

The background of the entire page is a dynamic, abstract composition of glowing blue and white light trails. These trails, which resemble smoke or energy flows, originate from the left side and sweep across the frame towards the right. The overall color palette is dominated by deep blues and bright whites, creating a high-contrast, futuristic aesthetic.

digipax

Version 1.4.20

User's Manual

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1 General



Software digipaX is intended for managing, displaying and exporting DICOM images in different modalities (e.g. X-ray images (CR, DR) or CT images). Furthermore, it offers a wide range of useful tools for daily work with the medical imaging techniques for diagnostic purposes.

All technologies and technical procedures (image structure, communication, data storage etc.) are hereby performed in compliance to DICOM 3 standards.

The system can be used as a single workplace with an image archive (PACS). As well it suits the work together with other stations and many archives. It can be easy integrated with the systems of other manufacturers.

Furthermore, by use of worklist the jobs and transmitted data can be interchanged as well as instructions directly form the management systems in the clinics.

2 Symbols and illustrations

Symbol	Meaning
	Note
	Tip

All digipaX illustrations (screenshots) show the program windows in Classic Style. This allows the images to be clearer in the documentation. The program is normally set to Black Style, which is more suitable for viewing medical images.

3 Safety information

3.1 Software

It is not permitted to introduce any modifications to this software without approval of the manufacturer.

3.2 Conditions for use

This product is designed for use on personal computers in residential and commercial premises. The used hardware must be adapted to the prevailing environment conditions. The user of PC must verify if hardware corresponds to requirements prevailing in location of its installation.

3.3 User profile

This product is designed for use by medical personnel. Persons operating this product must have the following qualifications:

- required professional knowledge,
- training in using the X-ray data,
- computer skills,
- knowledge of one of languages used by this system.

3.4 Hardware

The used hardware must be provided with CE and it must meet requirements provided in Electromagnetic Compatibility Directive and Low Voltage Directive. It is necessary to observe restrictions concerning the use and provisions regarding the maintenance and operation of the installed hardware according to the manufacturer's information and standard EN 60950-1.

It is to make sure that the used hardware is installed in a minimum distance of 1,50 m from the patient (so that coevally touch both the hardware and the patient is impossible). Furthermore, it is to pay attention to a safe standing position of the hardware. Monitors should stand stable, so that they cannot be accidentally pulled down. Cables are to be laid in such a way that an accidental getting stuck is avoided.

The hardware shall be located in such a manner to allow for quick and easy disconnection from power supply in emergency situations. The disconnectable power outlet strips with good access may be used as possible alternative.

The keyboard, mouse and monitor shall be located on workplace in such a manner to eliminate their physical impact on environment.

3.5 Redundancy

It remains the responsibility of the user to secure the system redundantly, so that a failure of one of the units does not involve an unreasonable risk.

3.6 System failures



Protect your systems against power outages, in order to prevent image losses while receiving data from external devices and exclude any patient endargement. Please provide necessary protection for servers and network components if needed (e.g. LAN switches, access points).

Ask your system administrator what protection means are adviseable and reasonable for your system.

If, nevertheless, a system fails for power outage or crash, the tips for restoring the unsaved images are to be followed if need be 18.4.12, 18.5.10, 18.6.9).

3.7 Messages

You have to inform your system deliverer or attendant immediately about the messages from the hardware (beeps) or messages from software systems (error messages from operating system, drivers/controllers or from the software itself).

3.8 Visual check

The daily visual checks of the devices are necessary, in order to guarantee a quality of a display at the diagnostic workstand(s). For this purpose, a special software program or SMPTE testpattern can be used. If the required specification is not fulfilled, then the monitor is to be readjusted or replaced by technical stuff. The instructions into the procedure follow by the system administrator/attendant.

3.9 Data backup



All new images have to be weekly backed up on CD/DVD or other suitable media. Media with the backups are to be stored in a separated place from the computer with the image archive (server). The media are to be stored in such a way that the data are not destroyed by external influences, such as light or electromagnetic radiation etc. When choosing the medium, please keep in mind that the data must be stored over many (10 and more) years, For more read the information from the manufacturer of the medium. Seek advice of your system administrator about a practicable and effective backup and long-term archiving strategy.

3.10 Checks

The annual check of technical safety of the system is to be carried out. Check is also to be carried out in case of any inspection and testing of technical devices being operated (e.g. X-ray equipment).

3.11 Service life

The service life of this product amounts 1 year. After the expiration of this year, a state-of-the-art update of the software is recommended.

The software can also continue to be used without updating in its basic version. Images can still be received, displayed and processed.

4 Installation and maintenance

4.1 Installation

The installation instructions are provided in technical description (Administrator's guide). Persons authorized by the manufacturer only are permitted to conduct operations connected with installation and maintenance. They can be enquired at the manufacturer.

4.2 Maintenance

The hardware being used for operating the software must be checked and maintained according to information given by manufacturers of devices and statutory requirements.

4.3 Cleaning

The installed hardware may be cleaned by generally commercially available disinfecting agents unless the system administrator/supervisor requires otherwise.

4.4 Updates

The customer is eligible for software updates according to scheduled update intervals. The software updates may be performed only by persons authorized by the manufacturer of the software. However, the customer is not automatically eligible for software upgrades, i.e. later software versions (recent product developments with new features).

The update intervals are automatically extended, unless the customer cancels a particular update.

4.5 Safety-critical patches

The customer undertakes to install new software versions if the later versions of the software would fix safety-relevant defects.

4.6 Decommissioning


For exiting the software and system shutdown please refer to Section 20 „Exiting the software“.

The software can be completely uninstalled by your system administrator. After the software is successfully uninstalled, it can no longer be used.

5 Software start-up

Prior it is possible to use this software, it is necessary to start-up computer on which the license file is installed and ensure network connections ready for use. The relevant information will be provided by digipaX system administrator. Start-up your computer and wait for full boot up of Windows. If one or more so-called network switches are used in the clinic, they shall be previously switched on. The relevant information will be also provided by system administrator.

Then in the first place switch on the computer on workstation and wait for full boot up of Windows. Log in on computer (if login is required).

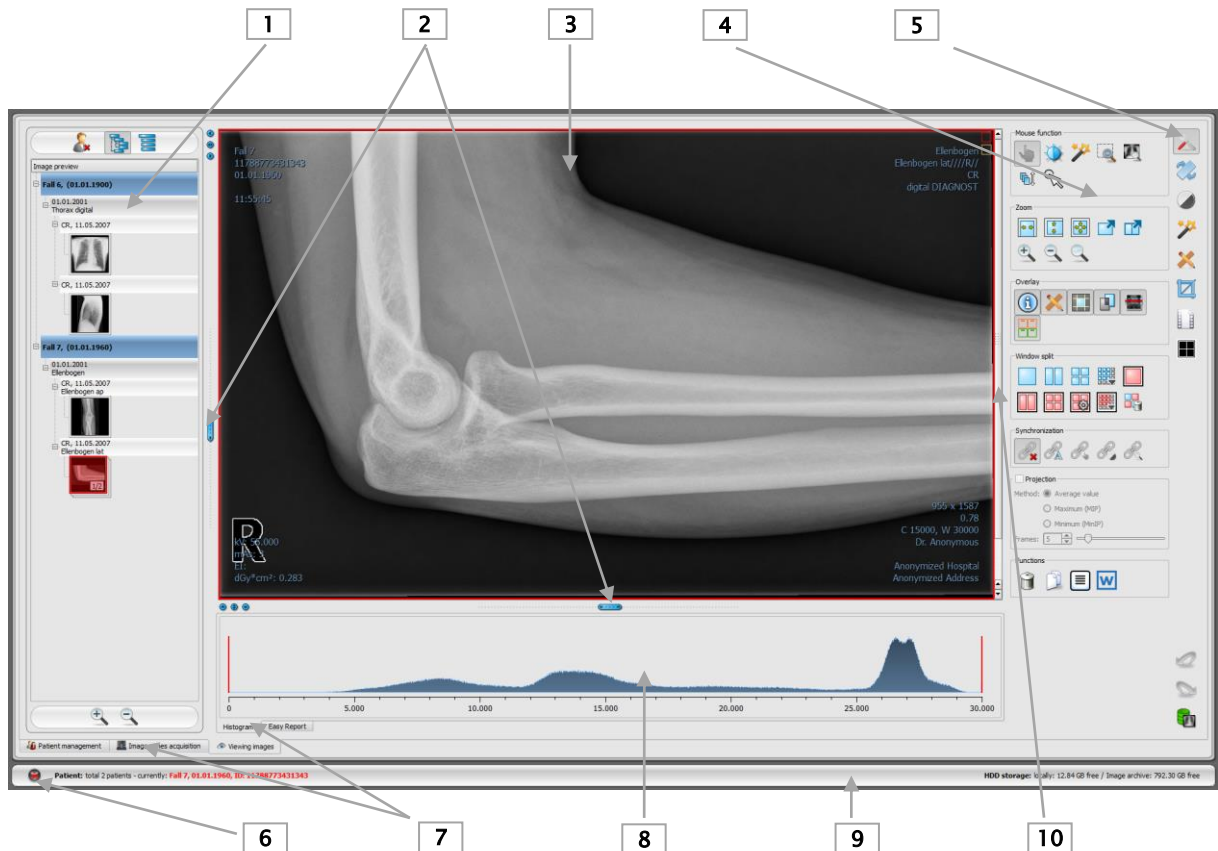
The program may be activated by pushing symbol  on the desktop or through the program menu. If program is activated automatically with Windows start, then you find the relevant icon is in the lower right corner in the so-called system tray.

When the clinic management software is connected, this program may be also automatically started or activated by such software. This connection can be made by GDT or HL7 interface. These connections must be configured by system administrator.

In case system is hanged up, it shall be again launched by the double clicking on some of the described above connections or through clinic management system. If system is hanged up during image acquiring and images are not saved yet, they can be recovered by automatic backup and then they may be saved. For more see chapters 18.4.9, 18.5.9 resp. 18.6.8.

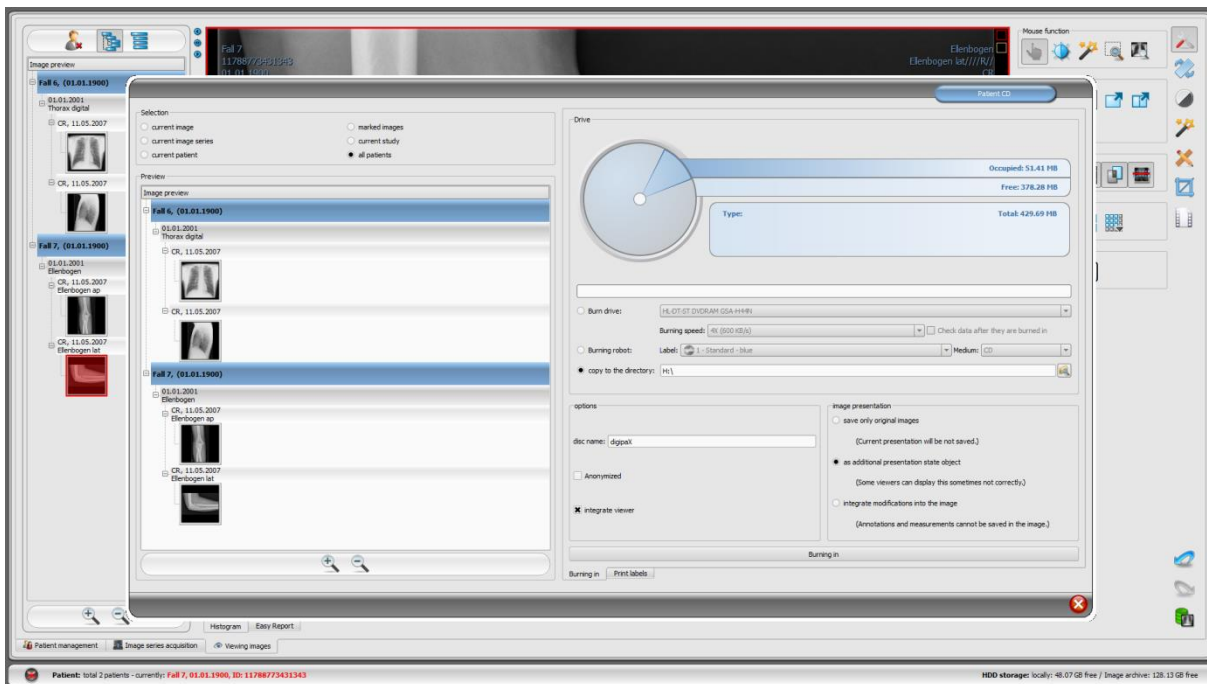
6 Screen layout

Screen layout and split



- 1 – **Thumbnails**: show all images of a selected patient as a preview (tree structure with the studies and series)
- 2 – **Movable bars** for changing the image division or hiding the windows
- 3 – **Image space / viewer**: shows an image or more selected images next to each other and one below the other
- 4 – **Tools** with the functions for processing images (divided into various toolboxes)
- 5 – **Selecting various toolboxes**
- 6 – **Start button**: launching various components and closing or minimizing the program
- 7 – **Various components**: component availability depends on the software package purchased
- 8 – **Histogram** of the active image
- 9 – **Baseboard** with information on selected patients and available space in hard disc storage
- 10 – **Scrollbar** for scrolling through single images of the series

In order to have key components of the program and tools of the viewer available with one-click access, the header and the toolbar can be additionally activated. In the header, components can be activated directly, while the toolbar contains various tools (described in more detail in chapters 6.1 and 6.4).



An example for screen layout after activating a component – here, a large dialog box for creating a patient CD is shown

Patient management can also be converted to a separate component as the dialog box pictured above. Please refer to chapter 8 for more information.

6.1 Start button/ header (optionally)



The Start button bottom left opens a menu (similar to the start menu of Windows), in that particular program components can be activated and the program can be exited or minimized.

Those components are:

- patient management (only if the patient management tab is inactive, see chapter 19, section User interface)
- import
- print
- patient CDs
- job management (DICOM Worklist Management)
- X-ray journal
- configuration

Optionally, the header can be activated in configuration (chapter 19) under User interface. It is being displayed on the top of the screen. In the header, all functions of the start menu are once more incorporated and allow for access with just one click.

6.2 Image region / viewer

On the left bar the thumbnails are shown, in the middle area the selected images are presented in a large format and on the right bar the functions for processing images are available. Furthermore, there is a histogram for the current image below the image view.

6.3 Baseboard

On the baseboard the information on the patient and available space in the hard disc storage are shown. If multiple patients are selected, there are number of patients and this at the moment active patient displayed, so the one who the active image concerns.

The drives, which available space has to be shown, can be set in the configuration (max. 3 drives). If any of the drives is not available or the set critical value is undershot, the alert message will be output. If the system slowly comes closer to the critical value (available space is smaller than double critical value), the message will be presented in red bold characters, otherwise normally in black.

This baseboard is seen in all parts of the program.

6.4 Toolboxes / toolbar (optionally)

In the toolboxes, various mouse functions, zoom settings and overlay and image split functions are available.

Each of the toolboxes can be expanded and collapsed individually.

The toolbar can be activated optionally in the configuration (chapter 19) under User interface. The toolbar is being displayed above the image viewer, it contains once more all functions of the toolbox and makes them available with one-click access.

6.5 Split bars

Between the thumbnails (on the left) and the image area as well as between the lower part of the viewer and the image area adjustable split bars are placed. By dragging these bars to the left or right or to the top or bottom the image panes can be adapted. Also, windows can be hidden in this way completely.



