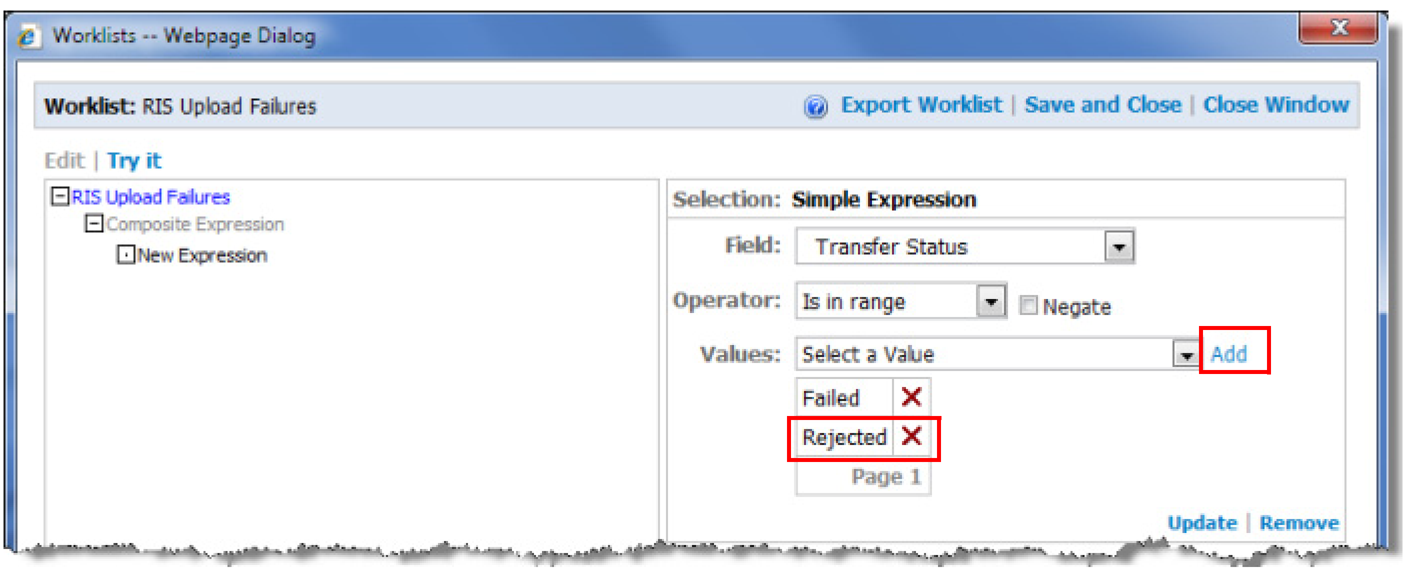
4. Select **Transfer Status** from the **Field** drop-down list and **Is in range** from the **Operator** drop-down list. The **Values** drop-down list appears.



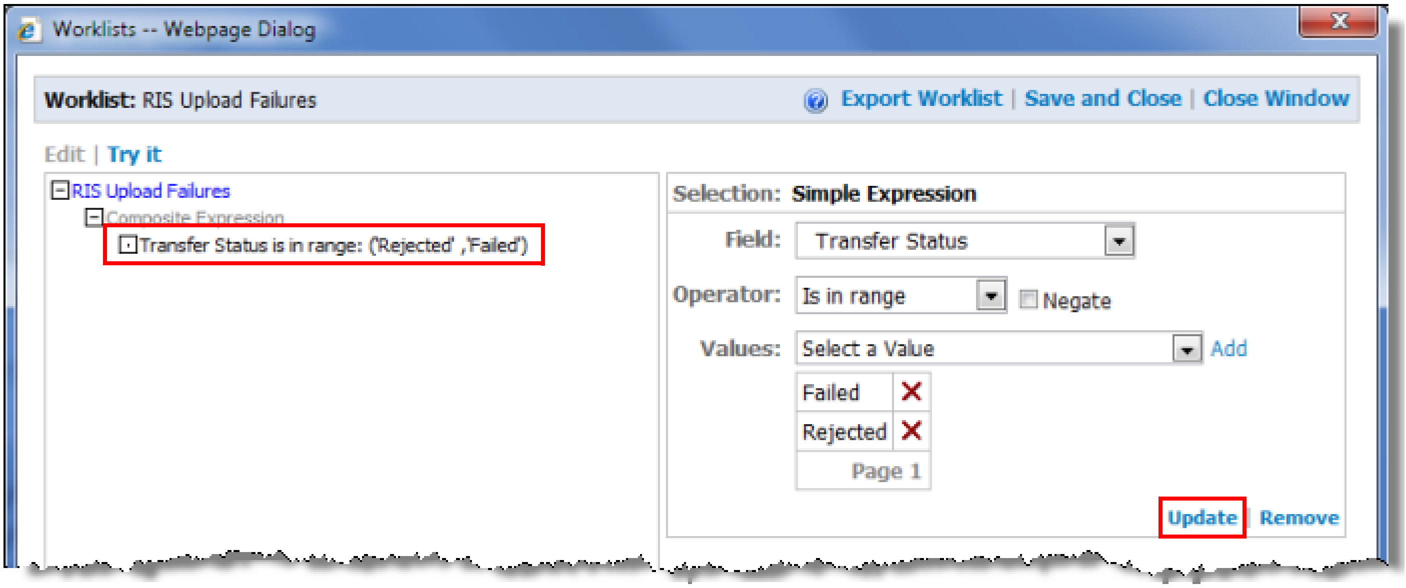
5. Select **Failed** from the **Values** drop-down list, and click **Add**.



6. From the **Values** drop-down list, select **Rejected**, and click **Add**.



7. Click **Update**. The expression you created now appears on the left side of the window.



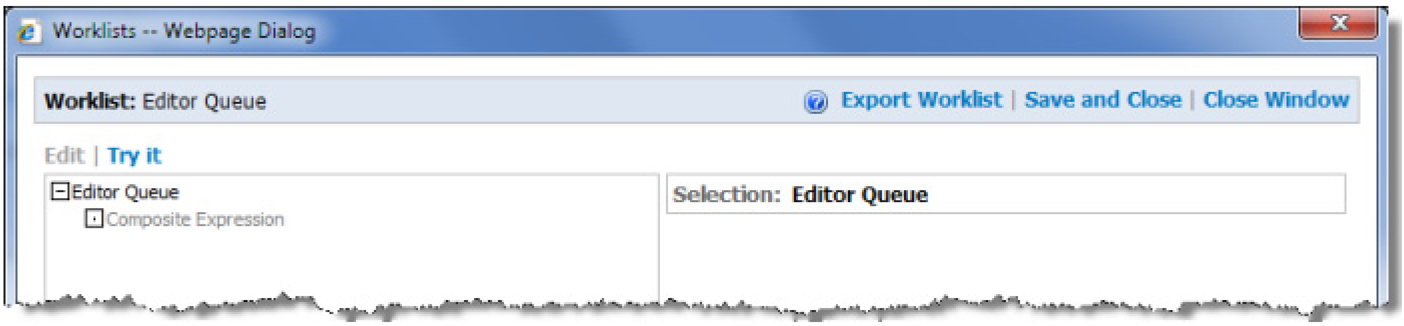
8. Click **Save and Close**.
9. Test the worklist, which is now available in the admin portal and the dictation client application.

Building a Worklist with One Composite Expression (Editor Queue)

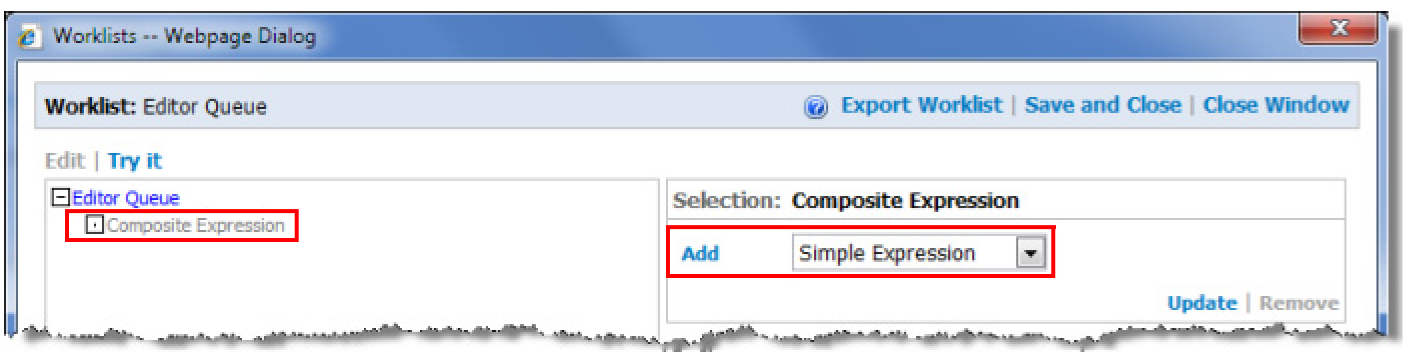
This procedure assumes that you have added (but not yet configured) a new worklist called **Editor Queue** using the procedure shown on page 417.

To build a worklist with one composite expression:

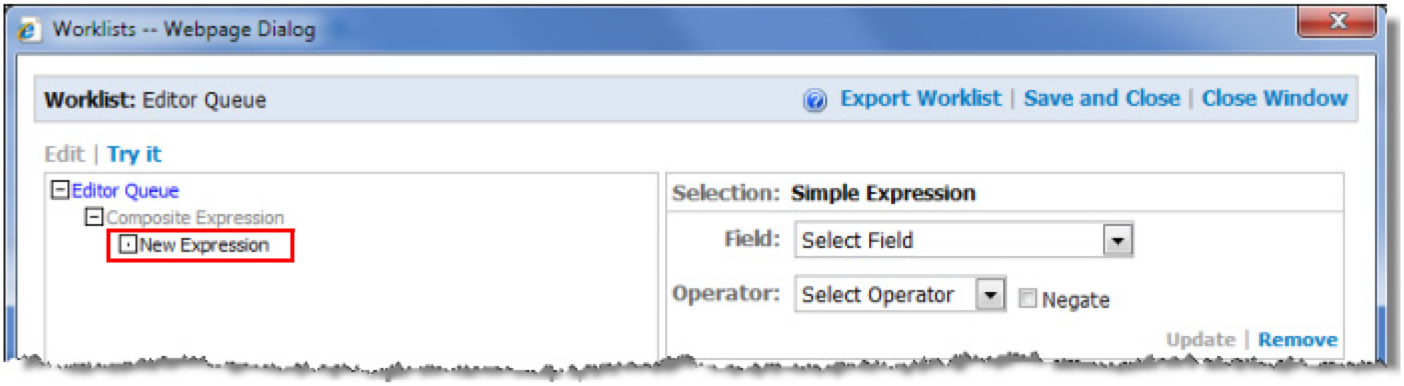
1. In the **Worklists** section, on the row where you added your worklist, click **Edit** under the **Definition** column. The **Worklists** dialog box opens, showing the name you selected and the tree structure in which you will design the query.



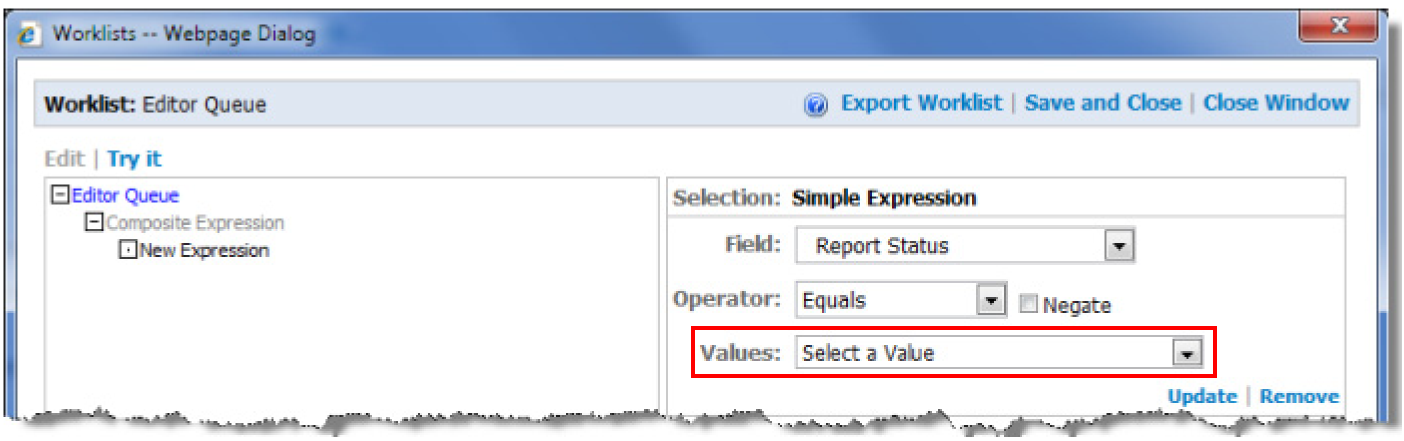
2. Click **Composite Expression**. The **Add** drop-down list appears at the right.
3. Select **Simple Expression** from the drop-down list, and click the **Add** link to the left of the drop-down list.



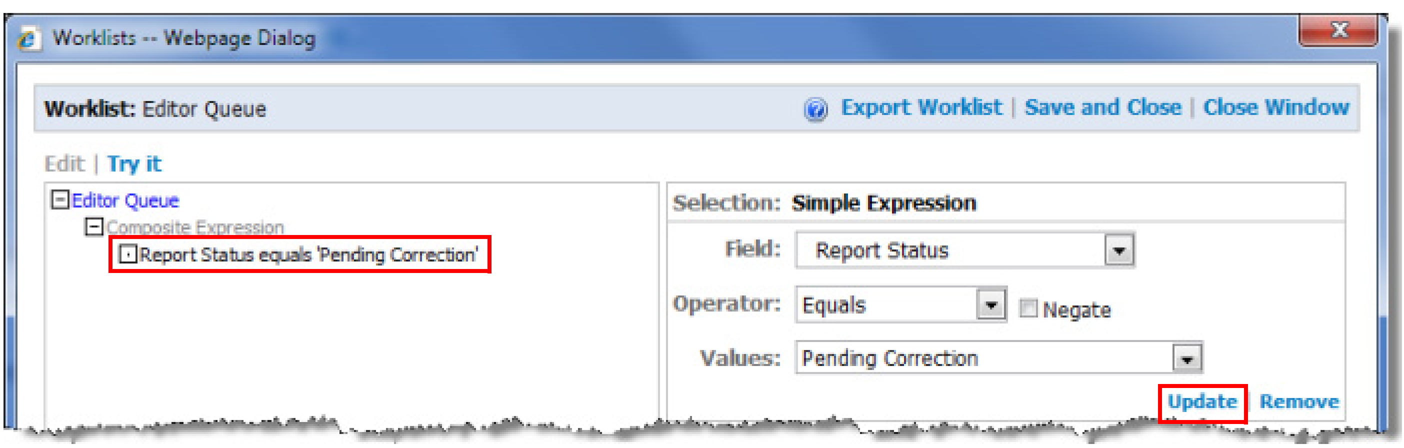
A **New Expression** label is added to the tree, and your definition options appear at the right.



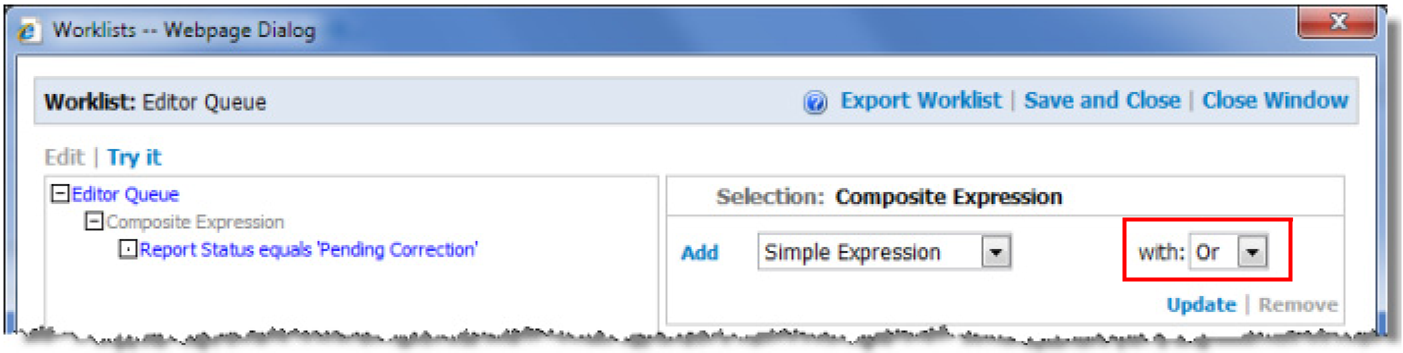
4. Select **Report Status** from the **Field** drop-down list, and **Equals** from the **Operator** drop-down list. The **Values** drop-down list appears.



5. Select **Pending Correction** from the **Values** drop-down list, and click **Update**. The complete expression appears in the tree, in place of the label.

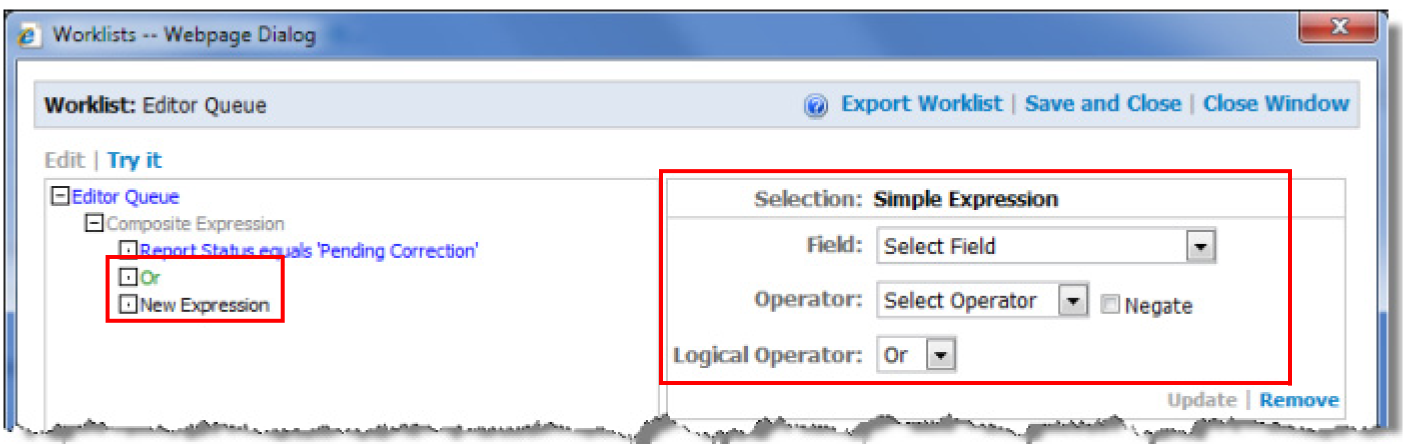


6. Click the **Composite Expression** link again, to begin adding a second simple expression. A drop-down list for the logical operator appears at the right, next to the word **with**.
7. Select **Simple Expression** from the **Add** drop-down list, and select **Or** from the logical operator drop-down list.



8. Click **Add**.

   A **New Expression** label appears in the tree, connected with the item above it with **Or**, and your definition options appear at the right.

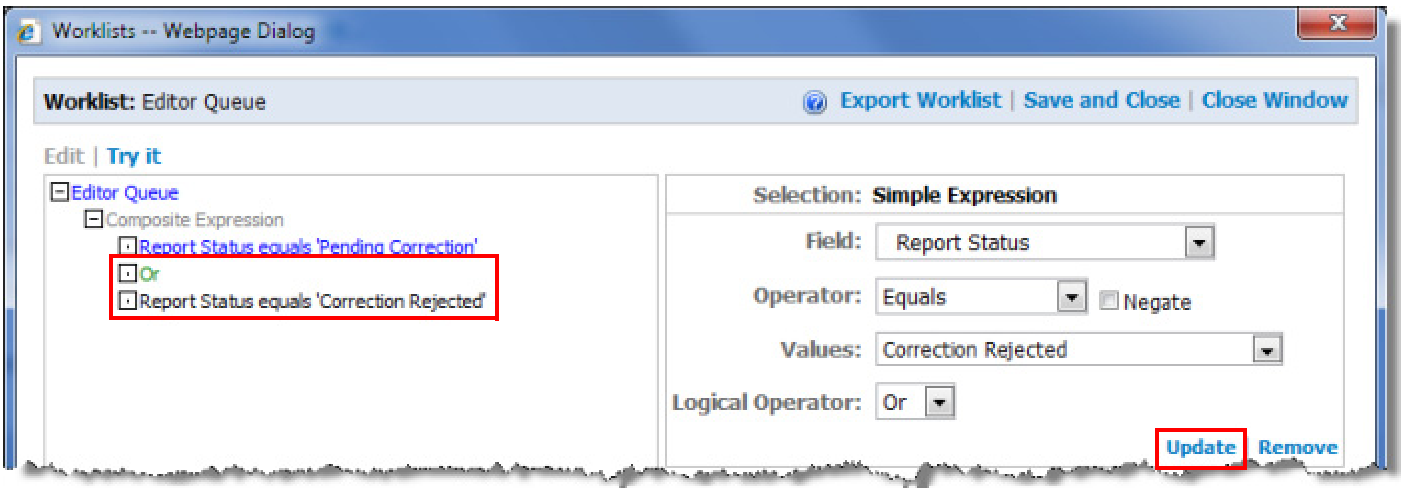


9. Select **Report Status** as the **Field**, and select **Equals** as the **Operator**.

   Note: *Leave the Logical Operator set to* ***Or****.*

10. Select **Correction Rejected** from the **Values** drop-down list.
11. Click **Update**. The expression appears in the tree in place of the **New Expression** label, and the worklist is complete.

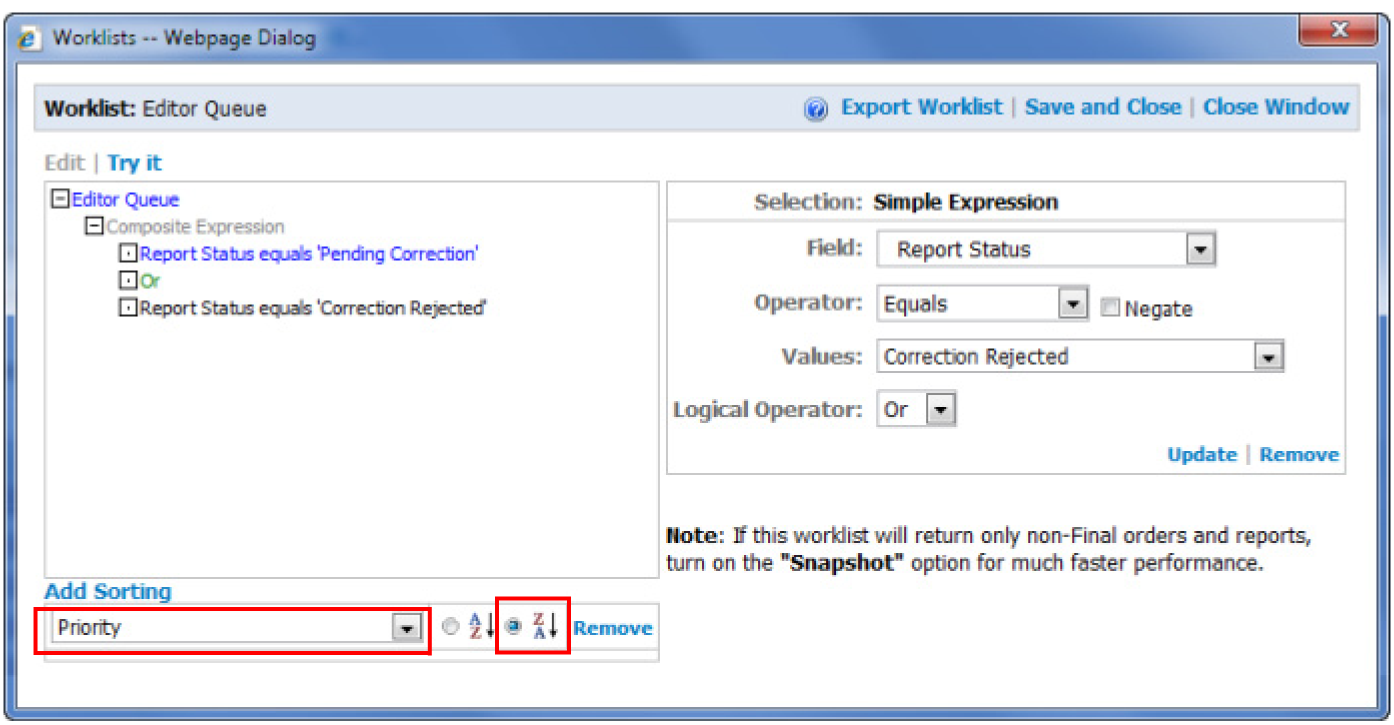
*Note: Use the **Negate** check box to "Show me everything EXCEPT . . ." what you have selected for your value. If you select **Equals** from the Operator drop-down list, and select the **Negate** check box, the expression looks for things that are **Not Equal** to your value. For example, f you selected **Negate** in the example below, your results would include all reports **except** those with a status of **Correction Rejected**.*



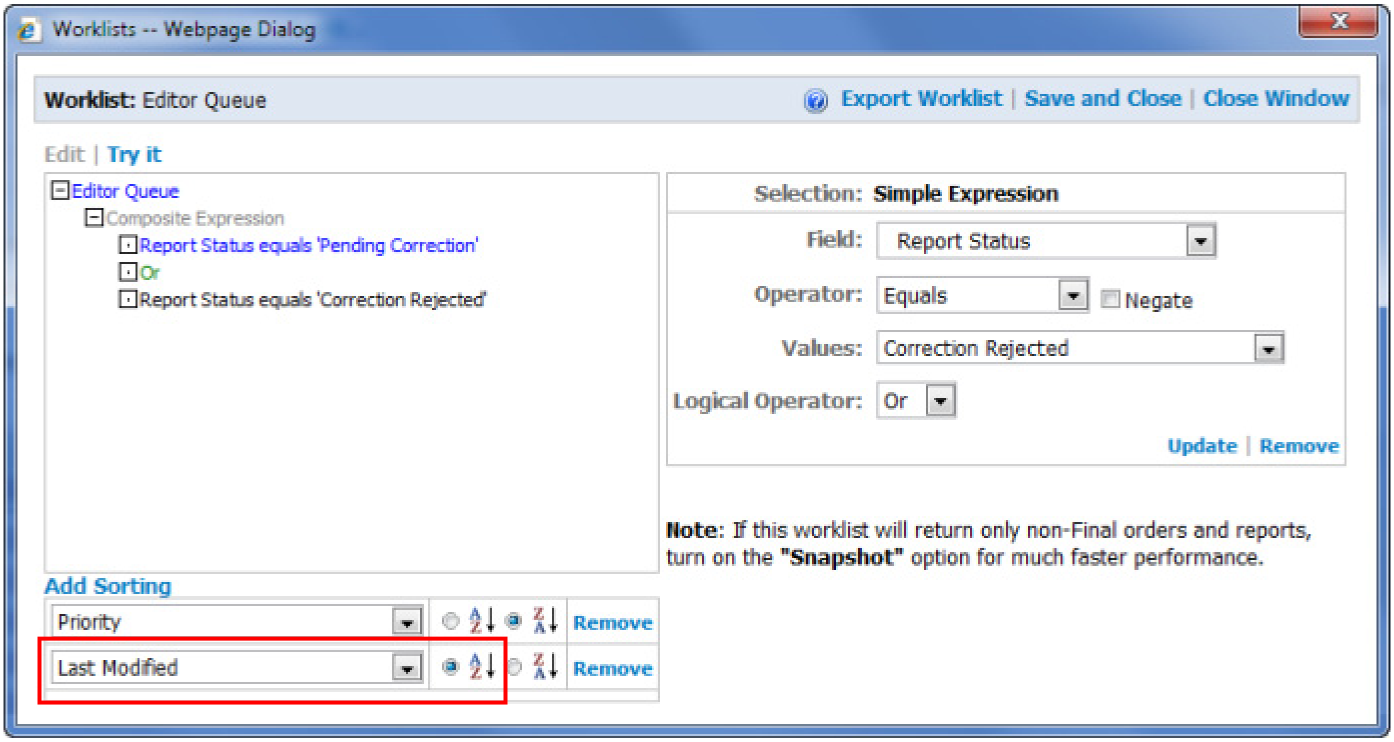
Sorting Your Results

Use the following steps to have your search results sorted by **Priority** and **Last Modified** (first in/first out).

1. Click the **Add Sorting** link.
2. Select **Priority** from the from the drop-down list, and select the **Descending** button.



3. Click **Add Sorting** again.
4. Select **Last Modified** from the drop-down list, leaving the sort order set to its default value (**Ascending**).



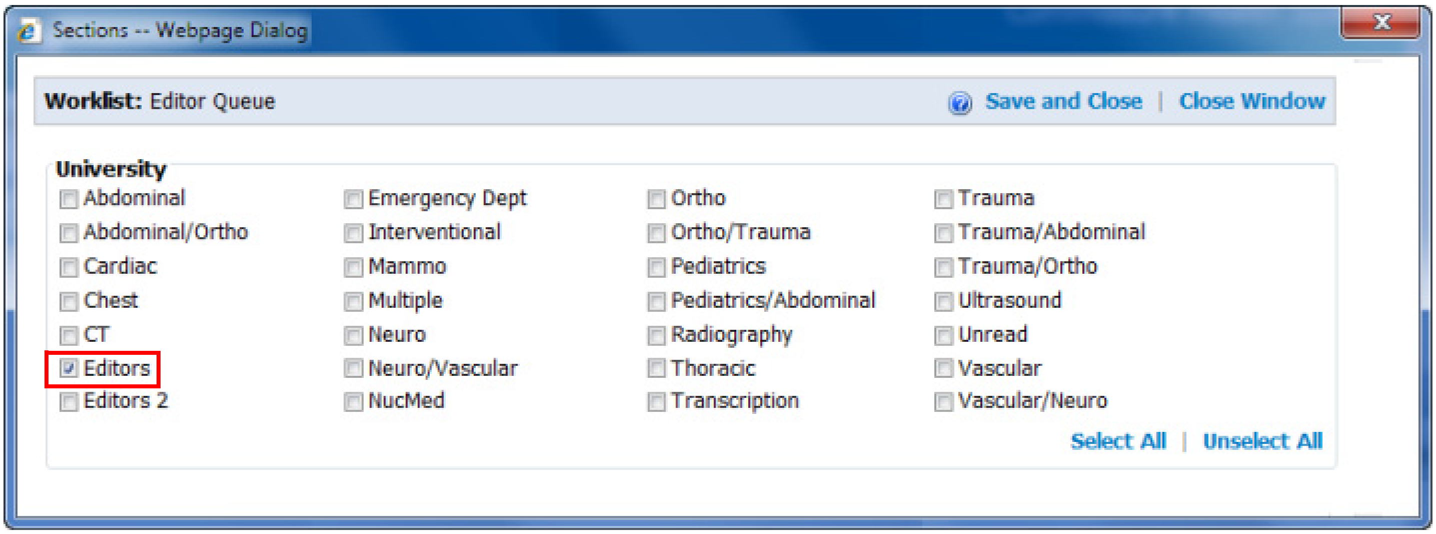
5. Click **Save and Close**.

Assign Worklist to the Editors Section

Now assign this worklist to the Editors section.

> ***Note:*** *If you do not have an Editor section, Create an Editors Section, beginning on page 428.*

1. In the **Editor Queue** worklist item, click **Edit** under the **Section** column.
2. From the **Sections** list that appears, select the **Editors** check box.



3. Click **Save and Close**.

Create an Editors Section

1. Click **Sites**.
2. Click the **Add** icon under **Sections**.
3. Enter the section name and click the **Save** icon.
4. Click **System** and assign the worklist to the section as shown in the previous topic, *Assign Worklist to the Editors Section*.

Assign Editors to the Editors Section

Once you've assigned the worklist to the section, you must assign the editors to the section to make the worklist available to the editors.

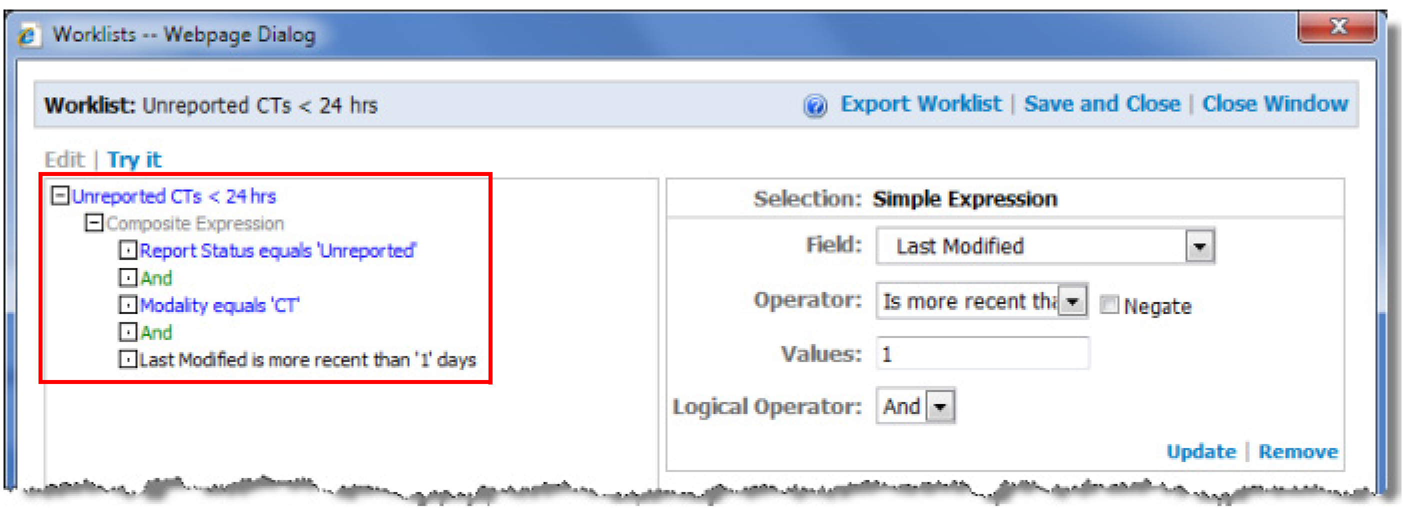
1. Click **Accounts**.
2. From the Authorization drop-down list, select **Editor** and click **Search**. A list of the editors in your system appears.
3. For each editor perform the following steps:
   a. Click the editor's name.
   b. Click the **Edit** link next to the **Sections** label.
   c. Select the **Editors** check box.
   d. Click **Save and Close**.

Creating a Provider Worklist (Unreported CT Exams Less Than 24 Hours Old)

The following worklist is an example of a worklist you might be asked to create.

1. Click **System**.
2. Click the **Add** icon in the **Worklists** section.
3. Enter the name **Unreported CTs < 24 hrs** for this example.
4. Click the **Save** icon.
5. Click the **Edit** link under the **Definition** column.
6. Add the three following simple expressions (remember to click the **Composite Expression** link, then select **Simple Expression** and click **Add** for each entry):
   - Field: **Report Status**; Operator: **Equals**; Values: **Unreported**; click **Update**
   - Field: **Modality**; Operator: **Equals**; Values: **CT**; Logical Operator: **And**; click **Update**
   - Field: **Last Modified**; Operator: **Is more recent than (days)**; Values: **1**; Logical Operator: **And**; click **Update**

   Your final result should look like the illustration below.



7. Click **Save and Close**.

Using Sections to Control Worklist Access

You can use sections to determine which worklists users see in the **Worklists** drop-down box in the *PowerScribe 360 Reporting* client application.

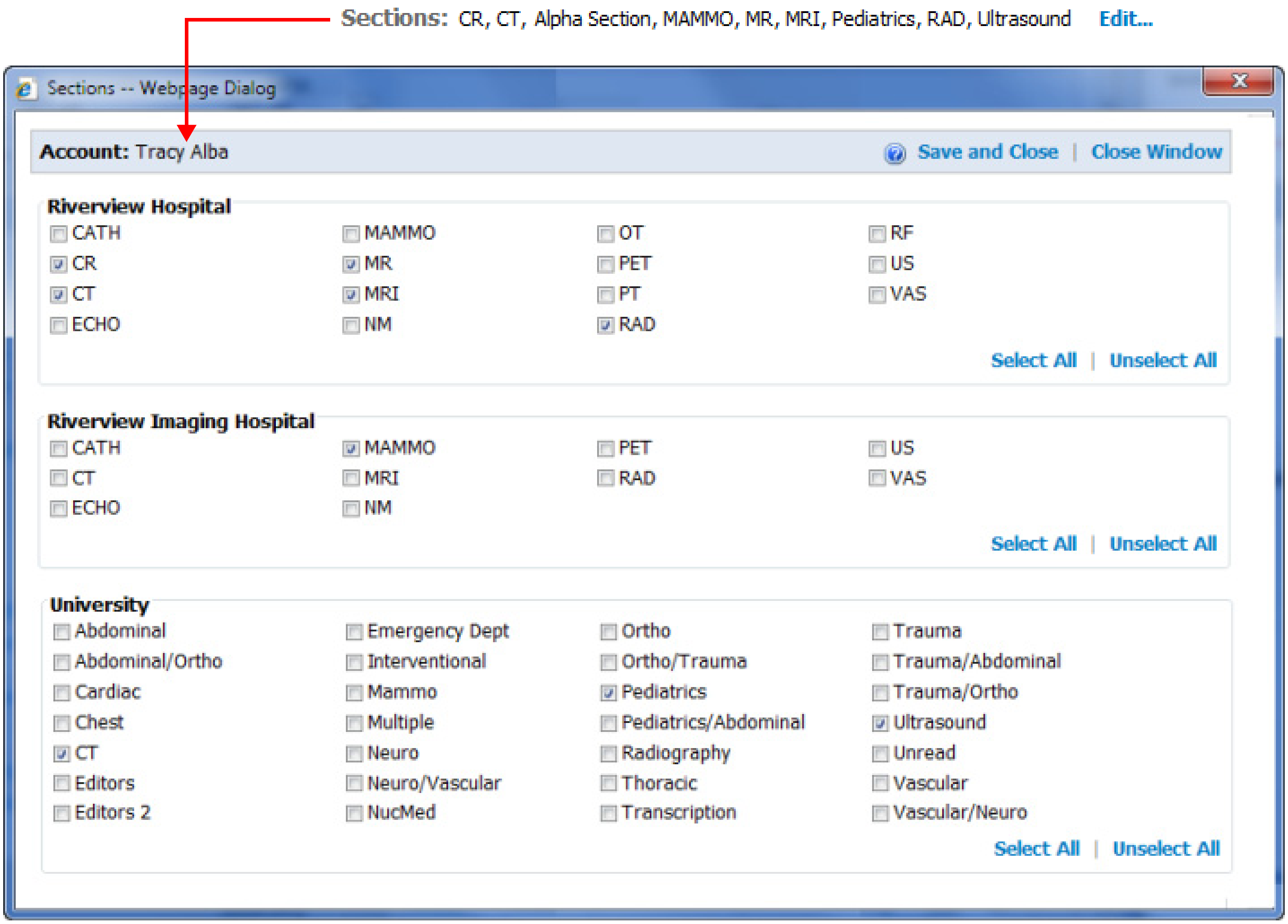
Note: *A radiologist sees all the worklists in the system by default, and can run any worklist. A worklist, however, will not return reports/orders for a site in which the radiologist does not have an active role. That is, for a user to whom you have assigned a role only in Site A, a worklist designed to retrieve orders only from Site B retrieves no results, and a worklist designed to retrieve orders from Site A and Site B retrieves only reports/orders from Site A.*

Subscribing Radiologists to Sections

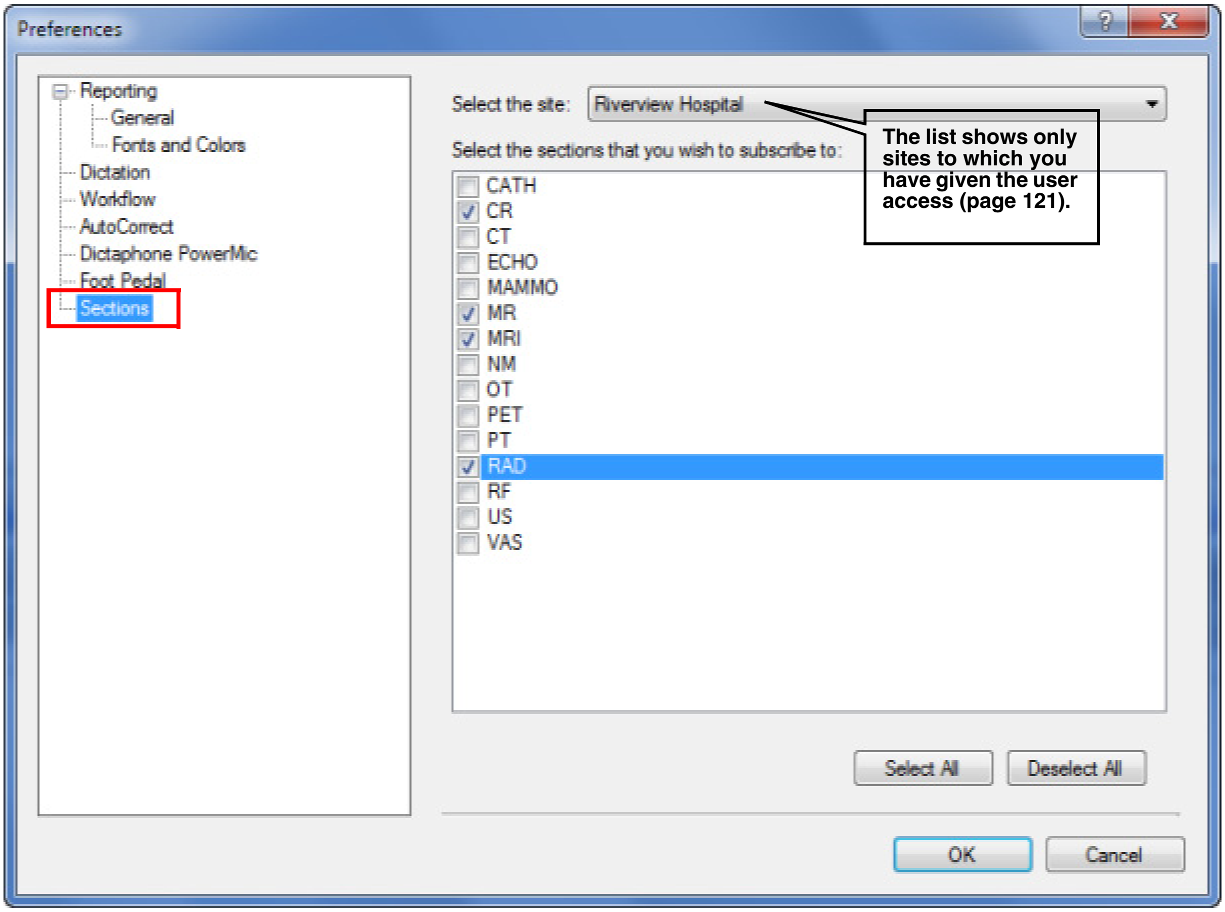
Radiologists in the *PowerScribe 360 Reporting* client can execute all the worklists in the system. They can choose to view all worklists, or only those belonging to sections to which you have subscribed them or to which they have subscribed themselves.

For example, you might assign the Nuclear Medicine section to a worklist and also assign that section to Dr. Katharine Brown's user account. When Dr. Brown selects **View > Worklists > Subscribed Only**, she sees only worklists belonging to the Nuclear Medicine section and to any other sections to which she is currently subscribed.

As administrator, you can subscribe a user to a section by assigning the section to the user's account in the Administrator Portal.

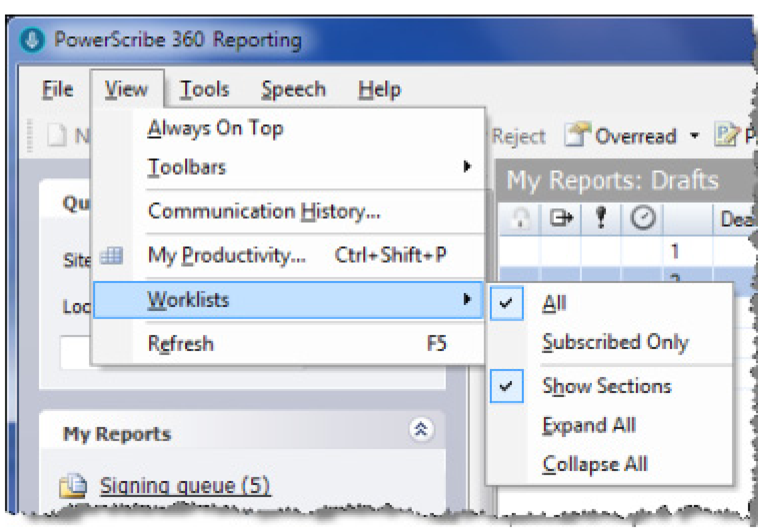


In the *PowerScribe 360 Reporting* client, users have the ability to subscribe to, or unsubscribe from, sections associated with sites to which they have access. To subscribe to sections, a radiologist can click **Tools** > **Preferences** > **Sections**, select a site, if applicable, and then select one or more check boxes.



When the user is not subscribed to any sections, the **Worklists** drop-down list displays all worklists for all sections and sites.

When the user is subscribed to one or more sections, she can select **View** > **Worklists** > **Subscribed Only** to confine the drop-down list to worklists associated with those sections, or select **View** > **Worklists** > **All** to see all worklists.



Using Sections to Limit Transcriptionists' Access to Worklists

Transcriptionists are always limited to worklists for the sections to which they belong. For example, you might want a particular transcriptionist to work only on pediatric reports. You can:

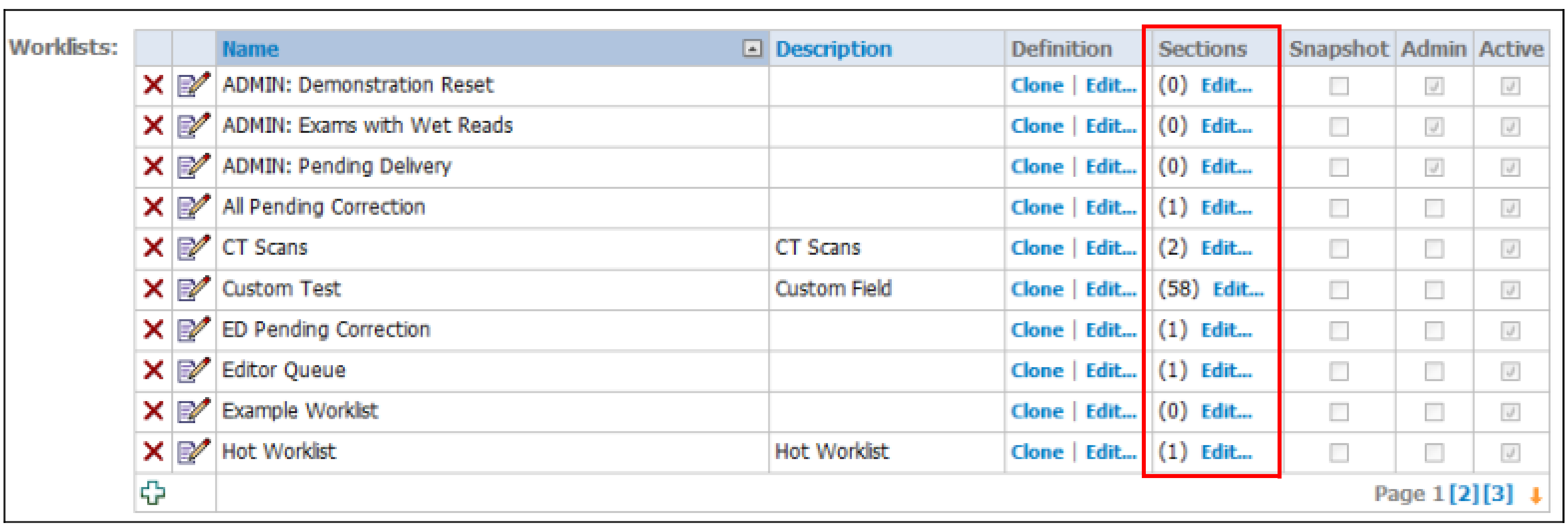
1. Create a worklist that retrieves only pediatric work, and assign the Pediatric section to it.
2. Assign the Pediatric section to the transcriptionist's user account.

In the **Worklists** drop-down list, the transcriptionist sees only worklists assigned to the Pediatric section.

Assigning Sections to a Worklist

To assign a section to a worklist:

1. From the **Administrator Portal**, select the **Setup** group and click the **System** tab.
2. In the **Worklists** area, the **Sections** column shows the number of sections assigned to each worklist.

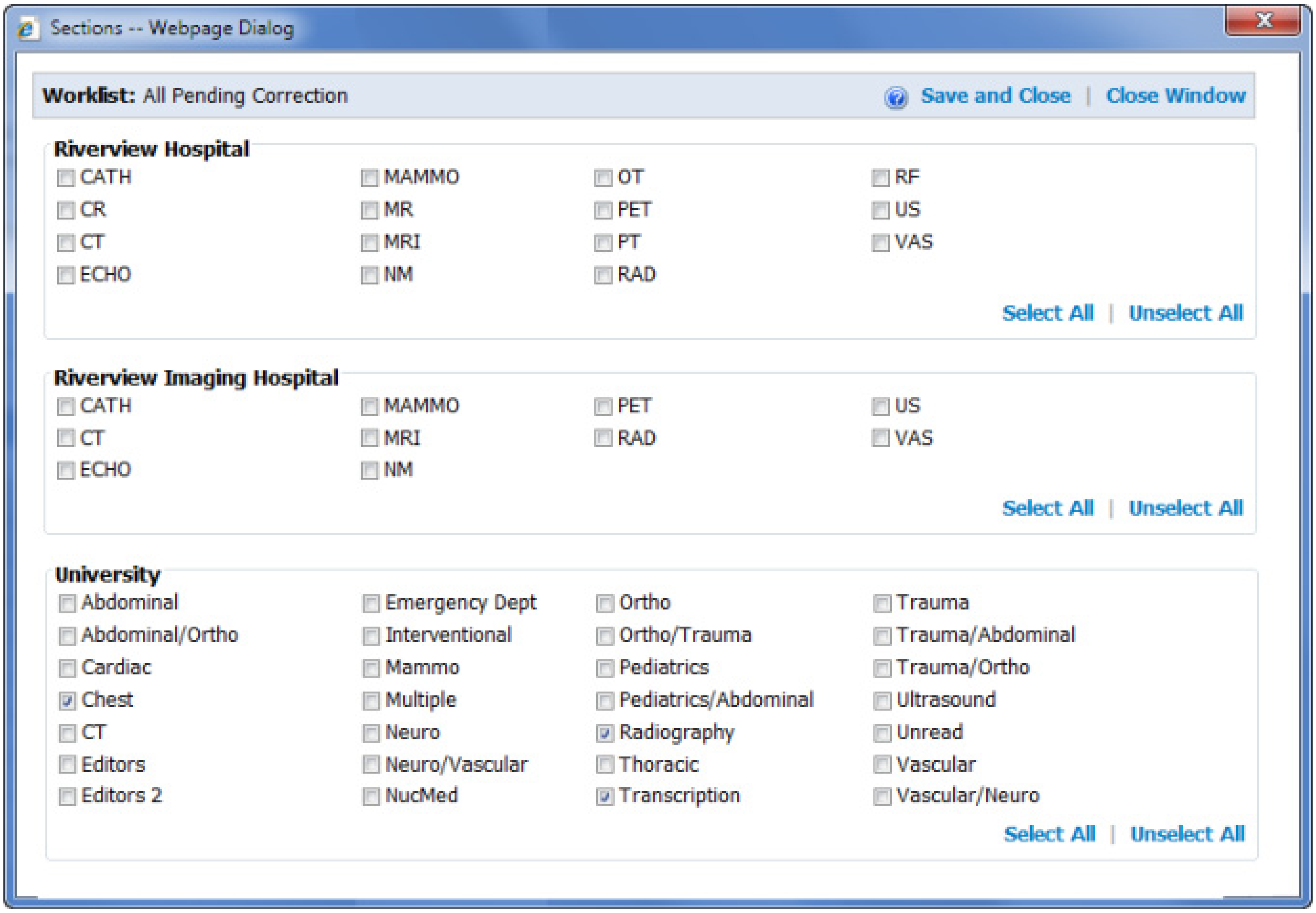


Worklists:

		Name	Description	Definition	Sections	Snapshot	Admin	Active
✕	✎	ADMIN: Demonstration Reset		Clone | Edit...	(0) Edit...	☐	☑	☑
✕	✎	ADMIN: Exams with Wet Reads		Clone | Edit...	(0) Edit...	☐	☑	☑
✕	✎	ADMIN: Pending Delivery		Clone | Edit...	(0) Edit...	☐	☑	☑
✕	✎	All Pending Correction		Clone | Edit...	(1) Edit...	☐	☐	☑
✕	✎	CT Scans	CT Scans	Clone | Edit...	(2) Edit...	☐	☐	☑
✕	✎	Custom Test	Custom Field	Clone | Edit...	(58) Edit...	☐	☐	☑
✕	✎	ED Pending Correction		Clone | Edit...	(1) Edit...	☐	☐	☑
✕	✎	Editor Queue		Clone | Edit...	(1) Edit...	☐	☐	☑
✕	✎	Example Worklist		Clone | Edit...	(0) Edit...	☐	☐	☑
✕	✎	Hot Worklist	Hot Worklist	Clone | Edit...	(1) Edit...	☐	☐	☑

Page 1 [2] [3]

3. Click the **Edit …** link next to the worklist. The **Sections** dialog box opens.



4. Select the sections you want to assign to this worklist.
5. Click **Save and Close**. The **Sections** column is updated to show the number of sections assigned.

Chapter 17

Editor Training

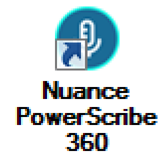
Objectives

In this chapter you will:

- Explain how to log in to the editor application
- Define the screen elements in the Explorer window
- Explain the four main steps in the editor's workflow
- Retrieve a list of reports to edit using Worklists, My Reports, and Browse
- Open a report and explain how to play back the audio portion
- Edit the report by typing or inserting AutoText
- Finish editing the report and return it to the provider who created it
- Create a text AutoText in the AutoText Editor window
- Describe other types of information you can add while editing a report
- Demonstrate initiating a report
- Modify your user preferences

Logging In and Logging Out

To log in to PowerScribe 360 Reporting:



1. Double-click the **Nuance PowerScribe 360** desktop icon.
2. Type the user name and password provided by your administrator.
3. If this is your first login:
   - Depending on your system configuration, you might be prompted to change your password on your first login. Type the new password in both fields and then click **OK**.

After a few seconds, the *Nuance PowerScribe 360 Reporting* window opens.

To log out:

- To log out and close the application completely, click on the **X** (close window icon), in the upper right corner of the application, or select **File > Exit** from the menu bar.

  OR

- To log out and return to the login window, click **File > Logout**.

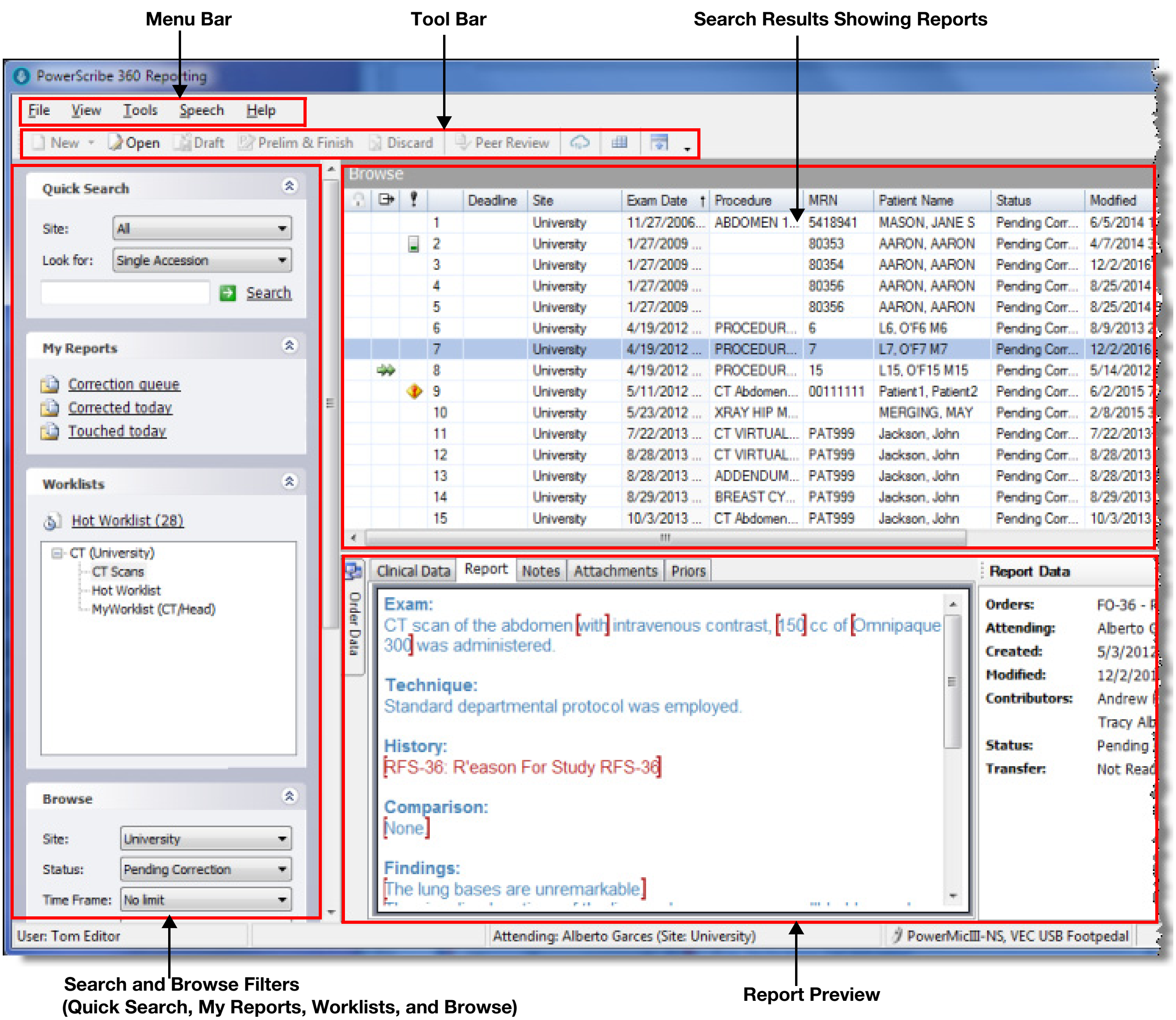
Changing Your Password

To change your login password:

1. Click **Tools > Change Password**.
2. In the **New Password** field, type your new password.
3. In the **Confirm** field, re-type the new password.
4. Click **OK**.

Explorer Window Screen Elements

By default, the first window you see after logging in to the *PowerScribe 360 Reporting* client is the **Explorer** window. **Explorer** is where you access your reports and worklists, and search for orders and reports. The following illustration shows the main components of the **Explorer** window.



Overview: The Editor Workflow

An editor's workflow consists of the following general steps:

1. Search for a report that requires editing (in the Explorer window, using Worklists, My Reports, or Browse)
2. Select and open the report (from the Search Results section)
3. While listening to the audio portion of the report, and comparing it to the speech-recognized text that appears, edit the report (in the Report Editor) as needed by
    - using the keyboard and foot pedal,
    - inserting AutoText (explained later in this chapter),
    - attaching a note containing specific comments for the provider to review.
4. Send the report back to the provider for signature or further revision

This section explains each of these steps in greater detail.

Step 1: Searching for Reports

Worklists

When a provider creates a report and issues a command to have the report reviewed and corrected by an editor, the report is sent to an editor/transcriptionist for correction. Site administrators create *worklists*, which are pre-defined searches that filter reports based on virtually any combination of criteria, making it easier for editors (and providers) to retrieve their work. In many cases, editors work on reports for specific departments, or work on a specific modality. Worklists allow administrators to assign these specific types of reports to an editor, allowing her or him to work more efficiently.

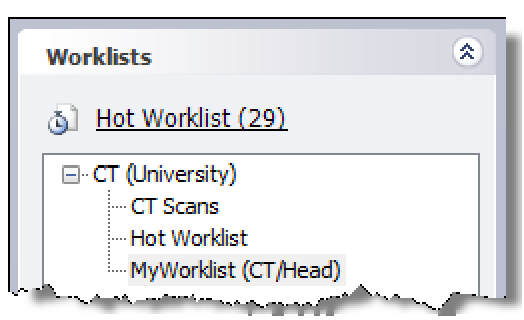
The following examples describe what different worklists might show:

- All reports sent for editing marked as STAT

  Note: *Your system administrator can configure the system so that STAT reports always appear at the top of any worklist.*

- All reports sent for editing by the cardiology group

To use a worklist to filter your Explorer screen results:



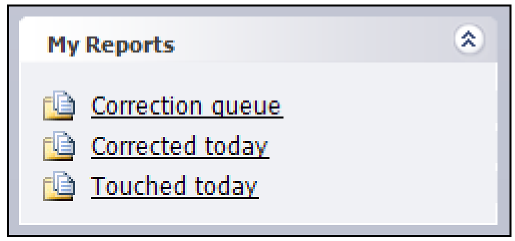
1. Click a worklist in the **Worklists** search area. (If you are not sure which worklist to select, contact your administrator.)The results filtered by the worklist appear in the search results section of the **Explorer** window.

My Reports

My Reports is a quick way to find your most common types of reports.

On the left side of the **Explorer** window, click one of the selections under the **My Reports** heading. Numbers to the right of a search type indicate the number of reports of that type.

Note: *Once you begin editing, these report queues begin to become more relevant. For example, until you've attached a note to a report, you won't see any items listed in your Annotated queue. In addition, you might not see all of the report types listed in this section; the list depends upon the type of editing work you have performed.*



Correction Queue

The **Correction queue** search returns all reports that were assigned to you, and that are awaiting some action by you.

Corrected Today

The **Corrected Today** search retrieves all reports that have the status of **Corrected**, **Pending Signature**, or **Final** (see status definitions in the Browse section below).

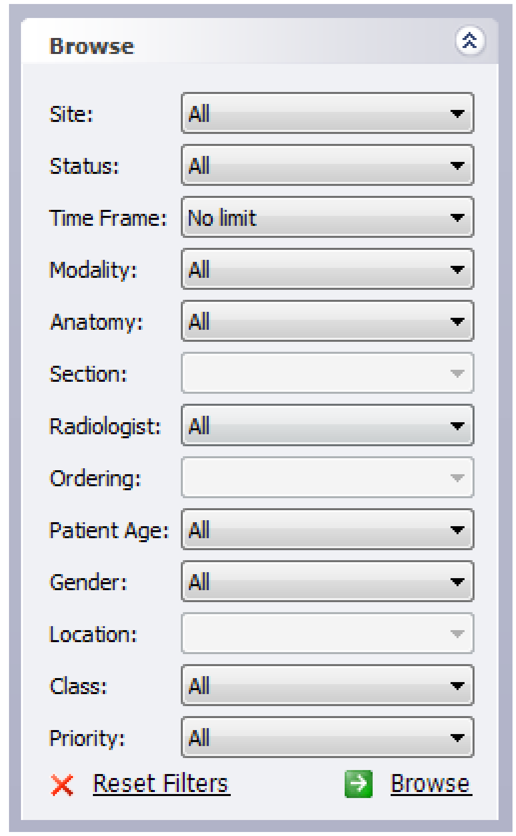
Touched Today

The **Touched today** search retrieves all reports you opened or edited throughout the day.

Browse

Note: *If you do not see the Browse search section on your screen, your system administrator has disabled this feature. In addition, if you do not see all of the browse items shown in the illustration below, your administrator has disabled those specific browse parameters.*

Another search section, the **Browse** pane, allows you to search for orders and reports that match the criteria you specify. The criteria you select remain in place until you change them, and the system remembers them when you log in again.



To use the Browse search:

1. Select the applicable choices from one or more of the drop-down lists. Editors commonly use the following criteria:
   - **Status**: Select either a *report status* or an *order status*. Definitions are shown in the following table:

Status	Description
Addended	One or more addenda have been created for a final report. Addenda are reports themselves and the aforementioned statuses apply to them too.
All	Uses all report statuses in the search
Completed (All) and Completed (Unreported)	Exam has been performed and is ready for dictation.
Final	Report has been completed and signed by an attending.
Pending Correction	Report has been dictated and queued for correction.
Preliminary	Pertains to any report whose status is not final.
Rejected	Appears when a corrected report is returned to an editor by an attending or resident, or when a Pending Signature report is returned to a resident by an attending.

Status	Description
Scheduled	Exam has been scheduled but not yet completed. Sometimes, the exam has been completed but the status has not been updated in the RIS. In this case, reports can be dictated, but are not delivered to the RIS until they are marked complete. Some sites may choose not to allow dictation for scheduled orders.
Temporary	Exam has not been received by *PowerScribe 360 Reporting* so a temporary order has been created. In this case, reports can be dictated, but are not delivered to the RIS until the actual order is received.
Unreported	No report has been dictated for the order.
Wet Read	A “pre-draft” state. Either attending or resident providers can create a wet read report. Any attending or resident provider can promote a wet read report to a Draft status. The text of the wet read is maintained once the report is promoted to Draft status.

- **Time Frame**: Choose from a wide range of time frames
- **Modality**: Specify a modality, such as **CT** or **MRI**, a subset of a modality, or select **All**.
- **Anatomy**: Select a general body section, a specific part, or select All.
- **Radiologist**: Contains all resident and attending accounts that have an active role on the selected site.

Note: *The* ***Section***, ***Ordering***, *and* ***Location*** *filters become available when you select a specific site. If you select* ***All*** *for Sites, these filters are grayed out.*

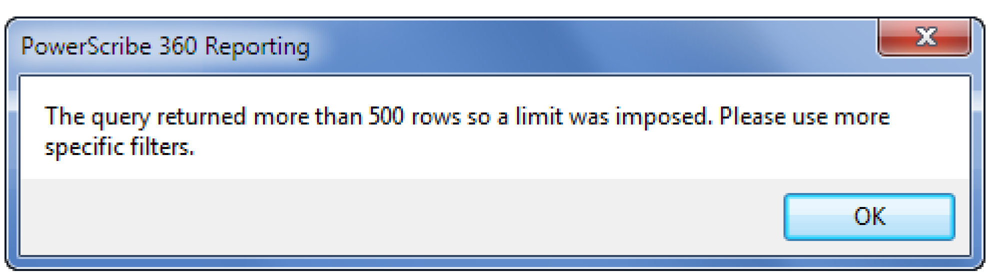
2. When you have selected the criteria for the filter, click **Browse**. Any orders/reports that meet the criteria appear in the **Search Results** table on the right side of the window.

Tip: *To set all the criteria back to the default settings, click* ***Reset Filters***.

Excessive Number of Items in the List

Note: *The number of results returned is set by an administrator.*

By default, the system is set up to return a maximum of 500 items for any given search. If your browse exceeds the number set by your administrator (500 in the following illustration), a message box opens.



When you click **OK**, only 500 results are returned. The report you are searching for might or might not be there; the list is incomplete. As the message suggests, select additional filters and run the query again. Or, use one of your worklists.

Step 2: Selecting and Opening a Report

After you've searched for reports to edit (using either a Worklist, My Reports, or Browse) your results appear on the right side of the Explorer window.

Best Practice for Selecting a Report

Open a report only if you plan to correct and finish it. This helps you to work more efficiently and reduce turnaround time (TAT). If you begin to correct a report and decide to finish it at a later time, the report is placed in your **Drafts** queue where only you can open and finish it.

Search Results Area

The following illustration (divided into two sections for clarity) shows an example of search results.

				Deadline	Site	Exam Date	Procedures	MRN	Patient Name
			1		Imaging Center	10/25/2012 5:05 PM	CTA LEGS	TEMPORARY	UNKNOWN
			2		Imaging Center	4/15/2013 2:27 PM	CTA LEGS	TEMPORARY	UNKNOWN
			3		Imaging Center	1/27/2009 12:36 AM		TO38	ANGIO, CT

Status	Modified	Accession	Gender	Attending	Resident
Draft (T)	1/4/2013 10:43 AM	12345678		Alba, Tracy	
Draft (T)	4/15/2013 2:32 PM	sdfaf		eric, noorda	
Draft	2/27/2013 11:24 AM	2193	Male	Henry, Philip	

The column headings are self-explanatory, with the exception of the first four columns, which are described below.

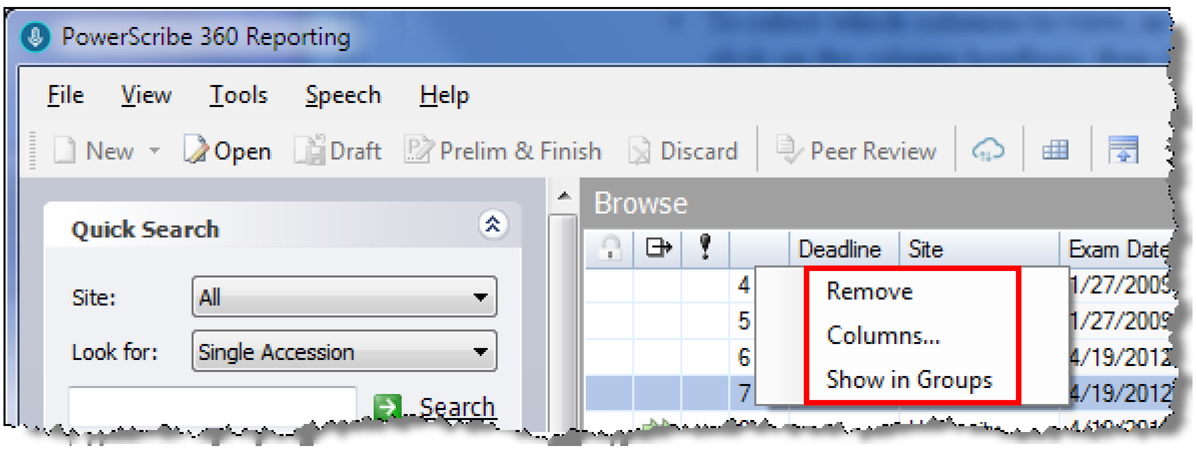
First Four Columns

The first four columns in your search results are identified by the following icons.

