# User Manual

## DeepUnity PACSonWEB

3.4.400

SSN: DOC-4353978

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# Notification Types

The following examples show how warning signals, safety instructions, other instructions and notes will be represented in this document. The text will explain their intended use.

**Warning:**

Indicates a dangerous situation likely to entail a potential serious violation of a user, an engineer, a patient, or any other person.

**Caution:**

Indicates danger with a low level of risk, which may lead to minor or moderate injury if not prevented.

**Instruction:**

Indicates important information that has to be read, understood, maintained and/or obeyed by the user in order to ensure a safe operation of the software.

**Note:**

Notes give advice and highlight unusual matters. Those notes are not instructions.

**Important!**

Highlights information that is required by the user in order to ensure proper effect of the software, for instance enabling permissions or the availability of licenses.

**Restriction:**

Indicates a limitation of the software or a condition that needs to be fulfilled for proper effect of the software.


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**Tip:**

Provides the user with hints enabling different ways of performing tasks, for instance by using a shortcut key.


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# Introduction

1

Thank you for using DeepUnity PACSonWEB. The goal of this user manual is to help you familiarize yourself with the way the system works and with its operating instructions in the most efficient manner possible. Please first read the general conditions of use (Page 19) before using DeepUnity PACSonWEB.

## 1.1 Intended Use

### Intended Use

Web based PACS software tool including image enhancement features (window levelling, presets, inversion, MIP and MPR), spatial locator and measuring functions for the area of diagnostic radiology.

### Medical Purpose

DeepUnity PACSonWEB aids diagnosis driving clinical management by assisting (nuclear) radiologists in the diagnostic process through visualization and processing (including image manipulation) of DICOM images, providing relevant information and tools for measurement, analysis and calculation of image characteristics (e.g. geometrical, annotation, Window Level, ROI Analysis, linking of radiological images) which are potentially related to diagnostic findings.

DeepUnity PACSonWEB is intended to investigate any anatomy of the human body which is visible in medical imaging for the purpose of visualization, detection, or measurement of abnormalities/ diseases/ medical conditions.

DeepUnity PACSonWEB is also intended to be used for injury diagnosis - it can be used for any injury that can be diagnosed using medical imaging.

### Non-medical Purpose

DeepUnity PACSonWEB enables healthcare professionals to view patient images, medical documents and reports from multiple departments and perform image manipulations and measurements.


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The device is used by medical professionals whenever they require access to medical images and patient demographic information.

The device is used by patients to access their medical images (primarily) and to read the associated report (if available).

## Indications for Use

As a distribution medium, DeepUnity PACSonWEB is used to make medical images and reports, made at a hospital or imaging institution, available to the requesting physician and/or patient over the internet.

As a diagnostic tool, DeepUnity PACSonWEB can be used by a (nuclear) radiologist to visualize and enhance available images and perform measurements in order to make a diagnosis.

## Contraindications

- Accounts are not indicated to be created for healthcare providers that are not authorized (eligible) to request a radiology study. Non-eligible healthcare providers: physical therapists, osteopaths, nursing staff, patients.
- The device is not indicated to be used with a medical (i.e. diagnostic) purpose by users who are not qualified imaging diagnosticians.
- All tools using volume-based images like MPR, 3D rendering, reformations and similar are not intended for primary diagnostic use. These tools provide additional information but should not be relied upon as the primary means of diagnosis.
- The device is suitable for use on mobile devices, such as tablets, for image review purposes. However, mobile devices must not be used for primary image interpretation.

## Intended users

DeepUnity PACSonWEB is intended to be used by the following types of users:

| Intended User | Non-medical purpose Yes/No | Medical purpose Yes/No | Skills/Training Needed/ Comments |
|---|---|---|---|
| Medical professionals,<br>e.g. physicians or nurses | Yes | No | Used via integration in a patient or referring physician portal for non-diagnostic purposes. No specific training |


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| Intended User | Non-medical purpose Yes/No | Medical purpose Yes/No | Skills/Training Needed/ Comments |
|---|---|---|---|
| | | | necessary. User manual is integrated in the product. |
| Radiologist | Yes | Yes | Basic training is required to use this medical device for diagnostic purposes. |
| Technologist | Yes | No | For use in data administration / quality control (QC): training required. |
| IT Admin | Yes | No | Ability to configure the solution, administrator training |
| Patient | Yes | No | Used via integration in a patient or referring physician portal for non-diagnostic purposes. No specific training necessary. User manual is integrated in the product. |
| DH Healthcare personnel: production, R&D, service | Yes | No | Used for non-medical purposes |
| Veterinary staff | Yes | Yes | Veterinary staff also use the software for diagnosing diseases and injuries on animals, even though that's outside the human medical focus. For the use of this medical device for diagnostic purposes a basic training is recommended. |


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## Intended use environment

DeepUnity PACSonWEB is used in a clinical environment where image data, medical documents and reports need to be viewed. Moreover, it can also be accessed outside the clinical environment by patients and physicians, enabling convenient and efficient retrieval of information.

Since DeepUnity PACSonWEB is a cloud-native solution, there is no restriction to the use environment on the condition that the monitor quality and ambient light is adequate to the intended clinical usage if used for medical (i.e. diagnostic) purposes.

Here an indicative list of intended use environments:

| Intended Use Environment | Yes/No | Comment |
|---|---|---|
| In X-ray, MRI, etc. rooms | Yes | - |
| Outside X-ray, MRI, etc. rooms | Yes | - |
| Private radiologist sites | Yes | - |
| Clinic | Yes | - |
| Imaging centre | Yes | - |
| Specialty departments | Yes | - |
| Home environment | Yes | Used by patients outside the healthcare environment. |
| Emergency room | Yes | - |
| Intensive Care Unit | Yes | - |
| Military environment | Yes | - |
| Doctor’s office | Yes | - |
| Telemedicine workplace | Yes | To be used with an adequate monitor and ambient light conditions for the intended clinical usage when performing a diagnosis. |


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| Intended Use Environment | Yes/No | Comment |
|---|---|---|
| Veterinary hospital and facility | Yes | No difference in source data compared to human use. |

DeepUnity PACSonWEB can also be used in veterinarian environments. The assessment for the use of this software in veterinary hospitals and facilities was based on its intended functionality and the nature of veterinary environments. The software features are aligned with those typically used in both human and veterinary medical settings. No significant differences in risk were identified between these environments, as the software does not involve direct patient interaction. The regulatory assessment conducted in relation to the intended use and veterinary environments concluded that no specific regulations apply for software used in veterinary hospitals in the target markets. Consequently, the device can be used in veterinary settings without posing additional risks.

### Intended Patient Population and Medical Conditions

DeepUnity PACSonWEB use is not limited to a specific patient population or medical condition.

## 1.2 Training

The user shall undergo adequate training by DH Healthcare regarding the safe and effective use of the product before using it. The operator must ensure that the training is held in accordance with local laws and regulations.

For more information, please contact your DH Healthcare representative. The user has to bear in mind the following information in this manual:

- Intended Use (Page 8)
- Safety Notices (Page 13)

## 1.3 Warnings and Precautions

This section contains important safety information intended to ensure the proper and safe use of the software. It includes warnings about potential hazards, precautions for use, and a description of any known residual risks that could affect the user, patient, or data integrity.

Please read this section carefully before using the software. Failure to observe the warnings and precautions may result in incorrect operation, patient harm, or loss of data.


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## 1.3.1 Safety Notices

| Category | Description |
|---|---|
| MPR as supplement | **Warning:**<br>All diagnosis and medical decisions based on MPR generated images (MPR, MIP, MinIP, MPVR) should always be double checked with the original series.<br>**Internal company reference:** SN0001 |
| Measuring functions | **Caution:**<br>The DeepUnity PACSonWEB measuring functions contain length measurements, angle measurements and density measurements based on the information that is provided by the original modality.<br>Length measurements are expressed in millimeters (mm).<br>Angle measurements are expressed in degrees (°).<br>Density measurements are expressed in the unit, as provided by the modality: Hounsfield Unit (HU), Optical Density (OD) or UnSpecified (US).<br>For measurement precision within the DeepUnity PACSonWEB environment, DeepUnity PACSonWEB relies on the precision of the information that is provided by this modality.<br>In case a measurements displays "N/A" as the resulting value, it implies that the original DICOM images do not contain the required information to perform a quantitative measurement.<br>**Internal company reference:** SN0002 |


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| Category | Description |
| --- | --- |
| Limitations for diagnostic purposes | **Warning:**<br><br>It is **NOT** allowed to use DeepUnity PACSonWEB for diagnostic purposes in case you are connected with a reference number.<br><br>**Internal company reference:** SN0003 |
| AI results | **Caution:**<br><br>AI results should be used as a supportive tool, and diagnoses and medical decisions should always be double-checked with the original images.<br><br>**Internal company reference:** SN0004 |
| Volume Rendering accuracy and resolution | **Warning:**<br><br>The accuracy of the calculated Volume Rendering images depends on the quality, pixel spacing, and slice spacing (relative image position for each image in the series) of the original images. Depending on the view (zoom, chosen slice thickness, render mode, orientation, ... ), gaps between the original pixels might be calculated into newly displayed pixels, and/or single pixels could be a recalculation of multiple original pixels. The user should always be aware of this and verify any data and findings in the Volume Rendering images, including measurements, with the original series, before making any medical decisions or diagnosis.<br><br>**Internal company reference:** SN0005 |


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## 1.3.2 Disclosure of Residual Risk

| Category | Description |
|---|---|
| MIP, MinIP and MPVR calculations | **Caution:**<br><br>While using MIP, MinIP and MPVR calculations, only one pixel is shown for the whole thickness of the slice. The user should know that only selective data is shown based on these calculations, and that it is his responsibility to double check the data with the original series.<br><br>**Internal company reference:** DRR001 |
| MPR accuracy and resolution | **Caution:**<br><br>The accuracy of MPR generated images depends on the quality of the original series (pixel spacing, slice thickness ...). The images are calculated, based on the data available in the original series. Gaps of pixel-data will be calculated to show a smooth image.<br><br>It will remain the user's responsibility to keep in mind the slice thickness and pixel spacing from the original series. In case the slice thickness is larger than the pixel spacing, overlap between slices is not taken into account. The used pixel spacing is calculated based on the image location of the original images.<br><br>The user should be aware of lossy data visualization while judging and diagnosing a patient. The user should also be aware that series that lost pixel- data while compressing or have an inappropriate slice thickness are not suitable for proper MPR generation.<br><br>**Internal company reference:** DRR002 |


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| Category | Description |
| --- | --- |
| Volume Registration | **Warning:**<br><br>The Volume Registration will not be 100% correct in every scenario. It is still the users' responsibility to verify the outcome of the tool and make corrections if needed.<br><br>**Internal company reference:** DRR003 |
| Recognized Text | **Caution:**<br><br>The recognized text is not always 100% correct. It is the responsibility of the radiologist to verify the correctness of the report before validation.<br><br>**Internal company reference:** DRR004 |
| Study information | **Warning:**<br><br>Changing study information on DeepUnity PACSonWEB is in most cases merely a temporary solution. The information must be changed in the PACS and RIS system. If not, it may occur that the initial information is synchronized and hereby restored.<br><br>**Internal company reference:** DRR005 |
| AI Results | **Caution:**<br><br>AI results might not always be 100% correct. When basing diagnoses or medical decisions on AI results, it is the responsibility for the radiologist to verify the outcome with the original series.<br><br>**Internal company reference:** DRR006 |


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### 1.3.3 Reporting of Serious Incidents

In the event that a product malfunction has caused or nearly caused serious harm to a patient, DH Healthcare must be informed immediately via the customer portal at https://my.dedalusportal.com/, and the incident must also be reported to the competent authority of the Member State where the user and or patient is located.

## 1.4 Product Complaints and Feedback

Any healthcare professional (e.g. a customer or user) who has any complaint or is dissatisfied with the quality, durability, functional safety, operational safety, effectiveness or performance of this product should report it to DH Healthcare, by telephone, fax or by writing to the following address:

Konrad-Zuse-Platz 1-3

53227 Bonn

Germany

Tel.: +49 228 266 800 0

Fax: +49 228 266 800 1

Further DH Healthcare contact information is listed on the following website:

https://www.dedalus.com

Unless otherwise agreed with the retailer, communication should be made via the DH Healthcare GmbH Customer Portal.

https://my.dedalusportal.com


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## 1.5 System Requirements

**Important!**

It is the responsibility of the user to ensure the following:

- **Monitor Quality:** The monitor quality, ambient light and used image compression corresponds to the intended clinical usage.
- **Browser Compatibility:** DeepUnity PACSonWEB must be used on a supported browser. Users must also verify browser compatibility in case of an upgrade of the browser or the operating system of the device that is used for running DeepUnity PACSonWEB.
- **Internet Connection:** A sufficiently performing internet connection
  - Viewing: 3G or higher, 0.5 Mb /sec or higher.
  - Downloading: 4G or higher, 15 Mb/sec or higher.
- **Network Connection:** A sufficiently performing network connection of 100 Mb LAN or higher, or for Wi-Fi 802.11 g or higher.

## Supported Browsers

### Supported browsers validated for diagnostic use:

- Google Chrome: version 119 and above
- Microsoft Edge: version 119 and above

### Supported browsers for non-diagnostic use:

- Google Chrome: version 119 and above
- Microsoft Edge: version 119 and above
- Safari: version 17.4 and above
- Firefox: version 121 and above

**Restriction:**

Using browsers or browser versions not listed above is not recommended, as they may result in disabled features or decreased performance.


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# General

2

For how to change the language for the DeepUnity PACSonWEB interface, see:

- The interface language (Page 33)

If you want to use DeepUnity PACSonWEB, you need to agree with the applicable general conditions:

- General Conditions - Registered user (Page 25)
- General Conditions - Patient (Page 19)

## 2.1 General Conditions - Patient

These General Terms and Conditions for Use (hereinafter called the “Terms”) govern the contractual relationship between (1) DH Healthcare GmbH, with its registered office at Konrad-Zuse-Platz 1-3, Germany, company registration number 0745.461.727 (hereinafter called “DH Healthcare GmbH”) and (2) the person who uses DeepUnity PACSonWEB via a reference number (hereinafter called the “User”).

The User has read and taken cognisance of the Terms’ contents and in using DeepUnity PACSonWEB, explicitly accepts their application. If the User does not agree to these Terms, please do not use DeepUnity PACSonWEB.

Where appropriate, DH Healthcare GmbH may make changes to the Terms at its sole discretion. If DH Healthcare GmbH makes any substantive changes to the Terms, the User will be provided with clear notification in advance, as appropriate to the circumstances. Continued use of DeepUnity PACSonWEB by the User after he/she has received such notification will be regarded as explicit acceptance of the changes. Accordingly, the User should read such notification carefully. If the User does not agree to the changes, please do not continue to use DeepUnity PACSonWEB.

## 1. Responsibilities and limited guarantee

1.1. DH Healthcare GmbH will use its reasonable endeavours to ensure that the User can make regular use of DeepUnity PACSonWEB to consult medical images and/or reports for reference purposes. Reports will only be accessible if, and insofar as, the


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transmitting radiology department has decided that the User may have access to same.

1.2. The User is aware that DeepUnity PACSonWEB is a system for providing medical data to external parties and exchanging such data in a safe environment, and that DH Healthcare GmbH is solely responsible for the good technical execution of this in accordance with the highest standards. This means that, among other things, DH Healthcare GmbH is not responsible for the medical data that are processed by the healthcare facility or organisation and/or the Users on DeepUnity PACSonWEB.

1.3. DH Healthcare GmbH cannot guarantee that DeepUnity PACSonWEB (including access thereto, its use and/or the services provided) are completely free of bugs, errors and technical faults or that its use is at all times guaranteed. For instance, DeepUnity PACSonWEB's availability and services may be disrupted at any time in full or in part for maintenance and other purposes. DH Healthcare GmbH reserves the right to temporarily or permanently change or discontinue DeepUnity PACSonWEB's functions and/or features at periodic intervals and at any time, with or without notice, without any liability towards the User, in the event of any interruption, change or discontinuation of DeepUnity PACSonWEB or any function or feature of DeepUnity PACSonWEB.

1.4. Furthermore, certain technical difficulties may result in temporary interruptions from time to time. Under no circumstances shall DH Healthcare GmbH be held liable where the regular service is disrupted due to technical faults or malfunctions in the network which are beyond the control of DH Healthcare GmbH or which ensue as a consequence of the evolution of systems, technologies, etc.

1.5. The User is solely responsible for the selection, costs and maintenance of the IT infrastructure on which DeepUnity PACSonWEB is used, and hereby acknowledges that how many details and what information can be obtained from the available images, among other things, depends on the quality of the monitor and the reproduction equipment.

## 2. Security, identification and access to data

2.1. DH Healthcare GmbH will make the required effort to provide adjusted security and identification methods for access to and use of DeepUnity PACSonWEB in a secure environment.

2.2. The User will receive access to DeepUnity PACSonWEB through a reference number and his date of birth, which the User will receive from DH Healthcare GmbH or the responsible healthcare facility or organisation. The person who grants the User access to DeepUnity PACSonWEB will bear the risks associated with transmitting data to the User.

2.3. Login details (i.e. reference number combined with the date of birth) are strictly personal and non-transferable, and the User must keep this information strictly confidential. Once received, the User is obliged to treat the data with care. The User is solely responsible for authorised or unauthorised use of the information, including


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each instance of use by third parties. In the event of a breach or suspected breach of this paragraph, DH Healthcare GmbH shall be at liberty to take all necessary measures to block or to delete data, to block the User's access and/or to suspend or terminate the licence without the User having any right to compensation.

2.4. If the User obtains knowledge of the loss or unauthorised use of his/her reference number by third parties or suspects such loss or unauthorised use, then he/she must immediately report this to DH Healthcare GmbH through the help desk. DH Healthcare GmbH will take all necessary and reasonable measures as quickly as possible, and will block the User's account, if necessary.

2.5. The responsible healthcare facility or organisation and/or the User are solely responsible for granting access rights to the medical data to the correct Users, in accordance with the methods that DeepUnity PACSonWEB foresees for this.

## 3. Use of DeepUnity PACSonWEB

3.1. DeepUnity PACSonWEB is a web-based solution for the distribution and display of medical images and, where appropriate, reports via the Internet for requesting doctors, patients and between hospitals.

As a distribution medium, DeepUnity PACSonWEB's purpose is to make medical images and reports from the associated hospitals and radiology departments available to the requesting doctors via the Internet.

The images are also made available to patients for reference purposes. The transmitting radiology department decides whether the patient has access to the report or not

Within the scope of the use of DeepUnity PACSonWEB, the User is obligated:

- being logged in with a reference number combined with the date of birth;
- not to use DeepUnity PACSonWEB for diagnostic or illegal purposes or conduct that is objectionable in any other way, either in an illegal or threatening manner or in a manner that is dangerous for DeepUnity PACSonWEB, DH Healthcare GmbH or third parties;
- not to use DeepUnity PACSonWEB to process content that (i) is illegal, fraudulent, threatening or harmful or that is objectionable in any other way, (ii) he/she is not authorised to process according to applicable regulations or stemming from contractual relationships, or (iii) violates the rights of a third party, including but not limited to the right to protect one's privacy;
- not to use or disclose any resources, software or routines that could harm or place an excessive burden on the accessibility, security or proper functioning of DeepUnity PACSonWEB.
- Copying, redistributing, leasing, selling, transferring, assigning, reverse-engineering or decompiling DeepUnity PACSonWEB, or any part of DeepUnity PACSonWEB, in any way including all other uses of DeepUnity PACSonWEB or its


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content by any other means are expressly prohibited under the Terms or pursuant to the applicable legislation, as are any other breaches of the intellectual property rights associated with DeepUnity PACSonWEB or any part thereof.

- No attempt may be made to access restricted or screened-off parts of DeepUnity PACSonWEB to which the User has not been explicitly granted access.

3.2. In the event of a violation or suspected violation of section 3.1, DH Healthcare GmbH will be entitled to take all necessary measures, block or delete data, block the User's access and/or suspend or cancel the User's licence, without the User being entitled to any compensation for damages.

3.3. Demographic or other details may be incorrect or incomplete if incorrectly entered by the responsible healthcare facility or organisation, resulting in incorrect reproduction and/or mismatching. This is beyond the control of DH Healthcare GmbH and under no circumstances can it be held liable as a result of such errors.

3.4. The DeepUnity PACSonWEB user manual is provided in electronic format and can be consulted on https://secure.pacsonweb.com/.

## 4. Liabilities

4.1. Insofar and to the extent that is permitted under the applicable legislation, DH Healthcare GmbH' liability for any direct damage arising from the User's use of DeepUnity PACSonWEB will not exceed EUR 1,000 per incident, regardless of whether DH Healthcare GmbH' liability arises from contractual provisions, an unlawful act (including negligence or failure to observe a statutory duty) or any other cause. Under no circumstances (save in the case of deception or deliberate error), shall DH Healthcare GmbH be liable in respect of any indirect, unforeseen or immaterial damage, including loss of profit, damage to [public] image, loss of data, loss of information, loss of turnover, loss of customers, damage suffered by third parties and/or interruption of the User's operations.

4.2. The User accepts that if one of the User's actions, performed deliberately or due to negligence and in breach of these Terms, disrupts the operation of DeepUnity PACSonWEB or damages DeepUnity PACSonWEB, the User fully shall reimburse DH Healthcare GmbH for all costs incurred in repairing the affected systems and for all losses, both directly and indirectly (including, but not limited to, loss of profit, loss of turnover, loss of customers and loss of goodwill) that DH Healthcare GmbH may incur as a consequence of such actions; the User should at least indemnify DH Healthcare GmbH for and against all losses, costs and any compensation claims of any kind ensuing from such actions.

4.3. DH Healthcare GmbH cannot be held liable for any failure or delay in the fulfilment of its obligations to the User where such failure can be attributed directly or indirectly to circumstances beyond DH Healthcare GmbH' control and over which DH Healthcare GmbH cannot reasonably be expected to have any control ("Force Majeure"), including but not limited to strikes, power cuts, power failures or


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downtime caused by the energy supplier, the energy grid or the external infrastructure, attacks by hackers, viruses, riots, uprisings, terrorist attacks, war, fires, flooding, storm, explosions, earthquakes, natural disasters, government measures, employment circumstances or any other cause which may reasonably be beyond the control of DH Healthcare GmbH.

## 5. Intellectual property rights

5.1. The User acknowledges and accepts that DeepUnity PACSonWEB, including its software, is protected by intellectual and industrial property rights (including but not limited to copyright, trademarks, etc.), of which DH Healthcare GmbH or its suppliers are the proprietor(s). The User recognises these property rights of DH Healthcare GmbH and/or DH Healthcare GmbH' licensors and acknowledges that the User does not acquire any intellectual or industrial property rights pertaining to the trademark, the software and/or DeepUnity PACSonWEB.

5.2. The User only acquires a personal, revocable, non-transferable and non-exclusive right to use DeepUnity PACSonWEB in accordance with the purposes set forth in the Terms and on www.pacsonweb.com.

5.3. Nothing in these Terms prohibits DH Healthcare GmbH and/or DH Healthcare GmbH' licensors from using, further developing, marketing, sublicensing or otherwise licensing DeepUnity PACSonWEB or making any part thereof available, including its content, anywhere in the world, in any way. Neither shall these Terms be interpreted as the granting of certain rights to the User, either to DeepUnity PACSonWEB or to any other existing or future platform of DH Healthcare GmbH or its licensors, whether or not comparable to DeepUnity PACSonWEB.

## 6. Term and termination

This agreement between DH Healthcare GmbH and the User is concluded for the period during which the User makes use of DeepUnity PACSonWEB. DH Healthcare GmbH may suspend the User's access to DeepUnity PACSonWEB at any time, including in the event of actual or suspected unauthorised use by the User of DeepUnity PACSonWEB and/or its content, or non-compliance with the Terms. If the User or DH Healthcare GmbH terminates the agreement, or if DH Healthcare GmbH suspends the User's access to DeepUnity PACSonWEB, the User agrees that DH Healthcare GmbH will have no liability or responsibility towards the User and that DH Healthcare GmbH will not be required to pay any compensation.

## 7. Applicable law and the competent court

These Terms are governed by Belgian law. In the event of a dispute regarding the Terms, only the courts in the division of Antwerp in Belgium have exclusive jurisdiction, or if the User is a consumer, the court in the User's domicile.


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## 8. Concluding provisions

8.1. DH Healthcare GmbH shall implement appropriate technical and organisational measures to protect the personal data of Users against unauthorised or unlawful processing and against (accidental) loss or damage.

DH Healthcare GmbH complies with the legislation and regulations governing the protection of personal data, including:

| Country | Data Privacy Regulation |
|---|---|
| EEA | Regulation (EU) 2016/679 of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) |
| Argentina | Ley de Protección de Datos Personales N° 25.326 (LPD) y Decreto reglamentario n° 1558/2001 |
| Brazil | Lei General de Proteção de Dados Pessoais (LGPD) n° 13.709/2018 |
| Chile | Ley N° 19.628, sobre la protección de la vida privada (“LPVP”) |
| Colombia | Ley Estatutaria 1581 de 2012 de Protección de Datos |
| Costa Rica | Ley de Protección de la Persona frente al Tratamiento de sus Datos Personales N° 8968 y Reglamento a la Ley de Protección de Datos N° 37554-JP |
| El Salvador | Decreto N° 144 de 2024 – Ley para la Protección de Datos Personales |
| Mexico | Ley Federal de Protección de Datos Personales en Posesión de los Particulares (LFPDPPP) de 5 de julio de 2010 |
| Nicaragua | Ley N° 787 de Protección de Datos Personales |


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| Country | Data Privacy Regulation |
|---|---|
| Panama | Ley N° 81 Sobre Protección de Datos 26 de marzo de 2019 y su Reglamento, Decreto Ejecutivo 285 del 28 de mayo de 2021 |
| Peru | Ley N° 29733 de Protección de Datos Personales (“LPDP”) y Decreto Supremo 003-2013-JUS |
| Switzerland | Federal Act on Data Protection 2020 (FADP) |

8.2. The voidness or invalidity of any provision of these Terms, or any part thereof, will not result in the voidness or invalidity of the entire Terms. Should any provision in these Terms be deemed void or invalid, the provision in question shall be replaced ipso jure by a valid provision, or a valid part, that is as close as possible to the original intention of DH Healthcare GmbH. The inability to effect such a desired replacement will in no way affect the validity of the remaining provisions. Should any provision in these Terms be declared invalid or non-enforceable, the remaining provisions of these Terms will continue to apply and be enforceable.

*"By using DeepUnity PACSonWEB, I acknowledge that I have taken note of the DeepUnity PACSonWEB Conditions of use, which set forth obligations for the user and limit the liability of the DeepUnity PACSonWEB supplier, and I declare that I agree to these Conditions."*

## 2.2 General Conditions - Registered user

## DISCLAIMER

DH Healthcare GmbH is not liable for malfunctions and damage stemming from installation, configuration, relocation, remodeling, maintenance and repair performed by parties other than DH Healthcare GmbH or authorised personnel of DH Healthcare GmbH.

DH Healthcare GmbH is not liable for malfunctions and damage to DH Healthcare GmbH products that are/is attributable to products of other manufacturers that were not supplied by DH Healthcare GmbH.

DH Healthcare GmbH is not liable for malfunctions and damage due to non-compliance with the precautionary measures and operational methods specified in this user manual.

DH Healthcare GmbH is not liable for malfunctions and damage stemming from use of the product under ambient conditions which are outside the scope of the terms of use specified in this user manual, such as power supply, installation environment, etc.


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These General Terms and Conditions for Use (hereinafter called the “Terms”) govern the contractual relationship between (1) DH Healthcare GmbH, with its registered office at Konrad-Zuse-Platz 1-3, Germany, company registration number 0745.461.727 (hereinafter called “DH Healthcare GmbH”) and (2) the person who uses DeepUnity PACSonWEB via a registered account (hereinafter called the “User”).

The User has read and taken cognisance of the Terms’ contents and in using DeepUnity PACSonWEB, explicitly accepts their application. If the User does not agree to these Terms, please do not use DeepUnity PACSonWEB.

Where appropriate, DH Healthcare GmbH may make changes to the Terms at its sole discretion. If DH Healthcare GmbH makes any substantive changes to the Terms, the User will be provided with clear notification in advance, as appropriate to the circumstances. Continued use of DeepUnity PACSonWEB by the User after he/she has received such notification will be regarded as explicit acceptance of the changes. Accordingly, the User should read such notification carefully. If the User does not agree to the changes, please do not continue to use DeepUnity PACSonWEB.

## 1. Responsibilities and limited guarantee

1.1. DH Healthcare GmbH shall make every effort, within reason, to ensure that the User of DeepUnity PACSonWEB can make regular use of the services and/or functionalities outlined on www.pacsonweb.com.

1.2. DeepUnity PACSonWEB is an aid for the presentation of images and reports for patients and doctors, exchanging studies, etc. The User is and remains responsible for the results derived from or achieved with this resource. Insofar as permissible by law, any guarantee covering the suitability for a certain use or purpose is expressly excluded.

1.3. The User is aware that DeepUnity PACSonWEB is a system for providing medical data to external parties and exchanging such data in a safe environment, and that DH Healthcare GmbH is solely responsible for the good technical execution of this in accordance with the highest standards. This means that, among other things, DH Healthcare GmbH is not responsible for the medical data that are processed by the healthcare facility or organisation and/or the Users on DeepUnity PACSonWEB.

1.4. DH Healthcare GmbH cannot guarantee that DeepUnity PACSonWEB (including access thereto, its use and/or the services provided) are completely free of bugs, errors and technical faults or that its use is at all times guaranteed. For instance, DeepUnity PACSonWEB’s availability and services may be disrupted at any time in full or in part for maintenance and other purposes. DH Healthcare GmbH reserves the right to temporarily or permanently change or discontinue DeepUnity PACSonWEB’s functions and/or features at periodic intervals and at any time, with or without notice, without any liability towards the User, in the event of any interruption, change or discontinuation of DeepUnity PACSonWEB or any function or feature of DeepUnity PACSonWEB.


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1.5. Furthermore, certain technical difficulties may result in temporary interruptions from time to time. Under no circumstances shall DH Healthcare GmbH be held liable where the regular service is disrupted due to technical faults or malfunctions in the network which are beyond the control of DH Healthcare GmbH or which ensue as a consequence of the evolution of systems, technologies, etc.

1.6. The User is solely responsible for the selection, costs and maintenance of the IT infrastructure on which DeepUnity PACSonWEB is used, and hereby acknowledges that how many details and what information can be obtained from the available images, among other things, depends on the quality of the monitor and the reproduction equipment.

## 2. Security, identification and access to data

2.1. DH Healthcare GmbH will make the required effort to provide adjusted security and identification methods for access to and use of DeepUnity PACSonWEB in a secure environment.

2.2. The User will receive access to DeepUnity PACSonWEB through an account which the User will receive from DH Healthcare GmbH or the responsible healthcare facility or organisation. The person who grants the User access to DeepUnity PACSonWEB will bear the risks associated with transmitting data to the User.

2.3. The account information is strictly personal and non-transferable, and the User must keep this information strictly confidential. Once received, the User is obliged to treat the data with care. The User is solely responsible for authorised or unauthorised use of the information, including each instance of use by third parties. In the event of a breach or suspected breach of this paragraph, DH Healthcare GmbH shall be at liberty to take all necessary measures to block or to delete data, to block the User's access and/or to suspend or terminate the licence without the User having any right to compensation.

2.4. If the User obtains knowledge of the loss or unauthorised use of his/her account by third parties or suspects such loss or unauthorised use, then he/she must immediately report this to DH Healthcare GmbH through the help desk. DH Healthcare GmbH will take all necessary and reasonable measures as quickly as possible, and will block the User's account, if necessary.

2.5. The responsible healthcare facility or organisation and/or the User are solely responsible for granting access rights to the medical data to the correct Users, in accordance with the methods that DeepUnity PACSonWEB foresees for this.

## 3. Use of DeepUnity PACSonWEB

3.1. DeepUnity PACSonWEB is a web based solution intended for the distribution and visualization of medical images and reports over the internet to requesting physicians and patients and among hospitals.


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The embedded viewer contains optimisation tools for reproducing images (window levelling, inversion, spatial locator, reference lines, … ) and measuring functionality (linear measurement, angle gauge, vertical height gauge, …) that makes DeepUnity PACSonWEB suitable for use as an aid for diagnoses or as a tool for drawing up diagnoses.

As a distribution medium, DeepUnity PACSonWEB is used to make medical images and reports, made at a hospital or private radiologist, available to the requesting physician over the internet. The images are also available for reference to the patient. It is the decision of the radiology department of the hospital or the private radiologist if the report is also available to the patient or not. Using the related reference codes, owned by the patient, the exam and report can easily be consulted by any physician that has a DeepUnity PACSonWEB account. The images are available online for a period between 1 and 5 years, as determined by the sending radiology department.

As a diagnostic tool, DeepUnity PACSonWEB can be used by a radiologist to visualize and enhance available images and perform measurements in order to make a diagnosis.

The report can be recorded within DeepUnity PACSonWEB. Within the scope of the use of DeepUnity PACSonWEB, the User is obligated:

- to be logged on to DeepUnity PACSonWEB as a registered user when using DeepUnity PACSonWEB for diagnostic purposes;
- not to use DeepUnity PACSonWEB as an archive. the User or the responsible healthcare facility or organisation must archive the data on another system;
- not to use DeepUnity PACSonWEB for illegal purposes or conduct that is objectionable in any other way, either in an illegal or threatening manner or in a manner that is dangerous for DeepUnity PACSonWEB, DH Healthcare GmbH or third parties;
- not to use DeepUnity PACSonWEB to process content that (i) is illegal, fraudulent, threatening or harmful or that is objectionable in any other way, (ii) he/she is not authorised to process according to applicable regulations or stemming from contractual relationships, or (iii) violates the rights of a third party, including but not limited to the right to protect one’s privacy;
- not to use or disclose any resources, software or routines that could harm or place an excessive burden on the accessibility, security or proper functioning of DeepUnity PACSonWEB.
- Copying, redistributing, leasing, selling, transferring, assigning, reverse-engineering or decompiling DeepUnity PACSonWEB, or any part of DeepUnity PACSonWEB, in any way including all other uses of DeepUnity PACSonWEB or its content by any other means are expressly prohibited under the Terms or pursuant to the applicable legislation, as are any other breaches of the intellectual property rights associated with DeepUnity PACSonWEB or any part thereof.


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- No attempt may be made to access restricted or screened-off parts of DeepUnity PACSonWEB to which the User has not been explicitly granted access.

3.2. In the event of a violation or suspected violation of section 3.1, DH Healthcare GmbH will be entitled to take all necessary measures, block or delete data, block the User's access and/or suspend or cancel the User's licence, without the User being entitled to any compensation for damages.

3.3. Special care must be taken when decisions about patients are made based on the demographic data and other patient information available in DeepUnity PACSonWEB. Demographic or other details may be incorrect or incomplete if incorrectly entered by the responsible healthcare facility or organisation, resulting in incorrect reproduction and/or mismatching. This is beyond the control of DH Healthcare GmbH and under no circumstances can it be held liable as a result of such errors.

3.4. The DeepUnity PACSonWEB user manual is provided in electronic format and can be consulted on https://secure.pacsonweb.com/Manuals.A registered user can request a paper copy of the manual with the service desk of DH Healthcare GmbH. The company will use its reasonable endeavours to deliver this within 7 days.

3.5. The use of DeepUnity PACSonWEB is subject to the health care and patient act and its rules of confidentiality. All patient images are considered as health data and should be used solely for diagnostic and/or treatment purposes within the framework of health legislation. Misuse of the images may be linked to civil and criminal liability. If you choose to download images from DeepUnity PACSonWEB locally, make sure that your treatment of the image complies with current applicable health legislation, as well as the "norm for information security, health and care services" from the Directorate of Health or other competent local regulations. You are responsible for the image being further processed and used in accordance with applicable health and privacy legislation. Be aware that the images are copyrighted and belong to the institution where such images were taken (e.g. the hospital or private radiologist or their licensors).

## 4. Liabilities

4.1. Insofar and to the extent that is permitted under the applicable legislation, DH Healthcare GmbH' liability for any direct damage arising from the User's use of DeepUnity PACSonWEB will not exceed EUR 1,000 per incident, regardless of whether DH Healthcare GmbH liability arises from contractual provisions, an unlawful act (including negligence or failure to observe a statutory duty) or any other cause. Under no circumstances (save in the case of deception or deliberate error), shall DH Healthcare GmbH be liable in respect of any indirect, unforeseen or immaterial damage, including loss of profit, damage to [public] image, loss of data, loss of information, loss of turnover, loss of customers, damage suffered by third parties and/or interruption of the User's operations.


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4.2. The User accepts that if one of the User's actions, performed deliberately or due to negligence and in breach of these Terms, disrupts the operation of DeepUnity PACSonWEB or damages DeepUnity PACSonWEB, the User fully shall reimburse DH Healthcare GmbH for all costs incurred in repairing the affected systems and for all losses, both directly and indirectly (including, but not limited to, loss of profit, loss of turnover, loss of customers and loss of goodwill) that DH Healthcare GmbH may incur as a consequence of such actions; the User should at least indemnify DH Healthcare GmbH for and against all losses, costs and any compensation claims of any kind ensuing from such actions.

4.3. DH Healthcare GmbH cannot be held liable for any failure or delay in the fulfilment of its obligations to the User where such failure can be attributed directly or indirectly to circumstances beyond DH Healthcare GmbH' control and over which DH Healthcare GmbH cannot reasonably be expected to have any control ("Force Majeure"), including but not limited to strikes, power cuts, power failures or downtime caused by the energy supplier, the energy grid or the external infrastructure, attacks by hackers, viruses, riots, uprisings, terrorist attacks, war, fires, flooding, storm, explosions, earthquakes, natural disasters, government measures, employment circumstances or any other cause which may reasonably be beyond the control of DH Healthcare GmbH.

## 5. Intellectual property rights

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5.3. Nothing in these Terms prohibits DH Healthcare GmbH and/or DH Healthcare GmbH' licensors from using, further developing, marketing, sublicensing or otherwise licensing DeepUnity PACSonWEB or making any part thereof available, including its content, anywhere in the world, in any way. Neither shall these Terms be interpreted as the granting of certain rights to the User, either to DeepUnity PACSonWEB or to any other existing or future platform of DH Healthcare GmbH or its licensors, whether or not comparable to DeepUnity PACSonWEB.

## 6. Term and termination

This agreement between DH Healthcare GmbH and the User is concluded for the period during which the User makes use of DeepUnity PACSonWEB. DH Healthcare


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GmbH may suspend the User's access to DeepUnity PACSonWEB at any time, including in the event of actual or suspected unauthorised use by the User of DeepUnity PACSonWEB and/or its content, or non-compliance with the Terms. If the User or DH Healthcare GmbH terminates the agreement, or if DH Healthcare GmbH suspends the User's access to DeepUnity PACSonWEB, the User agrees that DH Healthcare GmbH will have no liability or responsibility towards the User and that DH Healthcare GmbH will not be required to pay any compensation.

## 7. Applicable law and the competent court

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| Brazil | Lei General de Proteção de Dados Pessoais (LGPD) n° 13.709/2018 |
| Chile | Ley N° 19.628, sobre la protección de la vida privada ("LPVP") |
| Colombia | Ley Estatutaria 1581 de 2012 de Protección de Datos |


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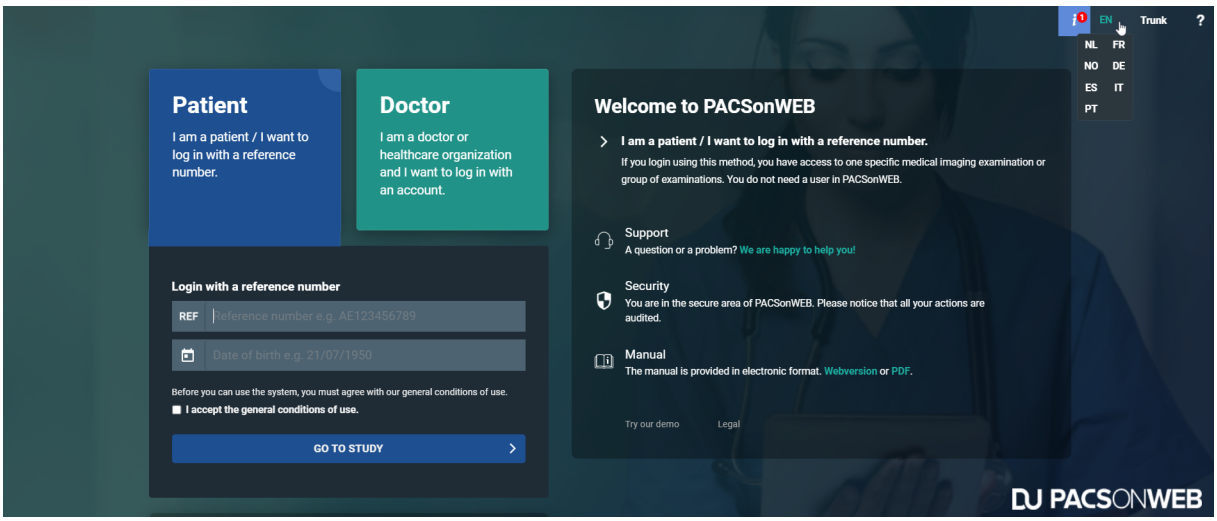
| Country | Data Privacy Regulation |
|---|---|
| Costa Rica | Ley de Protección de la Persona frente al Tratamiento de sus Datos Personales N° 8968 y Reglamento a la Ley de Protección de Datos N° 37554-JP |
| El Salvador | Decreto N° 144 de 2024 – Ley para la Protección de Datos Personales |
| Mexico | Ley Federal de Protección de Datos Personales en Posesión de los Particulares (LFPDPPP) de 5 de julio de 2010 |
| Nicaragua | Ley N° 787 de Protección de Datos Personales |
| Panama | Ley N° 81 Sobre Protección de Datos 26 de marzo de 2019 y su Reglamento, Decreto Ejecutivo 285 del 28 de mayo de 2021 |
| Peru | Ley N° 29733 de Protección de Datos Personales ("LPDP") y Decreto Supremo 003-2013-JUS |
| Switzerland | Federal Act on Data Protection 2020 (FADP) |

8.2. The voidness or invalidity of any provision of these Terms, or any part thereof, will not result in the voidness or invalidity of the entire Terms. Should any provision in these Terms be deemed void or invalid, the provision in question shall be replaced ipso jure by a valid provision, or a valid part, that is as close as possible to the original intention of DH Healthcare GmbH. The inability to effect such a desired replacement will in no way affect the validity of the remaining provisions. Should any provision in these Terms be declared invalid or non-enforceable, the remaining provisions of these Terms will continue to apply and be enforceable.

*"By using DeepUnity PACSonWEB, I acknowledge that I have taken note of the DeepUnity PACSonWEB Conditions of use, which set forth obligations for the user and limit the liability of the DeepUnity PACSonWEB supplier, and I declare that I agree to these Conditions."*


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## 2.3 The interface language




**Default Language:** On the first use, the DU POW interface displays in your browser's default language.

**Language Picker:** You can change the language at any time using the language picker, located at the top right of the menu toolbar.

From the language picker you can switch to any of the supported languages:

- English
- Dutch
- French
- German
- Italian
- Norwegian
- Portuguese
- Spanish

**Remembering Preferences**: The selected language is stored in a cookie so that your preference is remembered the next time you login to DeepUnity PACSonWEB from the same device.

**Clearing Cookies**: If cookies are cleared from your device, the selected language will revert to the browser's default language.


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## 2.4 Dates and Times in DeepUnity PACSonWEB

## About Dates and Times in DeepUnity PACSonWEB

**DeepUnity PACSonWEB** is an application in which dates and times are frequently used (study dates, logging dates, etc.). With a global user and customer base, all potentially in different time zones, we need to handle these dates and times carefully.

**As a user you will see all dates and times in your own time zone. You will also need to provide all dates and times in your own time zone.** Examples of these instances are:

- Displayed study dates and times in the viewer,
- study list,
- using filters in the study or worklist,
- entering dates and times in the study administration.

**The advantage** is that as a user you do not have to take into account time zone differences of studies or calculate the potential time differences yourself.

- All dates and times received by DeepUnity PACSonWEB from customers will be interpreted in that customer's time zone.
- All date and time data that we export back to any user or system will be interpreted that customer's time zone.

This means that if you have a study list containing studies from different time zones, studies from 1 minute ago in any of the time zones will all appear as the most recent.

**Two studies created at exactly the same time, in two different time zones will appear in DeepUnity PACSonWEB as shown in the table below.**

| Study created | Date and time in DeepUnity PACSonWEB |
|---|---|
| Study created in Sao Paulo on the 15th of January at 22:00 Local Sao Paulo time (UTC -3 hours) | Jan 15th 22:00 in Sao Paulo |
| Study created in Brussels on the16th of January at 02:00 local Brussels time (UTC + 1 hour), | Jan. 16th 02:00 in Brussels |

This principle applies to any date or time that is used in DeepUnity PACSonWEB, with a few exceptions:

- **Date of birth** will never be converted from and to any time zone.


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- **Raw DICOM tags shown in the DICOM tags dialog** will be shown as raw information and not converted (e.g. study date = "20240115" and study time ="2200" ), but the UTC offset will be added in the DICOM tags.


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# Register for an account

3

**Important!**

Belgian users can create an account by registration through e-ID or by requesting an account as described below.

Other countries have to contact the radiology service whose studies they wish to view.

**Important!**

DH Healthcare GmbH may only provide accounts to health care providers who are authorised to request a radiology study.

**Specifically:**

Eligible: GPs, specialists, dentists

**Not** eligible: physical therapists, osteopaths, nursing staff, patients (logging in is only possible by clicking on “I am a patient or health care provider who wants to log in with the reference number”).

**Tip:**

If you are working in a group practice, DeepUnity PACSonWEB offers the possibility to grant access automatically to all members of the group to all exams that have been requested by any of the members.

This is, however, only possible if all members of the group practice, have a personal DeepUnity PACSonWEB account.

The request to link different accounts into a group practice can be submitted to the service desk.


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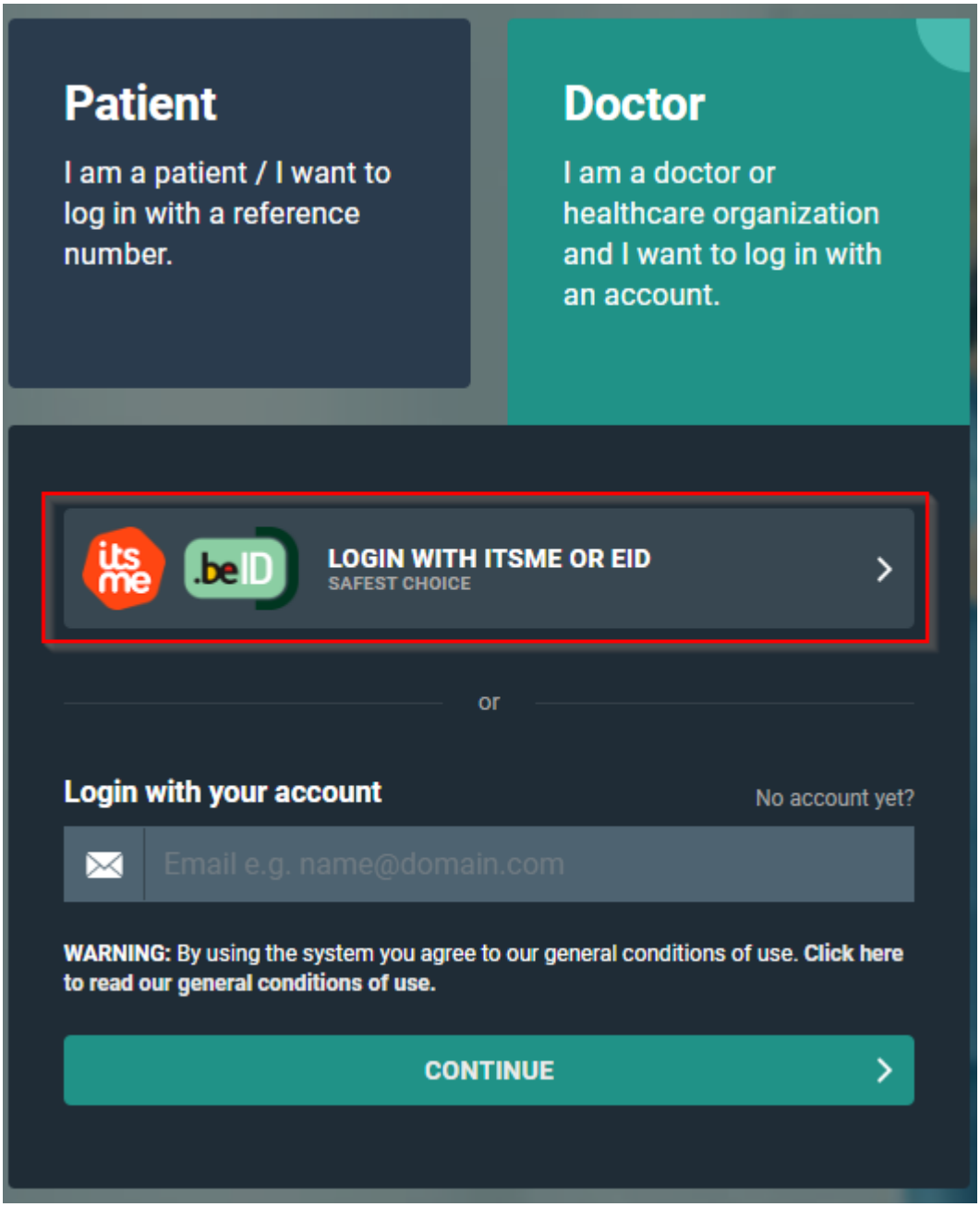
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## 3.1 Register through e-ID (BE only)

To create your account through e-ID, please visit the page https://secure.pacsonweb.com and follow the steps below.

## To create your account

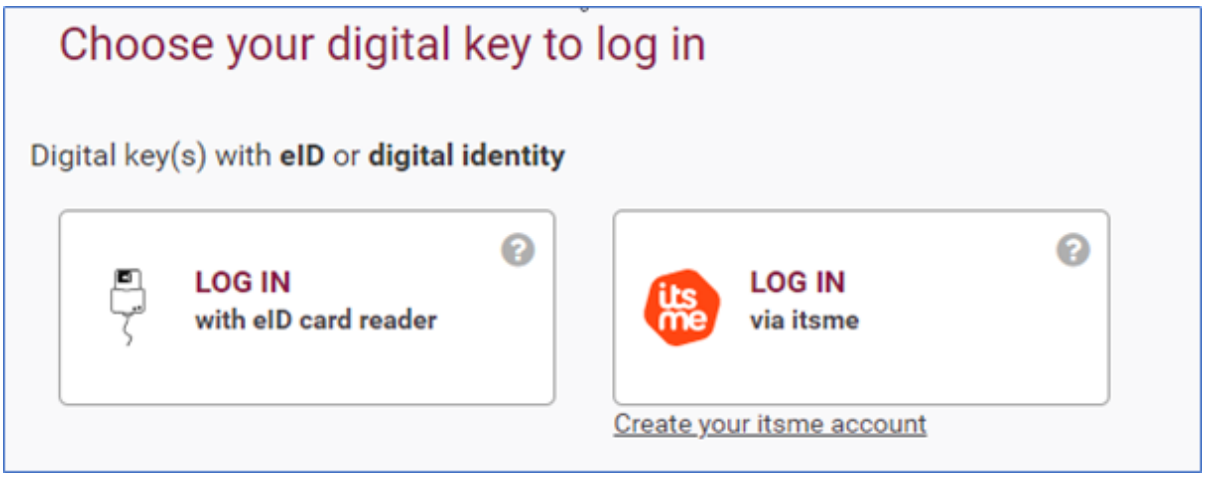
1. Click **I am a doctor or healthcare organization and I want to log in with an account.** Then click **Login with Itsme of eID**.



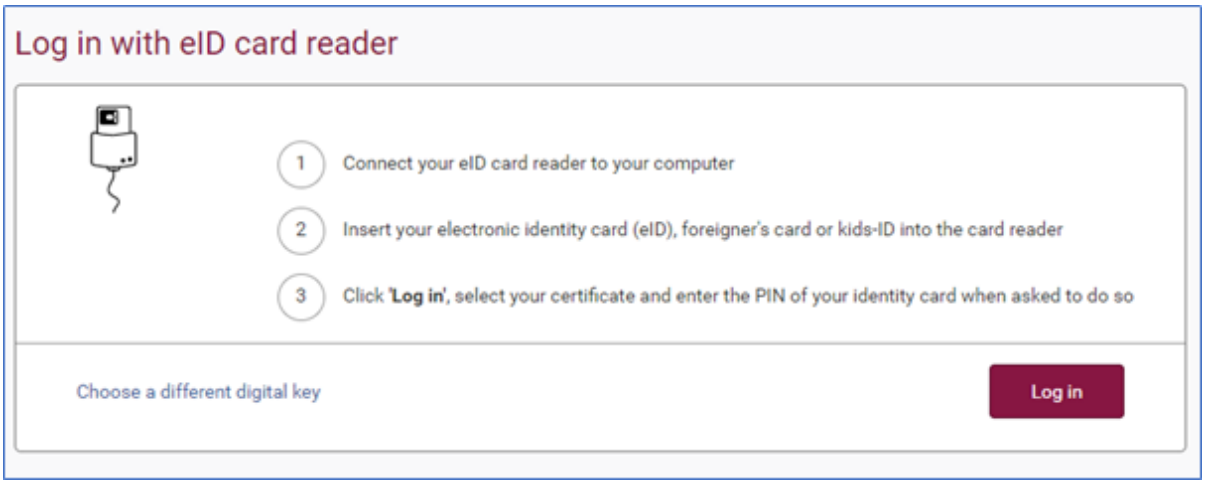


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2. On the next screen click **Log in with eID card reader**.




3. Follow the steps on the screen and click **Log in**.

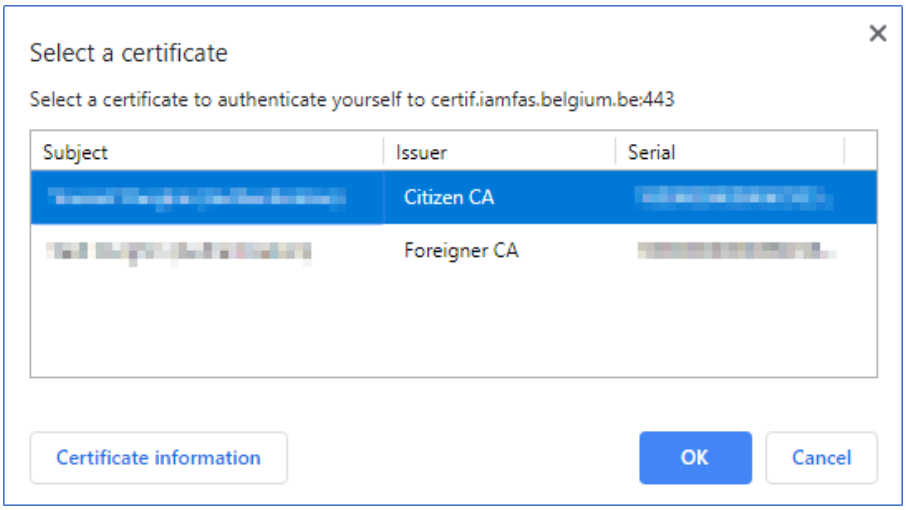



4. Select the certificate you want to log in with and click **OK**.

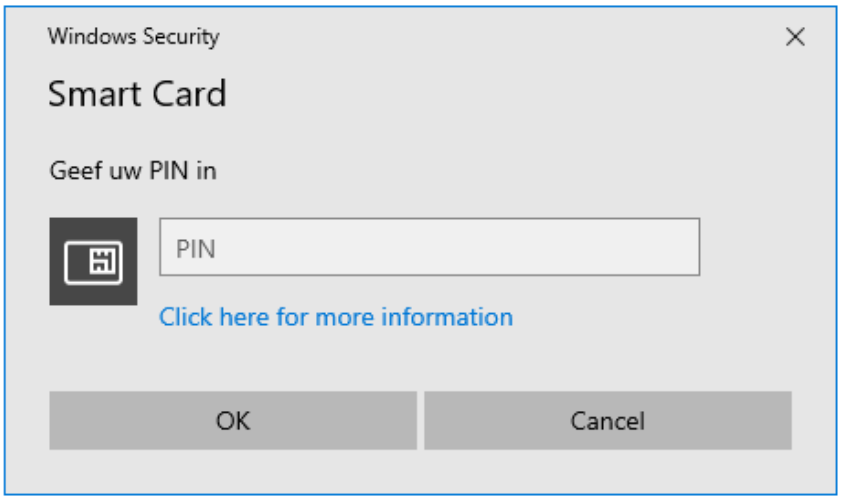
   Make sure that your electronic identity card is in your e-ID reader.

   Depending on the internet browser (Internet Explorer, Firefox, Chrome, etc.) you are using, the screenshot below may look slightly different.


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5. Enter the PIN for your certificate and click **OK**.



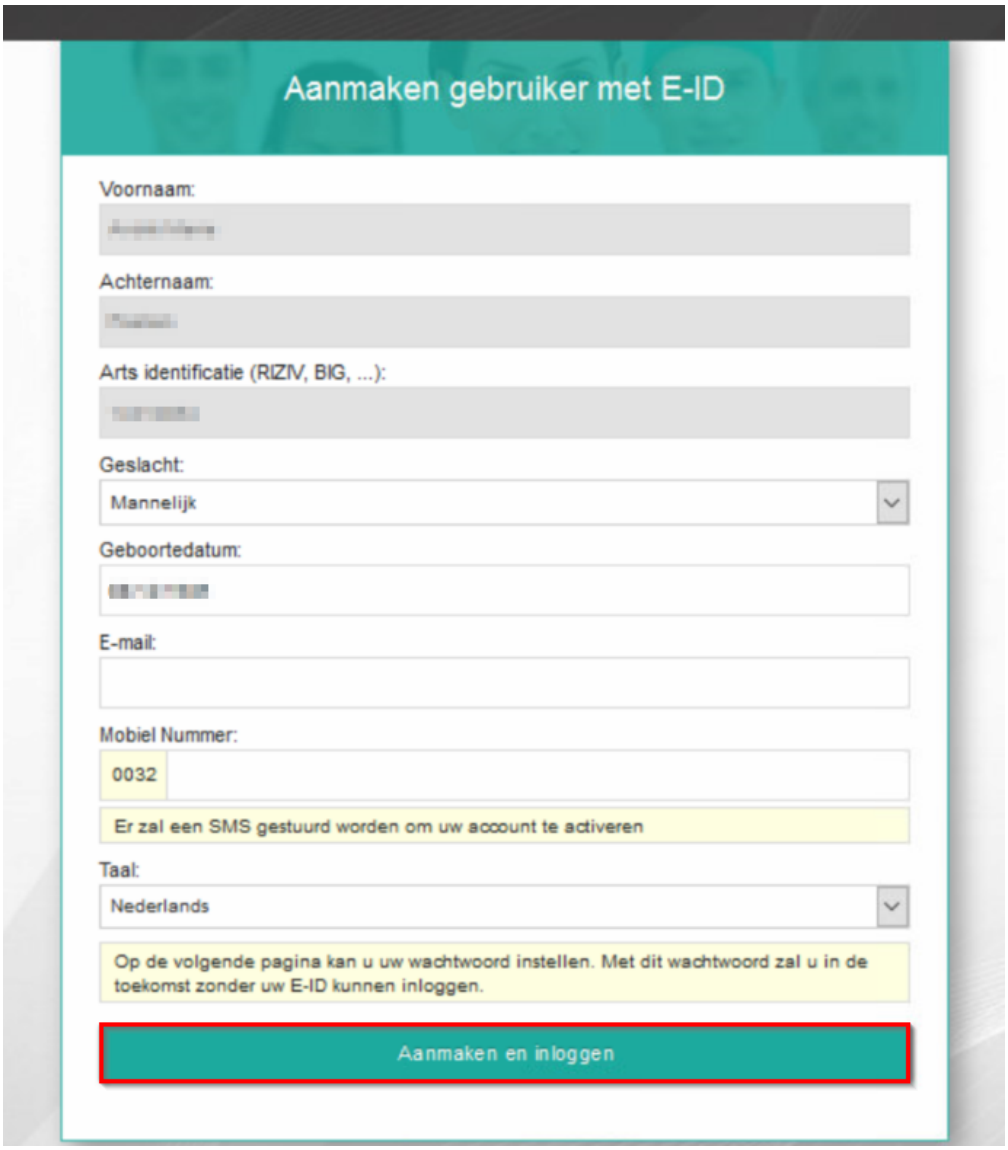

6. Verify your name, select the option to log in as a civilian ('burger') and click **Log in** ('Profiel bevestigen').


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7. After authentication, a screen is displayed to complete the account details for your user.
   a. Complete the form and click **Create and log in** ('Aanmaken en inloggen').
      All fields within this form are mandatory.


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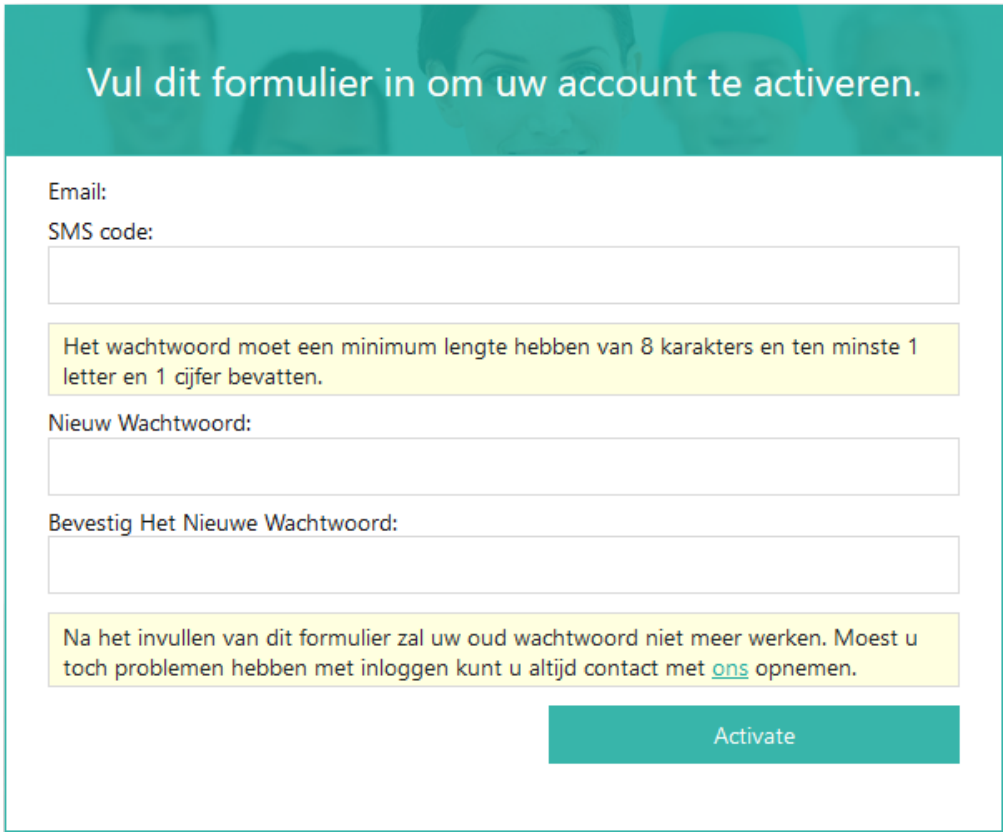



The creation of the account can take several minutes.

## To activate your account

After creating your account, the following screen will appear.


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You will receive a text message on the mobile number that was registered in the previous step.

1. Enter the code from the text message and choose and confirm a password of your choice.

   If an incorrect SMS code is entered, the password will not be changed. If an incorrect SMS code is entered five times, the account will be locked.

2. Click **Activate** to complete the creation and activation of your account.

**Important!**

The chosen password must be at least 8 characters long, containing at least 1 numeric and 1 alphabetic character.


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**Tip:**

**Log in with username and password**

After registering with eID you can also log in with your username and password.

- You username is the e-mail address that was used when creating the account (step 7)
- Your password is the password chosen when activating the account.

Once activated, the account is ready to use. You will be redirected to the login screen where you can log in using e-ID or your username and password.

For more information, see Logging in using your username and password (Page 52) & Logging in using an e-ID (BE only) (Page 56)

## 3.2 Request an account through the service desk

If you have no account for DeepUnity PACSonWEB yet, you can request an account through our service desk.

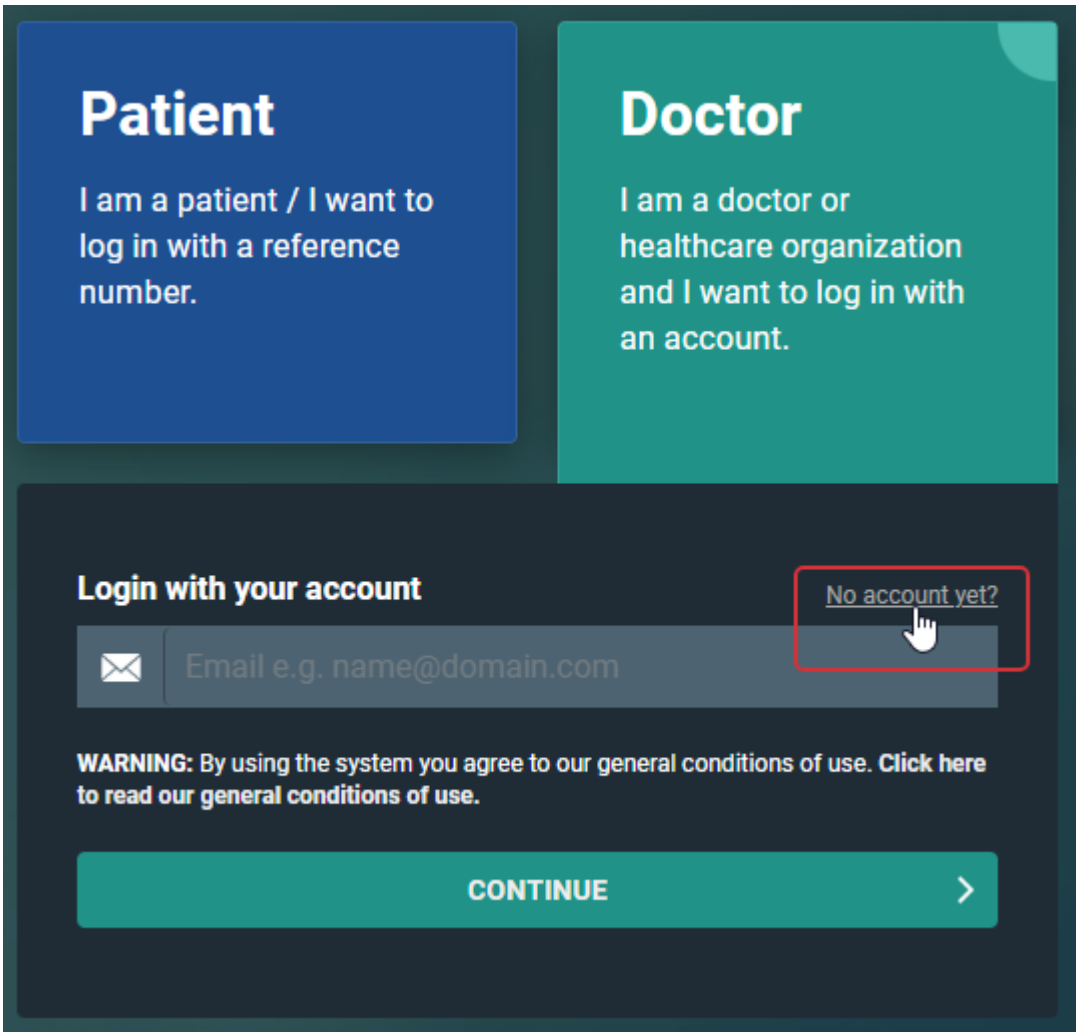
**Important!**

Account requests can only be made by medical professionals.

### To request an account

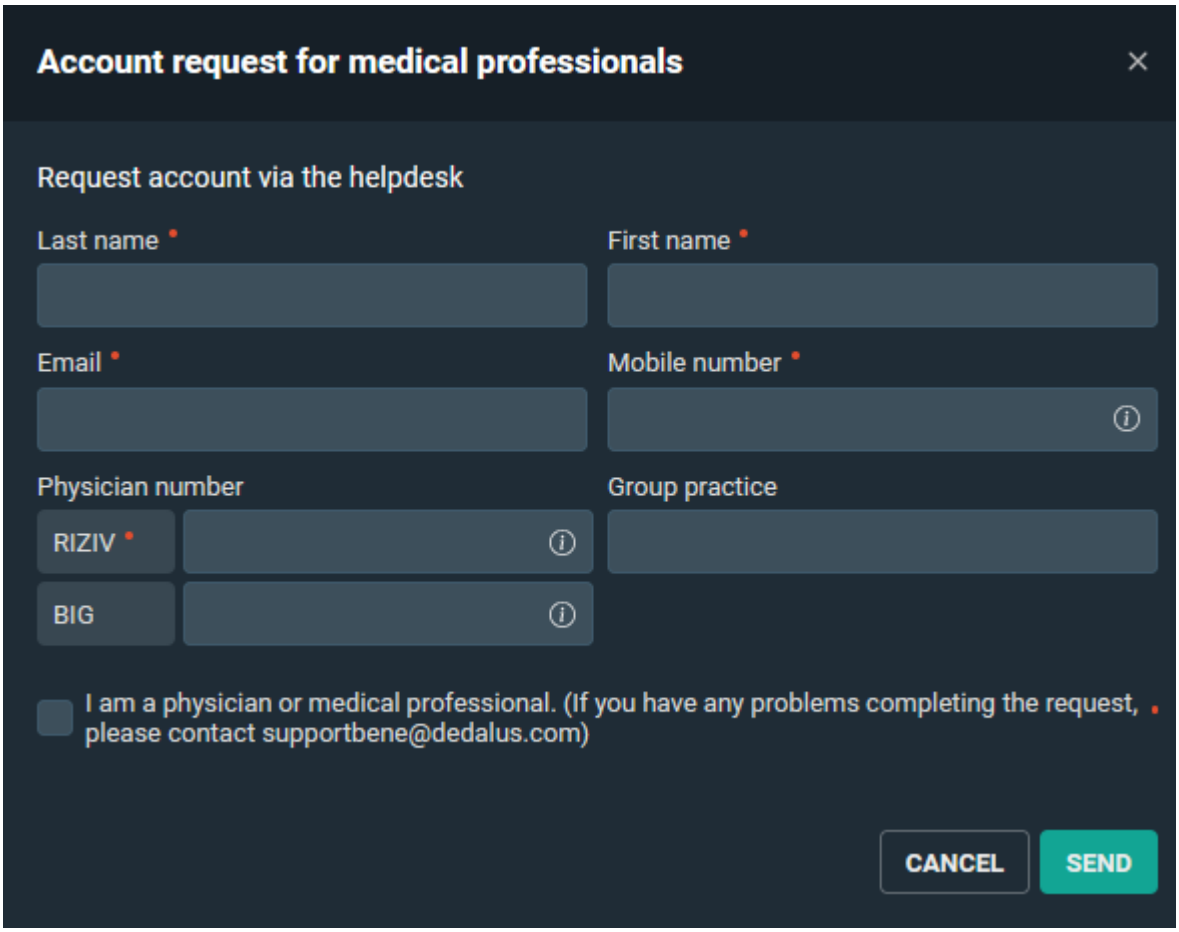
1. Click **I am a doctor or healthcare organization and I want to log in with an account**.
2. Click **No account yet?**


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3. Fill out the fields listed in the dialogue and click **SEND**.
   Fields marked with an asterisk * are mandatory.


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This will submit an account request to our service desk and you will be contacted as soon as possible by an employee of DH Healthcare GmbH to verify your account request.

**Note:**

As DeepUnity PACSonWEB provides access to sensitive information, the account cannot be granted until the request has been verified.

An account can also be requested by sending an email to the service desk with the following information:

- First and last name
- E-mail address
- Physician number (RIZIV / INSEE / HIN / UCGN / PNB)
- Mobile number
- The group practice to which you belong (optional)


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Such requests will be handled in a similar manner to those submitted via the web form detailed in the steps above.


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# Logging in

4

## Logging in

There are several ways to log in to DeepUnity PACSonWEB. You can log in:

- with a reference number (Page 51)
- with a username and password (Page 52)
- with e-ID (Page 56) (Belgium only)
- as a delegate (Page 58)
- through an active directory (Page 60)
- using EMR (Page 61)

**Patients**

Patients can log in using a code, their date of birth and optionally an OTP (One Time Password) or an SMS token after payment if required.

Patients will have access to the images of the request and the report, if the medical institution (hospital or radiologist) has given permission for this.

**Registered users**

Physicians, dentists and specialists can register for an account (Page 36) with DH Healthcare GmbH, after which they can log in with a username and password or through e-ID (Belgium only).

## Logging in with your own account

- After logging in with your own account, you will be taken to the study list/worklist with all the studies which you are authorised to view.
- Click on a study in the list to obtain access to all images and the report, if this is permitted by the medical institution (hospital or radiologist).


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## Group practices

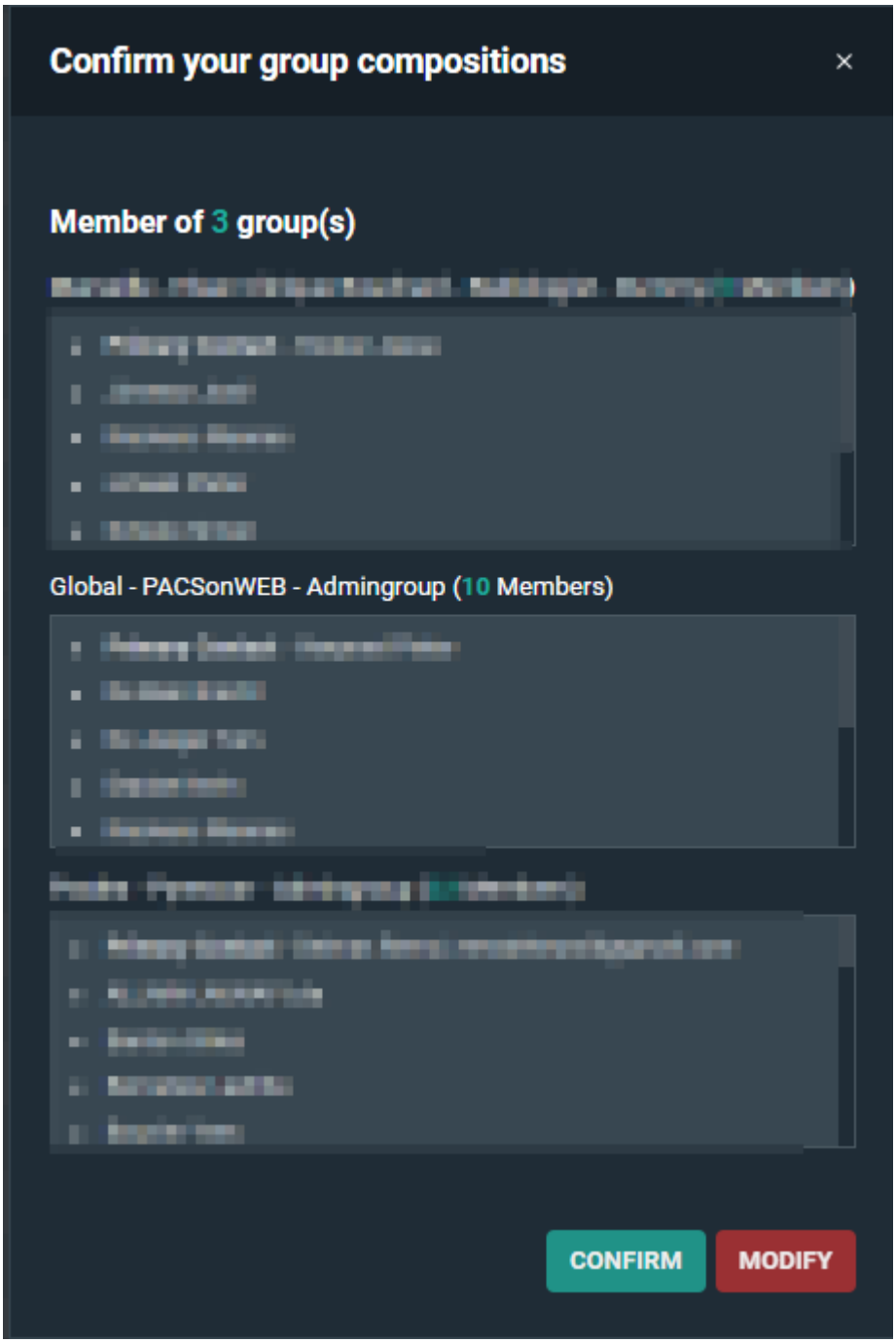
DeepUnity PACSonWEB supports group practices, allowing you to view your colleagues' studies.

If you are a member of one or more group practices, you will be prompted to confirm your group membership every 3 months.

- A pop-up dialog will appear, listing all the groups you are a member or administrator of.
- For each group, the current composition is displayed, with the primary contact at the top and all administrators in bold.
- If the group composition displayed no longer reflects the actual situation, you must report this to a group administrator or the DeepUnity PACSonWEB service desk for correction.
- To modify the composition of a group, see detailed explanation in My Groups (Page 116).


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## Your DU POW environment

As DeepUnity PACSonWEB is used in several countries, you may end up on the portal of another country's environment.

Your username or security code will not be known in that environment.


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- If you open a portal (e.g. http://secure.pacsonweb.com) but you are situated in another country, a pop-up dialog will ask you to choose your environment.
  - You can choose to be redirected to your country's portal or stay on the current portal.

    **Note:**

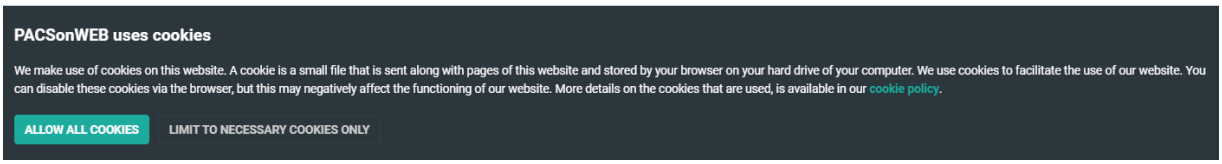
    Studies are only available on the country specific environment.

  - You can remember your choice by ticking the checkbox **Remember my chosen environment**.
- You can go back to the original environment via a menu in the upper left corner. You will have the following options:
  - Go back once
  - Go back and clear preferences

## Cookies

DeepUnity PACSonWEB uses cookies for tracking sessions.

We are legally obligated to display the warning below on a monthly basis.




## Web browser

**Important!**

**Internet Explorer 10 is no longer being supported.**

As of today, Internet Explorer 10 and earlier versions are no longer being supported.

Via DeepUnity PACSonWEB you will be taken to the appropriate websites to install a more recent browser.


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## 4.1 Logging in with a reference number

**Warning:**

It is **NOT** allowed to use DeepUnity PACSonWEB for diagnostic purposes in case you are connected with a reference number.

## Log in as a patient

To view your images as a patient,

1. go to the radiology website mentioned in the letter/e-mail containing your reference number.
2. Click the **Patient** box.
3. Enter your reference code and date of birth in the respective fields.
   a. You will find your reference code in the radiology letter/e-mail.
4. Click the **Go to the study** button.
   a. If your reference code gives access to an order with several exams, the first exam will be opened and the other exams are accessible through the Series picker (Page 176) and the History bar (Page 171).

**Important!**

You will only have access to the report if this is permitted by the radiology service.

If the combination of reference number and date of birth is registered in DeepUnity PACSonWEB but no report or images have been received yet, the message “Your results are not available yet, please try again later.” will be displayed.

## Unsuccessful login attempts

If you enter incorrect login data, an error message will appear alerting you that your login attempt was unsuccessful.

**Important!**

If you enter an incorrect combination several times, you will be blocked from further login attempts.


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## Authentication

Depending on the authentication method chosen by the radiology service, your study will either be displayed for viewing or you will be redirected to one of the following two pages:

1. **One-Time-Password required**

   If the **Extra security: Enter One-Time-Password** page is displayed, enter the OTP (One Time Password) that you received either through e-mail or SMS.

   Once you've entered the OTP and clicked **Continue**, you will obtain access to your images as well as the report.

2. **Payment required**

   If the radiology service requires payment for the study before allowing access, you will need to validate your mobile number first.

   The pop-up displays the study date, the hospital where the study was carried out, and the (partially masked) mobile number that was registered at the hospital for the related patient.

   - If the mobile phone number is incorrect, click **No**.
     - A pop-up will appear with the details of the radiology department you can contact to have your mobile phone number corrected.
   - If the mobile phone number is correct, click **Yes**.
     - A pop-up will appear where you can choose your preferred payment method.

After the payment has been processed successfully, you will receive an SMS Token which you need to access your exam.

Once a study has been paid for, you have access to the exam at any time by entering the same reference number, date of birth and PIN code.

**Tip:**

If you experience problems logging in, please don't hesitate to contact our Service Desk

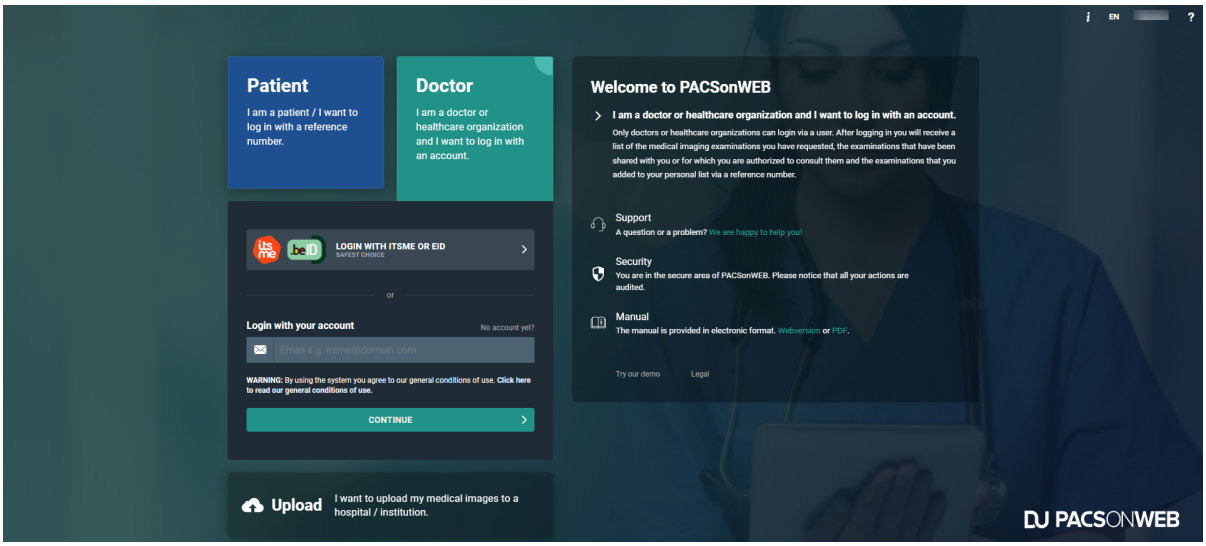
## 4.2 Logging in using your username and password

From the login page, there are two options for logging in:

- As a patient (see Logging in with a reference number (Page 51))
- As a doctor


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# Log in as a doctor




To log in as a doctor with your username and password:

1. Click the **Doctor** box.
2. Enter your username and click **Continue**.
   - Your username is the e-mail address you used when you registered.
3. Enter your password and click **Login**.

## Logging in with an active directory account

If you attempt to log in to DeepUnity PACSonWEB with an active directory account that uses federated services for authentication, you will be redirected to the webpage of your hospital to enter your password

## Password Complexity pop-up

If your password does not meet the required password complexity rules, a pop-up will notify you and direct you to the User Settings (Page 100) page to change your current password.

**Important!**

If an active directory integration has been set up for your institution, you will need to change your domain password to meet the applicable password complexity rules to be able to log in to DeepUnity PACSonWEB after the mentioned date.


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If your account requires strong authentication to log in, you will receive a temporary code (One-time password) by SMS or e-mail or you will need to confirm your login through the DU PACSonWEB mobile app.

For more information, refer to Two-factor authentication (Page 54).

## First time login

The first time you log in, a pop-up window will be displayed to activate your account.

1. Enter the code you received by SMS.
   - If the incorrect SMS code is entered, the password will not be changed.
   - If an SMS code is entered incorrectly five times, the account will be locked.
2. Enter a password.
3. Confirm your password by re-entering it in the **Confirm new password** field.
4. Click **Activate Account.**

This is a one-time process. For each subsequent login attempt, you will be able to log in with your username and the password that you created.

**Tip:**

If you've forgotten your password, you can reset it yourself by clicking on **Forgot your password?** on the login page. For a more detailed explanation of how to reset your password, see Change or reset your password (Page 62).

Please note that resetting your password is only possible if your mobile number is registered with DH Healthcare GmbH.)

## 4.2.1 Two-factor authentication

After logging in, your account may require two-factor authentication (2FA). DeepUnity PACSonWEB offers different possibilities for 2FA. If you have not yet configured your two-factor authentication method, when logging in, a pop-up dialogue will require you select your choice of 2FA. You can choose from the following options:

- **Time-based one-time password from app:** Authenticate using an authenticator app. We advise you to use the DU PACSonWEB mobile app, as it is the most secure option. However, you can also use third-party authenticator apps, such as Lastpass Authenticator, Google Authenticator, or Duo.
- **One-time password by SMS:** A code will be sent to your mobile phone if your mobile phone number is registered with your account.


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If your mobile phone number has not been registered with your account, you will receive the code to your e-mail once. After logging in, you will have the possibility to register your mobile phone number.

- **One-time password by e-mail:** A code will be sent to your e-mail.

You can change your two-factor authentication method under **User settings** > **My Account** > **Security**.

### See also

DU PACSonWEB mobile app (Page 290)

Linking your mobile device to DeepUnity PACSonWEB (Page 291)

My account (Page 101)

## 4.2.2 Confirming your login

Depending on your configured two-factor authentication method, there are different ways of confirming your login.

For confirming your login via app, please refer to Logging in using the DU PACSonWEB mobile app (Page 292).

For confirming your login via one-time password (OTP) by sms or e-mail, please follow these steps:

1. Enter the 6-digit code that you have received either by sms or by e-mail into the **One-time password** field in the OTP dialogue.

   If you check the **Remember this browser for 30 days** box, you will not be required to enter a one-time password for 30 days when you log in from the same machine using the same browser.

2. Click **Continue**.

You now have access to all studies you have requested and that have been shared with you.

### Important!

- The OTP code is only valid for 20 minutes.
- You can have a new code sent from this screen, by clicking **Resend one-time password**. Only the last received code can be used.
- If the one-time password code is entered incorrectly, you will not be logged in.
- If an incorrect OTP is entered 5 consecutive times, the account will be locked.


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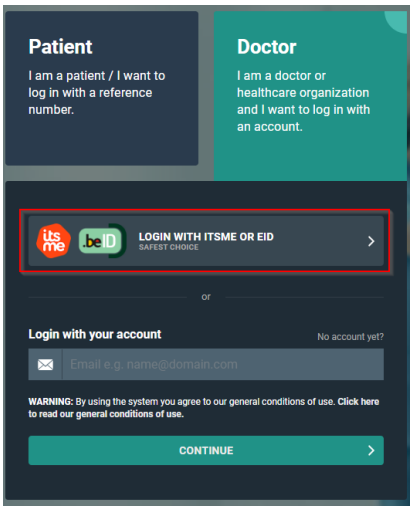
## 4.3 Logging in using an e-ID (BE only)

**Important!**

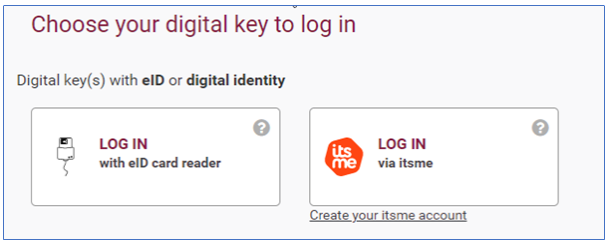
To log in through e-ID, the e-ID software has to be installed on your PC and the Windows Certificate Propagation service must be running on your computer.

## To log in with e-ID

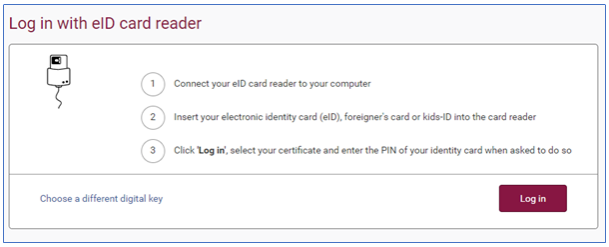
1. Click the **Doctor** box.
2. Click the '**Login with Itsme or eID**' button.




3. On the screen that follows, click **Log in with eID card reader**.



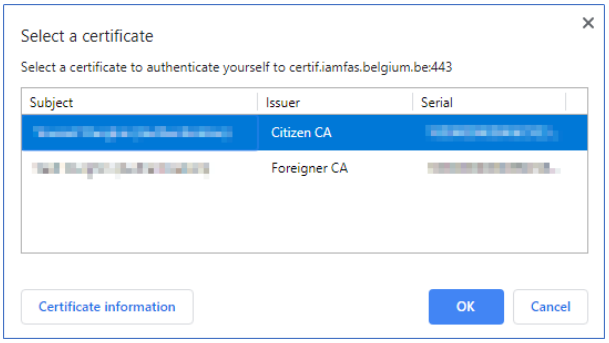

4. Follow the steps on the screen and choose **Log in**.





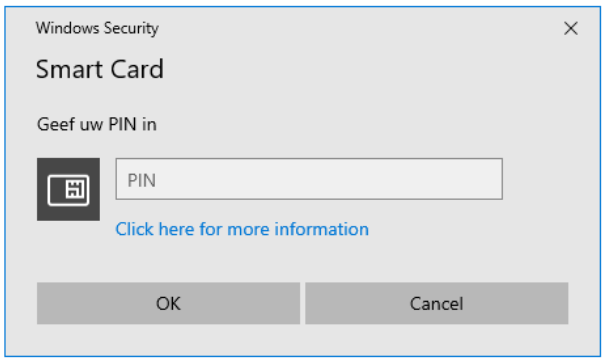
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5. Select the certificate with which you wish to log in and click **OK**.
   Make sure that your electronic identity card is in your e-ID reader.




   The screenshots below may look slightly different, depending on the internet browser (Internet Explorer, Firefox, Chrome, etc.) you are using.

6. Enter the PIN for your certificate and click **OK**.




7. Verify your name, and from the drop-down menu select Civilian ('burger').
8. Click **Log in** ('Profiel bevestigen').



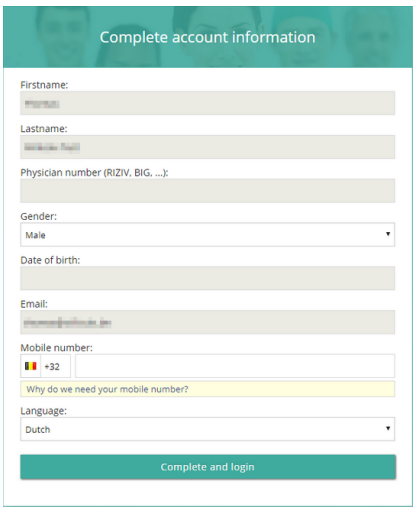

No account yet?


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- If you do not have an account yet, you will be guided to complete your account details (cf. Register through e-ID (BE only) (Page 37)).

Already have an account?

- If you already have an account with all the required details, you now have immediate access to all the studies you requested and that have been shared with you.
- If you already have an account, but not all the required details are available within DeepUnity PACSonWEB, a dialog will be displayed for you to complete the missing details:
  - Account details that are already registered but may not be altered for security reasons are shown but are grayed out.




## 4.4 Logging in as a delegate

**Important!**

This feature is optional. If you are interested, please contact the hospital's radiology service.

Logging in as a delegate allows you to log in using a shared (group) e-mail address while still identifying the user logging in. Logging of users is done via the **Delegates** drop-down list.

If you are interested in this feature, please contact the radiology service of the studies you wish to view. Tell them the general e-mail address that will be used to log in as well as the e-mail address of the delegate who will be administering the group. The radiology service will provide you with your login information.


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## To log in as a delegate

1. Go to the website of the hospital whose images you wish to view.

   Log in with the general account's username and password.

   Select your e-mail address from the drop-down list of delegates.

   Enter the OTP (One-Time-Password) that was sent to your e-mail address and click **Continue**.

You now have access to all the studies that have been shared with you.

## Adding or removing delegates

Adding and removing delegates to an account that is being used by a group can only be done by the group administrator.

### To add a delegate

1. Log in with the general account.
2. Select the administrator's e-mail address.

   Enter the OTP (One-Time-Password) that was sent to the e-mail address and click **Continue**.

   You now have access to all studies that were shared with the general e-mail address.
4. Hover over the **Settings icon**  in the upper right corner of the overview page.
5. Select **User Settings** from the drop-down list.
6. Click on the **My Groups** tab.

   Select the group you want to add a delegate to from the **Administrator of {x} group(s)** list.
8. In the dialog, click on the **Delegates** tab
9. Click **Add delegate**.
10. Enter the e-mail address of the delegate you wish to add and click **Add**.

    Click **Save Changes**.

    If you now log in with the general account, you can also select recently added e-mail addresses.

### To remove a delegate

1. Follow steps 1-8 outlined in the previous instruction (To add a delegate).
2. Find the delegate in the list that you wish to remove and click the remove icon  .


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3. Click **Save Changes**.

## 4.5 Logging in through an active directory

**Tip:**

Logging in using active directory means that a user can log in with the domain account or the e-mail address of the hospital and the related password.

This is an optional integration and can only be set up for radiology departments. If you are interested, please contact DH Healthcare GmbH for more information.

## To log in through an active directory

1. Go to the hospital's login page and click the **Doctor** box.
2. In the username field, enter the username or e-mail address of the hospital and click **Continue**.
3. Enter the password registered with the hospital for the related account and click **Log in**.

**Important!**

Active Directory Federation Services

If the active directory integration has been set up using ADFS, you will be redirected to a separate page, hosted by the hospital to complete the password.

### One-Time-Password

After successfully logging in to DeepUnity PACSonWEB for the first time, you will receive a One-Time-Password (OTP) via SMS to the account's registered mobile phone.

Enter the received code you received in the **Extra security: Enter One-Time-Password** dialog and click **Continue**.

- If the OTP code is entered incorrectly, you will not be logged in.
- If an incorrect OTP is entered 5 consecutive times, the account will be locked.
- If everything has been entered correctly, the study list/worklist will be displayed.

### Password complexity pop-up

- If you have logged in with a password that does not meet the DeepUnity PACSonWEB password policy, a pop-up will notify of this and request you change your current password.


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- Change your password in the User settings (Page 100) page to meet the imposed password complexity so you can keep logging in to DeepUnity PACSonWEB beyond the date displayed in the pop-up.
  - For detailed instructions on how to change your password, go to Change or reset your password (Page 62)

**Important!**

The password complexity is not checked when using ADFS

## 4.6 Logging in using EMR

**Tip:**

Opening studies on DeepUnity PACSonWEB, directly from the Electronic Medical Record system (EMR) is only possible for radiology departments after setup.

If you are interested, please contact DH Healthcare GmbH for more information.

- If you have opened a study from the EMR, this is made visible by displaying (EMR) next to your username in the top toolbar.
- Since you are not logged in using a regular DeepUnity PACSonWEB account, the authentication is considered insufficient to make all features available.
  - When trying to use a feature that has been made unavailable, the following notification will be shown: "You are logged in via the EMR, and have limited access. In order to use all user functionalities, you will need to log in via DeepUnity PACSonWEB with your account. Click here to log in."

## 4.7 Viewing login attempts

All login attempts to DeepUnity PACSonWEB will be logged.

- Your most recent successful login made with your username is displayed in the menu at the top of the overview page.
  - You will find it next to your username, displayed as **Last login: dd/mm/yyyy 00:00:00**)
- If there was an incorrect login attempt with your username, you will receive a warning during your next successful login.

### To view a detailed list of all recorded login attempts

1. Hover over the User Settings (Page 100) icon .


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2. Select **User Settings** from the drop-down list.
3. In the **My Account** tab under **Username**, click **Login history**.

The overview shows at what time and from which IP address each login attempt was recorded and whether or not this was successful.

## 4.8 Change or reset your password

You can change your password for security reasons or reset it if you forget it or if your password has expired.

**Important!**

Changing your password is only available if you are logged in to a DeepUnity PACSonWEB account. For those logged in with an Active Directory account, changing your password from this page is not possible.

Resetting your password is only possible if your mobile phone is registered with DH Healthcare GmbH

### Change your password

1. Login to your DeepUnity PACSonWEB account.
2. In the top toolbar, hover over the **settings icon** .
3. Select **User Settings** from the drop-down menu.

   The page will open to the **My Account** tab
4. Under **Security**, click **Change**.
5. Enter your current password in the **Old password** field.
6. Enter your new password in the **New password** field.
7. Confirm your new password by re-entering it in the **Confirm new password** field.
8. Click **Change password** to update your password.

   Once you click **Change password**, your old password will be overwritten with the new one.
9. To cancel your changes, click **Cancel change password**.

Your DeepUnity PACSonWEB password will expire automatically after one year.

### Reset your password

1. From the login page, enter your username and click **Continue**.
2. Below the password field, click **"Forgot your password?**"


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A pop-up dialog will be displayed with the e-mail address you entered at the login page.

3. Verify the the e-mail address is correct and click **Reset**.

   A confirmation message will be displayed.

4. Click **Ok**.

   You will receive an e-mail with a link to reset your password.

5. In the email, click on the **Password reset** link. The link will open a webpage.
6. Enter the SMS code that you receive at the GSM number registered with DH Healthcare GmbH (the GSM number where the code is sent is also mentioned in the e-mail).

   If an SMS code is entered incorrectly, the password will not be changed.

   If an SMS code is entered incorrectly five times, the account will be locked.

7. Enter a new password in the **New password** field.
8. Confirm the new password in the **Confirm new password** field.
9. Click **Reset password**.

If everything was entered correctly, you will be redirected to the login page where you can log in with your username and new password.

**Important!**

The link to reset your password is valid for 48 hours. After 48 hours, the link will open a dialog notifying you that the link has expired and instructing you to repeat the process for resetting your password. You will receive a new e-mail with an updated link.

## 4.9 Logging out

Logout of DeepUnity PACSonWEB from any page by clicking the **Logout** button on the top right-hand corner of each page.

For security reasons, your DeepUnity PACSonWEB session will be automatically disconnected in the following instances:

- If the session is inactive for 30 minutes
- 4 hours after logging in to DeepUnity PACSonWEB

  To adapt these time periods, send a request to our Service Desk.

Your DeepUnity PACSonWEB session will also be terminated if you close all browser windows.


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**Important!**

If you still have another browser window open (even without DeepUnity PACSonWEB), the session will be retained and it is possible to reopen your DeepUnity PACSonWEB session without providing any login credentials.


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# The study list

5

**Patients:** If you log in as a patient with a reference number, you will be directed to the respective request (see DeepUnity PACSonWEB study page (Page 171)).

**Registered users:** If you log in with an account, you will be directed to the study list. Here you will see a list of all the studies you have access rights to view.

You can have access rights on a study because:

- you are the requesting physician (or CC physician);
- a colleague in your group practice is the requesting physician and studies are shared within the group practice;
- you have added the study to your list using the reference number (See Adding a study (Page 78));
- the study was shared with your user, your group or your medical department (See ); or
- you are member of the user group or admin group of a radiology department.

By default, the study list only contains studies that are available in the central DeepUnity PACSonWEB cloud environment.

- A medical imaging department can opt to process the images also locally by a local image cache (see Local image cache (Page 166)) to make the images available faster within the local network.
- If your user has access rights to such a local image cache, the study list will also contain all studies that are available through the local image cache.

**Tip:**

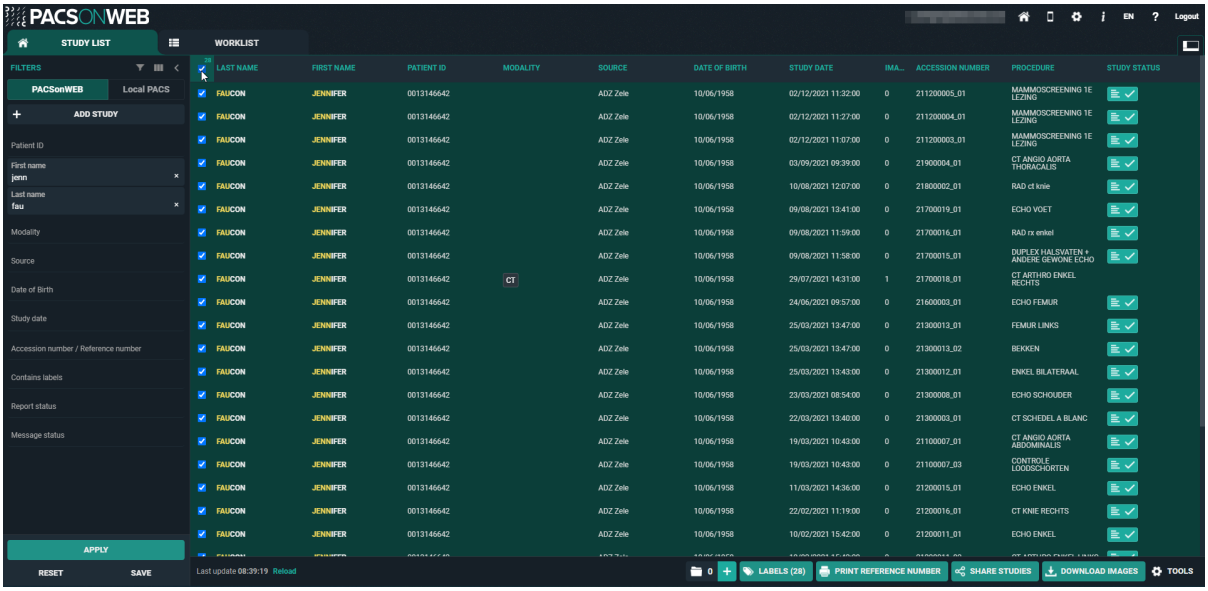
For Mammograms the images will remain on DeepUnity PACSonWEB for a default period of three years. For other studies, images will remain on DeepUnity PACSonWEB for one year.

To consult an older study, contact the radiology service.


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## The study list




- The list reloads automatically every 5 minutes.
  - To refresh the list manually, click **Reload** at the bottom of the page.
- The list is limited to the 100 most recent studies.
  - To display more specific results or look for older studies, you can use filters (Page 73).
- You can select all the studies that are shown in your study list.
  - To select all studies, check the top box in the first column.
  - This box will also display the number of studies selected.

## Opening a study from the study list

The study list displays all the studies you have access to. When you click on a study from this list, the study will be opened by default in the active tab.


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**Tip:**

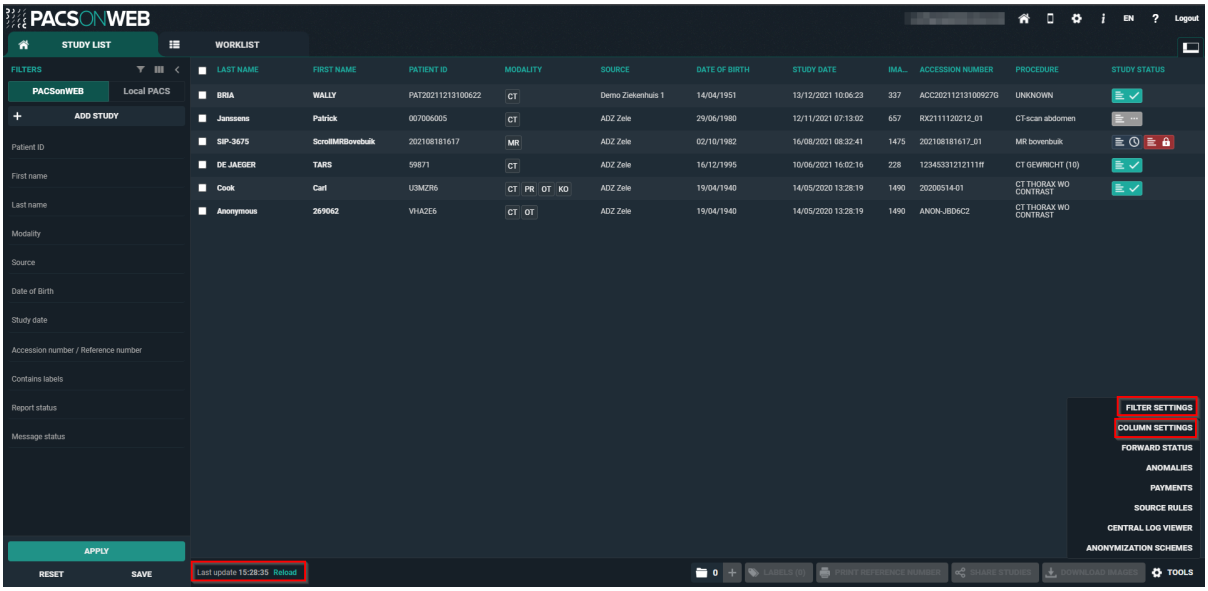
If the related setting has been activated for your account, you can open different studies within the same browser tab. Clicking on a study from the study list will open that study in the active window and tab.

To open a study from the study list in a new tab, you can use any of the following options:

- Ctrl + Shift + left click on the study
- Ctrl + left click on the study
- Click on the study using the scroll wheel


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## 5.1 Configuring the study list




**Tip:**

**Refreshing the study list**

The study list refreshes automatically every 5 minutes.

### Configuring the study list

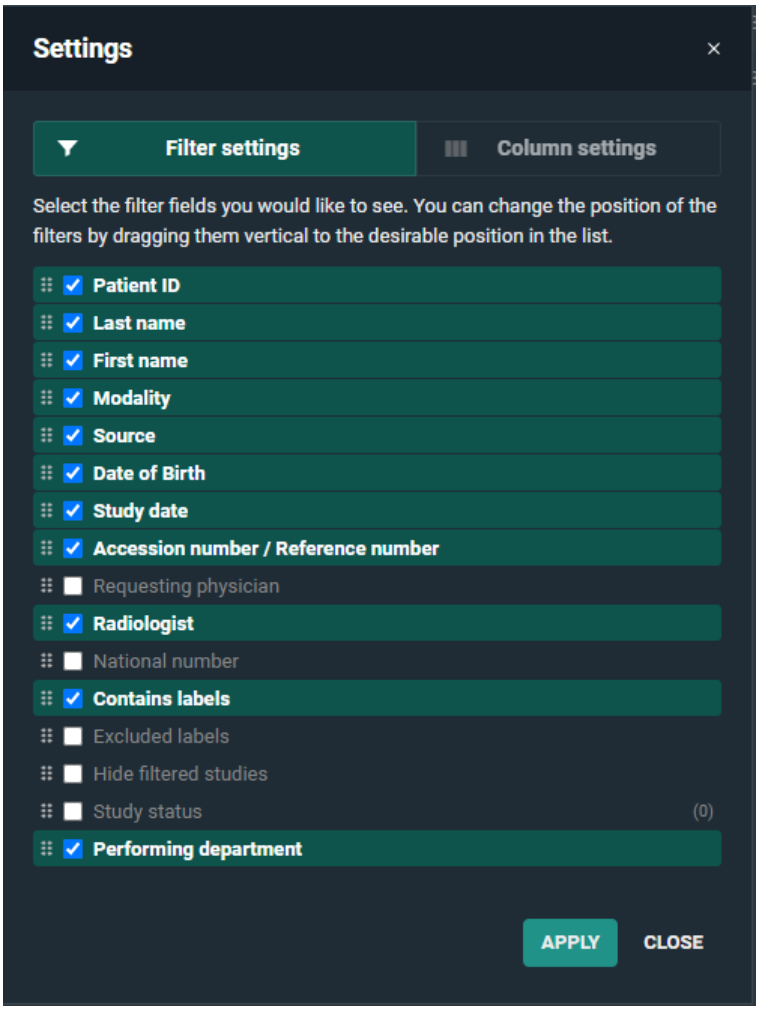
You can configure the study list according to your preferences by changing the filter fields in **Filter settings** and columns in **Column settings**.

There are two ways to navigate to the **Filter settings** and **Column settings**:

1. Click the respective icon in the filters panel.
   - Filter settings
   - Column settings
2. Click **Tools** and select either **Filter settings** or **Column settings** from the list.


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# Filter settings




From the filter settings you can add, remove, or change the order of how the fields are displayed in the filter panel.

- To display a filter field, check the respective box.
- To hide a filter field, uncheck the respective box.
- To change the order of a filter field, click and drag it to the desired position in the list.

After implementing the desired changes, click **Apply**.

If a value for a filter field has already been entered, the value will be shown at the end between brackets.


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## Filter fields

The table below lists the available filter fields and the input type (text, drop-down, calendar).

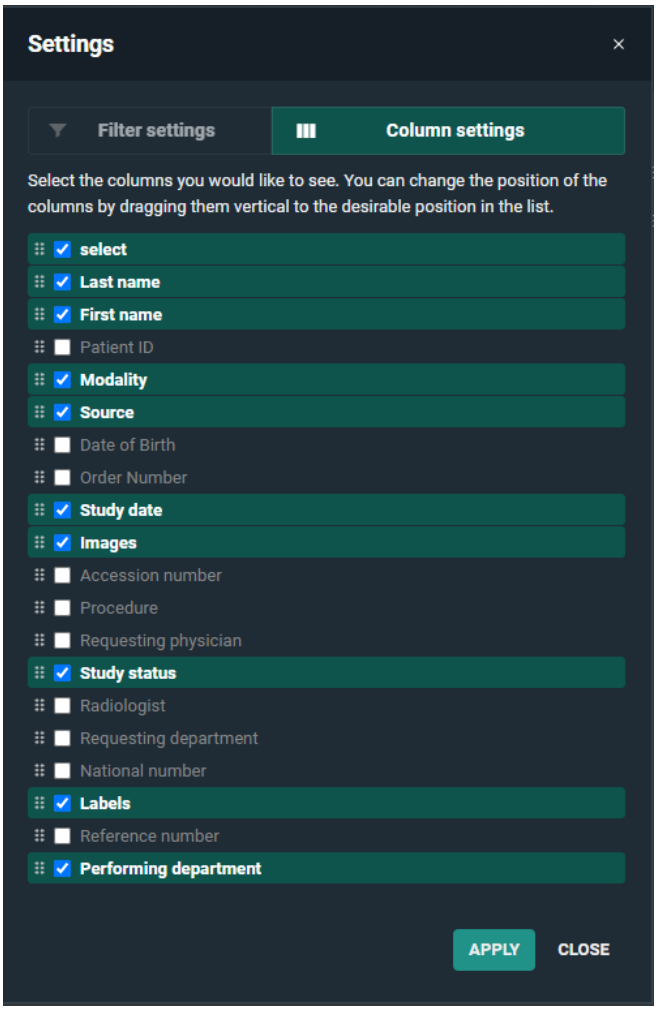
| Field | Input Type |
|---|---|
| Accession Numbers / Reference number | Text Field |
| Contains labels | Multi-select Drop-down |
| Date of Birth | Text Field |
| Excluded labels | Multi-select Drop-down |
| First name | Text Field |
| First Name at Birth | Text Field |
| Hide filtered studies | Checkbox |
| Last name | Text Field |
| Last Name at Birth | Text Field |
| Modality | Multi-select Drop-down |
| National number | Text Field |
| Patient ID | Text Field |
| Performing department | Text Field |
| Place of birth | Text Field |
| Radiologist | Text Field |
| Requesting physician | Text Field |


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| | |
|---|---|
| Source | Text Field |
| Study Date | Calendar |
| Study status<br>(Report status / Message status) | Multi-select Drop-down |

For more details on **Study date**, **Report status** and **Message status fields**, see Configuring the study list (Page 68)Using Filters.

## Column settings




From the column settings you can add, remove, or change the order of how columns are displayed in the study list.

- To display a column in the study list, check the respective box.


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- To hide a column from the study list, uncheck the respective box.
- To change the order of a column, click and drag it to the desired position in the list.

After implementing the desired changes, click on **Apply**.

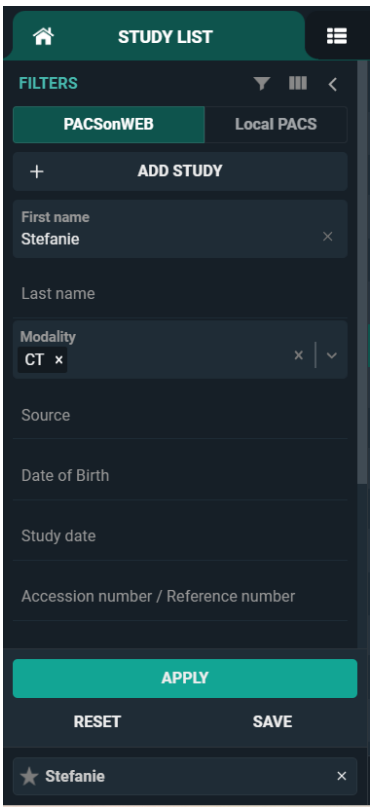
## Column fields

Below is a list of all column fields available from the study list.

- Accession Number
- Date of Birth
- First name
- First Name at Birth
- Images
- Labels
- Last name
- Last Name at Birth
- Modality
- National number
- Order Number
- Patient ID
- Performing department
- Place of birth
- Procedure
- Radiologist
- Reference number
- Requesting department
- Requesting physician
- Select
- Source
- Study date
- Study status
  - Report status
  - Message status


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## 5.2 Using filters




Filters make it easier to find a study in your list.

Click on the grey arrow on the top left to display › or hide ‹ the filter fields.

## Remembering filters of the study list

You can set DeepUnity PACSonWEB to remember the values entered in the filter fields when you open an exam or log off.

To configure this setting:

1. Click on the **User settings** icon and select **User settings** from the drop-down list.
2. Click the **Preferences** tab.
3. Under **General** > **General settings**
   - To remember the filters, enable the **Remember study list filters** toggle icon.


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- To clear the filters, disable  the **Remember study list filters** toggle icon.

4. Click **SAVE GENERAL SETTINGS**.

**Important!**

If you use a filter during a DeepUnity PACSonWEB session and don't delete it, the filter will open automatically when starting a new session.

## How to search with a filter

To start a search:

1. Enter search criteria into the desired filter fields.

   Filter fields will be bolded and grey when containing search criteria.

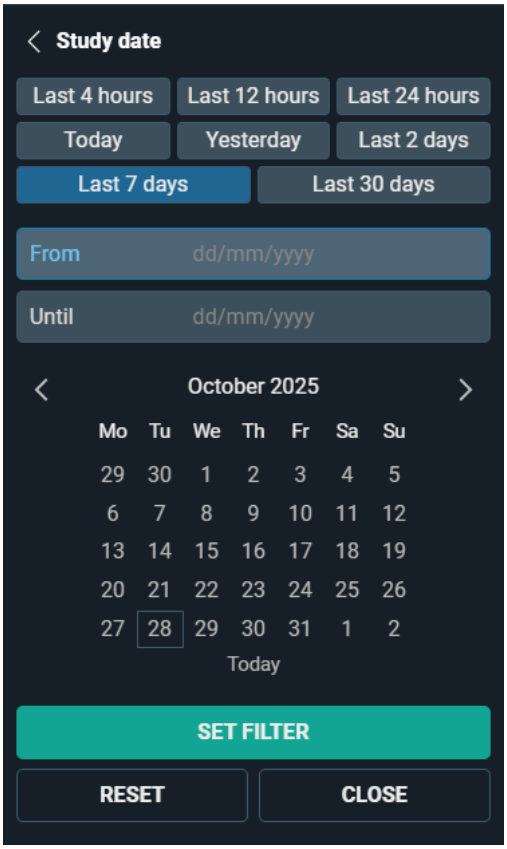
2. Click **APPLY**.