By using small switches the regions above and below the image (or on its left or right side) can be closed, by pressing the middle button they can be restored. Modifications of window panes remain saved after the end of the program.

7 Viewing images / viewer

The component of viewing images covers the areas of screen selection, image display and image handling or manipulation on image.

Both greyscale and colour images are supported. These can be presented uncompressed, RLE- or JPEG-compressed.



There is an indication shown on the top edge of the images compressed with lossy data compression. Those images are unusable for diagnosis as possibly important information on the image could get lost due to compression.

For greyscale images the information on presentation, like window adjustment, rotation and image annotations, are stored in the adjusted directory as Greyscale Soft Copy Presentation State (DICOM file). At the next opening of an image these are automatically used again.

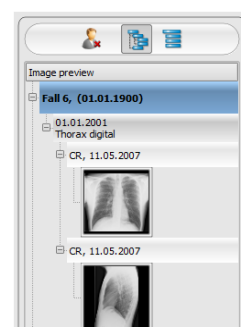
7.1 Image selection

The image selection follows in a board on the left edge of a display. This is alterable and also completely hideable in its size (width) by the window divider.

The view is changeable between DICOM tree structure and list view.

In the DICOM tree structure, the studies of the selected patients are presented. The patients form in each case a superordinate node. The nodes of the studies can be opened and closed and as subnodes the pertinent series are contained. Within the series nodes the thumbnails are displayed. Multi frame series are shown only as a single preview image. Multi frame series are the image series packed in a DICOM file. In the right upper corner of the preview image a number of currently displayed frame and number of the frames are shown.

In the list view, also information on each selected patient is displayed in a superordinate node. A list of all available images for this patient is arranged underneath of it (in each case nodes with caption and thumbnail), independently from their assignment to series and studies. The criterion for the sorting, the sorting direction and the text, which can be displayed in the node, can be set in the configuration (default: date and time of the image).



The thumbnails are marked by a red framework, even if this image is displayed in a large image view.

When stopping the mouse over a node (patient, study, series or image) information on it is displayed in a tooltip.

The size of the thumbnails is adjustable by using two switches plus and minus below the tree structure. The size of the images is stored and used at the next program start.

By a double-click on a thumbnail this image can be loaded into the viewer. If there is an image window still free in the viewer (by splitting images in the display area of the viewer in for

example 2x2 images, more images can be displayed next to each other in the viewer), it is displayed in this free image window. If no image window is free, the image is replaced in a current image window.

By drag & drop the thumbnails can be dragged into image window of the viewer. Also within the viewer the image can be exchanged with drag & drop in the image windows. So the user can divide very flexibly the images on his display.

By double-clicking on the node of a study the images of this study are automatically loaded into diverse windows of the viewer accordingly to modality of the images. Window split is to be defined in the configuration (see 19 Configuration).

The selection of the patients can be reset with the switch "Empty patient selection" over the preview tree. Afterwards no more patients are selected and the preview tree is empty.

7.2 Image display

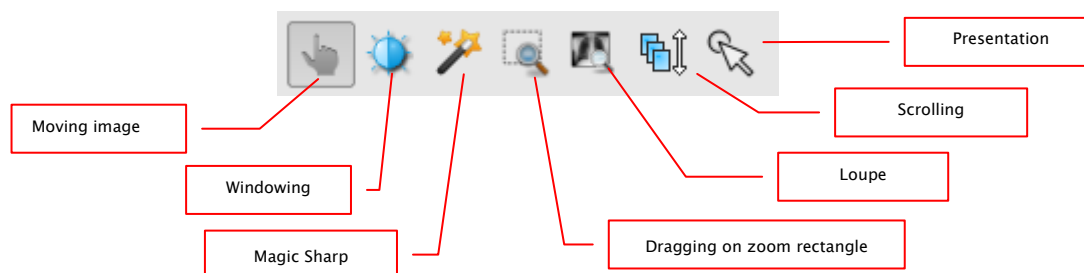
In the viewer, images are being shown. The viewer can be split into many panes, so that many images can be displayed next to another. Simultaneous display of 1 to 36 images is possible. These panes can be subdivided into further sections in order to present single images of the series in the one grid.

For the viewer, there are many functions for image representation available. These functions are contained in the toolbar, which can be unhidden with a button top right. These functions are described in next sections. Some of them are hidden by default. With a right-click on area of the functions a context menu opens. There, the various functions can be shown and hidden. You can shape the buttons more transparently by deactivating the functions that are not needed.



It is also possible to display a constant toolbar at the top of the viewer. For more, please refer to chapter 19 Configuration (section User interface).

7.2.1 Mouse functions



In this toolbar the action for the left mouse button can be selected:

- **moving** (if display size is larger than image window) – this is a default setting
 - **windowing** (brightness/contrast)
 - ➔ horizontal mouse moving: modifying window centre
 - ➔ vertical mouse moving: modifying window width
- In the configuration (category Others) these moves can be also modified
- **Magic Sharp Filter** (size/sharpness)
 - ➔ horizontal mouse movement: change size
 - ➔ vertical mouse movement: change sharpening amount

For detailed description of the filter functions please refer to chapter 7.3.3.1 Magic Sharp.

- **zoom rectangle**
- **loupe**
- **scrolling**
 - ➔ vertical mouse movement: scrolling through the series
- **presentation (a simple pointer to presentation on the monitor)**

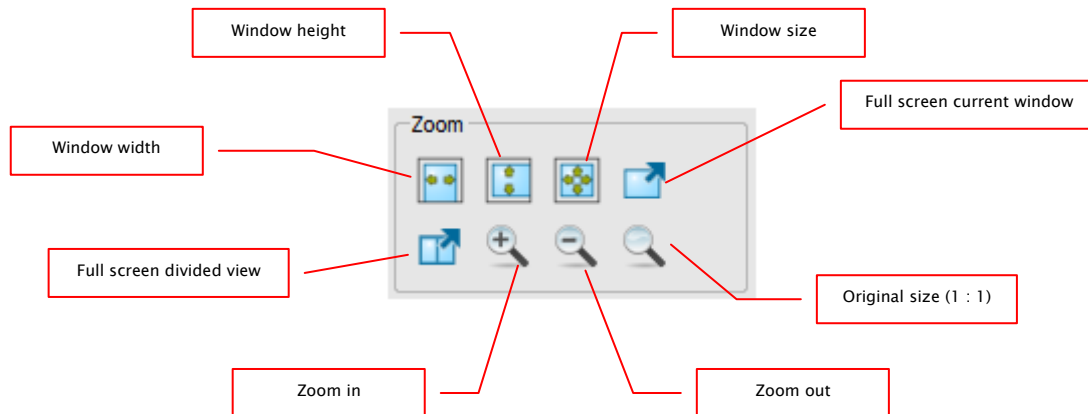
The function can be impacted by the following combinations of keys:

- Alt + left mouse button: windowing
- Alt + Shift + left mouse button: dragging on zoom rectangle
- Alt + right mouse button: loupe
- Shift + right mouse button: scrolling

Further mouse functions:

- Shift + left mouse button: marking image
- Ctrl + left mouse button: drag & drop for exchanging the images between the image windows
- right mouse button: zoom in / zoom out (during vertical mouse moving)
- middle mouse button or pushed scroll: windowing
- rotating scroll: next or previous image of the images series, study or the patient (for each setting), if existing
- Ctrl + Shift + left mouse button pressed: Magic Sharp filter
- left and right mouse button pressed: Magic Sharp filter

7.2.2 Zoom

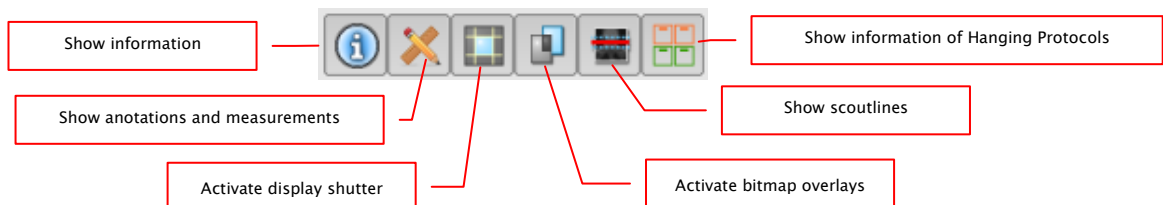


The options for zooming images refer in each case to currently active image. According to the standard the image display in a window is initialized in this way, that the image is scaled to the window size. If the size of the window changes in this option, e.g. by division of the image, the zoom factor is adapted accordingly, so that always the full image is seen.

With the exchange of the images between two windows by drag & drop, the zoom factors of the image stay the same.

By single pushing Enter key or using "Full screen current window" switch the full screen mode can be activated. The current image is now scaled to the full screen size. By pushing Shift + Enter keys or using "Full screen divided view" switch all presented windows (by division of images) are scaled to the full screen size. The full screen mode can be quitted by using the Esc key.

7.2.3 Overlay



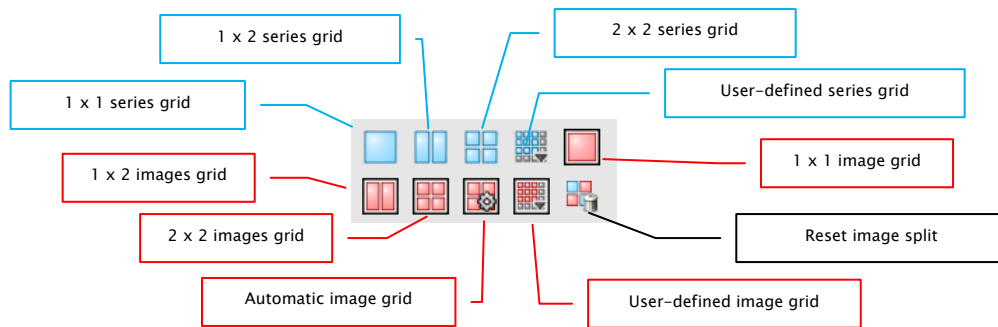
Overlay divides in the following areas:

- information (in the image corners),
- annotations + measurements (e.g. measured sections or angles),
- „display shutter“ (blanking everything outside the selection),
- bitmap overlays (overlay images)
- scout lines (presentation of the position of particular sectional images in CT und MRT series)
- information of Hanging Protocols

For each of these areas there is a switch in the toolbar, with which the area can be unhidden or hidden.

If an image is opened, in which a selection was set, or if a selection range is set by user, then the switch for "display shutter" is automatically set, so on, and user can turn this off or on using the switch.

7.2.4 Image split

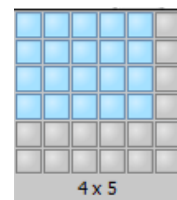


The image window can be split into panes, so that the single series of the study can be arranged in the one grid. The window panes of the series can be subdivided with the result that the single images are presented in the one grid.

You need to use the blue switch to split the series of the study into grid. You can choose between 1x1, 1x2, 2x2 and user-defined up to 6x6 grid. In order to subdivide one of the window panes, click in the pane and use the red switch with the same functionality.

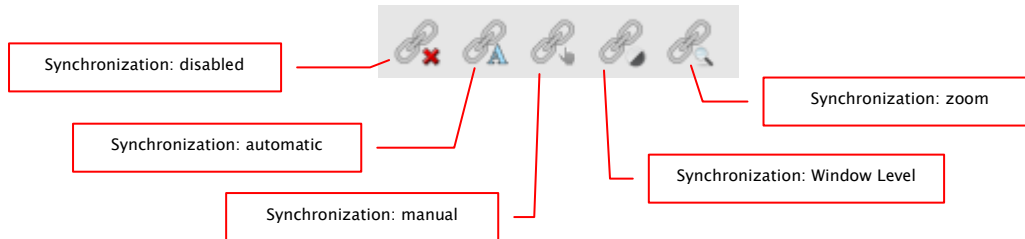
When using the switch "Automatic image grid", single images of the series are automatically arranged in the current pane. The switch "Reset image split" restores the main window. Optionally, you will find all these switches in the context menu of the right mouse button.

If the single images of the series are presented in the grid, the presentation begins with the first image of the series and the images are then presented consecutively and line by line. For the 2x2 grid, the first image is presented in the upper left pane, the next image beside it, the third image in the left bottom pane, and the fourth image in the right bottom pane. If you scroll within the series with the mouse wheel, all single images will change synchronously according to scroll direction. In this grid, always four consecutive single images are presented.



7.2.5 Synchronization (synchronous scrolling)

When multiple CT or MRI series, or the series of an initial and follow-up study are open side by side, scrolling in both windows can be synchronized. This feature provides you with the following functions:

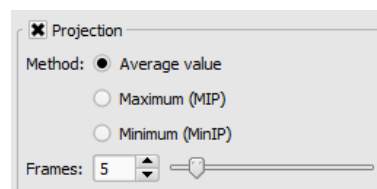


- disabled:** synchronous scrolling is disabled
- automatic:** the series of the same study (FrameOfReferenceUID) are automatically scrolled synchronously based on their location.
Open the wanted series in the separate image windows, click the button „Synchronization: automatic“ and scroll through the series.
- manual:** the series of the same study (FrameOfReferenceUID) or with the same series description (SeriesDescription) are scrolled synchronously based on their location, e.g. the series of an initial and follow-up study.
Open the wanted series in the separate image windows, click the button „Synchronization: manual“ and scroll through the series. Current image or current frame is a start point for synchronous scrolling. In this way the differences at the beginning the series can be accomodated.
- Windows Level:** Window Level settings for the series of the same study (FrameOfReferenceUID) or the series with the same series description (SeriesDescription) are set outright.
Open the wanted series, select the appropriate method, activate the button “Synchronization: Window Level”, click in the image, set the Window Level as you wish and scroll through the series.
- zoom:** settings for zoom and moving for the series of the same study (FrameOfReferenceUID) or the series with the same series description (SeriesDescription) are set outright.
Open the wanted series, select the appropriate method, activate the button “Synchronization: zoom”, click in the image, set the zoom and position as you wish and scroll through the series.

7.2.6 Projections

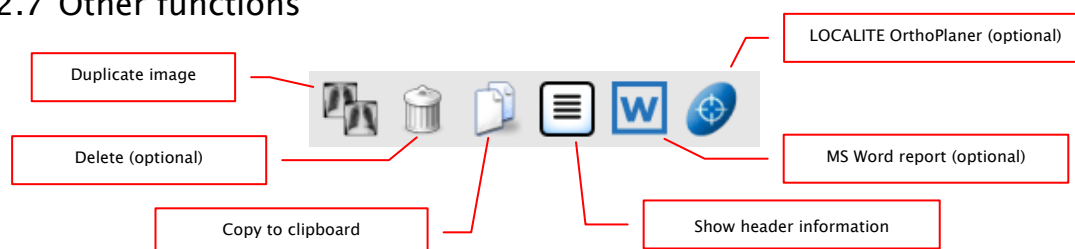
In reconstruction of images, intensity of the same pixels of the consecutive images is evaluated and from these values a new output image is generated and visualized. For example, if there are five images, for each pixel of the output image a new intensity value is calculated from the five values.

- Average intensity: an average intensity value is calculated
- Maximum (MIP): a maximum intensity value is calculated
- Minimum (MinIP): a minimum intensity value is calculated



- Frames: amount of evaluated images

7.2.7 Other functions



- Duplicate image: creating copy of a selected image
- Delete: see section 8.9
- Copy to clipboard: copying current image to the clipboard
- Header information: displaying DICOM Header of the current image
- MS Word report: see section 7.2.7.3
- LOCALITE OrthoPlaner: see section 23

7.2.7.1 Clipboard

By using the switch for clipboard the current image in the current presentation form can be copied to clipboard. This means that the overlay objects (information on image, annotations and measurements as well as display shutter) will be copied in the image too, provided that they are unhidden. If clicking this button is accompanied by coevally press on the Shift key, the image will be copied in its original size to clipboard.