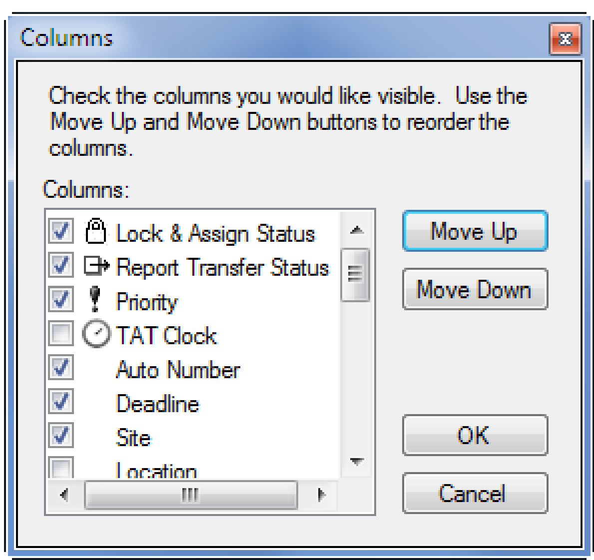
Column Icon	Description
	The **lock** column indicates a report's locking and assignment status. The icon can be either yellow or blue. **Yellow** indicates that the report is open and therefore locked. Hovering your mouse over the lock icon shows who has locked the report. **Blue** indicates an order that is assigned to another radiologist. Depending upon a site preference, you might, or might not, be able to open these types of reports.
	This column shows the **report transfer status**. Hover your mouse over the order's icon to see the status: **Ready**: report is flagged for inspection; when it is sent depends upon its status and interface options. **Queued:** report is queued for transmission **Force Send**: report is queued for immediate re-transmission **Sent**: report has been successfully delivered **Sent & Edited**: Report has been edited since it was distributed; the version of the report in the RIS/HIS is old and does not match what is in *PowerScribe 360 Reporting*. **Final Exported**: final report has been successfully transmitted **Rejected**: the RIS rejected the report **Failed**: an error occurred **Held**: an administrator paused the transmission
	This column uses icons to indicate an order's **priority**: No icon: Routine priority **STAT** priority **ASAP** (red) **Timing-critical**; **Callback**; or **Pre-op** (yellow) **Low priority** (green)
TAT Deadline	Indicates reports that have reached or surpassed their turnaround time deadline: Indicates the report is past its deadline. Hover your mouse cursor over the icon to see a tool tip describing how far past the deadline the report is.
No icon	This column is simply a numerical list of your search results.

Tips for Working with the Columns

- To rearrange the order in which the columns appear in **Explorer**, click and drag the column heading name to a new position.
- Right click anywhere on the column headings to see a menu that allows you to further modify your view of columns.
- To remove a column, right-click in the column heading and click **Remove**. To display the column once again, use the **Columns** dialog box (shown in the next bullet item).

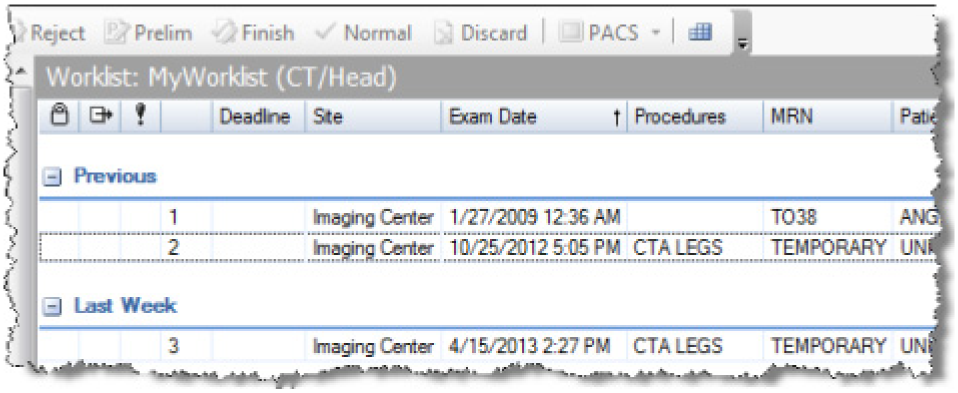


- To select which columns to view, as well as rearrange the order of the columns, right-click on the column headings, then click **Columns** menu item. In the **Columns** dialog box, select or clear columns you want to display. Use the **Move Up** and **Move Down** buttons to reorder the columns.



- To sort reports based upon one of the column headings, right-click a column heading and select **Show in Groups**. You can then click any column heading to see a different view of the results content. Click the plus sign + to expand a group or the minus sign -

to minimize it. Right-click any column heading and click **Show in Groups** again to return to the original view.



- For some columns, more detailed information is available by hovering the mouse over that column to display a tool tip.

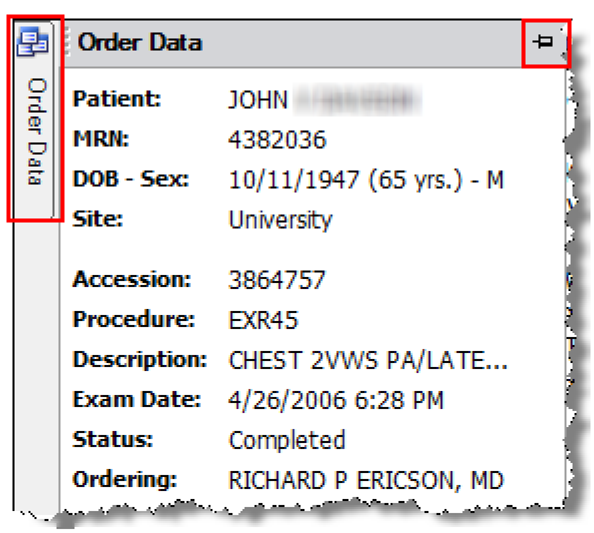
Preview an Order or Report

Once you select an order, the **Order Preview** window is populated with additional information tabs described below.

Order Data Tab

The **Order Data** tab displays information about the order, including patient information (age, site, and so on), exam details, and providers. You can show or hide this information by clicking the **Order Data** vertical tab (located on the left side of this section) or by clicking the push-pin icon (located on the right side).

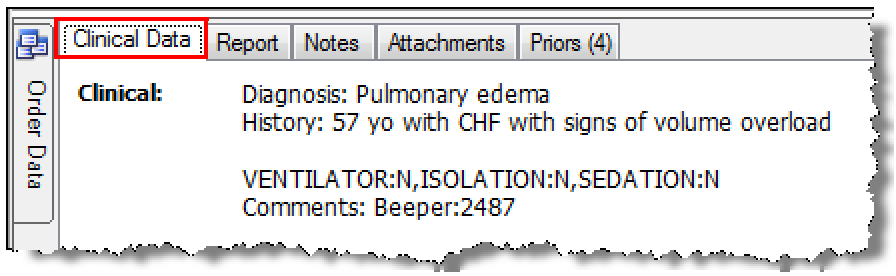
Tip: *To keep the Order Data from automatically hiding itself, click the push-pin one time. If you want to hide the Order Data, click the push-pin again.*



Clinical Data Tab

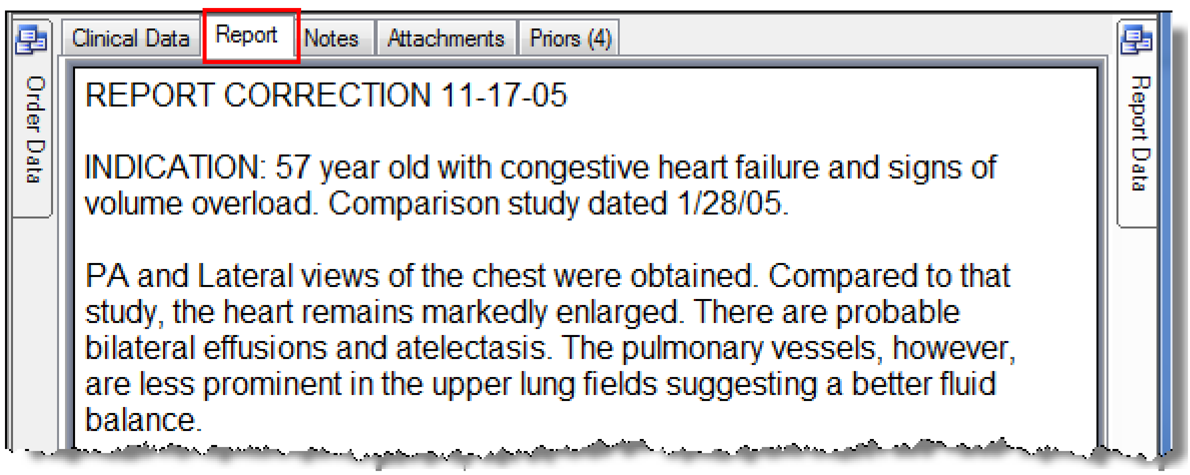
The **Clinical Data** tab shows the reason for the study, history, and so on.

Note: *If no clinical data is available (from your RIS or HIS) for an order, this tab is does not appear.*



Report Tab

If the order you selected has a report already associated with it, click the **Report** tab to see the text of the report. If no report has been created, the **Report** tab does not appear.



Notes Tab

The **Notes** tab allows you to create a text or audio note to associate with the report. For details, see *Adding a Note to a Report* beginning on page 470.

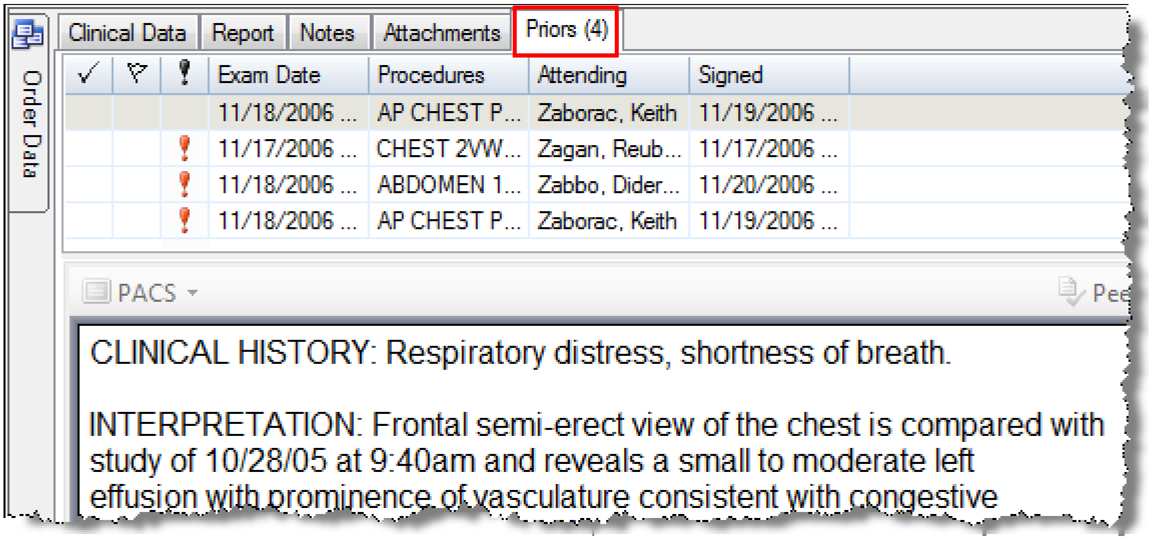
Attachments Tab

The **Insert Report Attachments** link allows you to add images or documents to a report.

For details, see *Adding an Attachment to a Report* beginning on page 471.

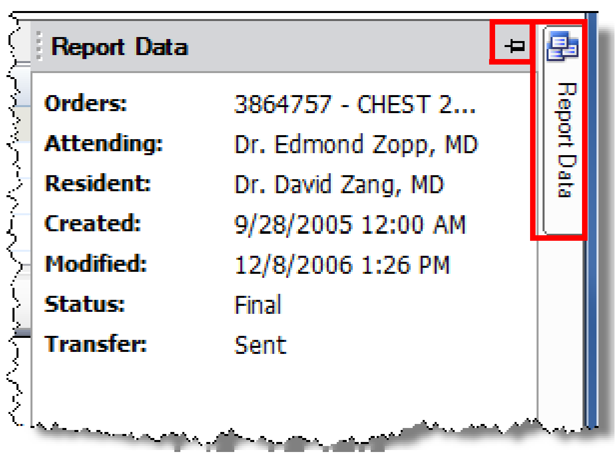
Priors Tab

Select the **Priors** tab to view any prior studies for this patient. If prior studies exist, you can select one from the list and view the text of the report in the area below the list.



Report Data Tab

The **Report Data** tab contains information only when a report has been dictated on the order. Otherwise this tab has no content. You can show or hide this information by clicking the **Report Data** vertical tab (located on the right side of this section) or by clicking the push-pin icon (also located on the right side).

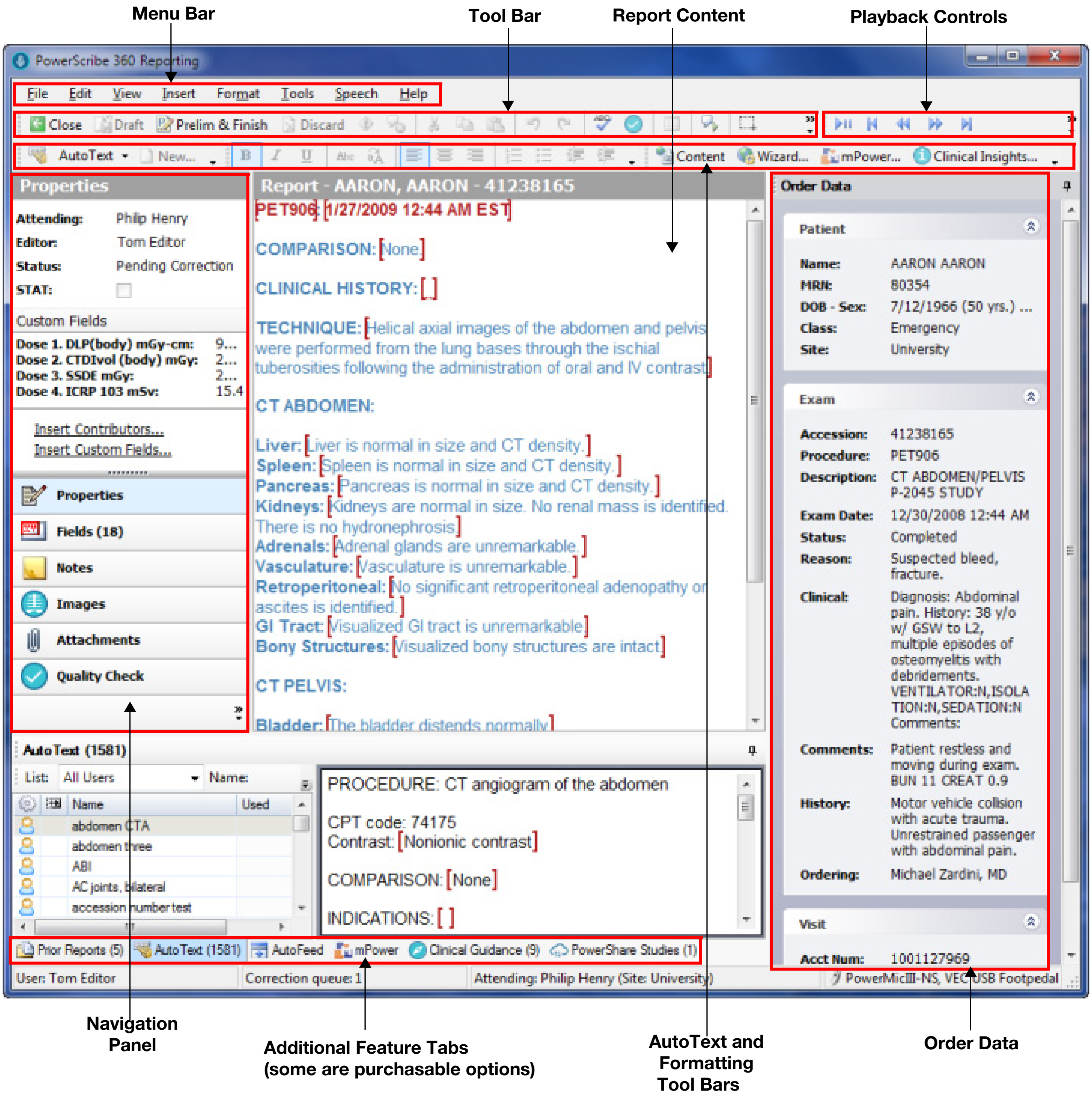


Tip: *To keep the Report Data from automatically hiding itself, click the push-pin one time. If you want to hide the Report Data, click the push-pin again.*

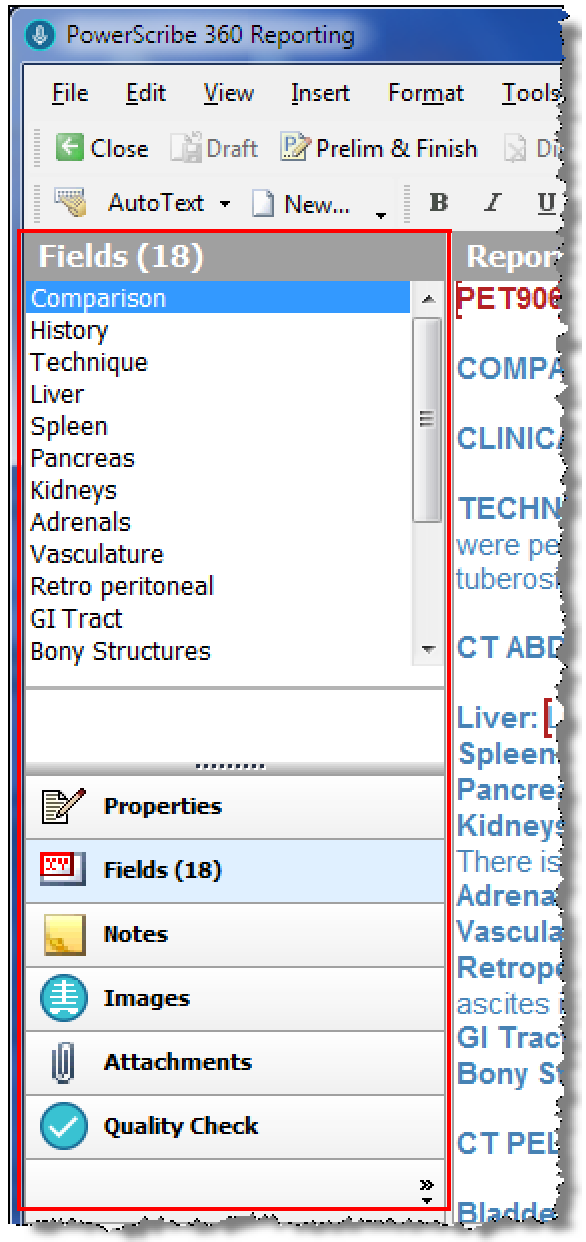
The Report Editor Window

After you select and open an order or report from the **Explorer** window, the **Report Editor** window opens. The **Report Editor** is where you actually correct a report and insert other information that is associated with the report (if necessary).

This illustration below shows the components that make up the **Report Editor** window.



Report Editor Navigation Panel



The navigation panel on the left of the report screen displays a variety of information depending on which mode is selected.

Select the buttons at the bottom of the panel to change the mode. The following modes are available: **Properties**, **Fields**, **Notes**, **Images**, **Attachments**, and **Quality Check**. The illustration at the right has the **Fields** mode selected.

Note: *The Quality Check consistency checker is a purchasable feature. Contact your Nuance account executive for more information.*

Properties

Use the **Properties** mode to display report properties including the **Attending**, **Resident**, report **Status**, and **Transfer** status. There is a check box for you to quickly mark the report priority as STAT. There are also links to insert **Diagnosis Codes** and **Custom Fields**.

Fields

Use the **Fields** mode to display a list of fill-in fields for an AutoText that has been inserted into the report. Click a field name from the list to move the cursor to that field in the report and select the contents of that field.

The **Tab** and **Shift+Tab** keyboard keys can also be used to move forward and backward through fields respectively.

Notes

Click the **Notes** button to display any notes that have been created for the current patient or report. Click the Insert Note link to add a note to the report. (You can also insert a note by clicking **Insert > Notes** on the menu bar.) You can associate a note with the patient or with the report. By default, a note is associated with the specific report. Select the **Patient Note** check box to associate a note with the patient (otherwise, the note is associated only with this specific report).

Editors can create only text notes.

Attachments

Click the **Attachments** button to display files that have been attached to the report. Click the **Insert Report Attachment** link to select a file to attach to your report. (You can also insert an attachment to your report by clicking **Insert > Attachment** on the menu bar.)

Note: *Attachments are not uploaded to your RIS.*

About the Push-Pin

Some tabs in the **Explorer** and **Report Editor** windows have a *push-pin* on their title bar. A push-pin has two positions, horizontal and vertical.

- **Horizontal position**: In this position, the tab hides itself when your mouse pointer is no longer over the tab's contents, allowing more room for other window elements.
- **Vertical position**: In this position, the tab's contents are visible at all times.

Click the push-pin to change its orientation from vertical to horizontal.

Using the Foot Pedal

The foot pedal is one of the most useful and common tools for editors. The following tables show the default foot pedal settings as well as the optional settings for each button.

Default Settings for the Foot Pedal Buttons

Button	Default Setting
Left	**Fast forward**: Fast-forwards for as long as button is held.
Center	**Toggle Play audio on/off**: Toggles audio playback on or off; remains that way until toggled again.
Right	**Rewind**: Rewinds for as long as button is held.

Optional Settings for the Foot Pedal Buttons

Button	Optional Settings
Left, Center, and Right	• **Previous field**: Moves cursor to the previous field • **Next field**: Moves cursor to the next field • **Dead man play audio**: Plays audio as long as button is held; stops playback when button is released.

Keyboard Shortcuts

The following table shows the keyboard shortcuts used most frequently by editors.

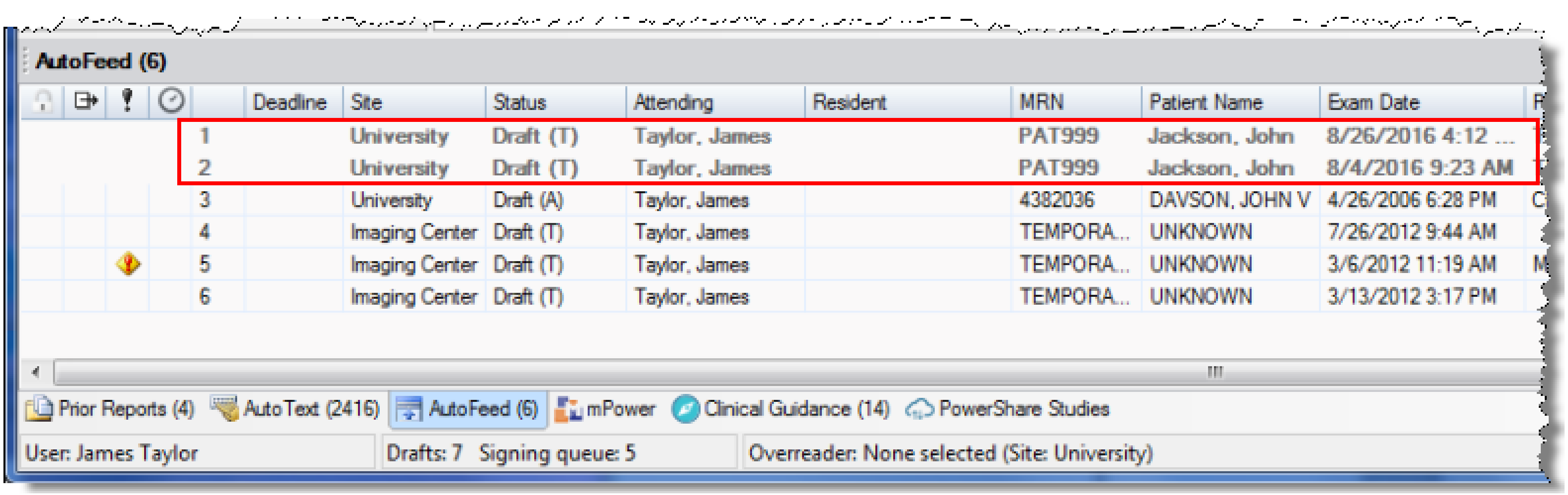
Keyboard Shortcut	Description
Playback Controls (in Report Editor and AutoText Editor)	
F6	Play/pause toggle
Alt+Home	Go to beginning
Alt+Left arrow	Rewind
Alt+Right arrow	Fast forward
Alt+End	Go to end
Alt+Insert	Increase volume
Alt+Delete	Decrease volume
Alt+Up arrow	Speed up
Alt+Down arrow	Slow down
Ctrl+Up arrow	Faster winding
Ctrl+Down arrow	Slower winding
Explorer Window	
Ctrl+N	New report
Ctrl+O	Open report
Ctrl+P	Print report
Ctrl+T	Toggle AutoFeed on/off
Ctrl+B	Barcode on/off
F1	Open Explorer help
F5	Refresh view
F9	Save as Draft
F12	Finish report
Report Editor Window	
Ctrl+S	Save report without closing
Ctrl+C	Copy text
Ctrl+V	Paste text
Ctrl+X	Cut text
Ctrl+A	Select all
Ctrl+F	Find
Ctrl+H	Replace

Keyboard Shortcut	Description
Ctrl+T	Toggle AutoFeed on/off
Ctrl+B	**Bold** selected text
Ctrl+I	*Italicize* selected text
Ctrl+U	Underline selected text
Ctrl+Z	Undo
Ctrl+Y	Redo
Ctrl+P	Print report
Ctrl+Alt+C	Delete concordance
Alt+U	Make the selected text all UPPERCASE
Alt+L	Make the selected text all lowercase
Alt+C	Begin each selected word or words with an Initial Capital letter
Alt+Home	Go to the beginning of the report
Alt+End	Go to the end of the report
F1	Open Report Editor help
Alt+F3	Create a new AutoText from selected text
F6	Play/pause toggle
F7	Spelling
F9	Save as Draft
F12	Finish report
AutoText Editor Window	
Ctrl+N	Start a new AutoText
Ctrl+O	Open the selected AutoText
Ctrl+S	Save report without closing
Ctrl+C	Copy text
Ctrl+V	Paste text
Ctrl+X	Cut text
Ctrl+A	Select all
Ctrl+F	Find
Ctrl+H	Replace
Ctrl+B	**Bold** selected text
Ctrl+I	*Italicize* selected text
Ctrl+U	Underline selected text

Keyboard Shortcut	Description
Ctrl+Z	Undo
Ctrl+Y	Redo
Ctrl+P	Print report
Alt+U	Make the selected text all UPPERCASE
Alt+L	Make the selected text all lowercase
Alt+C	Begin each selected word or words with an Initial Capital letter
Alt+Home	Go to the beginning of the AutoText
Alt+End	Go to the end of the AutoText
F1	Open AutoText help
F7	Check spelling

Using the AutoFeed Feature

The AutoFeed tab shows a list of files that are in your reports queue, based on the type of search you performed in the Explorer window. As the reports from your search are loaded into your computer sequentially, the information turns from black to a gray bold text. In the illustration, reports 1 and 2 have already been loaded; the others have not.



Example

If you selected the **Correction Queue** link (from the **My Reports**) in **Explorer**, and then clicked the **Start AutoFeed** icon (in **Explorer**), the **Report Editor** opens, and the **AutoFeed** also opens, showing the reports from your correction queue. The first report in the list appears in the **Report Editor** window. After you correct the first report, the second report automatically opens in the **Report Editor**, and so on.

Note: *If you decide to start with a report other than the first one in your* ***Explorer*** *search results list, AutoFeed does* ***not*** *return to* ***Explorer*** *and pull in those first few reports. To access those first reports, you must return to the* ***Explorer*** *window and start AutoFeed again.*

If you did not click the **AutoFeed** icon in the **Explorer** window and want to view the queue, click the AutoFeed tab in the bottom left corner of the main screen. Note that the **AutoFeed** tab has a push-pin which allows you to hide the tab, or keep it open during your session.

Other AutoFeed Features

- From the **Report Editor** window, you can turn AutoFeed off or on by clicking the AutoFeed icon on the tool bar. If you turn off AutoFeed, you are returned to the **Explorer** window when you finish the current report.
- If there are no more orders or reports in your original query, you are returned to the **Explorer** window when you finish the last report.
- To view a list of upcoming reports from your query, click the AutoFeed tab located in the lower-left portion of the Report Editor window near the Prior Reports and AutoText tabs. (Note that this is a read-only list; you cannot select a report from it.)
- With this feature selected, a report that is in the process of being saved appears in the **Explorer** window in a gray italicized font.
- If you attempt to open a report that is being saved, you will get a message box explaining that the report is being saved.
- If you attempt to log out of the application while a report is being saved, a message box opens asking you to Please wait.

If you decide to log out of the application during the save, you are notified that you might lose some of your data. Best practice: wait until the save is completed.

Step 3: Editing the Report

Playing Back the Report's Audio

Most editors play, rewind, and fast forward the audio portion of a report using a foot pedal. (You can also use your keyboard or your mouse.)

To play back audio using a foot pedal:

1. Press the middle button on your foot pedal. The audio begins to play and the corresponding text is highlighted (or underlined, depending upon your preference settings).
2. Lift your foot off of the pedal when you come to a word or phrase that needs correction. The system highlights the last word that was played back.

Note: If necessary, use your mouse to select additional words to correct or replace.

Selecting Text to Replace

Use your keyboard (or your mouse) to select the text you need to replace.

To select text using your keyboard:

Press and hold the **Ctrl+Shift** keys along with one of the four arrow (cursor) keys to select text:

- **Ctrl+Shift+Right Arrow** key: Selects the *next* word. Keep pressing the right arrow key to continue selecting words.
- **Ctrl+Shift+Left Arrow** key: Selects the *previous* word. Keep pressing left arrow key to continue selecting words.
- **Ctrl+Shift+Down Arrow** key: Selects the rest of the current paragraph from the cursor position *forward*. Keep pressing down arrow key to continue selecting paragraphs.
- **Ctrl+Shift+Up Arrow** key: Selects the rest of the current paragraph from the cursor position *backward*. Keep pressing up arrow key to continue selecting paragraphs.

Replacing or Inserting Text in a Report

Once you've selected the text you need to replace, or you've placed your cursor at the location in the report at which you want to insert some text, do one of the following:

- Type over the selected text (or simply begin typing at the cursor location if no text is selected)
- Insert AutoText into the report.

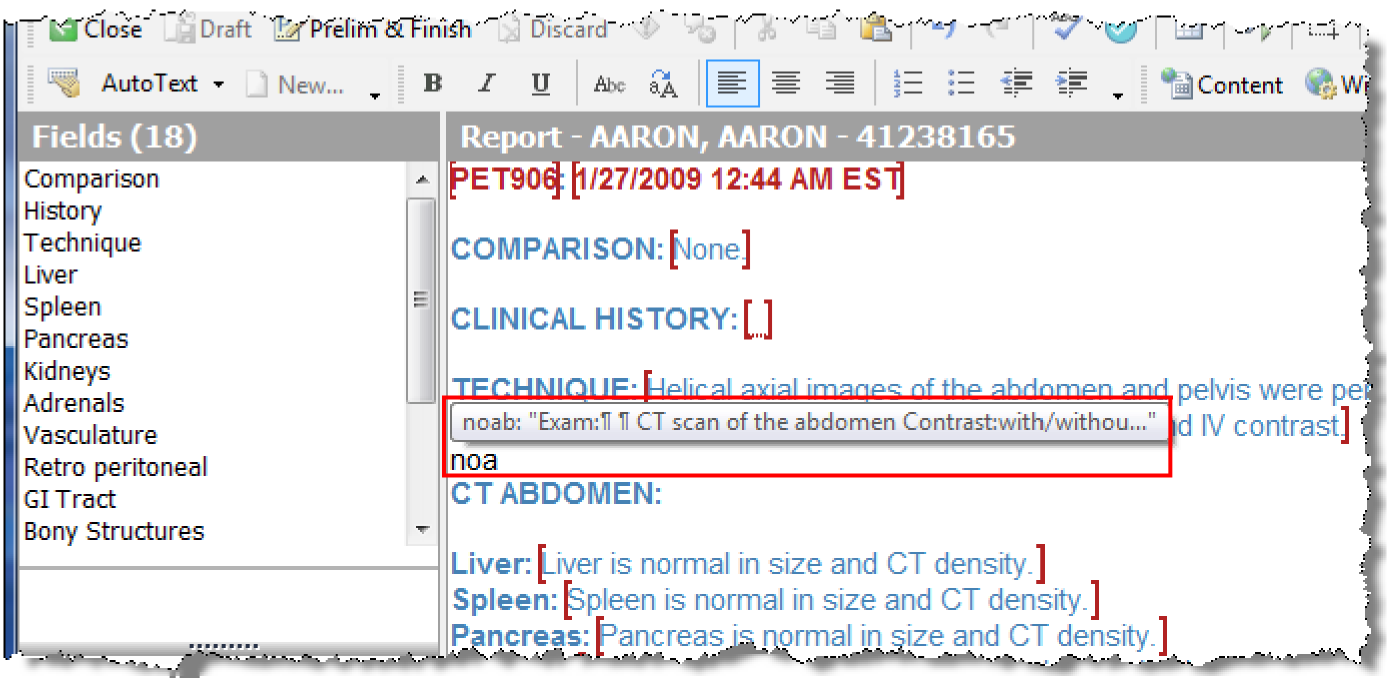
Typing over, or simply typing in text, is self-explanatory. However, there are several ways to insert AutoText into your report.

Inserting AutoText into a Report

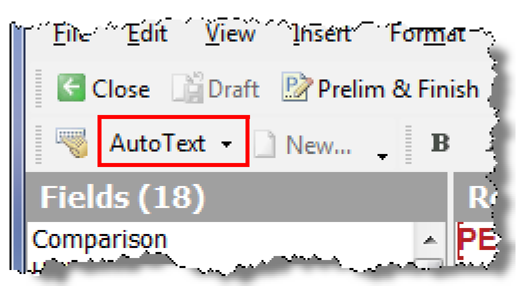
AutoText is pre-defined text commonly used in normal test results that you can insert into reports. For example, an AutoText named **thr** might be used to insert text describing a normal thoracic spine exam.

You can insert AutoText in three different ways:

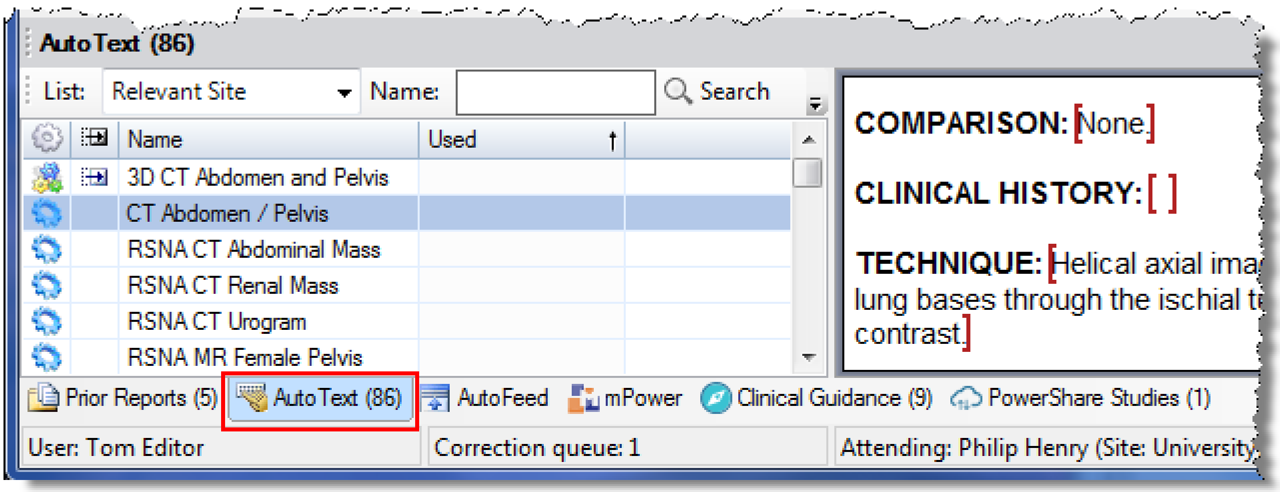
- **Begin typing the AutoText shortcut name**: If an AutoText includes a shortcut name, begin typing the shortcut name. Once you've typed enough letters for the system to locate the AutoText, the shortcut name and the AutoText content appear. You can then press **Enter** to insert the AutoText into the report. In the illustration below, the editor typed the letters **noa**, which located a normal abdomen AutoText with the **noab** shortcut name, and displayed its content.



- **Click the AutoText drop-down list from the menu bar** (see illustration at right): Use this method if you do not recall the name of the AutoText you want to insert. Select the AutoText you want to use to insert it into your report.



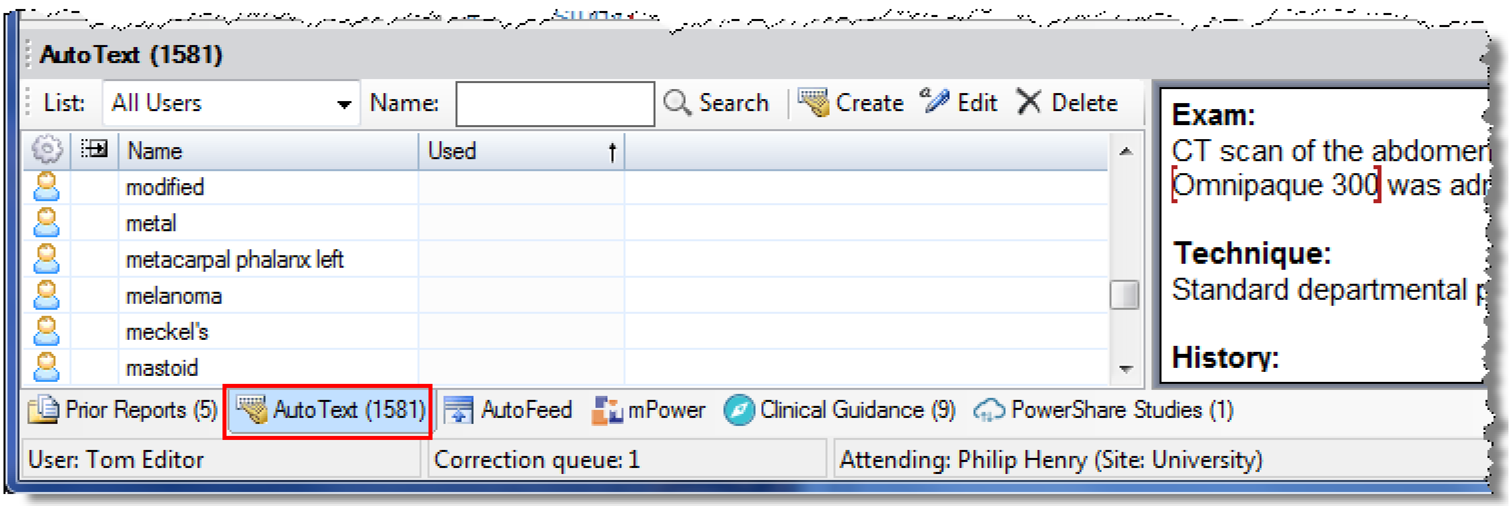
- **Click the AutoText tab** (located in the bottom-left corner of the window): Use this method if you are not sure which AutoText you want to insert. Search for and select an AutoText to display its content in the right side of the window. When you find the correct AutoText, double-click it to insert it into your report.


AutoText (86)
List: Relevant Site
Name:
Search
Name
Used
3D CT Abdomen and Pelvis
CT Abdomen / Pelvis
RSNA CT Abdominal Mass
RSNA CT Renal Mass
RSNA CT Urogram
RSNA MR Female Pelvis
COMPARISON: [None]
CLINICAL HISTORY: [ ]
TECHNIQUE: [Helical axial ima
lung bases through the ischial t
contrast]
Prior Reports (5)
AutoText (86)
AutoFeed
mPower
Clinical Guidance (9)
PowerShare Studies (1)
User: Tom Editor
Correction queue: 1
Attending: Philip Henry (Site: University

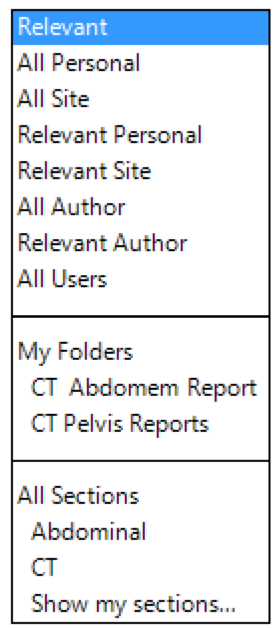
Using the AutoText Tab

The **AutoText** section shows a list of AutoText (also known as macros or shortcuts) available on the system.

To see this section, click the **AutoText** tab in the bottom left corner of the main screen.

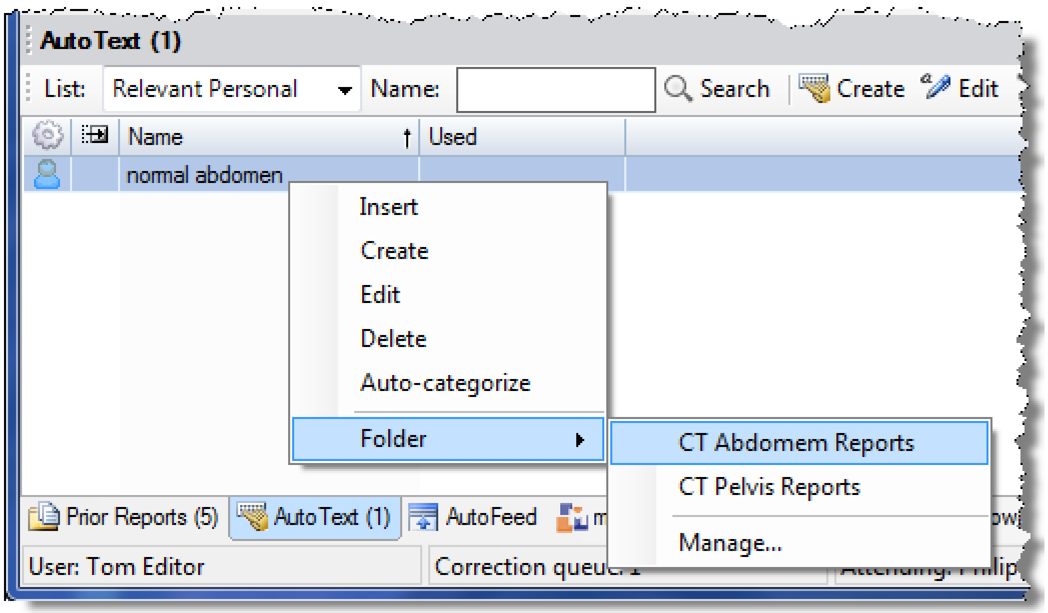


Use the **List** drop-down to determine which set of AutoText to display:



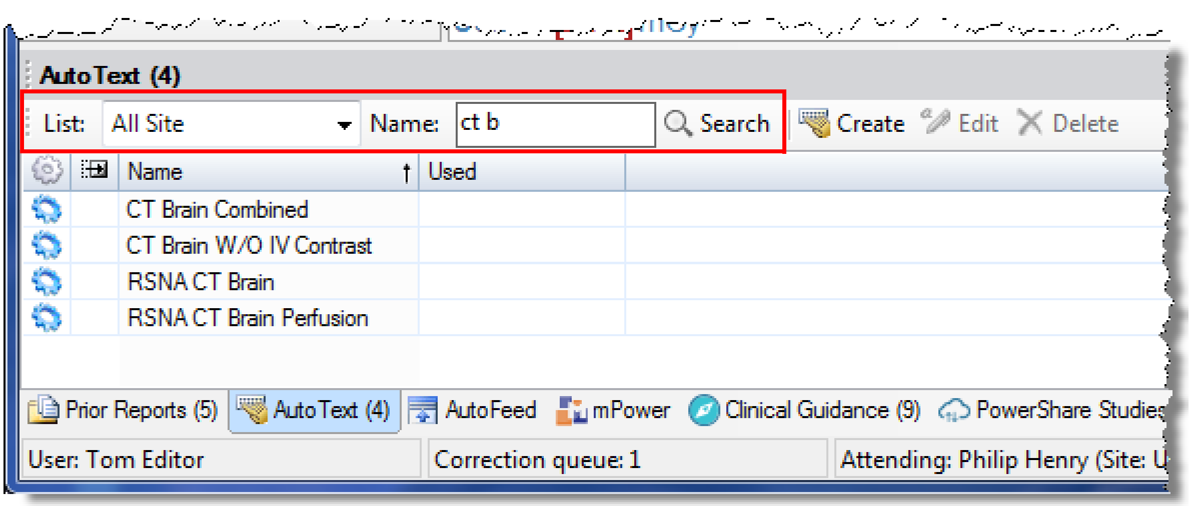
- Select **Relevant** to show only AutoText categorized with a procedure code that exists in the current order, or no categorization assigned at all.
- Select **All Personal** to show all of your own AutoText regardless of categorization.
- Select **All Site** to show all site-defined AutoText, regardless of categorization.
- Select **Relevant Personal** to show your own AutoText categorized with a procedure code that exists in the current order.
- Select **Relevant Site** to show site-defined AutoText categorized with a procedure code that exists in the current order.
- Select **All Author** to show all of AutoText created by this AutoText's author regardless of categorization.
- Select **Relevant Author** to show AutoText created by this AutoText's author categorized with a procedure code that exists in the current order.
- Select **All Users** to show all AutoText created by site users regardless of categorization.
- Create, or access any existing, folders in the **My Folders** portion of the list. You can select one of your folders to act as a filter. In addition, you can assign your **All**

Personal and **Relevant Personal** AutoText to a folder from within the Report Editor window. To do so, right click an AutoText from one of these lists and select the folder in which you want to place it.



- The Sections portion of the list allows you to select a section as your AutoText filter. By default, **All Sections** for the current site appear in the list. If you select **Show my sections**, the list changes to display only section AutoText assigned to you by an administrator.

Search for AutoText in the Report Editor window using the **Name** field and **Search** button. From the AutoText tab in the Report Editor, type the first few letters of the AutoText for which you are searching and click the **Search** button. The example below shows the results for All Sites for the name **ct b**. The results are filtered based on the current **List** selection (All Site, All Personal, Relevant, and so on).

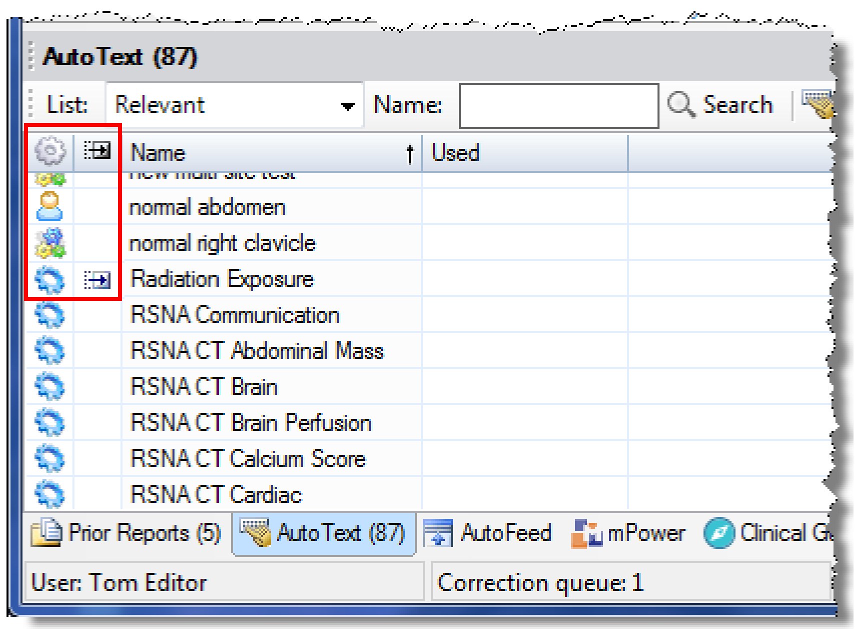


Located to the right of the Name/Search area are buttons used to **Create**, **Edit**, and **Delete** AutoText.

- **Create**: Opens the AutoText Editor, allowing you to create a new AutoText.
- **Edit**: Opens the currently selected AutoText in the AutoText Editor, allowing you to edit the AutoText.
- **Delete**: Click this button to delete the selected AutoText. A confirmation dialog box opens, allowing you to proceed with the deletion or cancel.

The first two columns in the search results area contain icons to help you gather information about the AutoText at a glance.

- The first column displays an icon showing whether the AutoText belongs to a single site or multiple sites, or if it is a personal AutoText.
- The second column displays an icon if the AutoText is acting as a default for the report.



Hover your mouse cursor over the icon to display text indicating the site, sites, or user who are associated with the AutoText.

For more information on AutoText, see *Creating a Text AutoText Entry* beginning on page 462.

Step 4: Finishing the Report

After editing your report, finish the report to complete the process.

To finish the report:

1. Click the **Finish Report** icon (or the **Prelim and Finish Report** icon, depending upon how your system is configured) on the toolbar.
2. If you are asked to verify that you want to finish the report, click **Yes**.
3. If you are asked to confirm your password, retype it in the dialog box and click **OK**.
4. After finishing, you return to the **Explorer** window where you can select other reports to edit.

Note: *If you have the AutoFeed feature enabled, you will not return to the* ***Explorer*** *window. Instead, your next report opens for you to edit and finish.*

Creating a Text AutoText Entry

One of your most powerful tools is the **AutoText Editor**. Use this tool to create AutoText entries, which add blocks of commonly used text into your reports. Using AutoText helps you to work more efficiently and increases the report's accuracy.

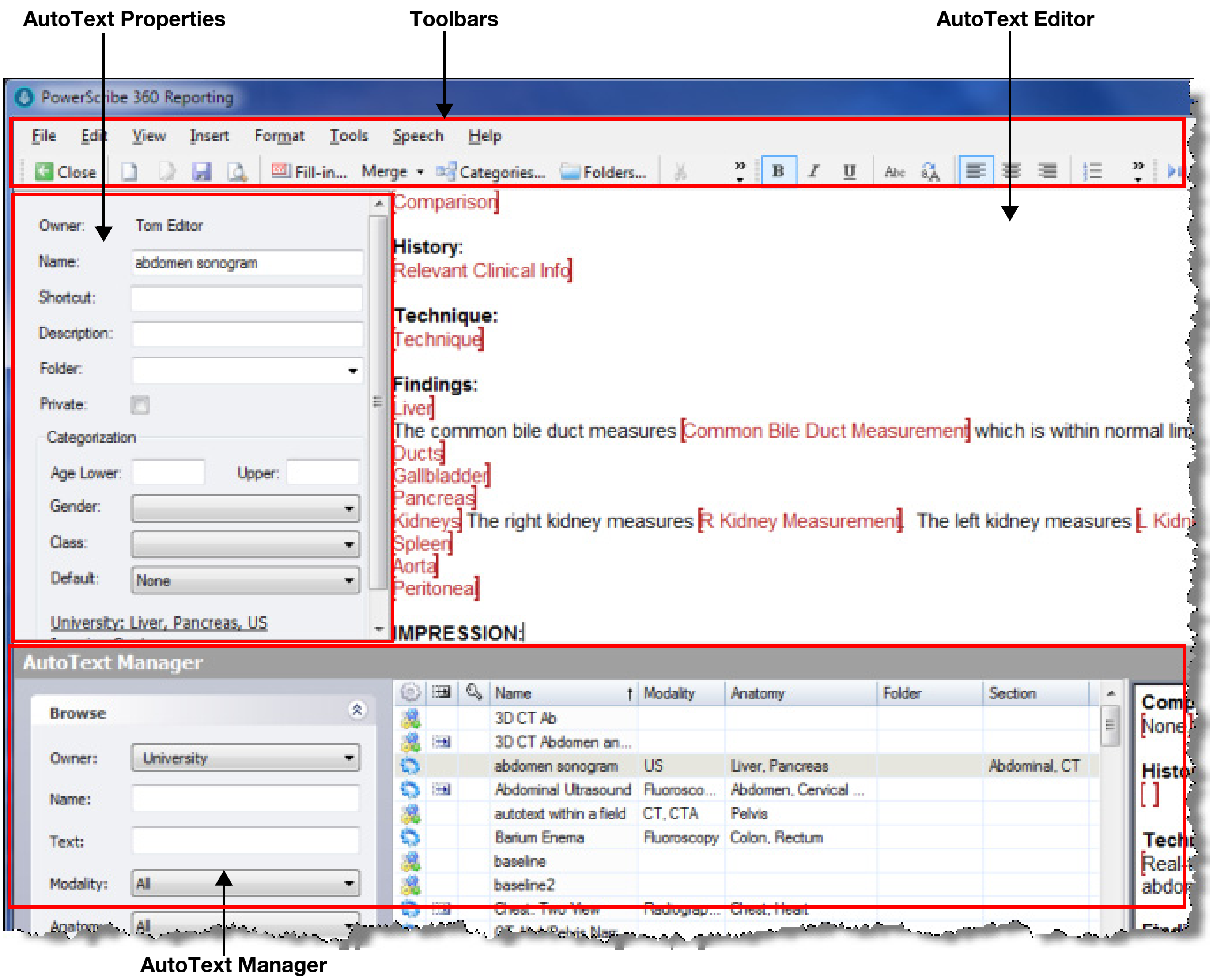
Opening the AutoText Editor

From the **Explorer** window: Click **Tools** > **AutoText Editor**.

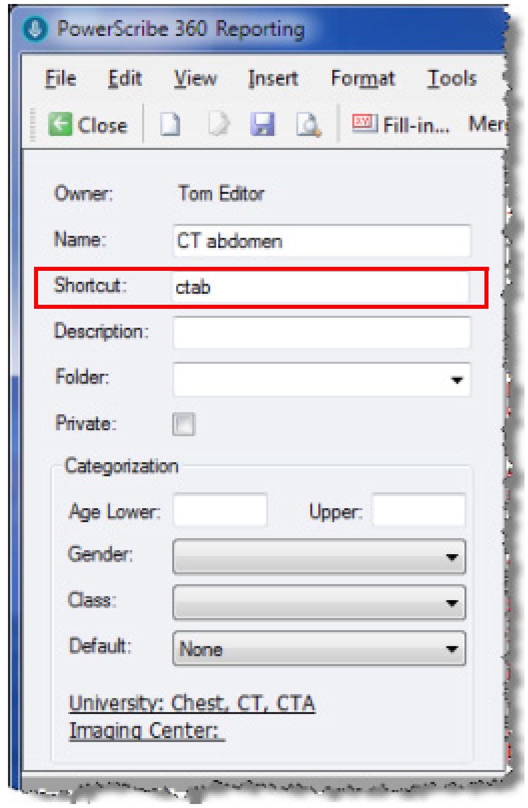
From the **Report Editor** window: Click the **Create AutoText** icon.

AutoText Editor Screen Elements

The illustration below shows the components that make up the **AutoText Editor** window.



AutoText Properties



Name

Enter a name for the AutoText in this field.

Shortcut

You can assign a *shortcut* to an AutoText. A shortcut is a keystroke sequence you assign to an AutoText. For example, you might type the shortcut **ncx** for a normal chest x-ray AutoText. When you begin to type in the report editor, and enough text is typed to uniquely identify a single AutoText shortcut, the name and content of the AutoText appear. You can then press **Enter** to insert the AutoText, or backspace until the text you typed is removed.

AutoText Manager

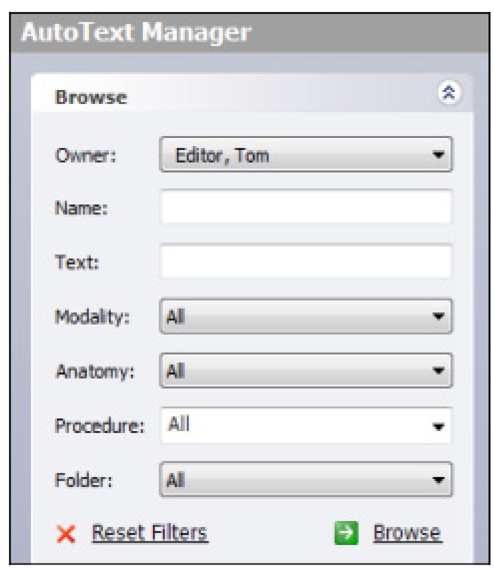
Use the **AutoText Manager**, located in the lower half of the **AutoText Editor**, to search for, select, and preview AutoText.

Browse

This section filters which AutoText appear in the results grid. You can filter results by name, a word or phrase within an AutoText, anatomy, modality, procedure, or folder.

Use the **Reset Filters** button to clear all filters.

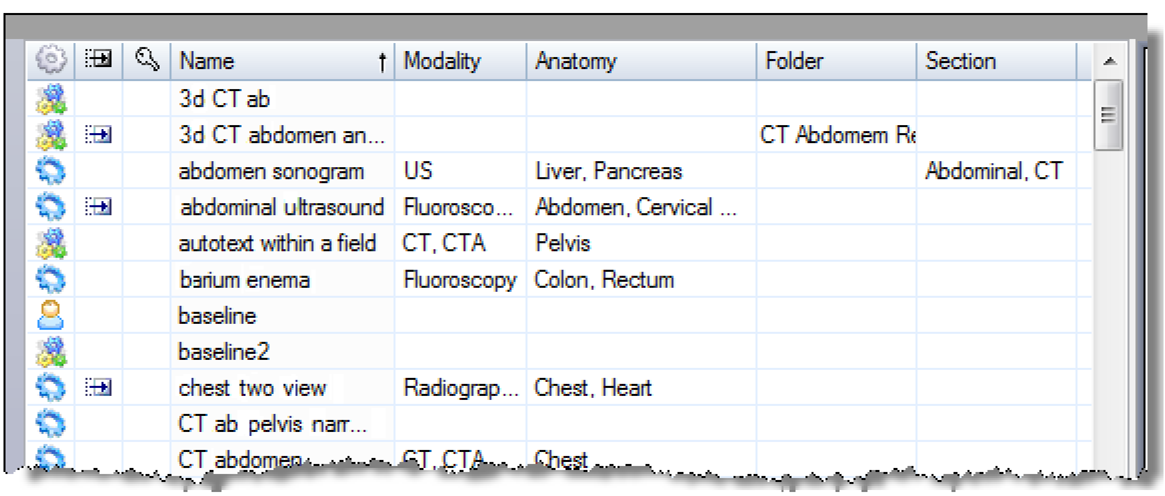
The **Browse** button refreshes the results grid based on the specified filters.



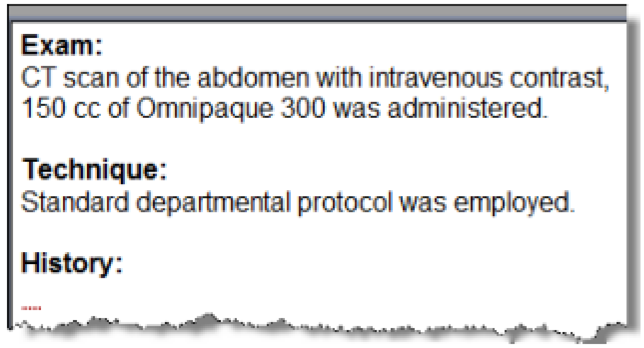
Results Grid

The following table describes the columns that appear in the Results Grid.

Column	Description
Site	Displays an icon showing whether the AutoText belongs to a single site or multiple sites, or if it is a personal AutoText.
Default	Displays an icon if the AutoText is acting as a default for the report.
Private	Displays a check mark icon if the AutoText has its **Private** check box selected in its definition.
Name	Name assigned to the AutoText
Modality	The **Modality** and **Anatomy** are inferred from the procedure code(s) associated with the AutoText, and are available only if the site has categorized the procedure codes to their respective Modality and Anatomy.
Anatomy	
Folder	Name of the folder to which the AutoText is assigned. This field is blank if the AutoText is not assigned to a folder.
Section	Name of the section to which the AutoText is assigned. This field is blank if the AutoText is not assigned to a section.



AutoText Preview



The AutoText preview window displays the AutoText selected in the results list. An AutoText can be opened for editing in the main editor window by double clicking the desired AutoText in the results list or by clicking the **Open AutoText** button from the toolbar.

Cloning an AutoText

The **Clone** function is a quick way to copy an AutoText and open it for additional editing.

Note: *If you have the **Edit AutoText** administrative privilege on the system, and you modify an AutoText, you are changing that AutoText for **everyone**, not just yourself. To change an AutoText for you only as a provider, log in as a provider who does not have that administrative privilege.*

To clone and AutoText:

1. From the **AutoText Editor** window, search for the AutoText that you want to clone.
2. Double-click the AutoText. If the AutoText is marked as **Default**, you are asked whether you want to retain that setting in the clone.
3. Make your changes to the AutoText.

    Note: *When cloning your own AutoText, you must change the name of the cloned AutoText. The name is automatically selected after using the **Clone** command, allowing you to rename it. In addition, if your original AutoText contained a shortcut, you will have to rename the shortcut as well.*

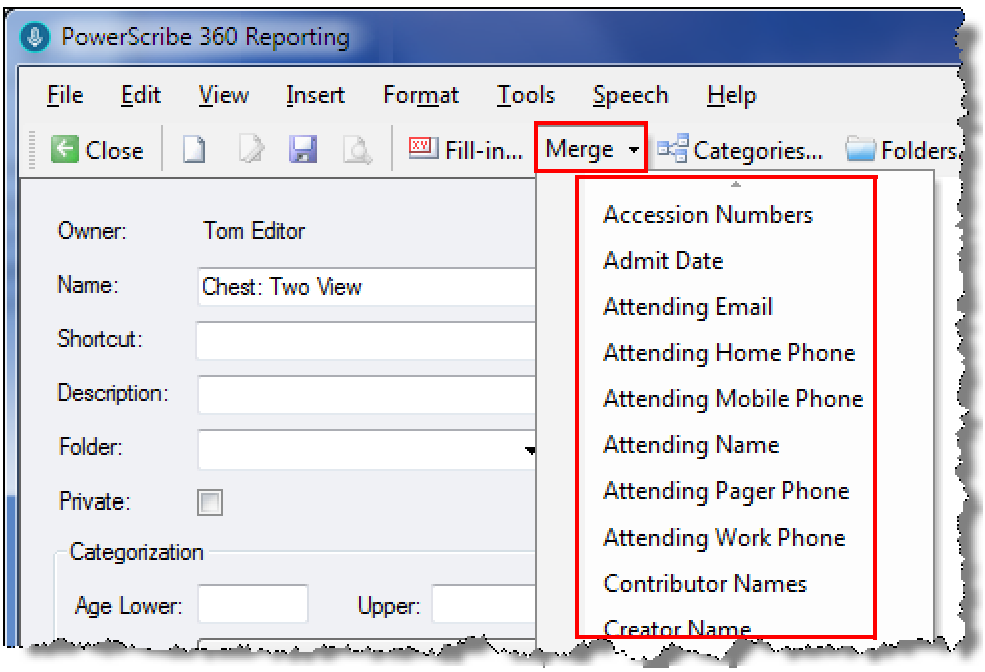
4. When finished, click **Save** to save your cloned AutoText.

AutoText with Merge Fields

Merge fields contain provider and patient information from your facility's database. When you insert an AutoText that contains a merge field, the system looks at the database and populates the field automatically (assuming the information requested exists in the database; otherwise the field remains blank).

To place a merge field in your AutoText:

1. Place your cursor at the location in your AutoText in which you want the merge field to appear.
2. Click the **Merge** drop-down list.
3. Click the merge field you want to insert.
4. Repeat for any other merge fields you want to add.



Facility-Specific Features

Not everyone has the same set of training requirements. This section shows some additional features commonly used by editors.

Adding Information to a Report

In addition to typing information into a report, there are many other types of information which you can add.

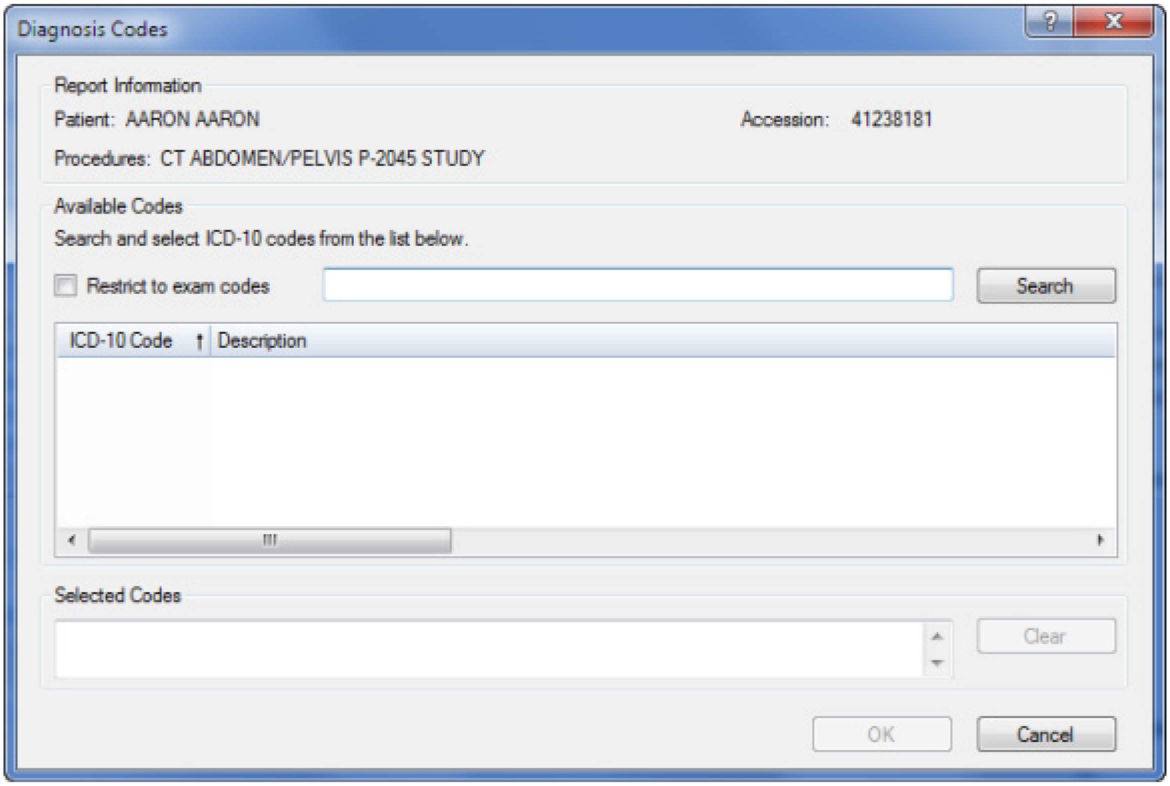
- Diagnosis Codes
- Custom Fields
- Notes
- Attachments

Adding Diagnosis Codes to a Report

If your facility is configured to use diagnosis codes, you can use the **Diagnosis Codes** dialog box to associate codes with the order(s) in your report.

To insert diagnosis codes into your report:

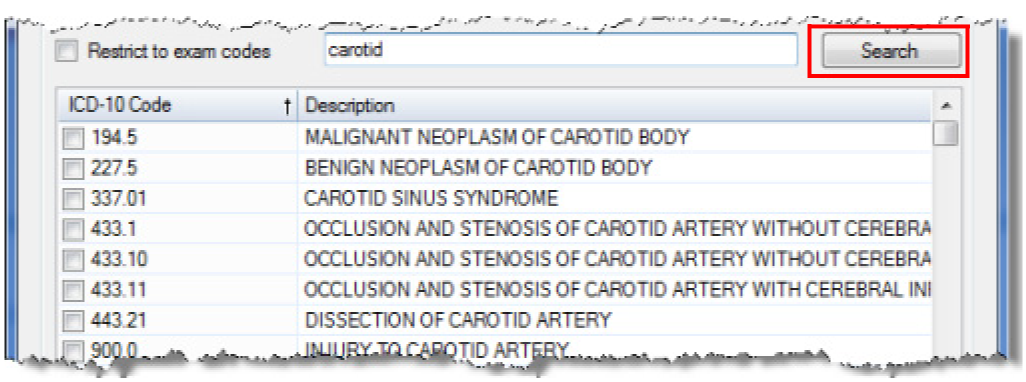
1. In the **Report Editor** window, select **Properties** from the navigation panel and click the **Insert Diagnosis Codes** link (or click **Insert > Diagnosis Codes** from the menu bar). The **Diagnosis Codes** dialog box opens.



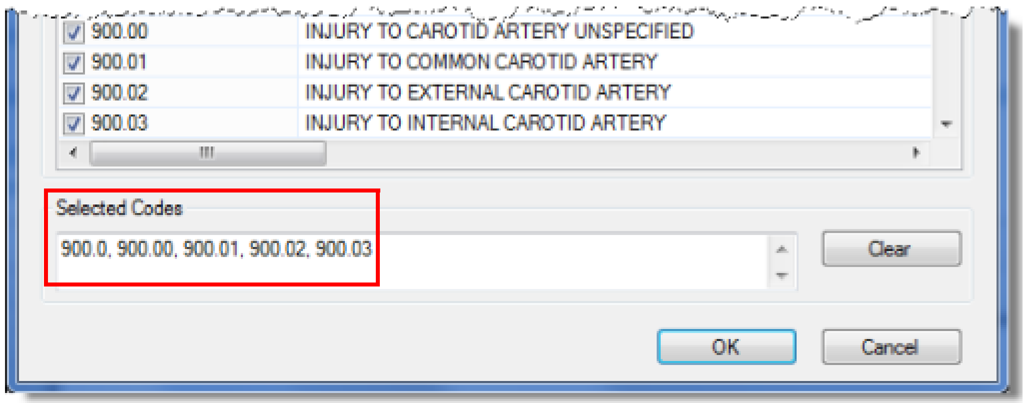
2. In the **Available Codes** section, type the diagnosis code you want to associate with your report. (If you don't know the entire code, type the first few numbers of the code, or a word from the description.)