While the search is in progress, all filter fields are locked and cannot be edited until the search has concluded.

For a list of available filter fields, see Configuring the study list (Page 68).


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## Using the study date filter




The **Study date** field will display a calendar, allowing you to select a specific day or a day range.

To use the study date filter:

1. Click **Study date** from the **FILTERS**.
2. Select your dates.
   - You can select dates using a predefined filter, enter your desired dates via the calendar, or manually input the dates using your keyboard.
   - You can select a specific day or a date range.
3. Click **SET FILTER**.
4. Click **APPLY**.

### Using predefined filters

You can choose from a list of predefined filters:

- Last 4 hours
- Last 12 hours


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- Last 24 hours
- Today
- Yesterday
- Last 2 Days
- Last 7 Days
- Last 30 Days

**Entering dates manually**

- Select the dates manually using your keyboard:

  Enter the desired dates in the **From** and **Until** fields (following the dd/mm/yyyy format) using your keyboard.
- Select dates using the calendar:

  Navigate to the desired day/month/year using the calendar and click on the days you wish to enter.
  - The first date you click will be entered automatically into the **From** field.
  - The second date you click will be entered into the **Until** field.
- Use **From** and **Until** fields to get different results:
  - To search for studies from one specific day, enter the same date in the **From** and **Until** field.
  - To search for studies from a specific date up to today, enter the date in the **From** field only.
  - To search for studies up to a specific date, enter the date in the **Until** field only.
  - To search studies between a specific date range, field out both the **From** and **Until** fields.

**To clear the study dates**

To clear the study dates you entered in the **From** and **Until** fields:

1. Click the **Study date** filter field.
2. Click the **RESET** button below the calendar.
3. Click **APPLY** at the bottom of the **FILTERS**.

You can also clear the study dates by clicking the **x** to the right of the field in the filters panel.

## Using the report status filter

The **Report status** filter allows you to filter on one or more of the following statuses:


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| Icons | Status |
|---|---|
| - | No report |
|  | Draft report |
|  | Preliminary report |
|  | Validated report |

## Using the message status filter

The **Message status** filter allows you to filter on one or more of the following statuses:

| Icons | Status |
|---|---|
|  | Read |
|  | Unread |

You can also select both options (read/unread) to display a list of all studies with a message.

## Using the contains labels filter

DeepUnity PACSonWEB allows users to filter for studies that contain and exclude certain labels.

You can also filter using predefined labels that are linked to studies based on HL7 message values.

- For the use of predefined labels, please contact DH Healthcare GmbH
- If certain studies for a radiology department are filtered, based on HL7 message values such as requesting department, modality, ... the studies are still listed in the study list of source admins for reference.

Such studies are marked with the following icon in the study status field: 


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As a source admin, it is possible to hide filtered studies by activating the  **Hide filtered studies** toggle icon.

Filtered studies are not visible for non-source admins; this filter is therefore not available for regular users.

## How to save a filter

You can save a filter that you use on a regular basis.

To save a filter:

1. Enter the criteria into the desired fields.
2. Click **SAVE**.
3. In the dialog that appears,
   a. Enter a name for your filter.
   b. Select a group from the drop-down.
4. Click **SAVE FILTER**.

**Tip:**

If you are the administrator of a group practice, you can choose to save the filter only for yourself or for all members of the group practice.

Only the administrator can delete a filter that was created for all members of the group.

The filter will be saved at the bottom of the filter panel. You can apply the filter at any time by clicking on it.

To delete your saved filter, click the **x** to the right of the filter.

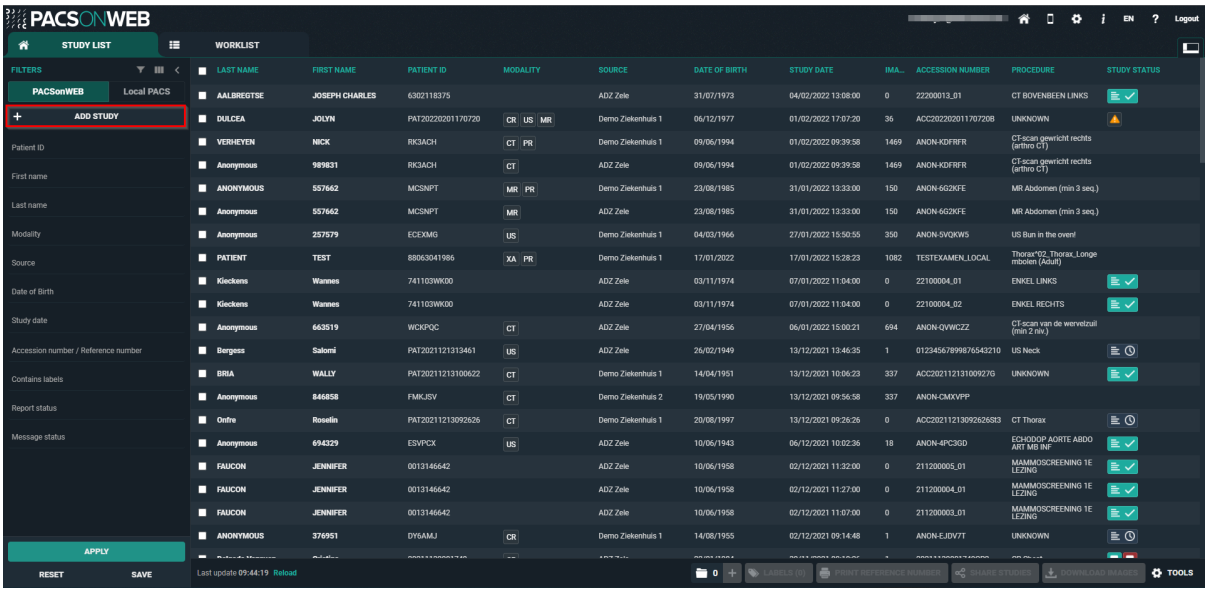
## 5.3 Adding a study

If you wish to view a study for which you are not the requesting physician, you can add this study to your list, provided that the patient has given you the reference number and his/her date of birth.

To add the study:

1. Click the **Add Study** button in the top left corner.


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2. Enter the study's reference number and the patient's date of birth in the dialog displayed.
3. Click the **Add study** button.

The respective study will be opened immediately.

If a single or multiple exams have been shared with a non-DeepUnity PACSonWEB user, there is no reference number but only a DU POW code (DU POW...).

You can add this exam in a similar way by entering the DU POW code in the reference number field and the date of birth for one of the related patients.

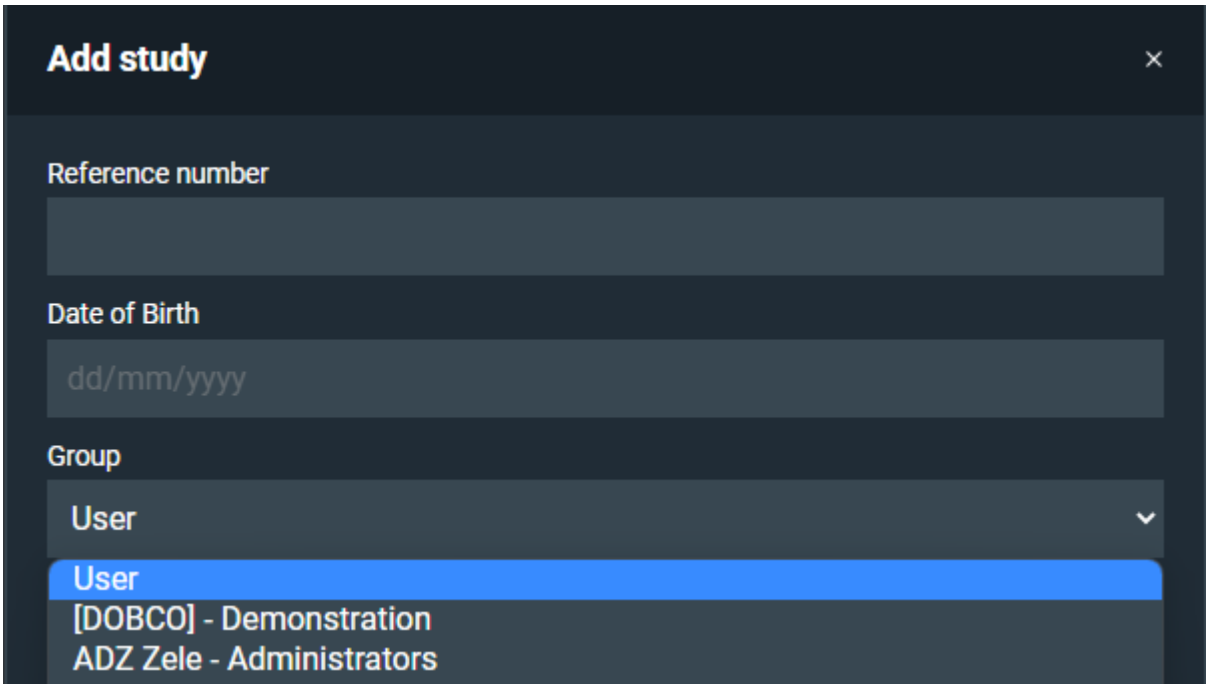
**Tip:**

After you've added a study, this study will remain available in your own list for future reference.

If you are an administrator of a group, you will have the additional option to add the exam for the entire group.

After adding the exam, it will be accessible for all members of the group.


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**Adding a single study:**

When adding a single study, you can choose between the following options:

- **Add study**: the study will be added to the study list of the user
- **Add and open study**: the study will be added to the study list of the user and the study will be opened in the viewer
- **Add and open study in list**: the study will be added to the study list with the reference number filled in as filter to show the added study

**Adding a bucket (more than 1 study):**

When adding a bucket, you can choose between the following options:

- **Add studies** the studies will be added to the study list of the user.
- **Add and open studies in list:** the studies will be added to the study list with the reference number filled in as filter to show the added studies.

## 5.4 Upload Portal

The Upload Portal allows you to upload your medical images and related documents to your Hospital/Institution.

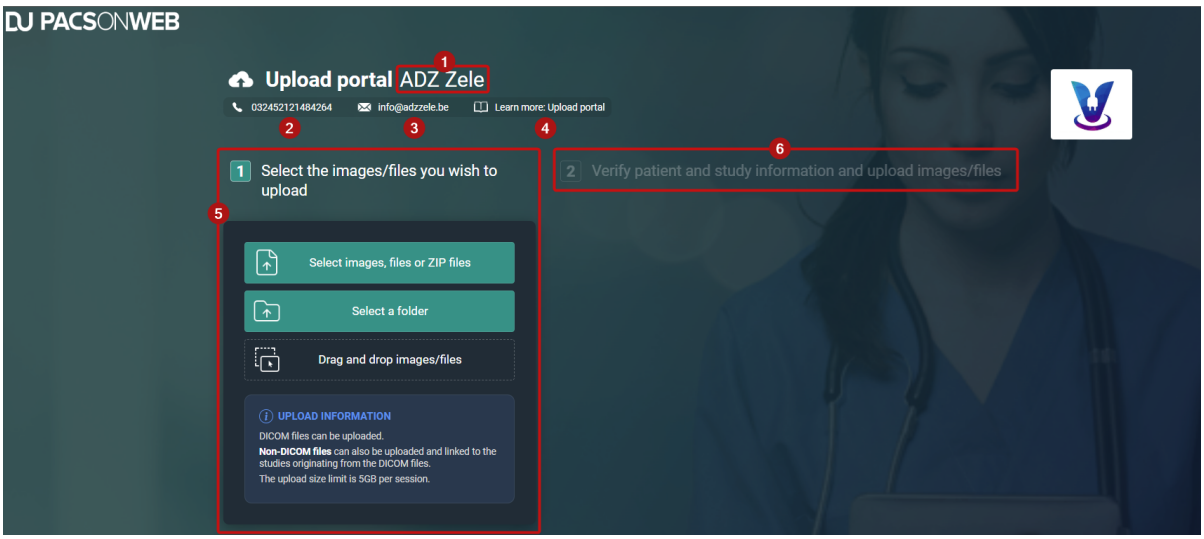
To successfully upload your medical images and related documents to the Hospital/ Institution:

1. Add your medical images/files to the upload portal.
2. Verify that you added the correct images/files to the upload portal.


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3. Agree to the privacy policy and consent to sharing your medical images and personal data with the hospital via the upload portal.
4. Click **Start upload**.

## Overview of the Upload Portal page




| Number | Designation | Description |
|---|---|---|
| 1 | Source | The Hospital/Institution from which you received the Upload code. |
| 2 | Phone number | The phone number of your Hospital/Institution. |
| 3 | E-mail address | The e-mail address of your Hospital/Institution. |
| 4 | Hyperlink | A link to the Upload Portal chapter of the user manual. |
| 5 | Panel 1 (Select the images/files you wish to upload) | Add your medical images and related documents to the Upload Portal using one of the 3 available options: |


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| Number | Designation | Description |
|---|---|---|
| | | • Select images, files or ZIP files<br>• Select a folder<br>• Drag and drop images/ files<br>The following file types are supported:<br>• DICOM files<br>• Non-DICOM files: pdf, png, jpg, jpeg, tif<br>**Note:**<br>The amount of data that can be uploaded is limited to a specified amount of GB per session. The GB limit is configurable. |
| 6 | Panel 2 (Verify patient and study information and upload images/files) | Verify the patient and study information and upload the images/files.<br>**Note:**<br>Panel 2 is only available once you have added images to the upload portal. |

## See also

Restrictions and error messages (Page 95)
Selecting your medical images/files for upload (Page 83)
Using the Upload Portal as a Source User/Source Admins (Page 97)

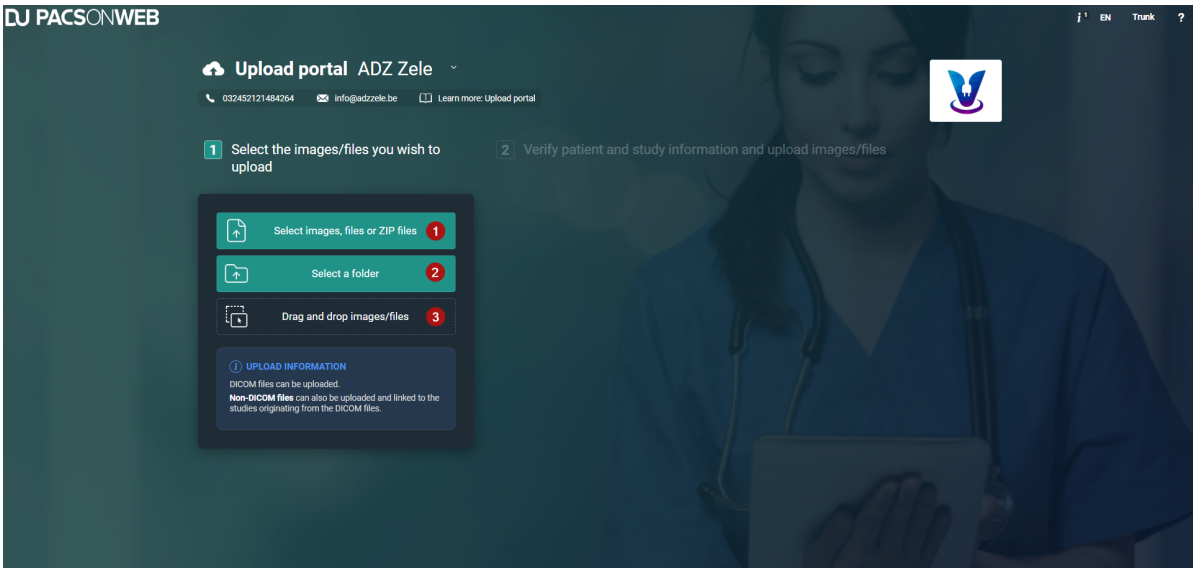

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Verifying patient and study information and upload images/files (Page 87)

## 5.4.1 Selecting your medical images/files for upload

The first step of uploading your images/files to the Upload portal is to select the images/files you wish to upload. There are 3 ways to add your medical images and related documents to the Upload portal.




| Number | Designation | Description |
|---|---|---|
| 1 | Select images/files or ZIP files | Use this button to select an image or multiple images, files, or ZIP files. |
| 2 | Select a folder | Use this button to select an entire folder. |
| 3 | Drag and drop images/ files | Use this drag & drop option to drag and drop selected images or files from a file manager to the Upload Portal. |

**Note:**

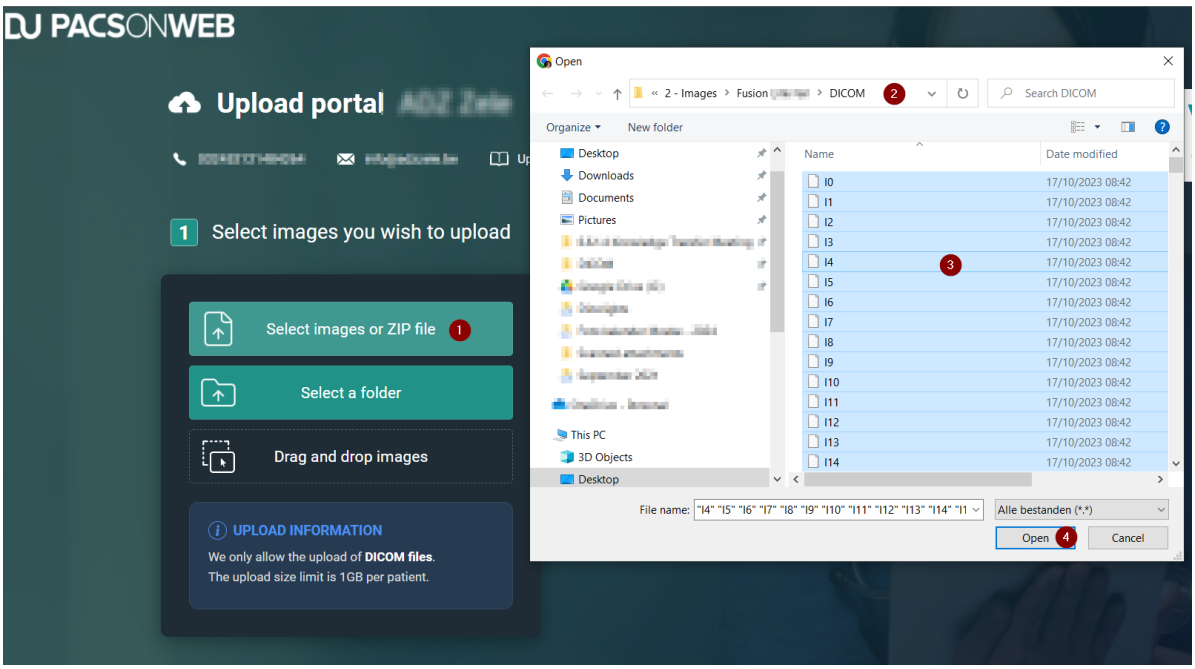
If your selected images, files, or ZIP files contain a supported non-DICOM file (pdf, png, jpg, jpeg and tif), it will be uploaded and added to that study.


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# Selecting images/files or ZIP files

You can use the **Select images, files or ZIP files** button to add your medical images and related documents. You can upload multiple images or files at once or select a ZIP file to upload.

## Selecting multiple images




1. Click on the button **Select images, files or ZIP file**.
2. In the file manager, navigate to the folder where your image/files are located.
3. In the folder, select all files.

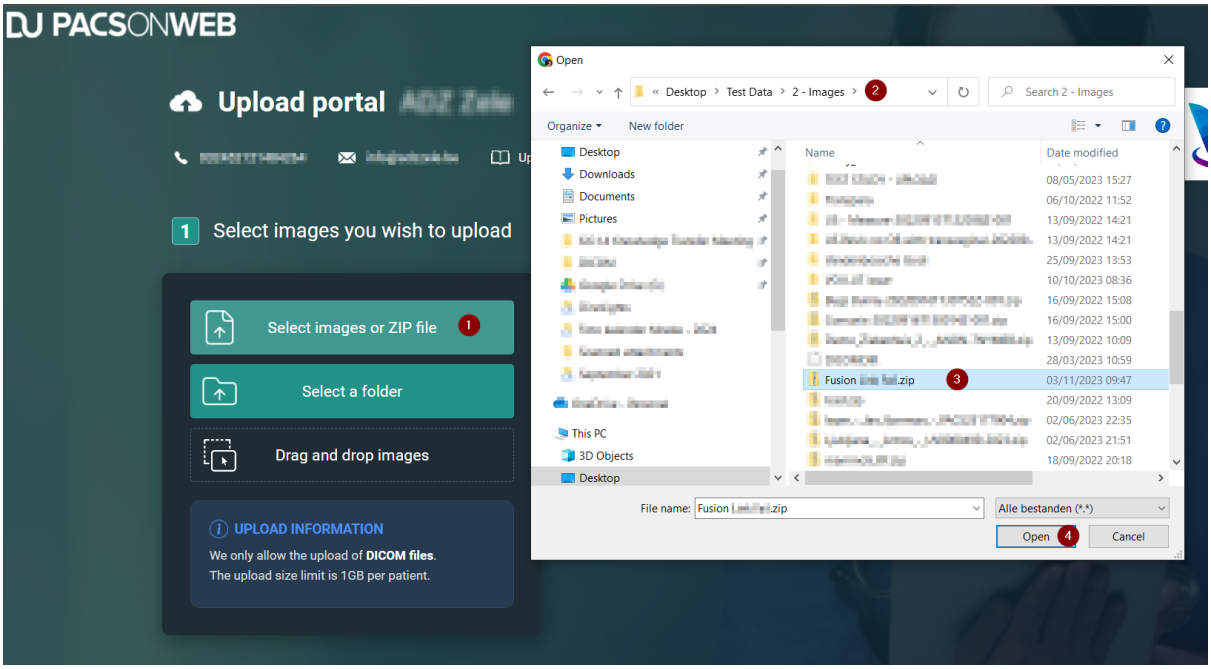
> **Tip:**
>
> You can select all files by selecting one file and pressing **Ctrl + A** or by selecting the first file in the folder, scrolling down to the end of the files, pressing **SHIFT + left mouse**, and clicking on the last file.

4. Click on the **Open** button in the file manager.

The selected images/files will be added to the upload portal and ready for verification and upload.


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## Selecting a ZIP file



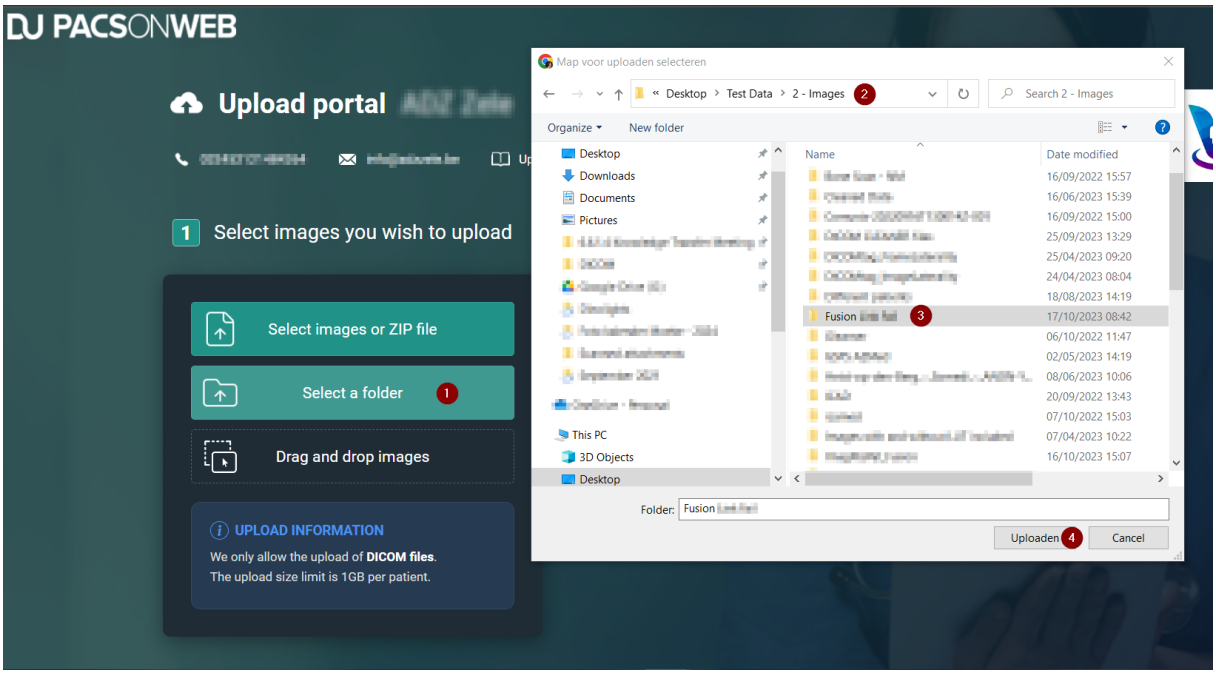

1. Click on the button **Select images or ZIP file**.
2. In the pop-up dialog, navigate to the ZIP file that contains your images.
3. Select the ZIP file.
4. Click on the **Open** button in the pop-up dialog.

The images/files within the ZIP file will be added to the upload portal. To complete the upload, verify the information and click **Start upload**.

## Selecting a folder or CD/DVD

You can use the **Select a folder** button to add an entire folder that contains your medical images and related documents.


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To select an entire folder or a CD/DVD to add to the Upload Portal:

1. Click the **Select a folder** button.
2. In the file manager, navigate to the folder or CD/DVD drive where your images/files are located.
3. Select the folder that contains your images
4. Click the **Upload** button in the file manager.

The images/files within the folder will be added to the upload portal. To complete the upload, verify the information and click **Start upload**.

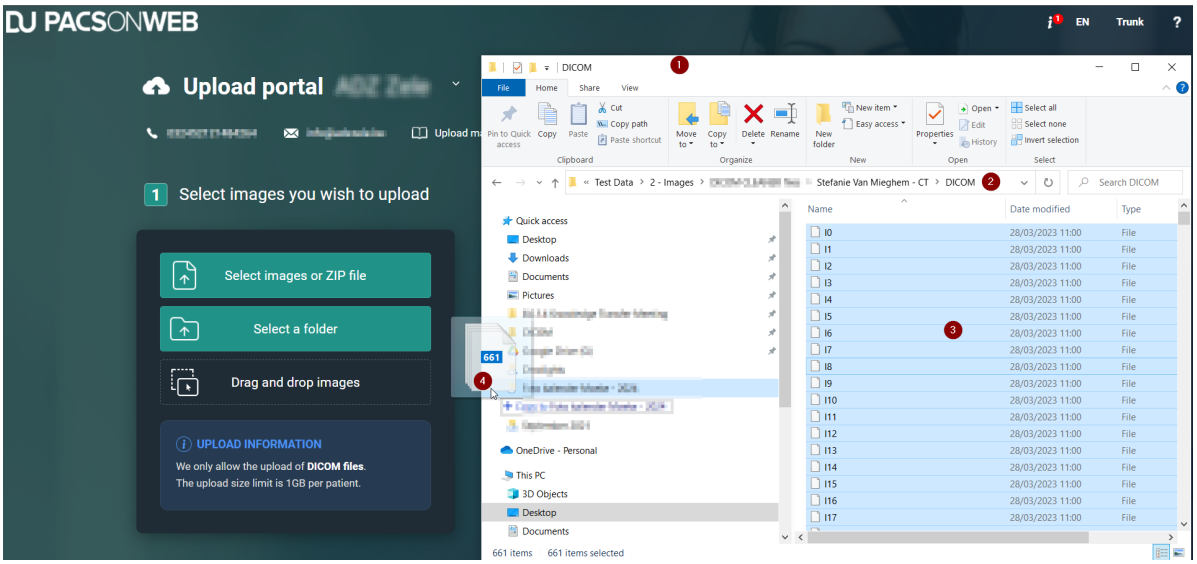
**Tip:**

Your browser may display an additional pop-up message when you select a folder. If this happens, click on **Upload** again.

## Drag and drop images/files

You can drag & drop your images/files to add them to the Upload Portal.


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**Note:**

The drag & drop feature is not a button.

To select an entire folder or CD/DVD:

1. Open your file manager.
2. Navigate to the folder where your images are located and open the folder.
3. In the folder select all files.
4. Click and hold down the left mouse button.
   a. While holding down the left mouse button, move your mouse to the upload portal and release the mouse button.

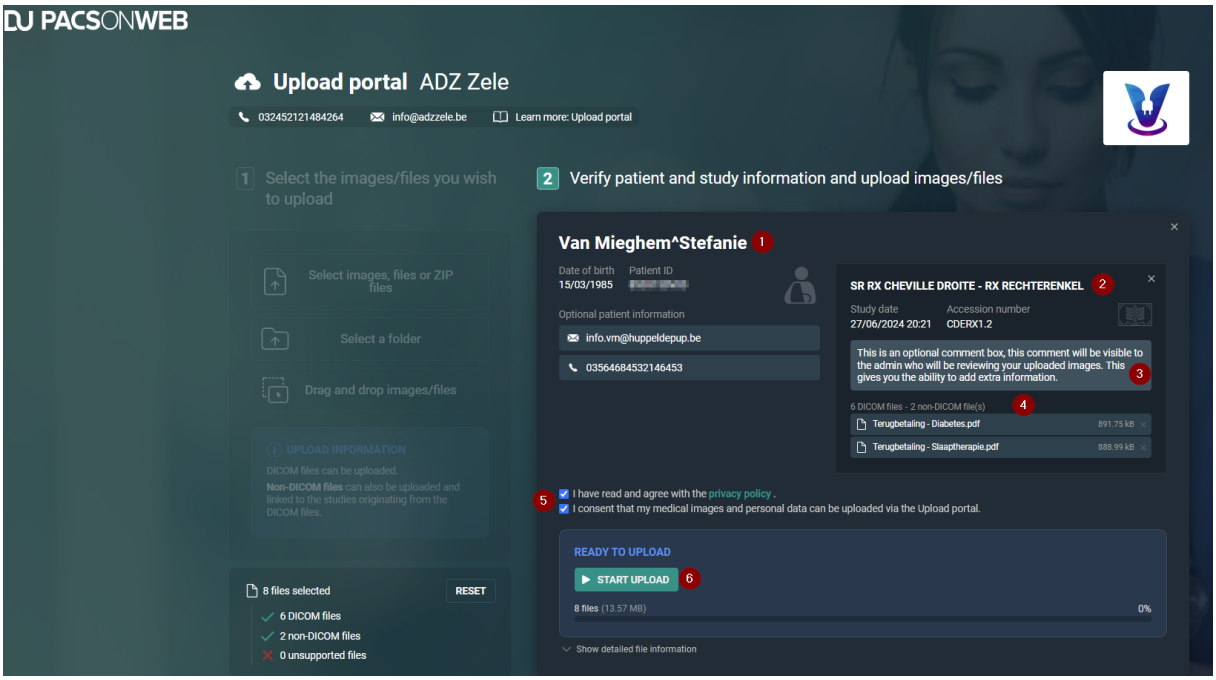
The images/files within the folder will be added to the upload portal. To complete the upload, verify the information and click **Start upload**.

## 5.4.2 Verifying patient and study information and upload images/files

After selecting your images/files, you need to verify the patient and study information before uploading the images/files to the Upload Portal.


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# Verify and Upload Overview




| Number | Designation | Description |
|---|---|---|
| 1 | Patient information | The patient information (Date of birth, Patient ID) of the images/files selected for upload.<br>Patient e-mail and phone number are optional fields. They will be used as a reference or if the hospital needs to contact you. |
| 2 | Study information | The study information (Study date, Accession number). |
| 3 | Optional comment | You can add an **Optional comment** for each study that you upload. Here you can add a reason for uploading the specific |


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| Number | Designation | Description |
|---|---|---|
| | | study or provide additional information. |
| 4 | Document information | Displays the number of DICOM and non-DICOM files added to the study. |
| 5 | Privacy policy & patient consent | These are mandatory fields. You must agree to the privacy policy and consent to sharing your medical images and personal data with the hospital via the upload portal. |
| 6 | Start upload | This button initiates the upload. It is not available until you have agreed to the privacy policy and patient consent. |

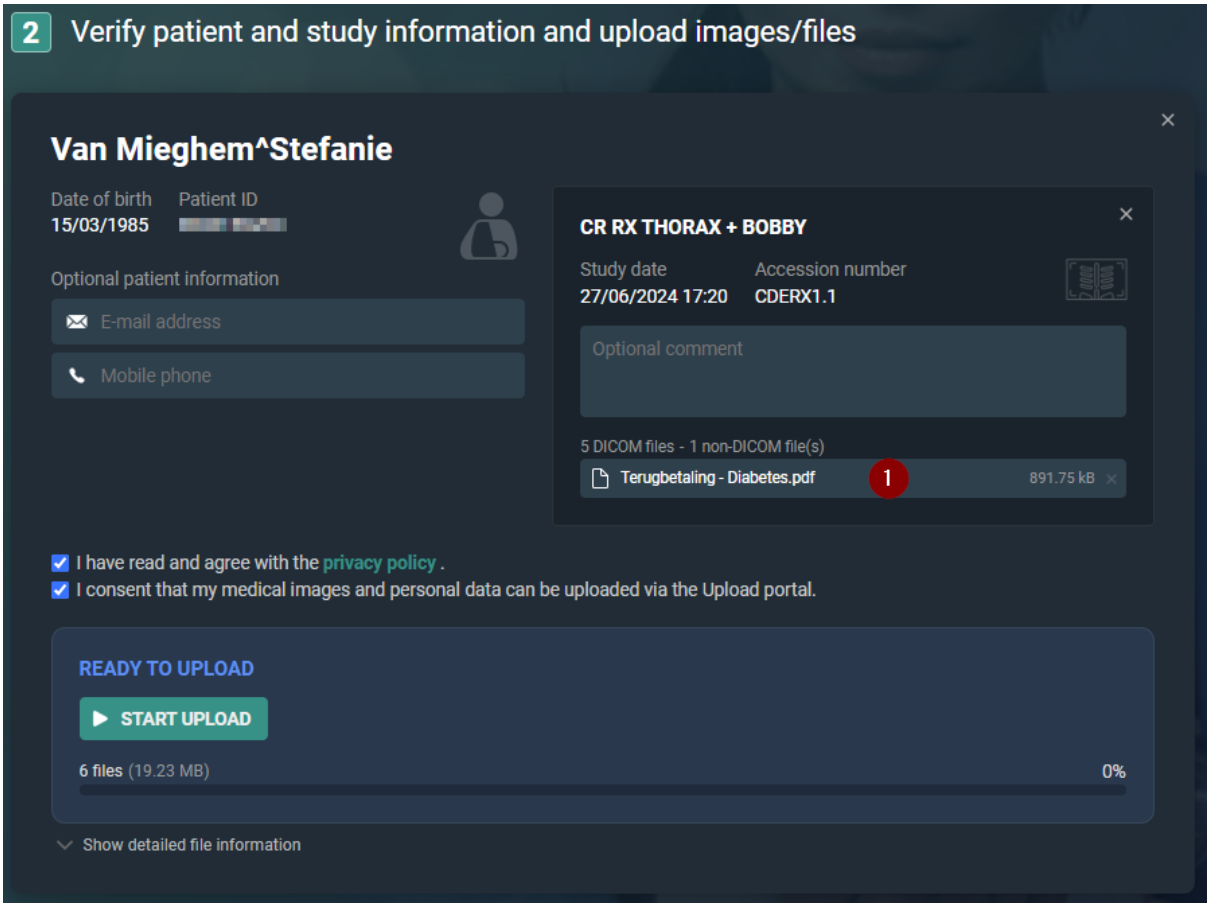
## Adding non-DICOM files

**Note:**

To upload non-DICOM files, at least 1 DICOM file must be uploaded. An error message is displayed if a non-DICOM file is selected without a DICOM file. Adding a DICOM file will resolve the error.


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## Adding non-DICOM files to a single study

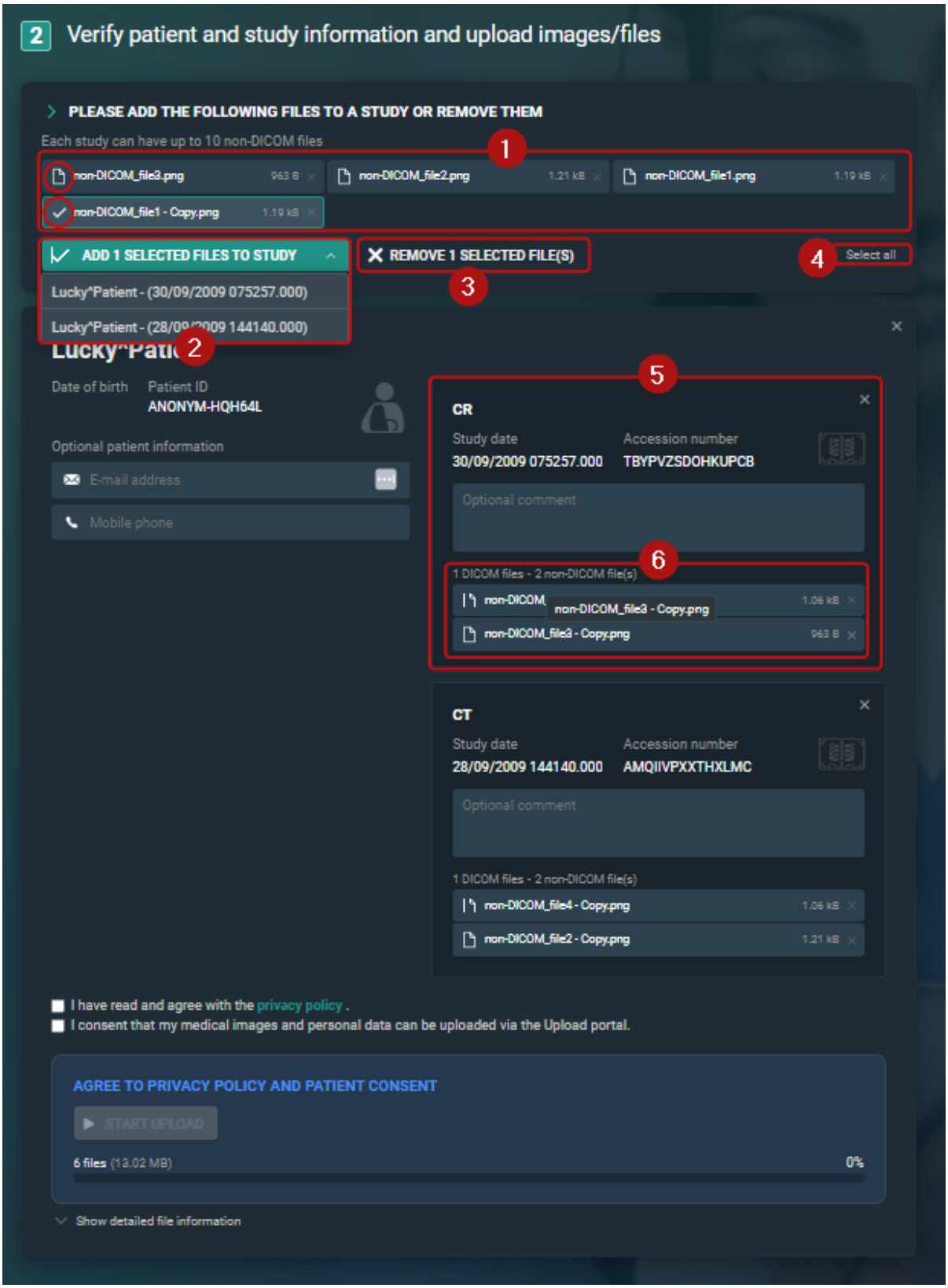



When you upload non-DICOM files to a single study, they will be matched automatically to the study.

## Adding non-DICOM files to multiple studies

When uploading non-DICOM files with multiple studies, non-DICOM files will not be linked automatically to the studies. The documents are displayed at the top of the page and will need to be linked manually to the correct study.


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| Number | Designation | Description |
|---|---|---|
| 1 | Please add the following files to a study or remove them | Non-DICOM files that have been added to the upload portal, but are not yet linked to a study are displayed here. To ensure these files are uploaded, they must be added to a study or removed.<br>Click on a file to mark the file as selected. The icon will change from a document to a checkmark.<br>The number of non-DICOM files that have been selected is displayed in the drop-down list **Add selected files to study**. |
| 2 | Non-DICOM files selected to be added to a study | From this drop-down list, the available studies to which the non-DICOM files can be added are listed.<br>Clicking on a study from the drop-down list adds the selected non-DICOM file to the study (visible in the study information section) and removes it from the list of unassigned non-DICOM files.<br>Repeat the process of adding the non-DICOM files to a study until all non-DICOM files have been added to a study or removed and the |


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| Number | Designation | Description |
|---|---|---|
| | | header **Please add the following files to a study or remove them** has disappeared from panel 2. |
| 3 | Remove selected files | You can remove selected files from the upload portal by clicking **Remove {0} selected file(s)**.<br>To remove all files at once, click **Select all** and then **Remove {0} selected file(s)**. |
| 4 | Select all / Deselect all | You can select all non-DICOM files using this button. Once all files are selected you can:<br>● Remove all files from the upload portal.<br>● Add all files to a study using the drop-down.<br>If all files have been selected, this button changes to **Deselect all**. |
| 5 | Study | The study panel displays information about the study. The non-DICOM files added to the study are also listed. |
| 6 | File information | Non-DICOM files successfully linked to study are displayed within the study panel. The number of DICOM and non-DICOM files added to the study is provided. |


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## How to select and add non-DICOM files to a specific study

1. Under **Please add the following files to a study or remove them**, click on the desired non-DICOM files to mark them as selected.
2. Click on the **Add x selected files to study** drop-down list and select the desired study.
   a. Repeat this process until all non-DICOM files have been added to a study or removed.
3. Continue to the verification and upload instructions.

## To upload your selected images/files

1. Review the patient information:
   a. Verify that you added the correct patient to the Upload portal.
   b. Optionally, enter your personal e-mail address or mobile phone number.
2. Check the study information:
   a. Verify that you added the correct study to the Upload portal.
   b. Optionally, add an **Optional comment** for each study that you upload.
   c. Review the documents linked to the study or add additional non-DICOM files.
3. Agree to the privacy policy & consent to share your medical images and personal data with the hospital via the upload portal.
4. Click the **Start upload** button.

**Important!**

Do not close your browser during upload.

Result: The status **Uploading** is displayed. Once the upload is complete, a success message will appear and you will have the option to start a new upload.

**Note:**

Accession numbers and Patient IDs will be anonymised during upload. This is to avoid mismatches in DeepUnity PACSonWEB

## File upload statuses

- **Uploading**: The upload is in progress. During this process, you can pause or cancel the upload.
  - **Pause upload**: Click this button to pause the upload.


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- **Resume upload**: Click this button to resume a paused upload.
- **Cancel upload**: Click this button to cancel the upload.

> **Note:**
>
> Click **reset** or **start a new upload** to return to the main page and start a new upload.

- **Validating files**: The upload portal is scanning for malware. We perform a malware scan of the images to ensure that no viruses have been uploaded that could infect the hospital/institution.
- **Upload successful**: The upload is complete. All files have been successfully uploaded to the hospital/institution.
- **Start a new upload**: After a successful upload, you can start a new uplod by clicking **start a new upload**.

Once the message **Upload successful** appears in the panel, you can safely close the browser or start a new upload.

### See also

Restrictions and error messages (Page 95)
Selecting your medical images/files for upload (Page 83)

## 5.4.3 Restrictions and error messages

The Upload Portal has some limitations.

- Non-DICOM files cannot be uploaded without a DICOM file.
- Non-DICOM files must be linked to a study.
- A maximum of 10 DICOM files can be uploaded at once.
- The file upload limit is configured by the hospital.

The table below lists possible error messages you might see while using the upload portal, along with their descriptions and solutions.

| Error message | Description | Solution |
|---|---|---|
| **You can only upload non-DICOM files if you also upload at least one DICOM file** | The upload portal requires that non-DICOM files are uploaded with at least 1 DICOM file. | You do not need to reset or start from the beginning, simply select a DICOM file to upload. |


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| Error message | Description | Solution |
|---|---|---|
| | This error message is displayed if you attempt to add a non-DICOM file without a DICOM file. | The non-DICOM files will be automatically linked to the newly added DICOM file, allowing you to initiate your upload. |
| **Total file size exceeds the limit** | The number of uploaded files can be limited by the hospital.<br>The amount of files (in GB) is limited per session. This limit is configured by the Hospital/Institution and is between 0-10 GB. If you exceed this limit, you will need to remove studies from the upload portal until you reach the desired max GB. | If you have multiple studies that exceed the limit, request a new upload code to upload the rest of the studies.<br>If 1 study exceeds the limit, the hospital/ institution will need to allow larger studies. |
| **Please add the following files to a study or remove them** | Non-DICOM files need to be linked to a study. When multiple DICOM studies are added to the upload portal, the non-DICOM files cannot be automatically linked. You will need to manually link the non-DICOM files to a study. | Select the files by clicking on them. This document icon will change to a checkmark icon. You can select multiple files to link to a study.<br>Click on the **Add {0} selected files to study** button.<br>Select the desired study from the drop-down.<br>The non-DICOM files will be added to the specified study and will no longer be displayed above the study. |
| **Currently added 'x' non-DICOM files. Adding** | It is not possible to add more than 10 non-DICOM files to a study. | To proceed with the upload, reduce the |


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| Error message | Description | Solution |
|---|---|---|
| **these would surpass the maximum of 10 non-DICOM files that can be added to a study.** | If multiple DICOM studies have been added to the upload portal and 1 or more non-DICOM files was added, all non-DICOM files must be either linked to a study or removed. | number of selected non-DICOM files to 10. |

### See also

Selecting your medical images/files for upload (Page 83)

Verifying patient and study information and upload images/files (Page 87)

## 5.4.4 Using the Upload Portal as a Source User/Source Admins

As a DeepUnity PACSonWEB Source User/Source Admin, you can access successfully uploaded studies via the worklist or the study list.

- All uploaded studies will have the label **Uploaded**.
- Non-DICOM files that were uploaded will be added to the studies and can be found in the **Documents** tab.

## Accession numbers and Patient IDs

**Restriction:**

You **cannot** search for a study by **Accession Number** or **Patient ID** as these fields have been anonymized during upload.

Accession Numbers and Patient IDs are not generated by DeepUnity PACSonWEB, but by hospitals. As the Upload Portal receives studies from different hospitals and regions, we cannot guarantee that an Accession Number or Patient ID is a unique number and therefore they cannot be used to automatically link a study to a patient. To avoid anomalies and mismatched studies, all studies uploaded to the Upload Portal are anonymized.


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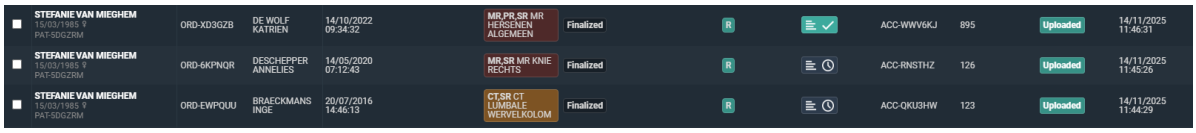
**Note:**

Patient ID anonymization and grouping

- During the upload, all patient IDs are automatically anonymized.
- All studies that belong to the same original patient are assigned the same anonymized patient ID.

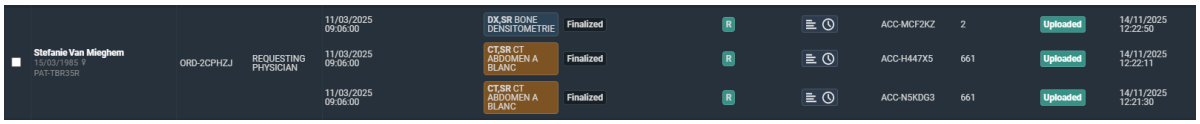
**One patient, different studies linked to different orders**

If multiple studies linked to different orders are uploaded for the same patient in one session, they are not grouped but listed as different orders with one patient ID.




**One patient, different studies linked to the same order**

If multiple studies linked to the same order are uploaded for the same patient in one session, they are grouped together and displayed as a single order with one patient ID.




This process should trigger the Source admin to link the studies to the correct patient via Patient merge to make them available as prior studies.

## Filtering for studies uploaded via the upload portal

You can filter for all studies that have been uploaded via the upload portal.

1. Go to **Contains labels** in the filters panel.
2. Select **Uploaded** from the drop-down list or type it as text.
3. Click **Apply**.

The workflow status of uploaded studies is automatically set to **Finalized** to avoid cluttering the radiologists' reading worklist.

## Information in the viewer

In the Series picker, studies that have been uploaded through the Upload portal are indicated with a cloud icon .


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Hovering over the icon displays a tooltip that includes the following information:

- If the study was uploaded by a user or via an upload code (patient/referring physician).
  - If uploaded by a user, the e-mail address of the user us displayed.
  - If they study was uploaded by a patient or referring physician, the upload code is displayed.
- The date and time of the upload (dd/mm/yyyy hh:mm:ss)
- If added during upload, any comments.

The same information can also be found in the **Study information panel** in the field **Uploaded study**.

**Additional properties**

- Document(s)
  - Like any other document received by DU POW, these can be viewed in the Documents tab.
- Comment(s)
  - Comments are visible in the following locations in DU POW:
    - **Series picker:** Hover over the Uploaded icon.
    - **Study information panel:** Found in the Uploaded study field.
    - **DICOM tag 0032,4000 StudyComments:** This is to ensure the comment(s) are sent when the Study is transferred.

## Verifying the content of the uploaded study

As a DeepUnity PACSonWEB Source Admin, you can change the label linked to an uploaded study.

You can remove the label **Uploaded** and link the new label **Uploaded-Reviewed**. This is available in the system by default.

Additionally, all the same options as for other studies within DeepUnity PACSonWEB are available, e.g., merging with an existing patient, DICOM transfer of the study to another PACS system.

## Auto-transfer uploaded studies

**Note:**

This needs to be configured by a Global Admin. To enable this feature, please contact DH Healthcare GmbH.


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If the Source setting **AutoTransferUploadedStudiesToPacs** is enabled, uploaded studies will automatically be transferred to the QR Server that have the setting **Auto-transfer Uploaded studie**s enabled.

### See also

Series picker (Page 176)
Study information (Page 220)
Using filters (Page 73)

## 5.5 User settings

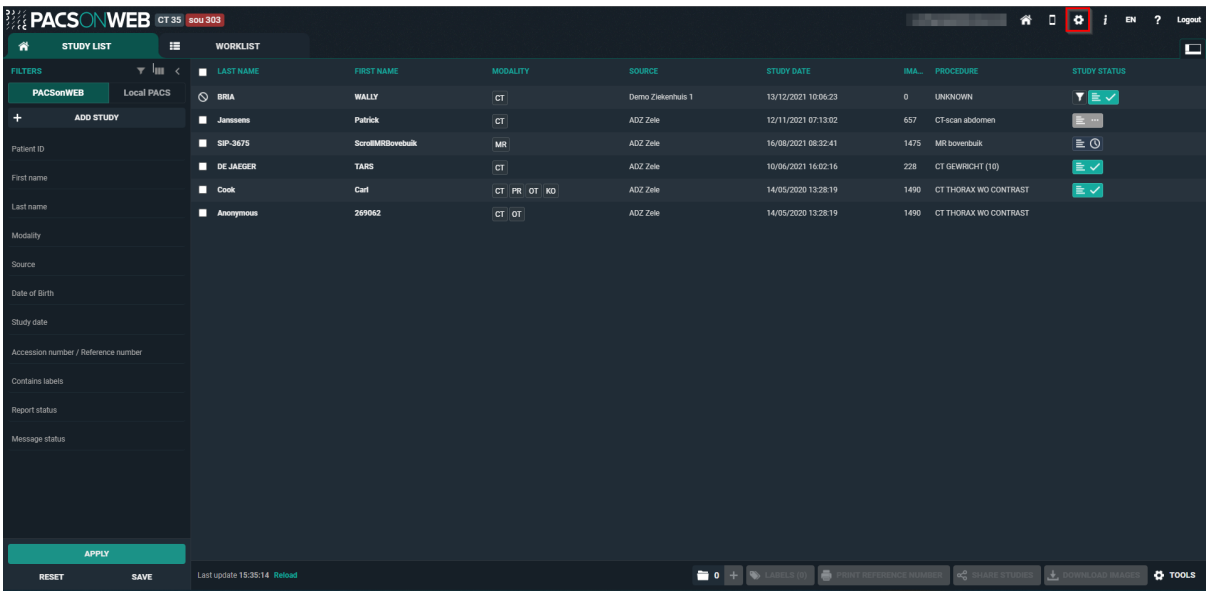
From the user settings you can:

- edit your user information
- manage your favourites list
- administer your groups
- manage your linked devices for two-factor authentication

To go to the **User Settings** page:

1. Hover over the cogwheel in the upper right corner.
2. Select **User Settings** from the drop-down list.

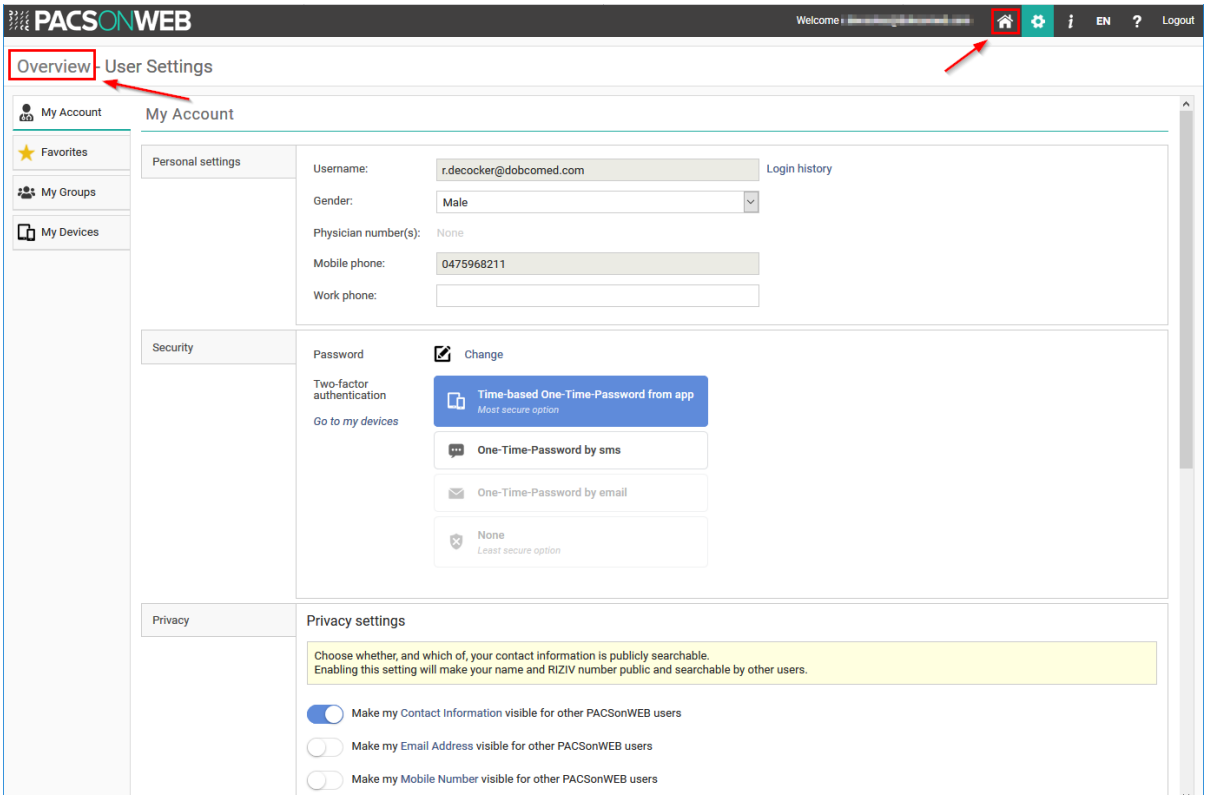
Clicking on your username in the top menu will also take you to User Settings.




There are several ways to return to the Overview page from **User Settings**:


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- Click **Overview** in the upper left corner.
- Click the house icon in the upper right corner.
- Click the DeepUnity PACSonWEB logo in the top left.




## 5.5.1 My account

Click on the cogwheel in the upper right of the page and you will be taken to the **User Settings**.

From this page you can view your account information.

## Personal settings

| Field | Description |
|---|---|
| *Username | Your username is your e-mail address |
| Login History | Displays an overview of the last 100 login attempts |
| Gender | Used to address you in automated e-mails |


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| Field | Description |
|---|---|
| *Physician number(s) | Physician numbers, linked to the account |
| *Mobile phone | Used to send OTP messages for activation, password reset and strong authentication |
| Work phone | Can be used to contact you in case of issues |

**Tip:**

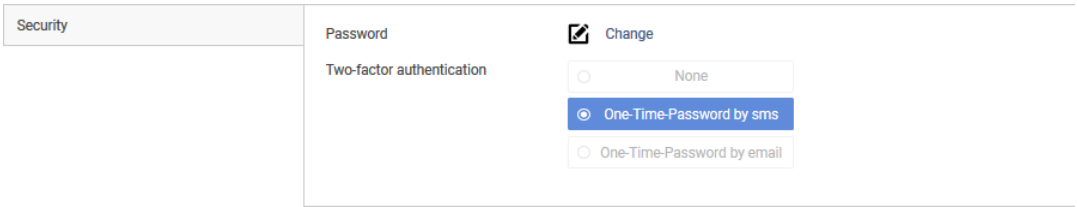
Fields, marked with * are Read-Only. To adapt, please contact the service desk.

# Security

## Changing your password

If your account is not linked to a domain with active directory, you can change your password by clicking the **Change** button.

If you have an active directory integration for your domain, this option will not be visible and you will need to contact your domain administrator to change your password.




To change your password:

1. Click **Change**.
2. Enter your old password and enter your new password twice in the dialog displayed.
3. Click the **Change password** button.

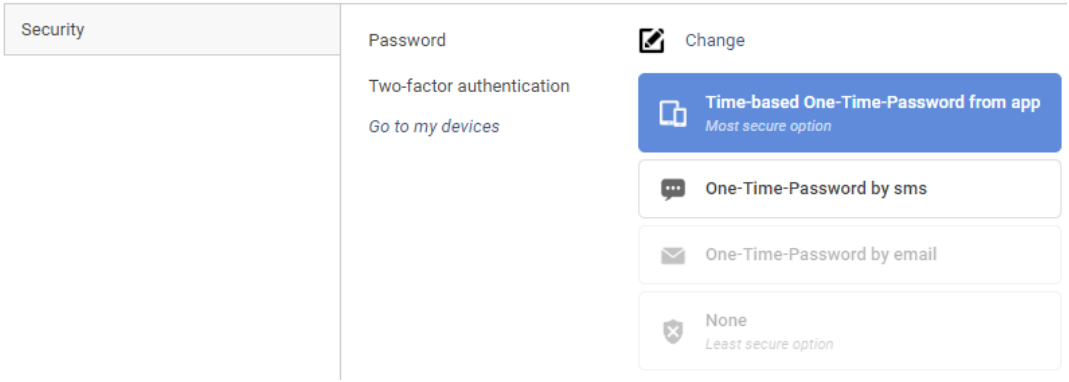
After clicking **Change password**, your old password will no longer be valid and you must use the new password to log in.

## Enabling two-factor authentication

For improved security, you can enable two-factor authentication on your account.


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For more information, refer to Two-factor authentication (Page 54)




If strong authentication is mandatory in your region, you must select a two-factor authentication method. In this case, the option **None** will not be available.

## Privacy settings

Here you can determine which information will be made public under **Favorites**.

- **Make my Contact Information visible for other DeepUnity PACSonWEB users**: If enabled,

  only your name and RIZIV number will be visible when a user searches for you using the **Find users** button under the **Favorites** tab.

  - This setting is enabled by default.
- **Make my E-mail Address visible for other DeepUnity PACSonWEB users**: If enabled, your e-mail address will be visible.
- **Make my Mobile Number visible for other DeepUnity PACSonWEB users**: If enabled, your mobile number will be visible.

If all privacy settings are disabled, your account will not be searchable within DeepUnity PACSonWEB.

Click **Save privacy settings** to save your changes.

## Mappings

The maps provide an overview of which sources you automatically receive studies, on which name, which physician number is linked and with which group these are shared.

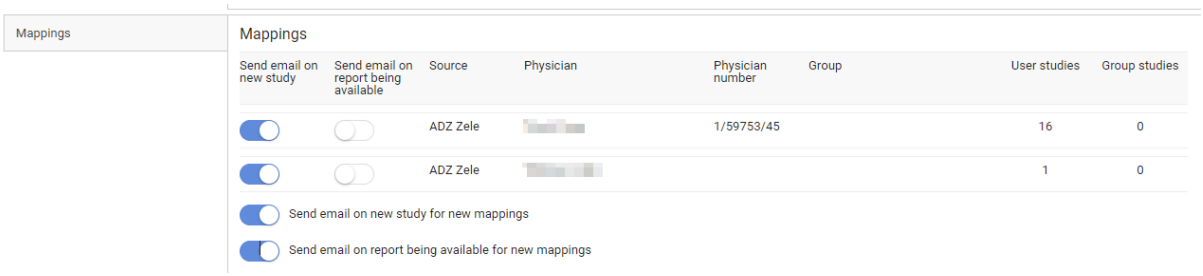
The switches at the front of each line determines whether or not you automatically receive an e-mail

- if a new study is available for the related source
- if the report is available for a study of the related source


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The setting **Send email on new study for new mappings** determines the default behavior to receive an e-mail when studies with images for a new source are available.

The setting **Send email on report being available for new mappings** determines the default behavior to receive an email when studies with a report for a new source are available.




## 5.5.2 Preferences

On the preferences page, you can customize your general settings, your viewer settings, default mouse actions, reporting settings, and custom window level presets.

**Note:**

After you changed a setting, a save button appears in the respective section. Make sure to click it to save your changes. Otherwise, they will be discarded.

## General settings

| Setting | Description |
|---|---|
| **Display language (DeepUnity PACSonWEB user interface)** | Select the user interface language from the drop-down list. Your browser language is used by default on the first login. If your browser language is not a supported DeepUnity PACSonWEB language, the default language is English. |
| **Communication language (E-mail, SMS, ...)** | Select the language for any communications you receive. |


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| Setting | Description |
| --- | --- |
| **Remember study list column order** | Enable this setting to save the column sorting of the study list (Configuring the study list (Page 68)). |
| **Remember study list filters** | Enable this setting to remember filters of the study list. |
| **Default start page** | This setting determines if the user is redirected to the study list or the worklist after performing one of the following actions:<br>• Logging into DeepUnity PACSonWEB<br>• Clicking the home button (overview button)<br>• Clicking the DeepUnity PACSonWEB logo<br>**Note:**<br>If the default start page is set to **Worklist** but the user does not have the permission to access the worklist, the user will be redirected to the study list instead. |
| **DICOM transfer settings** | See DICOM Transfer (Page 113) for a detailed explanation. |

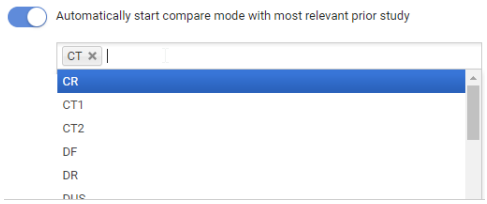
## Viewer settings

| Setting | Description |
| --- | --- |
| **Always load full image data for window level** | When enabled, the study page will load the full 16-bit images by default, instead of the 8-bit gray scale images. This allows you to use the window level functionality instantly. |


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| Setting | Description |
| --- | --- |
| **Right click for function switch** | When enabled, you can switch between the following functionalities by right clicking the mouse button:<br>● Window Level<br>● Scrolling<br>● Stepless zoom<br>● Pan<br>For more information: Image screen (Page 269) |
| **Show prior studies in series picker** | When enabled, all prior studies for the current patient that are accessible to you will be made available in the series picker automatically. |
| **Show relevant studies in a separate section of the series picker** | When enabled, three sections are available:<br>● Current study, relevant studies and other studies.<br>When disabled, two sections are available:<br>● Current study and other studies<br>Both options sort the studies in chronological order. |
| **Automatically start compare mode with most relevant prior study** | This option is only available if the **Show Prior studies in series picker** has been enabled.<br>● When opening a study, the current study and the most relevant prior will be opened automatically in compare mode.<br>● You can choose to do this only for a selection of modality types or, in case no specific modality types have been selected, it will be applied for all modality types. |


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| Setting | Description |
| --- | --- |
| |  |
| **Show patient history bar** | When enabled, the patient history bar will be displayed at the bottom. See History (Page 171) for more information. |
| **Disable local image cache** | Your institution may use the option Local image cache (Page 166) to make images available faster within the local network.<br>If you are using DeepUnity PACSonWEB outside the local network, the local image cache is not reachable, hence it is preferred to disable this option. |
| **Automatically publish new annotations** | When enabled, all drawn annotations are published immediately and can be viewed by everyone who has access to the study. |
| **Normalize window level within series** | When enabled, the window level is applied to the entire series, even if each image within the series has a different window level. This can be applied manually or via window level presets. This feature is disabled by default.<br>When disabled, the window level is applied only to the specific image, not the entire series. |
| **Keep annotation tools sticky until manually released** | When disabled, the selected tool will be deselected after one measurement/ annotation (default). |


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| Setting | Description |
| --- | --- |
| | When enabled, the tool will remain selected until you perform one of the following actions:<br>• right-clicking to release the functionality;<br>• selecting any other tool, measurement, or function (e.g. scroll, zoom, W/L, ...);<br>• pressing the Escape (Esc) key on your keyboard.<br>When enabled, a small icon next to your cursor will indicate which tool is currently selected, e.g.  . |
| **Shortcut keys** | Click the button to open the tab and configure your personal shortcut keys.<br>A detailed explanation on how to do this, is available here: Personal configuration shortcut keys (Page 111) |

## Default mouse actions

The default mouse actions can be customized for every modality type. The four possible actions are:

- Pan
- Scrolling
- Stepless zoom
- Window level

| Icon | Functionality |
| --- | --- |
|  | Click the pencil icon to change the default action for the listed modality type. |
|  | Click the plus icon to add the default mouse action for a new modality type. |


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| Icon | Functionality |
| --- | --- |
|  | To restore the original defaults click the cogwheel icon. |

When you have finished customizing the mouse actions, click on **Save Viewer Settings**.

## Reporting

| Setting | Description |
| --- | --- |
| **Settings** | This setting plays an audible beep when toggling speech recognition. The beep is never recorded in the audio fragment.<br>  **Make a sound when toggling speech recognition.** |
| **Style formatting** | You can predefine the formatting of 6 different heading levels that can be used when creating a report. |
| **Report signature**<br><br>**Important!**<br>This function only applies if you are authorized to edit the report in DeepUnity PACSonWEB. |  |


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| Setting | Description |
| --- | --- |
| | **Note:**<br>The signature image should be a dark, high-contrast signature against a completely white background.<br><br>If you edit a report in DeepUnity PACSonWEB, your signature will be automatically displayed when you click on **Save** and **Save and validate**. |
| **Workflow settings** | Default action on "save preliminary report". This will determine what happens after saving a report as preliminary.<br><br>Default action on report "Finished". This will determine what happens after clicking to save a report as: **Save and validate**, **Send for correction**, **Send for review**, **Send for approval** or **Back to author**. |

**Behaviour of the workflow settings:**

- Save as Draft: always **stay in study**
- Save as Preliminary: follow default action setting for preliminary report (see exceptions below)
- Save as Finalized: follow default action setting for report finished (see exceptions below)

  Exceptions:
  - If user settings is set to Stay in current study: always **stay in study**
  - If user setting is set to Return to worklist:
    - If the user doesn't use a selection: always **return to the worklist**
    - If the user uses a selection: go to the **next item in the selection**
    - Unless it's the last study in the selection: then **return to the worklist**
  - If user setting is Move to next:


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- If the study is not the last study in the selection: go to the **next study in the selection**
- If the study is the last study in the selection: **return to the worklist**

Activate report shortcuts also when report is not editable:

- When activated the shortcuts for report saving F8, Ctrl + F8 ... (See Reading workflow (Page 310)) can be used to change the study status when the report is not in Edit mode.

## Custom window level presets:

Users can create personal window level presets based on modality type.

The following parameters have to be filled in to create a preset:

- Name for the preset
- Source selection
- Modality
- Window Width
- Window Level
- Shortcut key from 1 to 9

Click the plus icon + to add the preset.

When the preset(s) have been added, click **SAVE WINDOW LEVEL PRESETS**.

## 5.5.2.1 Personal configuration shortcut keys

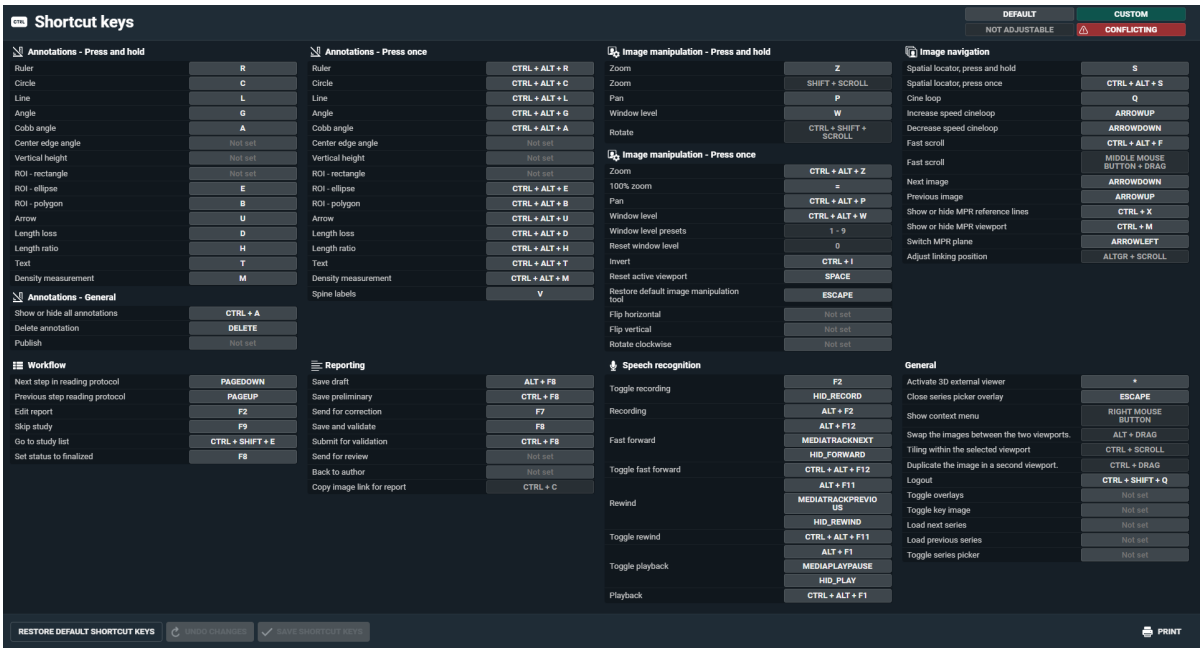
## Accessing the Shortcut keys configuration page

There are two ways of accessing the configuration of the personal shortcut keys.

1. In the viewer section, as mentioned in Preferences (Page 104).
2. By hovering over the settings icon in the top toolbar and clicking on **Shortcut keys** in the drop-down list.

A new tab will be opened where all the shortcut keys are listed and can be configured.


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## Shortcut key legend

As you can see in the screenshot above, the color-coded legend defines the following shortcut key states:

- **Default:** Shortcut key is the default for this action.
- **Custom:** Shortcut key is customized by the user.
- **Not adjustable:** Shortcut key is not adjustable.
- **Conflicting:** Shortcut key conflicts with another action (one or more actions use the same shortcut key)

## Adding or changing a shortcut key

You can customize a shortcut key or add an extra shortcut key to an existing one. You can have up to three shortcut keys for one function.

### Change a shortcut key

1. Click on the shortcut key you would like to change.
2. Define a new shortcut key.

### Add a shortcut key

1. Hover over the functionality that you want to add an additional shortcut to.
2. Click on the **Add new** icon. A new line will become available.


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3. Click on **Not set** and define the shortcut key.

   If you have made changes to the configuration of your shortcuts, the following warning will appear at the top of the screen: *"You have unsaved changes. These changes will not be effective until the configuration has been saved."*
4. To save your modifications click on **Save shortcut keys**

## Restore default shortcut keys:

To change the default shortcut key for only one shortcut, hover over the shortcut key and click on **Restore default**  .

To restore all default shortcut keys, click on the **Restore default shortcut keys** button.

**Supported attributes:**

- CTRL
- SHIFT
- ALT

**Unsupported buttons:**

- All numbers (0 ... 9)
- F5
- F11
- F12

## 5.5.2.2 DICOM Transfer

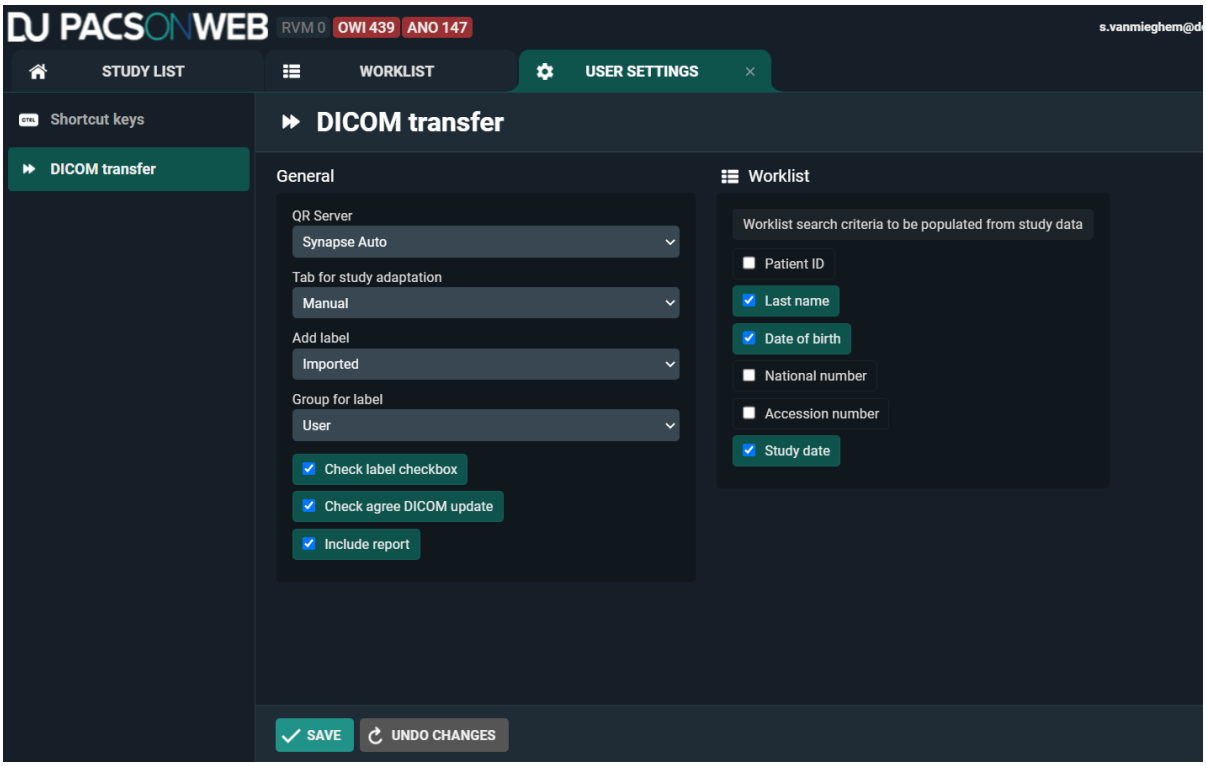
There are 2 ways of accessing the configuration of the personal DICOM Transfer settings.

1. As mentioned in Preferences (Page 104) in the General settings section.
2. By hovering over the settings icon and clicking **DICOM transfer**.

A new tab will open where you can configure all your personal settings.

When you have made all your desired changes, click **Save** at the bottom.


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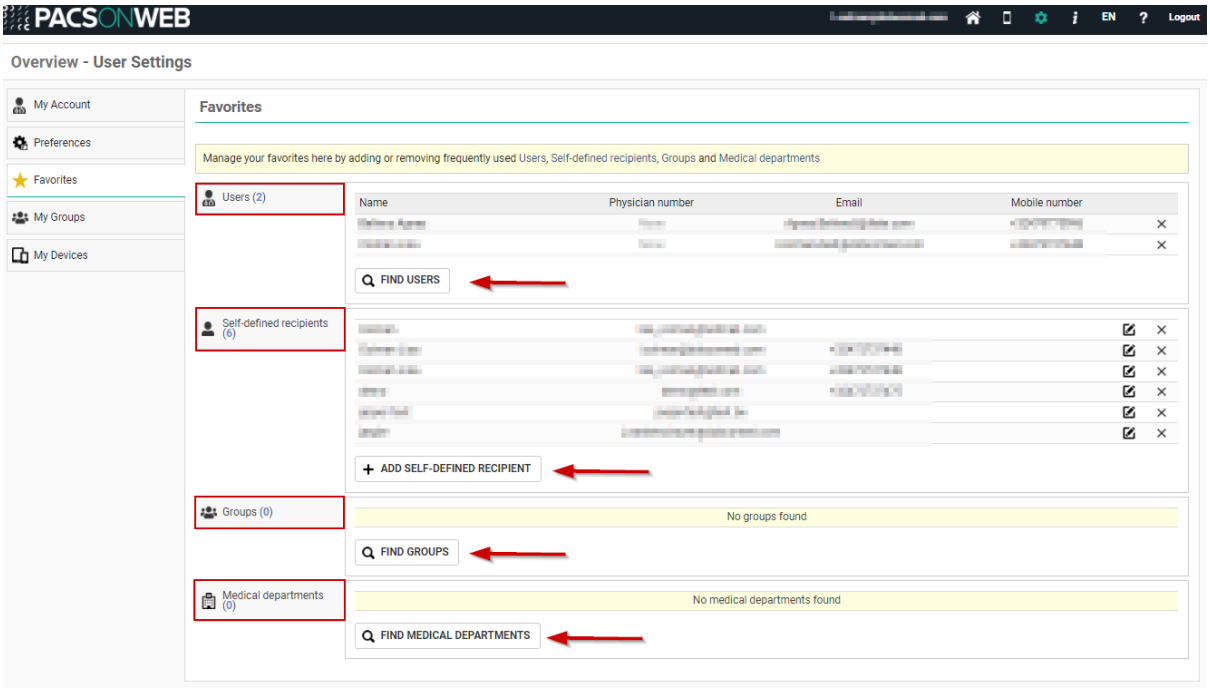

## 5.5.3 Favorites

You can add frequently used DeepUnity PACSonWEB users, groups and Self-defined recipients from the **Favorites** tab. The advantage of this is that when you share a study you will immediately have the user's or group's information available. You only need to select the user or the group.

To open **Favorites**:

1. Hover over the cogwheel in the upper right corner of the page.
   a. Select **User Settings** from the drop-down list.
2. Click on the **Favorites** tab on the left side of the page.


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To remove a favorite, click the **X** icon at the end of the row.

## Adding a DeepUnity PACSonWEB user to your favorites

To add a DeepUnity PACSonWEB user to your favorites:

1. Click on **Find Users**.
2. In the pop-up window, search for a user.
   a. You can search by name, for example.
3. Click **Filter**.
4. Select the user you wish to add.
5. Click **Add**.

This user has now been added to your favorites under **Users**.

## Adding a self-defined recipient to your favorites

A self-defined recipient is a user who is not registered with DeepUnity PACSonWEB.

To add a self-defined recipient to your favorites:

1. Click **Add self-defined recipient**.
2. In the pop-up window, fill in the mandatory fields.
   The mandatory fields are marked with an asterisk *.
3. Click **Add**.


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This recipient has now been added to your address book under **Self-defined recipients**.

## Adding a group to your favorites

To add a group to your favorites:

1. Click **Find groups**.
2. In the pop-up window, fill in your search criteria.
3. Click **Filter**.

   You will see a list of groups that match your search criteria.
4. Select the group you wish to add.
5. Click **Add**.

You can now find this group practice under **Groups**. The members of the group practice will also be displayed in the **Groups** table.

## Adding a medical department to your favorites

To add a medical department to your favorites:

1. Click **Find medical departments**.
2. In the pop-up window, enter the name of the department.
3. Click **Filter**.

   You will see a list of departments that match your search criteria.
4. Select the department you wish to add.
5. Click **Add**.

The department has now been added to your list of **Medical departments**.

## 5.5.4 My Groups

The **My Groups** tab provides an overview of all the groups of which you are a member.

As a member of a group, in addition to the studies you have requested, you can also view the studies of other group members.

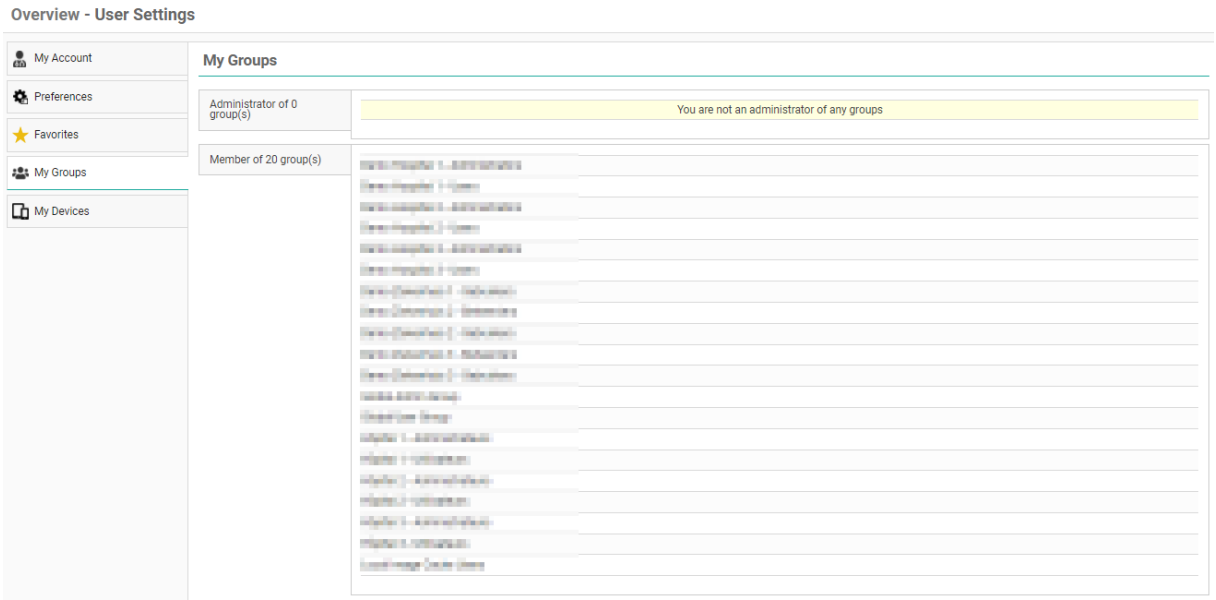
To view your groups:

1. Hover over the **Settings icon** in the top toolbar.
2. Select **User Settings** from the drop-down list.
3. Click the **My Groups** tab.


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From this tab you will see an overview of the groups for which you are:

- an administrator,
- a member.




## Administrator of group(s)

As an Administrator, you can change the group information and the group members and delegates.

### Making changes to your group

To make changes to your group:

1. Select the group from the list that you wish to modify.
2. Update or edit the information you wish to change.
3. Click on **Save Changes**.

### Managing group information

As an administrator you can:

- Provide information about the group practice.
  - Group name, description, address, etc.
- Make the group publicly available
  - When enabled, your group can be searched for, for example in order to share a study with the group, see Sharing studies from the study list
- Notify members on updates


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- When enabled, every member of the group will receive an e-mail when something is changed on the group.
- For exams shared with the group, you can further configure the setting to
  - Notify primary contact on share
  - Notify all members on share

- Manage and add members and delegates

## Managing members

In the group overview, there is a tab for **Members.**

In the list, find the desired member and

1. click on the member.
2. Enable the desired changes
   a. Make the member an **Administrator**
   b. Make the member a **Primary Contact**
3. Click the **Edit** button to save the changes made to that member.
4. To remove the member from the list, click **Remove**.
   a. Clicking **Remove** will close the Manage Member dialog and remove the selected member from the list of group members.
5. Click **Save changes** to save all changes made to the group.

**Important!**

Because this concerns your own account, you cannot change the administrator status. To change your administrator status, please contact your local DeepUnity PACSonWEB support.

## Add a member

From the group overview, you can add a member. To add a new physician to the group practice,

1. Click **Add member**.
2. Enter search criteria and click **Filter.**
   - The DeepUnity PACSonWEB users who fit your search criteria will be displayed.
3. Select the user you want to add and click on **Add.**

The user will be added to the group and can be seen in the **Members** list.


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### Add a delegate

To add a delegate,

1. click on the **Delegates** tab and then on **Add delegate**.
2. Enter the e-mail address of the delegate and then click **Add.**
3. Click **Save changes**.

The user will be added to the list of delegates for this group.

## Member of group(s)

From the My Groups tab, you will see a list of all the groups of which you are a member. To view information about the group, click on the desired group.

If you no longer belong to this group practice and wish to unsubscribe from it,

1. click **Unsubscribe**.
2. In the dialog that appears you can enable the following:
   - **Group retains access to my old studies**

     If enabled, this will allow the members of the group practice to continue to view your studies from the period that you belonged to the group practice.
   - **Keep my old studies**

     If enabled, you will still be able to view your studies from the period that you belonged to the group practice. This is enabled by default.
3. Click **Unsubscribe.**

You will no longer be a member of the group practice.

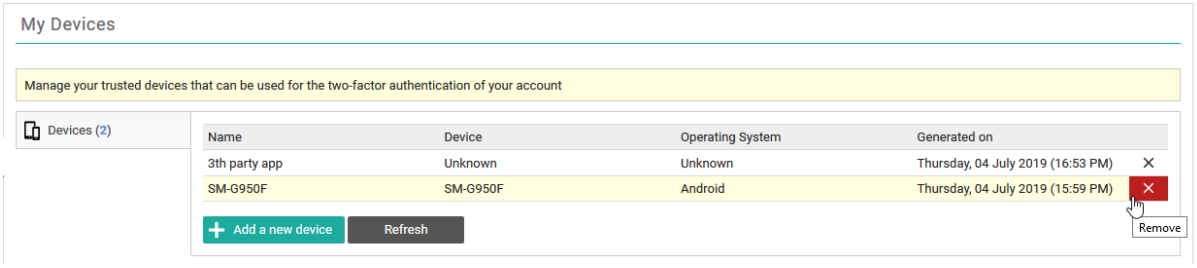
## 5.5.5 My Devices

On the page **My Devices**, you can manage all devices that have been linked to your DeepUnity PACSonWEB account for two-factor authentication.

To reach this page, hover over the cogwheel in the top toolbar and select **User Settings** from the drop-down list. Then click on **My Devices** on the left side of the page.

You will find a list of all your linked devices.


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- You can link additional devices by clicking **Add a new device**.

**Tip:**

You can link up to 5 devices simultaneously.

- You can unlink a device by clicking **X** at the end of the respective entry.

If you are unlinking the last trusted device, your method for strong authentication will automatically be converted to **One-time password by sms** or, in case no mobile number is registered, to **One-time password by e-mail**.

## See also

Linking your mobile device to DeepUnity PACSonWEB (Page 291)

Two-factor authentication (Page 54)

## 5.5.6 Text blocks

## Creating a Text block:

Text blocks can be created in two ways:

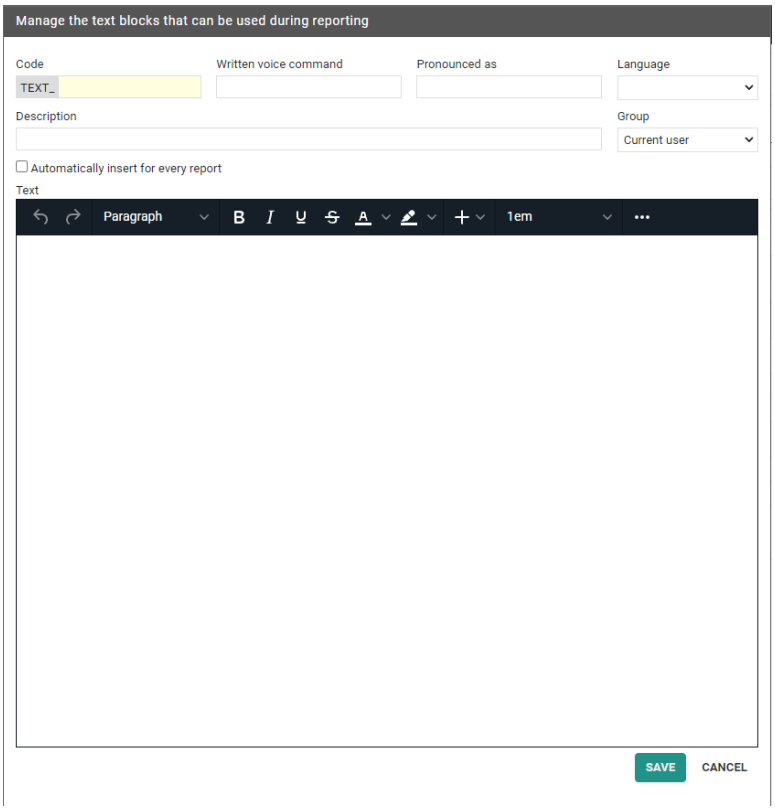
- In the **user settings**
- In the viewer report pane

### Creating a text block from the user settings

To create a new text block from the user settings:

1. Open the **Text blocks** tab.
2. Click **Add new text block** to create a new text block.
   The following window will open:


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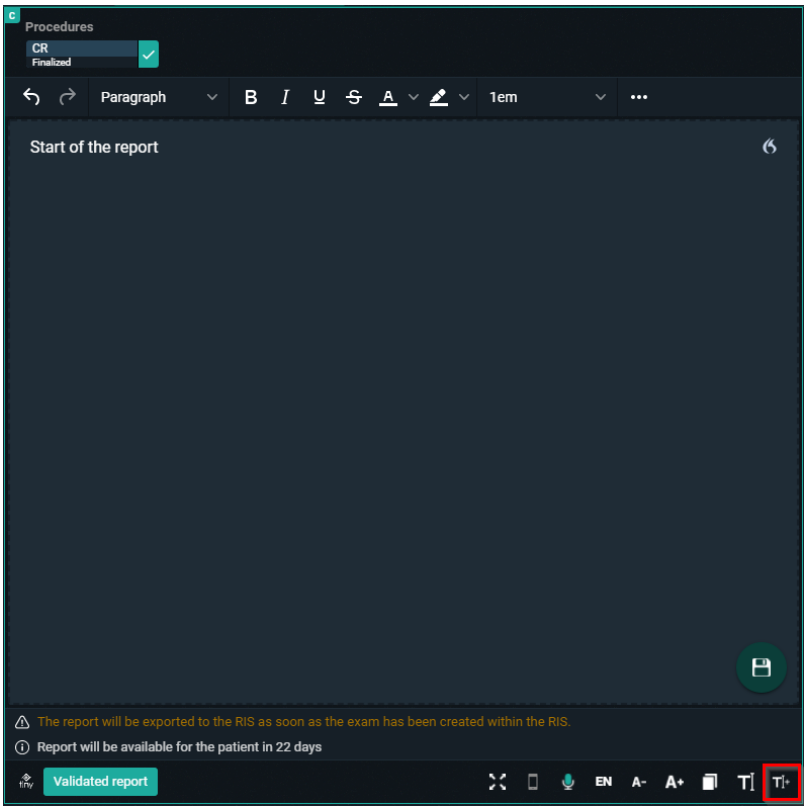

3. Fill in the fields.
4. Click **Save**.

## Creating a new text block from the viewer report pane

To create a new text block from the report window in the viewer:

1. Open a study.
2. Click on the report window.
3. Click on the **T]+** icon in the corner of the report pane.


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This opens the same window as when you add a text block from the user settings.

## Fields to complete

The following fields must be completed when you create a new text block from either the user settings or in the viewer report pane.

- **Code:** used as shortcut when typing the report
- **Written voice command:** voice command for inserting text block
  - For the written voice command only the following characters are allowed: a-zßàáâãäåæçèéêëìíîïðñòóôõöùúûüýþÿœšž.

    If an unsupported character is used, a warning will be displayed at the bottom of the page.
- **Pronounced as:** written version of how to pronounce the voice command
- **Description:** description for the text block (not mandatory)
- **Group:** save the text block for current user or a group (admins only)
- **Text:** the report text


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**Important!**

If a textblock exists for a user AND a user group, the user specific text block will be used.

If the same code exists for multiple user groups, the first text block will be used.

**Tip:**

You can insert a specific text block for every report you create by ticking the **Automatically insert for every report** option.

Variables:

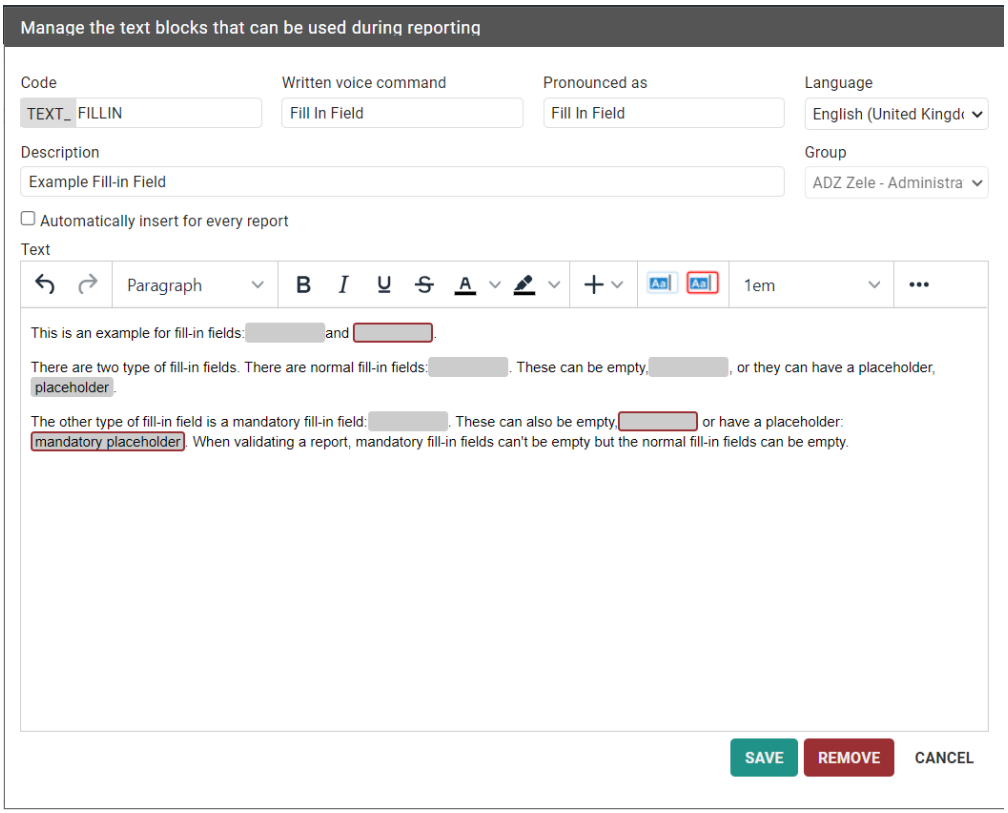



The variables **Diagnostic Question** and **Clinical Information** can be added to the report.

These will be updated with the actual information of the study. If no value can be found, nothing is inserted in the report.


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# Fill-in Fields




Fill-in fields can be inserted into a **Text block**.

- Add a fill-in field
- Add a mandatory fill-in field

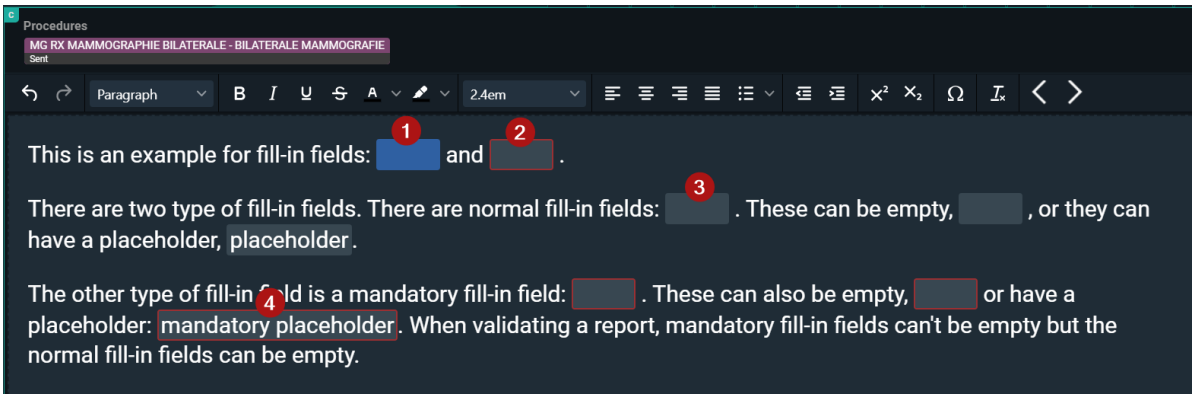
Fill-in fields allow you to create predefined reports where certain values or text need to be added later.

## Create a text block with fill-in fields

- You can pre-populate the fill-in fields with a placeholder or leave them empty.
- You can easily change the value of a fill-in field while writing the report if the content does not apply to that particular study.
- You can navigate through fill-in fields using voice commands, keyboard shortcuts and SpeechMike buttons.

During report creation


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| Number | Designation | Description |
|---|---|---|
| 1 | Active field | The active fill-in field is highlighted in blue. This indicates it is currently selected and ready for input. |
| 2 | Mandatory fill-in field | Mandatory fill-in fields are displayed with a red border.<br>**Note:**<br>Mandatory fill-in fields cannot be left empty. You will not be able to validate a report with empty mandatory fill-in fields and an error message will prompt you to fill in all mandatory fields before validating the report. |
| 3 | Non-mandatory field | Non-mandatory fill-in fields are displayed in grey. |


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| Number | Designation | Description |
|---|---|---|
| | | **Note:**<br>If left empty, these fill-in fields will be replaced by whitespace and will allow you to validate the report. |
| 4 | Pre-populated field | For both mandatory and non-mandatory fill-in fields, pre-populated text is displayed within the fill-in field in the same font and size as the rest of the text. |

All fill-in fields will be converted to plain text from the moment your report is saved. The fill-in fields will be displayed when editing the report again.

## Inserting a Text block

Text blocks can be inserted in a report in multiple ways:

- By dictating the speech command (speech)
- By typing the text block code in the report
- By selecting a text block code from the list

### Speech:

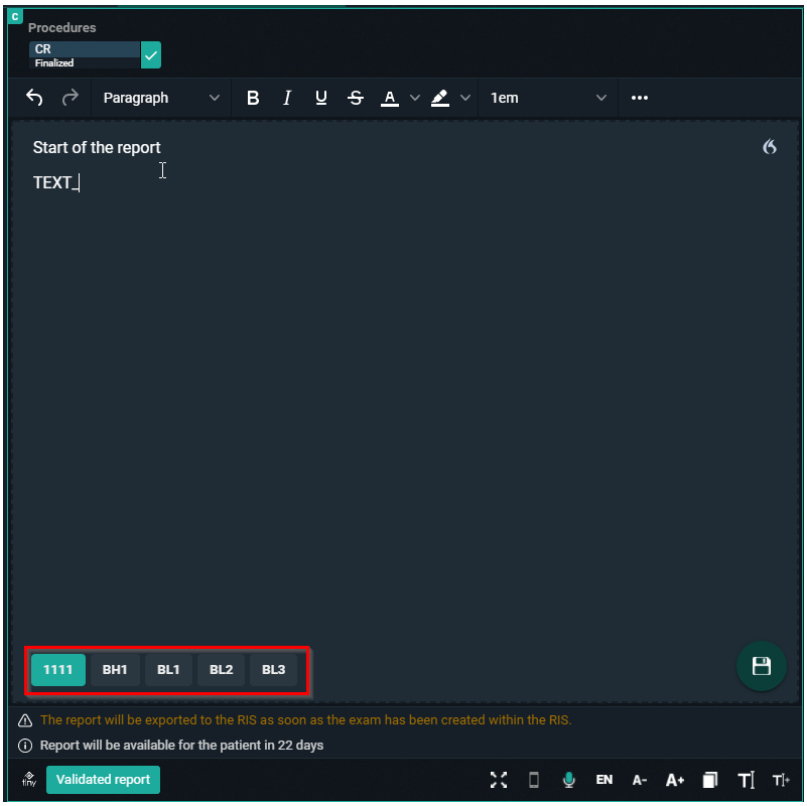
Dictate the command **insert**, followed by the text as saved in the **pronounced as** section of the text block.

### Typing:

Type the prefix TEXT_ followed by the code of the text block and press enter on your keyboard. The first 5 results are displayed in alphabetical order at the bottom of the report window.

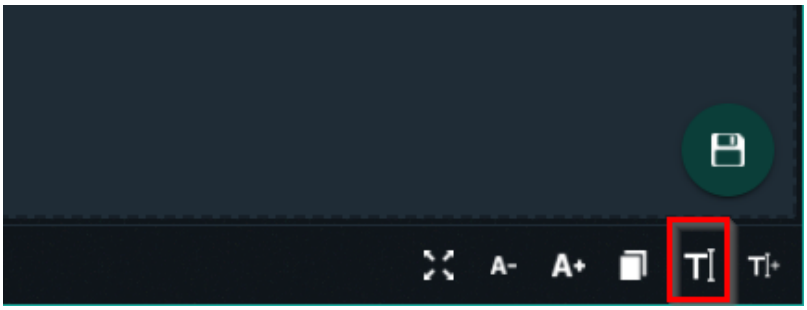
- Entering will insert the first text block from the list.
- The other text blocks can be selected by clicking or typing more characters of the text block code.


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### Text block button:

Click on the text block button to open the overview of the text blocks the user has access to.




To search for a text block, enter 3 or more characters. Click on the text block to insert it.

Clicking **Manage text blocks** will redirect the user to the **User Settings** page.

## 5.6 Additional access conditions

It may occur that there are certain studies in your study list that are not, by default, accessible.


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This is caused by one of the following additional access conditions:

- Strong authentication (Page 128)
- Break-The-Glass (Page 128)
- Payment required (Page 131)

How to gain access to such exams is explained on the related page in the user manual.

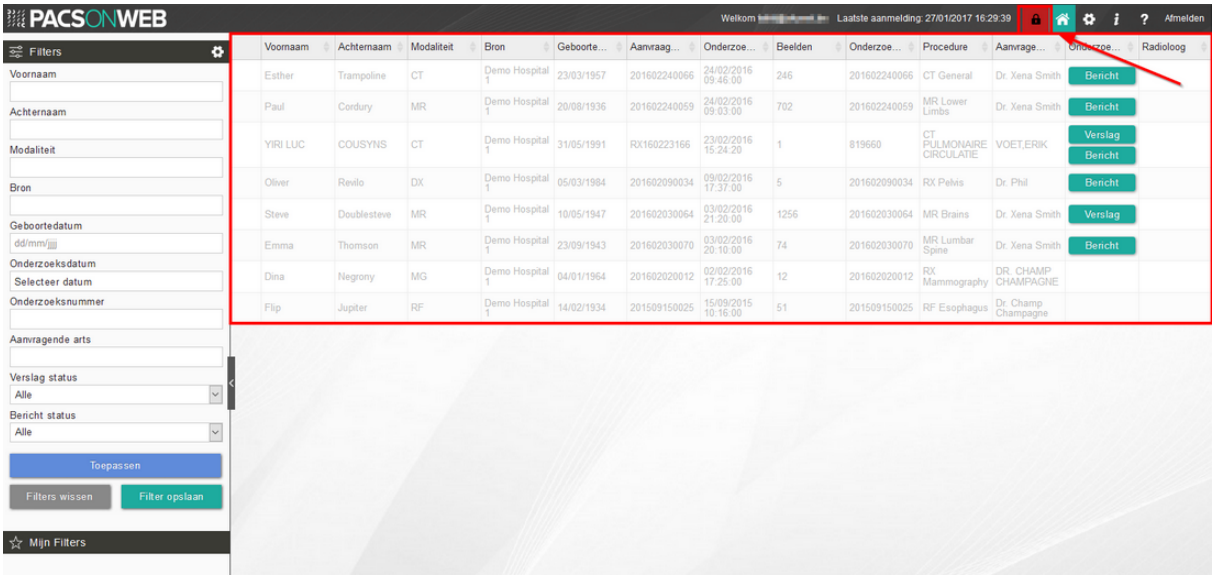
## 5.6.1 Strong authentication

The radiology departments have the possibility to enforce strong authentication to access their studies (e-ID, two-factor).

- An indicator on top of the page will light up in red to indicate that strong authentication is required.

  By clicking this indicator, it is possible to login using strong authentication.

If you are logged in to DeepUnity PACSonWEB without strong authentication, such exams will not be accessible / selectable.



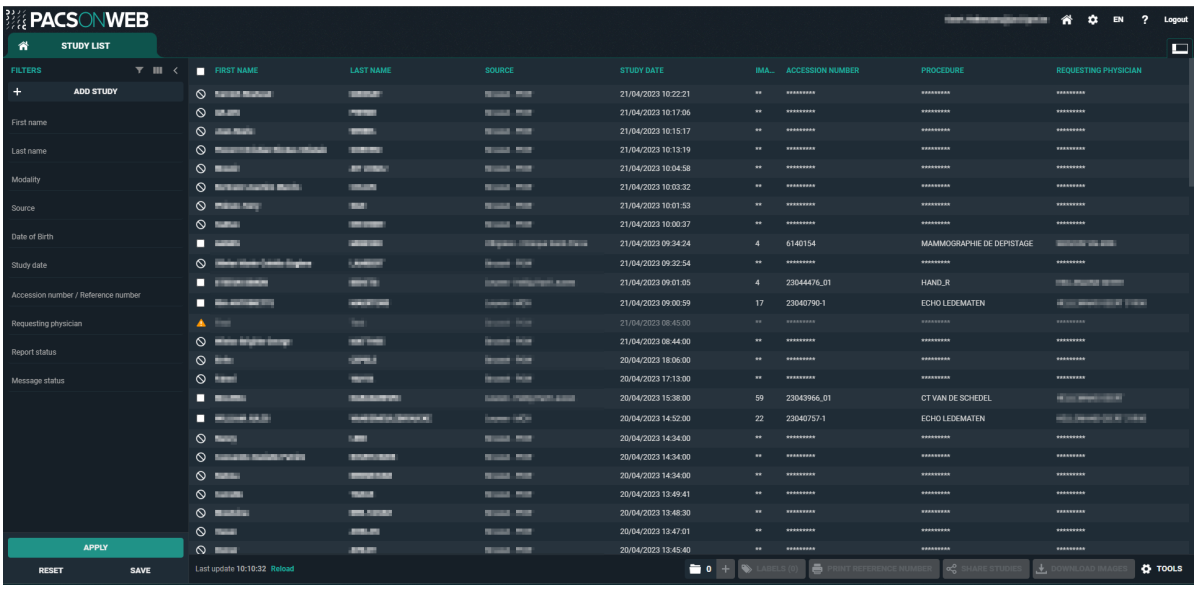

## 5.6.2 Break-The-Glass

A radiology department may allow studies to be visible, by default, to the requesting physician only.

- If you are part of a user group or group practice and you have been granted access to a study requested by a colleague, the corresponding line in the study list will be grayed out with only the patient's name, date of birth and study date visible.


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- Access to such a study is only possible by specifying the reason why access is required.




To access the study:

1. Click on the corresponding line in your list.
2. Enter the reason why you need access.
3. Click **Unlock study**

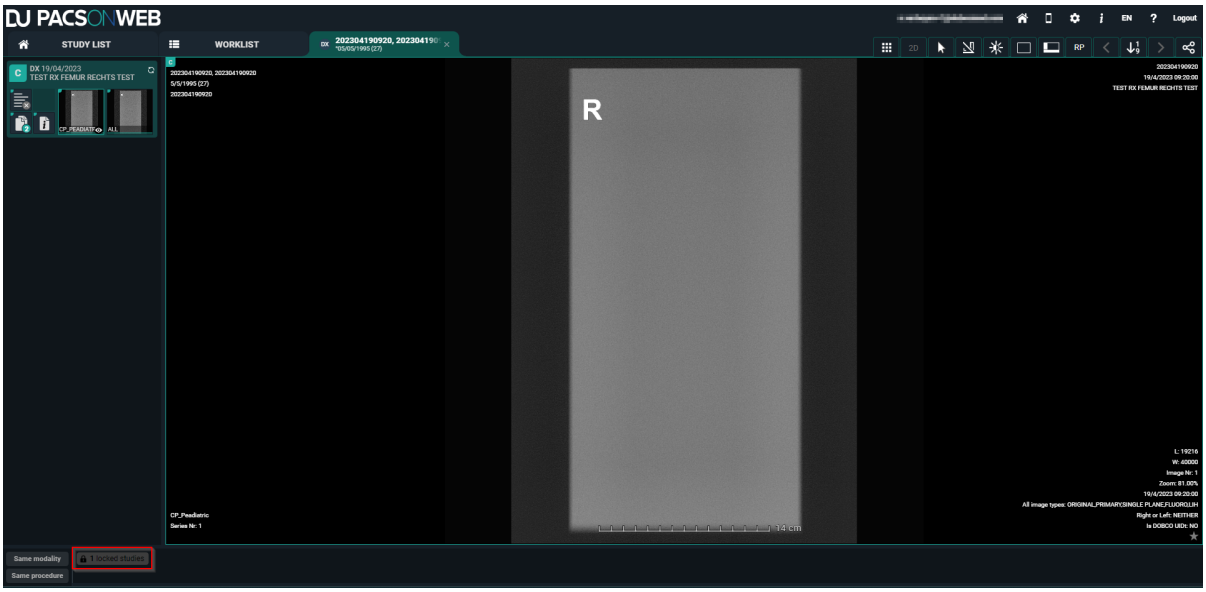
**Tip:**

After entering the reason, the study will be available for 7 days, unless specified otherwise by the related radiology department.

At the bottom of the study page, the History (Page 171) of exams for the same patient is displayed.

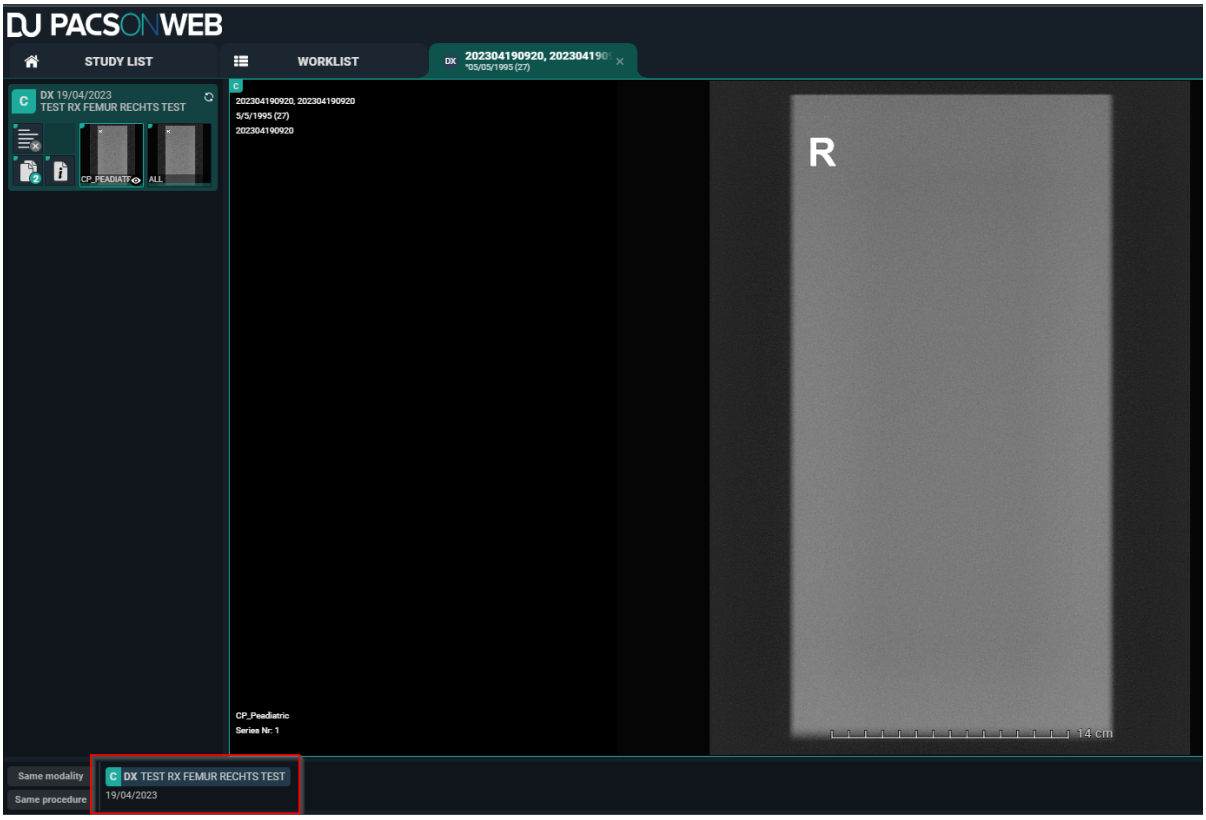
Here you will find studies for which you already have access, but also studies that require you to enter a reason for gaining access.


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1. Click the label **x locked studies**.
2. In the pop-up window, enter the reason why you need access to the study.
3. Click **Unlock study**.

Upon submission of the reason for access, the related studies become visible.





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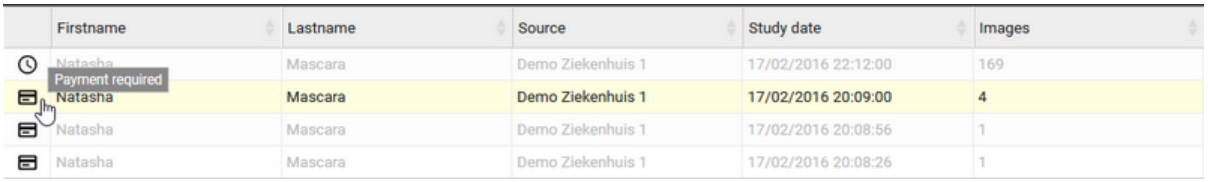
**Important!**

If you are an administrator for the related radiology department, you can consult who has accessed the exam, when it was accessed and for what reason.

For more information, see Access to the study (Page 239).

## 5.6.3 Payment required

For patients that are logged in but need to pay for access to their studies, all unpaid studies will be grayed out.




To initiate a payment:

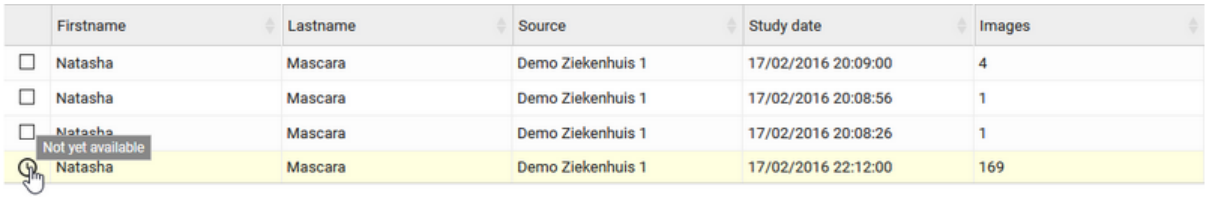
1. Click the Bank Card icon.
2. In the **Payment required** pop-up window, click **Make payment**.
   You will be redirected to the payment page.
3. Select to pay by credit card (MasterCard or VISA) or Vipps.