7.2.7.3.2 Possible variables

The following data can be read from the image and used as variables in the template:

Variable	DICOM tag
PatientsName	0010,0010
PatientID	0010,0020
PatientsBirthDate	0010,0030
StudyDate	0008,0020
StudyDescription	0008,1030
SeriesDate	0008,0021
SeriesDescription	0008,103e
ImageComments	0020,4000
Modality	0008,0060

7.2.7.3.3 Creating template

Create your document and design its layout as needed. Include the appropriate variables in the appropriate places in the text without any further additional characters.

Example:

*„The X-ray **SeriesDescription** of the patient **PatientName** with ID **PatientID**, born on **PatientsBirthDay**, was done on **SeriesDate**.“*

Doing this please pay special attention to upper- and lower-case letters in the variables (see the table above). If misspelling of a variable occurs, the variable will not work.

Please note:

If misspelling in a variable occurs, do not correct the error in the word but delete the full variable and write it completely once again. The reason for this is that all corrections within a word in the XML formatting are protocolled and then the variable can no longer be interpreted in a right way.

Save the document in Word under „File -> Save As“ as „Word XML Document (*.xml)“ in the templates directory of digipaX. You can name the file as you wish. The file extension must be „xml“ (e.g. Template1.xml).

The templates directory as well as the output directory need to be defined by the administrator and made accessible to the user.

7.2.7.3.4 Saving report

Open the image for which you want to create a report. Press the switch „MS Word Report“ and select in the link part the desired template.

The template opens and the data from the image is inserted in the appropriate places. Now you can complete or process, or print out the document. The output file created by digipaX is in the directory defined by the administrator.

If your MS Word is asking about conversion while opening the template, this is due to extended setting in Word. If you do not want it, untick the box „Confirm file conversion while opening“ in the Word options under „Extended/General“.

7.2.7.3.5 Editing and deleting report

If you want to edit the report, open the image of the appropriate patient and press „MS Word Report“. The existing reports for this patient are shown on the right side. Click the desired report. After edition is completed, click „Save“ in Word and save over the current report.

If you want to delete a report, check it in the right part and then click „Delete report“. The report will be removed from the list. For safety the file will not be deleted from the data medium but moved into the subdirectory „Recycled“ in the output directory.

7.2.8 Marking images

In the right top of each image a small red field is placed. By clicking into this field or Shift + left mouse button into the image, a red point appears there or disappears again, if it already existed. Each image with a red point is considered as a marked one. Additionally the marking is clarified by a shading over the entire picture, since the small red point is seen sometimes badly (e.g. if more images are presented or also on diagnostic monitors). Hiding the shading can be deactivated in the configuration (category Others). At the selection of images, e.g. for burning a patient CD, all marked images can be used.

The marked image can be recognized on image selection bar on the left by a small red point, right in the top of the thumbnail.



7.2.9 Image protection (lock)

Moreover, a yellow field is also displayed under each red field. By clicking into this area the images can be protected (locked). Manipulations on images, as described here in this user's manual, do not affect the protected images. A lock symbol in the yellow field informs if the image is protected.

Protected image cannot be recognized in image selection.



7.2.10 Context menu

By right-clicking with the mouse into the image a context menu with important functions can be activated:

- mouse function: moving the image, windowing, dragging on the zoom rectangle, loupe
- zoom: window width, window height, window size, activating or quitting the full screen, activating or quitting the full screen divided view, zoom in, zoom out, original size (1:1)
- overlay: showing information, showing annotations and measurements, activating display shutter, activating bitmap overlays, activating scout lines, showing information of Hanging Protocols
- image split: 1x1, 1x2, 2x2, user-defined image grid
- series grid: 1x1, 1x2, 2x2, user-defined series grid
- image grid: 1x1, 1x2, 2x2, automatic, user-defined image grid
- resetting window split
- sending by electronic mail (DICOM)
- sending by electronic mail (JPEG)
- studies: list of studies of the patients and, as a submenu, each time the image series of this study (the first image of this image series is activated by activating the menu item)



The provisions of law require that messages sent by electronic means which include information on patients or their personal data must be coded. Therefore, electronic mail software must be so configured that data is coded and only its recipient can read such data.

There are special extensions for electronic mail programs which provide the message coding.

"The GNU Privacy Guard" is a free cryptographic software. It may be downloaded and installed from <http://www.gnupg.org> site. Such installation and configuration shall be made by professional.

7.3 Manipulation on images

On the right side of the image display, there are tools for image processing which can be hidden or unhidden by using particular buttons . These are arranged vertically and sorted according to topics.

Below the tools, there are switches for undoing the last actions and restoring the undone actions. The actions are displayed as text in tooltips. The actions refer each time to the active image. I.e., if the image is changed, one cannot undo the actions for it considering the circumstances and the switches therefore are deactivated.

By using the last button „Restore original image”, all of the modifications performed are being cancelled after prior confirming inquiry by the system and thus the original image is being restored just as it is stored in the image archive.



For CT and MRT images as well as multi frame series, the operations on images are automatically applied to the entire image series, otherwise always only for an active image.

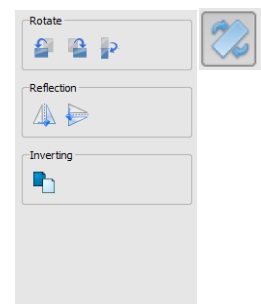
For greyscale images the modifications on the images are stored.

For colour images the modifications are not stored, but they are only temporary. I.e., if you change the patient or close the program, the adjustments/modifications on a colour image are getting lost.

7.3.1 Transformations (rotations, mirroring, inversions)

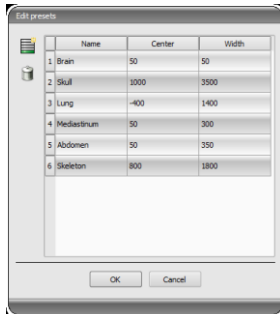
The images can be rotated at the touch of a button 90° to the left, 90° to the right or 180°. They can be mirrored horizontally and vertically and also inverted.

Each operation can be undone as well as redone by using both arrows in the bottom.



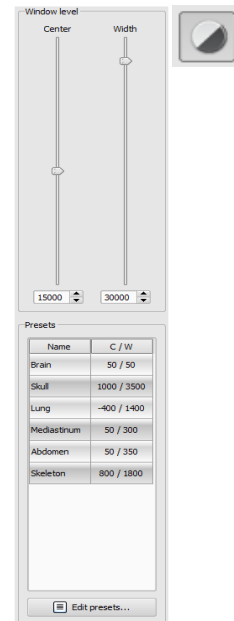
7.3.2 Windowing

Windowing is a usual method for the preparation of greyscale images. For colour images, windowing is deactivated. By entering window centre and window width, the greyscale range will be selected, which is to be presented. These values are adjustable each time by using the sliders or input fields. Furthermore, the settings can be used quickly from the list of pre-sets.



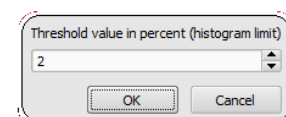
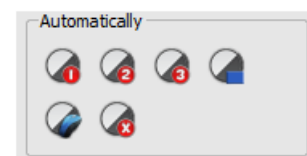
The modification of these presets or adding the presets defined by user is possible thereby via dialog box, which appears after the button „Edit pre-sets...“ has been pressed on.

Also the contained default settings therein can be modified or deleted by user (they are not write protected).



With the automatic windowing, additional special default settings can be defined which will be then applied to the open image just by one click.

Configurable buttons 1 to 3 are intended to determine automatically appropriate values for windowing using calculation algorithm based on the histogram. For this algorithm, a threshold value must be defined. Click on the button while holding Shift key to define the threshold value for this button. In a subsequently opening dialog box you can enter values between 1 and 49. The higher is the value entered, the sharper the image will be. In this way, you can define default setting for each of the 3 buttons. With one click on the appropriate button the algorithm for calculation and the values obtained out of it for windowing applies immediately to the image.



With the button „Insert rectangle“, you can drag a rectangle on the image. From this rectangle the optimum values will be calculated and applied to the image. To do this, first click on the button and then set the rectangle with two clicks on the image. The values will be immediately calculated and applied to the image.

The next button is an interactive rectangle. Click on the button and draw the rectangle along the image. The optimum value is determined automatically inside the rectangle and displayed throughout the entire image. When you have found the appropriate representation, click again to apply the value to the image. With the mouse wheel you can increase or decrease the rectangle size. With “Control” (Ctrl) or “Shift” keys pushed additionally, the rectangle size can be modified, either in its width or height. You can cancel the process with “Esc” key.

With the button „Whole area”, the entire visible area from the minimum to the maximum of grey levels contained in the image is being displayed.

7.3.3 Filters

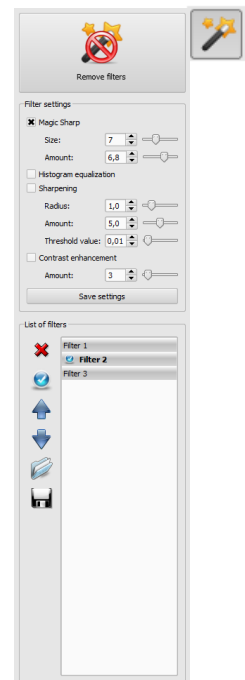
The license module must be enabled to be able to use the filters.

The available filters are Magic Sharp, Histogram equalizing, Sharpening and Contrast enhancement which may be used as single filters or in combinations. In order to use the filter, please tick the relevant box.

With the button “Remove filters” all filters are disabled and the values reset.

As soon as the filter is activated, a small icon is shown on the lower edge of the image. The filter may be deactivated by single-click on this icon and with another mouse click again activated. In this way, you can compare images with and without the filter. Double-click on the icon removes the filter.

Various filter settings may be stored in the list of filters. These filters may be then quickly applied for other images. You can export and import this list at another working station. Thus, various filter presets may be easily shared with many stations.



7.3.3.1 Magic Sharp



This filter will have no effect for colour images. It may be used only for greyscale images.

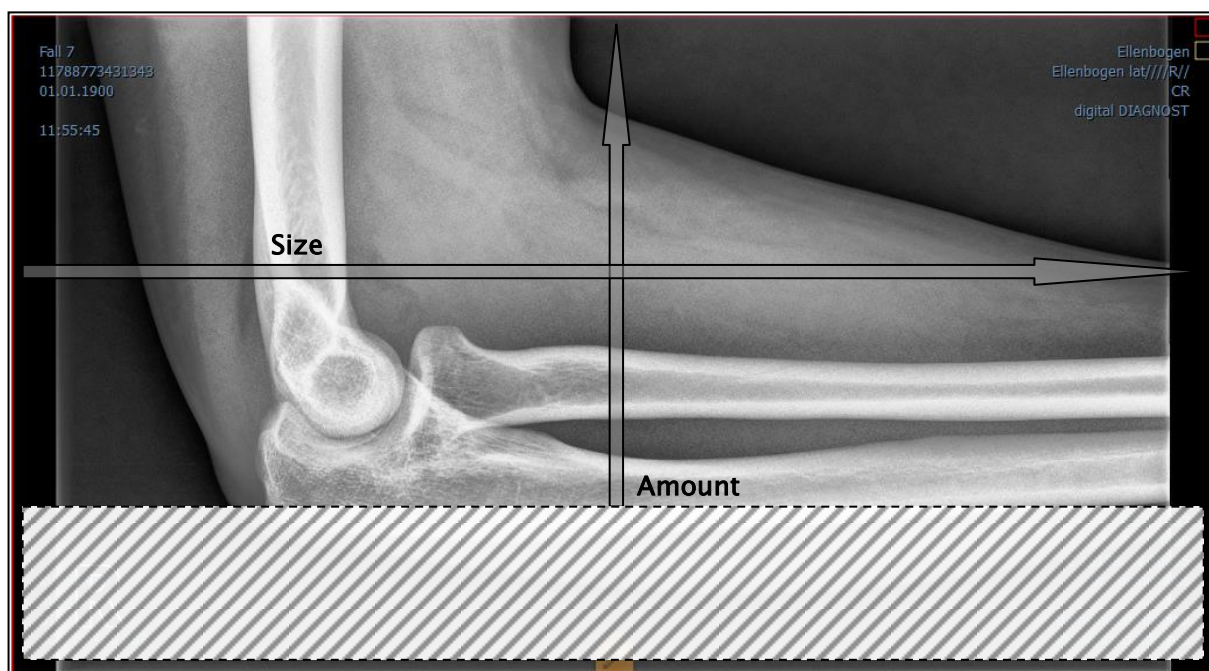
The algorithm of this filter will automatically adjust image contrast and the adjustment will be made individually for partial areas of the image. In this way, the contrast will be optimized for individual partial areas of the image, which usually leads to better results than contrast adjustment to the entire image. The size of each partial area is adjusted with the parameter “Size”. This value can be set in a range from 2 to 16. The higher the set value, the smaller the partial areas of the image. The value of 5 stands for 1/5 of the image while 10 stands for 1/10 of the total image size. Thus, the higher the value, the more visible small structures will become. The parameter “Sharpening amount” defines intensity of the effects. This value can be set in a range from 0.1 to 10. Values smaller than 1 lead to unsharpness, values larger than 1 increase the contrast. If the value is equal 1, the resulting image is identical as the original image.

7.3.3.2 Mouse function „Magic Sharp“

With this function the Magic Sharp filter can be set by dragging the mouse over the image. This function is activated with the mouse functions that are described in chapter 7.2.1. The easiest way is to press right and left mouse button simultaneously. This will start only the “Magic Sharp” filter. Other filters will remain inactive.

Activate the function with one of described methods and drag the mouse horizontally from left to right in order to change the values for the size. The values on the left edge of the image start with 2 and increase to 16 towards the right edge.

To adjust the value for sharpening amount, drag the mouse vertically from the bottom to the top to change the value in a range of 1 to 10. In the lower section of the image that is cross-hatched on the graphics below, the filter is inactive. The value for intensity will increase starting from the area above the cross-hatched section. This area (approximately a quarter of the image) is not cross-hatched in the software. As soon as the cursor is in this area, the filter will be deactivated and the filter icon will disappear from the lower edge of the image. If you move the mouse cursor back to the upper area, the filter will be re-activated. Please note that whilst dragging the mouse both values change simultaneously. The further right the mouse cursor, the higher the values for size, the higher the mouse cursor, the higher the value for amount.



7.3.3.3 Histogram equalizing

With histogram equalizing grey levels of the areas of interest will be extended to greyscale and the less frequently used grey levels will be narrowed. Thus, the structures in the image areas of interest will be highlighted.

Tick the box to activate or deactivate this filter. This filter has no further settings.



The changes that results by use of the histogram equalizing will not be reflected in the histogram itself because in the histogram, always the values of original image are represented without the filters applied to it.

7.3.3.4 Sharpening

With sharpening the differences in brightness are highlighted making the image “sharper”.

The sharpening is calculated in pixels. The parameter “Radius” defines how many pixels in environment should be used for sharpening calculation. Small radius will refine fine structures. Large radius will enlarge structures visible in the image. If the value is set to 0, the appropriate value will be set for the image automatically.

The parameter “Sharpening amount” defines how much the image is to be sharpened. Higher values lead to intensifier sharpening. The parameter “Threshold value” is set in order to avoid simultaneous refining smooth areas in the image. In order to sharpen all areas of the image, set this parameter to 0. In order to sharpen only the high contrast areas, increase the threshold value.