   Note: *To show only those codes that match the procedure, select the* ***Restrict to exam codes*** *check box.*

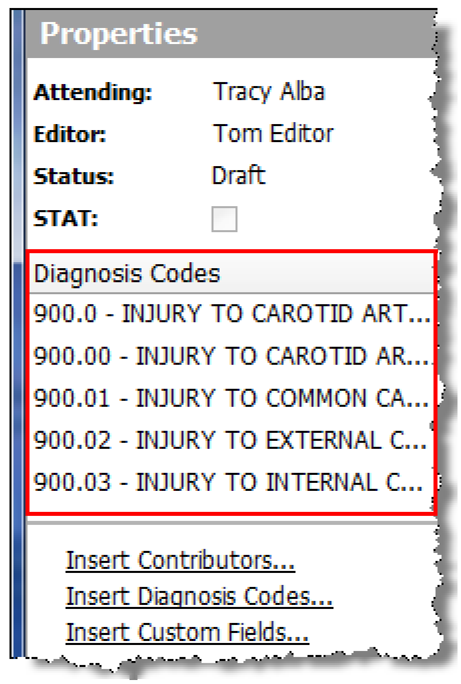
3. Click **Search**. The code or codes you searched for appear in the list.



4. Select the check box next to each code you want to associate with your report. The codes appear in the **Selected Codes** list.



5. When finished, click **OK**. The codes you selected appear in the **Diagnosis Codes** section of the **Properties** list (see illustration at right).



Adding a Custom Field to a Report

***Tip:** For more information, see Custom Fields, beginning on page 325.*

Custom fields are sets of metadata for an order (such as measurements, radiation dosage, flagged studies, and so on) that administrators can customize for each site.

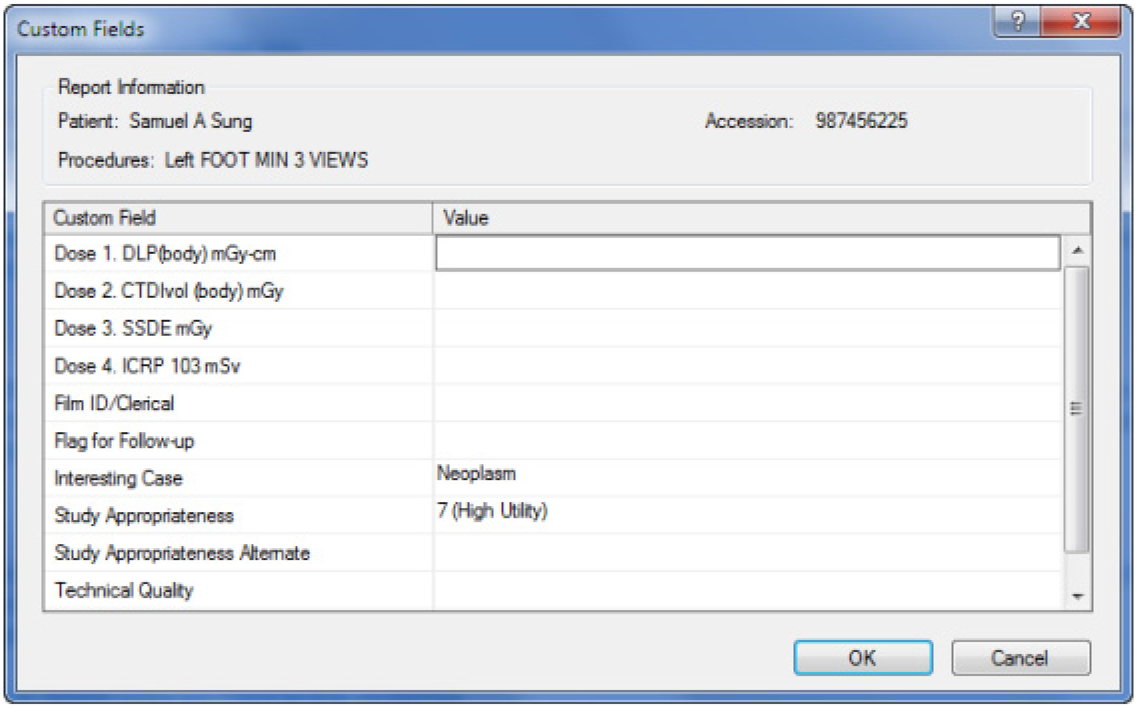
Custom fields can be:

- Populated by technologists on unreported orders, by administrators, or by radiologists during reporting.
- Defined as free-text or pick lists, and marked as required, in which case the radiologist is forced to give them a value before signing the report.
- Used as merge fields in AutoText.

In addition, custom fields can be categorized (associated with one or more procedure codes) by an administrator. In this case custom fields are presented only for orders with matching procedures.

To insert custom fields into your report:

1. In the **Report Editor** window, select **Properties** from the navigation panel and click the **Insert Custom Fields** link (or click **Insert > Custom Fields** from the menu bar). The **Custom Fields** dialog box opens.



2. Click the **Value** column to assign a value to the custom fields. Some custom fields are set up with drop-down lists, while others require that you type in a value.

   Note: *You do not have to select values for all of the custom fields; only for the fields that pertain to your report. In the above example illustration, only the* ***Interesting Case*** *and* ***Study Appropriateness*** *fields would appear in the* ***Custom Fields*** *section.*

3. When finished populating the custom fields for your report, click **OK**. The selected custom fields appear in **Custom Fields** section of **Properties**.

Adding a Note to a Report

Click the **Notes** button to display any notes that have been created for the current patient or report. You can insert a note by going through the menu bar, **Insert > Notes**, or by right clicking in the **Notes** pane and selecting **Create New**. A note can be associated with the patient or with the report.

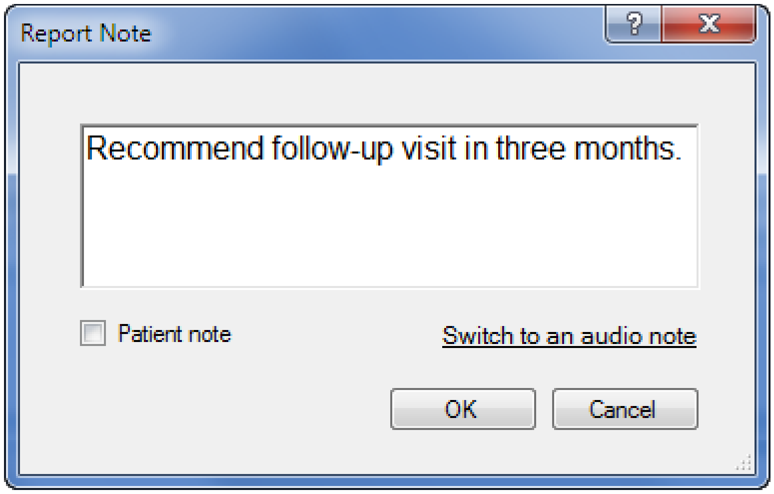
Note: *By default, a note is associated with the current report only. Select* ***Patient Note*** *to associate the note with all reports for this patient. An example of when to use* ***Patient Note*** *might be when the patient has a specific drug allergy.*

To open the Report Note dialog box:

- In the **Report Editor** window, select **Notes** from the navigation panel and click the **Insert Note** link (or click **Insert > Note** from the menu bar). The **Report Note** dialog box opens.

To insert a note into your report:

1. Type your text in the **Report Note** text box.



2. If you want to associate your note with the patient, select the **Patient note** check box. Otherwise the note is associated with the report itself.
3. When finished, click **OK**. The note appears in the **Notes** list with your name, the date and time you added the note, and the text of your note.

Adding an Attachment to a Report

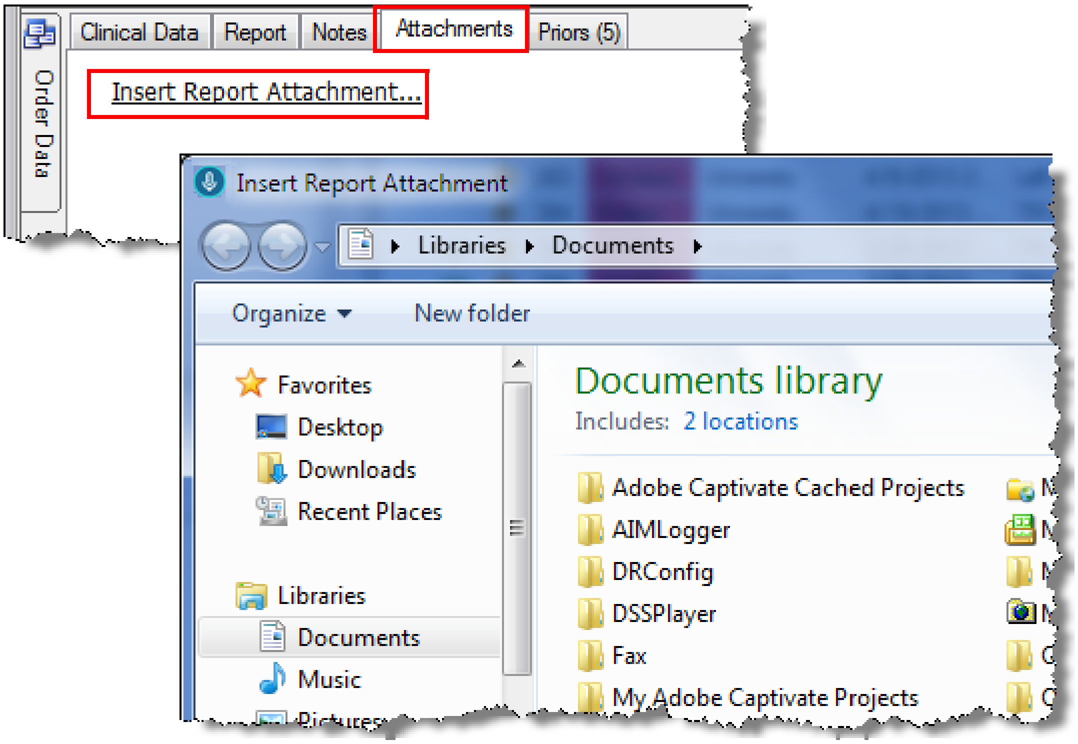
There are actually two locations from which you can add an attachment to a report:

- From the **Explorer** window **Attachments** tab, shown below, or
- From the **Report Editor** window **Attachments** navigation button.

To insert an attachment from the Explorer window:

1. From the **Explorer** window, select a report.

2. Click the **Attachments** tab.

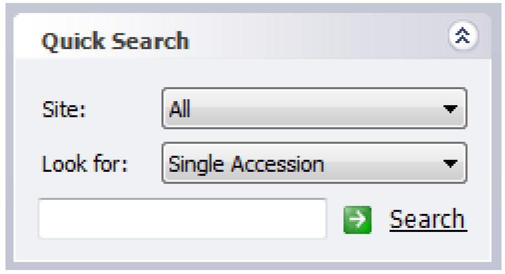


3. Click the **Insert Report Attachment** link and browse for the file that you want to attach.
4. Click **OK** to insert the attachment. The attachment file appears on the **Attachments** tab.
5. To view your attachment, double-click it or right-click and select **Open**.
6. If you want to attach another image or document, click **Insert Report Attachment** again.

Find Reports with Quick Search

Note: *If you do not see the Quick Search section on your screen, your system administrator has disabled this feature.*

In addition to with **Worklists**, **My Reports**, and **Browse**, you can also search for orders and reports using **Quick Search**. Use this section to search for orders or reports based upon **Single Accession**, **Multiple Accessions**, **MRN**, or **Patient Last Name**.



To search for an order or report using Quick Search:

1. Select a site from the **Site** drop-down list, which lists all the sites in which you have an active role. (The **Site** drop-down does not appear if you have an active role in only one site, or if your organization does not use multiple sites.)
2. In the **Look for** drop-down list, select either **Single Accession**, **Multiple Accessions**, **MRN**, or **Patient Last Name**.

   Note: *You can search for multiple accessions by entering each accession number on a separate line; after each accession number, press* ***Enter****.*

3. In the text entry area, type the data to find. You can use the asterisk (*) or the percentage sign (**%**) as wild-card search characters if you do not know the exact name or number. For example, enter **Smi*** to look for all patients whose last name begins with those letters.
4. Click the **Search** button. The Search Results Table lists all reports that match the search criteria you specified.

Tips for Quick Search

- **Quick Search** by accession number is more efficient if the site uses a fixed number of characters for its accession numbers. In this scenario, the search is executed automatically when the proper number of characters is entered. In any case, if one or more orders are found when searching by accession, they are automatically opened for reporting, as long as the user has the proper rights. On the other hand, if the specified accession is not found, you can create a temporary order with that accession number.

Changing Your Preferences

To help tailor the system to your needs, several of the settings in the *PowerScribe 360 Reporting* application can be modified.

To change your preferences, click **Tools** > **Preferences**. Refer to the following topics as a guide for modifying your preferences.

Note: *Many preferences do not apply to editors. Only the ones that apply to editors are listed and described in the following tables.*

Changing Your General Preferences

Click **Tools** > **Preferences**, click the plus sign (+) next to **Reporting**, and select **General**.

Preference	Description	Default
Highlight text on playback	If selected, the text you hear during audio playback is highlighted. If not selected, the text is underlined.	**Yes**
Warn on application exit	If selected, the application displays a warning dialog box when the user attempts to exit the application.	**No**
Move cursor on AutoText insert	Controls the behavior of the cursor when inserting an AutoText: • **End of AutoText**: The cursor automatically moves to the end of the inserted AutoText. • **First Empty Field**: The cursor automatically moves to the first blank fill-in field. • **First Field**: The cursor automatically moves to the first fill-in field, regardless of whether it is blank or contains default text.	**End of AutoText**

Changing Your Fonts and Colors Preferences

Click **Tools > Preferences**, click the plus sign (+) next to **Reporting**, and select **Fonts and Colors**.

Preference	Description	Default
Default font face	Allows you to select the type of font to use in your reports (for example, Arial, Times New Roman, and so on).	**Arial**
Default font size	Allows you to select the size of your selected font (in points).	**12**
Restore defaults button	Returns the font preferences to their default system settings	**N/A**
Enable custom colors	When selected, allows you to customize the colors used for the various types of text in your reports: • Select colors for Plain Text, Dictated Text, AutoText Text, Field Highlight, Merge Field Text, and Hyperlink Text • Select the color for highlighting text as it is played back (if you selected the **Highlight Text on Playback** preference) • Select colors for the **Normal Background** (when you are not dictating) and the **Dictation Background**	**Not selected**
Apply custom colors to entire application	When selected, applies the colors you selected in **Enable Custom Colors** to additional windows in the application.	**Not selected**

Changing Your Dictation Preferences

Click **Tools > Preferences**, and select **Dictation**.

Preference	Description	Default
Use PC speaker for sound alerts	If selected, audible tones are reproduced using the speaker in your computer.	**Yes**

Changing Your Workflow Preferences

Click **Tools** > **Preferences**, and select **Workflow**.

Preference	Description	Default
Perform spell check at signoff	If selected, the spelling checker automatically runs before signing the report.	**Yes**

Changing Your Foot Pedal Preferences

Click **Tools** > **Preferences**, and select **Foot Pedal**.

Note: *If you do not have a foot pedal connected to your computer, this section does not appear.*

Default Settings for Each Foot Pedal Button

Button	Default Setting
Left	Fast Forward
Center	Toggle Play on/off
Right	Rewind

Refer to *Optional Settings for the Foot Pedal Buttons* beginning on page 450 for a table of all possible settings for each foot pedal button.

Chapter 18

Order and Report Management

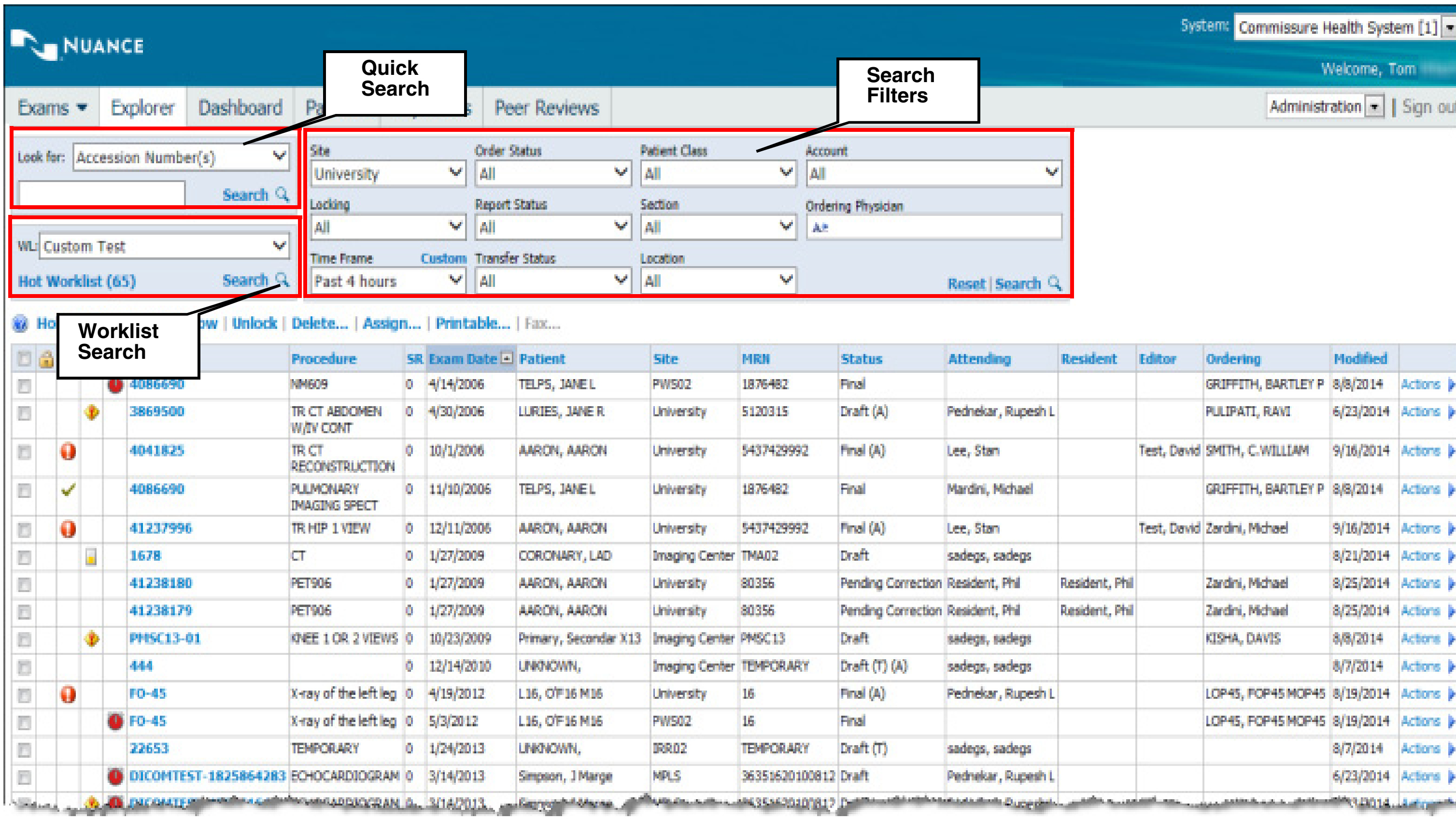
Objectives

In this chapter, you will:

- Manage orders and reports on the Explorer tab
- Use the Dashboard tab
- Create templates for print, fax, and cover sheets

Managing Orders and Reports on the Explorer Tab

You can use the **Explorer** tab in the **Exams** group to find and manage orders and reports. This tab provides access to the orders and reports in your system. It contains a search area for quick search by accession numbers and patients, another to invoke worklists, and another for using search filters. The system remembers your filter selections from one session to the next.



Once you have found the order you want to see, you can take various actions on it. You can:

- Associate an order with a report
- Reset an order's status to 'Draft'
- Modify an order's priority level
- Modify a report's diagnosis codes
- Change values in the custom fields
- Change a patient's MRN
- Download a printable version

Report audio is available in the Explorer only if the **Save Audio with Report** dictation preference is in effect (see page 75). A Nuance representative must configure the amount of time the system is to save the audio files.

Searching for Orders or Reports Across All Sites

Use the **Look for** field to search for orders or reports across all sites in a multi-site system.

Note: *The Look for search option does not take into account any of the other drop-down filters on this tab. These filters do not apply when you are doing a quick search.*

To search for orders or reports:

1. In the **Look for** drop-down list, select the criterion for the search you want to perform: Accession Number, Patient MRN, or Patient Last Name.
2. In the text entry field, type all or part of the accession number, MRN, or name.
3. Click **Search**. Any orders or reports that match your criteria appear in the results grid.

Tips:

- You can use an asterisk as a wild-card character; for example, select Patient Last Name and then type **Smi*** to find patients whose last names begin with Smi. Or, select Accession Number and then type **1234, *56***. The search returns the accession number 1234 and all the accessions that contain the string 56.
- You can use the percent character as a wild-card replacement for one or more characters; for example, select Patient MRN and type **1111%2**. The search returns MRNs such as **11102**, **11142**, **11162**, and **11192**.
- To search for multiple accessions, enter each accession followed by a comma.

Retrieving Worklists

In the **WL** (worklist) box, you can execute previously-defined, system-wide worklists. For information on creating worklists, refer to Chapter 16.

To retrieve a worklist:

1. In the **WL** drop-down list, select the desired worklist.
2. Click **Search**. Any orders or reports that meet the criteria in the worklist appear in the results grid.

Using the Search Filters

This set of filters allows you to search for orders, reports, or both that meet the criteria you select. Filters with a value other than **All** create a logical AND expression; that is, the filter retrieves only orders and reports that meet *all* your criteria.

To search using the filters:

1. Select or enter one or more of the following criteria for your search.
   - **Site**: In a multi-site system, search for orders and reports in a particular site.
   - **Order Status**: Search for orders of a particular status. The table below describes each status:

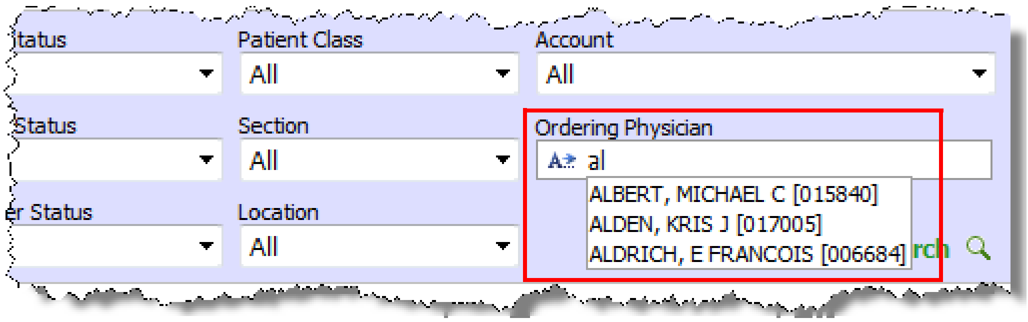
Status	Description
All	Uses all order statuses in the search.
Canceled	Order was canceled.
Completed	Order has been completed and is ready for reporting.
Scheduled	Order has been scheduled but not performed.
Temporary	Indicates a temporary order.
Dictated Ext.	

   - **Patient Class**: Search for a particular type of patient (Inpatient, Outpatient, Pre-Admit, Emergency, Recurring Patient, or Obstetrics).
   - **Account**: Search based on the resident who dictated the report, or the attending physician who dictated or is assigned to the report. Or, search by the transcriber or technologist. Inactive user accounts are omitted from the list.
   - **Locking**: Search based on a report's lock status (All, Locked, Unlocked, Assigned, Unassigned, Locked or Assigned, Unlocked and Unassigned). Locked reports are those currently being dictated.
   - **Report Status**: Search for reports of a particular status. The table below describes each status:

Status	Description
Addended	One or more addenda have been created for a final report. Addenda are reports themselves and the aforementioned statuses apply to them too.
All	Uses all report statuses in the search.
Completed (All) and Completed (Unreported)	Exam has been performed and is ready for dictation.
Corrected	The report has been revised by an editor.
Correction Rejected	The provider clicked the Reject button and returned the report to the editor.
Draft Draft (A) Draft (S) Draft (T)	Report has been started and saved, but not signed. **A** indicates an addendum. **S** indicates scheduled. Depending on the interface configuration the report might not be eligible to be sent to the RIS until the order is completed. **T** indicates temporary.

Status	Description
Final Final (A) Final (Asgd) Final (S) Final (T)	Report has been completed and signed by an attending. **A** indicates an addendum. **Asgd** indicates an assigned report that is pending an addendum. **S** indicates scheduled. Depending on the interface configuration the report might not be eligible to be sent to the RIS until the order is completed. **T** indicates temporary.
Non Final	Report has not been signed by an attending.
Pending Addendum	An addendum has been assigned to a radiologist but has not been started.
Pending Correction	Report has been dictated and queued for correction.
Pending Signature	Report has been dictated and queued for signature.
Preliminary	Pertains to any report whose status is not final.
Rejected	Appears when a corrected report is returned to an editor by an attending or resident, or when a Pending Signature report is returned to a resident by an attending.
Reported	Shows all reports that contain dictation. Drafts, Finals, and so on.
Scheduled	Exam has been scheduled but not yet completed. Sometimes, the exam has been completed but the status has not been updated in the RIS. In this case, reports can be dictated, but are not delivered to the RIS until they are marked complete. Some sites may choose not to allow dictation for scheduled orders.
Temporary	Exam has not been received by *PowerScribe 360 Reporting* so a temporary order has been created. In this case, reports can be dictated, but are not delivered to the RIS until the actual order is received.
Unreported	No report has been dictated for the order.
Wet Read	A “pre-draft” state. Either attending or resident providers can create a wet read report. Any attending or resident provider can promote a wet read report to a Draft status. The text of the wet read is maintained once the report is promoted to Draft status.

- **Section**: Search based on customized site sections. This filter is disabled if you have not selected a site.
- **Ordering Physician**: Search for exams ordered by the selected physician from a site. This filter contains only active physicians who have ordered at least one exam, and is disabled if you have not selected a site. Begin typing the physician’s name, and then select the name from the list that appears.

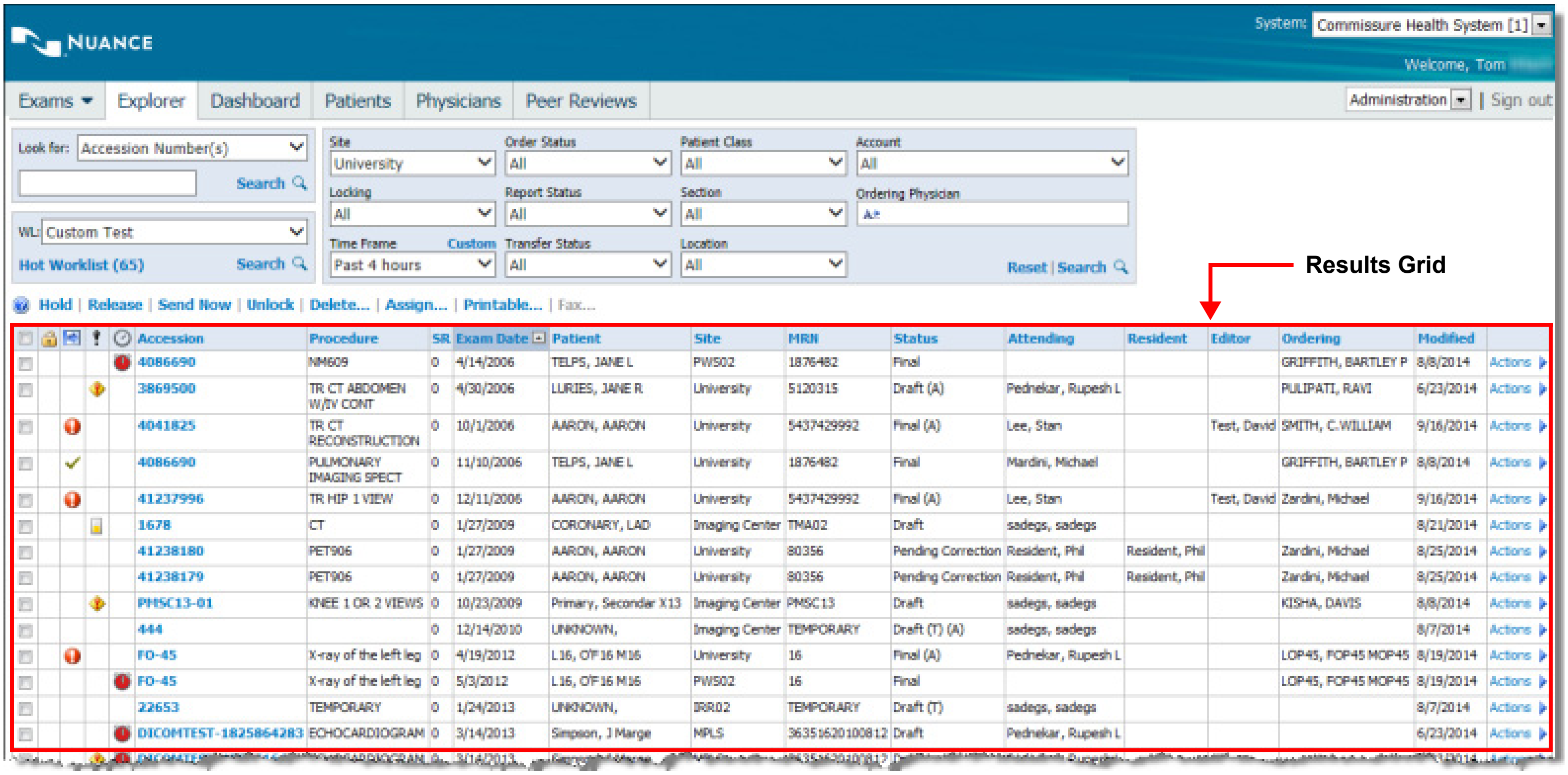


- **Time Frame**: Search for orders or reports based on a period of time. For unreported orders, the filter is based on the time of the exam. For reported orders, the filter is based on the time the report was last modified. This filter includes values such as Past hour, Past 4 hours, Today, Yesterday, Past 2 days, Past 3 days, Past week, Past 2 weeks, Past month, Tomorrow, All Future, and No limit. To specify a range, click **Custom** and then indicate the start and end dates. These dates are inclusive.
- **Transfer Status**: Use this filter to search based on report transfer status (All, Exceptional, Not Ready, Ready, Sent, Rejected, Failed, Held, Queued, Force Send).
- **Location**: Use this filter to search based on the site location associated with the order. This filter is disabled if you have not selected a site.

2. Click **Search**. Any orders or reports that meet your criteria appear in the results grid.

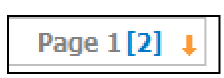
Using the Search Results

The results grid shows all reports and orders that meet your search criteria.



Tip:

- If a report is associated with multiple orders, each order that satisfies the search criteria appears separately in the grid.
- If the report has an addendum, the properties listed (status, attending, and so on) refer to the addendum.
- If the search yields more than one page of results, click the page number at the bottom right corner of the grid to navigate to a specific page. To view the entire list, click the small down arrow at the right of the page number list. The arrow then reverts to an up arrow; click the up arrow to see the results one page at a time.



- Hover your mouse cursor over the page label to see the total number of items found.

- Click any column heading to change the sort order. The software remembers the order you selected. Click the heading again to sort in reverse order.
- If you invoke a worklist that contains a sort order, the results initially appear in this order, and the grid footer displays the order. Apply a different sorting by clicking a column heading.

Note: *There is a limit on the number of orders you can retrieve at one time. This limit is set by default to 500 in the Maximum Explorer Search Records system preference, found on the Explorer Screen tab in the System Preferences window.*

The **Locking and assignment status**, **Report transfer status** and **Priority** columns provide some important information about the reports and orders that appear in the list.

Column	Description
Locking and assignment status	The icon in this column can be either yellow or blue. **Yellow** indicates that the report is open and therefore locked. Hovering your mouse over the lock icon shows who has locked the report. **Blue** indicates an order that is assigned to a radiologist other than the logged-in user. Depending upon a site preference, (page 59) you might, or might not, be able to open this order.
Report transfer status	Hover your mouse over the order's icon to see the status: **Ready**: Report is flagged for inspection; when it is sent depends upon its status and interface options. **Queued:** Report is queued for transmission. **Force Send**: Report is queued for immediate re-transmission. **Sent**: Report has been successfully delivered. **Sent & Edited**: Report has been edited since it was distributed; the version of the report in the RIS/HIS is old and does not match what is in *PowerScribe 360 Reporting*. **Final Exported**: Final report has been successfully transmitted. **Rejected**: The RIS rejected the report. **Failed**: An error occurred. **Held**: An administrator interrupted the transmission.
Priority	This column uses icons to indicate an order's **priority**: No icon: Routine priority **STAT** priority **ASAP** (red) **Timing-critical**; **Callback**; or **Pre-op** (yellow) **Low priority** (green)
TAT Deadline	Indicates reports that have reached or surpassed their turnaround time deadline: Indicates the report is past its deadline. Hover your mouse cursor over the icon to see a tool tip describing how far past the deadline the report is.

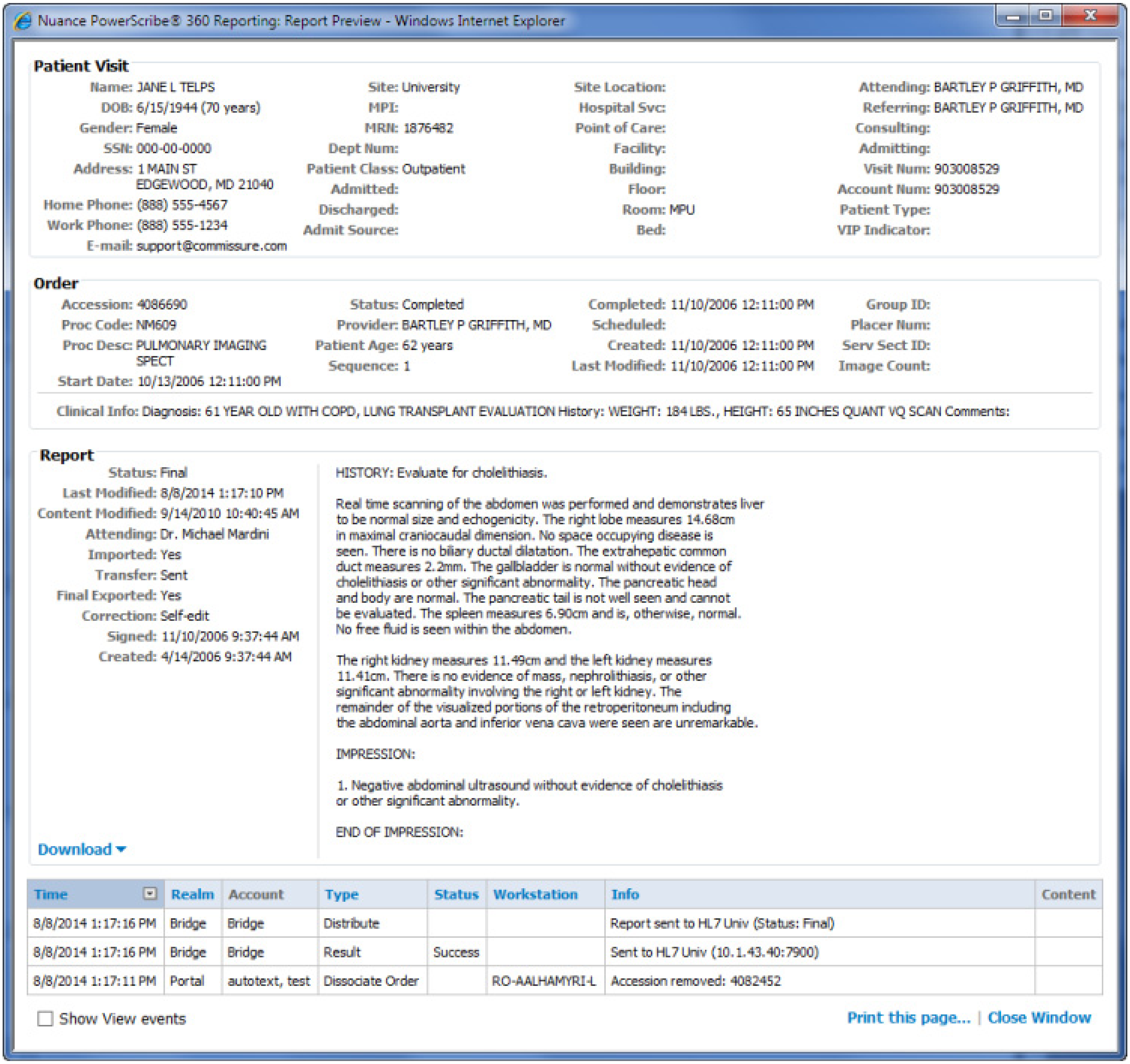
Control Distribution of Preliminary Reports

In order to better control automated distribution of preliminary reports, the following steps occur when a provider marks a report as Preliminary:

1. An Attending provider dictates a report and saves it as Preliminary (Residents will Approve; Editors will Finish).
2. The Preliminary report appears with a green check mark indicating it was sent successfully.
3. An attending re-opens the Preliminary report, edits, and saves the report.
   a. After saving, the report is NOT distributed.
   b. The report appears with a green check mark followed by an asterisk (*), indicating that the report was edited since the time it was distributed. This also means that the version of the report in the RIS/HIS is old and does not match what is in *PowerScribe 360 Reporting*.
   c. The report is once again marked as Preliminary (or Approve or Finish).
   d. The report appears with a green check mark but with no asterisk, indicating that the report was distributed. The version of the report in the RIS/HIS and in *PowerScribe 360 Reporting* are now the same.

Order/Report Preview

Each accession number in **Accession** column of the results grid is a hyperlink to an order and report preview page. This printer-friendly page also provides patient data, exams associated with the report, the report's addenda, and any notes, custom fields, or attachments.



Nuance PowerScribe® 360 Reporting: Report Preview - Windows Internet Explorer

Patient Visit

Name: JANE L TELPS
DOB: 6/15/1944 (70 years)
Gender: Female
SSN: 000-00-0000
Address: 1 MAIN ST
EDGEWOOD, MD 21040
Home Phone: (888) 555-4567
Work Phone: (888) 555-1234
E-mail: support@commissure.com

Site: University
MPI:
MRN: 1876482
Dept Num:
Patient Class: Outpatient
Admitted:
Discharged:
Admit Source:

Site Location:
Hospital Svc:
Point of Care:
Facility:
Building:
Floor:
Room: MPU
Bed:

Attending: BARTLEY P GRIFFITH, MD
Referring: BARTLEY P GRIFFITH, MD
Consulting:
Admitting:
Visit Num: 903008529
Account Num: 903008529
Patient Type:
VIP Indicator:

Order

Accession: 4086690
Proc Code: NM609
Proc Desc: PULMONARY IMAGING SPECT
Start Date: 10/13/2006 12:11:00 PM

Status: Completed
Provider: BARTLEY P GRIFFITH, MD
Patient Age: 62 years
Sequence: 1

Completed: 11/10/2006 12:11:00 PM
Scheduled:
Created: 11/10/2006 12:11:00 PM
Last Modified: 11/10/2006 12:11:00 PM

Group ID:
Placer Num:
Serv Sect ID:
Image Count:

Clinical Info: Diagnosis: 61 YEAR OLD WITH COPD, LUNG TRANSPLANT EVALUATION History: WEIGHT: 184 LBS., HEIGHT: 65 INCHES QUANT VQ SCAN Comments:

Report

Status: Final
Last Modified: 8/8/2014 1:17:10 PM
Content Modified: 9/14/2010 10:40:45 AM
Attending: Dr. Michael Mardini
Imported: Yes
Transfer: Sent
Final Exported: Yes
Correction: Self-edit
Signed: 11/10/2006 9:37:44 AM
Created: 4/14/2006 9:37:44 AM

Download

HISTORY: Evaluate for cholelithiasis.

Real time scanning of the abdomen was performed and demonstrates liver to be normal size and echogenicity. The right lobe measures 14.68cm in maximal craniocaudal dimension. No space occupying disease is seen. There is no biliary ductal dilatation. The extrahepatic common duct measures 2.2mm. The gallbladder is normal without evidence of cholelithiasis or other significant abnormality. The pancreatic head and body are normal. The pancreatic tail is not well seen and cannot be evaluated. The spleen measures 6.90cm and is, otherwise, normal. No free fluid is seen within the abdomen.

The right kidney measures 11.49cm and the left kidney measures 11.41cm. There is no evidence of mass, nephrolithiasis, or other significant abnormality involving the right or left kidney. The remainder of the visualized portions of the retroperitoneum including the abdominal aorta and inferior vena cava were seen are unremarkable.

IMPRESSION:

1. Negative abdominal ultrasound without evidence of cholelithiasis or other significant abnormality.

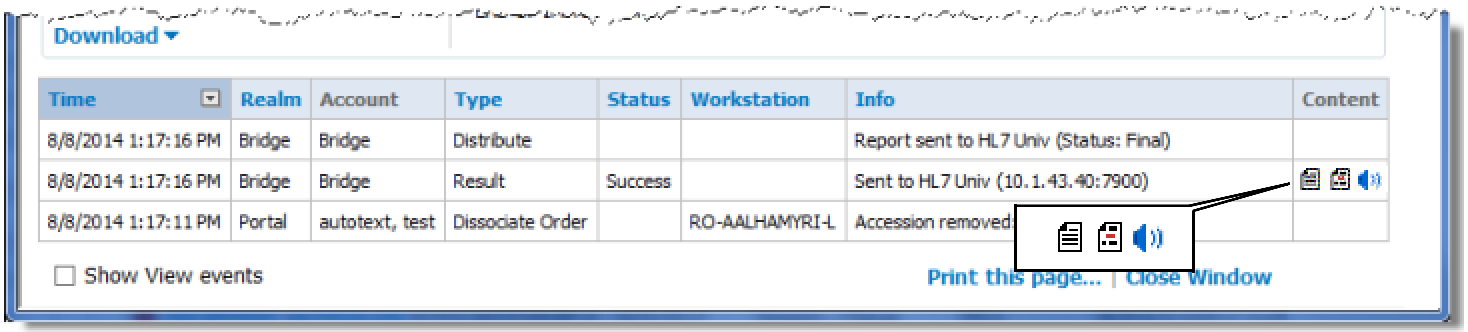
END OF IMPRESSION:

Time	Realm	Account	Type	Status	Workstation	Info	Content
8/8/2014 1:17:16 PM	Bridge	Bridge	Distribute			Report sent to HL7 Univ (Status: Final)	
8/8/2014 1:17:16 PM	Bridge	Bridge	Result	Success		Sent to HL7 Univ (10.1.43.40:7900)	
8/8/2014 1:17:11 PM	Portal	autotext, test	Dissociate Order		RO-AALHAMYRI-L	Accession removed: 4082452	

Show View events

Print this page... | Close Window

In addition to the preview, there is an audit trail for the order and report, showing when the report was received from the RIS, when it was created, edited, signed, and so on. In the **Content** column of the audit grid, there are icons you can click to download the report content at various steps in the reporting process.



You can download the plain text (*.txt*), the formatted text (*.rtf*), or the dictated audio (*.wav*) of the current report independently of the audited content. These files are available for the number of days specified in the **Keep Content Audit for Final Reports** option in the **System Configuration** dialog box (**Setup > System > Configuration**). Final reports are typically deleted after a few days so that the database does not grow too rapidly.

Holding, Releasing, or Sending an Order or Report

If you hold a report, it is not sent to the RIS, even if it has been signed as preliminary or final. To make a held report or order eligible for transfer, you must use the **Release** option. You can release only completed orders and final reports that have been held.

Note: *You can release preliminary reports only if you have set the **Send Preliminary Results** option and the **Send Dictated Status Updates** option for the Bridge service (**Setup > Bridge**).*

- The **Release** option changes the report's transfer status from Held to Ready, which prepares the report to be examined by the Bridge software. The report may or may not be sent, based on the options configured for the Bridge and for the destination systems.
- The **Send Now** option forces the report to be sent within a few seconds, regardless of the way the Bridge options are configured.

To hold an order or report:

1. Find the report or order you want to hold.
2. Place a check mark next to the report or order.
3. Click **Hold**. You see a confirmation message.
4. Click **OK**. A **Held** icon appears in the **Report Transfer Status** column next to the order or report, indicating that it is being held.

To release an order or report:

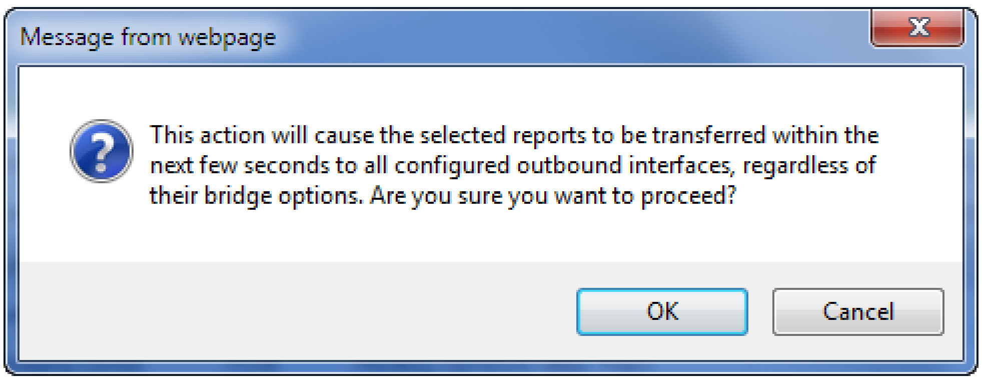
1. Find the report or order you want to release.

   Tip: *Use Held as the Transfer Status filter to search for all held orders and reports.*

2. Place a check mark next to the report or order.
3. Click **Release**. You see a confirmation message.
4. Click **OK**. A **Ready** icon appears in the **Report Transfer Status** column next to the order or report, and the order or report is now eligible to be sent.

To send an order or report immediately:

1. Find the report(s) or order(s) you want to send.
2. Place a check mark next to the report(s) or order(s).
3. Click **Send Now**. You see a confirmation message.



4. Click **OK**. The report or order is transferred.

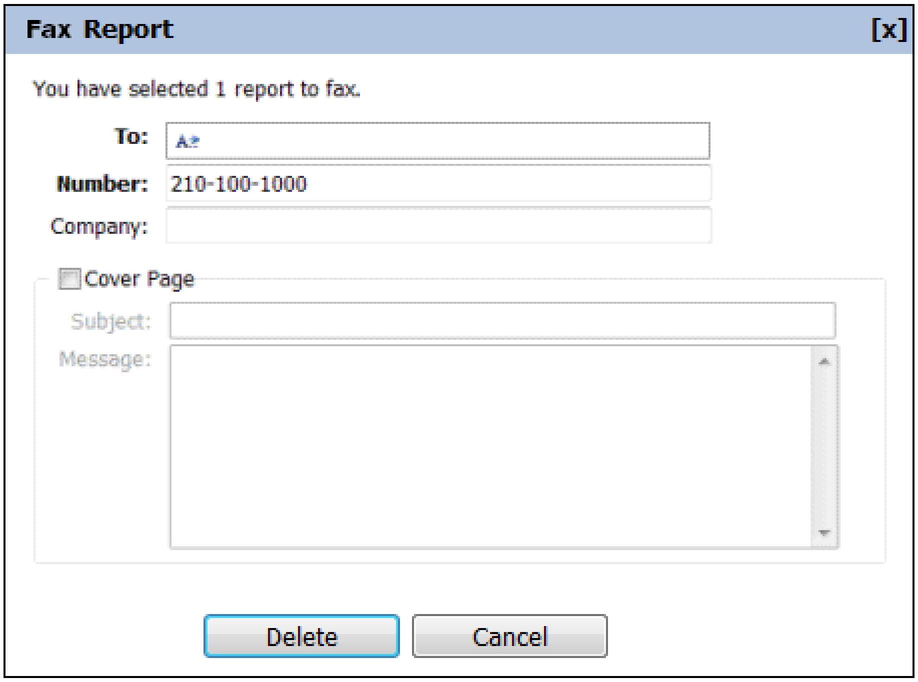
Faxing an Order or Report

You can fax one or more reports or orders from the **Explorer** tab.

To fax orders or reports:

1. Find the report or order you want to fax.
2. Place a check mark next to each item you want to fax.

3. Click **Fax…**. The **Fax Report** dialog box opens.



4. In the **To**: field, select the recipient's name. The default destination is the ordering physician, or the referring physician if the ordering physician name is unavailable.
5. In the **Number**: field, type the fax number.
6. If you want a cover page to accompany the fax, select **Cover Page** and type the Subject and Message that are to appear on the cover page. For information on defining cover page templates, refer to *Creating a Fax Cover Sheet*, beginning on page 515.
7. Click **Send** to send the fax(es).

Unlocking an Order

While a provider is dictating a report on an order, the order is locked to prevent other users from opening it. Later, the order is unlocked. The order might remain locked in some circumstances, such as a loss of network connection. When the provider logs in again when the connection is restored, any locks are automatically cleared. You can use the method below to unlock an order manually, if necessary.

To unlock an order:

1. Find the order you want to unlock.

   Tip: *Use the Locking Status filter to search for all locked orders.*

   The locked order shows a padlock icon next to it.
2. Place a check mark next to the order.
3. Click **Unlock**. The lock is cleared.

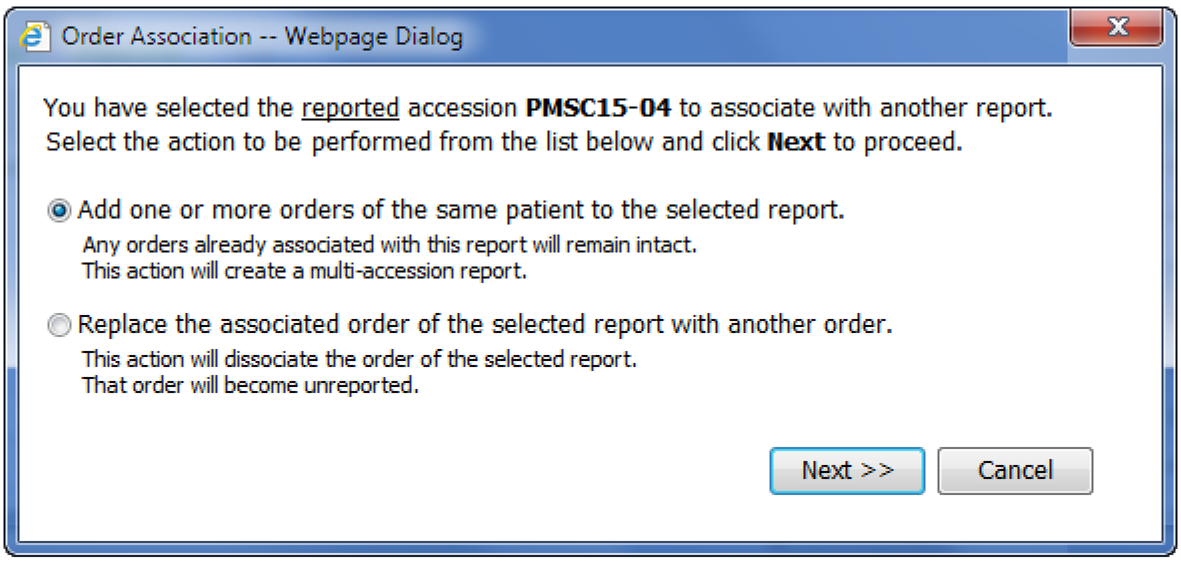
Associating an Order with a Report

Use this feature to associate an order with a report. You can:

- Add another order to a report. Any orders already associated with it remain in place.
- Replace an order with another one.
- Remove an order from a report that has multiple orders.

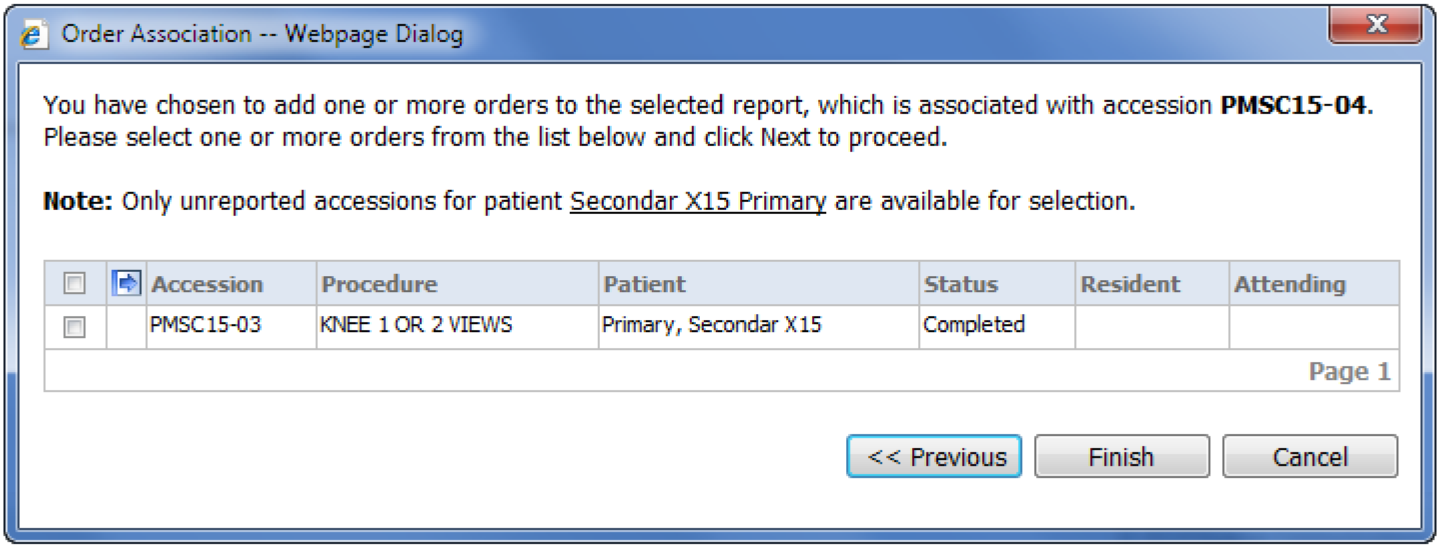
To associate an order with a report:

1. Find the report to which you want to associate an order.
2. Float your mouse cursor over the **Action** link next to the report, and select **Associate...** from the shortcut menu. The **Order Association** dialog box opens.



3. Indicate the action you want to take: Add an order to this report, or replace the existing order with another one. Or, if there are multiple orders associated with a report, you have the option of removing the currently selected order.

4. Click **Next** >>. A list of unreported accessions for this patient is displayed.

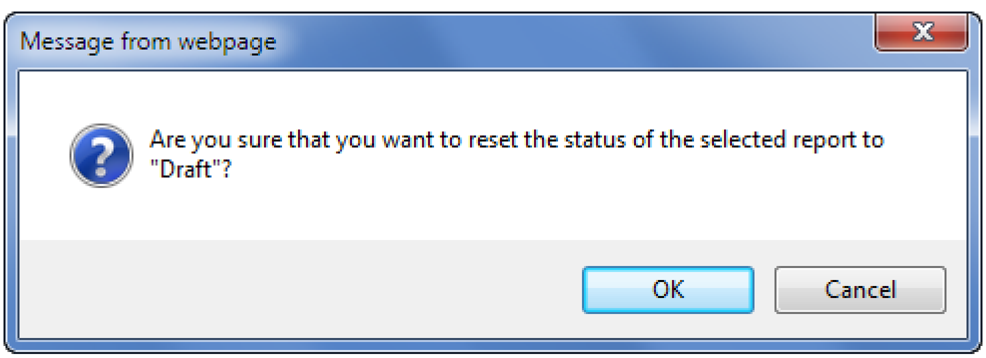


5. Select the order you want to associate with the report and click **Next** >>. A confirmation message indicates the association has been made, or removed, depending on the action.
6. Click **Close**. The original list is updated to reflect your change.

Resetting a Report's Status to 'Draft'

To reset a report to 'draft':

1. Find the report whose status you want to reset.
2. Float your mouse cursor over the **Action** link next to the report, and select **Reset to draft** from the shortcut menu. A confirmation message appears.

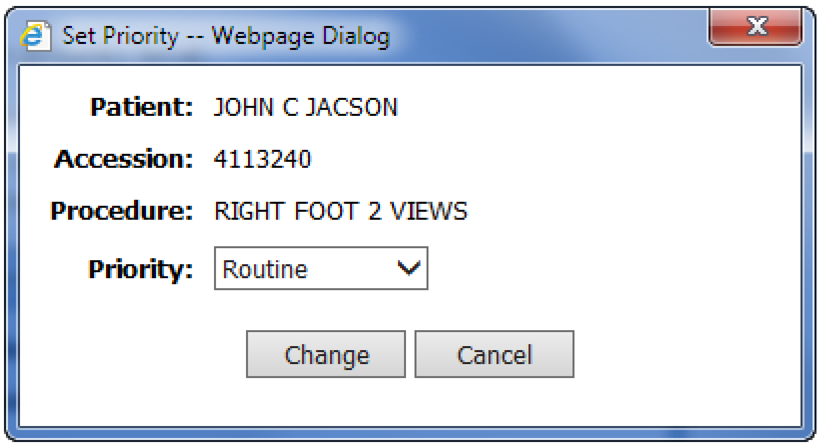


3. Click **OK**. The report's status reverts to 'draft.'

Modifying an Order’s Priority Level

To modify an order’s priority level:

1. Find the order whose priority you want to reset.
2. Float your mouse cursor over the **Action** link next to the order, and select **Set Priority …** from the shortcut menu. The **Set Priority** dialog box opens.



3. Select the priority level you want to assign to this report.
4. Click **Change**. The report’s priority is changed to the level you selected. An icon appears in the **Priority** column to show the priority:

Routine:	No icon
Low priority:	
Timing-critical, callback, or pre-op:	
ASAP:	
STAT:	

Modifying a Report’s Diagnosis Codes

This feature allows you to set diagnosis codes for reported orders.

To modify a report’s diagnosis codes:

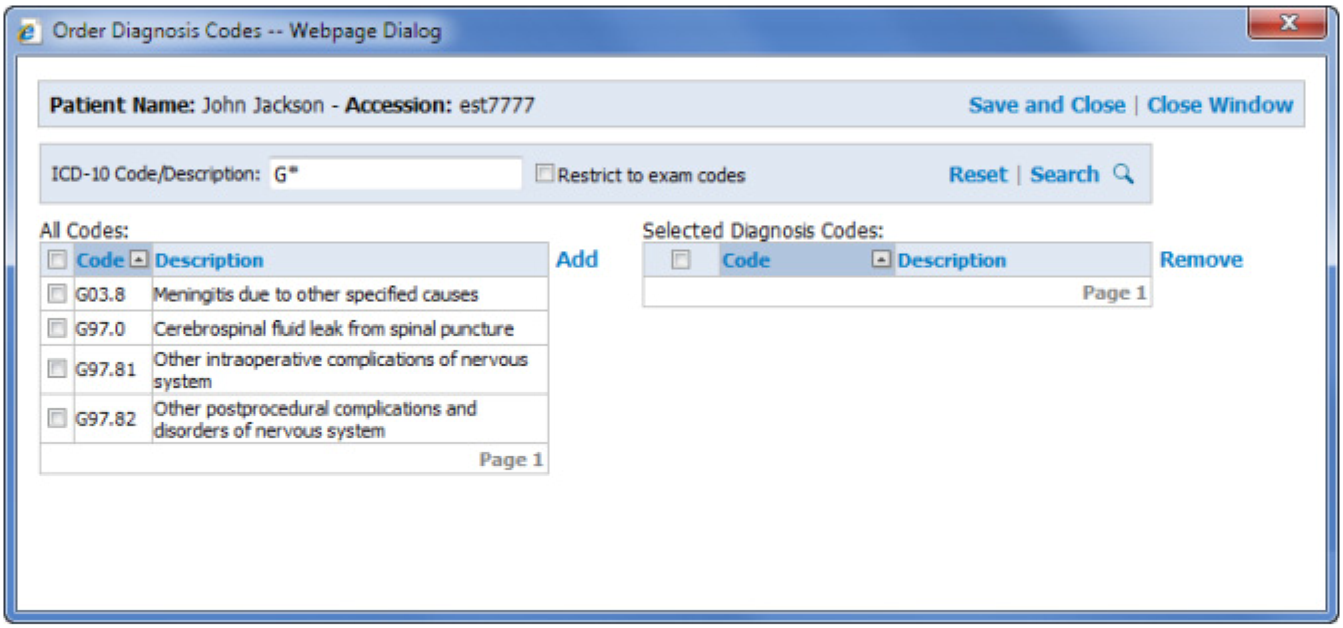
1. Find the report whose diagnosis codes you want to modify.
2. Float your mouse cursor over the **Action** link next to the order, and select **Edit Diagnosis Codes…** from the shortcut menu. The **Order Diagnosis Codes** dialog box opens.

3. Find the diagnosis code you want to assign to the report.

   To find a code:

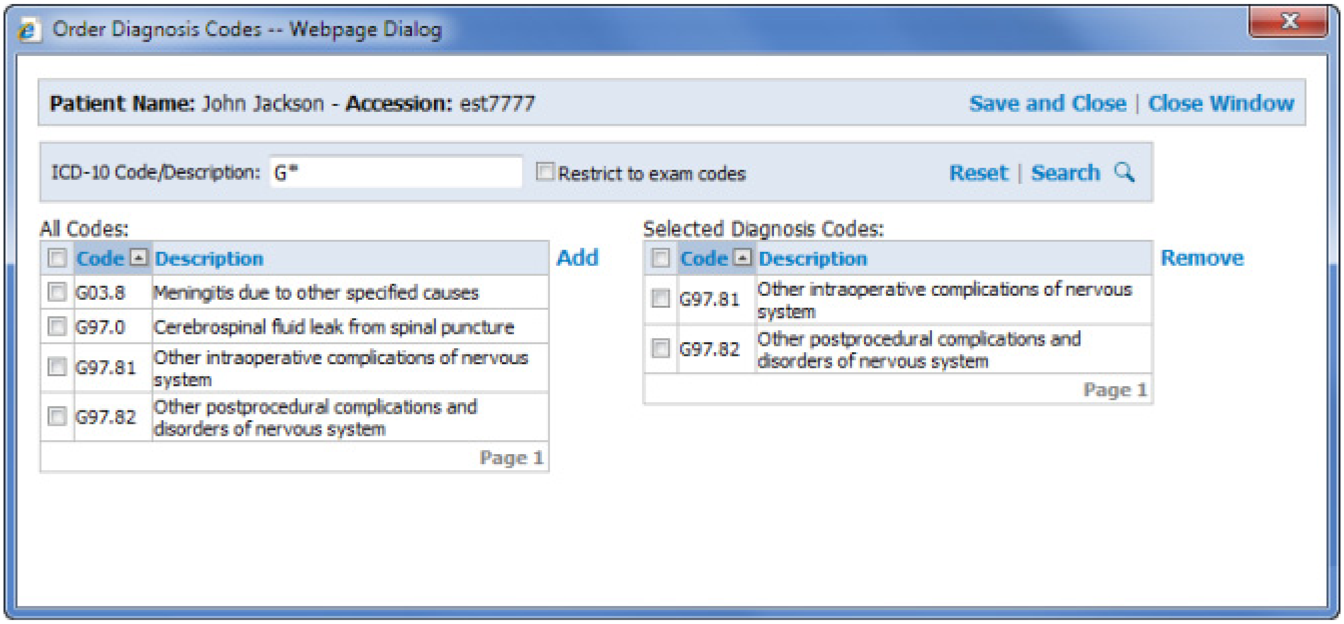
   a. Type all or part of the code or its description in the **Diagnosis Code/Description** field. You can use an asterisk as a wild-card character.

   b. Click **Search** to find the codes. Select the **Restrict to exam codes** option if you want to search only amongst exam codes, and not diagnostic codes. The codes appear in the **All codes** list at the left.



4. Place a check mark next to each code you want to assign to this order. Or, place a check mark in the heading to select all the codes in the list.

5. Click **Add**. The selected codes are added to the **Selected Diagnosis Codes** list at the right. To remove a code, place a check mark next to it and click **Remove**.



6. Click **Save and Close** to assign the codes to the order.
7. Repeat Steps 3 through 6 until you have added all the desired codes to the order.
8. Click **Close Window**.

Modifying an Unreported Order or Report's Custom Field Values

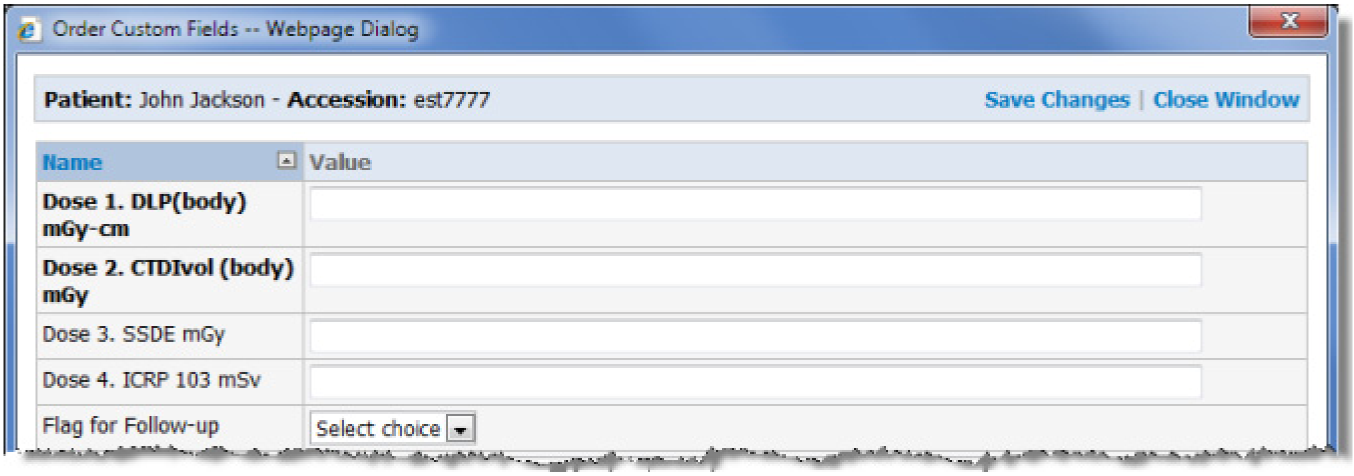
Note: *For more information on custom fields, see Custom Fields, beginning on page 325.*

You can change the values the radiologist or other user has inserted in the custom fields in an unreported order or report.

To modify the custom fields:

1. Find the order or report whose custom field values you want to change.

2. Float your mouse cursor over the **Action** link next to the order or report, and select **Edit Custom Fields…** from the shortcut menu. The **Order Custom Fields** dialog box opens.

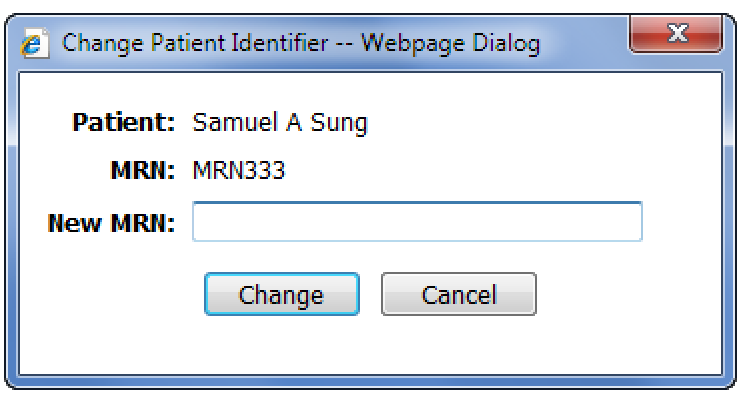


3. Enter or select the appropriate value for each of the custom fields in the order or report.
4. Click **Save Changes**.
5. Click **Close Window** to return to the report list.

Changing a Patient's MRN

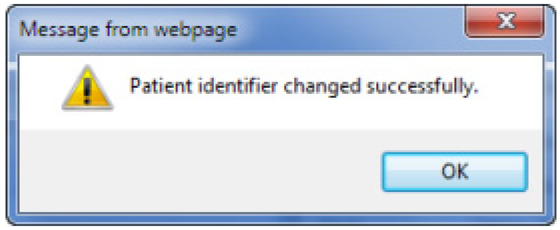
To change a patient's MRN:

1. Find the order or report in which you want to change the patient's MRN.
2. Float your mouse cursor over the **Action** link next to the report, and select **Change Patient MRN** from the shortcut menu. The **Change Patient Identifier** dialog box opens.



3. Type the patient's new MRN.

4. Click **Change**. A notification message appears.



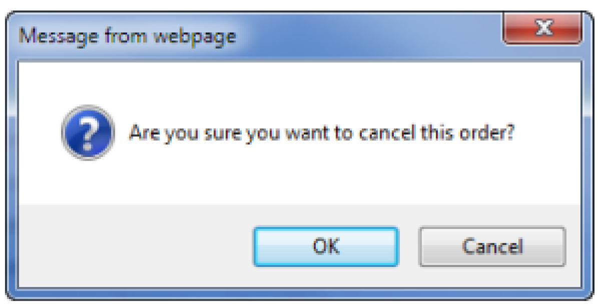
5. Click **OK**.

Canceling an Order

Because some RIS do not send order cancellations through HL7, you can set the status of an exam to **Canceled** to keep the data synchronized between *PowerScribe 360 Reporting* and your RIS. You can cancel only unreported orders whose status is not Temporary or Entered.

To cancel an order:

1. Find the order you want to cancel.
2. Float your mouse cursor over the **Action** link next to the order, and select **Cancel** from the shortcut menu. A confirmation message appears.



3. Click **OK**. The order's status changes to **Canceled**.

Printing an Order or Report

You can print any order or report in the system; the report will appear in the same format as it does when the radiologist prints it from the *PowerScribe 360 Reporting* client application. The report will include any headers, footers, page numbering, or other features you defined in the default print template for the system, site, or site location. For more information on setting up print templates, refer to *Creating a Print Template*, beginning on page 502.

To download a printable report:

1. Find the report(s) you want to print.
2. Place a check mark next to each report you want to print.
3. Click **Printable…**. The standard **File Download** window opens.
4. If you want to view the report(s), click **Open**. The report opens in a Word or WordPad window, depending on the file type. From here, you can save or print the document.

   OR

   To save a copy of the report(s), click **Save**. A standard **Save As** window opens. Navigate to and select the folder where you want to save a Word file containing the report(s), and click **Save**. The file is stored at the location you specified.