The study will be available to you, once a payment has been made.

After payment you are redirected to the study list and studies are now accessible.

A radiology department can decide that a study should not yet be accessible for the patient.

In this case, the study is listed grayed out in the study list with a clock icon in front.





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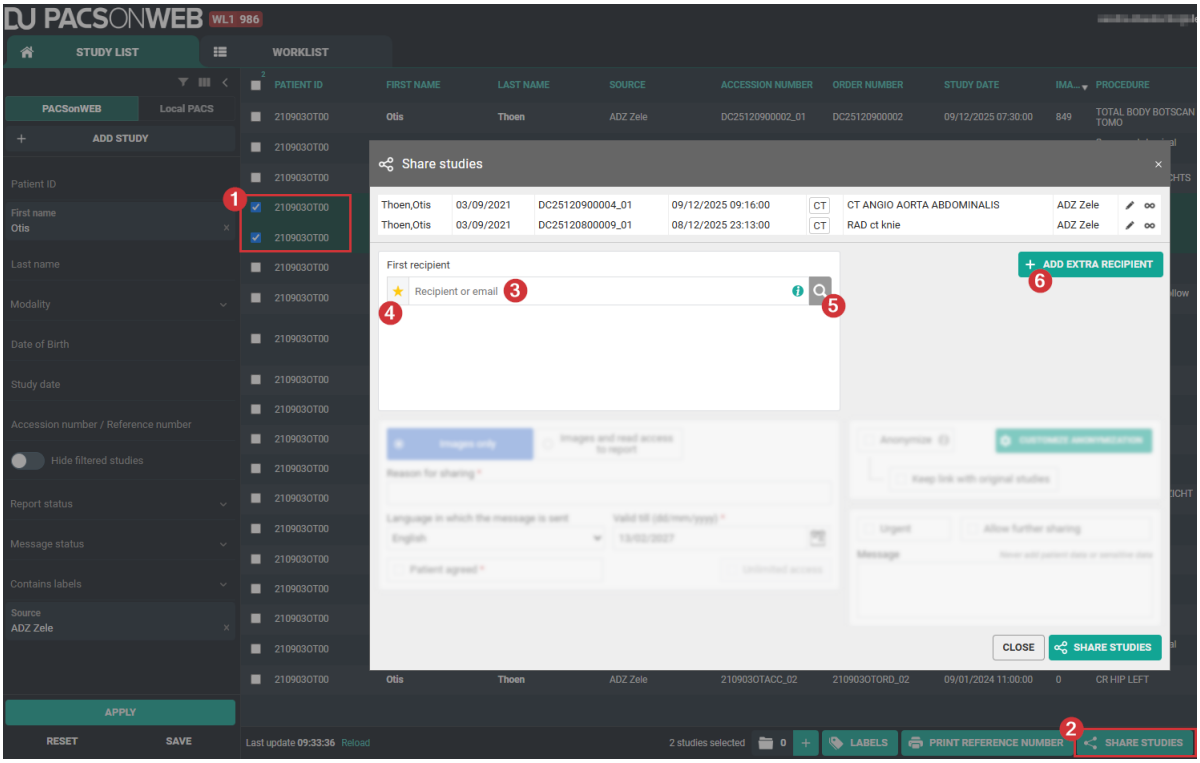
## 5.7 Sharing studies

It is possible to share studies with other users, groups, radiology departments, or self-defined recipients (i.e. someone that does not have an account on DeepUnity PACSonWEB, e.g. a patient).

On the study list, check the studies that you wish to share (1) and click **SHARE STUDIES** (2). A pop-up window opens where you can configure the details for sharing.

**Important!**

Sharing multiple studies at once is only possible if all studies originate from the same source.




1. Choose the recipient. You can add more recipients by clicking **+ADD EXTRA RECIPIENT** (6). You can share studies with up to 3 recipients.
   - Type in the name, email address, phone number, or physician number (3) to open a drop-down list and select the respective recipient.
   - Click the star icon (4) to open your favorites and select a recipient from there.

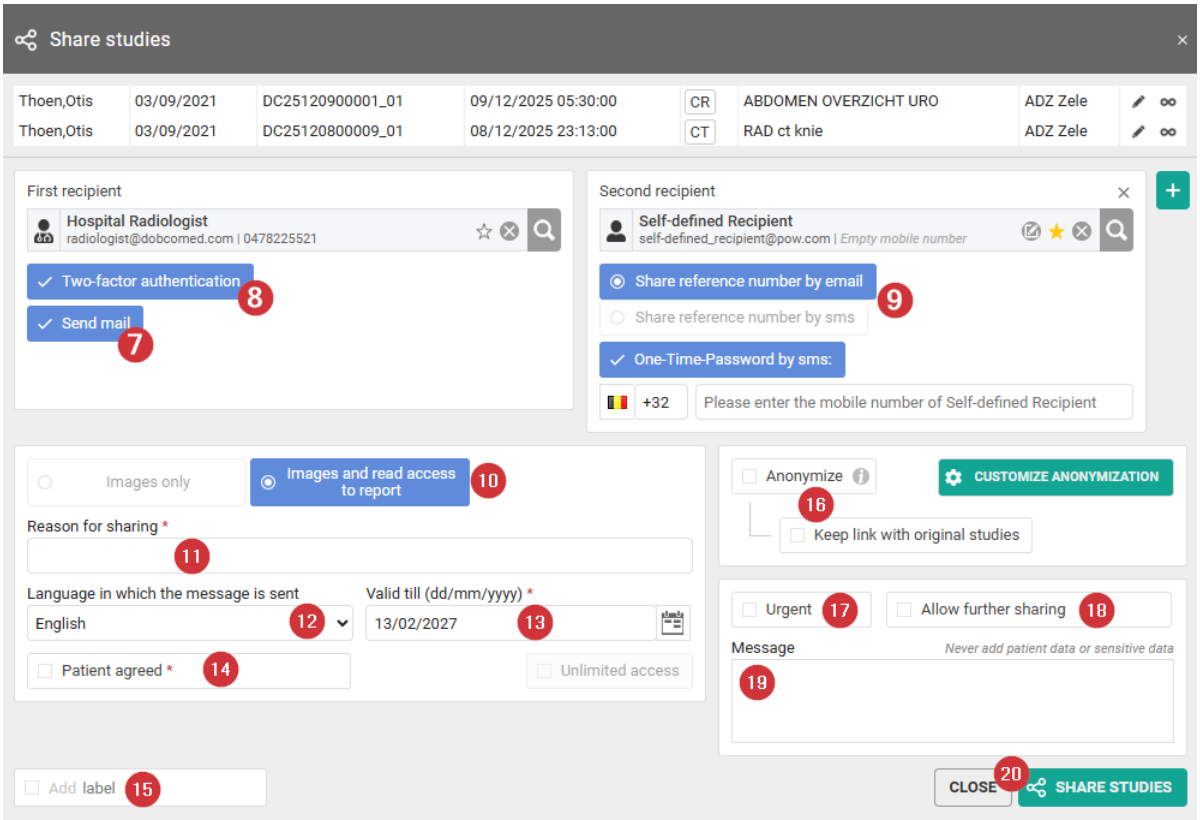

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**Tip:**

You can add favorites to your list by toggling the star icon next to the recipient or by adding them in the user settings.

- Click the search icon (5) to open the detailed search to look for your recipient. If the recipient is not a user, a group, or a medical department, you can create a self-defined recipient by clicking **Create new recipient**.
- If your recipient is not a user, a group, or a medical department and you don't want to create a self-defined recipient, you can enter the recipient's email address into the search field and select **Use this email address**.

2. Choose how the recipient will be notified. Depending on the type of recipients, different options are available.




- Users, groups, and medical departments will find the shared studies in their PACS systems. You can choose to notify them via email and ask for two-factor authentication.
  - **Send email** (7): If you select this option, the recipient will receive an email containing information that a study has been shared, the name of the person who shared the study, the patient's name, a description of the study, the date of the study, and a link to the study.


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SSN: DOC-4353978

- **Two-factor authentication** (8): If you select this option, the recipient will receive a one-time password (OTP) that needs to be entered before access is given.

  **Important!**

  If the user enters an incorrect OTP in 5 consecutive attempts, access will be blocked. It can be unblocked by the service desk or an admin user of the sending radiology department.

- Self-defined recipients and recipients via email will receive a reference number to access the shared studies. Choose if the reference number will be sent by email or SMS. Additionally, you can ask for two-factor authentication via one-time password (9).

3. Set the parameters for sharing (10).
   - **Images only**: This option is only available for sharing studies with a self-defined recipient.
   - **Images and read access to the report**.
4. Enter a reason for sharing (11).

   The reason is not communicated to the recipient but is mandatory and will be registered in DeepUnity PACSonWEB.
5. Select the language in which the recipient will be notified about the shared studies (12).

   By default the language of the first recipient is selected but you can change the language by using the drop-down menu.
6. Set a validity date for the access rights (13).
7. Check the **Patient agreed** checkbox (14).

   Without the patient's consent, the study may not be shared.
8. Optionally, add a label to the study (15). Check the **Add label** checkbox to open the drop-down menu for selecting the label. Choose the user or group that the label should be set for.
9. Optionally, anonymize the study (16).

   The name of the patient will be replaced.

   **Important!**

   The report for an anonymized study will never be accessible, even if you selected the option **Images and read access on the report**.

10. Optionally, mark the notification email **Urgent** (17).


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"Urgent" will be added to the subject line of the notification email.

11. Optionally, allow further sharing (18).

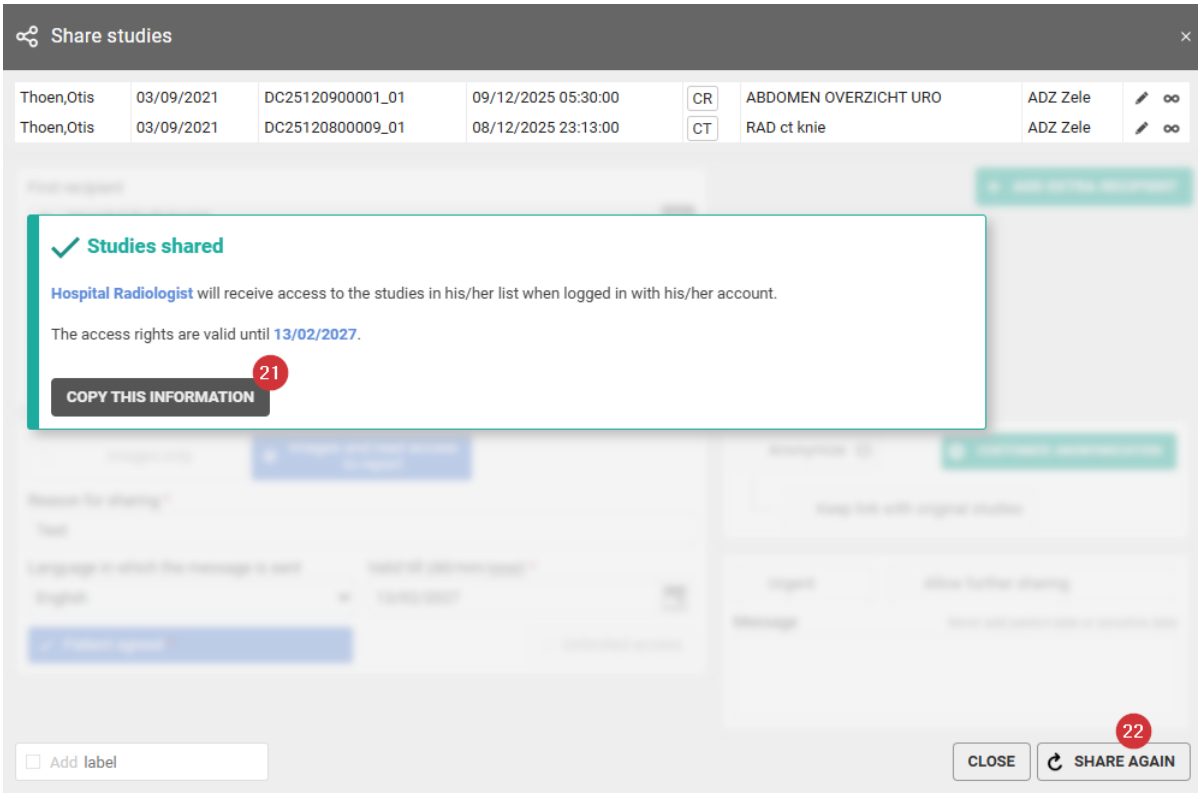
    This option is not available for self-defined recipients.

12. Optionally, add a message (19).

    The message will be added to the notification email. In case the recipient is a user, the message is also displayed in the series picker when the study is opened in DeepUnity PACSonWEB.

13. Click **SHARE STUDIES** (20).

    A pop-up window with information about the shared studies will be displayed.




- Click on **Copy this information** (21) to copy the content of the pop-up to the clipboard so e.g. it can be pasted into your own email.
- Click **Share again** (22) to share the same set of studies again with another recipient.

**Tip:**

All emails that are sent automatically when sharing a study can be customized by the sending radiology department. Please contact the service desk to have this configured.

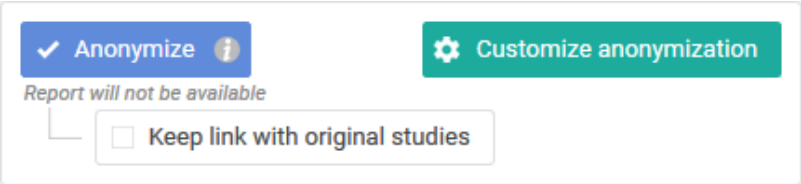

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## See also

Anonymizing studies (Page 136)
Favorites (Page 114)

## 5.7.1 Anonymizing studies

If you tick **Anonymize**, the following patient and study information will be adjusted:




- The patient's name is adjusted: the surname is replaced by 'Anonymous' and the first name is replaced by 6 digits.
- The accession number is adjusted to: ANON + Base29 series (unique in DeepUnity PACSonWEB).
- The order number is adjusted to: ORD + Base29 series (unique in DeepUnity PACSonWEB).
- The Study Instance UID is adjusted to: a UID, starting with 1.2.528.56.1006 (unique worldwide, as registered by DH Healthcare GmbH).

If you check the option **Keep link with original studies (Pseudonymize)**, a user has a link between the pseudonymized study and the original study if he has access to both studies within DeepUnity PACSonWEB.

**Important!**

The report will never be available, even if the option **Images and read access to report** has been selected.

We refer to the following pages for more information about the possibilities on customized anonymization:

Default anonymization (Page 136)
Using anonymization schemes (Page 138)

### 5.7.1.1 Default anonymization

If you have access to the option for using anonymization schemes, the button **CUSTOMIZE ANONYMIZATION** will be available.


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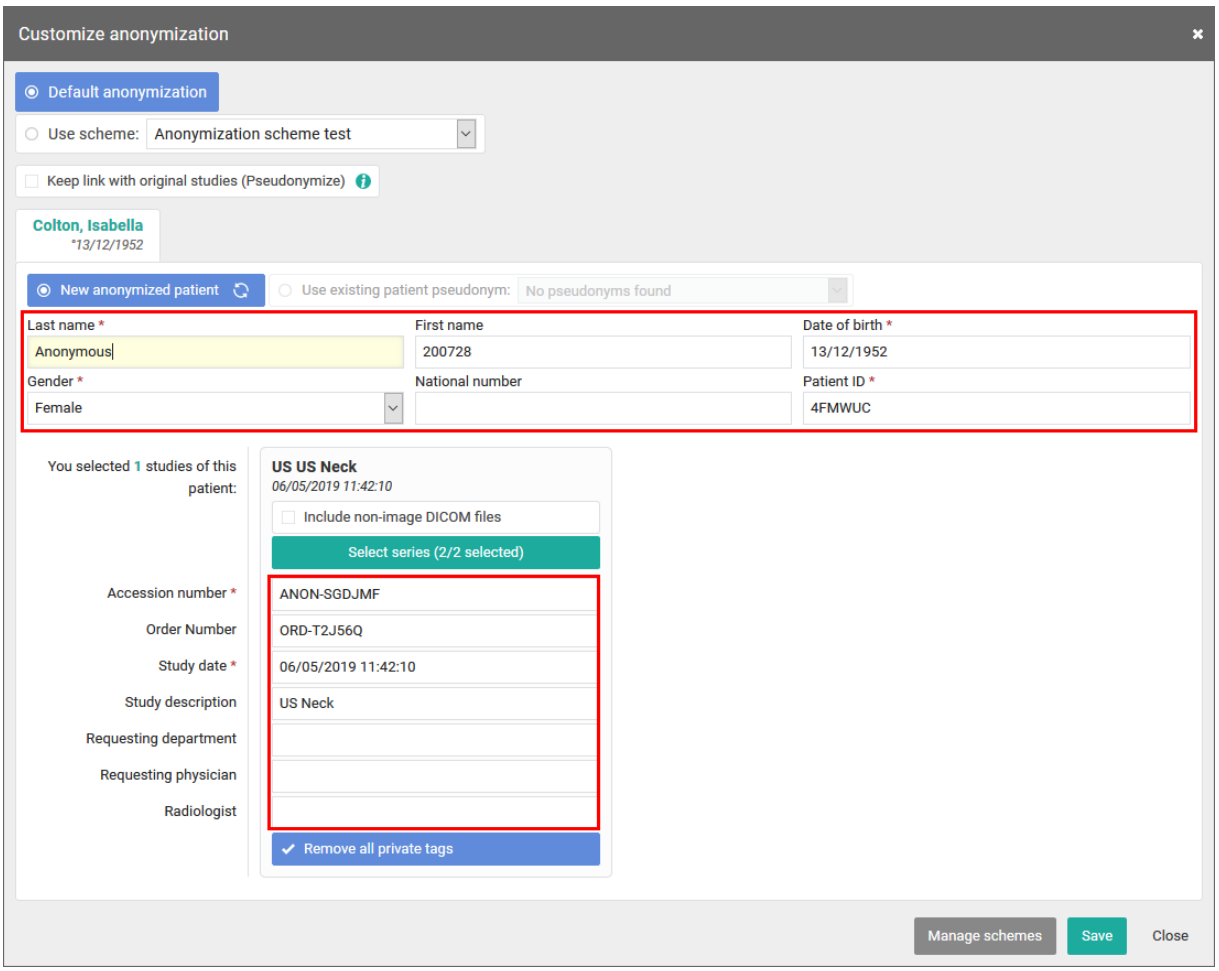
SSN: DOC-4353978

This allows you to adjust patient and study data yourself, either manually (see below) or using an anonymization scheme (see Using anonymization schemes (Page 138)).

With default anonymization, the following patient and study data will be adjusted as follows:

- The patient's name is adjusted: the surname is replaced by 'Anonymous' and the first name is replaced by 6 digits.
- The acession number is adjusted to: ANON + Base29 series (unique in DeepUnity PACSonWEB).
- The order number is adjusted to: ORD + Base29 series (unique in DeepUnity PACSonWEB).
- The Study Instance UID is adjusted to: a UID, starting with 1.2.528.56.1006 (unique worldwide, as registered by DH Healthcare GmbH).

Additionally, you also have the option to manually adjust all marked fields.





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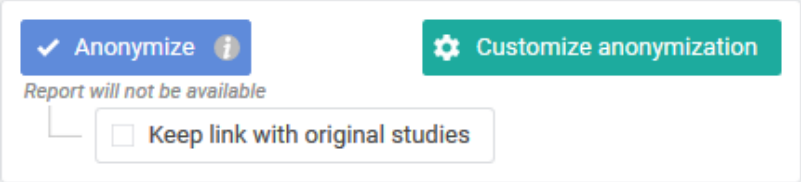
## 5.7.1.2 Using anonymization schemes

**Important!**

This is an optional functionality within DeepUnity PACSonWEB. If interested, you can contact DH Healthcare GmbH for more information.

This option can be activated for all studies from a specific source.

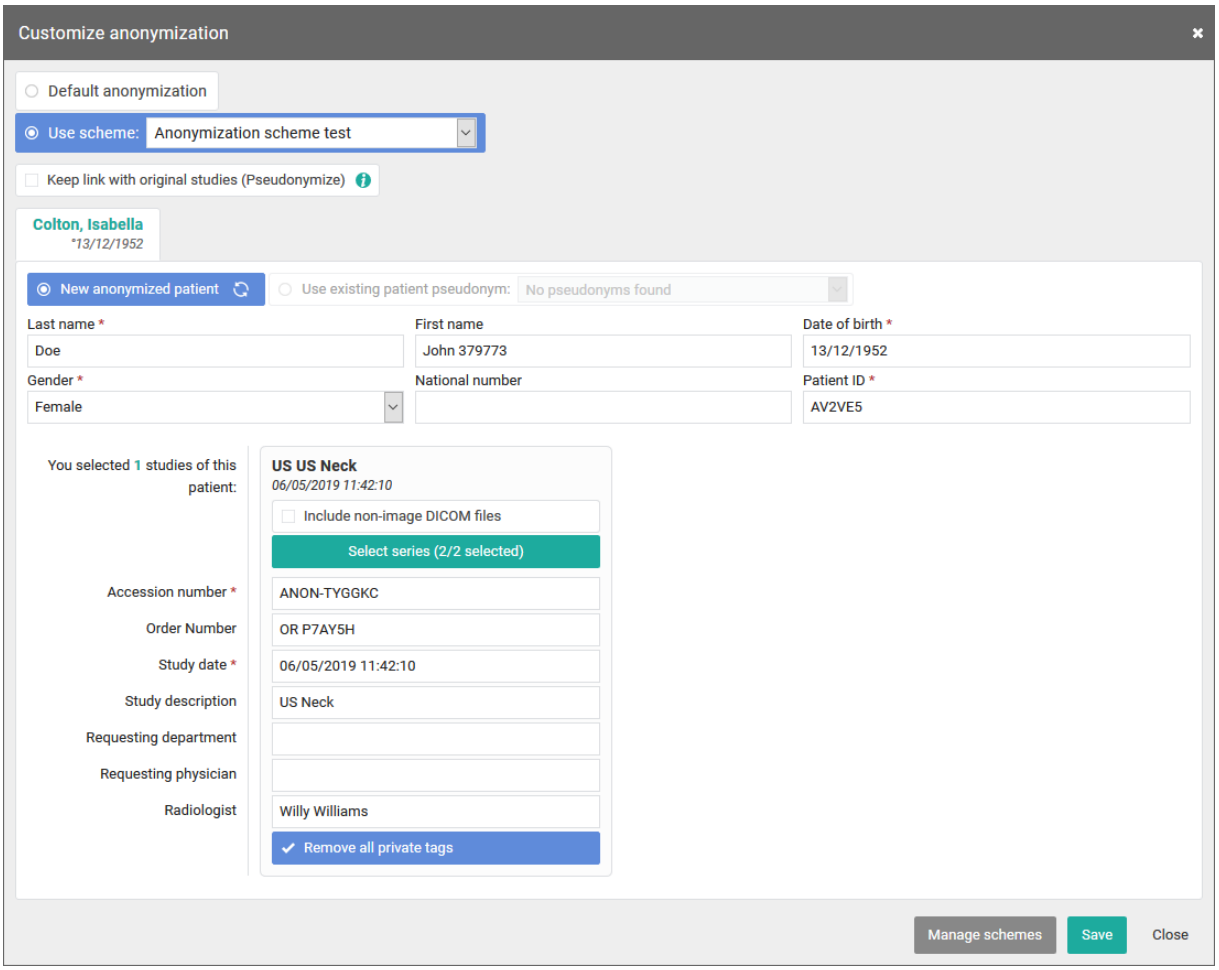
If you wish to use an anonymization scheme, click **Customize anonymization** .




Click on **Use scheme** and select the scheme that you want to use.

This changes the patient and study data, as defined in the selected scheme.


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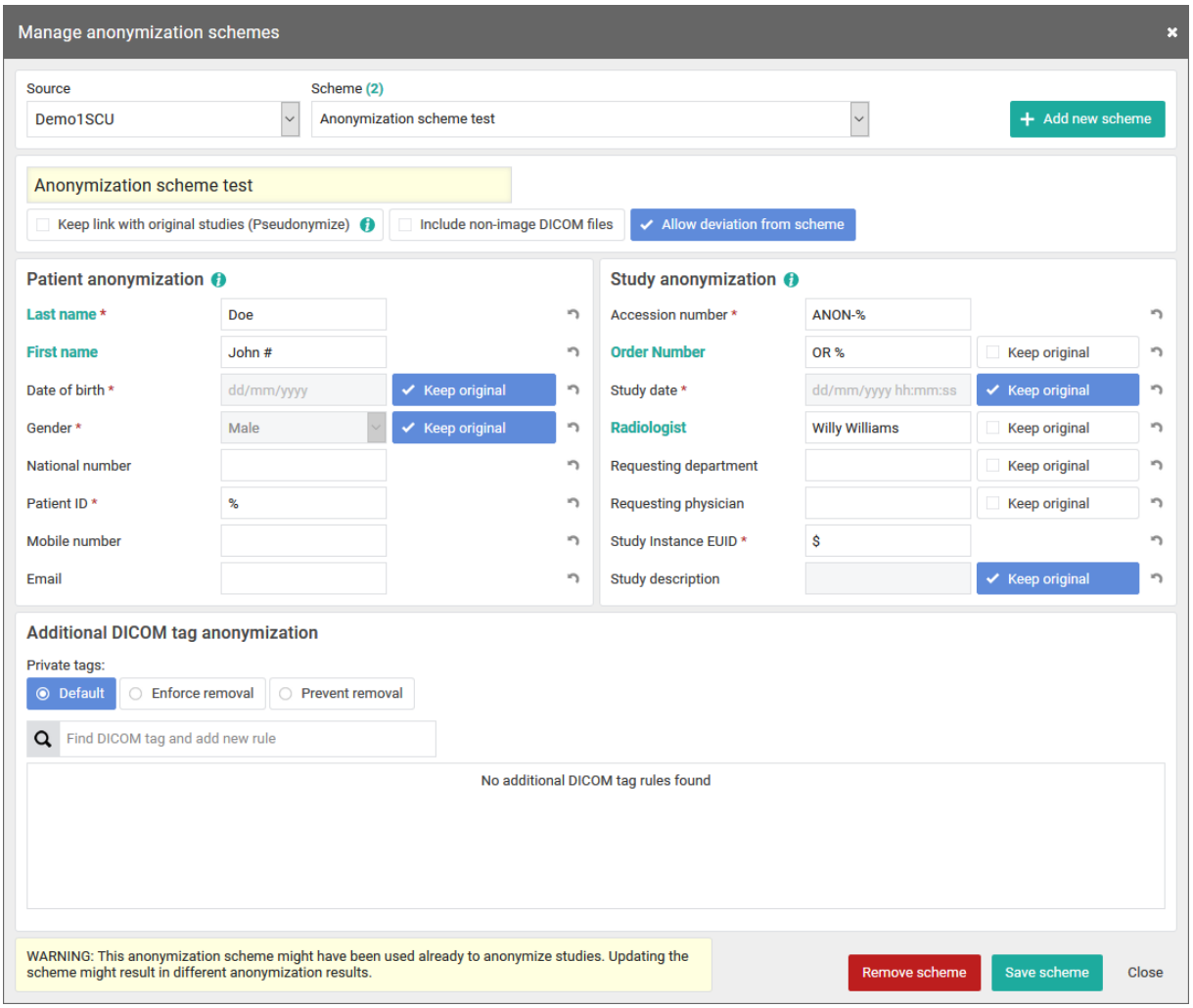

The option is available to all users who have access to a study from the source for which this option has been activated.

## Manage schemes:

**Important!**

This option is only available for source admins.


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1. Select the scheme you want to change or click on **Add new scheme**:

2. Enter or adjust the name of the scheme:

Check the following options if required:

- **Keep link with original studies (Pseudonymize)**:

  A user has a link between the pseudonymized study and the original study if he has access to both studies within DeepUnity PACSonWEB.

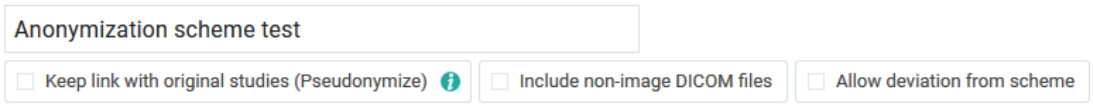
- **Include non-image DICOM files**:

  Determines if non-DICOM files such as Structured Reports, Dose reports, ... are made available in the anonymized study or not.

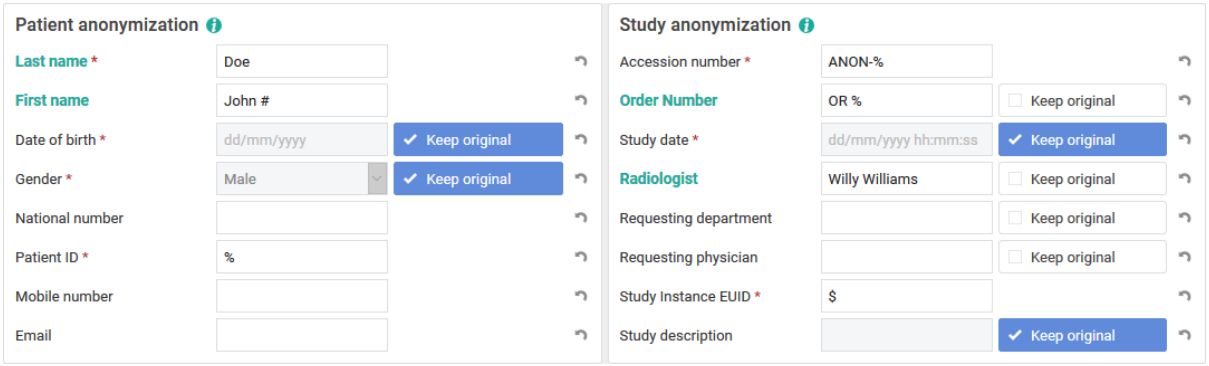
- **Allow deviation from scheme**:

  This determines if it is permitted or not to manually change the adjusted patient and study data when using the scheme.


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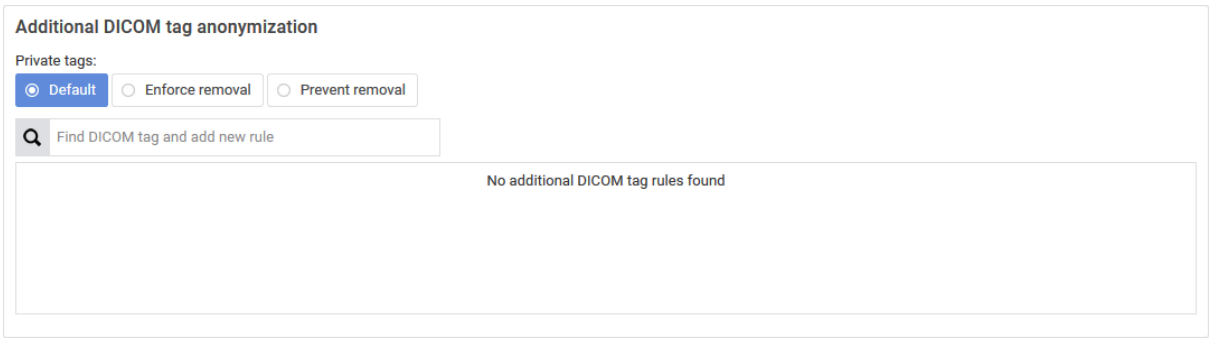



3. Enter the desired adjustments to patient and study data for the schedule:



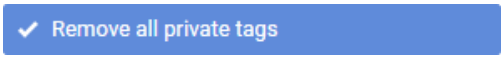

Date of birth, gender, study date and description are retained by default, unless explicitly configured otherwise.

4. Specify how private DICOM tags should be dealt with:



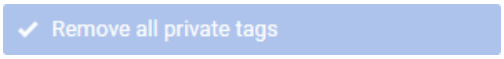

- **Default**:
- If **Allow deviation from scheme** is checked, the user can still choose whether the private tags will be removed or not.

  By default, they are deleted.

- **Enforce removal**:

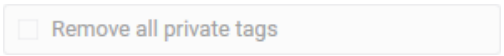
  This enforces removal of the private tags. The user cannot change this when using this scheme.


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- **Prevent removal**:

  When using this scheme, the user is not able to remove the private tags.

- **Find DICOM tag and add new rule**: You can add additional DICOM tags to the scheme.

5. Finally, you can delete an existing schedule or save a new or modified schedule:

**Remove schemeSave schemeClose**

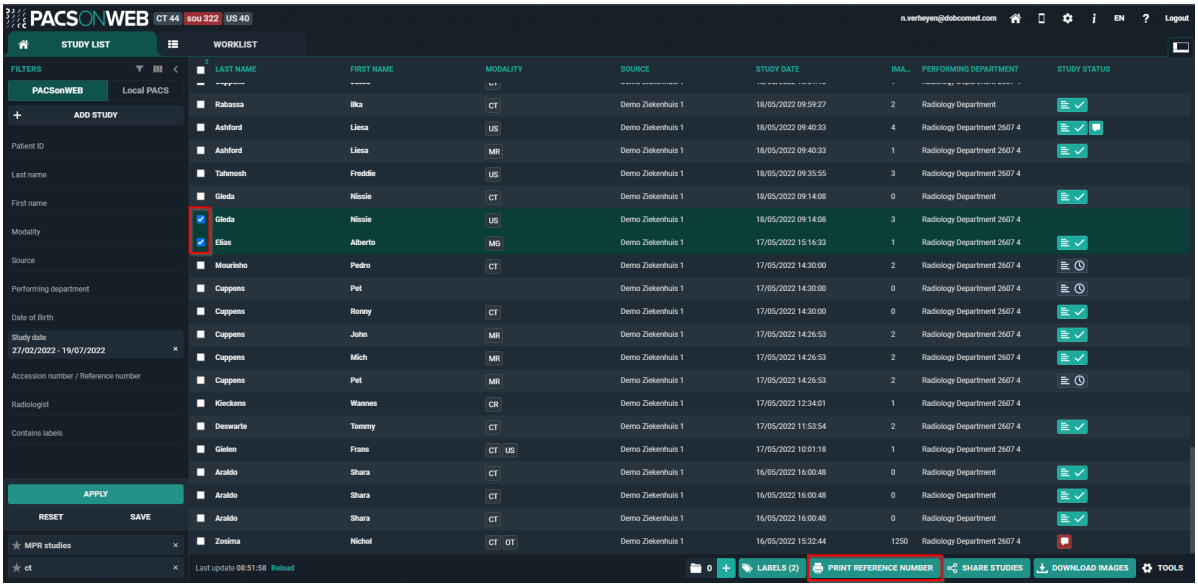
Select the scheme you want to change or click on **Add new scheme**.

## 5.8 Printing reference number from the study list

This instruction explains how to generate a reference number that can be used to access one or more studies online.

## STEP 1: Select the studies for which you want to print a reference number

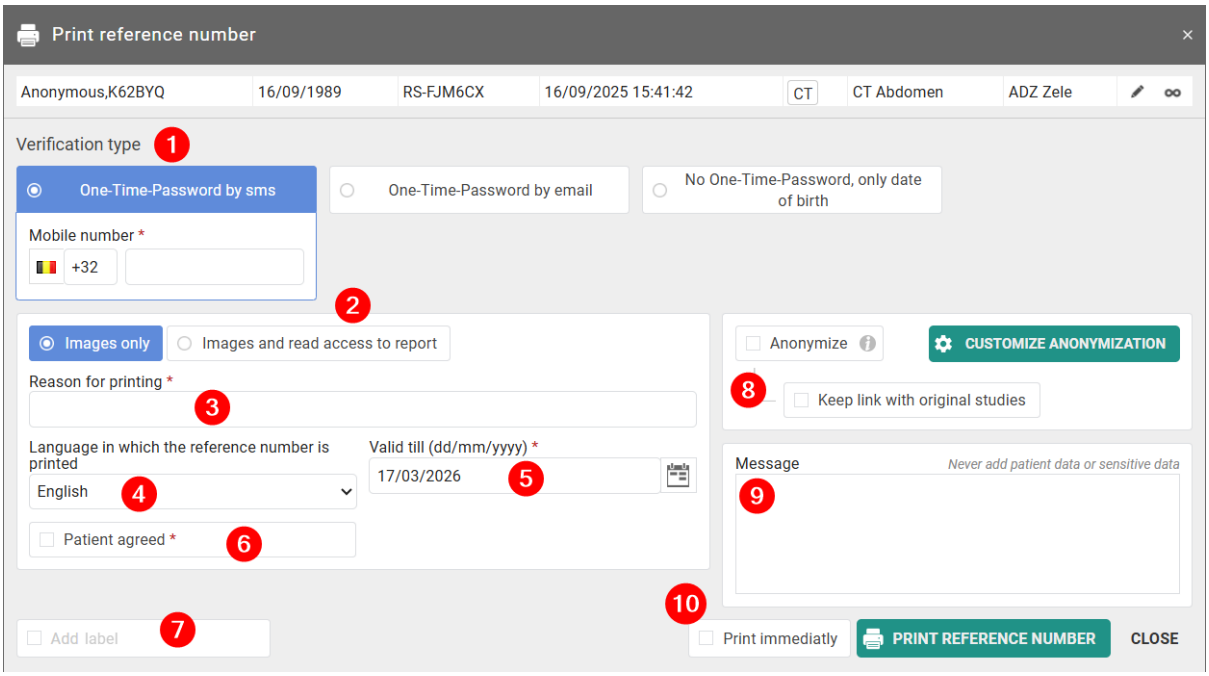
Select the studies for which you want to print a reference number and click **PRINT REFERENCE NUMBER**.





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## STEP 2: Set the parameters




1. Select a verification type:
   - **One Time Password by sms**
   - **One Time Password by email**
   - **No One Time Password, only date of birth**

> **Important!**
>
> If, in case of verification type 1 or 2, the user enters the OTP incorrectly in 5 consecutive attempts, the bucket is blocked.
>
> The bucket can be unlocked by the service desk or an admin user of the sending radiology department (see Status Forwarding (Page 148) ).

2. Choose to print a reference number for:
   - **Images only**; or
   - **Images and read access to report**.

3. Fill out a **Reason for printing**. This reason will not be printed but is mandatory and will be registered in DeepUnity PACSonWEB.

4. Select the language of the document that will be created. It is a letter containing instructions for the patient on how to use the reference number to access the


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exams. By default, the display language of DeepUnity PACSonWEB is selected, but you can change the language in the drop-down menu.

5. Set a validity date for the access rights. By default, the validity period is set to 1 month but you can change this by
   - entering the desired date manually; or
   - selecting a date, using the calendar icon.

**Tip:**

The default validity period can be configured for each sending radiology department. DeepUnity PACSonWEB offers the possibility to define a default or maximum validity period.

In case a specific configuration is desired, please contact the service desk.

6. Check the **Patient agreed** checkbox. Without the patient's consent, the reference number may not be printed.

7. Optionally, add a label to the study. Check the **Add label** checkbox to open the drop-down menu for selecting the label. Choose the user or group that the label should be set for.

8. Optionally, anonymize the study. This replaces the name of the patient:
   - In DeepUnity PACSonWEB, the first name is replaced by a number and the last name is replaced by 'Anonymous'.
   - In the letter, only 'anonymized exams' are mentioned.

**Important!**

The report for an anonymized study will never be accessible, even if you selected the option **Images and read access on the report**.

9. Optionally, add a message.

   If a message is entered, when printing the reference number, the message is not available as a separate series within the exam and no label 'message' is added. It is added to the letter that will be created.

10. Optionally, check **Print immediately**.

    If this option is selected, when clicking **PRINT REFERENCE NUMBER**, the letter opens in a new tab and can be printed immediately.

    If not, only the confirmation message is displayed.


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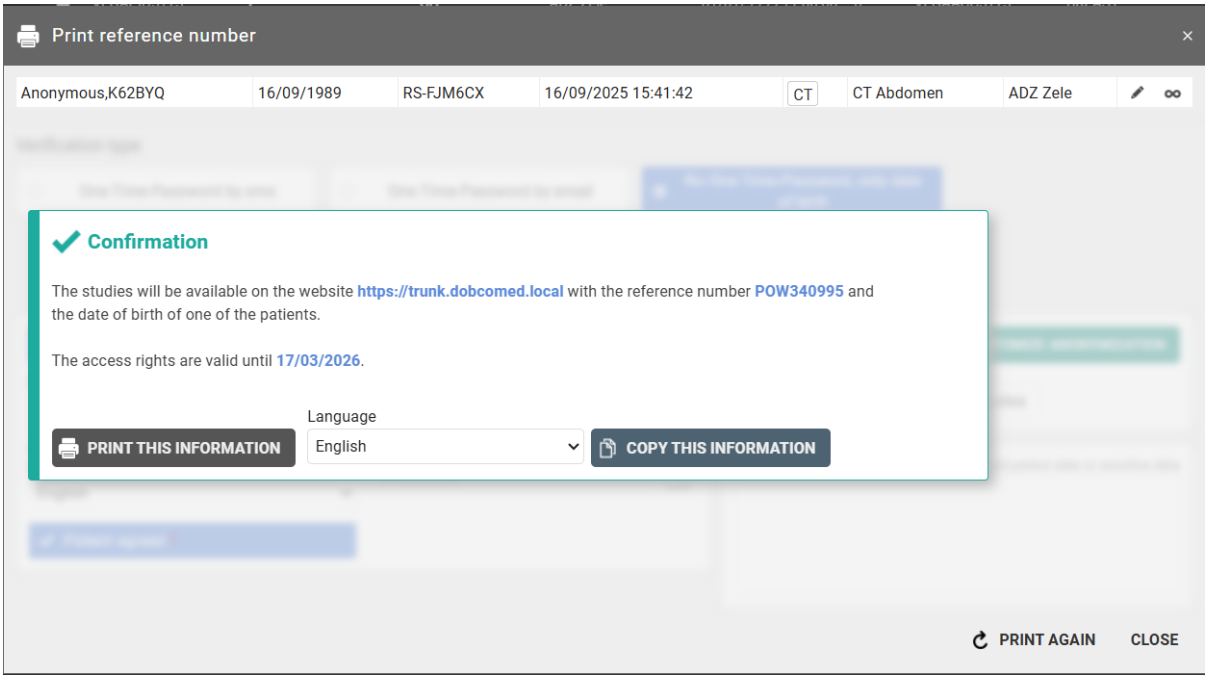
**Tip:**

When printing a reference number, the same values for the following parameters are selected automatically for the next printing of a reference number:

- One-Time-Password by sms / email / none
- One-Time-Password by sms: country prefix
- Language

## STEP 3: Confirm

Click **PRINT REFERENCE NUMBER**. A confirmation message with the information about the printed reference number will be displayed.




If you want to print the same letter with the reference number in another language, select the language in the drop-down menu and click **PRINT THIS INFORMATION**.

If you click **COPY THIS INFORMATION**, the content of the confirmation message is copied to the clipboard, e.g. so it can be pasted into your own email.

Click **PRINT AGAIN** to get back to the parameter settings and print another reference number.


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## 5.9 Placing studies online and sharing studies

**Important!**

In order to be able to use this application, you must be an administrator, and this application must have been implemented.

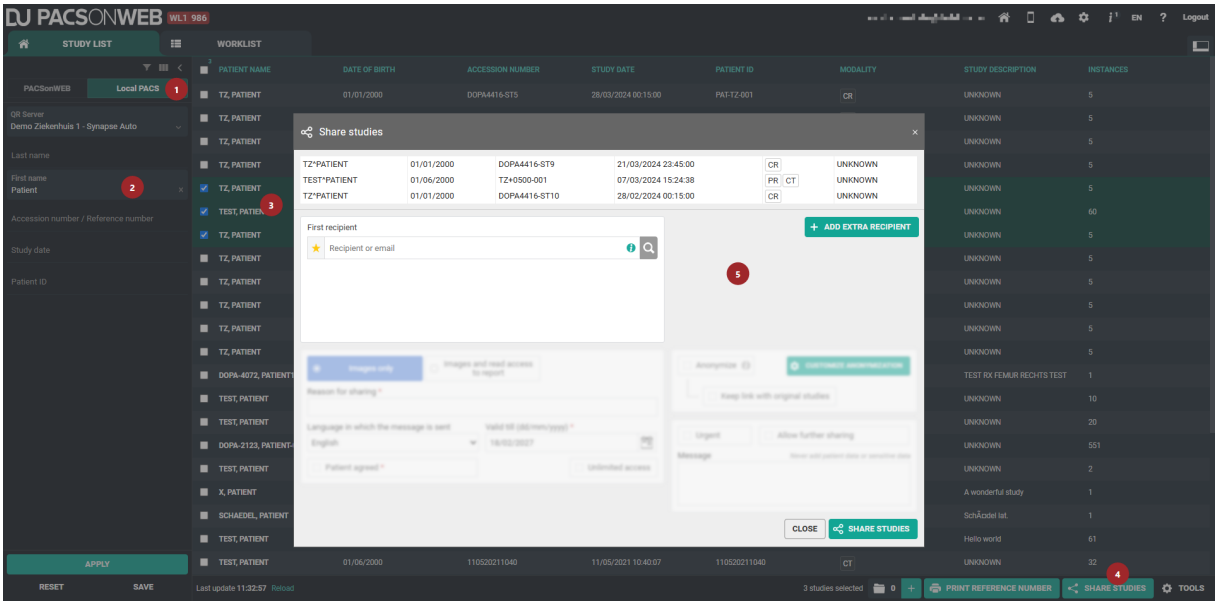
Proceed as follows to place a study from the PACS system on DeepUnity PACSonWEB:

1. Select the PACS (= only available if this has been implemented.)
2. Use the filter to find the study again.

**Note:**

Dates in the filter are interpreted in your own time zone and date times in the results are displayed in your own time zone, not in the time zone of the local PACS.

3. Select the studies that you wish to share. A selection of the shared studies is called a bucket.
4. Click on **SHARE STUDIES**. An overview of the studies that you wish to share will be displayed.



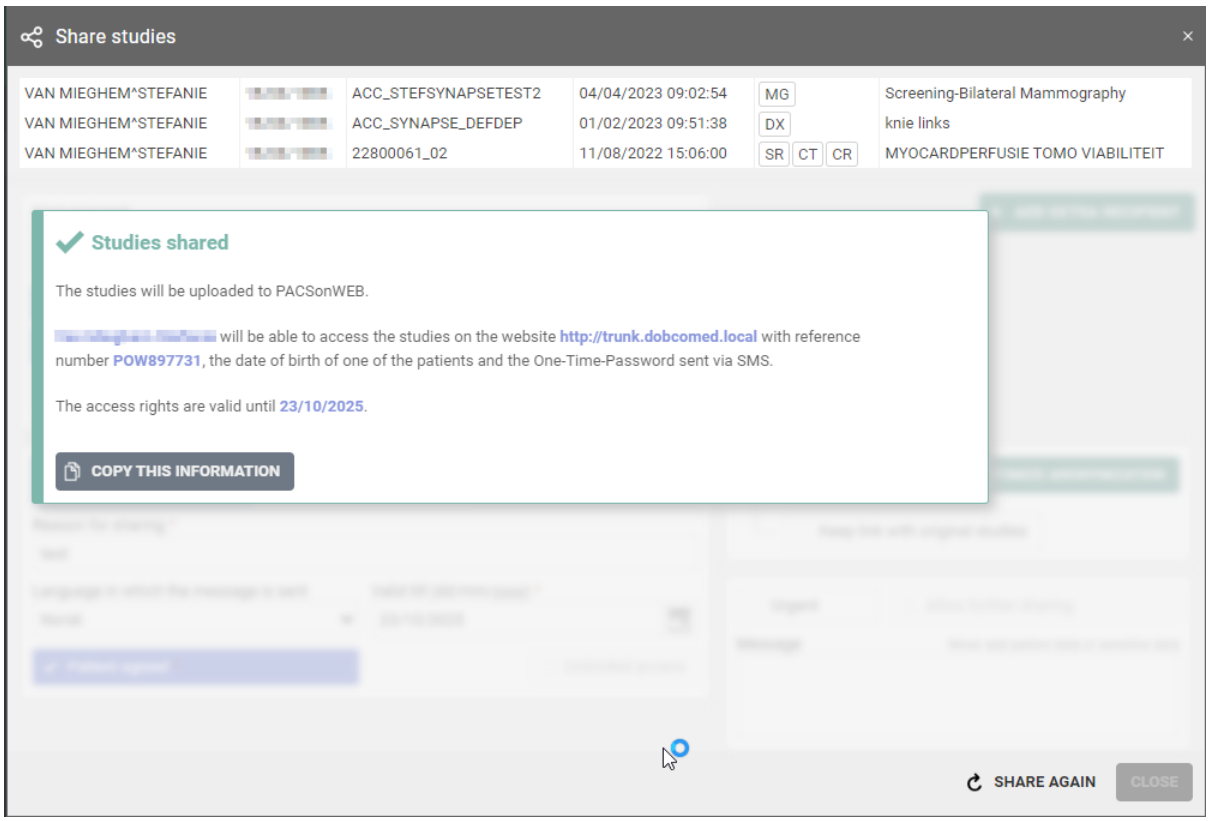

5. Once you have completed the sharing procedure, a pop-up window will be displayed containing information of the shared studies.


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**Important!**

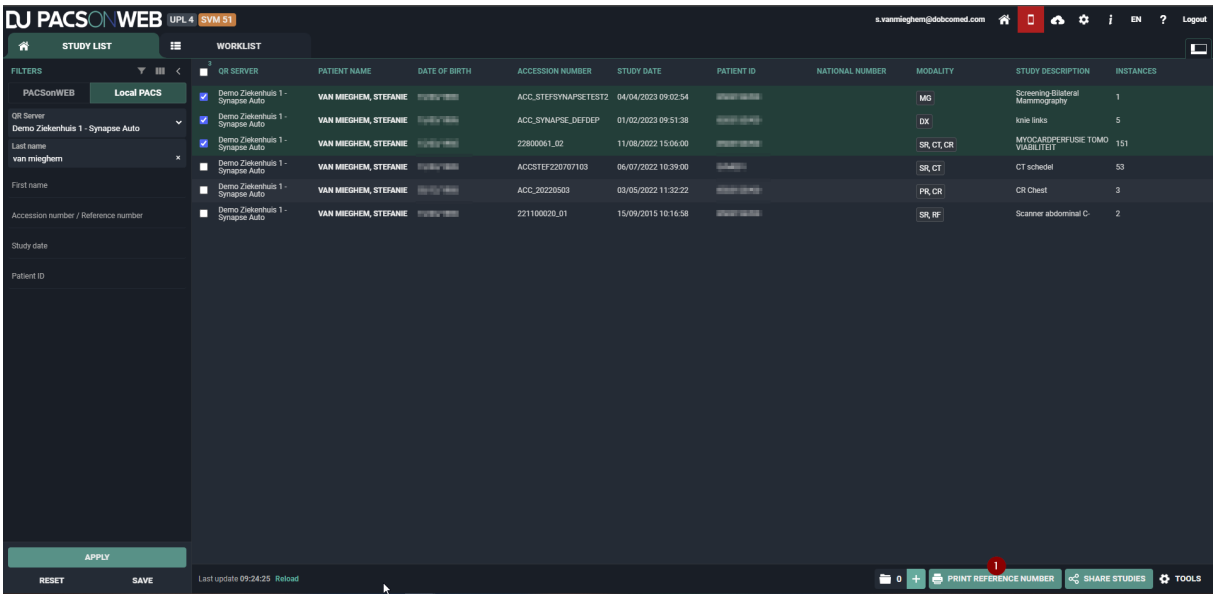
Be aware: The information in the confirmation dialogue differs depending on the type of recipient.

6. Using the option **SHARE AGAIN**, you can share the same studies again.




The option **PRINT REFERENCE NUMBER** allows to upload exams and print a reference number instead of sending the reference number my mail or SMS.


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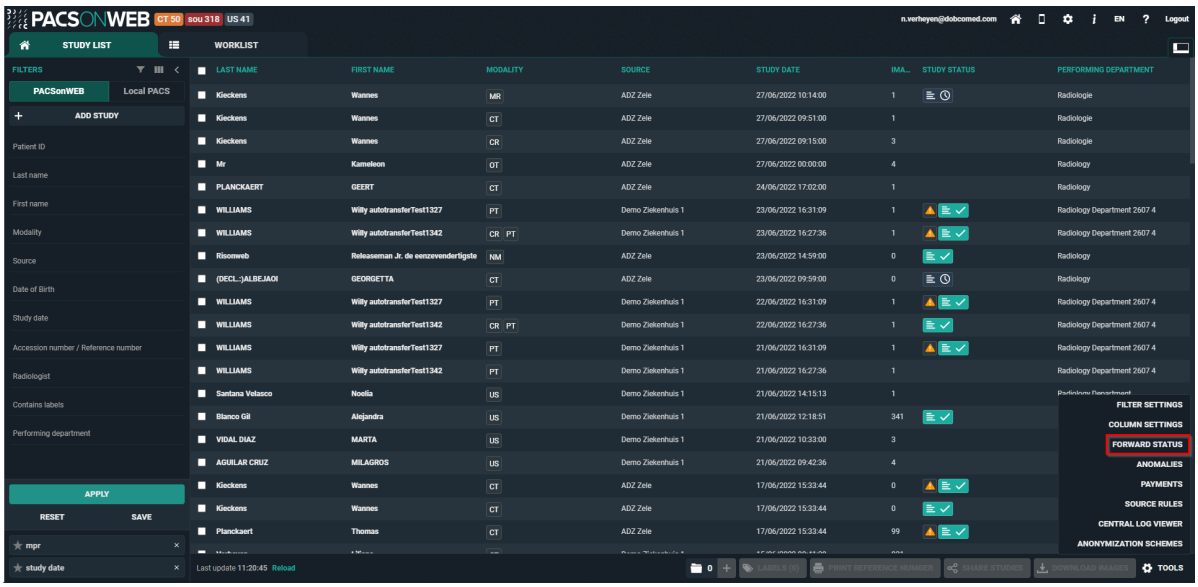

## See also

Printing reference number from the study list (Page 142)
Sharing studies (Page 132)

## 5.10 Status Forwarding

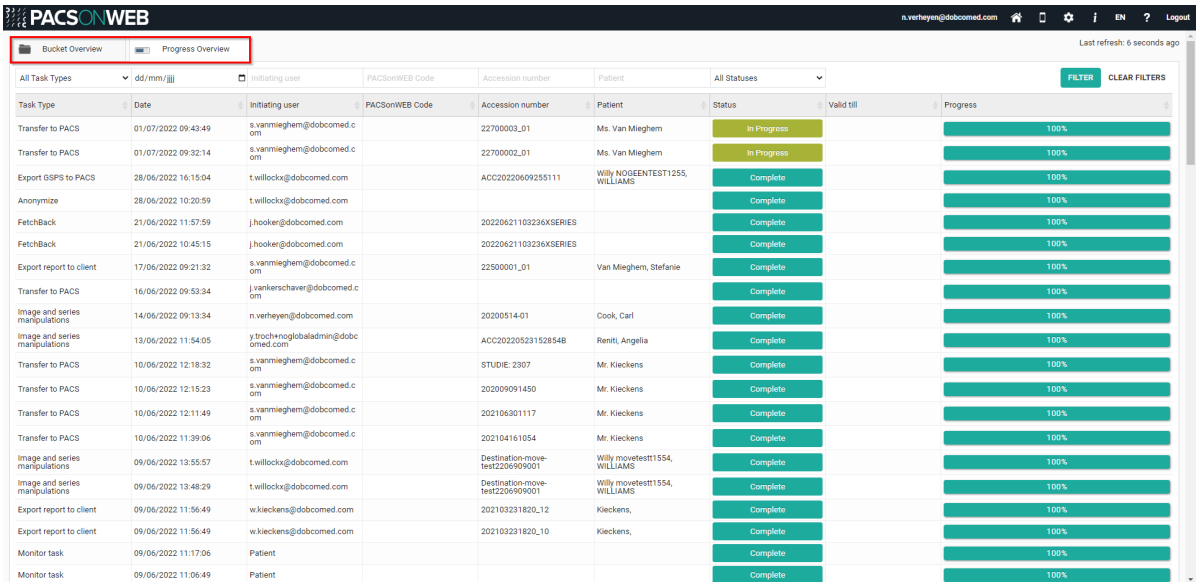
To find out the status of your shared studies, proceed as follows:

1. Click on the **Tools** button and then on **Forward status**




2. A new tab will open that says **Buckets overview** and **Progress overview**.


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## 5.10.1 Buckets overview

This page displays a list of all the buckets that the logged-in user shares with a non-DeepUnity PACSonWEB user.

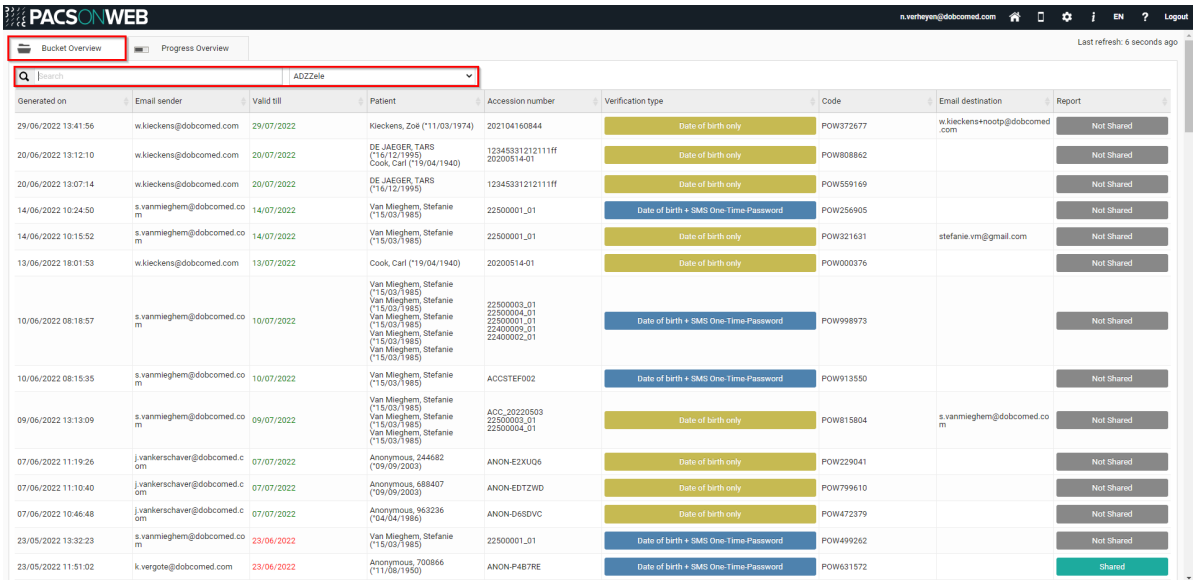
If the logged-in user is also the administrator of the group, he/she will see all the buckets that are placed online by the group.

The following information is displayed for the buckets:

- The date on which the bucket was created
- The e-mail address of the person who created the bucket
- The date until which the bucket will be available
- The patient data
- The respective study numbers
- The verification method
- The reference number
- The recipient's e-mail address
- Whether the entire report is shared or only the images ('not shared')

In addition, you can use the filter to find a study/bucket.

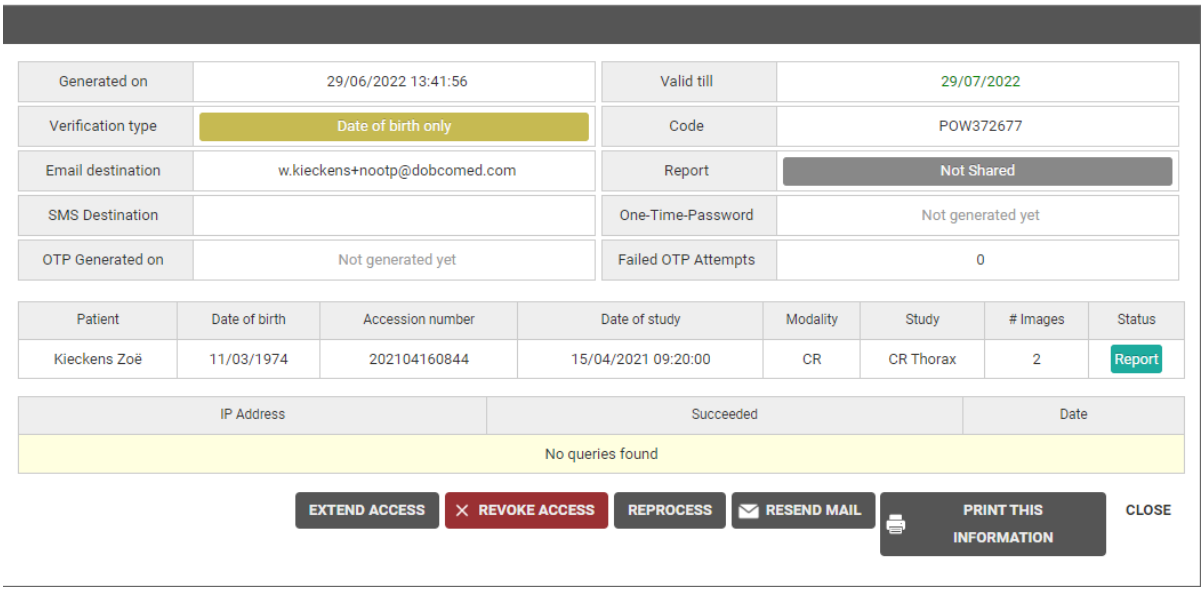

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When you click on a bucket, all details on the sharing of the bucket are displayed in a pop-up.

In case an OTP is required for access to the bucket and the bucket code and date of birth have been entered correctly, but the OTP was entered incorrectly, this will be registered in the field "Failed OTP attempts".

After 5 consecutive incorrect attempts, the bucket code is locked for access. It can be unlocked by clicking the icon which will reset the failed OTP attempts.




Various options are listed at the bottom of the screen:

- Extend access: Extend the period during which the generated DU POW code can be use to access the exam


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- Revoke access: The DU POW code is no longer valid as of today.
- Reprocess: The study will be reprocessed.
- Resend e-mail: The recipient will receive the e-mail with the DU POW code again.
- Print this information: The information about the shared bucket will be displayed in A4 page format which you can print.
- Close: Close the window.

## 5.10.2 Progress overview

**Important!**

You can only use this function if you administer the online placement of studies (Placing studies online and sharing studies (Page 146)).

This page provides the following status information:

- The studies that have been placed online using the PACS overlay.
- Exams, sent from DeepUnity PACSonWEB to a local PACS system.
- Exams, imported from DeepUnity PACSonWEB using an import client.

You can only see the transfers for which you have the required access rights within DeepUnity PACSonWEB.

Just as with **Buckets overview**, you can use the filter to find a specific study. You can filter by:

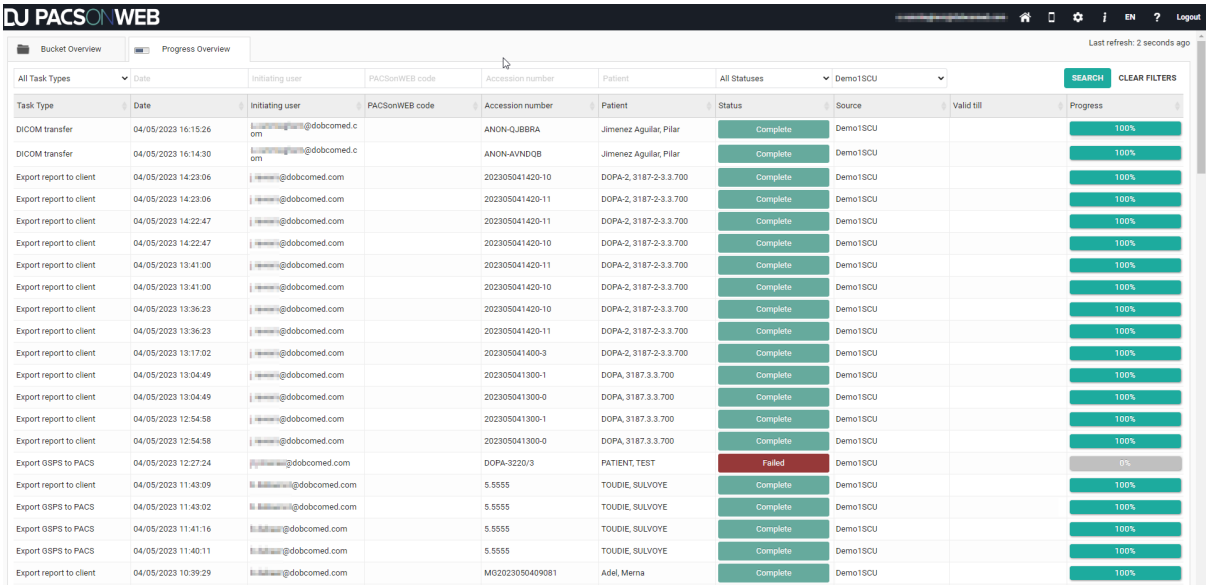
- Task Type
  - Share Pacs Study
  - Reprocess bucket
  - DICOM Transfer
  - FetchBack
  - Local import client
  - Anonymize
  - Image and series manipulations
  - Export report to client
  - Export GSPS to PACS
  - Monitor task
- Date
- User


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- POW code
- Accession number
- Patient
- Status
  - All Statuses
  - Queued
  - In Progress
  - Complete
  - Cancelled
  - Failed
  - Obsolete
- Source

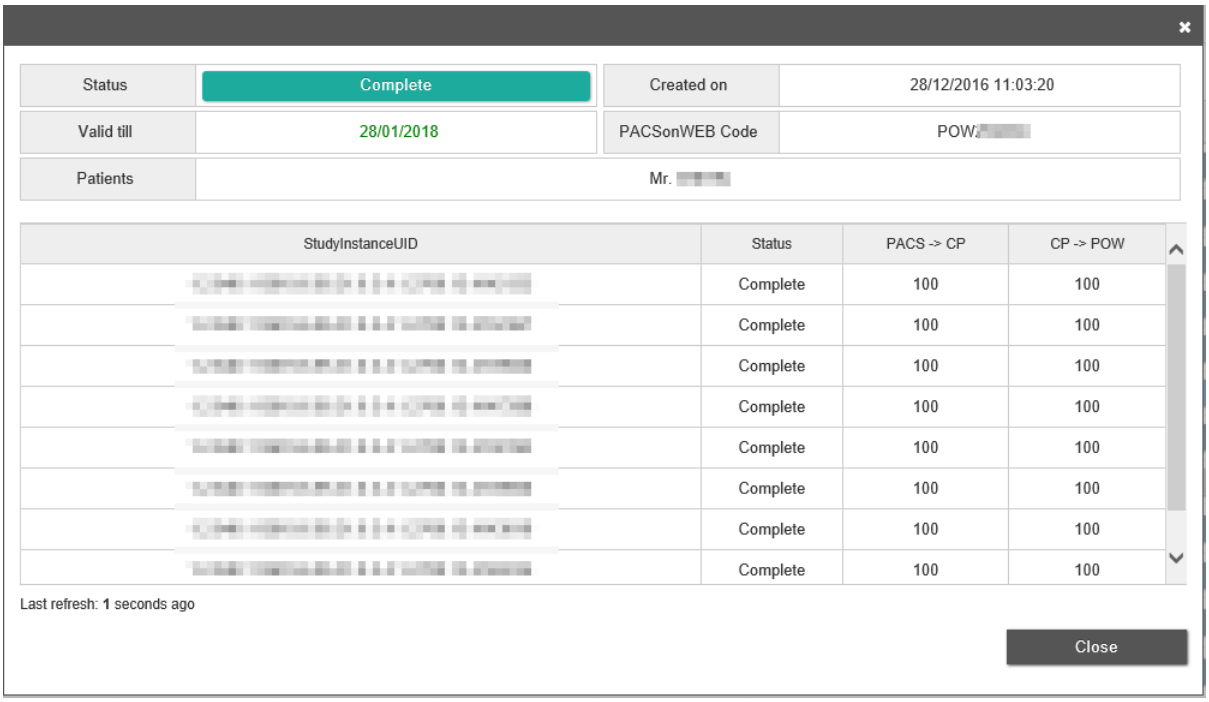
**Tip:**

Click on a column heading to sort the data alphabetically.




The following window will be displayed if you click on a study.

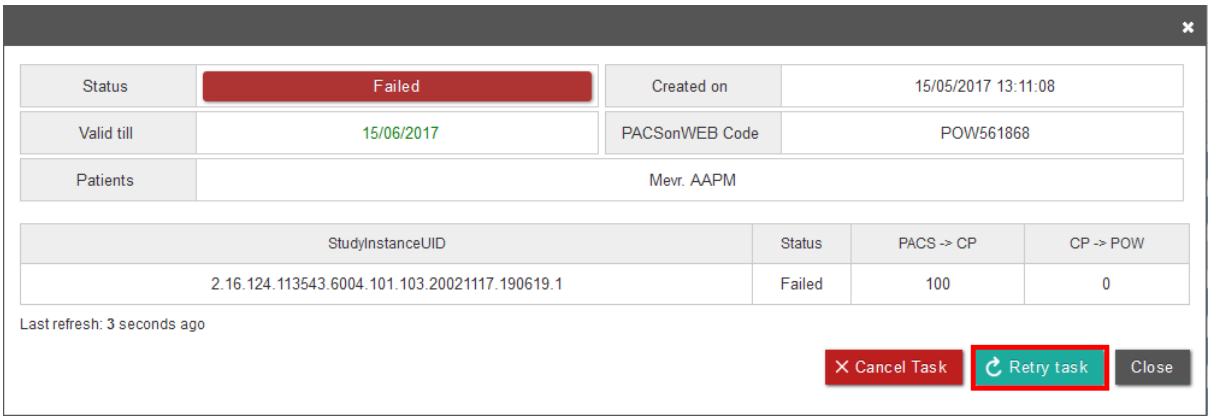

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Here you can find more detailed information about the study. The details displayed depend on the type of transfer.

If the study is not yet complete, you can cancel the online placement by clicking **Cancel Task**.

If a study transfer has failed, you can restart the transfer by clicking the **Retry task** button.




## 5.11 Downloading studies from the study list

Proceed as follows to download a study from the study list:

1. Select the studies you wish to download.
2. Click on **Download images**.


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3. A pop-up window will appear offering you various options for downloading the images:
   - Download a ZIP file with images in PNG format (standard image format)
   - Download a ZIP file with images in DICOM format (medical standard)
   - Download a ZIP file with images in original DICOM format with DICOM tags as provided by the local modality or PACS, not taking into account modifications by RIS data or made in DeepUnity PACSonWEB
   - Download a ZIP file with images in uncompressed DICOM format
   - Load the images directly in Osirix

     **Note:**

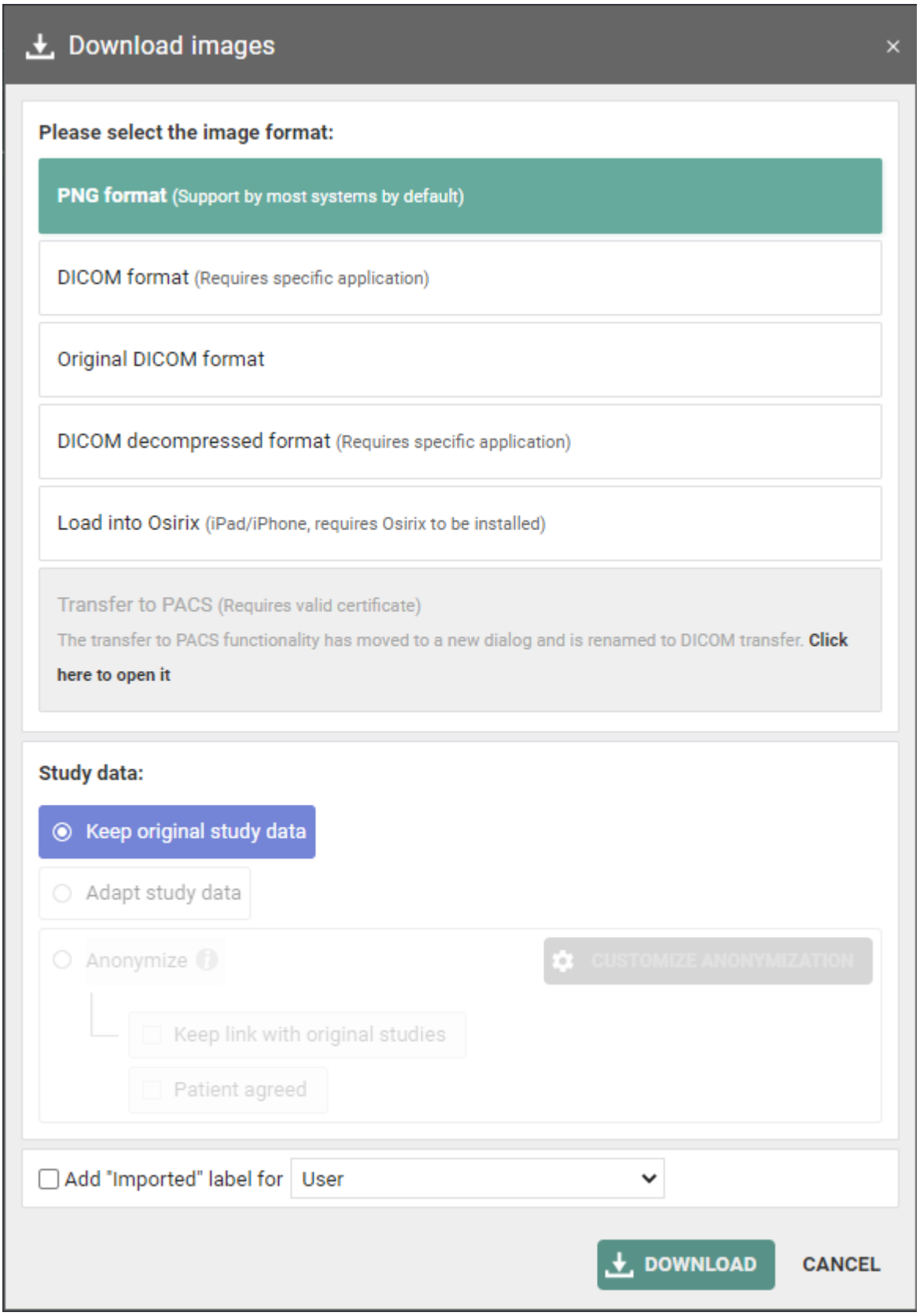
     You can only use this option if OsiriX has been installed.

     In order to be able to load exams into OsiriX, it is mandatory that pop ups from the DeepUnity PACSonWEB website are allowed by your browser.

   - Transfer the images to PACS

     This option has been moved to a separate DICOM Transfer dialog. See Importing studies in PACS (Page 158)


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4. Click on the format you wish to download and then click on **DOWNLOAD**.

   For the following options, the report is included as a SR file (structured report) by default:

   - DICOM format
   - DICOM decompressed format

   **Note:**

   The **include report** option is not available if:

   - There is no report.
   - The report is still a draft and doesn't have the status **preliminary** or **validated**.
   - The report is in PDF format.
   - You don't have access to the report.

   For the same options, it is possible to include an offline viewer, which will allow you to view the images outside of DeepUnity PACSonWEB.

   **Note:**

   The availability of the offline viewer depends on your environment, because of region-specific viewer licenses.

   **Study data**

   If you download a single exam and select DICOM, DICOM uncompressed or Load into Osirix, you have the option to modify or anonymize the study data.

   A full explanation on data anonymization is available in Anonymizing studies (Page 136).

   **Label**

   You can add the **Imported** label to the study for

   - your user
   - a user group

   This label is visible on the study list in the column **Labels**.

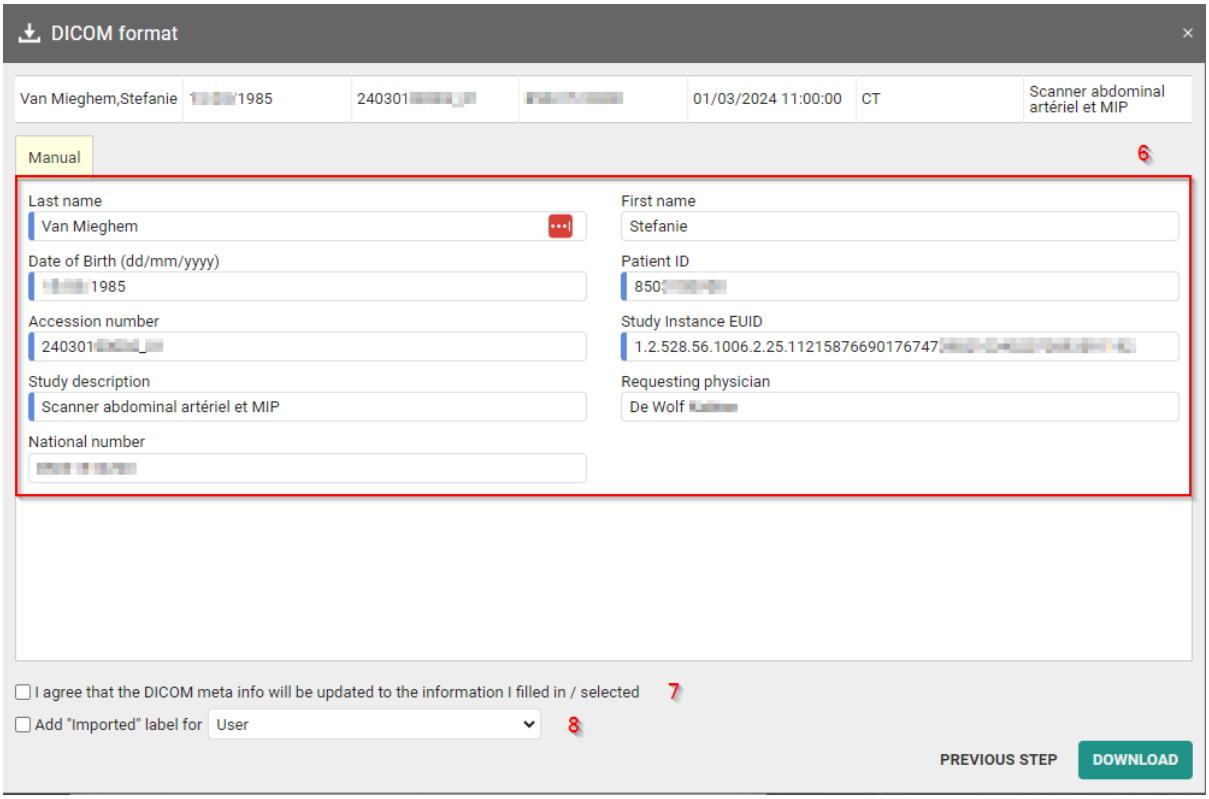
   How to configure your column settings is explained in Configuring the study list (Page 68)

5. If you download a single exam and select DICOM or DICOM uncompressed, you also have the option of editing the study data.


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Select **Adapt study data** and then click on **Next step**. This option is always selected for **Load in OsiriX**.

For the other options, the data can only be edited manually.




6. Here you can edit the study data and patient information.
7. You must always check the box next to **I agree to the DICOM meta info being updated with the entered/selected information** before you may proceed.
8. If you wish to add the **imported** label to this study, check the box next to **Add the "Imported" label for**.

**Note:**

You can configure this for your user and for the groups to which you belong.

9. A ZIP file will be displayed.

**Note:**

Where the ZIP file appears depends on your browser. In Google Chrome, for example, it will be displayed in the lower left part of the screen.


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10. Double-click on the ZIP file. A window will be displayed with a tab called **Extract: Compressed Folder Tools**.
11. You can now see various directories. Each directory corresponds to a study whose images you wish to download.
12. Click on **Extract all** to extract the ZIP files and save them on your computer.

### 5.11.1 Importing studies in PACS

**Important!**

You can only use this function if your local DeepUnity PACSonWEB service partner has installed an import client on your server (paying option).

Proceed as follows to import a study into your PACS system:

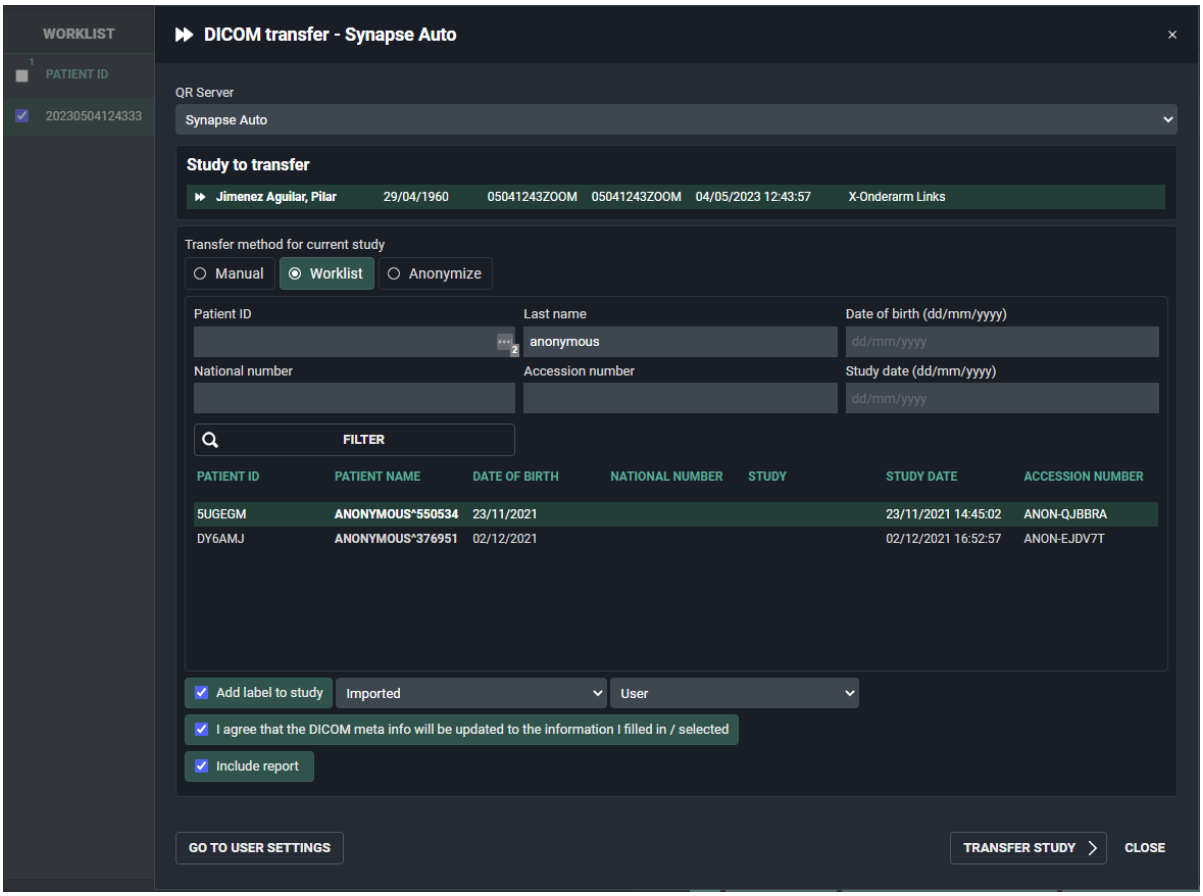
1. Select the studies you wish to import.
2. Click on **DICOM transfer**
3. A pop-up window will appear offering you various options, most of these options can be configured, see section DICOM Transfer (Page 113).
4. Select the desired PACS system in the drop down menu (QR Server).

   If a report is available with status set to "preliminary" or "validated", it is included by default as a SR file (structured report).

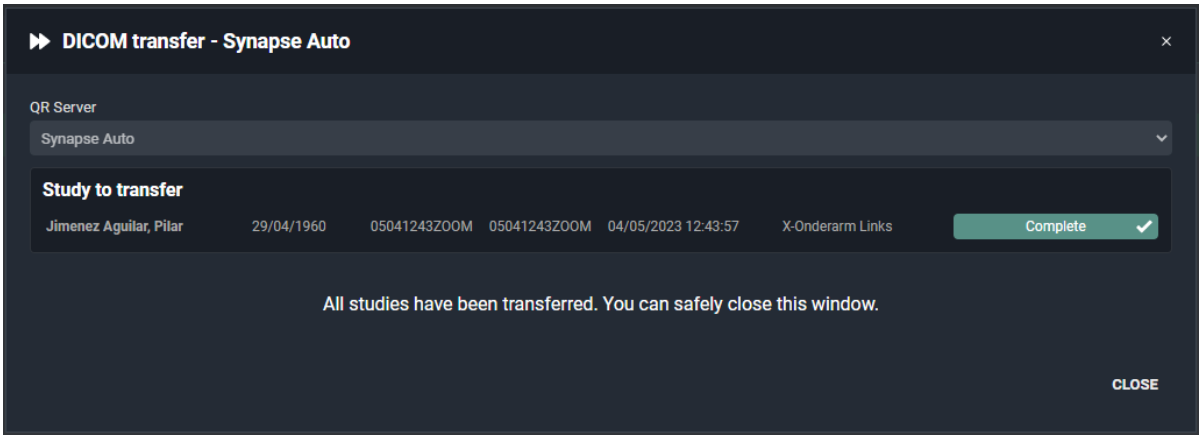
   If the report is still in status "draft" or is stored in PDF format, it will not be possible to forward.

   The option to include the report can be unchecked by the user before transferring the study.
5. In case a DICOM worklist has been configured, you can now look up and select the patient or study by using the filters.


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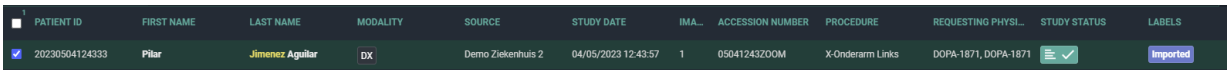



6. If you do not have a Worklist configured or cannot find the patient or study, you can add the patient ‘Manually’,by clicking the "Manual" radiobutton. Edit the fields you wish to modify and click **Transfer Study**.
7. A pop-up window with the status will now be displayed.




8. Once the transfer has completed, the study will be available in the local PACS system and the label ‘Imported’ will be added to the study in DeepUnity PACSonWEB.


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**Tip:**

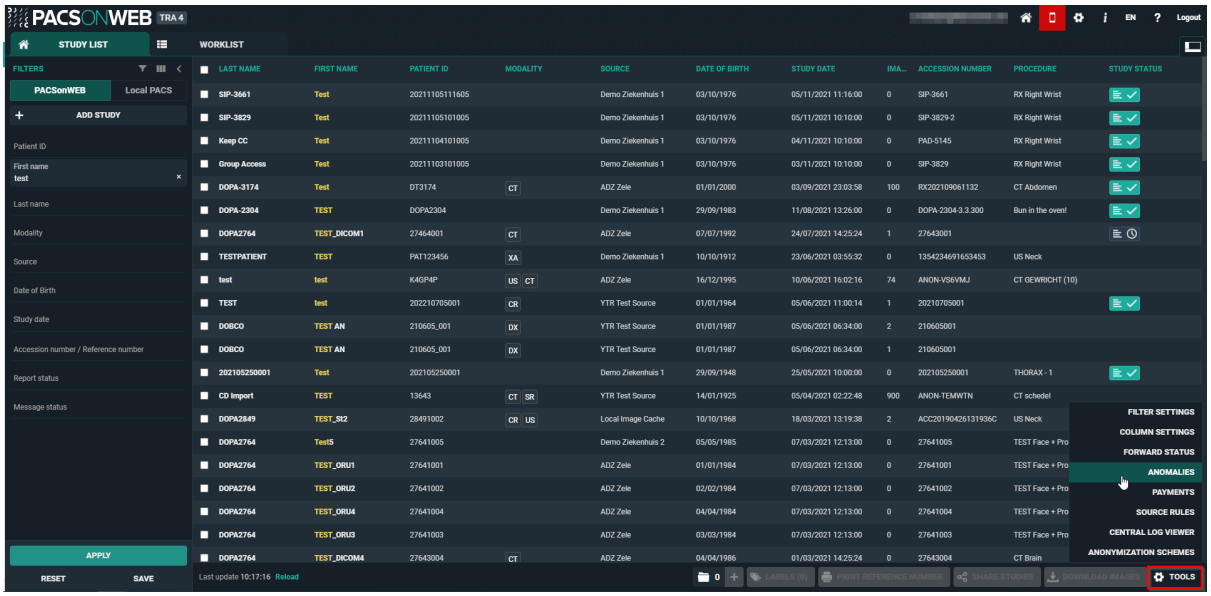
You can filter by the 'Imported' label if you make labels available under Filtering (Page 73). The 'Imported' label will be displayed in your overview list if you have configured the 'Labels' column under 'Column settings (Page 68)'.

## 5.12 Overview page anomalies

**Important!**

This functionality is only available for the administrators of a sending radiology department.

To get an overview of all anomalies that have been registered for your radiology department, click on 'Functions' and choose 'Anomalies'.




This page lists all anomalies, as registered on the study administration page (see Anomalies (Page 246)) for each individual exam, grouped in two categories:

- anomalies on study level
- anomalies on patient level


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## Anomalies on study level

The following anomalies will be reported:

- national number in DICOM files differs from HL7 information
- date of birth in DICOM images differs from HL7 information
- no or incorrect date of birth registered
- number of images in DeepUnity PACSonWEB differs from the number of images in the local PACS (taking into account any applied filtering)
- national number already registered with another patient through DICOM
- image or HL7 message received with the same study instance EUID or accession number but with other patient ID
- study for patient without ID is changed to a patient with ID via DICOM or HL7
- incompatibility with CvKO requirements
- studies of different patients have been merged
- failed move or delete operation of image or series
- patient identity changed for one procedure in a report

## Anomalies on patient level

The following anomalies will be reported:

- Multiple internal patient IDs have been registered for a single patient
- Received national number already linked to another patient
- Date of birth differs from date of birth that was registered with a previous exam
- National number already registered with another patient through HL7
- Patient without ID from DICOM (scroll to bottom of the page for more explanation)
- Patient without name from DICOM: a patient name is generated ("UNK_"+ [source abbreviation]+unique number) and used (scroll to bottom of the page for more explanation)

For each registered anomaly, the following information is shown:

- the source of the study
- a link towards the study
- the study date
- date and time when the anomaly was registered
- the anomaly type + the required access level of a user to be able to open the study

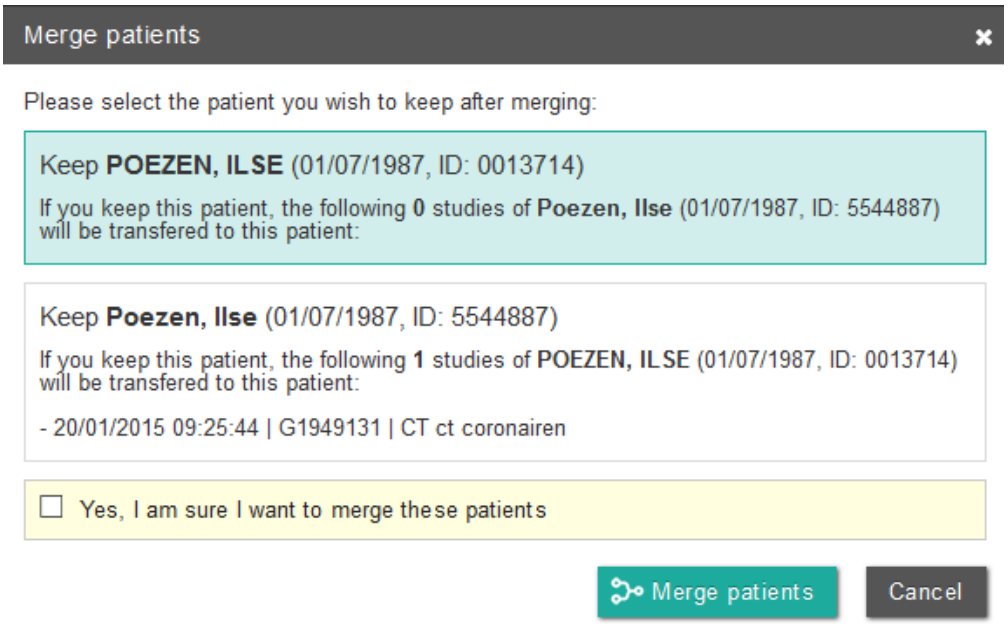

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- a description of the anomaly
- the possible corrective measures

Once a solution has been selected, it will be marked in green. When hovering the cursor over the label, it is displayed by whom and when the selected solution was applied.

In case a national number was registered for two different patients, it will be possible to assign this to the first patient, the second patient or to merge both patients.

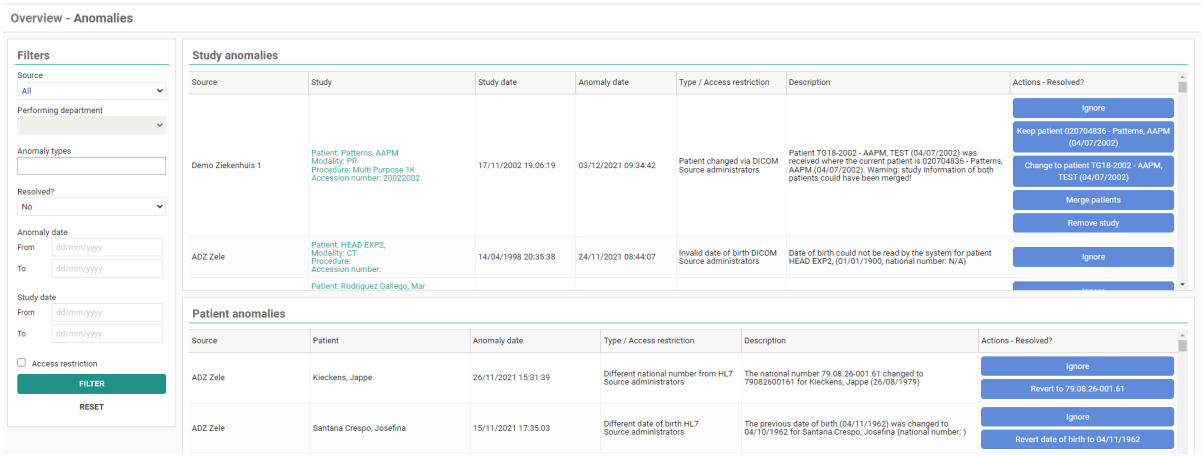
For the latter option, the following screen is displayed to perform the merge in a controlled way:




**Important!**

Once a solution has been applied, this cannot be undone!


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## Refresh rules

The anomaly overview page is refreshed after an action that could impact other anomalies:

Following rules are applied:

If a record is changed via HL7, the page will refresh after following actions:

- Keep patient
- Merge
- Assign national number
- Remove study

If a record is changed via DICOM, the page will refresh after following actions:

- Change
- Merge

If a record is changed via HL7, the page will **not** refresh after following actions:

- Ignore
- Keep National number
- Change patient
- Revert date of birth

If a record is changed via DICOM, the page will **not** refresh after following actions:

- Ignore
- Keep


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**Important!**

Only the 100 most recent anomalies are listed in the overview.

To display a selection of the registered anomalies, you can use the filter.

Filtering can be applied, based on a single field or multiple fields.

Possible fields are:

- Source
- Performing department

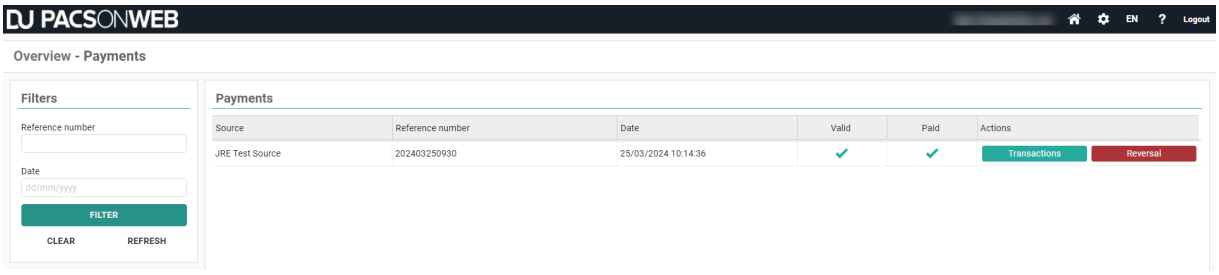
  If Source is set to "All", the performing department cannot be selected
- Anomaly types
- Status
- Anomaly date
- Study date (from = 0h00 ; to = 23h59)
- Access restriction

## 5.13 Payments overview page

**Important!**

This functionality is only available if you are an administrator of a sending radiology department and patients need to pay to have access to the study.

To view the overview of all payments that have been registered for your radiology department, in the bottom right corner of the screen, click **Tools** and select **Payments**.



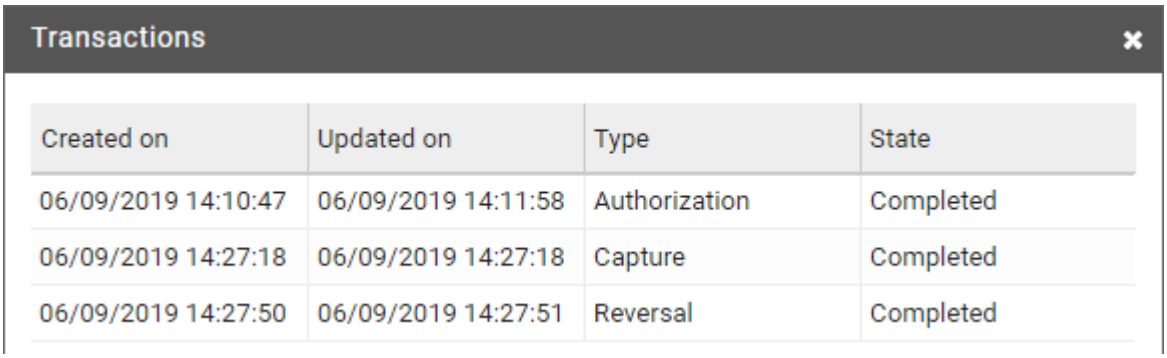

The overview page lists the most recent 100 login actions for studies that require payment.

You can filter for a specific exam by entering the reference number or the study date and clicking **Filter**.


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Each entry contains the following:

- **Source**: The source from which the study originates.
- **Reference number**: The reference number that has been used to access the study.
- **Date**: The timestamp when the access attempt was registered.
- **Valid**: Indicate that a token was requested successfully with the payment instance.
- **Paid**: Indicates that the payment was registered successfully
- **Actions**: Contains two buttons, **Transactions** and **Reversal**.
  - **Transactions**: Clicking this button results in a dialog displaying all transactions on the payment.




    - Transactions types:
      - **Authorization**: The user has given authorization to perform the payment; money has not been transferred yet.
      - **Capture**: The payment has been performed; money has been transferred
      - **Reversal**: The payment has been reversed.
    - Transaction states:
      - has been initiated
      - is in progress
      - has completed successfully
      - has failed
  - **Reversal**: Clicking this button initiates a reversal of the payment.


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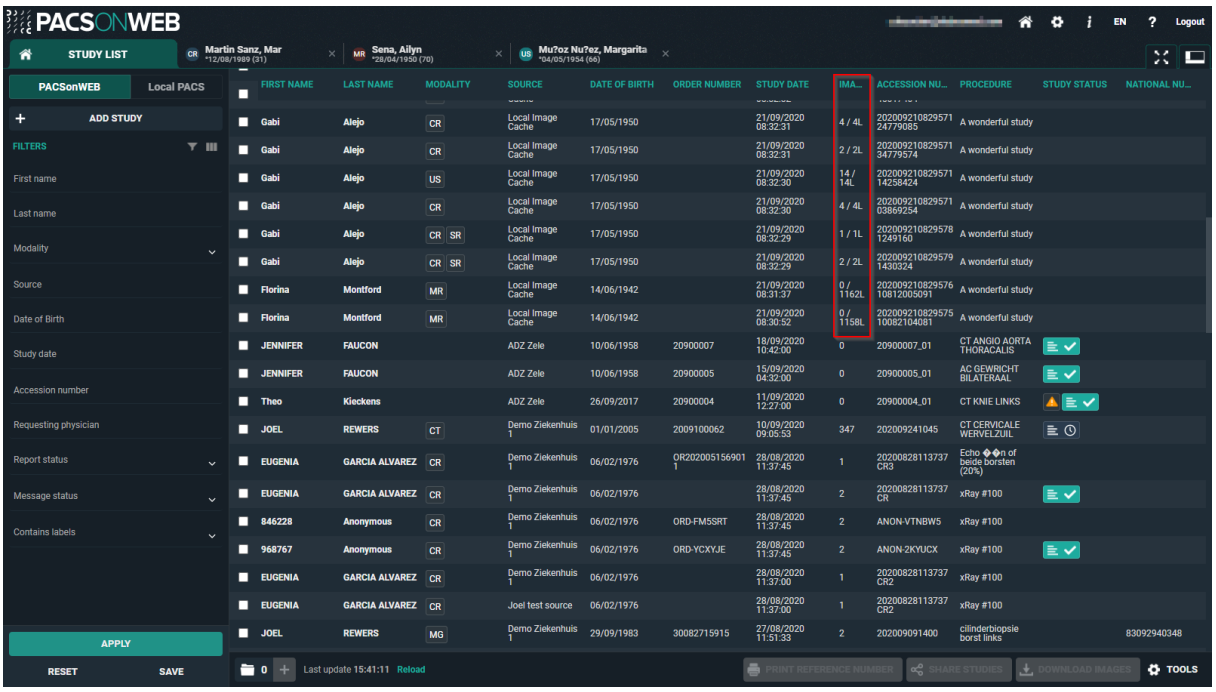
**Important!**

When reverting the payment, a refund will be initiated but the study will still be marked as paid.

## 5.14 Local image cache

In addition to processing images in the central DeepUnity PACSonWEB cloud environment, a medical imaging department can choose to process the images locally in a local image cache.

- Users with access to the local image cache can access these images almost instantly within the local network, rather than waiting for all images to be transferred and processed by the central DeepUnity PACSonWEB environment.
- For these users, the overview page will include all studies available through the local image cache as well as those available through the central DeepUnity PACSonWEB environment.
- For studies available through the local image cache, the **Images** column contains the number of images that are available in DeepUnity PACSonWEB / the number of images that are available in the local image cache (L).




For study images that are only available via the local image cache, the following features are not available:

- sharing a study ()


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- downloading images (Downloading studies from the study list (Page 153))

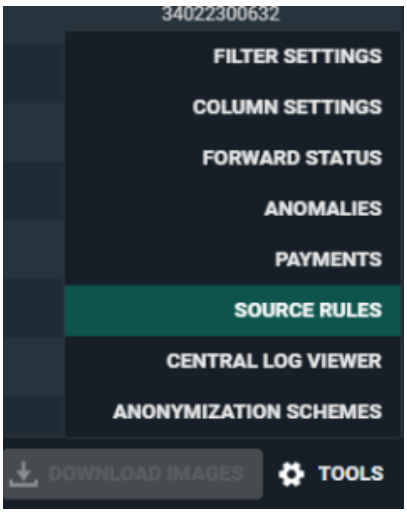
These features will become available once all images are available in the central DeepUnity PACSonWEB environment.

## 5.15 Source rules

Specific DICOM based source rules can be configured for a source. The rule needs to have a name, rule type and rule requirements.

Configuration of a rule

1. Click on the tools menu in the study list and then on **source rules**.

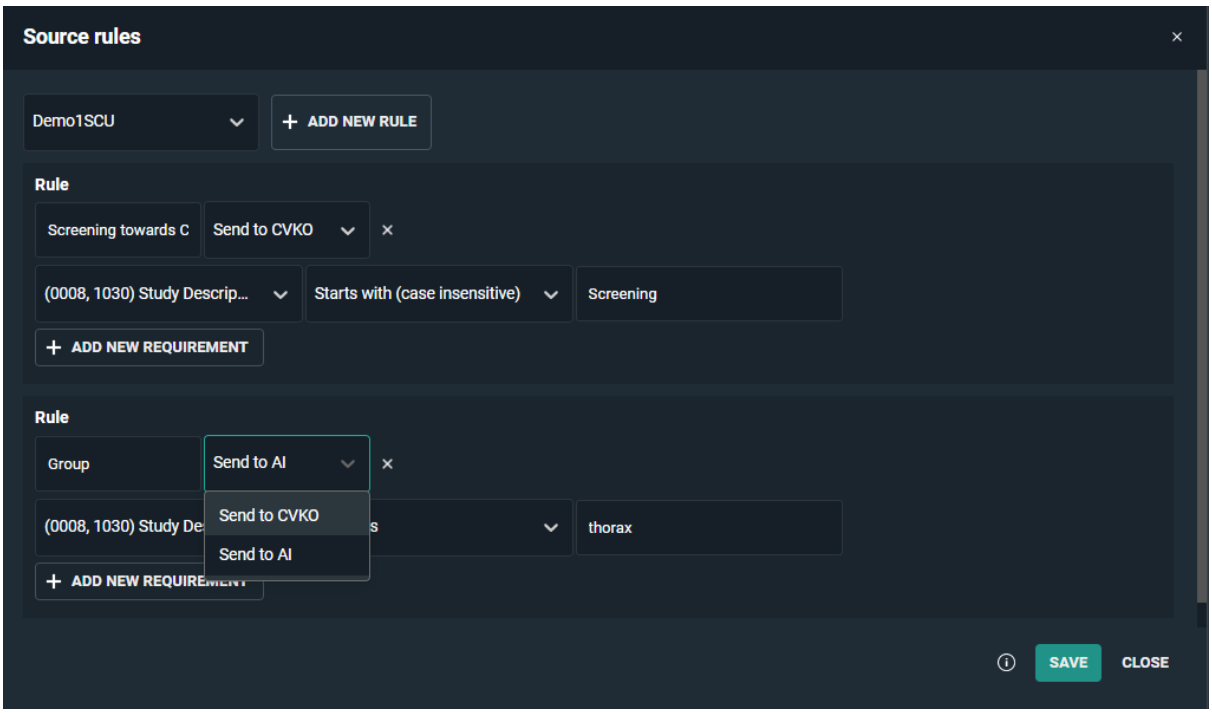



   A dialog will open where you can configure new rules.
2. Select the correct source (only sources for which the user has admin rights will be listed).
3. Give the rule a name and select the rule type. The following rule types can be configured:
   - Send to CVKO
   - Send to AI
4. Select the DICOM Tag, the selection criteria and fill in the relevant value for the rule.
5. Optionally, you can add an additional requirement to the rule. To do this, click **Add New Requirement**.
   - **Source rules with one rule and two requirements:** The DICOM images must meet both requirements to comply with the source rule and be sent to CVKO or AI.


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- **Source rules with two rules, each with one or more requirement:** The DICOM images must meet one of the rules to comply with the source rule and be sent to CVKO or AI.

6. Click **SAVE** when finished.




## 5.16 Adding labels to studies

You can add labels to studies from the study list.

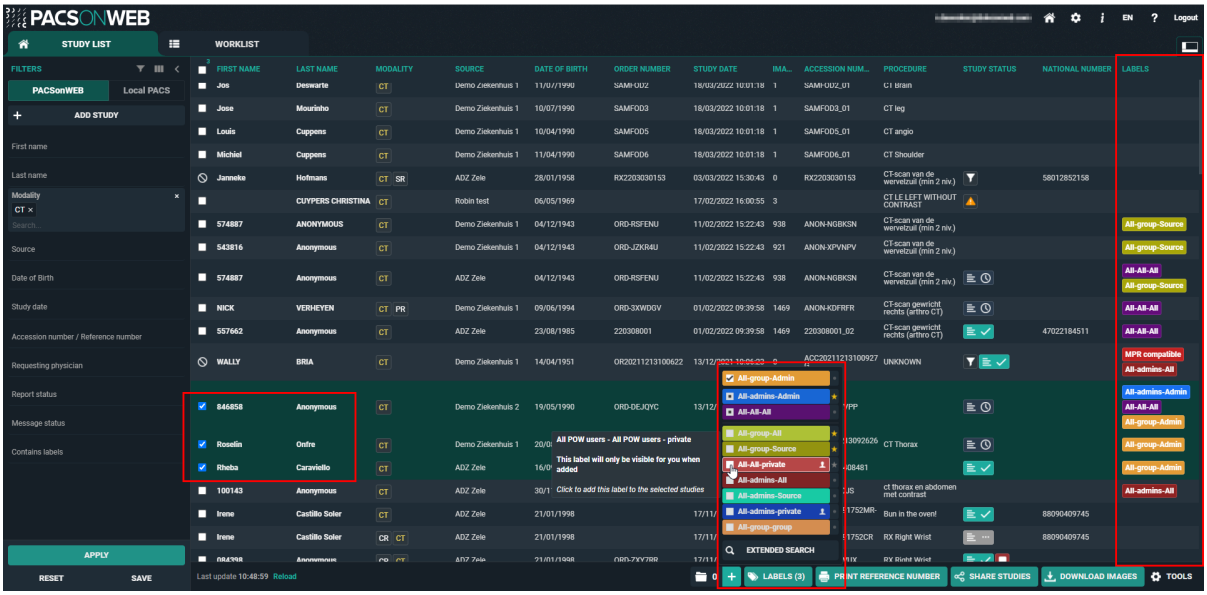
To link a label to one or more studies from the list:

1. Select the study or studies that you want to add a label to.
2. Click the **LABELS** button at the bottom of the page.
   a. Select the desired labels you want to add.

The label(s) will be added to the selected study or studies and displayed in the **LABELS** column.

- If the **LABELS** column is not visible in your list, you can configure this in **Column settings**. See Configuring the study list (Page 68) for a detailed explanation.


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| Label icons | Description |
|---|---|
| ★ Favorites | Marks a label as a favorite. Add or remove a label from your favorites by clicking the star icon next to the desired label. |
| Private | Marks a label as private. Make the label visible only to you by adding a private label. |
| ✓ Selected studies | Indicates that the label is linked to all the selected studies. Selected studies are displayed at the top of the list of labels. |
| ■ Subset of selected studies | Indicates that the label is linked to a subset of the selected studies, but not all selected studies. |

By default, 10 labels are displayed when you click the **LABELS** button.

- Favorites, Selected studies, and Subsets of selected studies are always visible, if applicable.
  - If these three categories do not combine to 10 labels, other available labels are added to the list alphabetically.


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- If you have access to more labels than displayed in the list, you can click on **EXTENDED SEARCH** to see all other labels.
  - To find a specific label, you can scroll through the list or type the label name in the search bar.

**Tip:**

You can also add or remove labels to the study from the **Study Administration** page under the Labels (Page 252) tab.


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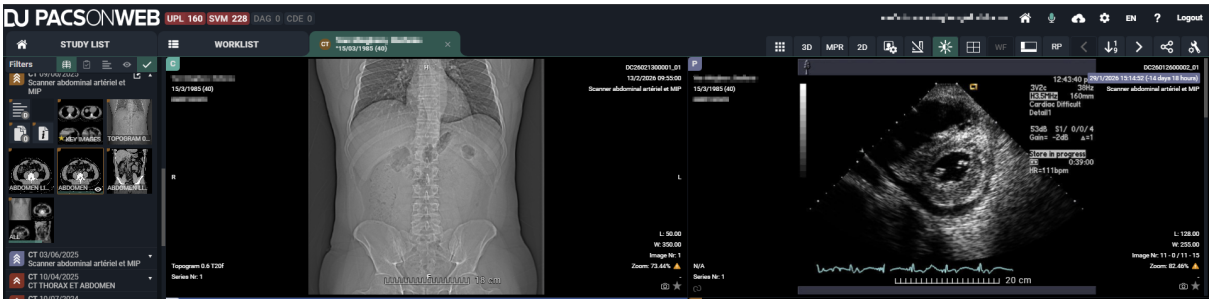
SSN: DOC-4353978

# DeepUnity PACSonWEB study page

6

When you click on a study in the study list, you will be taken to the study page.

This is also the page that opens if you log in using a reference number (I am patient...).




**Warning:**

It is **NOT** allowed to use DeepUnity PACSonWEB for diagnostic purposes in case you are connected with a reference number.

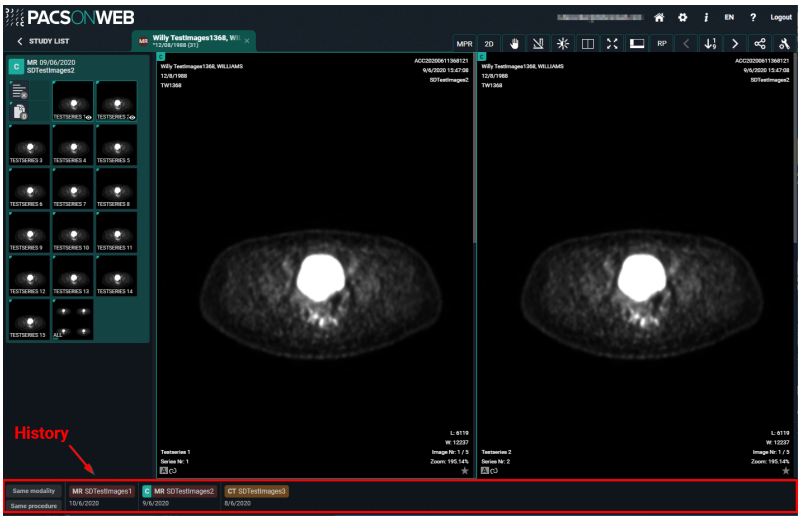
In this case, this is also indicated on the study page: "Diagnostic use is only for registered users."

## 6.1 History

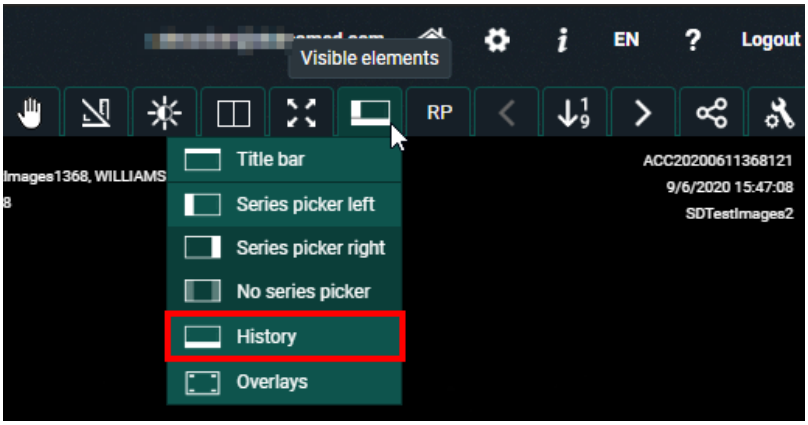
An overview of the patient's studies can be found at the bottom of the study page. Only the studies that you have access to will be displayed


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To display the overview of the patient's studies:




1. Click on **Visible elements**  in the toolbar.
2. Select **History** from the drop-down list.

- **Logging in with a reference number**: The studies displayed are linked to the reference number.
- **Logging in through your account:** The studies displayed are those that have been assigned to you or your group.


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**Important!**

Only in Belgium

As a registered user you also have access to previous studies from the patient if the following conditions are met:

- The patient's consent is registered.
- You are part of a "circle of trust".
- The hospital where the previous study was performed allows sharing the study in this way (patient timeline).

## Using the history bar

You can filter by type of device or study type. To do this, click on the **Same modality** or **Same procedure** buttons located at the bottom left of the study page.