Select the image area that is to be studied. Zoom the image in this area in if needed. Start with a higher value for sharpening amount and then decrease the radius value until the structures are well highlighted. The sharpening amount may then be reduced again.

7.3.3.5 Contrast enhancement

With contrast enhancement the differences between bright and dark areas in the image can be yet stronger distinguished. Bright image areas are then presented yet brighter and dark areas yet darker. An enhancement factor of 1 (slight) to 25 (very strong) can be set for this functionality.

7.3.3.6 List of filters

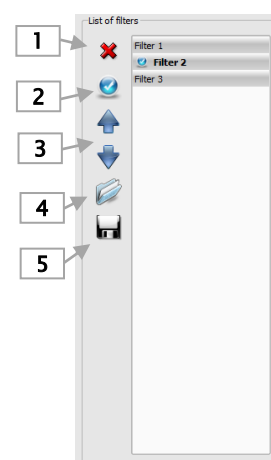
With the list of filters, various filter settings may be stored and re-used easily.

In order to save filter settings, click “Save settings”. A new entry will be added to the list of filters. Enter the name of the new filter. Thus, a number of filter settings may be saved in the filter list.

A filter from the list of filters may be set as the default filter. If a filter is set as the default filter, it will be automatically applied to every image unless another filter has been set for this particular image. In order to deactivate the default filter, uncheck the Default definition.

With the export function you can export filter settings as a configuration file and import them to another station using the import function.

- 1 – Delete filter
- 2 – Set filter as default or uncheck the default filter
- 3 – Move the filter in the list
- 4 – Import the filter from a file
- 5 – Export filter in a file



7.3.4 Annotations / measurements



Misalignments of length and angle measurements may be caused by modality or image acquisition!

Evaluations are based on information for pixel size saved in the DICOM image.

However, misalignments may be also caused by an exposure – particularly if conventional radiography (CR), e.g. of pelvis or ilium is considered. The distance of the exposed part of the body from the imaging plate / detector skews the presentation of length on a 2D radiograph. Also, if a scale (sphere) has been x-rayed withal, a misalignment is possible, insofar as the scale was placed not exactly at the same level with the measured part of the body at the exposure.

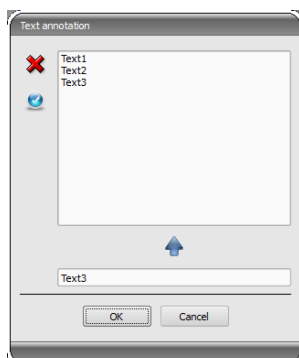
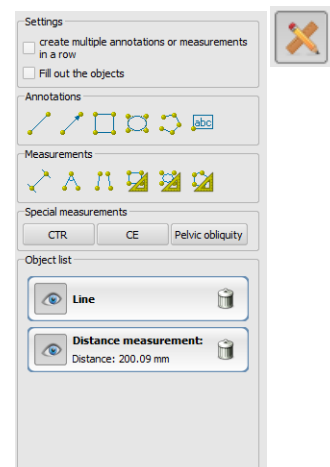
If details for pixel size in the images are not specified then the measurement results follow in pixels.



For the possible deviations listed above the annotations and measurements available in the program are not suitable for surgical plannings or making prostheses. For these purposes additional special planning systems with scale and reference standards are necessary.

Under the annotations come lines, arrows, rectangles, ellipses, polygons and text. Thereby the rectangles, ellipses and polygons can be also drawn filled out. Explanations how the objects are to be drawn using the mouse, are each time displayed after the selection is made, i.e. after clicking the switch, in the right bottom corner. The drawn objects can be yet modified afterwards in all directions or relocated to get the form and to be placed in the position desired. In addition, the objects are shown in a list to the right and can be hidden or shown by single clicking the eye symbol. Particular objects can be deleted by clicking Recycle Bin icon or pressing „Delete“ key on the keyboard.

The switch “create multiple annotations or measurements in a row” effects that the selected drawing object remains active. Then e.g. multiple distance measurements can be drawn one after the other without the need for re-clicking for every single measurement. After you have drawn all measurements you can quit this modus by double-click on the image area or pressing the ESC key.



After the text is selected, first a dialog box appears, in which new texts can be added to the list of standard texts (enter text in the input field and then press a green arrow) or the text from this list can be selected (double-click or click and Ok) or desired text can be entered (enter text in the input field and press Ok), which will be then used and placed on the image. You can specify yourself a standard entry which is then already activated, after you activate the dialog box.



Measurement functions exist only if the adequate module is enabled.

Under measuring comes measuring of the sections and angles as well as measuring of the content of the area of rectangles, ellipses and polygons. The measuring of an angle can follow thereby by entering 3 or 4 points. When measuring the angles, external angle is represented in brackets.

When measuring rectangle, ellipse or polygon, the area and densities are measured as well. The actual average grey level out of original pixel values as well as minimum and maximum grey level are shown next to the figure. For colour images only a normal area measurement is done. For CT series values of these objects are expressed in Hounsfield units (HU).

During drawing the measurements current measured data are shown live. As for annotations, the drawn objects can be yet modified afterwards in all directions or relocated to get the form and to be placed in the position desired. The field with measured values can also be moved to another place in the image.

The measurements are shown in a list to the right and can be hidden or shown by single clicking the eye symbol. Particular objects can be deleted by clicking Recycle Bin icon or pressing „Delete“ key on the keyboard. All annotations and measurements can be deleted with one click on the button „delete all“ on the bottom right.



Graphic objects of third party systems or earlier digipaX versions (Version 1.4.5 or earlier) cannot be changed.

Settings for drawing graphic objects in overlay can be set in the configuration (category Overlay).

7.3.4.1 Special measurements

There are more buttons for special measurements existing. Some of these buttons are used only for veterinary purposes and therefore only available if digipaX is configured for veterinary use (see section 22.3).

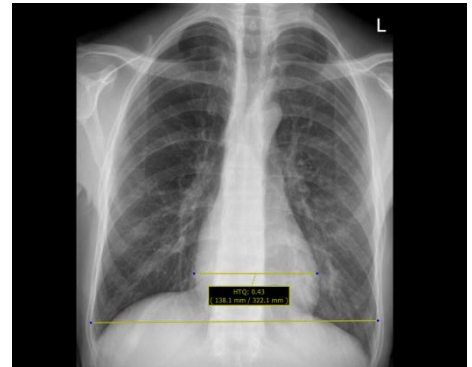
When you click a button for a measurement a routine for this measurement will be activated. A short instruction for steps to be performed is shown at the bottom edge of the image. First you must perform all the steps as described until all points and lines for the measurement given are set. Thereafter you can correct the measurement and adjust the objects accordingly. If you wish to cancel the measurement process e.g. in order to start it once again from the beginning, just press the Escape key.

CTR (Cardiothoracic Ratio)

Evaluation of cardiac size

X-ray image: thorax in p.a. projection

Click the button and draw the line for measurement of the heart (maximum transversal diameter of the heart silhouette) first. Thereafter draw the line for the measurement of the thorax (maximum transversal internal diameter). Both lines can be still readjusted by moving their end points.

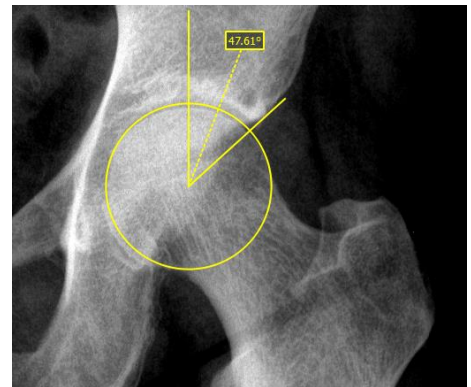


CE measurement (central-edge angle of Wiberg)

The measurement calculates the angle between the line drawn from the centre of the femoral head to the outer edge of the acetabular roof, and a vertical line drawn through the centre of the femoral head.

X-ray image: pelvis in a.p. projection

Click the switch and drag the circle on the femoral head. Start with a mouse click on the central point and then drag the circle to the outer edge. Afterwards, drag the angle on the acetabular roof.

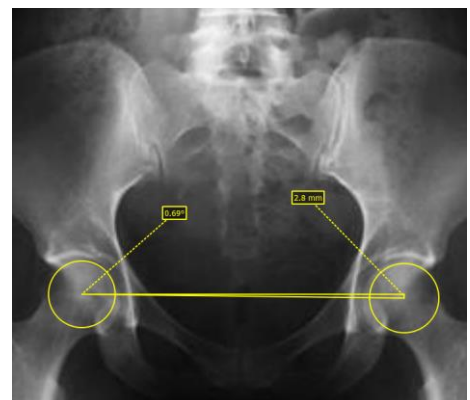


Pelvic obliquity measurement

The measurement calculates the angle between the horizontal line and the line drawn between the centres of the femoral heads.

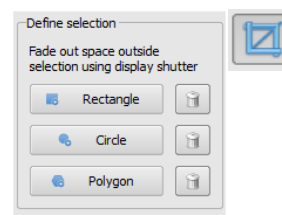
X-ray image: pelvis overview

Click the switch and drag the circle on each of the femoral head. Start with a mouse click on the central point and then drag the circle to the outer edge.



7.3.5 Display shutter

For each image, the different selections zones in the form of a rectangle, ellipse or polygon can be defined. Thereby, for each type exactly one object is possible, whereby the types can be also used together. Explanations for drawing using the mouse are displayed below the buttons, after the adequate button is pressed on.



Setting up the selection zone of a certain type replaces a potentially already existing selection zone of this type.

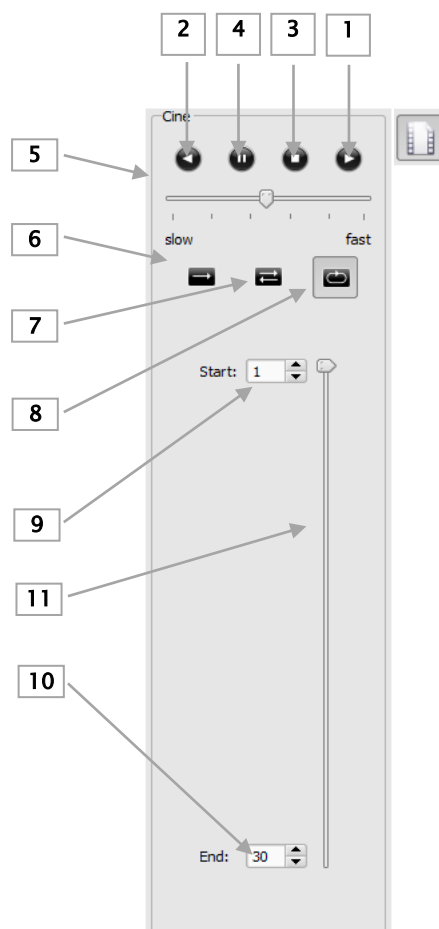
Everything except for the zone that has been defined in this way, can be hidden and unhidden by using the switch in the toolbar („Display shutter“ in the overlay options).

The objects can be individually deleted again.

7.3.6 Cine loop

With this function, the image series can be played automatically. Various control functions such as the play direction or speed are available here. The speed can be set with special controllers. With “Start” and “End” you can determine from which image of the series the play is to be started and on which one it is to be ended. With the vertical scroll bars, individual images can be also selected manually.

- 1 – Play forward
- 2 – Play backward
- 3 – End
- 4 – Pause
- 5 – Play speed
- 6 – Play once only
- 7 – Automatic play forward/backward
- 8 – Endless loop
- 9 – Start play from this image
- 10 – End play with this image
- 11 – Manual selection of individual images



7.3.7 Hanging Protocols



The module is available only if it is enabled in the license configuration. After activating the module required protocols need still to be defined and installed by the system administrator.

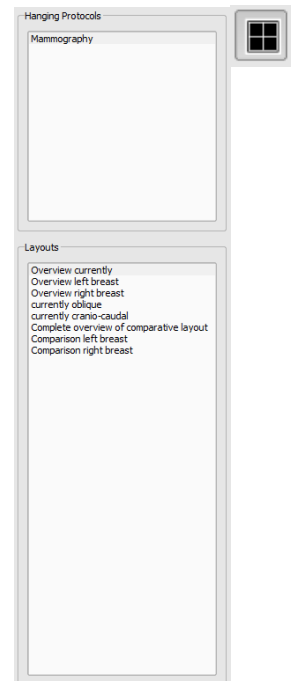
Hanging Protocols are a means of defining how specific types of images should be displayed according to predefined split on one or multiple monitors. A classic example of this is presentation of mammographic images. There are also various layouts, i.e. images of the most recent or the last study, or images of the left and right side can be automatically presented next to each other.

Double-clicking a study node in the preview tree allows to present the images according to predefined Hanging Protocols in the image viewer. The first protocol with the first layout is automatically used. In the right toolbar the protocols defined for this type of image and below it the related layouts are shown.

If the option for automatic presentation of the current study is activated in the configuration (see section “Window split / HP” in chapter 19), the images are presented according to the protocol already at the time of loading of the patient.

In order to change a protocol or a layout click it and the images are then presented accordingly. You can scroll layouts within the protocol by using left and right cursor keys while you hold down the Ctrl key (Ctrl + left cursor key or Ctrl + right cursor key). You can also select first 9 layouts directly by using the number keys 1–9.

If the image viewer is active on multiple monitors (see section “User interface” in chapter 19), Hanging Protocols can also be activated for these monitors. Layout is then automatically distributed to the active monitors.



When using Hanging Protocols, only the types of images are presented for which the protocol with the layout is defined. If there are existing other images for the patient in question, they need to be opened manually via preview tree. It can be i.e. images with a different projection or a different modality (CR, US). Check also filter settings in the patient management that no filter is active and all studies of this patient are presented.



Only for types of images for which the Hanging Protocol is defined the protocols with related layouts are shown in the right toolbox. Toolboxes for all other images are empty.

7.4 Scout lines

By the scout line (localizer line) the cut edge of two layers (planes) and the position of particular sectional images of the CT and MRT series are presented. The position of images of any other image series in relation to the active image is thereby visualized.



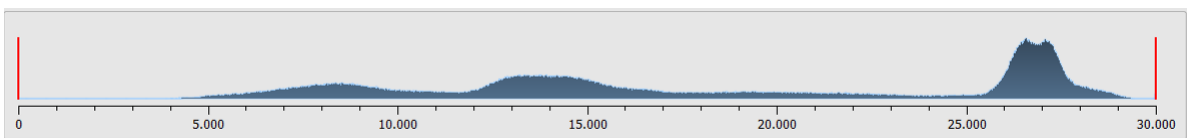
In presentation as projection lines, they do not provide information on angle under which two layers are crossing. These lines do not indicate if two layers are perpendicular or inclined to themselves. Therefore, you can not draw conclusions to mutual position of two layers on the base of projection lines only.

The better idea on mutual position of planes may be obtained in presentation as planes due to the 3-dimensional image. The required presentation form may be set up in configuration User::Overlay / Scout lines by setting the type in "Scout lines / Localizer" group.

Before you open a series, you should modify the image split so that you can view the particular series next to each other. Then open each series in a field. If the presentation of scout lines is activated, the scout lines will be shown automatically. Click in a series and scroll with the mouse wheel through the images of this image series. Alternatively you can use „Page up” and „Page down” buttons. The position of the current image is shown in another series as a projection line or as a plane. You find the settings for the presentation of scout lines in the section Overlay / Scout lines in the chapter 19 Configuration.

7.5 Histogram

Below the image or the images, there is a histogram window, which displays always the histogram of an active image. By shutting down the histogram window can be also completely hidden.



For multi frame series, a histogram of a currently displayed frame is shown.