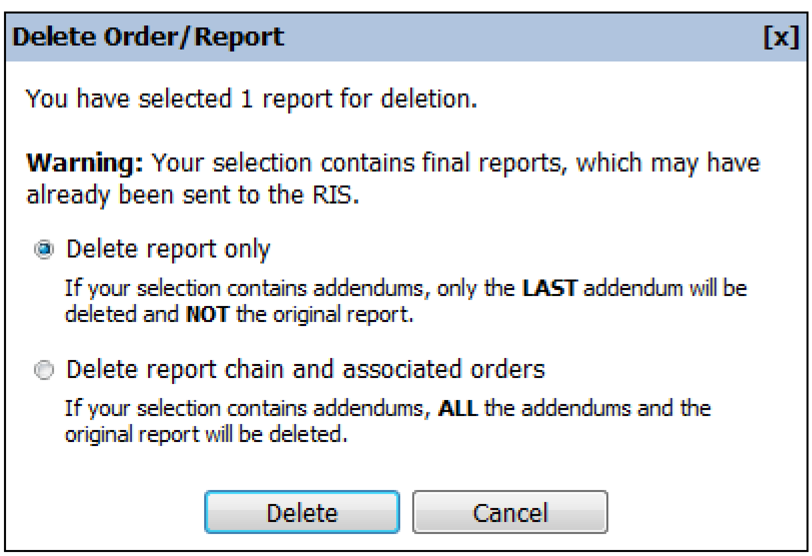
Deleting Reports and Orders

Caution: *Deleting reports or orders is not recommended and should not be done except in rare cases where your RIS is not synchronized with your PowerScribe 360 Reporting system.*

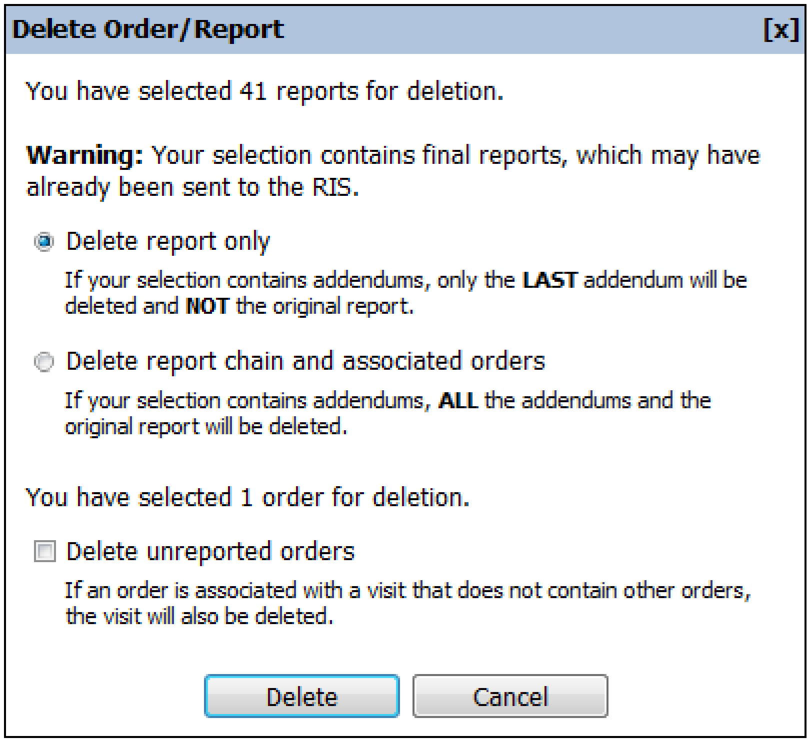
Deleting a report or an order removes it from the *PowerScribe 360 Reporting* system, but does not remove it from the RIS. In most cases, you do not need to delete reports or orders from the system. If an unusual situation requires you to delete a report or order, follow the procedure below.

To delete a report or order:

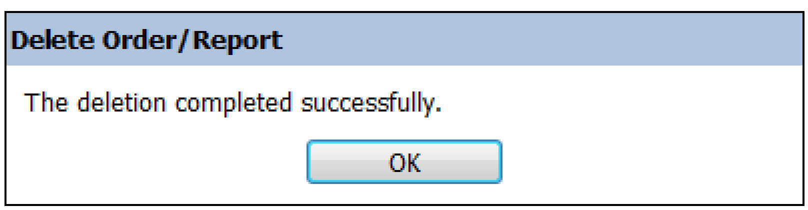
1. Find the order or report you want to delete.
2. Place a check mark next to the order or report.
3. Click **Delete**. A confirmation message appears.



The options you see depend on the order or report you selected. For example, if you delete an order associated with a visit that has no other unreported orders, you have an option to delete the visit:



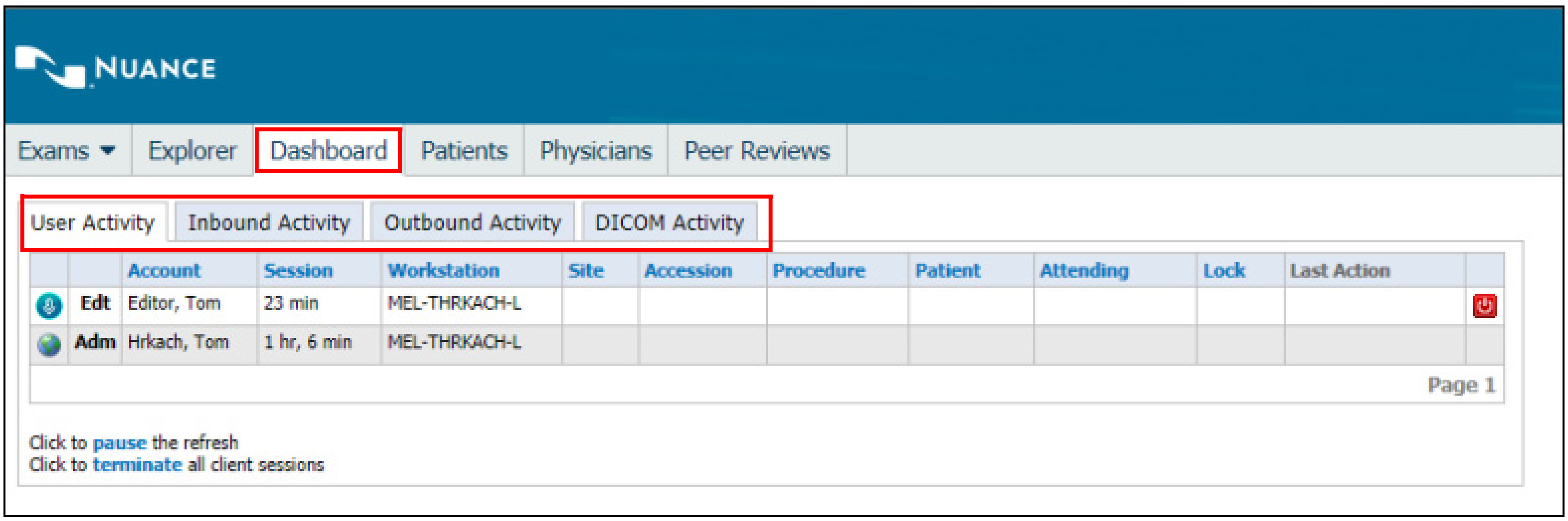
4. Select the appropriate option(s) and click **Delete**. A message indicates the successful deletion of the item(s).



Using the Dashboard Tab

The **Dashboard** tab in the **Exams** group provides a real-time view of exam activity in the system. It has three tabs, each showing a different set of exam-related activities.

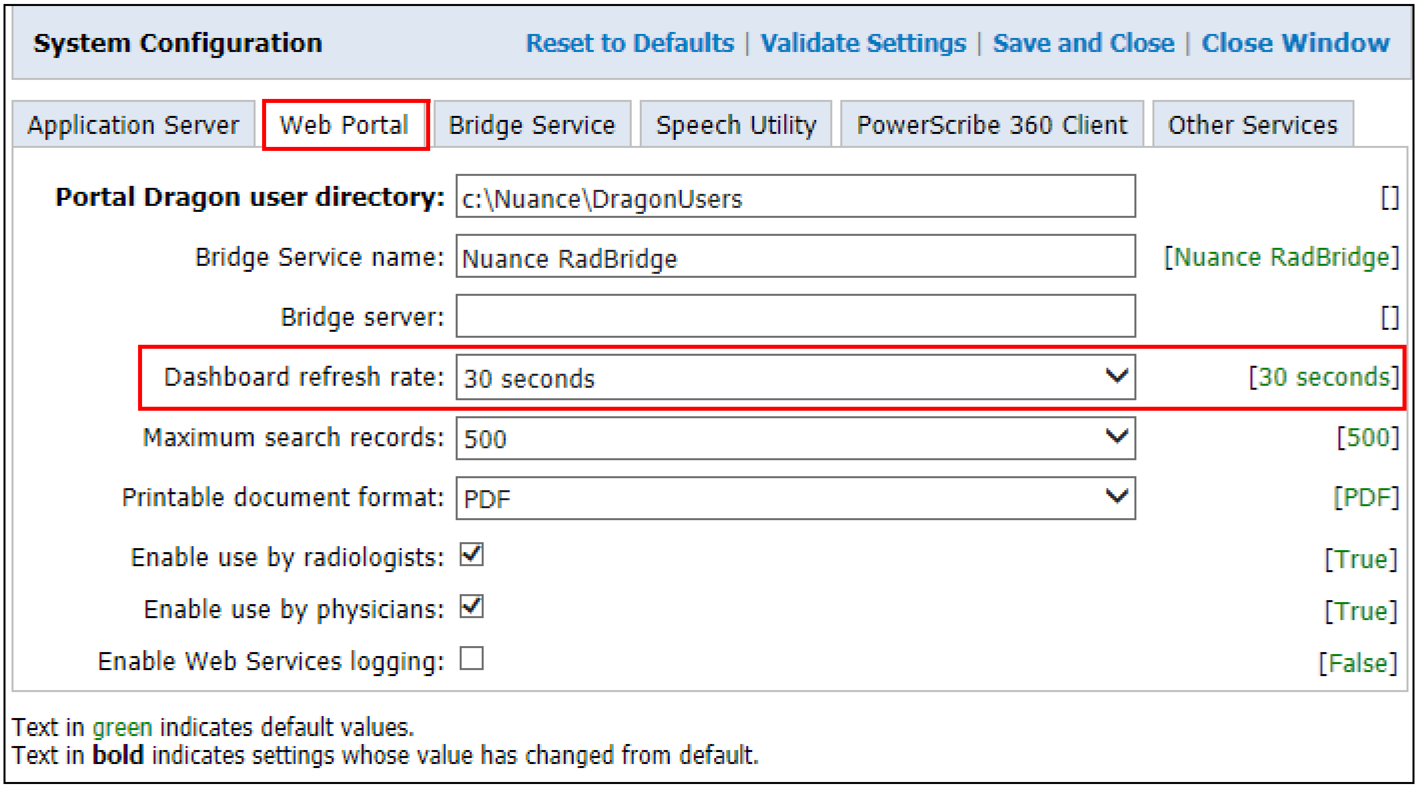
- **User Activity**: Shows all users currently logged into the system, including Portal users, how long they have been logged in, the workstations they are using, the exams on which they are working, and the last action taken on these exams.
- **Inbound Activity**: Shows all recent messages received from the RIS.
- **Outbound Activity**: Shows all recent messages sent to the RIS.
- **DICOM Activity**: If you purchased the DICOM option, this tab is available.



The User Activity tab contains two actions that you can perform. In the far right column of the list, a red and white icon allows you to terminate a client session. Or, in the lower-left portion of the window, you can click the blue **terminate** link to terminate all open client sessions.

Dashboard Refresh Rate

Use the **Configuration** page in the **Setup** group to specify how often the data is updated on the Dashboard. The default is every 30 seconds.



Introduction to Templates

You can create print, fax, and cover sheet templates for your facility's needs. You can design templates for the entire system, for individual sites, and for locations within sites. If your facility is converting from the *RadWhere* application, you can use your existing *RadWhere* templates in *PowerScribe 360 Reporting*.

Templates allow your reports to have a consistent appearance when they are printed or faxed. If you assign a template to the system, all reports printed in the system use that template, unless you also assign templates to individual sites or locations within sites. With a template, a report has the same appearance whether a radiologist prints it from the client application or an administrator prints it from the **Explorer** tab in the *Administrator Portal*.

To tailor a template to your facility's needs, you can use advanced features such as merge fields, tabs, page numbering, headers, footers, tables, and embedded graphics such as logos. And, you can design a template to show a different header or footer on the first page than on the other pages. (Nested tables and separator lines are not supported.)

If desired, you can design separate templates with different headers and footers for each site or location; for example, you might want reports to display a different department name and address at the top of the page depending on the site or location. You can create the same or different templates for printing and faxing.

You can create and edit simple templates in WordPad; for the more advanced features, you will need to use Microsoft Word. You must save print and fax templates as *.rtf* files, not as *.doc* files, before you upload them to your system in the Portal. You can use any *.rtf* file as a basis for a new template.

Note: *Cover sheet templates are not .rtf files; these have a .cov extension and you can create them only in the Microsoft Fax Cover Page Editor utility that comes with Windows.*

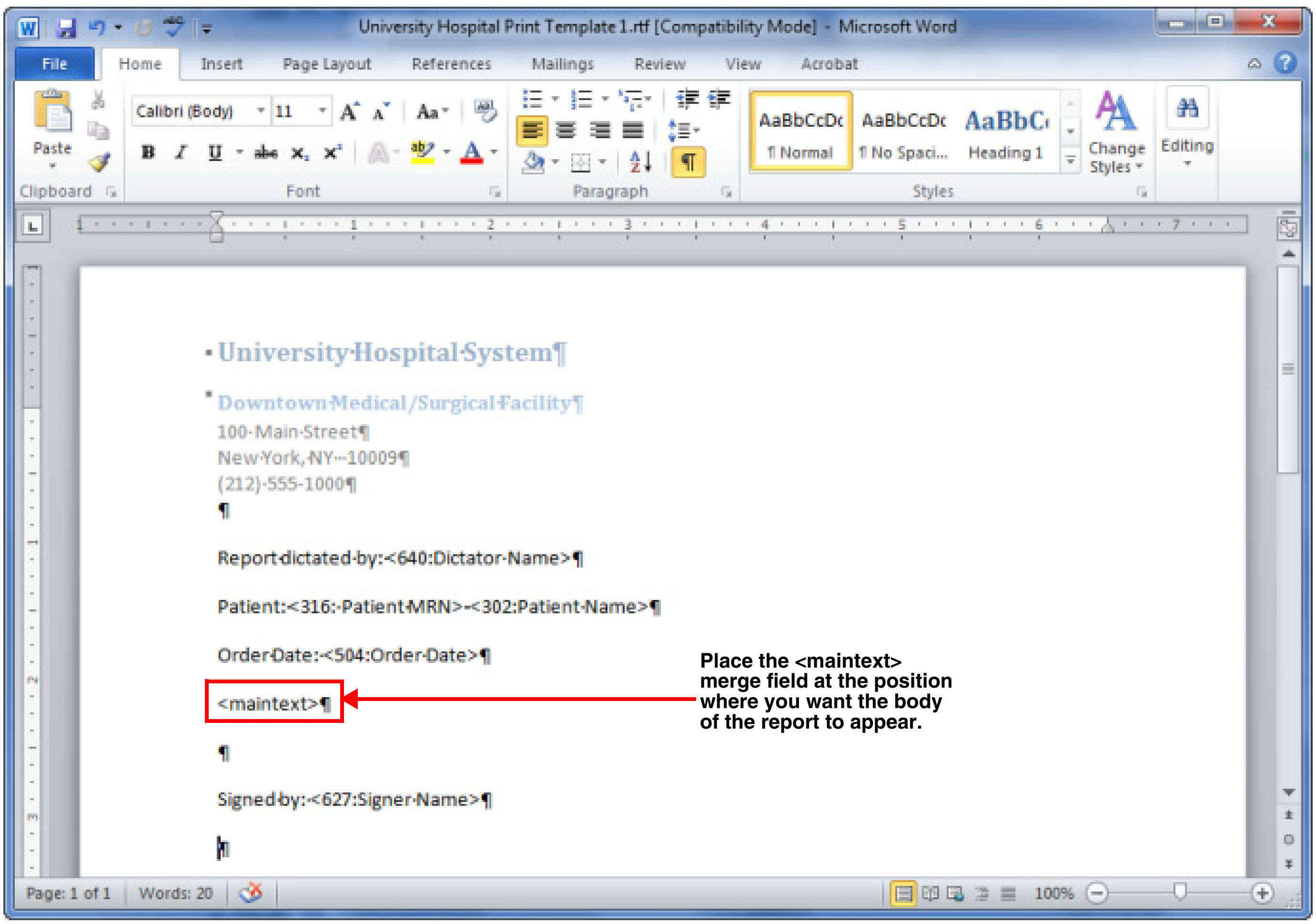
Use the procedures below to create and edit templates that will be available to all users in the system, for individual sites, or for locations within sites.

Creating a Print Template

To add a new print template at the system or site level, you must first create the template as an *.rtf* file in Microsoft Word or WordPad. Once you have created it, you must add it to your *PowerScribe 360 Reporting* system.

To create the template:

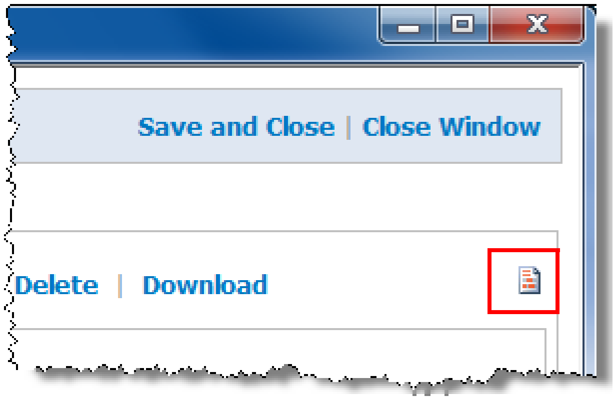
1. Create the template file in Microsoft Word or WordPad.
   - Use Word's advanced features to add headers, footers, page numbering, and so on, if desired.
   - A print or fax template must, at the minimum, contain the <*maintext*> merge field. This field will contain the text of the report; you must place this field at the position where you want the body of the report to appear.
   - You can add other merge fields such as the patient name, patient MRN, attending name, and so on. Below is an example of a print template with merge fields.



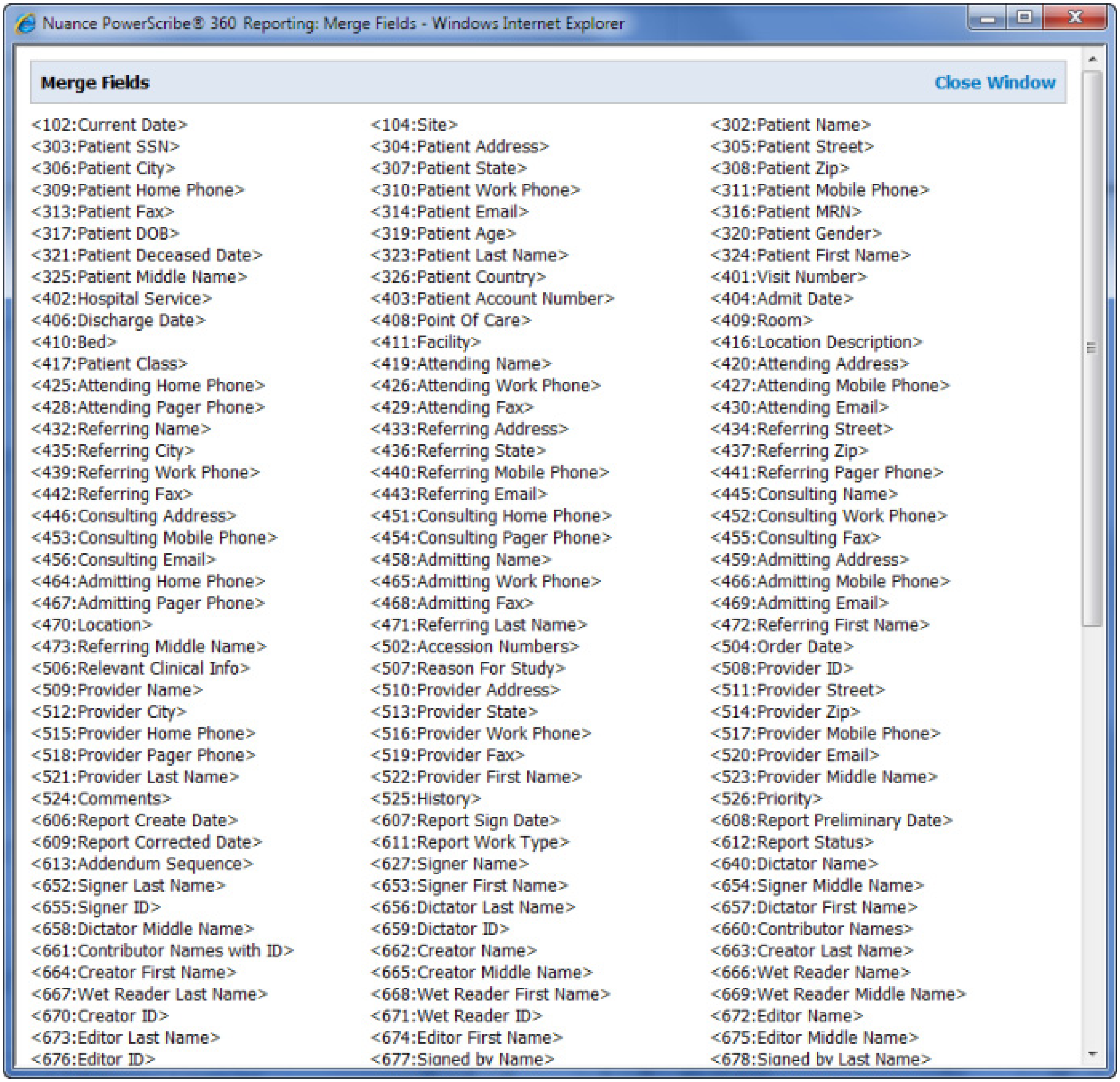
To see a list of all available merge fields:

a. On the **System** or **Sites** tab in the **Setup** group, click **Templates…**.

b. Click the icon at the upper right of the **Print Template** tab.



A window showing the list of merge fields opens.



You can copy any merge field from the list to insert it in the document. For example, to insert the visit number, copy the field **<401:Visit Number>** and paste it at the position in your template where you want the visit number to appear. Although you can use the field number alone or the field name alone, it is recommended that you copy the field exactly as it appears, including the brackets.

Tip: *To insert a custom field, use this format: <10000:Custom:Custom Field Name>. For example, if the custom field name is Radiation Dose, type <10000:Custom:Radiation Dose>.*

Appendix A in this manual also contains a list of the merge fields you can use in your print templates.

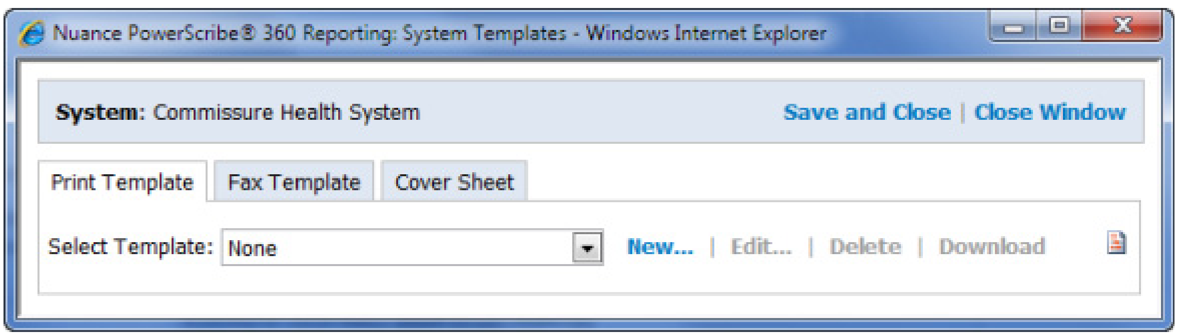
2. When you have finished creating the template, save it as an *.rtf* file. Make a note of the path and folder location where you saved the file. Then continue with the procedure below to upload the template to your system.

To add a print template to the system, site, or location:

1. To add a print template at the system level:

   a. On the **System** tab in the **Setup** group, click **Templates**.

   b. Select the **Print Template** tab.



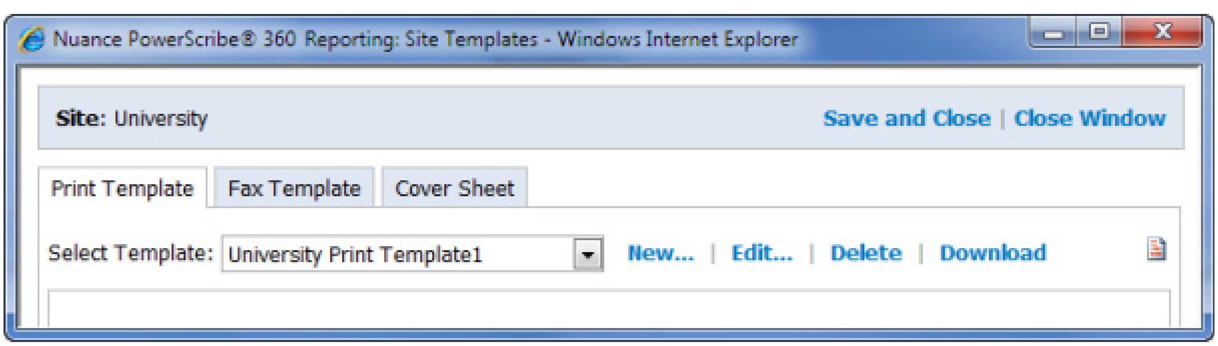
OR

To add a print template at the site level:

a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

b. Click **Templates**.

c. Select the **Print Template** tab.

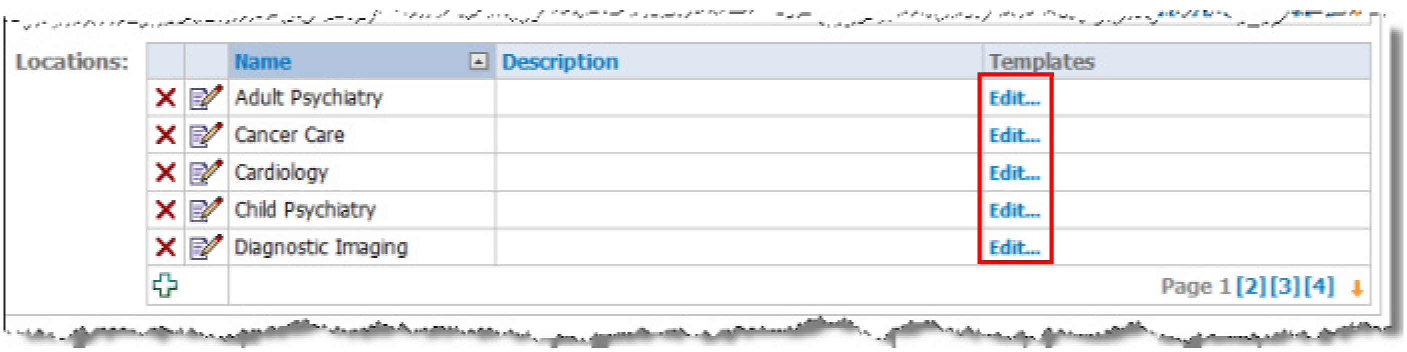


OR

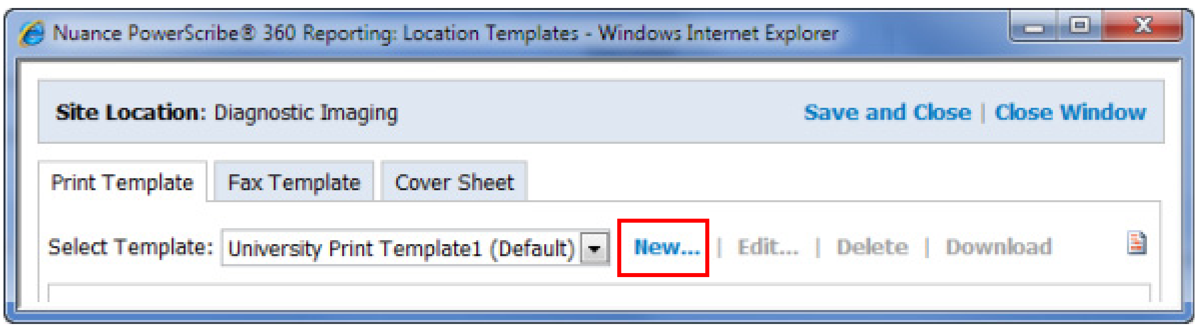
To add a print template at the site location level:

a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

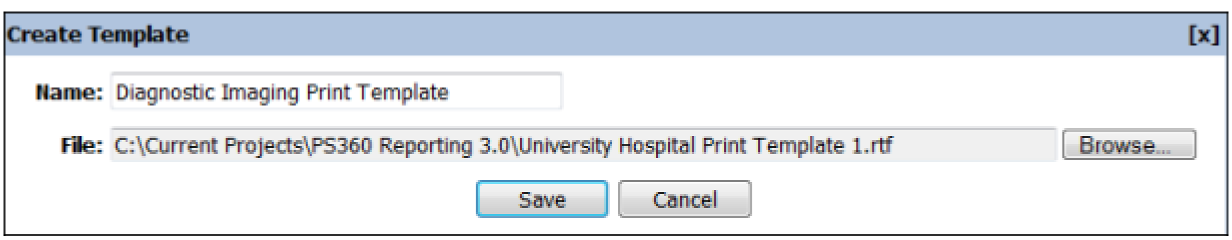
b. Next to the location for which you want to add a template, click **Edit** in the **Templates** column.



2. Click **New**.

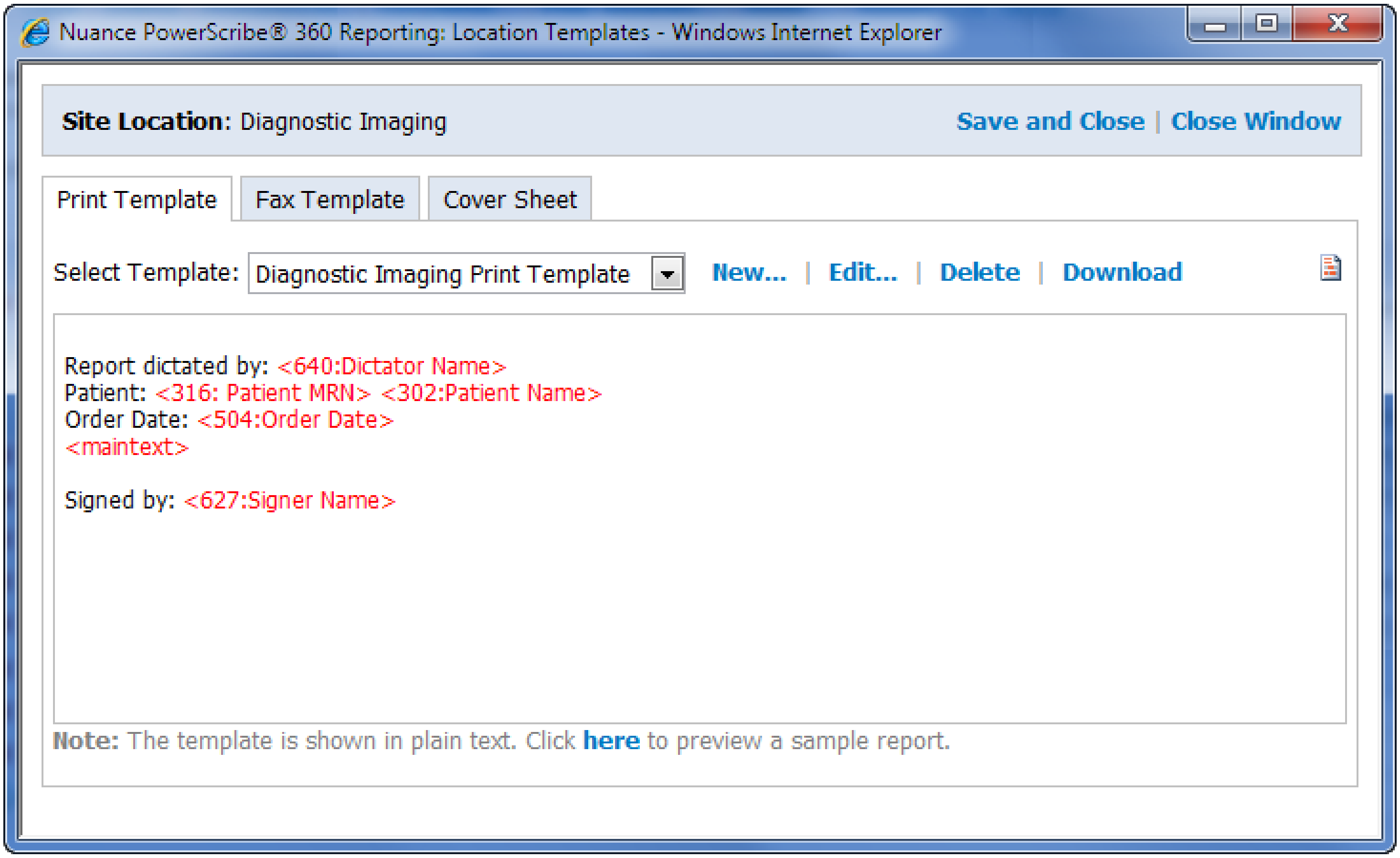


The **Create Template** dialog box opens.



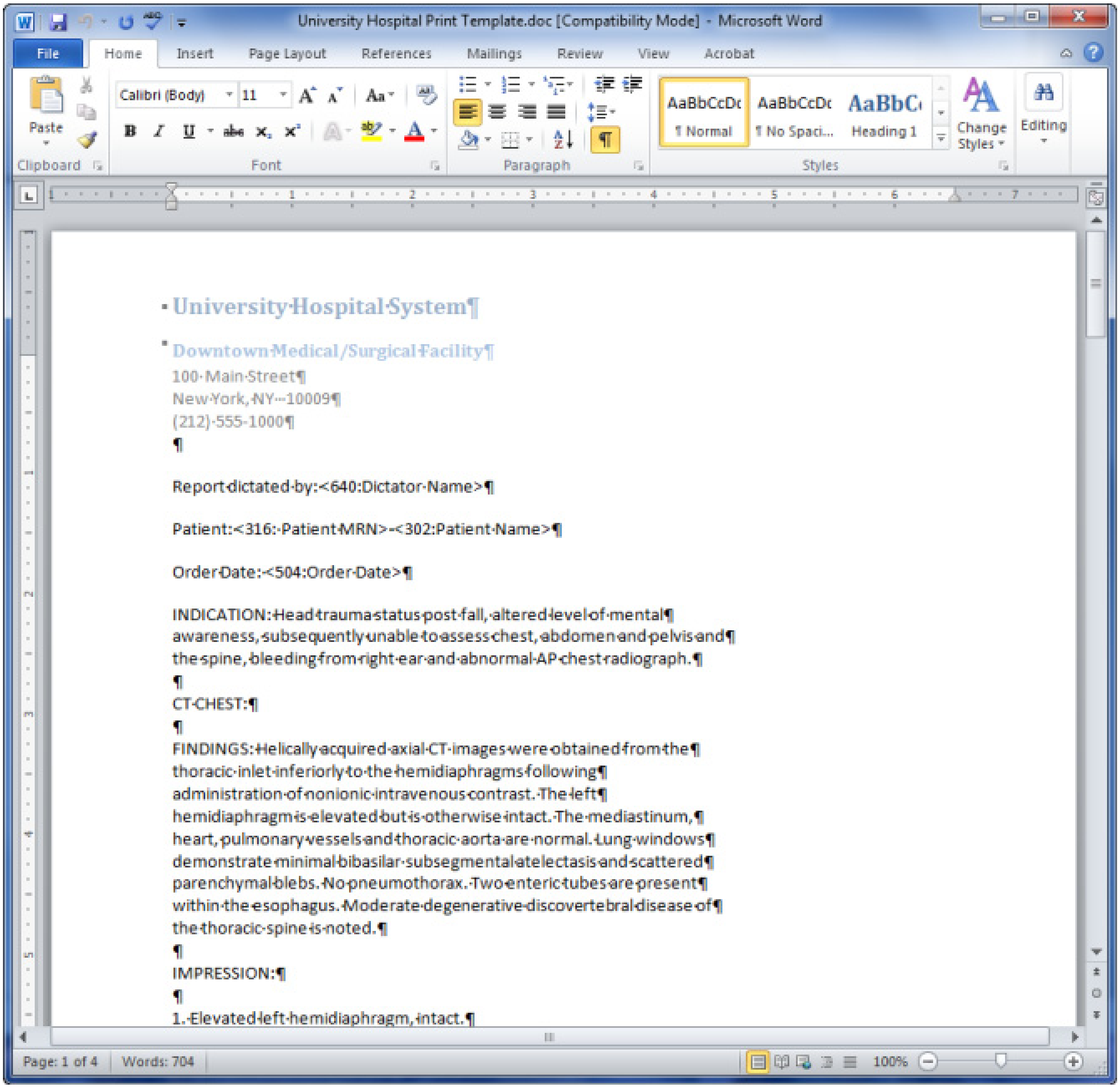
3. Type a **Name** for the new template.
4. Click **Browse**.
5. Navigate to and select the file you created in Word or Wordpad. Click **Open**. The path and file name appear in the **File** field.

6. Click **Save**. The template appears in the plain-text preview window.



7. To preview the template as it will appear with a report, click the link below the editing window. At the prompt, click **Open**. A sample report appears in a preview window.

(This preview does not display any real data in the merge fields, but shows how a typical report might appear in the template.)



Close the preview window when you have finished viewing the sample report.

8. Click **Save and Close** to save the template on your server.

Show Addendum at the Top of Printed Reports

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 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.*

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)

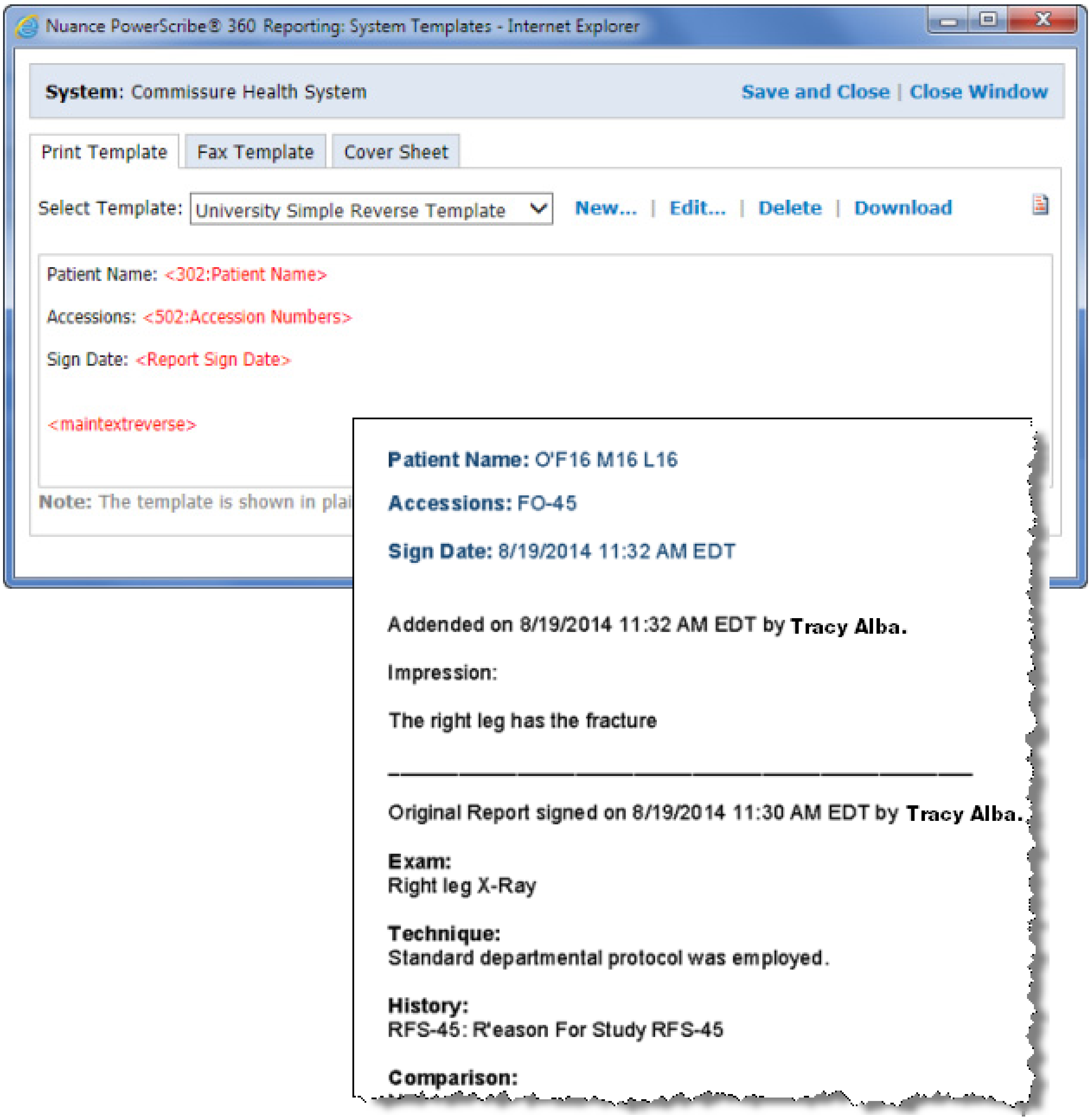
<addendum-start>	**<addendum-end>**	**<addendumtext>**
<originalreport-start>	**<originalreport-end>**	**<originalreporttext>**
<report-start>	**<report-end>**	**<reporttext>**

Notes:

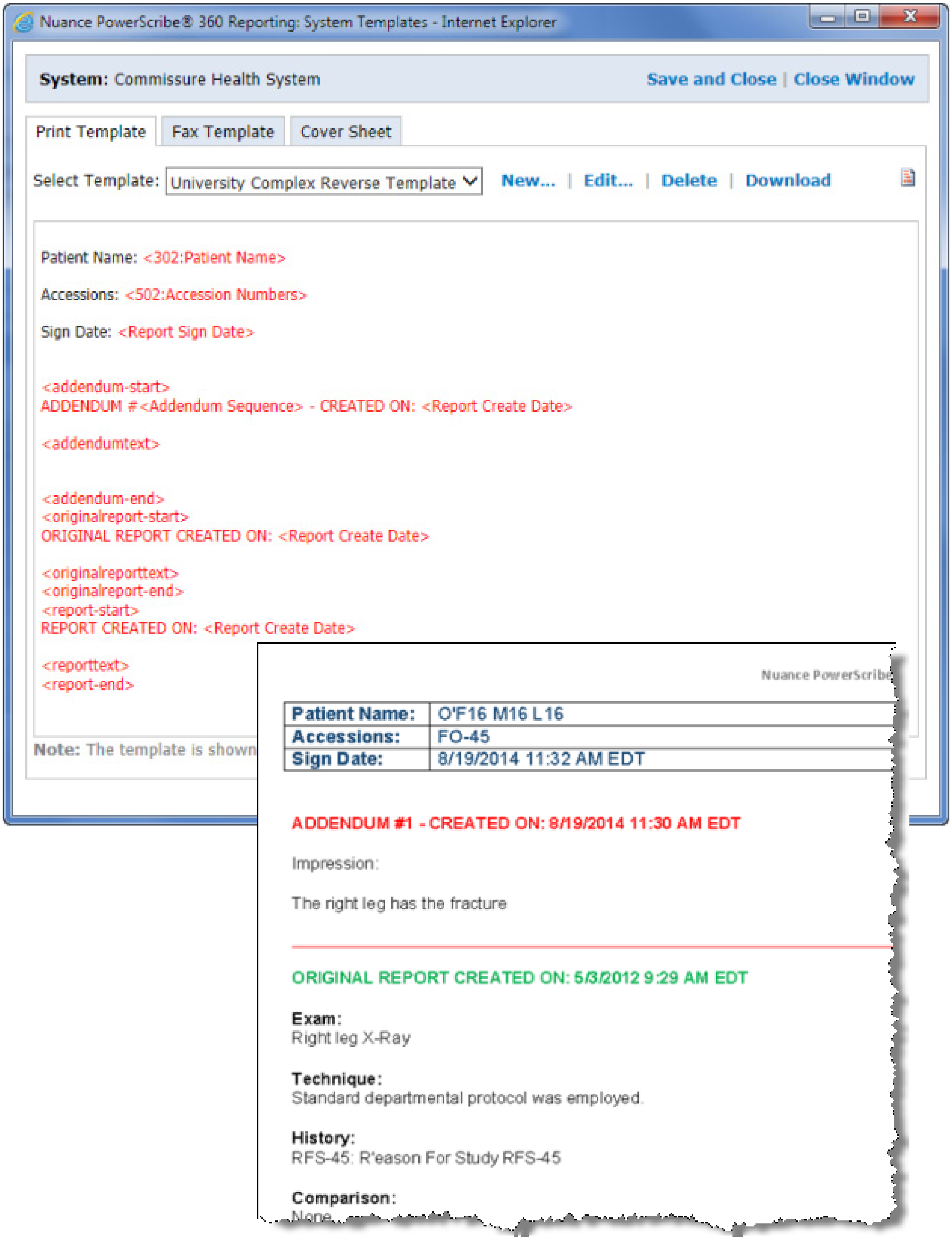
- *<originalreport> may be used as a synonym for <originalreporttext>, <report> is a synonym for <reporttext>, and <addendum> is a synonym for <addendumtext>.*
- *<originalreportextt> refers to the original report only when an addendum exists. Thus, both the <originalreporttext> and <reporttext> tags 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.*
- *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 on the next two pages, using the new merge fields to position the addendum text at the top of a printed report.

Simple Reverse Template Example and Result



Complex Reverse Template Example



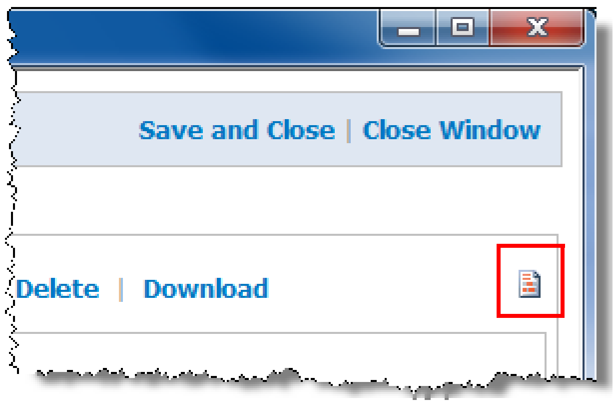
Creating a Fax Template

To create a fax template:

1. Create the fax template file in Microsoft Word or WordPad.
   - Be sure to include at least the <*maintext*> merge field. To see a list of all available merge fields:

   a. On the **System** or **Sites** tab in the **Setup** group, click **Templates**.

   b. Click the icon at the upper right portion of the **Fax Template** dialog box.



   A window showing the list of merge fields opens.

   c. To insert a merge field in the Word document, copy the field from the list. Be sure to copy the field exactly as it appears, including the brackets.

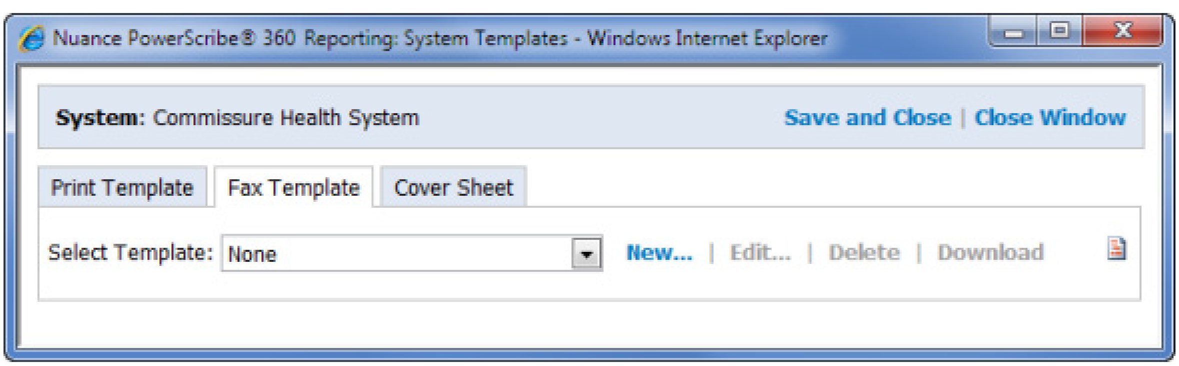
2. Save the template as an *.rtf* file.

To add the fax template at the system, site, or site location level:

1. To add the fax template at the system level:

   a. On the **System** tab in the **Setup** group, click **Templates**.

   b. Select the **Fax Template** tab.



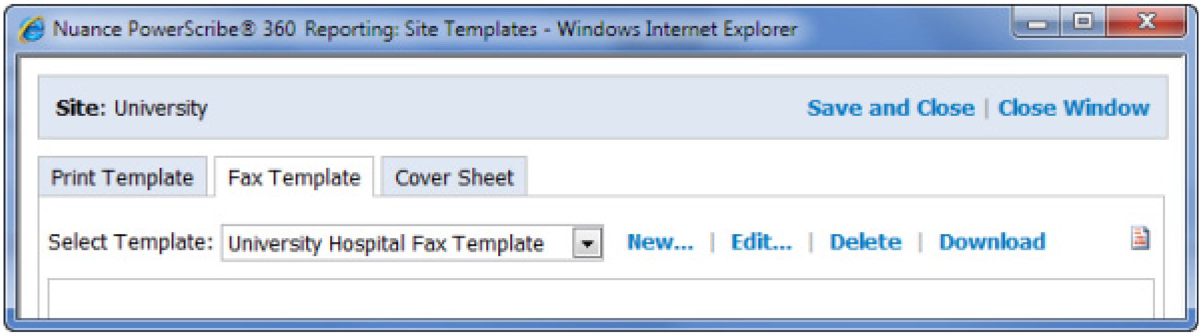
OR

To add the fax template at the site level:

a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

b. Click **Templates…**.

c. Select the **Fax Template** tab.

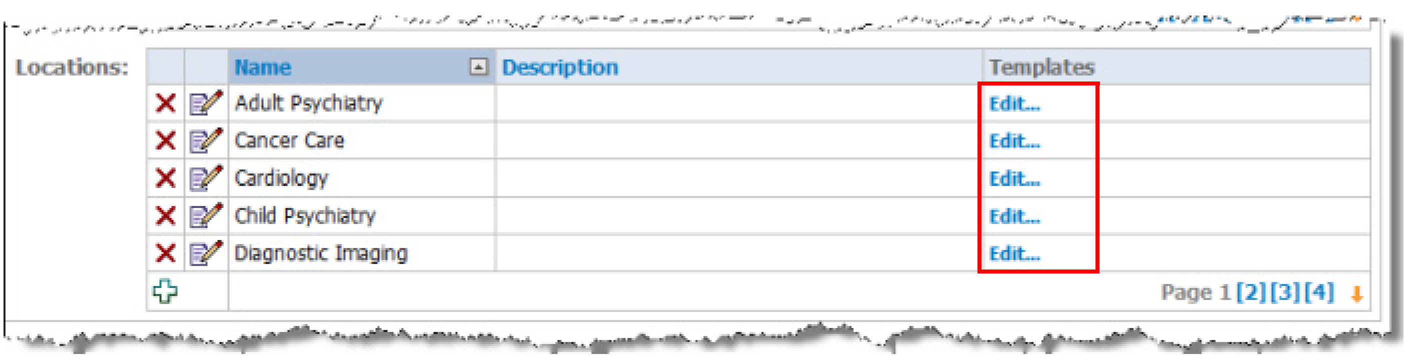


OR

To add the fax template at the site location level:

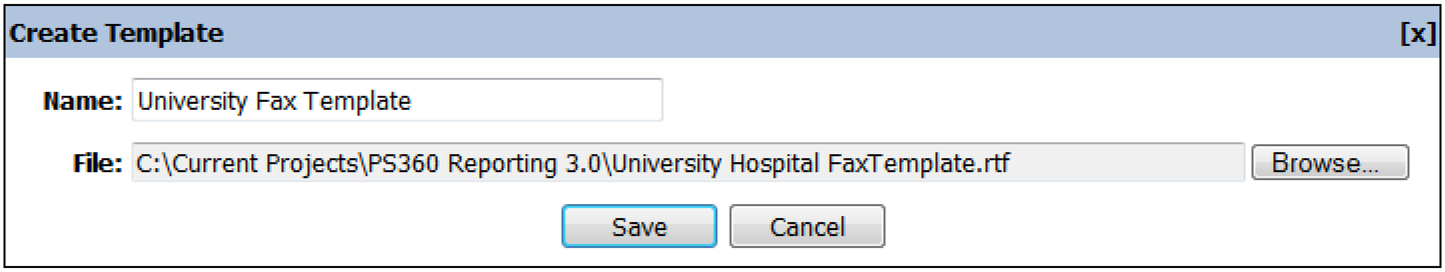
a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

b. Next to the location to which you want to add a fax template, click **Edit…** in the **Templates** column.

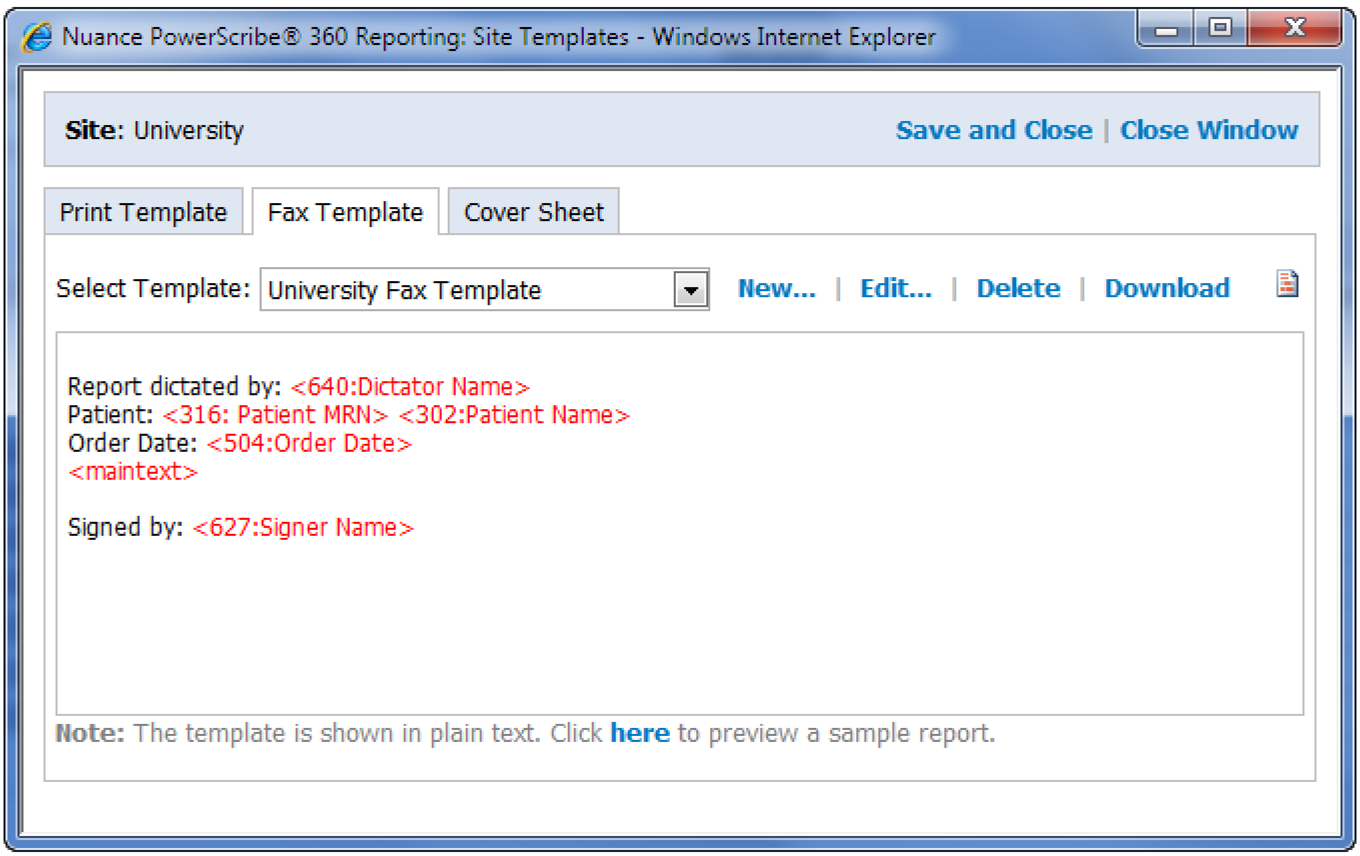


c. Select the **Fax Template** tab.

2. Click **New**.



3. Type a **Name** for the new fax template.
4. Click **Browse**.
5. Navigate to and select the file you created in Word or Wordpad. Click **Open**.
6. Click **Save**. The template appears in the plain-text preview window.



To preview the template as it will appear with a report, click the link below the editing window. At the prompt, click **Open**. A sample report appears in a Word window. Close the window when you have finished.

7. Click **Save and Close** to save the fax template.

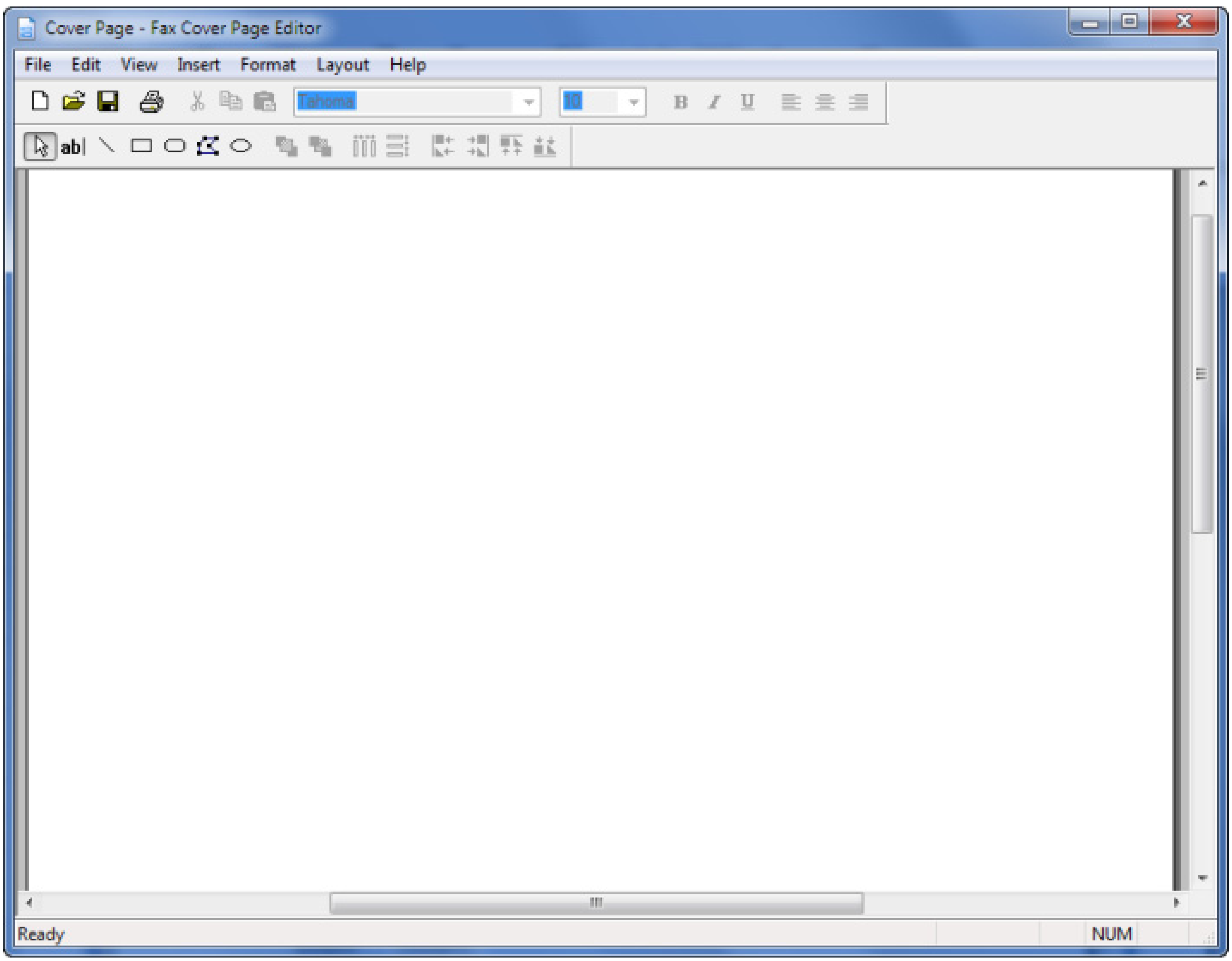
Creating a Fax Cover Sheet

Creating a Fax Cover Sheet in Windows 7

In Windows 7 you can create a fax cover sheet using the *Windows Fax and Scan* program.

To create the fax cover sheet in Windows XP:

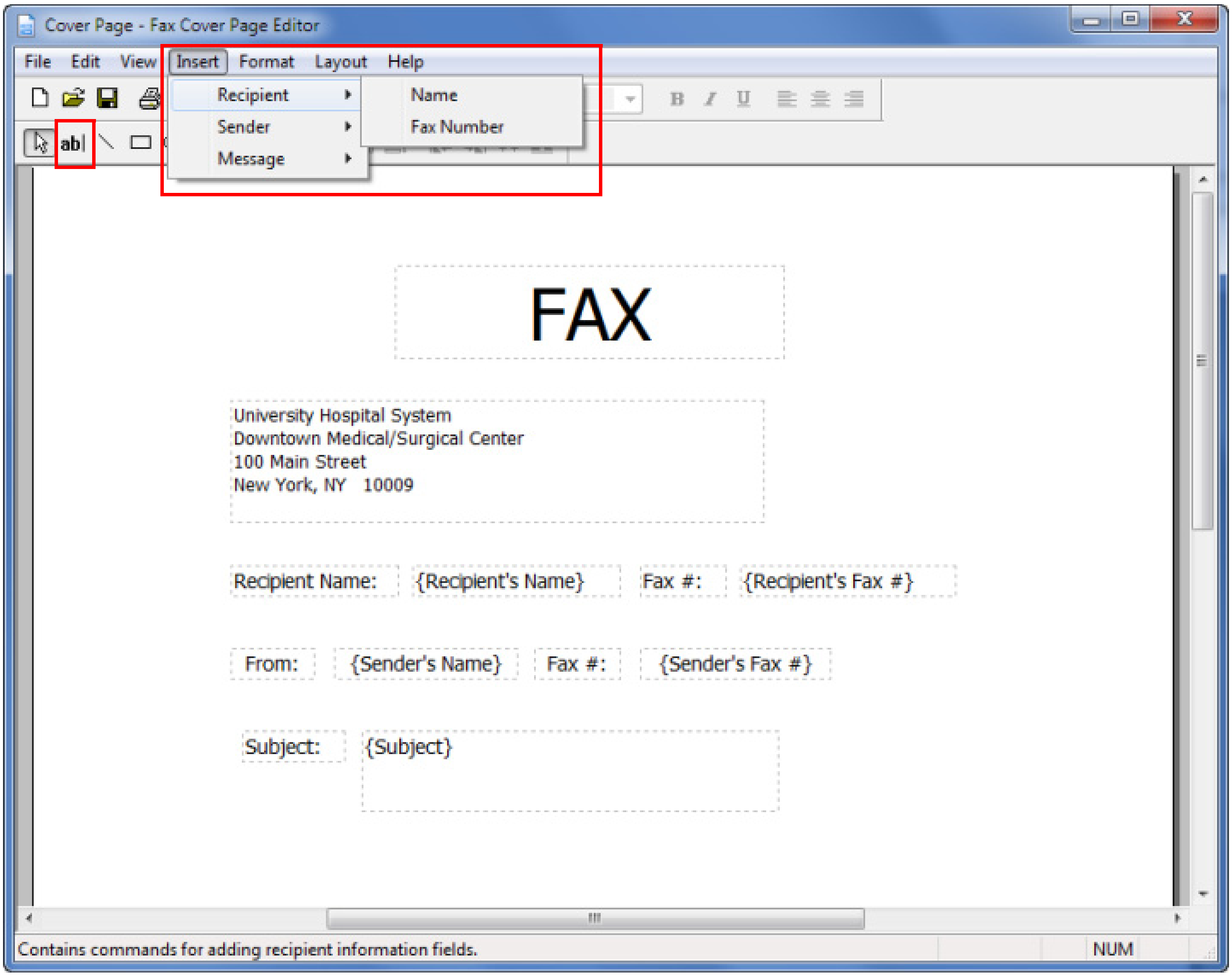
1. Click the **Start** button, click **All Programs**, then click **Windows Fax and Scan**.
2. Make sure you're in the Fax view by clicking **Fax** at the bottom of the left pane.
3. Click the **Tools** menu, click **Cover Pages**, and then click **New**. A blank window containing the available cover page tool opens.



4. To add commonly used label and text boxes to the cover page, click the **Insert** menu, and then do one or more of the following:

- Click **Recipient**, and then click the type of recipient information that you want the cover page to display.
- Click **Sender**, and then click the type of sender information that you want the cover page to display.
- Click **Message**, and then click the type of message information that you want the cover page to display.

5. To add text, click the Text button ab| on the toolbar, and then drag your pointer to draw a text box. Type the text that you want the cover page to display.
6. The following illustration shows an example fax cover sheet.



7. When finished, click **File > Save** and save the file to your preferred location. The cover sheet file is saved with a *.cov* file extension.

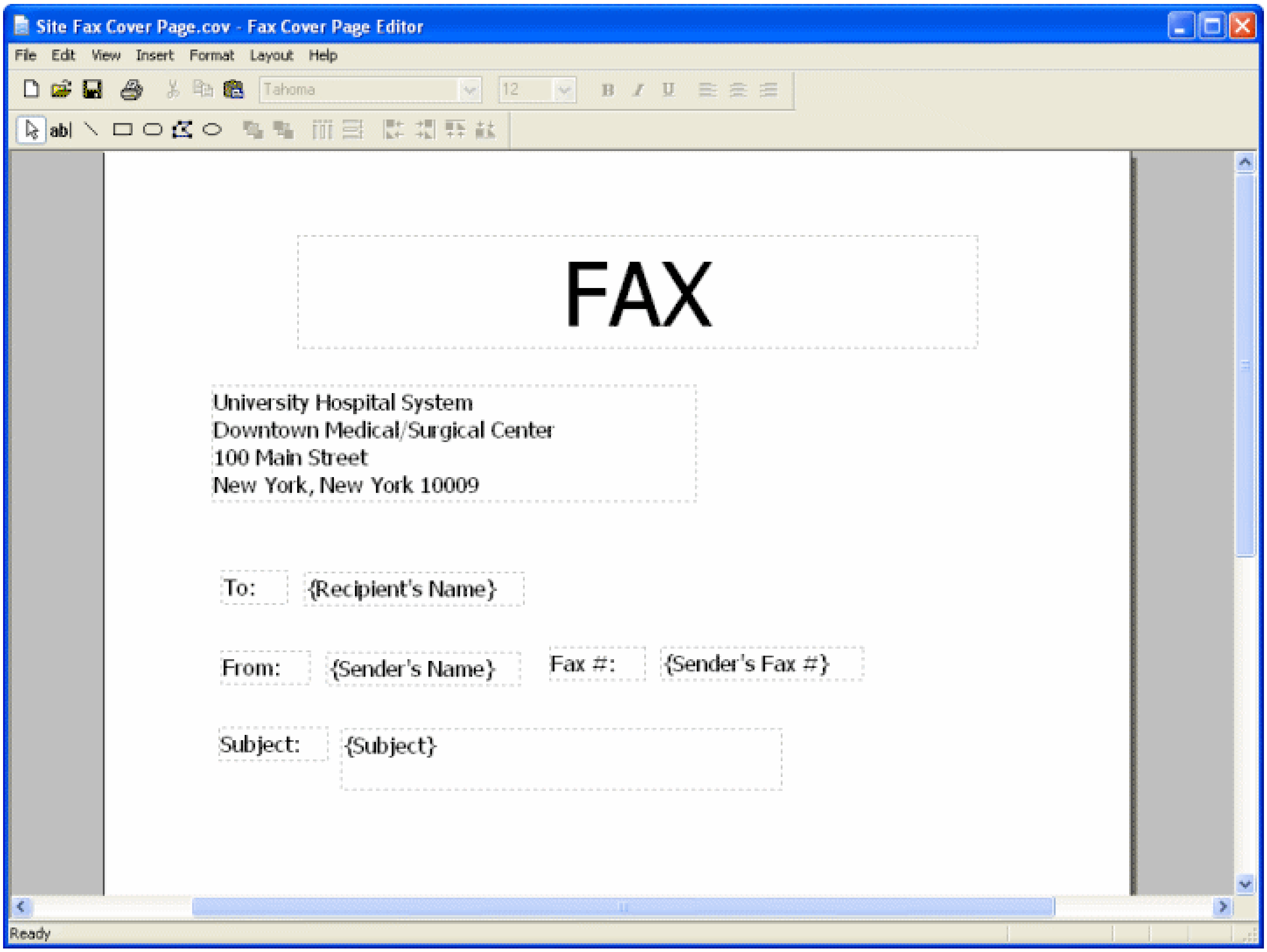
Creating a Fax Cover Sheet in Windows XP

Begin by creating a fax cover page in the *Microsoft Fax Cover Page Editor* utility.

Note: *To use this utility in Windows XP, you must first install the Fax service. Refer to your Windows documentation for information on installing this or other Windows components.*

To create the fax cover sheet in Windows XP:

1. Select **Start** > **All Programs** > **Accessories** > **Communications** > **Fax** > **Fax Cover Page Editor**. The editing window opens.



2. Use the utility's editing features to create the cover sheet. For more information, refer to the *Fax Cover Page Editor*'s online help.