Hovering over a study in the history bar will display the following options:

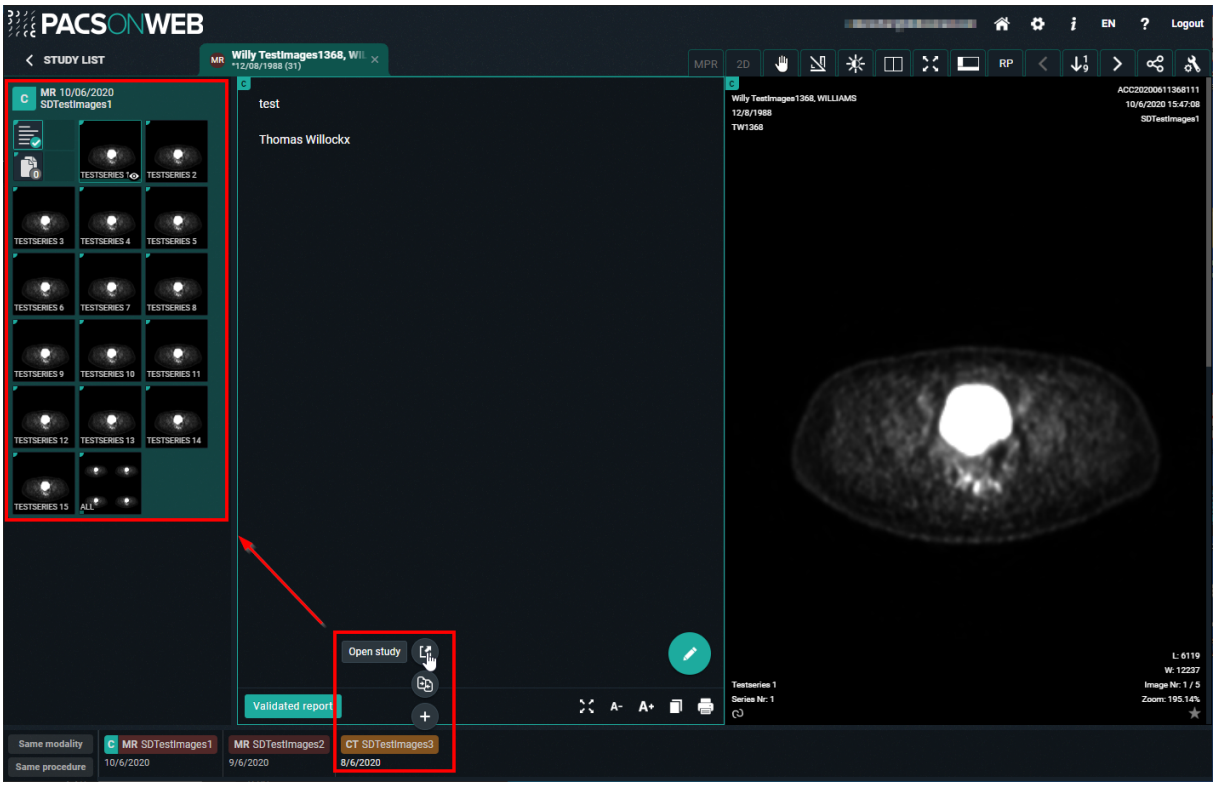
- **Open study**
- **Compare study**
- **Load study** +

  Hovering over the currently open study displays the message **Current study**. No other options are available.

### Open study

Clicking **Open study** will close the currently open study and open the study you want to view.

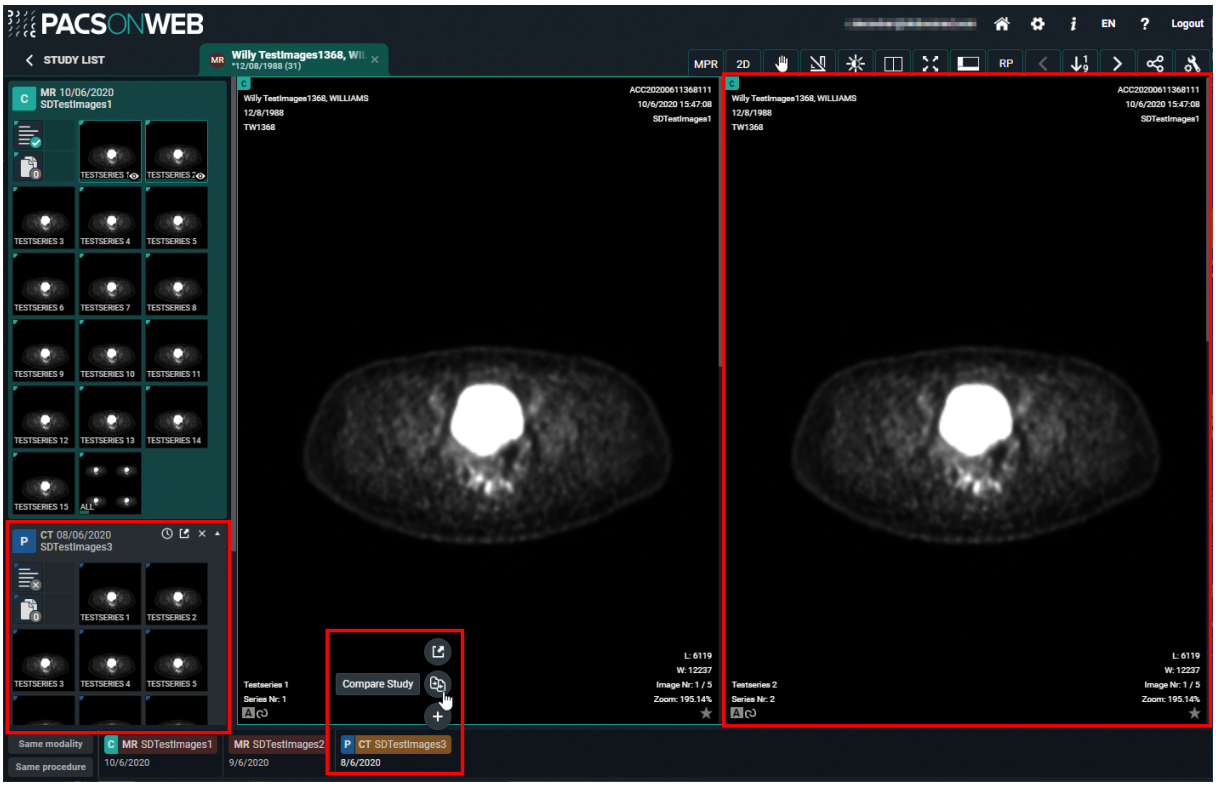

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## Compare study

Clicking **Compare study** will display the study in the series picker and in the image screen.

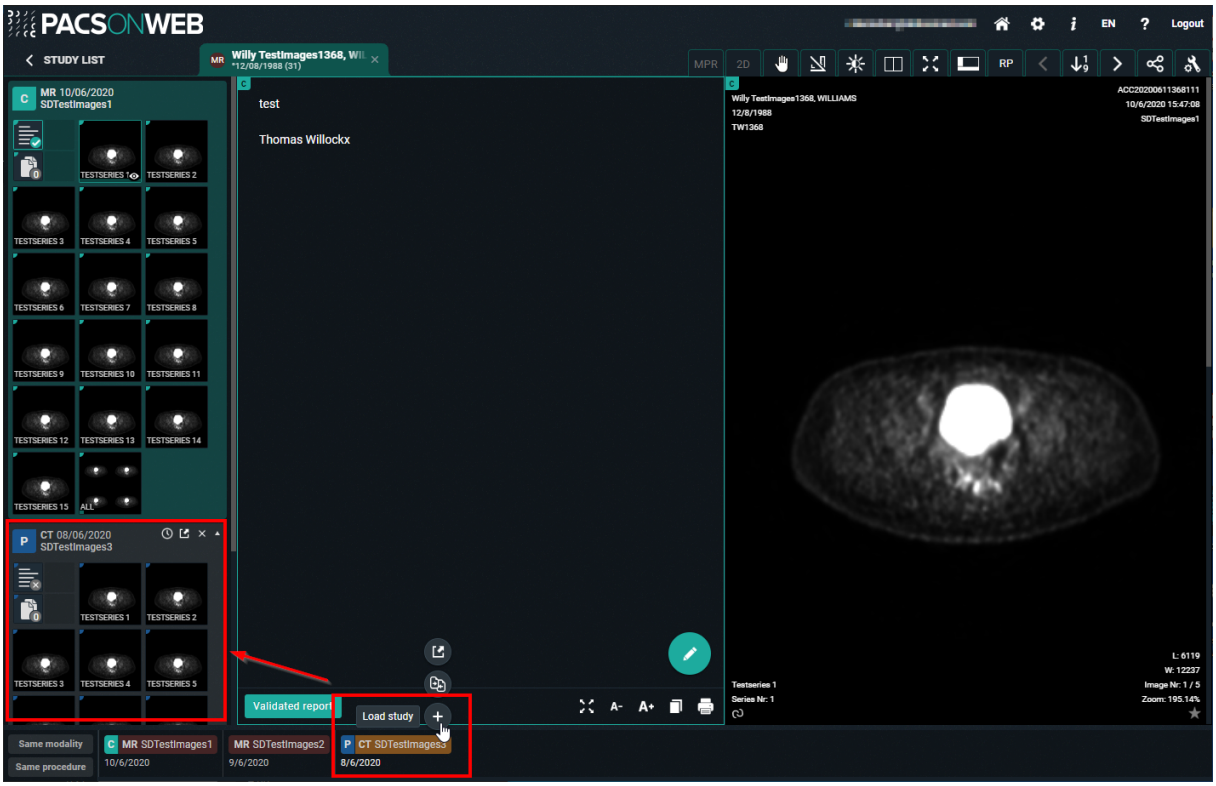

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## Load Study

Clicking **Load study** will display the study in the series picker.


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## 6.2 Series picker

### Available series

In the series picker a list of available series for each study is presented.

If the series picker is not shown, click **Visible elements**  in the menu bar.

You can choose to display the series picker at the left or right side of the screen or not at all.

- **Series picker left**
- **Series picker right**
- **No series picker**

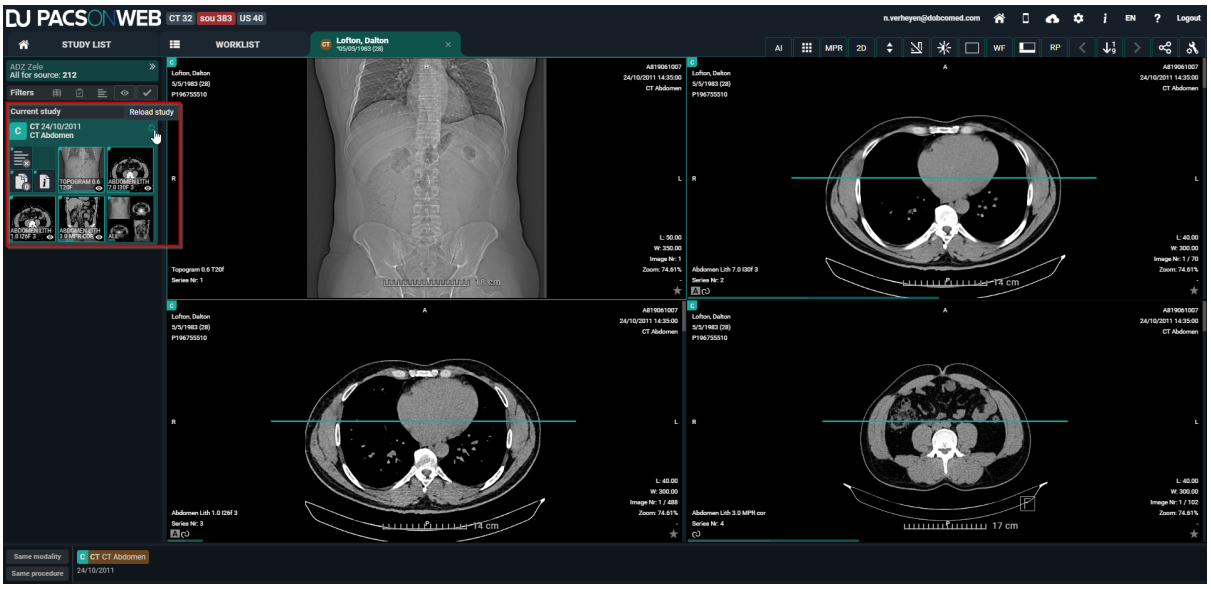
### How information is displayed

The type of study, the study date and the procedure description of the study are listed at the top of the image series.

In the top right corner of the series picker, several icons may be displayed that indicate status information and provide access to specific features.


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| Icon | Description |
|---|---|
|  | This icon is always available. Clicking it will reload the study, e.g. in case additional images have been made available for the study. |
|  | When a modification has occurred in the background (new images added/images removed) while a study has been opened, a red dot appears next to the reload icon. Additionally, a toast message is displayed at the bottom of the screen, prompting the user to reload the study. |
|  | In case an anomaly was registered for the study, a warning icon is displayed in the top right corner. Clicking the icon opens a pop-up window containing additional details about the anomaly. |
|  | If images are available only for a limited period, a clock icon is displayed. Hovering over the icon opens a pop-up window showing the retention period for each series. |




## Report, documents & Order information

The series picker also contains the report, additional documents and the order information. You can consult these, download them, print them, etc.


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**Important!**

This is only the case when these are available and you have access to them.

 Validated report available

 Preliminary report available

 Draft report available

 No report available

 Document(s) available (3 for this example)

 No documents available

 Order information available

 Validated addendum available

**Important!**

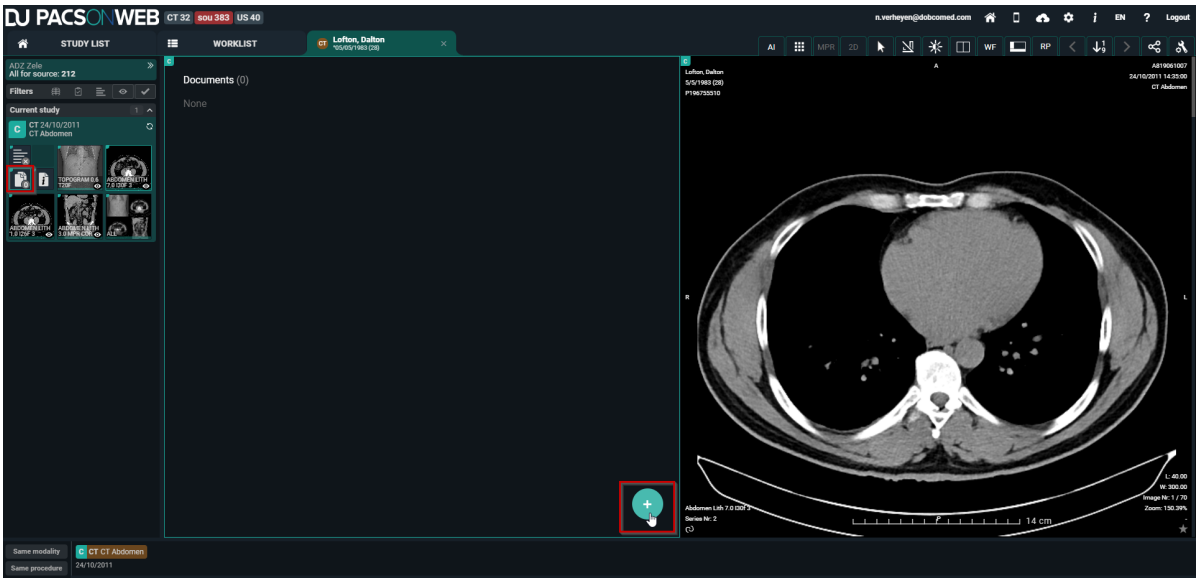
Only administrators of a study can create a report, add documents and add order information.

- Create report

  See: Report display (Page 283)
- Add documents:

  Click the documents icon and subsequently the green plus icon.


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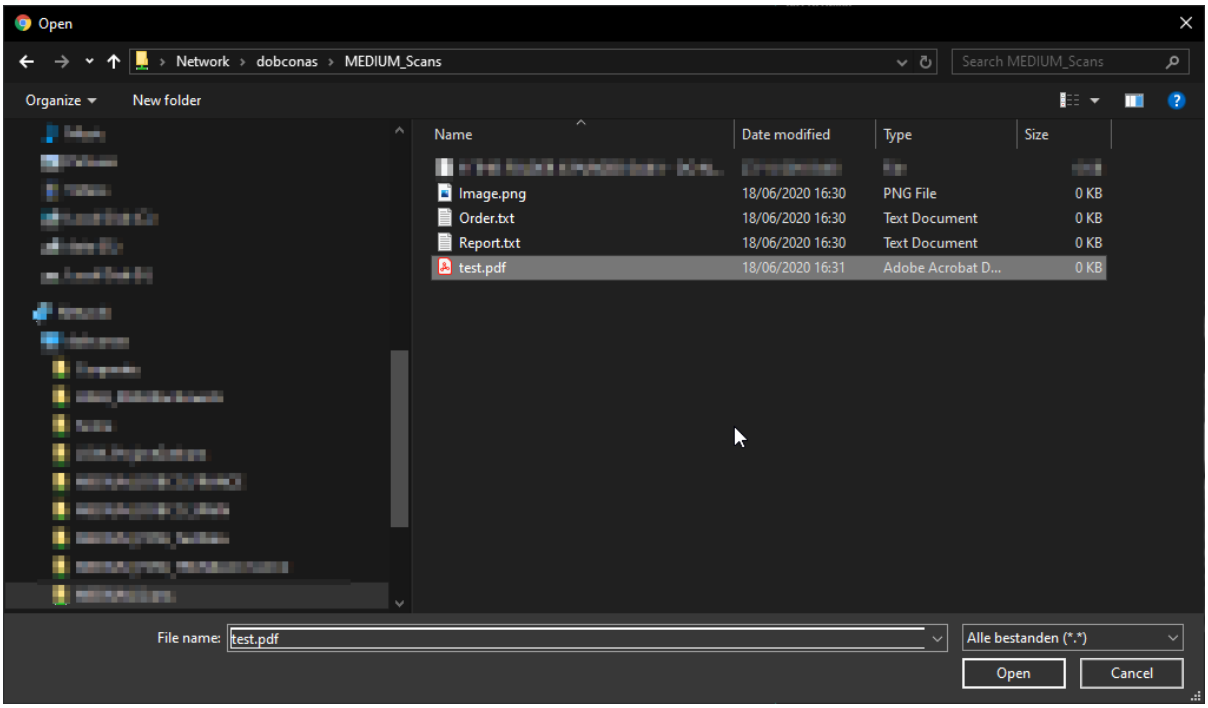



Select the appropriate document and click Open.

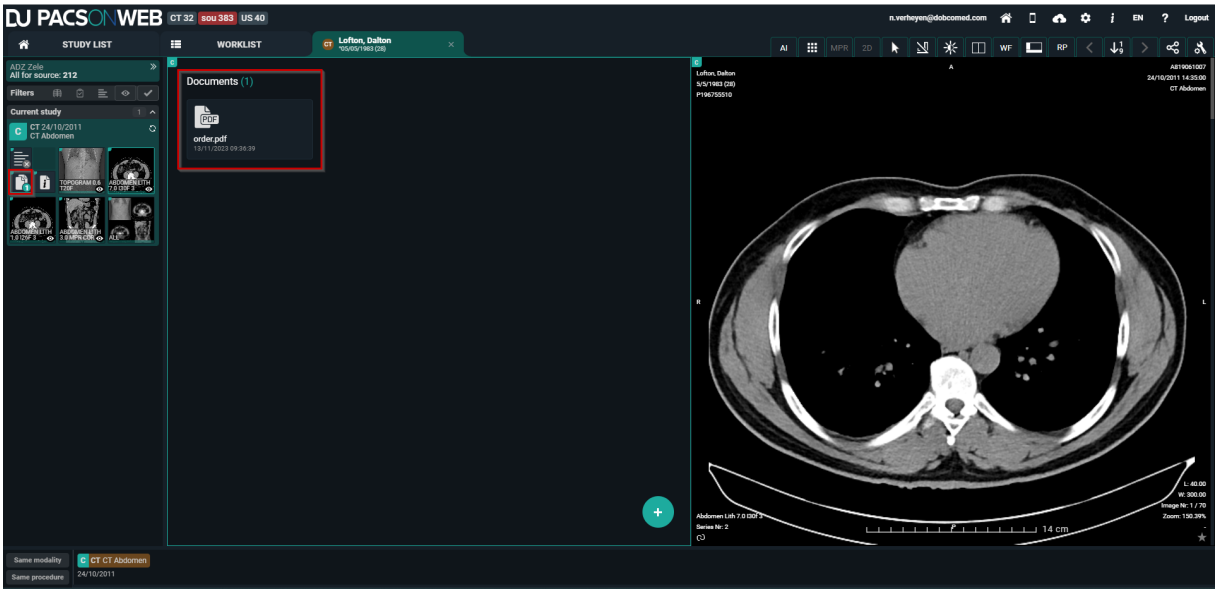
Only the following file types can be uploaded:

- PDF
- RTF
- TXT
- PNG
- JPEG
- JPG


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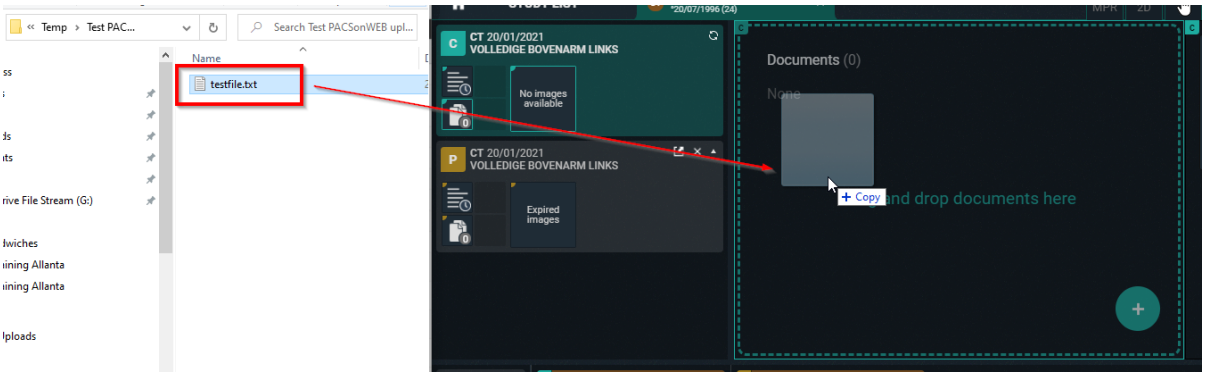



The document is uploaded and displayed in the documents overview.

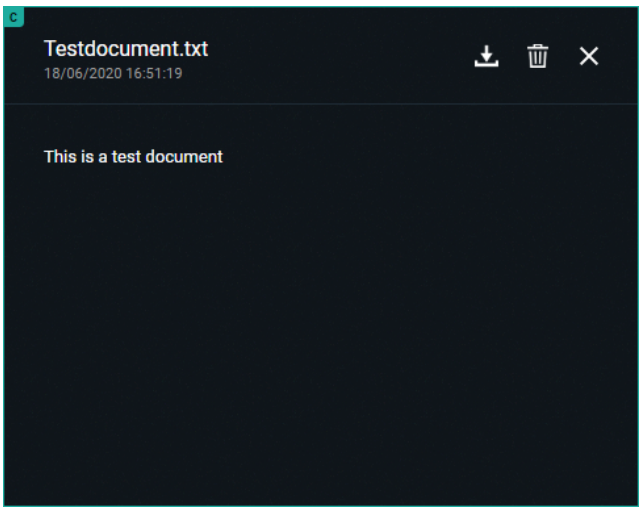


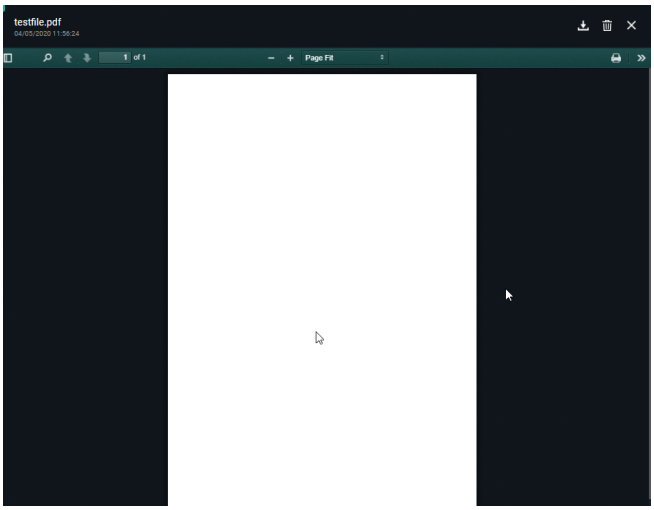

Drag and drop: You can also add a file by dragging it directly from your computer onto the Documents window.


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By clicking the document you can open it, download it or remove it.

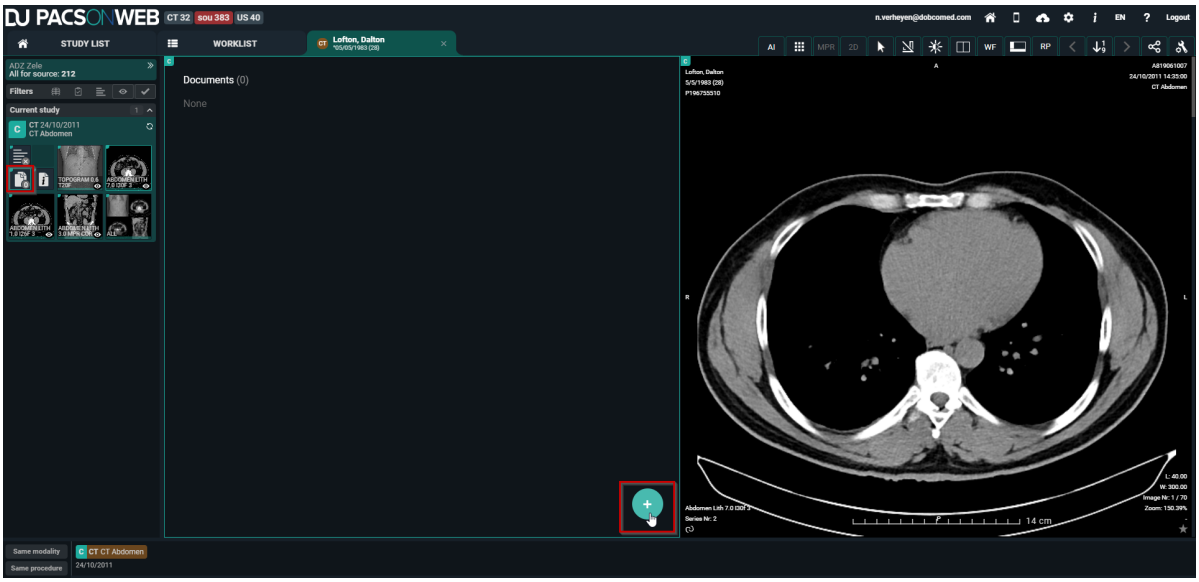


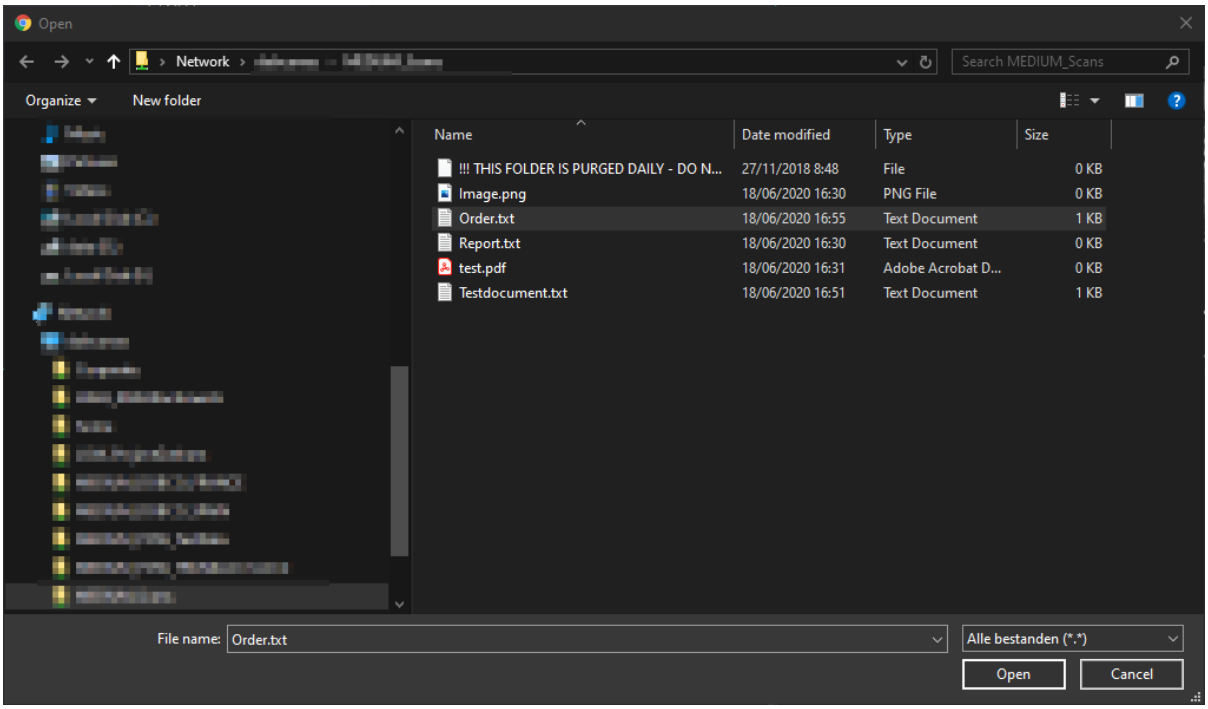

- Add order information:

  Click the documents icon and subsequently the green plus icon.


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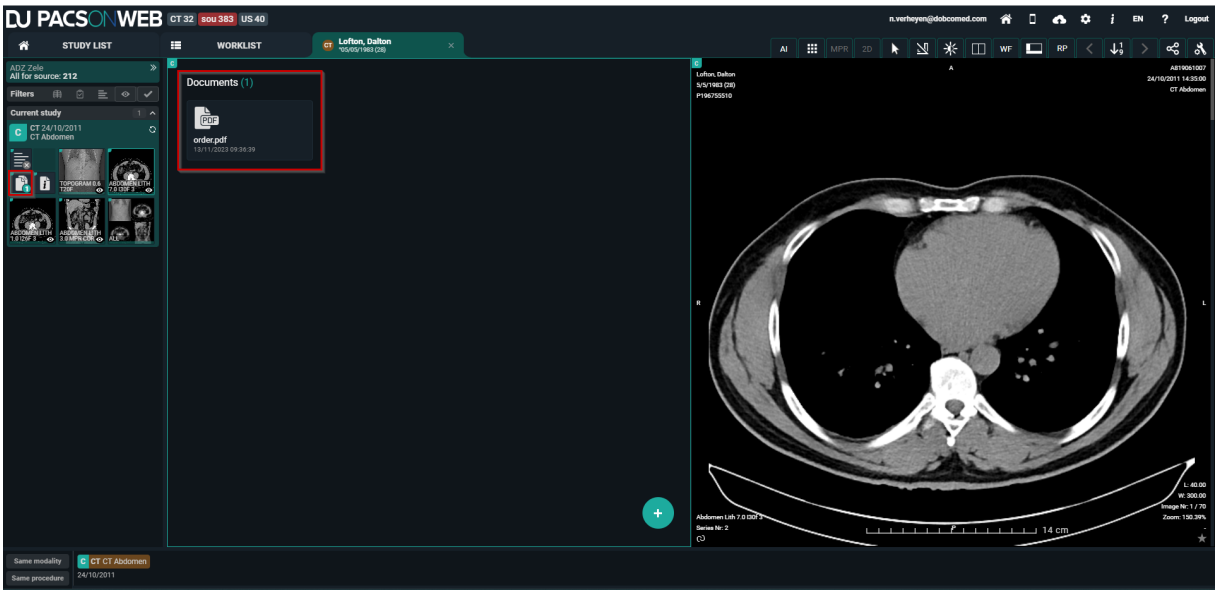



Drag and Drop or select the appropriate document and click Open. The file must have the name 'Order' and file type must be txt or pdf.




The uploaded document is displayed in the documents overview and the order icon becomes visible in the series picker.


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Encapsulated PDF files will be shown in the "Documents" viewport.

**Important!**

Existing encapsulated PDF, processed before DeepUnity PACSonWEB 3.3.300, will be shown with document title "Unknown".

## Displaying Study Information

Clicking on the order information icon  will display the scanned order, if it is available and if you have the required access rights.

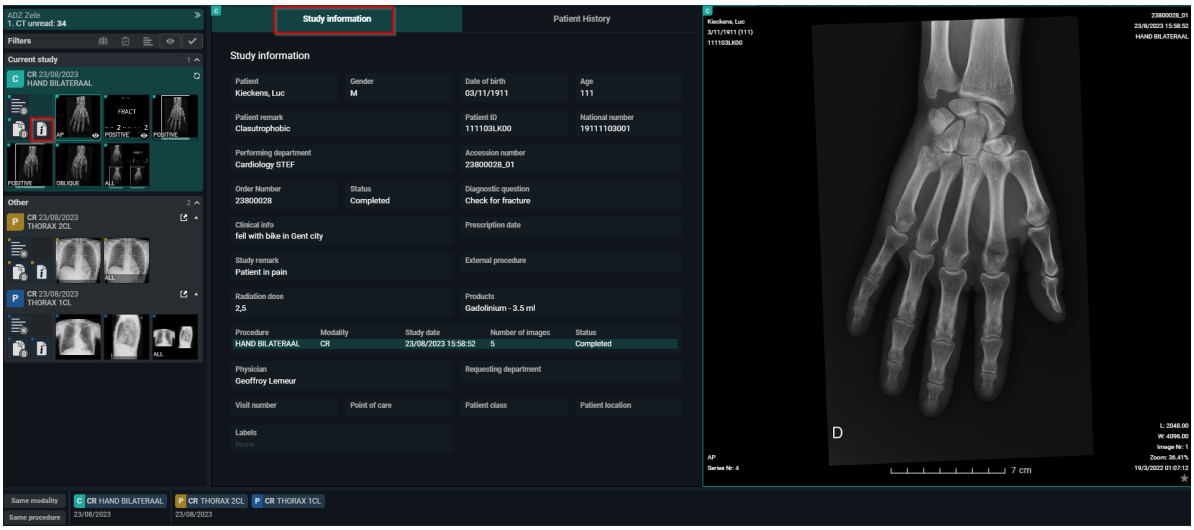
A second tab displays the study information. If no scanned order is available, the study information is displayed immediately.

The study information panel shows all the information we have available about the patient, the study, the order and the requesting physician.

If the fields are filled in, they will be highlighted, otherwise they will be greyed out. This panel is read-only, none of the fields can be adapted here. If changes need to be made to this information, please refer to Administration (Page 218) for instructions.


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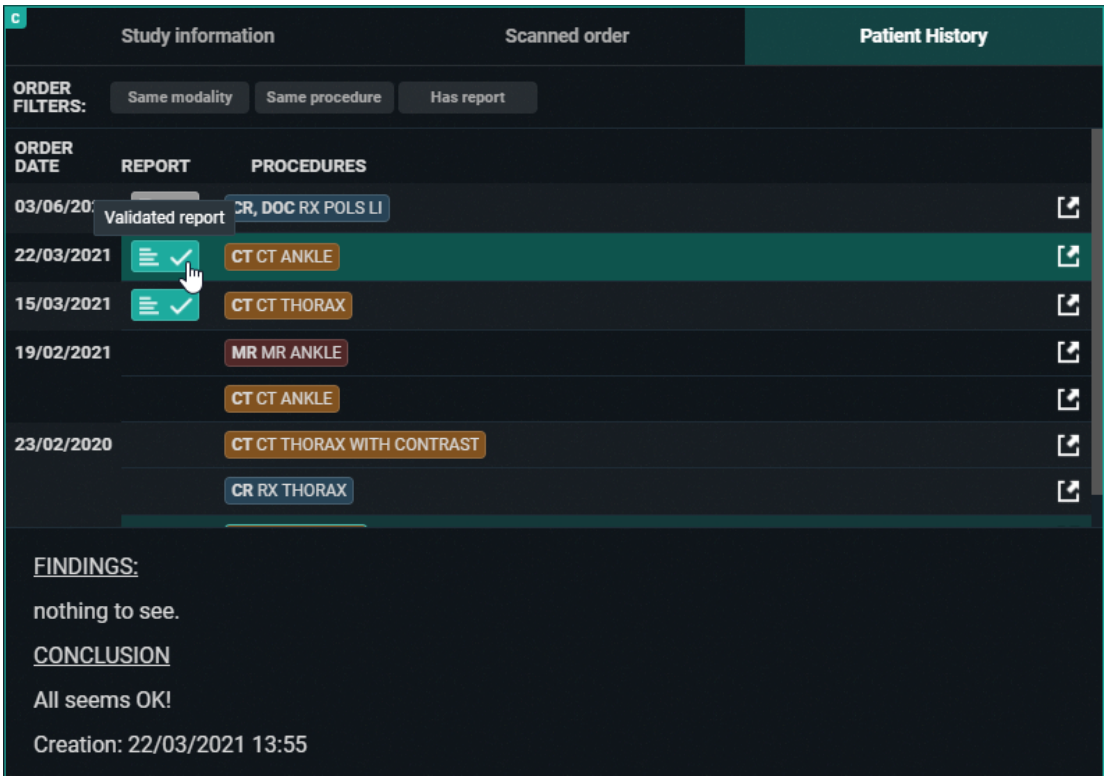
# Overview of the study information panel




In a third tab the patient history is available. This contains a list of all studies for the patient, sorted chronologically.

With the order filters the list can be filtered to get a better overview.

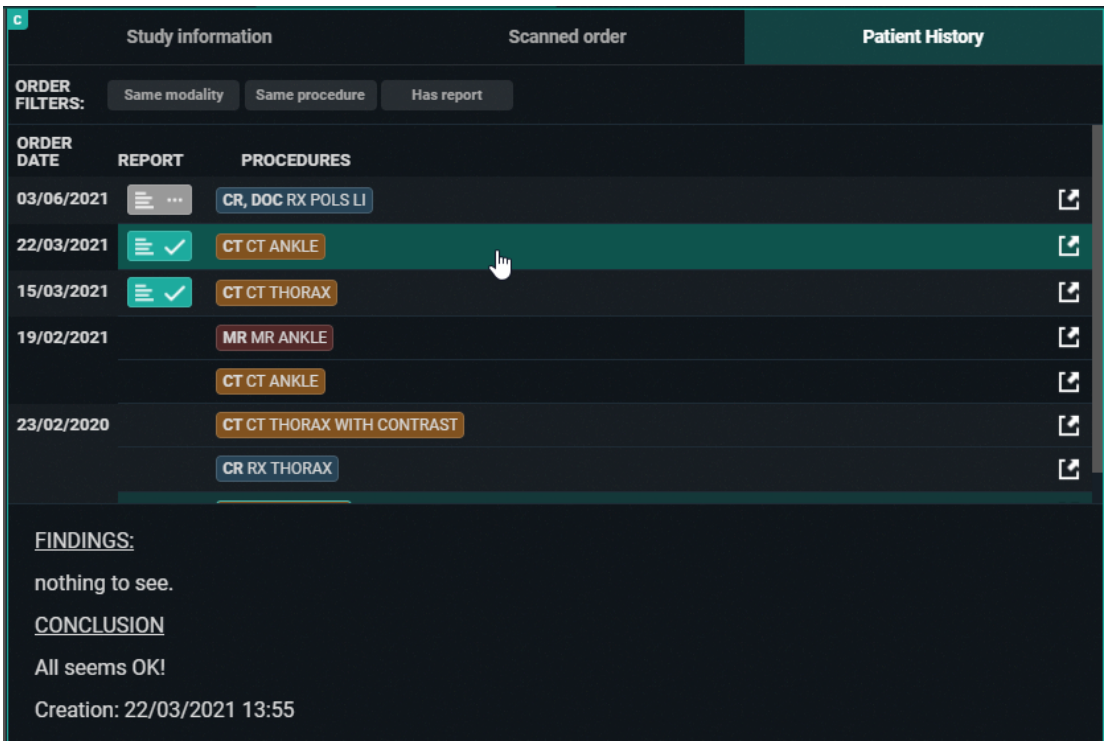
By clicking a report icon, the report for the related study will be displayed in the section below the list.





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By clicking a procedure description the images for the related study will be opened automatically for comparison with your current study.




**Note:**

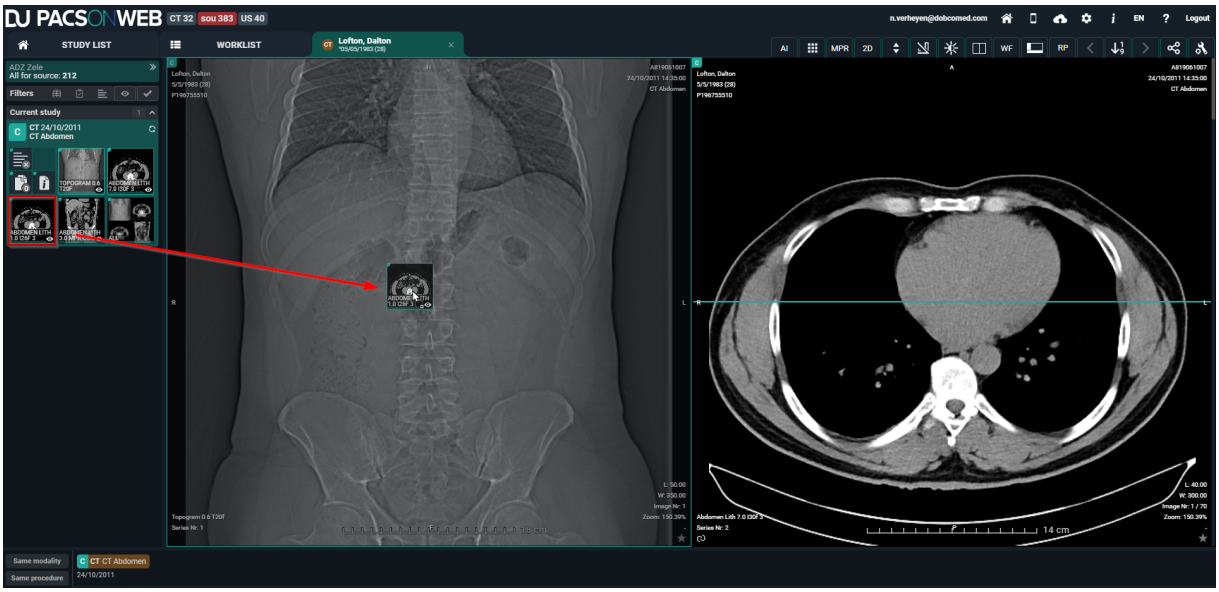
The fields that are being displayed in the order information can be configured on a source level.

If you want to change the displayed fields or the access to the order information for your source, please contact our Service Desk.

## Displaying series

You can add series to the image screen by dragging or clicking on them.


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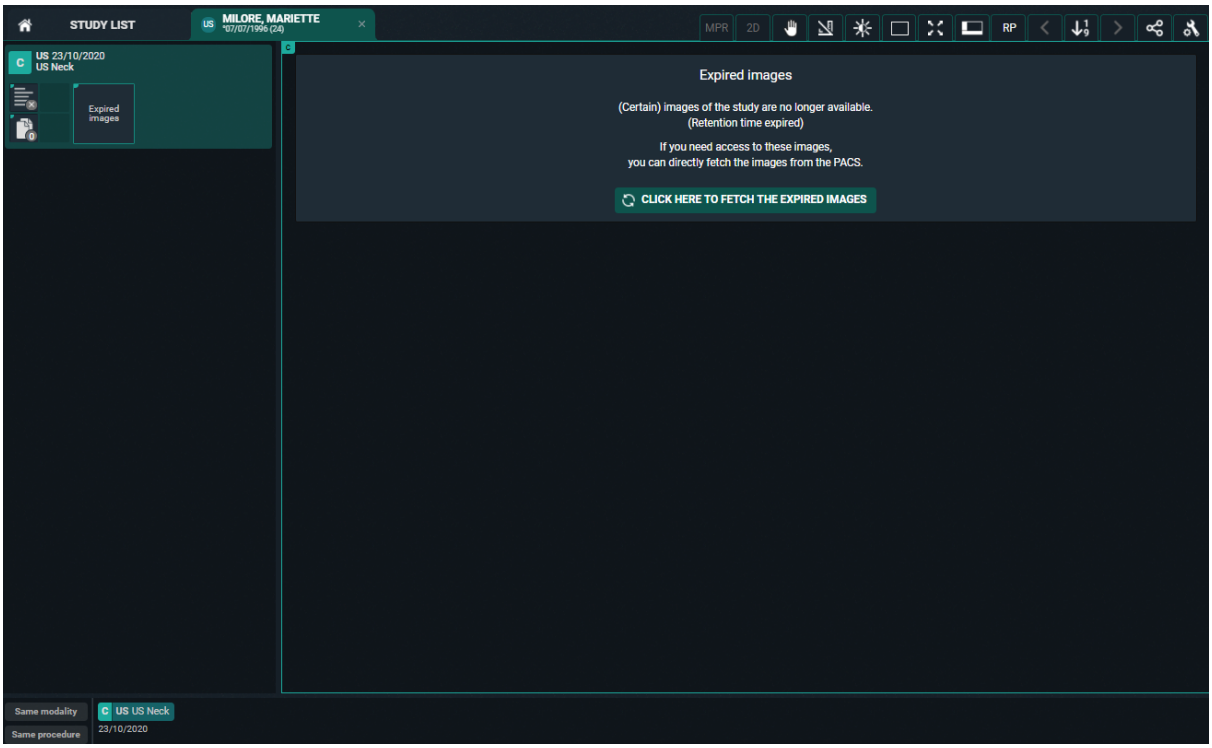



By default, images are kept online for a period of 1 year, 3 years for mammo. In case the retention time has expired, the images will be removed form DeepUnity PACSonWEB and a series, marked as "Expired images", will be available in the series picker.

The same series is also shown in case a study is available for at least 1 week and no images are available yet.

Depending on the sending radiology department, you may have the possibility to retrieve the expired / missing images, using the Fetch functionality.


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In case this option is available, you have the possibility to:

- **FETCH IMAGES:** fetch the set of images that were initially available (possibly filtered)
- **FETCH ALL IMAGES**: fetch all images of the exam

You can add multiple studies to the list by clicking on a study in the history (Page 171).

Also in case you logged on as a patient with a reference code that allows access to multiple exams, all exams will be loaded into the series picker.

## Prior and subsequent studies

When a study is opened, DU POW indicates with the symbols P and S if an older or more recent study is also available that can be compared with the current active study.

P = Prior study: The study date is older than the current study's date.

S = Subsequent study: The study date is more recent than the current study's date.

When an image from a prior or subsequent study is in view, the study date is highlighted and the time difference between this study and the current study is indicated.

- Subsequent study:

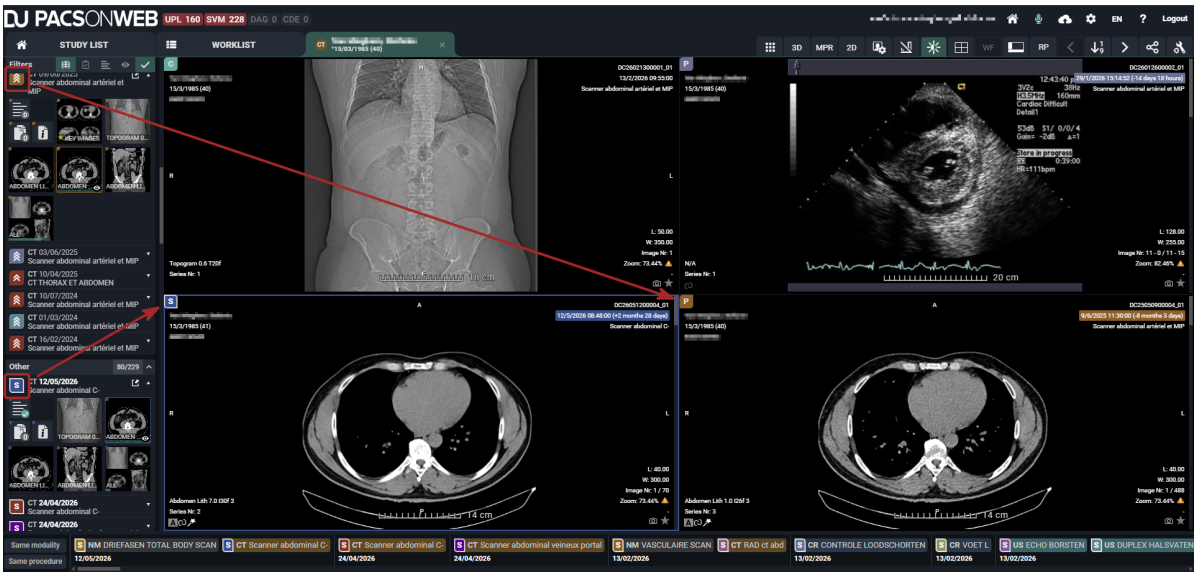

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12/5/2026 08:48:00 (+2 months 28 days)

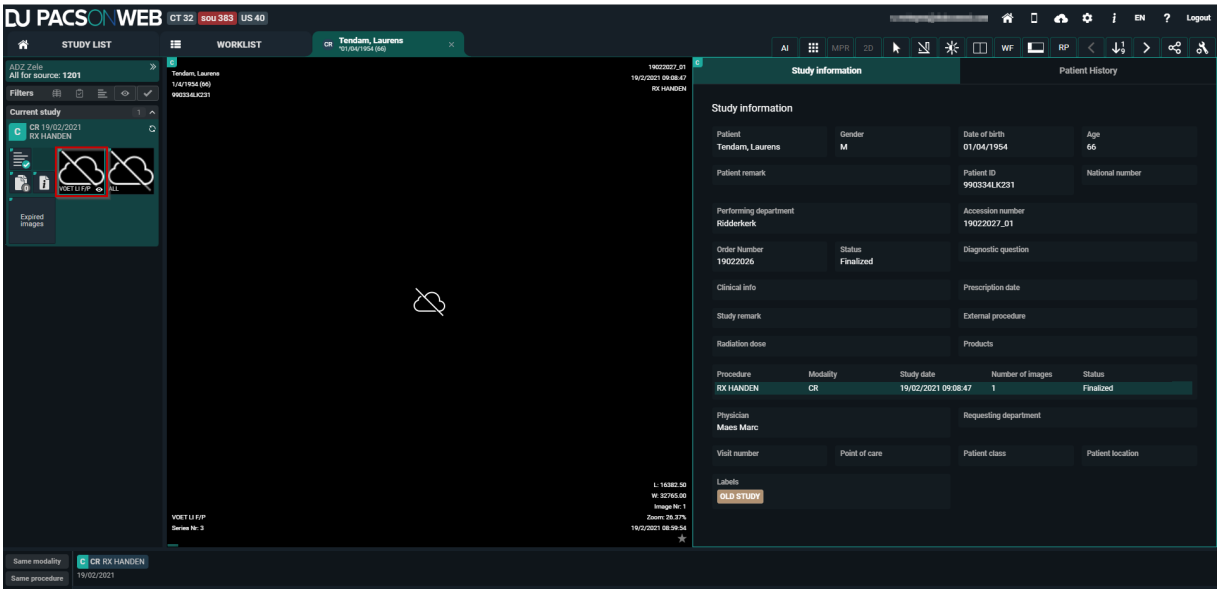
- Prior study:

  19/1/2026 05:31:00 (-25 days 4 hours)

When you hover over the P or S icon in the viewport, respectively, the tooltip will also indicate the date and time difference compared to the current study.



In case an issue occurs when loading an image, the following icon will be displayed. In such case, please contact the service desk.




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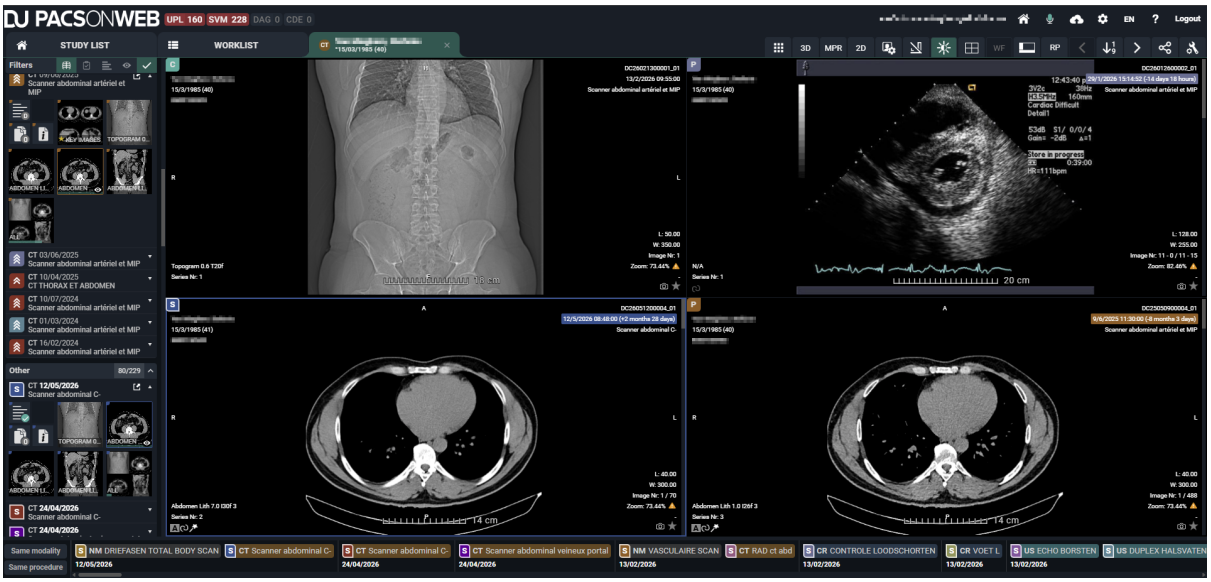
## 6.2.1 The extended series picker

**The extended series picker** provides a detailed overview of studies where users can:

- View similar studies
- Filter the list of studies by specific criteria
- Link studies as relevant

To enable the extended series picker, go to **User settings** > **Preferences** > **Viewer** and enable the toggle **Show prior studies in series picker**.

## Grouping of studies




In the extended series picker, studies are grouped into categories:

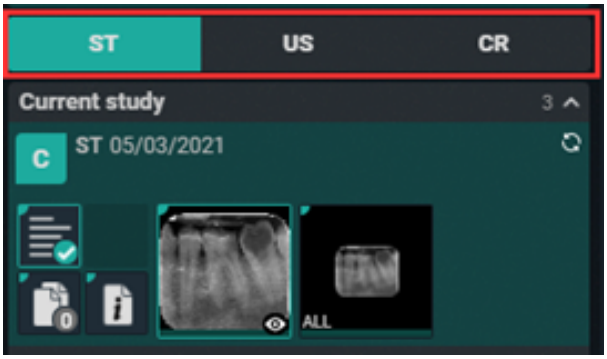
- **Current study:** Current open study
- **Relevant:** Prior studies considered relevant for the open study
- **Other:** Other prior studies

All studies displayed in the extended series picker belong to the same patient.


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## Handling multiple primary studies

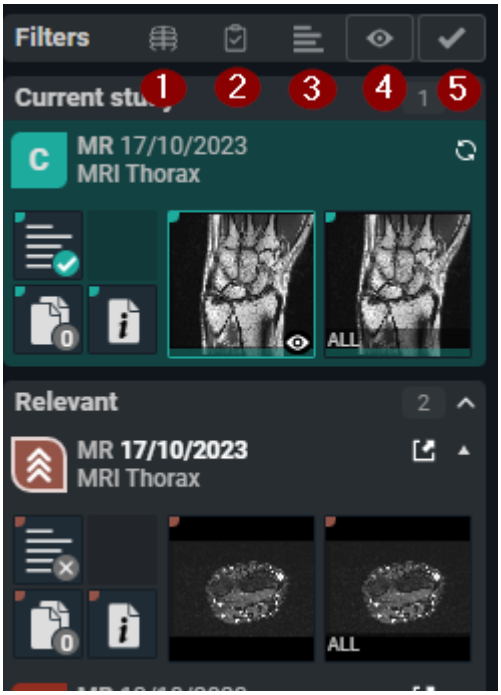



For orders that have more than one primary study, the user can switch between the studies via a tab in the extended series picker, displayed above the current study.

## Series picker filters

Within the extended series picker, the list of studies can be filtered using predefined filters.

To apply or remove a filter, click the icon.




1. Same modality
2. Same procedure
3. Has report


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4. Has images
5. Is not cancelled

Active filters are green while inactive filters are greyed out.

Active filters are remembered and applied when navigating to the next study.

## Linking and unlinking relevant studies

From the series picker, you can view if a study is current, prior, subsequent, or linked with high or low priority.

| Icon | Study |
|---|---|
|  | Current study |
|  | Prior study |
|  | Subsequent study |
|  | Study linked with high priority |
|  | Study linked with low priority |

There are two ways to link different procedures as relevant.

- Linking manually from the series picker
- Linking while comparing studies



**Note:**

Relevant linked procedures are registered on a user level and therefore apply only within the context of a user account.

### Linking manually

To link a procedure as relevant from the series picker, find the icon that indicates the type of study (i.e., P for prior study, S for subsequent study).

- Click on the icon once to link a procedure as relevant with high priority.
- Click on the icon of the same procedure a second time to link the procedure as relevant with low priority.


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The icon of the study will change to indicate that the procedure is linked as relevant with high or low priority.

## Linking when comparing

You can also link a procedure as relevant while comparing studies. There are two ways to compare the current study with another study.

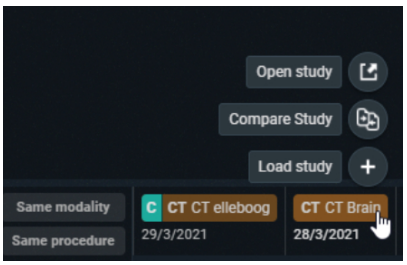
- From the series picker
- From patient history

To link a procedure as relevant from the series picker




1. Click on the study description.
2. In the dialog that appears asking if you would like to link the procedure as relevant, click **Yes**.

To link a procedure as relevant from the patient history:





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1. Hover over the label in the patient history and click **Compare study**.
2. In the dialog that appears asking if you would like to link the procedure as relevant, click **Yes**.

**Note:**

Procedures are linked, not studies.

When linking procedures as relevant with studies from one patient, the same will occur for other patients that had the same studies.

### Unlinking a relevant procedure

You can unlink a relevant procedure from the extended series picker. To do so, click the icon of the linked procedure..

- For procedures marked as relevant with low priority, click the icon once to unlink the procedure.
- For procedures marked as relevant with high priority, click the icon twice to unlink the procedure (once to change the priority to low, and a second time to unlink the procedure).

**Important!**

A relevant procedure cannot be unlinked if the study has the same procedure as the open study.

## Autocompare

If the user option **AutoCompare** is activated, the study at the top of the **Prior** list will automatically be displayed in compare when loading a study.

The list with Prior studies contains:

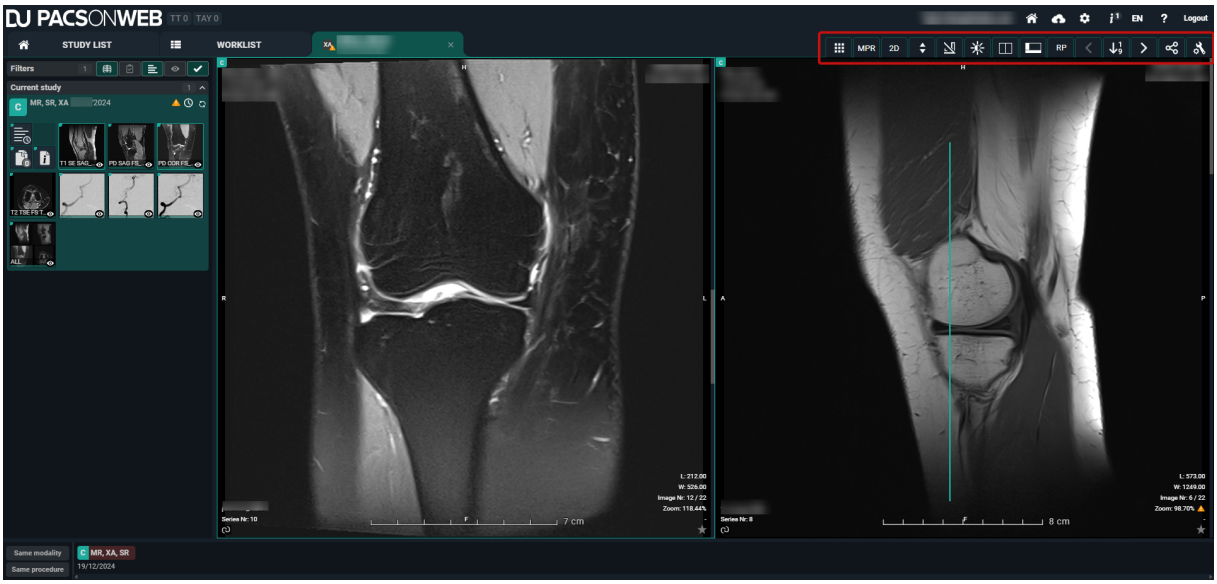
- The first study of the same order as the current study
- The first relevant linked study
- Any other study from this patient

  A prior study is automatically considered relevant if it has the same procedure as the current study.

## 6.3 Toolbar

The upper right part of the study page contains a menu bar with image editing tools and other functions.


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## Submenu tools

| Icons | Tool |
|---|---|
| | Open study in external app |
| 3D | Volume Rendering |
| MPR | MPR: Multiplanar reconstruction |
| 2D | 2D: Thick slices |
| | Image control<br>**Note:**<br>**Pan / Select** and **Reference lines** are activated by default. |
| | Annotations |
| | Window level |


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| Icons | Tool |
|---|---|
|  | Layout |
|  | Visual elements |
| RP | RP: Reading Protocols |
|  | Previous step |
|  | Reading Protocol Steps |
|  | Next step |
|  | Share |
|  | Study administration |

The **pan**' and **reference lines** functions are activated by default.

## See also


Administration (Page 218)
Annotations (Page 201)
Image control (Page 196)
Image transformations (Page 199)
MPR and related tools (Page 253)
Open study in external app (Page 265)
Other image editing tools (Page 211)
Share (Page 215)
Volume Rendering (Page 266)




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## 6.3.1 Image control

You can customise the image to your needs, using the tools available in **Image control**.

| Icon | Tool | Description |
|---|---|---|
|  | Scrolling | Function of the scroll wheel. Hold down the left mouse button and move the cursor over the image. You can now scroll through the series. |
|  | Region zoom | Zoom in on a specific region. |
|  | Stepless zoom | Zoom in on the image without intermediate steps. |
|  | Zoom out | Zoom out. |
|  | Pan / Select | You can still drag the image even if you've zoomed in on it. |
|  | Density measurement | Select this function and hold down the left mouse button to measure the density in Hounsfield units (HU), optical density (OD) or unspecified units (US). |
|  | Spatial locator | This function is used to navigate to the same reference point in series. It only works for CT and MRI images. |


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| Icon | Tool | Description |
|---|---|---|
|  | Cine loop | Use this function to automatically scroll through all images without actually using the scroll wheel. The used frame rate is the value, specified in DICOM Tag RecommendedDisplayFrameRate.<br>In case this value is not available, by default a frame rate of 30 fps is used. You can also adjust the scrolling speed yourself. |
|  | Auto link series | Different series with the same "frame of reference" are linked automatically for simultaneous scrolling. |
|  | Reference lines | This tool is activated by default and uses lines to indicate the position of the selected image compared to another series. This tool only works for CT and MRI images. |
|  | Image transformations | For more information, see Image transformations (Page 199) |

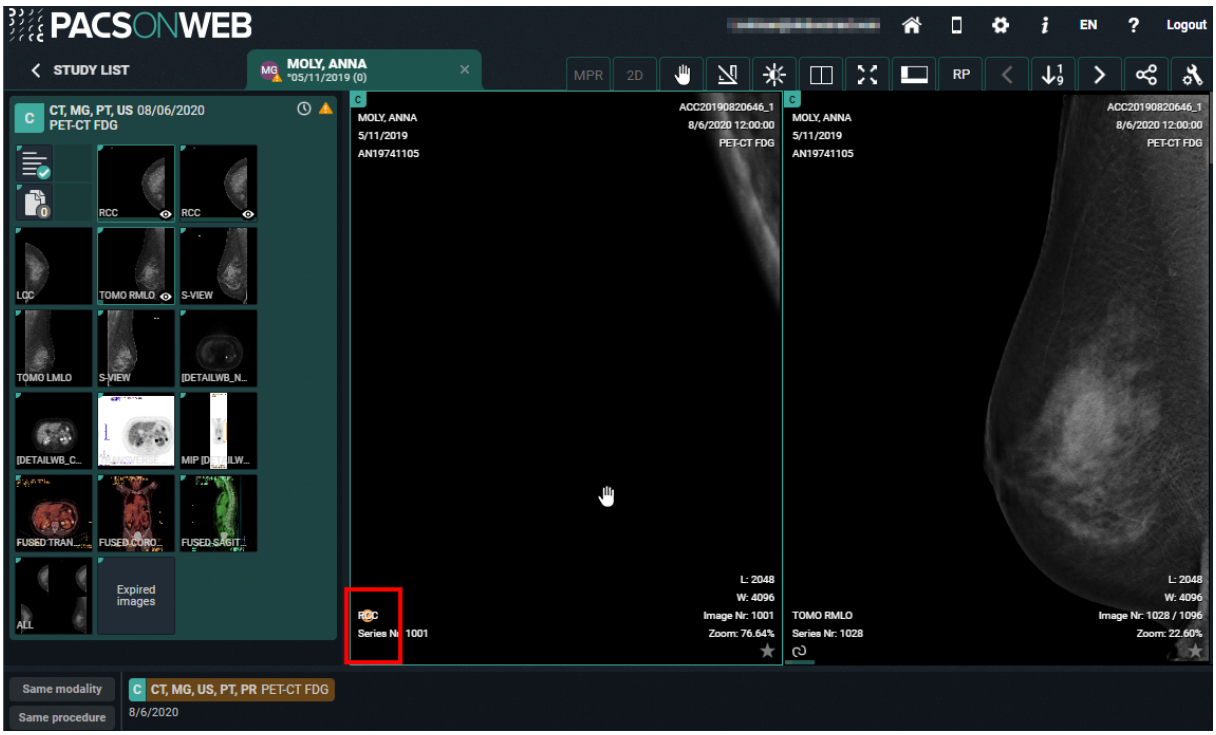
**Tip:**

To zoom the image you can use the following short cut: SHIFT (keyboard) + scroll (mouse wheel)

To zoom the image to 100% (1 pixel on the image = 1 pixel on the screen), press '=' on your keyboard


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When performing a zoom action, an orange indicator dot is displayed at the bottom left until the image is fully loaded.




## Note:

### Touch events on mobile devices

Independent of the selected image control or image editing tool, it is possible to drag or zoom in or out on the image:

- Zoom: pinch in or out on an image to zoom in or zoom out
- Pan: Hold two fingers on the image and move them simultaneously to drag the image

All image control and image editing tools can be used when set active by touching the screen with one finger.

E.g.: Use the scroll tool by sliding one finger up and down the image


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**Restriction:**

Be aware: the following features cannot be used when your device is on IOS12:

- Region Zoom
- Stepless Zoom
- Zoom out

You can use pinching in/out instead, as described above.

- Pan
- Density measurement
- Spatial locator
- Window level

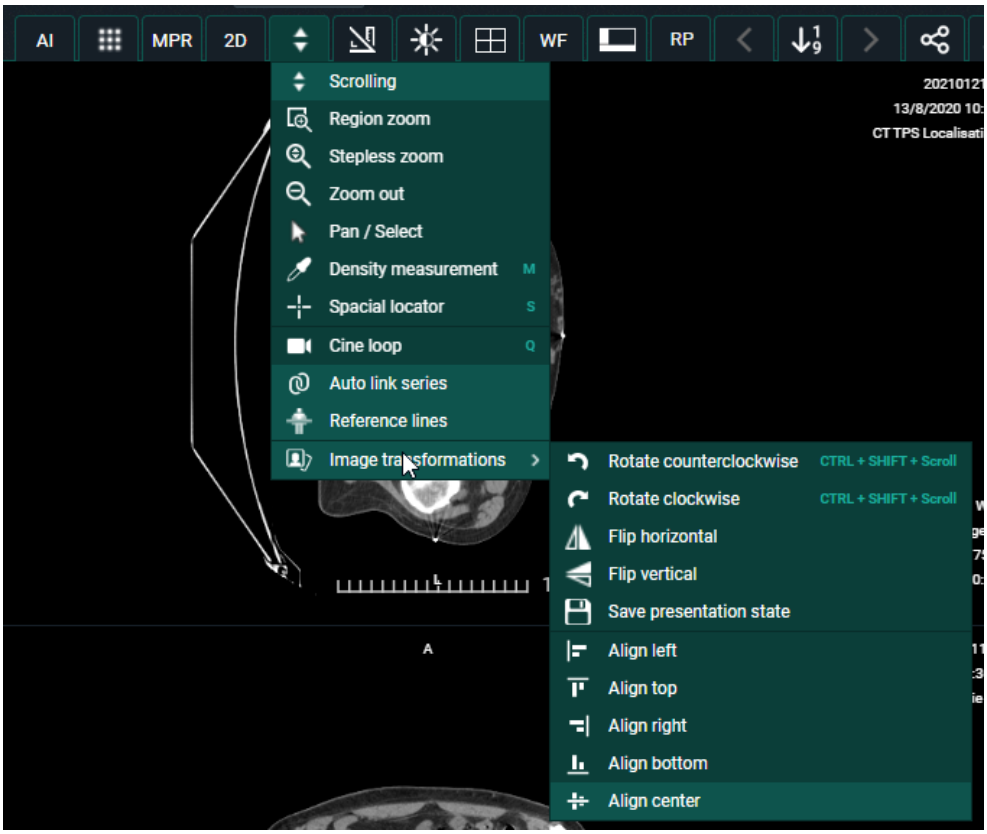
You can use presets.

- Adding and modifying annotations

### 6.3.1.1 Image transformations

You can change the positioning of an image. In the toolbar, click**Image control** and select **Image transformations** from the drop-down list.


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You can perform the following transformations:

- Rotate counter clockwise
- Rotate Clockwise
- Flip Horizontal
- Flip Vertical
- Align left
- Align top
- Align right
- Align bottom
- Align center

**Tip:**

To rotate the image you can use the following short cut: CTRL + SHIFT (keyboard) + scroll (mouse wheel)

**Save presentation state:**


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A Presentation State is an independent DICOM SOP Instance that contains information on how a particular image should be displayed. This is used when a correction needs to be made for an image or multiple images. For example: Flipping or rotating an image.

When the correction is applied, click **Save presentation state**.

The last saved presentation state will be displayed.

**Note:**

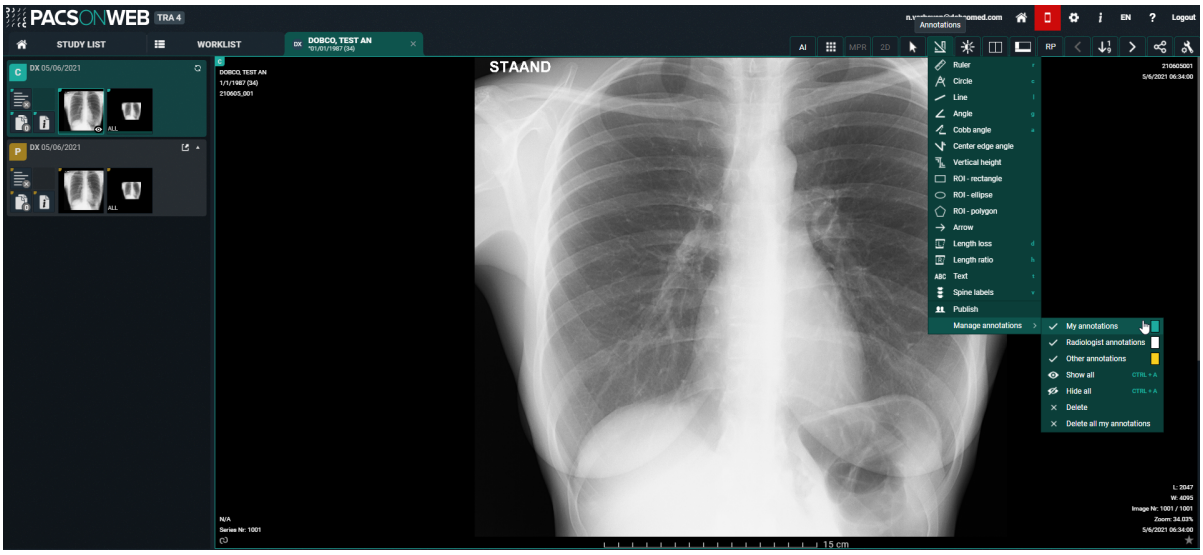
Only source admins or users with the permission SavePresentationState can save a presentation state.

## 6.3.2 Annotations

Clicking **Annotations** displays a secondary menu, where you can perform a variety of measurements.

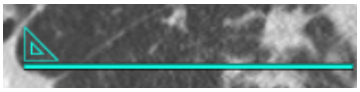
**Note:**

If you want the measurement tool to be sticky so you can draw multiple annotations of the same type after another, go to **User settings > Preferences > Viewer** and enable **Keep annotation tools sticky until manually released**.





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| Icon | Measurement | Description |
| --- | --- | --- |
|  | **Ruler** | Length measurement: measurement between two points.<br><br>**Tip:**<br><br>When drawing a ruler that is near horizontal, you can have it adjusted automatically to a ruler that is perfectly horizontal with respect to the image by holding the SHIFT button.<br><br>You can recognize it by the following symbol:<br><br>  <br><br>The same applies for a near vertical ruler. |
|  | **Circle*** | Circle with midpoint identifier and measurement of the radius. |
|  | **Line** | The line between two points. |


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| Icon | Measurement | Description |
|---|---|---|
| | | **Important!**<br>When drawing a line that is near horizontal, it will be adjusted automatically to a line that is perfectly horizontal with respect to the image.<br>The same applies for a vertical line.<br>You can recognize it by the following symbol:<br>  <br>If this behavior is undesired, press the SHIFT key while drawing the line. |
|  | **Angle** | Three-point angle measurement: the angle defined by selecting three dots. |
|  | **Cobb angle** | The angle, defined by drawing two lines. |
|  | **Center edge angle** | Centre edge angle with angle measurement: Centre edge angle that creates an angle with the tangent of the figure on which it is placed. |


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| Icon | Measurement | Description |
|---|---|---|
|  | **Vertical height** | The perpendicular line between 2 points. |
|  | **ROI-rectangle** | Density measurement for a rectangular area. Displayed values are: A: total area; Dens: average value for the area; Min: minimum value within the area; Max: maximum value within the area; $\sigma$ : standard deviation. |
|  | **ROI-ellipse*** | Density measurement for a elliptical area. Displayed values are: A: total area; Dens: average value for the area; Min: minimum value within the area; Max: maximum value within the area; $\sigma$ : standard deviation. |
|  | **ROI-polygon** | Density measurement for a freehand annotation. Displayed values are: A: total area; Dens: average value for the area; Min: minimum value within the area; Max: maximum value within the area; $\sigma$ : standard deviation. |
|  | **Arrow** | Arrow with text box to add text. |
|  | **Length loss** | Measure the difference in length between 2 lines. |


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| Icon | Measurement | Description |
| --- | --- | --- |
|  | **Length ratio** | Measure the length ratio of 2 lines. |
|  | **Text** | Text that can be added as an annotation to images. |
|  | **Spine labels** | Placing of the spine labels on the vertebrae.<br><br>**Note:**<br>• Spine label annotations will be placed on the image itself + 3 slices before and 3 slices after<br>• Spine labels on the image itself will be in lighter green compared to the other images<br>• The spine label tool detects automatically if the user wants to label from top to bottom or bottom to top (cranial - caudal) |
|  | **Publish** | Make your annotations visible for all users that have access to the study. |
|  | **Manage annotations** | Manage the annotations, displayed on the image. |


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| Icon | Measurement | Description |
|---|---|---|
|   | **My annotations** | Select if your personal annotations, marked in green, are displayed or not. |
|   | **Radiologist annotations** | Select if the annotations made and published by the creator of the report or received through DICOM, marked in white, are displayed or not. |
|   | **Other annotations** | Select if annotations made and published by other users, marked in yellow, are displayed or not. |
|  | **Show all** | Show all of the above annotations. |
|  | **Hide all** | Hide all of the above annotations. |
|  | **Delete** | Delete the annotation you have selected. (only for own annotations) |
|  | **Delete all** | Delete all of your own annotations. |

**Note:**

*When activating Circle or ROI-ellipse on an MPR view in a Volume Rendering viewport, the circle ROI tool can be used, which combines these tools into a single circle measurement that displays the diameter, area, and density within the circle area.


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**Note:**

**Administrators**

Administrators of a radiology service can delete annotations by selecting the annotation and clicking the **Delete** button.

## Shortcuts

**Tip:**

You can use the following shortcuts:

| | |
|---|---|
| **Length measurement** | R + left mouse button down |
| **Circle** | C + left mouse button down |
| **Line** | L + left mouse button down |
| **Angle measurement** | G + left mouse button down |
| **Cobb angle measurement** | A + left mouse button down |
| **Text** | T + left mouse button down |
| **Spine labels** | V + left mouse button down |
| **ROI ellipse** | E + left mouse button down |
| **Length Loss** | D + left mouse button down |
| **Length Ratio** | H + left mouse button down |
| **Show all annotations** | CTRL + A (keyboard) |
| **Hide all annotations** | CTRL + A (keyboard) |
| **Delete Annotation** | Select annotation + 'Delete' button |


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## Touch events on mobile devices

Independent of the selected image control or image editing tool, it is possible to drag or zoom in/out on the image:

- Zoom: pinch in or out on an image to zoom in or zoom out
- Pan: Hold two fingers on the image and move them simultaneously to drag the image

All image control and image editing tools can be used when set to active by touching the screen with one finger. E.g.: Use the scroll tool by sliding one finger up and down the image

**Restriction:**

Please note: the following features cannot be used on devices running iOS12:

- Region Zoom
- Stepless Zoom
- Zoom out

You can use pinching in/out instead, as described above.

- Pan
- Density measurement
- Spatial locator
- Window level

You can use presets.

- Adding and modifying annotations


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# Accuracy of measurement

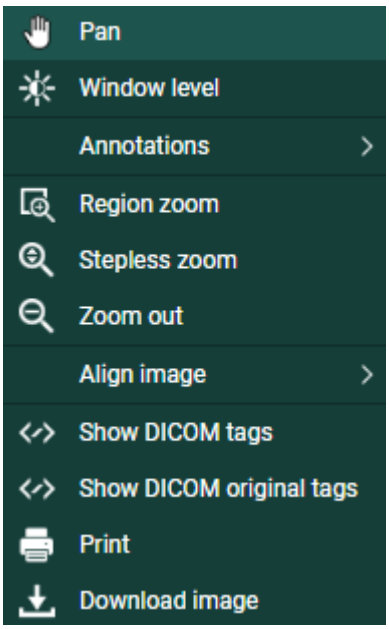
**Caution:**

The DeepUnity PACSonWEB measuring functions contain length measurements, angle measurements and density measurements based on the information that is provided by the original modality.

- Length measurements are expressed in millimeters (mm).
- Angle measurements are expressed in degrees (°).
- Density measurements are expressed in the unit, as provided by the modality: Hounsfield Unit (HU), Optical Density (OD) or UnSpecified (US).
- For measurement precision within the DeepUnity PACSonWEB environment, DeepUnity PACSonWEB relies on the precision of the information that is provided by this modality.

In case a measurements displays "N/A" as the resulting value, it implies that the original DICOM images do not contain the required information to perform a quantitative measurement.

The accuracy of the modality is defined by the PixelSpacing, which can be verified by right-clicking on the related image and selecting **Show DICOM tags**.




## PixelSpacing

The resolution (x,y) is available in the DICOM Tag **PixelSpacing** (0028,0030) and is expressed in mm.


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| | | |
|---|---|---|
| 0028,0004 | PhotometricInterpretation | MONOCHROME1 |
| 0028,0008 | NumberOfFrames | 1 |
| 0028,0010 | Rows | 4740 |
| 0028,0011 | Columns | 3540 |
| 0028,0030 | PixelSpacing | 0.05<br>0.05 |
| 0028,0100 | BitsAllocated | 16 |
| 0028,0101 | BitsStored | 12 |
| 0028,0102 | HighBit | 11 |

The resulting value for a measurement within DeepUnity PACSonWEB, will always be displayed with two decimals as a result of the calculations, performed on the data provided by the modality.

A maximal deviance on a performed measurement of

$$\sqrt{(x^2 + y^2)}$$

must however be taken into account.

The accuracy of the different measurements have been validated for length measurements up to 0,01 mm and up to 1° for angle measurements.

If a measurement is made in another CE class IIa approved DICOM viewer for comparison, it must be taken into account that the measurement accuracy is affected by the coordinates of the start and end point of the line. DeepUnity PACSonWEB only allows measurement points to be set on pixel crossings. In case the DICOM viewer, used for comparison, allows any point to be selected to perform a measurement, again, a maximal deviance of

$$\sqrt{(x^2 + y^2)}$$

can occur.

Besides the measurement accuracy, we take a rounding factor into account of maximum 0,05 mm for comparison of both resulting values since it cannot be guaranteed that the user who performs the measurement selects exactly the same pixels on the image in both viewers.

If a measurement is performed in an external PACS system and imported in DeepUnity PACSonWEB, the imported measurements can differ slightly when displayed in DeepUnity PACSonWEB. As the coordinates of the measurement points can deviate from the points, used in DeepUnity PACSonWEB, the resulting value will also deviate.


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## 6.3.3 Other image editing tools

You can find the following image editing tools in the toolbar:

**Image editing toolbar**

| Icons | Description |
|---|---|
|  | Window level: Use this function to modify the brightness and contrast of the selected image. |
|  | Layout: Use this function to change the screen layout. |
|  | Fullscreen: Use this function to display the series in full-screen mode. |
|  | Visible Elements: Use this function to apply full-screen mode, to display/hide the title bar, the series picker (Page 176), the history (Page 171) and the overlays, and to configure the scaling factor of diagnostic monitors.<br>● Scaling factor options:<br>○  100%<br>○  <br>150%<br>○  <br>200% |


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| Icons | Description |
| --- | --- |
| | ○  <br>250%<br>● Applying a predefined scaling factors to a specific megapixel screen will apply that scaling factor to any diagnostic monitor with the same megapixel or higher resolution.<br>● You can still apply a larger scaling factor to higher megapixel screens, and it will similarly apply that scaling factor to any diagnostic monitor with that resolution or higher.<br>**Note:**<br>Applying a large scale on your monitor may cause buttons to overlap. Use larger scales only on high-megapixel monitors. |
| RP | The available reading protocols for the currently opened study |
| | Previous step in the reading protocol |
| | The steps for the (automatically) selected reading protocol |
| | Next step in the reading protocol |


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**Note:**

The available reading protocols can differ, depending on number of displays, study type, available series ...

## Window level and invert

Use **Window level** to modify the brightness and contrast of the selected image.

To apply window leveling to an image. click on the **Window level** icon.

- By holding the left mouse button down and moving the mouse to the left/right you can decrease/increase the value for **Window**.
- By holding the left mouse button down and moving the mouse down/up you can decrease/increase the value for **Level**.
- If all images of a series have the same initial value for window and level, the window leveling will be applied to all images.
- If images within a series have different values for window and level, the window leveling will only be applied to the selected image.

To support window level on images with higher bit values, the default change in value for the Window or Level is doubled per extra bit.

- This means window levelling reacts faster on the higher bit images.
- To use the normal behavior click the SHIFT button + drag.

If you click on **Invert**, everything that was dark in the series will become bright and vice versa.

## Manually entering window level value:

Click on the label of **Window** or **Level** and fill in the desired value.

If you click **Window level** in the menu now, by default **Custom** will be selected. To return to the initial image representation, click **original**.


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**Tip:**

Depending on the study type, the menu **Window level** contains several predefined Window/Level settings (presets).

If you wish to take a closer look at the lungs, for example, click on **Lung**.

You can use the following shortcuts:

| | |
|---|---|
| Invert | CTRL + I |
| Image in initial representation | 0 |
| Preset Abdomen | 1 |
| Preset Bone | 2 |
| Preset Head | 3 |
| Preset Lung | 4 |

**Important!**

You won't find these presets for every customer. Depending on where the study was done, you will find presets in the **Window level** menu.


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**Note:**

**Touch events on mobile devices**

Independent of the selected image control or image editing tool, it is possible to drag or zoom in or out on the image:

- Zoom: pinch in or out on an image to zoom in or zoom out
- Pan: Hold two fingers on the image and move them simultaneously to drag the image

All image control and image editing tools can be used when set active by touching the screen with one finger.

E.g.: Use the scroll tool by sliding one finger up and down the image

**Restriction:**

Be aware: the following features are unavailable on devices running iOS12:

- Region Zoom
- Stepless Zoom
- Zoom out

You can use pinching in/out instead, as described above.

- Pan
- Density measurement
- Spatial locator
- Window level

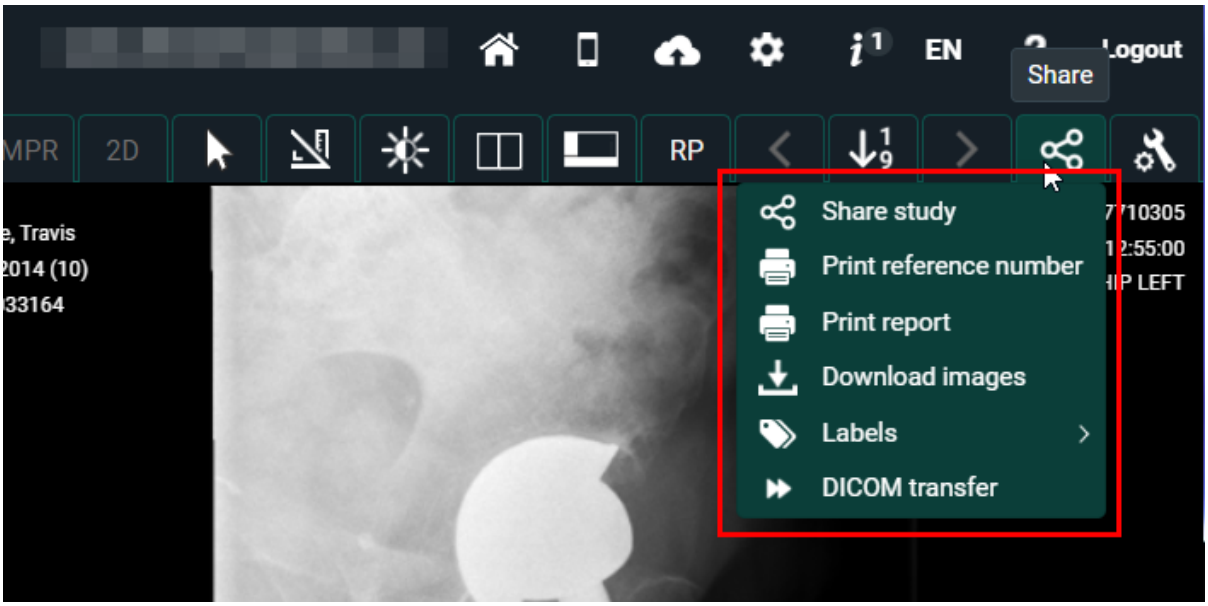
You can use presets.

- Adding and modifying annotations

## 6.3.4 Share

The **Share** button offers some of the functionalities from the study list to be accessed directly from the study page.

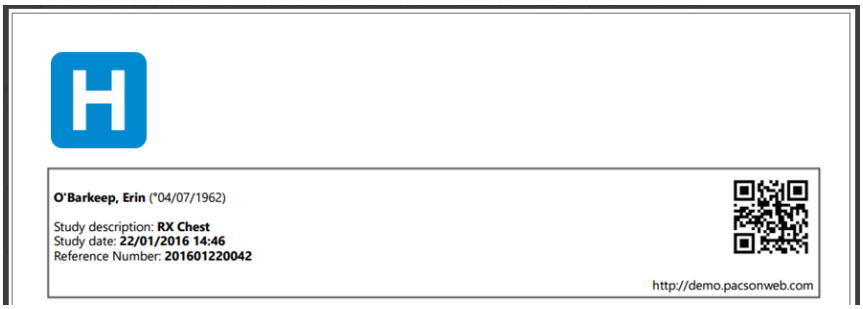

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Click on **Share** to open a drop-down menu with the following options:

| Functionality | Action |
|---|---|
| **Share study** | Share the study with a user, a group, a radiology department, or a self-defined recipient. See Sharing studies (Page 132).<br>This functionality is only enabled for registered users of DeepUnity PACSonWEB. |
| **Print reference number** | Generate a reference number for accessing the study online. See Printing reference number from the study list (Page 142).<br>This functionality is only enabled for registered users of DeepUnity PACSonWEB. |
| **Print report** | Print the study's report. It opens up in a new window to be printed directly. |


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| Functionality | Action |
| --- | --- |
| | **Tip:**<br><br>The report's header contains the information you need to access the study online. If you scan the QR code, you will be taken to the DeepUnity PACSonWEB login page. Enter the indicated reference number and the date of birth of the patient to view the study.<br><br>  <br> |
| **Download images** | Download the images as PNG, DICOM, or decompressed DICOM, load them into your OsiriX, or send them to your own PACS system. See Downloading studies from the study list (Page 153).<br><br>**Important!**<br><br>If you wish to import the images into your own PACS, an import tool must first be installed by DH Healthcare GmbH. |
| **Labels** | Add/remove labels to/from the study. See Adding labels to studies (Page 168). |
| **DICOM transfer** | Import the study into your own PACS system. See Importing studies in PACS (Page 158) |


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SSN: DOC-4353978

| Functionality | Action |
| --- | --- |
| | **Important!**<br>You can only use this function if your local DeepUnity PACSonWEB service partner has installed an import client on your server (paying option). |

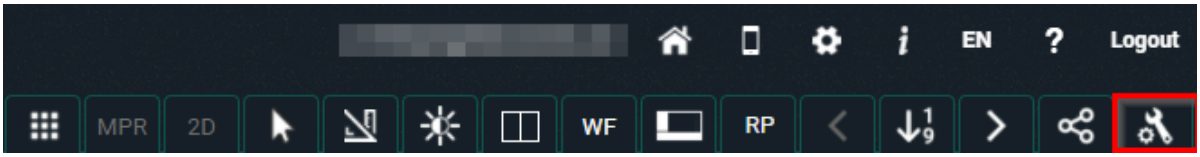
## 6.3.5 Administration

## Accessing the study administration page

**Important!**

This function is only available if you are an administrator of a radiology service.

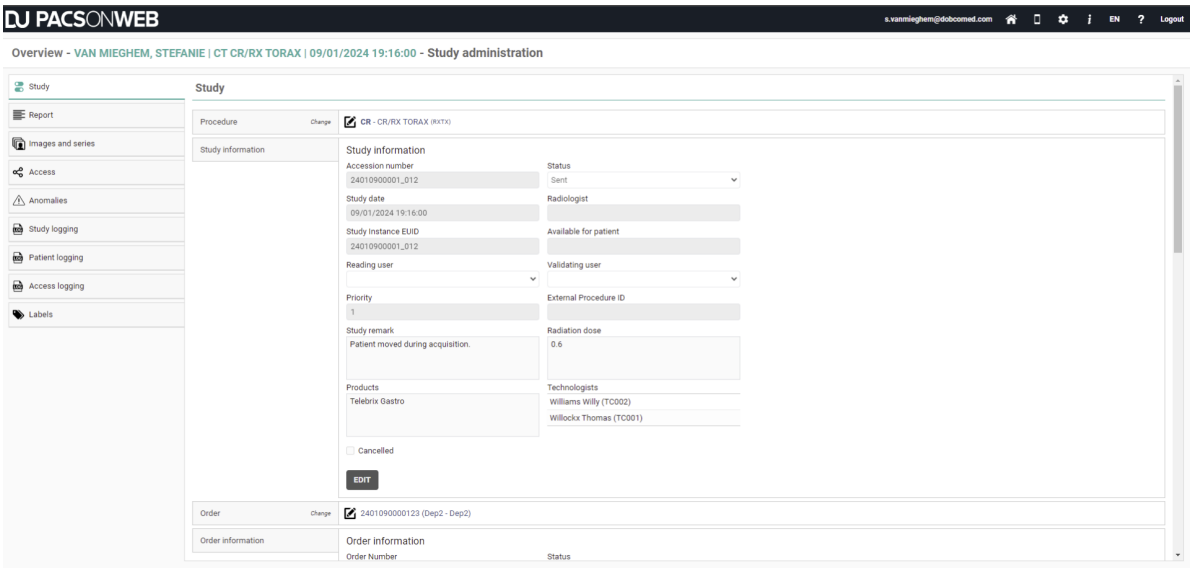
Click on the **Study administration** button to open the administration page.




Via **Study administration** you have access to the patient and study metadata. Here you can make changes to the study/patient if necessary.


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# Overview of the Study administration:




## Study administration tabs

| Tabs | Description |
|---|---|
| Study | View and (partially) change the study and patient information. |
| Report | Consult the different report versions. |
| Images and series | Delete series, move series, mark series as private. |
| Access | View and (partially) change access settings. |
| Anomalies | View all anomalies that have been registered for the study and patient. |
| Study Logging | Consult the logging on changes that have been made to the study. |
| Patient Logging | Consult the logging on changes that have been made to the patient. |


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| Tabs | Description |
|---|---|
| Access Logging | Consult the logging on access to the study. |
| Labels | Consult / add / remove labels from a study. |

### 6.3.5.1 Study information

**Warning:**

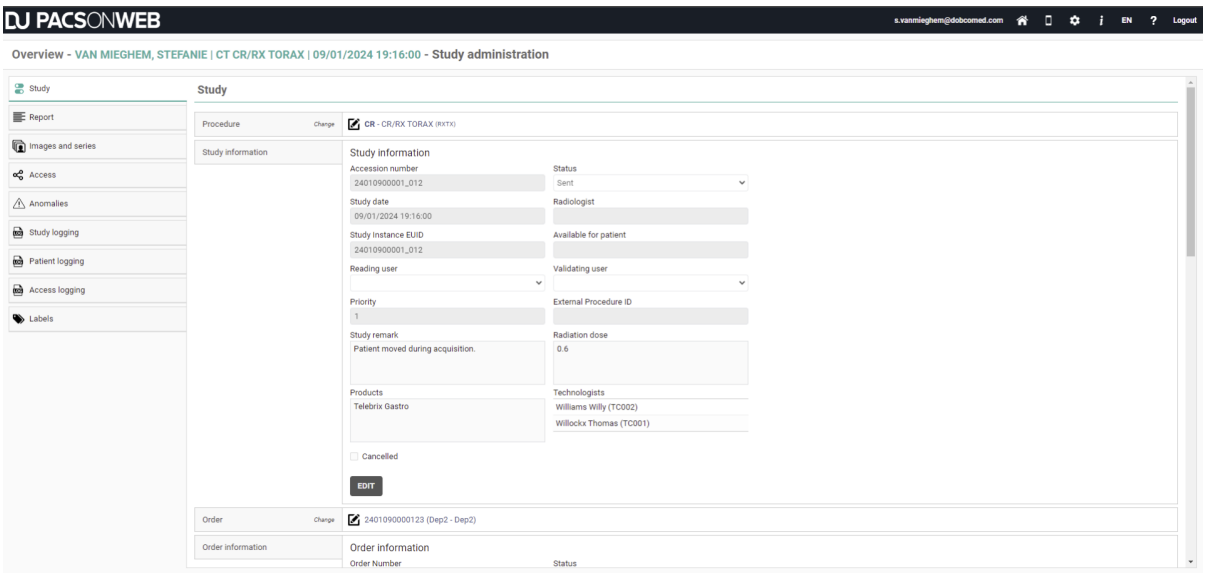
Changing study information on DeepUnity PACSonWEB is in most cases a temporary solution. The information must be changed in the PACS and RIS system.

If not, it may occur that the initial information is synchronized and restored.

To consult the study information, go to the administration pages and select **Study**.

Depending on the section within the page, it is possible to consult or consult and modify the displayed information.

## Overview of the Study administration





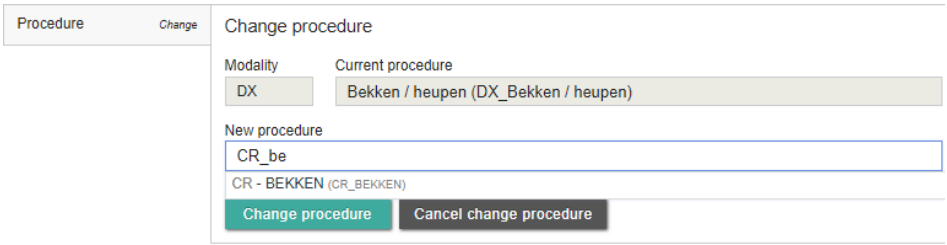
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## Procedure

To change the procedure, click the edit button

In the **New procedure** field, type the name of the new procedure, select the desired procedure and click **Change procedure**.

This will update the procedure in DeepUnity PACSonWEB.




## Study information

To change the study information, click the **Edit** button at the bottom of the **Study information** panel.

The following fields are displayed:

**Study information fields**

| Field | Description |
|---|---|
| Accession number | - |
| Status | Status of the study (both the workflow status & Order status). |
| Study DateTime | - |
| Radiologist | Name of the report creator. |
| Study Instance EUID | - |
| Available for patient | When the report will be available for the patient. This is a Date Time field. |
| Reading user | Drop-down list of all users who have permission to create a report. |


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| Field | Description |
| --- | --- |
| Validating user | Drop-down list of all users who have permission to validate a report. |
| Priority | Value between 1-100 |
| External Procedure ID | - |
| Study remark | Values can be entered manually, or can be received via HL7. |
| Radiation dose | Values can be entered manually, or can be received via HL7. |
| Products | Values can be entered manually, or can be received via HL7. |
| Technologists | Values can be entered manually, or can be received via HL7. Technologists can only be added, if technologists are known in the system, otherwise they will need to be send in via HL7. |
| AI status | Contains the current AI processing status, if sent to AI cube. (Cannot be edited) |
| AI findings | Contains AI findings, sent back from AI cube. (Cannot be edited) |
| SLA Deadline | Values can be entered manually, or can be received via HL7.<br>When you manually enter a specified deadline, you will get a warning indication. This will be logged in the **Study logging**. |
| SLA Deadline Offset | This value can only be set by HL7 and cannot be changed manually. |


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| Field | Description |
| --- | --- |
| Cancelled checkbox | This will cancel the study (not the same as workflow status = Cancelled).<br>Cancelled studies will not be displayed as relevant prior studies if the filter **Is not cancelled** is enabled. |

If a patient needs to pay for access to their studies, you can manually indicate if the payment has been received.

If the **Cancelled**" checkbox is ticked, the study will only be accessible to members of the source admin group.

To save changes made to any of the fields, you will need to confirm that you want to update the study information by checking the following checkbox **Yes, I am sure I want to update the study information.**

This will update the study information in DeepUnity PACSonWEB.

## Order

To change the Order, click **Change order** .

From this screen you can change the **Current order** to a **New order**.

You can look up the correct order in the system by clicking .

This will open the following look up screen, allowing you to search for order numbers registered in DeepUnity PACSonWEB, based on

- Order Number
- Performing Department
- Patient First Name
- Patient Last Name

Select the appropriate Order Number from the Search Results and click **Select**.

Check the option **Yes, I am sure I want to change the order linked to this study** and click **Change order** to update the Order in DeepUnity PACSonWEB.

## Order Information

To maintain the Order and modify only the order information, click **Edit**.

From this screen you can change the following fields:

- **Order Number**
- **Status** *(available, but not editable)*


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- **Performing department**
- **Prescription date** *(This is a date/time field)*
- **Diagnostic question**
- **Clinical info**

If you have modified one or more fields, click the checkbox to confirm the changes.

Updating order information will result in changing all 'x-amount' studies linked to this order. **Yes, I am sure I want to change the order linked to this study** and click **Save** to register your modifications in DeepUnity PACSonWEB.

## Visit information

In this section it is possible to edit the following fields:

- Visit number
- Point of Care
- Patient class
- Patient location

Confirm the changes you made by clicking the checkbox: **Yes, I am sure I want to update the visit information** and click **Save** to register your modifications in DeepUnity PACSonWEB.

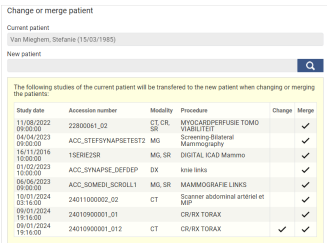
## Performing department

In this section it is possible to change the linked performing department and the Examination Room.

If you have modified one of these fields, check the option **Yes, I am sure I want to change the performing department linked to the study** and click **Change performing department**

## Patient

If the study is listed with the wrong patient, you can change this under 'Change or merge patient'. Click to open the following window:





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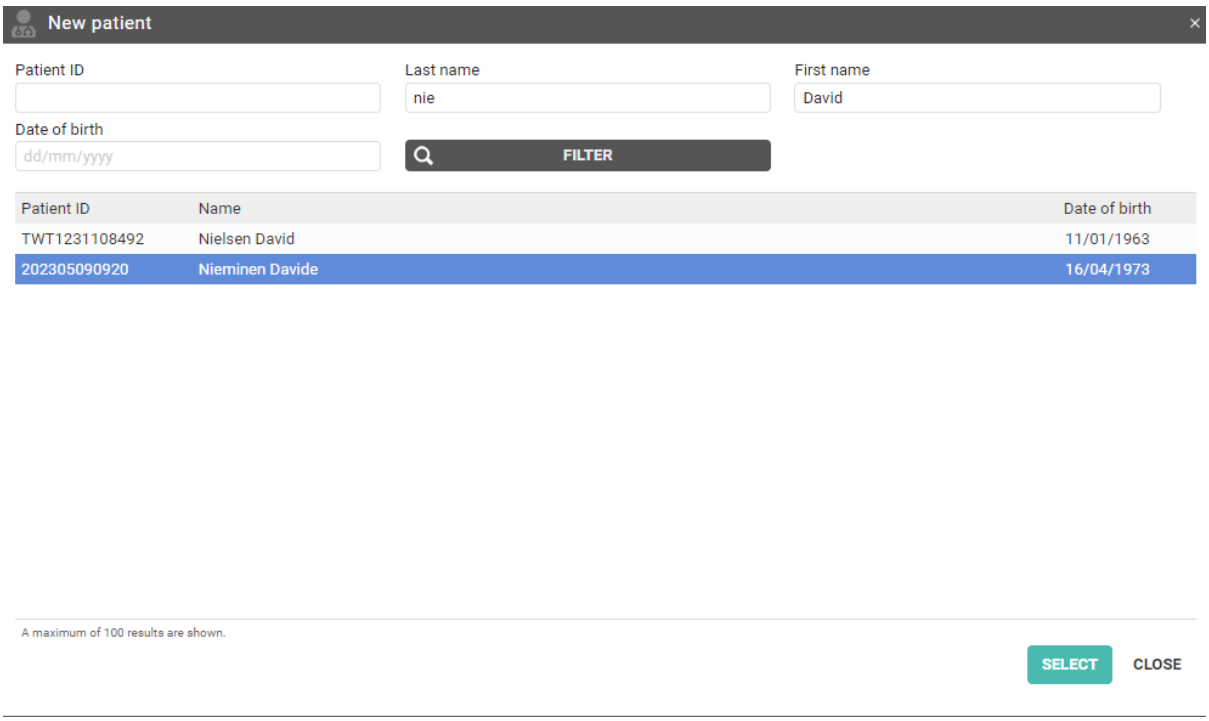
You can use  to search for a patient who is already registered in DeepUnity PACSonWEB through another exam.

Within the pop-up, enter the search criteria and select **Filter**. The following search criteria can be used:

- Patient ID
- Last name
- First name
- Date of birth

You will now see an overview of the patients that meet your criteria.

Highlight the patient of interest and click **Select**.



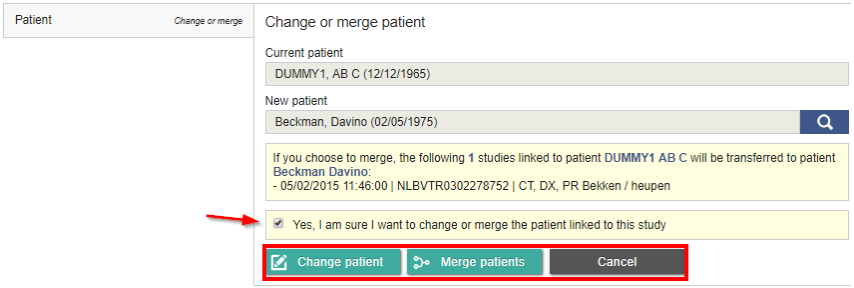

**Note:**

If you cannot find this patient, you will have to change the patient information under 'Patient information'.

Before you can make any changes to the patient, you must check the box **Yes, I am sure I want to update the study information.**

You can now choose to change the current patient to the new patient or merge both patients.


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When you click **Change patient** or **Merge patients**, the study's patient information will be updated.

**Important!**

If you choose the change option, only this one study, will be linked to the newly selected patient.

Afterwards, both the initial patient and the selected patient will still exist in DeepUnity PACSonWEB.

If you choose the merge option, all studies, related to the initial patient will be linked to the newly selected patient.

Afterwards the initial patient will no longer exist.

## Patient information

If you were unable to find the patient, you can change the patient information manually.

Select **Edit** to change the patient information.

### Patient Information Fields

| Fields | Description |
|---|---|
| Last name | |
| First name | |
| Last Name at Birth | This can be entered manually or can be send in via HL7. These fields can be used for example by Ségur. |


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| Fields | Description |
|---|---|
| First Name at Birth | This can be entered manually or can be send in via HL7. These fields can be used for example by Ségur. |
| Date of birth | |
| Place of birth | This can be entered manually or can be send in via HL7. These fields can be used for example by Ségur. |
| Gender | |
| Mobile number | |
| Email | |
| Patient remark | This can be manually entered or can be send in via HL7. |
| Patient ID's | This is a table of all the different ID's known to the system. (The national number is listed here). |

If you've changed one of the fields, click the checkbox **Yes, I am sure I want to update the study information** and then on **SAVE**.

The patient information has now been updated in DeepUnity PACSonWEB.

## Requesting physician

If you wish to change the study's requesting physician, click 

Within this screen you can change the **Current physician** to a **New physician**.

When you start typing in the **New physician** field, the corresponding names will be displayed.

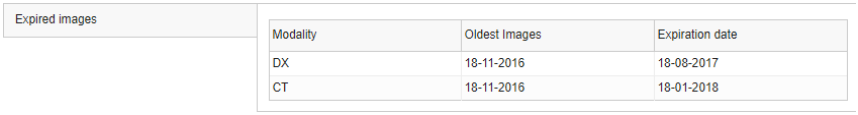
Select the correct name and click **Change requesting physician** to update the requesting physician for this study.

## Expired images

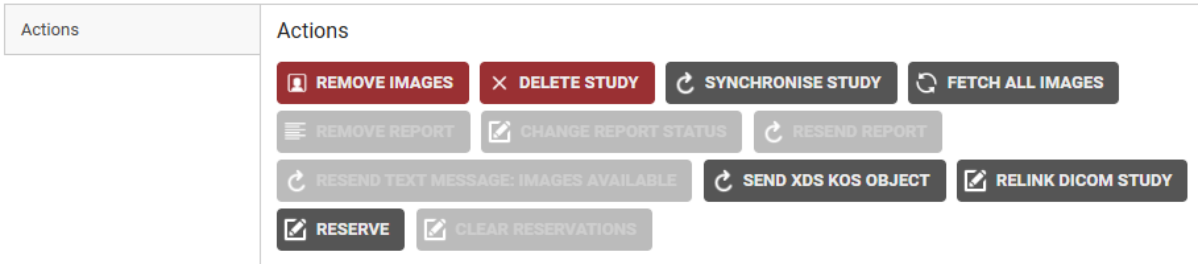
This section gives an overview on the expiration time for the images per modality.


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It is not possible to make modifications in this section.




## Actions




You can use **Actions** to:

### Description of Actions

| Actions | Descriptions |
|---|---|
| Remove images | Deletes the images from DeepUnity PACSonWEB. |
| Delete study | Deletes the entire study from DeepUnity PACSonWEB. |
| Synchronise study | Synchronises the exam on DeepUnity PACSonWEB with the local PACS system.<br>• Can only be used when images are sent using the PACS Push mechanism.<br>• **Optional:** Available if the radiology department has fetch enabled. |
| Fetch all images | Fetches all images from the local PACS system if not all images are available (anymore) through filtering or because the retention period has expired |


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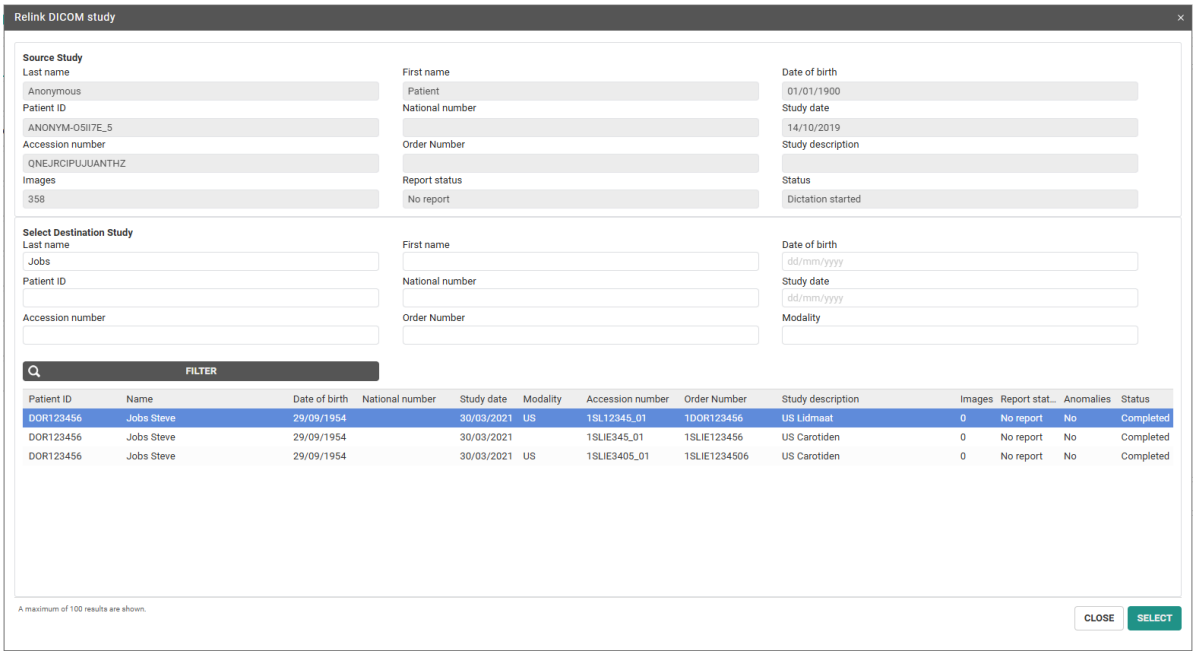
| Actions | Descriptions |
| --- | --- |
| | • **Optional**: Available if the radiology department has fetch activated. |
| Remove report | Deletes the report from DeepUnity PACSonWEB.<br><br>**Note:**<br><br>If an addendum is available, we will remove both the addendum and the original report. There is no option to remove only the addendum. |
| Change report status | Change the status of the report to Draft, Preliminary or Validated.<br>• This option is only available if a report is available.<br>• This option will be disabled in case of a PDF report.<br><br>**Note:**<br><br>This option is disabled from the moment a report contains an addendum. |
| Resend report | This option will resend the report, this is however only possible in case a report is created or adapted in DeepUnity PACSonWEB and a link with the RIS system of the related source has been configured. |
| Resend text message: images available | This option will resend the sms, this is however only possible if the source sends a text message to the patient when images are available. |


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| Actions | Descriptions |
|---|---|
| Send XDS KOS object | Is an option, configurable per source. |
| Relink DICOM study | Possibility to move the content of this study to another study. |
| Reserve | Reserve the study for your user in the worklist (see Worklist page functions (Page 307)). |
| Clear reservations | Remove any reservations made on this study (see Worklist page functions (Page 307)). |

## How to relink a DICOM study

1. Click the **RELINK DICOM STUDY** button.
2. In the pop-up displayed, fill in the necessary search criteria in the **Select Destination Study** panel.
   - To look up the correct study, select the study from the list and click the **Select** button.
   - To delete the **Source study**, tick the box next to **Delete source study** and select the workflow status of the **Destination study** in the drop-down list.

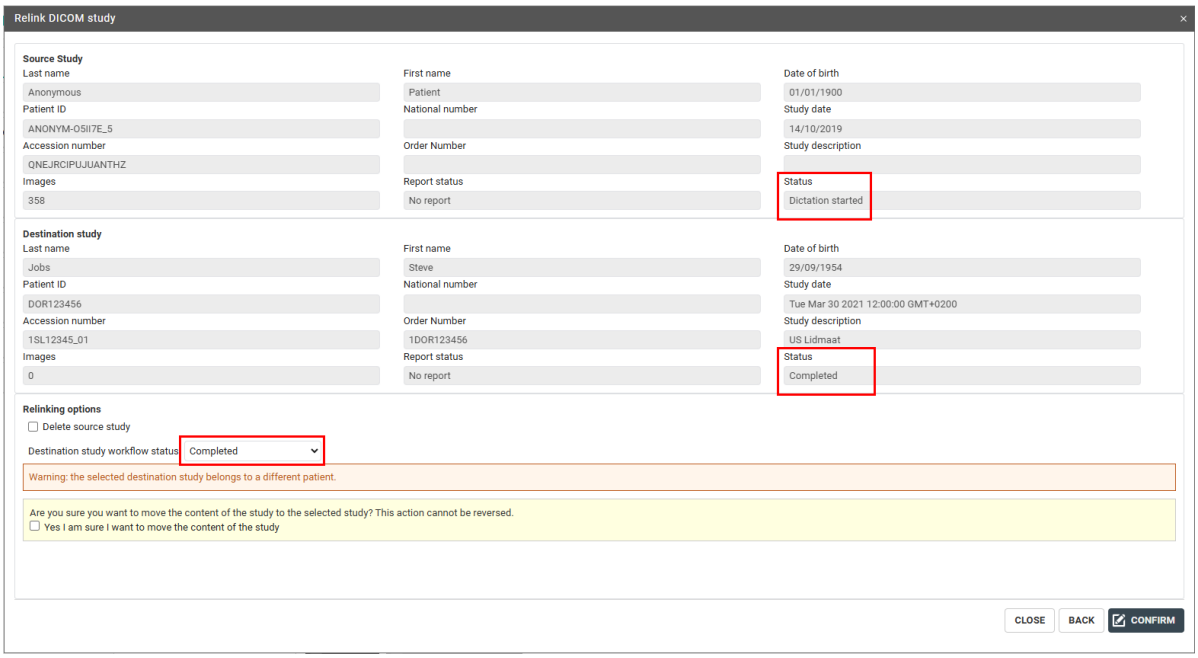




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The **Destination study workflow status** drop-down will by default have the same status as your selected destination study, unless the status of the destination study is lower than the source study, for example:

- If the source study had the status **Sent**, the **Destination study workflow status** drop-down will be **Sent**.
- If the source study had the status **Completed**, the **Destination study workflow status** drop-down will be **Completed**.