For colour images, a red, green and blue curve for the channels R, G and B of the image are displayed. For greyscale images, a blue curve (like presented on the image above) for spreading of greyscale values is displayed.

In the histogram for the greyscale images the current setting for windowing is always displayed and can be here also modified. The left and right zones of the visible window space are thereby lightly coloured, so that this is clarified. The red lines show the edges and are coincidentally the sliders, for modifying window edges. The performance of windowing can be improved with a higher histogram smoothing. The smoothing can be changed in the configuration page user/histogram. See section 19. The window can be completely moved by

clicking with the mouse into the space between the red lines and then moving using the mouse.

A zoom rectangle for zooming in the histogram can be dragged on by dragging with the mouse with Shift + left mouse button. With the right-click into the histogram the full size can be displayed again.

Settings for work with the histogram can be set in the configuration, category Histogram.

7.6 Easy Report



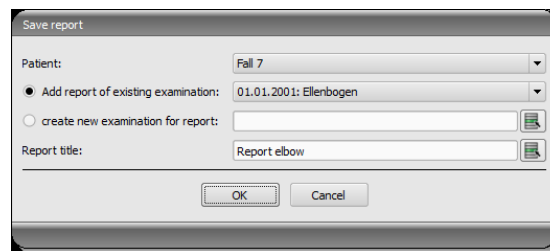
This module has to be activated by licensing.

With this module reports, descriptions, comments etc. for the patients can be arranged in text format to the studies or images. The text is entered into input field designated for that purpose underneath the image viewer. The text is converted to a compressed grey image that can be approached just as the same as the other DICOM images. In addition, the text is also resided in the tag „0020,4000 – Comments on image“.

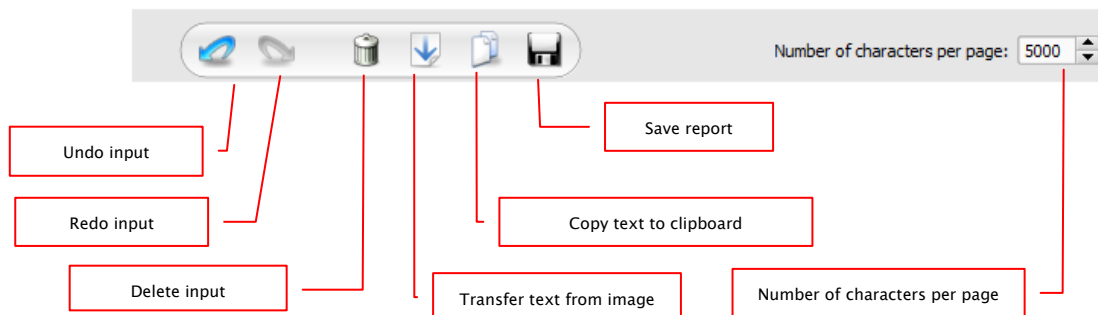


With the switch „Save“, the files of the existent study are added or saved as a new study in the archive. Easy Report is available in the Multi-Patients-Mode. That means that many patients can be opened.

First select a patient to whom the Report should be assigned. Afterwards select an existent or new study. Enter the title for the Report and click „OK“. The title of the Report is saved on the tag „0008,103E – Description of a series“.



Description of the toolbar:

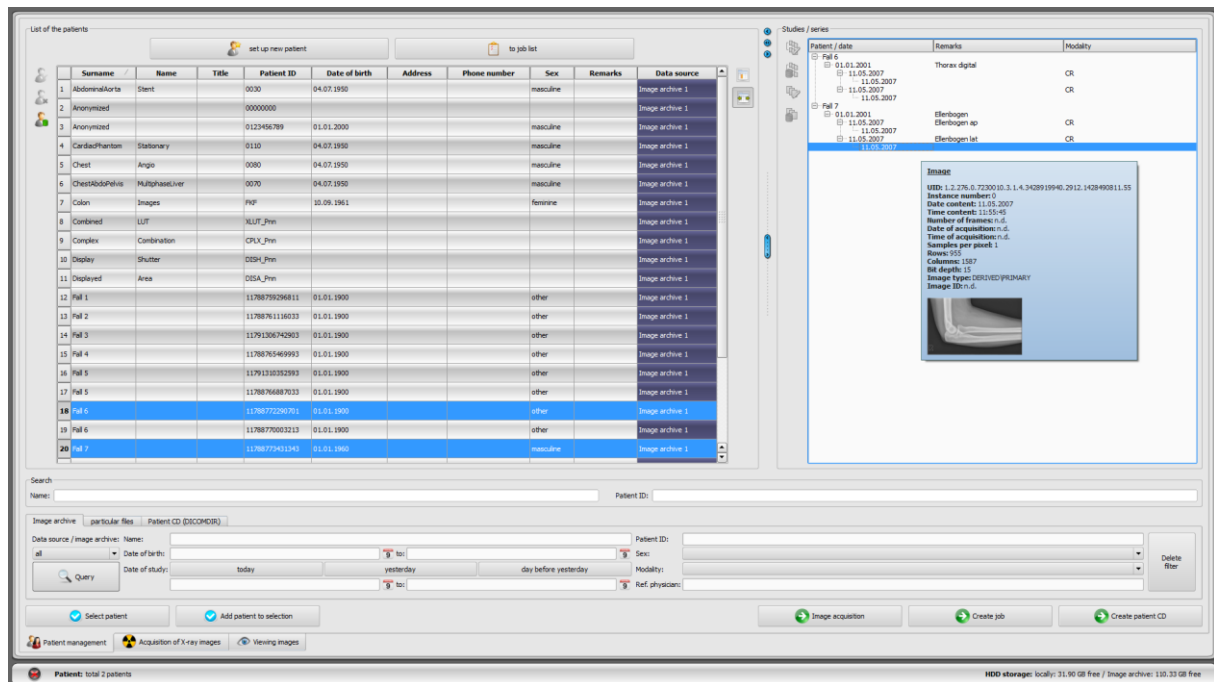


Number of characters per page is setup on 5000 characters by default. Thereafter the page is automatically changed by saving. Thereby a new image in the same series is created. Page is broken at the word boundary. Thanks to this the pages of the Reports are kept as far as possible in A4 format. Number of characters per page can be increased up to 10240 characters.

Text from existent Reports can be transferred with the switch „Transfer text from image“ into input field and used in this way for a new Report. Change of an existent Report is not possible.

You can also process the text from existent Reports further by transferring it first into input fields, then copying to clipboard and afterwards inserting into e.g. Word document.

8 Patient management



If the patient management is to be used as a separate component, the patient management tab must be unmarked in the configuration and „User interface“. Then, the patient management is called up via the start menu or the header, if the latter is active.

8.1 Patient data

For each patient the following data are displayed in the table:

- surname
- name
- title
- patient ID
- date of birth
- sex
- data source

Each column can be shown or hidden. To do it, click with the right mouse button on the headline of the list of patients and activate or deactivate the desired column. You can also move the columns in their order by dragging them with the pressed left mouse button to the desired position.

The administrator can activate additional columns e.g. for address, phone number and remarks etc. To show this data, the database has to be possibly adjusted as the first step. Ask your system administrator about that.

On the right side the studies for each patient and the image series contained in these studies are shown.

8.2 Data source

The data from image archive can be queried, as well as local DICOM files can be read. The latter can thereby follow as a scanning for directories or opening single files or importing DICOMDIR, as this is used mostly while burning the patient CDs.

The list of patients shows each time the list of the patients of the currently selected data source, so of the selected tab. If the tab is changed, also the list of the patients displayed overhead will be changed.

After the start of the program the patient management starts automatically if no other action through the GDT connection is required (see 21 GDT interface). User is asked immediately if the list of the patients is to be updated. By „yes“ all image archives without filtering are queried (see 8.2.1 Image archive). This can take some time, depending on the number of patients, the network as well as used data base. This behaviour can be changed in the configuration – category Others. In this way, it can be set that the list of patients is to be or is not to be updated without the inquiry at the start of the program. Therewith first the filter will be set and a faster query will be performed.

8.2.1 Image archive

8.2.1.1 Query

On this page for one thing the configured image archives (PACS) can be queried and for another thing the locally set data, which are provided for storing in image archive. Which sources are to be queried exactly, this can be set with a drop-down list box „Data source / image archive“. Therein „all“ can be selected, in order to query all possible sources, „locally“, in order to incorporate only local data or the name of an image archive. Not used image archives (contained in the configuration, but deactivated) are not incorporated in this list and will be not queried.

By clicking the switch „Query“ the sources are queried possibly with use of set filters and the list of found adequate patients is updated.

In order to increase query speed of large archives, the number of data records displayed is limited. If the searched patient is not contained in the list, because the list is cut off, the limiting by filter must follow or the maximum data records must be increased. In the configuration, it is possible to set up the number of data records displayed or deactivate this limitation (see chapter 19 Configuration section Others).

The table can be sorted in ascending and descending order by field (column) by clicking the column header.

8.2.1.2 Filter

The list of patients can be filtered according to different criterions. By filtering all patients which do not meet the filter settings, are dismissed from the list. The criterions which are to be used for filtering, can be activated or deactivated with a checkbox. Thereby, the filters can be also combined as desired. It is also possible to combine various filters freely. All active filters can be reset with the button “Delete filters”.



Local data, so the patients locally set in the system or newly transferred via GDT, are not filtered. These do not appear in the result lists, even when they meet the search criterions.

8.2.1.2.1 Search fields

Additional search fields for patients' names and IDs can be activated in the configuration section Users/Others (see chapter 19).

In the search fields for the name (surname is compared) and patient CD each time the search term can be entered. The first found patient in the list of patients will be selected each time when the text in any of input fields changes.

If the text is entered in any of the search fields, the text in another one will be again deleted. The search fields are green coloured if at least one match is found, otherwise they are red coloured.

Enter the first letters of the surname (e.g. "Mey") or the first characters of the patient ID (e.g. "123") in the search field and selection jumps over automatically to the first match result for the data entered.

8.2.1.2.2 Filtering by name

Enter the beginning of the searched surname and a star behind it (e.g. „Sch*“), in order to search all the patients whose names begin with the characters "Sch". The star (wildcard) can be also used at the beginning (e.g. „*mann“), to display all patients, whose surnames end with "mann". You can also enter surname and first name separated by a comma (e.g. Sch, Ma). All patients, whose surnames start with „Sch“ and the first names start with „Ma“, will be displayed.

8.2.1.2.3 Filtering by date of birth

At the touch of a button the patients can be filtered, whose date of birth is included between the entered dates.

8.2.1.2.4 Filtering by date of study

At the touch of a button the patients can be filtered, which contain the studies with the date or period of time entered. Thereby the studies will be automatically filtered. This means that only one study, which meets the search criterions, will be shown for the patient.

8.2.1.2.5 Filtering by date of registration (option)

Optionally you can filter by date of registration of images in the archive. Date of registration is the date on that the image has been saved in the archive. This type of filtering can be useful for generating daily statements, statistics etc. This function is optional and needs to be enabled by administrator of your system.

8.2.1.2.6 Filtering by patient ID

You can search specifically for a patient-ID by putting it in the field and then clicking Enter or „Query“. Enter first characters of the searched patient ID or search for a part of this patient ID using wildcards (star „*“) as for filtering by names.

8.2.1.2.7 Filtering by sex

Filters out all patients of a certain sex.

8.2.1.2.8 Filtering by modality

All possible modalities (procedure for image acquisition) are listed in a drop-down list box and one of them can be selected there. Subsequently only the patients will be displayed, which contain the images of this modality. This means that also the image series will be filtered and the corresponding series will be shown.

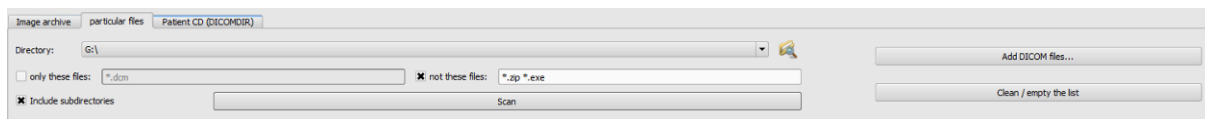
8.2.1.2.9 Filtering by transferring physician

Like for the filtering by names or patient ID, use here wildcards for filtering by names of transferring physician. Possibly it is necessary to set a star both at the beginning and at the end (i.e. „*sch*“).

8.2.1.2.10 Updating patients data

If you double-click a node with the patient's name in the tree view, you can download the rest of images of this patient (unfiltered). This might be helpful for downloading all remaining studies when only one study was selected or the list was filtered. After having done that all images of the patient will be shown in the tree view.

8.2.2 Single files



Using this tab the local DICOM files can be fast imported and viewed. Via selection of a directory or a drive and button „Scan“ all files, which meet the filter settings, are being tried to be opened. Filters for the files, which are not to be opened and for the files, which are not to be imported, can be set. First activate the desired filter and enter the file name using wildcards („*“ and „?“). Thereby, many possible file names can be separated with blanks. I.e. in the case of filter setting „*.dcm CT*“ for the option „only these files“ all files with the file end dcm and all files with the names beginning with CT will be found. If you activate the option „not these files“ and use as a filter i.e. „*.exe *.zip“ you eliminate the possibility that the programs or ZIP archives will be co-imported.

If the option „include subdirectories“ is activated all found subdirectories and their subdirectories will be scanned.

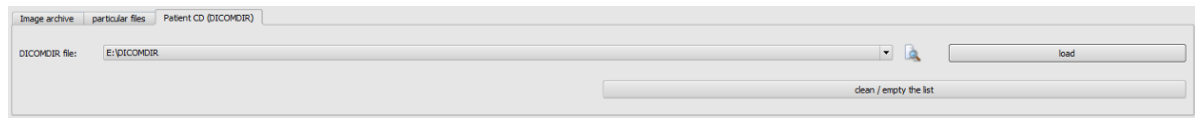
If the file, which meets the filter settings, cannot be imported, this will be minuted in the log, which can be optionally viewed if any errors occur.

The selected directory will be stored, so that it can be always selected again fast from the drop-down list box. A new directory can be selected with the switch „...“.

By touching the button „Add DICOM files...“ the single files can be directed opened. Multiple selection of files is thereby possible with the buttons Shift and Ctrl.

By clicking the button „clean / empty the list“ this data source will be emptied. All therein contained images will be then deleted from the system. **The files will be thereby not deleted.**

8.2.3 Patient CD (DICOMDIR)



Often the directories for DICOM files are created in so called DICOMDIR files. Mostly this occurs while creating a patient CD. Such a patient CD can be fast imported to the system using this tab.

DICOMDIR file (filename: „DICOMDIR“ without filename extension) can be selected with „...“. Already used storage places are taken up again in the drop-down list box and can be selected there fast again. By clicking on „load“ this DICOMDIR file is loaded and therein contained information on patient or patients and storage place of related images are taken up to the data source.

By clicking the button „clean / empty the list“ this data source is emptied here again. All therein contained images will be then deleted from the system. **The files will be thereby not deleted.**

Patients CDs can be imported automatically to the system. If a patient CD is placed while application is opened, a dialog box with the following commands shows up:

Open:	displays contents of the patient CD in digipaX
Import:	import of image data in the archive
Import for current patient:	import of image data in the archive with acceptance of data of the patient selected at present
Terminate:	termination of the procedure

If you choose „Import“ or „Import for current patient“, you can readapt patient’s data in the displayed dialog box before you import the images. After these data have been read in, they can be optionally immediately stored in image archive. More information concerning data storage in the archive you will find in sections 8.5 Sending images of patients to the archive and 8.6 Adapting patients data before sending to archive.