> ***Note:*** *The utility allows you to insert merge fields by selecting Insert from the menu bar and then selecting fields from the Recipient, Sender, and Message submenus. The PowerScribe 360 Reporting application supports only the following fields:*
>
> *Recipient: Name, Fax Number*
>
> *Sender: Name, Fax Number*
>
> *Message: Note, Subject, Date Sent, Number of Pages*

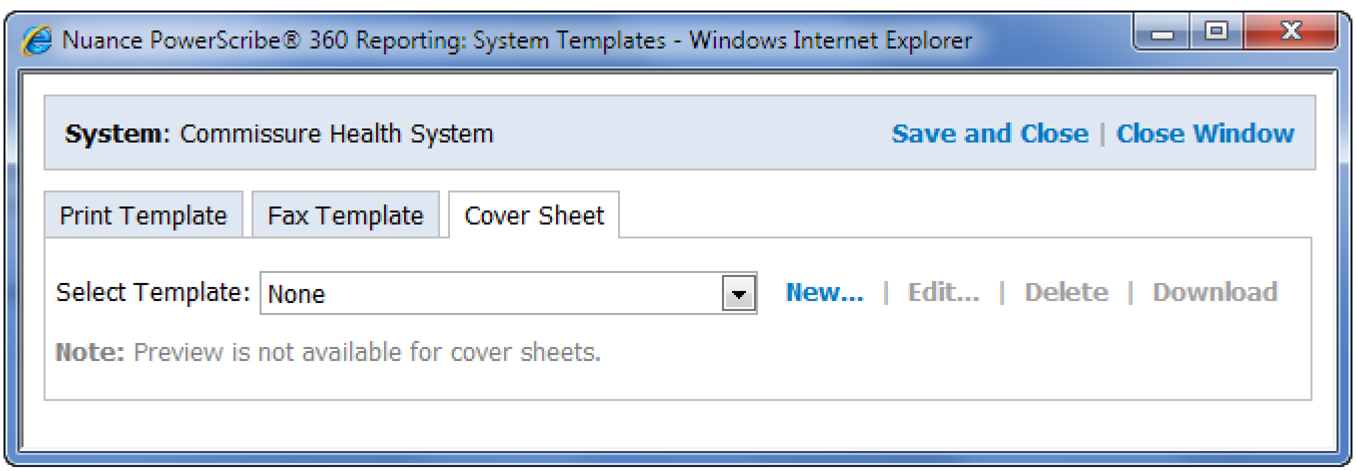
3. Click **File** > **Save As…**.
4. Save the cover sheet to a folder on your computer. The cover sheet file has a *.cov* file extension.

Adding a Fax Cover Sheet

Use the following steps to add the fax cover sheet you created (regardless of which version of Windows you used to create it).

To add the fax cover sheet:

1. To add the fax cover sheet at the system level:
   a. On the **System** tab in the **Setup** group, click **Templates**.
   b. Select the **Cover Sheet** tab.

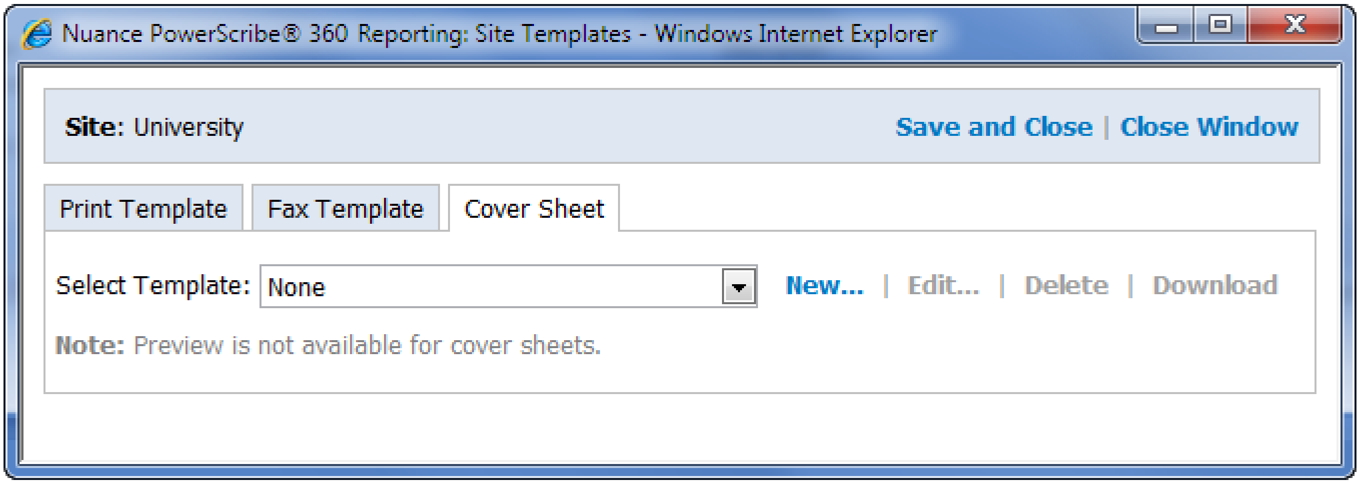


OR

To add the fax cover sheet at the site level:

a. On the **Sites** tab in the **Setup** group, click **Templates…**.

b. Select the **Cover Sheet** tab.

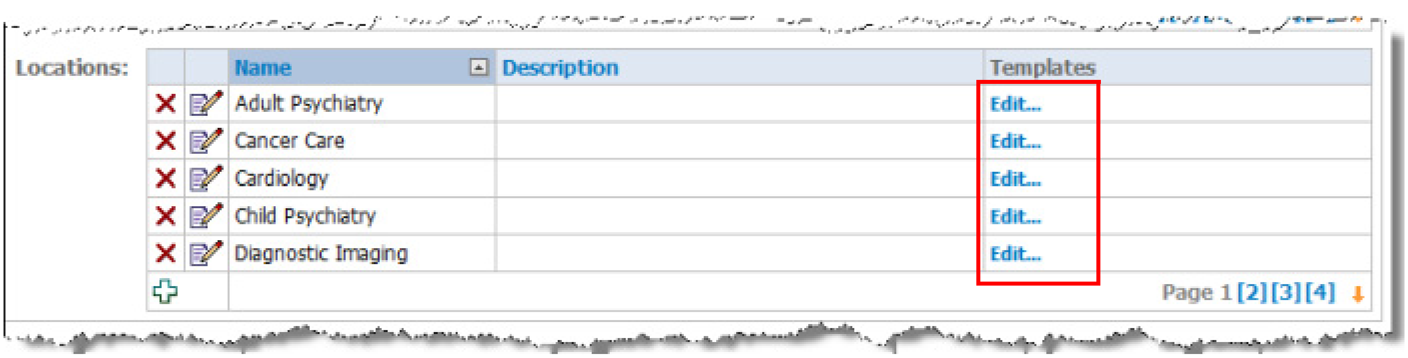


OR

To add the fax cover sheet at the site location level:

a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

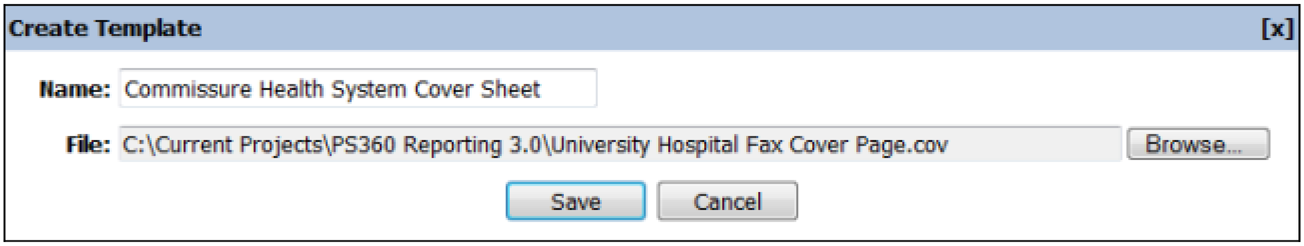
b. Next to the location to which you want to add a fax template, click **Edit…** in the **Templates** column.



c. Select the **Cover Sheet** tab.

2. Click **New…**.
3. Enter a name for the cover sheet.

4. Navigate to and select the cover sheet file and click **Open**. Cover sheet files have a *.cov* extension.



5. Click **Save**. The template appears in the **Select Template** list.
6. Click **Save and Close** to save the template.

Modifying a Template

You can modify a print, fax, or cover sheet template for your system or site, and you can modify a template for a location within a site.

Modifying Print and Fax Templates

To modify a print template:

1. To modify a print template at the system level:
   a. In the **Setup** group, select the **System** tab.
   b. Click **Templates…**.
   c. Select the **Print Template** tab.

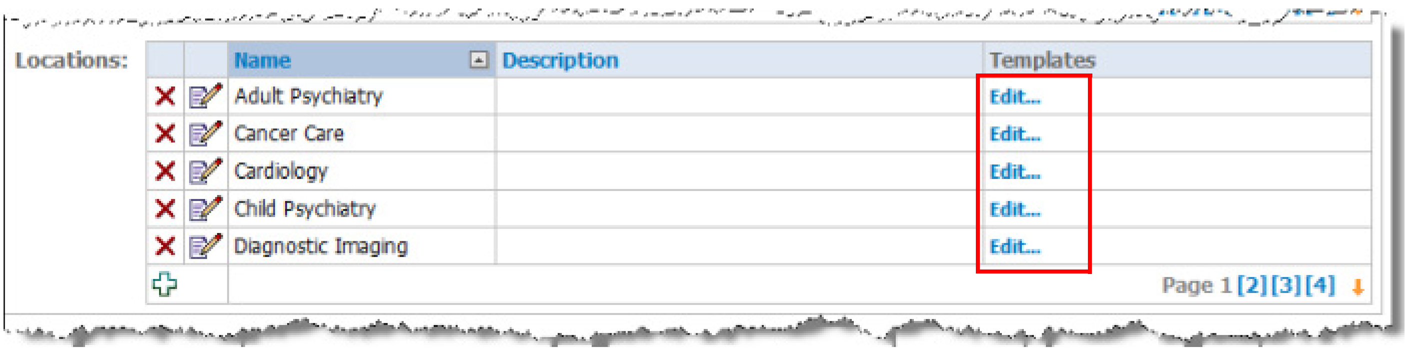
   OR

   To modify a print template at the site level:
   a. In the **Setup** group, select the **Sites** tab.
   b. Click **Templates…**.
   c. Select the **Print Template** tab.

   OR

   To modify a print template at the site location level:
   a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

b. Next to the location to which you want to modify a print template, click **Edit…** in the **Templates** column.



c. Select the **Print Template** tab.

2. Download the template file from the server, if the current version is not on your computer. Otherwise you can skip this step. To download the file:

   a. Select the template you want to modify from the list. The template appears in the plain-text preview window.

   b. Click **Download**.

   c. At the prompt, click **Save**.

   d. Navigate to and select the folder in on your computer in which you want to store the template file.

3. In Word, open and edit the template file as desired. Save and close the file.

4. Click **Edit…**. Navigate to and select the file you edited. The edited file appears in the plain-text preview window. To preview the template in Word, click the link at the bottom of the window; click **Open** to view a sample report. Then close the preview window.

5. Click **Save and Close** to save your changes.

To modify a fax template:

1. To modify a fax template at the system level:

   a. In the **Setup** group, select the **System** tab.

   b. Click **Templates…**.

   c. Select the **Fax Template** tab.

   OR

   To modify a fax template at the site level:

   a. In the **Setup** group, select the **Sites** tab.

   b. Click **Templates…**.

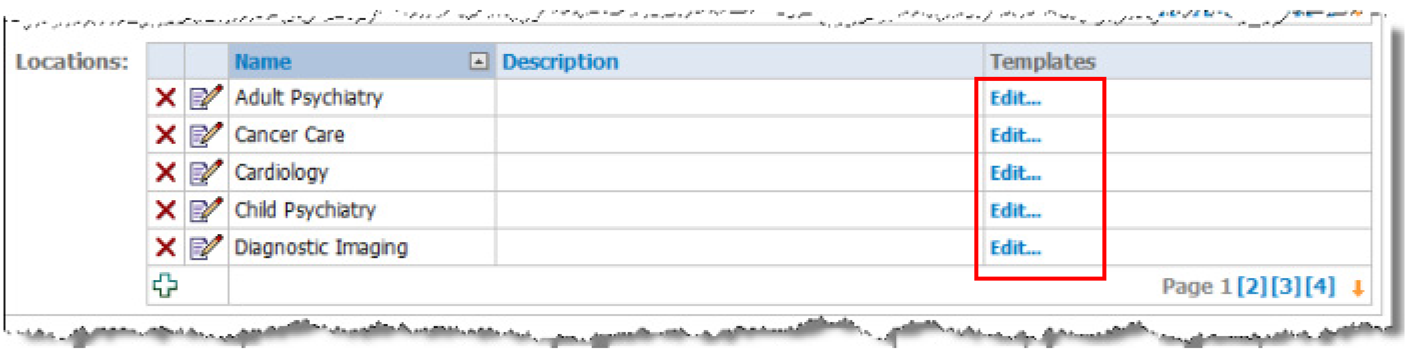
   c. Select the **Fax Template** tab.

   OR

   To modify a fax template at the site location level:

a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

b. Next to the location to which you want to modify a fax template, click **Edit…** in the **Templates** column.



c. Select the **Fax Template** tab.

2. Download the template file from the server, if the current version is not on your computer. Otherwise you can skip this step. To download the file:

   a. Select the template you want to modify from the list. The template appears in the plain-text preview window.

   b. Click **Download**.

   c. At the prompt, click **Save**.

   d. Navigate to and select the folder in on your computer in which you want to store the template file.

3. Open and edit the template file as desired. Save and close the file.
4. Click **Edit…**. Navigate to and select the file you edited. The edited file appears in the plain-text preview window. To preview the template, click the link at the bottom of the window; click **Open** to view a sample report in an editing window. Then close the preview window.
5. Click **Save and Close** to save your changes.

Modifying Fax Cover Sheet Templates

To modify a fax cover sheet template:

1. To modify a fax cover sheet template at the system level:

   a. In the **Setup** group, select the **System** tab.

   b. Click **Templates…**.

   c. Select the **Cover Sheet** tab.

   OR

   To modify a fax cover sheet template at the site level:

a. In the **Setup** group, select the **Sites** tab.

b. Click **Templates…**.

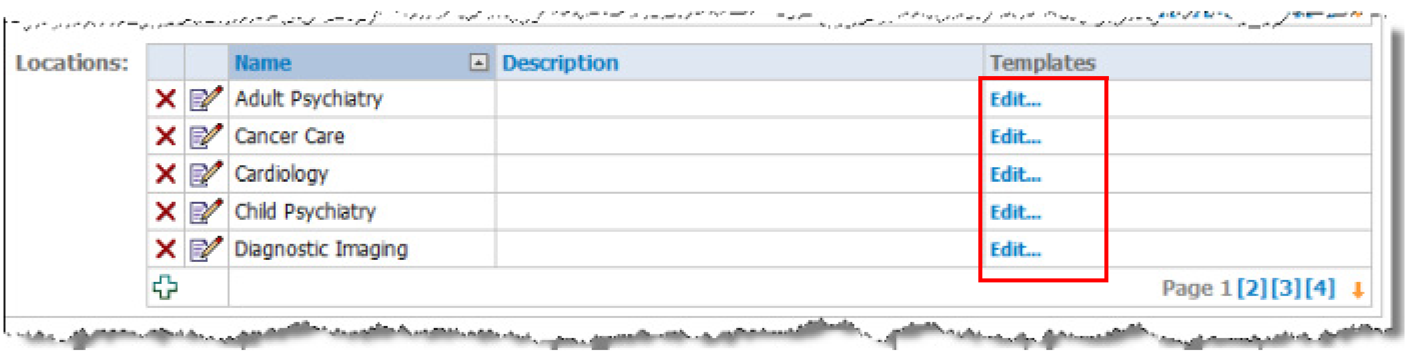
c. Select the **Cover Sheet** tab.

OR

To modify a fax cover sheet template at the site location level:

a. On the **Sites** tab in the **Setup** group, select the site from the drop-down list at the upper right.

b. Next to the location for which you want to modify a fax cover sheet, click **Edit…** in the **Templates** column.



c. Select the **Cover Sheet** tab.

2. Download the template file from the server, if the current version is not on your computer. Otherwise you can skip this step. To download the file:

   a. Select the template you want to modify from the list.

   b. Click **Download**.

   c. At the prompt, click **Save**.

   d. Navigate to and select the folder in on your computer in which you want to store the template file.

3. In the *Windows Fax Cover Page Editor* utility, open and edit the template file as desired. Save and close the file.

4. On the **Cover Sheet** tab in *PowerScribe 360 Reporting*, click **Edit…**. Navigate to and select the cover sheet you edited.

   Note: *The preview feature is not available for fax cover sheets.*

5. Click **Save and Close** to save your changes.

Chapter 19

Management Reports

Objectives

In this chapter, you will:

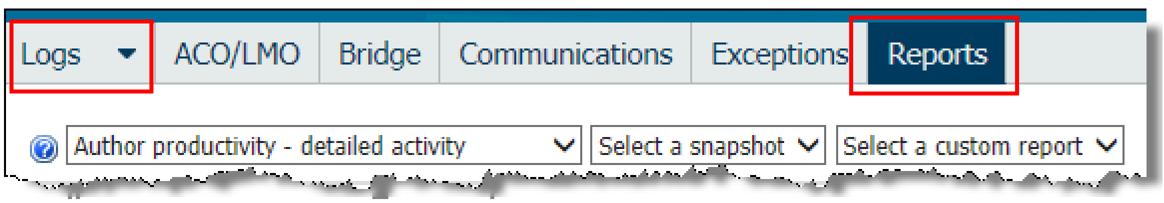
- Distinguish between the following types of reports:
  - Author productivity
  - AutoText
  - Billing
  - Editor productivity
  - Reports
  - Turnaround time (TAT)
  - Quality Check (purchasable option)
  - Clinical Guidance (purchasable option)

Introduction

Reporting in *PowerScribe 360 Reporting* allows administrators to look at several aspects of productivity on the system, including author and editor productivity, and turnaround time. In addition, several reports supply information on aspects of the reports that providers create in the system.

Accessing the Management Reports

To access and run the management reports, click the **Logs** group, then click the **Reports** tab.



Types of Reports

Note: *Customers who purchase the Quality Check (formerly Assure) or Clinical Guidance options will see reports that are available for those features.*

The reports are divided into the following categories:

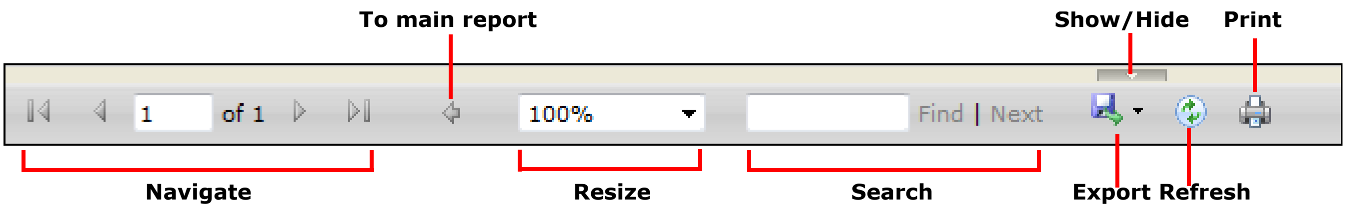
- Author productivity
- AutoText
- Billing
- Editor productivity
- Reports
- Turnaround time (TAT)

Features Common to All Reports

Each *PowerScribe 360 Reporting* report provides a unique set of information. However, there are several features common to all the reports: the toolbar, the ability to select new report parameters, and the ability to hide the report parameters section.

Toolbar

Near the top of each report, just above the data and chart portion, is a toolbar.

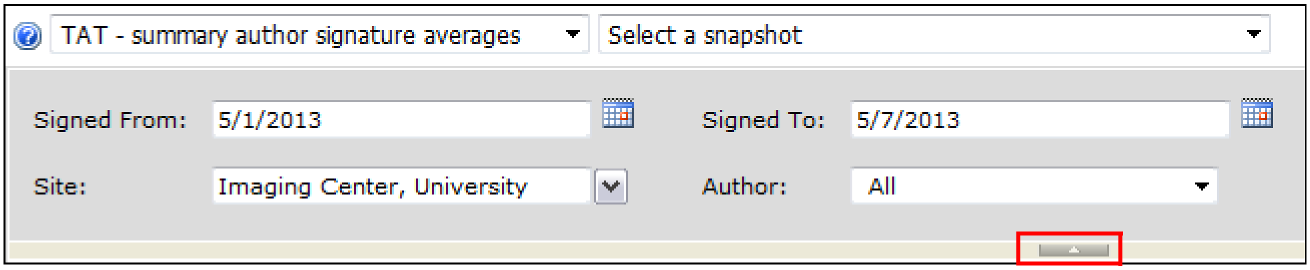


The toolbar allows you to perform several tasks:

- **Navigate** through the pages in each report: From the left, the controls indicate **First Page**, **Previous Page**, **Next Page**, and **Last Page**. Click an icon to perform each task.
- **To main report** returns you to the main report after you have clicked a link taking you to a sub-report. (This icon is not available in all reports.)
- **Resize** your view of the report: Choose a smaller or larger size in which to display your report.
- **Search** for specific terms in the report: Enter a term in the search field and use the **Find** and **Next** links to find instances of your term.
- **Export** report data in any of several different formats: Choose *.xml*, *.csv* (comma-delimited), *..pdf*, MHTML web archive, Excel, TIFF, or a Word document. You can choose to either open or save the file in your selected format.
- **Refresh** the report data: Click this icon to update the data in your current report.
- **Print** the report: Prints the full report to a printer associated with the computer on which you have run the report.
- **Show/Hide** temporarily hides the report parameters section, giving you more area on your screen for the report. Click this icon again to show the parameters.

Select New Report Parameters

After you view your report, the parameters you first selected appear above the toolbar. (The example below shows the parameters for the **TAT - summary author signature averages** report.)



These parameters are displayed again so you can immediately run the same report using different dates, accounts, sites, and so on.

Refer to the individual reports in this document for descriptions of each of these parameter fields.

Note: *All reports with a date range allow you to specify a time of day, if desired. To indicate a date and time, first select the date from the calendar, and then enter the time manually. Use either a 24-hour format (example: 14:30:00) or a 12-hour format (example: 2:30:00 PM). A day is considered to begin at midnight and end at 11:59:59 PM.*

Hide the Report Parameter Fields

To allow more area to view the report contents, you can temporarily hide the report parameters (for example, Signed From, Signed To, Site, Author, and so on). To do this, click the **Show/Hide** icon. Click a second time to display them again.

Character Count and Line Count Calculation Examples

- The total number of characters in a report is calculated *at the time the editor saves the report*. If an editor opens a report, makes changes, and saves the report (or Finishes correcting, sending the report back to the radiologist), the total number of characters increases or decreases depending upon the changes the editor made. This number is placed in the **TranscribedCharCount** column in the report table.
- The line count calculation takes the number of characters (from the **TranscribedCharCount** column) and divides it by the number of characters specified in the **CharsPerLine** parameter. (Default is 65.) The formula for the calculation is **Round(TranscribedCharCount/CharsPerLine)**. The resulting number is rounded to one decimal place (for example, **123.1**).

Author Productivity Reports

The reports in this section allow you to examine information about providers' productivity.

Author Productivity—Detailed Activity

This report shows the start and end time of each report within the supplied date range, as well as the time that the report was signed by the radiologist. Unsigned reports do not appear in this report.

Running the Author Productivity—Detailed Activity Report

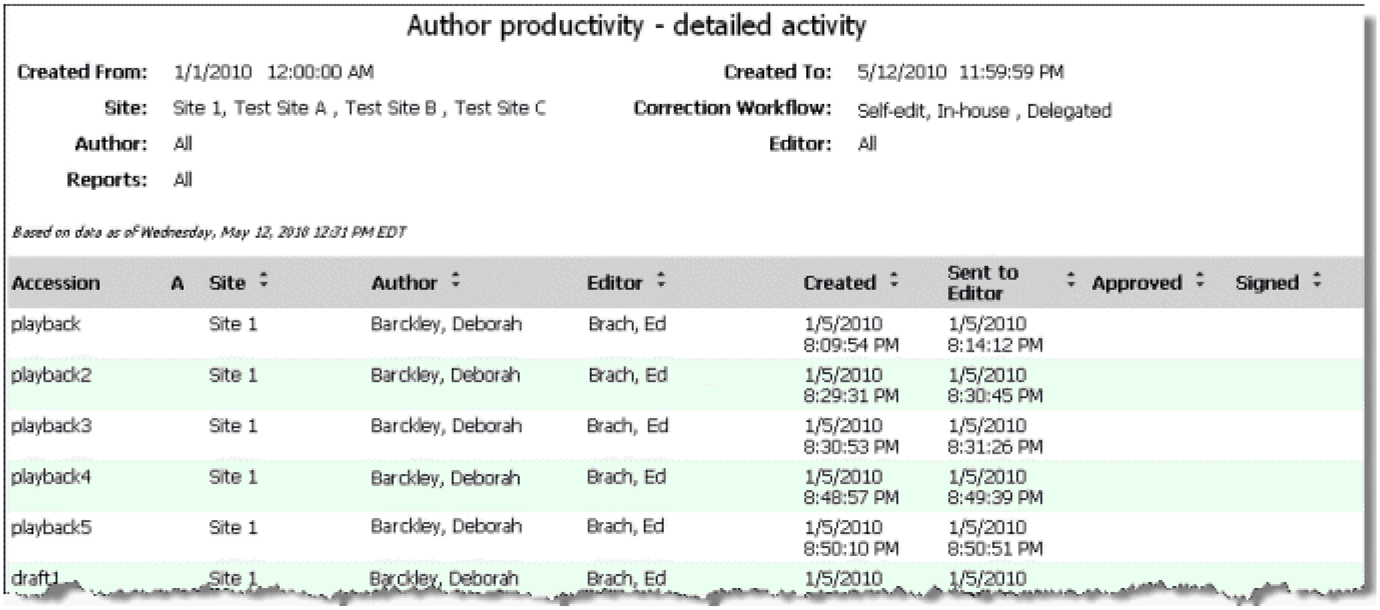
To run this report:

1. On the **Reports** tab, select the **Author Productivity—Detailed Activity** report from the drop-down list.
2. Use the following table as a guide for entering values.

Parameter	Definition
Created From and Created To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates for your report. Beginning and ending times are required.
Site	If your organization has multiple sites, select the site or sites on which you want to run the report. Otherwise, this drop-down list is not visible.
Correction Workflow	Select All, Self-edit, In-house, or Delegated.
Author	Select the person who dictated the report from the drop-down list, or select All.
Editor	Select the person who transcribed or edited the report from the drop-down list, or select All.
Reports	Select the type of reports to include: Originals only, Addendums Only, or All

3. Click **View Report**.

Results Screen and Explanations



Author productivity - detailed activity

Created From: 1/1/2010 12:00:00 AM **Created To:** 5/12/2010 11:59:59 PM
Site: Site 1, Test Site A , Test Site B , Test Site C **Correction Workflow:** Self-edit, In-house , Delegated
Author: All **Editor:** All
Reports: All

Based on data as of Wednesday, May 12, 2010 12:31 PM EDT

Accession	A	Site	Author	Editor	Created	Sent to Editor	Approved	Signed
playback		Site 1	Barckley, Deborah	Brach, Ed	1/5/2010 8:09:54 PM	1/5/2010 8:14:12 PM		
playback2		Site 1	Barckley, Deborah	Brach, Ed	1/5/2010 8:29:31 PM	1/5/2010 8:30:45 PM		
playback3		Site 1	Barckley, Deborah	Brach, Ed	1/5/2010 8:30:53 PM	1/5/2010 8:31:26 PM		
playback4		Site 1	Barckley, Deborah	Brach, Ed	1/5/2010 8:48:57 PM	1/5/2010 8:49:39 PM		
playback5		Site 1	Barckley, Deborah	Brach, Ed	1/5/2010 8:50:10 PM	1/5/2010 8:50:51 PM		
draft1		Site 1	Barckley, Deborah	Brach, Ed	1/5/2010	1/5/2010		

The **Author Productivity—Detailed Activity** report includes the following information:

- **Accession**: The identifying number assigned in the RIS. This column can contain multiple values.
- **A:** The addendum's sequence number. For an original report, this column is blank.
- **Site**: The site where the report was created
- **Author**: First and last name of the provider who initiated the report
- **Editor**: First and last name of the editor who corrected the report, if applicable
- **Created**: Date and time that the provider initiated the report
- **Sent to Editor**: Date and time that the provider clicked the **Correct** button on the *PowerMic* or other microphone or in the dictation window

  Note: Sent to Editor *shows the time that the provider* ***first*** *clicked the Correct button. The date and time do not update if the provider dictates additional text.*

- **Approved**: Date and time a resident approved the report, if applicable.
- **Signed**: Date and time the attending provider signed the report

Author Productivity—Hourly Detail

This report shows the number of reports providers dictated during each hour of the day during a specified date range. It provides subtotals by author and grand totals for the morning and evening periods.

The Author Productivity—Hourly Detail—Past Day report and Author Productivity—Hourly Detail—Past week reports are identical to the Author Productivity Hourly Detail report, except that they show activity during the past 24 hours and past week, respectively.

Running the Author Productivity—Hourly Detail Report

To run this report:

1. From the **Reports** tab, select the **Author Productivity—Hourly Detail** report from the list.
2. Use the following table as a guide for entering values:

Parameter	Definition
Created From and Created To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report, if your organization has multiple sites.
Author	Select an author, or all authors, from the drop-down list.

3. Click **View Report**.

Results Screen and Explanations

Author productivity - hourly detail

Created From : 6/1/2010 12:00:00 AM **Created To :** 9/30/2010 11:59:59 PM

Site : IRR , IRR02 , SYS105 , Test Site B , Test Site C **Author:** All

Based on data as of Wednesday, September 29, 2010 1:39 PM EDT

Author		12xx	1xx	2xx	3xx	4xx	5xx	6xx	7xx	8xx	9xx	10xx	11xx	Total
Ackerman, Joseph														
	AM	0	0	0	0	0	0	0	0	0	0	1	0	1
Tarin, Tracy														
	AM	0	0	0	0	0	0	0	0	0	1	0	1	2
	PM	0	0	1	1	7	0	0	0	0	0	0	0	9
Dattending, Al														
	PM	0	2	2	0	0	0	0	0	0	0	0	0	4
Brown, Katharine														
	AM	0	0	0	0	0	0	0	0	0	0	1	2	3

The **Author Productivity—Hourly Detail** report shows the following information:

- The last and first name of the person who dictated the report
- Number of reports the provider dictated during the AM hours, broken down by hour

- Number of reports the provider dictated during the PM hours, broken down by hour
- Grand totals for AM reports, broken down by hour
- Grand totals for PM reports, broken down by hour

Author Productivity—Monthly Summary

This report lists by provider the number of daily reports as well as a monthly total for each provider. Also provides a graphical representation of each provider's monthly performance.

Running the Author Productivity—Monthly Summary Report

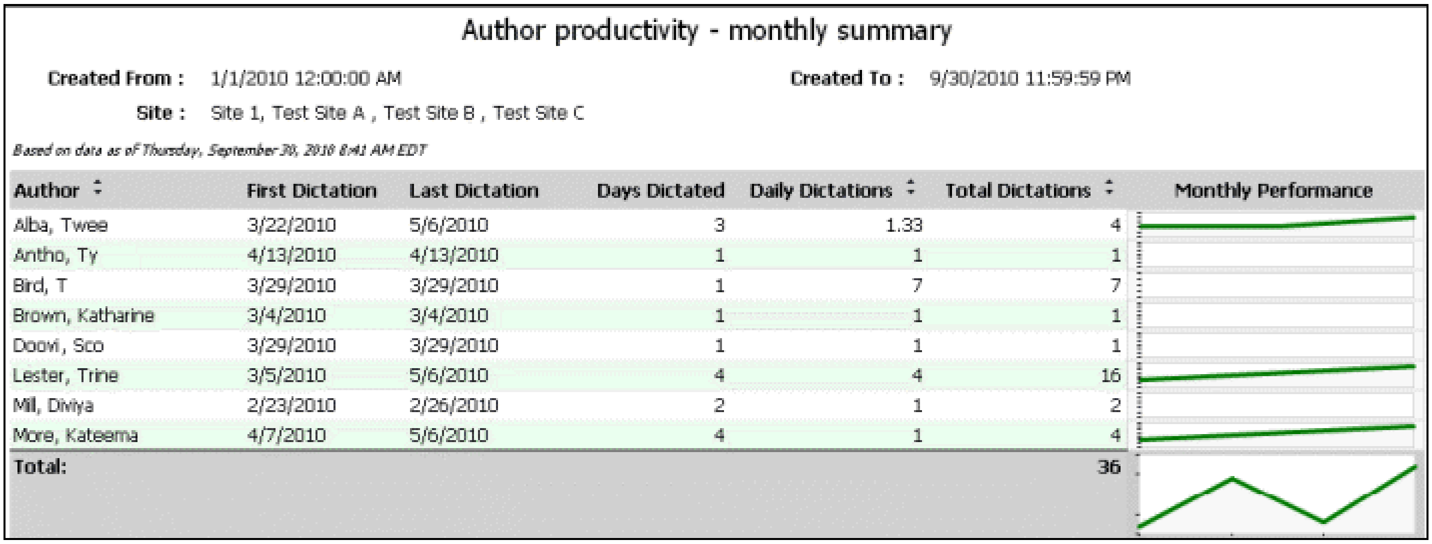
To run this report:

1. On the **Reports** tab, select the **Author Productivity—Monthly Summary** report from the list.
2. Use the following table as a guide for entering values:

Parameter	Definition
Created From and Created To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates for your report. Beginning and ending times are required.
Site	Select one or more sites for your report, if your organization has multiple sites.

3. Click **View Report**.

Results Screen and Explanations



Author productivity - monthly summary

Created From : 1/1/2010 12:00:00 AM **Created To :** 9/30/2010 11:59:59 PM

Site : Site 1, Test Site A , Test Site B , Test Site C

Based on data as of Thursday, September 30, 2010 8:41 AM EDT

Author	First Dictation	Last Dictation	Days Dictated	Daily Dictations	Total Dictations	Monthly Performance
Alba, Twee	3/22/2010	5/6/2010	3	1.33	4	
Antho, Ty	4/13/2010	4/13/2010	1	1	1	
Bird, T	3/29/2010	3/29/2010	1	7	7	
Brown, Katharine	3/4/2010	3/4/2010	1	1	1	
Doowi, Sco	3/29/2010	3/29/2010	1	1	1	
Lester, Trine	3/5/2010	5/6/2010	4	4	16	
Mill, Diviya	2/23/2010	2/26/2010	2	1	2	
More, Kateema	4/7/2010	5/6/2010	4	1	4	
Total:					**36**	

The **Author Productivity—Monthly Summary** report shows the following information:

- **Author**: The person who dictated the report.
- **First Dictation**: The date the provider first performed dictation during this date range
- **Last Dictation**: The date the provider last performed dictation during this date range
- **Days Dictated**: The number of days on which the provider performed dictation
- **Daily Dictations**: The average number of dictations a provider performed on days on which he performed dictation
- **Total Dictations**: The total number of reports dictated during the date range
- **Monthly Performance (graph)**: Each point in the graph represents the number of reports the provider dictated during a given month in the report's date range.

Author Productivity - RVU

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

Running the Author Productivity—RVU

To run this report:

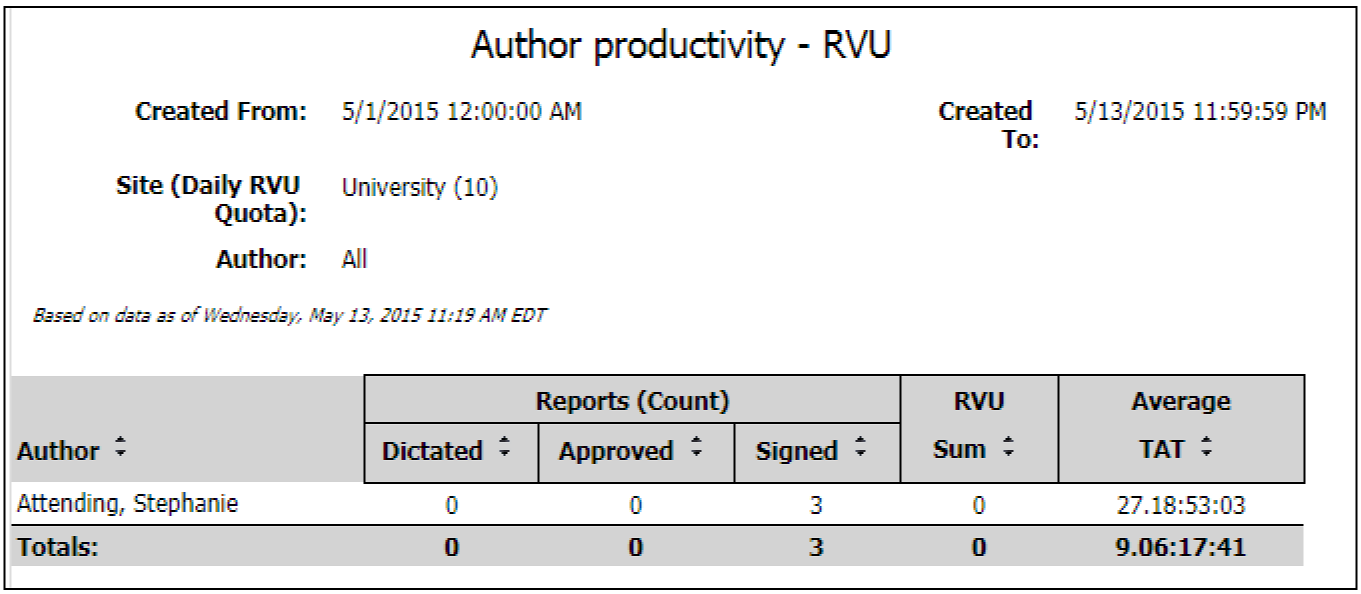
1. On the **Reports** tab, select the **Author Productivity—RVU** report from the list.

2. Use the following table as a guide for entering values:

Parameter	Definition
Created From and Created To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report, if your organization has multiple sites.
Author	Select the person who dictated the report from the drop-down list, or select All.

3. Click **View Report**.

Results Screen and Explanations



Author productivity - RVU

Created From: 5/1/2015 12:00:00 AM **Created To:** 5/13/2015 11:59:59 PM

Site (Daily RVU Quota): University (10)

Author: All

Based on data as of Wednesday, May 13, 2015 11:19 AM EDT

Author	Reports (Count)			RVU	Average
	Dictated	Approved	Signed	Sum	TAT
Attending, Stephanie	0	0	3	0	27.18:53:03
Totals:	**0**	**0**	**3**	**0**	**9.06:17:41**

The **Author Productivity—RVU** report shows the RVU statistics of reports broken into the following categories:

- **Dictated Reports**: Reports initiated by providers, residents, or fellows
- **Approved Reports**: Reports corrected by an editor
- **Signed Reports**: Reports signed by the provider
- **RVU Sum**: Number of RVUs for all reports per author.
- **Average TAT**: Average turnaround time for all reports per author.

Author Productivity—Summary Activity

This report shows the number of different reports for a provider divided into categories, such as reports dictated, transcribed, speech-recognized, and signed. The average report length and the total report length for the selected time period are also shown.

Running the Author Productivity—Summary Activity Report

To run this report:

1. On the **Reports** tab, select the **Author Productivity—Summary Activity** report from the list.
2. Use the following table as a guide for entering values:

Parameter	Definition
Created From and Created To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report, if your organization has multiple sites.
Correction Workflow	Select All, Self-edit, In-house, or Delegated.
Author	Select the person who dictated the report from the drop-down list, or select All.
Editor	Select the person who transcribed or edited the report from the drop-down list, or select All.

3. Click **View Report**.

Results Screen and Explanations

Author productivity - summary activity

Created From : 1/1/2010 12:00:00 AM **Created To :** 9/30/2010 11:59:59 PM
Site: Site 1, Test Site A , Test Site B , Test Site C **Correction Workflow:** Self-edit, In-house , Delegated
Author: All **Editor:** All

Based on data as of Thursday, September 30, 2010 8:41 AM EDT

	Dictated Reports		Corrected Reports		Signed Reports		Average Report Audio Duration
Author	Reports	Audio Duration	Reports	Audio Duration	Reports	Audio Duration	
Alba, Trine	12	00:00:24	2	00:00:00	3	00:00:05	00:00:02
Anderson, Teresa	1	00:00:00	0	00:00:00	0	00:00:00	00:00:00
Antho, Tyler	2	00:00:07	0	00:00:00	0	00:00:00	00:00:03
Bird, T	9	00:10:01	0	00:00:00	7	00:06:22	00:01:06
Brown, Katharine	2	00:00:00	0	00:00:00	2	00:00:00	00:00:00
Birdley, Deborah	39	00:05:23	24	00:01:09	0	00:00:00	00:00:08
Buram, Teal	22	00:00:27	0	00:00:00	0	00:00:00	00:00:01
Debo, Terorah	1	00:00:02	0	00:00:00	0	00:00:00	00:00:02

The **Author Productivity—Summary Activity** report shows the number and audio duration of reports broken into the following categories:

- **Dictated Reports**: Reports initiated by providers, residents, or fellows
- **Corrected Reports**: Reports corrected by an editor
- **Signed Reports**: Reports signed by the provider
- **Average Report Audio Duration**: The average length of all reports (dictated, recognized, and so on) for each author. Durations are shown as days, hours, minutes, and seconds.
- **Total Reports/Total Duration**: Totals in each of the categories.

Author Productivity—Summary Detail

This report provides a breakdown of reports by author and site, based upon the number of reports and the number of words.

The Author Productivity—Summary Detail—Past Week snapshot report is identical to this report except that it shows activity during the past seven days.

Running the Author Productivity—Summary Detail Report

To run this report:

1. On the **Reports** tab, select the **Author Productivity—Summary Detail** report from the list.
2. Use the following table as a guide for entering values:

Parameter	Definition
Created From and Created To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. Only applicable to organizations who have multiple sites.
Author	Select the person who dictated the report, or select All.

3. Click **View Report**.

Results Screen and Explanations

Author productivity - summary detail

Created From: 8/14/2012 12:00:00 AM **Created To:** 8/16/2012 11:59:59 PM

Site : Alison, Bronson Methodist Hospital , Cinci , Huntsville Medical Center , LVHHN , MGH , Natasha , Nate , richard , richard 2 , richard 3 , Site 1 , VALORG , VIHA , Wilson Medical Center2 **Author:** All

Based on data as of Thursday, August 16, 2012 11:09 AM EDT

	Reports (Count)		Words (Average)					Average	
Author	**Authored**	**Signed**	**Total**	**Dictated**	**Transcribed**	**AutoText**	**Merged**	**Audio Duration**	**AutoText**
, Tara	7	0	98	73 (74.49%)	0	24	0	00:00:00	0.00
n, Nate, resident	1	0	5	0 (0.00%)	0	0	0	00:00:00	0.00
n, Nathan	3	3	20	8 (40.00%)	0	1	5	00:00:00	1.00
, Myla	6	6	48	40 (83.33%)	0	0	8	00:00:00	0.00
er, Valerie	8	8	73	65 (89.04%)	0	0	8	00:00:00	0.00
Connie	8	8	73	65 (89.04%)	0	0	8	00:00:00	0.00
Connie PA	1	1	15	0 (0.00%)	0	0	9	00:00:00	0.00
Connie resident	1	0	7	0 (0.00%)	0	0	0	00:00:00	0.00
n, Janet	6	6	61	53 (86.89%)	0	0	8	00:00:00	0.00
ammy	4	4	39	22 (56.41%)	0	0	6	00:00:00	0.00
Natasha S	1	0	25	25 (100.00%)	0	0	0	00:00:00	0.00
Total:	**46**	**36**	**42**	**31.91 (75.65%)**	**0**	**2**	**5**	**00:00:00**	**0.09**

The **Author Productivity—Summary Detail** report shows the following information for the selected period:

- **Author**: The last and first name of each provider who dictated reports
- **Reports (Count)**

- **Authored**: Number of reports dictated by the provider
- **Signed**: Number of final reports signed by the provider

- **Words (Average)**
  - **Total**: Average number of words in the provider's reports. In addition to dictated and transcribed words, the total might include words typed by the provider, pasted into the report from another document, or inserted by an RIS.
  - **Dictated**: Average number of words dictated by the provider
  - **Transcribed**: Average number of words transcribed for each provider during the selected period
  - **AutoText**: Average number of AutoText words in the provider's reports
  - **Merged**: Average number of words in merge fields in the provider's reports
- **Average**
  - **Audio Duration**: Average length of audio in the provider's reports. Durations are shown as days, hours, minutes, and seconds.
  - **AutoText**: Average number of AutoText entries in this provider's reports

Tip: *If a provider inserts AutoText in a report and then undoes the action, or later selects and deletes the AutoText, the AutoText usage is still counted in this report. The average might therefore be based on a number greater than the actual number of AutoText entries that remain in the provider's reports.*

Author Productivity—Summary Overview

This report shows, for each provider who dictated reports, how many reports were self-edited and how many sent to an editor. In addition, it gives a total number of reports and minutes dictated for each provider, and a grand total for all providers.

Running the Author Productivity—Summary Overview Report

To run this report:

1. From the **Reports** tab, select the **Author Productivity - Summary Overview** report from the list.
2. Use the following table as a guide for entering parameters for this report:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites from the drop-down list. If your organization has multiple sites, select the site or sites on which to run the report.

Parameter	Definition
Show Details	Select **Yes** to show individual reports or **No** to show overall results only. **Yes** gives you a detailed version of the report, while **No** gives a summary version. **No** is the default.
Reports	Select **All**, **Originals Only**, or **Addendums Only**.

3. Click **View Report**.

Results Screen and Explanations

Author productivity - summary overview

Signed From: 8/14/2012 12:00:00 AM **Signed To:** 8/16/2012 11:59:59 PM

Site: Allison, Bronson Methodist Hospital , Cinci , Huntsville Medical Center , LVHHN , MGH , Natasha , Nate , richard , richard 2 , richard 3 , Site 1 , VALORG , VIHA , Wilson Medical Center2

Reports: All

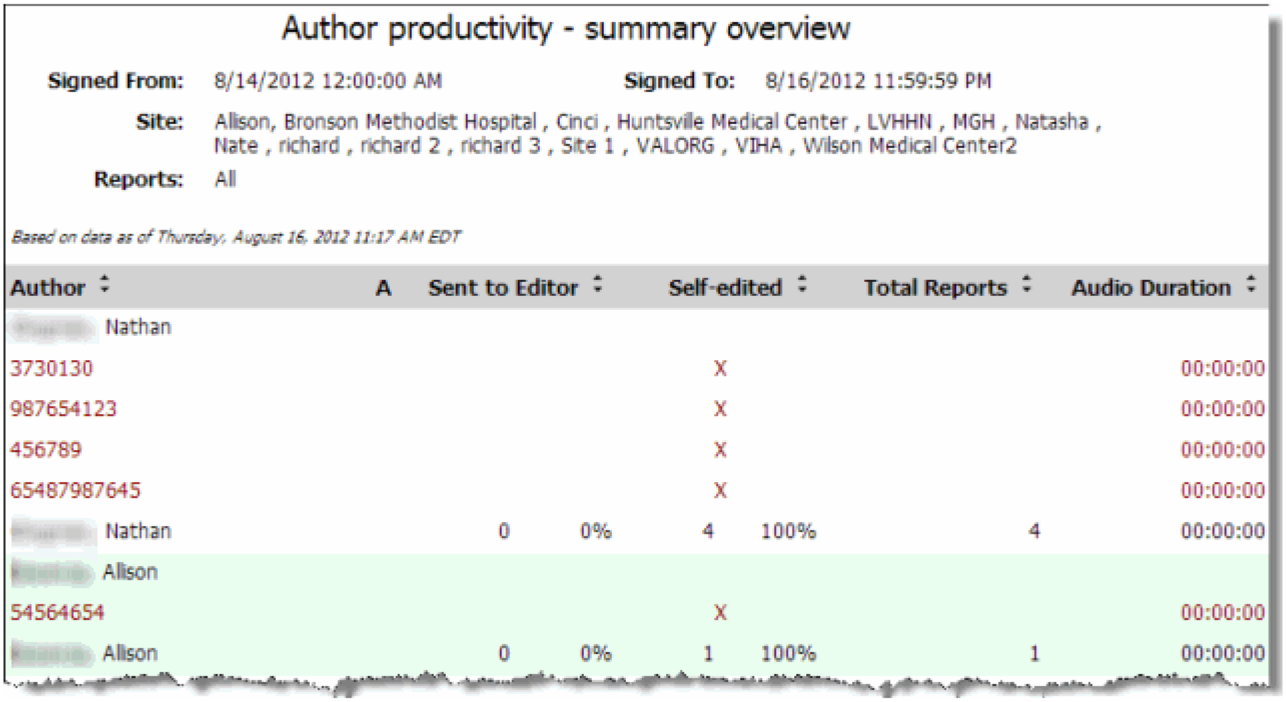
Based on data as of Thursday, August 16, 2012 11:13 AM EDT

Author	Sent to Editor		Self-edited		Total Reports	Audio Duration
	Reports	%	Reports	%		
[illegible]n, Nathan	0	0%	4	100%	4	00:00:00
[illegible]a, Allison	0	0%	1	100%	1	00:00:00
[illegible]s, Myla	0	0%	6	100%	6	00:00:00
[illegible]er, Valerie	0	0%	11	100%	11	00:00:00
[illegible] Connie	0	0%	10	100%	10	00:00:00
[illegible] Connie PA	0	0%	1	100%	1	00:00:00
[illegible]wski, Kevin	0	0%	3	100%	3	00:00:00
[illegible]n, Janet	0	0%	7	100%	7	00:00:00
[illegible]ammy	0	0%	4	100%	4	00:00:00
Grand Totals	0	0%	47	100%	47	00:00:00

The **Author Productivity—Summary Overview** report, *without* details, shows the following information for each dictation provider:

- **Author**: The provider's last and first name
- **Sent to Editor:**
  - Number of reports sent for editing
  - Percentage of reports sent for editing
- **Self-Edited**:
  - Number of reports the provider edited
  - Percentage of reports the provider edited
- **Total Reports**: The number of reports initiated by the provider

- **Audio Duration**: Total days, hours, minutes, and seconds of report audio recorded by the provider



Author productivity - summary overview

Signed From: 8/14/2012 12:00:00 AM **Signed To:** 8/16/2012 11:59:59 PM

Site: Alison, Bronson Methodist Hospital , Cinci , Huntsville Medical Center , LVHHN , MGH , Natasha , Nate , richard , richard 2 , richard 3 , Site 1 , VALORG , VIHA , Wilson Medical Center2

Reports: All

Based on data as of Thursday, August 16, 2012 11:17 AM EDT

Author	A	Sent to Editor		Self-edited		Total Reports	Audio Duration
Nathan							
3730130				X			00:00:00
987654123				X			00:00:00
456789				X			00:00:00
65487987645				X			00:00:00
Nathan		0	0%	4	100%	4	00:00:00
Alison							
54564654				X			00:00:00
Alison		0	0%	1	100%	1	00:00:00

The **Author Productivity—Summary Overview** report, *with details*, shows the following additional information for each report:

Report number: The report's accession number(s). If there are multiple accession numbers associated with a report, they appear in the same row.

A: The addendum's sequence number. For an original report, this column is blank.

Sent to Editor: 'X' appears in this column if the report was sent for editing.

Self-edited: 'X' appears in this column if the report was self-edited.

Audio duration: The length of the audio file in hours, minutes, and seconds.

Author Productivity—Words Dictated

For reports each provider signed during the selected period, this report shows the percentage of words dictated by the provider as opposed to words typed.

Running the Author Productivity—Words Dictated Report

To run this report:

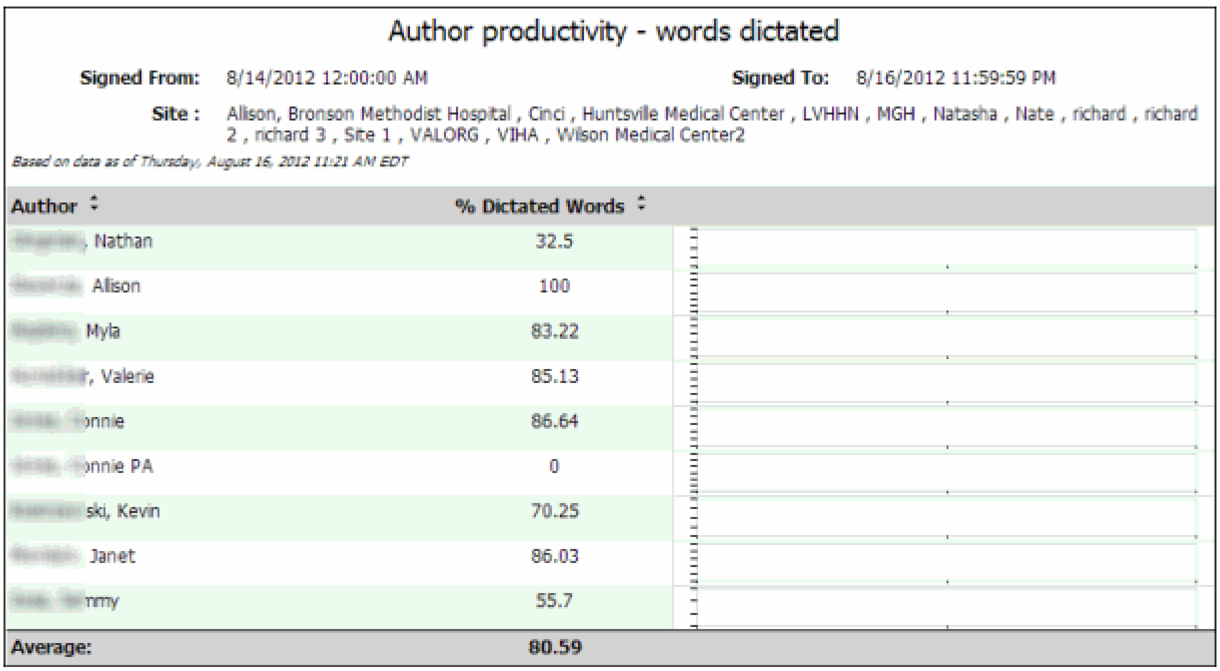
1. On the **Reports** tab, select the **Author Productivity—Words Dictated** report from the list.

2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required. The report will be blank if the date range is less than one month.
Site	If your organization has multiple sites, select the site or sites on which to run the report.

3. Click **View Report**.

Results Screen and Explanations


Author productivity - words dictated

Signed From: 8/14/2012 12:00:00 AM Signed To: 8/16/2012 11:59:59 PM

Site : Allison, Bronson Methodist Hospital , Cinci , Huntsville Medical Center , LVHHN , MGH , Natasha , Nate , richard , richard 2 , richard 3 , Site 1 , VALORG , VIHA , Wilson Medical Center2

Based on data as of Thursday, August 16, 2012 11:21 AM EDT

Author	% Dictated Words
, Nathan	32.5
Allison	100
Myla	83.22
r, Valerie	85.13
onnie	86.64
onnie PA	0
ski, Kevin	70.25
Janet	86.03
nmy	55.7
Average:	80.59

The **Author Productivity—Words Dictated** report shows the following information:

- **Author**: Last name, first name, middle name of the person who dictated the report.
- **% Dictated Words**: The number of words in the dictated audio divided by the total number of words in the final, signed document. A low percentage here can indicate that the provider used many dictation AutoText entries.
- **Graph**: The green line represents the percentage of words dictated; the blue line represents the percentage of words typed. As one percentage increases, the other decreases.

AutoText Reports

Note that if a provider inserts AutoText and then removes it, the AutoText usage still counts in these reports. The totals, therefore, might reflect a number of AutoText uses greater than the number of AutoText entries remaining in the documents

AutoText—By Account

This report shows Site-level AutoText usage by each author within a designated time frame, plus a detail report of which Site-level AutoText were actually used.

To run this report:

1. On the **Reports** tab, select the **AutoText—By Account** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Used From and Used To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.

3. Click **View Report**.

Results Screen and Explanations

AutoText - by account

Used From: 1/2/2015 12:00:00 AM **Used To:** 4/24/2015 11:59:59 PM

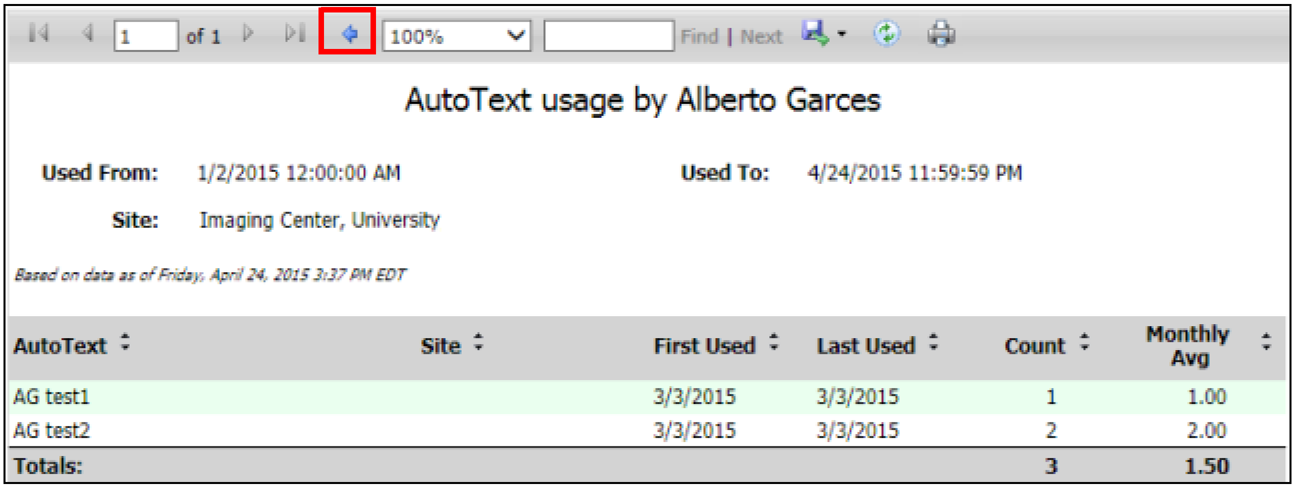
Site: Imaging Center, University

Based on data as of Friday, April 24, 2015 3:28 PM EDT

			AutoText Count			
Account	**First Used**	**Last Used**	**Site**	**Personal**	**Total**	**Monthly Avg**
Attending, Stephanie	3/4/2015	3/4/2015	0	3	3	3.00
Garces, Alberto	3/3/2015	3/3/2015	0	3	3	3.00
Grace, Lilian	3/2/2015	3/11/2015	0	2	2	2.00
Henry, Philip	2/10/2015	2/10/2015	1	1	2	2.00
Taylor, James	2/4/2015	2/4/2015	0	2	2	2.00
Totals:			**1**	**11**	**12**	**2.40**

The **AutoText—By Account** report provides the following information:

- **Author** (last name, first name): Each author's name is a link to a more detailed report showing exactly which AutoText the author used (see illustration below).



AutoText usage by Alberto Garces

Used From: 1/2/2015 12:00:00 AM **Used To:** 4/24/2015 11:59:59 PM

Site: Imaging Center, University

Based on data as of Friday, April 24, 2015 3:37 PM EDT

AutoText	Site	First Used	Last Used	Count	Monthly Avg
AG test1		3/3/2015	3/3/2015	1	1.00
AG test2		3/3/2015	3/3/2015	2	2.00
Totals:				**3**	**1.50**

Note: *To return to the original report, click the left-pointing arrow next to the zoom size.*

- **First Used** (date)
- **Last Used** (date)
- **Count**
- **Monthly Average**

AutoText—Summary

This report provides a summary of Site-level AutoText usage within a designated time frame, plus a detail report showing which authors used each Site-level AutoText.

To run this report:

1. On the **Reports** tab, select the **AutoText—Summary** report from the list.
2. Enter your parameters for this report:

Parameter	Definition
From Date and To Date	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.

3. Click **View Report**.

Results Screen and Explanations

AutoText - summary

From Date: 6/1/2010 12:00:00 AM **To Date:** 9/30/2010 11:59:59 PM

Site : IRR, IRR02 , SYS105 , Test Site B , Test Site C

Based on data as of Wednesday, September 29, 2010 3:57 PM EDT

AutoText	First Used	Last Used	Monthly Use	Total Use
3D recons 2	7/14/2010	8/12/2010	2.00	2
abdomen pelvis no tv ultrasoun	6/11/2010	8/12/2010	1.00	3
abdomen pelvis with TV ultraso	6/17/2010	8/12/2010	1.00	2
abdomen ultrasound 2	6/10/2010	9/29/2010	1.50	6
abdominal wall US 2	6/17/2010	6/17/2010	1.00	1
allergy 2	6/17/2010	9/28/2010	1.50	6
ankle arthro OPA	6/17/2010	7/19/2010	1.00	2
ankle OPA	9/28/2010	9/28/2010	2.00	2
aorta	7/21/2010	9/28/2010	1.00	3
appy	6/17/2010	6/17/2010	1.00	1
baby head	6/17/2010	9/29/2010	1.00	4
cervical OPA	6/17/2010	6/17/2010	2.00	2
cervical with contrast OPA	6/9/2010	6/17/2010	3.00	3
CT A2	6/10/2010	9/28/2010	1.50	6
CT G9	6/17/2010	6/17/2010	1.00	1
default header MR	6/17/2010	6/17/2010	1.00	1
Duplex	7/20/2010	7/20/2010	1.00	1

The **AutoText—Summary** report provides the following information:

- **AutoText** (name): Each AutoText name is a link to a more detailed report showing which author(s) used the AutoText (see illustration below).

'baby head' usage by radiologist

From Date: 6/1/2010 12:00:00 AM **To Date:** 9/30/2010 11:59:59 PM

Based on data as of Wednesday, September 29, 2010 3:59 PM EDT

Account	First Used	Last Used	Monthly Use	Total Use
Dyer, Rae	5/7/2010	5/7/2010	2.00	2
Tester, Tricia	5/5/2010	5/5/2010	1.00	1
Mil, Diviya	3/1/2010	3/1/2010	1.00	1
Ramula, Tri	4/15/2010	4/15/2010	1.00	1
Demera, Ravi	4/19/2010	4/19/2010	1.00	1
Total:			**2.00**	**6**

- **First Used** (date): The first time this user invoked AutoText during the selected time frame
- **Last Used** (date): The last time this user invoked AutoText during the selected time frame

- **Monthly Use**: The average number of times this AutoText entry was used per month in the selected date range
- **Total Use:** The total number of times this user invoked AutoText during this time frame

AutoText—Verbiage

This report shows the AutoText entries used by a specific provider or by all providers.

Running the AutoText—Verbiage Report

To run this report:

1. From the **Reports** tab, select the **AutoText—Verbiage** report from the list.
2. Type the user name to see AutoText used by a specific provider.

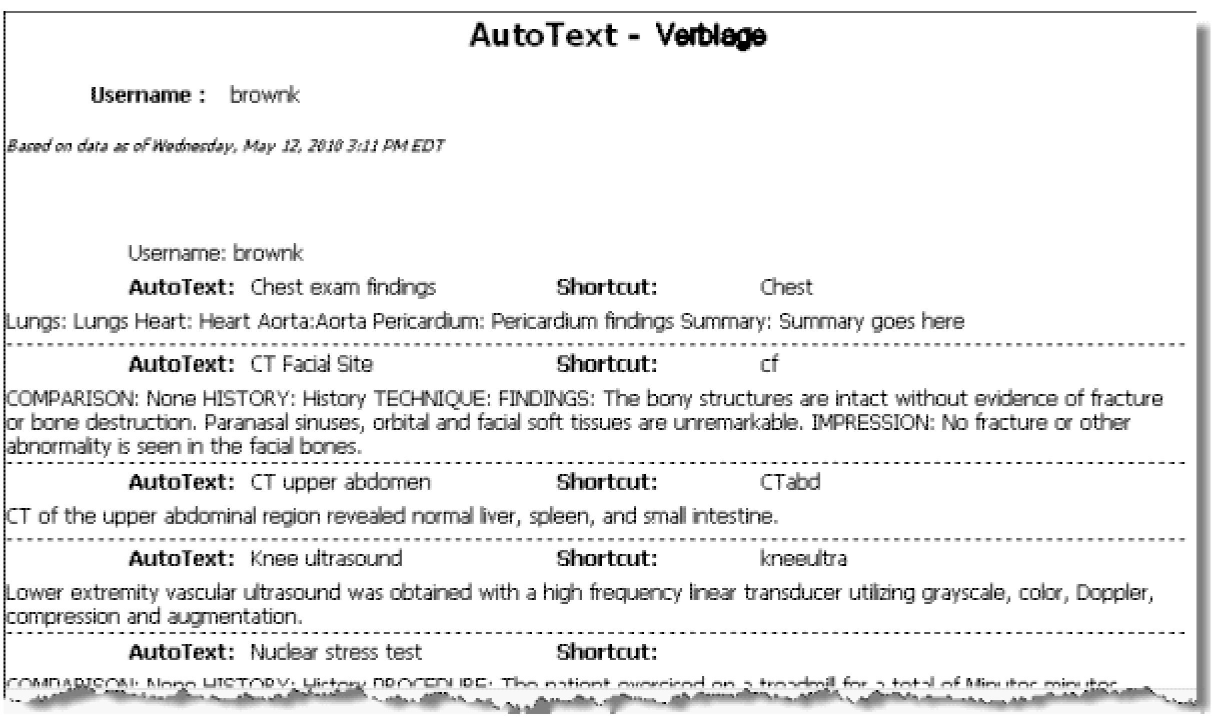
   OR

   Type an asterisk (*) to see all system and personal AutoText used by all providers.

   OR

   Type an ampersand (&) to see all system AutoText used by all providers.
3. Click **View Report**.

Results Screen and Explanations



AutoText - Verbiage

Username : brownk

Based on data as of Wednesday, May 12, 2010 3:11 PM EDT

Username: brownk

AutoText: Chest exam findings **Shortcut:** Chest

Lungs: Lungs Heart: Heart Aorta:Aorta Pericardium: Pericardium findings Summary: Summary goes here

AutoText: CT Facial Site **Shortcut:** cf

COMPARISON: None HISTORY: History TECHNIQUE: FINDINGS: The bony structures are intact without evidence of fracture or bone destruction. Paranasal sinuses, orbital and facial soft tissues are unremarkable. IMPRESSION: No fracture or other abnormality is seen in the facial bones.

AutoText: CT upper abdomen **Shortcut:** CTabd

CT of the upper abdominal region revealed normal liver, spleen, and small intestine.

AutoText: Knee ultrasound **Shortcut:** kneeultra

Lower extremity vascular ultrasound was obtained with a high frequency linear transducer utilizing grayscale, color, Doppler, compression and augmentation.

AutoText: Nuclear stress test **Shortcut:**

COMPARISON: None HISTORY: History PROCEDURE: The patient exercised on a treadmill for a total of Minutes minutes

The **AutoText—Verbiage** report provides the following information:

- **Username:** The login ID of the person who used the AutoText
- **AutoText**: Name of the AutoText entry used
- **Shortcut**: The shortcut for this AutoText entry, if applicable
- **AutoText Content**: The full AutoText as it appears in the report

Billing Reports

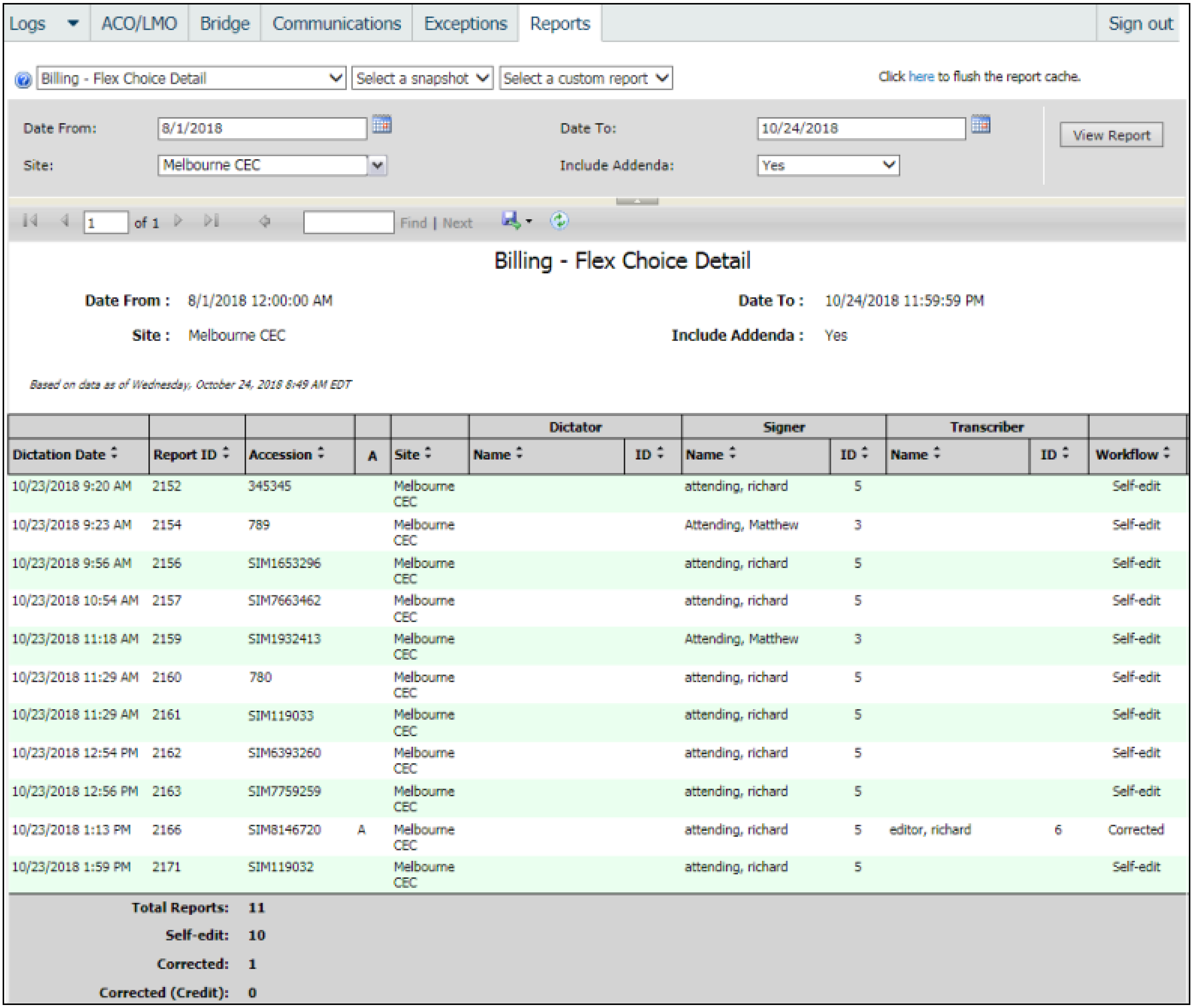
The following billing reports are included to help you improve your billing practices:

- Billing - Flex Choice Detail
- Billing - True Up Detail
- Billing - True Up Summary

Note that the two **True Up** reports count reports based on **Final** date (as opposed to **Modified** date).