If the destination study already has DICOM images linked, a warning or an error is shown, depending on the source settings:

- If the source does not allow to merge two DICOM studies via **RELINK DICOM STUDY**, a blocking error message is shown, and you should use Images and Series (Page 233) to move the content of one study to another.
- If the source does allow it, you receive a warning where you have to confirm before you are able to continue and merge the studies.

3. The last step is to confirm that you want to move the content of the study.

   After clicking **CONFIRM**, a summarizing dialog is displayed. You can choose to open the selected study or, if it was not deleted, reload the current study.

## 6.3.5.2 Report

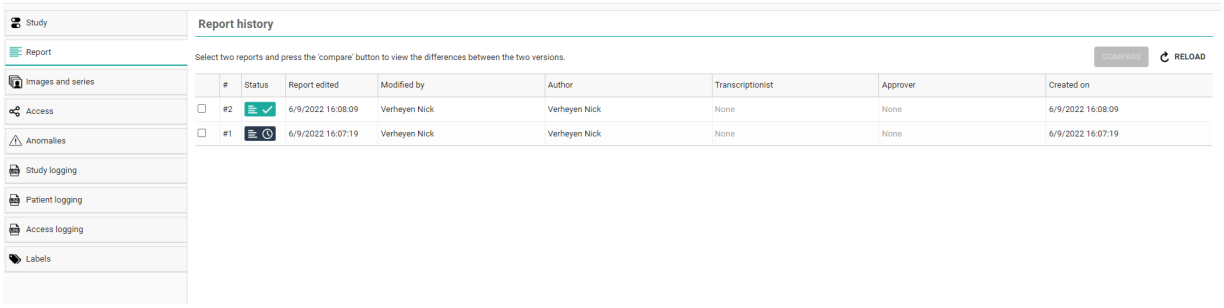
The report tab contains all information about the report.

If there is more than 1 saved report, the versions can be compared to each other to see the differences between two versions.

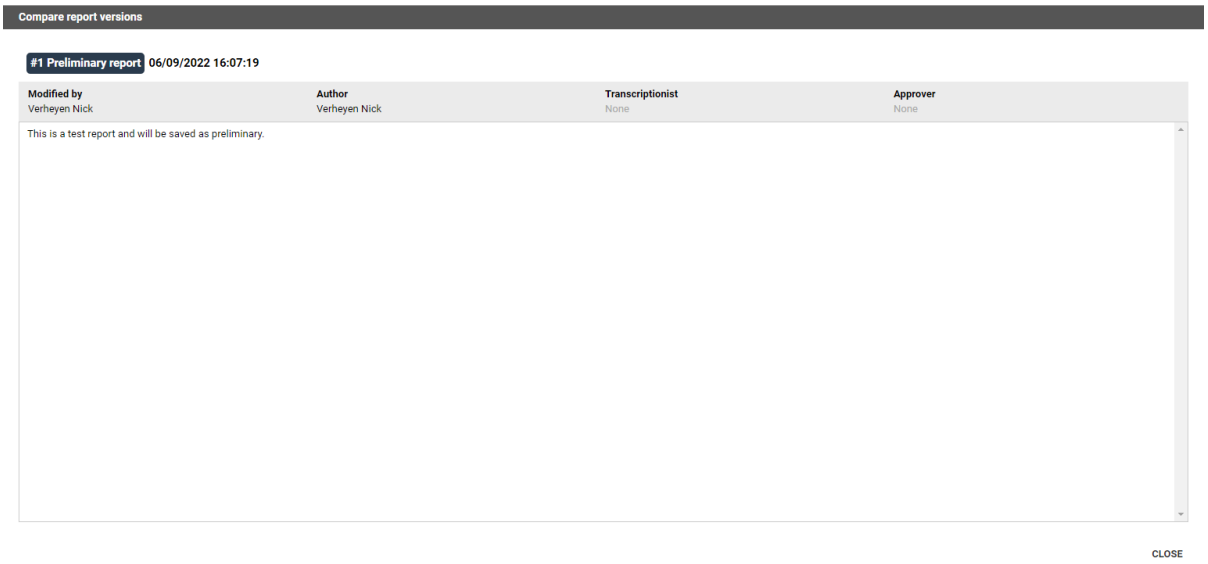

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In the different columns, the user can see the Author, Transcriptionist and the Approver of the report.

The creation date is shown in the last column.

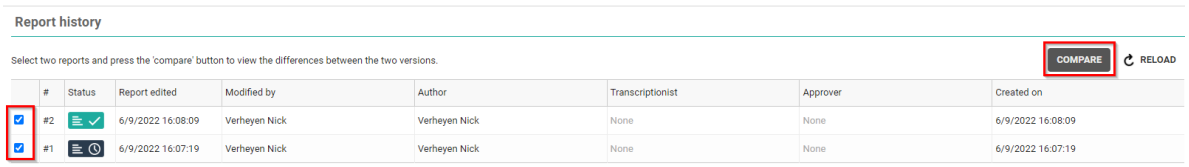



Clicking on the line itself will display the report.



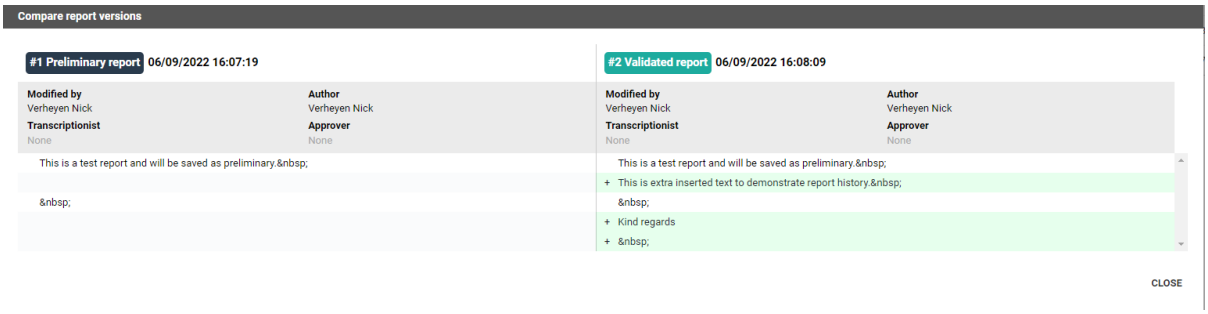

<u>Compare report versions:</u>

To compare 2 reports, enable the checkboxes and click **Compare.**




The reports are compared side by side, the changes will be shown in green.


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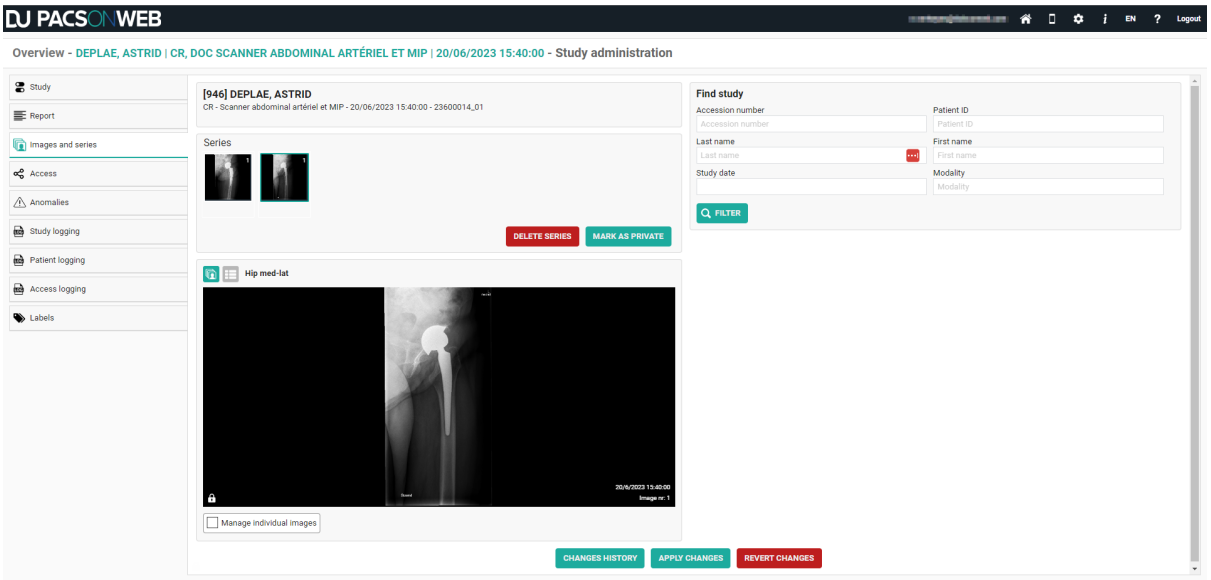



## 6.3.5.3 Images and Series

**Note:**

If allowed by the source of a study, as a source admin, you can remove images or series from a study, create a new series or move images to another study.

In order to modify the images and series of a study, go to "Study administration" and select 'Images and Series'.




1. Select a series and click **DELETE SERIES** to delete the entire series from the study.

   DICOM encapsulated PDF's can only be removed in this way since it is a DICOM instance.

   Other PDFs can be removed in the viewer (cf Series picker (Page 176) - Section Report, documents & Order information)


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2. Select a series and select **Manage individual images** to remove or add a single image to the selected or a new series.



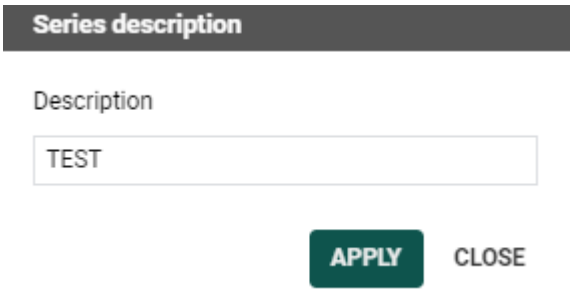

**Add an image to a series:**

You can add an image to a selected or new series by dragging it onto the desired series.


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If you have created a new series, you need to manually enter the Series Description.




**Remove an image from a series:**

You can remove an image from a series by scrolling through the series to the image of interest and clicking **Remove Image**.

3. Marking series as private

   It is possible to mark series as private, making the series visible only to source administrators or users with the associated permission.

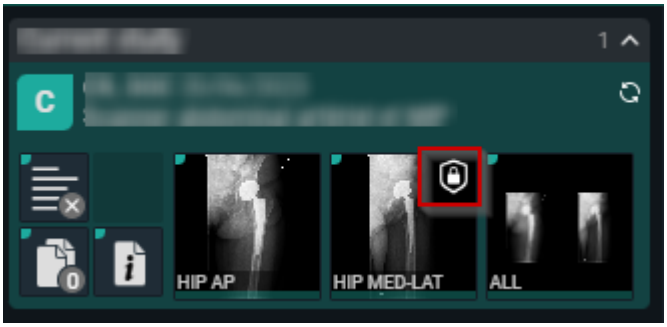

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Marking a series as private, can be done by selecting the series and clicking on the **MARK AS PRIVATE** button.

After marking a series as private, a lock icon will be displayed on the thumbnail.



Afterwards this is also visible in the series picker with a lock icon in the thumbnail.

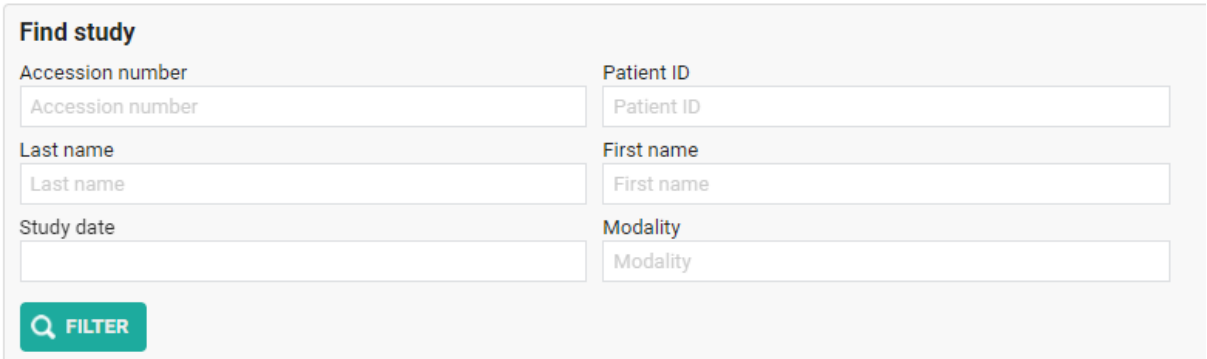



You can undo this by selecting the private series and clicking **MARK AS PUBLIC**.

**Restriction:**

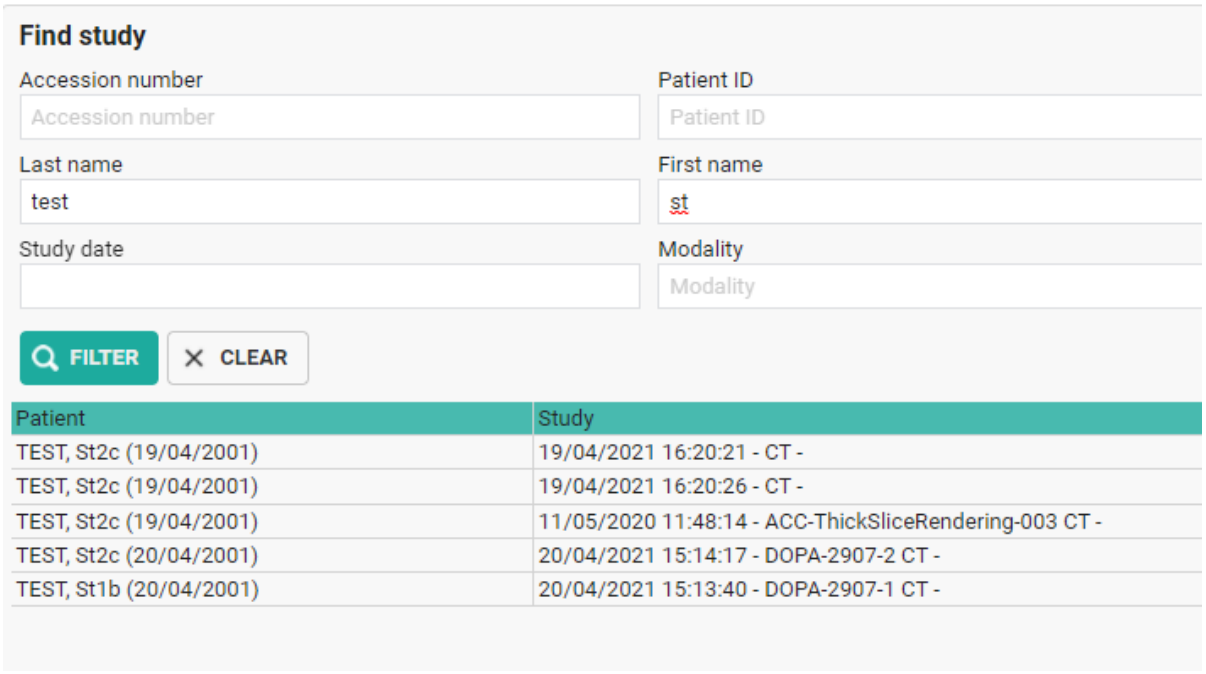
Keep in mind that a series that is marked as private might be excluded in certain reading protocols, e.g. in those that use specific functions to find series by laterality.

4. You can move series or images from one study to another study by looking it up, based on:




Select the appropriate study from the resulting list.


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Select a series from the first study and click **MOVE SERIES** to move it to the second study.

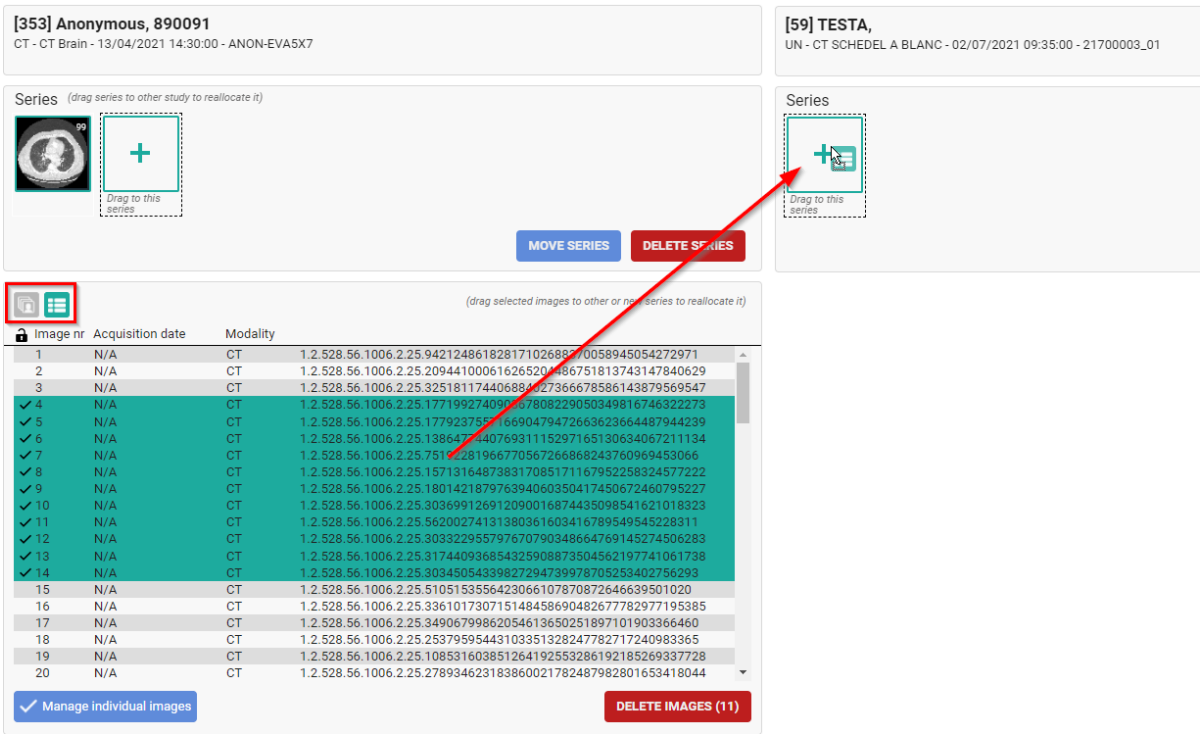
To move a single image, select a series and tick **Manage individual images**, look up the image and drag it onto an existing or new series of the second study.

If you want to move **multiple images,** you can switch to the image list.

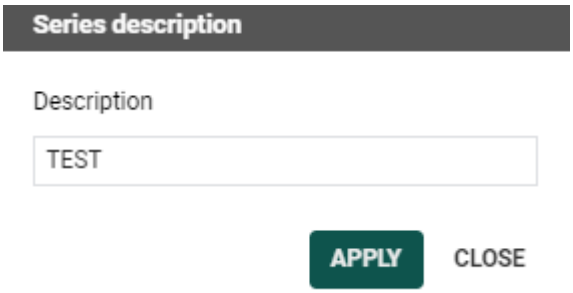
Select the images that need to be moved by holding the CTRL button and clicking the image lines. You can also select a range by holding the SHIFT button.

When the images are selected, drag them to the desired study and series.


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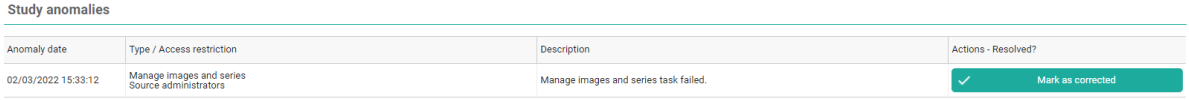

If you have created a new series, you need to manually enter the Series Description.




After you have made the modifications, you can choose to register or cancel them by clicking **APPLY CHANGES** or **REVERT CHANGES**.

**Additional information on manipulations:**

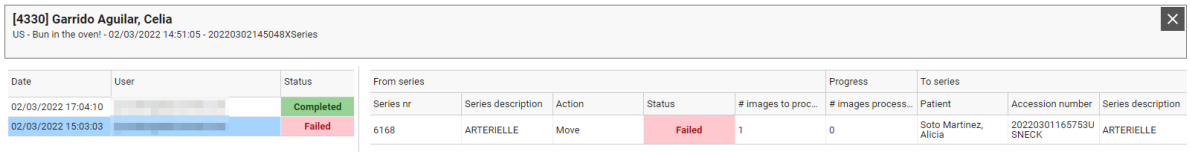
- Images and series cannot be moved when new images or series are still being received
- In case a move or delete operation fails, an anomaly will be created





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- By clicking **CHANGES HISTORY** you will get a detailed overview of all manipulations that have been done with the study.




## 6.3.5.4 Access to the study

From the **Access** tab, you can check and modify the information related to:

- who has access to the exam.
- in which ways the exam can be accessed.
- when access to the exam was granted.

All registrations of actual access to the exam is logged in Study logging (Page 250).

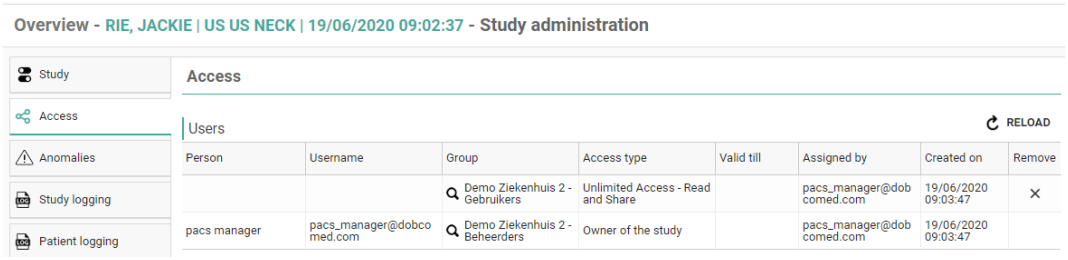
## Users

In the **Users** section is listed for which users and user groups, the exam is accessible from the study list.

By clicking a groups name, you can consult the details for the group (members, address, contact information, ...).

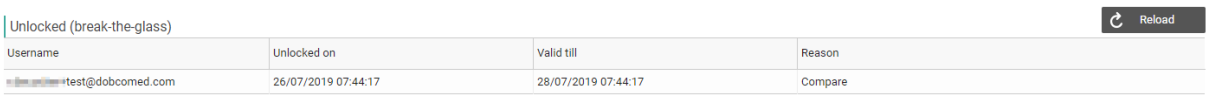
Furthermore, you can see what type of access a user has, until when the access is valid and when and by whom the access was granted.

A specific access can be withdraw by clicking the cross icon at the end of the line.




## Unlocked (Break-the-glass)

This list contains all users that have unlocked the exam for access, when and for what reason.

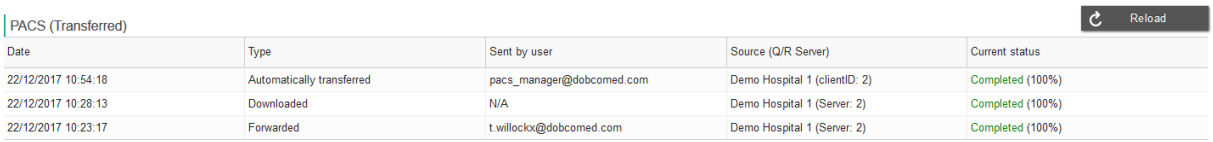




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## PACS (Transferred)

This list contains all actions on forwarding or downloading the exam to a local PACS system.

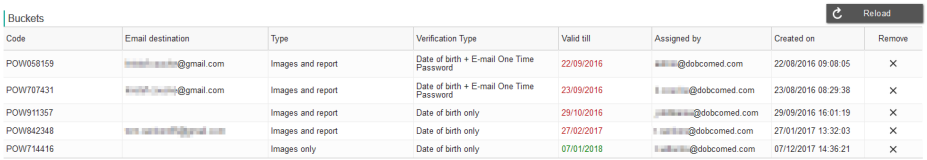

PACS (Transferred)

Reload

| Date | Type | Sent by user | Source (Q/R Server) | Current status |
|---|---|---|---|---|
| 22/12/2017 10:54:18 | Automatically transferred | pacs_manager@dobcomed.com | Demo Hospital 1 (clientID: 2) | Completed (100%) |
| 22/12/2017 10:28:13 | Downloaded | N/A | Demo Hospital 1 (Server: 2) | Completed (100%) |
| 22/12/2017 10:23:17 | Forwarded | t.willockx@dobcomed.com | Demo Hospital 1 (Server: 2) | Completed (100%) |

## Buckets

This list contains all buckets to which it belongs and all corresponding details.


Buckets

Reload

| Code | Email destination | Type | Verification Type | Valid till | Assigned by | Created on | Remove |
|---|---|---|---|---|---|---|---|
| POW058159 | [redacted]@gmail.com | Images and report | Date of birth + E-mail One Time Password | 22/09/2016 | [redacted]@dobcomed.com | 22/08/2016 09:08:05 | ✕ |
| POW707431 | [redacted]@gmail.com | Images and report | Date of birth + E-mail One Time Password | 23/09/2016 | [redacted]@dobcomed.com | 23/08/2016 08:29:38 | ✕ |
| POW911357 | | Images and report | Date of birth only | 29/10/2016 | [redacted]@dobcomed.com | 29/09/2016 16:01:19 | ✕ |
| POW842348 | [redacted] | Images and report | Date of birth only | 27/02/2017 | [redacted]@dobcomed.com | 27/01/2017 13:32:03 | ✕ |
| POW714416 | | Images only | Date of birth only | 07/01/2018 | [redacted]@dobcomed.com | 07/12/2017 14:36:21 | ✕ |

Access to a bucket can be revoked by clicking the cross icon at the end of the line.

When bucket access is withdrawn, you have the possibility to remove the exam from the bucket **REMOVE STUDY FROM BUCKET** or to remove the entire bucket **REMOVE FULL BUCKET**

## Reference number

This list contains all reference numbers that can be used to obtain access to the exam through the patient login.

Access through a specific reference number can be withdrawn by clicking the cross icon at the end of the line.

From the list, it can be seen when each reference number was generated and from when until when it can be used, as allowed by the source.

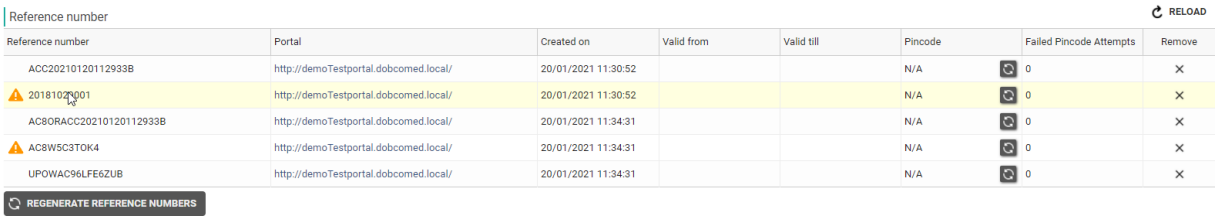
In case the **Valid from** and **Valid till** date is not registered, there is no date restriction on the use of the reference number.

In case the radiology department requires the patient to pay for access to the study, access can be secured with an additional Pincode, provided to the patient upon payment.

This table lists the registered Pincode for each reference number and the number of failed attempts to enter the Pincode.

A radiology department can impose a minimum complexity for its reference numbers. In case a reference number does not fulfill this requirement, it is marked with an icon and cannot be used to access the study.


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The button **REGENERATE REFERENCE NUMBERS** allows you to add the reference numbers again, according to the configuration of the sending radiology department.

## RSW Status

It's possible to send the study to RSW again by clicking on the send button at the end of the line:




Confirm your request by clicking **SEND**.

## 6.3.5.5 Study timing

Study timing displays the time elapsed between the acquisition of data and the presentation of data. The total transfer time for these processes must not exceed 15 minutes.

- The acquisition of data refers to when a study is sent from the modality.
- The presentation of data refers to when the full study is available for display on a diagnostic workstation.

The study timing tab includes three main sections:

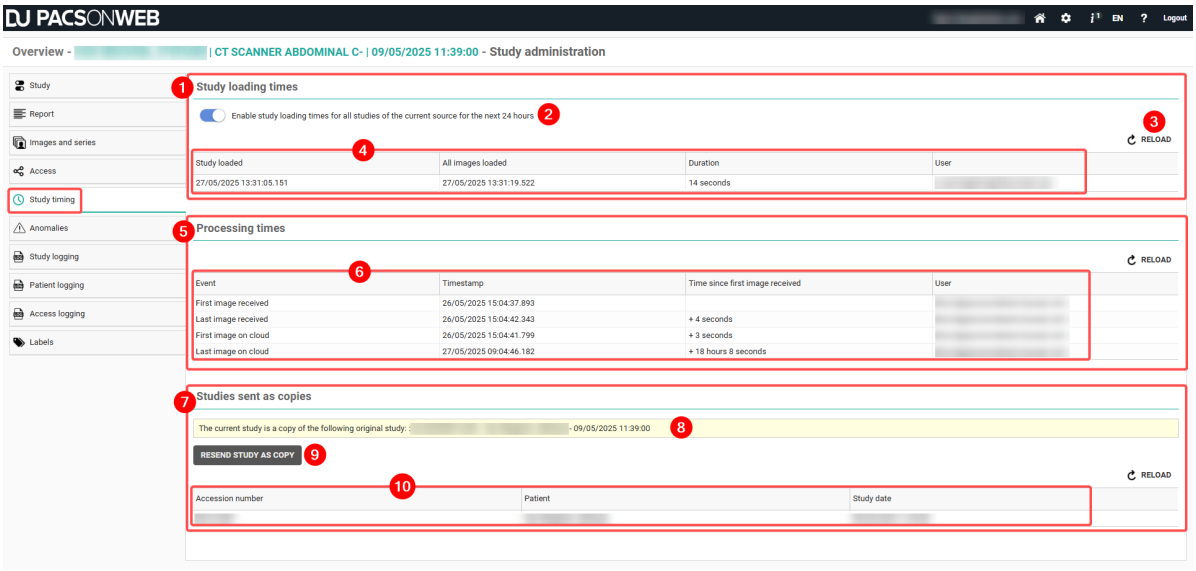
- Study loading times
- Processing times
- Studies sent as copies

**Note:**

This is a paid feature and is not enabled by default. If you are interested in this feature, please contact DH Healthcare GmbH to enable it.


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# Overview of the study timing tab




| Number | Designation | Description |
|---|---|---|
| 1 | Study loading times | A section of the **Study timing** tab that displays timestamps and durations for the time it took for the study and all associated images to load. |
| 2 | Study loading times switch | A switch that when activated, enables study loading times for all studies of the current source for the next 24 hours. You can manually disable the switch before the 24-hour period. This switch is disabled by default. |
| 3 | Reload | A button that refreshes the information displayed in the table. **Study loading times**, **processing times**, and **Studies sent as copies** each have a respective reload button. |


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| Number | Designation | Description |
|---|---|---|
| 4 | Study loading table | A table that displays relevant information about the study loading times, including:<br>● The date and time the study was loaded<br>● The date and time all images were loaded<br>● The time it took to load the study<br>● The user who loaded the study |
| 5 | Processing times | A section of the **Study timing** tab that displays information related to the processing time of the study. |
| 6 | Processing times table | A table that displays relevant information about the processing times:<br>● Event<br>● Timestamp<br>● Time since first image was received<br>● The user of the respective study |
| 7 | Studies sent as copies | A section of the **Study timing** tab that displays the studies that have been sent again, including the originating study if it was a study that was sent again. |
| 8 | Studies sent as copies message | A message is displayed if you open a study that was sent again as a copy. Studies sent again as copies are identified by an Accession number starting with RS-. Clicking this message will refresh the |


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| Number | Designation | Description |
|---|---|---|
| | | current page and display the original study. |
| 9 | Resend button | A button that triggers a new flow of processing measurements for the new study. |
| 10 | Studies sent as copies table | A table that displays relevant study information, including:<br>● Accession number<br>● Patient<br>● Study date |

## To enable the study timing feature

To enable this feature, you first need to enable the following switches:

1. **Always load full image data for window level**
   - Go to: **User settings** > **Preferences** > **Viewer** > **Viewer settings**
   - Enable: **Always load full image data for window level**
2. **Enable study loading times for all studies of the current source for the next 24 hours**
   - Go to: The desired study > click the **study administration** icon > navigate to **Study timing** > **Study loading times**
   - Enable: **Enable study loading times for all studies of the current source for the next 24 hours**

To create a measurement for a particular study after this feature is enabled:

1. Open the desired study in the viewer.
2. Select the image series **All series** and drag it into a viewport.
3. Wait for all images to load into the viewer. Successfully loaded images are indicated by a green progress bar below the image thumbnail.
4. Navigate to **Study administration** > **Study timing** tab.

   The information about the study's loading and processing times will be displayed here.


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## Study loading times

This section of the **Study timing** tab displays timestamps and durations for the time it took for the study and all associated images to load and be displayed in the viewer.

- Measurements only take effect when 16-bit images are loaded.
- These measurements are triggered when the switch **Enable study loading times for all studies of the current source for the next 24 hours** is enabled.
- You can manually disable this feature by toggling the switch button to off.
    - Once disabled, no new measurements for study loading will be triggered. The system does not record the times of any new studies loaded into the viewer.
    - Past measurements that were executed while the feature was enabled will remain in the table.

The table for Study Loading Times will contain the following information:

- The date and time the study was loaded into the viewer.
- The date and time that all images in the specific series were fully loaded into the viewer.
- The duration it took to display all images.
- The user who displayed the study.

## Processing times

This section of the **Study timing** tab displays the time required for processing the studies from the first image received from the modality to the last image available on the cloud.

- The processing times table is empty by default.
- An empty table displays the following message: **No processing times are available for this study.**
- When information is available, the following is displayed:
    - **Event**: Predefined values indicating four measurements, listed chronologically from the oldest to the newest event.
    - **Timestamp**: Date and time when the images matching the event were received.
    - **Time since first image received**: The time elapsed between the first image received and each subsequent step. This clearly indicates the time taken for the DICOM processor to fully process the images and make them available in the cloud.
    - **User**: The user who triggered the event.


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SSN: DOC-4353978

Measurements are triggered based on a specific DICOM tag, 'EnableStudyTiming'. This tag is added to studies that are sent again using the **Resend study as copy** button in the **Studies sent as copies** section.

## Studies sent as copies

This section of the **Study timing** tab displays studies that have been sent again and allows you to resend a study that is already available, triggering the processing times. This feature helps you periodically check the smoothness of the process.

- If there is not originating study, the panel will display this message: **The current study is not a copy, so there is no original study.**
- The studies sent as copies table is empty by default. **No studies sent as copies are available for this study.**
- All studies sent as copies will be listed in the table, displaying the following information:
  - **Accession number:** Always starts with "RS-"
  - **Patient**: Pseudonymized *(Last name = Anonymous, First name = 6 characters)*
  - **Study date**: The date/time when the resend was triggered

If you open a study that was sent again as a copy, a message will be displayed indicating that the current study is a copy of the original study with the study details. This message is a link that will refresh the current page and display the original study.

### Resend study as copy

This button triggers a new flow of processing measurements for the new study.

- The button will be temporarily disabled while the task is in progress.
- Once the process is complete, you can trigger another resend if needed.

  If the button remains disabled, please contact your Global Administrator to ensure a QR server is configured with the option 'Use for Resend as copy'. If this option is not enabled, the button will remain grayed out.

## 6.3.5.6 Anomalies

In case a study on DeepUnity PACSonWEB deviates from the corresponding study on the local PACS system, an anomaly will be registered. In this case, the anomaly is clearly indicated within the study page (DeepUnity PACSonWEB study page (Page 171)).

When opening the study administration pages for a study that has an anomaly registered, the anomalies tab will be displayed automatically and the label will be marked in orange.


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**Important!**

The data of each listed anomaly are the data at the moment the anomaly was registered.

If patient or study data have been modified after the registration of the anomaly, these modifications will NOT be taken into account in the anomaly.

**Anomalies on study level**

The following anomalies will be reported:

- national number in DICOM files differs from HL7 information
- date of birth in DICOM images differs from HL7 information
- no or incorrect date of birth registered
- number of images in DeepUnity PACSonWEB differs from the number of images in the local PACS (taking into account any applied filtering)
- national number already registered with another patient through DICOM
- image or HL7 message received with the same study instance EUID or accession number but with other patient ID
- study for patient without ID is changed to a patient with ID via DICOM or HL7
- incompatibility with CvKO. (scroll to bottom of the page for more explanation)
- studies of different patients have been merged
- failed move or delete operation of image or series
- patient identity changed for one procedure in a report

For each anomaly, all relevant information is displayed in the overview.

From the overview, the related exam can be opened by clicking the study link.

## Anomalies on patient level

The following anomalies will be reported:

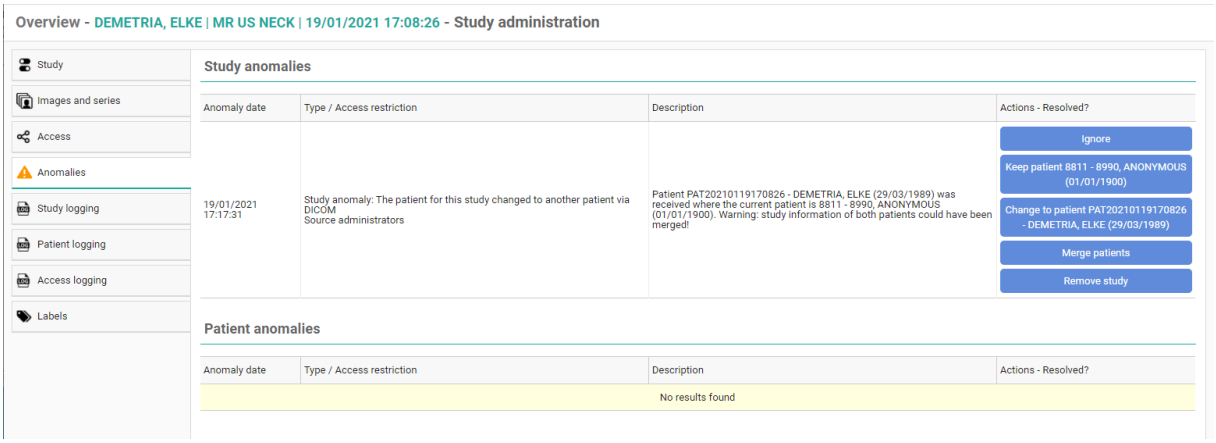
- Multiple internal patient IDs have been registered for a single patient
- Received national number already linked to another patient
- Date of birth differs from date of birth that was registered with a previous exam
- National number already registered with another patient through HL7
- Patient without ID from DICOM (scroll to bottom of the page for more explanation)


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- Patient without name from DICOM: a patient name is generated ("UNK_"+ [source abbreviation]+unique number) and used (scroll to bottom of the page for more explanation)

For each registered anomaly, the following information is shown:

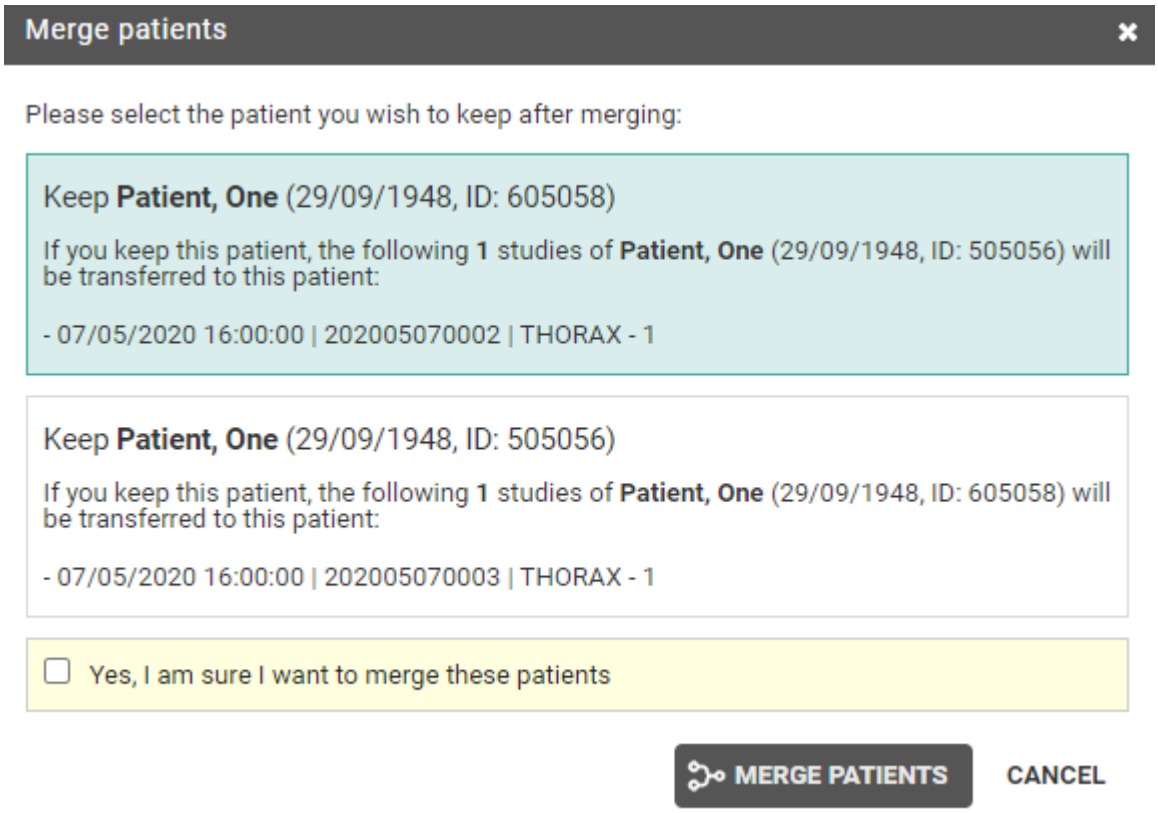
- date and time when the anomaly was registered
- the anomaly type + the required access level of a user to be able to open the study
- a description of the anomaly
- the possible corrective measures




In case a national number was registered for two different patients, it will be possible to assign this to the first patient, the second patient or to merge both patients.

For the latter option, the following screen is displayed to perform the merge in a controlled way:

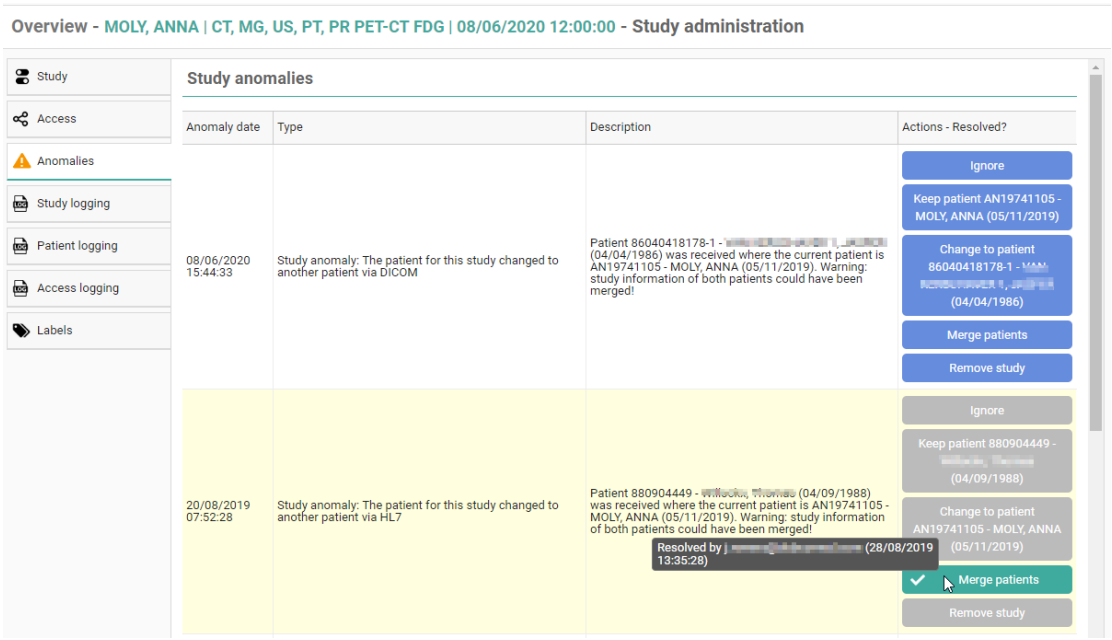

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Once a solution has been selected, it will be marked in green. When hovering the cursor over the label, it is displayed by whom and when the selected solution was applied.

In case all registered anomalies have been marked as solved, the notification will no longer be displayed on the study page and the label 'Anomalies' on the study administration pages will no longer be marked in orange.


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**Study anomaly for patient without ID or name from DICOM**

After fixing the study click on "Ignore" in the action description.

Only source admins can access the studies with these anomalies.

Study anomaly for incompatibility with CvKO

When DICOM files are received with DICOM tags that do no meet the requirements, 2 possible actions are possible to fix the anomaly.

Possible actions:

- Ignore: result is that nothing will happen and the anomaly will be resolved.
- Mark as corrected: a dialog is shown to send the corrected images to DU POW and share the study manually with CvKO.

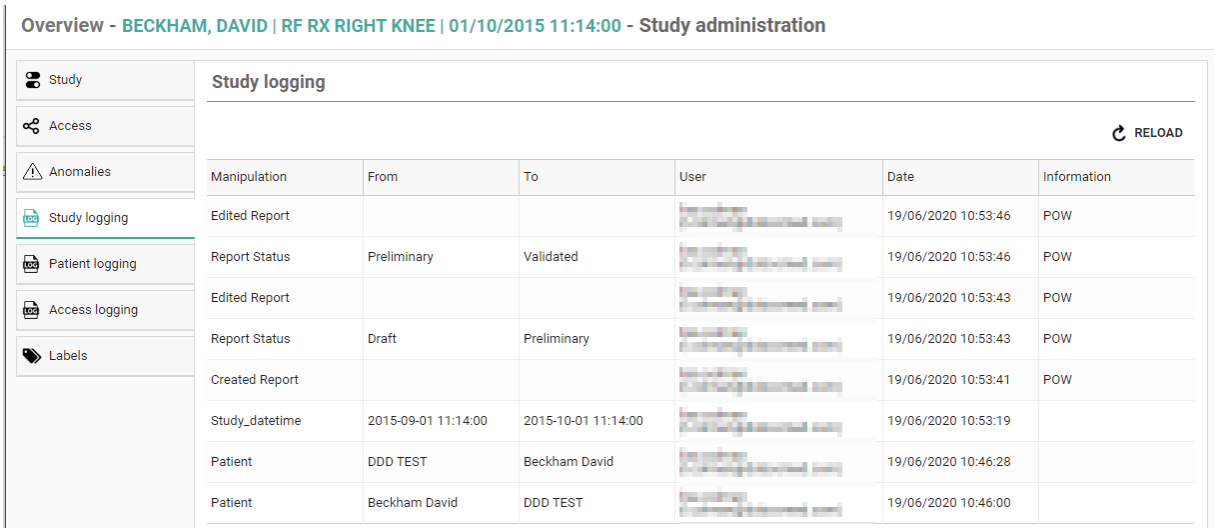
All modifications with regard to anomalies on study level are registered in 'Study Logging' (Study logging (Page 250)).

All modifications with regard to anomalies on patient level are registered in 'Patient Logging' (Patient logging (Page 251)).

## 6.3.5.7 Study logging

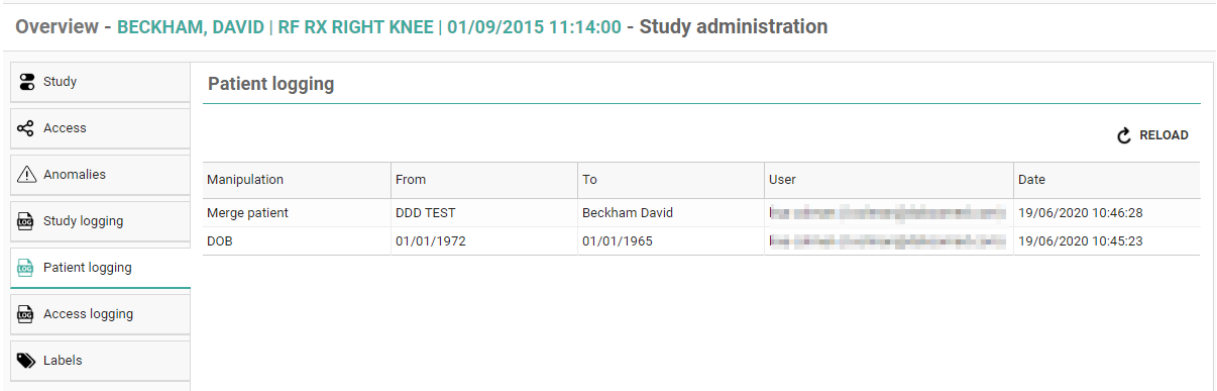
You can see who changed what with regard to the study data using study logging.


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## 6.3.5.8 Patient logging

You can see who changed which patient data using patient logging.



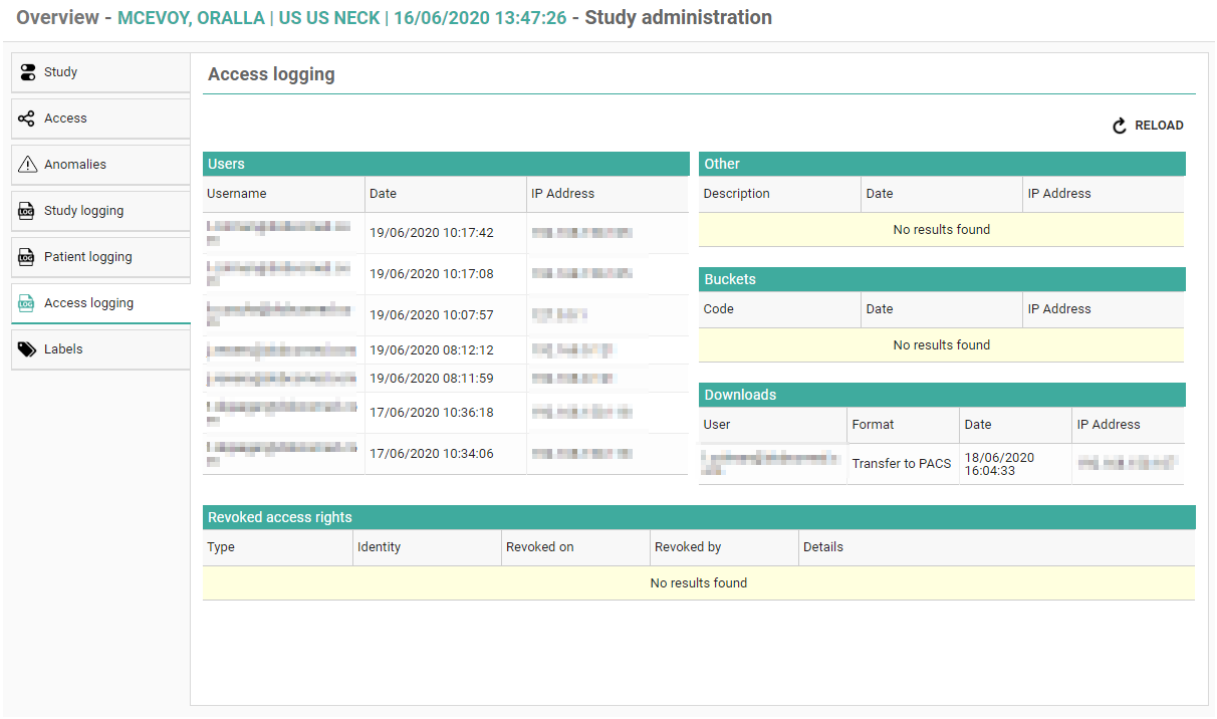

## 6.3.5.9 Access logging

For all types of access and in case images have been downloaded, it is registered

- how the study was accessed
- when the study was accessed / downloaded
- from what IP the study has been accessed / downloaded

For downloads, it is also registered in what format the study has been downloaded (PNG, DICOM, ...)

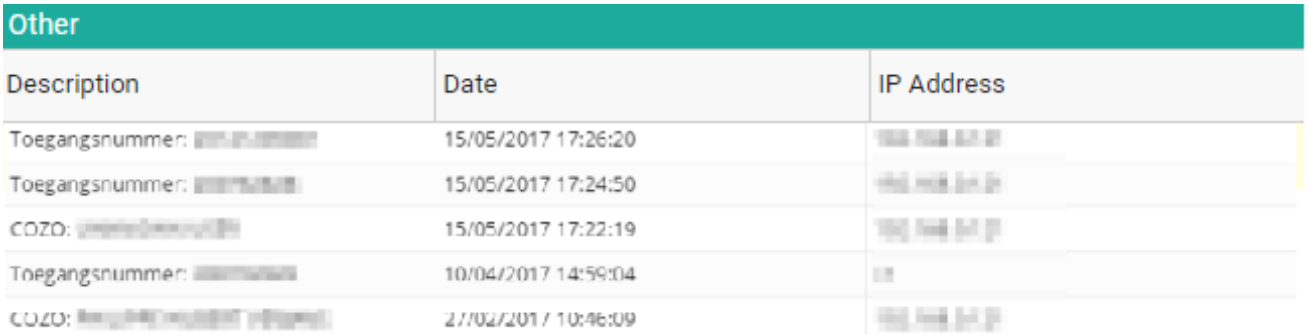

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**Note:**

Buckets means that the study has been shared with a recipient without an account, he can open the study with a DU POW code.

For Belgium, all access through the COZO portal is registered within the "Other" overview.




## 6.3.5.10 Labels

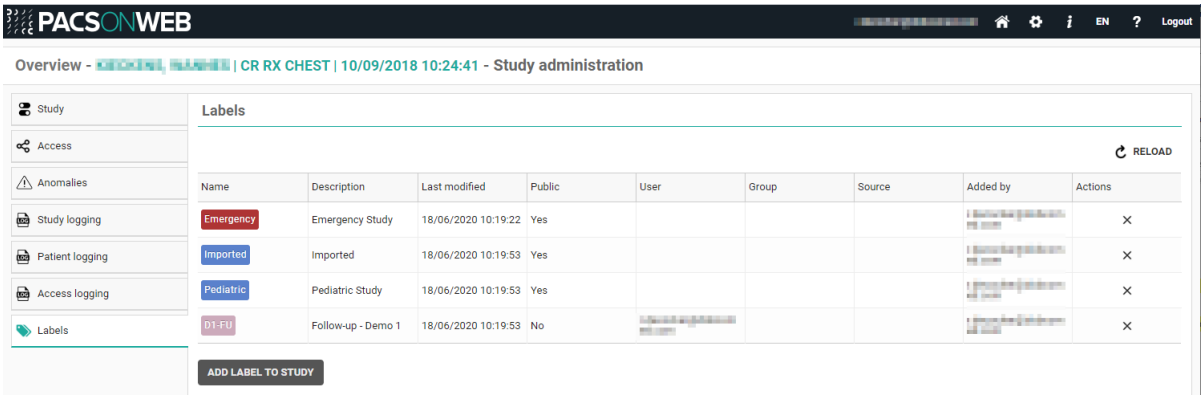
From the tab Labels, the following information is available:

- Name and description of added labels
- Date/time when the label was added to the study


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- To whom the label is visible
- Who added the label

From this page it is also possible to add or remove labels to the study **ADD LABEL TO STUDY**.




## 6.3.6 MPR and related tools

DeepUnity PACSonWEB contains the following advanced image tools for multi-slice series:

- Multi Planar Reconstruction
- Maximum Intensity Projection
- Minimal Intensity Projection
- Multi Projection Volume Reconstruction

**Warning:**

**MPR as supplement**

All diagnosis and medical decisions based on MPR generated images (MPR, MIP, MinIP, MPVR) should always be double checked with the original series.


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**Caution:**

**MPR accuracy and resolution**

The accuracy of MPR generated images depends on the quality of the original series (pixel spacing, slice thickness ...).

The images are calculated, based on the data available in the original series.

Gaps of pixel- data will be calculated to show a smooth image.

It will remain the user's responsibility to keep in mind the slice thickness and pixel spacing from the original series.

In case the slice thickness is larger than the pixel spacing, overlap between slices is not taken into account.

The used pixel spacing is calculated based on the image location of the original images

The user should be aware of lossy data visualization while judging and diagnosing a patient.

The user should also be aware that series that lost pixel- data while compressing or have an inappropriate slice thickness are not suitable for proper MPR generation.

**Caution:**

**MIP, MinIP and MPVR calculations**

While using MIP, MinIP and MPVR calculations, only one pixel is shown for the whole thickness of the slice. The user should know that only selective data is shown based on these calculations, and that it is his responsibility to double check the data with the original series.

**Restriction:**

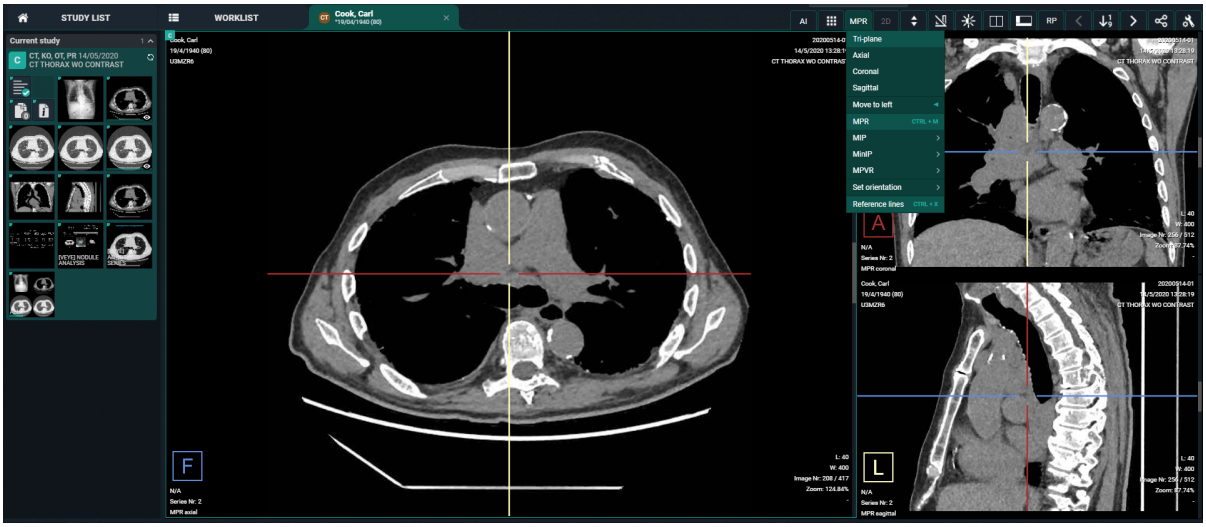
These functionalities are not supported on mobile devices.

The tools can only be activated for images of the following modality type:

- CT
- MR
- NM
- PT / PET
- ST / SPECT

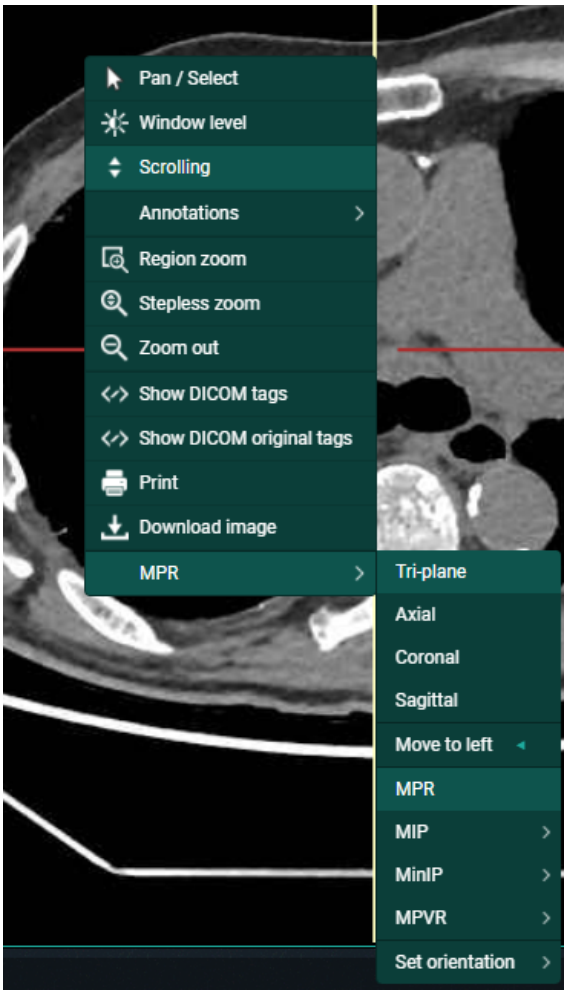

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If a viewport with such a series is selected, the button "MPR" is available from the toolbar. When clicking the button, the complete list of MPR functionalities is displayed.




The "MPR" menu is also available from a right mouse click on the image.


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For ease of use, you can use the following short cuts:

| | |
|---|---|
| **Activate / Deactivate MPR** | CTRL + M |
| **Show / Hide reference lines** | CTRL + X |
| In case MPR is active: **Reset MPR** to original orientations, reset zoom factor and window level | SPACEBAR |
| **Move viewport to left** | Left arrow key  |


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In case an image series is selected that does not support MPR, the button is grayed out in the toolbar and the option "MPR" is not listed in the context menu when performing a right mouse click on the image.




In case the MPR can not be created due to insufficient memory, the following notification will be displayed.

**MPR**

Cannot create MPR

The MPR volume cannot be created due to insufficient memory. Please retry later. If the problem persists, please contact your system administrator or DeepUnity PACSonWEB support.

**Important!**

In order to be able to generate usable MPR data the related image series must comply with each of the following conditions:

- distance between each set of consecutive slices is equal
- series consists of 10 slices or more
- series consists of 10000 slices or less
- spacing between slices is max. 10 mm
- all images within the series have the exact same orientation
- source frames are monochrome
- series must have 16-bit images

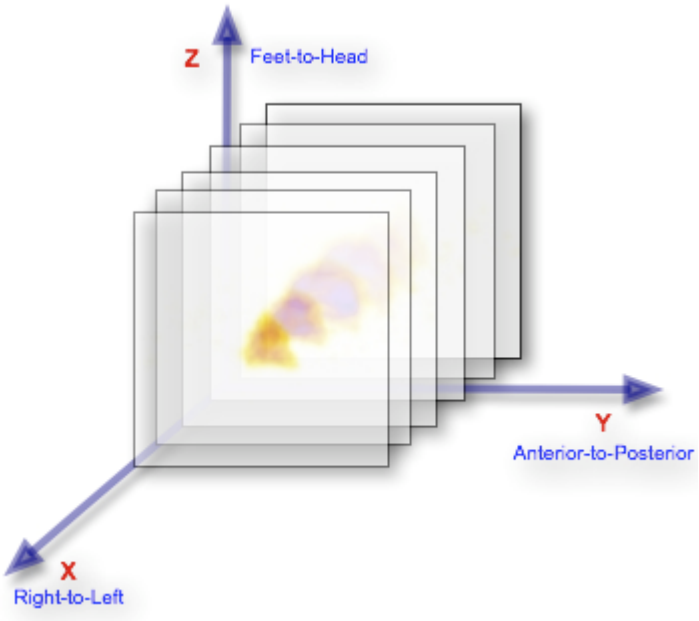
If a condition is not fulfilled an appropriate warning message will be displayed.

## 6.3.6.1 Available Views

The axes for MPR are considered as follows:

- X-axis = Right to Left ( R to L )
- Y-axis = Anterior to Posterior ( A to P )
- Z-axis = Feet to Head ( F to H )


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When activating MPR on an image series, the following views are available:

- Axial: slices perpendicular to the Z-axis
- Sagittal: slices perpendicular to the X-axis
- Coronal: slices perpendicular to the Y-axis
- Tri-plane: overview of these 3 views

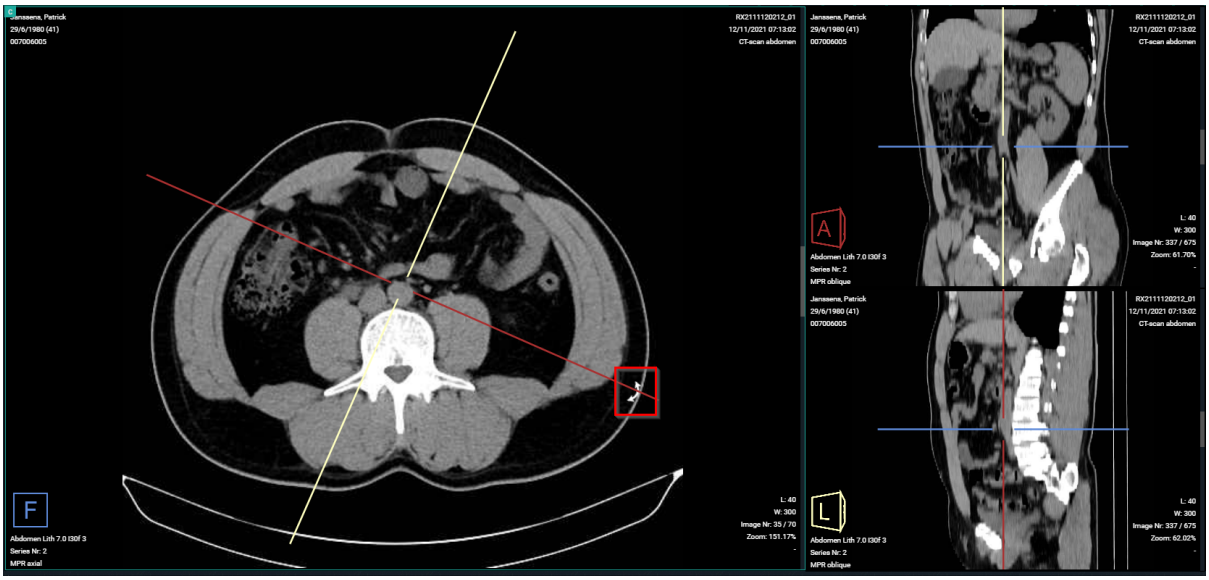
In case MPR is activated and no specific view (axial, sagittal, coronal) is selected, the Tri-plane view will be displayed.

Each of the reference lines can be rotated.

This can be done by hovering over a reference line and drag when the rotate icon is shown.

Default behavior is that the reference lines are kept in a 90° angle from each other. By pressing and holding the **Ctrl button** the reference lines can be rotated independently.


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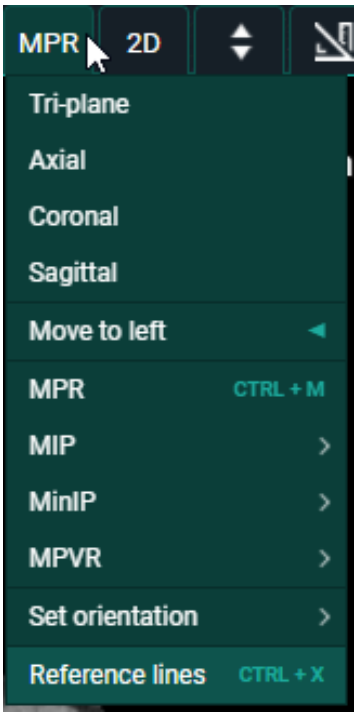
Each quadrant has an indication in the bottom left corner that indicates:

- the orientation of the volume with indicators R, L, A, P, H, F (cf description of the axes)
- the series the MPR images originate from
- the name of the view




To display a single view in the viewport, you must select the desired view from the MPR menu.


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### 6.3.6.2 MIP - MINIP - MPVR

DeepUnity PACSonWEB also offers the following modes, related to MPR:

- MIP: Maximum Intensity Projection

  Used to display the slices of the volume in a maximum intensity projection render mode.

  In this mode, each pixel on the screen is the maximum density found along a line perpendicular to the selected plane within the selected plane thickness.

- MINIP: Minimum Intensity Projection

  Used to display the image in a minimum intensity projection render mode.

  In this mode, each pixel on the screen is the minimum density found along a line perpendicular to the selected plane within the selected plane thickness.

- MPVR: Multi-Projection Volume Reconstruction

  Used to display the slices of the volume in an average intensity projection render mode.

  In this mode, each pixel on the screen is the average density found along a line perpendicular to the selected plane within the selected plane thickness.

For all three modes the following plane thicknesses are available:

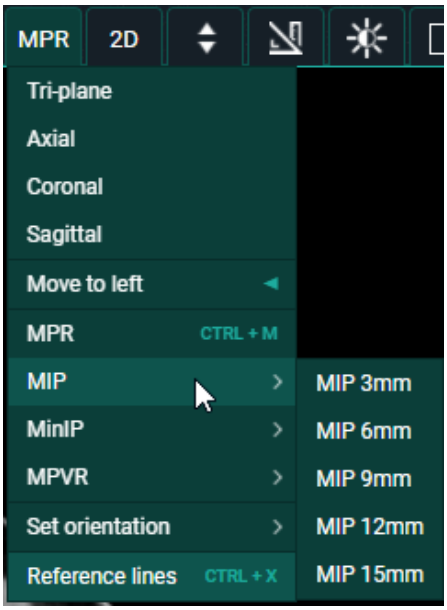
- 3 mm
- 6 mm


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- 9 mm
- 12 mm
- 15 mm

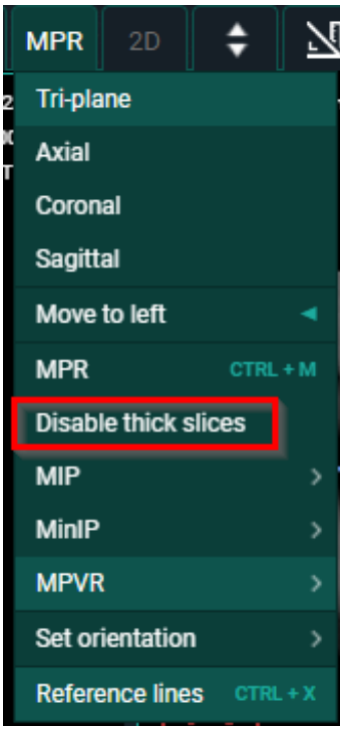
Such mode can be activated from the MPR menu and is automatically applied to the entire selected view (Tri-plane axial, sagittal, coronal).

If another view is selected, the selected mode is still applied. The mode remains highlighted in the MPR menu so it can be consulted if needed.




When activated MIP, MinIP and MPVR functionality can be turned off from the MPR menu in the toolbar by clicking "Disable thick slices".


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## 6.3.6.3 User interactions

In the Tri-plane view, reference lines are displayed on the axial, sagittal and coronal view. When a reference line is rotated, the other views are adjusted accordingly.

Following user interactions are possible within a generated MPR series (and similar for MIP, MINIP, MPVR) :

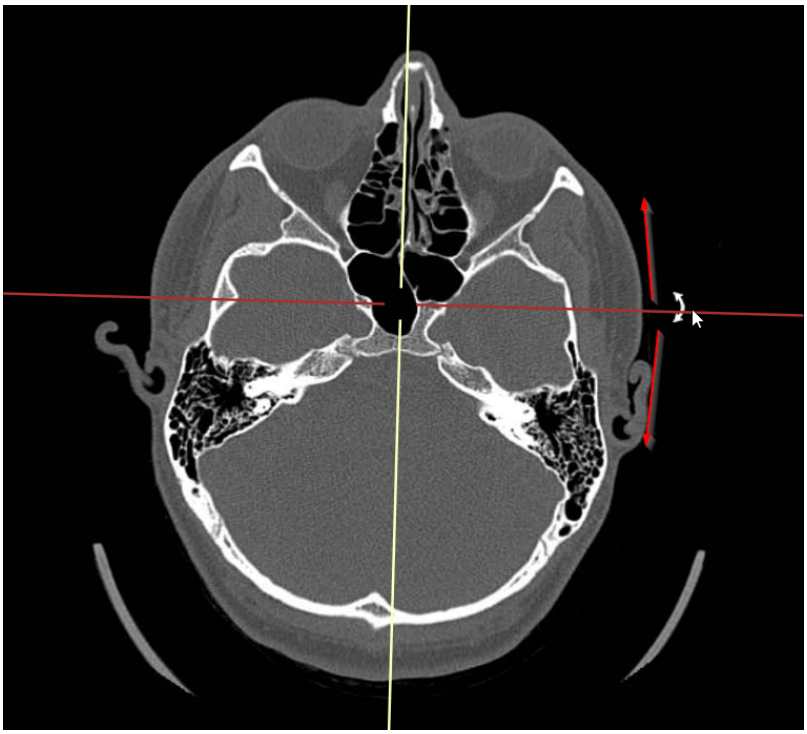
**1. Single oblique rotation**

By hovering over a reference line, the cursor will change into a rotating icon.

Hold down the left mouse button and drag the reference line to the desired location to create an oblique view.

By default the reference lines will stay in a 90° angle.


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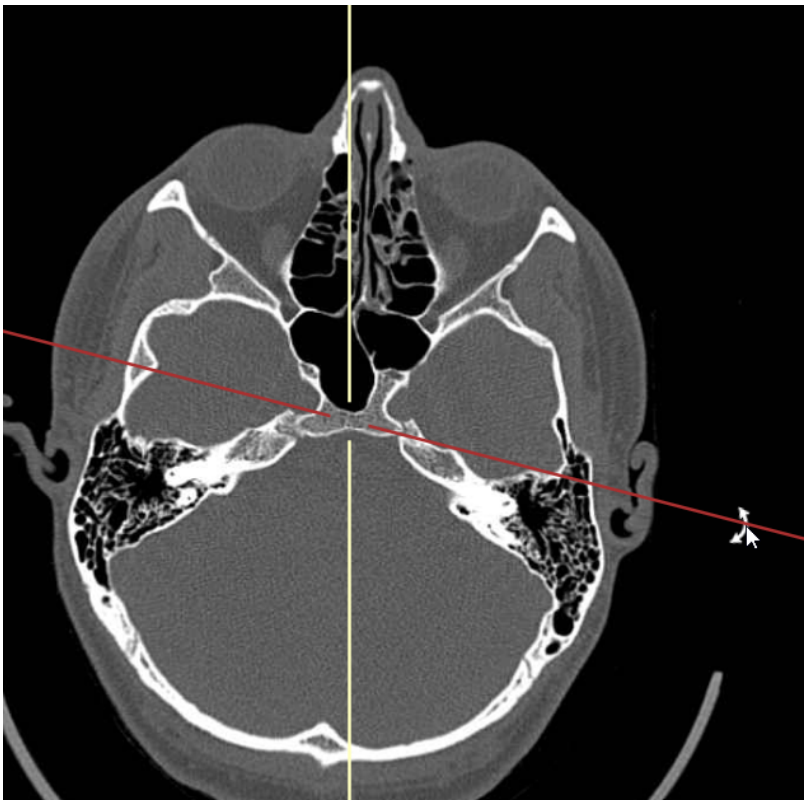


**2. Double oblique rotations**

In case, when rotating in the single oblique view, additionally the Ctrl-key is pressed, only the selected reference line will move further.

The reference lines will therefore no longer be perpendicular to each other resulting in a double oblique view.


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**Important!**

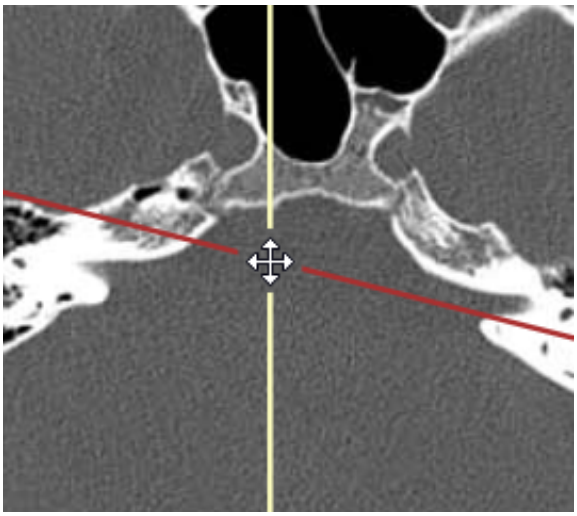
For usability reasons, rotations can only performed about one axis at the time.

After performing e.g. a rotation about the X-axis, you must release and hold the left mouse button to be able to perform a rotation about the Y-axis.

From the axial, sagittal or coronal view it is possible to change the displayed slice of the oblique view by selecting the intersection on the two reference lines, holding the left mouse button and moving the mouse.

This also allows to reposition the intersection to select another center point for rotating the reference lines.

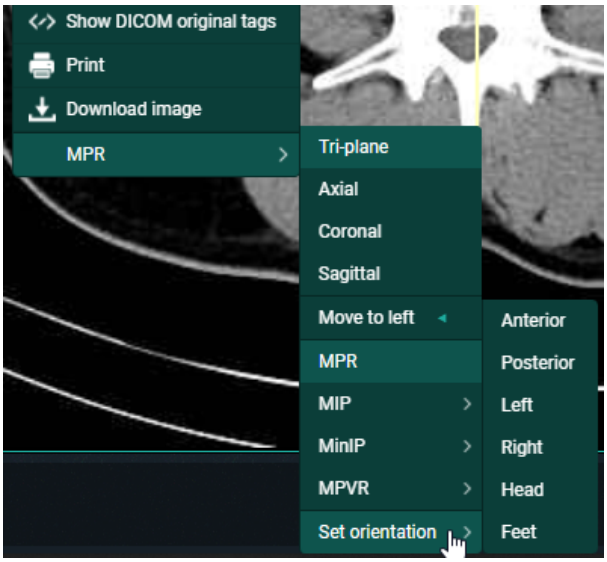

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### 3. Set Orientation

You can set the orientation in any of the three views using the "Set Orientation" option from the MPR menu (accessible with right mouse click).

The possible options are: Left, Right, Anterior, Posterior, Head or Feet.




## 6.3.7 Open study in external app

You can open a study from DeepUnity PACSonWEB in another application with the appropriate context by clicking: **Open study in external app**.

To make use of such links, please contact the DeepUnity PACSonWEB Service Desk.


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## 6.3.8 Volume Rendering

Based on a series of images of the same volume, it is possible to view the volume in different visualizations based on Volume Rendering.

- **MPR:** Multi Planar Reconstruction
- **3D:** 3-Dimensional rendering

To enable or disable this optional feature, please contact Dedalus support.

**Warning:**

The accuracy of the calculated Volume Rendering images depends on the quality, pixel spacing, and slice spacing (relative image position for each image in the series) of the original images. Depending on the view (zoom, chosen slice thickness, render mode, orientation, ... ), gaps between the original pixels might be calculated into newly displayed pixels, and/or single pixels could be a recalculation of multiple original pixels. The user should always be aware of this and verify any data and findings in the Volume Rendering images, including measurements, with the original series, before making any medical decisions or diagnosis.

**Note:**

These functionalities are not supported on mobile devices.

Volume Rendering and other reconstructions or renderings are available only for image series that meet the following requirements:

- **Modality types:** CT, MR
- **Number of images:** 10 or more
- **Image orientation:** Images must have the same orientation
- **Image type:** Monochrome
- **Bit depth:** No 8-bit images

## Available views

Viewports that support Volume Rendering will have the **3D** (Volume Rendering) button in the toolbar which can be activated in any of the available views:

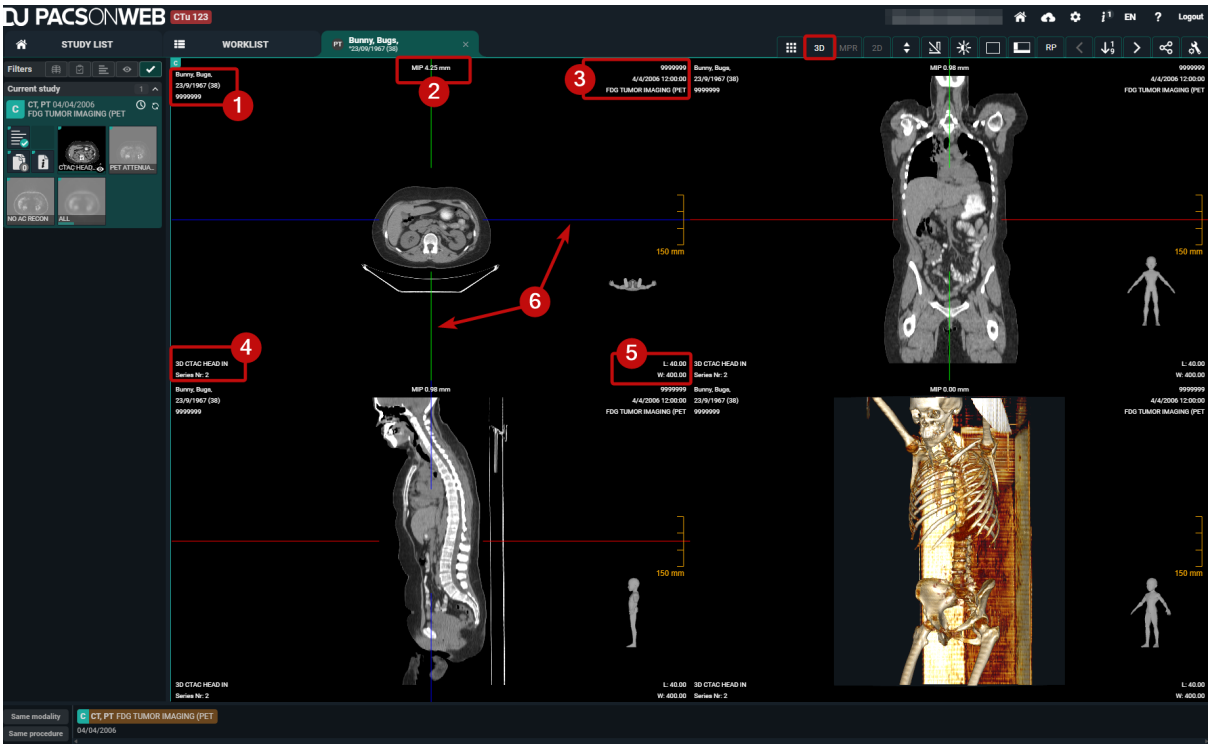
- **2x2:** Displays an axial, coronal, sagittal, and 3D view in 4 viewports.
- **Triplane:** Displays an axial, coronal and sagittal MPR view in 3 viewports.
- Coronal


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- Axial
- Sagittal
- 3D

You can switch between the views using the 3D button in the toolbar or the context menu (right mouse click) under **View**.

In each of the views, the overlays are displayed as in the original series.




| Number | Designation | Description |
|---|---|---|
| 1 | Patient information | Patient information, such as the patient's name, date of birth, and Patient ID. |
| 2 | MPR render mode | MPR render mode indicates which render mode and slice thickness applies for that view. Example: MIP 0.89 mm. |
| 3 | Study information | Study information, such as the procedure and study date. |


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| Number | Designation | Description |
|---|---|---|
| 4 | Series information | Series information, such as series number. The initial view (sagittal, coronal, axial or 3D) is also displayed. |
| 5 | Image information | Image information, such as length and width of the image, image number in the series, and zoom level. |
| 6 | Reference lines | In each of the planes, the intersections with the other MPR planes are displayed as colored interactive reference lines. These reference lines can be used to rotate the views or drag the center-point, and by doing so, navigate through the volume. |

## MPR settings

For the MPR views, it is possible to adapt the slice thickness via **MPR settings**. You can find the MPR settings in the **3D** menu or by clicking on the MPR render mode overlay (see Number 2 in table above).

- Set the render mode:
  - **MIP**: Displays the maximum intensity projection for each pixel in the volume within the range of the slice thickness (lightest pixels).
  - **MinIP**: Displays the minimum intensity projection for each pixel in the volume within the range of the slice thickness (darkest pixels).
  - **AvgIP**: Displays the average intensity projection for each pixel in the volume within the range of the slice thickness (average of the pixels).
- Adapt the slice thickness:

  When adapting the views, you can move the slider to indicate a **target slice thickness**. When sliding, the different MPR views will adapt to a slice thickness closest to the target slice thickness.

  These may vary depending on the slice thickness, pixel spacing, and slice spacing of the original series in addition to the orientation of the specific view.

## 3D render modes

You can adapt the 3D Mode to define the way the 3-Dimensional rendering happens. This can be done via the **3D** menu.

- MIP


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- Default CT
- Bones
- Vessels
- Skull
- Lung
- Soft

Additionally, the Window Level tool can help filter out less or more dense pixels from the volume in the rendering.

## 3D clipping

With 3D clipping, a reference box can be shown in the MPR views where you can adapt the range of the volume that should be rendered. Pixels outside the defined shapes will be ignored for creating the 3D render.

## Tools and actions

You can scroll, zoom, pan, and adapt window level on volume rendering images.

For the MPR views (axial, sagittal, coronal) the zoom level will always be aligned and change simultaneously. The 3D view changes separately.

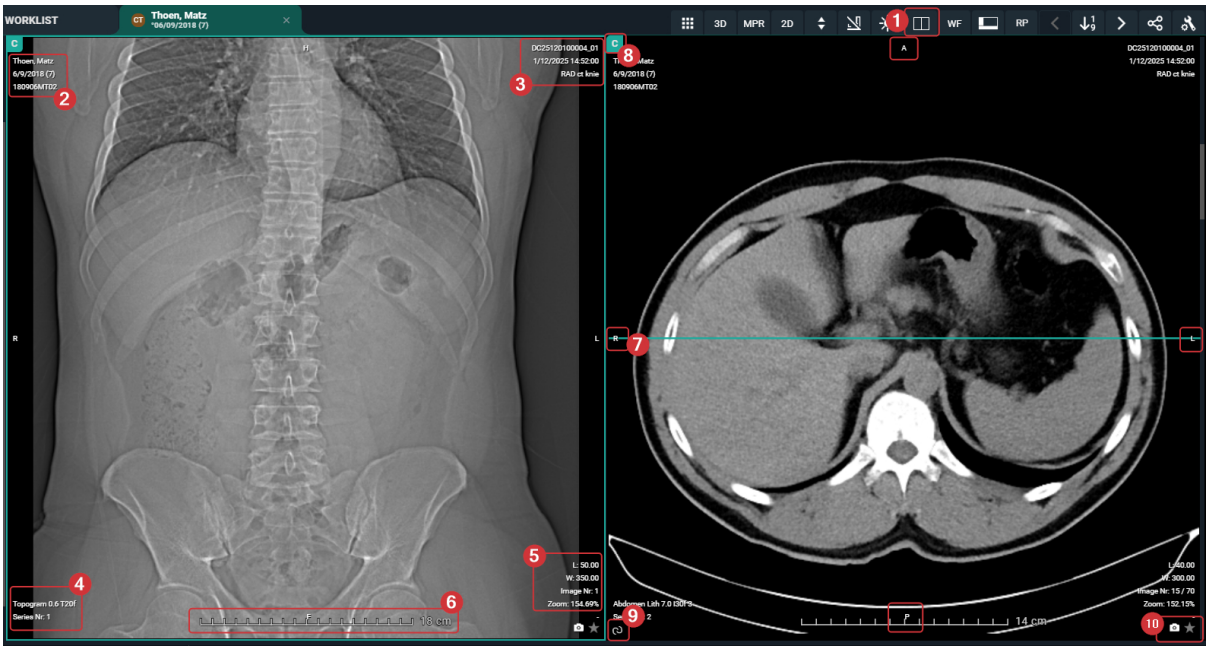
You can perform the following measurements on the MPR views in the Volume Rendering viewport using the following tools:

- Ruler: distance measurement
- Cobb angle: angle measurement
- Circle ROI: circle measurement that also calculates densities and area by combining the ROI-ellipse and circle measurements that you can perform on the original series. You can activate it by either using the ROI-ellipse or the circle tool (and shortcut keys).

# 6.4 Image screen

On the image screen, the images (and the report) are displayed in viewports.


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| Number | Element | Description |
|---|---|---|
| 1 | Layout | In the top toolbar, you can change the layout of the image screen to display more or less viewports. |
| 2 | Patient information | Patient information, such as the patient's name, date of birth, and Patient ID. |
| 3 | Study information | Study information, such as the procedure and study date. |
| 4 | Series information | Series information, such as series number. |
| 5 | Image information | Image information, such as length and width of the image, image number in the series, and zoom level. |
| 6 | Scale ruler | Indicates the image width scale. |


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| Number | Element | Description |
|---|---|---|
| | | **Important!**<br>If pixel spacing for rows and columns are different, the scale only applies to horizontal distances.<br>Also when rotating the image, the scale still applies to the horizontal distances of the original image. |
| 7 | Orientational reference indicators | The following letters are used to indicate the referential orientation:<br>• **H**: Head<br>• **F**: Feet<br>• **A**: Anterior<br>• **P**: Posterior<br>• **L**: Left<br>• **R**: Right |
| 8 | Study type | This abbreviation indicates the type of study that is currently displayed:<br>• **C**: current study<br>• **P**: prior study<br>• **S**: subsequent study |
| 9 | Linking series | Click to link series with one another or unlink them from another. |
| 10 | Secondary capture and key image | Click on the respective icons to take a secondary capture of the image or mark the image as a key image. |

**Tip:**

Elements 2 to 7 are part of the **Overlays**. They can be shown/hidden by selecting them from the **Visible elements** in the top toolbar.


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### See also

Key image (Page 278)
Linking series (Page 275)
Secondary captures (Page 280)

## 6.4.1 Navigation and interaction controls

When a series contains multiple images, you can scroll through the images using the scroll wheel, the arrow keys or, after selecting scrolling in the menu, by holding the left mouse button and moving the mouse up and down.

**Important!**

The speed for scrolling is adaptive. Depending on the velocity used when moving the mouse back and forth, the scrolling will be faster or slower (non linear). The same remark holds when scrolling through a series on a mobile device (tablet or smartphone).

You can view an image in full-screen mode by double-clicking on the image. Double-clicking the image again will take it back to its original size.

Using the image editing tools from the toolbar you can zoom in on/zoom out of the image, rotate the image, perform measurements, change contrast, etc.

You can also right-click the mouse for a menu with the most-often used commands:

| Command | Description |
|---|---|
| **Pan/Select** | Use Pan to drag a zoomed-in image. |
| **Window level** | Use Window Level to modify the brightness and contrast of the selected image. |
| **Scrolling** | Use to scroll through the images. |
| **Annotations** | Tools to make annotations on the selected image. |
| **Region zoom**, **Stepless zoom**, **Zoom out**, **Zoom 100%** | Tools for zooming on the selected image. |


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| Command | Description |
|---|---|
| **Align image** | Align the image inside the viewport. |
| **Show DICOM tags** | Display the DICOM tags of the selected image. |
| **Show DICOM original tags** | Display the original DICOM tags of the selected image (only available to administrators of the study). |
| **Print** | Print the selected image. |
| **Download image** | Download the selected image in PNG format. |

In case you have activated the setting **Right click for function switch** in User settings (Page 100) > Preferences (Page 104) you can switch between the following functionalities with short clicks on the right mouse button:

- Window Level
- Scrolling
- Stepless zoom
- Pan

To display the context menu, press the right mouse button for 1 second or longer.

**Default mouse actions:**

The default mouse actions are listed below and depend on the modality type.

For both actions (left and middle mouse button), it means clicking the button, holding it and moving the mouse around.

| Mouse button | Modalities | Action |
|---|---|---|
| Left mouse button | CT/MR/PT | Scrolling |
| Left mouse button | Other | Pan |
| Middle mouse button | Other | Scrolling |


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**Note:**

"Other" means every modality that is not specified as an action.

**Tip:**

The mouse actions can be changed for every modality type to personal preferences in the user settings.

**Shortcuts:**

Within the study page, the following shortcuts can be used:

| Shortcut | Functionality |
|---|---|
| CTRL + left mouse button clicked + dragging image to another viewport | Duplication of image in second viewport |
| SHIFT + left mouse button clicked + dragging image to another viewport | Switching images between viewports |
| SHIFT + scroll forward | Zoom in |
| SHIFT + scroll backward | Zoom out |
| CTRL + scroll | Tiling within the selected viewport |
| Left mouse button clicked + scroll | Fast select between the following functionalities:<br>• Window Level<br>• Stepless Zoom<br>• Pan |
| ESCAPE | Restore the default action |
| Hold down the mouse wheel + move the mouse up and down | Scroll through the series |


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| Shortcut | Functionality |
| --- | --- |
| **Note:**<br>Only for series containing multiple images. | |

## See also

Annotations (Page 201)
Image control (Page 196)
Other image editing tools (Page 211)
Preferences (Page 104)
Toolbar (Page 193)

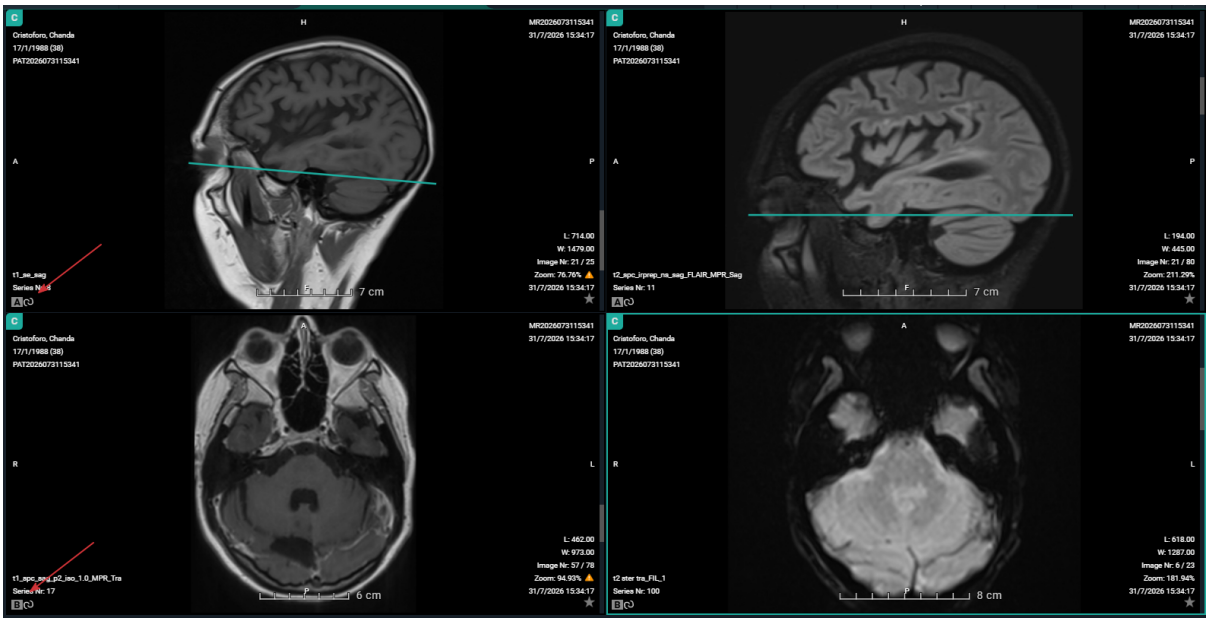
## 6.4.2 Linking series

Image series in the viewports can be linked so you can scroll through them simultaneously.

**Automatic linking**

If two or more viewports display image series that share the same frame of reference and orientation, they are linked automatically into linking groups. This is indicated by a letter next to the link icon in the viewport. All image series belonging to the same linking group are marked with the same letter, starting with A.


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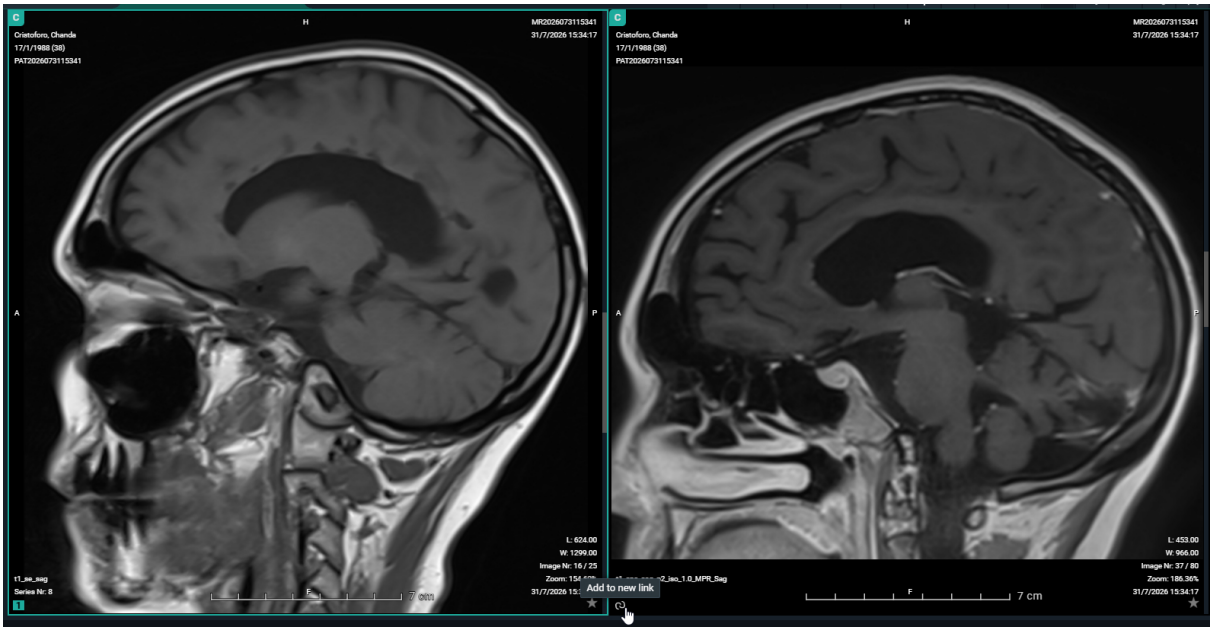


If you want to unlink them to scroll through them individually, go to **Image control** in the top toolbar and deselect **Auto link series**.

### Manual linking

Image series that are not linked but share the same orientation can be linked manually. Manual links are indicated by numbers. All image series belonging to the same linking group are marked with the same number, starting with 1.

Image series can be linked manually in the following way:




1. Click on the link icon in the bottom left corner of the viewports of the image series that you want to link. The link icons will turn into numbers.


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2. Click anywhere except on the numbers. The numbers will turn grey. The series are now linked and you can scroll through them simultaneously.

- If you now click on another link icon, you will start a second linking group.
- To unlink the series, click on the number.

**Important!**

Automatic or manual linking of series is not possible in case one of the series is an MPR.

If the DICOM tag **(0020,0032) image position (patient)** is missing, you will not be able to link this series. The link icon is disabled and the following tool tip is provided: **No image position information provided, no linking possible**.

## 6.4.3 Volume registration

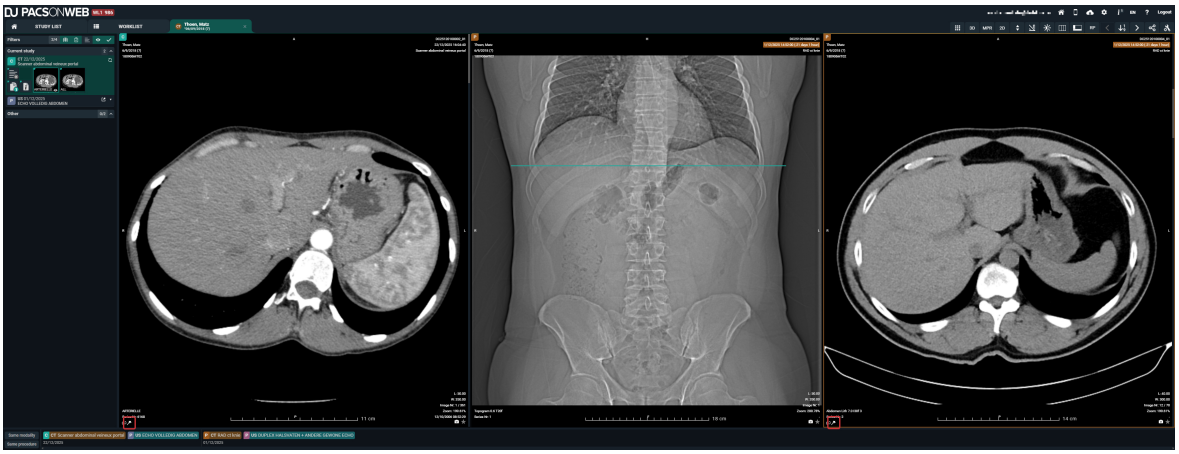
Volume registration is the automatic anatomical linking between 2 studies.

To use this feature, the following prerequisites need to be met:

- Registration is only possible between 2 studies.
- Only for CT/MR/SPECT/PET.
- Both volumes should be available in the cloud.
- Minimum number of 10 slices.
- Maximum spacing between slices of 10mm.
- All slices need to have the same orientation.

Volume registration can be created and reset in the following ways:

1. To start volume registration, click on the registration icon in the bottom left corner of the two series that you want to link.



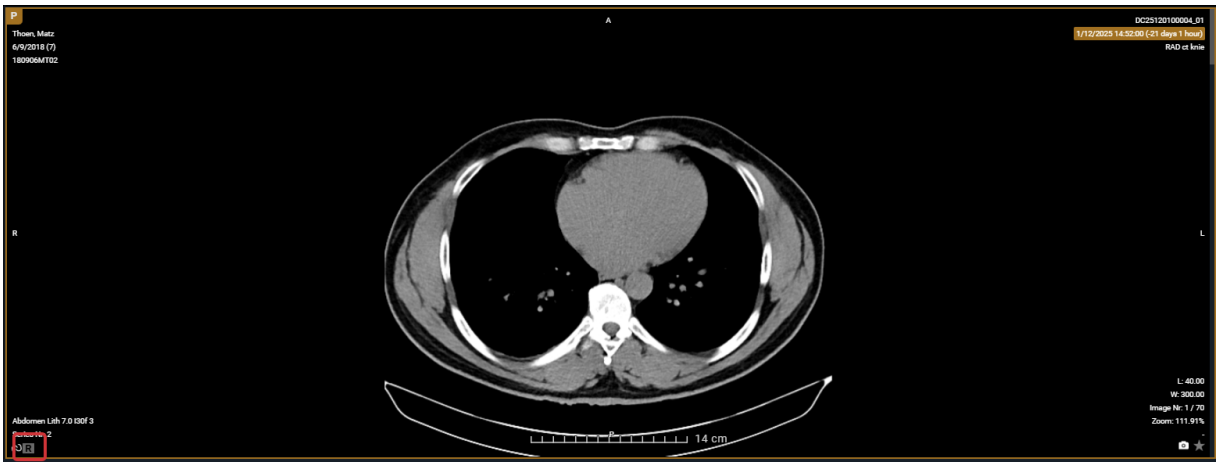

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The icon is only visible if the series is a volumetric series that meets the requirements.

Once both the icons are clicked, DU POW will start with the volume registration.

a. The following toast message is shown to indicate that DU POW is busy with the registration: **Creating volume registration...**

b. When the registration is finished, you will be notified with the following message: **The volume registration is ready.**. A gray R icon R will be displayed in the viewport for all series affected by the registration.




2. To reset the registration, click the R icon.

**Important!**

When the registration is not perfectly correct, you can easily adjust the registration to the correct slice of the series:

a. Press and hold the ALT key to scroll in the series that needs to be adjusted.

b. Scroll to the correct location and release the ALT key.

c. After releasing the ALT key, the series will scroll in sync again.

**Warning:**

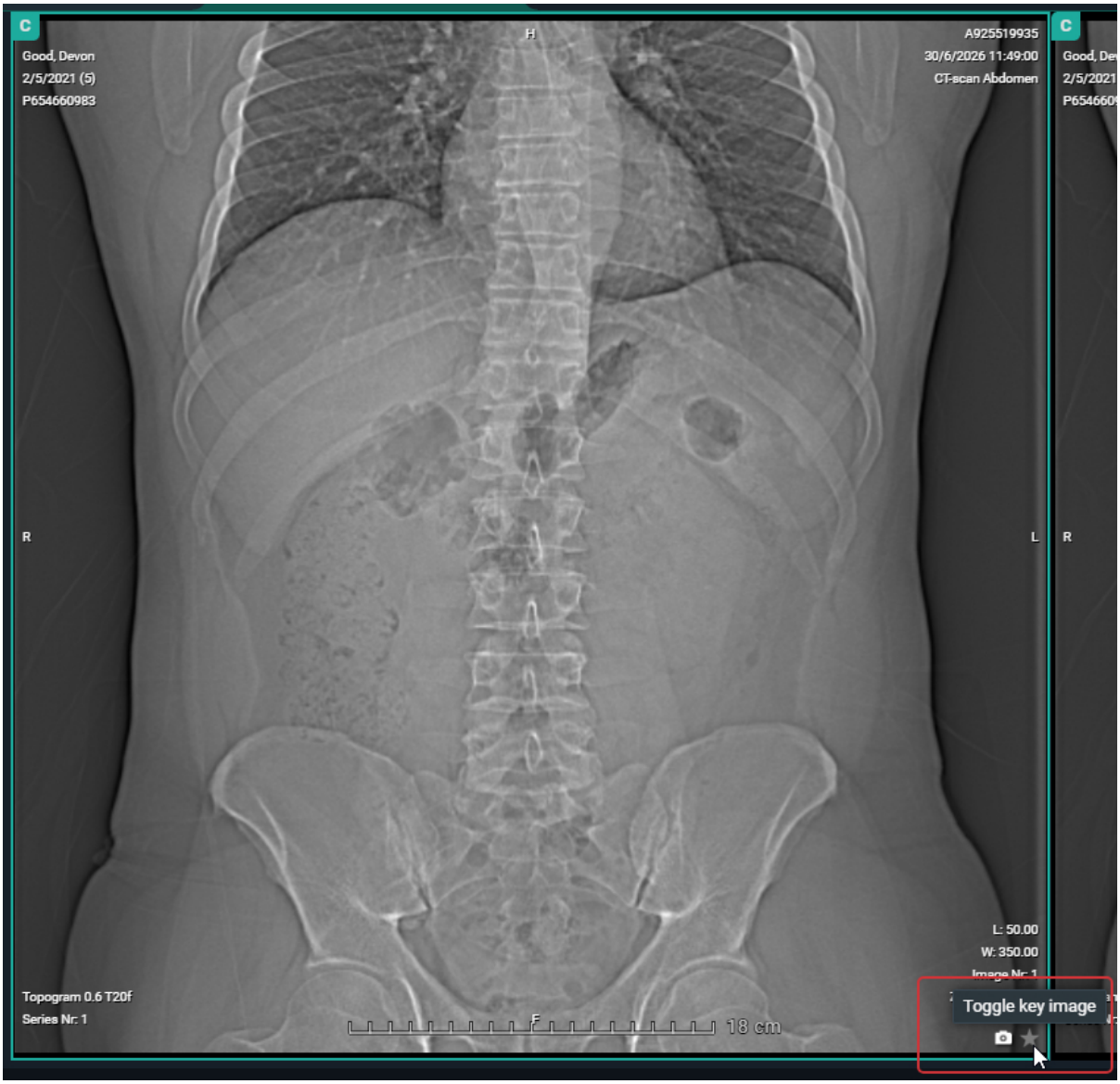
The Volume Registration will not be 100% correct in every scenario. It is still the users' responsibility to verify the outcome of the tool and make corrections if needed.

## 6.4.4 Key image

Administrators of a study on DeepUnity PACSonWEB have the possibility to create a new series with **key images**.


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You can add an image to this series by opening it in the viewer and clicking the star icon in the bottom right corner of the viewport.




The star will turn yellow, indicating that the image has been marked as a key image ★.

When reloading or reopening the study, the newly created series on key images will be available in the series picker for everyone who has access to the study.

You can remove images that have been marked as key images from the series by de-selecting the star icon. Images on which publicly available annotations have been made, are automatically marked as key image.

You can navigate back to the original image from the key image by clicking ⧉ in the right bottom corner of the viewport.


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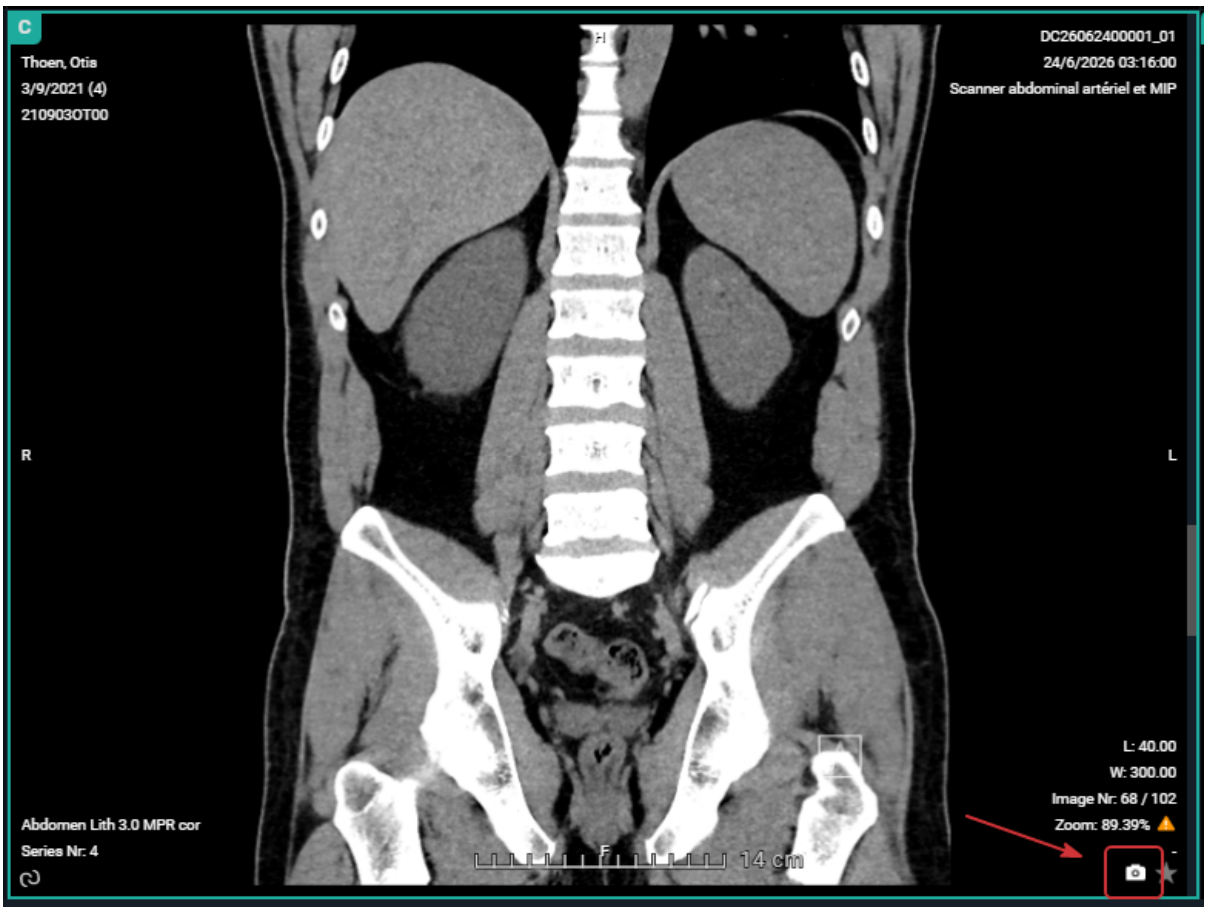
## 6.4.5 Secondary captures

A **Secondary Capture** is a new image series created from existing original images, exactly as they appear on screen at the moment of capture (within the active, displayed series).

**Restriction:**

Secondary captures are available to anyone who has access to the study. Creating and deleting secondary captures, on the other hand, depend on the permissions for a specific user or group for the source of the study.

1. To create a secondary capture of the image you have currently displayed, click on the camera icon at the bottom of the viewport.




This will create a new DICOM image that is basically a screenshot of the image how it is displayed in your viewport, including zoom level/pan, window level, rotations/flips, and annotations.


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2. A pop-up window opens where you can name the secondary capture. By default, the original series description with the prefix **SC-** will be used. Set a description and click **CREATE**.
3. A pop-up message notifies you that uploading is in progress. Once the upload was successful, you will find the new secondary capture series in the series picker.

Depending on your permissions, the following icons are displayed in the viewport of your secondary capture, allowing the following actions:

| Icon | Description |
|---|---|
|  | Delete this secondary capture. |
|  | Navigate back to the original image. If a secondary capture has been created on volume rendering or MPR, this will be the first image in the series. |
|  | By default, every secondary capture will be marked as a key image as indicated by the yellow star. Click the star to unmark it. |

**Important!**

It is not possible to create a secondary capture of a secondary capture.

## 6.4.6 CAD markers

DeepUnity PACSonWEB supports displaying CAD annotations of two different manufacturers in the DeepUnity PACSonWEB viewer: iCAD and ScreenPoint Medical.

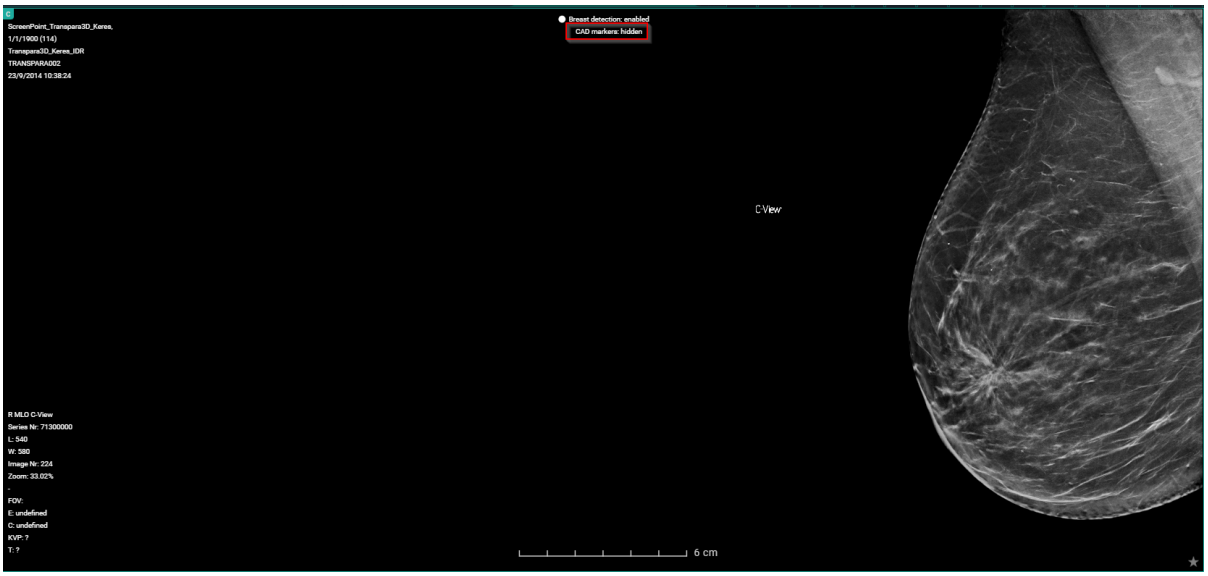
In case a study contains an CAD structured report, it is possible to display the CAD markers in the image screen.

The user has to have the permissions to edit the report in order to have access to the CAD markers.