8.3 Recording new patient / modifying patient data

Creating new patients as well as editing patient data is possible only for data source of the image archive. So, this tab must be selected.

8.3.1 Recording data

To set up a new patient, select the button „Set up new patient“. While recording new patient, data of this patient are entered in a dialog box. The next available patient ID is chosen automatically. This ID can be manually entered, if it has not already been assigned. Through the configuration you can also enter the setting where the patient ID must always be entered

manually. In this case the system does not provide an ID, however, once the patient ID has been manually entered, it is compared with the data stored in the archive. If this ID already exists, a matching patient is suggested for selection. If it is not the right patient, you have to choose another ID.

Using PESEL Number (for Poland only):

If the system is set to usage of the PESEL Number as patient's ID, the PESEL Number is verified and the date of birth and sex are derived from it when you record patient data manually. Enter the 11-digit number in the field of the patient's ID and jump to next input field. If the entered number is valid, then the date of birth and sex are automatically put in the field, otherwise an error message appears and you can rectify the incorrect entry.

Enter all required data and click „OK“. If this dialog box is quitted with „Ok“, the new patient is recorded locally. This means that the patient is still not available in the image archive, because only transfer of complete images and not single data to the DICOM archive is possible. So, when the study, series and image exist for this patient, all can be transferred together as a new DICOM object to the image archive.

If it is set in the configuration, that an identification (i.e. physician number or company number) is to be added to each patient ID, this identification will be automatically added to your entered patient ID (separated with „-“). If it is set in the configuration that the patient ID is to be automatically created by the system (from the patient data), the input field for patient ID in the dialog box for recording patient data is deactivated.

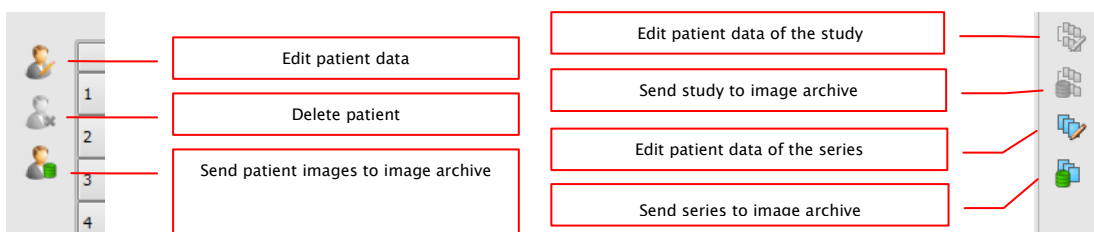


The following characters are not allowed in the patient's name or ID: \ / : * „ “ ? < > |.

Generally special characters shall be avoided, such as ^ ° : * ? < > | @ € μ ~ ² ³ !. Use simply the actual name of the patient and the incremental numbers for patient IDs. You can start from e.g. 000001.

8.3.2 Editing patient data

Local patient data can always be edited. Therefore, as long as no images for a manually created patient have been stored in the image archive, the patient's data can be changed. To edit a patient's data, click the top button in the left panel next to the patient table. A dialog box will appear where you will be able to adjust the data and save it by clicking OK.



After an image of the patient has been saved in the archive, you will only be able to edit the patient's data using a special edit feature, which can be run by a system administrator.



Before you perform the operation, always ensure that an up-to-date data back-up copy is available. After the operation, update the backup again to apply the changes there.

Patient data that has been stored in the archive can be edited for the patient, for a study or for an image series.

If patient data requires editing e.g. to change the surname (when the patient gets married) or to correct spelling, select the patient in patient management and click "Edit patient data" to open the editing dialog box. In the dialog box, make the necessary changes and click "OK".

You might also need to change the data of a study or an image series, e.g. when it had been assigned to a wrong patient when saved. In such a case, first open the right patient to display them in the baseboard. Then, find the patient with the incorrectly assigned study or series in patient management.

Just select the patient on the list – do not double-click them!

To facilitate navigation, you can open the tree structure on the right. When you hover your mouse pointer over the tree, you will see details of studies and images. If image thumbnails are available, they will be displayed as well.

Now select the incorrectly assigned study or series and click „Edit patient data of the study“ or „Edit patient image series data“.

In the dialog box, you just need to click „Data of current patient“. Then, the data that had been assigned to the wrong patient (see the baseboard) will be transferred to the correct patient, and the corresponding images will be re-labelled.

When you edit data in the archive, you also need to supply the owner's name, the edit reason and the password to confirm the changes. The password will be given to you by the system administrator.

Optionally, you can also ask the administrator to set up the system to automatically compare the patient data as soon as it is opened in patient management, and to automatically display a dialog box where you can edit the data if required.

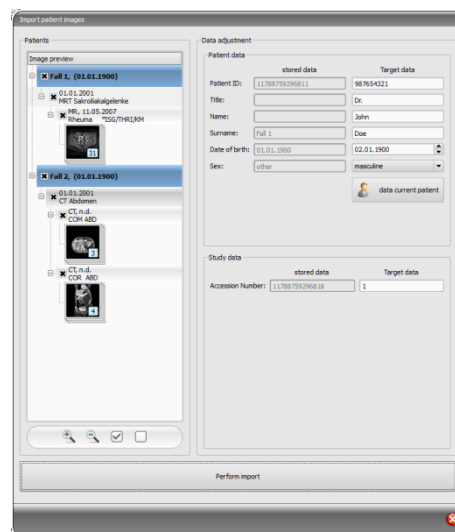
8.6 Adapting patients data before sending to archive

For this, please select one or more patients one after the other in the dialog box. You can also open the tree view for each patient and select the studies and series to transfer, if you do not want to import all the images of the patient. In the dialog box, on the right, you can adapt the patient data and studies. In the left column of the table (fields highlighted in grey), the current data of the patient, study or series is displayed (fields highlighted in blue). In the right column of the table, you can adapt data as required.

At the bottom, you can zoom image thumbnails in and out. There are also two buttons allowing you to show or hide the whole tree.

Once you have adapted all data, click on “Perform import” in order to transfer the images of the selected patient(s) into the archive. If you would like apply data of the already opened patients or the patients that have been forwarded via GDT, please select the switch “Data current patient”.

Please notice: If more patients are open in the program, the data of the first patient will always be applied when you press the switch “Data of current patient”.



8.7 List of studies, series and images

Parallel to the list of patients the studies of the selected patient or patients are displayed. Studies, series and images are presented as a tree structure. Recording, remarks and modality for the series are presented each time. Many patients can be selected at one time – in the tree structure the top nodes are then the information on patient and thereunder his/her studies.

8.8 Quitting patient management

Selection of a patient follows by clicking an adequate row in the table. By a double-click into the table or with the button „select“ patient is selected and displayed in the image viewer. Furthermore, a multiple selection in the table is possible, so that more patients can be processed at one time.

With a double click to a study in the study list you can open exclusively this study for the patient.

Patients can be also added to a current patient selection. Use the button „Add selection“ for this.



If the Shift key is pressed, the dialog box will be not closed if you press the switch „Add selection“. The patient will be added to the selection and the dialog box stays opened. So, many patients can be searched for and selected.

Alternatively, the following buttons can be used in order to get directly to another component after marking the patient:

To job list → Opening job management

Image acquisition → Opening image acquisition (switch is available only if the acquisition module is enabled)

Create job → Creating a new job in job management (possible only for single selection)

Create patient CD → Burning patient CD (many patients can be selected)

8.9 Delete function

8.9.1 Deleting images

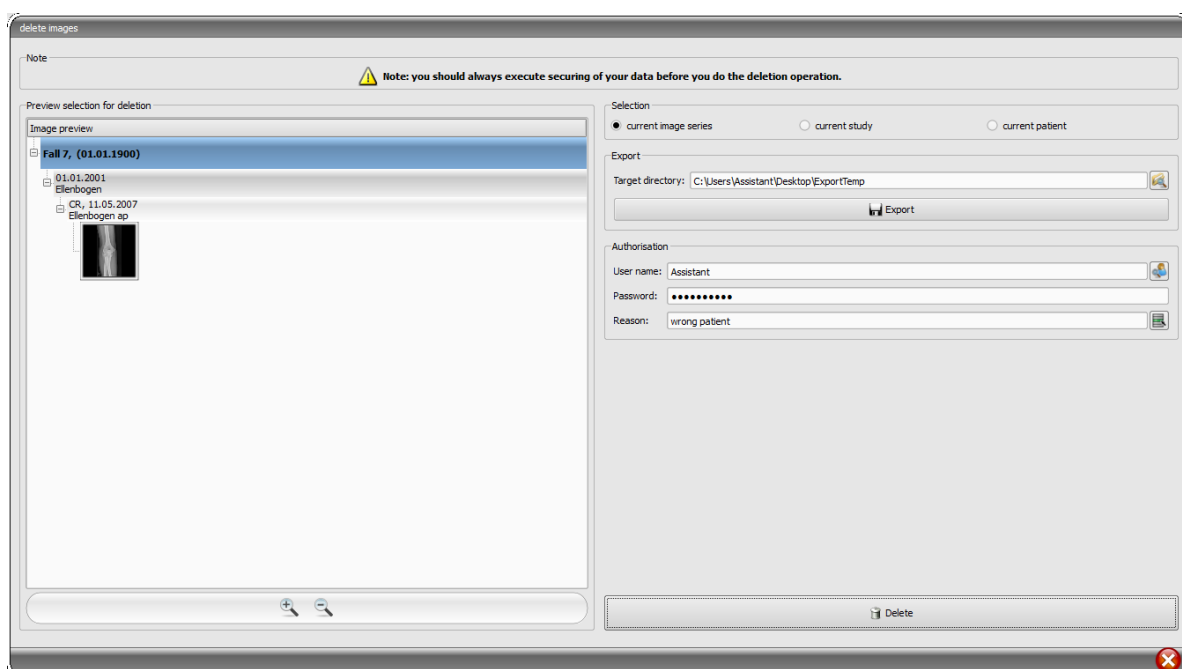
If the delete function is enabled by the administrator, it is possible to delete images from the archive.



Prior to launching of this operation make sure you have a current backup of your data. After successful execution of deletion operation you should update the backup, so that the modifications are also done there accordingly.

The delete function is applicable to entire series of images, entire study or complete patient. This means, it is not possible to remove individual images from the series but the entire series only. Usually, each X-ray image constitutes its own series. In the case of image series (CT or MRT), all images belong to the series. Only in exceptional cases, a wrong image is present in the series. Should this occur, please contact your administrator.

Load the wrong image resp. the image of the series or examination in question into the viewer and click on the “Delete” function tool. The current patient is being updated and the image deletion dialog box appears.



Now select the series, study or complete patient to be deleted.

Specify possibly the right path to the export directory and export the images into this directory before their deletion.

Enter the username, password and the reason why the images are to be deleted. You obtain the password from your administrator. The administrator must specify the password when activating this function.

Click on deletion to start the process. The images are being deleted from the archive.



If you happen to forget to export the images prior to their deletion: All images are being secured before they will be deleted. Ask attendant of your system to restore the images deleted from the backup.

8.9.2 Changing assignment of images

Assignment of the images to the patient may require a change if the images that had been mistakenly assigned to an incorrect patient in the acquisition, for instance, when the previously processed patient was still active in the system. These images must then be assigned to the correct patient. To do this, the wrongly assigned images must first be exported from the archive, then deleted from the archive and assigned through re-import to the appropriate patient.

To assign the mistakenly assigned images to a proper patient, proceed as follows:

First create a directory to which the images will be exported prior to deletion (e.g. on the desktop „Export Temp“). Select the required patient (from the appropriate image archive). Delete according to the instruction in chapter 8.9.1 Deleting images, exporting them at the same time to a newly created directory.

Now, the exported images are to be assigned to a proper patient. Open the required patient as usually in the clinic management system, select the patient directly in the digipaX patient management or set a patient manually (see chapter 8.3). After the patient is selected, return to digipaX patient management and to the tab “Single files” there and open the exported images. This procedure has been already described in chapter 8.2.2. After the images are loaded, perform the steps “Sending images of patients to the archive” from chapter 8.5 and Adapting patients data before sending to archive from chapter 8.6.

9 Import

9.1 General

Both pixel graphics from image files and images (through TWAIN interface) can be scanned for the active patient in the import component. The switches for scanning are available only if the relevant module is launched.

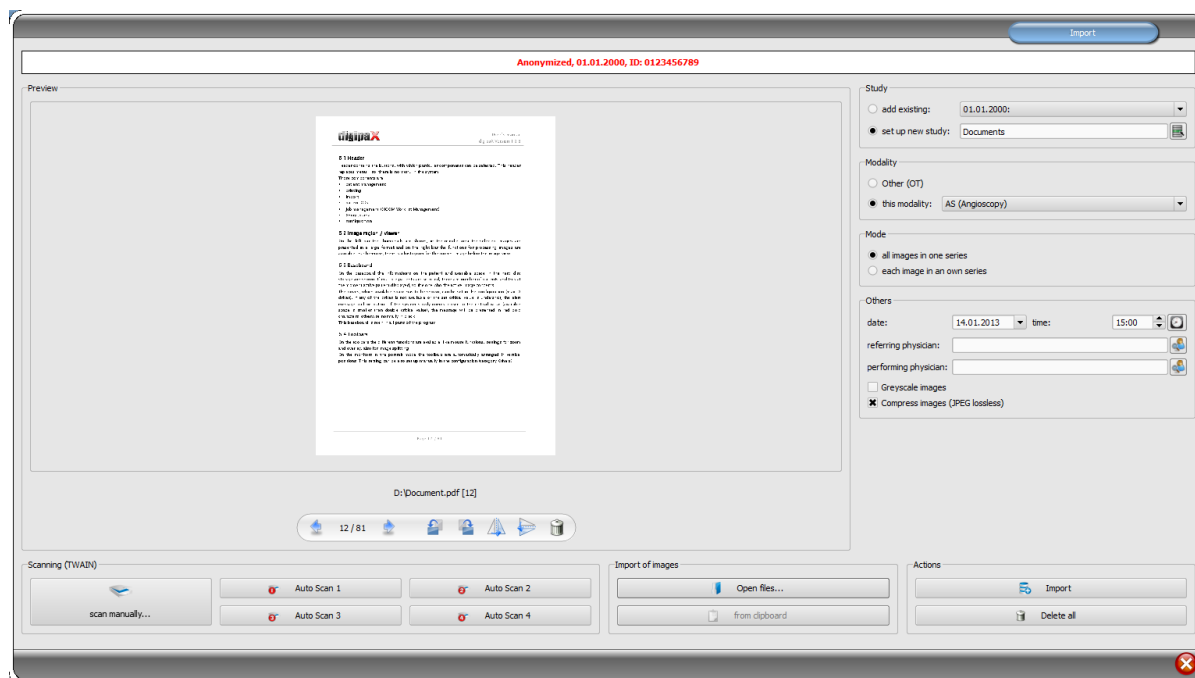


The import of images through TWAIN interface is not designed for import of X-ray diagnostic images. The designed purpose of use is restricted to import of photographs and documents which will be further assigned to patients in DICOM format and then they will be available together with other patient's image data.

Import of image data through TWAIN interface supports colour images with 32-bit colour depth and greyscale images with 8-bit (256 levels of grey) colour depth as well as pure black and white images (binary images with 1 bit per pixel).

The documents must be scanned with "Greyscale" or "Colour" setting set up just on the scanner. The documents scanned with "black-white" setting cannot be imported.

9.2 Import dialog box



Only exactly one patient can be opened (activated) in order that this dialog box can be opened. You can read in the header of the dialog box the activated patient for that the images should be imported.