An example of each report including results appears on the next few pages of this document. The filter fields (date to/from, site, and so on) are self-explanatory.

Flex Choice Detail Report



Billing - Flex Choice Detail

Date From : 8/1/2018 12:00:00 AM **Date To :** 10/24/2018 11:59:59 PM

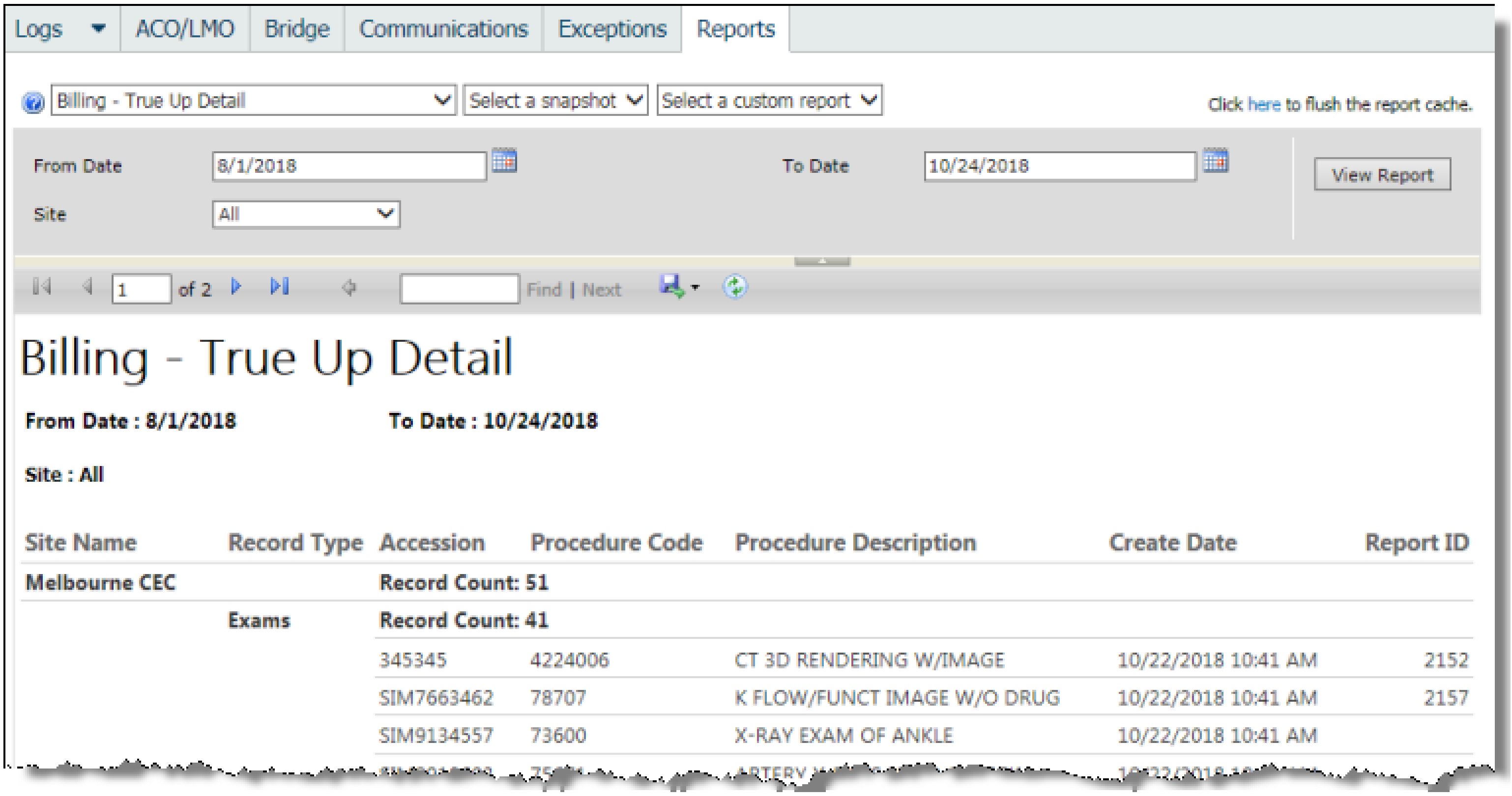
Site : Melbourne CEC **Include Addenda :** Yes

Based on data as of Wednesday, October 24, 2018 8:49 AM EDT

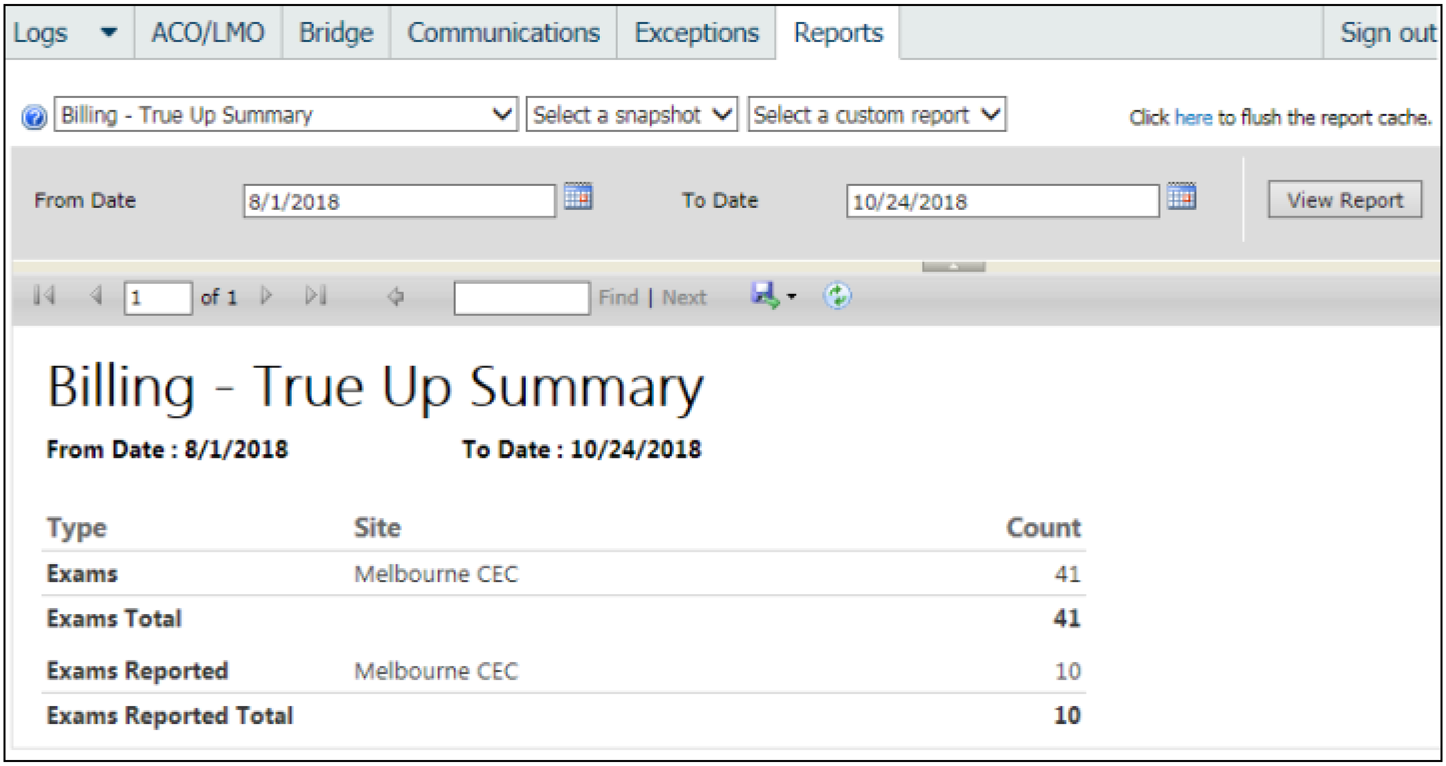
					Dictator		Signer		Transcriber		
Dictation Date	**Report ID**	**Accession**	**A**	**Site**	**Name**	**ID**	**Name**	**ID**	**Name**	**ID**	**Workflow**
10/23/2018 9:20 AM	2152	345345		Melbourne CEC			attending, richard	5			Self-edit
10/23/2018 9:23 AM	2154	789		Melbourne CEC			Attending, Matthew	3			Self-edit
10/23/2018 9:56 AM	2156	SIM1653296		Melbourne CEC			attending, richard	5			Self-edit
10/23/2018 10:54 AM	2157	SIM7663462		Melbourne CEC			attending, richard	5			Self-edit
10/23/2018 11:18 AM	2159	SIM1932413		Melbourne CEC			Attending, Matthew	3			Self-edit
10/23/2018 11:29 AM	2160	780		Melbourne CEC			attending, richard	5			Self-edit
10/23/2018 11:29 AM	2161	SIM119033		Melbourne CEC			attending, richard	5			Self-edit
10/23/2018 12:54 PM	2162	SIM6393260		Melbourne CEC			attending, richard	5			Self-edit
10/23/2018 12:56 PM	2163	SIM7759259		Melbourne CEC			attending, richard	5			Self-edit
10/23/2018 1:13 PM	2166	SIM8146720	A	Melbourne CEC			attending, richard	5	editor, richard	6	Corrected
10/23/2018 1:59 PM	2171	SIM119032		Melbourne CEC			attending, richard	5			Self-edit

Total Reports: 11
Self-edit: 10
Corrected: 1
Corrected (Credit): 0

True Up Detail Report



True Up Summary Report



Editor Productivity Reports

The reports in this section allow you to examine information about editors' productivity.

Editor Productivity—Hourly Detail

This report shows the number of reports edited during each hour of the day during a specified date range. It provides subtotals by editor and grand totals for the morning and evening periods.

The Editor Productivity—Hourly Detail—Past Day report and Editor Productivity—Hourly Detail—Past week reports are identical to the Editor Productivity Hourly Detail report, except that the show activity during the past 24 hours and past week, respectively.

Running the Editor Productivity—Hourly Detail Report

To run this report:

1. From the **Reports** tab, select the **Editor Productivity—Hourly Detail** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Corrected From and Corrected To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. Only applicable to organizations with multiple sites.
Editor	Select one or more editors from the drop-down list.

3. Click **View Report**.

Results Screen and Explanations

Editor productivity - hourly detail

Corrected From: 1/1/2010 12:00:00 AM **Corrected To:** 9/30/2010 11:59:59 PM
Site : IRR, IRR02 , SYS105 , Test Site B , Test Site C **Editor:** All

Based on data as of Wednesday, September 29, 2010 2:09 PM EDT

Editor		12xx	1xx	2xx	3xx	4xx	5xx	6xx	7xx	8xx	9xx	10xx	11xx	Total
Alexander, Hannah														
	AM	0	0	0	0	0	0	0	0	0	2	2	0	4
	PM	0	0	0	2	2	0	0	0	0	0	0	0	4
Correctionist, Mary														
	PM	0	0	1	0	0	0	0	0	0	0	0	0	1
e, tricia														
	PM	0	0	0	2	0	0	0	0	0	0	0	0	2
Editor, Debbie														
	PM	0	0	0	0	0	0	0	0	0	2	3	0	5
Hrkach, Editor														
	PM	0	0	0	1	0	0	0	0	0	0	0	1	2
Testeditor, Editor														
	AM	0	0	0	0	0	0	0	0	0	1	0	0	1
Grand Totals AM		0	0	0	0	0	0	0	0	0	3	2	0	5
Grand Totals PM		0	0	1	5	2	0	0	0	0	2	3	1	14

The **Editor Productivity—Hourly Detail** report shows the following information:

- The last and first name of the editor
- Number of reports edited during the AM hours, broken down by hour
- Number of reports edited during the PM hours, broken down by hour
- Grand totals for AM reports, broken down by hour
- Grand totals for PM reports, broken down by hour

Editor Productivity—Summary

This report provides information on all editors about total number of lines, total number of characters, average lines, and average characters each editor produced based on the selected date range.

Running the Editor Productivity—Summary

To run this report:

1. On the **Reports** tab, select the **Editor Productivity—Summary** report from the list.
2. Use the following table as a guide for entering parameters for this report:

Parameter	Definition
Corrected From and Corrected To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations that have multiple sites.
Characters Per Line	Select the number of characters that make up a line from the drop-down list. The default setting for characters per line is 65.
Show Details	Select **True** or **False** If you select **True** for **Show Details**, the information for each report by each editor is shown (as opposed to the total for all reports for each editor).
Reports	Select **All**, **Originals Only**, or **Addendums Only**.

3. Click **View Report**.

Results Screen and Explanations

Editor productivity - summary

Corrected From: 9/13/2010 12:00:00 AM **Corrected To:** 9/16/2010 11:59:59 PM

Site: Site 1 , Test Site B , Test Site C

Chars Per Line: 65 **Reports:** All

Based on data as of Thursday, September 16, 2010 9:00 AM PDT

Editor	Accession	A	Reports	Lines	Characters	Avg. Lines	Avg. Chars
ed							
	201			14.4	937		
	202			10.7	698		
ed			2	25.2	1635	12.6	817.5
Mylor, Siry							
	313855			29.1	1889		
	313942			32.4	2106		
	312652	1		41.2	2678		

The **Editor Productivity—Summary** report *with details* shows the following information:

- **Editor**: The last and first name of the editor who corrected the reports
- **Accession**: Accession number of the study on which the report was dictated
- **A:** The addendum's sequence number. For an original report, this column is blank.
- **Reports**: Number of reports for each editor, including a grand total for all editors at the bottom
- **Lines**: Number of lines (based on the **Characters Per Line** setting) in the report, with a total for the editor and a grand total
- **Characters**: Number of characters in the report, with a total for each editor and a grand total
- **Avg. Lines**: Average number of lines in the editor's reports, with a grand total
- **Avg. Chars**: Average number of characters in the editor's reports, with a grand total

Reports Type Reports

Report Custom Fields

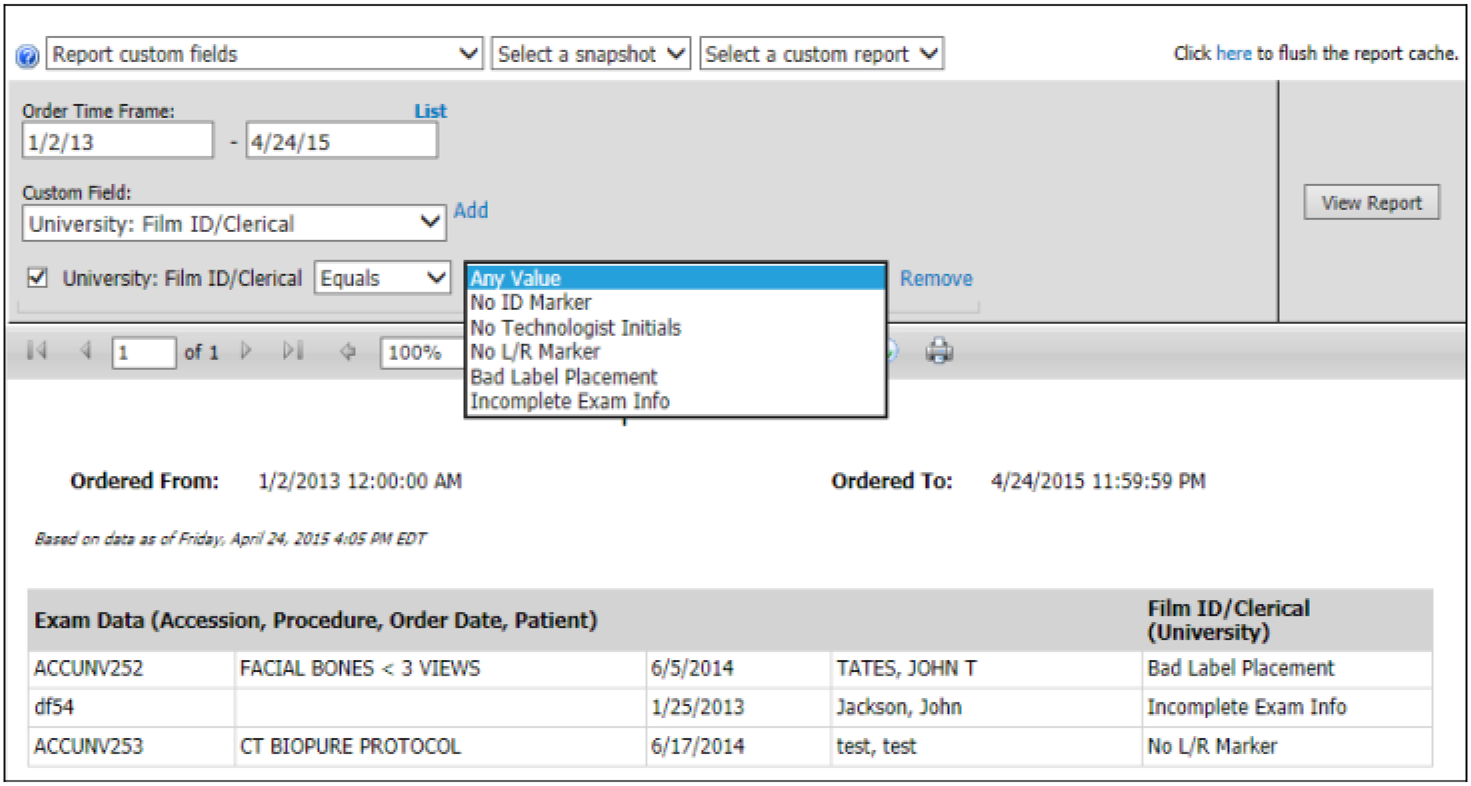
The **Custom Fields** report shows information about reports in which certain custom fields contain specified values.

Running the Custom Fields Report

To run this report:

1. On the **Reports** tab in the **Logs** group, select **Report custom fields** from the drop-down list.
2. Select a beginning and ending **Order Time Frame**. Click in each field to display a calendar from which you can select each date.
3. Select a custom field from the list, and then click **Add**. Note that if you have access to more than one site, the site name precedes the custom field name.
4. Select **Equals**, **Not equals**, or **Contains**.
5. Select a value (if there is a drop-down list of choices) or type in a value.
6. Select the check box next to any field whose contents you want to see in the report. The software will use the unchecked fields for selection, but will not display them in the report.
7. Repeat steps 2 through 6 for each custom field you want to include. You can delete any field by clicking the **Remove** link next to it.

8. Click **View Report**. Any reports that contain the values you indicated appear in the report.



Reports—Anatomy Modality Summary

This report shows a summary of reports submitted, organized by body region and modality.

Running the Anatomy Modality Summary Report

To run this report:

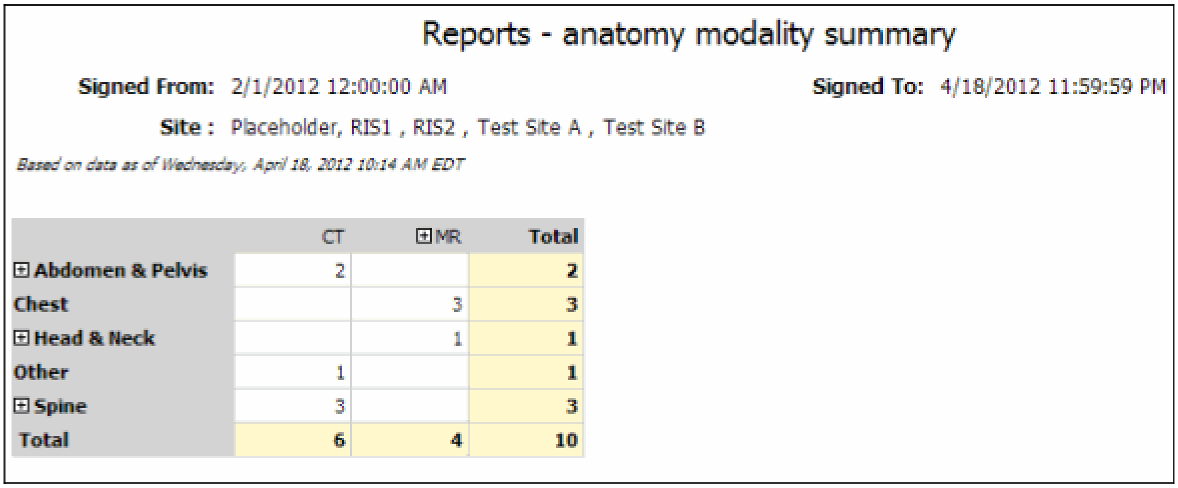
1. On the **Reports** tab, select the **Reports—Anatomy Modality Summary** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.

3. Click **View Report**.

Results Screen and Explanations

The illustration below shows the content of the Anatomy Modality Summary report.



Reports - anatomy modality summary

Signed From: 2/1/2012 12:00:00 AM **Signed To:** 4/18/2012 11:59:59 PM

Site : Placeholder, RIS1 , RIS2 , Test Site A , Test Site B

Based on data as of Wednesday, April 18, 2012 10:14 AM EDT

	CT	⊞MR	Total
⊞ Abdomen & Pelvis	2		2
Chest		3	3
⊞ Head & Neck		1	1
Other	1		1
⊞ Spine	3		3
Total	6	4	10

The **Reports—Anatomy Modality Summary** report shows the following information in its table:

- **Each row**: Shows a body region, such as **Spine** or **Head & Neck**
- **Each column**: Shows the modalities, such as **CT** or **MR**, found within the report's date range, with totals for each anatomical region and grand totals for each modality.

  Click the plus sign next to an anatomical region or modality to see more specific details:

	CT	Radiography	US	Total
⊟ **Abdomen & Pelvis**	**2**	**15**	**2**	**19**
Abdomen	1	13		**14**
Pelvis	1	2		**3**
Retroperitoneum			2	**2**
⊞ **Cardiac**		**22**		**22**
⊞ **Chest**	**2**	**104**		**106**
⊟ **Extremity**		**11**		**11**
⊟ **Lower Extremity**		9		**9**
Ankle		1		**1**
Foot		1		**1**
Hip		2		**2**
Knee		2		**2**
Leg		2		**2**
Thigh		1		**1**
⊞ **Upper Extremity**		2		**2**
⊞ **Head & Neck**	**5**	**1**		**6**
⊞ **Spine**	**3**	**1**		**4**
Total	**12**	**154**	**2**	**168**

Reports—Embedded Images

This report shows information on images that were added to reports.

Running the Embedded Images Report

To run this report:

1. On the **Reports** tab, select the **Reports—Embedded Images** report from the list.
2. Enter your parameters for the report:

Parameter	Definition
Created From and Created To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report.This parameter is applicable only to organizations with multiple sites.
Account	Select the user whose account you want to view, or select **All**.
Reports	Select the type of reports you want to include: **Originals only**; **Addendums only**; or **All**.

Results Screen and Explanations

Reports - embedded images

Created From: 11/1/2015 12:00:00 AM **Created To:** 12/11/2015 11:59:59 PM

Account: All **Reports:** All

Site: CCH, Guilford Radiology, Imaging Center, Lakeside Clinic, LCS, LCS Sample, LCS2, LCS3, Riverview Hospital

Based on data as of Friday, December 11, 2015 10:19 AM EST

							Images		
Accessions	**A**	**Procedure**	**Site**	**Resident**	**Attending**	**Signed**	**Count**	**Avg. Resolution**	**Avg. Size**
1		CT VIRTUAL COLONSCOPY SCREEN	CCH		Kovalenko, Kate	11/20/2015 7:45:02 AM	2	472 x 340	2.00" x 1.45"
3		CT NECK W/CONTRAST	CCH	Resident, Resident	Kovalenko, Kate		3	370 x 264	2.00" x 1.46"
Carotid		SONOGRAPHY, RENAL/AORTA	CCH		Kovalenko, Kate		2	809 x 604	2.50" x 1.87"
visage		INJECTION PROCEDURE,DUCTOGRAM	CCH		Kovalenko, Kate		6	304 x 325	2.42" x 2.40"
Totals:							**13**	**423 x 356**	**2.27" x 1.96"**

The **Reports—Embedded Images** report shows the following information:

- **Accessions**: The identifying number assigned in the RIS
- **A**: The addendum's sequence number. For an original report, this column is blank.
- **Procedure**: The type of procedure that generated the images
- **Site**: Site from which the report originated
- **Resident**: Last name, first name, and middle name of the resident who created the report, if applicable
- **Attending**: Name of the attending radiologist who signed the report
- **Signed**: Date the report was signed
- **Images Count**: Number of images inserted into the report
- **Images Avg. Resolution**: Average screen resolution (in pixels) of the images in the report
- **Images Avg. Size**: Average size (in inches) of the images in the report

Reports—Medical Order with Barcode

This report shows the medical order information, including the barcodes for both the patient and the study, based on the **Order Number**.

Running the Medical Order with Barcode Report

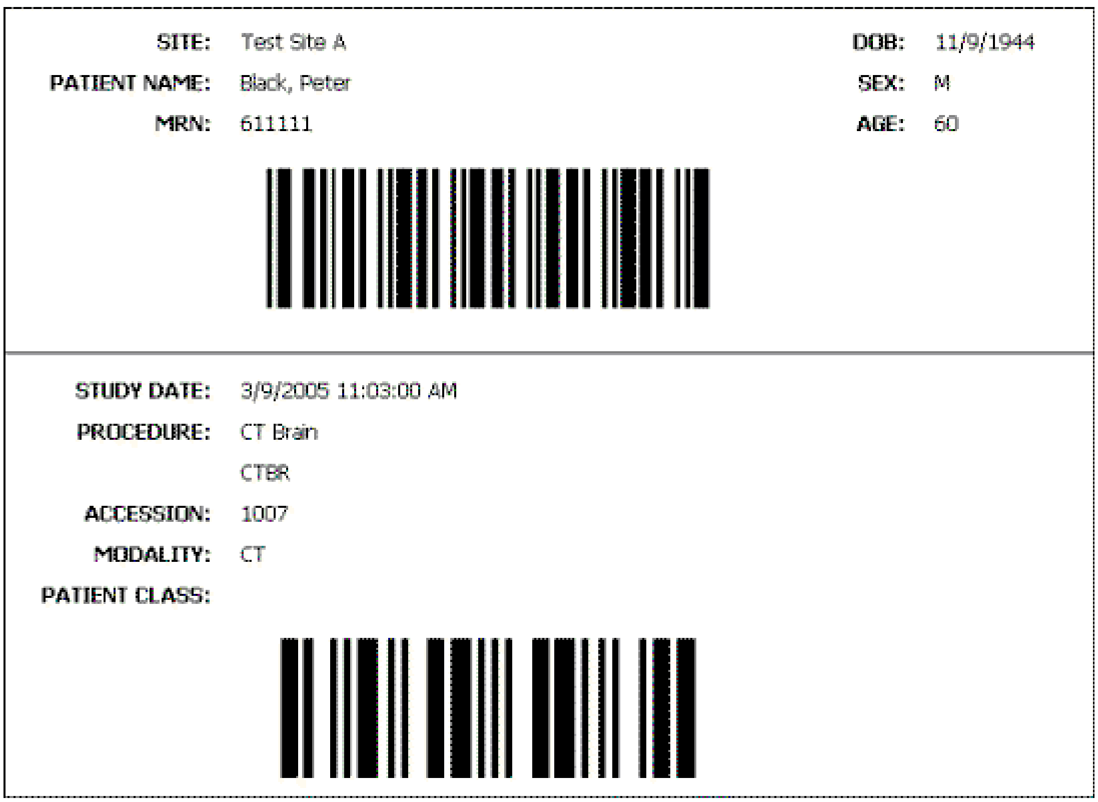
To run this report:

1. From the **Reports** tab, select the **Medical Order with Barcode** report from the list.

2. Select the site.
3. Enter the order number (usually the accession number).
4. Click **View Report**.

Results Screen and Explanations

The illustration below shows the content of a typical *PowerScribe 360 Reporting* report using the **Reports—Medical Order with Barcode** report.


SITE: Test Site A
DOB: 11/9/1944
PATIENT NAME: Black, Peter
SEX: M
MRN: 611111
AGE: 60

STUDY DATE: 3/9/2005 11:03:00 AM
PROCEDURE: CT Brain
CTBR
ACCESSION: 1007
MODALITY: CT
PATIENT CLASS:

Reports—Report List

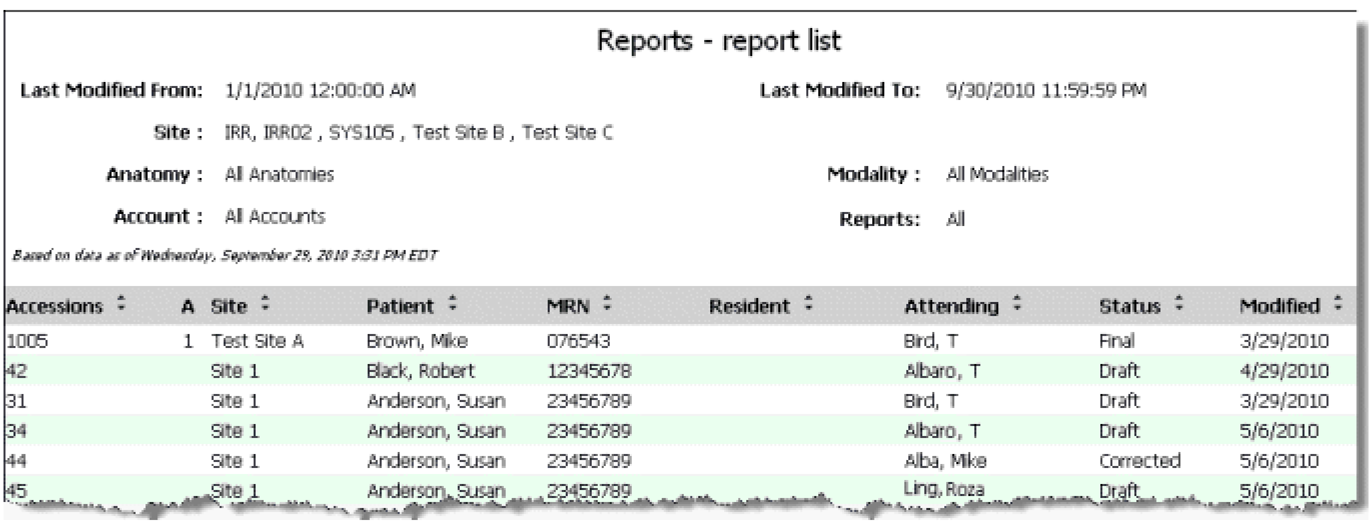
This report shows all reports that meet your criteria. For example, you can view all reports that include a particular AutoText entry, or that are concerned with a certain anatomical part.

To run this report:

1. On the **Reports** tab, select the **Reports—Report List** report from the list.
2. Enter your parameters for the report:

Parameter	Definition
Last Modified From and Last Modified To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report.This parameter is applicable only to organizations with multiple sites.
Anatomy	Select an anatomical part, or select **All Anatomies**. The report includes documents that are related to the anatomy you specify.
Modality	Select one or more modalities for your report. The report includes only documents concerned with the modalities you select.
Account	Select one or more user accounts to include in the report.
AutoText Used	Select an AutoText entry, or select **Any AutoText**. The report includes only the documents that contain the AutoText.
Reports	Select **Originals Only**, **Addendums Only**, or **All**.

Results Screen and Explanations



Reports - report list

Last Modified From: 1/1/2010 12:00:00 AM
Last Modified To: 9/30/2010 11:59:59 PM
Site : IRR, IRR02 , SYS105 , Test Site B , Test Site C
Anatomy : All Anatomies
Modality : All Modalities
Account : All Accounts
Reports: All
Based on data as of Wednesday, September 29, 2010 3:31 PM EDT

Accessions	A	Site	Patient	MRN	Resident	Attending	Status	Modified
1005	1	Test Site A	Brown, Mike	076543		Bird, T	Final	3/29/2010
42		Site 1	Black, Robert	12345678		Albaro, T	Draft	4/29/2010
31		Site 1	Anderson, Susan	23456789		Bird, T	Draft	3/29/2010
34		Site 1	Anderson, Susan	23456789		Albaro, T	Draft	5/6/2010
44		Site 1	Anderson, Susan	23456789		Alba, Mike	Corrected	5/6/2010
45		Site 1	Anderson, Susan	23456789		Ling, Roza	Draft	5/6/2010

The **Reports—Report List** report shows the following information:

- **Accession**: The identifying number assigned in the RIS
- **A**: The addendum’s sequence number. For an original report, this column is blank.
- **Patient**: Last name, first name, and middle name of the patient who is the subject of the report
- **MRN**: The unique identifying number assigned to the patient
- **Resident**: The name of the resident who dictated the report, if applicable
- **Attending**: The name of the attending radiologist

- **Status:** The current state of the report
- **Modified**: The date the report was last changed

Reports—Unsigned

This report lists reports that are currently unsigned by attending or resident providers. Unsigned reports do not include those sent to an editor.

Running the Reports—Unsigned Report

To run this report:

1. From the **Reports** tab, select the **Reports—Unsigned Reports** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
From Date and To Date	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.
Correction Workflow	Select **Self-edit**, **In-house**, **Delegated**, or **All**.
Author	Select an author from the drop-down list, or select **All**.
Editor	Select an editor from the drop-down list, or select **All**.
Reports	Select **Originals only**, **Addendums only**, or **All**.

3. Click **View Report**.

Results Screen and Explanations

Reports - unsigned

From Date: 8/14/2012 12:00:00 AM
To Date: 8/16/2012 11:59:59 PM
Site: Alison, Bronson Methodist Hospital , Cinci , Huntsville Medical Center , LVHHN , MGH , Natasha , Nate , richard , richard 2 , richard 3 , Site 1 , VALORG , VIHA , Wilson Medical Center2
Correction Workflow: Self-edit, In-house , Delegated
Author: All
Editor: All
Reports: All

Based on data as of Thursday, August 16, 2012 2:44 PM EDT

Accession	A	Site	MRN	Dictated	Editor	Author	Corrected	Approved	Audio Duration
0		Natasha	TEMPORARY	8/15/2012 2:50:48 PM		White, Natasha S		8/15/2012 2:56:35 PM	00:00:00
007123		Nate	TEMPORARY	8/16/2012 2:44:38 PM		Clingman, Nathan			00:00:00
1		MGH	TEMPORARY	8/16/2012 12:22:10 PM		Bartlett, Tara			00:00:00
1111111		MGH	TEMPORARY	8/15/2012 2:32:17 PM		Bartlett, Tara			00:00:00
121332321		Site 1	TEMPORARY	8/16/2012 12:40:41 PM		Morrison, Janet			00:00:00
123		Wilson Medical	TEMPORARY	8/16/2012 9:08:45 AM		Jones, Connie			00:00:00

The **Reports—Unsigned** report shows the following information:

- **Accession**: The identifying number assigned in the RIS
- **A**: The addendum's sequence number. For an original report, this column is blank.
- **Site**: The site where the report was created
- **MRN**: The unique identifying number assigned to the patient
- **Dictated**: Date and time the report was created
- **Editor**: Name of the individual who corrected the report
- **Author**: Name of the provider who dictated the report
- **Corrected**: Date and time the report was edited
- **Approved**: Date and time the report was approved
- **Audio Duration**: The length of the report's audio, in hours, minutes, and seconds

Turnaround Time (TAT) Reports

In *PowerScribe 360 Reporting*, turnaround time (or TAT) falls into three categories: **Dictation**, **Correction**, and **Approval**.

- **Dictation TAT**: The time period from the beginning of dictation to the end of dictation.
- **Correction TAT**: The period from the time a provider clicks the **Send to Editor** button (or the **Transcribe** button in a **Send to Editor** workflow) to the time the editor clicks **Finish**.
- **Approval TAT**: The period from the time a resident clicks the **Send to Editor** button (or the **Transcribe** button in a **Send to Editor** workflow) to the time the resident clicks **Approve**.

TAT—Reports Sent to Editor by Attending

This report shows the turnaround time (TAT) for each report within the supplied date range. In this case, TAT is defined as the amount of time, in minutes, from the beginning of the dictation (when the provider initiated the report) to the end of the correction. In addition, this report provides an average of report lengths and average TATs for the supplied date range. Reports must be final to appear in this report.

Running the TAT—Reports Sent to Editor by Attending Report

To run this report:

1. From the **Reports** tab, select **TAT—Reports Sent to Editor by Attending** from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.
Author	Select an author, or all authors, from the drop-down list.
Editor	Select an editor, or all editors, from the drop-down list.
Reports	Select **All**, **Originals Only**, or **Addendums Only**.

3. Click **View Report**.

Results Screen and Explanations

TAT - reports sent to editor by attending

Signed From: 2/1/2013 12:00:00 AM **Signed To :** 5/7/2013 11:59:59 PM

Site: Imaging Center, Stephanie Site , University

Author: All **Editor:** All

Reports: All

Based on data as of Tuesday, May 07, 2013 10:54 AM EDT

Accession	A	Site	Attending	Editor	Sent to Editor	Corrected	Audio Duration	Correction TAT
55		Stephanie Site	Attending, Stephanie	Editor, Stephanie	5/3/2013 2:02:03 PM	5/3/2013 3:20:28 PM	00:10:40	01:18:25
							Total Audio Duration :	00:10:40
							Average Audio Duration :	00:10:40
Total Number of Reports:		1					Average Correction TAT :	01:18:25

The **TAT—Reports Sent to Editor by Attending** report includes the following information:

- **Accession**: The identifying number assigned in the RIS
- **A:** The addendum's sequence number. For an original report, this column is blank.
- **Site**: The site at which the report was dictated.
- **Attending**: Last name, and first name of the attending provider who initiated the report
- **Editor**: Name of the person who corrected or transcribed the report
- **Sent to Editor**: The date and time the provider sent the report for correction.
- **Corrected:** The date and time that the editor finished work on the report
- **Audio Duration**: Length of the dictated report in hours, minutes, and seconds
- **Correction TAT**: Number of minutes from the time the provider sent the report to be edited until the editor finished work on the report

TAT—Reports Sent to Editor by Resident Report

This report is identical to the **TAT—Reports Sent to Editor by Attending** report described above, except that it reports on **residents** instead of attending radiologists. All parameter fields and result fields are the same as the **TAT—Reports Sent to Editor by Attending** report.

TAT—Summary Author Dictated to Signature

This report shows, for each author, the average turnaround from the time dictation began to the time the report was signed.

Running the TAT—Summary Author Dictated to Signature Report

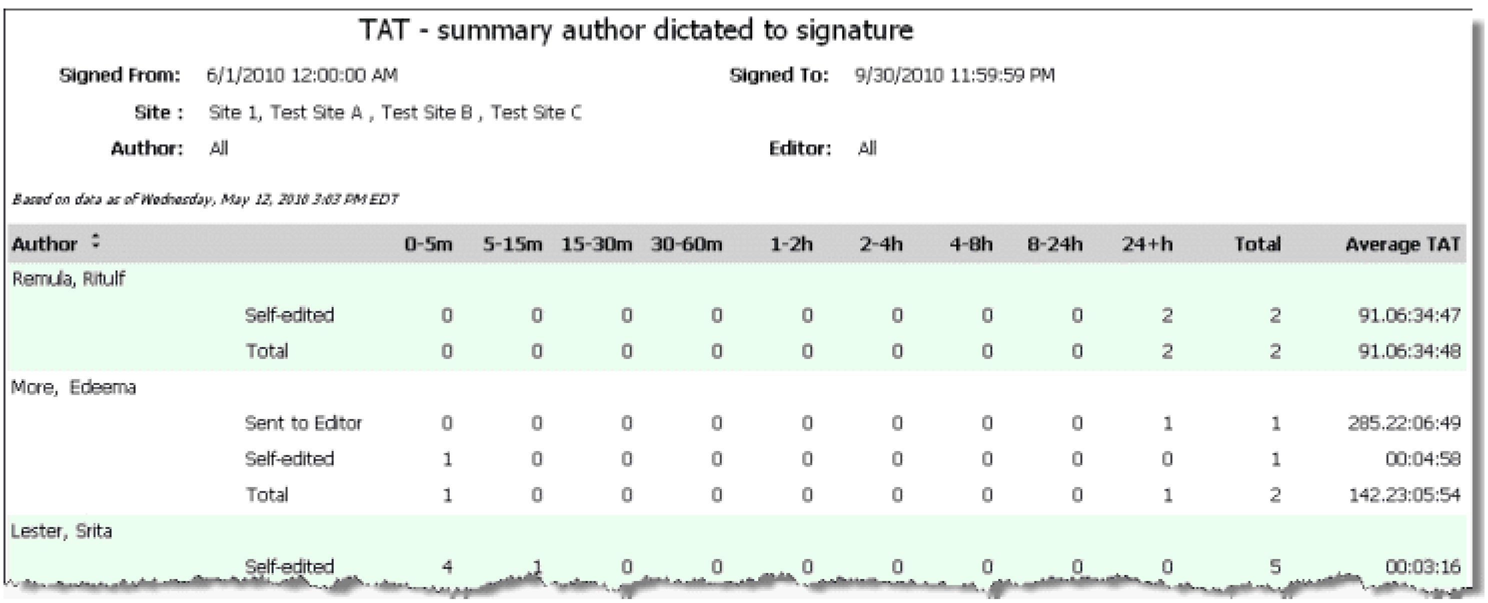
To run this report:

1. From the **Reports** tab, select the **TAT—Summary Author Dictated to Signature** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
SIgned From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.
Author	Select an author, or all authors, from the drop-down list.
Editor	Select an editor, or all editors, from the drop-down list.

3. Click **View Report**.

Results Screen and Explanations



TAT - summary author dictated to signature

Signed From: 6/1/2010 12:00:00 AM **Signed To:** 9/30/2010 11:59:59 PM

Site : Site 1, Test Site A , Test Site B , Test Site C

Author: All **Editor:** All

Based on data as of Wednesday, May 12, 2010 3:03 PM EDT

Author		0-5m	5-15m	15-30m	30-60m	1-2h	2-4h	4-8h	8-24h	24+h	Total	Average TAT
Remula, Ritulf												
	Self-edited	0	0	0	0	0	0	0	0	2	2	91.06:34:47
	Total	0	0	0	0	0	0	0	0	2	2	91.06:34:48
More, Edeema												
	Sent to Editor	0	0	0	0	0	0	0	0	1	1	285.22:06:49
	Self-edited	1	0	0	0	0	0	0	0	0	1	00:04:58
	Total	1	0	0	0	0	0	0	0	1	2	142.23:05:54
Lester, Srita												
	Self-edited	4	1	0	0	0	0	0	0	0	5	00:03:16

The **TAT—Summary Author Dictated to Signature** report shows the number of reports that fall into each of nine turnaround time ranges with separate totals for self-edited reports and those sent to an editor. The ranges are:

- Less than 5 minutes
- Between 5 and 15 minutes

- Between 15 and 30 minutes
- Between 30 minutes and one hour
- Between one and two hours
- Between two and four hours
- Between four and eight hours
- Between eight and 24 hours
- Greater than 24 hours

The two rightmost columns show the total reports and the average turnaround time for all reports in the date range. The bottom row gives a total count for each of the categories.

TAT—Summary Author Order to Signature

This report is identical to the **TAT—Summary Attending Dictated to Signature** report described above, except that it shows the average TATs from the time the film was **ordered** (as opposed to dictated) to the signature time. All parameter fields and result fields are the same as the **TAT—Summary Attending Dictated to Signature** report.

TAT - summary author order to signature

Signed From: 6/1/2010 12:00:00 AM **Signed To:** 9/30/2010 11:59:59 PM
Site : Site 1, Test Site A , Test Site B , Test Site C
Author: All **Editor:** All

Based on data as of Thursday, September 30, 2010 8:41 AM EDT

Author		0-5m	5-15m	15-30m	30-60m	1-2h	2-4h	4-8h	8-24h	24+h	Total	Average TAT
Remula, Ritulf												
	Self-edited	0	0	0	0	0	0	0	0	2	2	91.06:34:49
	Total	0	0	0	0	0	0	0	0	2	2	91.06:34:49
More, Edeema												
	Sent to Editor	0	0	0	0	0	0	0	0	1	1	1811.16:29:48
	Self-edited	0	0	0	0	0	0	0	0	1	1	11.01:06:12
	Total	0	0	0	0	0	0	0	0	2	2	911.08:48:00
Lester, Srita												

TAT—Summary Author Signature Averages

This report shows the average report signature TATs, divided into ranges.

The TAT—Summary Author Signature Averages—Past Day and TAT—Summary Author Signature Averages—Past Week reports are identical to this report, except that they show only activity during the past 24 hours and the last seven days, respectively.

Running the TAT—Summary Author Signature Averages Report

To run this report:

1. On the **Reports** tab, select the **TAT—Summary Author Signature Averages** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report.This parameter is applicable only to organizations with multiple sites.
Author	Select an author from the drop-down list, or select All.

3. Click **View Report**.

Results Screen and Explanations

TAT - summary author signature averages

Signed From: 6/1/2010 12:00:00 AM **Signed To:** 9/30/2010 11:59:59 PM

Site : Site 1, Test Site A , Test Site B , Test Site C **Author:** All

Based on data as of Thursday, September 30, 2010 8:41 AM EDT

Author	0-5m	5-15m	15-30m	30-60m	1-2h	2-4h	4-8h	8-24h	24+h	Total	Average TAT
Remula, Ritulf	0	0	0	0	0	0	0	0	2	2	91.06:34:47
More, Edeema	1	0	0	0	0	0	0	0	1	2	142.23:05:53
Lester, Srita	4	1	0	0	0	0	0	0	9	14	10.20:31:50
Brown, Katharine	2	0	0	0	0	0	0	0	1	3	62.20:07:05
Alba, Twita	1	1	0	0	0	0	0	0	2	4	45.04:04:24
Mil, Diviya	0	0	0	0	0	0	0	0	2	2	5.03:19:23
Bird, T	6	0	1	0	0	0	0	0	1	8	32.02:39:54
Dil, Scoby	1	0	0	0	0	0	0	0	0	1	00:02:05
Grand Totals	15	2	1	0	0	0	0	0	18	36	34.21:52:23

The **TAT—Summary Author Signature Averages** report shows the number of reports that fall into each of nine turnaround time ranges. The ranges are:

- Less than 5 minutes
- Between 5 and 15 minutes
- Between 15 and 30 minutes
- Between 30 minutes and one hour
- Between one and two hours

- Between two and four hours
- Between four and eight hours
- Between eight and 24 hours
- Greater than 24 hours

The two columns at the far right show the total reports and the average turnaround time for each provider. The bottom row gives a total count for each of the categories.

TAT—Summary Author to Editor

This report shows, for each editor, the number of reports whose turnaround time fell into each of several ranges. The report also shows each editor's total number of corrected reports and average TAT in hours, minutes and seconds.

The TAT—Summary Author To Editor—Past Day and TAT—Summary Author To Editor—Past Week snapshot reports are identical to this report, except that they show only activity during the past 24 hours and the last seven days, respectively.

Running the TAT—Summary Author to Editor Report

To run this report:

1. From the **Reports** tab, select the **TAT—Summary Author to Editor** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report.This parameter is applicable only to organizations with multiple sites.
Editor	Select an editor, or all editors, from the drop-down list.

3. Click **View Report**.

Results Screen and Explanations

TAT - summary author to editor

Signed From : 6/1/2010 12:00:00 AM **Signed To :** 9/30/2010 11:59:59 PM

Site : IRR, IRR02 , SYS105 , Test Site B , Test Site C **Editor:** All

Based on data as of Wednesday, September 29, 2010 2:49 PM EDT

Editor	0-5m	5-15m	15-30m	30-60m	1-2h	2-4h	4-8h	8-24h	24+h	Total	Average TAT
Correctionist, Mary	1	0	0	0	0	0	0	0	0	1	00:04:18
Hach, Editor	0	0	0	0	0	0	0	0	2	2	31.13:45:10
Alexander, Hannah	2	0	0	0	0	0	1	0	5	8	67.12:53:23
Editor, Debbie	0	0	0	0	0	0	5	0	0	5	06:51:21
Testeditor, Editor	0	0	0	0	0	0	0	1	0	1	17:40:39
e, tricia	0	0	0	0	0	2	0	0	0	2	02:42:55
Grand Totals	3	0	0	0	0	2	6	1	7	19	31.21:16:03

The **TAT—Summary Author to Editor** report shows the number of reports that fall into each of nine turnaround times ranges. The ranges are:

- Less than 5 minutes
- Between 5 and 15 minutes
- Between 15 and 30 minutes
- Between 30 minutes and one hour
- Between one and two hours
- Between two and four hours
- Between four and eight hours
- Between eight and 24 hours
- Greater than 24 hours

The bottom row gives a **Grand Total** for each of the categories.

The last column shows the **Avg TAT** (average turnaround time) for each editor during the date range.

TAT—Summary Resident to Editor Report

This report is identical to the **TAT—Summary Author to Editor** report described above, except that it reports on **residents** instead of attending radiologists. All parameter fields and result fields are the same as the **TAT—Summary Author to Editor** report.

TAT—To Radiologist Signature

This report lists the details on the amount of time it takes for a radiologist to sign a report.

Running the TAT—To Radiologist Signature Report

To run this report:

1. From the **Reports** tab, select the **TAT—To Radiologist Signature** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report.This parameter is applicable only to organizations with multiple sites.
Correction Workflow	Select Self-Edit, In-house, Delegated, or All.
Author	Select an author from the drop-down list, or select All.
Editor	Select an editor, or all editors, from the drop-down list.
Reports	Select **Originals Only**, **Addendums Only**, or **All**.

3. Click **View Report**.

Results Screen and Explanations

TAT - to radiologist signature

Signed From:	6/1/2010 12:00:00 AM	**Signed To:**	9/30/2010 11:59:59 PM
Site:	Site 1, Test Site A , Test Site B , Test Site C	**Correction Workflow:**	Self-edit, In-house , Delegated
Author:	All	**Editor:**	All
Reports:	All		

Based on data as of Thursday, September 30, 2010 8:41 AM EDT

Accession	A	Site	Author	Editor	Created	Audio Duration	Correction TAT	Approval TAT	Signature TAT
1015		Test Site A	More, Katharine		6/26/2009 12:32:59 PM	00:00:02	00:00:00	00:00:00	285.22:06:49
19		Test Site A	Bird, T		7/15/2009 5:03:38 PM	00:00:00	00:00:00	00:00:00	256.20:45:37
1012		Test Site A	Brown, Katharine		7/24/2009 4:14:25 AM	00:00:00	00:00:00	00:00:00	188.12:18:26
28 29		Site 1	Albar, Ragir		10/28/2009 12:17:19 PM	00:00:00	00:00:00	00:00:00	85.21:42:44
339977		Test Site A	Tester, Kacia		11/6/2009 11:29:54 AM	00:00:00	00:00:00	00:00:00	66.04:16:33
fellow1		Site 1	Bieula, Rirdhu		11/13/2009 11:44:03 AM	00:00:00	00:00:00	00:00:00	103.21:55:45

The **TAT—To Radiologist Signature** report shows the following information:

- **Accession**: The identifying number assigned in the RIS
- **A:** The addendum's sequence number. For an original report, this column is blank.
- **Site**: The site where the report was dictated.
- **Author**: Last and first name of the provider who initiated the report
- **Editor:** Last name of the report's editor
- **Created:** Date and time the provider initiated the dictation
- **Audio Duration**: Length of the report in hours, minutes, and seconds
- **Correction TAT**: Elapsed time from the point when the provider clicks the **Send to Editor** button (or the **Transcribe** button in a **Send to Editor** workflow) to the point when the editor clicks **Finish**.
- **Approval TAT**: Elapsed time from dictation initiation, including correction time (even if sent to an editor), to the point when the provider clicks **Approve**.
- **Signature TAT**: Elapsed time from dictation initiation, including correction time (even if sent to an editor), to the point when the provider clicks **Sign**.

Reports for Purchasable Options

Note: *The Quality Check, Clinical Guidance, and Peer Review features are purchasable options in PowerScribe 360 Reporting. For more information, contact your Nuance account representative.*

If your organization has purchased the Quality Check, Clinical Guidance, or Peer Review options, the reports shown in this section are available.

Note: *Quality Check is the new name for the Assure consistency checker.*

Quality Check - by author

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

Running the Quality Check - by author Report

To run this report:

1. On the **Reports** tab, select the **Quality Check - by author** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. A date range is required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.
Author	Select a radiologist, or use the default Select All.

3. Click **View Report**.

Results Screen and Explanations

Quality Check - by author

Signed From: 11/1/2015 12:00:00 AM **Signed To:** 11/30/2015 11:59:59 PM

Author: All Accounts

Site: University

Based on data as of Monday, November 30, 2015 10:38 AM EST

Author	Report Count	Quality Check Executed		Quality Check Finding		Gender Mismatch		Laterality Mismatch		CTR/ Actionable Finding		Communication Statement	
		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%**

The **Quality Check - by author** report shows the following information:

- **Author**: First and last names of the person who authored the report.
- **Report Count**: Total number of reports for each author.
- **Quality Check Executed**: Number/percentage of reports where Quality Check was run.
- **Quality Check Finding**: Number/percentage of reports that Quality Check detected a finding of any type.
- **Gender Mismatch**: Number/percentage of reports where gender mismatches were detected.
- **Laterality Mismatch**: Number/percentage of reports where laterality mismatches were detected.
- **CTR/Actionable Finding**: Number/percentage of reports where critical test results or actionable findings were detected.
- **Communication Statement**: Number/percentage of reports where a critical test result communication statement was issued.

Quality Check - detailed results

Note: *Quality Check is the new name for the Assure consistency checker.*

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

Running the Quality Check - detailed results report

To run this report:

1. On the **Reports** tab, select the **Quality Check - detailed results** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. A date range is required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.
Account	Select a provider, or use the default **All Accounts**.
Modality	Select a modality, or use the default **All Modalities**.
Anatomy	Select an anatomy, or use the default **All Anatomies**.
Accession	If known, enter the accession number for the study.
Reports	Select either **Checked**, **Mismatches**, **CTR/Actionable Findings**, **Communication**, or **All**.
CTR/Actionable Findings	Select either **Shown**, **Filtered**, or **All**.
Check	Select either **Automated** or **Manual**.

3. Click **View Report**.

Results Screen and Explanations

Quality Check - detailed results

Signed From:	11/1/2015 12:00:00 AM	**Signed To:**	11/30/2015 11:59:59 PM
Account:	All Accounts	**Accession:**	
Modality:	All Modalities	**Anatomy:**	All Anatomies
Reports:	All	**CTR/Actionable Findings:**	All
Check:	All		
Site:	University		

Based on data as of Monday, November 30, 2015 11:12 AM EST

							Mismatch			
Accession	**A**	**Procedure**	**Site**	**Resident**	**Attending**	**Processed**	**Gender**	**Laterality**	**CTR/Actionable Finding**	**Comm**
4113240		RIGHT FOOT 2 VIEWS	PWS02							
		RIGHT FOOT 2 VIEWS	University		Attending, Steph					
4120682	1	HICKMAN CATHETER INSERTION	University		Attending, Steph					
8675309		Left FOOT MIN 3 VIEWS	University	Resident, Phil	**Henry, Philip**	2/10/2015 3:04 PM	✓			
		Left FOOT MIN 3 VIEWS	University	Resident, Phil	Henry, Philip	12/18/2014 3:16 PM				
		Left FOOT MIN 3 VIEWS	University	Resident, Phil	Henry, Philip	12/18/2014 9:48 AM				
		Left FOOT MIN 3 VIEWS	University	Resident, Phil	Henry, Philip	12/18/2014 9:48 AM				

The **Quality Check - detailed results** report shows the following information:

- **Accession**: The identifying number assigned in the RIS
- **A**: The addendum's sequence number. For an original report, this column is blank.
- **Procedure**: Type of procedure performed.
- **Site**: Site that generated the report.
- **Resident**: First and last names of the resident, if one exists for this report.
- **Attending**: First and last names of the attending provider.
- **Processed**: Date and time the report was created.
- **Mismatch**: Shows by check mark the type of mismatch detected, if any.
- **CTR/Actionable Finding**: Indicates whether critical test results or actionable findings were detected.
- **Comm**: Indicates whether a critical test result communication statement was issued.

Quality Check - session listing

Note: *Quality Check is the new name for the Assure consistency checker.*

This report lists any Quality Check sessions that occurred during the selected time frame.

Running the Quality Check - session listing report

To run this report:

1. On the **Reports** tab, select the **Quality Check - session listing** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Processed From and Processed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. A date range is required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.
Account	Select a radiologist, or use the default **Select All**.
Accession	If known, enter the accession number for the study.

3. Click **View Report**.

Results Screen and Explanations

Quality Check - session listing

Quality Check Service URL: https://clu.nuancehce.com/CLUdev4 **Quality Check License ID:** f8aa7b9f-ad22-4fb5-ab41-7eabe3b0183c

Processed From: 11/1/2015 12:00:00 AM **Processed To:** 11/30/2015 11:59:59 PM

Account: All Accounts **Accession:**

Site: University

Based on data as of Monday, November 30, 2015 11:21 AM EST

NUS DocID	Accessions	A	Resident	Attending	Report Created	Quality Check	Error Message
40871	23506		Garces, Alberto	Henry, Philip	6/20/2012 11:34 AM	2/7/2015 1:17 PM	
40872	23506		Taylor, James	Henry, Philip	6/20/2012 11:34 AM	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 AM	2/7/2015 1:33 PM	
40875	41238177		Garces, Alberto	Henry, Philip	9/18/2013 3:50 PM	2/7/2015 1:36 PM	
40884	23506		Taylor, James	Henry, Philip	6/20/2012 11:34 AM	2/8/2015 3:41 PM	
40885	23506		Garces, Alberto	Henry, Philip	6/20/2012 11:34 AM	2/8/2015 3:41 PM	
40886	23506		Taylor, James	Henry, Philip	6/20/2012 11:34 AM	2/8/2015 3:42 PM	

The **Quality Check - session listing** report shows the following information:

- **NUS DocID**: Identifier automatically generated by *PowerScribe 360 Reporting*.
- **Accessions**: The identifying number, or numbers, assigned in the RIS
- **A**: The addendum's sequence number. For an original report, this column is blank.
- **Resident**: First and last names of the resident, if one exists for this report.
- **Attending**: First and last names of the attending provider.
- **Report Created**: Date and time the report was created.
- **Quality Check**: Date and time the Quality Check consistency check was run.
- **Error Message**: Error message, if one is included.

Clinical Guidance - detailed results

This report contains detailed information on the use of the clinical guidance guidelines.

Running the Clinical Guidance - detailed results report

To run this report:

1. On the **Reports** tab, select the **Clinical Guidance - detailed results** report from the list.
2. Use the following table as a guide for entering values in this screen:

Parameter	Definition
Signed From and Signed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. A date range is required.
Site	Select one or more sites for your report. This parameter is applicable only to organizations with multiple sites.
Account	Select a radiologist, or use the default **All Accounts**.
Modality	Select a modality, or use the default **All Modalities**.
Anatomy	Select an anatomy, or use the default **All Anatomies**.
Accession	If known, enter the accession number for the study.
Guidance	Select one of the Guidance guidelines, or use the default **All**.
Modified	Select Modified, Unmodified, or use the default **All**.

3. Click **View Report**.

Results Screen and Explanations

Clinical Guidance – detailed results

Signed From:	5/20/2015 12:00:00 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 EDT

Accession	A	Procedure	Site	Resident	Attending	Signed	Guidance	Modified
ACCUNV272		BILATERAL HIPS W/PELVIS 73520	University		Attending, Stephanie	5/21/2015 10:59:11 AM	Adnexal Mass	

The **Clinical Guidance - detailed results** report shows the following information:

- **Accession**: The identifying number assigned in the RIS
- **A**: The addendum’s sequence number. For an original report, this column is blank.
- **Procedure**: Type of procedure performed.
- **Site**: Site that generated the report.
- **Resident**: First and last names of the resident, if one exists for this report.
- **Attending**: First and last names of the attending provider.
- **Signed**: Date and time the report was signed.
- **Guidance**: Shows which clinical guidance guideline was used.
- **Modified**: Indicates whether the clinical guidance guideline was modified.

Reports—Peer Reviews

Note: *The peer review feature is a purchasable option in PowerScribe 360 Reporting. For more information, contact your Nuance account executive.*

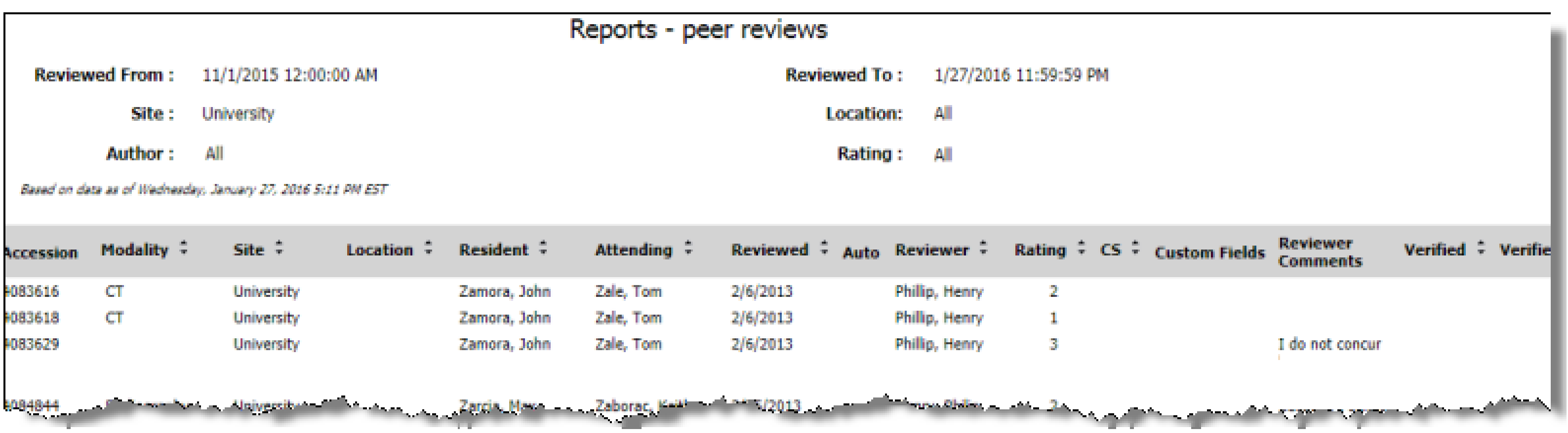
This report provides information about any peer reviews that were performed during the selected time frame for specific sites and/or authors.

To run this report:

1. On the **Reports** tab, select the **Reports—Peer Reviews** report from the list.
2. Enter your parameters for the report:

Parameter	Definition
Reviewed From and Reviewed To	Indicate the date range for this report. Click the calendar icons and select the beginning and ending dates. Beginning and ending times are required.
Site	Select one or more sites for your report.This parameter is applicable only to organizations with multiple sites.
Author	Select a specific author, or leave the default **All** as your criteria.
Rating	Select one or more ratings, or leave the default **All** as your criteria.

Results Screen and Explanations



The **Reports—Peer Review** report shows the following information:

- **Accession**: The identifying number assigned in the RIS
- **Modality**: The type of device used to perform the diagnostic exam.
- **Site**: Name of the site where exam was performed.
- **Location**: Shows location of exam (within the site)

- **Resident**: The name of the resident who dictated the report, if applicable
- **Attending**: The name of the attending radiologist
- **Reviewed:** Date that the report was peer reviewed.
- **Auto**: Shows whether the user was automatically prompted to perform the peer review. A check mark indicates that the user was automatically prompted.
- **Reviewer**: Name of the reviewing peer
- **Rating**: Numeric peer review rating, based on the ACR definitions.
- **CS**: Clinically Significant. Refers to the ACR's b ratings: 2b, 3b, 4b. A check mark appears in this column if the report was clinically significant.
- **Custom Fields**: Lists the custom fields used in the report.
- **Reviewer Comments**: Comments made by the person performing the peer review.
- **Verified**: Date the peer review was verified. Peer reviews rated 2b, 3a, 3b, 4a, and 4b must be verified to comply with the ACR.
- **Verifier**: Name of person who verified the peer review. Peer reviews rated 2b, 3a, 3b, 4a, and 4b must be verified to comply with the ACR.

Chapter 20

Order Entry

Objectives

In this chapter you will:

- Describe the prerequisites for using the Portal's Order Entry feature.
- Enter an order in the system.

Prerequisites for Order Entry

The Order Entry Portal allows users assigned the Order Entry role to add orders to the system. The Order Entry feature is generally used in facilities where there is no RIS, when a site requiring order entry is not connected to a RIS, or when the RIS is temporarily unavailable.

For you or your order entry personnel to use the Order Entry Portal, the following prerequisites must have been met:

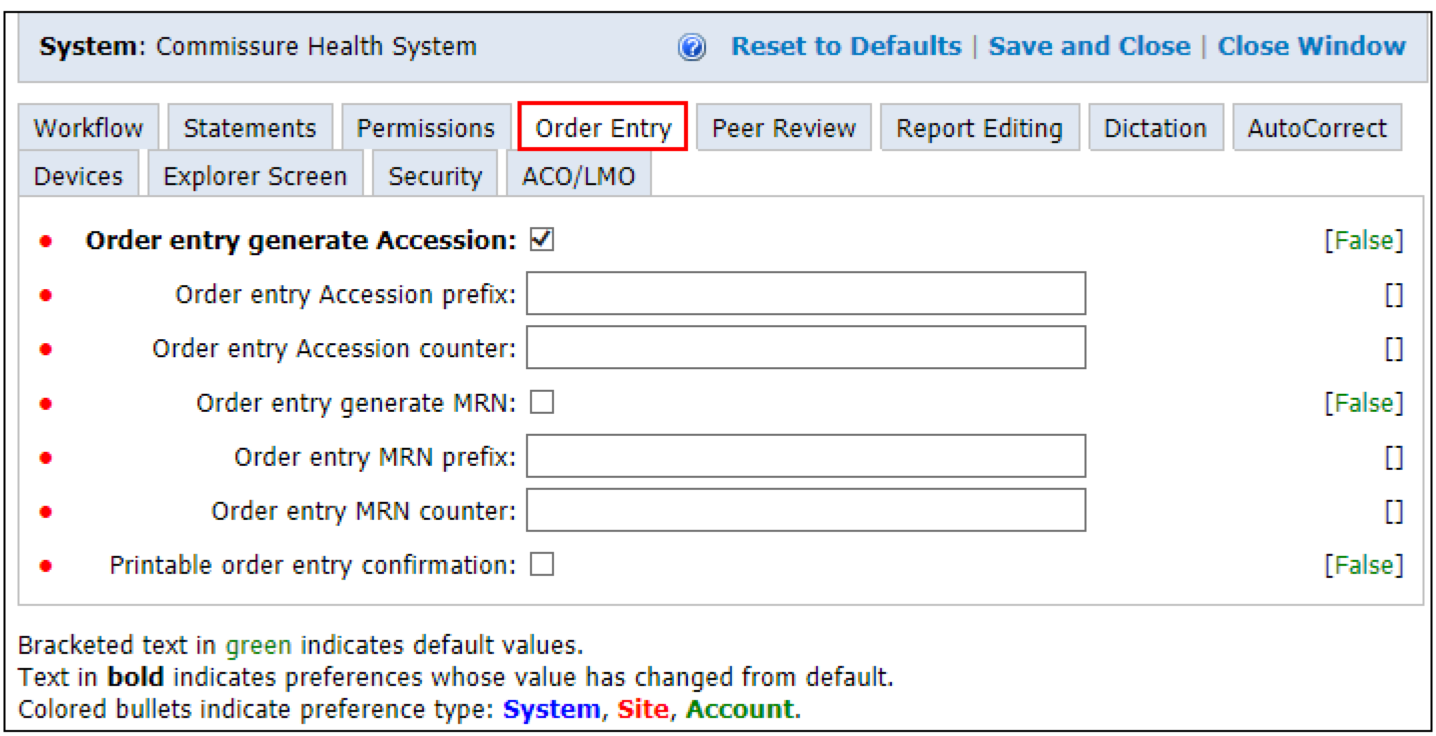
- It is recommended that your physician database contain all of the ordering clinicians before you begin creating orders. Refer to *Importing Persons*, beginning on page 129 for information on importing the physician data from a spreadsheet. If necessary, however, you can follow the instructions in this chapter to add individual physicians.
- You or another administrator must configure order entry preferences.
- Create a user with both Administrator and Order Entry privileges.

Configure the Order Entry Preferences

Preferences related to order entry are on the **Order Entry** tab in the **System** or **Site Preferences** dialog box. Set the preferences to the values indicated below.

To set the order entry preferences:

1. Select the **System** tab or the **Sites** tab in the **Setup** group.
2. Click **Preferences…**.
3. In the **System** or **Site Preferences** dialog box, select the **Order Entry** tab.



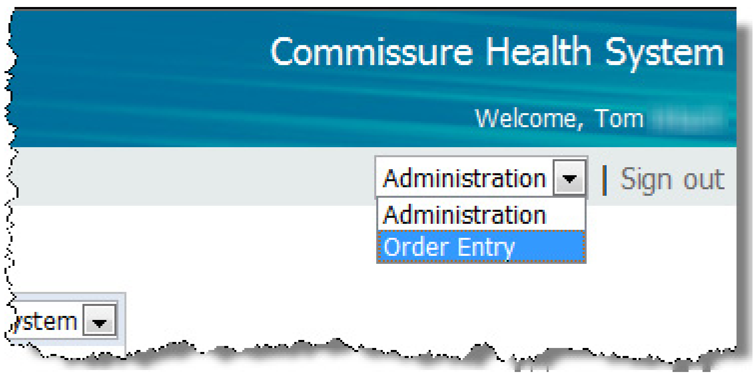
4. Use the following table as a guide when configuring the Order Entry preferences:

Order Entry Preferences: Click Setup > System > Preferences > Order Entry tab			
Type	**System Preference**	**Definition**	**Default**
• Site	Order entry generate Accession	Select to allow the order entry system to automatically generate accession numbers.	False
• Site	Order entry Accession prefix	Enter a prefix that will appear before each of your accession numbers.	
• Site	Order entry Accession counter	Enter the starting value for your accession numbers.	
• Site	Order entry generate MRN	Select to allow the order entry system to automatically generate MRNs.	False
• Site	Order entry MRN prefix	Enter a prefix that will appear before each of your MRNs.	
• Site	Order entry MRN counter	Enter the starting value for your MRNs.	
• Site	Printable order entry confirmation	Select if you want to allow printing order entry confirmation messages.	False

5. When finished**,** click **Save and Close**.

Create an Order Entry/Administrator User

While you are not required to create a dual Order Entry/Administrator role, you may decide to do so to allow added accessibility to your Order Entry staff. The user you create in this section will be able to toggle between Order Entry and Administration by selecting a role from the drop-down list at the upper right corner of the Portal.