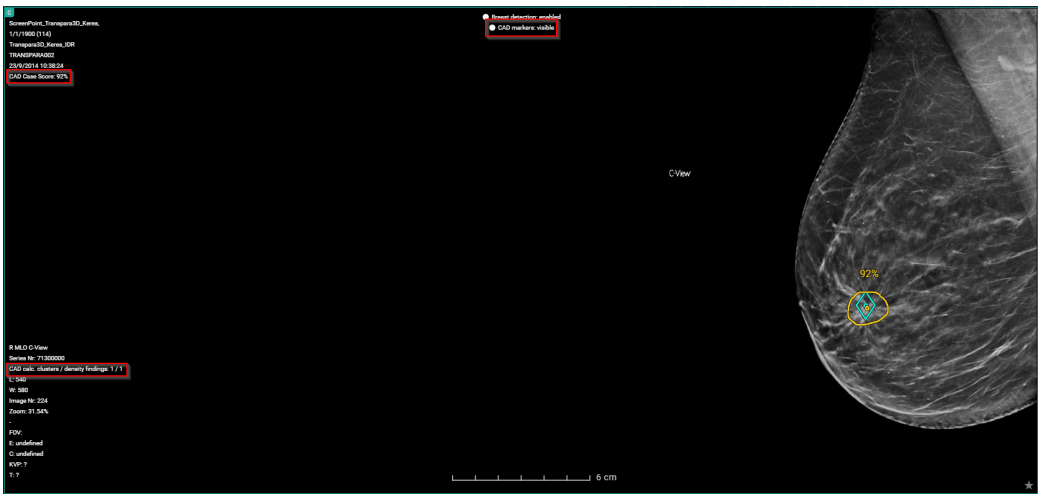
The study opens by default with the markers hidden. They can be made visible by clicking the CAD markers description, displayed in the top center of the image.

In the image overlay the number of iCAD findings is displayed.


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The CAD Case score, number of densities and calcifications is displayed in the overlay.

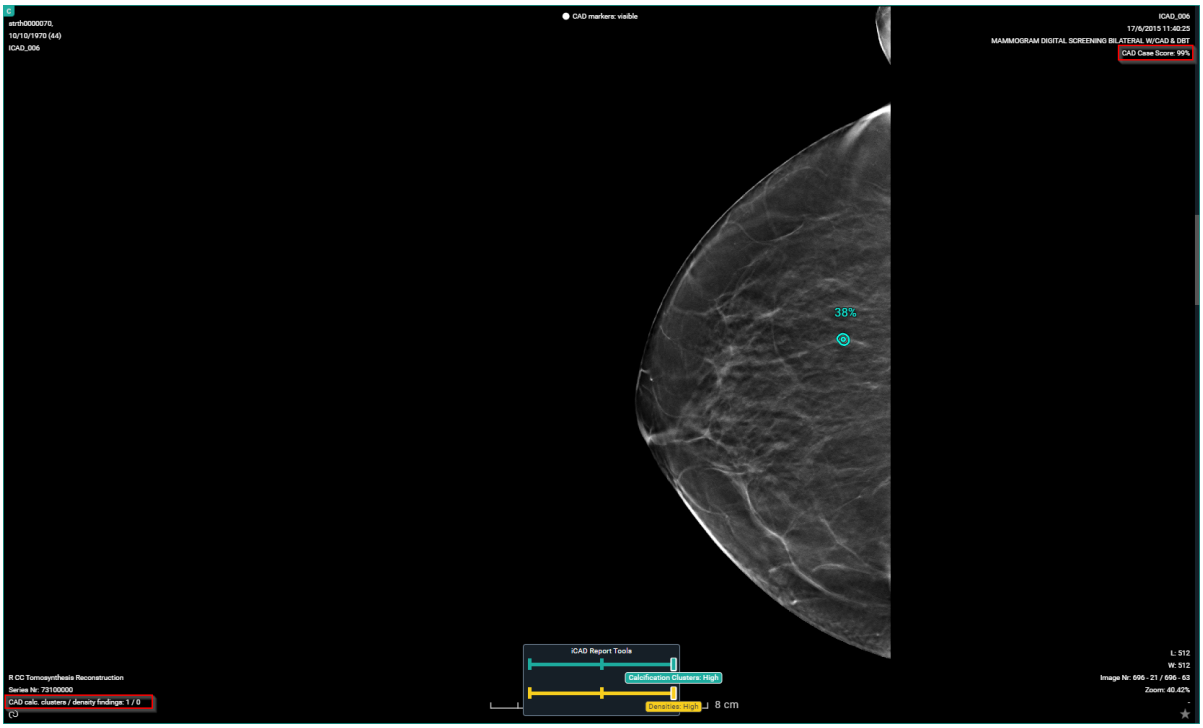



## iCAD report tools

When iCAD annotations are being shown, the report tools are also displayed.

These report tools allow you to individually toggle the visibility of the density findings or the calcification cluster findings.


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## 6.5 Report display

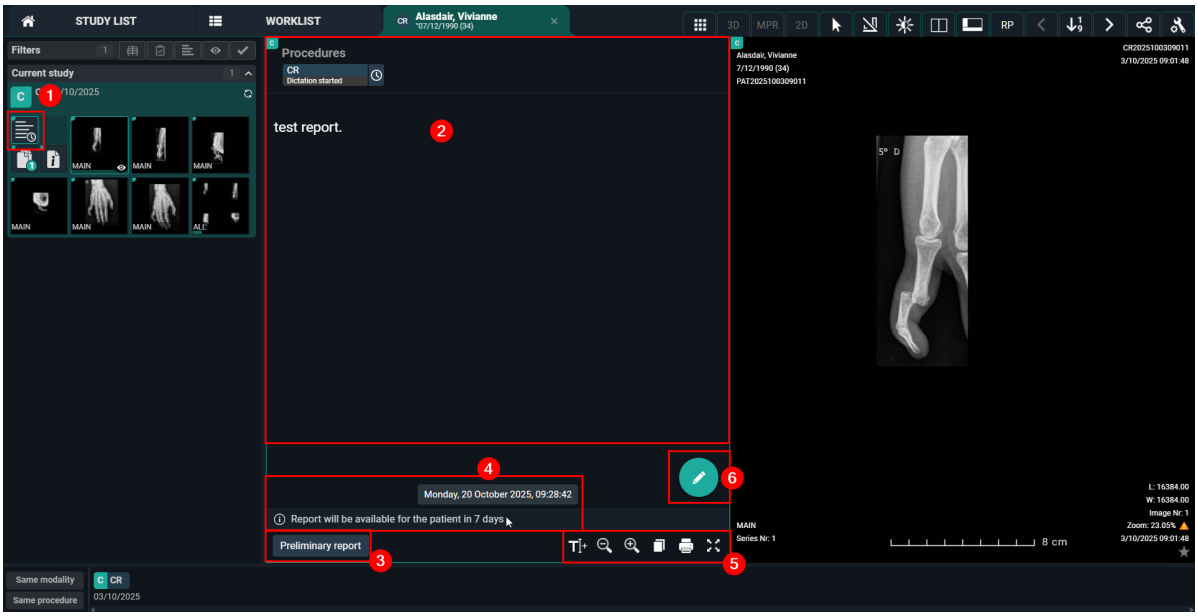
The report display is part of the study page. Depending on your role and permissions, you can view, create or edit reports. By default, the report will be displayed in the first view port (if a report is available for the study).

**Tip:**

When logged as a patient, the report will only be accessible if permitted by the radiology department.


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# Overview




| Number | Description |
|---|---|
| 1 | The report icon. Click on it to open the report display. |
| 2 | The report window. |
| 3 | The status of the report. The possible report statuses are: **No report**, **Draft report**, **Preliminary report**, **Validated report**, **Validated addendum**. |
| 4 | **Important!**<br>A radiology department can opt to apply a delay of x days before the report is made accessible to the patient.<br>As long as this delay hasn't expired, a message will be displayed to notify that the report is not available to the patient.<br>When logged on with a doctor's account it is displayed at the bottom of the report when the report will become available to the patient (round up).<br>Hover over the message to display the exact time and date when the report will become available to the patient. |


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| Number | Description |
|---|---|
| 5 | Switch to full screen, zoom, copy to clipboard, print the report or create a new text block. |
| 6 | Click to create or edit the report. |

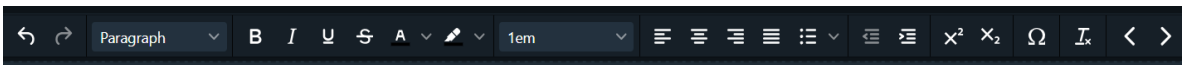
**Note:**

If the report was sent in PDF format, you cannot edit it, but zoom, print, download etc. by using the buttons in the top toolbar.

## Creating and/or editing a report

1. To create or edit a report, respectively, click the pencil icon.

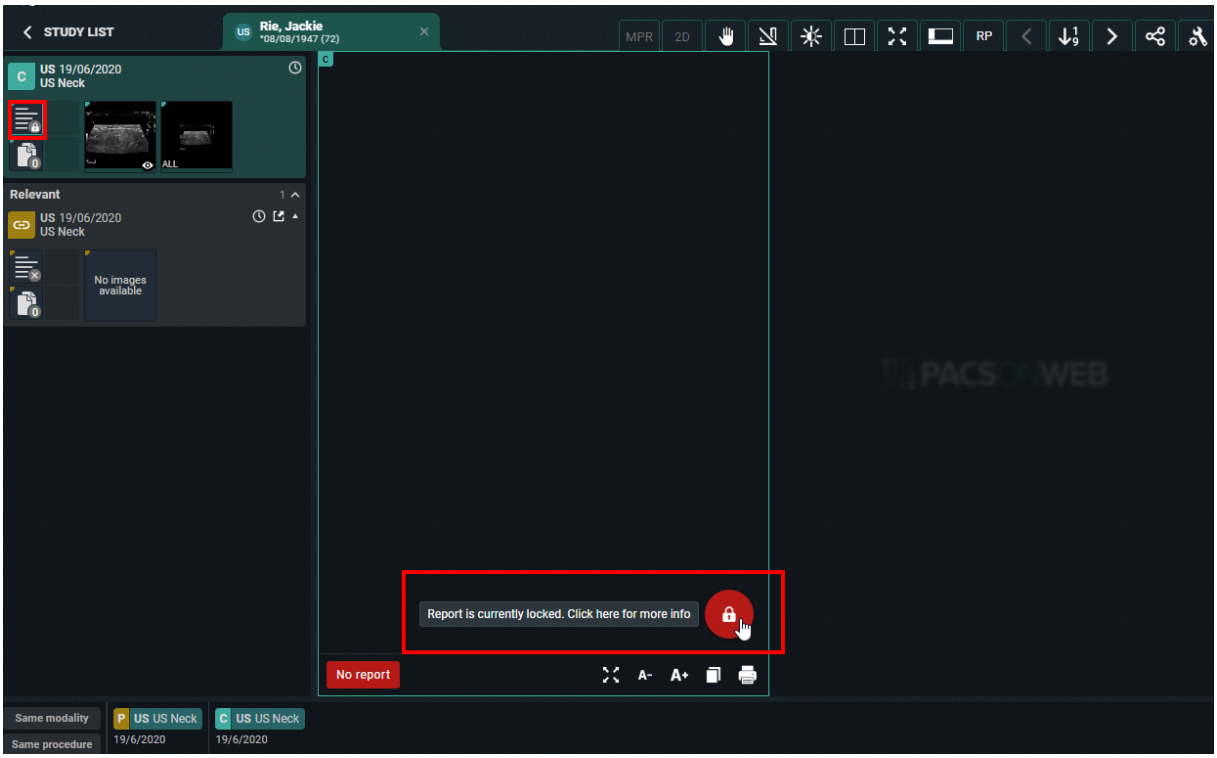
   If the rich reporting setting is enabled for you, a comprehensive text editor becomes available.




2. Once a report has been set to edit mode, it will be locked for any concurrent users to prevent two persons working on the same report at the same time. This is indicated by a lock icon in the series picker and the report window.

   If you click on the lock icon further information on who is editing the report at the time will be displayed.


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3. Once the report has been completed, it should be verified and saved from the browser window. Depending on your role, permissions and radiology department, you have different options of saving the report or sending it out for correction. For further questions, please contact your internal DeepUnity PACSonWEB admin or DH Healthcare GmbH.

| Saving option | Action | Role |
|---|---|---|
| **Save** | Saves the report without changing its status. | Transcriptionist |
| **Send for approval** | Sends the report to the radiologist and sets the study status to **To validate**. | Transcriptionist |
| **Save draft** | Creates a draft version that can be edited at a later point in time. If a draft report is edited and cleared, it will be marked as **No report**. | Resident/ Supervisor |


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| Saving option | Action | Role |
|---|---|---|
| | **Important!**<br>A draft report will only be visible for users that can edit reports; not for users that have read-only access to the exam. | |
| **Save preliminary** | Creates a preliminary version that can be edited at a later point in time. Once a report has been saved as preliminary, it is not possible to revert it back to **Draft report** or **No report**. | Resident/ Supervisor |
| **Send for review** | Assigns the report to a supervisor for review and sets the study status to **Pending second validation**. | Resident/ Supervisor |
| **Send for correction** | Sets the study status to **Pending report correction** so a transcriptionist can work on it. | Resident/ Supervisor |
| **Back to author** | Sends the report back to the resident and sets the study status to **To validate**. | Supervisor |
| **Save and validate** | Validates the report. Once a report has been saved as validated, it is not possible to revert it back to **Draft report** or **No report**. Depending on the advanced configuration for your radiology department, it may not be possible to modify a report that has been marked validated. | Resident/ Supervisor |

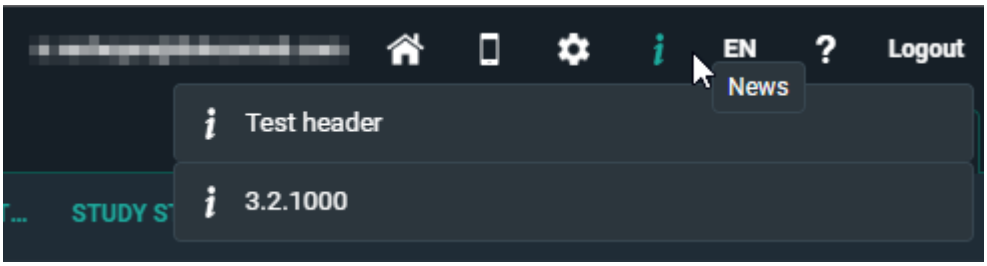

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# Notifications within DeepUnity PACSonWEB

7

General notifications regarding DeepUnity PACSonWEB are indicated via the information icon i at the top right of each page.

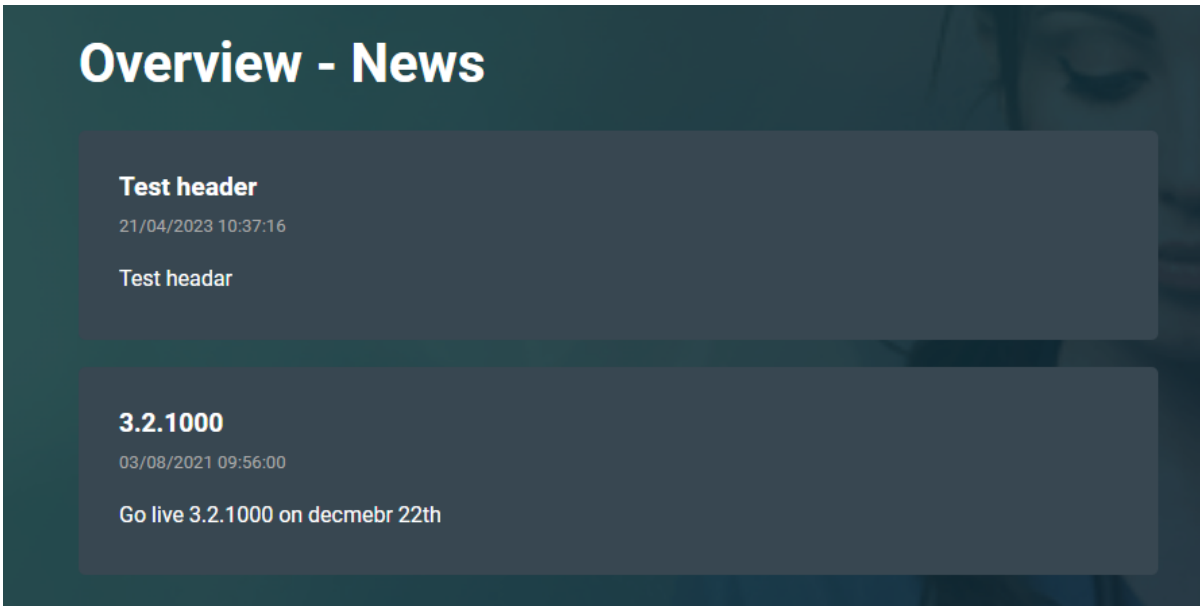
- The information icon displays the number of unread notifications in red 
  - After viewing notifications, the information icon is still available but no notification is displayed.
- To display the notifications in a drop-down list, hover over the icon.




  - Click on a notification from the drop-down list to view a separate page with all available notifications.


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# DU PACSonWEB mobile app

8

The DU PACSonWEB mobile app comprises two functionalities:

- **Authenticator**: Use this app for two-factor authentication when logging into DeepUnity PACSonWEB.
- **Home Reading**: Create medical reports outside of the hospital.

To download and install the app on your mobile device:

1. Go to your app store (Apple Store or Google Play Store).
2. Search for **DU PACSonWEB**.
3. Click **Install**.

**Note:**

Requirements: iOS 10 or higher; Android 5.0 or higher.

## 8.1 Authenticator

The DeepUnity PACSonWEB mobile app offers a secure and user-friendly way to secure your account.

- The app replaces the use of one-time passwords, sent by mail or text message, by a notification on the app and allows to confirm your login attempt by a single tap in the app.
- You can link up to 5 different devices to your account from which you can confirm your login attempt.

### See also

Linking your mobile device to DeepUnity PACSonWEB (Page 291)

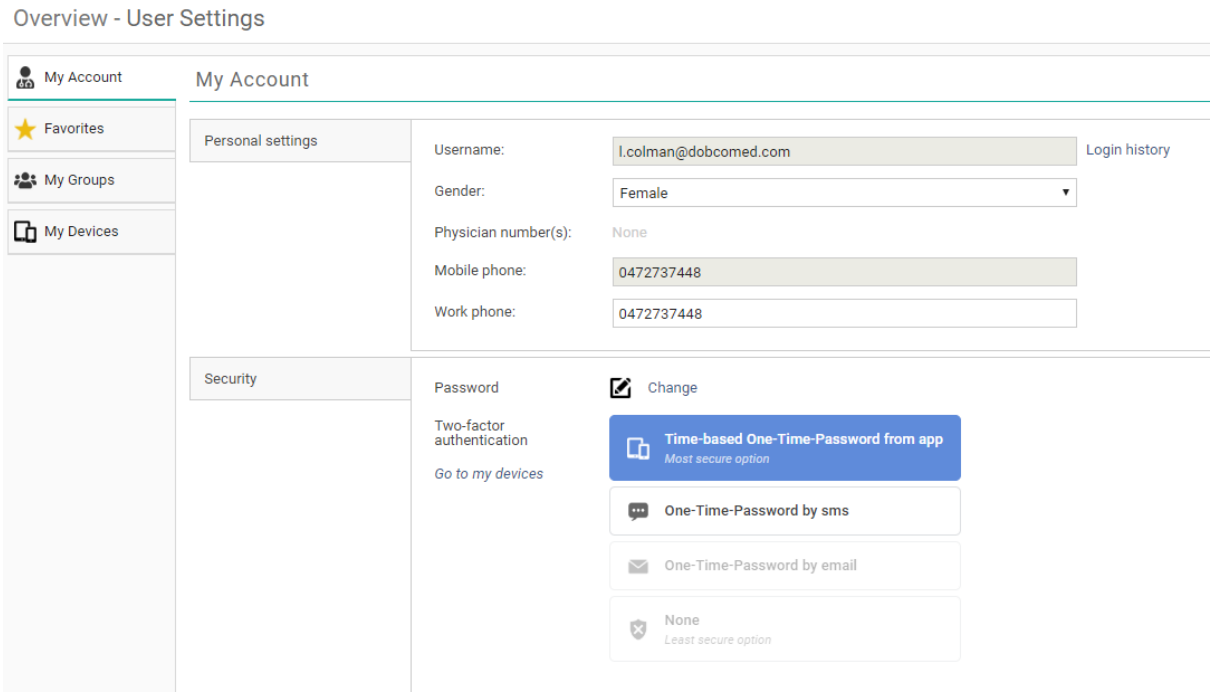

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Logging in using the DU PACSonWEB mobile app (Page 292)
Unlinking your mobile device (Page 292)

## 8.1.1 Linking your mobile device to DeepUnity PACSonWEB

To link your mobile device to DeepUnity PACSonWEB for two-factor authentication, you can either use the DU PACSonWEB mobile app or a third-party authenticator app.




1. Login to DeepUnity PACSonWEB.
2. Navigate to **User Settings** > **My Account** > **Security**.
3. Select the option **Time-based one-time password from app**.
4. Click **CHANGE TWO-FACTOR AUTHENTICATION TYPE**.

   A pop-up window opens displaying a QR code to link your device.
5. Open your authenticator app on your mobile device and scan the QR code.
   - For the DeepUnity PACSonWEB mobile app, confirm your linked device by tapping **Login** on your mobile device.
   - For third-party authenticator apps, confirm your linked device by entering the numeric code from the app.

After successfully linking your device, it will be listed as a trusted device in the **My devices** tab in your DeepUnity PACSonWEB user settings.

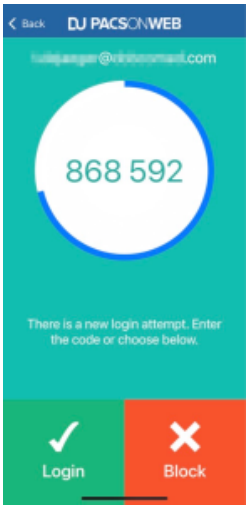

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## 8.1.2 Logging in using the DU PACSonWEB mobile app

If your configured 2FA method is **Time-based one-time password from app**, please follow these steps:

1. Log in to DeepUnity PACSonWEB with your username and password.

   A notification to confirm or deny your login attempt will be displayed on all linked devices on which you have installed the DeepUnity PACSonWEB mobile app.




2. Complete your login by tapping **Login** from the app or enter the code that is displayed in the **Time-based one-time password** field.

   If you have no internet connection on your mobile device or you are using a third-party authenticator app, you must enter the numeric code from the app and click **Continue** in your browser to complete your login.

## 8.1.3 Unlinking your mobile device

You can unlink your device in two different ways:

1. In DeepUnity PACSonWEB:
   a. Go to **User Settings** > **My devices**.
   b. Click the X icon (**Remove**) next to the device you want to unlink.
2. In your authenticator app:
   a. Tap the hamburger menu ≡ .
   b. Select **Unpair**.


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## 8.2 Home Reading

The Home Reading feature offers a simple way of creating (preliminary) study reports remotely, beyond the confines of the hospital.

You can link your smartphone to a DeepUnity PACSonWEB session and dictate the report through the DU PACSonWEB mobile app with integrated speech recognition, while examining the images on a computer or tablet. The dictated text on the DU PACSonWEB mobile app is synchronized in real time with the report on the study page in the browser session.

**Important!**

The app can be used to dictate reports within DeepUnity PACSonWEB but is not a medical device in itself and therefore has no CE marking.

This is an optional feature within DeepUnity PACSonWEB. Please contact DH Healthcare GmbH for more information.

### 8.2.1 Pairing your device for Home Reading

In order to create a report through Home Reading, you need to establish a link between the DeepUnity PACSonWEB browser session on your computer and the DU PACSonWEB mobile app on your mobile device.

1. Log in to DeepUnity PACSonWEB on your computer with your account.

   If Home Reading has been enabled for your DeepUnity PACSonWEB account, the Home Reading icon  will be available from the top toolbar.

2. Click the icon to display a QR code for pairing your mobile device.
3. On your mobile device, open the DU PACSonWEB mobile app, select **HOME READING**, and scan the QR code.

   The app will send a pairing request with an arbitrary code to the browser. A notification will pop up in your browser, displaying the device that is used (type, operating system, and name) and the code from the pairing request.
4. If the code displayed in your browser matches the code shown in the app, click **Accept** within 30 seconds.
   - If the pairing was declined or was not accepted in time, an error message will be displayed on your mobile device.
   - If the paring was successful, your mobile device will be displayed as connected in the browser as well as in the app.

The pairing status is indicated by the color of the Home Reading icon.

- White: The browser is not paired with a mobile device.


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- Orange: The browser has been paired with a mobile device but the device is not available.
- Green: The browser is paired with a mobile device and can be used for dictating reports.

**Note:**

By default, the pairing remains valid for 40 days. After this period, the pairing needs to be set up again.

### 8.2.2 Creating a report through Home Reading

Once your mobile device is paired with the browser, you can use the DU PACSonWEB mobile app to start reporting.

**Tip:**

If you want to change the language for reporting, tap the language in the top right corner of the app.

1. In the browser, open the study that you want to work on.

   For verification purposes, the patient's name and date of birth are displayed in the app on your mobile device.
2. Tap the microphone icon in the DU PACSonWEB mobile app or in the browser to activate speech recognition.

   The microphone icon will turn red once speech recognition has been activated.

   **Tip:**

   If the report window is not yet displayed in the browser, click on **Show report** in the app or open the report in the browser from the series picker.
3. Start dictating.

   The recognized text will appear in both the DU PACSonWEB mobile app and the browser window.

   **Important!**

   If the microphone does not detect any speech for 20 seconds, speech recognition will be deactivated. This is indicated by a system sound.
4. Once you have completed the report, verify and save it in the browser window.


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A report can be saved as a draft, preliminary report, or validated report.

**Note:**

In case the RIS from the hospital supports incoming ORU, a message can be sent from DeepUnity PACSonWEB to update the internal information systems. Depending on the desired configuration, the message will be sent when the associated report status is set to: draft, preliminary, or validated.

**Caution:**

The recognized text is not always 100% correct. It is the responsibility of the radiologist to verify the correctness of the report before validation.

### See also

Report display (Page 283)

## 8.2.3 Unpairing your device from the browser

It is necessary to unpair your mobile device from your browser session if you want to:

- stop creating reports;
- pair another device with your current browser; or
- pair your current device with another browser.

There are two ways to unpair your mobile device:

1. In the DU PACSonWEB mobile app, tap on the three dots in the top right corner and select **Unpair browser**.
2. In the browser, click on the Home Reading icon and select **Unpair**.

A notification will pop up on your mobile device. Tap **YES** to confirm that you want to unpair the device.


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# DeepUnity PACSonWEB worklist

9

DeepUnity PACSonWEB offers the possibility to use worklists for optimal workflow support when dictating reports.

Users who have the required access rights, can access the work list screen by clicking the "Worklist" tab next to the study list.




## 9.1 Worklist configuration

### Predefined worklists

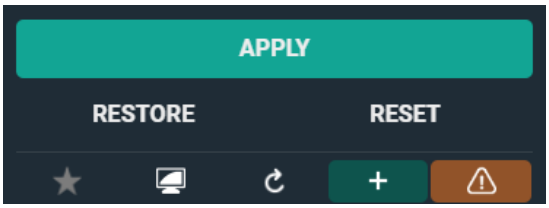
For every source or the group of sources (for Cross-Source Worklists) there are 4 predefined worklists:

- **All for source**: This worklist contains all studies for the source (or group).
- **All my reviews**: This worklist contains all studies on status **Pending second validation** where the Validating user is the current logged in user.
- **All my unread**: This worklist contains all unread studies for which the logged in user is marked as "Reading user".
- **All unread**: This worklist contains all unread studies for this source (or group).

Predefined worklists cannot be deleted or customized. If changes are made to a predefined worklist, an orange triangle icon wil appear at the bottom of the page to indicate that changes have been made to the default of the worklist.


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## Saving as a new worklist

To save changes made to a predefined worklist from the drop-down menu in the filters panel.

1. Select one of the predefined worklists and add extra filters to create the desired worklist.
2. Enter criteria into the filters field according to the changes you want to configure in the new worklist.
   a. For example, set a specific modality.
3. Click the plus icon + to **save as new worklist**.
4. In the **Create new worklist** dialog, provide the following information:
   a. **Name**: The name of your worklist.
   b. **Description**: Description for the worklist.
   c. **Group**: Saves the worklist on a user or group level.
5. Click **SAVE**.

The new worklist is saved in the worklist drop-down, along with the predefined worklists.

You can make changes to the saved worklist by updating the filter fields according to your desired changes and clicking **Save worklist**.

**Important!**

To save the worklist for a group, the user must be a group admin.

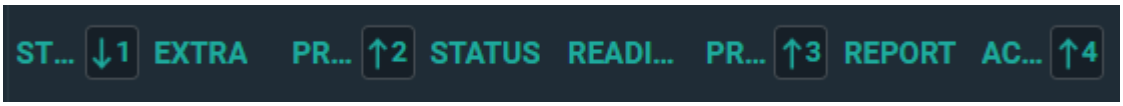
# Filtering and sorting studies in the worklist

Filters make it easier to find an order in your worklist. To improve your search results, enter the desired criteria into the filter fields.

- Study date can be used as a relative date/time period.
  - This means, for example, when selecting **Last 7 days**, this will be automatically updated the next day.
- By default, the orders in the worklist are sorted first by priority and second by study date (oldest to newest).


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- To use sorting filters, click the description of the column.
- To use more than one sorting hold the **SHIFT** key and select the desired column. The numbers will display the sorting ranking.




## Customization of columns and filters

The predefined worklists have a default set of columns and filters. Column and filter settings can be configured according to personal preferences.

To change the settings:

1. Click on the column settings or filter settings icon.
2. Select or deselect the fields you want to display or hide.

> **Note:**
>
> Columns and filters are displayed in the worklist in the order in which they appear in the settings list. To change the order in which they appear in the worklist, select a field and drag it to a new position in the settings list.

3. Click **APPLY**.

The fields available in the filter and column settings are listed in the table below.

| Filter settings fields | Column settings fields |
|---|---|
| • Accession number<br>• Anomalies<br>• Contains labels<br>• Contains procedures<br>• Contains procedure code<br>• Date of birth<br>• Examination room<br>• Exclude procedures<br>• Exclude procedure code<br>• Excluded labels<br>• External Procedure ID | • Order Number<br>• Patient<br>  ○ Date of birth<br>  ○ First name<br>  ○ First Name at Birth<br>  ○ Last name<br>  ○ Last Name at Birth<br>  ○ National Number<br>  ○ Patient ID<br>  ○ Place of birth<br>• Performing department |


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| Filter settings fields | Column settings fields |
|---|---|
| • First name<br>• First Name at Birth<br>• Study created on<br>• Last name<br>• Last Name at Birth<br>• Modality<br>• National number<br>• Number of images higher than<br>• Order Number<br>• Patient ID<br>• Performing department<br>• Place of birth<br>• Priority<br>• Reading user<br>• Report edited<br>• Report edited by<br>• Requesting department<br>• Requesting physician<br>• Site<br>• Status<br>• Study date<br>• Validating user<br>• AI Status<br>• Findings<br>• Speciality<br>• Report status | • Requesting department<br>• Requesting Physician<br>• Site<br>• Select<br>• Studies<br>  ○ Accession number<br>  ○ Examination room<br>  ○ External Procedure ID<br>  ○ Extra<br>  ○ Images<br>  ○ Labels<br>  ○ Study created on<br>  ○ Priority<br>  ○ Procedures<br>  ○ Reading user<br>  ○ Report<br>  ○ Status<br>  ○ Study date<br>  ○ Validating user<br>  ○ AI Status<br>  ○ Findings<br>  ○ Source<br>  ○ Speciality<br>  ○ SLA Deadline |

The icon, displayed in the **Report** column, differs according to the report status:

-  Auto saved report
-  Draft report


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- Preliminary report
- Validated report
- Validated addendum report

The **Extra** column can contain icons for the following statuses:

- Anomalies
- Messages (read)
- Messages (unread)
- Filtered study
- Canceled study
- Locked
- Reserved

**Note:**

A worklist can also be configured based on the filter **Anomalies**. However, the Anomalies filter is only accessible for source admins.

## Deleting a worklist



To delete a worklist:

1. Click on the × icon.
2. In the dialog, click **DELETE**.

**Important!**

Deleting a worklist cannot be undone.


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## Default worklist



To make a worklist your default worklist, click on the ★ star icon.

When opening DU POW, the worklist marked as default will be opened.

## Dashboard

The Dashboard contains shortcuts of your personal selection of worklists. The purpose of these shortcuts is to have an overview of the counts in the worklist without the need to open the worklist.

The count refreshes automatically.

### Adding a worklist to your dashboard



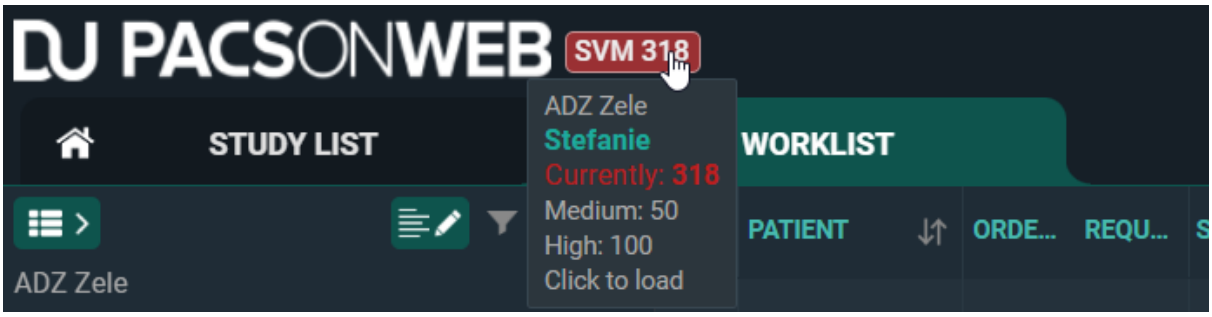
To add a worklist to your dashboard:

1. Select the worklist you want to add to your dashboard.
2. Click on the  dashboard icon.
3. In the following dialog:
   a. Enter an abbreviation for the shortcut (limited to 3 characters).
   a. Enter the medium and high threshold. These numbers will determine in which color the shortcut icon will be shown: grey, orange or red.
   b. Click **Add worklist to dashboard**.

The shortcut icon will be displayed in the dashboard next to the DeepUnity PACSonWEB logo.

Clicking on this icon will open the worklist.


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## Editing/removing a shortcut from the dashboard

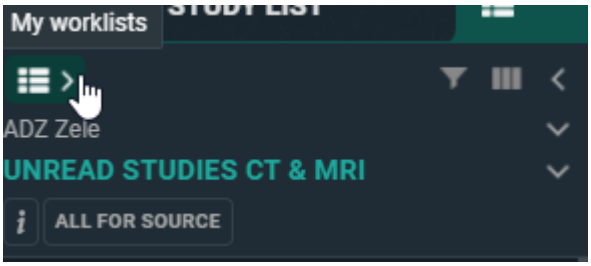
You can edit or remove a worklist from your dashboard by opening the related worklist, either by selecting it from your list of worklists or by clicking the related icon in the dashboard.

To open the configuration window:

1. Click on the dashboard icon  .

2. From this window you have three options:
   - Click **CANCEL** to cancel and close the dialog again.
   - Edit and click **SAVE** to save the changes to your settings.
   - Click **REMOVE** to remove the shortcut from the dashboard.

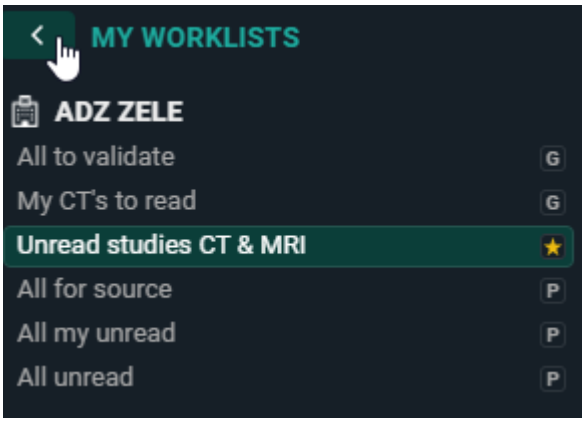
# Overview Worklists




You can see an overview of all worklists available to you by clicking the **My Worklists** icon  at the top left of the filters panel.

- Predefined worklists are indicated with a 'P'.
- Worklists with a 'G' are available to a group you belong to.
- The default worklist is indicated with a yellow star icon.


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## 9.1.1 Specialty

A specialty is a specific area of expertise. Teleradiology providers often assign studies to their team of radiologists based on their specialties.

### Filtering by Specialty

You can filter the worklist for studies by **specialty**. Each specialty has a code within the application. The list below indicates the predefined specialties available in the worklist filter.

| Specialty Code | Specialty Name |
|---|---|
| ABDO | Abdominal Radiology |
| BQ | Biomarkers/Quantitative Imaging |
| BODY | Body Imaging |
| BREAST | Breast Imaging |
| CHEST | Chest/Thoracic Radiology |
| CTH | Cardiothoracic Radiology |
| CVA | Cardiovascular Radiology |
| ER | Emergency Radiology (Trauma) |
| GI | Gastrointestinal Radiology |


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| Specialty Code | Specialty Name |
|---|---|
| GEN | General Radiology |
| GU | Genito-urinary Radiology |
| HN | Head and neck Radiology |
| MSK | MSK Radiology (Musculoskeletal) (Orthopaedic) |
| NEURO | Neuroradiology |
| NUC | Nuclear Medicine/Radiology |
| OB | OB-Gyn radiology |
| OT | Other |
| PEADS | Pediatric Radiology |
| VAIR | Vascular and Interventional Radiology |
| ONCO | (Radiation) Oncology |

### Linking a specialty to a study

Specialties can only be linked via incoming ORM. Users cannot manually link a specialty to a study within the application.

- You can link multiple specialties to a study.
- In the **specialty** column of the worklist overview, only the specialty code of the linked study (e.g., GEN) is displayed, not the specialty name (e.g., General Radiology).

### See also

Worklist configuration (Page 296)

## 9.1.2 SLA Deadline

Service Level Agreement Deadline


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In medical imaging, an **SLA (Service Level Agreement) reporting deadline** refers to the agreed timeframe within which a radiology report (e.g., X-ray, CT, MRI) must be completed and delivered after the imaging study is performed.

By setting clear expectations for when imaging results must be available to clinicians, SLA reporting deadlines ensure timely diagnosis and treatment. These deadlines help maintain patient safety, improve clinical workflow and uphold service quality standards between radiology departments and healthcare providers.

## Setting reporting deadlines

Similar to **Specialties**, reporting deadlines can be configured via ORM/ORU messages using a specific property. Once a deadline has been set by a designated trigger, it will only be modified if an ORM/ORU update is received with an empty **SLADeadlineOffset** property. If the offset value is changed after the deadline has already been set in the application, the deadline will not be updated.

### Triggers for setting deadlines

The following triggers can be used to set reporting deadlines:

- **Study status changed**
- **Label added**

SLA Deadlines can also be configured manually for the study via **Study administration** > **Study information**.

## Worklist integration

In the worklist, you can add an additional column, **SLA Deadline**. This column provides a clear visual indication of which studies have a deadline, how much time remains, or if the deadline has passed.

By default, this column is not displayed and no sorting is applied. Once added via the column settings, by clicking on the column header, you can sort the column by urgency, from most urgent to least urgent, or least urgent to most urgent.

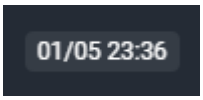
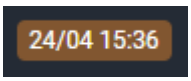
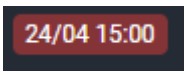
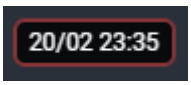
### SLA Deadline color codes

The SLA Deadline column uses a color coding system to indicate the level of urgency of the deadline, based on the amount of time remaining until the SLA Deadline is due.

**Color codes**

| Status | Color Code | Description |
|---|---|---|
| *Not yet due* | Grey background | The SLA Deadline is not yet due and the |


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| Status | Color Code | Description |
|---|---|---|
| |   | remaining time does not have the status *Warning* (orange) or *Urgent* (red). |
| *Warning* | Orange   | The time remaining for the SLA Deadline is less than or equal to the time (in minutes) configured in the setting **WarningSLADeadlineTime**. |
| *Urgent* | Red   | The time remaining for the SLA Deadline is less than or equal to the time (in minutes) configured by the admin in the setting **UrgentDeadlineTime**. |
| *Overdue* | Black background with red border   | The SLA Deadline is overdue. |

**Note:**

The time frame for the *Warning* and *Urgent* status of an SLA Deadline is configured by the Global Administrator (in the source detail settings).

In the SLA Deadline column, hovering over the deadline displays a tooltip which indicates the time remaining until the deadline is due or in the case of an overdue SLA Deadline, how overdue it is, followed by the date and time of the deadline. The remaining/overdue time may be displayed in months, minutes, days, or hours.

- {x} month(s) (dd/mm/yyyy hh:mm)
- {x} days (dd/mm/yyyy hh:mm)
- about {x} hours (dd/mm/yyyy hh:mm)
- {x} minutes (dd/mm/yyyy hh:mm)


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## See also

Administration (Page 218)
Specialty (Page 303)
Worklist configuration (Page 296)

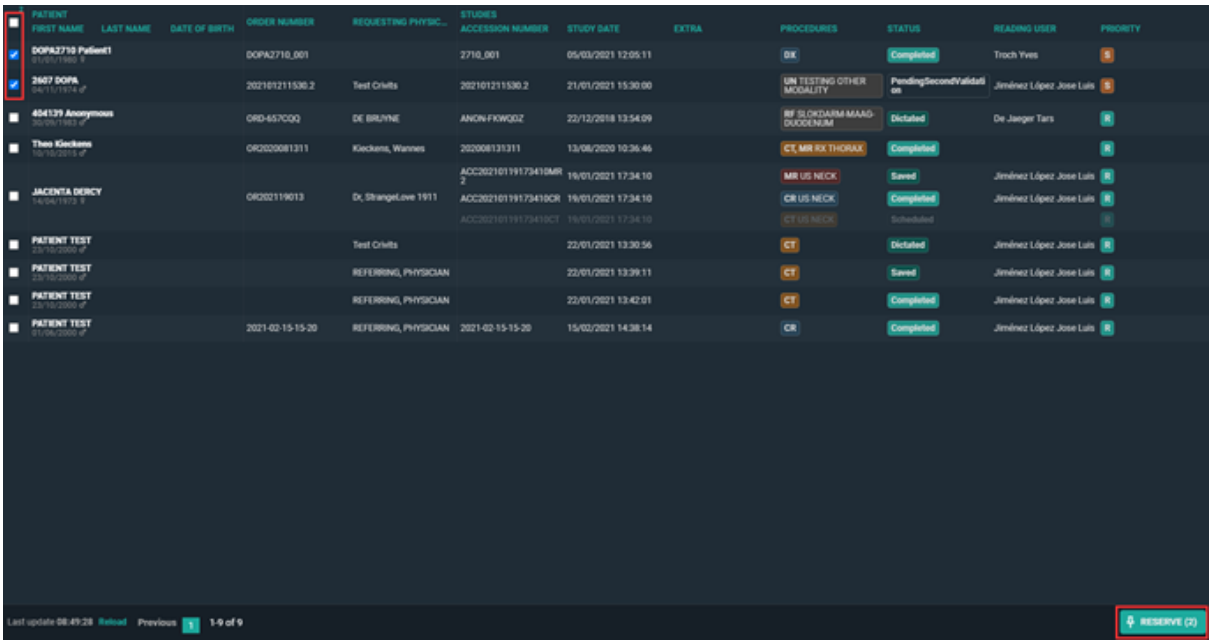
# 9.2 Worklist page functions

## 1. Study reservation

When multiple radiologists are working within the same worklist, it is useful to reserve studies before reporting them to make it clear to all radiologists who is going to make the report for which study.

Study reservations can be made by selecting one or more studies with the select box and clicking the "Reserve" button in the right bottom corner.

By default the reservation period is set to 90 minutes, unless a different value has been registered for the related source. After that the reservation expires.

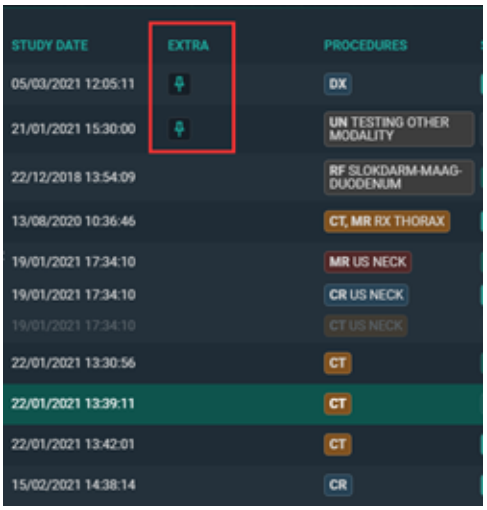


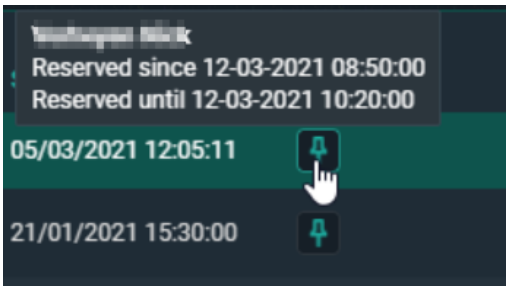

If a study has been reserved, this will be indicated with a pin icon in the **Extra** column.

When hovering over the pin icon you can see the details on the reservation.


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Another user who is working in the same worklist will see the same icon in a red color to indicate that the study is reserved.



If a user wants to reserve a study which is already reserved by another user, he/she is prompted with the following warning:

**Attention** One or more studies is reserved by another user, do you wish to take over the reservation? **YES**, **CLOSE**

## 2. Unreserve study

To unreserve a study the same steps have to be followed. Select the reserved studies with the checkbox which you want to unreserve.

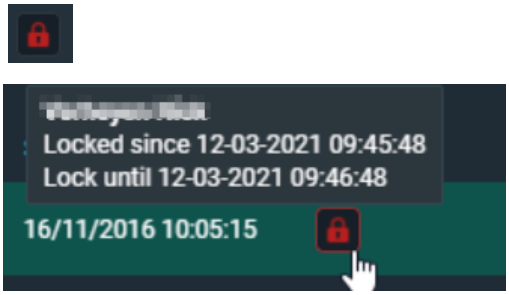
Click on **clear reservations** in the right bottom corner.

## 3. Study locking

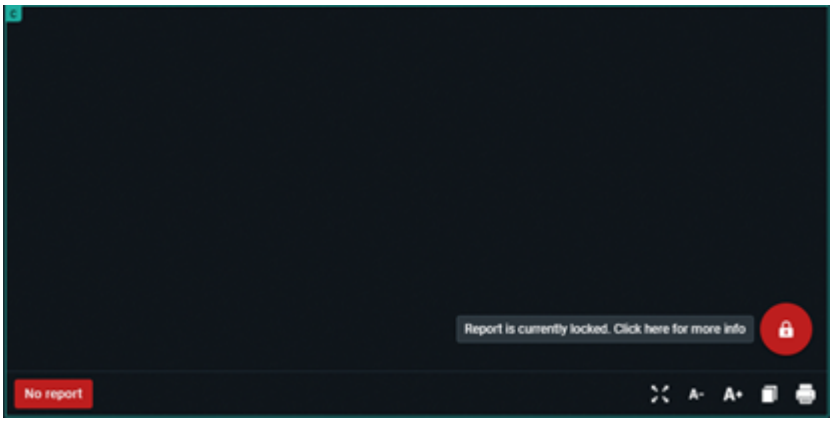
When a radiologist starts making a report this is indicated for other users with a lock icon in the **Extra** column.


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When hovering over the study lock icon, it is indicated who is dictating the report. The report is locked as long as it is in edit mode. The lock until time is updated every minute.




The user can open the study to look at the images but it will not be possible put the report in edit mode.




Once the report has been saved or cancelled, other users will be able to edit the report again.

## 4. Change study priority

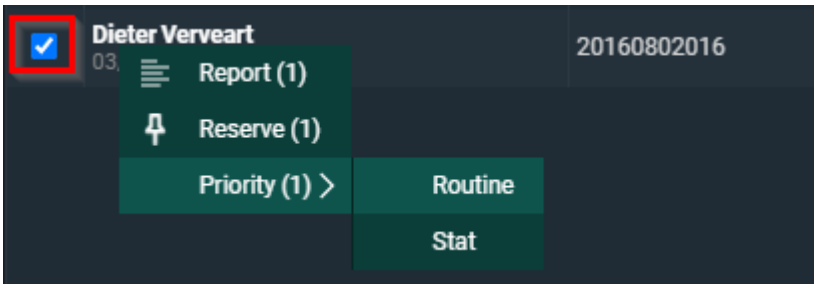
The study priority can be changed in the worklist overview.

Select the study by ticking the checkbox, right mouse click on the study gives you 3 options. One of them is changing the priority to Stat or Routine.

**Note:**

This functionality requires a permission that needs to be active for the user.


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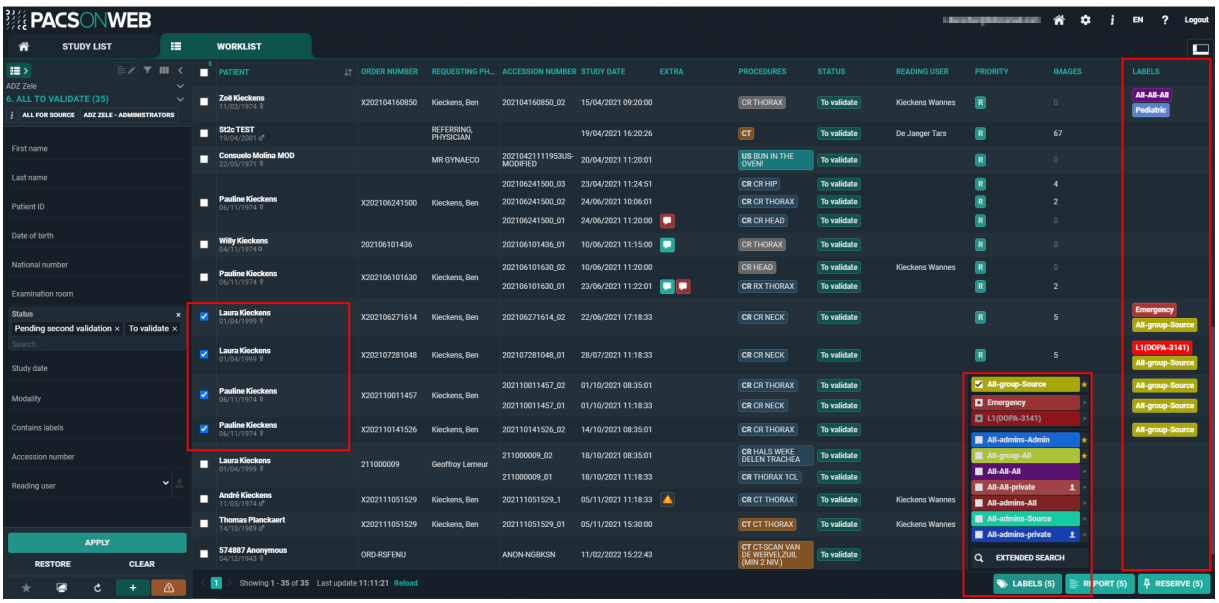

## 5. Labels

From the worklist page you have the possibility to link labels to studies in a similar way as can be done from the study list.

The full explanation on how to manage labels can be found here: Adding labels to studies (Page 168).

The linked labels are displayed in the column "Labels" if this column has been made visible for your overview.

If not, how to make it visible, is explained here: Worklist configuration (Page 296).




## 9.3 Reading workflow

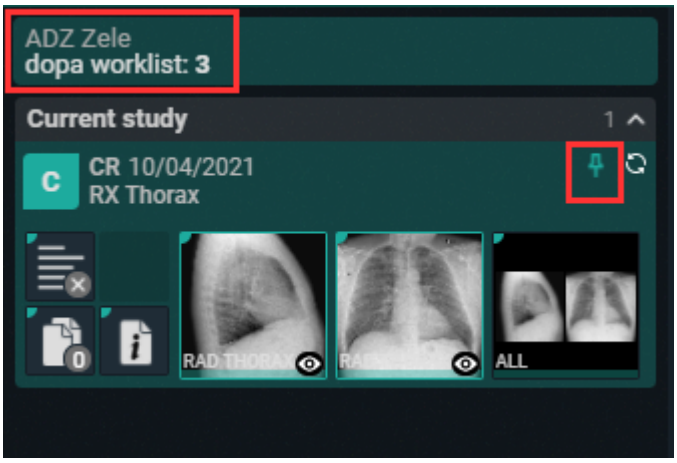
## Opening a study from a worklist

When a study is opened from a worklist, the source of the study is indicated.

The name of the worklist and the number of studies in that list are displayed.

If the study is reserved, this will also be indicated by the pin icon.


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## Opening studies from selection

The selection boxes for selecting studies can be displayed at order or study level.

**Note:**

The location of the selection column is set in the management page. To make changes, please contact the service desk.

- **Order level selection:** The selection column is displayed as the leftmost column.
- **Study level selection:** The selection column is displayed to the left of the procedures column.

You can select a specific study by clicking on the procedure description label in the **procedures** column. This can be useful if you want to open a specific study from an order with multiple studies.

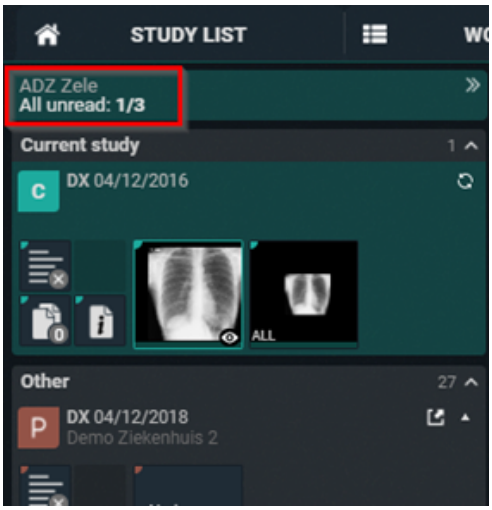
## Bulk reporting

To create reports in bulk, select the desired studies by checking the corresponding checkboxes.

Click on the **REPORT** button at the bottom right or right click to start reporting on the selected studies.

The total number of selected studies is displayed in the series picker.


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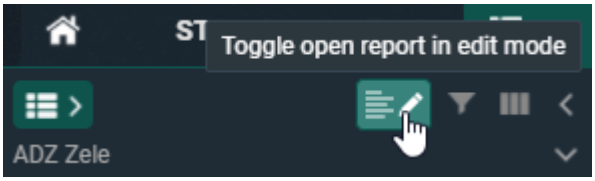

When the last study of the selected studies is reported, you are redirected back to the worklist page.

## Creating a report and study status update

When opening a study, you can choose to automatically open the report in edit mode or manually activate edit mode. This option does not apply to validated reports, which must be edited manually.

### Automatically open a report in edit mode

To automatically open reports in edit mode, click on the following icon . The icon will be highlighted when enabled.



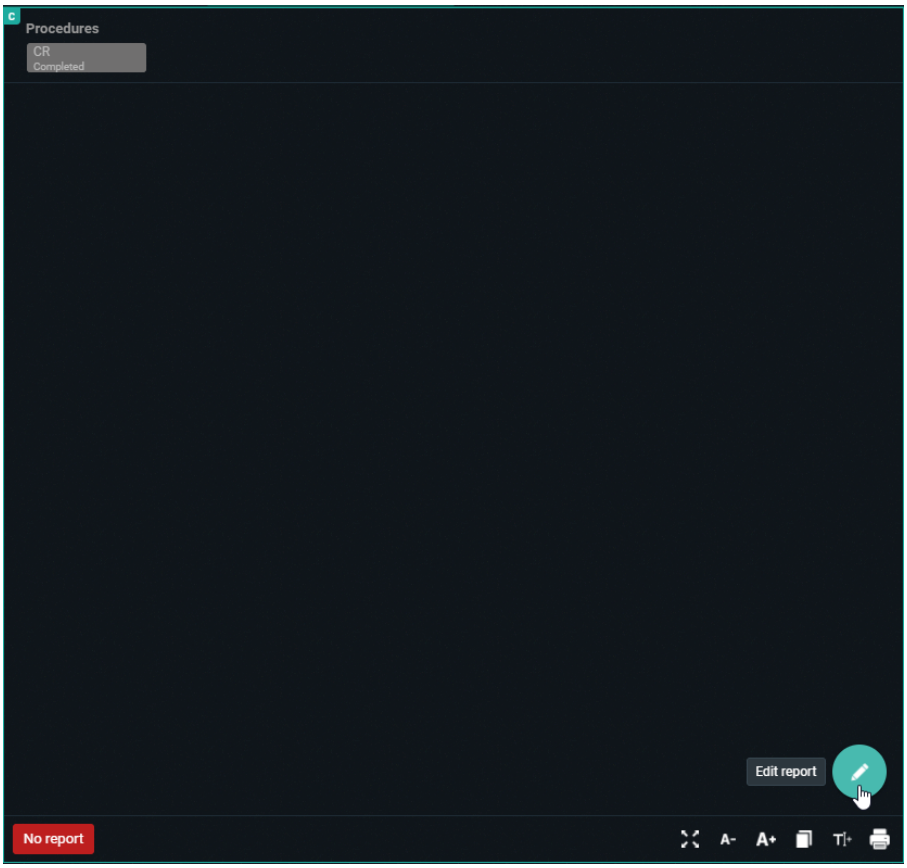

**Important!**

To keep this option enabled, click **save worklist** or **save as new worklist** in the filter panel.

### Manually open a report in edit mode

Click on **Edit report** (pencil icon) or use the shortcut F2 to directly activate the SpeechMike in record mode.


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You can now start reporting.

## Text blocks

Text blocks can help to speed up the workflow. These are preconfigured blocks of text that can be inserted and modified afterwards.

See Text blocks (Page 120) for more information on how to create and insert text blocks.

## Report hyperlinks

You can create hyperlinks from images and add them to the report text.

When Rich Reporting is used, the hyperlink will be clickable. If you are using plain text or the report is sent out via HL7 or printed, the hyperlink will be converted to plain text.

### Adding a hyperlink to a report

After first selecting the image in the viewport, adding an image hyperlink to the report can be done in three ways.

- Right-click and select the option **Add image to report**,


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- CTRL + drag & drop the image, or
- CTRL + C *(to copy the image)* and CTRL + V *(to paste the image)*.

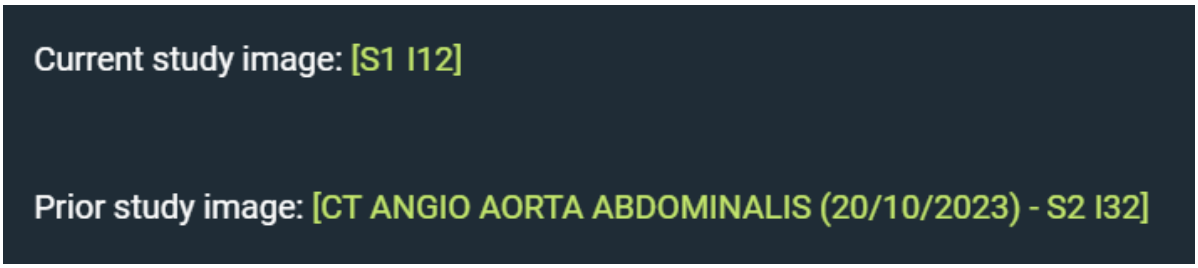
All three methods will add the hyperlink to the image at the cursor position.

## Display format of hyperlinks

The display format of hyperlinks is not configurable and the format differs for Current study and Prior study. For each format, *S = Series and I = Image*

**Current study:**[S+SeriesNumber I+ImageNumber]

**Prior study:**[Procedure name (study date) - S+SeriesNumber I+ImageNumber]




## Navigating to a linked image

To navigate to the linked image, simply click on the hyperlink within an editable or non-editable report while working within DeepUnity PACSonWEB.

If the hyperlink was converted to plain text, you will need to manually navigate to the image.

Clicking on the hyperlink will navigate you to the correct image in any of the available image viewports.

## Image display location

- If an image viewport was active previously, the last active image viewport will be used.
- If no image viewport was active previously, the first available viewport will be used.
- If the previous active viewport is no longer visible, the image will be displayed in the 1st available non-report viewport
- If the report is full screen, the image will be opened in the report viewport as it is the only viewport available.

## Report references an unavailable image

If an image, series or study referenced in a report has since been removed, a dialog box will appear when the hyperlink is clicked, warning you that the image could not be loaded.

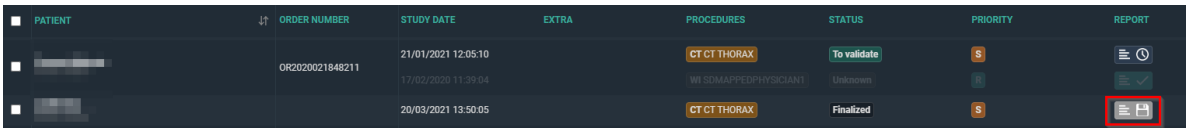

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**For example:** If the series is no longer found in the study, the following message is displayed: **"This image could not be loaded because the series was not found."**

## Auto saved reports

The report is automatically saved every 30 seconds. This means that if the connection is lost for any reason, there will be an auto saved version of the report.

- Auto saved reports for a study are displayed in the worklist.
- The icon is only visible to the user who created the auto saved version of the report. Other users will not see the icon in their worklist.




### Opening a study with an auto saved report created by you

If you open an auto saved report that you created, a dialog is indicating a previous version of the report was recovered. You will have the option to:

- **Restore auto-save**: Opens the last auto saved version.
- **Start from previous saved version**: If a saved report (preliminary/draft) exists, this version will be used.

### Opening a study with an auto saved report created by another user

If you open a study where there is an auto saved report created by another user, a warning is displayed indicating that a previous version exists. You will have the option to:

- **Cancel:** The report is cancelled.
- **Continue and discard auto-save:** The auto-save will be deleted and a new report is started.

**Note:**

The warning displays the username of the user who created the report.

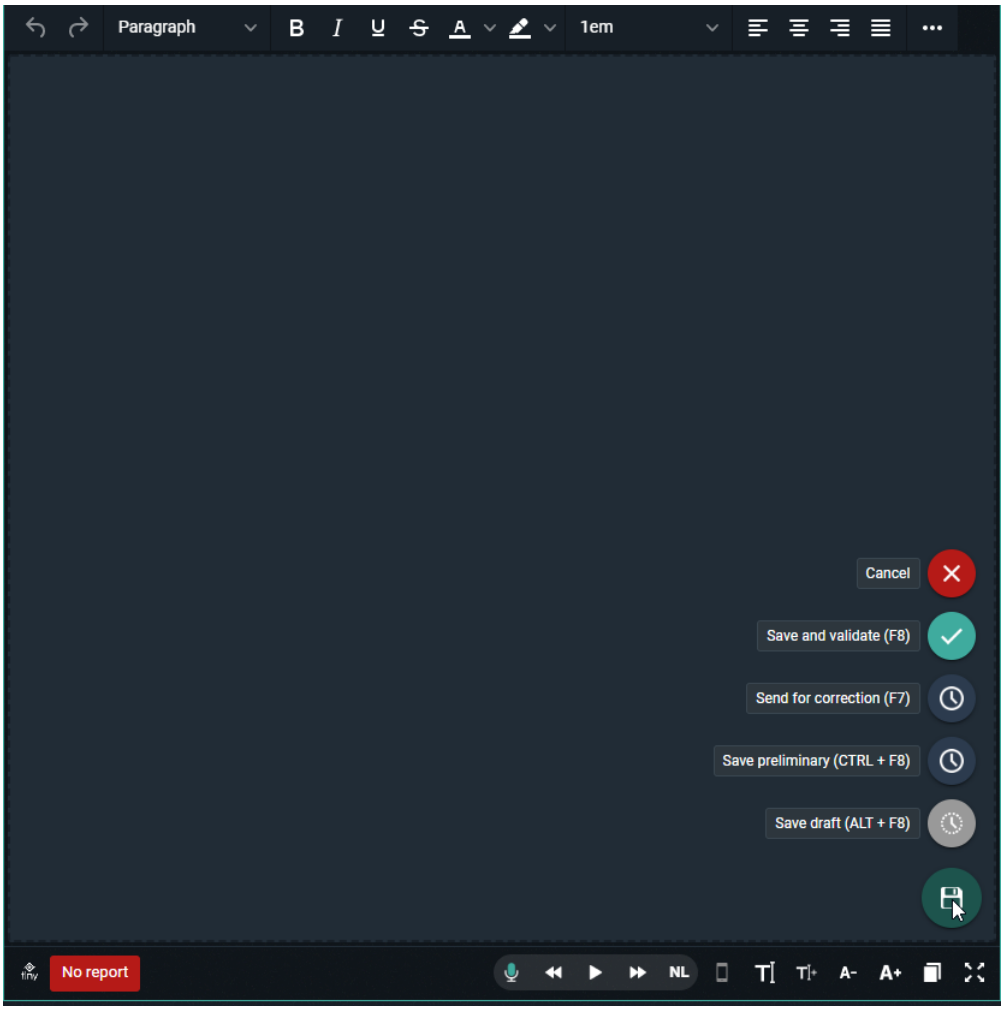
## Saving the report

When you are finished creating the report, there are several available actions.

The study status is updated according to the chosen action.


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| Action | Shortcut key | Study Status |
|---|---|---|
| **Save and validate** | F8 | Finalized |
| **Send for correction** | F7 | Pending report correction |
| **Save Preliminary** | CTRL + F8 | To validate |
| **Save draft** | ALT + F8 | Dictated |
| **Cancel** | n/a | No change in status |




The status is displayed in the **Status** column of the worklist.


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Depending on your preferences, one of the following actions will occur after saving a report:

- Return to worklist
- Move to next study (studies that are reserved or locked are skipped)
- Stay in current study

You can update your Preferences (Page 104) in the user settings, under the preferences tab.

**Note:**

This setting is only applied when opening studies from the worklist.

## Workflow icon

The Workflow menu is accessible from the top toolbar in the viewer through the icon **WF**.

| Action | Description |
|---|---|
| Skip | Skips the study (shortkey F9) |
| Change status | Changes the status of the study |


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| Action | Description |
|---|---|
| Change status and next | Changes the status of the study and moves to the next study |
| Change priority | Changes the priority of the study (permission required). |
| **The following options are only available when in report editing mode** | |
| Validate and next | Validates the report and moves to the next study |
| Save preliminary and next | Saves the report as preliminary and moves to the next study |
| Validate and return to list | Validates the report and returns to the worklist |
| Save preliminary and next | Saves the report as preliminary and moves to the next study |
| Save preliminary and return to list | Saves the report as preliminary and returns to the worklist |

**Note:**

The WF icon is only visible when opening the study from the worklist.

## See also

Preferences (Page 104)
Worklist configuration (Page 296)

## 9.3.1 Transcriptionist workflow

DeepUnity PACSonWEB supports a transcriptionist workflow, allowing a transcriptionist to verify and correct the registered report, based on the sound recording of the report.

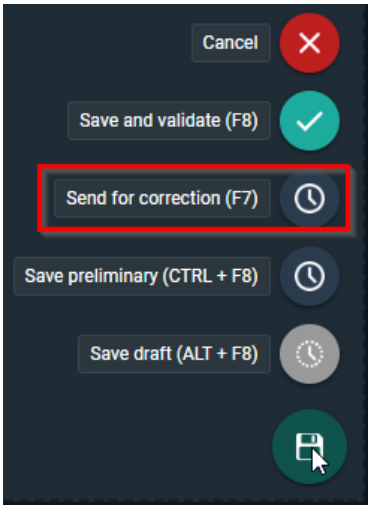
To listen to the audio of the report dictated by the radiologist RSDK speech needs to be enabled for the radiologist and the transcriptionist.


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Workflow:

When saving a report, the radiologist can start the transcription workflow by using the option "Send for correction".

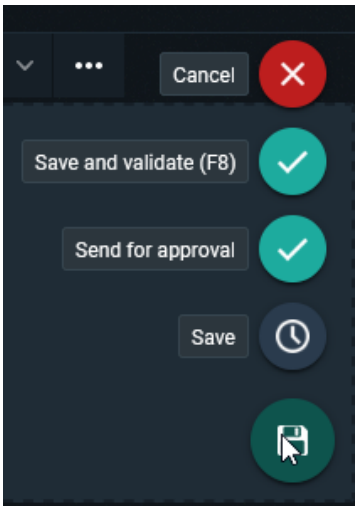
The study status will be set to "Pending report correction".




A transcriptionist can now open the study and listen to the audio of the report and correct any errors in the report.

The transcriptionist has the following options to save the report:

- Save and validate
- Send for approval
- Save




By clicking "Save and validate", the report is saved and validated on behalf of the radiologist. Study status is set to "Finalized".


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**Note:**

this requires an additional permission for the transcriptionist.

When using "Send for approval", the report is saved and sent back to the radiologist for validation. Study status is set to "To Validate".

In case the "Save" option is used, changes are saved and the transcriptionist can finish the report later. Study status remains "Pending report correction"

### 9.3.2 Resident - Supervisor workflow

DeepUnity PACSonWEB supports a Resident - Supervisor workflow, allowing a supervisor to validate the report of a resident.

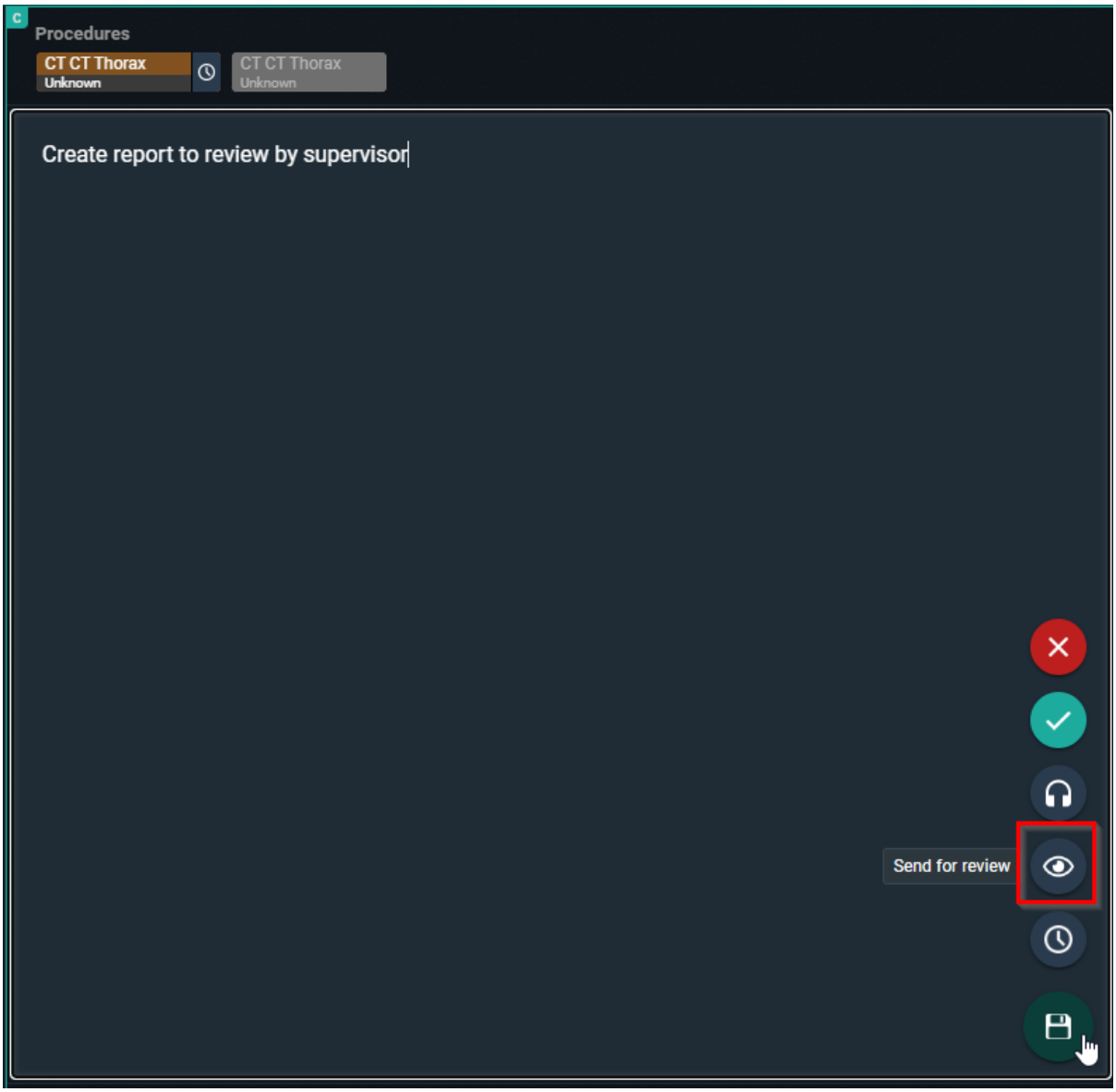
A resident in DU POW is defined as a user who can edit a report, but not validate it.

This workflow can also be used as a co-author workflow between radiologists.

Resident workflow

The resident creates a report and sends it for review to the supervisor.

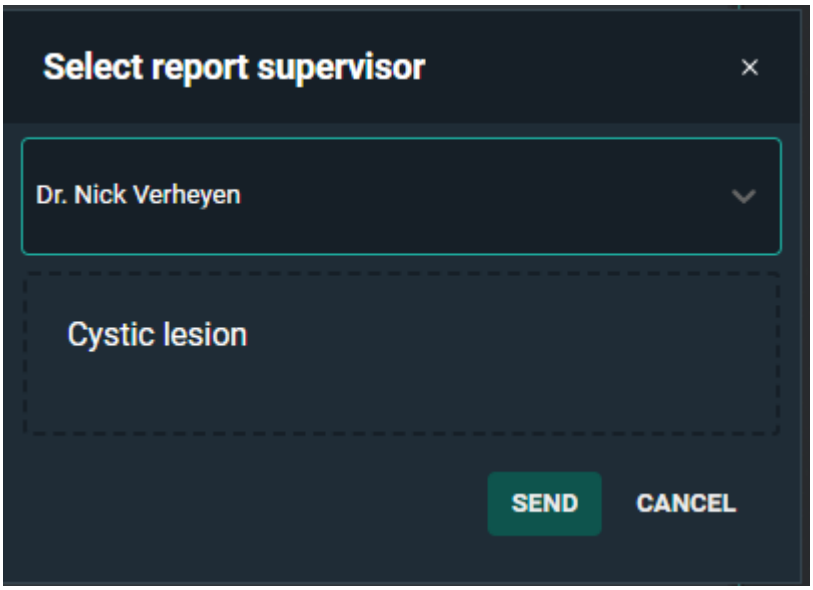

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When clicked on send for review, the supervisor needs to be selected (this requires a correct external user mapping).

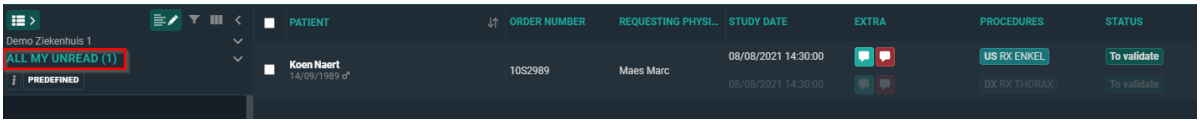
Optional a message can be added to give extra information.


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The workflow can end here for the resident if the supervisor validates the report.

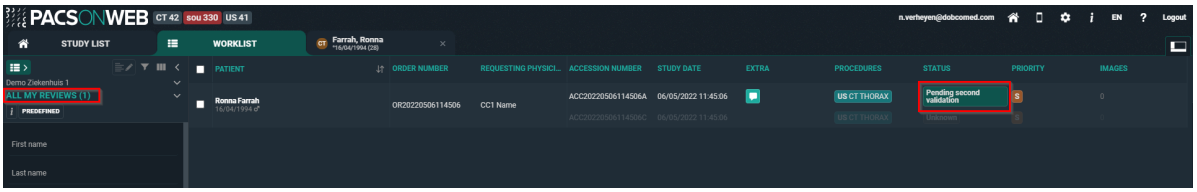
However, if the Supervisor chooses to send it back to the author (explained in Supervisor workflow), the resident finds the study in the All my Unread worklist.




The same workflow as above can be followed again until the report is validated.

Supervisor workflow:

The study is shown in the in the "My Reviews" worklist of the supervisor. The status of the study will be: Pending second validation.

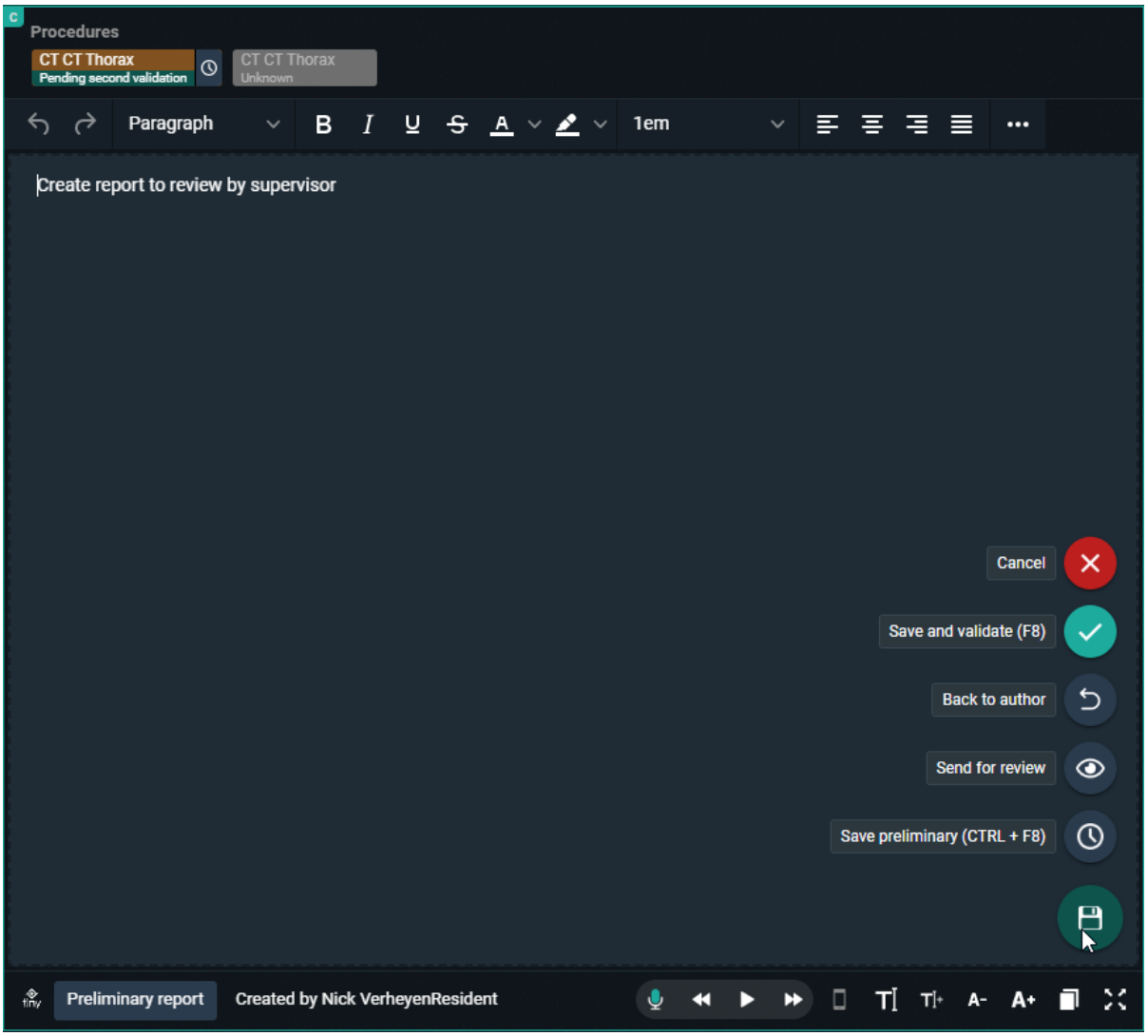



To correct the report the resident made, open the study and open the report (if not automatically opened).

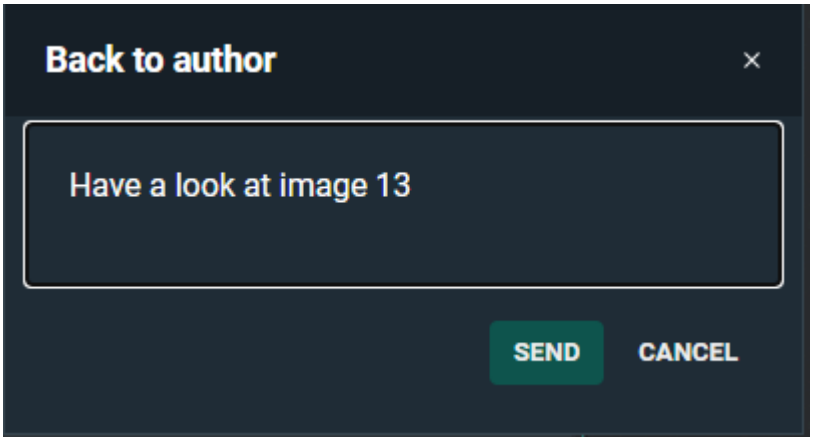
When the corrections have been made, the supervisor has following options:

- Save and validate: Status Finalized
- Back to author (Resident): Status To Validate
- Send for review (Another radiologist): Status Pending second validation
- Save preliminary: Status To Validate


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If back to author is selected, the supervisor can give an optional message to indicate why he is sending the report back.



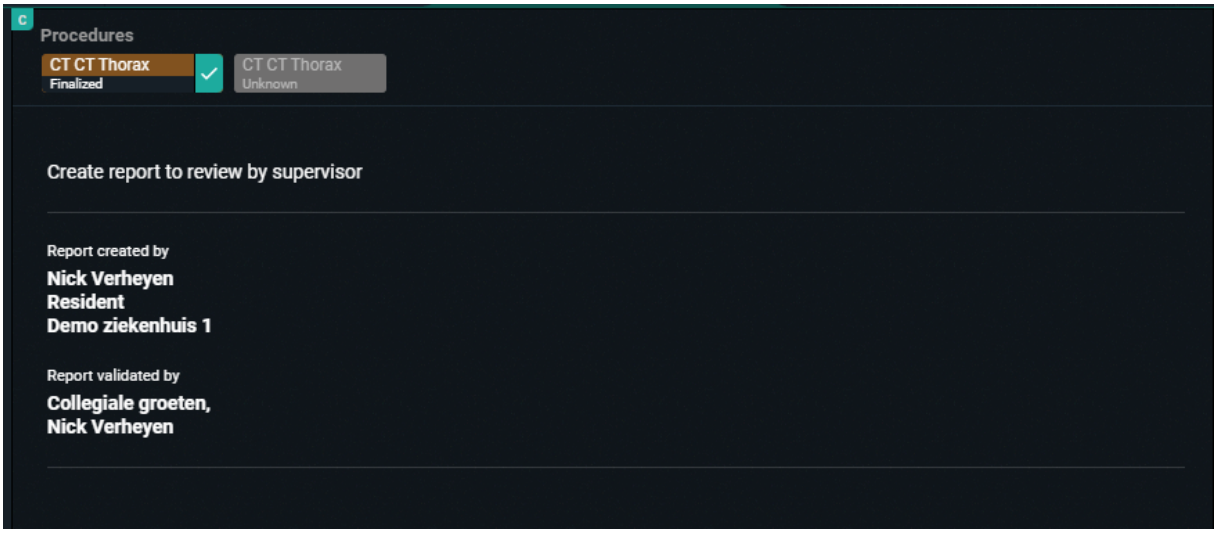


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The resident needs to correct the report again and than has to follow the same workflow as mentioned in the Resident workflow again.

This is done until the report is validated by a Supervisor.

When the report is validated, both signatures (if configured) will be added to the report.




## 9.3.3 Addendum workflow

In the context of reporting, an addendum is used to update or correct a finalized report. Addenda enable radiologists to add missing details, clarify findings, or correct errors while preserving the original report.

**Restriction:**

To enable this workflow, please contact your system administrator.

You can create an addendum report if a validated report was created. When a validated report is open, the following options are available:

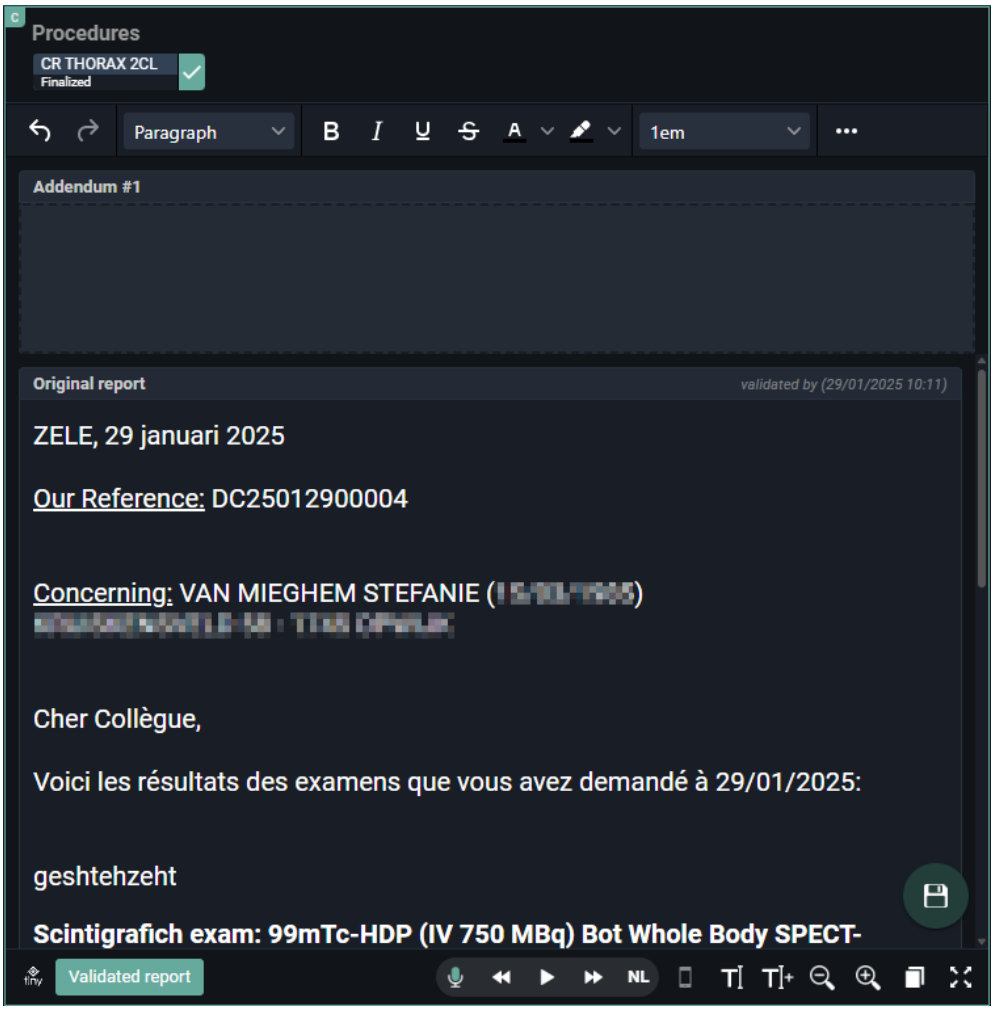
| Button | Action | Result |
|---|---|---|
|  | Add addendum | Creates an addendum section above the original report. |
|  | Edit report | Enables you to edit the validated report. |


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| Button | Action | Result |
| --- | --- | --- |
| | | **Note:**<br>This button may be linked to a time span (setting). For example, if a time span of 10 minutes was configured, you can only edit the validated report for 10 minutes, after which the Addendum workflow is mandatory.<br>Once an addendum is added to the report, the option to edit the validated report is no longer available, regardless of the remaining time in the configured time span. |


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# Adding an addendum




1. Select the validated report to which you want to add an addendum.
2. Open it in the viewer and click the **Add addendum** button.

   The addendum is displayed above your original report.
   - The addendum number (Addendum #1, Addendum #2, etc.,) is indicated in the header of the addendum section.
   - You can edit the addendum during the addendum workflow.
   - The original report is displayed, but cannot be edited.
     - You can see who created the original report and the date/time it was validated.
     - If configured, the original report contains the report signature of the original validator. This will not be updated by the validator of the Addendum.


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Intended limitations

- You cannot link or unlink procedures to or from the report during the addendum workflow.
- The addendum workflow only allows the possibility to **Cancel** or **Save and validate** the addendum.

## Validated addenda

- Validated addenda are displayed above the original report and contain their own report signatures and date/time validation.
- For a report with multiple addenda, the addenda are displayed chronologically, with the most recent addendum at the top.
- The status in the worklist will remain **Finalized**.

## 9.4 Multi-procedure reporting

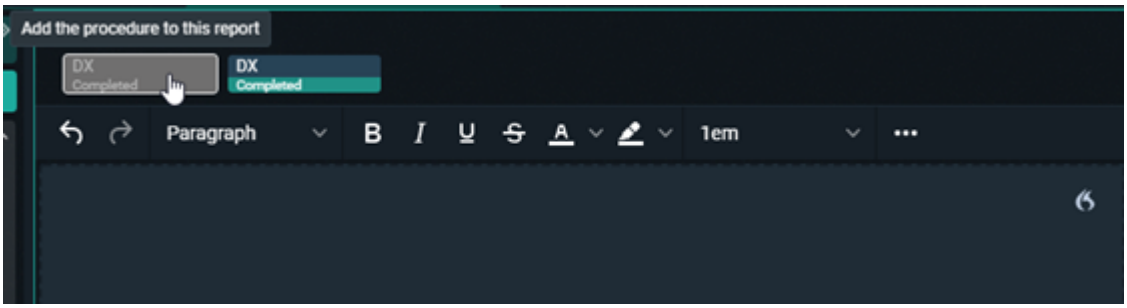
Multi procedure reporting is creating 1 report for an order with more than 1 procedure.

Only procedures in the same order and don't have a report can be added.

There are 3 possible ways to work with multi-procedure reporting. The actual behaviour is defined by a setting, configured for the source.

1) Single study

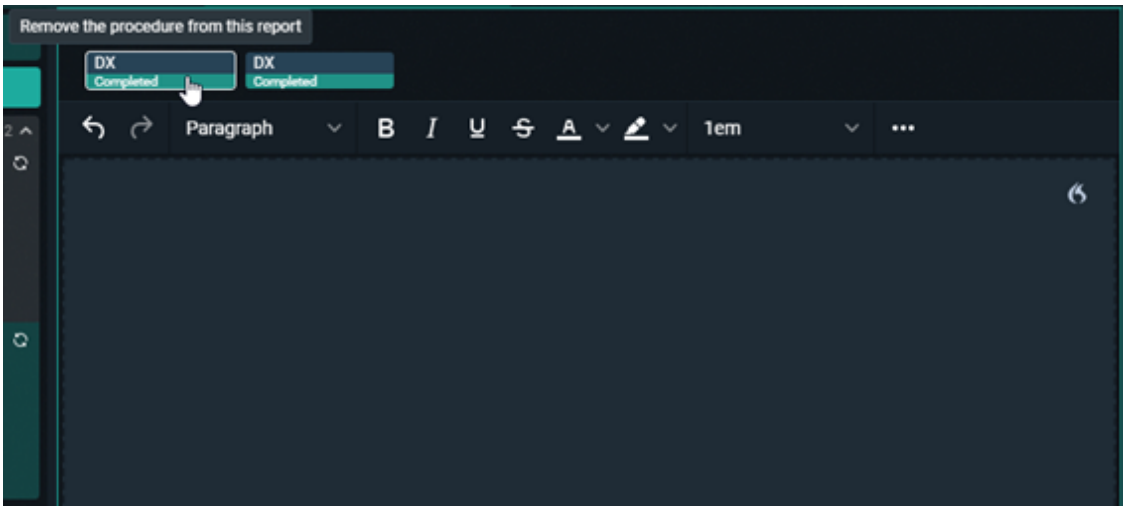
The report will only be linked to the selected procedure. It is possible to link procedures manually to the report by highlighting the procedure description.




2) All from order

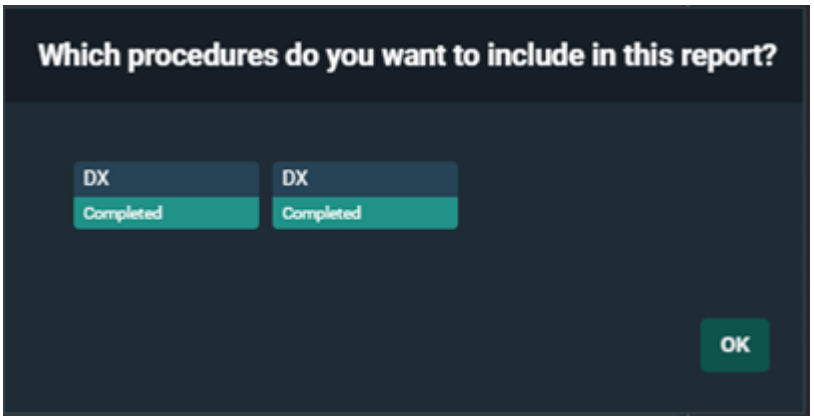
The report will automatically be linked to all studies from the order. It is still possible to remove them from the report by deselecting the procedure description.


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3) Pop – up window

A pop-up window appears to select the procedures that you want to include in the report.




**Important!**

Procedures can only be added and removed when the report is in edit mode.

## 9.5 Multi-order reporting

When a report is opened in edit mode, you can link one or more studies of multiple orders to the same report.


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**Important!**

If you would like to have this workflow available for you, please ask your system administrator to activate this feature.

**Restriction:**

- Other unreported orders must belong to the same patient.
- Other unreported procedures must be from the same source and the same performing department.
- Other unreported procedures can only have a time difference of -72h up to +72h to the current study.
- There is no automatic grouping of all studies included in the multi-order report within the series picker.
- Auto-texts (Clinical info and Diagnostic question) will only be populated with the data from the current procedure/order (the one you started from).
- Order-level parameters in the print report template will only be populated with data from the current procedure/order.

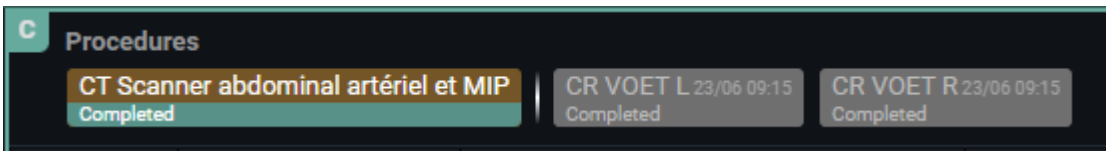
**Note:**

This workflow can be combined with the multi-procedure workflow.

Similarly to the multi-procedure workflow,

- select the procedures you want to be linked to the same report.
- deselect them to remove them from the report.

To indicate that they do not belong to the same order, there is a | in-between the current procedure and the ones that you can add:

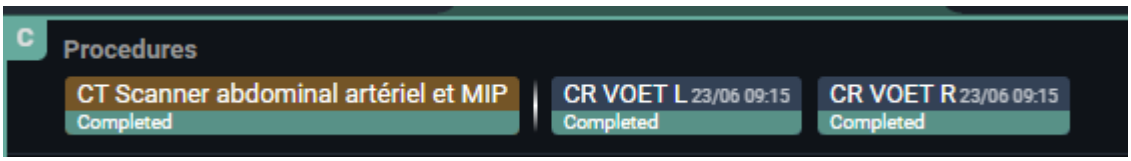



**Note:**

Procedures that can be added to the current report will be listed from the most recent to the oldest procedure. All procedures are indicated with date and time.


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After the procedures have been added to the report, they will be highlighted in green like any other active procedure and you can start reporting:




Once a report is validated, the linked procedures cannot be changed anymore.

**Important!**

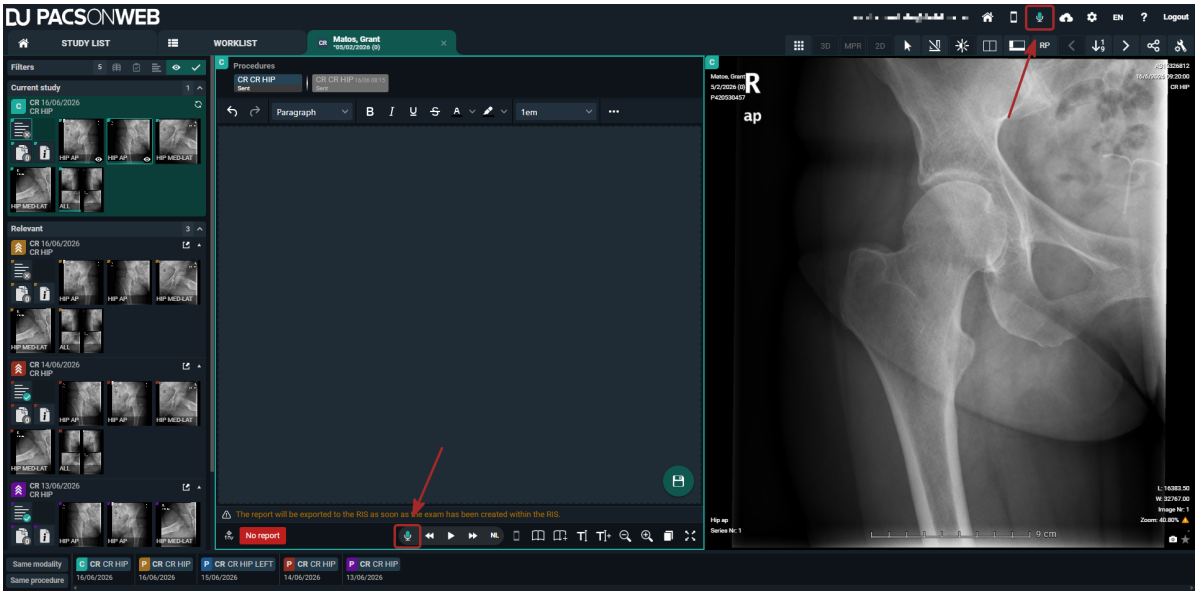
Procedures can only be added and removed when the report is in edit mode.

## 9.6 Speech recognition

DeepUnity PACSonWEB supports different speech engines that can be used for dictating reports. These paid features can only be activated by your local DeepUnity PACSonWEB service partner.

The following section provides general information about speech recognition within DeepUnity PACSonWEB. For speech engine-specific information, please refer to the respective sub-chapters.

Once a speech engine is activated, additional functionalities become available in the user interface when editing a report:




- In the report editor, a microphone icon becomes available. Click on it to start recording or use your configured SpeechMike instead.


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- In the top toolbar of your screen, the microphone icon lets you access the audio configuration.

## 9.6.1 Voice interaction and control

### Voice input indication

To achieve the best speech recognition results, the volume of your voice input needs to be within a certain range. A colored bar beneath the microphone icon in the report editor indicates your speaking volume:




| Color indication | Volume |
|---|---|
| blue | too low |
| yellow | acceptable |
| green | optimal |
| orange | high |
| red | too high |

If the voice input reaches orange, a message will prompt you to lower your volume for better recognition.

### Voice commands

The following types of voice commands can be used:

- Formatting commands (bold, italic, underline)
- Selection commands
- Navigation commands
- Correction commands
- Microphone commands
- Bullet list commands


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**Caution:**

The recognized text is not always 100% correct. It is the responsibility of the radiologist to verify the correctness of the report before validation.

## Saving the report audio

The report audio is saved in the background to optimize performance. A warning message will be displayed if you attempt to close the browser tab while saving is in progress.

If you continue to close the browser tab, the associated audio file will be lost.

## 9.6.2 SpeechMike configuration

The SpeechMike buttons can be mapped on the shortcut keys page of DeepUnity PACSonWEB (see the following page: Personal configuration shortcut keys (Page 111)). By default, the following buttons are mapped:

- **Record Button**: This button is mapped to the toggle recording functionality. Press it once to start recording and press it again to stop.
- **Play/Stop Button**: This button is mapped to the toggle playback functionality. Press it once to start playback and press it again to stop.
- **Forward Button**: This button is mapped to the fast forward functionality. Hold it down to fast forward through playback.
- **Rewind Button**: This button is mapped to the rewind functionality. Hold it down to rewind through playback.

  Any button can be linked to any shortcut, e.g., the F2 button on the SpeechMike could be mapped to the edit report functionality.

### Supported devices

| Dictation microphones | Foot controls |
|---|---|
| Philips SpeechMike Premium LFH3500 | Philips ACC2310 |
| Philips SpeechMike Premium LFH3510 | Philips ACC2320 |
| Philips SpeechMike Premium LFH3520 | Philips ACC2330 |
| Philips SpeechMike Premium LFH3600 | |
| Philips SpeechMike Premium LFH3610 | |


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| Dictation microphones | Foot controls |
|---|---|
| Philips SpeechMike Premium Touch SMP3700 | |
| Philips SpeechMike Premium Touch SMP3710 | |
| Philips SpeechMike Premium Touch SMP3720 | |
| Philips SpeechMike Premium Touch SMP3800 | |
| Philips SpeechMike Premium Touch SMP3810 | |
| Philips SpeechMike Premium Air SMP4000 | |
| Philips SpeechMike Premium Air SMP4010 | |
| Philips SpeechOne PSM6000 | |
| Nuance PowerMic III | |
| Nuance PowerMic 4 | |

(source: https://github.com/GoogleChromeLabs/dictation_support)

**Tip:**

For optimal recognition, it is recommended that you set the microphone recording volume in the Windows sound settings to a low level (e.g.: SpeechMike: 15) to minimize background noise.

## Multi-monitor application

The SpeechMike buttons remain functional when working in DeepUnity PACSonWEB and using the multi-monitor app. For example, you can continue to use the SpeechMike buttons while working in an external application, like Syngo.via.


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## Browser configuration

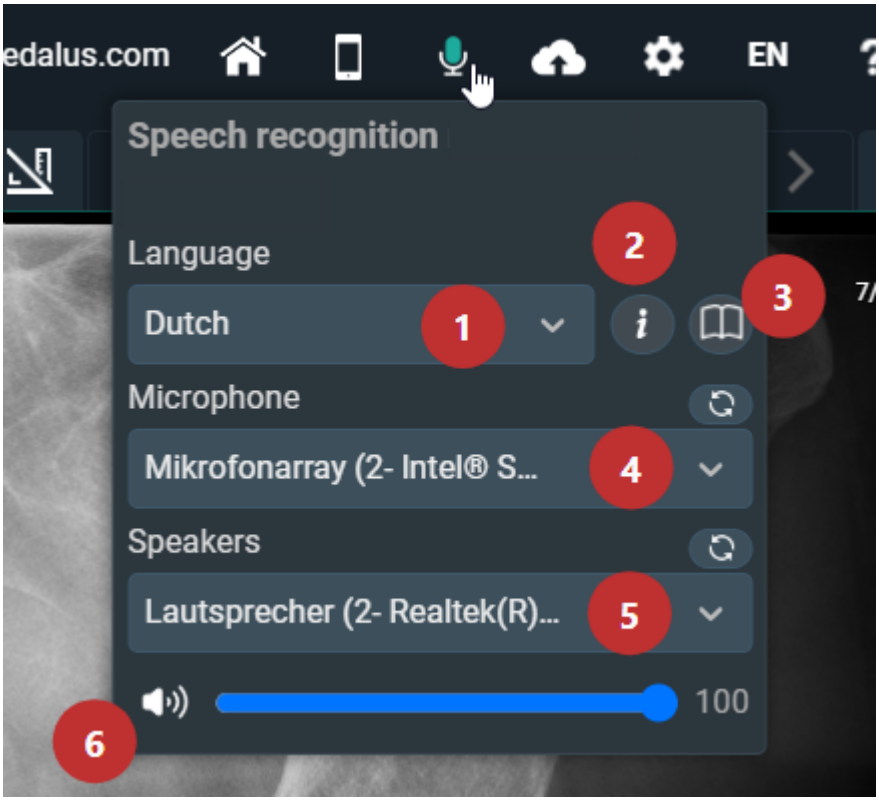
SpeechMike buttons require additional configuration to function when using DeepUnity PACSonWEB from your browser. They are compatible with Chrome, but require setup.

Contact your local support partner to configure this functionality.

## 9.6.3 Audio configuration

To configure your audio settings, hover over the microphone icon in the top toolbar to reveal the configuration menu.

Please note that depending on your speech engine, not all options might be available to you.




| Number | Option |
|---|---|
| 1 | Language selection (if available) |
| 2 | Available voice commands |
| 3 | Personal dictionary (if available) |


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| Number | Option |
|---|---|
| 4 | Audio input device |
| 5 | Audio output device |
| 6 | Volume |

## 9.6.4 RSDK and RSDK Atlas

DeepUnity PACSonWEB supports **RSDK speech recognition** and **RSDK Atlas Engine**. These paid features can only be activated by your local DeepUnity PACSonWEB service partner.

**Important!**

To enable the RSDK Atlas engine, contact your local DeepUnity PACSonWEB service partner for assistance with activating an additional User Option and setting Rsdkatlas = true.

Once activated, the following buttons become accessible while editing a report:




## Playback feature

The dictated text can be played back using specific buttons in the report editor or their corresponding shortcuts.

| Button | Functionality | Action | Shortcut |
|---|---|---|---|
|  | Play | Click | ALT+F1 |
|  | Stop | Click | ALT+F1 |
|  | • Return 1 word<br>• Rewind a ratio of 10 words / second | • Click<br>• Click and hold | ALT+F11 |


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| Button | Functionality | Action | Shortcut |
|---|---|---|---|
|  | • Skip 1 word<br>• Fast forward a ratio of 10 words / second | • Click<br>• Click and hold | ALT+F12 |

**Tip:**

If you are using a multimedia keyboard, you can also use the corresponding play buttons on your keyboard.

The play features can also be controlled using a foot pedal, by configuring the following key combinations:

| Functionality | Shortcut |
|---|---|
| Play / Stop | ALT+F1 |
| Start / stop fast forwarding | CTRL + ALT + F12 |
| Start / stop rewinding | CTRL + ALT + F11 |

## Synchronous playback

- **Select a word or phrase and press play**: The audio for the selected text will play and stop at the end.
- **Place the cursor at a certain location in the text and press play**: The audio will play from the cursor position until the end of the text.
- **Click stop during playback**: The audio will stop, and the cursor will be placed at the corresponding spot in the text.

## Available voice commands

- microphone off
- (go to) beginning of report
- (go to) beginning of document
- (go to) end of report
- (go to) end of document
- (go to) beginning of line
- (go to) end of line


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- select line
- select sentence
- select paragraph
- select all
- select everything
- cut text
- copy text
- paste text
- delete that
- scratch that
- make bold
- underline
- italicize
- start bullet list
- end bullet list
- all caps
- format title/format as title: This voice command will activate the Heading 1 formatting as configured in Preferences (Page 104) section Reporting.

For help on dictation, see section Dictation Help RSDK (Page 341) in the user manual or visit the help page of RSDK https://recognosco.com/help-support.

**Caution:**

The recognized text is not always 100% correct. It is the responsibility of the radiologist to verify the correctness of the report before validation.

### 9.6.4.1 Personal dictionary (only available for RSDK Atlas)

Like every speech engine, RSDK Atlas is delivered with a default speech package. All unknown words of your reports that are not part of this speech package and that you therefore have to type at first will be recognized and saved into your personal dictionary to improve speech recognition as you go along. The words will be added automatically once you save and validate the report, but of course, you can also add your words manually.

Your personal dictionary can be accessed in three different ways via the personal dictionary icon:


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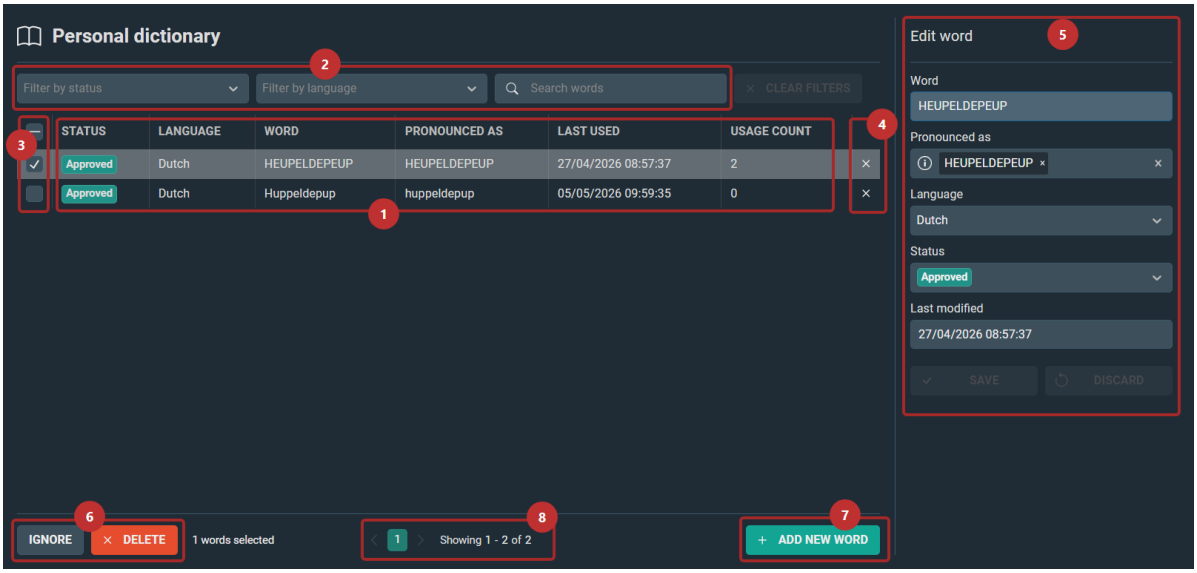
1. In the report editor, click  .

2. In your top toolbar, hover over the microphone icon to open the audio configuration menu and click  .

3. In your top toolbar, hover over the cogwheel icon to open the user settings menu and click **Personal dictionary**.

## 9.6.4.1.1 Overview

Within the personal dictionary, you can see an overview of all your added words.




| Number | Element/Functionality |
|---|---|
| 1 | The list of all your added words. Your personal dictionary is limited to 500 words. The table comprises the following columns:<br>● *Status*<br>○ **Approved**: Default option.<br>○ **Ignored**: You have access to the word, you can see how many times the word is used in your reports, but it will not be added to your dictionary when it is used again. Just the usage count goes up.<br>● *Language*<br>● *Word*: The written form of the word.<br>● *Pronounced as*: Your pronunciation of the word. |


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| Number | Element/Functionality |
|---|---|
| | • *Last used*: This might be helpful if you have too many words in your personal dictionary and need to start deleting some.<br>• *Usage count*: Indicates how many times this word has been used since it was added to your dictionary. |
| 2 | Filter your list by status, language, or search for specific words. |
| 3 | Select/deselect words to edit or delete them. |
| 4 | Delete option |
| 5 | This panel pops up when you select a word to edit it or click on **ADD NEW WORD**. Edit or fill in the fields as needed.<br>**Note:**<br>It is not possible to add words that are already part of the default speech package. If you are trying to add a word that is already included, you will be notified by a pop-up message. |
| 6 | Ignore or delete your selected word(s). These buttons only become available once you have selected one or multiple words. |
| 7 | Add a new word. You can enter the details of this word in the panel on the right. |
| 8 | This page uses pagination. When there are more than approximately 20 words, the next page will be created. |

## 9.6.4.1.1.1 Editing words

1. In your list of added words, click on the word you want to edit. The *Edit word* panel pops up on the right. If you select more than one word, the panel is disabled.
2. Edit the fields.
   a. *Word*: Edit the word.
   b. *Pronounced as*: Adapt this to your pronunciation. This field can contain up to 3 values.


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c. *Language*: Select the language from the drop-down listing all the languages that are assigned to your user.
d. *Status*: Select a status. By default, Approved will be selected.
e. *Last modified*: This field will be filled in automatically.

3. **SAVE** your changes. If you click **DISCARD** none of your changes will be saved.

### 9.6.4.1.1.2 Adding words

Usually, new words are added during reporting. If you want to add a word outside the report editor, you can do it directly in the personal dictionary.

**Note:**

It is not possible to add words that are already part of the default speech package. If you are trying to add a word that is already included, you will be notified by a pop-up message.

1. Click **ADD NEW WORD**. The *Add word* panel opens on the right.
2. Fill out the fields.
   a. *Word*: Enter the word.
   b. *Pronounced as*: This entry will be automatically taken over from the *Word* field. You can customize it according to your preferences. It can contain up to 3 values.
   c. *Language*: Select the language from the drop-down listing all the languages that are assigned to your user.
   d. *Status*: Select a status. By default, **Approved** will be selected.
   e. *Last modified*: This field will be filled in automatically.
3. Click **ADD** to save this word to your dictionary.

### 9.6.4.1.2 Adding words in the report editor

In the report editor, once you have saved and validated the report, all new words will be automatically added to your personal dictionary. But you can also add new words manually during reporting.

**Note:**

It is not possible to add words that are already part of the default speech package. If you are trying to add a word that is already included, you will be notified by a pop-up message.


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## 9.6.4.1.2.1 Adding words during reporting

1. While you are editing the report, highlight the word that you want to add (not the whole sentence) and click  .
2. A pop-up opens giving you a preview of how the word will be saved into your personal dictionary:
   - The fields *Word* and *Pronounced as* will be automatically filled in with your highlighted word. If needed, you can edit them here.
   - The field *Language* cannot be edited. The language will be automatically selected based on your profile.
3. Click **ADD**. The word will be added and can be used right away in your current report.

## 9.6.4.1.2.2 Adding words after you have finished the report

1. Edit your report as needed.
2. Click **SAVE AND VALIDATE**. All unknown words will be automatically saved to your personal dictionary and can be used in your next report.

## 9.6.4.2 Dictation Help RSDK

**Numbers**

### Cardinal Numbers

| To make this appear | Say this ... |
|---|---|
| five | five |
| 12 | twelve |
| 34 | thirty four |
| 122 | (one) hundred (and) twenty two |
| 535 | five hundred (and) thirty five |
| 2,211 | two thousand two hundred (and) eleven |


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| To make this appear | Say this ... |
|---|---|
| 338,945 | three hundred (and) thirty eight thousand nine hundred (and) forty five |
| 241,305,060 | two hundred (and) forty one million three hundred (and) five thousand (and) sixty |

**Note:**

Whole numbers from 0 through 9 are spelled out, but are written in digits if occurring in certain contexts (for examples see sections "Numeral Affixes", "Ratio", "Dictating 'by'", "Number Range", "Words triggering cardinal numbers as digits", "Date, Time & Currency" and "Medical Terms"). Cardinal numbers greater than (and equal to) 10 are generally written as digits.

## Ordinal Numbers

| To make this appear | Say this ... |
|---|---|
| first | first |
| fifth | fifth |
| 12th | twelfth |
| 56th | fifty sixth |

**Note:**

Ordinal numbers from 0th through 9th are spelled out, but are written in digits if occuring in certain contexts (for examples see section "Words triggering ordinal numbers as digits"). Ordinal numbers greater than (and equal to) 10th are generally written as digits.