With „Open files...“ one or more image files can be opened. Those will be imported not immediately, but they will be first saved on a list. With the scan-switches the images can be

retrieved in the scanner via TWAIN-interface. Those will be also first added to the list. With the use of the "from clipboard" you can add to the list images from other image processing programs by copying them to the clipboard.

The list can be emptied again with the switch „delete all“.

On the left side the added images to the list are displayed as a preview. You can navigate throughout the images with the arrows. Each image can be rotated and reflected separately as well as deleted from the list with the switches in the toolbar.

On the right side the settings for the import of those images are made. The images can be either added to an already existing study of the patient or resided in a new study. For the first option, please highlight the option „add to existing“ and select the required study from the drop-down list box. For the latter Option, please select „set up new study“ and enter description for this study in the input box standing behind. Here you can also set up and then use your own defined list with the descriptions.

Select modality (type of images), that should be entered for new images. Usually „OT“ should be used but you can select other modalities, which correspond with the opened images.

Specify in the group „Mode“, whether all images should be saved in one series (recommended) or each image should be saved in a separate series.

Define under „others“ date and time, that should be entered for the point of time of creating in the DICOM files, as well as referring and performing physicians who will be entered if a new study setup involved. Optionally you can convert all images explicitly in greyscale images before they will be saved. To save storage space in the archive and transfer the images quicker, the images can be compressed lossless by activating the option „Compress images“ in the import. No information is subsequently lost.

Saving the images follows by „Importing“. Withal all images existing in the list will be converted in DICOM files (according to options) and sent do image archive. All successfully saved images will be deleted from the list.

The 8-bit DICOM images are created while importing. From the images, which already have 16-Bit format (DICOM, TIF), 16-bit DICOM-images are created while importing.



Once the images have been imported, they cannot be modified or deleted any more (this is possible only by admin's intervention in image archive).

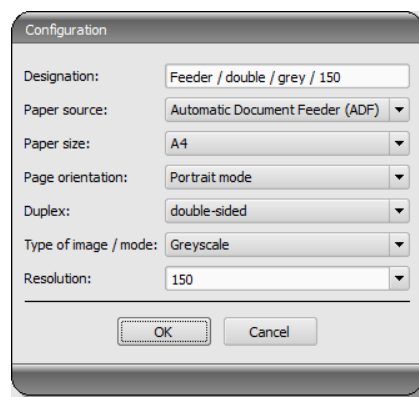
If set up by admin, a GDT file will be created after the import, that can be i.e. loaded into the management system of the clinic in order to generate also an entry in patient's file.

9.3 Document scanning

The “scan manually” and automatic scanning options are available by means of four programmable buttons. If “scan manually...” option is selected, the scanner dialog box is opened and it is possible to define manually the required settings for resolution, colour, etc., prior each scanning process. This dialog box is not the component of digipaX software, it belongs to scanner software. You shall read the scanner documentation to obtain more detailed information. If several TWAIN units are installed or the given equipment is provided with several TWAIN drivers, it is possible to select the specific device or driver holding down the Shift button and simultaneously clicking on “scan manually...” button.

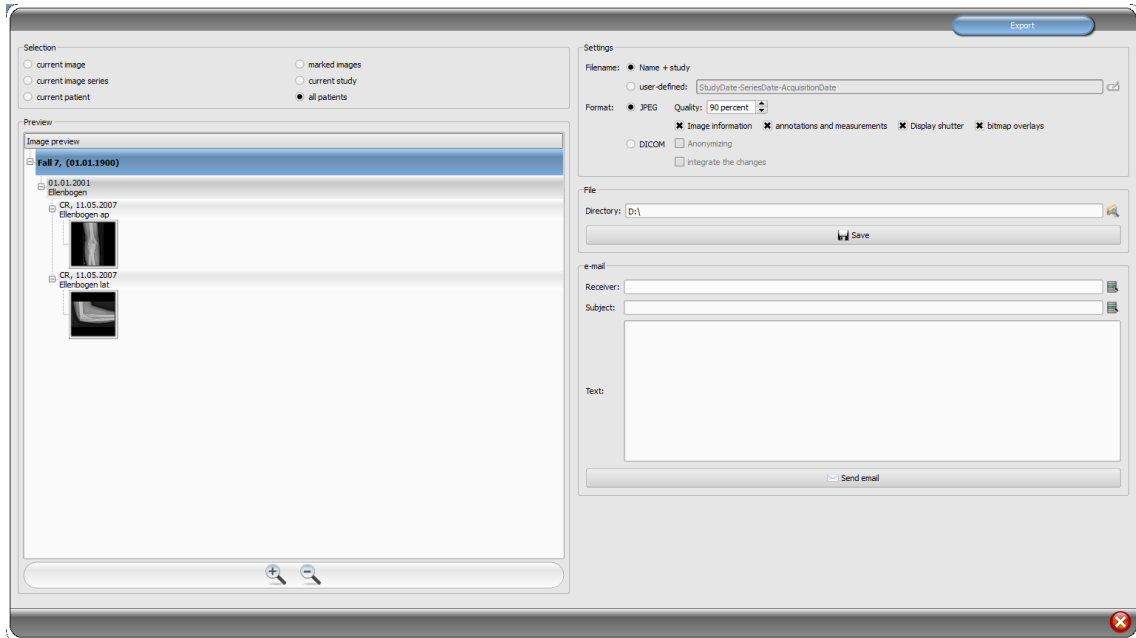
There are furthermore four buttons available, to which different settings may be assigned. Such parameters will be then automatically transmitted in printing to the scanner and documents will be automatically scanned with such settings. In this case it is enough to set once the required parameters, such as colour, resolution, etc.

In order to set parameters for the automatic scanning button it is necessary to push simultaneously the given button and Shift button. Then you must provide description of such button and set the required parameters. It can happen that your equipment does not handle all functions and some parameters may be unavailable. If several devices are used it is necessary to select with “scan manually” button – according to above description – device, for which the automatic scanning buttons will be used. Scanner, which was selected in this setting box as the last, is always activated.



10 Export

The export component allows for exporting images or entire series from the program or sending them per email. The images can be exported as the JPEG graphics or in the DICOM format.



10.1 Selection

As the first step, please select out one or more patients whose images are to be exported and then open the export component. In the left part of the dialog box you can select now the images that you would like to export. The images corresponding with the selection are displayed in the preview.

If you wish to export several single images from various studies or series, you have to mark these before (see chapter 7.2.8 Marking images) and select under the selection “Marked images”.

10.2 Settings

10.2.1 Filename for export of images

With the option „Name + study”, the filename is built automatically from the name of the patient and description of the study plus an incremental number (e.g. Smith-John-Elbow-1.jpg).

If you wish to use different filenames, please select „User defined”. With the switch “Edit” you open a dialog box. You can use there a free text or other information from the image (e.g. date of acquisition) as a filename.

If you wish to use a free text, just enter this text in the line for the description. Every exported image obtains then this filename and an incremental number at the end (e.g. Image-1.jpg).

You can also use up to three values from the image information. Select out the values desired from the DICOM tags. Enter %1 for the value %1, %2 for the value %2 and %3 for the value %3 in the line for description. The filenames are then built automatically from this information. The order can be chosen freely. If you separate the values in the line with dashes, the dashes will be placed at this place in the filename as well.

It should be noted that the characters \ / : * ? „ “ < > | are not allowed in filenames in the MS-Windows©.

10.2.2 Format for export of images

10.2.2.1 Export as JPEG

You can export images either in JPEG format or as DICOM image. The data amount can be reduced in the case of JPEG images by change of the quality. The images are compressed at that. It can be useful if the images are to be sent as an email. The higher percentage value, the better quality. File size increases then too.

You should keep in mind that multi frame series are saved in only one DICOM file. Thus an entire series is always exported even if only one single image was selected and many single JPEG images arise accordingly.

Furthermore, it can be defined whether the image information, annotations and measurements, display shutter and bitmap overlays are to be exported too.

10.2.2.2 Export as DICOM file

The next option is exporting images as a DICOM image. The images are then exported in original directly as a DICOM file as it is with a patient-CD.

Here too, the patient data can be anonymized.

With the option “Integrate changes” the rotations, inversions, windowing, filters and display shutter are permanently integrated in exported images. The annotations and measurements cannot be exported with the image in DICOM format.

In veterinary version, an additional option „DICOM veterinary standard” is available. With this option, the internally used patient data are saved in DICOM tags provided for this purpose in accordance with the standard. This ensures compatibility with other DICOM systems.

10.2.3 Export as a file

If you wish to export images as a file, for example on an USB stick, you have to specify a path directly or navigate to a target directory. Press on „Save” and the images will be stored accordingly to the options set in the target directory.

10.2.4 Export as an email

You can also transfer images directly to your email program and send them per email. For this it is necessary to have an appropriate email program installed and configured on the PC. These can be such programs as Outlook, Outlook Express or Windows Mail etc. If you send your emails directly via internet website, you have to export the images first as a file as described in the previous section and afterwards send them via your email supplier.

If you have an appropriate email program, you can use the function offered here.

Specify the receiver's email address in the line „Receiver”, enter the subject in the line for subject and write your message in the text field.

Afterwards, click on “Send email”. The email program opens and the data is applied automatically. The corresponding images are attached to the message. You can also specify the data for receiver, subject and text yet in your email program and e.g. use the address book and text formatting of your email program. If all data and information is correct, you can send the email.

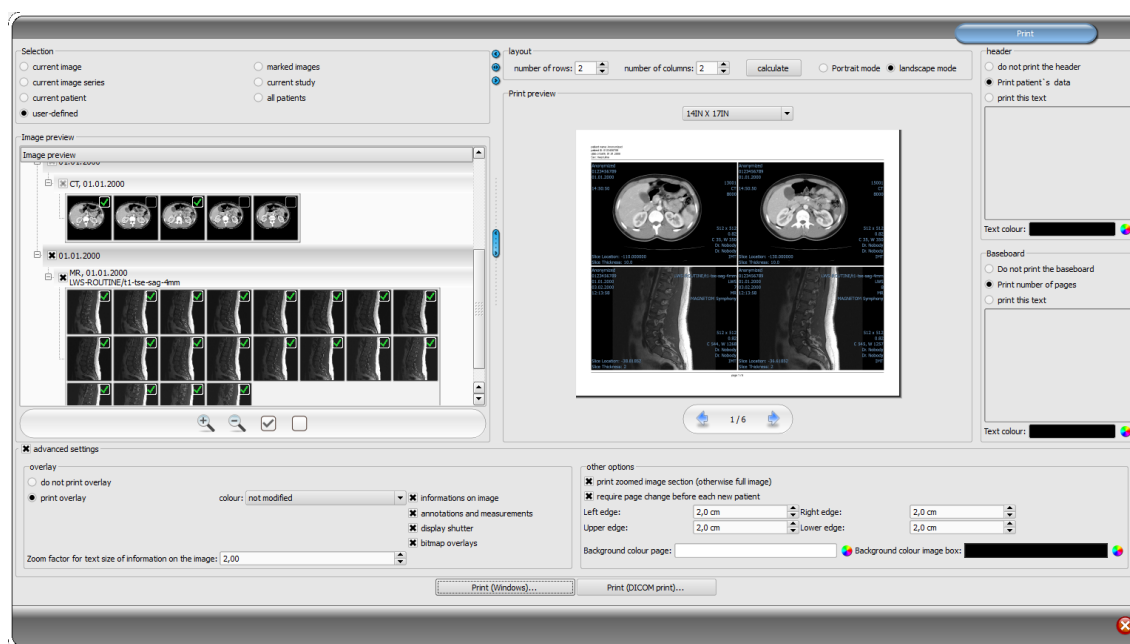


The provisions of law require that messages sent by electronic means which include information on patients or their personal data must be coded. Therefore, electronic mail software must be so configured that data is coded and only its recipient can read such data.

There are special extensions for electronic mail programs which provide the message coding.

“The GNU Privacy Guard” is a free cryptographic software. It may be downloaded and installed from <http://www.gnupg.org> site. Such installation and configuration shall be made by professional.

11 Print



11.1 Selection

If about printing, current image and many images can be printed at a time as well. This is determined in the group „Selection“. The „user-defined“ option allows for targeted selection of individual images, series, studies, or patients.

11.2 Image preview

If you have set the „user-defined“ mode in the group „Selection“, you can do targeted selection of particular images in the image preview that are to be printed out. Select simply an appropriate node for patient, study, series, or particular images. Particular frames of multi-frame images cannot be selected. In this case, all frames are always printed.

11.3 Layout

Here you can rotate a page to landscape or portrait orientation. Multiple images can be printed on one page. Number of lines and columns can be set up to maximum 6x6 in the group „Layout“. Number of lines and columns as well as page change is automatically calculated appropriately to images selected in the image preview.

11.4 Print preview

All changes made during setting up affect immediately the presentation in the print preview. Number of pages is currently updated. You can navigate with cursor keys between the pages. All settings are saved so that they can be re-used at the next call-up of the print components (after the program reboot as well).

The particular thumbnails can also be windowed, zoomed, or moved. Modifications of thumbnails are at once applied on the print results.

Controlling all three functions goes in the same way as for the image viewer:

- Right mouse button: zooming in / out (with vertical mouse movement)
- Central mouse button or scroll wheel pressed: windowing
- Left mouse button: moving zoomed image

You can select the paper or foil size from the drop-down list so that the desired print result is shown in the print preview. It might happen that not all formats shown here are supported by your printer. Please note that the settings made here affect only the print preview. When you start printing, you still need to select the right paper or foil size in the print dialog box accordingly to the previous selection.

11.5 Header

The header, if activated, will be always printed at the top edge of the page, in a fixed defined size and fixed defined font type. These cannot be modified. Standard image information with the patient data can be printed as well as self-defined text. Colour of the text is selectable.

11.6 Footer

The footer, if activated, will be always printed at the bottom edge of the page, in a fixed defined size and fixed defined font type. These cannot be modified either. Number of pages can be printed as well as self-defined text. Colour of the text is selectable.

11.7 Advanced settings

11.7.1 Overlay

For overlay, it can be selected, whether this is to be printed over the image or images, or not. Overlay objects can be possibly difficult seen if printed, so it can be selected, whether overlay is to be printed black, white or unmodified. Unmodified means hereby that overlay will be printed in such way, like it is presented on the monitor. Display shutter will be always presented in the set colour (configuration). Bitmap overlays will be presented in the same colour like on the screen.

Optionally, only a currently zoomed in area of the image can be printed. Otherwise, the whole image is printed.

If the images of different patients are to be printed, the changing page before each new patient can be required (recommended). In this way, it cannot come to mistaking as patient data of the patient, which belongs to the first image on the page, are always displayed. Thus on each page the correct patient data is shown.

11.7.2 Other options

In other options you can define page margins as well as colour of background of a page or background of image boxes in that the images are inserted.

You can adjust the text size of the information on the image by use of the zooming factor.

11.8 Print

Printing is performed by use of the button „Print (Windows)...“ on one of the common Windows printers. The printer can be selected in the print dialog box. In the print dialog box you can also select pages to be printed if the print job contains many pages.

if you use the button „DICOM-Print...“, printing is performed on one of the configured DICOM printers. This button is only available if the DICOM-Print-Module is activated. The desired printer, film size and medium type can be selected in the print dialog box. Also the pages are printed on the selected DICOM printer.

During the preparation and transfer of print data a progress bar is displayed. If many pages are to be printed, this process can be cancelled with the button „Cancel“. After the print job is finished, an adequate message appears.