In the Administration role, this user can create physicians and edit patients. In the Order Entry role, the user can create orders and add patients to the system.

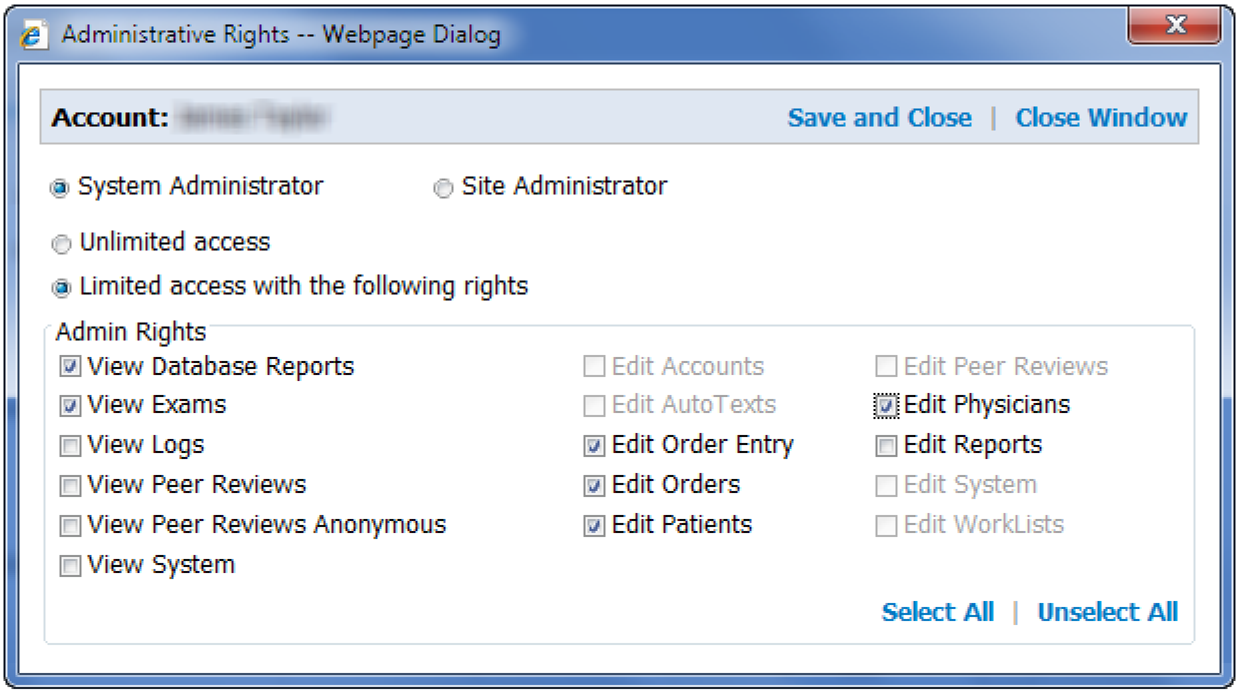
To create an order entry/administrator user:

1. In the **Setup** group, click the **Accounts** tab. The left side of the page lists all the users in the system, and the right side displays a form you can use to create a new user.

   ***Note:** If a user's information already appears in the right side of the window, click Clear. Remember that Clear simply removes the data from the window; it does not delete the user from the system.*

2. Enter a **Username** and **Password** for the order entry/administrator user.
3. Enter a **First name** and a **Last name** for the order entry/administrator user.
4. Select the **Administrator** check box.
5. Click **Create New** to save the user. The user's name appears in the list at the left of the page.
6. Click **Edit Rights...**. The **Administrative Rights** dialog box opens.
7. Select either **System Administrator** or **Site Administrator**. (The example below shows a System Administrator; however, the selections are the same for a Site Administrator.)
8. If needed (if you want to limit this user's system administrator rights, select **Limited access with the following rights**, and select these rights:
   - **View Database Reports**: Allows access to Reporting Services.
   - **View Exams**: Allows read-only access to **Explorer**, **Order Entry**, **Dashboard**, **Patients**, and **Physician** pages.
   - **Edit Physicians**: Allows editing physician data.
   - **Edit Patients**: Allows editing patient data.

- **Edit Orders**: Allows editing order properties (for example, priority) and metadata that are order-related, like custom fields. It also allows assigning orders to radiologists, deleting unreported orders, unlocking orders, and associating/ dissociating orders to or from a report.
- **Edit Order Entry**: Allows managing order entry requests, including authorization.



You can also select any other rights this user needs. When you have finished, click **Save and Close**.

9. For each site at which this user needs order entry capability:
   a. Enter an **Identifier**.
   b. Select **Order Entry** as the role.
   c. Click **Create**.

Access	Site	Identifier	eScription ID	Role	Active	
Delete	Gotham Hospital	654		Order Entry	☑	
Delete	Health Partners	145		Order Entry	☑	
Delete	Henry Imaging	321		Order Entry	☑	

The user's site access information is added to the list at the left of the page.

	Account	Authorization
	Tech, Tom	Gotham Hospital: Order Entry Health Partners: Order Entry Henry Imaging: Order Entry

Using the Order Entry Portal

Users assigned the Order Entry role are authorized to perform only order entry tasks; these users see the Order Entry Portal upon logging in. They can:

- Create new orders and add new patients
- View a list of the exams ordered today
- View a list of unreported orders
- Use any combination of search criteria to find orders

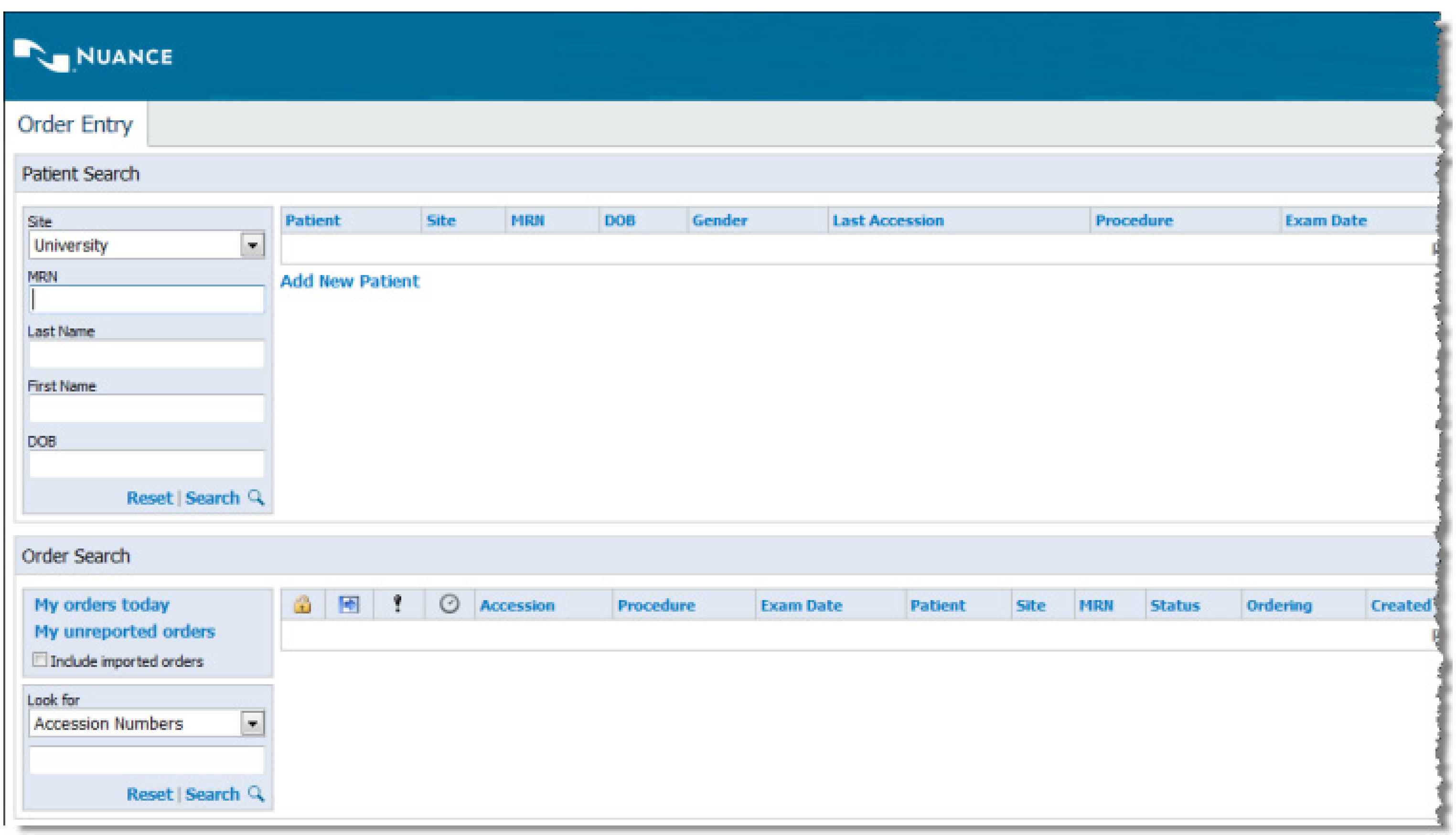
They can also use the Order Entry Portal to manage their user profiles, including changing the password, address, phone, and other information.

Order Entry users who are also administrators can create and manage physicians through the **Physicians** tab in this Portal.

Log In to the Order Entry Portal

To log in to the Order Entry Portal:

- Log into the Administrator Portal with a user ID and password for an account that has been assigned the Order Entry role. The Order Entry Portal opens.



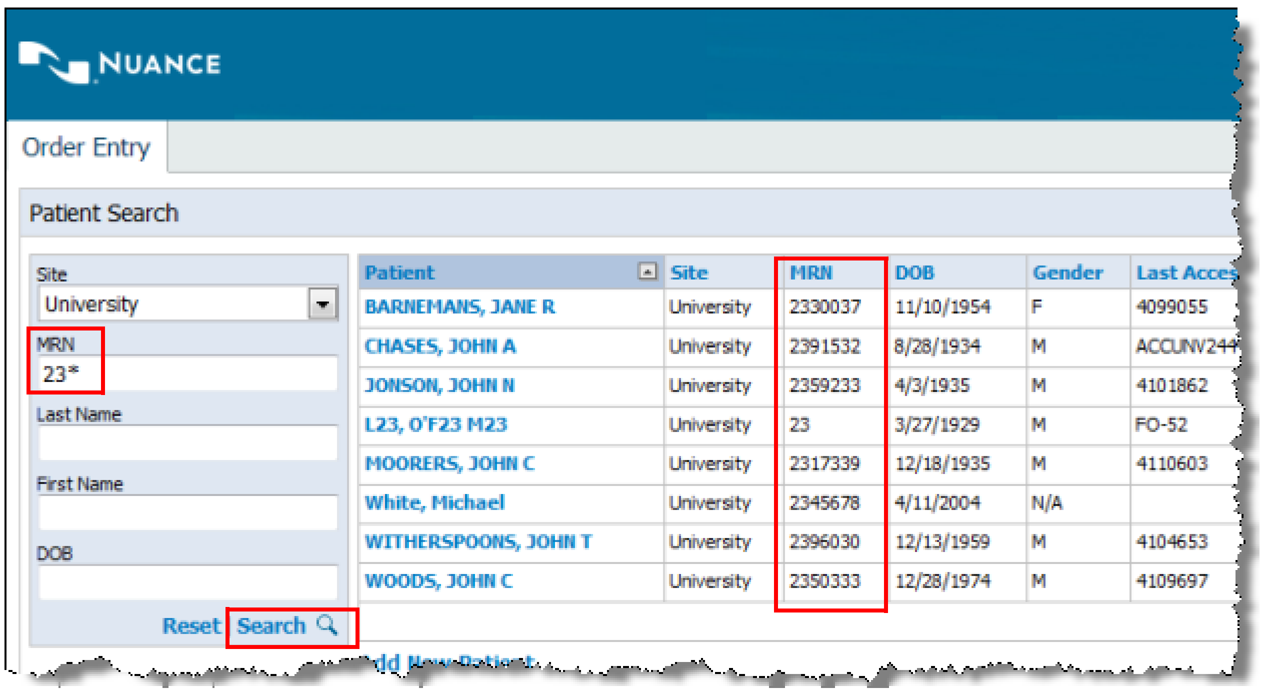
The Order Entry window is divided into two main sections:

- **Patient Search**: Allows you to search for a patient who already exists in your system; add a new patient to the system; create orders for new or existing patients. (See *Patient Search Section: Locate an Existing Patient*, beginning on page 590 for more information.)
- **Order Search**: Allows you to search for, view, and manage orders based upon their status. (See *Order Search: Search for an Existing Order*, beginning on page 594 for more information.)

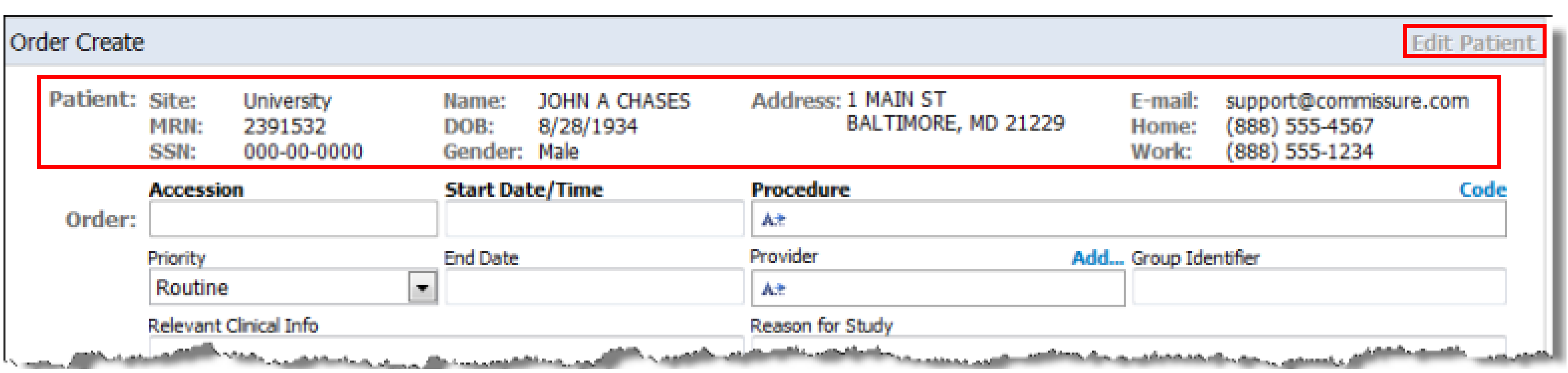
Patient Search Section: Locate an Existing Patient

To locate an existing patient:

1. Select a **Site** from the drop-down list.
2. Enter the first few letters of the patient's last name or MRN in the appropriate text field, followed by an asterisk (*). The asterisk is a wild-card character.
3. Click **Search**. A list of patients who meet your search criteria opens in the right side of the window. In the example below, **23*** was entered in the **MRN** field.



4. Click the name in the **Patient** column for the patient for whom you want to add an order. The **Order Create** dialog box opens, with the patient's demographic information already populated.

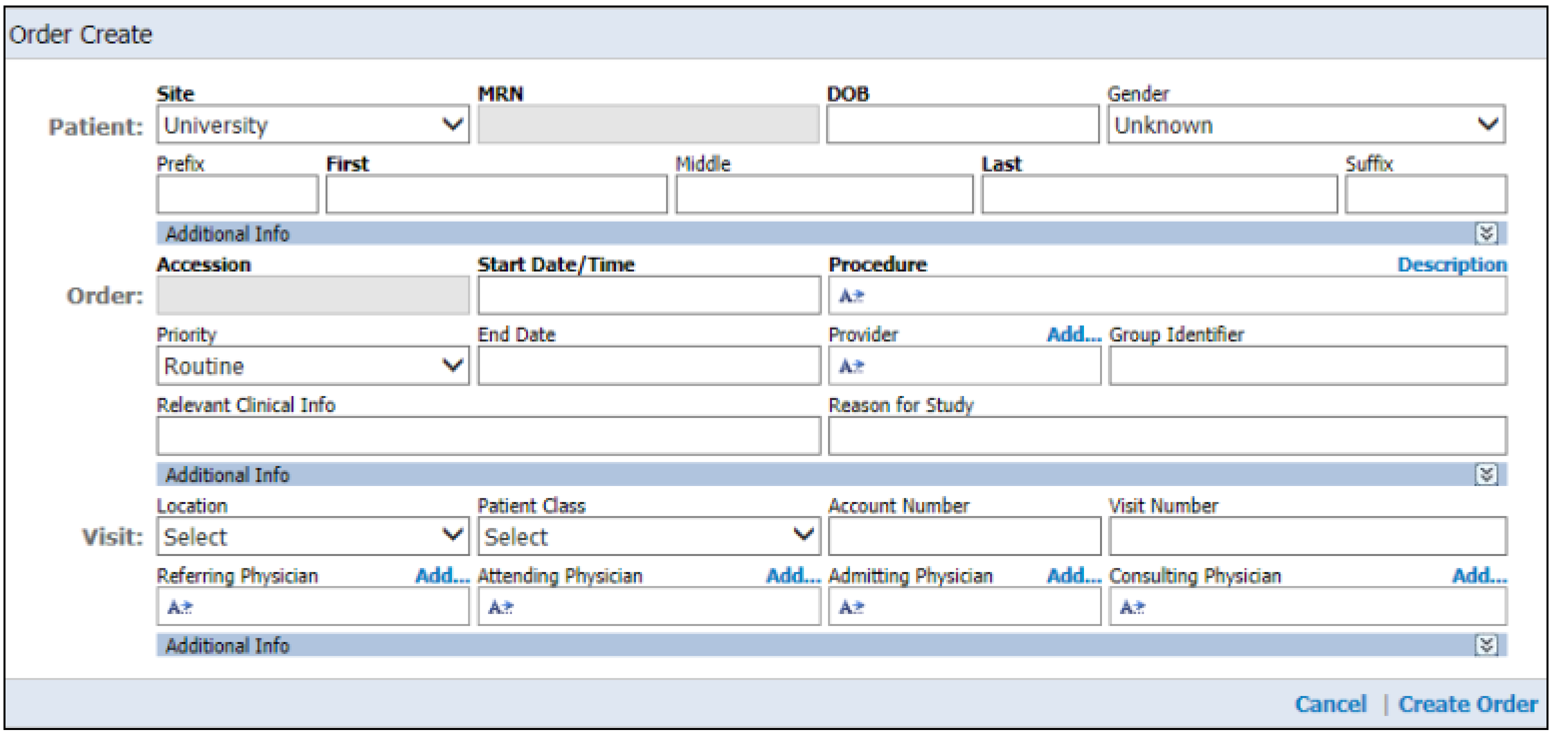


__Note:__ Notice that the __Edit Patient__ link in the upper right corner of the Order Create window is unavailable for existing patients. You can only edit patient demographic information on patients that you add to the system manually. Patients originally entered through a RIS or other interface cannot be edited from the Order Entry application.

Add a New Patient and Create an Order

To add a new patient to the system:

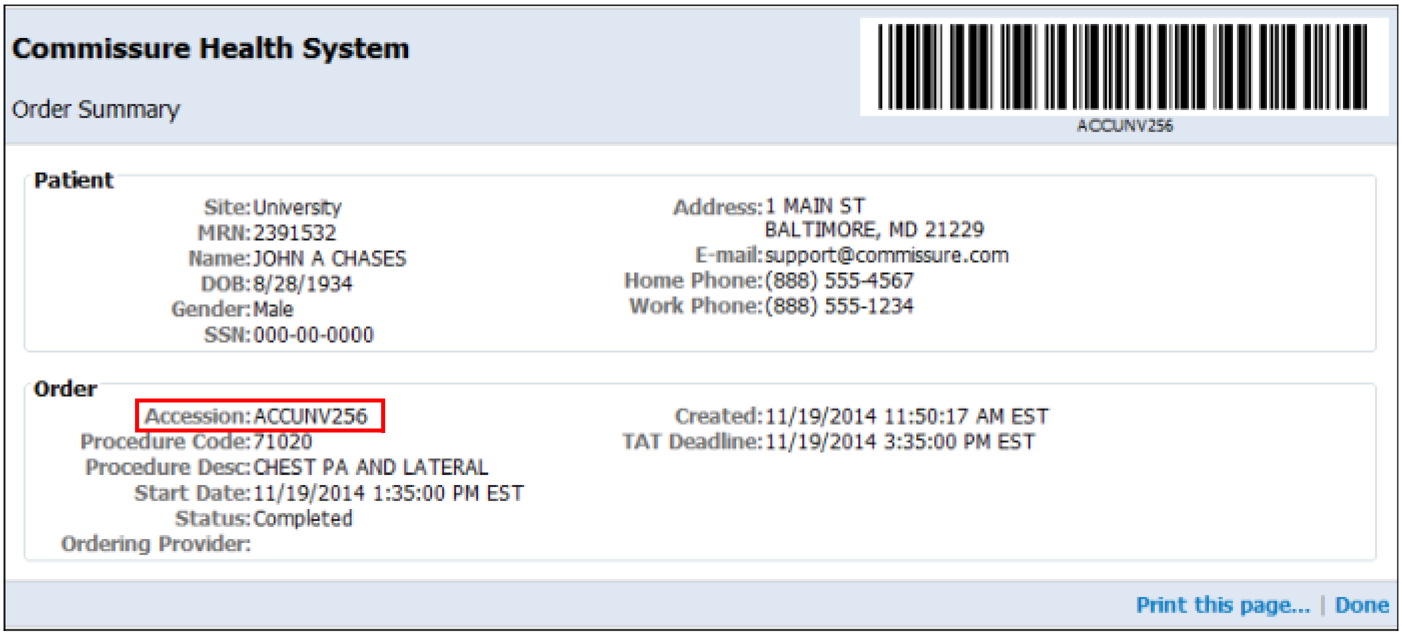
1. Click the **Add New Patient** link. The **Order Create** dialog box opens. (For new patients, you must enter the required patient demographic information at the top of the window.)



2. Fill in the information for the required patient demographic fields:
   - **Site**: Select the patient's site
   - **MRN**: Enter the patient's MRN. Note that in the example above, the MRN field is not available. This means that the system has been set up to automatically generate MRNs; this field will be populated once the patient/order information is created and saved.
   - **DOB**: Enter the patient's date of birth. You can click the month/year on the calendar to select different months/years, or you can type directly into this field.
   - **First**: Enter the patient's first name.
   - **Last**: Enter the patient's last name.
3. Fill in the order information:
   - **Accession**: Enter the accession number. Note that in the example above, the Accession field is not available. This means that the system has been set up to automatically generate accession numbers; this field will be populated once the patient/order information is created and saved.

- **Start Date**: Enter the date and time for this order. You can select the date from the calendar or type directly into this field. Date format is **m/d/yyyy**. Time format is either **h:mm AM/PM**, or 24 hour (military) time **hh:mm**.
- **Procedure**: Type the first few letters of the procedure for this order. A list of procedures that begin with those letters opens, allowing you to make a specific selection.

4. Once you have entered the required information, click **Create Order**. The **Order Summary** window opens.



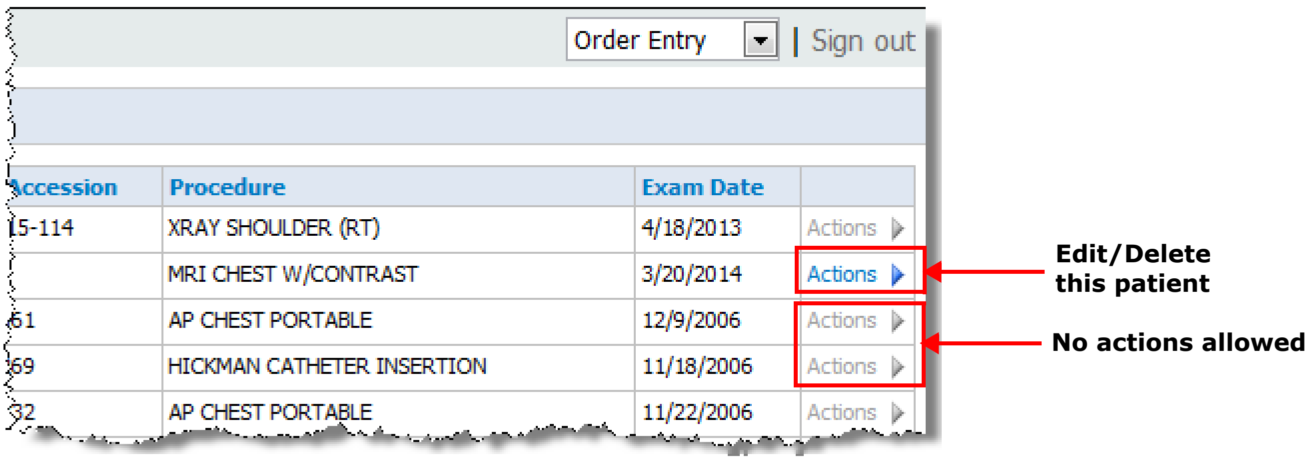
Notice that the automatically generated accession number (from our example) now appears in the order.

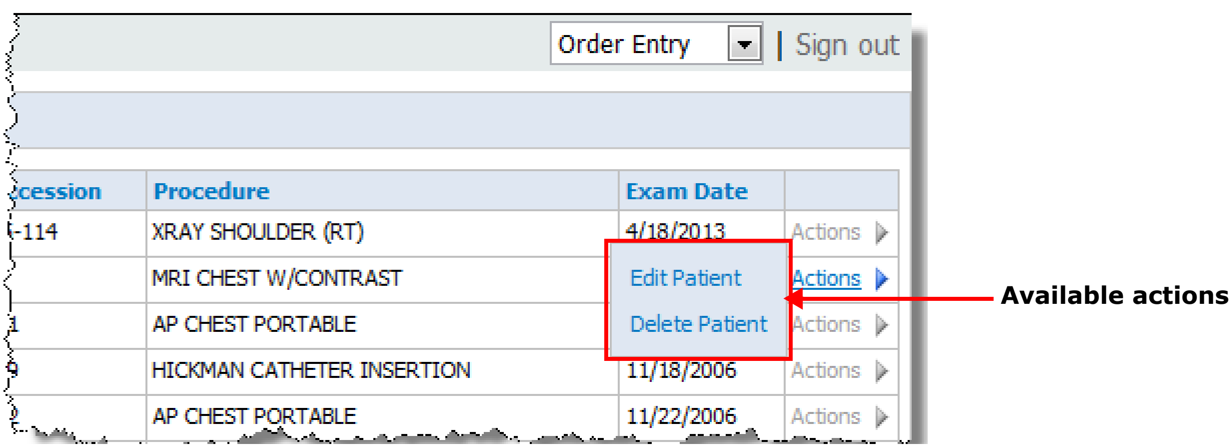
5. From here you can either click **Done** to return to the main order entry window or click **Print this page** to print the order and scan the barcode into your RIS or the *PowerScribe 360 Reporting* system.

Actions Link (in Patient Search Results)

The Actions link for each patient appears on the far right side of the patient search results window. Depending upon how the patient was added to the system, use this link to edit or delete patients:

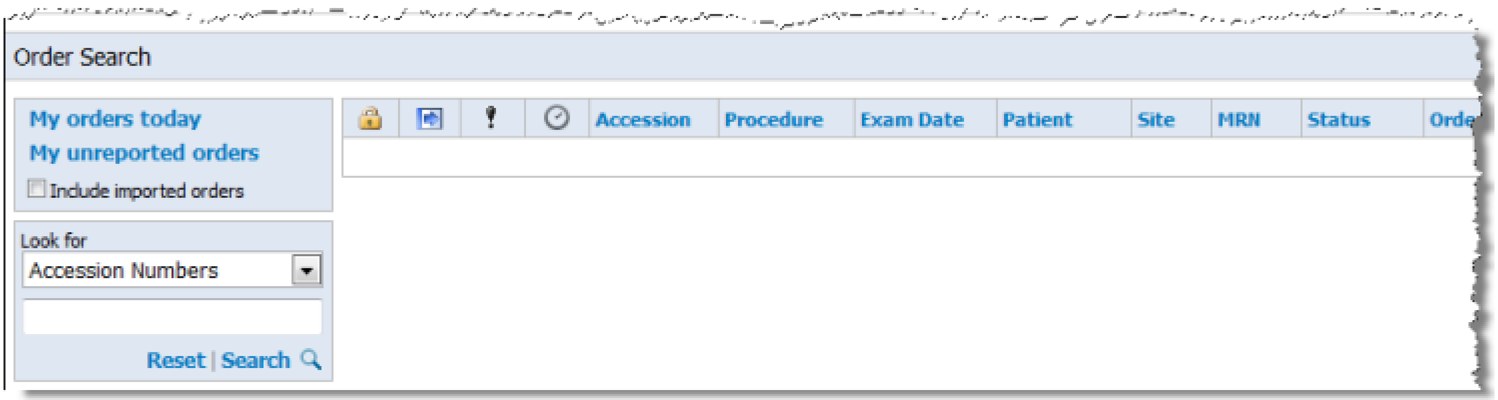
- Patients added through the Order Entry application: You are allowed edit or delete these patients. A green Actions link indicates that these actions are available.
- Patients added through a RIS: You are not allowed to edit or delete these patients. A gray Actions link indicates that no actions are available. If you hover your cursor over the grayed out Actions icon, the following message opens: This entity has been updated by the RIS and can no longer be edited/deleted here.





Order Search: Search for an Existing Order

The **Order Search** section of the Order Entry window allows you to work with orders that already exist in the system.



Links

- **My orders today**: Click to generate a list of all the orders you entered today.
- **My unreported orders**: Click to generate a list of all the orders you entered that are still unreported.

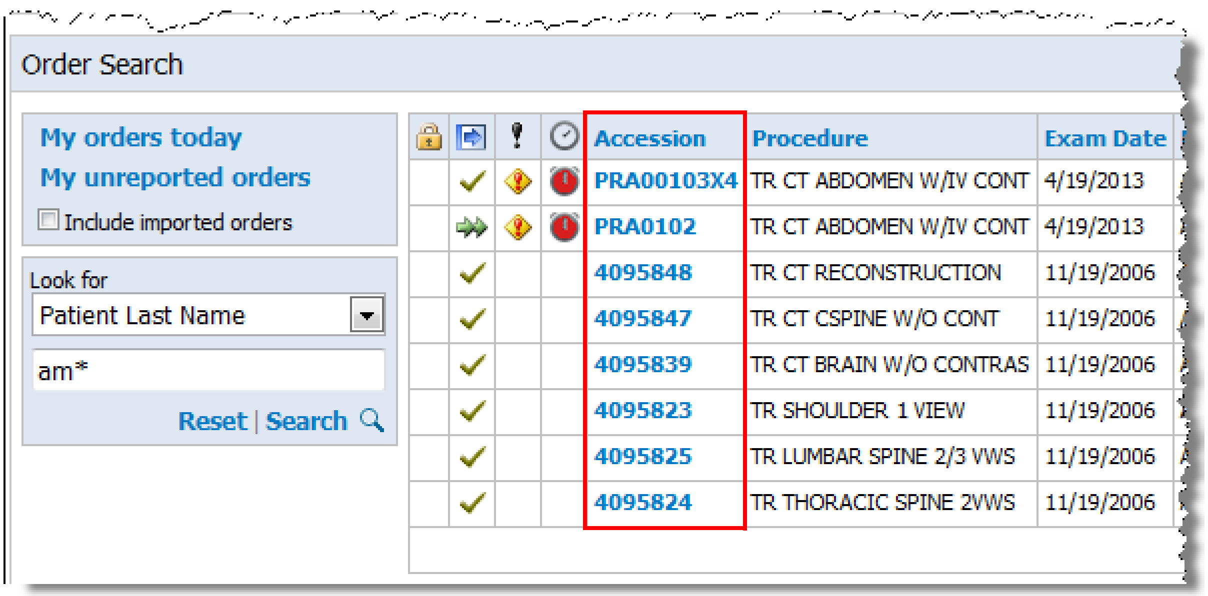
Look for

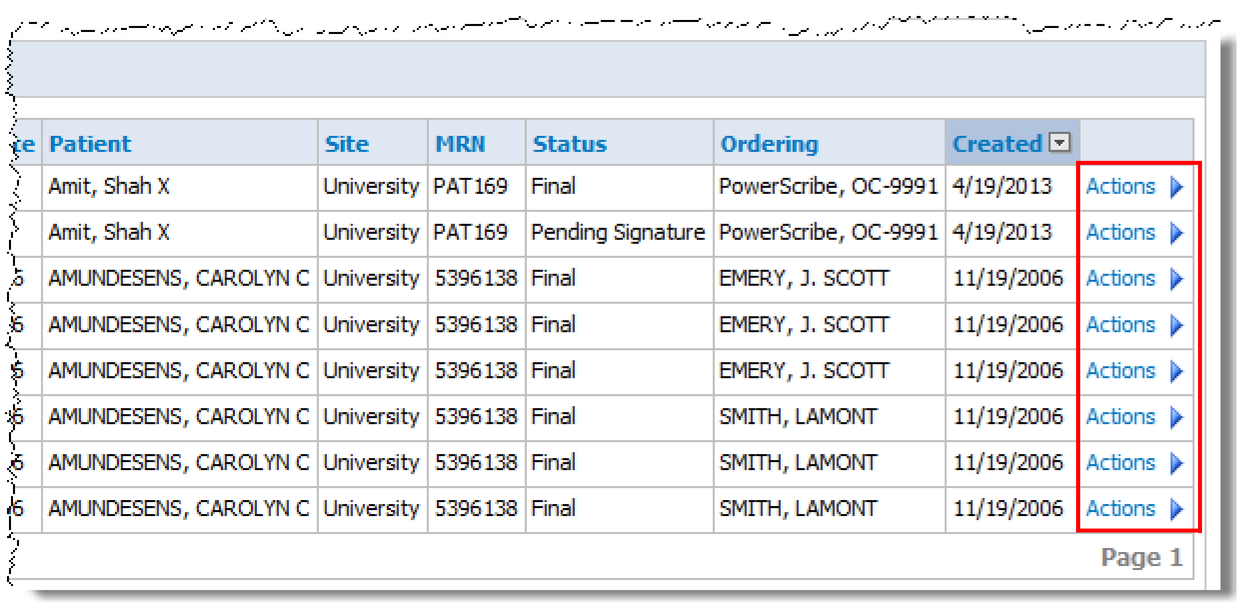
1. In the **Look for** drop-down list, select either **Accession Numbers**, **Patient Last Name**, or **Patient MRN**. Enter the first few letters of the patient's last name or MRN in the appropriate text field, followed by an asterisk (*). The asterisk is a wild-card character.
2. Click **Search**. A list of patients who meet your search criteria opens in the right side of the window.

Order Search Results

After searching using one of the above methods, orders that meet you search criteria are listed in the right side of the window. The example below shows the results after clicking the **My orders today** link. (Due to the width of the window, the image below is split into two parts.)

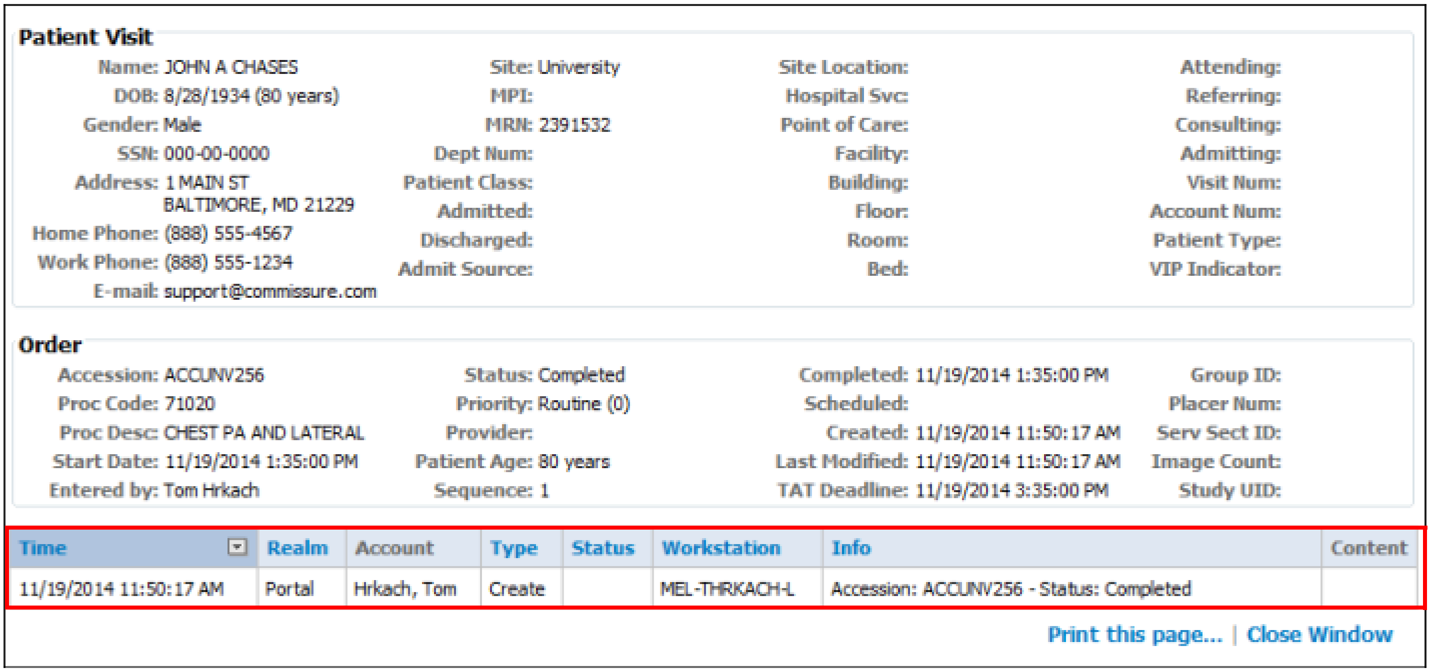
The next two sections of this document examine the **Accession** link and the **Actions** menu.





Accession Link (View Your Order Details)

1. Click a link in the **Accession** column to view the order's details, including any changes that you performed to the order. In the illustration below, the **View**, **Create**, and **Edit** items indicate this order's history.



2. After viewing the order details, or printing this order, click the **Close Window** link to return to the main order entry window.

Actions Link (in Order Search Results)

The **Actions** link allows you to perform specific tasks (Edit, Delete, Print) on orders you created, depending upon the status of the order and how the order was entered in the system.

Order Entry users **are allowed to**:

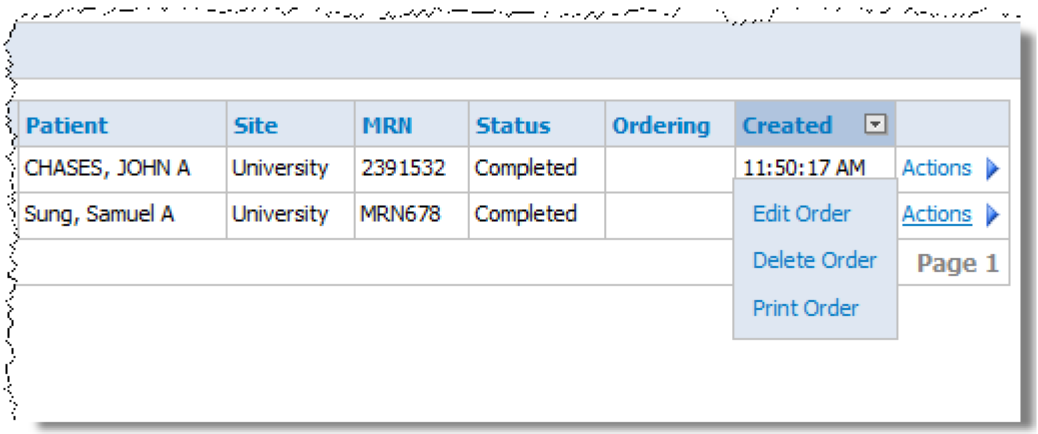
- Edit orders that were imported or updated through the RIS
- Edit orders associated with final reports
- Edit orders entered by other Order Entry users
- Edit Temporary orders created by radiologists in the Windows client
- Edit non-final reported orders even if the order is locked

Order Entry users **cannot**:

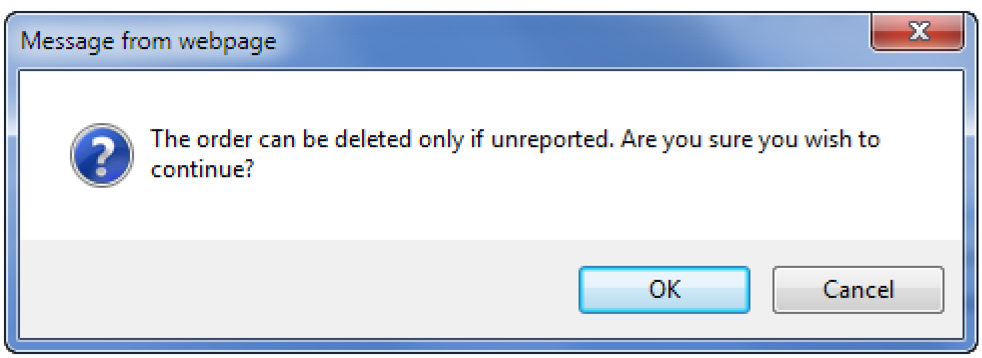
- Delete reported orders
- Delete orders imported or updated through the RIS

To perform an action:

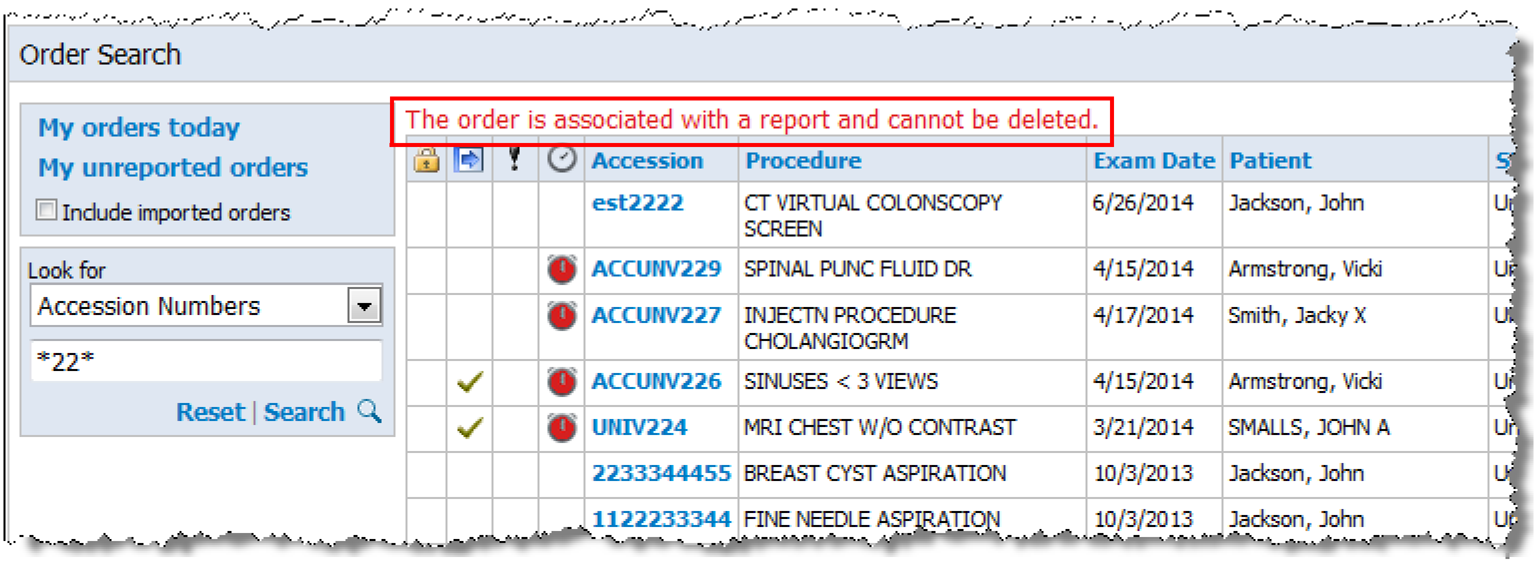
1. Hover your cursor over the **Action** link to view the available options.
2. Select the action you want to perform. (**Edit** and **Print** behave as described earlier in this section.)



3. If you select **Delete Order**, a message box opens notifying you that you can only delete unreported orders. Click **OK** to delete the order or **Cancel** to return to the main order entry window without deleting the order.



4. If you attempt to delete an order that has a status of **Final**, you see a warning at the top of the Order Search results list telling you that the order cannot be deleted.

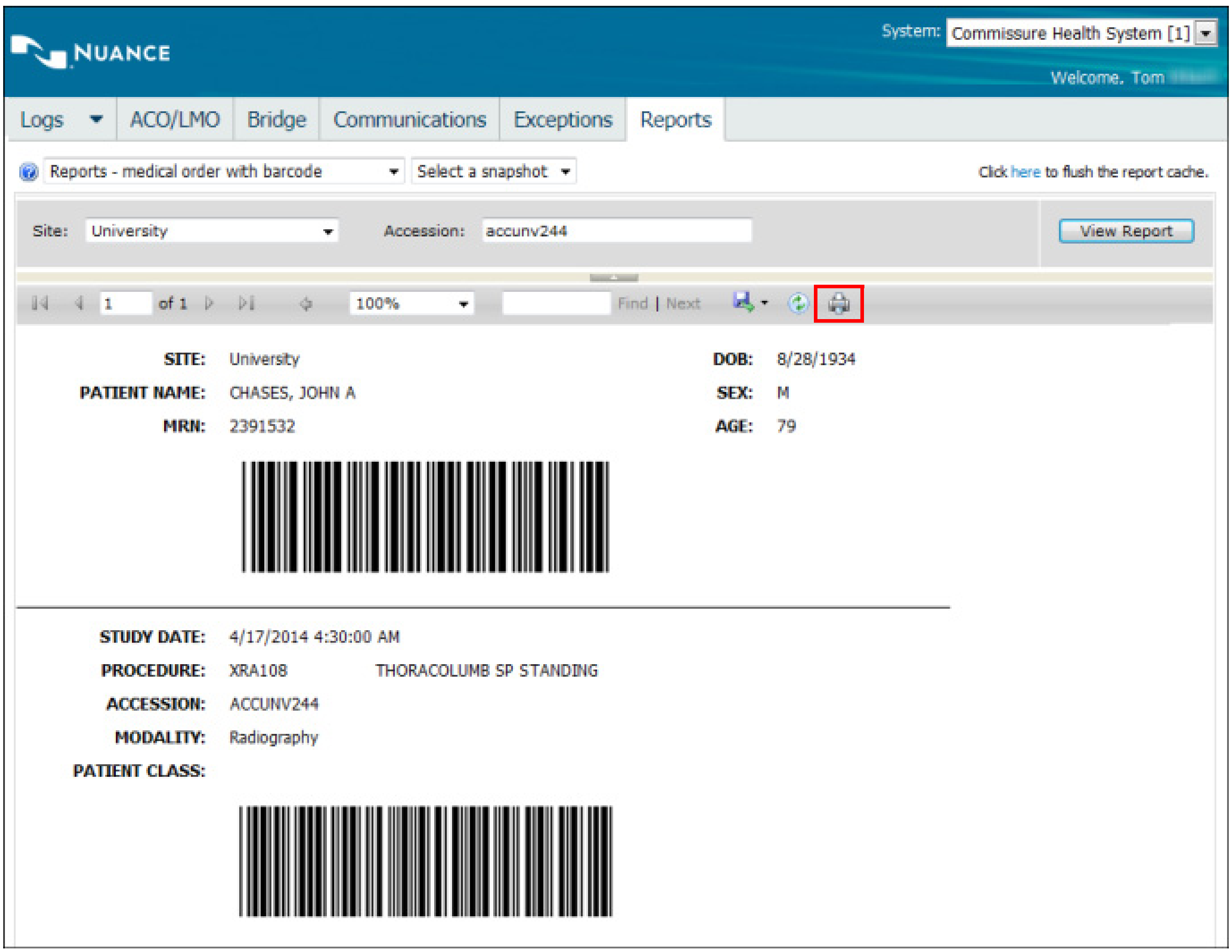


Printing an Order from the Reports Tab

You can also use the **Medical Order with Barcode** report to find and print an order.

To print an order from the Medical Order with Barcode report:

1. Log in as an Order Entry/Administrator user.
2. Select the **Reports** tab in the **Logs** group.
3. Select **Reports - Medical Order with Barcode**.
4. Select the **Site**.
5. Enter the **Accession** number of the order you want to print.
6. Click **View Report**.



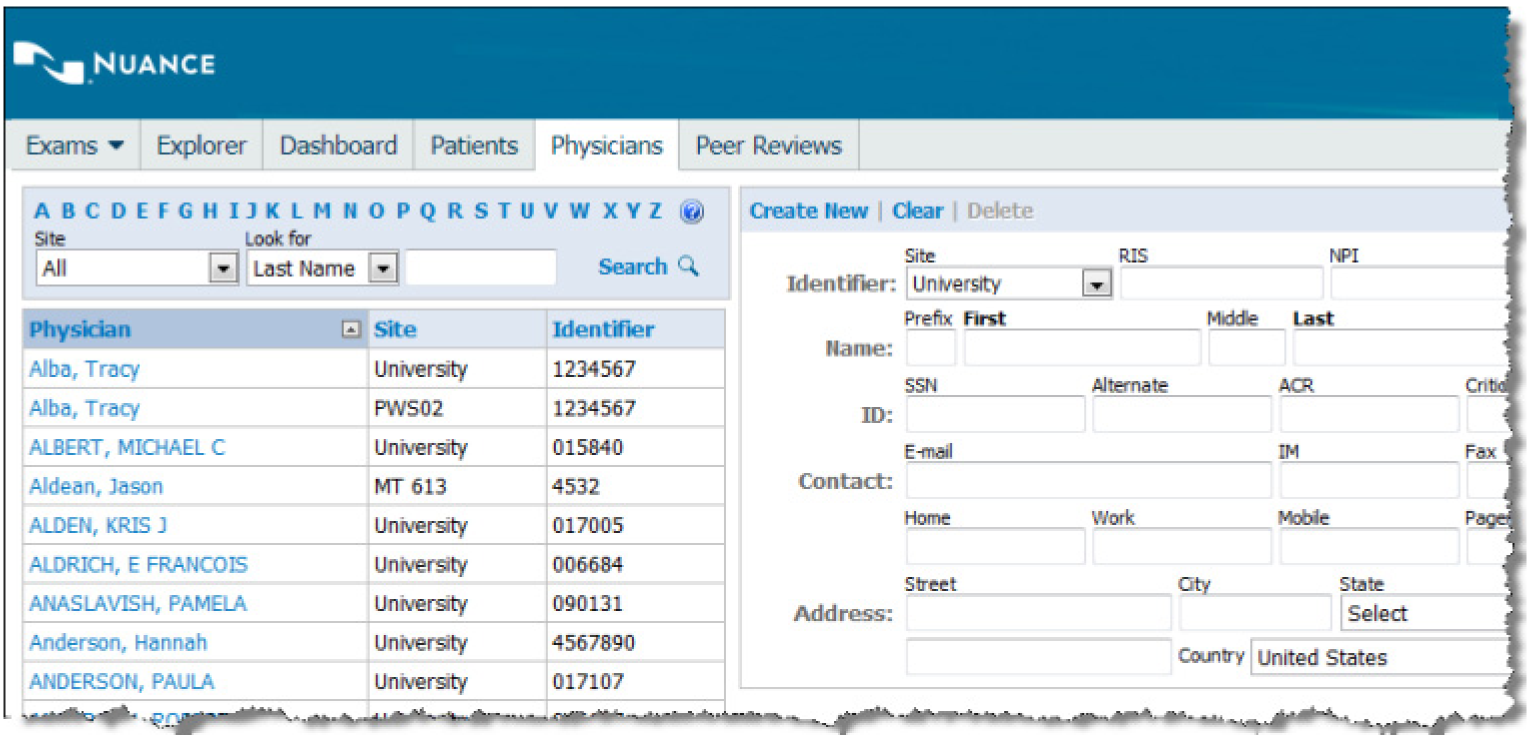
7. Click the **Print** icon.
8. Select the desired print options, and click **Print**. The order is sent to the printer you selected.

Creating and Managing Physicians

Order Entry users who are also administrators can view, create, modify, and delete physicians through the Administrator Portal

To create a physician:

1. Log in to the *PowerScribe 360 Reporting* Administrator Portal as an Order Entry/ Administrator user. The Order Entry Portal opens.
2. Select **Administration** from the drop-down list at the upper right. The Administrator Portal opens and displays the **Physicians** tab in the **Exams** group.



The **Physicians** tab provides access to all the physicians in the system. On this tab, you can create and manage physician accounts.

3. From the drop-down list, select the **Site** to which this physician belongs.
4. Type the identifier by which this physician is known to the **RIS**.
5. Enter the **NPI** (National Provider Identifier) for this physician.
6. Type the physician's **First** and **Last** names.
7. Enter any other information you have for this physician.
8. Click **Create New**.
9. If desired, indicate the specialties for this physician. Click the **Edit** link, select one or more specialties, and then click **Save and close**.

Glossary

Term	Definition
.cov	The file extension for fax cover sheet files created by the *Microsoft Fax Cover Page Editor* utility
.dra	The file extension for files created by the *Dragon* speech-recognition software.
ACO	Acoustic Optimization. The process in which the system compares the dictation audio to the corrected speech-recognized text. In this way, it learns how the provider pronounces various sounds, and adjusts the acoustic model for better speech recognition.
acoustic model	A file that represents the way patterns of individual sounds are likely to occur in speech for an individual provider.
addendum	Additional text a provider attaches to a report after it has been finalized.
administrator	A user who have been granted some or all of the administrator rights. An administrator might also be assigned to a specific role.
Administrator Portal	A web-based application in which to set up user accounts, configure the *PowerScribe 360 Reporting* system, create sites, set preferences, and perform many other administrative tasks to obtain the full benefit of the system's features.
attending	An attending radiologist is certified and is authorized to create and sign his own medical reports and those authored by residents.
Audit Log	A record of user account events such as account creation, logon, logoff, ACO, and LMO.
autoformatting	The process in which the speech recognition software places the recognized text in the format it will appear in the final document. It follows a set of rules you define, for example, preferences for the way certain words are abbreviated.
AutoText	Standard text providers or transcriptionists can insert in reports. Also referred to as macros or templates.
BI-RADS code	Breast Imaging-Reporting and Data System code. A standard numeric code a radiologist assigns to a mammography report. As administrator, you enter the BI-RADS codes and descriptions for your *PowerScribe 360 Reporting* system through the Administrator Portal.
Bridge	A service that receives inbound order and patient information and stores it in the *PowerScribe 360 Reporting* database. As radiologists create reports and sign them, the Bridge service sends them out to the HIS or RIS systems in the proper format for the receiving systems.

Term	Definition
Procedure Master Translator	An Excel spreadsheet that contains columns with your facility's procedure code, your facility's description, the treatment modality, the clinical code, and 'yes' or blank to indicate whether the procedure is a mammogram. You use Procedure Master Translators to map your facility's procedure codes to the standard AMA clinical codes, and to update the code information in your system's database.
clinical code	One of a set of standard, radiology-related procedure codes published by the AMA. As an administrator, if building the Option 1 Procedure Master Translator, you must map your organization's codes to the standard clinical codes. See also: procedure code
composite expression	In a worklist, a condition that contains more than one expression; the expressions are connected by logical operators AND or OR. For example: Site equals Site 1 AND Department is not in range 100, 300
custom field	A data item associated with a particular order. Custom fields might include measurements, radiation dosage information, flags, and so on. You can tailor custom for each site. Technologists and front desk personnel can assign values to custom fields on unreported orders through the *PowerScribe 360 Reporting* Administrator Portal; radiologists can do so during reporting in the *PowerScribe 360 Reporting* client application. Administrators can assign values to custom fields in the Administrator Portal at any stage.
custom words	Words you add to your language models to improve speech recognition. Custom words might include place names, or the names of drugs or persons.
Dashboard	A tab in the **Exams** group that provides a real-time view of exam activity in the system including inbound, outbound, and user activity.
default AutoText	The AutoText a provider sees on beginning a report, if a default AutoText exists in the system and if the **Start with default AutoText** preference is in effect. You should always associate a default AutoText entry with at least one procedure code.
draft report	A report that is ready to be corrected by a transcriptionist/editor. A draft might have gone through speech recognition, or might have been created by a self-edit user.
editor	A transcription user who corrects draft documents received from the speech recognition software.

Term	Definition
extended multiselect	An option in the system configuration that determines whether users can select and act only upon items visible on the current page, or on multiple pages. With this option set to the default value of False, if you place a check mark in the header check box to select all items, only the items visible on the current page are automatically selected, and if you perform an action such as 'Delete,' only the selected items on the current page are deleted.
fellow	A visiting physician who has been invited to serve at a healthcare institution. A fellow's role is similar to a resident's, but a fellow might have the privileges of an attending provider if certified in a specialty. When logging in as a fellow, the user can select either the attending or resident role. Depending on your facility, a fellow might have signing privileges on some reports, but resident privileges (non-signing) on others.
Findings Mode	A dictation mode in which the *PowerScribe 360 Reporting* software automatically converts free-form dictation to a structured report when the user selects or dictates the "Apply Findings" command. This feature is especially helpful where the facility requires a structured report format, but providers are accustomed to, or prefer, free-form dictation.
Front Desk	A user role with limited rights on the Administrator Portal. For example, you might set up front desk users to scan patient insurance cards into the system.
group	In the Administrator Portal, one of three sets of tabs used for configuring a particular set of options. On logging in the first time you see the Exams group; on all subsequent logins, you return to the group and tab on which you last worked.
hyponym	A word or word fragment associated with a field embedded in AutoText. Defining hyponyms for fields in the AutoText allows providers to dictate in Findings Mode.
impression	A field that contains the provider's final remarks about the study. Also referred to as the "summary" or "conclusion."
language model	A file that represents the words providers are likely to say, how those words are pronounced, and how they are used.
LDAP	A method for authenticating user login in a single place; this method eliminates the need to maintain passwords in *PowerScribe 360 Reporting* or to synchronize them with other systems such as PACS (Picture Archiving and Communication System). You can configure LDAP settings through the Administrator Portal.

Term	Definition
LMO	Language Model Optimization. The process in which the system analyzes signed reports, extracts words, and adds them to the language model. It improves speech recognition by identifying the words a provider says frequently.
location	A specific area within a site. You can define a separate report template for each location, if needed.
merge field	A data item in a report. Merge fields might contain data from the RIS or HIS, or created in *PowerScribe 360 Reporting.*
nesting	Placing an expression within another expression in a worklist definition, just as you might place parentheses in a mathematical operation to indicate which statements are to be evaluated together.
order	A request that a study be performed. Administrators can manage orders and reports through the **Explorer** tab in the **Exams** group. Users set up with the Order Entry role can create orders in the Order Entry portal.
Order Entry	A role you can assign to a user account. Users with this role can create orders in the system.
PACS	Picture Archiving and Communication System. *PowerScribe 360 Reporting* is designed to integrate with one or more PACS systems. In most cases, your Nuance representative configures the site for your PACS.
peer review	The process in which a radiologist reviews the work of another and assigns a score to it. If your system setup includes the peer review feature, you can configure the scores and their definitions, and you can configure the system to prompt a user to perform a peer review after dictating a certain number of reports for a particular modality. (Peer review is a purchasable option. Contact your Nuance account executive for information.)
physician	The person who refers a patient for treatment. A physician can log in only to the Administrator Portal, where she can perform order entry or view reports for which she is the referring physician. Physician accounts are accepted from the HL7 feed; you can also maintain them on the **Physicians** tab in the **Exams** group. Physicians cannot access the *PowerScribe 360 Reporting* system unless you create accounts for them. Each physician is associated with a single site (that is, a single RIS). The same physician might have multiple physician records, one per site, each with a different site identifier. You can link these physicians by creating an account for them for use in *PowerScribe 360 Reporting*.
postprocessor	The software that formats the final report according to a set of rules set up in the Administrator Portal.

Term	Definition
practice group	Groups are used to limit ordering physicians' access to *PowerScribe 360 Reporting* reports.
procedure code	A string of alphanumeric or numeric characters that represents a medical exam or treatment. Some medical facilities use the industry-standard codes and descriptions, others have their own.
prototype	A speech-recognition profile created by Nuance personnel at installation of your system. You can copy the prototype to create a 'dummy' profile for users who need access to the system but do not dictate. With this profile, the user does not have to go through speech training on application startup.
provider	The person who provides dictation audio to the system. A provider can create reports in the *PowerScribe 360 Reporting* client application, and can edit reports in the Administrator Portal. You can set up provider accounts in the Administrator Portal.
relevant AutoText	AutoText that is related to a procedure. To make it easier for the provider to locate the desired AutoText, you can design the AutoText entries so that only those relevant to a particular procedure appear in the drop-down list. Relevant personal entries are those that are related to a procedure and belong to a particular user.
Resident	The role assigned to a provider who is not yet certified. Residents can author medical reports but are not authorized to sign them; they can only approve the reports, which are later signed by an attending provider. In most cases, the resident has a designated attending radiologist (or group of attending radiologists) who eventually signs the report.
RIS	Radiology Information System. *PowerScribe 360 Reporting* has the capability to interact with multiple RIS.
roaming profile	A 'dummy' *Dragon* profile you can assign to a user who does not use speech recognition; with this profile, the user does not have to go through speech training on application startup. A prototype (trained) profile must exist in the Administrator Portal for this option to be available; this profile is put in place by Nuance personnel during system installation.
ROEDS	Order entry rules, required for order entry to be performed on the system. Usually, your Nuance support or field service representative uploads the ROEDS data at system installation.
role	A property you assign to a user, depending on the functions the user is to perform in the system. Roles include Attending, Resident, Fellow, Editor, Front Desk, Order Entry, and Technologist. Roles determine which features users see when they log into the Portal. A user might have the same role in all sites to which she has access, or a different role in each site.

Term	Definition
section	An item you can define as part of the site configuration. For example, you might create a section that represents work coming from a particular dictation provider, or studies of a certain type. To control the work a user receives, you can associate a section with a user account and the same section with one or more worklists.
simple expression	The basic building block for creating a worklist query. A simple expression usually contains a field name, an operator, and one or more values. For example: Transfer status is in range Ready, Sent. *See also:* composite expression.
site	A facility, clinic, hospital, or other separate entity within your organization. You must configure at least one site; in a single-site installation, you need only configure one site.
snapshot	An option you can assign to a worklist to cause it to retrieve data from a special database table. This table contains unreported orders of the last three months with a status of Completed, Scheduled, or Temporary, non-final reports or addenda, and final reports or addenda of the last two days. Always select this option for worklists designed to retrieve these type of reports.
speech profile	Data the system uses to obtain optimal speech recognition for a particular provider. As administrator, you can use the **Speech Utility** tab in the system configuration to specify the location for your system's speech profiles.
Speech Utility Server	The server on which the speech recognition software resides.
Technologist	A role you can assign to a user account. Before the radiologist dictates a report on an order, a technologist might supply some data that has not been sent in HL7 as part of the order. Alternately, a technologist can create a draft report without dictation; the report is then finalized by a radiologist.
worklist	A predefined search that retrieves reports and orders. Administrators can create worklists for providers, for transcriptionists, and for themselves.

Appendix A

Merge Fields

Merge Fields

The table below displays the merge fields you can use in AutoText, in templates, or in both. For more information on how to insert merge fields in AutoText, refer to *Creating AutoText to Work with Findings Mode*, beginning on page 316. To use merge fields in templates, refer to *Creating a Print Template*, beginning on page 502.

ID	Merge Field Name	Use in AutoText	Use in Templates
N/A	maintext		✓
102	Current Date	✓	✓
104	Site	✓	✓
302	Patient Name	✓	✓
303	Patient SSN		✓
304	Patient Address		✓
305	Patient Street		✓
306	Patient City		✓
307	Patient State		✓
308	Patient Zip		✓
309	Patient Home Phone		✓
310	Patient Work Phone		✓
311	Patient Mobile Phone		✓
313	Patient Fax		✓
314	Patient Email		✓
316	Patient MRN	✓	✓
317	Patient DOB	✓	✓
319	Patient Age	✓	✓
320	Patient Gender	✓	✓
321	Patient Deceased Date		✓
323	Patient Last Name		✓
324	Patient First Name		✓
325	Patient Middle Name		✓
326	Patient Country		✓
401	Visit Number		✓
402	Hospital Service		✓

ID	Merge Field Name	Use in AutoText	Use in Templates
403	Patient Account Number		✓
404	Admit Date	✓	✓
406	Discharge Date	✓	✓
408	Point Of Care		✓
409	Room		✓
410	Bed		✓
411	Facility		✓
416	Location Description		✓
417	Patient Class		✓
419	Attending Name	✓	✓
420	Attending Address		✓
425	Attending Home Phone	✓	✓
426	Attending Work Phone	✓	✓
427	Attending Mobile Phone	✓	✓
428	Attending Pager Phone	✓	✓
429	Attending Fax		✓
430	Attending Email	✓	✓
432	Referring Name	✓	✓
433	Referring Address		✓
434	Referring Street		✓
435	Referring City		✓
436	Referring State		✓
437	Referring Zip		✓
439	Referring Work Phone	✓	✓
440	Referring Mobile Phone	✓	✓
441	Referring Pager Phone	✓	✓
442	Referring Fax		✓
443	Referring Email	✓	✓
445	Consulting Name		✓
446	Consulting Address		✓
451	Consulting Home Phone		✓
452	Consulting Work Phone		✓

ID	Merge Field Name	Use in AutoText	Use in Templates
453	Consulting Mobile Phone		✓
454	Consulting Pager Phone		✓
455	Consulting Fax		✓
456	Consulting Email		✓
458	Admitting Name		✓
459	Admitting Address		✓
464	Admitting Home Phone		✓
465	Admitting Work Phone		✓
466	Admitting Mobile Phone		✓
467	Admitting Pager Phone		✓
468	Admitting Fax		✓
469	Admitting Email		✓
470	Location	✓	✓
471	Referring Last Name		✓
472	Referring First Name		✓
473	Referring Middle Name		✓
502	Accession Numbers	✓	✓
504	Order Date	✓	✓
506	Relevant Clinical Info	✓	✓
507	Reason For Study	✓	✓
508	Provider ID		✓
509	Provider Name	✓	✓
510	Provider Address		✓
511	Provider Street		✓
512	Provider City		✓
513	Provider State		✓
514	Provider Zip		✓
515	Provider Home Phone		✓
516	Provider Work Phone		✓
517	Provider Mobile Phone		✓
518	Provider Pager Phone		✓
519	Provider Fax		✓

ID	Merge Field Name	Use in AutoText	Use in Templates
520	Provider Email		✓
521	Provider Last Name		✓
522	Provider First Name		✓
523	Provider Middle Name		✓
524	Comments		✓
525	History	✓	✓
526	Priority		✓
606	Report Create Date	✓	✓
607	Report Sign Date	✓	✓
608	Report Preliminary Date	✓	✓
609	Report Corrected Date	✓	✓
611	Report Work Type		✓
612	Report Status		✓
613	Addendum Sequence		✓
627	Signer Name	✓	✓
640	Dictator Name	✓	✓
652	Signer Last Name		✓
653	Signer First Name		✓
654	Signer Middle Name		✓
655	Signer ID		✓
656	Dictator Last Name		✓
657	Dictator First Name		✓
658	Dictator Middle Name		✓
659	Dictator ID		✓
660	Contributor Names	✓	✓
661	Contributor Names with ID		✓
662	Creator Name	✓	✓
663	Creator Last Name		✓
664	Creator First Name		✓
665	Creator Middle Name		✓
666	Wet Reader Name	✓	✓
667	Wet Reader Last Name		✓

ID	Merge Field Name	Use in AutoText	Use in Templates
668	Wet Reader First Name		✓
669	Wet Reader Middle Name		✓
670	Creator ID		✓
671	Wet Reader ID		✓
672	Editor Name	✓	✓
673	Editor Last Name		✓
674	Editor First Name		✓
675	Editor Middle Name		✓
676	Editor ID		✓
677	Signed by Name	✓	✓
678	Signed by Last Name		✓
679	Signed by First Name		✓
680	Signed by Middle Name		✓
681	Signed by ID		✓
682	Report Create Workstation	✓	✓
683	Report Sign Workstation	✓	✓
802	Procedures	✓	✓
804	Diagnosis Codes	✓	✓
805	Procedure Codes		✓
10000	Custom	✓	✓
100000	DICOM		✓

Appendix B

Modality and Anatomy Tables

Overview

The tables in this appendix list the modalities and anatomies that are available for categorization in *PowerScribe® 360 Reporting*. It is very important to spell these items correctly when creating a spreadsheet to map your procedure codes to the Nuance modalities and anatomies.