## Decimal Numbers

| To make this appear | Say this ... |
|---|---|
| 3.75 | three point seventy five |


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| To make this appear | Say this ... |
|---|---|
| 37.23 | thirty seven point twenty three |
| 4.359 | four point three five nine |

## Fractions

| To make this appear | Say this ... |
|---|---|
| 1/2 | one half |
| 1/3 | one third |
| 2/3 | two thirds |
| 1/4 | one quarter |
| 3/4 | three quarters |
| 1 1/2 | one and a half |
| 2 1/3 | two and a third |
| 7 2/3 | seven and two thirds |
| 10 1/4 | ten and a quarter |

## Numeral Affixes

| To make this appear | Say this ... |
|---|---|
| +2 | plus two |
| -2.5 | minus two point five |
| -2.5 | negative two point five |
| +/-182 | plus (or) minus one hundred eighty two |


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| To make this appear | Say this ... |
|---|---|
| 2+ | two plus |
| 2.5- | two point five minus |
| 2.5- | two point five negative |
| 182+/- | one hundred eighty two plus (or) minus |
| < 2 | less than sign two |
| > 4 | greater than sign four |
| = 5 | equals five |
| 3 + 3 | three plus three |
| 5 > 3 | five greater than sign three |

## Roman Numerals

| To make this appear | Say this ... |
|---|---|
| III | Roman number three |
| III | Roman numeral three |
| VI | Roman number six |
| VI | Roman numeral six |
| XX | Roman number twenty |
| XX | Roman numeral twenty |
| X | Roman ten |


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## Ratio

| To make this appear | Say this ... |
|---|---|
| 1:5 | one to five |
| 1:250 | one to two hundred (and) fifty |
| 3:1 | three to one |

## Dictating "by"

| To make this appear | Say this ... |
|---|---|
| 4 x 4 | four by four |
| 4 x 4 | four times four |
| 3 x 4 cm | three by four centimeters |
| 3 x 4 mg | three times four milligrams |
| 5 mm x 3 cm | five millimeters by three centimeters |
| 2.5 x 3 x 4 cm | two point five by three by four centimeters |

## Number Range

| To make this appear | Say this ... |
|---|---|
| 3-4 | three to four |
| 150-200 | one hundred (and) fifty to two hundred |

## Words triggering cardinal numbers as digits

| To make this appear | Say this ... |
|---|---|
| appendix 2 and 5 | appendix two and five |


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| To make this appear | Say this ... |
|---|---|
| chapters 8-9 | chapters eight to nine |
| part 9 | part nine |
| supplement 6 | supplement six |
| volume 7-8 | volume seven to eight |
| column 3 | column three |
| parts II or IV | parts Roman number two or Roman number four |
| chapters 2, 3 and 4 | chapters two comma three and four |
| Dublin 1 | Dublin one |
| Dublin 6W | Dublin six W |

## Words triggering ordinal numbers as digits

| To make this appear | Say this ... |
|---|---|
| 1st birthday | first birthday |
| 2nd centile | second centile |
| 3rd course | third course |
| 4th cycle | fourth cycle |
| 5th day | fifth day |
| 6th degree | sixth degree |
| 5th finger | fifth finger |
| 7th floor | seventh floor |


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| To make this appear | Say this ... |
|---|---|
| 8th grade | eighth grade |
| 9th month | ninth month |
| 1st nerve | first nerve |
| 2nd percentile | second percentile |
| 3rd pregnancy | third pregnancy |
| 4th rib | fourth rib |
| 5th stage | fifth stage |
| 2nd toe | second toe |
| 6th trial | sixth trial |
| 5th week | fifth week |
| 6th year | sixth year |

## Spelling of Numbers

| To make this appear | Say this ... |
|---|---|
| 022156680215 | zero double two one five double six eight zero two one five |
| 02215–6680215 | zero double two one five dash double six eight zero two one five |
| 44–17D | forty four dash seventeen D |
| 18962–16HM | one eight nine six two dash sixteen H M |


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## Numbering

| To make this appear | Say this ... |
|---|---|
| 1. | number one |
| 2. | number two |
| 3. | number three |
| A. | (letter) A period |
| B. | (letter) B period |
| C. | (letter) C period |

# Date, Time & Currency

## Date

| To make this appear | Say this ... |
|---|---|
| 4 July 2002 | fourth (of) July two thousand two |
| 04/07/2002 | fourth (of) seventh two thousand two |
| 04/07/08 | (zero) four (slash) (zero) seven (slash) zero eight |
| 04/07 | (zero) four (slash) (zero) seven |
| December 3, 2000 | December third two thousand |
| December 2000 | December two thousand |
| 31/12/2005 - 05/01/2006 | thirty one (slash) twelve (slash) two thousand five to (zero) five (slash) (zero) one (slash) two thousand six |


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| To make this appear | Say this ... |
|---|---|
| 31/12 - 05/01 | thirty one slash twelve to zero five slash zero one |
| 31 December - 5 January | (the) thirty first (of) December to (the) fifth (of) January |
| December 09 to January 10 | December zero nine to January ten |
| April to May 09 | April to May zero nine |

## Time

| To make this appear | Say this ... |
|---|---|
| at 09:45 | at zero nine forty five |
| 3:30 p.m. | three thirty P M |
| 6 o'clock | six o'clock |
| 2:00 a.m. | two A M |
| 0200 hours | zero two hundred hours |
| 10:50-11:30 | ten fifty to eleven thirty |
| 12:00-12:50 p.m. | twelve to twelve fifty p.m. |
| 10:50 a.m. - 12:30 p.m. | ten fifty a.m. to twelve thirty p.m. |

## Decades

| To make this appear | Say this ... |
|---|---|
| the 70s | the seventies |
| 1960s | nineteen sixties |
| 1980s | nineteen hundred eighties |


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## Age

| To make this appear | Say this ... |
|---|---|
| 2-day-old | two day old |
| 5-week-old | five week old |
| 3-month-old | three month old |
| 10-year-old | ten year old |

## Currency

| To make this appear | Say this ... |
|---|---|
| £35 | pound thirty five |
| £35 | thirty five pound sterling |
| £35.10 | pound thirty five point ten |
| £35.10 | thirty five pound and ten pence |
| £35.00 | thirty five pound and zero pence |
| GBP 35 | thirty five British pound |
| IEP 3 billion | three billion Irish pound |
| CHF 3.50 | three Swiss franc and fifty centimes |
| NOK 35.29 | thirty five Norwegian crown and twenty nine øre |
| $13.09 | dollar thirteen point zero nine |
| USD 13.09 | thirteen point zero nine US dollar |
| USD 13.09 | thirteen point zero nine American dollar |


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| To make this appear | Say this ... |
|---|---|
| AUD 13.09 | thirteen point zero nine Australian dollar |
| €3-4 | three to four euro |
| €3 to €4 | three euro to four euro |
| €3.00-4.50 | three point zero to four point fifty euro |
| €3-4 million | three to four million euro |
| ¥3-4 million | three to four million yen |
| JPY 3-4 million | three to four million Japanese yen |

# Medical Terms

## Units

| To make this appear | Say this ... |
|---|---|
| 3 mg | three milligrams |
| 10 mEq | ten milliequivalent |
| 10 µmol/L | ten micromole per litre |
| -5 °C | minus five degrees Celsius |
| 5% | five percent |

For a full alphabetical list of units see section "Punctuation marks and special characters > List of units".

## Blood Count

| To make this appear | Say this ... |
|---|---|
| Hb 14.2 | H B fourteen point two |


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| To make this appear | Say this ... |
|---|---|
| ALT 195 | A L T (one) hundred (and) ninety five |
| albumin 40 | albumin forty |
| CRP 6 | C R P six |
| U&Es | U and Es |
| SO2 93% | S O two ninety three percent |
| amylase = 157 | amylase equals (one) hundred (and) fifty seven |

## Hyphenated Phrases

| To make this appear | Say this ... |
|---|---|
| a 2-week course | a two week course |
| a 2-mm diameter | a two millimeter diameter |

## Times

| To make this appear | Say this ... |
|---|---|
| x3 | times three |
| x5-6 daily | times five to six daily |
| 3 times | three times |
| 5-6 times | five to six times |

## Scales

| To make this appear | Say this ... |
|---|---|
| 7/9 | seven out of nine |


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| To make this appear | Say this ... |
|---|---|
| 7/9 | seven over nine |
| 6-7/10 | six to seven out of ten |
| 6-7/10 | six to seven over ten |
| 19/28 | nineteen out of twenty eight |
| 19/28 | nineteen over twenty eight |

## Snellen Fractions

| To make this appear | Say this ... |
|---|---|
| 6/6 | six six |
| 6/6 | six (slash/over) six |
| 6/6-2 | six six minus two |
| 6/6-2 | six (slash/over) six minus two |
| 6/9+3 | six nine plus three |
| 6/9+3 | six (slash/over) nine plus three |
| 6/18 | six eighteen |
| 6/18 | six (slash/over) eighteen |

## Cardio-thoracic Ratio

| To make this appear | Say this ... |
|---|---|
| CTR 140/285 | CTR (one) hundred (and) forty over two hundred (and) eighty five |
| CTR 140:285 | CTR (one) hundred (and) forty to two hundred (and) eighty five |


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## Dosage

| To make this appear | Say this ... |
|---|---|
| q.4 h. | Q four H |
| q.24 h. | Q twenty four hours |

## Blood Pressure

| To make this appear | Say this ... |
|---|---|
| 120/90 | (one) hundred (and) twenty over ninety |
| 240/40 mmHg | two hundred (and) forty over forty M M H G |
| 110-120 over 90-80 mmHg | (one) hundred (and) ten to (one) hundred (and) twenty over ninety to eighty millimeters of mercury |

## French Scale

| To make this appear | Say this ... |
|---|---|
| 5-French | five French |
| #24-French | number twenty four French |

## Numbers and letters

| To make this appear | Say this ... |
|---|---|
| A2 | A two |
| G44 | G forty four |
| 5b | five B |
| 30e | thirty E |


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## Suture Size

| To make this appear | Say this ... |
|---|---|
| 2-0 | two (to) zero |
| 5-0 | five (to) zero |
| 11-0 | eleven (to) zero |

## Stages

| To make this appear | Say this ... |
|---|---|
| Stage I | stage (Roman) one |
| Stage I-II | stage (Roman) one to (Roman) two |
| Stage IIa | stage (Roman) two A |
| Salter-Harris Type II fracture | Salter-Harris type (Roman) two fracture |
| Type II Salter-Harris fracture | type (Roman) two Salter-Harris fracture |

## Gravida

| To make this appear | Say this ... |
|---|---|
| gravida 2 | gravida two |
| gravida 5, para 4 | gravida five (comma) para four |
| para 2+1 | para two plus one |
| abortus 3 | abortus three |
| TPAL 1-0-1 | T P A L one zero one |
| para 1-2-0-1 | para one two zero one |


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## Apgar Scores

| To make this appear | Say this ... |
|---|---|
| Apgars 8 at 1 and 9 at 5 minutes | Apgars eight at one and nine at five minutes |
| Apgar scores were 8 at 1 minute and 9 at 5 minutes | Apgar scores were eight at one minute and nine at five minutes |

## Vertebrae

| To make this appear | Say this ... |
|---|---|
| T12 | T twelve |
| L3/L4 | L three four |
| L3/L4 | L three L four |
| L3/L4 | L three (forward) slash L four |
| C1-C5 | C one to C five |

## V1-V9

| To make this appear | Say this ... |
|---|---|
| V1 through V5 | V one through V five |
| V1 - V5 | V one to V five |

## BI-RADS

| To make this appear | Say this ... |
|---|---|
| BI-RADS 5 | BI-RADS five |
| BI-RADS 0 | BI-RADS zero |


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## TNM Staging

| To make this appear | Say this ... |
|---|---|
| T1N0M0 | T one N zero M zero |
| T0N1M1 | T zero N one M one |
| TXNX | T X N X |
| pT4a | P T four A |
| pT2cN1MX | P T two C N one M X |

## Cluster of Differentiation

| To make this appear | Say this ... |
|---|---|
| CD121 | C D one hundred twenty one |
| CD73a | C D seventy three A |

## Teeth

| To make this appear | Say this ... |
|---|---|
| LL1 | L L one |
| UR8 | U R eight |
| LR2 | L R two |
| UL4 | U L four |

## Block Keys

| To make this appear | Say this ... |
|---|---|
| block A | block A |
| block 1A | block one A |


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| To make this appear | Say this ... |
|---|---|
| blocks 1A-1D | blocks one A to one D |
| blocks 1A, 1B and 1C | blocks one A COMMA one B and one C |

### Query Sign

| To make this appear | Say this ... |
|---|---|
| chest pain ? cause | chest pain query sign cause |
| diagnosis would be ?? demyelination | diagnosis would be query sign query sign demyelination |

## Punctuation marks and special characters

### Whitespace characters

| To make this appear | Say this ... |
|---|---|
| Insert a new line in the document | New line |
| Insert a new paragraph in the document | New paragraph; Next paragraph; Paragraph |
| Insert a tab | Tabulator; Tabulator key; Tab key |

### Punctuation marks

| To make this appear | Say this ... |
|---|---|
| . | Full-stop; Stop; Period; Dot; Point |
| ! | Exclamation mark; Exclamation point |
| ? | Question mark; Question point; Query sign |
| , | Comma |


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| To make this appear | Say this ... |
|---|---|
| : | Colon |
| ; | Semicolon |

## Dash

| To make this appear | Say this ... |
|---|---|
| – | Dash; Dash sign; En dash; En dash sign |
| — | Em dash; Em dash sign |
| -- | Double dash; Double dash sign |

## Signs

| To make this appear | Say this ... |
|---|---|
| - | Hyphen; To *(with numbers)* |
| ' | Apostrophe; Apostrophe sign |
| 's | Apostrophe S; Apostrophe S sign |
| _ | Underscore; Underscore sign |
| ` | Back quote; Grave accent |
| & | And sign; Ampersand; Ampersand sign |
| / | Slash; Forward slash; Forward stroke |
| \ | Backslash |
| // | Double slash |
| ~ | Tilde; Tilde sign |


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| To make this appear | Say this ... |
|---|---|
| ^ | Caret; Caret sign; Circumflex; Circumflex sign |
| @ | At sign; At symbol |
| … | Dot dot dot; Ellipsis sign |
| # | Number sign; Hash sign; Sharp sign |
| % | Percent sign; Percentage sign |
| ‰ | Per mille; Per mille sign |
| ° | Degree sign; Degree symbol |

## Quotes

| To make this appear | Say this ... |
|---|---|
| ' | Open single quote(s); Begin single quote(s) |
| ' | Close single quote(s); End single quote(s) |
| " | Open quote(s); Begin quote(s); Open double quote(s); Begin double quote(s); Open inverted comma(s); Begin inverted comma(s) |
| " | Close quote(s); End quote(s); Close double quote(s); End double quote(s); Close inverted comma(s); End inverted comma(s) |
| « | Open angle quote(s); Begin angle quote(s); Open guillemet(s); Begin guillemet(s) |


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| To make this appear | Say this ... |
|---|---|
| » | Close angle quote(s); End angle quote(s); Close guillemet(s); End guillemet(s) |

## Brackets

| To make this appear | Say this ... |
|---|---|
| ( | Bracket(s); Open bracket(s); Left bracket(s); Parenthesis; Open parenthesis; Left parenthesis; Open paren; Left paren |
| ) | Close bracket(s); Right bracket(s); Close parenthesis; Right parenthesis; Close paren; Right paren |
| [ | Square bracket(s); Open square bracket(s); Left square bracket(s) |
| ] | Close square bracket(s); Right square bracket(s) |
| { | Brace(s); Curly brace(s); Curly bracket(s); Open brace(s); Open curly brace(s); Open curly bracket(s); Left brace(s); Left curly brace(s); Left curly bracket(s) |
| } | Close brace(s); Close curly brace(s); Close curly bracket(s); Right brace(s); Right curly brace(s); Right curly bracket(s) |
| ‹ | Angle bracket(s); Open angle bracket(s); Left angle bracket(s) |
| › | Close angle bracket(s); Right angle bracket(s) |


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## Mathematical Signs

| To make this appear | Say this ... |
|---|---|
| < | Less than sign |
| > | Greater than sign |
| = | Equal sign; Equality sign |
| + | Plus sign; Plus |
| - | Minus sign |
| +/- | Plus or minus sign; Plus minus sign; Plus or minus |
| * | Asterisk |
| × | Multiplication sign; Times sign |
| ÷ | Division sign |
| \| | Vertical bar; Pipe sign |
| ¬ | Logical not sign; Logical not symbol |
| *f* | Function sign |
| µ | Micro sign |
| ¼ | Quarter sign |
| ½ | Half sign |
| ¾ | Three quarters sign |
| ¹ | Superscript one sign |
| ² | Superscript two sign |


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| To make this appear | Say this ... |
|---|---|
| ³ | Superscript three sign |

## Currency

| To make this appear | Say this ... |
|---|---|
| € | Euro sign |
| £ | Pound sterling sign; Pound sign |
| $ | Dollar sign |
| ¢ | Cent sign |
| ¥ | Yen sign |
| ¤ | Currency sign |

## Others

| To make this appear | Say this ... |
|---|---|
| © | Copyright sign |
| ® | Registered sign; Registered trademark sign; Registered symbol; Registered trademark symbol |
| ™ | Trademark sign; Trademark symbol |
| ¶ | Paragraph sign; Paragraph mark |
| § | Section sign; Sectional symbol |
| · | Bullet point |
| † | Dagger sign; Cross sign |
| ‡ | Double dagger sign; Double cross sign |


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| To make this appear | Say this ... |
|---|---|
| ª | Feminine ordinal indicator |
| º | Masculine ordinal indicator |
| ¡ | Inverted exclamation mark; Inverted exclamation point |
| ¿ | Inverted question mark; Inverted question point |
| ´ | Acute accent |
| · | Middle dot; Interpunct; Interpoint; Centred dot |
| ¸ | Cedilla sign |
| ¨ | Umlaut sign |
| ¯ | Macron sign |
| ¦ | Broken bar sign |

## List of units

| To make this appear | Say this ... |
|---|---|
| % | percent |
| /min | per minute |
| ° | degree; degrees; degrees sign |
| °C | degree Celsius; degree centigrade; degrees Celsius; degrees centigrade |
| °F | degree Fahrenheit; degrees Fahrenheit |
| µA | microampere; microamperes |


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| To make this appear | Say this ... |
|---|---|
| µg | microgram; micrograms |
| µL | microliter; microliters |
| µm | micrometer; micrometers |
| µmol | micromole; micromoles |
| µs | microsecond; microseconds |
| µV | microvolt; microvolts |
| µW | microwatt; microwatts |
| ‰ | ‰\per-mille-sign |
| A | ampere; amperes |
| acre | acre |
| acres | acres |
| ampoule | ampoule |
| ampoules | ampoules |
| atm | atmosphere; atmospheres |
| bar | bar |
| bars | bar |
| beat/min | beat per minute |
| beats/min | beats per minute |
| biopsies | biopsies |


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| To make this appear | Say this ... |
|---|---|
| biopsy | biopsy |
| bit | bit |
| bits | bits |
| block | block |
| blocks | blocks |
| bottle | bottle |
| bottles | bottles |
| box | box |
| boxes | boxes |
| bpd | barrel per day; barrels per day; barrel a day; barrels a day; B P D |
| bpm | B P M |
| Bq | becquerel; becquerels |
| C | coulomb; coulomb |
| cal | calorie; calories |
| can | can |
| cans | cans |
| capsule | capsule |
| capsules | capsules |
| cassette | cassette |


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| To make this appear | Say this ... |
|---|---|
| cassettes | cassettes |
| cc | CC |
| cd | candela; candelas |
| cGy | centigray; centigrays |
| cigar | cigar |
| cigarette | cigarette |
| cigarettes | cigarettes |
| cigars | cigars |
| cL | centiliter; centiliters |
| cm | centimeter; centimeters |
| $cm^2$ | square centimeter; square centimeters; centimeter squared; centimeters squared |
| $cm^3$ | cubic centimeter; cubic centimeters |
| core | core |
| cores | cores |
| cup | cup |
| cups | cups |
| cycle | cycle |
| cycles | cycles |


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| To make this appear | Say this ... |
|---|---|
| day | day |
| days | days |
| dB | decibel; decibels |
| dL | deciliter; deciliters |
| dm | decimeter; decimeter |
| $dm^2$ | square decimeter; square decimeters; decimeter squared; decimeters squared |
| $dm^3$ | cubic decimeter; cubic decimeters |
| drop | drop |
| drops | drops |
| Eq | equivalent; equivalents |
| feet | feet |
| fL | femtolitre; femtolitres |
| foot | foot |
| fragment | fragment |
| fragments | fragments |
| g | gram; grams |
| gauge | gauge |
| GBq | gigabecquerel; gigabecquerels |
| GHz | gigahertz |


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| To make this appear | Say this ... |
|---|---|
| glass | glass |
| glasses | glasses |
| grain | grain |
| grains | grains |
| Gy | gray; grays |
| h | hour; hours |
| ha | hectare; hectares |
| hour | hour |
| hours | hours |
| HU | Hounsfield unit; Hounsfield unit |
| Hz | hertz |
| inch | inch |
| inches | inches |
| inhalation | inhalation |
| inhalations | inhalations |
| injection | injection |
| injections | injections |
| IU | international unit; international unit |
| J | joule; joule |


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| To make this appear | Say this ... |
|---|---|
| K | kelvin; kelvins |
| kA | kiloampere; kiloamperes |
| kBq | kilobecquerel; kilobecquerel |
| kcal | kilocalorie; kilocalorie |
| kg | kilogram; kilogram |
| kHz | kilohertz |
| kJ | kilojoule; kilojoule |
| km | kilometre; kilometre |
| $km^2$ | square kilometre; square kilometres; kilometre square; kilometres square |
| $km^3$ | cubic kilometre; cubic kilometres |
| kmol | kilomole; kilomoles |
| kPa | kilopascal; kilopascals |
| kV | kilovolt; kilovolts |
| kW | kilowatt; kilowatts |
| L | litre; litres |
| lesion | lesion |
| lesions | lesions |
| lymph node | lymph node |
| lymph nodes | lymph nodes |


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| To make this appear | Say this ... |
|---|---|
| m | metre; metres |
| $m^2$ | square metre; square metres; metre squared; metres squared |
| $m^3$ | cubic metre; cubic metres |
| mA | milliampere; milliamperes |
| mbar | millibar; millibar |
| MBq | megabecquerel; megabecquerels |
| mCi | millicurie; millicuries |
| mEq | milliequivalent; milliequivalents |
| mg | milligram; milligrams |
| mGy | milligray; milligrays |
| mGycm | milligray centimetre; milligrays centimetre |
| mHz | millihertz |
| MHz | megahertz |
| mile | mile |
| miles | miles |
| min | minute |
| minute | minute |
| minutes | minutes |


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| To make this appear | Say this ... |
|---|---|
| mIU | million international unit; million international units |
| mJ | millijoule; millijoules |
| mL | millilitre; millilitres |
| mm | millimetre; millimetres |
| $mm^2$ | square millimetre; square millimetres; millimetre squared; millimetres squared |
| $mm^3$ | cubic millimetre; cubic millimetres |
| mmHg | millimetre of mercury; millimetres of mercury |
| mmol | millimole; millimoles |
| mol | mole; moles |
| month | month |
| months | months |
| mph | mile per hour; miles per hour |
| ms | millisecond; milliseconds |
| mSv | millisievert |
| mU | million unit; million units |
| mV | millivolt; millivolts |
| mW | milliwatt; milliwatts |
| MW | megawatt; megawatts |


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| To make this appear | Say this ... |
|---|---|
| N | newton; newtons |
| needle | needle |
| ng | nanogram; nanograms |
| night | night |
| nm | nanometre; nanometres |
| nmol | nanomole; nanomoles |
| node | node |
| nodes | nodes |
| ns | nanosecond; nanoseconds |
| ounce | ounce |
| Pa | pascal; pascals |
| pack | pack |
| packet | packet |
| packets | packets |
| packs | packs |
| pg | picogram; picograms |
| piece | piece |
| pieces | pieces |
| pill | pill |


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| To make this appear | Say this ... |
|---|---|
| pills | pills |
| pint | pint |
| pints | pints |
| pmol | picomole; picomoles |
| portion | portion |
| portions | portions |
| pound | pound |
| pounds | pounds |
| psi | pounds per square inch |
| puff | puff |
| puffs | puffs |
| rod | rod |
| rods | rods |
| rpm | revolution per minute; revolutions per minute; R P M |
| sec | second |
| second | second |
| seconds | seconds |
| section | section |
| sections | sections |


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| To make this appear | Say this ... |
|---|---|
| slice | slice |
| slices | slices |
| slide | slide |
| slides | slides |
| specimen | specimen |
| specimens | specimens |
| spray | spray |
| sprays | sprays |
| sq ft | square foot; square feet |
| sq in | square inch; square inches |
| sq mi | square mile; square miles |
| sq rd | square rod; square rods |
| sq yd | square yard; square yards |
| stitch | stitch |
| stitches | stitches |
| stone | stone |
| t | ton; tons |
| tablespoon | tablespoon |
| tablespoons | tablespoons |


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| To make this appear | Say this ... |
|---|---|
| tablet | tablet |
| tablets | tablets |
| teaspoon | teaspoon |
| teaspoons | teaspoons |
| unit | unit |
| units | units |
| V | volt; volts |
| W | watt; watts |
| week | week |
| weeks | weeks |
| yard | yard |
| yards | yards |
| year | year |
| years | years |

# Lexical References

## Dictionaries

As a reference we used the following dictionaries:

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Concise Medical Dictionary. Oxford University Press, 7th Edition, 2007

Illustrated Medical Dictionary. The British Medical Association, 2nd edition 2007


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New Guide to Medicines and Drugs. The British Medical Association, 7th edition revised and updated 2007

# Commands

## Formatting commands

The following table shows commands to work with text during dictation. Words in *italic* font indicate that you can say many different things in place of the example word or phrase and get useful results.

| To make this appear | Say this ... |
|---|---|
| Insert the literal word for the next command (for example, you can insert the word "comma" instead of the punctuation mark) | Literal *word* |
| Insert the numeral form of a number | Numeral *number* |
| Don't insert a space before the next word | Delete space |
| Capitalize the first letter of the word | Caps *word* |
| Capitalize all the letters of the word | All caps *word* |
| Make all the letters in the word lowercase | No caps *word* |

## TextBlock and navigation commands (Frontend recognition only)

| To make this appear | Say this ... |
|---|---|
| Navigate to the next anchor | next section; next field; next |
| Navigate to the previous anchor | previous section; previous field; previous |
| Navigate to an anchor directly | *anchor name*; go to*anchor name*; jump to *anchor name* |


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| To make this appear | Say this ... |
|---|---|
| Navigate to the beginning of the report | (go to) beginning of report; (go to) beginning of document |
| Navigate to the end of the report | (go to) end of report; (go to) end of document |
| Navigate to the beginning of the line | (go to) beginning of line |
| Navigate to the end of the line | (go to) end of line |
| Navigate to the beginning of the section | (go to) beginning of section; (go to) beginning of field |
| Navigate to the end of the section | (go to) end of section; (go to) end of field |
| Insert a TextBlock | insert *TextBlock name* |

## Correction commands (Frontend recognition only)

| To make this appear | Say this ... |
|---|---|
| Select dictated text | select *text* |
| Resolve ambiguities of select command in case of multiple appearances throughout the report | *OK* or *number* to confirm selection; *Cancel* to cancel selection |
| Select current line, i.e. the text between new lines before and after the text cursor is selected. | select line |
| Select current paragraph, i.e. the text between paragraphs before and after the text cursor is selected. | select paragraph |
| Select the current sentence | select sentence |
| Select the content of the edit control. | select all |


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| To make this appear | Say this ... |
| --- | --- |
| **Note:**<br>In case of a multi edit control use case, only the text of the active edit control is selected. | |
| Cut the text of the current selection and add it to the clipboard | cut text |
| Copy the text of the current selection and add it to the clipboard | copy text |
| Paste the text at the current position | paste text |
| Delete selected text or last speech result<br>**Note:**<br>If triggered on a text selection: the selected text will be deleted<br>**Note:**<br>If triggered without a text selection: the last speech result will be removed (note: any speech command or manual editing will invalidate the last speech result buffer and the command will not trigger any action) | delete that; scratch that |

## 9.6.5 Dragon speech recognition

DeepUnity PACSonWEB supports the **Dragon speech engine**. This paid feature can only be activated by your local DeepUnity PACSonWEB service partner.

Once activated, the following buttons become accessible while editing a report:


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## Available voice commands

| English | Dutch | French | German | Spanish |
|---|---|---|---|---|
| microphone off | microfoon uit | désactiver micro | Mikrofon aus | micrófono apagado |
| go to beginning of report | ga naar begin van het document | aller au début du document | gehe zum Beginn des Dokuments | ir al inicio del documento |
| go to beginning of document | ga naar begin van het dictaat | aller au début du compte-rendu | gehe zum Ende des Dokuments | ir al final del documento |
| go to end of report | ga naar einde van het document | aller à la fin du compte-rendu | gehe zum Zeilenanfang | ir al inicio del informe |
| go to end of document | ga naar einde van het dictaat | aller à la fin du document | gehe zum Zeilenende | ir al final del informe |
| go to beginning of line | ga naar begin van de lijn | aller au début de ligne | nächstes Feld | ir al inicio de la línea |
| go to end of line | ga naar begin van de regel | aller à la fin de ligne | voriges Feld | ir al final de la línea |
| next section | ga naar einde van de lijn | section suivante | nächster Abschnitt | sección siguiente |
| previous section | ga naar einde van de regel | section précédente | vorheriges Feld | sección anterior |
| next field | volgend veld | champ suivant | nächste Sprungmarke | campo siguiente |


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| English | Dutch | French | German | Spanish |
|---|---|---|---|---|
| previous field | vorig veld | champ précédent | voriger Abschnitt | campo anterior |
| next | volgende sectie | suivant | nächste Textmarke | siguiente |
| previous | vorige sectie | précédent | vorheriger Abschnitt | anterior |
| select line | next | sélectionner la ligne | vorige Sprungmarke | seleccionar frase |
| select sentence | rij selecteren | sélectionner la phrase | vorherige Sprungmarke | seleccionar línea |
| select paragraph | lijn selecteren | sélectionner le paragraphe | vorige Textmarke | seleccionar párrafo |
| select all | regel selecteren | sélectionner tout | vorherige Textmarke | seleccionar todo |
| select everything | zin selecteren | couper le texte | Zeile markieren | cortar selección |
| cut text | paragraaf selecteren | copier le texte | Satz markieren | cortar texto |
| copy text | alinea selecteren | coller le texte | Absatz markieren | copiar texto |
| paste text | alles selecteren | supprimer | alles markieren | copiar selección |
| delete that | selectie knippen | en gras | Text ausschneiden | pegar texto |
| make bold | tekst knippen | souligner | Text kopieren | pegar selección |


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| English | Dutch | French | German | Spanish |
|---|---|---|---|---|
| underline | selectie kopiëren | en italique | Text einfügen | eliminar selección |
| make italic | tekst kopiëren | commencer la liste à puces | bitte löschen | borrar texto |
| italicize | selectie plakken | arrêter la liste à puces | Text löschen | eliminar texto |
| start bullet list | tekst plakken | titre | fett machen | borrar selección |
| stop bullet list | verwijder dat | tout en majuscules | unterstreichen | poner en negrita |
| end bullet list | selectie verwijderen | Insérer [bloc de texte code] | kursiv schreiben | subrayar |
| title | tekst verwijderen | | Aufzählungsliste starten | poner en cursiva |
| capitalize | maak vet | | Aufzählungsliste stoppen | empezar a enumerar |
| Insert [Text block code] | onderlijn dat | | Titel | dejar de enumerar |
| | maak schuin | | in Großbuchstaben | empezar listado |
| | start opsomming | | [Textblock code] einfügen | terminar listado |
| | stop opsomming | | | todo en mayúsculas |


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| English | Dutch | French | German | Spanish |
|---|---|---|---|---|
| | titel | | | Insertar [bloque de texto code] |
| | grootschrift | | | |
| | [Tekstblok code] invoegen | | | |

**Caution:**

The recognized text is not always 100% correct. It is the responsibility of the radiologist to verify the correctness of the report before validation.


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# PACS Administrator

10

## About the general management pages

The **General management pages**:

- Allow specific **Source Management** topics to be outsourced to dedicated DH Healthcare GmbH partners or PACS Admins from a hospital.
- Allow the control of
  - DICOM Devices (Page 385)
  - Sites, departments and examination rooms (Page 394)

Access to the **DICOM Devices** and **Sites, departments & examination rooms** management pages can be granted through the appropriate permissions and can be customized for individual users.

The available tabs and sources in the general management header are all dynamically displayed based on your permissions as a user.

## Navigating to DICOM devices or Sites, Departments and Examination rooms

To access the **DICOM Devices** or the **Sites, departments & examination rooms** pages:

1. Go to your study list.
2. Select **Tools**.

   You will see **DICOM Devices** and **Sites, departments & examination rooms** in the list if you have the appropriate permissions.
3. Select the desired page.

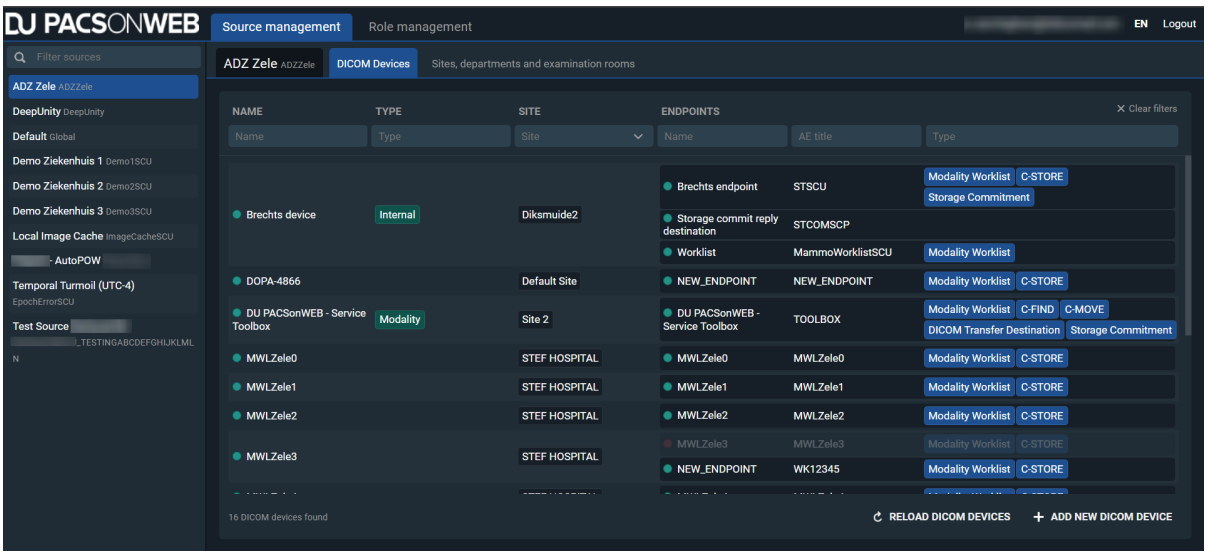
   Selecting **DICOM Devices** or **Sites, departments & examination rooms** from the list will take you to the General management page where you can configure the DICOM Devices or Sites, Departments and Examination rooms.


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# 10.1 DICOM Devices

## DICOM Devices Overview

The DICOM Devices screen is used to add, edit and delete DICOM Devices.




**Filter:** If you have access to multiple sources, a filter panel is displayed. You can filter on the different sources that you have access to. If you only have access to 1 source, the panel will not be displayed.

Sources are listed alphabetically by name.

**DICOM Devices:** A list of DICOM Devices that are available for the selected source are displayed. The selected source and the source that will be configured is clearly displayed to the left of the **DICOM Devices** tab.

### Filter Criteria:

- **Name**: Free text field that allows you to filter your DICOM Devices by name.
- **Type**: A predefined multi-select list that if configured, allows you to filter by type. Type is an optional field.
- **Site**: A single select drop-down that displays all sites linked to the selected source.
- **Endpoints**:
  - **Endpoint name** Free text field that allows you to filter by the name of the configured endpoint


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**Note:**

A DICOM Device can have multiple endpoints linked.

- **Endpoint AE Title**: Free text field that allows you to filter by the AE title of a particular endpoint.
- **Endpoint Type**: Predefined, multi-select drop-down list that allows you to filter by the configurable endpoint type.

The number of DICOM Devices found according to the search parameters will be shown at the bottom of the list.

To clear any filter criteria that you no longer want, click the **x** to the right of the value. To clear all applied filters and display all available DICOM Devices, click the **Clear filters** button.

If you are configuring with multiple users at once, it might be useful to check the latest status of this list. To do so, click **Reload DICOM Devices**.

To add a new DICOM Device, click **Add new DICOM Device**. This will open a new screen to create a new DICOM Device.

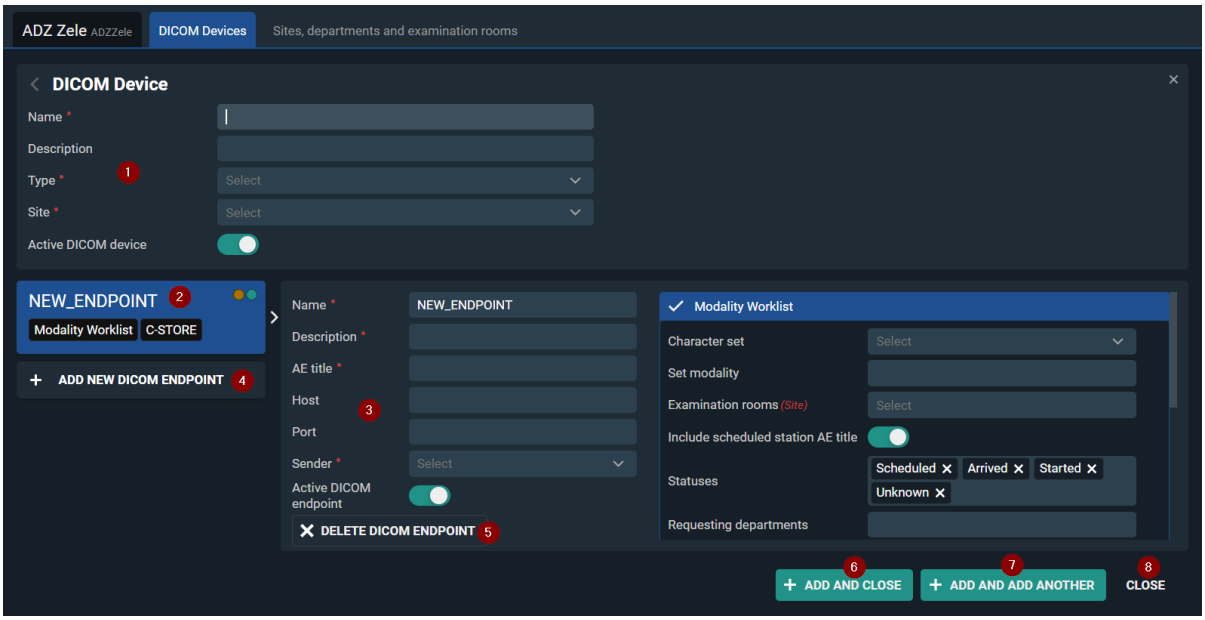
### List overview: Active vs. inactive DICOM Device

- Active DICOM Device and DICOM endpoints are marked with a green circle.
- Inactive DICOM Device and DICOM endpoints are marked with a red circle and greyed out.

## Add a new DICOM Device

Mandatory fields are marked with a red dot. Mandatory fields may vary depending on the options you enable.


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1. **DICOM Device information:** Enter all information for the DICOM device *(Modality)* to be configured.
   - **Name**: Mandatory field to identify your DICOM device.
   - **Description**: Optional field to add additional information.

     **Type**: Optional field to link the DICOM Device to a specific type from the predefined list. Options are: Internal, Workstation, Media creation, Post-Processing, PACS, VNA, Information System and Modality.

     **Site**: Single select drop-down list to define the site to which your DICOM device is linked. All sites linked to your source are listed here.

     **Note:**

     From the moment you select a site, you will be given a link to open the Sites management screen *(if you have the appropriate permissions)*.

   - **Active DICOM Device**: This is enabled by default. You can disable it if, for example, you are configuring a modality that is not yet live, but you want to it to be available.

     **Note:**

     If you try to save without filling in the mandatory fields, they will be highlighted in red and an error message will be displayed. This applies to all mandatory fields on this screen.


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2. **DICOM Endpoint:** This displays the endpoint name and different endpoint types.
   - This panel is an informative panel and cannot be edited.
   - By default, an endpoint is opened to be configured with the default name, NEW_ENDPOINT.
   - **Modality worklist & C-Store** endpoints are enabled automatically.
   - There are 3 types of indications possible for a DICOM endpoint
     - **Orange circle:** Unsaved changes on the endpoint.
     - **Green circle:** Active endpoint indication.
     - **Red circle:** Inactive endpoint indication.

     An endpoint may have multiple indications.
3. **DICOM Endpoint information:** Add the detailed information for the selected DICOM endpoint.
   - Active (enabled) DICOM endpoints are uncollapsed and marked in blue.
     - If the endpoint type is not enabled, the endpoint type is collapsed and greyed out.
     - Clicking on a greyed out endpoint type will enable the endpoint type..
   - All fields can be edited.

     **Note:**

     Change the name to something meaningful so you can easily find your endpoints.

   - Fields are mandatory unless indicated as (Optional). If mandatory fields are left blank, saving the DICOM Device will result in errors.

## Endpoint types

**Note:**

Some fields are not mandatory until you select a specific endpoint type. For example, Host and Port become mandatory if you enable DICOM Transfer Destination for this endpoint.

- **Name:** Mandatory field to identify your endpoint. NEW_ENDPOINT is filled in automatically, but change the name to something that makes sense and is easy to find again.
- **Description:** Optional field to add additional information.


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- **AE Title:** AE Title of the modality/DICOM Device.
  - This will be used to link received images to this specific DICOM Device. If images are received by an unknown AE Title, the association will be denied.
  - The AE Title has to be unique on source level.
- **Host:** This is the hostname or IP address of your modality/DICOM Device. This information is needed as part of the Routes DU POW is using to distribute images. Needed for e.g. C-Move and DICOM Transfer.
- **Port:** The port the DICOM Device/Modality will be using to open the connection between DeepUnity PACSonWEB and itself. This information is needed as part of the Routes DeepUnity PACSonWEB is using to distribute images. Needed for e.g. C-Move and/or DICOM Transfer.
- **Sender:** Contains a drop-down with Senders that are configured to be used for DICOM Devices.
  - The Sender is part of the Routes that is used in DeepUnity PACSonWEB to distribute images on.
  - This dropdown will **only** contain senders that are registered as "Linked DICOM Endpoints" *(this is been done by authorised DH Healthcare GmbH personnel)*.
  - Selecting a sender via the drop-down enables the sender to receive images originating from this AE title.
  - You can safely select any of the available senders (if multiple exist).*If you are unsure, please contact DH Healthcare GmbH to help you select the correct one.*

4. **Add new DICOM Endpoint**: Add an additional new DICOM Endpoint for this DICOM Device. *E.g. if a the Modality cannot use the same AE Title for different actions, e.g. DWML versus C-MOVE.*
5. **Delete DICOM Endpoint** To delete this specific endpoint, click **Delete DICOM Endpoint**.
6. **Add and close** To add the DICOM Device and DICOM Endpoints, close the screen and return to the DICOM Devices list, click **Add and close**.
7. **Add and add another** To save this DICOM Device and DICOM Endpoints and immediately create another one without navigating away from this screen, click **Add and add another**.
8. **Close** To close the screen and return to the DICOM Device list, click **Close**. You will be notified if you click close with unsaved changes.

## DICOM Endpoints

- **Modality worklist**

  You can configure the following options:


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- **Character set**: Single select drop-down with predefined values
  - When a modality makes a request to DeepUnity PACSonWEB, the character set defines which encoding will be used on the response. If the request from the modality does not specify a character set, the character set provided by the modality is used. If the stored modality does not have a character set specified, ISO 2022 IR6 will be used as the default.
- **Set modality**: Free text field
  - This option will update the DICOM tag modality with the defined value.
    - E.g. If you have a MWL Query that passes different modalities, CT, MR, US, ... and you have CR defined in Set Modality, we will overwrite the modality DICOM tag with CR for all studies.
- **Examination rooms**:
  - This list will be populated based on the site linked to your DICOM Device.
  - Ability to link the Modality to a certain examination rooms.
- **Include scheduled station AE title**: Toggle
  - By default enabled. If this is set, the AE title of the calling endpoint will be included in the MWL Response dataset.
- **Statuses**: Multi-select drop-down list
  - This setting is important if DeepUnity PACSonWEB provides the DICOM Modality Worklist (DMWL). The modality can store a list of selected study statuses. When the modality makes a DMWL request to DeepUnity PACSonWEB, the response will only contain studies whose status is in the list stored by the modality, regardless of whether the studies have images or not.
  - When the status of a study is changed to a status stored for the modality, the study will be present in the DMWL response when a new request is made.
  - By default, the statuses **Scheduled, Arrived, Started and Unknown** are added to a new endpoint.
    - You can add more if needed. This is a predefined list of all the statuses available in DeepUnity PACSonWEB: *(Unknown, Cancelled, Scheduled, Arrived, Started, Sending, Sent, Completed, DictationStarted, Saved, Dictated, PendingReportCorrection, ToValidate, PendingSecondValidation, Finalized)*
- **Requesting department**: Free fill in field
  - This field allows you to filter your Modality Worklist by requesting department.
- **Date**: Single select drop-down list


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- This field allows you to filter your Modality Worklist based on predefined date ranges.

- **C-Store**

  You can configure the following options: *(Not filled in by default)*

  - **Allowed abstract syntaxes**: A multi-select list from which one or more allowed abstract syntaxes can be selected.
  - **Allowed transfer syntaxes**: A multi-select list from which one or more allowed transfer syntaxes can be selected.

- **C-Find**

  You can configure the following options: *(Not enabled by default)*

  - **Allow affinity domains**: C-Find will return results from Sources included in the linked Affinity Domains.

    **Note:**

    Affinity Domains need to be setup in the Source Management pages on Sender level. (Please contact DH Healthcare GmbH to do this, if needed)

    - Affinity domains contains a list of one or more affinity domains and defines the scope of the C-Find.
    - **Allow proxy**:

      **Note:**

      Proxy needs to be setup in the Source Management pages. (Please contact DH Healthcare GmbH to do this, if needed)

      - The source that will be queried for studies will not be the Source to which the client is linked, but the Source that matches the calling AE of the C-Find request.
      - The proxy setting cannot be combined with the federated query settings.
      - The proxy does not require a patient to exist in the Source of the client *(Patient consent does not have to be set on source level)*.
    - **Return studies without images**
      - C-Find will return studies without images. This makes it possible to return empty studies with C-Find.

- **C-Move**

  You can configure the following options:


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- **Allow affinity domains**: C-Move of the studies will be allowed over affinity domains. *(Not enabled by default)*

  **Note:**

  Affinity domains need to be setup in the Source Management pages on Sender level. (Please contact DH Healthcare GmbH to do this, if needed)

  - Affinity domains contain a list of one or more affinity domains and define the scope of the C-Move.
  - Query to other affinity domains will:
    - Use the National Number to find matching patient records in other sources.
    - Will only return results if the patient exist in the Source of the client *(Patient consent needs to be set on source level. Please contact DH Healthcare GmbH to do this, if needed).*
  - **Allow proxy**: *(Not enabled by default)*

    **Note:**

    Proxy needs to be set up in the Source Management pages. (Please contact DH Healthcare GmbH to do this, if needed)

    - The source that will be queried for studies will not be the Source where the client is linked too, but the Source matching the calling AE of the C-Move request.
    - The proxy setting cannot be combined with the federated query settings.
    - The proxy does not require a patient to exist in the Source of the client nor patient consent has to be set.
  - **Is a destination**: *(Enabled by default)*
    - This means your DICOM Device can be used as a destination for C-Move.
    - When disabled, the following are also disabled: **Calling AE title**, **Preferred transfer syntax** and **maximum number of sending threads**.
  - **Calling AE title**:
    - Placeholder is set to DeepUnity PACSonWEB by default. Enter a different value to change the placeholder.
    - This is the AE Title that DeepUnity PACSonWEB will use for C-STORE.
  - **Preferred transfer syntax**: Predefined, single select drop-down list to select a transfer syntax.


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- **Maximum number of sending threads**: Predefined, drop-down.
  - Numeric value between 1 and 8.

- **DICOM Transfer Destination**

> **Note:**
>
> For now, you will not be able to use the worklist query to complete the study information in the transfer to PACS dialog when using a DICOM Endpoint as a transfer destination.

  - **Calling AE title**
    - Placeholder is set to DeepUnity PACSonWEB by default. Enter a different value to change the placeholder.
    - This is the AE Title that DeepUnity PACSonWEB will use for C-STORE.
- **Storage Commitment**
  - **Send reply to**
    - By default we will select the current endpoint as reply option. However, you can select any other endpoint as the storage commitment reply.
  - **Calling AE title**
    - Placeholder is by default set to DeepUnity PACSonWEB. If this needs to be changed, fill in another value, if this is still the case, you can leave it as is.

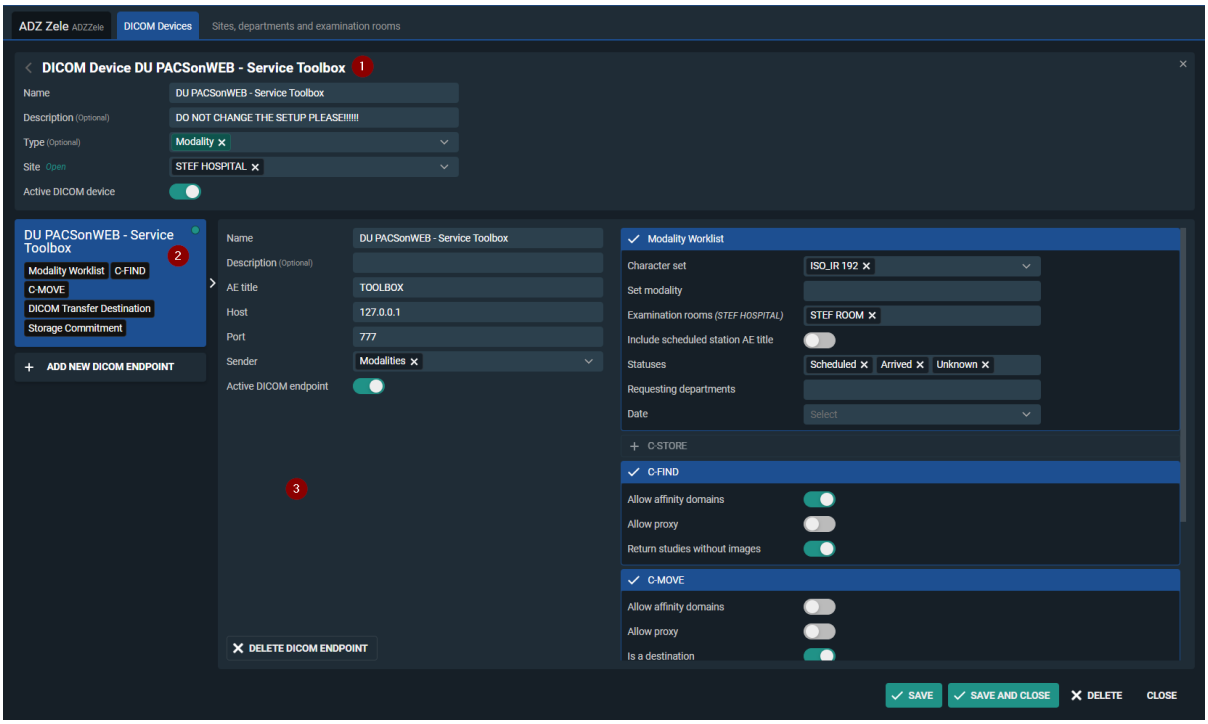
## Edit an existing DICOM Device

If DICOM Devices/Endpoints are already configured, you can simply click on any existing entry in the list and this will automatically open the edit screen.

The 1st endpoint associated with this DICOM Device is automatically opened. If you have more than one, you can select a specific endpoint by clicking on it.

All details of the selected DICOM Device and Endpoints are displayed.


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1. DICOM Device information containing all relevant information about your DICOM Device. All fields can be updated if necessary.

   Site is a single select field, if you select another site from the drop-down it will replace the currently selected site.

2. DICOM endpoint with the name and all the different endpoint types. This cannot be edited.
3. All detailed information about the selected DICOM Endpoint. All fields can be edited.

## 10.2 Sites, departments and examination rooms

## Sites, departments and examination rooms overview

From the **Source management** page it is possible to manage the **Sites, Departments and Examination rooms** of a source.

Access to this tab is determined by your permissions. If you do not have the permission to manage departments for a source, this tab will not be visible to you. If you require access, please contact DH Healthcare GmbH to grant the necessary permissions.


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**Note:**

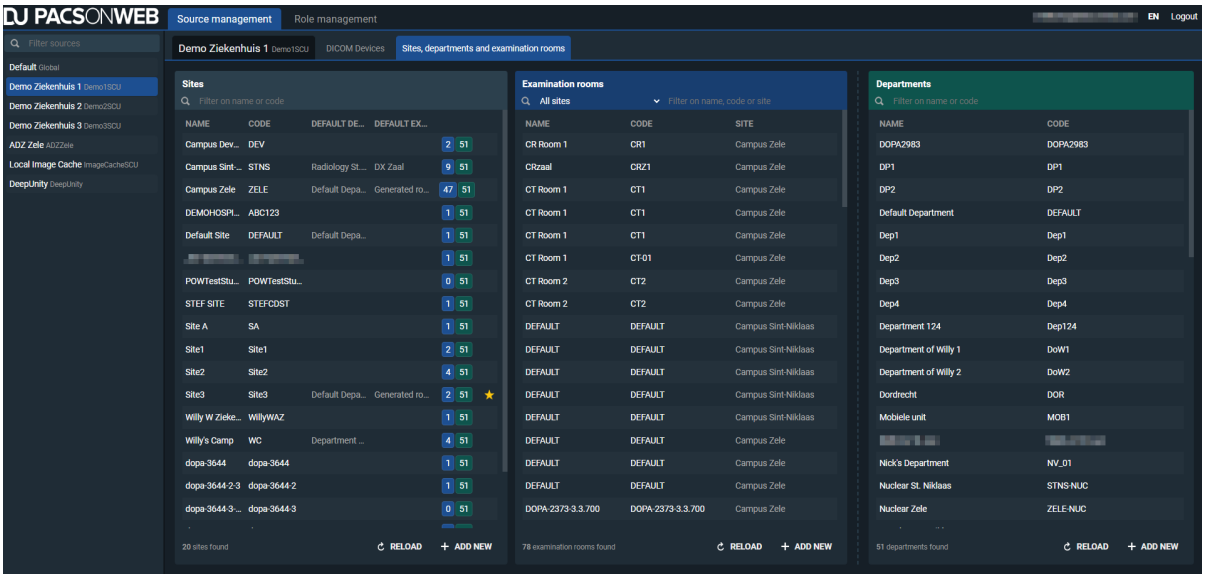
If you only have access to one source, it will be automatically selected and the source name label will be displayed. If you have access to more than one source, you can select the source you want to configure in the left panel.

At the bottom of each column are the following:

- The **Reload** button.
- The **add new** button.
- The number of sites, examination rooms or departments found. If a filter has been applied, this will be indicated.

Clicking on a site, examination room or department from the list in the **Sites**, **Examination rooms** or **Departments** columns will replace the list overview with a detailed information screen for that selection.

- Only the column from which you made a selection will display the detailed information screen.




Sites and examination rooms are physical locations and will always be linked to each other.

A department is most often a general name that will be used across different sites. For example, radiology, cardiology and neurology.

- Example: *A source can have multiple sites. Those sites can have multiple examination rooms. The departments can be shared across the different sites.*


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**Note:**

**HC Party**

Studies are published on RSW/CoZo. The performing department sent by DU POW is radiology (deptRadiology) by default. Using the department HcParty property, it is possible to configure a different department type in order to visualize the correct department in CoZo/RSW.

For a list with all possible HcParty values, departments start with the prefix 'dept' see: https://www.ehealth.fgov.be/standards/kmehr/en/tables/healthcare-party-type

## Sites

You can filter sites by name or code.

The **Name**, **Code**, **Default department** and **Default examination room** linked to the site is displayed.

The number of sites found is displayed at the bottom of the column.

Selecting a site will automatically filter the examination rooms column for that site, and the number of examinations room found for that site will be displayed at the bottom of the examination rooms column. The department column will remain unchanged.

### Configuring a site

You can set a site as the default site for a source. The default site is indicated by the ★ favorites icon in the list.

Each list is sorted by **Name**.

### Adding a new site

To add a new site:

1. Click the **Add New** button in the site column.
2. Enter the relevant information for the site (**Name**, **Code**, **Default department**).
3. Enter the relevant information for the examination room (**Name** and **Code**).
4. Click the **Add New** button.


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**Note:**

Before you can successfully add your site and examination rooms, all fields for both site and examination room must be filled in. If a mandatory field is left blank, an error message will be displayed.

5. Click **Save and close**.

If you select a site from the list, in the information panel, the default status is indicated.

- The default site is indicated by the label **is default site**.
- All other sites not set at the default will have the button **set as default site**.

A source can have only 1 default site. Clicking on **set as default site** will override the previously defined site.

## Editing a site

To edit a site:

1. Select a site.
2. Make your changes to the available fields:
    - Name (mandatory field)
    - Code (mandatory field)
        - Must be unique on source level.
    - Default department (mandatory field)
    - Default examination room (mandatory field)
        - Only the rooms linked to this site will be displayed in the drop-down list.
    - **This is the default Site for the following WCF Clients** (Optional field)
    - **This is the default Site for the following QR Servers** (Optional field)
    - **SET AS DEFAULT** (Site, optional setting)

**Note:**

Similar to the list overview, you can see which departments and examination rooms are linked to this site. This information cannot be edited within the site pane. However, clicking on a linked department or examination room will open it in the respective column, where it can be edited and saved.

3. Click **Save and close**.


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### Deleting a site

To delete a site:

1. Select the site for deletion.
2. Click **Delete**.

There are built-in restrictions for deleting a site. A site cannot be deleted if:

- It is linked to one or more examination rooms that have linked studies.

> **Note:**
>
> Deleting a site that has one or more examination rooms with no linked studies will delete the linked examination rooms.

- It is defined as the default for the current source.
- It is defined as the default site for one or more WCF clients.
- It is defined as the default site for one or more QR Servers.

## Departments

In the departments column, you can filter by **name** or **code**.

The list is sorted by name and displays both the name and code of the department.

### Adding a department

To add a new department:

1. Click the **Add New** button in the department column.
2. Enter the relevant information for the department:
   a. **Name**
   b. **Code**

   > **Note:**
   >
   > The department code must be unique on the source level.

   c. **HcParty**
3. Click the **Add New** button.


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**Note:**

Before you can successfully add a department, all fields must be filled in. If a mandatory field is left blank, an error message will be displayed.

4. Click **Save and close**.

## Editing a department

To edit a department:

1. Select the department.
2. Make your changes to the available fields:
   - Name (mandatory field)
   - Code (mandatory field)
   - HcParty (*Used for Cozo permissions)*
   - Default department for WCF clients *(Filtered drop-down based on source)*
   - Default department for QR servers *(Filtered drop-down based on source)*

**Note:**

Each field can be set or changed.

3. Click **Save and close**.

**Note:**

When editing a department, the logic will check if the Code is unique on source level.

## Deleting a department

To delete a department:

1. Select the department.
2. Click **Delete**.

Deleting a department has some built-in restrictions. A department cannot be deleted if:

- It is already linked to an order as performing department.
- It is defined as the default department for one or more sites.
- It is defined as the default department for one or more WCF clients.


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- It is defined as the default department for one or more QR Servers.

## Examination rooms

In the examinations column, you can filter by **name**, **code** or **site** using a drop-down list or a free text field.

The list is sorted by name.

### Adding an examination room

**Note:**

Previously, an examination room was linked to a department. An **examination room is now linked to a site.**

To add a new examination room:

1. Click the **Add New** button in the examination room column.
2. Enter the relevant information for the examination room:
   a. **Name**
   b. **Code**

      **Note:**

      The examination room code must be unique on the source level.

   c. **Site**
3. Click the **Add New** button.

   **Note:**

   Before you can successfully add your examination room, all fields must be filled in. If a mandatory field is left blank, an error message will be displayed.

4. Click **Save and close**.

### Editing an examination room

To edit an examination room:

1. Select an examination room.
2. Make your changes to the available fields:
   - Name (mandatory field)


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- Code (mandatory field)
- HcParty (*Used for Cozo permissions)*
- Default department for WCF clients *(Filtered drop-down based on source)*
- Default department for QR servers *(Filtered drop-down based on source)*

> **Note:**
>
> Each field can be set or changed.

3. Click **Save and close**.

## Deleting an examination room

To delete an examination room:

1. Select an examination room.
2. Click **Delete**.

Deleting an examination room has some built-in restrictions. An examination room cannot be deleted if:

- It is already linked to a study.
- It is defined as the default examination room of a site


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# 11 DeepUnity PACSonWEB Application (multi-monitor application)

The DeepUnity PACSonWEB application provides support for the use of multiple screens for viewing images via DeepUnity PACSonWEB. It also supports integrations with external apps and viewers.

This allows you to maintain your DeepUnity PACSonWEB workflow but at the same time use the study data in other supported applications.

As this is a separate application, you need to download it, install it, and configure the monitor setup. If you want to change the configuration after the initial setup, you can always do so in your User settings > My Account > Multi-monitor.

**Tip:**

You can get to your user settings in different ways:

- via the settings icon in the title bar;
- if your title bar is not shown, via the menu icon ;
- by clicking your username (in the title bar or in the menu).

## See also

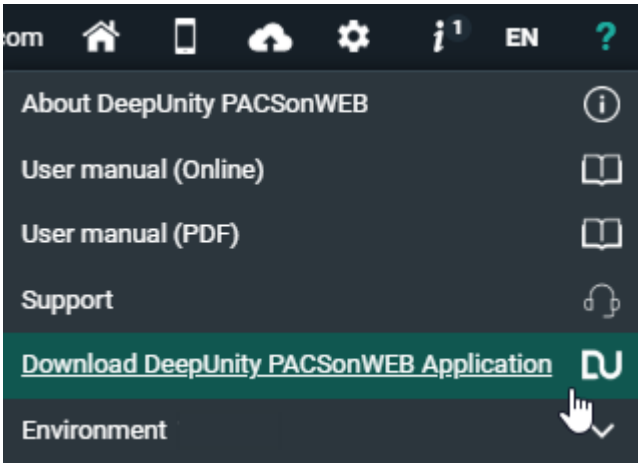
Configuring the DeepUnity PACSonWEB Application (Page 407)
DeepUnity PACSonWEB Application menu (Page 412)
Installing the DeepUnity PACSonWEB Application (Page 402)
My account (Page 101)

## 11.1 Installing the DeepUnity PACSonWEB Application

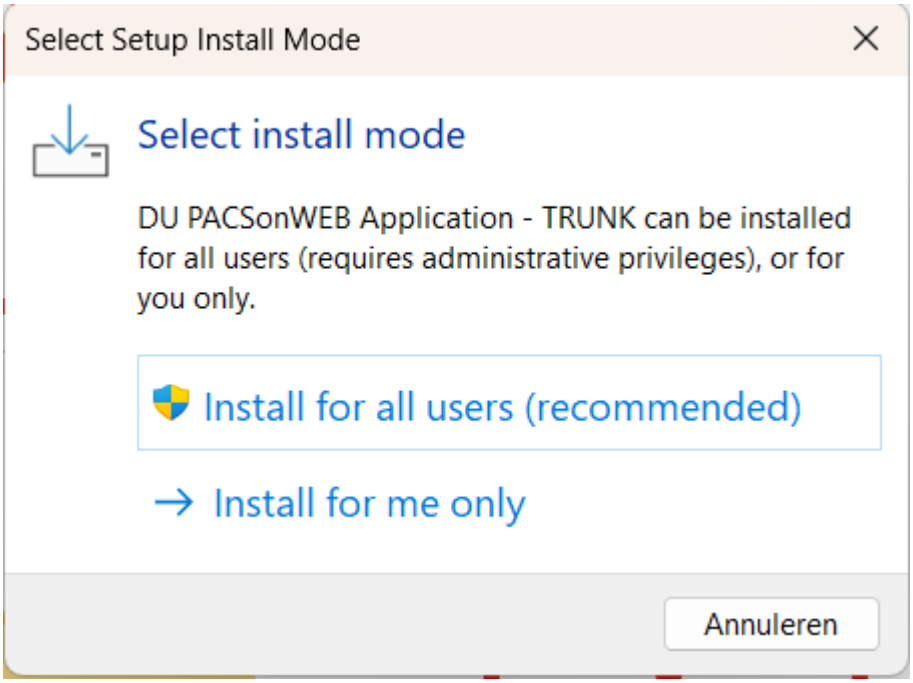
For setting up the DeepUnity PACSonWEB Application, you first need to download it and then run the installer. This will install the application for multi-monitor use as well as the auto update feature on your computer.


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1. Download the DeepUnity PACSonWEB Application via the browser. The easiest way to download the installer is via your DeepUnity PACSonWEB environment.
   a. Click on the help icon in your top toolbar.
   b. Select **Download DeepUnity PACSonWEB Application**.




2. Click on the downloaded .exe file to run the installer.
3. Choose your install mode.




- **Install for all users (recommended)**:

  This will install the binaries in the Program Files folder. A **DeepUnity PACSonWEB Application** shortcut will be created for every user.


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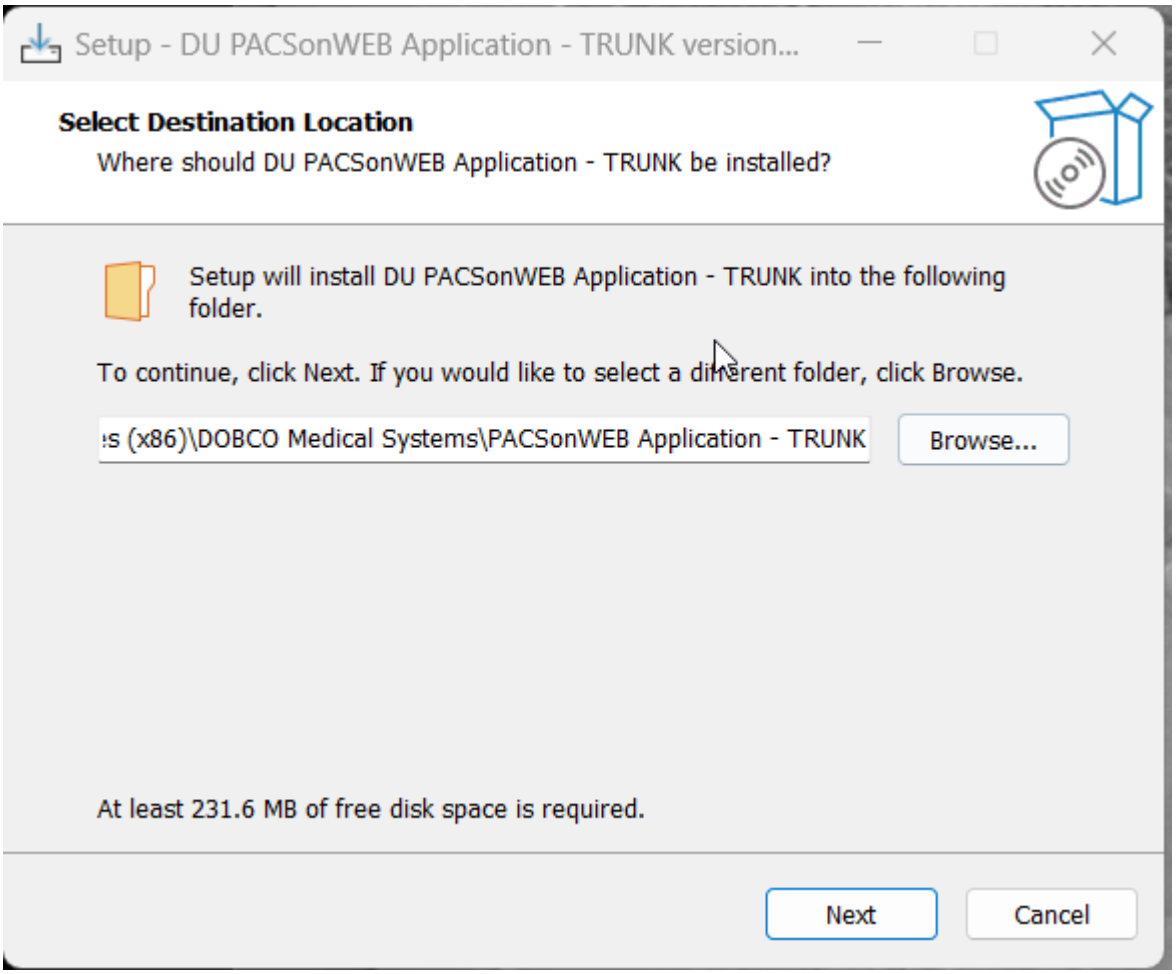
**Note:**

For this option, you need to have admin rights.

- **Install for me only**:

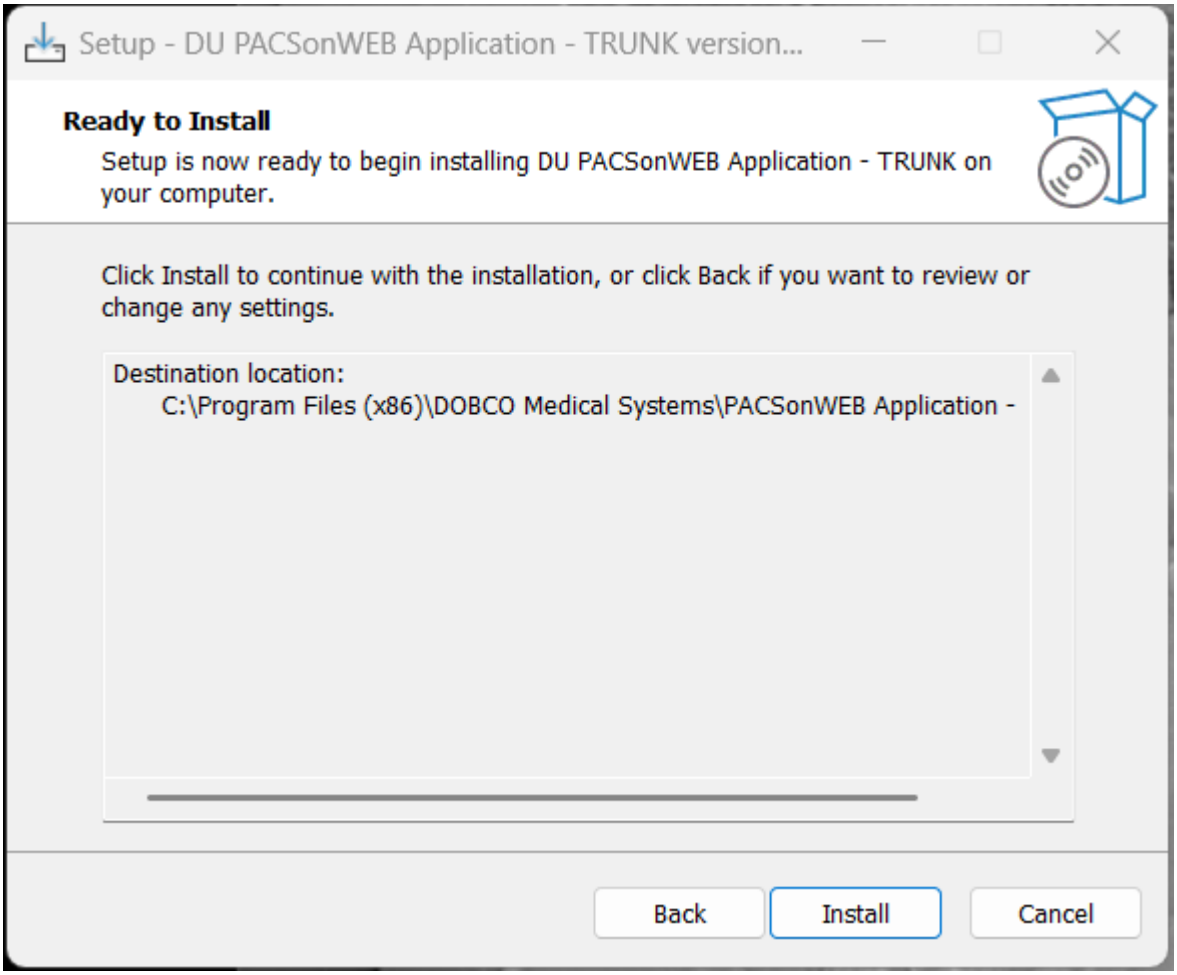
  This will install the binaries in the AppData folder. A **DeepUnity PACSonWEB Application** shortcut will be created just for the current user.

4. Choose the directory for the files to be installed and click **Next**.



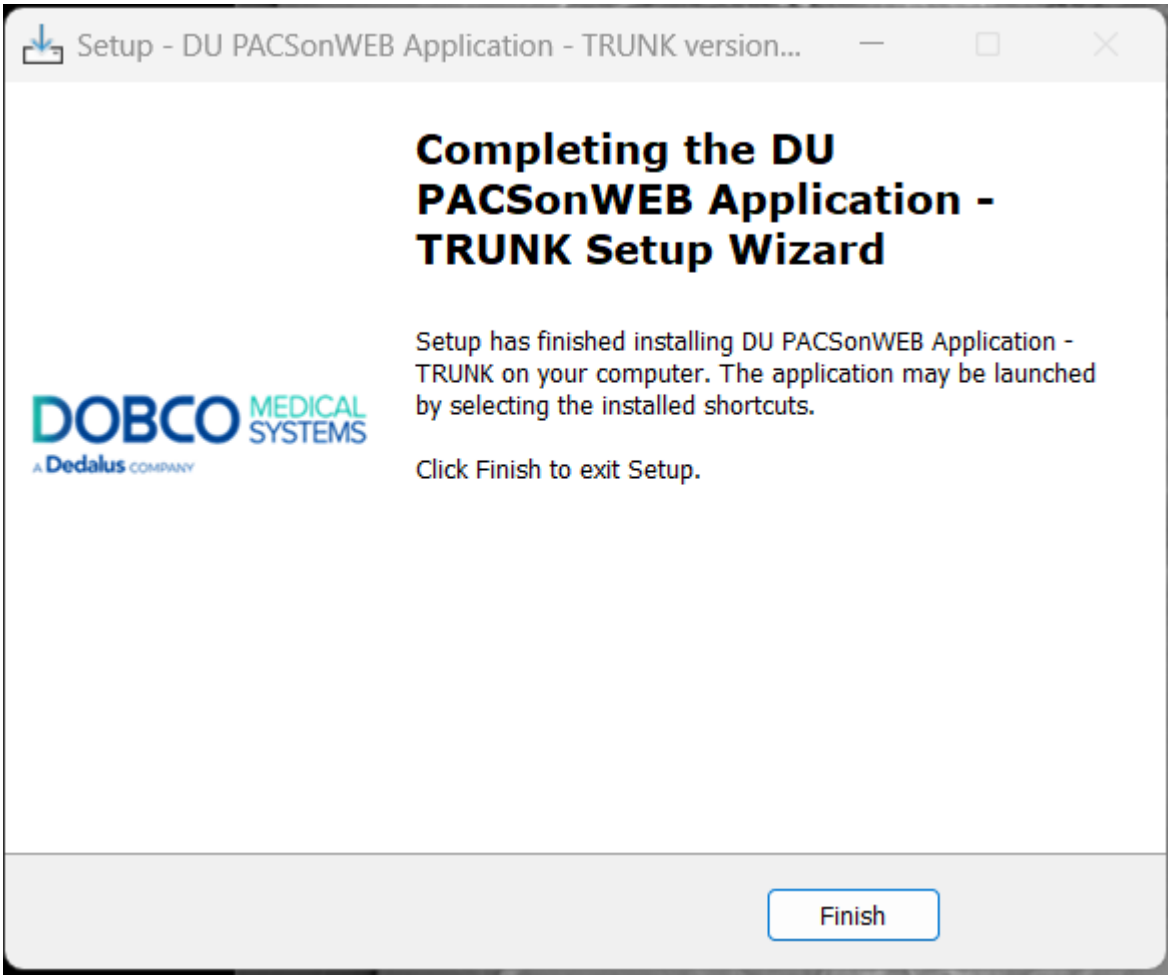

5. Review your chosen configuration and click **Install**.


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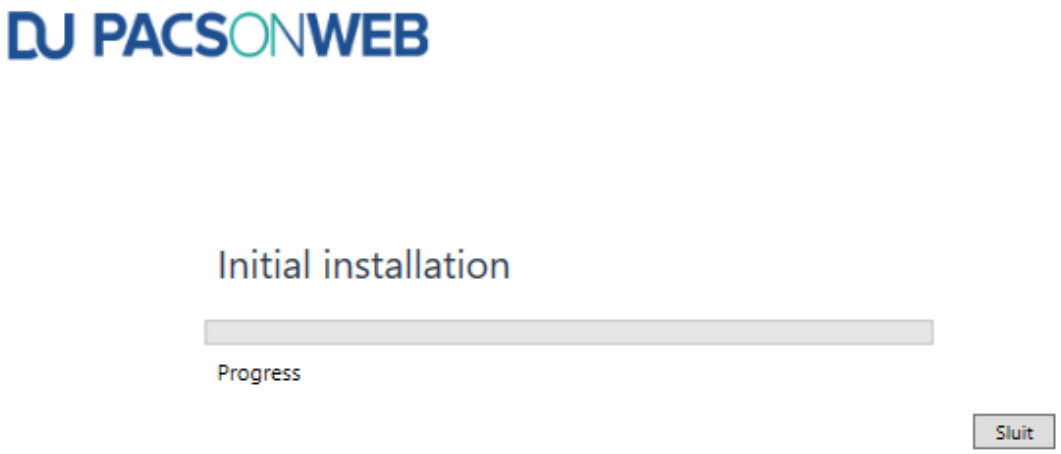

6. Done!


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Now you (and all other users if you chose that option) will have a new shortcut in your Start Menu. After clicking the shortcut, you will see the following screens:


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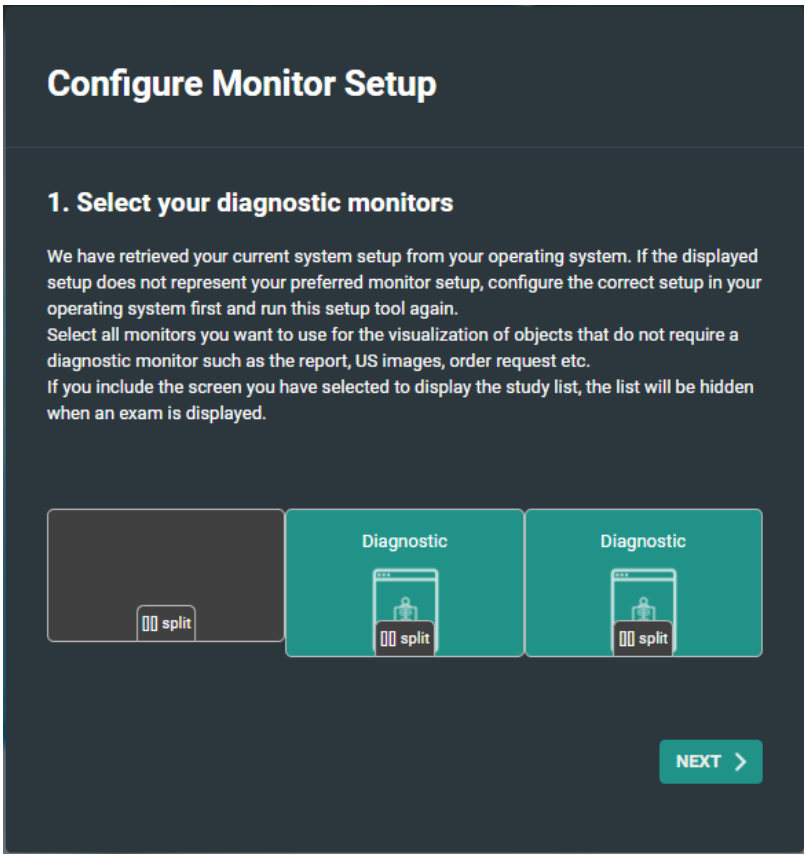
When this update is complete, you will be presented with the DeepUnity PACSonWEB login screen and you can proceed to login.

## 11.2 Configuring the DeepUnity PACSonWEB Application

Perform the following steps to configure your monitor setup:

1. Select your diagnostic monitors

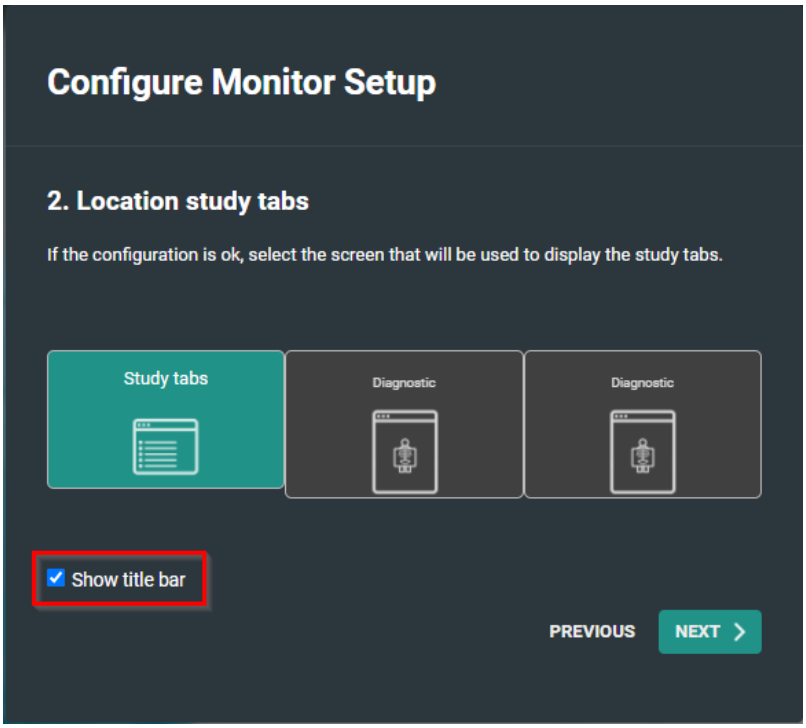

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a. Click a monitor to select / deselect it as a diagnostic monitor.
b. Click **Split** to divide a large screen in two virtual separate monitors. Click **Merge** to undo this.

2. Select the location of the study tab

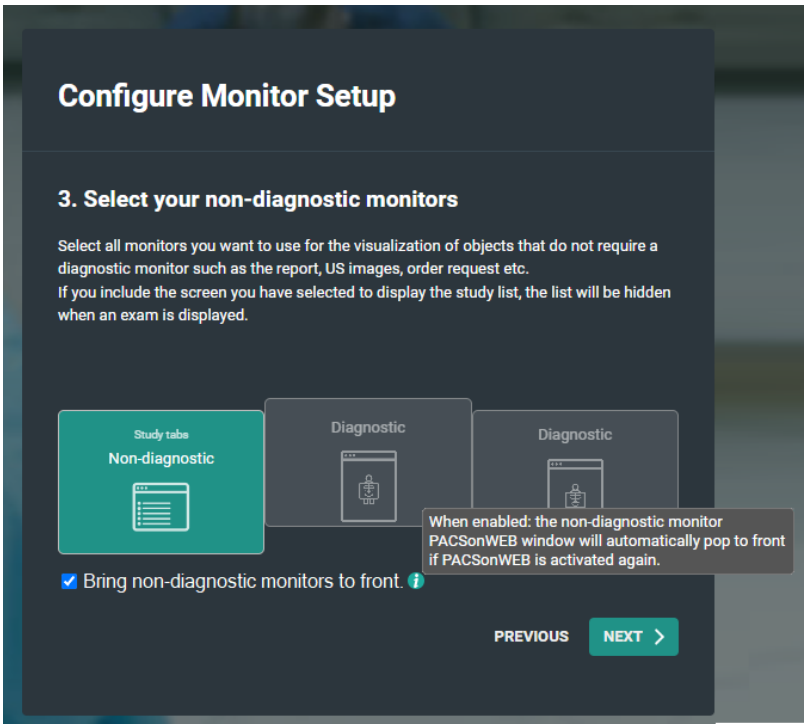

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- Show title bar is selected by default.

  If you choose to deselect it, it can always be manually turned on by clicking on the **Visible elements** icon and selecting **Title bar** from the drop-down list.

3. Select the non-diagnostic monitor





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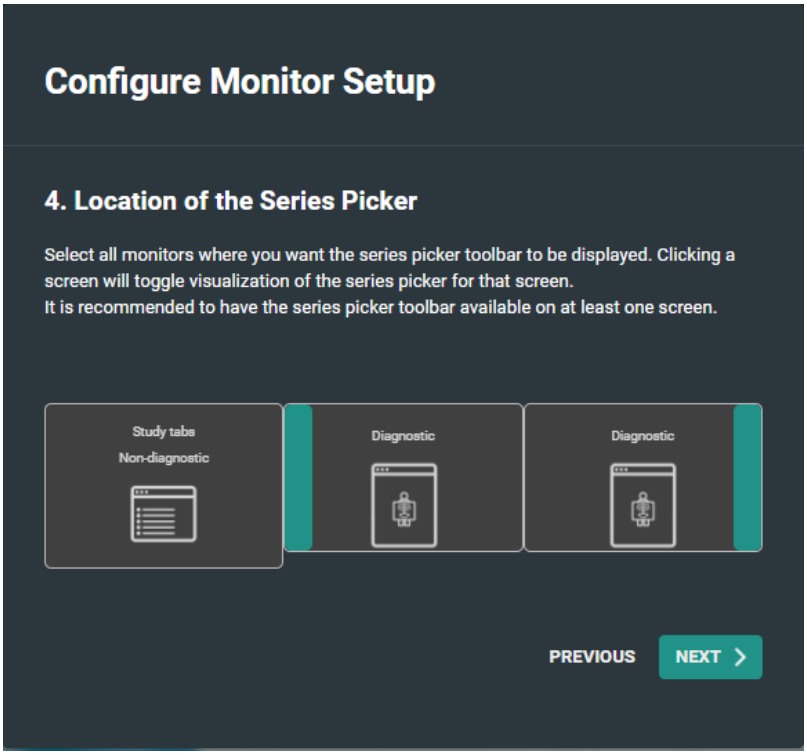
In this step you have the option to bring the non-diagnostic monitor to front or not.

By default this is checked, so the default behavior does not change.

**Note:**

If in step 1, you selected only one monitor as non-diagnostic, this configuration step will be skipped.

4. Select location of series picker(s)

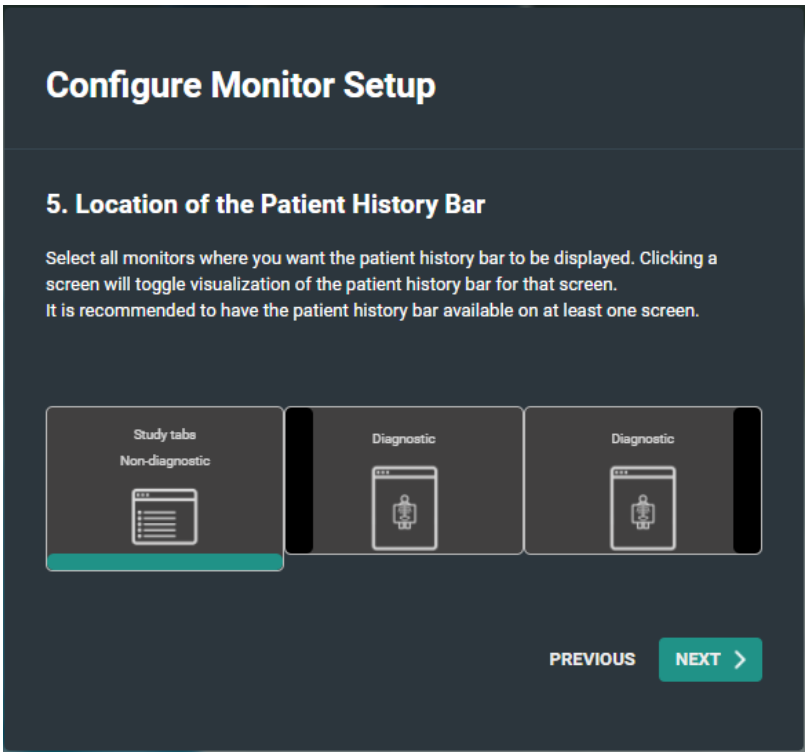



- You can modify the location of the series picker by clicking the monitor.

  The series picker will be displayed subsequently on the selected screen on the left side, the right side or not at all.

5. Location of patient history bar

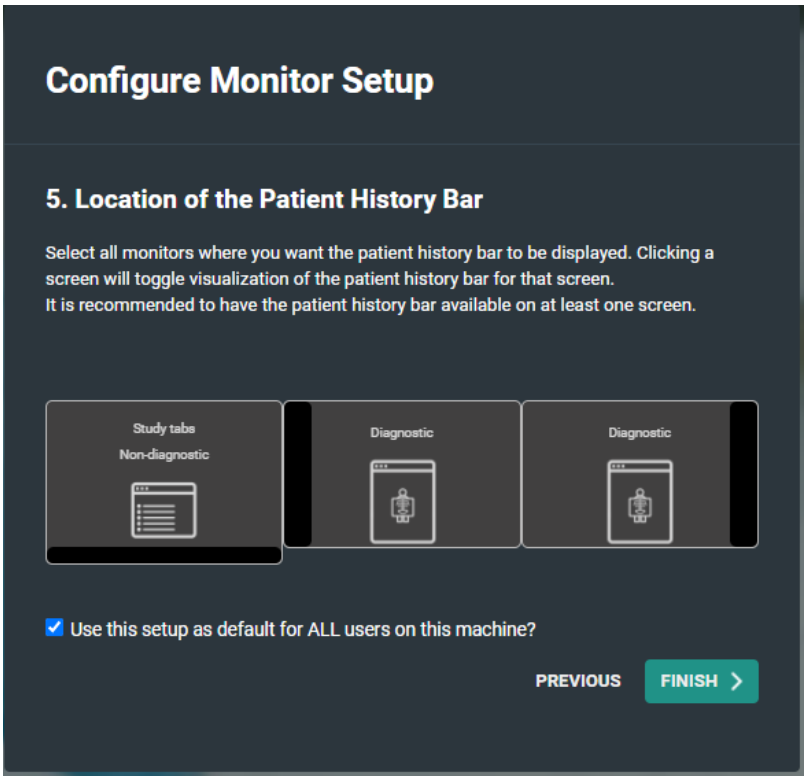

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You can either display or hide the series picker at the bottom of the screen by clicking on a the monitor.

6. Confirm the monitor configuration


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a. Click **Finish** to confirm your monitor configuration.

By default the checkbox to use this configuration for all users is enabled.

If other people using the same workstation in a different configuration you should disable this option.

## 11.3 DeepUnity PACSonWEB Application menu

This menu offers the possibility to clear cookies, restart the DeepUnity PACSonWEB Application, and/or locate the log files of the application.

To access the menu, you either have to be on the login page of DeepUnity PACSonWEB or already be logged into DeepUnity PACSonWEB .

1. Press the **ALT** key.

   The menu will pop up in the left upper corner of your screen.

2. Go to **Settings** and select either **Clear session cookies**, **Clear all cookies and restart application**, or **Open log folder**.


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# Version and remote assistance

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The label of DeepUnity PACSonWEB can be displayed by clicking on **About DeepUnity PACSonWEB** from the Help menu ? on the top right of the screen.

Within this screen the following information is displayed:

(1) Link to our support page with frequently asked questions and answers.

(2) All information with respect to the manufacturer of DeepUnity PACSonWEB.

(3) All information with respect to the actual version of DeepUnity PACSonWEB and the corresponding release date.

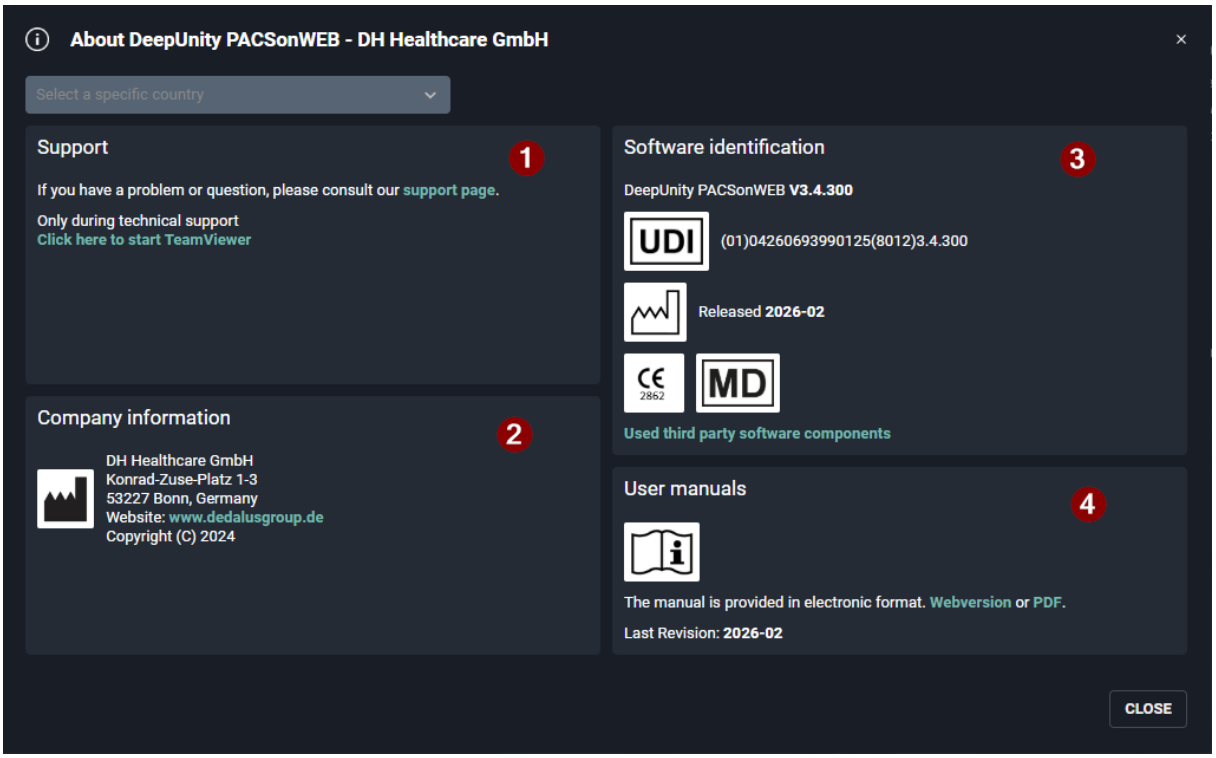
(4) All information with respect to the manual for DeepUnity PACSonWEB and the latest revision date.

**Note:**

Sections (2), (3) and (4) allow the addition of supplementary information. If country-specific information must be added to the About box for a country using DeepUnity PACSonWEB as a medical device, please contact **Dedalus Healthcare**. If additional information is configured for multiple countries, a drop-down menu will be displayed at the top of the **About box**, allowing the user to select the desired country.


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**Note:**

In this screenshot the version number is v3.4.300.

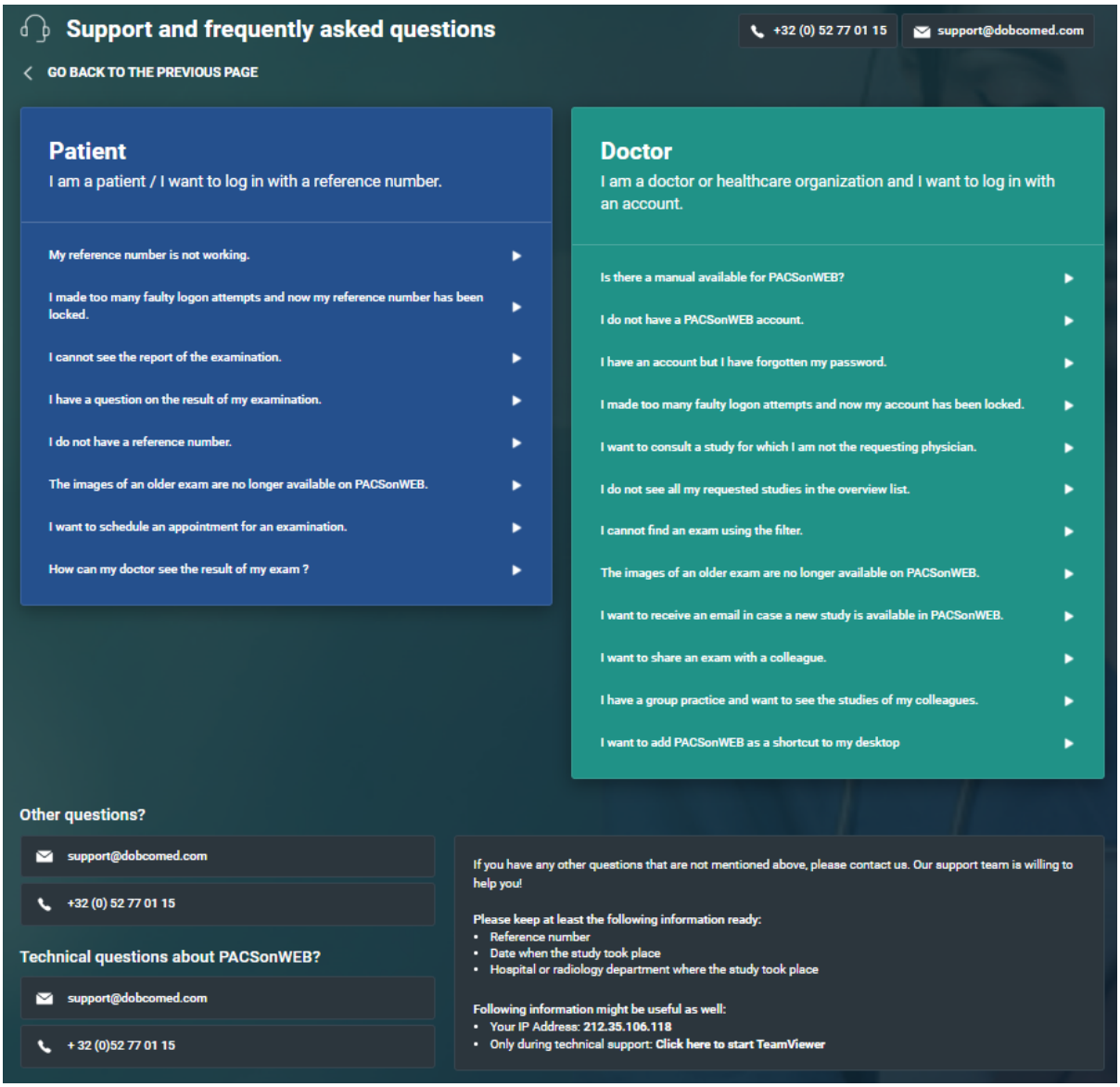
From the Help menu, you can also

- consult the online user manual
- download the user manual in PDF format
- consult the support page (see below)
- download the DeepUnity PACSonWEB application for multimonitor support

If you experience an issue when using DeepUnity PACSonWEB, you can consult our 'Support page'.

This page lists the most frequently asked questions and answers.

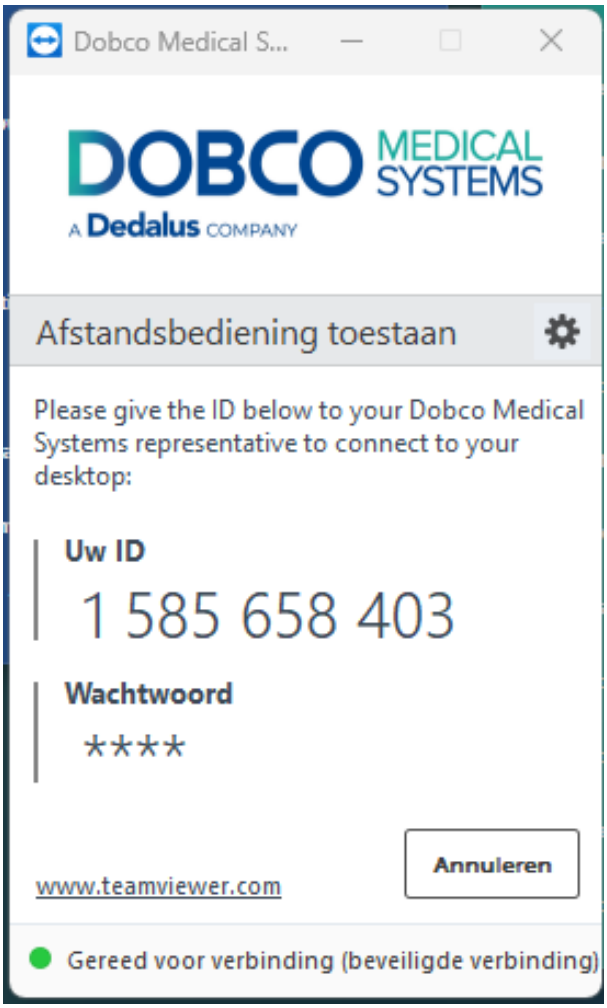

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If the answer to your question is not listed, you can let one of our service desk agents control your pc remotely.

Select “Click here to start teamviewer” at the bottom at the section “Other questions or issues?” at the bottom of support page and pass your Team Viewer ID to the support agent.


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## 12.1 Release notes

Versions prior to 3.4.100 were labelled PACSonWEB and released under a different process and certification.