Note: *Some of the modalities and anatomies in these tables contain one or more levels of sub-categories, which appear in the columns to the right of the main item. In the PowerScribe 360 Reporting Administrator Portal (under* ***Sites > Procedures > Categorize****) a category that has a small plus sign (+) to the left of it contains additional sub-categories.*

Note: *Peer Review customers must be aware that only certain modalities are supported by the American College of Radiology (ACR). If you are going to use the* ***Send to ACR*** *feature within the peer review application, you must map your applicable procedures to the supported ACR modalities, as indicated in the right-hand column of the Modality Table in this document.*

Modality Table

Modality	Sub-Category 1	Sub-Category 2	Supported by ACR?
Absorptiometry			**No**
	DEXA		**No**
	X-Ray - Absorptiometry		Yes
Conventional Tomography			**No**
CT			Yes
	Calcium Scoring		Yes
	CTA		Yes
Echocardiography			Yes
EEG			**No**
ETT			**No**
Fluoroscopy			**No**
	Fluoroscopy - Dynamic		**No**
Invasive			Yes
	Angiography		Yes
	Angioplasty		Yes
	Arterial Procedure		Yes
	Arthrography		Yes
	Atherectomy		Yes
	Bronchography		Yes
	Cardiac Procedure		Yes
	Catheter Drainage		Yes
	Catheter Infusion		Yes
	Catheterization Cardiac		Yes
	Catheterization Transcervical		Yes
	Cholangiography		Yes
	Cisternography		Yes
	CT - Guided Biopsy		Yes
	Dacryocystography		Yes
	Diskography		Yes
	Endoscopic Procedure		Yes

Modality	Sub-Category 1	Sub-Category 2	Supported by ACR?
Invasive (continued)	Epidurography		Yes
	Fistulogram		Yes
	Fluoroscopy Guidance		Yes
	GI Procedure		Yes
	GU Procedure		Yes
	Gyn Procedure		Yes
	Image Guided Biopsy		Yes
	Laryngography		Yes
	Lymphangiography		Yes
	Mammography Procedure		Yes
	MRI - Guided Biopsy		Yes
	Myelography		Yes
	OB Procedure		Yes
	Obstetrical		Yes
	Pacer Insertion		Yes
	Peritoneogram		Yes
	Sialography		Yes
	Sinogram		Yes
	Spinal Procedure		Yes
	Splenoportography		Yes
	Stent Placement		Yes
	Thrombectomy		Yes
	Thrombolysis		Yes
	Transcatheter Therapy		Yes
	US - IVUS		Yes
	US Procedure		Yes
	Vascular Procedure		Yes
	Venography		Yes
	Vertebroplasty		Yes
Mammography			Yes
	Ductogram		**No**
MEG			**No**

Modality	Sub-Category 1	Sub-Cagegory 2	Supported by ACR?
MR			Yes
	MRA		Yes
	MRI		Yes
		MRI - Flow Mapping	Yes
		MRI - Functional	Yes
	Spectroscopy		Yes
Nuclear Medicine			Yes
	Gamma Camera Imaging - Planar		Yes
	NUC - Spect		Yes
	NUC - Venography		Yes
	Urea Breath Test		Yes
Panographic Radiography			**No**
PET			Yes
	PET - Perfusion		Yes
	PET w/ CT		Yes
Post Processing			**No**
	3D Render		**No**
Radiography			Yes
	Cephalogram		Yes
	Cholecystography		Yes
	Pelvimetry		Yes
	X-Ray - Dental		Yes
	X-Ray - Diskography		Yes
	X-Ray - Magnification		Yes
	X-Ray - Specimen		Yes
	X-Ray - Standard		Yes
	X-Ray - Stereoscopic		Yes
	X-Ray w/ Fluoroscopy		Yes
Unspecified Radiology Procedure			**No**
US			Yes
	Sonohysterography		Yes
	US - Duplex		Yes

Modality	Sub-Category 1	Sub-Cagegory 2	Supported by ACR?
US (continued)	US - Obstetrical		Yes
	US - Ophthalmic		Yes
	US - Transcranial		Yes
	US - Transesophageal		Yes
	US - Transrectal		Yes
	Vascular Lab		Yes

Anatomy Table

<table>
<tr><th>Anatomy</th><th>Sub-Category 1</th><th>Sub-Category 2</th><th>Sub-Category 3</th></tr>
<tr><td rowspan="24">Abdomen & Pelvis</td><td rowspan="15">Abdomen</td><td rowspan="3">Abdominal Vessels</td><td>Adrenal Vessels</td></tr>
<tr><td>Hepatic Vessels</td></tr>
<tr><td>Renal Vessels</td></tr>
<tr><td>Adrenal</td><td></td></tr>
<tr><td>Bile Ducts</td><td></td></tr>
<tr><td>Biliary Tract</td><td></td></tr>
<tr><td>Gallbladder</td><td></td></tr>
<tr><td>IVC</td><td></td></tr>
<tr><td>Kidney</td><td></td></tr>
<tr><td>Liver</td><td></td></tr>
<tr><td>Pancreas</td><td></td></tr>
<tr><td>Peritoneum</td><td></td></tr>
<tr><td>Portal Circulation</td><td></td></tr>
<tr><td>Renal</td><td></td></tr>
<tr><td>Spleen</td><td></td></tr>
<tr><td>Stomach</td><td></td></tr>
<tr><td rowspan="7">Abdominal & Pelvic Arteries</td><td>Abd/Pelv 1st Order Arteries</td><td></td></tr>
<tr><td>Abd/Pelv 2nd Order Arteries</td><td></td></tr>
<tr><td>Abd/Pelv 3rd Order Arteries</td><td></td></tr>
<tr><td>Abd/Pelv Additional Arteries</td><td></td></tr>
<tr><td>Abdominal Aorta</td><td></td></tr>
<tr><td>Pelvic Arteries</td><td></td></tr>
<tr><td>Visceral Arteries</td><td></td></tr>
<tr><td>Bladder</td><td></td><td></td></tr>
<tr><td>Colon</td><td></td><td></td></tr>
</table>

Anatomy	Sub-Category 1	Sub-Category 2	Sub-Category 3
Abdomen & Pelvis (cont.)	Pelvis	Fallopian Tube	
		Female Genital Tract	Uterus
			Vagina
		Male Genital Tract	
		Pelvic Vessels	
		Pelvis - Lymph Node	
		Prostate	
		Sacrum	
	Rectum		
	Retroperitoneum		
	Small Intestine		
	Upper GI Tract		
	Urinary Tract		
Breast			
Cardiac	Coronary Arteries		
	Heart		
Chest	Airway		
	Bronchial Tree		
	Chest - Lymph Node		
	Chest Wall		
	Lungs		
	Pleura		
	Ribs		
	SVC		
	Thoracic Arteries	Internal Mammary Artery	
		Pulmonary Arteries	
		Thoracic 1st Order Arteries	
		Thoracic 2nd Order Arteries	
		Thoracic 3rd Order Arteries	
		Thoracic Additional Arteries	
		Thoracic Aorta	
	Thoracic Esophagus		
	Thoracic Vessels		

Anatomy	Sub-Category 1	Sub-Category 2	Sub-Category 3
External Genitalia	Penis		
	Testis		
Extremity	Lower Extremity	Ankle	
		Foot	
		Hip	
		Knee	
		Leg	
		Lower Extremity Arteries	Leg Arteries
			Lower Extr. 1st Order Arteries
			Lower Extr. 2nd Order Arteries
			Lower Extr. 3rd Order Arteries
			Lower Extr. Additional Arteries
		Lower Extremity Joint	
		Lower Extremity Vessels	
		Lymphatics	
		Thigh	
	Upper Extremity	Arm	
		Elbow	
		Fingers	
		Forearm	
		Hand	
		Shoulder	
		Upper Extremity Arteries	Brachial Artery
			Upper Extr. 1st Order Arteries
			Upper Extr. 2nd Order Arteries
			Upper Extr. 3rd Order Arteries
			Upper Extr. Additional Arteries

Anatomy	Sub-Category 1	Sub-Category 2	Sub-Category 3
Extremity (cont.)	Upper Extremity (cont.)	Upper Extremity Joint	
		Upper Extremity Vessels	
		Wrist	
Head & Neck	Head	Brain	
		Dental	
		Ear	
		Internal Auditory Meatus	
		Intracranial Vessels	
		Mastoids	
		Nasolacrimal Duct	
		Orbit Vessels	
		Orbits	
		Posterior Fossa	
		Salivary Glands	
		Skull	
		Temporomandibular Joint	
	Max-Face	Face	
		Facial bones	
		Mandible	
		Nasal Bones	
		Paranasal Sinuses	
	Neck	Cervical Esophagus	
		Extracranial Vessels	
		Larynx	
		Neck - Lymph Node	

Anatomy	Sub-Category 1	Sub-Category 2	Sub-Category 3
Head & Neck (cont.)	Neck (cont.)	Neck Arteries	Carotid Arteries
			External Carotid Arteries
			Neck 1st Order Arteries
			Neck 2nd Order Arteries
			Neck 3rd Order Arteries
			Neck Additional Arteries
			Vertebral Arteries
		Parathyroid	
		Pharynx	
		Thyroid	
Other	Veins	Ovarian Vein	
		Systemic Veins	
	Vessels	Additional Vessels	
		Initial Vessel	
		Systemic Vessels	
Spine	Celiac Plexus		
	Cervical Spine		
	Coccyx		
	Lumbar Spine		
	Sacral Spine		
	Sacroiliac Joints		
	Thoracic Spine		
Unspecified Body Region			
Whole Body	Bone	Appendicular Skeleton	

Appendix C

Exploring Diagnostic Coding

Objectives

In this chapter, you will:

- Define workflow diagnostic coding options in *PowerScribe 360 Reporting*.
- Managing diagnostic codes in *PowerScribe 360 Reporting*.
- Demonstrate configuration of coding according to workflow diagnostic coding requirements.
- Demonstrate using the diagnostic coding in the client.

Introduction

PowerScribe 360 Reporting comes with both the ICD-9 and ICD-10 code sets installed in its database. Administrators can decide which version to install on a site-by-site basis.

Diagnostic Coding in Reporting

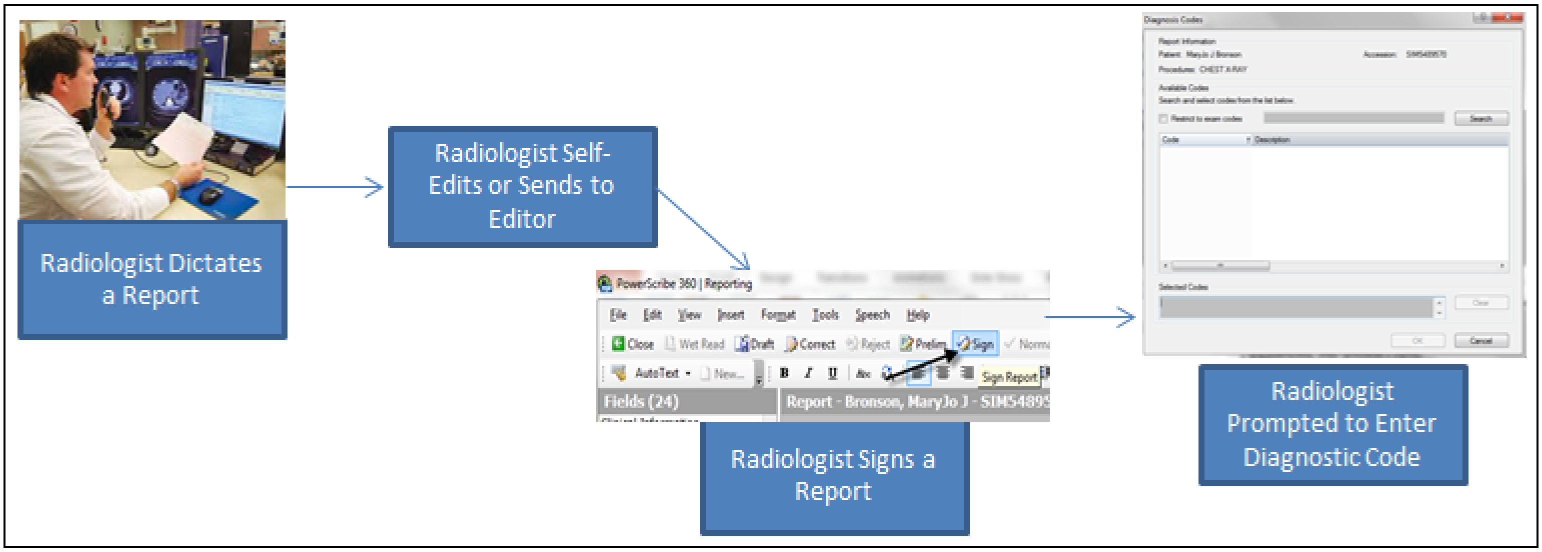
Diagnostic coding allows administrators to:

- map procedure codes to diagnostic codes,
- add codes to the system,
- deactivate codes, and/or
- change the code descriptions.

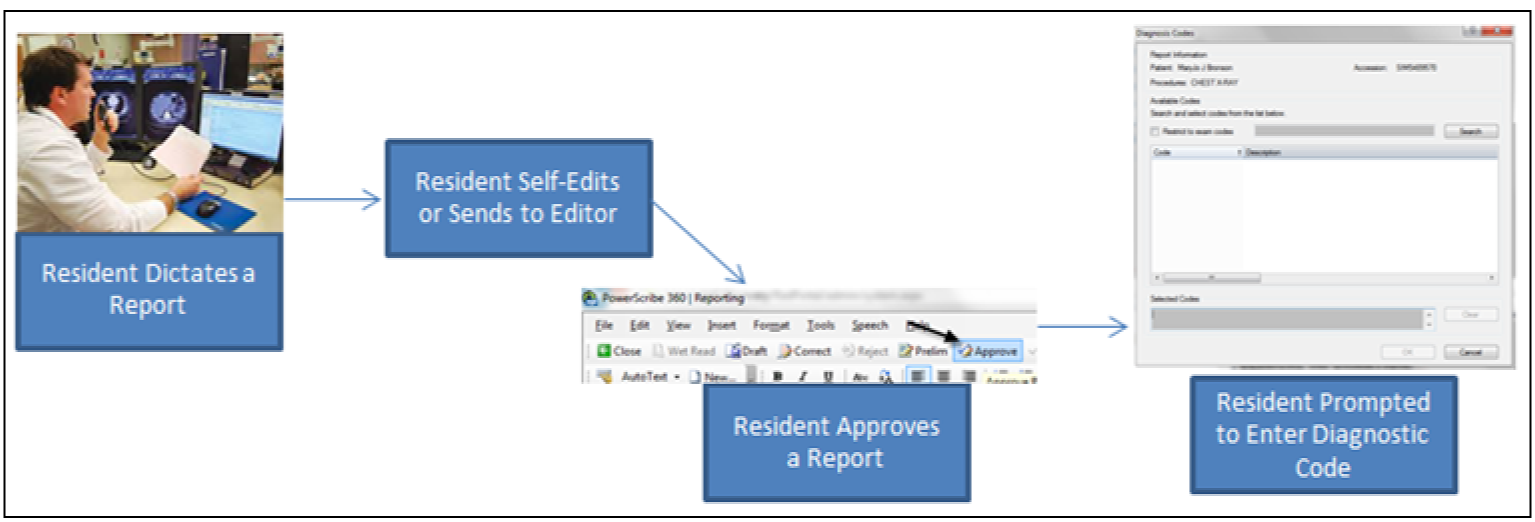
Workflow

PowerScribe 360 Reporting allows both radiologists and residents to enter diagnostic codes. The workflows for each type of user are shown below.

Radiologist Workflow



Resident Workflow



Map Procedure Codes to Diagnostic Codes

PowerScribe 360 Reporting is installed with a master set of both the ICD-9 and ICD-10 diagnostic codes. Each of your procedure codes can be mapped to diagnostic codes to specify valid diagnoses for those procedures.

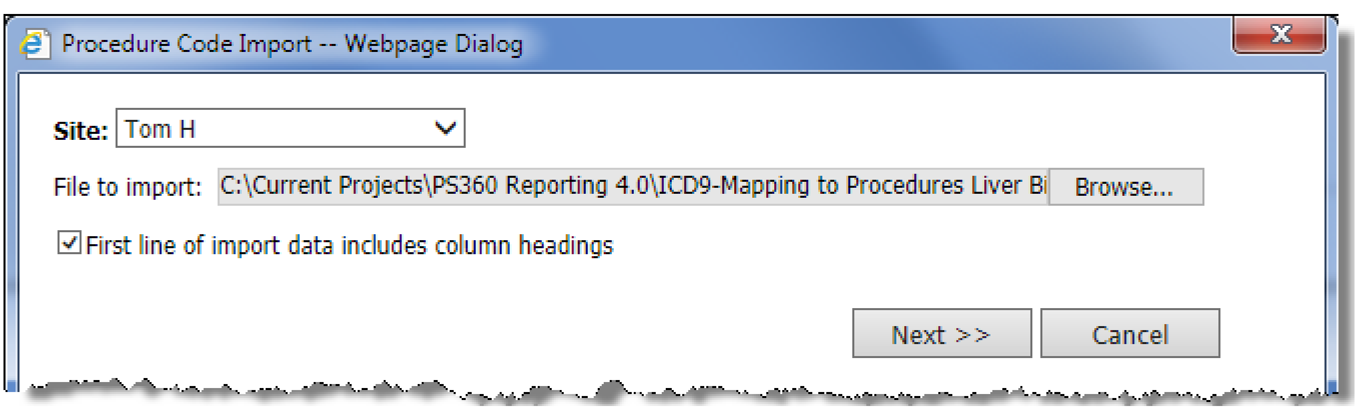
To map procedure codes to diagnostic codes:

1. Add the columns **ICDCode** and **ICDDesc** to your Procedure Master Translator.
2. Add the diagnostic code information for the procedure codes as needed.

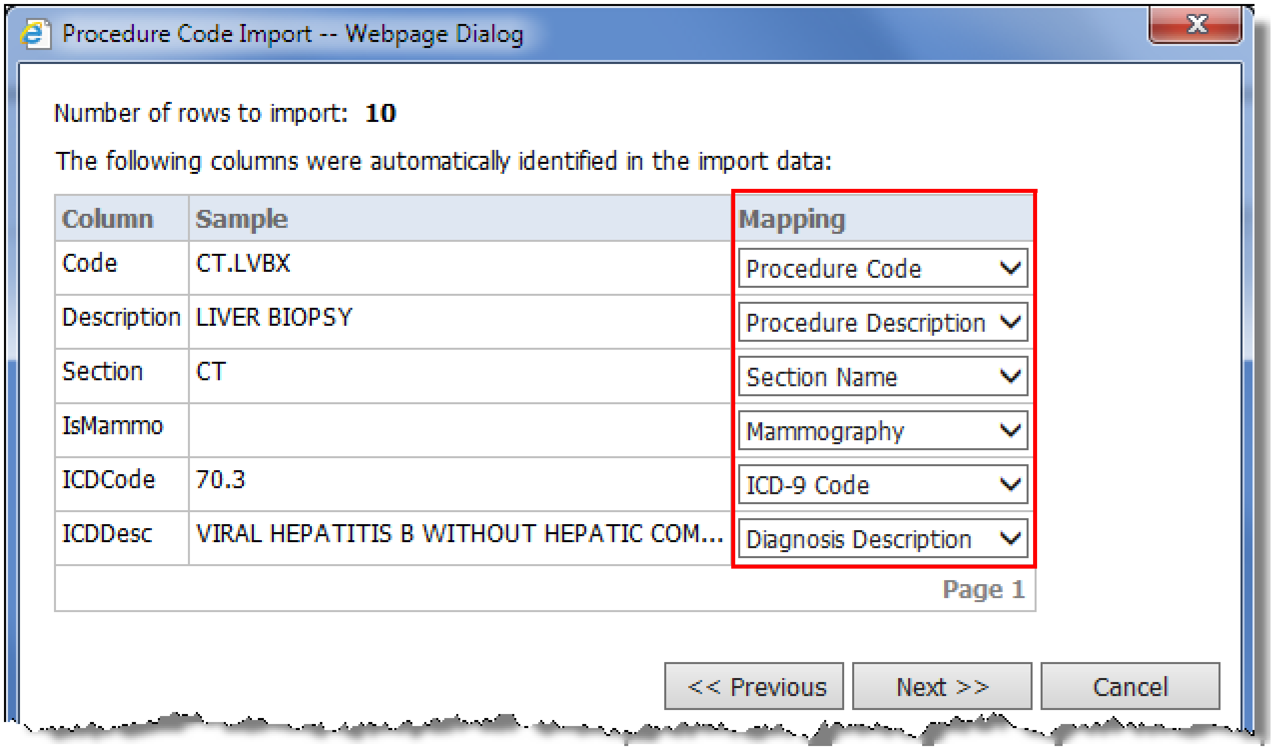
Note: *If you have multiple diagnostic codes for one line item, place them in the same cell, using a comma to separate them.*

	A	B	C	D	E	F
1	Code	Description	Section	IsMammo	ICDCode	ICDDesc
2	CT.LVBX	LIVER BIOPSY	CT		70.3	VIRAL HEPATITIS B WITHOUT HEPATIC COMA ACUT
3	CT.LVBX	LIVER BIOPSY	CT		70.7	UNSPECIFIED VIRAL HEPATITIS C WITHOUT HEPATI
4	CT.LVBX	LIVER BIOPSY	CT		571.5	CIRRHOSIS OF LIVER WITHOUT ALCOHOL
5	CT.LVBX	LIVER BIOPSY	CT		571.8	OTHER CHRONIC NONALCOHOLIC LIVER DISEASE
6	CT.LVBX	LIVER BIOPSY	CT		573.3	HEPATITIS UNSPECIFIED
7	CT.LVBX	LIVER BIOPSY	CT		573.8	OTHER SPECIFIED DISORDERS OF LIVER
8	CT.LVBX	LIVER BIOPSY	CT		573.9	UNSPECIFIED DISORDER OF LIVER
9	CT.LVBX	LIVER BIOPSY	CT		789	ABDOMINAL PAIN UNSPECIFIED SITE
10	CT.LVBX	LIVER BIOPSY	CT		789.1	HEPATOMEGALY
11	CT.LVBX	LIVER BIOPSY	CT		794.8	NONSPECIFIC ABNORMAL RESULTS OF FUNCTION

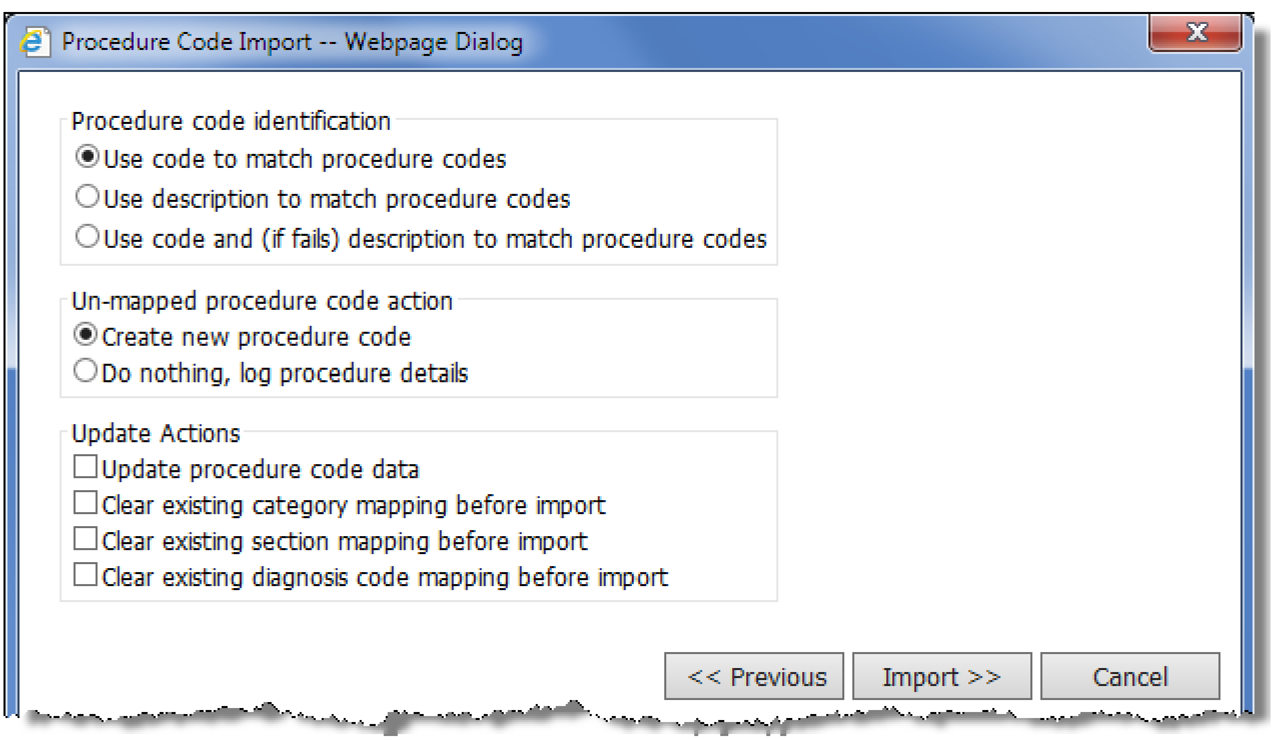
3. Save your spreadsheet.
4. Log in to the *PowerScribe 360 Reporting* Administrator Portal.
5. Click **Setup** > **Procedures** > **Import**.
6. Select the appropriate site.
7. Browse for the spreadsheet file you created in steps 1 through 3 above.
8. Click **Next**.



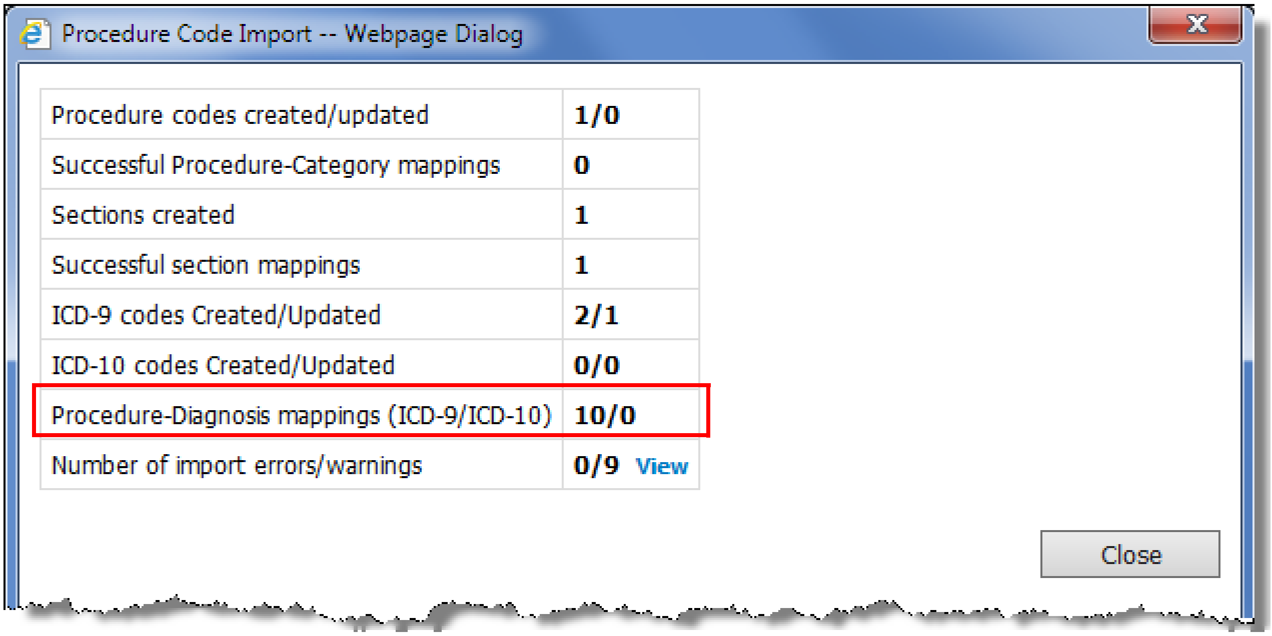
9. From the **Mapping** drop-down lists, select the item that matches your column heading name. See the illustration below for an example.



10. Click **Next**.
11. Click **Import**.



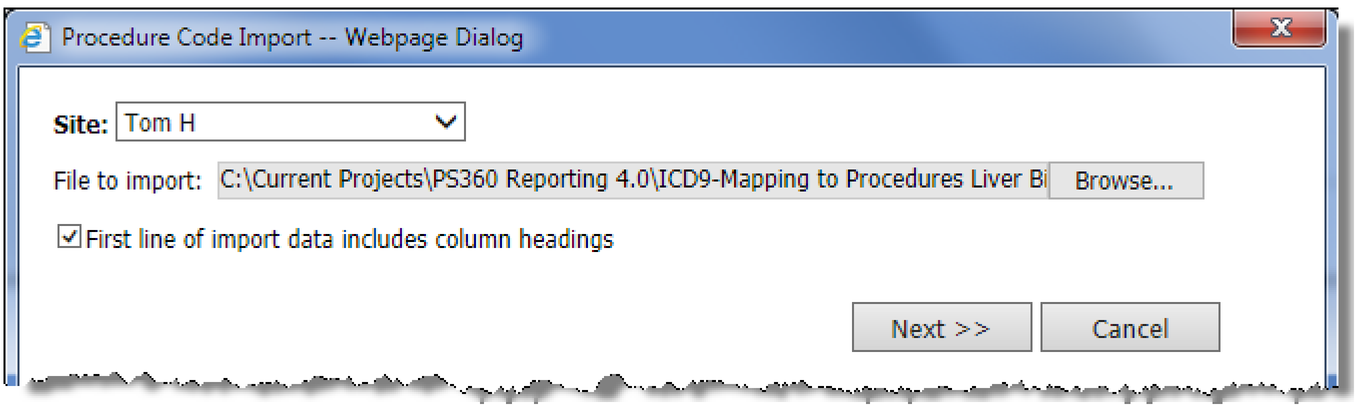
12. At the results screen, review the summary and click **Close**.



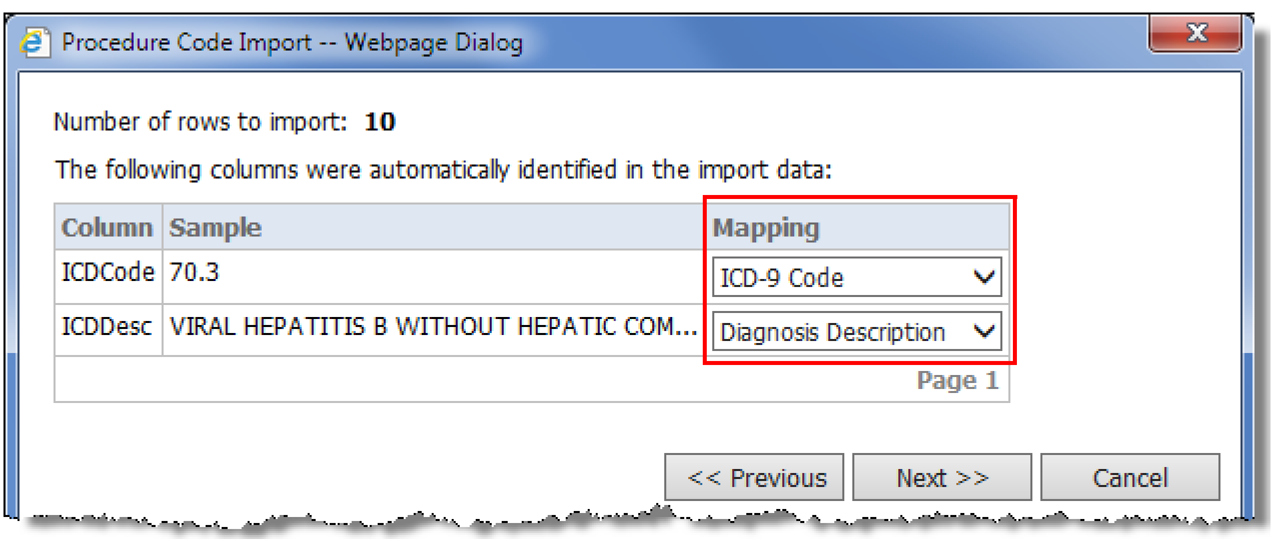
Import Diagnostic Codes

To import diagnostic codes:

1. Create a spreadsheet that contains two columns: **ICDCode** and **ICDDesc**.
2. Add the ICD codes and the descriptions for those codes.
3. Save your spreadsheet.
4. Log in to the *PowerScribe 360 Reporting* Administrator Portal.
5. Click **Setup** > **Procedures** > **Import**.
6. Select the appropriate site.
7. Browse for the spreadsheet file you created in steps 1 through 3 above.
8. Click **Next**.

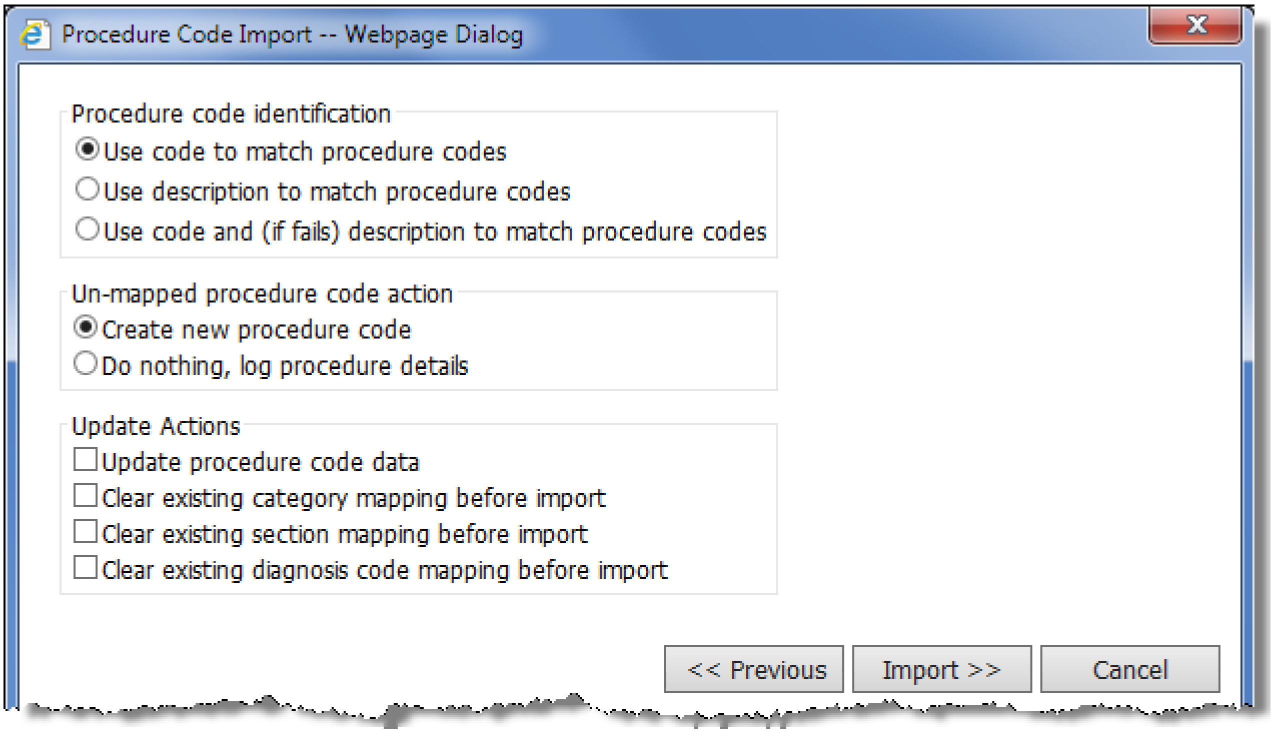


9. From the **Mapping** drop-down lists, select the item that matches your column heading name. See the illustration below for an example.

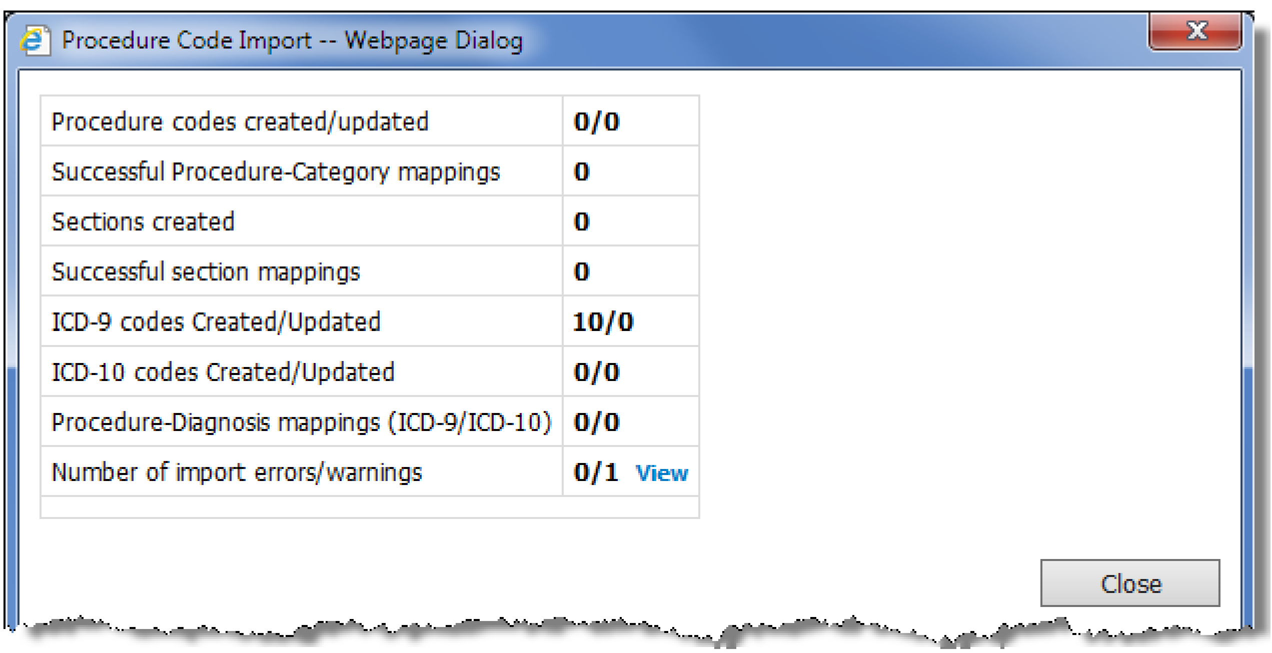


10. Click **Next**.

11. Click **Import**.



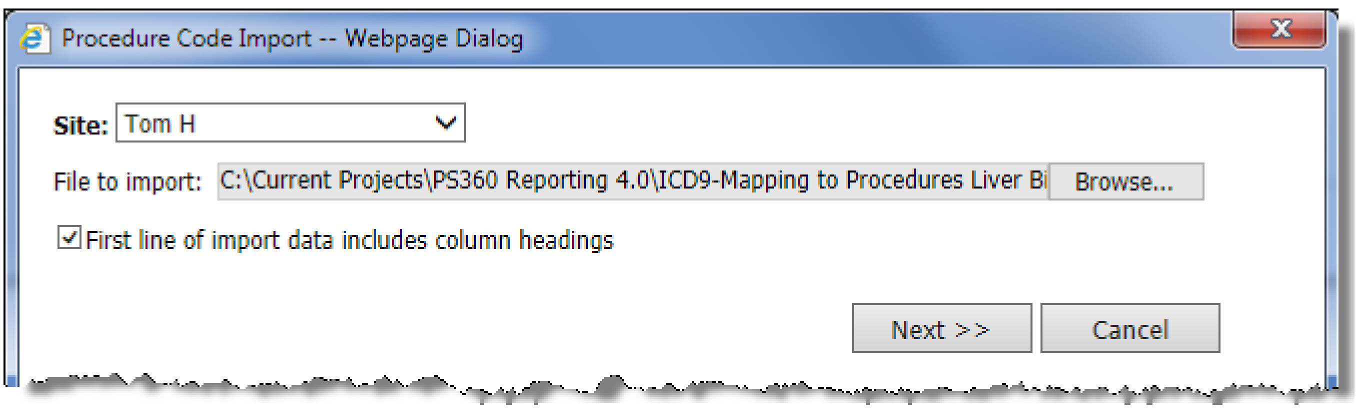
12. At the results screen, review the summary and click **Close**.



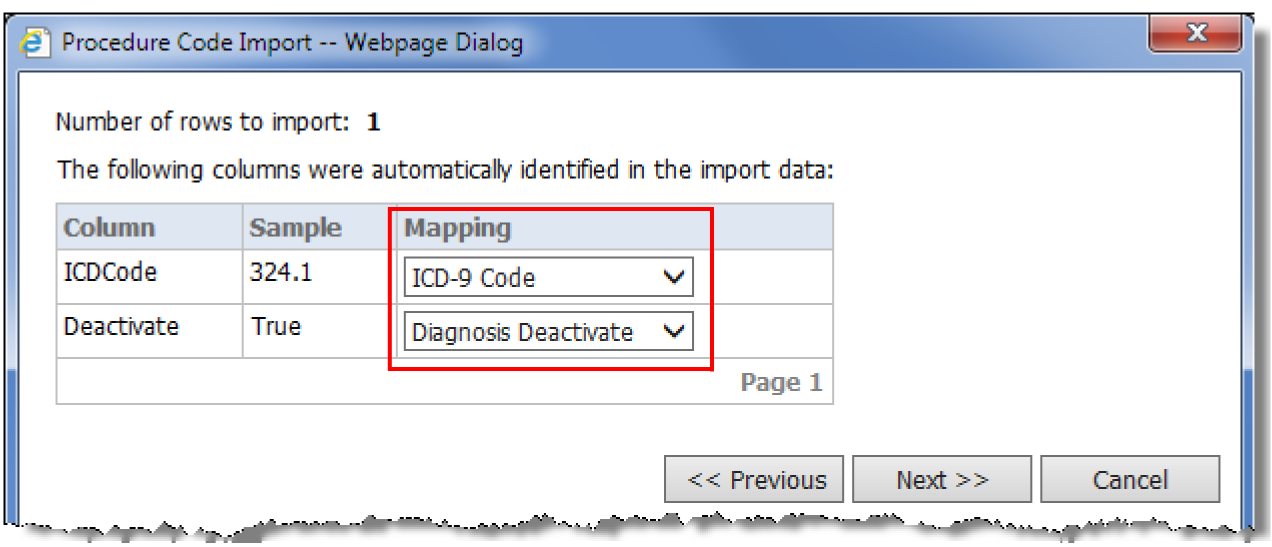
Deactivate Diagnosis Codes

To deactivate diagnostic codes:

1. Create a spreadsheet that contains two columns: **ICDCode** and **Deactivate**.
2. In the **ICDCode** column, enter the diagnosis codes you want to deactivate.
3. In the **Deactivate** column, enter the word **TRUE**.
4. Save your spreadsheet.
5. Log in to the *PowerScribe 360 Reporting* Administrator Portal.
6. Click **Setup** > **Procedures** > **Import**.
7. Select the appropriate site.
8. Browse for the spreadsheet file you created in steps 1 through 4 above.
9. Click **Next**.

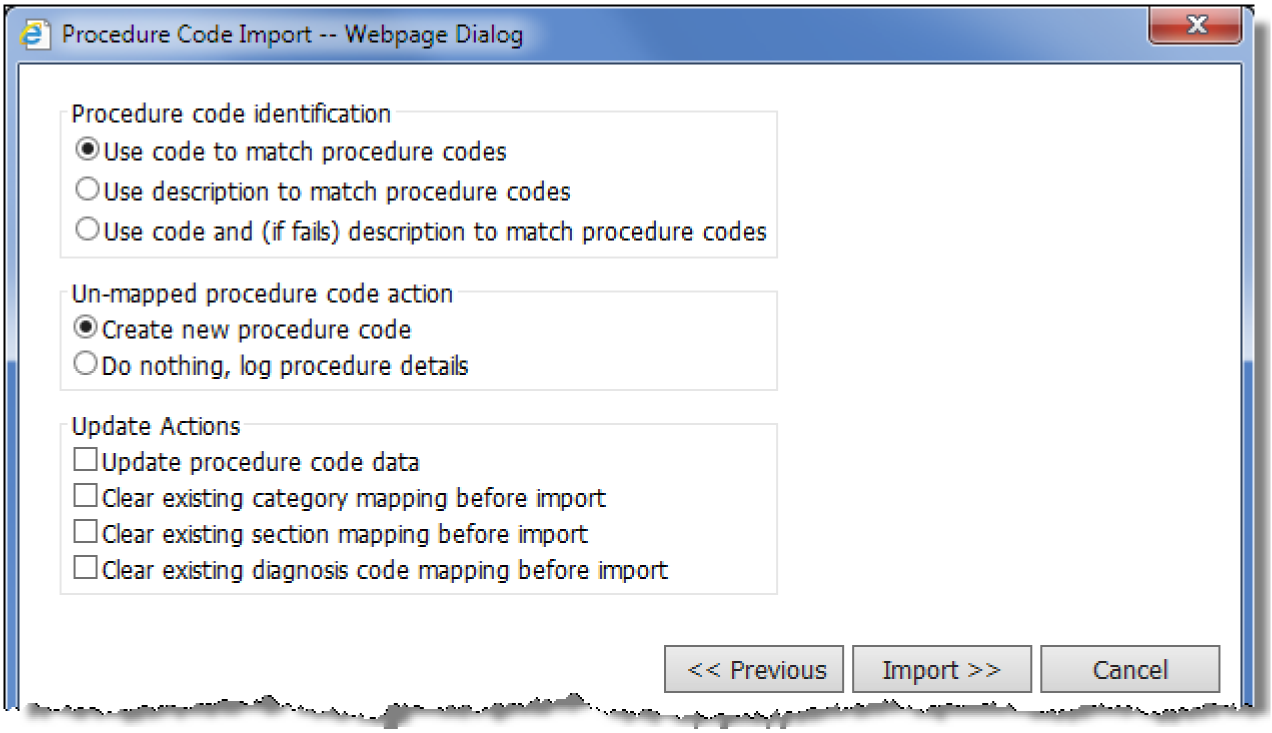


10. From the **Mapping** drop-down lists, select the item that matches your column heading name. See the illustration below for an example.

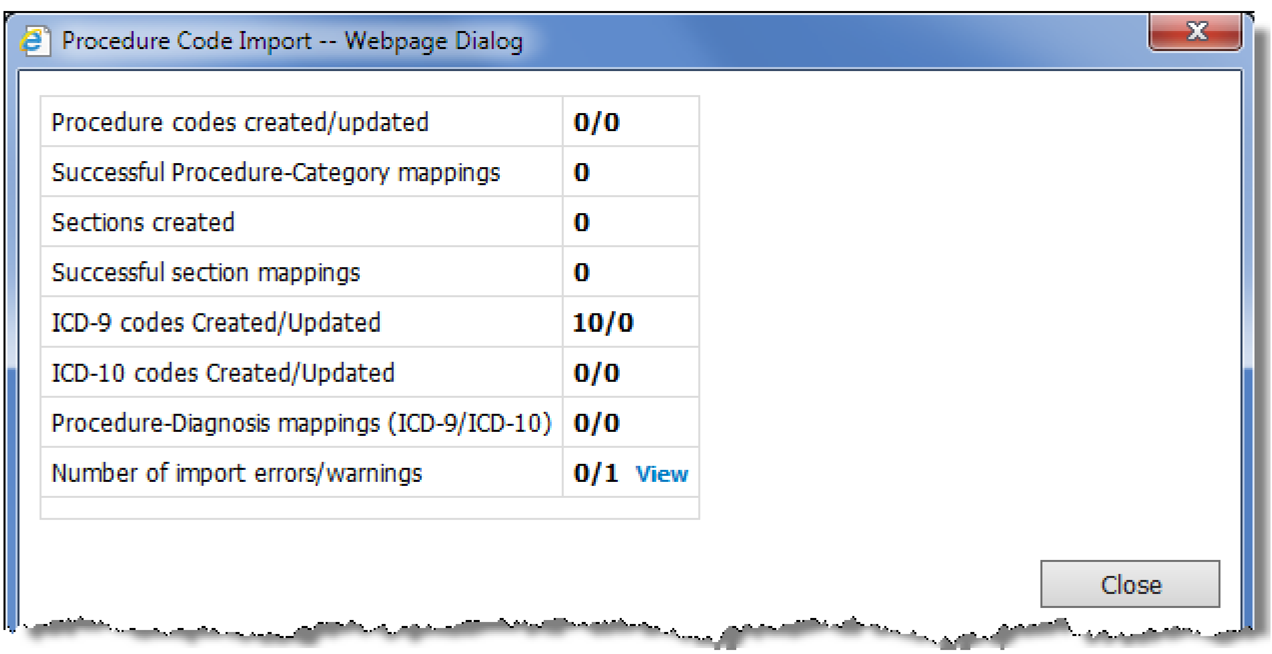


11. Click **Next**.

12. Click **Import**.



13. At the results screen, review the summary and click **Close**.



Diagnostic Coding Configuration

Configuring diagnostic codes is a two-step process:

1. Import diagnostic codes linked to procedure codes (optional)
2. Set your diagnosis coding preferences

Note: *Notice that step one above is optional: Administrators can choose not to link the facility's procedure codes to the diagnostic codes. However, this forces providers to search for the diagnostic codes they require for their reports. If an administrator does perform this step, the appropriate codes are available to the provider, based upon the procedure that is being reported on.*

Step 1: Import Diagnostic Codes Linked to Procedure Codes (Optional)

Nuance uses a conversion tool to convert your Procedure Master Translator so that it includes your procedure codes. The conversion also provides a suggested diagnosis code to which the procedure code could be mapped.

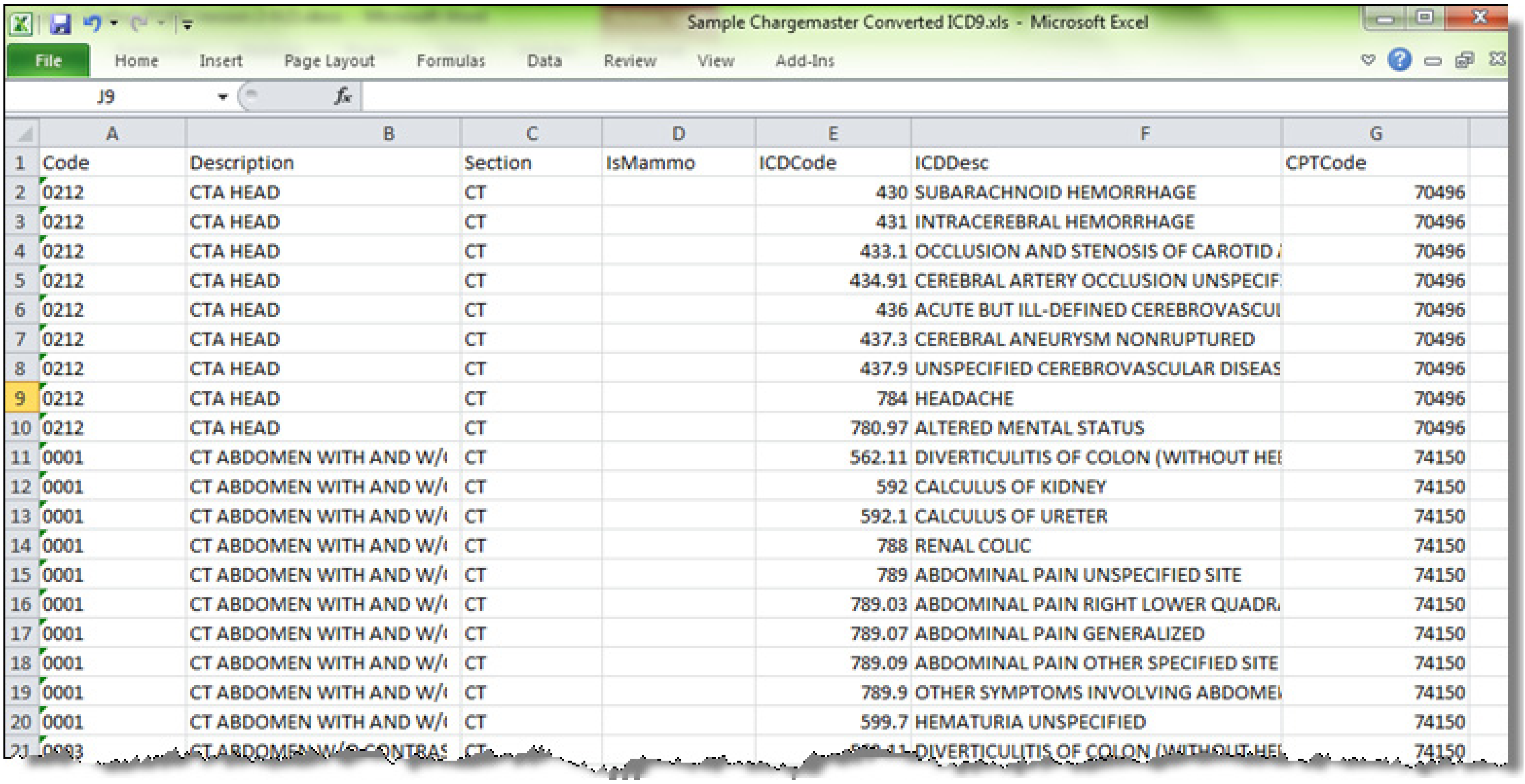
Note: *Nuance has a list of suggested procedure code to diagnostic code mappings. This is a select list; it does not provide a mapping for every code.*

If you want to perform these mappings, you must provide an import file in a specific file format. The illustration below shows an example of the file format and column headings required from our customers to allow Nuance to use the conversion tool.

Sample Chargemaster.xls [Compatibility Mode] - Microsoft Excel

	A	B	C	D
1	Procedure code	Procedure code description	PS360 Clinical Code	Section
2	0212	CTA HEAD	70496, 70498NU1	CT
3	0001	CT ABDOMEN WITH AND W/O CONTRAST	74150, 74160, 74170	CT
4	0003	CT ABDOMEN W/O CONTRAST	74150, 74160, 74170	CT
5	0004	CT GUIDE EPID INJ-CERV/THOR	72125, 72126, 72127, 72128, 72129, 72130	CT
6	0005	CT ABDOMEN WITH CONTRAST	74150, 74160, 74170	CT
7	0006	CT GUIDE FAC INJ-LUM/SAC 1LEV_	72131, 72132, 72133	CT
8	0007	CT GUIDE BIOPSY DEEP_	61751, 77012	CT
9	0008	CT GUIDE NEEDLE PLACE-DEEP	61751, 77012	CT
10	0009	CT GUIDE BIOPSY SUPERFIC	61751, 77012	CT
11	0010	CT GUIDE ASP/INJ LRG JT	61751, 77012	CT
12	0011	CT 3D RECONSTRUCTION READING ONLY	76376, 76377	CT
13	0012	CT 3D RECONSTRUCTION	76376, 76377	CT
14	0013	CT GUIDE ASP/INJ SMALL JT	61751, 77012	CT
15	0014	CT GUIDE ASP/INJ MED JT	61751, 77012	CT
16	0015	CT WITH WATER SOLUBLE	76380	CT
17	0016	CT GUIDE ASP CYST	61751, 77012	CT
18	0018	CT GUIDE NERV RT CERV/THO 2LEV_	72125, 72126, 72127, 72128, 72129, 72130	CT
19	0020	CT GUIDE EPID INJ-LUMB/SAC	72131, 72132, 72133	CT

The illustration below shows an example of the worksheet Nuance returns to the customer after using the conversion tool.



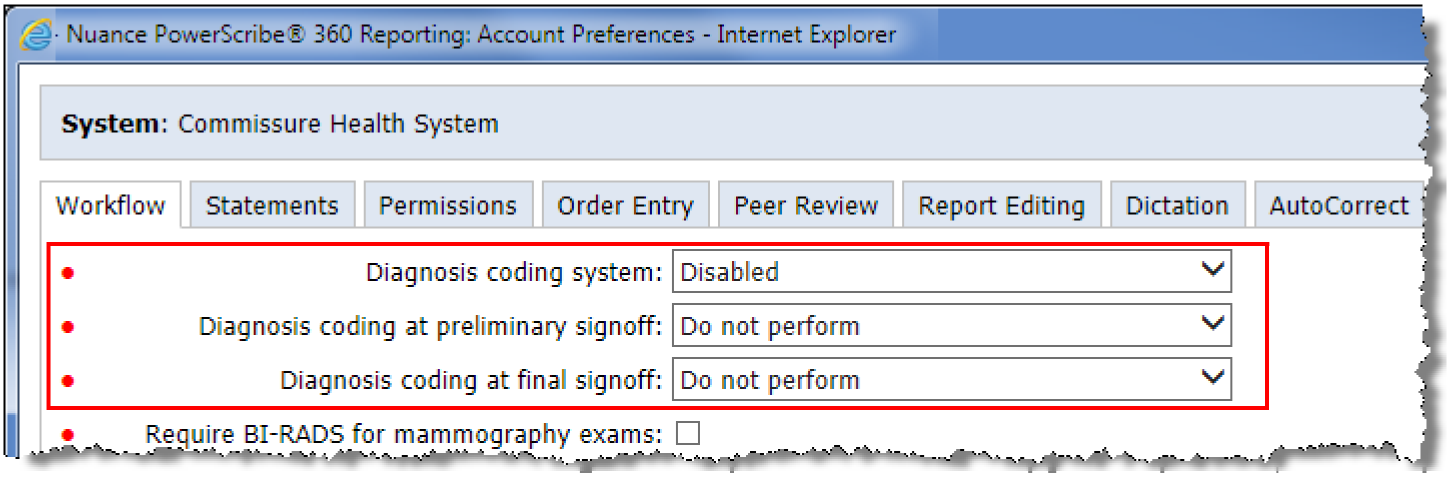
	A	B	C	D	E	F	G
1	Code	Description	Section	IsMammo	ICDCode	ICDDesc	CPTCode
2	0212	CTA HEAD	CT		430	SUBARACHNOID HEMORRHAGE	70496
3	0212	CTA HEAD	CT		431	INTRACEREBRAL HEMORRHAGE	70496
4	0212	CTA HEAD	CT		433.1	OCCLUSION AND STENOSIS OF CAROTID A	70496
5	0212	CTA HEAD	CT		434.91	CEREBRAL ARTERY OCCLUSION UNSPECIF	70496
6	0212	CTA HEAD	CT		436	ACUTE BUT ILL-DEFINED CEREBROVASCUL	70496
7	0212	CTA HEAD	CT		437.3	CEREBRAL ANEURYSM NONRUPTURED	70496
8	0212	CTA HEAD	CT		437.9	UNSPECIFIED CEREBROVASCULAR DISEAS	70496
9	0212	CTA HEAD	CT		784	HEADACHE	70496
10	0212	CTA HEAD	CT		780.97	ALTERED MENTAL STATUS	70496
11	0001	CT ABDOMEN WITH AND W/(	CT		562.11	DIVERTICULITIS OF COLON (WITHOUT HE	74150
12	0001	CT ABDOMEN WITH AND W/(	CT		592	CALCULUS OF KIDNEY	74150
13	0001	CT ABDOMEN WITH AND W/(	CT		592.1	CALCULUS OF URETER	74150
14	0001	CT ABDOMEN WITH AND W/(	CT		788	RENAL COLIC	74150
15	0001	CT ABDOMEN WITH AND W/(	CT		789	ABDOMINAL PAIN UNSPECIFIED SITE	74150
16	0001	CT ABDOMEN WITH AND W/(	CT		789.03	ABDOMINAL PAIN RIGHT LOWER QUADR/	74150
17	0001	CT ABDOMEN WITH AND W/(	CT		789.07	ABDOMINAL PAIN GENERALIZED	74150
18	0001	CT ABDOMEN WITH AND W/(	CT		789.09	ABDOMINAL PAIN OTHER SPECIFIED SITE	74150
19	0001	CT ABDOMEN WITH AND W/(	CT		789.9	OTHER SYMPTOMS INVOLVING ABDOME	74150
20	0001	CT ABDOMEN WITH AND W/(	CT		599.7	HEMATURIA UNSPECIFIED	74150
21	0003	CT ABDOMEN W/O CONTRAS	CT		[illegible]	DIVERTICULITIS OF COLON (WITHOUT HE	74150

Step 2: Set Your Diagnosis Coding Preferences

The diagnosis coding preferences described in this section can be set at either the **System** or **Site** level:

- If these preferences will be system wide, log in to the *PowerScribe 360 Reporting* administrator portal and click **Setup** > **System** > **Preferences** > **Workflow**.
- If these preferences will differ from site to site (assuming your facility has multiple sites), log in to the *PowerScribe 360 Reporting* administrator portal and click **Setup** > **Site** (select a site) > **Preferences** > **Workflow**.

The illustration below shows an example of the System version of the diagnosis coding preferences.



The following table describes the options for these preferences.

Setting	Description	Default
Diagnosis coding system	Select which diagnostic coding system to use. Choices are **ICD-9**, **ICD-10**, or **Disabled**.	Disabled
Diagnosis coding at preliminary signoff	Controls whether *PowerScribe 360 Reporting* requires diagnosis coding when a resident approves a report. ***Note:*** *This preference does not apply when an attending saves a report as preliminary.* • **Do not perform**: Diagnosis coding is not invoked at preliminary signoff. • **Do not require codes**: Diagnosis coding is invoked, if not already set for all the accessions of the report, but the user is allowed to cancel without assigning codes. • **Require codes**: The report cannot be approved unless at least one code is entered for each order in the report. ***Note:*** *This setting may override the behavior of the Diagnosis coding at final signoff preference as noted below.*	Do not perform

Setting	Description	Default
Diagnosis coding at final signoff	Controls whether *PowerScribe 360 Reporting* requires diagnosis coding when the Attending provider signs a final report. ***Note:*** *This setting is ignored if the Diagnosis coding at preliminary signoff preference is set to Require codes and at least one code is not entered for each order in the report. That is, if coding is required at preliminary signoff, but the report was not approved by a resident, coding will be required at final signoff regardless of the setting of this preference.* • **Do not perform**: Diagnosis coding is not invoked at final signoff. • **Do not require codes**: Diagnosis coding is invoked, if not already set for all the accessions of the report, but the user is allowed to cancel without assigning codes. • **Require codes**: The user cannot sign the report without entering one or more codes for each order in the report. ***Note:*** *If codes were entered by the Resident, this setting will cause diagnosis coding to be invoked so that the Attending can review the codes entered by the Resident.*	Do not perform

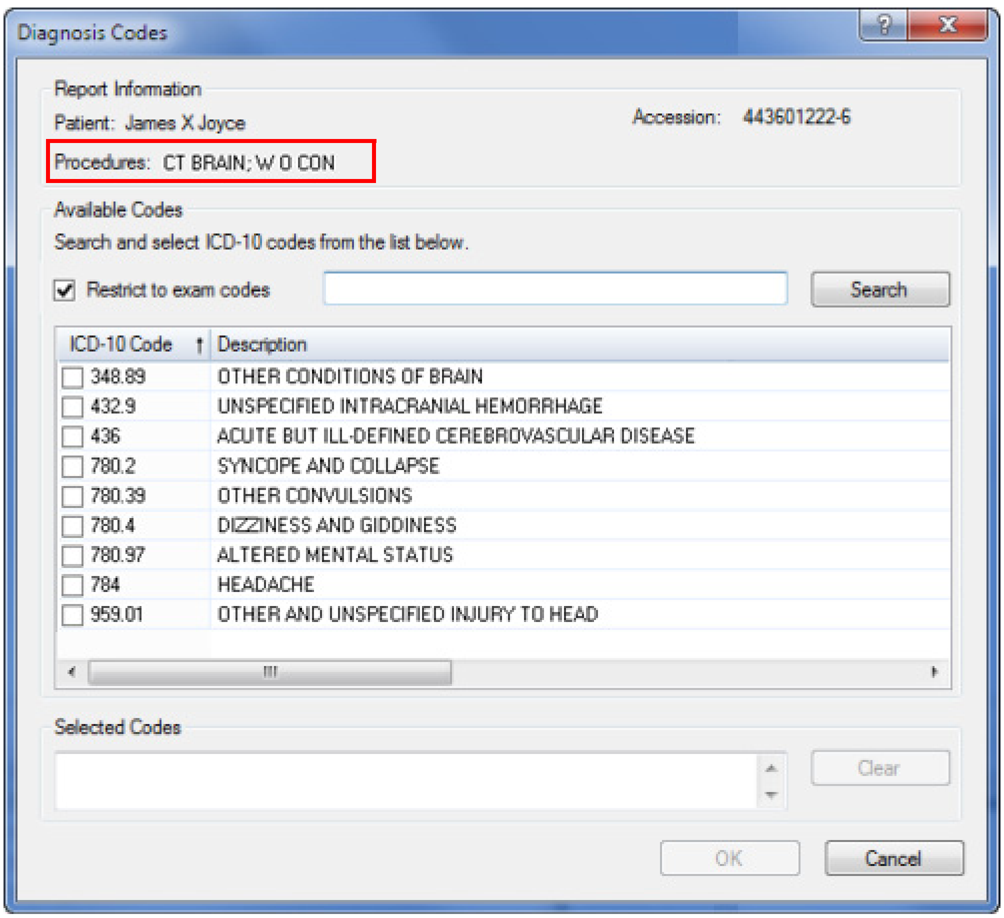
Using Diagnostic Coding in the Client

This section shows providers how to use mapped diagnosis codes and non-mapped diagnosis codes.

Diagnosis Coding with Imported Mappings

If your organization has imported mappings for diagnosis codes, a short list of possible diagnosis codes is displayed for you to select from, as shown in the example illustration below.

1. After signing a report, the **Diagnosis Codes** dialog box opens.

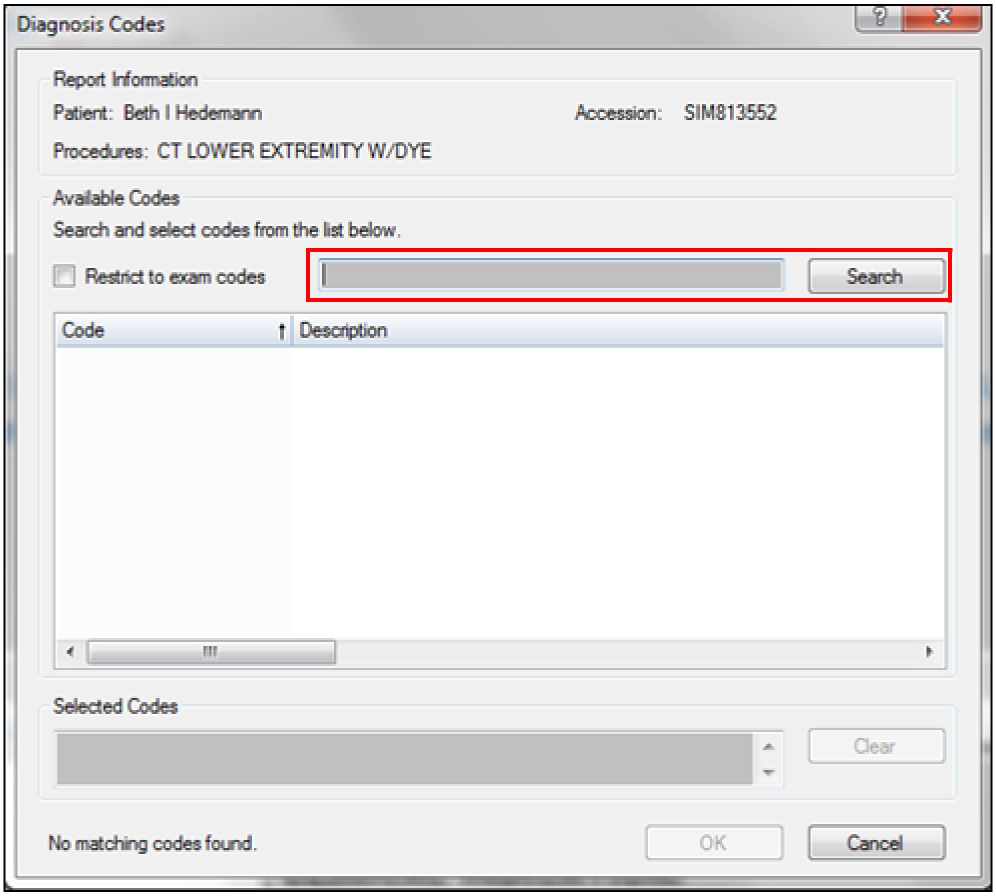


2. Make sure that the **Restrict to exam codes** check box is selected. Selecting this check box limits the codes that are presented to the ones that are mapped to procedure codes.
3. From the search results list, select the check box next to the diagnosis code you want to use. The code then appears in the **Selected Codes** area of the window.
4. When finished, dictate **"OK"** to close the **Diagnosis Codes** window.

Diagnosis Coding without Imported Mappings

If you did not import diagnosis code mappings, you will have to perform a search for the correct diagnosis code, as illustrated in the example below.

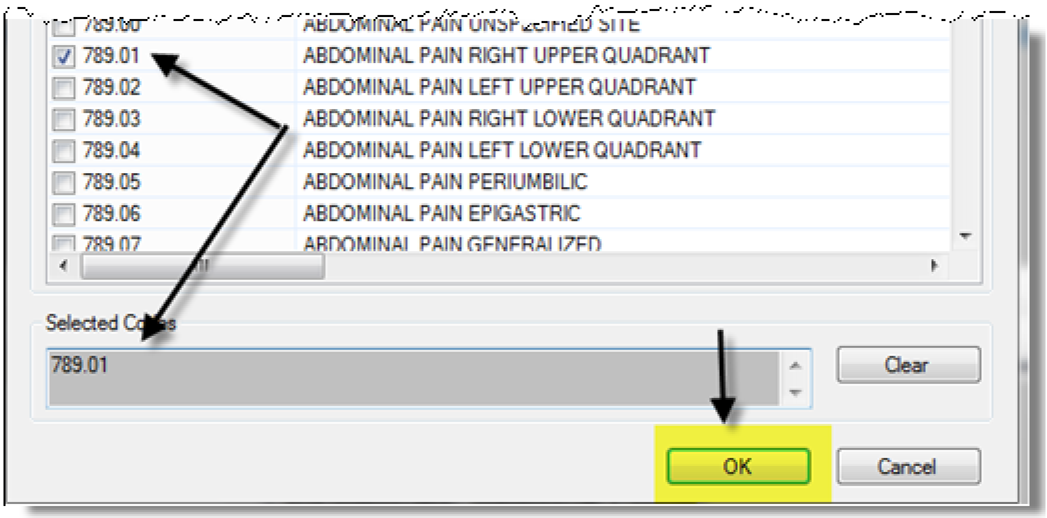
1. After signing a report, the Diagnosis Codes window opens.



2. With your mouse cursor in the **Search** field, dictate the code you want to add.
3. Dictate **"Search."**

Note: *The **Restrict to exam codes** check box must be **cleared**. If this box is selected, it limits the codes that are presented to the ones that are mapped to procedure codes. Once this box is cleared, you can do a partial search and select the codes you would like to incorporate.*

4. From the search results list, select the check box next to the diagnosis code you want to use. The code then appears in the **Selected Codes** area of the window.



5. When finished, dictate **"OK"** to close the **Diagnosis Codes** window.

Index

B

C

Q

R

S