### 12.1.1 Release notes version 3.4.400

| **New, changed, or removed functionalities** | |
|---|---|
| SIP-3175 | **Secondary captures**<br>For users with the proper permission, it is now possible to create a screenshot of a native DeepUnity PACSonWEB viewport, and save it as a new image |


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| | |
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| | (a.k.a. a secondary capture). All image manipulations (zoom, pan, window/level, ...) and annotations will be included in the capture. Existing secondary captures can be deleted. |
| SIP-3368 | **Configurable mouse buttons**<br>Next to the left and middle mouse buttons, certain actions (zoom, pan, scroll, window/level) can now also be assigned to the right mouse button, or the left + right button combination. |
| SIP-4927 | **Report modified date/time**<br>It is now possible to filter worklists based on the last date/time a report has been modified. A new column is also able to show this information in the worklist (e.g. for sorting). |
| SIP-5333 | **Prior studies**<br>Updates in the user interface to differentiate prior studies more clearly from the current study. Visualization of the prior study age. |
| SIP-5517 | **RSW study description**<br>You can now see the study description for PACSonWEB studies posted in the RSW (Réseau Santé Wallon) platform. |
| SIP-5529 | **Manage new words**<br>When using the Recognosco Atlas speech integration, it is now possible for users to manage a personal dictionary of words that are unknown in the default speech context. |
| SIP-5590 | **Account request form** |


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| | Several improvements to the account request form, to ensure valid and complete requests are entered. |
| SIP-5643 | **TLS 1.3 support**<br>The communication between the DeepUnity PACSonWEB gateway and the cloud infrastructure now supports TLS 1.3. If the Windows version on the gateway supports it (as of WIndows 11 and Windows Server 2022), the local DICOM communication (with PACS / modalities) can also support TLS 1.3. |
| SIP-5667 | **Report watermark**<br>Reports in the 'Draft' or 'Preliminary' status can now have a watermark when printing the report, to make it clear that the report is not yet validated. |
| SIP-5766 | **Multi-monitor app**<br>Users can now easily clear the session cookies, and access the log folder, when needed for troubleshooting. |
| SIP-5906 | **Consolidated patient history**<br>When a study has a PDF report, a user is now able to flag (or unflag) key images for that study, assuming that user has the proper permissions. |
| SIP-5937 | **Sticky annotation tool**<br>A new user preference allows to have sticky annotation tools. When enabled, annotation tools will remain active after they have been used (e.g. to perform multiple measurements in a row). |
| SIP-6038 | **Window/level** |


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| | When adjusting window/level by moving the mouse up/down/left/right, the behavior in native viewports and MPR viewports (DeepUnity Volume Rendering) is now aligned. |
| SIP-6271 | **DeepUnity Volume Rendering measurements**<br>Distance, angle and circular ROI measurements are now available within the DeepUnity Volume Rendering (3D) component. |
| SIP-6335 | **Multi-order reporting**<br>It is now possible to create a single report for studies across multiple orders. Only studies for the same patient, within a 72h time window from the current study, can be included. |
| PAD-8841 | **REMOVED – Write access to report**<br>When sharing a study, it is no longer possible to share with write access to the report. |
| PAD-9162 | **REMOVED – Voice command**<br>When using Recognosco speech recognition, the voice command to start a numbered list did not work. The voice command was removed, as the functionality is not supported. |
| **Resolved defects** | |
| PAD-8858 | **Dragon**<br>Dragon speech recognition did not properly work in the multi-monitor app when the reporting panel was not on the main window (the one showing the study tabs). |


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|---|---|
| PAD-8860 | **Dragon**<br>Text could be wrongly copied when changing cursor position in the report panel while the speech recognition was still processing audio. |
| PAD-9090 | **Dragon**<br>Text duplication could still occur in certain scenarios, when using the Dragon speech recognition. |
| PAD-9095 | **Dragon**<br>When the title bar was not shown in the multi-monitor app, the Dragon speech recognition was not working. |
| PAD-8882 | **Patient report**<br>After a study merge, it was possible that a report was already available to the patient, before the configured delay. |
| PAD-8884 | **Add study**<br>When automatic translation was enabled in the web browser, it could break the 'Add study' functionality. |
| PAD-8887 | **Bullet list**<br>A new line in a bullet list did not always show another bullet. It also happened that a character at the end of the line was removed, when a new line was added in a bullet list. |
| PAD-8889 | **Identification portal**<br>When a user was logged into the multi-monitor app with a username and password (no external login), after a while it could happen that the user was |


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| | |
|---|---|
| | redirected to the IDP (identification portal) page. |
| PAD-8897 | **Patient merge**<br>An error could occur when trying to merge two patients. |
| PAD-8899 | **Reporting**<br>When a user minimized the browser while editing a report, this sometimes released the report lock (which made the report editable for other users). |
| PAD-8900 | **News banner**<br>News banner pop-ups were not hidden when needed. |
| PAD-8903 | **Worklist**<br>When a user skipped a procedure of a multi-procedure order, the user was returned to the worklist, instead of navigating to the next study. |
| PAD-8904 | **Delete study**<br>It was possible to delete a study in the study administration page, without acknowledging that this may cause irreversible loss of data. |
| PAD-8906 | **Anonymized share**<br>When sharing an anonymized study, the user was not informed that the report (which cannot be anonymized) was not included in the share. |
| PAD-8907 | **Upload code**<br>Sending an upload code to an email address did not allow to have capitals in the email address. |


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|---|---|
| PAD-8911 | **DICOM processor**<br>DICOM objects which had a backslash character in the DICOM tag (0040,A160) were not processed correctly. |
| PAD-8914 | **Recognosco Atlas speech recognition**<br>Speech recognition was not initialized due to special characters in the text blocks. |
| PAD-8916 | **Text blocks**<br>Certain (anonymous) users had access to the 'Add text block' button at the bottom of the report panel, while they did not have that permission. |
| PAD-8917 | **WCF client logs**<br>A newly installed WCF client did not automatically create the log folder. As a result, no logs were available. |
| PAD-8931 | **DeepUnity Volume Rendering**<br>The zoom level of a particular view (e.g. axial) could get out of sync with the other views. |
| PAD-8935 | **End of report**<br>When using the Dragon speech integration, using the 'end of report' voice command would put the cursor at the end of the report, but would paste recognized text at another location. |
| PAD-8948 | **Distance measurement**<br>When repeatedly manipulating a distance measurement, the label moved away from the ruler. |
| PAD-8962 | **DICOM processor** |


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|---|---|
| | DICOM files which had an invalid value for DICOM tag (0020,0037) (Image orientation patient) could not be processed. |
| PAD-8964 | **Order number**<br>When a validated report was sent through HL7 ORU with an empty order number, the order number in the PACSonWEB study list was no longer visible. |
| PAD-8970 | **PACS sync**<br>The study queue-based PACS synchronization (SyncType = 1) did not work. |
| PAD-8977 (SIP-6309) | **Large study comments**<br>Studies containing the DICOM tag Study Comments (0032,4000) and exceeding 2024 characters, were not processed. |
| PAD-8979 | **MPR/3D**<br>MPR and 3D didn't work for an image series that also contained non-visible DICOM objects. |
| PAD-8993 | **SMS**<br>When an upload code was generated and sent by SMS, the link included in the SMS pointed to an incorrect location. |
| PAD-9012 | **DICOM transfer**<br>When a DICOM transfer or autotransfer was performed to a PACS system that rejected the association, the affected queue items were not marked as failed. |


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|---|---|
| PAD-9032 | **Upload**<br>When uploading non-DICOM files via the Upload portal, the upload was shown as successful but the study never became available in PACSonWEB. |
| PAD-9046 | **DICOM retrieve**<br>DICOM C-MOVE requests resulted in incomplete sets of DICOM files being delivered (compared to C-FIND results) when the study was not fully available in the local image cache. |
| PAD-9084 | **Cookies**<br>Users of the multi-monitor app could not work (errors in the user interface) until they clear their cookies. |
| PAD-9089 | **Move series**<br>In certain cases, when a user retried to move a series in the study administration, the task was shown as completed and the action marked as done, while actually no images were moved. |
| PAD-9124 | **Accession number**<br>When there was only a HL7 file (ORM, ORU) for a study, and images or series were moved towards that study (in the study administration), the accession number was saved as the StudyInstanceUID of the destination study. |

## 12.1.2 Release notes version 3.4.300 (February 2026)

| **New, changed, or removed functionalities** |
|---|


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| | |
|---|---|
| SIP-2300 | **Expired user account**<br>When a user account has expired, the user will now be informed about his/her expired account when trying to log in. |
| SIP-4546 | **DICOM Hub**<br>The legacy central DICOM router (running within the DeepUnity PACSonWEB cloud / data centre) is replaced by the new DICOM Hub, to manage all handling of DICOM objects. |
| SIP-4613 | **Filter on last X hours**<br>In several worklist and study list filters (e.g. study date, report edited, last modified) it is now possible to filter on the last 4, 12 or 24 hours. |
| SIP-5360 | **Security**<br>Update external components to the latest available version. |
| SIP-5555 | **About box**<br>The product labelling (About box) can be customized - if needed - for every country where DeepUnity PACSonWEB is deployed as a medical device. |
| SIP-5585 | **Microsoft Dragon Speech recognition**<br>Microsoft Dragon Speech recognition is now available as a recognition engine for creating reports in DU PACSonWEB. If you want to use this new option, please contact your local sales or service representative for more details. |
| SIP-5816 | **Volume Rendering Improvements**<br>New projection modes are available in DeepUnity Volume Rendering: minimum (MINIP) and average (AVGIP) |


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|---|---|
| | intensity projections. Window/level presets can now also be applied within the Volume Rendering component. |
| SIP-5819 | **DICOM Link Exchange (DIN TS 19455)**<br>DeepUnity PACSonWEB now supports the generation of DICOM Link Exchange (DLX) compliant URLs and QR codes for sharing one or more studies of a patient, including an OpenAPI implementation to allow external systems to download such studies securely. |
| SIP-5832 | **Privacy policy**<br>General conditions and privacy policies are now customized for various countries. |
| SIP-5848 | **Relink DICOM study**<br>The 'Move study' feature in the study administration panel has been renamed to 'Relink DICOM study'. Additional information has been added in the user interface, to make it more clear to the user what will be the result of using this feature. |
| SIP-5893 | **Flagging key images for studies with a PDF report**When a study has a PDF report, a user is now able to flag (or unflag) key images for that study, assuming that user has the proper permissions. |
| SIP-5934 | **Failed login attempts**<br>The number of allowed failed login attempts (before the user account is locked) can now be configured. |


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|---|---|
| SIP-6008 | **Application user metadata**A security update has been done, to make sure that irrelevant or sensitive user information is no longer exposed in the HTTP traffic. |
| SIP-6037 | **Inconsistent colour of 3D volume rendering**<br>An issue was fixed where the 3D volume rendering changed color when rotating the volume. |
| SIP-6066 | **Upload multiple studies for the same patient**<br>When uploading multiple studies for the same patient (identical patient ID) through the upload portal, all uploaded studies will now share the same pseudonymized patient ID. |
| SIP-6099 | **Delete or publish annotations**<br>'Delete all my annotations' now deletes all annotations within the displayed series, instead of only deleting the annotations on the displayed image. 'Publish' now publishes all new annotations across all series in the active study. |
| SIP-6273 | **Window/level sensitivity**<br>On image series with DICOM PixelPadding attributes, the window/level action was more sensitive than on other series. The system now handles DICOM PixelPadding values properly. |
| SIP-6278 | **Studies**<br>Adapt data type of internal ID of Image records to support 2+ billion images for a source. |


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| Resolved defects | |
|---|---|
| SIP-6217 | **Addendum workflow**<br>When the system is configured to send out reports as plain text in the outgoing HL7 ORU message, any created addendum would still be exported as HTML. This has been resolved. |
| SIP-6123 | **Report review**<br>In the pop-up dialog to select a report reviewer, not all reviewers were shown. |
| SIP-6105 | **DICOM files with an invalid time**<br>DICOM files with an invalid time (non existing due to daylight saving switch) sent via a migration route failed to process. |
| SIP-6040 | **Demographic overlay not shown in 3D/MPR**In the 3D/MPR component, when switching from a layout that does not contain the axial view to one that does, the demographic overlay is missing on the axial viewport. This issue has been fixed. |
| SIP-6045 | **Density measurement on RGB images**<br>A density measurement on an RGB image gives a meaningless value. The tool now shows N/A for such an image. |
| SIP-6187 | **Download large study**<br>Downloading a study with a size exceeding 2,1 GB failed. This issue has been resolved. |
| SIP-6255 | **Examination room / site** |


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| | For a particular study, 'Examination room' or 'Site' changed to the 'DEFAULT' value when a new ORM was sent without the ExaminationRoom or Site property. This issue has been fixed. |
| SIP-6169 | **Fill-in fields**<br>When inserting a text block with fill-in fields into the report, the cursor position was at the end of the text block, rather than in the first fill-in field. This issue has been fixed. |
| SIP-6170 | **Fill-in fields**<br>White spaces were added when a text block was inserted into a fill-in field. This issue has been fixed, by replacing the fill-in field with the inserted text block. |
| SIP-6276 | **Relevant procedures**<br>Linking relevant procedures and reading protocol can be broken because of set-up referencing deleted procedure codes. E.g. when clean-up of double procedures happened on DB level. |
| SIP-6221 | **Gateway certificate**<br>Certificate subject name that contains a trailing whitespace causes issue for PACSonWEB gateway as Windows can not handle folder names with trailing spaces. |
| SIP-6084 | **Images with empty VOI LUT Sequence**<br>An issue was fixed where images could not be rendered if they have the DICOM attribute 'VOI LUT Sequence' with an empty item. |


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| SIP-6262 | **Keyboard shortcut**<br>The F8 keyboard shortcut to validate and save a report was not working. This issue has been resolved. |
| SIP-6188 | **Linking non-linear MRI series**<br>The series linking algorithm has been improved, so that it can also handle instances of non-linear tomographic (e.g. MRI) series. |
| SIP-6112 | **MPR for series containing scout images**<br>MPR generation failed on specific studies where the scout image has a frame number that also exists for another slide in the series. This issue has been resolved. |
| SIP-6231 | **MPR/3D reconstruction**<br>An issue was fixed where an image series could not be loaded into the MPR/3D component, if it contained a scout/localizer image which is not marked as such in the corresponding DICOM image type attribute. |
| SIP-6102 | **MRI images not displayed correctly**<br>In case the window width value (DICOM attribute) is lower than 1, the images are not rendered correctly within the viewer. This issue has been resolved. |
| SIP-3248 | **Monitoring**<br>DeepUnity PACSonWEB Monitoring now includes expiration date of the local image cache certificates. |
| SIP-6303 | **ORM inbound** |


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| | ORM performance improved for large studies when using whitelisting. |
| SIP-6267 | **PACSonWEB Gateway**<br>Crash when performing many large transfer to PACS operations. |
| SIP-6140 | **PDF upload**<br>An issue has been fixed where PDF files could not be uploaded as document attachments, when the file extension was uppercase. |
| SIP-6301 | **Patient filter not applied with EMR Gateway**<br>In case the EMR gateway integration is used with Windows authentication, it happened that the passed patient ID filter was not applied in case that patient had multiple studies. This has been resolved. |
| SIP-6121 | **Region of interest error**<br>When applying an ellipse ROI (region of interest) measurement on a very small region within an image, it will no longer produce an error. |
| SIP-6127 | **Report cursor jumps to beginning of report**<br>An issue was fixed where the cursor would jump to the beginning of the report, when scrolling through images while typing a report. |
| SIP-6202 | **Revoked access**<br>A requesting physician could lose access to a particular study, when the system tries to parse the requesting |


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| | physician from the DICOM header, and deems it invalid. |
| SIP-6272 | **Slow retrieval of study list**<br>If there are only a small number of studies available that have images and/or reports, retrieving the study list for such a source was slow. |
| SIP-6277 | **SpeechMike buttons stop responding**In the scenario where a report is being dictated, and the study is reloaded in the viewer, the SpeechMike buttons stopped responding. |
| SIP-6209 | **Study list filter**<br>An issue has been fixed where the 'Report status' filter was not saved properly, when saving a study list filter. |
| SIP-6163 | **Default language**When PACSonWEB was opened for the first time on a device where the default browser language was set to (Brazilian) Portuguese, the user interface defaulted to English. It will now default to Brazilian Portuguese. |
| SIP-5830 | **Image invert on iOS (Safari) not working**Image invert did not work on iOS/Safari, unless the full image data is loaded. |
| SIP-6108 | **PDF report rendering**In rare cases, a PDF report could not be rendered completely within the embedded PDF viewer. |
| SIP-6165 | **User manual language** |


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| | An issue was fixed where the English version of the user manual was downloaded, even though another browser/UI language was selected. |
| SIP-6145 | **Addendum workflow**<br>When the source setting 'Worklist - ReportDictationStatusExport' is enabled, and an addendum is created for a validated report, the worklist status was changed to 'Dictation started'. |
| SIP-6023 | **Patient change for multi-procedure report**Improved handling of multi-procedure reports where the patient changes for one of the studies in the report: the changed study will be unlinked from the report, and a new anomaly will be created for the study/ studies still linked to the report. |

### 12.1.3 Release notes version 3.4.200 (July 2025)

| **New, changed, or removed functionalities** | |
|---|---|
| SIP-3639 | **Addendum workflow**<br>Once a report is validated, it is now possible to create a separate addendum for that report. This way, the original validated report does not need to be changed. |
| SIP-4479 | **Reference lines for matching planes**<br>When scrolling through a tomographic (e.g. CT or MRI) series, reference lines are no longer shown in other series which roughly have the same plane orientation. |
| SIP-4693 | **Upload portal extensions** |


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| | Uploaded studies can now be transferred automatically to a linked QR/PACS server. Upload comments are transferred to the relevant DICOM Study Comments tag. Non-DICOM files (PDF, PNG, TIFF, JPEG) can be uploaded together with a DICOM study. |
| SIP-4720 | **Cursor position with auto-inserted text blocks**<br>When a report is started which has a text block automatically filled in, the default cursor position is now at the end of the text block. In case fill-in fields are part of that text block, the cursor will be in the first fill-in field. |
| SIP-4730 | **Support for DIN6868-159**<br>To comply with DIN6868-159 in Germany ("Acceptance and constancy testing in teleradiology"), study timing logs are added available to measure the time between a new study coming in, and the full study being available for diagnostic review on the teleradiology workstation. |
| SIP-5352 | **Series picker filters**<br>The state of the filter buttons at the top of the extended series picker (same modality, same procedure, has report, ...) is now persistent across studies, patients, and user sessions. |
| SIP-5464 | **SLA / report deadline**<br>For teleradiology workflow, a reporting deadline can be communicated for every study that needs to be reported. This deadline is visible in the worklist. |
| SIP-5465 | **Specialty** |


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| | Introduction of the study-level Specialty attribute (e.g. neuro, abdominal, cardiothoracic, ...), to build smarter worklists. |
| SIP-5470 | **Extended upload limit**<br>The maximum amount of (image) data that can be uploaded through the upload portal can be extended to 10 GB. |
| SIP-5501 | **Local Image Cache storage**<br>A network shared drive can be used for Local Image Cache storage. |
| SIP-5536 | **Maximum number of C-MOVE sending threads**<br>In the DICOM device configuration, you can now define the maximum number of sending threads for each DICOM endpoint to which images are sent. |
| SIP-5587 | **DeepUnity Volume Rendering**<br>A new component for multi-planar reconstructions (MPR) and 3D volume rendering is available for thin-slice CT and MRI datasets. |
| SIP-5644 | **Encryption at rest**<br>A new option, encryption at rest, is available to encrypt all images and documents which are stored in the datacenter. |
| SIP-5723 | **Increased security when uploading document attachments**<br>When uploading documents as study attachments, additional security checks have been implemented to scan for malware, and to verify if the document |


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| | content matches the filename extension. |
| SIP-5875 | **New user setting for window level behavior**<br>A new user setting determines if a changed window level setting is applied to the entire series. |
| **Resolved defects** | |
| SIP-5271 | **Login with one-time password**<br>When a user needed to log in with a one-time password, but the mobile phone number was unknown, the user was unable to add their number to their account information. This issue has been fixed. |
| SIP-5530 | **Email address validation**<br>The patient email address (in study administration) needed to contain at least one lowercase characters to be accepted. This has been fixed. |
| SIP-5638 | **Access to printed draft report**<br>A source user was able to print a draft report that should not yet be accessible to that user. This issue is fixed. |
| SIP-5663 | **Progress bar on series or image move**<br>There was a regression in a previous release, where the progress bar was not displayed when moving a series or image in the study administration. This issue has been fixed. |
| SIP-5672 | **Add study with trailing spaces** |


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| | Adding a study using a reference number failed in the last step when it contained additional white space characters. This has been resolved. |
| SIP-5722 | **Search by patient national number in the worklist**<br>Searching by patient national number sometimes returned an error in the worklist. This has been fixed. |
| SIP-5739 | **Anonymization progress bar**<br>The progress bar (in Progress overview) could show a negative percentage value while anonymizing a study. This has been fixed. |
| SIP-5748 | **Highlight prior studies in MPR**<br>Unlike in normal viewports, the study date and time was not inverted for prior studies in MPR viewports. This has been resolved. |
| SIP-5749 | **Worklist filter dropdown**<br>When many worklist filters were displayed, the suggestion box/list was not visible if it was at the bottom of the filter list. This issue has been fixed. |
| SIP-5767 | **Speech recognition stops working**<br>An issue has been fixed where the Recognosco (RSDK) speech recognition stopped working after a few seconds. |
| SIP-5790 | **Source column in progress overview**<br>The source column in the progress overview page was not always populated. This has been fixed. |
| SIP-5801 | **Popups on mobile devices** |


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| | Maintenance popups were not fully readable on small mobile devices (e.g. mobile phones), and could not be closed. These issues have been fixed. |
| SIP-5806 | **DICOM transfer progress**<br>The progress bar on DICOM transfer tasks did not update until the task was finished. This has been fixed. |
| SIP-5815 | **DICOM devices configuration**<br>Several improvements to the UI and usability of the DICOM devices configuration. |
| SIP-5823 | **Fill-in fields and Recognosco Atlas**<br>A number of issues were reported when the report fill-in fields were used in combination with Recognosco Atlas speech engine. These issues have been resolved. |
| SIP-5859 | **EMR token issue**<br>When a patient ID is passed via the EMR token to DeepUnity PACSonWEB with an already logged in user, this patient ID was not filled in as a filter in the study list. In other words, when opening DeepUnity PACSonWEB from an EMR, the active patient context was not maintained. This issue has been fixed. |
| SIP-5883 | **Downloading studies with special characters**<br>Inconsistent special character handling in filenames between single and multi-study downloads has been fixed. |
| SIP-5891 | **Error on volumetric registration** |


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| | An error was shown when performing volumetric registration on two volumes, where one of them is a multi-frame series. This has been resolved. |
| SIP-5899 | **Automatic selection of relevant prior**<br>Sometimes the most recent prior study (with the same procedure description) was not selected for auto-comparison. This was due to the fact that there can be multiple procedures, which all have the same description, but different underlying procedure codes. This issue has been addressed, by making sure that procedure codes which have been linked by the user with high priority are now treated the same way of procedures which have the same code as the current. |
| SIP-5905 | **Drag and drop DICOM files on upload portal**<br>In the upload page, DICOM files added via drag and drop (after initial file selection) were not uploaded. This issue has been resolved. |
| SIP-5912 | **DeepUnity PACSonWEB multi-monitor application upgrade error**<br>In the Brazil environment, a warning ("Unable to check for newer versions...") was shown in the DeepUnity PACSonWEB multi-monitor Application. This has been resolved. |
| SIP-5914 | **MPR functionality not working in Safari browser**<br>Some MPR functionality was not working properly in recent versions of the Safari browser. This has been resolved, and MPR functionality is |


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| | restored for Safari browser version 13 and higher. |
| SIP-5922 | **Multiframe MPR**<br>For a study which is available on the local image cache, creating an MPR of a multiframe object resulted in an error. This has been fixed. |
| SIP-5925 | **Report editor**<br>The report panel scrollbar will no longer jump to an unwanted to location when editing a long report. |
| SIP-5946 | **Report export warning**<br>In case the report export is not configured, a warning was still shown to the user that the report will only be exported to the RIS once the exam is created in the RIS. This has been fixed. |
| SIP-5999 | **Login error for Active Directory user**<br>If an Active Directory (AD) user is part of multiple AD user groups, which map to the same PACSonWEB user group, this will no longer result in an error during login. |
| SIP-6031 | **Empty VOI LUT**<br>Images with an empty VOI LUT function tag could not be displayed in the viewer. |

### 12.1.4 Release notes version 3.4.106 (July 2025)

| | **Resolved defects** |
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| Reporting | Fix: When quickly switching on and off atlas speech recognition it can happen that the reporting pane hangs. |

### 12.1.5 Release notes version 3.4.105 (May 2025)

| | **Resolved defects** |
|---|---|
| Upload Portal | Upload permissions: In the previous release, a user was able to upload studies to sources for which s/he is not part of a source group or source administrator group. This issue has been fixed. |

### 12.1.6 Release notes version 3.4.104 (April 2025)

| | **Resolved defects** |
|---|---|
| WCF | Fix: When two pdf report are sent for a source configured to link reports on order level. Only the first one send is available in PACSonWEB report history. |

### 12.1.7 Release notes version 3.4.103 (March 2025)

| | **Resolved defects** |
|---|---|
| WCF | Fix: Performance issues with CMove of Tomo stored in Local image cache |
| Multi-Monitor | Fix: login fail in multi-monitor app and app needs to be killed via tray icon to resolve it. |
| WCF | FIX: CMove of merged studies only returns one of the studies. |


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| Viewer | FIX: Image are not loaded in certain web browsers, and the 'no cloud' icons are shown instead. |
| Multi-Monitor | Fix: JavaScript error on start-up of the multi-monitor app. |
| MPR | Fix: Window/leveling on MPR is responding very slowly (especially on high latency networks) |
| Login | Fix: Popup banner on mobile phone cannot be closed. |
| Reports | Fix: The warning "The report will be exported to the RIS as soon as the exam has been created within the RIS" is also shown when the report is on a status that does not trigger export. |
| Viewer | Fix: DU PACSonWEB cannot show pdf's in older version of Safari. |
| Reports | Fix: Issues with Recognosco Atlas speech recognition: every word is capitalized (if not at end of report); 'remove selection' voice command not working; voice commands for text blocks not working because 'pronounced as' contains special characters |
| Viewer | Fix: Window leveling in Chrome browser on iPhone shows a warning messages that window leveling is not supported on IE 11. |
| Management | FIX: In rare cases, some image files may not be backed up. |


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## 12.1.8 Release notes version 3.4.102 (February 2025)

| | **Resolved defects** |
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| Reports | FIX: PACSonWEB multi-monitor application - Report viewport not working correctly when opened on a monitor different from the main monitor |
| Image Viewing and Manipulation | FIX: Scrolling / cine through a breast tomography series is not smooth. |
| Image Mover | FIX: Avoid loss of files when moving them to long term storage for corner cases when DIOCM file with invalid pixel data is resend with valid pixel data. |
| Studies | FIX: Study logging (in study administration) is not displayed for studies that have a report that is sent out via HL7 ORU outbound. |
| AI-Cube | FIX: Sending back results via AI Cube does not work as it's using an incorrect storage location. |
| Global | FIX: Performance improvement in the work list. |
| Studies | FIX: Search to re-link a study to a different order is broken. |
| Global | Updated the privacy policy to be compliant with the updated HDS 2.0 standard (France). |

## 12.1.9 Release notes version 3.4.101 (January 2025)

| | **Resolved defects** |
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| Viewer | FIX: If volumetric registration is used in a view also containing series with other orientation, irrelevant warnings keep popping up. |

### 12.1.10 Release notes version 3.4.100 (January 2025)

| **Component** | **Release Note** |
|---|---|
| Login | FIX: The DeepUnity PACSonWEB authenticator app not working properly, requiring to manually enter the one-time password when logging in. |
| Login | FIX: Active directory user cannot login if the user login domain has different letter case than active directory configuration. |
| Download | FIX: DICOM transfer task progress is set to 100% when WCF client is offline. |
| WCF | FIX: WCF Client does not send any response to the application that sent a C-Move request if the C-Move destination can't be reached. |
| WCF | FIX: The DICOM Router always returns C-Move 'success' status to the application sending the C-Move request, independent from the result of the sub-operations. |
| DICOM Processor | FIX: Sending images to DeepUnity PACSonWEB fails if a very large order number is sent, and order-number-based security codes are configured. |


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| Login | FIX: Token with query criteria cannot be used in combination with Microsoft Entra ID. |
| Studies | FIX: Target study time defaults to 00:00:00 when searching for studies (for moving images/series) in the study administration. |
| Reports | FIX: Buttons to finalize report not visible when reporting on a mobile phone. |
| WCF | FIX: If setting 'ReportDictationStatusExport=true' is used in combination with bulk reporting, status update ORU messages can be sent without report content. |
| Download | FIX: DICOM transfer task is set to 'Completed' even when the DICOM destination is not listening or the DICOM association is rejected. |
| Global | Introducing DeepUnity PACSonWEB Core as the non-medical device variant for countries where DeepUnity PACSonWEB is not (yet) registered as a medical device. |
| DICOM Processor | FIX: Documents (shown in the documents tab) originating from DICOM encapsulated PDFs are labeled 'Unknown'. |
| Upload portal | Add a comment when uploading a study through the DeepUnity PACSonWEB upload portal. This comment will be visible in the study info panel. |
| Reports | FIX: Report availability time (when report is not yet available for a login via |


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| | reference number) is shown in UTC time rather than local/browser time. |
| Reports | FIX: Print report fails for multi-procedure report, if one of the linked studies has been deleted. |
| Upload portal | FIX: Upload portal cannot be launched from the multi-monitor app. |
| WCF | In outbound ORU messages, the name and physician number of the requesting physician are sent. Other physician identifiers are not yet included. |
| Image Viewing and Manipulation | FIX: Dragging the density measurement tool on the image, while full image data is still loading, can result in an error ('Cannot find central directory'). |
| Image Viewing and Manipulation | FIX: When scrolling through a series very quickly after saving an annotation, it can happen that saving the annotation fails. |
| Global | General conditions of use, including the GDPR notification, are now translated into all supported languages. |
| DICOM Processor | FIX: US multiframe (TomTec) images do not get processed. |
| Download | FIX: The character set conversion is only done for DICOM fields which are stored in the database (e.g. patient name). The other DICOM fields are not updated (e.g. institution address). In case these other fields contain special characters, they are not properly visualized. |


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| Global | Improved communication of planned maintenance to end users. |
| Studies | FIX: Incorrect study logging when adding an order number to a study without an order number. |
| Reports | FIX: When copy pasting text from a PDF report, the white spaces are omitted. |
| Upload portal | In the upload portal, the upload code is now valid for 96 hours (4 days) instead of 48 hours. |
| AI-Cube | Introducing the DeepUnity AI Cube: a cloud AI marketplace fully integrated with DeepUnity PACSonWEB, for fully automated AI orchestration, processing and results handling. The AI processing status and resulting findings can be visualized in the worklist, and worklist priority can be increased based on specific findings. AI results can be hidden for certain users. |
| Management | FIX: Patient changes in study administration page cannot be saved when gender is NULL. |
| Upload portal | FIX: System default labels (e.g. Uploaded, Imported) are not translated to the user interface language. |
| Share | FIX: User first name in Italian user activation mail is incorrect. |
| Worklist | FIX: If report creation/editing is canceled, study status stays on 'Dictation started' (if this status is used). |


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| Manage Templates | FIX: Inconsistent date/time formatting in the print report template. |
| Download | An offline DICOM viewer can be included when downloading images in DICOM format. This feature is only available in Germany, Austria, Switzerland, France and Brazil. |
| Multi-Monitor | New branding and logos for the multi-monitor app and mobile app. |
| Login | FIX: Custom login page logo added via URL, not showing in FAQ page. |
| Worklist | FIX: Wrong display of study date when cycling through months in the study date filter. |
| Manage Templates | New data fields for the PrintReport template: site name, accession number, requesting and performing department, place of birth, birth first and last name. |
| Multi-Monitor | FIX: Multi-monitor app crashes when opening user settings while a study is open. |
| Image Viewing and Manipulation | FIX: Incomplete display of iCAD mammo findings when CAD reports for both 2D and 3D/DBT images are available. |
| Viewer | FIX: If the inclination of two series differs too much, volumetric linking (registration) will not be done, but no user feedback is provided. |
| MPR | FIX: 'Show DICOM tags' on an MPR viewport does not work. |


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| Reports | FIX: In the multi-monitor app, the Ñ character can't be used for voice commands in text blocks. |
| MPR | Multi-planar reconstructions (MPRs) can now also be created for multiframes. |
| Viewer | New keyboard shortcuts are available to (i) load next or previous series within the active viewport, (ii) flip the image horizontal or vertical, (iii) toggle the display of the series picker, and (iv) rotate the image. |
| Studies | For frontend integrations with DeepUnity PACSonWEB, URL calls can now include the accession number to open a study directly in the browser. |
| Login | Too many failed login attempts from a single user will no longer result in the lockout of the entire customer (for trusted IPs). |
| Token Based Interfaces | A user can stay logged into DeepUnity PACSonWEB when accessing patients/ studies through the EMR Gateway. |
| WCF | Documents (e.g. scanned request forms) can be deleted through ORM inbound messages. |
| Reports | IARA integration (Latin America only): Spanish language is added for speech recognition. |
| Reports | Report macros (text blocks) can now contain fill-in fields, for more structured reports. Voice commands, keyboard shortcuts or speechmike buttons can |


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| | be used to navigate between these fields. |
| DICOM Processor | Update of the DeepUnity PACSonWEB DICOM conformance statement with detailed description on the use of private DICOM tags. |
| Viewer | FIX: No user-friendly error when the study fetch mechanism times out. |
| Explore | In the task progress overview page, it is now possible to filter on source, and see the source for each relevant task. |
| Login | FIX: Unable to load images with error 'Missing IDP Token' after user email address is updated. |
| Management,Studies | Departments will no longer be duplicated when they are related to multiple sites. |
| Studies | FIX: In the Study Administration, newlines in certain text fields are displayed as <br>. |
| Reports | When the toggle "open report in edit mode" is enabled in the worklist, it will no longer put already validated reports back in edit mode. |
| Viewer | In order not to obscure the image thumbnails in the series picker, the text of the series descriptions is now truncated to a single line, with a tooltip displaying the full series description. |
| Explore | Next to the usual patient name, the birth first and last name of the patient is now available in both the study list and worklist. Place of birth is added as well. |


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| DICOM Processor | If images are resent to DeepUnity PACSonWEB with a changed series description, the new series description will be adopted. |
| Management | Private study labels (owned by one user) are no longer shown to other users in the study list and worklist filters. Also, other users are no longer able to remove such private labels. |
| Reports | Support for Atlas, the new and improved speech recognition engine from Recognosco. |
| Management | A new user interface to configure and manage the DICOM communication with all DICOM endpoints (modalities, workstations, archives, ...). |
| Viewer | To improve the readability of the user interface on high resolution displays, it is now possible to define a scaling factor for the diagnostic monitors. |
| DICOM Processor | Key images identified in a local PACS, and communicated to DeepUnity PACSonWEB as DICOM KOS Documents, are processed and will display as key images within the viewer as well. |
| Worklist | Ability to define cross-source worklists, primarily to support teleradiology workflows. These worklists concatenate all relevant studies or orders from a group of sources/customers. |
| Patients | When changing or merging patients in the study administration, search on patient ID is now possible, and multiple |


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| | date of birth formats are now supported. |
| Local Image Cache | The Local Image Cache (LIC) service can now only be used by an authenticated DeepUnity PACSonWEB user. |
| Global | No more support for outdated internet browsers such as Microsoft Internet Explorer 11 and others |

### 12.1.11 Release notes version 3.3.900 (April 2024)

| **Component** | **Release Note** |
|---|---|
| Login | Microsoft Entra ID (formerly known as Azure AD) is now supported for cloud-based identity management. |
| DICOM Processor | Labels can be auto-created based on specific DICOM tag values, for example to label studies with particular AI results. |
| WCF | Report deletion can be communicated to PACSonWEB via HL7 ORU. Reports deleted within PACSonWEB can trigger an outbound HL7 ORU communication as well. |
| WCF | Character set encoding can now be configured for each modality, to be used in the DICOM modality worklist (DMWL) query. |
| Login | User passwords are now encrypted with the SHA-512 hashing algorithm (replacing SHA-1). |


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| WCF | The PACSonWEB DICOM Modality Worklist (DMWL) can now be filtered based on study status. |
| Viewer | New keyboard shortcuts for creating key images, toggling demographic overlays, and switching MPR planes in full-screen mode. |
| Worklist | External procedure ID is now available in the worklist, as an additional column and filter. |
| Reports | FIX: error message when starting bulk dictation. |
| Download, Share | The patient national number will be updated in the DICOM header when exporting/sharing/downloading the DICOM data. |
| Viewer | XC series are no longer automatically split into individual images. |
| Reports | FIX: Report version are not correctly numbered in the study administration page. |
| Global | Proper handling of time zone differences, and consistent storage of all date/time in UTC format. |
| Reports | New properties (patient ID, national number, ...) are available in the PrintReport template. |
| Reports | New reports without content will no longer be auto-saved. |


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| Global | Ségur compliance: support for birth names, place of birth, and INS national number (NIR/NIA). |
| Image Viewing and Manipulation | If series cannot be linked, the link button will now be disabled, and users are informed why linking is not available. |
| Reports | Support for Brazilian Portuguese speech recognition (based on IARA Health technology) for reporting. |
| Worklist | FIX: 'current user' worklist filter is not filled dynamically based on logged-in user. |
| Viewer | FIX: bold and underline formatting not always applied in the report editor. |
| DICOM Processor | Study with only 1 image will always be retrieved from cloud even if available in local image cache. |
| Studies | FIX: no detailed information in study logging (study administration) when moving images or series. |
| Viewer | FIX: images deleted through IOCM show up as expired images. |
| Token Based Interfaces | FIX: in rare cases, CoZo fetches the patient national number from the field 'LOCAL', and the patient local ID from the field 'ID-Patient' in KMEHR message. |
| Reports | FIX: reports created in PACSonWEB are not sent out if the study has no accession number, without informing |


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| | the user. Reason for failure is not mentioned in failed export task. |
| Token Based Interfaces | EMR users can open a patient or study in PACSonWEB through a new token integration. |
| User Settings | FIX: it is not possible to remove default shortcut keys for actions that have multiple shortcut keys. |
| Global | Significant improvement in performance to go from a reported study to the next study in the cycle list (bulk reporting workflow). |
| DICOM Processor | FIX: study info (e.g. study description) received from HL7 ORM is overwritten by DICOM metadata. |
| Explore | FIX: when configuring source rules, typing in the search box to find a DICOM tag was not working anymore. |
| Reports | Image hyperlinks can be added into the report. |
| Reports | New technologist field: can be populated through HL7 ORM/ORU, visible in study information panel, editable in study administration, and available in the printReport template. |
| Multi-Monitor | FIX: error on logout in multi-monitor app. |
| Viewer | FIX: missing and incorrect Spanish translations of some UI elements. |


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| WCF | FIX: DICOM modality worklist (DMWL) Patient ID wildcard search does not return the correct patient ID. |
| Image Viewing and Manipulation | FIX: window/level issue when VOI LUT function is in sharedFunctionalGroupSequence. |
| Reports | FIX: previous filter value still shown when searching for a text block. |
| User Settings | FIX: incorrect display of certain characters in graphic signature confirmation dialog. |
| WCF | FIX: unnecessary logging of revoked access when requesting physician on inbound ORM stays the same. |
| Reports | FIX: signature text and image not correctly populated in the PrintReport template when the report author equals the report approver. |
| Login | FIX: user receives OTP code even if none is required. |
| Multi-Monitor | FIX: study available on local image cache cannot be viewed before an image is processed. |
| Multi-Monitor | Improvements to the multi-monitor app desktop integrations: more capabilities to determine windows behavior (minimize, maximize), ability to auto-start the reporting, and auto-close the study tab after reporting. |
| Image Viewing and Manipulation | FIX: pixel intensity (density) measurements may fail if image height is much larger than image width. |


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| DICOM Processor | FIX: old files are still available on local image cache, when files from deleted study are resent to PACSonWEB. |
| DICOM Processor | FIX: the study list still shows the modality types for images that have been moved to another study. |
| DICOM Processor | Improved performance of the incoming image (DICOM) processors on the cloud platform. |
| | Added German, Spanish, Italian and Portuguese translations to the PACSonWEB mobile app. |
| | Smith & Nephew broker: DICOM files can now be sorted chronologically based on instance number. |

### 12.1.12 Release notes version 3.3.800 (December 2023)

| **Project Plan** | **Release Note** |
|---|---|
| EMR Gateway | FIX: EMR gateway link with patient national number doesn't work |
| Sources | New filter capabilities in the management pages, for client config settings, user settings and source detail settings. |
| Viewer | FIX: an issue was fixed where reference lines and series linking did not work properly for multi-frame datasets. |
| Image Viewing and Manipulation | FIX: an issue was fixed where inverting a full-screen mammography image could result in a black screen. |


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| DICOM Processor | FIX: an issue was fixed where IOCM messages containing allot of referenced SOP instances could not be processed. |
| Reports | FIX: If using the pop-up for selecting the procedures for a multi-procedure report this results if one of the studies is locked. |
| Reports | FIX: an issue was fixed where a Spanish voice command could not be used to insert a text block into the report. |
| Reports | FIX: an issue was fixed where the report could not be edited after visiting the study administration page. |
| Home Reading App | The PACSonWEB app is now available on the most recent Android releases. |
| Viewer | FIX: an issue was fixed where attachments/documents could not be uploaded if the filename extension was in uppercase. |
| Multi-Monitor | Ctrl+Shift+M in Multi-monitor app now triggers a clean restart of the app. |
| Reports | FIX: Optional pop-up when starting a report for an order with multi-procedure was shown twice. |
| MPR | FIX: an issue was fixed where different slices within an MPR volume had different window/level settings applied, resulting in large brightness/contrast variations throughout the volume. |
| Home Reading App | FIX: Home reading crashes when pairing while report is already in edit mode |


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| Viewer | FIX: Give decent message to user when document does not open in viewer because a new version was send since opening the study. |
| WCF | FIX: an issue was fixed where inbound HL7 text fragments could be truncated in case they contained special characters. |
| Viewer | FIX: an issue has been fixed where certain images could not be displayed if the window width and center had "NaN" values in the DICOM tags. |
| Reports | FIX: an issue was fixed where an error would occur when switching between speech recognition languages. |
| Access | Additional logging is now available on study access revocation. |
| Reports | Improved workflow when cycling multiple studies to report. |
| Worklist | Sorting the worklist based on the Status column now uses the underlying priority for each status, rather than sorting alphabetically. |
| Studies | When moving a source study to a destination study, the actual workflow status of both studies are now displayed. Before initiating the move, the user can choose what should be the resulting workflow status for the destination study. |
| Multi-Monitor | FIX: an issue was fixed where an error was displayed after logging out of the multi-monitor app. |


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| Reports | FIX: an issue was fixed where users received error notifications in case their login session had expired. |
| Studies | FIX: an issue was fixed where patient anomalies (for patients without studies) where not visible by default in the anomalies overview. |
| Reports | Series panel state is maintained when reloading a study while editing a multi-procedure report. |
| Reports | FIX: an issue has been fixed where reports would not be exported if the client is temporarily offline. |
| Local Image Cache | FIX: Custom DICOM tags in study overlay could have different values when loaded from local image cache. |
| Studies | FIX: an issue has been fixed where trying to move images/series to an empty study (in the study administration page) fails |
| Token Based Interfaces | Belgium: additional CoZo user profiles (midwife, pharmacist in hospital, pharmacist clinical biologist, physiotherapist) now have access to imaging results in PACSonWEB. |
| Multi-Monitor | FIX: an issue was fixed where the settings in the multi-monitor app configuration wizard were not maintained when running this wizard again. |
| WCF | The study remark field, communicated through HL7 ORM/ORU, may now |


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| | contain up to 2048 characters (previously limited to 256 characters). |
| Reports | FIX: an issue was fixed where speech recognition did not initialize when there are multiple text blocks with the same code. |
| Reports | Clearer messages to inform patients if the report is not yet available. |
| Studies | FIX: an issue was fixed where a PDF report would be deleted after changing the report status in the study administration page. |
| WCF | FIX: the study remark will no longer be deleted when a new HL7 ORU/ORM is sent in without a study remark. |
| Global | The global data protection policy, privacy policy and cookie policy were updated, to bring them in line with Dedalus global policies. |
| Image Viewing and Manipulation | FIX: an issue was fixed where scrolling through breast tomosynthesis series was very slow when breast shape detection was enabled. |
| Local Image Cache | FIX: an issue was fixed where scrolling through multi-frame tomosynthesis series had low performance due to unnecessary loading of pixel data. |
| Image Viewing and Manipulation | FIX: an issue was fixed where mammography images, when retrieved from the local image cache, could be displayed with an incorrect default window/level setting . |


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| Reports | The user notification (popup message) and behavior have been improved when reloading a study during reporting. |
| Reports | New user settings are introduced to finetune the behavior when finishing a report. |
| Management | FIX: an issue has been fixed where opening the user settings was very slow. |
| Login | FIX: an issue has been solved where the customer-specific support page was not accessible anymore from the customer-specific PACSonWEB landing page. |
| Viewer | FIX: an issue has been fixed where (active directory) users without a last name got error messages when logging into the viewer. Last name is now mandatory for all (AD) users, and clear error messages are presented to the user. |
| Reports | FIX: Transcriptionist got error when finalizing a report because author was cleared by backend integration. |
| Reports | New multi-line text fields to register radiation dose and administered products are available. These fields can be populated through incoming HL7 ORM/ORU, or filled in / edited manually in the study administration pages. They can also be added to the report print template. |
| Viewer | FIX: an issue has been resolved where an incorrect patient date of birth could |


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| | be displayed, when the client was in a different time zone than the web server. |
| Explore | FIX: an issue has been fixed where the user interface goes blank if a PACS overlay search result contains patients without a name |
| WCF | PACSonWEB DICOM Modality Worklist (DMWL) will now also return OtherPatientID, when it's queried as part of an MWL request. |
| Reports | FIX: an issue was fixed where a warning was displayed (Mapping not found) when a transcriptionist validates a report for the default radiologist. |
| Reports | SpeechMike buttons can now be configured to trigger keyboard shortcut actions. When using the PACSonWEB multi-monitor app, the SpeechMike buttons will continue to work even when the app does not have focus (e.g. while reviewing images in a 3rd party tool). |
| WCF | When receiving HL7 messages for existing studies without department, site and/or examination room information, this data will no longer be reverted to default values if this data was already known from prior messages. |
| DICOM Processor | If PACSonWEB receives HL7 ORM messages with unknown procedure code/description and/or modality, these values will now be copied from the associated DICOM files. |


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| Reports | A signature image can be uploaded for each user, and included in the report. |
| Download | FIX: an issue has been fixed where querying the worklist based on patient last name (during Transfer to PACS) did not return the correct results. |
| Viewer | Certain image series within a study can be marked as private (either manually or automatically), and access to such series can be restricted through user/ role permissions. |
| Viewer | FIX: an issue has been fixed where annotations created in Syngo.via did not display correctly in PACSonWEB. |
| Management | Portal URLs will no longer be prefixed with "http://", also in the templates when sharing a study or printing a report. |
| AI-Cube | AI Cube is a new PACSonWEB component, which connects with cloud-based AI providers. This allows to have studies, which are sent to PACSonWEB, automatically processed by certain AI algorithms, and results are made available back in PACSonWEB. |
| Global | It is now possible to review and modify cookie settings. |
| DICOM Processor | DICOM libraries were updated to the latest Fellow Oak DICOM version 5.0 |
| Login | FIX: an issue has been fixed where one-time passwords (OTPs) were being sent unnecessarily to active-directory (AD) users. |


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| Studies | A new upload portal, which allows to upload medical imaging studies (DICOM) to PACSonWEB using the web browser. |
| DICOM Processor | Support for the LINEAR_EXACT VOI LUT function, for correct rendering of certain MRI series. |
| Viewer | New filter buttons in the series picker make it easier to find relevant prior studies in the patient history. |
| Token Based Interfaces | Exams which are filtered (not published to PACSonWEB) will no longer show up in CoZo. |

### 12.1.13 Release notes version 3.3.700 (23/05/2023)

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| Viewer | FIX: an issue was fixed where images would not be displayed in Safari after upgrading to iOS 16.4 |
| MPR | MPR image quality has been improved, and MPR rendering speed has been increased. |
| Explore | FIX: an issue was fixed where loading the study list / explore page was very slow (or even timed out) when no filters are applied |
| DICOM Processor | FIX: an issue was fixed where certain images encoded as a private SOP class UID were not visible in the viewer. |
| MPR | FIX: an issue has been fixed where cloud icons would be shown for certain images. This happened when MPR was |


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| | initiated while some images were still loading. |
| Client Configs | A character set can now be defined, which is used in all queries from PACSonWEB to the local PACS. When the query includes special characters, these will no longer be replaced with wildcards, hence the query results will be more accurate. |
| Viewer | FIX: Flashing images when scrolling through RX images |
| Login | The PACSonWEB default login page has been restyled according to the Deep Unity style guide, including an update to the logo. |
| Explore | FIX: an issue has been fixed where the anomalies department filter did not work for source administrators. |
| Viewer | FIX: an issue has been fixed where window/levelling high-resolution images on diagnostic displays was unresponsive. |
| Reports | FIX: an issue has been fixed where RSDK (speech recognition) would not work anymore after reloading a study. |
| Reports | FIX: Report reviewer dropdown selection not shown correctly in the multi-monitor app. |
| Viewer | The user will now be notified (and asked to close some study tabs) when exceeding the memory usage of the multi-monitor app. |


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| DICOM Processor | FIX: an issue was fixed where an IOCM rejection note would not be processed for all frames within a multi-frame image. |
| WCF | C-FIND queries for unsupported SOP classes will now be rejected, instead of not returning any data. |
| Viewer | FIX: an issue has been fixed where the wrong DICOM tag was used to determine the laterality of multi-frame DBT series. |
| Login | FIX: an issue has been fixed where the new user account activation with strong authentication (one-time password) via email was not working. |
| Reports | FIX: An issue has been fixed where text blocks could no longer be inserted automatically in new reports. |
| Global | User manuals (online and PDF versions) are now available on the PACSonWEB portal itself, instead of a public Confluence page. |
| Viewer | Scrolling through Digital Breast Tomosynthesis (DBT) image stacks is now smoother, as the breast detection algorithm no longer runs by default on each image. |
| Reports | It is now possible to configure the audio recording input level for non-SpeechMike dictation devices in the multi-monitor app. |
| Multi-Monitor | For desktop integrations using the multi-monitor app, it is possible to use only patient-level context (patient ID or |


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| | national number) when calling the app API. The study list will then display a filtered list of all studies for the called patient. |
| Multi-Monitor | The on-top behavior of the multi-monitor application can now be configured. The new setting will determine whether the non-diagnostic monitor comes on top of other windows |
| Worklist | FIX: an issue has been fixed where procedures codes would no longer be displayed in the worklist filter settings, after saving the worklist |
| Viewer | Images (such as mammography images) can now be automatically flipped horizontally or vertically through the reading protocol. |
| Viewer | ScreenPoint Transpara mammography CAD markers (calcifications, soft tissue lesions, and overall exam score) are now supported for display in the viewer, both for 2D/FFDM and 3D/DBT exams. |
| Viewer | A new keyboard shortcut was added to publish annotations. |
| Download | The 'Transfer to PACS' workflow has been significantly improved: it's easier to access the functionality, the user interface has been redesigned and optimized, studies can be transferred in bulk, and default settings can be configured. |
| Viewer | The default projection mode, when activating the thick slice (2D) function, is now maximum intensity projection |


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| | (MIP) instead of average intensity projection (MPVR). |
| Viewer | FIX: an issue has been fixed where a relevant prior study was not automatically shown in an auto-compare reading protocol, in case of multi-procedure reporting. |
| Multi-Monitor | A native desktop integration with Myrian (Intrasense) is available in the PACSonWEB multi-monitor app. |
| Viewer | The metric 'time to first image display' has been improved, especially for larger studies with lots of images. Also pre-loading is introduced to further improve this metric. |
| WCF | When a new patient national number is sent to PACSonWEB through an ADT update, this will no longer trigger an anomaly (as long as that number is unique). |
| Patients | The displayed message, to inform the patient when their report is not (yet) available, is now more clearly defined to avoid confusion. |
| MPR | Users will now be notified if there is insufficient memory available to create an MPR volume. Also, the memory required for MPR will be released as soon as the study is closed, to avoid insufficient memory as much as possible. |
| Multi-Monitor | It is now possible to pass image- or series-level context in an integration script. This allows to share a specific |


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| | image or series with a 3rd party application integrated in the PACSonWEB multi-monitor app. |
| PACS Push | FIX: An issue has been fixed where PACSonWEB would continue to try and sync a study (via C-MOVE) when the local PACS stops responding, even when the study is fully synchronized. |
| Viewer | Multi-value DICOM tags can now be used in the definition of reading protocols. So if a DICOM tags contains multiple values (e.g. ImageType), any of those values can trigger a specific reading protocol. |
| Manage Templates | FIX: incorrect link to manual in password expiration mails. |
| Reports | Report signature(s) is/are now automatically added to the exported report (for ORU outbound interface). |
| Login | FIX: An issue was fixed where the user manual on the French login page was not available as PDF. |
| Explore | A permission is now available to define which user groups have access to the PACS overlay (query local PACS) feature. |
| Access | FIX: an issue was fixed where unreported studies were already available to patients when logging in through CoZo |

### 12.1.14 Release notes version 3.3.606 (22/02/2023)

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| Report | FIX: RSDK speech recognition not working for Spanish (ES_ES) |


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| WCF | FIX: Access not correctly changed when changing requesting physician for multi-procedure order. |
| WCF | FIX: ORU not correctly processed for DICOM based study with order nr. that also exist for none default department. |

### 12.1.15 Release notes version 3.3.605 (13/02/2023)

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| DICOM Processor | When images of a merged study were resend with a different accession nr. but that accession nr. doe snot match an HL7 based study. The split of study was not correctly updated with the DICOM meta data. |

### 12.1.16 Release notes version 3.3.604 (15/12/2022)

Hotfix is to solve issues in PACSonWEB backend, hence no end user release note is created.

### 12.1.17 Release notes version 3.3.603 (14/12/2022)

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| DICOM Processor | FIX: When two studies are merged on same accession number a study is not split off again if one of the studies is resend same study instance UID and different accession nr. |

### 12.1.18 Release notes version 3.3.602 (23/11/2022)

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| Viewer | FIX: Radiologist need to restart multi-monitor app after out-off memory error |
| DICOM Router | FIX: Client Router queue clean-up can be slow for heavy load customers |


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## 12.1.19 Release notes version 3.3.601 (04/11/2022)

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| Reports | FIX: 'copy to clipboard'-button report panel is not working anymore. |
| Viewer | FIX: Image can not be viewed when using Safari 14 or Firefox 92. (Works fine as of Safari 15 and Firefox 93) |
| Multi-Monitor | FIX: PACSonWEB multi-monitor app crashes when a StreamDeck is connected |
| Multi-Monitor | FIX: PACSonWEB viewer turns black in multi-monitor app if 5GB memory usage is exceeded. |
| Reports | FIX: Transcriptionist gets (non-blocking) access restriction error when editing report. |
| Reports | FIX: Warning that speech volume for RSDK speech recognition is to high is shown to often. |
| Viewer | FIX: When using 150% zooming in windows display settings, Window leveling is not always immediately applied on high resolution images. |
| Viewer | Performance improvement: faster meta-data retrieval, so that we can start loading images sooner after opening a study. |

## 12.1.20 Release notes version 3.3.600 (18/10/2022)

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| Viewer | Tomographic (CT/MRI) series from two different studies can automatically be |


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| | synchronized, based on a registration algorithm. Correcting the offset between linked series can be done much faster. |
| Reports | Reports are now saved automatically, and can be recovered after losing the server connection or accidentally interrupting the reporting workflow. |
| DICOM Processor | DICOM files larger than 2 GB are now supported. |
| Explore | More advanced search / filter capabilities are now available in the task progress overview screen. |
| Studies | FIX: An issue has been fixed where the fetch button was sometimes unavailable for expired studies. |
| Management | Additional logging on system operator (global admin) activities, to comply with HDS (France) regulations. |
| Manage Templates | Patient first name and last name can now both be added (as two individual fields) to print templates. |
| WCF | If the source allows multiple internal patient IDs, 'old' patient IDs will now be remembered after merging to a 'new' patient ID. If, after such merge, incoming data (HL7/DICOM) still uses an 'old' patient ID, this will no longer trigger an anomaly. |
| Reports | The reporting workflow within PACSonWEB now supports multiple report contributors. A radiology resident may send a report to a supervisor, or a |


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| | senior radiologist sends a report to a colleague for review. Also, different report versions and the version history can now be displayed in the study administration page. |
| Download | FIX: An issue has been fixed where transfer tasks would sometimes remain in progress without completing. |
| Worklist | Specific procedures or procedure codes can be excluded from a worklist. |
| Image Viewing and Manipulation | The image rendering performance has been improved, and interference with simultaneous speech recognition is no longer an issue. IMPORTANT: PACSonWEB 3.3.600 is not backwards compatible with multi-monitor app for 3.3.500! Upgrading to the latest version of the multi-monitor app is required. |
| Token Based Interfaces | Specific performing departments can now be included/excluded for publication to CoZo/RWS. Publishing of studies to CoZo/RSW can also be delayed for 1 to 7 days. |
| Management | FIX: An issue has been fixed where multiple duplicate rooms or departments are be displayed in the worklist filters. |
| Viewer | The readability of the series descriptions in the series picker has been improved. |
| Login | In Norway, Target365 is now supported as SMS gateway provider. |
| Explore | The "Performing department" field can now be used as a filter and displayed as a column in the study list tab. |


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| User Settings | Keyboard shortcuts are now available for all annotations. |
| Reports | There is a new user setting to define if a beep should be played when starting or stopping speech recognition. Also, the report panel will now automatically scroll down when dictating a large amount of text. |
| Reports | In the study list, the 'Radiologist' field now shows the name of the doctor who last changed or validated the report in PACSonWEB. Also, the 'Reading user' and 'Validating user' fields will be populated for reports sent to PACSonWEB. |
| Download | Studies - which are added manually to the study list - can automatically be listed and selected. Any reference number or DU POW number can be used to filter the study list. |
| WCF | An external procedure ID on study level is now supported, so that exported reports combining multiple procedures can be associated with different unique study level IDs. |
| Access | FIX: An issue has been fixed where original requesting physicians may still has access to a study when requesting physician for that study is changed. |
| Studies | FIX: An issue has been fixed where anomalies could not be resolved because of different date/time formatting. |


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| Reports | When dictating a report, the recording volume level is now visualized with colors in the report panel. If the recording level is too high, the user will be alerted and advised to change their audio settings. |
| Reports | Reports exported as DICOM structured reports (DICOM SR) now contain all the required metadata to allow import in other PACS systems. |
| Share | A label can now be automatically attached to one or more studies, when sharing them, or printing a reference number for them. |
| Studies | FIX: An issue has been fixed where there are redundant entries in the patient logging for unchanged values. |
| Reports | To avoid losing unsaved report text, a popup confirmation will now be presented to the user when closing the browser (tab) or navigating to a different web page (user settings, study administration) while editing a report. |
| Reports | When using speech recognition, additional guidelines are provided on how to dictate numbers, dates and times, medical terms, and more. |
| Studies | FIX: An issue has been fixed where moving images from one study to another would sometimes fail. |
| Studies | FIX: Error in study administration tab 'images and series' if moving images to a new series in exiting study and moving that newly created series to another study in one go. |


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| Reports | Block undesired translation of report text by the browser plug-ins. |
| WCF | When report creation (and dictation) is started in PACSonWEB, a study status update ('Dictation started') can be sent out via HL7 ORU. This allows to inform external (RIS/reporting) systems that reporting has started, and avoid double reporting in another system. |
| Login | When printing a reference number, a QR code can be included. Scan the QR code to go directly to the correct URL, with the reference number already filled in. |
| Global | The TeamViewer application that can be downloaded from the support page has been upgraded. |
| Login | FIX: An issue has been fixed where active directory users that login via itsme are sometimes asked to reset their password. |
| Image Viewing and Manipulation | FIX: An issue with irregular scrolling through CT image series has been fixed. |
| Reports | FIX: An issue has been fixed where 'null' was displayed as radiologist name when exporting a report. |
| Image Viewing and Manipulation | The default scrolling method for 2D reformats (e.g. MIP) is now 'Not Grouped'. |
| Explore | FIX: An issue has been fixed where the number of images in the Local Image Cache was displayed incorrectly in the |


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| | study list after sorting the list by clicking the headers. |
| Worklist | The worklist refresh rate can now be configured (default = every 5 minutes). |
| Worklist | The performance of worklist queries has been improved. |
| Viewer | FIX: An issue has been fixed where false 'study changed' notifications was shown for unchanged studies. |
| User Settings | FIX: An issue has been fixed where opening the user settings could take allot of time. |
| MPR | FIX: An issue has been fixed where the MPR screen layout changed unnecessarily. |
| Download | Exported annotations (angle, arrow) now also provide fall back representation for external PACS system that do not support Compound Graphic Sequence. |
| WCF | FIX: An issue has been fixed where ISO_IR 100 character set was used instead of requested encoding in Modality Worklist response. |
| MPR | FIX: An issue has been fixed where coronal and sagittal MPR views could be displayed upside-down when image number do not match orientation. |
| WCF | The performance of processing large (> 1 GB) files has been improved. |


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| Global | Support for the Brazilian Portuguese language. |
| Global | When PACSonWEB is not to be used for diagnostic use in a certain country because of pending regulatory requirement, several notifications about this restriction are added in the user interface. |
| WCF | FIX: An issue has been fixed where availability of incoming images were available in PACSonWEB can be delayed by parallel C-Move requests. |
| Reports | FIX: An issue has been fixed where SpeechMike buttons stop responding. |
| Image Viewing and Manipulation | FIX: An issue has been fixed where XA/RF images containing a redundant VOI LUT table were display incorrectly. |
| PACS Push | FIX: An issue has been fixed where whitelisted studies would not get retrieved from PACS. |

## 12.1.21 Release notes version 3.3.503 (13/07/2022)

| | |
|---|---|
| Viewer | FIX: Improve performance for rendering multi-frame with embedded overlay. |
| DICOM Router | FIX: Avoid degrading performance in uploading DICOM images by reducing memory usage to and .NET garbage collection. |
| WCF | FIX: Annotations on multi-frame are not correctly send out. |


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| | |
|---|---|
| Viewer | FIX: Performance improvement in image retrieval by reducing number intermediate images rendered during zooming. |
| Viewer | Exclude canceled studies from auto compare. |
| Reports | FIX: Use ORU configuration of author/ approver when transcriptionist approves on behalf of |
| Global | Add swiss representative in about box for swiss environments |
| Download | FIX: Downloads of multi-frame results in invalid ZIP file |

## 12.1.22 Release notes version 3.3.502 (14/06/2022)

| | |
|---|---|
| Share | Users linked to an admin group cannot use the share functionality anymore |
| Studies - study administration | Not possible for a source admin to edit the patient data in study administration |
| Token based interfaces - Cozo | It is impossible to open images using Cozo with Internet Explorer 11. Using login physician or patient has no issues. |

## 12.1.23 Release Notes Version 3.3.501 (13/06/2022)

Only fix in backend processing => no public release note required

## 12.1.24 Release notes version 3.3.500 (14/06/2022)

| | |
|---|---|
| Global | In case of opt-in, we'll collect anonymous usage information to |


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| | |
|---|---|
| | further improve the application based on real life information |
| DICOM Processor | IOCM inbound support:* 1113037 (Patient Safety) and 1113038 (Incorrect Entry) -> persistent delete* 1113039 (Date Retention) -> purge until resend |
| Studies | Filter on performing department in anomalies overview |
| Viewer | Notify if new images arrived on open study (if activated for source) |
| Image Viewing and Manipulation | New annotation: Polygon ROI density tool |
| User Settings | FIX: Auto compare menu in user settings is now correctly displayed |
| DICOM Router | FIX: respect requested character set in CFind Response |
| Explore | Improve usability of labels* define favorites* Label/un-label studies in a list |
| Users | User can define his own window level presets in addition to the source defaults |
| WCF | Use files in local image cache for C-Move response |
| Reports | Receive notification as requesting/CC physician when report is available and/or when images are available |
| MPR | MPR can be reset using a keyboard shortcut |


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| | |
|---|---|
| MPR | Usability improvements for MPR:* tri-plane view* rotate cross hair or individual axis* cycle views* easy reset |
| Viewer | ESC restores the default left mouse button operation |
| User Settings | Users can customize their keyboard shortcuts |
| Viewer | Images available in Local Image Cache are also visualised in order information viewport |
| Worklist | Filter on minimal number of images in the worklist |
| Image Viewing and Manipulation | Standard Deviation added as value for ROI annotation |
| Reports | Report consisting of only empty lines and/or whitespaces is handled as an empty report |
| Image Viewing and Manipulation | FIX: Endpoints behave correctly while drawing ROI ellipse |
| Reports | FIX: Rich text editor can be used on Safari browser |
| WCF | WCF client accepts DICOM Files without StudyTime, setting it to 00:00:00 |
| Multi-Monitor | Notification in multi monitor app if the update link is not accessible. |
| Global | FIX: correction in German mail templates |


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| | |
|---|---|
| User Settings | Apply increased report font in text block editor |
| Reports | RSDK improvement:* Switch Language* Modify playback volume* Performance logging |
| Viewer | Possibility to delete DICOM encapsulated PDF document in the study administration |
| Image Viewing and Manipulation | Save presentation state for rotated or flipped images |
| Viewer | Maintain scroll position and image manipulation when series is shown in multiple steps in the reading protocol |
| Multi-Monitor | Option to hide/show title bar on study tabs monitor to have same image proportions in case of a RIS driven workflow |
| Viewer | Allow copying of values from study info viewport fields |
| Viewer | For users with setting "multiple tabs" configured, open study in series picker will open an new study tab. |
| Reports | Setting to give user reporting permission for a department without being a source administrator |
| Viewer | Shortcut for ROI – ellipse (E) |
| Reports | Additional report formatting:* Bullet list* Header styles (configurable per user)* Voice commands for formatting |


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| | |
|---|---|
| Login | OTP via mail can be resent via mail or sms |
| Download | Export the following annotations as GSPS:Ruler , Line, Angle, ROI- rectangle, RIO –elpise, Arrow, Text |
| Explore | FIX: Study information no longer hidden after the user gains access using Break-The-Glass |
| WCF | Patient level CFind queries to PACSonWEB now supports wildcards (* and ?) for all supported fields |
| WCF | Multiple instances, series, studies can now be moved in a single C-Move request |
| Worklist | FIX: Worklist can now be sorted on report |
| Reports | FIX: Selecting a word by double click now also works in IE11 |
| Reports | FIX: user can now create and validate report with home reading in case RSDK is also configured |
| Reports | FIX: Microphone access no longer requested for transcriptionist |
| Viewer | FIX: Series linking for curved planner reconstructions (CPR vs. MPR) is now done correctly |
| Reports | Possibility to allow a transcriptionist to validate a report on behalf of the radiologist |


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| | |
|---|---|
| Share | FIX: Custom template is now used when printing reference number from PACS overlay |
| Worklist | FIX: Column images in worklist now displays the number of images available in the Local Image Cache |
| Viewer | FIX: Correction for scrolling behaviour when switching viewports in multi-monitor app |
| Login | Block login with DU POW code only having canceled studies instead of showing empty list |
| Studies | FIX: Give correct error message when adding an invalid national number in the study administration |
| Explore | FIX: Use search string of 4 characters, including Include special characters in PACS overlay |
| Image Viewing and Manipulation | Length ratio: inverse ratio now additionaly shown between brackets |
| Viewer | FIX: Rapid switching between tabs while study is loading causes series picker to load incompletely |
| Viewer | FIX: Scroll performance remains optimal when viewer is kept open for a long time |
| Token Based Interfaces | FIX: solved issue for access by patient using RSW |
| Worklist | Possibility to filter on unresolved anomalies in the worklist |


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| | |
|---|---|
| Viewer | Tolerance on differences in orientation for automatic linking increased to 15° |
| Reports | Optimization for latency warning when using RSDK |
| Reports | Reduce space between report body and signature |
| Studies | FIX: Source rules now also applied to tags that occur in a DICOM sequence |
| Reports | FIX: RSDK – Speech session for long reports remain open until audio is saved |
| Reports | FIX: Text blocks are no longer added with wrong language identifier that made them usable with RSDK |
| Viewer | Disable switching procedures via tabs in series picker if there is an unsaved report to avoid losing report content |
| Viewer | Allow to disable pointer lock for a (VDI) user |

## 12.1.25 Release notes version 3.3.405 (18/03/2022)

| | |
|---|---|
| Reports | FIX: When using RSDK, saving audio "never finishes" for large reports. |
| WCF | FIX: WCF clients go to 100% CPU when trying to recover from lost connections. |

## 12.1.26 Release notes version 3.3.404 (04/03/2022)

| | |
|---|---|
| Reports | Allow using shortcut to save report also if report viewport doe snot have focus. |


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| | |
|---|---|
| | Avoid loosing report when turning on shortcuts for external reporting in set-up for which it's not intended. |
| Reports | FIX: space inserted in front of '.' when suing RSDK speech recognition |
| Reports | FIX: Can't save report created with Home reading is RSDK speech recognition is also configured for user. |
| Reports | FIX: Shortcut to save a report (F8, Ctrl-F8) only work when report has focus |
| Study administration | Add anomaly for studies were moving large studies fails after user already left the study administration. |
| Local Image Cache | Make user Local image cache clean-up continues if some files it's attempting to clean-up are removed already. |
| WCF | MWL - return a value for Code Meaning (0008,0104 ) |
| Worklist | FIX: AD user with group mappings fails to access worklist. |

## 12.1.27 Release notes version 3.3.403 (04/02/2022)

| | |
|---|---|
| Reports | RSDK speech recognition: performance improvements |
| Reports | RSDK speech recognition - FIX: Edit report keeps loading when study is opened from open study button in series picker |


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| | |
|---|---|
| Reports | RSDK speech recognition - FIX: Words are added in the wrong order with RSDK speech |
| Reports | RSDK speech recognition - FIX: Speech recognition stops recording |
| Reports | RSDK speech recognition - FIX: After insert text block with voice command cursor is on start of report |
| Reports | FIX: Transcription user in admin group does not have the send for approval option. |
| Reports | RSDK speech recognition - FIX: Text segments with audio, but no text in the beginning of the report are not played backed |
| Reports | RSDK speech recognition - FIX: Database fields in text blocks are not replaced when inserted with RSDK voice command |
| Reports | RSDK speech recognition - FIX:RSDK speech recognition - FIX: Transcription workflow: Speech audio is played but without sound |
| Reports | RSDK speech recognition - FIX: deleted text reappears when saving a report |
| Viewer | FIX: Consolidated Patient history - reports from other sources not accessible |
| DICOM Processor | FIX: ImageExchange - Daily studies for which the images were not downloaded, status completed, progress 0% |


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| | |
|---|---|
| Worklist | Improved performance when searching on PatientId in the worklist |
| Viewer | FIX: Disappearing mouse pointer in multi-monitor app |
| WCF | MWL: Ignore empty study date in MWL query to fallback to scheduled procedures step date |
| WCF | MWL: Add Schedules AE, Protocol code and Type of patient ID to MWL response |
| Access | Don't allow none-administrator to access studies canceled in the RIS |
| Study administration | Allow to modify canceled flag (set via RIS integration) in the study administration. |

## 12.1.28 Release notes version 3.3.402 (05/01/2022)

| | |
|---|---|
| WCF | FIX: Pixel data for some images in large series lost when processing of the image is interrupted by a timeout. |
| WCF | FIX: Performance of incoming images negatively impacted by DICOM source rules |

## 12.1.29 Release notes version 3.3.401 (14/12/2021)

| | |
|---|---|
| Viewer | FIX: Images with negative pixel spacing not visible because of error in scale ruler calculation |
| Reporting | Performance improvement in loading Recognosco speech recognition |


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| | |
|---|---|
| ADT | FIX: Correction in handling ADT messages for sources where multiple internal patient ID's are allowed for same national number. |
| Management | FIX: Password expiration mail also send to AD user |

## 12.1.30 Release notes version 3.3.400 (30/11/2021)

| | |
|---|---|
| Login | Improved password expiration mail |
| Image Viewing and Manipulation | Improve auto selection when placing spine labels |
| Studies | Select multiple instances to move to another study |
| Multi-Monitor | Client side desktop integration with multi-monitor app |
| Reports | Correction workflow with audio playback, based on Recognosco speech recognition |
| DICOM Processor | Don't send mails or SMS for migrated studies |
| Viewer | FIX: Mouse cursor no longer disappears when doing image manipulations |
| Image Viewing and Manipulation | Scale ruler added to viewer |
| MPR | FIX: MPR creation from Local image cache |
| Local Image Cache | FIX: Local image cache accepts studies with empty accession number |


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| | |
|---|---|
| Reports | Automatically add text as template in report |
| Viewer | Allow to define keyboard shortcuts for external reporting flow |
| Reports | Integration Recognosco speech recognition (finalization) |
| Home Reading App | Text blocks can be used in combination with Home reading (phone based speech recognition) |
| Reports | Support pdf report in the order details tab of the patient history |
| Viewer | Clear indication for prior studies that are more recent than current study |
| Download | FIX: Study instance EUID adapted correctly when downloading DICOM |
| Viewer | FIX: cut-off of the bottom pixels of the viewer in iOS Safari solved |
| Reports | FIX: text block pop-up now showing on Safari and older Edge versions |
| Image Viewing and Manipulation | FIX: Window level support for IE11 |
| WCF | FIX: Modality Worklist - Characters before '_' no longer removed from Procedure Code |
| Management | More intuitive UI for labels in viewer |
| Reports | Improved robustness of ORU outbound communication |


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| | |
|---|---|
| WCF | FIX: C-FIND PATIENT level query needs to be on PATIENT root instead of STUDY root |
| DICOM Processor | FIX: Viewing and downloading of encapsulated PDF document with empty file name tag |
| Reports | FIX: Copy of report signature when using copy to clipboard function |
| Studies | FIX: Resend SMS in Study Administration when source setting "Send SMS on first image" is disabled (Norway) |
| Worklist | Worklist dashboard moved to worklist tab header when in full screen mode |
| Image Viewing and Manipulation | Improved usability for Window Level on images with 15 or 16 bit grayscale |
| Viewer | Loop the RP steps when navigating with shortcut keys * Page-Down on last step --> first step * Page-up on first step --> last step |
| Image Viewing and Manipulation | Add delta with 180° to angle measurement |
| Image Viewing and Manipulation | FIX: Use middle mouse button to Window Level on MPR |
| Multi-Monitor | Add links to open report or order from PACSonWEB in RISonWEB (configuration by DH Healthcare GmbH) |
| WCF | FIX: C-MOVE requests no longer fails if the destination cannot process JPEG Lossless |


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| | |
|---|---|
| WCF | FIX: Set access when sending known physician without physician number if received through HL7 |

## 12.1.31 Release notes version 3.3.303 (14/10/2021)

| | |
|---|---|
| Viewer | FIX: Check on patient consent in eHealth for consolidated patient history always fails. |
| Login | Extra check to block login in case duplicated reference numbers were send by third party system. |
| Viewer | FIX: List of reading protocols is not always refreshed when logging in with other user. (cached list from previous user is used) |
| Download | FIX: Auto transfer not working in German environment |

## 12.1.32 Release notes version 3.3.302 (09/09/2021)

| | |
|---|---|
| Studies | FIX: Study Administration - Impossible to update order information |
| Viewer | FIX: Performance impact of backfilling extracting an storing extra DICOM tags in the DB on the fly. |
| Reports | FIX: ORU Out - User with the default mapping always gets the warning 'Mapping not found' (report correctly exported) |
| Reports | FIX: Speech recognition does not work if a report is in edit mode in other tab |


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| | |
|---|---|
| WCF | FIX: Q/R interface C-MOVE intermediate status updates are not send resulting in some clients aborting association |
| Reports | FIX: Study Administration - Resend report throws error for user that does not have home reading configured |
| Login | FIX: EMR gateway with anonymous login does not show report |

## 12.1.33 Release notes version 3.3.301 (31/08/2021)

| | |
|---|---|
| Studies | FIX: Study anomaly: A different date of birth create for images without DOB processed by DICOM Processor directly (not via WCF) |
| Login | FIX: Some irrelevant field are shown on the support page if Login screen \disableRequestUsername=true |
| DICOM Processor | FIX: Merge study fails in Stored Procedure |
| WCF | FIX: PACSonWEB always uses SpecificCharacterSet ISO_IR 192 in MWL response, which is not supported by all modalities |

## 12.1.34 Release notes version 3.3.300 (27/08/2021)

| | |
|---|---|
| Project Plan | Release note |
| Reports | Multi-procedure reporting |
| Reports | Insert saved text blocks in a report |


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| | |
|---|---|
| Studies | Support accession number with multiple study instance UID's in download/transfer |
| WCF | C-MOVE from PACSonWEB to PACS moves all images in one association |
| WCF | Canceled studies ("study_state": "CA") are not returned in the MWL response |
| WCF | Procedures received via HL7 are no longer overwritten by DICOM study description |
| Explore | No anomalies are created for studies that are filtered, based on DICOM tags |
| Viewer | DICOM encapsulated pdf's (SOP class 1.2.840.10008.5.1.4.1.1.104.1) are shown in the document viewport |
| Worklist | Worklist dashboard: count of key worklist items in view at all times |
| Viewer | "Show original DICOM tags" available to source administrator users |
| Studies | Additional warnings for archive / PACS customers when deleting a study / images |
| DICOM Processor | Images without patient name and/or patient ID are accepted but create an anomaly |
| Study list | Performance improvement for filtering on unread messages in study list |
| Viewer | FIX: Studies with same frame of reference are now auto linked if |


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| | |
|---|---|
| | orientation slightly deviates (0,1° tolerance added) |
| Viewer | Improve styling for narrow series picker |
| MPR | FIX: In MPR cached images are now re-rendered when window level is changed |
| Worklist | Additional bulk reporting workflow options * Report a selection of studies * Skip * Open report in edit mode * First open other unreported form same order |
| Studies | Improve performance of access logging tab in study administration |
| Manage Templates | Possibility to switch order of first name and last name in mail templates |
| Viewer | Use of arrow keys to scroll through multi-slice series |
| Worklist | Possibility to filter a worklist on procedure code or description |
| User Settings | New user setting to automatically publish annotations |
| Viewer | Extended order details panel * Performing department * Requesting department * Prescription date * Visit information * Patient & * Study remark |
| Viewer | Show acquisition date and time in image overlay |
| Studies | FIX: Study administration - Patient information can now be modified when first name is empty |


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| | |
|---|---|
| Management | HDS requirement: extended logging on all admin actions by DH Healthcare GmbH personnel |
| Reports | FIX: download button for pdf reports now available for all resolutions |
| DICOM Router | FIX: DICOM Router now respects "PreferredTransferSyntax" when sending images to a destination via C-MOVE requests |
| Worklist | Default reservation time made customizable per source |
| Viewer | FIX: Series picker tooltips stay visible on image viewport |
| Access | Consolidated patient history for hospital users |
| Explorer | Clicking a filter label in study list and worklist filter allows to enter/change the filter value |
| Studies | Refresh anomaly list after solving an anomaly with an action that changes data |
| Viewer | FIX: User can now remove self-created private labels |
| Login | Mobile number no longer mandatory for AD users in account completion form |
| Viewer | Patient history tab added to the order details panel for fast navigation through prior reports |


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| | |
|---|---|
| Share | FIX: Auto transfer of study's now also works for CC2 physician if no CC1 is present |
| Share | FIX: flag now changes automatically when changing the country code from the phone number when sharing a study |
| Reports | Date & time for report availability changed to "dd/MM/yyyy HH:mm" format to avoid translation issue with months and weekdays. |
| Viewer | FIX:DU POW no longer freezes when FPS in cine loop is set to 0 |
| Viewer | Option to show relevant priors in the series picker in a separate block or chronologically in "Others" |
| Explore | FIX: PACS overlay now parses StudyTime that contain fractions correctly |
| Viewer | FIX: Comparing from patient history bar now also works when series picker is hidden |
| Worklist | FIX: Multi-select worklist filter value no longer disappears when deleting/ saving/modifying worklist |
| WCF | Support patient level C-FIND |
| Reports | Beta version of Recognosco speech recognition integration. (for early feedback only!) |
| DICOM Router | * Source administrators can define DICOM based rules to automatically send images to CvKO (Belgium) * |


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| | |
|---|---|
| | Anomaly creation if routed studies do not meet CvKO requirements |
| Login | * Fix for OTP method selection page in Multi-monitor for AD users * Fix ‘Remember OTP 30 days’ when asking OTP for AD users outside trusted IP range |
| Reports | FIX: text from browser speech recognition now always inserted at correct position after image manipulation |
| Worklist | FIX: order with a canceled procedure can now be opened from the worklist |
| Reports | Selected font size in report window is remembered |
| Local Image Cache | FIX: Local Image Cache now re-renders when a DICOM file with the already existing SOPInstanceUID is received |
| Worklist | Possibility to give permission to modify priority to non-source admins |
| Explore | FIX: Saved "Today" filter now updates as expected |
| Worklist | Additional worklist filters: "report author" & "report edit date" |
| Reports | FIX: corrected use of "Page Up" when editing a report |
| WCF | FIX: Duplicate national number anomaly now also created when national number is sent via DICOM |


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| | |
|---|---|
| Local Image Cache | FIX: Corrected pre-rendering of images in Local image cache |
| WCF | FIX: DICOM Compliance Modality Worklist result - SpecificCharacterSet DICOM tag now on the root level |
| Viewer | FIX: Image no longer blurry after image rotation |
| Worklist | FIX: Labels from other sources are visible in worklist |
| Reports | FIX: PACSonWEB page no longer jumps after editing preliminary report with browser recognition |
| WCF | Modality Worklist - Procedure code in response * (0032,1064) SQ Requested Procedure Code Sequence\(0008,0100) CodeValue * (0040,0100) SQ Scheduled Procedure Step Sequence\(0040,0008) SQ Scheduled Protocol Code Sequence \(0008,0100) CodeValue |
| Worklist | Improvements in worklist performance, especially for empty worklists |
| Local Image Cache | Performance improvement in Local image cache clean-up |

## 12.1.35 Release notes version 3.3.200 (30/04/2021)

| **Module** | **Release note** |
|---|---|
| Reports | Basic formatting and Speech recognition with local microphone |
| Viewer | Study/order details panel |


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| | |
|---|---|
| Explore | Filter on custom date range in study list |
| WCF | Use default 19000101 as default date when no date of birth is passed |
| Viewer | Save report and got to next in worklist |
| WCF | Don’t fail CMove if there are no images for a study, succeed with 0 images moved |
| Studies | FIX: Time stamps in study logging are now consistently formatted in 24H notation |
| DICOM Processor | Log timing of image processing in study log |
| DICOM Router | unknown AE title association errors are now logged as an error |
| WCF | Federated query: CMove respects order of sources in affinity domain |
| Viewer | FIX: 'Show my reference number' is available in portrait mode on mobile |
| WCF | WCF client only logs fatal errors are to windows event log |
| Viewer | Consolidate patient history - for hospital users only |
| Viewer | Reading protocols - choose favorite for procedure |
| Viewer | Default operation on left/middle mouse button configurable per modality |


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| | |
|---|---|
| Local Image Cache | Local image cache improvement: * MPR on local images * FIFO clean-up based on disk space threshold |
| Image Viewing and Manipulation | Show Left/right indication in CT and MR view ports |
| Viewer | iCAD integration |
| DICOM Router | Clean-up temporary files from conversions (in case of process interruption) |
| RSW | RSW - Allow to configure a different responsible radiologist for each department |
| Local image cache | Series splitting consistent for local and online studies |
| Worklist | Reporting worklists: Filter on status, assigned radiologist, performing department, room, ... |
| Explore | FIX: Adding bucket fails because of Customer Ref Code validator |
| Download | FIX: ConceptNameCodeSequence is now under the ContentSequence in SR for PACSonWEB report |
| Share | FIX: Print reference number: copy this information button doesn't work |
| WCF | FIX: C-FIND Endpoint - Patient Name is separated by '^' (=^+ space) instead of '^' |
| Access | FIX: can’t grant (via share) read&write access to a user already having read access |


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| | |
|---|---|
| DICOM Router | FIX: Use # as field separator in file names instead co '-' to avoid issue with '-' in AE titles |
| Viewer | Simplification of extended series picker. * Less different blocks * prior study stays in chorological order when compared * two levels of relevance |
| Image Viewing and Manipulation | Spine labeling panel |
| Viewer | Shortcuts to open other systems via URL in PACSonWEB |
| Viewer | keyboard shortcuts for cine, Density measurement, spatial locator |
| Viewer | Performance of loading first image from series file on object storage |
| WCF | Improved logging of patient creation and updates |
| Image Viewing and Manipulation | Text annotation |
| Viewer | FIX: Size of series picker is not remembered when switching exam |
| Multi-Monitor | Setting to leave Syngo.via in control of it’s monitor layout. |
| Multi-Monitor | Support PACSonWEB app for user profiles on network drive |
| Login | FIX: external authentication app as second factor needs to be set twice before it’s active in user settings |
| Viewer | Age at acquisition is available ( between brackets behind the date of birth) in the demographic overlay |


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| | |
|---|---|
| Viewer | Old viewer was removed from PACSonWEB |
| Studies | move images and series: extra search criteria |
| Studies | move images and series: improved progress indication |
| Studies | FIX: SIP-3311 Study administration: manage series and images broken after reverting changes |
| Studies | FIX: Select button not visible in study administration (study move) |
| Studies | FIX: Study administration: Negative image count when move images to series that has deleted images |
| Login | Allow UPOW codes for canceled procedures in multi-procedure order |
| Image Viewing and Manipulation | Some improvements in interacting with annotations were done * Cobb angle: Always measure inner angle * Angle: Set Leg-corner-leg instead of corner, leg 1, leg2 * Don't select annotation while drawing a new one, to allow measuring * distance between other annotations * Always return to none-annotation function after drawing annotation (instead of returning to other annotation) * Avoid overlap between labels * Pan icon was replaced by arrow, to ease selection |
| Viewer | FIX: Tooltip outside page with right side series picker |


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| | |
|---|---|
| Viewer | FIX: One-up only works if pan tool is active |
| Image Viewing and Manipulation | Indicate if ruler annotation is vertical |
| Multi-Monitor | Make it possible to disable local image cache for a multimonitor setup |
| Share | Configurable mail subject for image availability mails |
| WCF | FIX: When changing Requesting Physician to an Unmapped Physician, old access record is not removed |
| Viewer | FIX: Printing an image on one page independent of aspect ratio |
| Login | Improved implementation of “remember this browser for 30 days” |
| Multi-Monitor | FIX: Master window in multi-monitor sometimes flickers when getting/losing focus |
| MWL | FIX: Use ‘,’ instead ‘^’ as name part separator |
| Share | FIX: Share study without accession nr. from PACS overlay |
| Multi-Monitor | FIX: QUOTA_EXCEEDED error for in multi-monitor app with German translation |
| DICOM Processor | Trigger anomaly for merged studies of different patients |


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## 12.1.36 Release notes version 3.3.111 (01/03/2021)

| Module | Release note |
|---|---|
| MPR | FIX: If slices have negative coordinates on an axis (e.g. x axis for sagittal) the slices are sorted in incorrect order to construct the volume with the result that the volume and the slices generated from it are flipped. |

## 12.1.37 Release notes version 3.3.110 (29/01/2021)

| Module | Release note |
|---|---|
| Token Based Interfaces | Show RSW status and resend in study administration |
| Multi-Monitor | Allow to split wide monitor in two 'virtual' monitors |
| Annotations | Length loss and length ratio annotation |
| Access | Show to patient when report becomes available |
| Viewer | Activate scroll function via context menu |
| Viewer | Allow to restrict auto-compare option to certain modality types |
| Share | Allow to show list of procedures in custom print reference number template |
| Viewer | Button to reload study |


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| | |
|---|---|
| Viewer | Allow to scroll 1 series using multiple monitors |
| Viewer | Allow to activate scroll function using StreamDeck |
| WCF | Don't overwrite procedure, received via HL7, by DICOM study description |
| WCF | Don't return studies without images in CFind result |
| Login | Update cookie policy |
| Viewer | Avoid double fetch operation by disabling button after click |
| Viewer | Improved CT loading performance |
| Viewer | Allow auto-compare with studies from the same order |
| Studies | Provide an indication in the anomalies overview if an anomaly is blocking access or is just informational |
| Token Based Interfaces | RSW - Support different HCParty department types |
| Viewer | Monitoring of study loading time |
| Viewer | When tiling 'all series', apply window leveling only to images of the same series |
| Login | Add "Imprint" information to the login page |
| Image Viewing and Manipulation | Improvements breast border detection |


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| | |
|---|---|
| Viewer | Add documents to a study by "Drag and drop" in the documents viewport<br>Allowed file types: pdf, png, tif, rtf, jpeg, jpg and txt |
| WCF | FIX: Anomaly - "Different national number from HL7" not mentioning previous national number |
| WCF | FIX: C-FIND Endpoint - 'Modalities In Study' tag does not correctly return multiple values |
| WCF | FIX: C-FIND Endpoint - 'Modalities in Study' parameter doesn't work |
| Viewer | FIX: When printing an image, the overlay data is not shown |
| Viewer | FIX: Real Time PNG generation in the UI project always creates grayscale images |
| Download | FIX: Report visible, independent of source settings, when downloading study |
| Viewer | FIX: breast border does not update with multiple images in 1 viewport |
| Explore | FIX: sorting on column 'study status' doesn't work anymore |

## 12.1.38 Release notes version 3.3.100 (07/11/2020)

| **Module** | **Release note** |
|---|---|
| Explore | Allow to open explore page via URL integration |


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| | |
|---|---|
| Viewer | Allow to send an image or pdf documents as part of ORM |
| Viewer | Shortcut keys for the viewer can be customized (by DH Healthcare GmbH) |
| Studies | Move study content to other study (fix-up) |
| Local Image Cache | Local image cache in case PACSonWEB is set up as a PACS |
| Client Configs | Allow WCF client tot handle HL7 messages for multiple sources |
| Viewer | Improved CT scrolling performance |
| Groups | Clear message that you can not remove yourself form a group while being primary contact |
| Token Based Interfaces | RSW - Publish studies based on LastModificationDateTime instead of StudyDateTime |
| MPR | Improved MPR scrolling performance |
| Login | Password reset mail on second user request for registered physician ID |
| WCF | Support open date and time ranges in C-Find |
| Login | Extend default session timeout in PACSonWEB |
| Studies | Automatically clear anomalies when patient merge is done/received |
| Login | Allow to return to log-in page from OTP page |


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| | |
|---|---|
| Share | Notification that two factor does not apply in case a study is shared with a medical department |
| Viewer | Allow to fetch images for HL7 filtered studies |
| Viewer | Show all linked labels for study in study administration |
| Login | Adapt user manual URLs in mails to https to avoid triggering SPAM filters |
| Reports | Link to new viewer if PDF report is shown in the old viewer |
| Login | Added option to resend pin code |
| Studies | Added info on how to deactivate "Mail on new study" in mail template |
| DICOM Processor | Update of StudyInstanceUID for studies processed by migration flow (not via WCF client) |
| Multi-Monitor | Download multi-monitor installer from portal with automated upgrade mechanism |
| Client Configs | Support multiple Transfer destinations on WCF client |
| Login | OTP setting "Remember this device for 30 days" not reset when IP changes |
| Explore | Expired studies without a report remain visible in explore page to allow fetch |
| Viewer | Delete single images or series from a study or move to another study (split/ merge) |


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| | |
|---|---|
| Multi-Monitor | Support Stream Deck keypad in multi-monitor app |
| Login | Add Responsible Disclosure policy to the login page |
| Global | Text next to TeamViewer button "Only start when in technical support" |
| WCF | Extra tags can be included in CFind for PACS synchronization |
| Viewer | Additional user preferences for the viewer |
| Viewer | Fetch based on accession number (in case Study Instance UID is unknown) |
| WCF | HL7 - Update Performing Department and requesting department via ORM |
| DICOM Processor | Link images to source Modality when sent directly to PACSonWEB |
| Token Based Interfaces | Use TLS 2.0 for COZO communication |
| Viewer | More prominent fetch images button |
| Viewer | Improvement in key images functionality (e.g. Option "show in original series") |
| WCF | Update national number on an ADT merge message |
| Explore | Explore list available in multi monitor application and in separate tab in viewer. |
| PACS Push | Add support for StudyQueue based synchronization in WCF3 |


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| | |
|---|---|
| Explore | PACSonWEB UI optimized for mobile phone |
| Login | Add "Resend OTP"-option in activation screen |
| Login | Unlock user account when logging in with eID |
| Reports | FIX: QR Codes in templates are not printed in IE Explorer and Edge |
| Token Based Interfaces | FIX: EMR gateway cannot open study by accession number for user linked to multiple repositories |
| PACS Push | FIX: Sync - Study is moved again if study description contains special characters |
| Viewer | Clear warning on unsupported or suboptimal browsers |
| Viewer | FIX: CT presets don't work CT series in case of drag & drop |
| Viewer | FIX: New viewer doesn't work in IE11 if DOM Local Storage is disabled |
| WCF | FIX: Series level C-FIND returns Study Procedure instead of SeriesDescription |
| Reports | FIX: Report text cannot be selected in the new viewer |
| PACS Push | FIX: Sync - Automatic synchronization fails for studies with an empty accession number |
| Download | FIX: When retention of PNG images has expired the option to download as PNG no longer functions |


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| | |
|---|---|
| Viewer | FIX: Compare does not work when series picker is not shown |
| Viewer | FIX: Difference in fps and demanded framerate |
| Share | FIX: Print reference number - language not passed to confirmation dialog |
| Viewer | FIX: Some MR series open with highest image number |
| DICOM Router | FIX: Dicom Router doesn't accept associations from Osirix 11.0.4 |
| Reports | FIX: Slovenian special characters not displayed correctly in report |
| WCF | FIX: Maximum retry count for Storage commit |
| DICOM Processor | FIX: Studies without accession number and study date are not processed |
| Reports | FIX: Report signature isn't copied when clicking "Copy Report" in the new viewer |
| Download | FIX: Anonymization fails when client is not connected to server |
| Login | FIX: 'Check password' symbol (eye) not visible when password is filled-in by chrome |
| Explore | FIX: Viewer preferences not applied for users that are logged in via EMR gateway |
| WCF | FIX: CFind on PatientID too slow |


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| | |
|---|---|
| WCF | FIX: CFind to DU POW Gateway returns '?' instead of special characters |
| Login | FIX: URL for Local import page is invalid when the patient name contains a point (.) |

## 12.1.39 Release notes version 3.3.0 (19/06/2020)

| **Module** | **Release note** | **New viewer only** |
|---|---|---|
| Access | Delayed report availability can be based on report date passed via ORU | |
| DICOM Processor | Allow to send patient SMS from study administration even if automatic SMS are turned off (Norway workflow) | |
| DICOM Processor | FIX: Don't send SMS to patient when a study is marked as 'BlockPatientAccess' | |
| DICOM Processor | Add support for MS Azure blob storage | |
| **DICOM Router** | **MWL provided by PACSonWEB, based on orders sent by ORM** | |
| **DICOM Router** | **Support DICOM tag sequence in transformer and filter scripts in DICOM router** | |


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| | | |
|---|---|---|
| **DICOM Router** | **Check patient consent in eHealth for federated query (Belgium)** | |
| DICOM Router | Support 0002 tags in file name and scripts in DICOM Router | |
| DICOM Router | Allow WCF client to do C-Find, C-Move to other sources | |
| Download | Fix: Also send none-image instances to PACS when using autotransfer | |
| Download | Added field to DICOM SR for reports created in PACSonWEB to make it DICOM standard compliant | |
| Download | Add status fields to DICOM SR for reports created in PACSonWEB | |
| Explore | Show national number in PACS overlay (if PACS supports 0010:1000 Other Patient ID's) | |
| **Explore** | **Add labels to study in study administration.** | |
| **Explore** | **Redesign of PACSonWEB explore page** | |
| Global | Switch between PACSonWEB environments after log-in. | |


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| | | |
|---|---|---|
| Global | Add German environment to environment list | |
| Home Reading App | Improve behavior of Home reading PACSonWEB app in case of network interruption | |
| Annotations | FIX: annotations on multi-frame linked to correct frame | |
| Annotations | FIX: Density measurement doesn't use the DICOM Tag 'Modality sequence LUT' | |
| Annotations | FIX: No density calculation for ROI drawn at the border of the image. | |
| Annotations | Arrow annotation | |
| **MG** | **Invert or window level breast area only** | **** |
| MG | Mammography reading protocols | * |
| Login | Open PACS overly via EMR gateway | |
| Login | FIX: notifications PACSonWEB app on androïd no longer work | |
| Login | FIX: error when DA user creation when default properties are configured | |


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| | | |
|---|---|---|
| Login | FIX: restrict uniqueness check for reference number to own source when using source portal | |
| Login | Add link to resend One-Time Password in OTP page | |
| Login | Redesign of PACSonWEB login page | |
| Login | Show partial phone number or email address in OTP page | |
| Login | FIX: Authenticator App - The OTP field for adding a new device skips characters if the users types too fast | |
| **Multi-Monitor** | **New PACSonWEB viewer with reading protocols and compare (not active by default)** | **** |
| Multi-Monitor | Integration between multi-monitor PACSonWEB and local Syngo.via for 3D | * |
| Multi-Monitor | Reading protocols | * |
| Multi-Monitor | RISonWEB desktop integration with multi-monitor PACSonWEB | * |
| **Archive** | **Handle storage commit request for archive customers** | |


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| | | |
|---|---|---|
| Reports | Log report creation and modifications in study logging in study administration | |
| Share | Allow to share when logged in with AD user via EMR gateway | |
| Share | Address details for medical departments in share dialog | |
| Share | FIX: source logo not used for confirmation mail when study was opened form share email | |
| Share | FIX: no warning in case of correctly formatted but none-existing dates. E.g. 29/02/2021. | |
| **COZO/RSW** | **Don't show user agreement or tutorial pop-up when opening PACSonWEB form COZO or RSW.** | |
| RSW | FIX: RSW - GetTransactionDetails denied when order of hcparty of the author is not correct | |
| COZO | FIX: CoZo - TransactionList response not fully compliant with CoZo Cookbook | |


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| | | |
|---|---|---|
| COZO | Monitoring on performance and failures of COZO requests | |
| RSW | FIX: Adjust method for sending requesting physician to RSW | |
| COZO | FIX: CoZo - Also send the Requesting Physician information to CoZo for physicians that don't have a PACSonWEB account | |
| COZO | Show report in patient history for CoZo users that are not physicians but have access to images is allowed. | |
| Viewer | Select window level presets using numpad | * |
| **Viewer** | **Add documents to a study (.txt, .pdf, .png)** | **** |
| Viewer | FIX: improve loading performance for large series (e.g. 10000 images) | |
| Viewer | FIX: show update values in Show DICOM tags for study description and study instance UID | |
| **Viewer** | **Relevant priors in series picker, based on procedure linking** | **** |
| **Viewer** | **Create series with Key images** | **** |


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| | | |
|---|---|---|
| Viewer | FIX: "Expired Images" message doesn't disappear after fetching the images for these studies | |
| Viewer | Thick slice scrolling | * |
| Viewer | Show series picker in a viewport | * |
| WCF | FIX: Inefficient Query execution when IMAGE level C-FIND query is executed against WCF Client | |
| WCF | Allow to tune polling interval for autotransfer workflow | |
| Viewer | Allow to send a txt file with order info as part of ORM | * |
| WCF | Allow multiple Patient ID's for a national number for a sources (turned-on on request) | |
| WCF | FIX: Patient DOB not updated by HL7 ORU/ ORM. | |
| WCF | Allow to disable emails to requesting physician for older studies (priors/ migration) | |


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| | | |
|---|---|---|
| WCF | FIX: C-Find uses ',' instead of '^' as separator for name parts | |

## 12.1.40 Release notes version 3.2.1000 (14/12/2019)

| Project Plan | Release Note |
|---|---|
| COZO | Support for opening studies without accession number via COZO |
| WCF | Fix: Clean-up temporary files written in the crypto folder |
| DICOM router | Include number of images moved in final C-MOVE response |
| WCF | FIX: ADT - exception when merging patient with deleted studies |
| WCF | FIX: WCF3 Work list query does not add RRN to DICOM headers |
| Viewer | FIX: "Expired Images" thumb nail does not disappear after fetching a study with SR |
| DICOM router | FIX: endless retry if a file already exists in error folder |
| **Image Viewing and Manipulation** | **Density measurements on Region Of Interest (ROI)** |
| Viewer | FIX: Avoid report scrolls to second line on opening |
| **COZO** | **Allow to configure access to studies via COZO for Healthcare providers based on roles, E.g. physicians, dentists ...** |


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| | |
|---|---|
| Viewer | FIX: Scrolling through images of a series moves the entire viewport on Safari and Chrome on iOS13 |
| Home Reading App | Allow to pair with new browser if app is still paired wit previous browser |
| Home Reading App | FIX: Android app stuck in loop when denying camera permission on opening home reading |
| Viewer | FIX: Not all studies from order are loaded in series picker |
| Login | FIX: avoid losing pairing with Lastpass or Google authenticator app for 2nd factor authentication |
| WCF | Add setting to define delay when sending report available SMS |
| DICOM Router | FIX: Endless loop router when trying to delete file that has already been deleted or moved |
| Login | Reset password unlocks locked account |
| **PACS Sync** | **Possibility to send images directly from modalities without studies being removed by PACS synchronization afterwards** |
| Access | FIX: If a delay is configured for availability of report, images are not available via patient login either |
| Login | Allow to disable Tutorial and cookie warning in URL integrations |
| Studies | Show accession number in Overview - Anomalies list |


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| | |
|---|---|
| Share | FIX: Share study anonymized and sending reference number via SMS does not work |
| WCF | ORM parser - remove unnecessary warnings in Windows Application log |
| Management | User activation mail available in Slovenian |
| Reports | Header tags are stripped from DICOM SR with HTML report text |
| Access | Log on removal of access rights by administrators |
| PACS Sync | Ability to perform multiple C-Moves in parallel |
| Login | Allow use of PACSonWEB app when logging in with a user created through AD integration |
| COZO | Show user agreement only once when opening multiple studies via COZO |
| WCF | FIX: Report Status not correct if DICOM object and ORU are processed at exact the same time |
| WCF | HL7 ADT Merge - Don't fail messages trying to merge the same patient |
| Access | Add username who transferred the study to the PACS in study administration |
| DICOM Router | Router - Visual Notification that a Route is disabled |


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| | |
|---|---|
| DICOM router | [Standalone Router - UI] retry failed queue without having to stop the service |
| DICOM router | [Standalone router - UI] - change font in filter and transformer script windows to a console font for better readability |
| Login | Sort list of delegates |

## 12.1.41 Release notes version 3.2.900 (23/09/2019)

| Project Plan | Release Note |
|---|---|
| Global | Integrate Digital Ordering in PACSonWEB |
| Global | Upgrade .NET framework dependency to 4.8 |
| **Global** | **Slovenian as UI language for PACSonWEB** |
| Groups | Group confirmation dialog: include all users for admins (also those that choose not to expose their contact details) |
| **Login** | **Display clear message if results are not yet available for a security code.** |
| Login | Repeat source contact number at the bottom of the support page |
| Login | Bug Fix: 'Send backup SMS' does not work in OTP page when using the authentication app |
| Login | Bug Fix: OTP still send via mail when switching form SMS to mail |


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| | |
|---|---|
| Users | Reactivate account when logging with Belgian EID |
| Access | Allow to hide studies for none strong authenticated users for your source |
| Anomalies | In the anomalies page: Clear message when trying to merge patient that has already been merged (e.g. via ADT) |
| Download | Reduce impact of viewing studies with a large number of images (> 20.000) on PACSonWEB backend |
| Download | Bug fix: Download single image does not work in IE or Edge |
| Download | Additional access logging in case studies are downloaded from PACSonWEB |
| **Viewer** | **Add support for reference lines and linked scrolling in CT multi-frame studies** |
| Viewer | Bug Fix: Reference lines are off by 1 image |
| Viewer | Toolbar not drawn while loading study |
| Viewer | Bug Fix: Fetch for patients or when opening via COZO is no longer possible |
| Share | Show full patient name in email when allowed when authentication is required for security code |
| **Reports** | **Merge home reading and PACSonWEB Authenticator app for Android & support switch language** |


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| | |
|---|---|
| Home Reading/Authentication App | PACSonWEB App for iOS: Improve usability |
| Dicom Processor | Support OtherPatientIDsSequence for sending social security numbers |
| Monitoring | Refined monitoring detect a delay in uploading images to PACSonWEB |
| Monitoring | Add monitoring checks to WCF3 router embedded in the client |
| PACS Push | Bug fix: using StudyInstanceUID as accession number resulted in unconstraint query in PACS synchronization |
| Router | Bug Fix: images with space as accession number are stuck in the router queue |
| WCF | Bug fix: PACSonWEB gateway processing DICOM files (0kb) before they are fully saved by the DICOM Router, causing them to fail |
| WCF | Bug Fix: Incoming Images processing did not always recover form lost connections |

## 12.1.42 Release notes version 3.2.801 (09/08/2019)

| Project Plan | Release Note |
|---|---|
| DICOM Processor | Bug fix: for files that image upload to PACSonWEB (DICOM Processor failed)<br>• If there is no accession nr. in the DICOM file<br>• If Images were not registered by the WCF3 server |


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| | |
|---|---|
| | • Images send to a client for one WCF client of one source but need to be linked to other source |
| WCF | Bug fix: Procedure of existing study updated to 'UNKNOWN' if no procedure is passed in ORM/ORU |

## 12.1.43 Release notes version 3.2.800 (26/07/2019)

| | |
|---|---|
| Access | Show/Hide "Add Study", based on user setting |
| Access | Show Bank-ID logins in access logging |
| Dicom Processor | Fix: correction in default window level in case the Study contains a VOILUT sequence |
| Download | Update referring physician (0008:0090) when downloading or transferring a study |
| **Explore** | **Allow user to change order of filters in the explore page** |
| Explore | Fix: Patient search based on National Number search for Norway and new countries |
| Explore | Add order level information in the study administration |
| **Explore** | **"Select all" checkbox for selecting all studies in (filtered) PACSonWEB explore page** |
| Explore | Improved performance for searching on Patient ID |


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| | |
|---|---|
| **Global** | **Internet Explorer 9 and Internet Explorer 10 no longer supported** |
| Login | No OTP required to add study, requiring second factor authentication, in case the user is already strong authenticated |
| **Login** | **Use of PACSonWEB authentication app for two-factor authentication** |
| Reports | Fix: ReferenceNumber in PrintReport template generated a new security code instead of printing an existing one |
| **Reports** | **Allow to switch language during speech recognition (iOs only, Android app to be released with PACSonWEB 3.2.900)** |
| Router | Fix: improve performance of federated queries |
| Router | Improved throughput of DICOM Router in case of many faulty DICOM files |
| Share | Ignore the leading "0" when entering a mobile number when sharing a study |
| Share | Fix: Anonymization/Pseudonymization creates a study instance UID that is more than 64 charachters |
| Share | By default set two-factor authentication when sharing with a self defined recipient |
| **Access** | **Sources can impose "Break-the-Glass" requirement for group members of the requesting physician to motivate access** |


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| | |
|---|---|
| RSW | Fix: Limit retries for unregistered patients in RSW |
| COZO | Fix: GetTransactionList for patient with studies in multiple private practices |
| Viewer | Reload of a prior study after fetching does not change open study |
| Viewer | Improved interaction with circle annotation |
| **Viewer** | **Make / Share / Hide annotations in PACSonWEB** |
| Viewer | Fix: take in account origin tags for positioning of imported annotations |
| **Viewer** | **Download single image as png, e.g. to use in a presentation.** |
| WCF | Improved handling of images with accession number in a non-default tag |
| WCF | Fix: "File in use by another process" exceptions while processing incoming images |
| WCF | Invalid security codes in ORM or ORU no longer blocking for processing remainder of the message |
| WCF | Improve performance of C-Move requests to PACSonWEB |

## 12.1.44 Release notes version 3.2.701 (15/05/2019)

| | |
|---|---|
| Share | Bug fix: Default anonymization gets stuck on 'loading files...' |


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| | |
|---|---|
| DICOM Processor | Bug Fix: Incorrect default window level issue for multi frames with SharedFunctionalGroupSequence |
| DICOM Processor | Bug FIx: Incorrect default window level on images that have VOILUT and a Window width and center tags populated |
| Global | T+left click listed for 3-point angle, while implemented shortcut is G+left click |
| Share | Bug Fix: Only one line is shown in forward status |
| Login | Bug fix: Can't login with delegate user |

## 12.1.45 Release notes version 3.2.700 (10/05/2019)

| | |
|---|---|
| Login | **Customized Support FAQ page: hints in case of user issues for patients and requesting physicians** |
| DICOM router | **Federated query: C-Find, C-Move for studies of other sources for a patient in order to make studies from PACSonWEB available in the local PACS system** |
| Login | **Improved EMR/PACSonWEB URL integration : access logging on correct user & personal annotations** |
| Login | **Usability improvement for 2 factor authentication: OTP via mail or SMS, mail token to allow adding mobile number** |
| Localisation | Spanish and Italian as GUI language |


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| | |
|---|---|
| RSW | **eHealth: RSW cloud-to-cloud integration: delete transaction + retry failed posts** |
| Viewer | **New tools: line and 3 point angel annotations** |
| Explore | **Search on Patient ID in PACSonWEB overview page** |
| Share/download | **Anonymization/Pseudonymiza tion schemes (paying feature): allows to apply a specific anonymization scheme e.g. for studies used in a research project** |
| Share | Change label to 'medical department' in sharing |
| Access | RADION - for new requesting physician, get RIZIV numbers from name suffix in DICOM header to map to a PACSonWEB user |
| PACS Push | Removing study based on StudyInstanceUID sometimes not correct when study has multiple studyInstanceUIDs |
| Dicom Processor | Bug fix: source setting 'getReportFromSR=false' is not respected |
| Reports | Print report uses PACSonWEB user language instead of browser language |
| Users | Improvements in mails to users: Mr./Ms. based on gender |
| Viewer | Extend URL integration to allow passing an order number |


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| | |
|---|---|
| Login | Trust this computer for 30 days. Don't ask OTP again. |
| Login | Don't show Cookies warning in an EMR integration |
| Studies | Bug fix: DICOM Tags not shown in 'Dicom Tags'-popup |
| Groups | Admin users should be able to see all group members, even those that don't show contact details |
| Share | Bug fix: Avoid two bucket codes generated when sharing studies from the PACS Overlay |
| Router | Bug fix: add support in DICOM router for accession numbers that contain system reserved characters |
| Download | Bug fix: Error when transferring study a second time when the 'imported' label was added |
| Share | Bug fix: Email validation fails when email address domain contains an uppercase value |
| Explore | Improve usability of Add study |
| Login | Bug fix: Password box is shown after invalid login with AD/FS |
| Global | Add warning that 3.2.700 is the last version that supports IE9 and IE10 |
| Studies | Automatically reload study when the fetch is finished |


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| | |
|---|---|
| Access | Send text messages when images are available only after receiving HL7 |
| Login | Bug fix: Reset passwords sends multiple mails, only last one works |
| Favorites | Show favorite medical department in user settings |
| Studies | Bug fix: Cannot merge studies (e.g. when accession number changes) after a transfer action |
| Router | Allow to enforce transfer syntax |
| Access | Source setting to allow or block automated sharing of exams with group members |

## 12.1.46 Release notes version 3.2.603 (12/02/2019)

| | |
|---|---|
| WCF | Bug fix: When a series moves between studies, images are still linked to original study => broken image icon |
| Viewer | Don't show studies with empty order number as being from same order |
| Viewer | Don't show tutorial when opening PACSonWEB from EMR |
| Login | Configurable timing for logout on inactivity for PACSonWEB in EMR integrations |
| Viewer | Bug fix: Script error when selecting window level preset before series is fully loaded in embedded browser |


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## 12.1.47 Release notes version 3.2.602 (28/01/2019)

| | |
|---|---|
| Share | Remember previous share settings |
| Share | Allow sending of Reference number and OTP code to the same destination type (mail / mobile) based on source setting |

## 12.1.48 Release notes version 3.2.601 (24/01/2019)

| | |
|---|---|
| Login | Bug fix: Not possible to login with username and password if no mobile number is registered |
| Login | Bug fix: SendOTPToMail not working if no mobile number is registered |
| DICOM router | Resolved performance issue for image processing |
| Explore | Resolved performance issue for queries on security code |
| COZO | Bug fix: Open study through COZO link |
| Login | Enhanced layout of customer logo on login page |
| Share | Quick sharing with non-PACSonWEB users |
| WCF | Improved performance by load balancing on ORM processing |
| DICOM Processor | Support additional SOP classes to get report from DICOM SR reports:<br>• 1.2.840.10008.5.1.4.1.1.88.22 Enhanced SR |


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| | |
|---|---|
| | • 1.2.840.10008.5.1.4.1.1.88.33 Comprehensive SR |
| DICOM Processor | Bug fix: Densitometry secondary captures not correctly processed |

## 12.1.49 Release notes version 3.2.600 (11/01/2019)

| | |
|---|---|
| Login | Required Opt-in terms and conditions on login page |
| Login | Enhanced AD / ADFS login |
| Login | Login page restyled |
| Login | Patient login through Bank ID (Norway only) |
| Login | Minimum requirements for security codes |
| Sharing | **Reworked sharing for better usability** |
| Sharing | Bug fix for Retrying a share task creates the bucket/DU POW code |
| Sharing | Improved patient privacy in sharing mails |
| Sharing | Validity period for shared studies configurable on source level |
| Study Page | Faster way for loading 16-bit images |
| Study Page | Bug fix: Diacritics not shown properly in "Show DICOM tags" |
| Study Page | Automatically link series with same table position |


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| | |
|---|---|
| Study Page | Stepless zoom - freeze and change cursor on the spot you want to zoom on |
| Study Page | Fetch images for created studies, based on ORU only |
| DICOM processor | SR support for nested sequences |
| Management | DICOM tag filter management |
| Report | Correct handling of SR report status (partial, preliminary, unverified, validated) |
| DICOM Router | UI for standalone router |
| Monitoring | Management tool for Checks |

## 12.1.50 Release notes versie 3.2.503 (31/10/2018)

| | |
|---|---|
| Login | Improvement: AD integration login also accounts for trusted subdomains |
| Share | Bug Fix: transfer fails due to incorrect use of the 'Created' TimeStamp |

## 12.1.51 Release notes versie 3.2.502 (14/09/2018)

| | |
|---|---|
| Access | Bug Fix: security patch for restriction of access for source admins on shared repo |

## 12.1.52 Release notes versie 3.2.501 (13/09/2018)

| | |
|---|---|
| Viewer | Bug fix: series grouping of XA images, based on SOPInstanceUID |


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| | |
|---|---|
| Share | Bug fix: Sharing of a study with a blocking anomaly is not possible and a clear warning on the issue is shown |
| Explore | Unfiltered list is displayed immediately after clicking "Reset filters" in explore page |
| DICOM Processor | Improved load balancing in DICOM processor |

## 12.1.53 Release notes version 3.2.500 (29/08/2018)

| | |
|---|---|
| General | Use of language picker for faster switching of interface language |
| General | **New Feature: PACS archiving in PACSonWEB** |
| Sharing | Bug fix: Uploading studies from PACS overlay for non PACSonWEB users |
| Sharing | Sharing with a group: possibility to send notification mail to entire group |
| Sharing | Adjustment on access rights when sharing study multiple times with the same user |
| Study Page | Grouping of XA modality on SOPInstanceUID in sead of SeriesInstanceUID |
| Study Page | Default use of (0008,2144) RecommendedDisplayFrameRate in Cine loop |
| Explore Page | Increased stability for preforming large worklist queries |


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| | |
|---|---|
| Explore Page | Correction in case of anomalies for small screens |
| Explore Page | Disable filter fields when query is running |
| Reports | Bug fix: reports not visible on small devices when no images |
| Users | Support for multiple physician numbers per registered user |
| Login | **New Feature: payment module for patients** |
| Monitoring | Advanced monitoring on local installations |
| Active Directory | **New Feature: support for Active Directory Federated Services (ADFS)** |
| Access | Increased security on automated mappings |
| Interfaces | **New Feature: Direct link from EMR to PACSonWEB** |
| Interfaces | **New Feature: RSW and Abrumed integration** |
| WCF | Allow ADT patient merges in case of study anomaly |
| DICOM Router | Enhanced DICOM router: support JPEG 2000 transfer syntax, remote configuration, PACS archiving |
| Reports | Improved parsing of HTML reports |


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## 12.1.54 Release notes version 3.2.402 (05/07/2018)

| | |
|---|---|
| Studies | Bug fix: In case a DICOM file or HL7 message is received for a known Study instance EUID or accession number but a different patient an anomaly is registered |

## 12.1.55 Release notes version 3.2.401 (07/05/2018)

| | |
|---|---|
| Viewer | Bug Fix: patients no longer get an error message when fetching expired images with a providing source |
| Image viewing and manipulation | Bug Fix: location of density measurement now aligned with tip of droplet picker |

## 12.1.56 Release notes version 3.2.400 (13/04/2018)

| | |
|---|---|
| General | Support links to PACSonWEB from MS Word, Excel, Powerpoint, ... |
| General | Advanced detection and blocking of unsafe HTML tags |
| Share Study | Modify expiration date for shared studies |
| Share Study | Enhancement: Clearing patient information from private DICOM tags when sharing a study anonymously |
| Study Page | **New Feature: Indication on how long images will be available** |
| Study page | Small enhancements on patient anomalies overview page |


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| | |
|---|---|
| Study Page | Improved scrolling sensitivity in CT and MR series |
| Study Page | Clear message if report is not, not yet or will never be available for patient and requesting physician |
| Study Page | Improved usability for changing measurements |
| Study Page | Bug fix: window level for multiframe tomo |
| Explore Page | Clear indication which filters are set |
| Explore Page | Filter fields are blocked when performing a search |
| Reports | **New feature: Make report available to patients after x days** |
| Users | Supporting identification numbers from other countries for physicians (RIZIV, HIN, INSEE, ...) |
| Management | Implementation of SQL and task manager |
| Login Page | Privacy policy is available from the login page (GDPR compliance) |
| PACS Push | HL7 based filtering for DICOM forward scenario |
| Groups | Improved usability for group management confirmation |
| Administration | Automatic sending of mails for new accounts and password reset |


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| | |
|---|---|
| Home Reading | Warning in case no postback to RIS is possible due to missing information |
| Active Directory | Enhancement for better AD account handling |

## 12.1.57 Release notes version 3.2.300 (27/12/2017)

| | | |
|---|---|---|
| 3.2.300 | General | Fine-tune banner information |
| 3.2.300 | Home Reading | Version check on app upon startup |
| 3.2.300 | Home Reading | Disable automatic time-out on microphone in case of no speech |
| 3.2.300 | Sharing | **New feature: Email on new study, checkbox per mapping** |
| 3.2.300 | Sharing | Preferences on sharing settings are retained |
| 3.2.300 | Explore Page | **New Feature: Display multiple modalities** |
| 3.2.300 | WCF | Improved HL7 handling (multiple report types, cancel messages, ADT) |
| 3.2.300 | DICOM Processor | Bug Fix: handling of XA images |
| 3.2.300 | Study Page | **New feature: Fetch functionality for expired images** |


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| | | |
|---|---|---|
| 3.2.300 | Study Page | Display all exams in series picker in case of multiple studies for same order |
| 3.2.300 | Study Page | **Extended feature: Anomalies on patient level** |
| 3.2.300 | Study Page | Show original DICOM tags for source admins |
| 3.2.300 | Management | Advanced user and group management functionality |
| 3.2.300 | Management | COZO encryption support tool |
| 3.2.300 | Administration | **New Feature: Possibility to regenerate security codes** |
| 3.2.300 | Administration | Timestamp on access registration |
| 3.2.300 | Transfer | Failover in case WCF crashes during transfer |
| 3.2.300 | Transfer | Accession numbers are displayed with progress bar |
| 3.2.300 | Active directory | Active directory integration enhancements |
| 3.2.300 | PACS Push | Improved handling on reopened exams |


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## 12.1.58 Release notes version 3.2.200 (26/07/2017)

| | | |
|---|---|---|
| 3.2.200 | Home Reading | **New Feature: Possibility to create a report using speech recognition through app on smartphone (iPhone + Android)** |
| 3.2.200 | Sharing | Possibility to revoke access, granted through DU POW bucket code |
| 3.2.200 | Explore Page | Message to clear filter from explore page in case of no results |
| 3.2.200 | Explore Page | Performance improvement on loading explore list |
| 3.2.200 | DICOM Processor | Processing of ColorSoftcopyPresentationStateStorage (CSPS) files |
| 3.2.200 | Study Page | Bug fix: printing single issue from Chrome |
| 3.2.200 | Study Page | Locking mechanism when editing report |

## 12.1.59 Release notes version 3.2.102 (23/06/2017)

| | |
|---|---|
| Viewer | Bug fix: opening exam takes too long due to query to look for removed images |


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## 12.1.60 Release notes version 3.2.101 (15/06/2017)

| | |
|---|---|
| Login | Bug fix: issue with password reset in case password has expired |
| COZO | Bug fix: issue with access through COZO |

## 12.1.61 Release notes version 3.2.100 (13/06/2017)

| | |
|---|---|
| General | Adaptation of 'About box and terms and conditions' as PACSonWEB is now certified as a CE class IIa medical device |
| Login | Mail on password reset procedure |
| Explore Page | Add studies for a group instead of a single user (only for group admin) |
| Explore Page | Clear filters from within explore pane when no results match the given criteria |
| Study Page | Possibility to add the report as SR when downloading |
| Study Page | Notification when images are removed due to expiration of retention |
| Study Transfer | Retry on progress page in case transfer fails |
| Study Page | **New Feature: Fast select + shortcuts for stepless zoom / pan / window level** |
| AD integration | Allow trusted IPs when logging in using AD authentication |
| Administration | Extended logging on admin access |


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| | |
|---|---|
| COZO | Extended logging on study access through COZO |

## 12.1.62 Release notes version 3.2.0 (20 March 2017)

| | |
|---|---|
| General | **New Feature: Information banner for notifications** |
| General | New functionality: link to localized manual (WEB + PDF) |
| General | Enhanced About box |
| Login | Enhanced login page |
| Login | Security enhancements (generic messages) |
| Explore Page | New functionality: Message labels for sharing with user |
| Explore Page | New functionality: Filtering on national number |
| Explore Page | Bug Fix: sharing +20 exams at once |
| Study Page | New functionality: Notification on clinical use |
| Study Page | New functionality: copying of report |
| Study Page | Bug Fix: caching issue in case an exam is opened before the images are available |
| Study Page | **New Feature: Display of registered Anomalies** |


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| | |
|---|---|
| Management | **New Feature: New management pages with enhanced functionality + look and feel** |
| Administration | **New Feature: Administration of registered Anomalies** |
| PACS Push | Enhancements PACS Push |
| PACS Push | Back-end for manual synchronization of studies |
| PACS Push | Enhanced synchronization PACS - PACSonWEB |
| COZO | Enhanced audit trail COZO |

## 12.1.63 Release notes version 3.1.201 (19 January 2017)

| | |
|---|---|
| Sharing | DOB is incorrectly displayed in sharing Wizard |
| COZO | Fix for audit trail end-point |
| Export to PACS | Osirix import fix |

## 12.1.64 Release notes version 3.1.200 (18 November 2016)

| | |
|---|---|
| Explore Page | New feature: Option to print sharing information in different language is available in the "Forward Status page" |
| Explore Page | Fix: Time out on downloading very large studies |
| Sharing | Fix: Date restriction for sharing a study |


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| | |
|---|---|
| Sharing | New Feature: Share with user unlimited in time |
| General | New feature: Manual can be downloaded as PDF from the help function |
| Export to PACS | Fix: Issue with progress bar |
| Study page | New feature: Default 1-up representation on mobile devices |
| Study Page | Fix: Translation for tool labels |
| Login Page | **New Feature: Login via Active Directory on e-mail address instead of Windows user name** |

## 12.1.65 Release notes version 3.1.100 (24 October 2016)

| | |
|---|---|
| Login Page | New Feature: Login history available from the user settings page |
| Study Page | New Feature: Density measurement tool available for CT in study page |
| Export to PACS | **New Feature: DICOM IMPORT tool available for controlled import of studies from PACSonWEB into the local PACS (optional)** |
| Study Page | Fix: Report cannot be copied when not in edit mode |

## 12.1.66 Release notes version 3.1.1 (14 October 2016)

| | |
|---|---|
| Login Page | Fix: SMS code for activation when logging in with eID for new accounts |


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| | |
|---|---|
| Login Page | Fix: eID session is closed when logging out |
| Login Page | **New Feature: Redirect to new study page is activated for anonymous login** |
| Study Page | Fix: bug for a specific version of IE11 |

## 12.1.67 Release notes version 3.1.0 (14 October 2016)

| | |
|---|---|
| General | Fix: Group validation not shown for users not in group |
| General | Change request: Doctors national number format has been adapted (RIZIV in Dutch) |
| Login Page | **New feature: eID allow users to automatically logon - Only for physicians** |
| Login Page | New feature: Accounts can have expiration date, necessary for temporary employees |
| Sharing | New feature: Remove favorites in address book from sharing wizard |
| Sharing | Fix: Scroll bar added to sharing wizard when selecting multiple exams from the explore page |
| Sharing | Fix: Subject read notification is localized |
| Sharing | New feature: Custom formatting/Layout of e-mails |
| Sharing | New feature: Read/Write rights can be delegated if allowed by source |


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| | |
|---|---|
| Explore Page | **New feature: Download multiple exams simultaneously** |
| Explore Page | New feature: Search DU POW code in progress overview |
| Explore Page | New feature: Sorting remains after auto refresh (account setting) |
| Explore Page | New feature: Filtering on access numbers with algoritm applied |
| Study Page | **New feature: NEW viewer (phased activation)** |
| Study Page | New feature: Automatic signature when modifying report |
| Study Page | New feature: Better indication when modifying report (red border) |
| Study Page | **New feature: New administration page for administrative manipulations and access consultation** |
| Image Clean-up | Change: Improvements to information Life Cycle Management |
| Workflow | Fix: Fix for downloading PNG images for very large studies |
| User Settings | Fix: Layout fixes for Safari |
| DICOM Router | Known bug: Study Instance UID might not be updated in particular cases when HL7 arrives before images |


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## 12.2 Known bugs

### Critical defects (safety related)

None

### Non-critical defects

The issues listed below have not yet been resolved in the current version of this product. Please communicate this to all users.

| Reference | Title and Description |
|---|---|
| PAD-8852 | **Drag thumbnail to secondary window**<br>Dragging a thumbnail from the series picker into a viewport on a secondary window doesn't always work. If the user repeats the drag action, it works. |
| PAD-8853 | **Double login request**<br>The login request for DeepUnity PACSonWEB authenticator is sent twice. This does not have any functional impact. |
| PAD-8855 | **Wrong display of US cine loops**<br>Wrong display of ultrasound cine loops with photometric interpretation YBR_FULL_422, if the preferred DICOM transfer syntax is set to 'Explicit VR Little Endian'. |
| PAD-8890 | **Addendum workflow**<br>When a time limit is defined to edit a validated report, and the (previously validated) report is in edit mode while this time limit expires, the report cannot be saved. After refreshing the page, an addendum can be created instead. |
| PAD-8915 | **PACS Sync**<br>PACS sync consumes a lot of memory when using image level queries for very large studies. A |


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| Reference | Title and Description |
| --- | --- |
| | workaround is to disable image level queries for the sync job for sources that frequently send very large studies (30K+ images). |
| PAD-8925 | **Cut and paste text**<br>When using speech recognition in the DeepUnity PACSonWEB multi-monitor app, cutting and pasting text sometimes pastes the text at the end of the report instead of at the cursor position. |
| PAD-8926 | **Reporting**<br>Report panel needs to be on the monitor with the study tabs to function correctly. |
| PAD-8982 | **Volume rendering (3D)**<br>Application can get out of memory if a lot of volume viewports are active simultaneously, e.g. on different study tabs. **Workaround** Ask Dedalus support to limit the maximum number of study tabs for your user, e.g. to 3. |
| PAD-9068 | **Volume rendering**<br>When keeping a keyboard shortcut pressed while drawing an annotation in the new volume rendering (3D) actions switches to scrolling. |

## 12.3 PDF version of the user manual

Prior versions of the DeepUnity PACSonWEB user manuals and release notes can be downloaded from https://download.dedalusportal.com/s/PSdoCBbjcPj6np5. Please contact your regional service representative to obtain a valid access password.


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In this product, user settings and functionalities are determined by configuration options and security settings.

This product can be modified to support the workflows and methods that are used in your hospital.

As a result, the functionalities and screen settings that are described in this document might differ from what you can do and from what you see on your screen. The settings can also differ from department to department.

## Statement on gender-neutral terminology

For reasons of legibility and clarity, gender-neutral terminology is used, e.g. User. Corresponding terms apply equally to all sexes.

## Document history

Latest update of this document: 24.09.2026

https://my.dedalusportal.com/

CE 2862

MD

UDI 04260693990125

# About help resources

Information to install, configure and use this product is distributed in the following way:

| Type | Content |
|---|---|
| **User Manual** | **Provides instructions for end users on how to safely and effectively operate the system for daily use and provides guidance on its operation.** |
| Release Notes | This gives an overview of new features, feature enhancements as well as bug fixes included in a product update. |
| Administration Manual | Provides instructions and product information related to tasks to be performed by key users and IT personnel at client site. This may include but is not limited to configuration settings, integration options, and system maintenance. |
| Services Manual | Intended for Dedalus service and support personnel, this manual includes but is not limited to detailed instructions and product information for tasks such as installation, calibration, and system performance monitoring. |

In case these documents do not contain the information that you are looking for, please reach out to your Service & Support Representative.

## Versioning

If the version number contains an "x", the documentation for a specific version generally applies to the associated service updates or hotfixes, unless stated otherwise. While hotfixes typically address defect corrections without introducing new functionality, service updates may include both corrections and new features. Updated documentation may still be released for specific service updates when required.


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