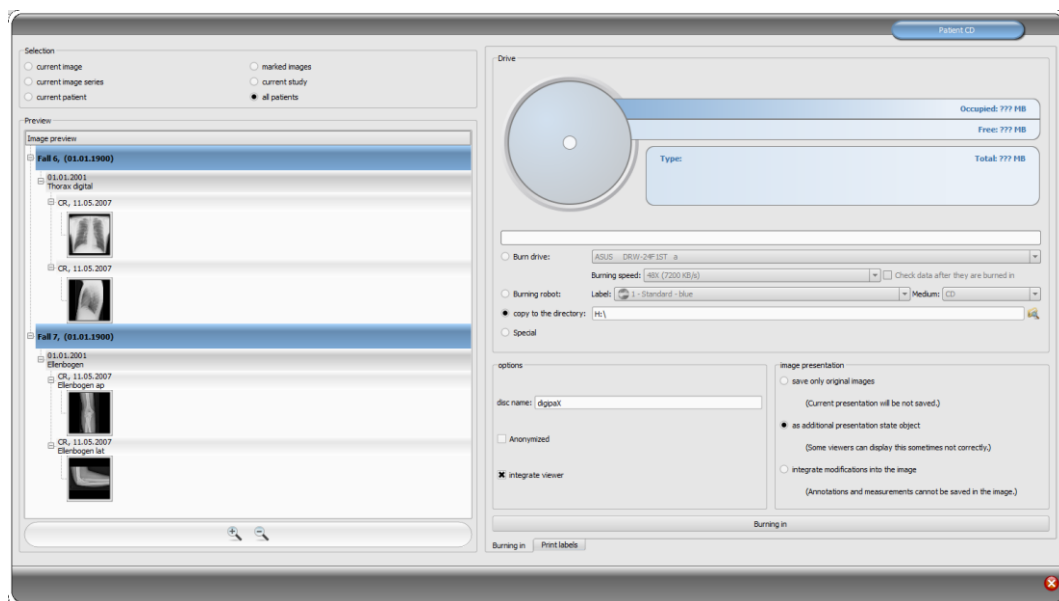
12 Patient CD

12.1 General

digipaX offers several possibilities for creating patients CDs/DVDs. The most common way is to directly burn data to a CD or DVD. For this purpose, the software "Nero," from "Nero AG" may be necessary. Please contact your system manager in this regard. If CD/DVD burning is not possible, another option is to copy data to a destination directory or an external storage medium, such as a USB memory key. With it you can directly access the data on another system or burn it to CD/DVD.

Another possibility is to use the burning robot (Disc Producer). With the help of the burning robot, CD/DVD can be automatically burned and automatically printed. The module to connect to the burning robot has to be activated and is available only with the "Print CD labels" module.

12.2 Selecting images



In the "Select" group you can choose which images are to be burned to the CD/DVD. The preview below displays again in a tree the selected images in the "Select" group (divided by patients, studies and series).

12.3 Drives / data storage media

In the "Drive" group you can select the drive to burn a CD or DVD to, and the information about the media are displayed in a graphical form: the media type (CD, DVD), size (total available memory), free and used memory space after burning the currently selected images. This information is constantly updated during the burn.

The drive's burn speed can be set. This speed depends on the drive and the blank media used for the data.

With the option "Check data after burning" the burned data are checked after burning.

If the burning robot is available, you can select it here. In addition, the label must be selected to be printed on the medium, and the type of storage media. The available labels are created and located in the "Print labels" tab and are immediately available for the burning robot. Chapter 13 Label print describes how to create and edit your own label. Usage of the burning robot is described in chapter 12.6.

If the data is only copied to the target directory, the value „Capacity” shows the total free space in the memory of a given drive, while „Occupied” refers to storage space that new data will occupy and „Free” to available space in memory after copying data. In this case, the type is not shown.

12.4 Options

Data can be stored anonymized. This means that data are exchanged in the following way:

- Name: "Anonymous" or "Anonymous1", "Anonymous2" etc. if there are many patients
- Date of birth: 01.01.2000
- Sex: O (other)
- ID: 0 or number if there are many patients

The following tags are deleted while anonymizing:

- Patients Address
- Patients Telephone Numbers
- Referring Physicians Name
- Referring Physicians Address
- Referring Physicians Telephone Numbers
- Referring Physician Identification Sequence
- Performing Physicians Name
- Performing Physician Identification Sequence
- Operators Name
- Operator Identification Sequence
- Requesting Physician
- Scheduled Performing Physicians Name
- Scheduled Performing Physician Identification Sequence
- Institution Name
- Institution Address
- Institution Code Sequence
- Institutional Department Name

Optionally the digipaX viewer can be also burned on CD / DVD, so that after placing the CD in computer this viewing program will be automatically performed for the stored images.

In the group Image presentation one of the following 3 options can be selected:

1. Original images

The images are burned like they are stored in the archive. This means like they have been created primary by recording unit.

2. Additional Presentation State Object

Additionally a DICOM file (Greyscale Softcopy Presentation State) for each greyscale image will be added to the original image, which contains the information on zoom, windowing, rotating, mirroring, inversion, graphic annotations and display shutter. Not every DICOM viewer can interpret in this way correctly. Use this option if you have burned the viewer on CD or you know that the CD recipient uses the software, which can evaluate this form correctly.

3. Integrating modifications

For each image a new image is created and modifications are transferred (windowing, rotation, reflection, display shutter). The image type is set on „SECONDARY“ and new SOP Instance UID is generated for this new image. The new created image is stored and transferred into the patient CD.

As far as possible, variant 2 with additional Presentation State files is recommended.

Set filters:



When using the option of „additional Presentation States“ or „integrate changes“ the filters set will be also saved. However, they cannot be interpreted by other systems. If the filters are to be presented on the patient-CD, the digipaX viewer must be integrated on the patient-CD, as only it can use the filter settings in a right way.

12.5 Burning/copying data

After the button for burning is pressed, the files are assorted (images are compressed and anonymized if necessary). Now the statements for the occupied storage space also can be updated. If the option for burning is activated, data are written on CD / DVD and this is ejected, otherwise these are copied to a specified target directory. The progress is always displayed in progress bar while running the process.

12.6 Creating a patient CD with a burning robot

12.6.1 EPSON PP-100 / PP-100N

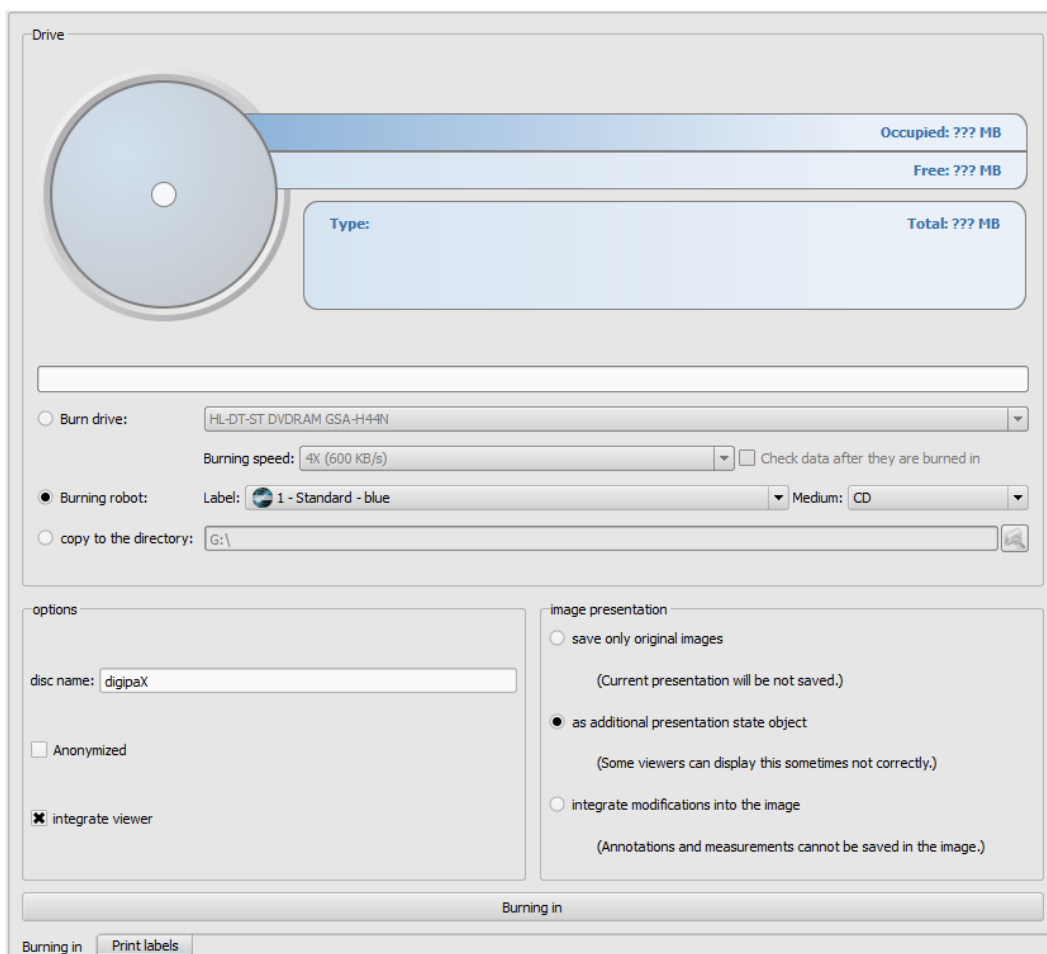
12.6.1.1 General

When data for recording on a CD/DVD is compiled and you press the „Burn“ button, a job is being sent to the burning robot. The burning robot is able to receive several jobs and processes them autonomously one after another. The jobs are managed by software included in the delivery of the burning robot. The software must be priority installed and configured. Furthermore, it is necessary to configure special settings in digipaX in order to be able to use the device.

Call in the attendant of your digipaX system to install and configure the device and read the appropriate manufacturer's documentation.

The device must be turned on before the first job will be created. Otherwise, the job will be cancelled with an error and it will not appear on the job list of „EPSON Total Disc Monitor“.

12.6.1.2 Creating a patient CD



Drive

Occupied: ??? MB

Free: ??? MB

Type: Total: ??? MB

Burn drive: HL-DT-ST DVD-RAM GSA-H44N

Burning speed: 4X (600 KB/s) ☐ Check data after they are burned in

Burning robot: Label: 1 - Standard - blue Medium: CD

copy to the directory: G:\

options

disc name: digipaX

☐ Anonymized

☒ integrate viewer

image presentation

☐ save only original images
(Current presentation will be not saved.)

☒ as additional presentation state object
(Some viewers can display this sometimes not correctly.)

☐ integrate modifications into the image
(Annotations and measurements cannot be saved in the image.)

Burning in

Burning in Print labels

In the dialog box for creating a patient CD, select the option „Burning robot“. The label to be used is to be selected from a drop-down list, as well as type of the data storage medium. The possible labels are created and edited in the “Label print” tab and subsequently they are immediately available to the burning robot.

After everything is ready, push the button “Burn“. Thereupon, data is being compiled and transferred to the burning robot (that is, copied to the transfer directory). The viewer files are being stored in the “SharedData” folder and reused. Therefore, they do not have to be copied repeatedly.

Tip:

To ensure proper completion of the job, digipaX waits for processing of the job files. Processing of these job files by EPSON software takes place always subsequently and not simultaneously. As a result, in the case of simultaneous creation of burning jobs at different stations or quick generating the jobs, this verification may take a longer time. This happens certainly rarely but leads to waiting time lasting up to 60 seconds (depending on the job size and computer performance).

12.6.1.3 Job management

“EPSON Total Disc Monitor“ or „Total Disc Net Administrator“ programs allow for reviewing the job list. Here, it is possible to withhold or delete the jobs as well as to change their order (only Disc Monitor). The “Net Administrator” is available only for device type PP-100N; however, it can be used on all stations.

12.6.1.4 Deleting data

In the transfer directory set, job files as well as data to be burnt on the CD/ DVD are stored. In this directory, the digipaX software creates the „SharedData“ folder in that the files needed for the viewer are stored automatically. The folder can be deleted manually, if needed, for instance, to remove the older viewer versions. The files required are re-transferred upon the next use.

The DICOM files for burning orders are re-deleted automatically. The check takes place upon starting the digipaX stations. Data folders, that are already older than 2 hours, are deleted. This is the same period of time which is also used by the EPSON system for deletion of old job files from this folder.

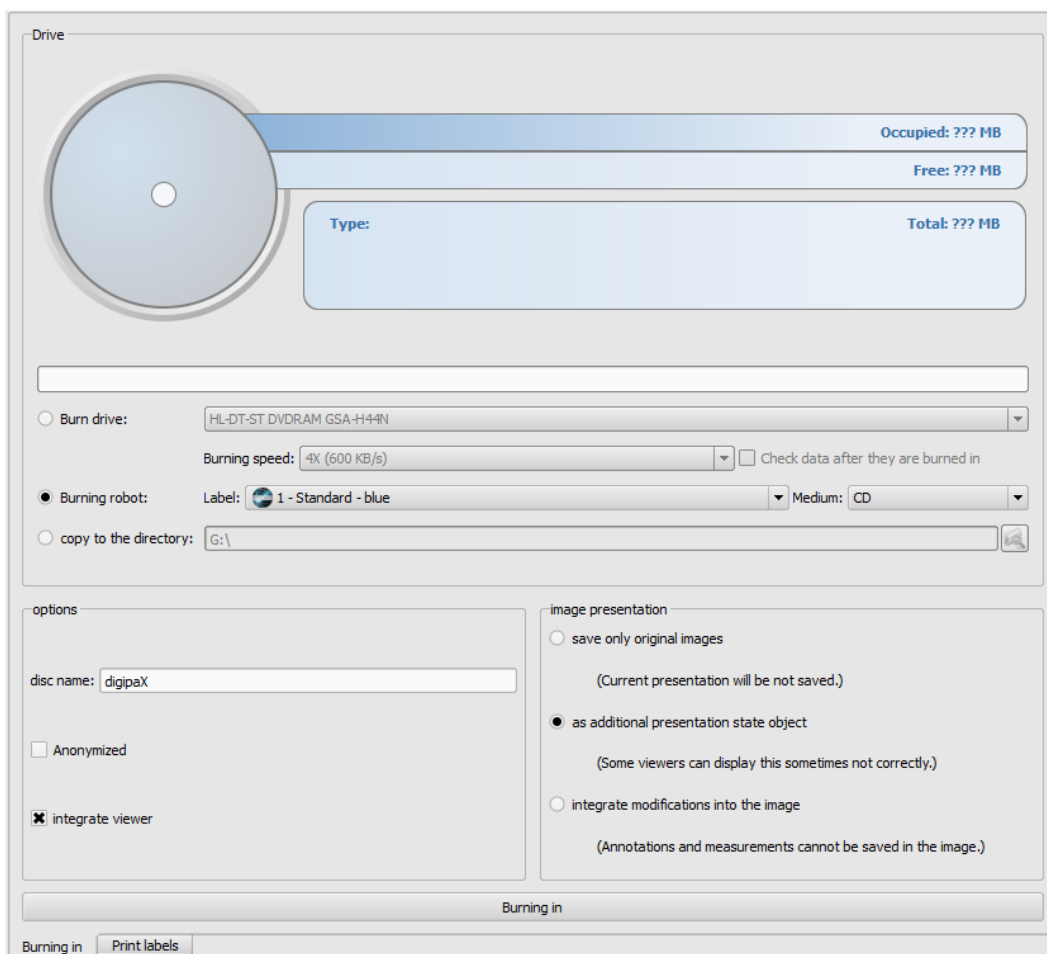
12.6.2 PRIMERA Disc Publisher**12.6.2.1 General**

When data for recording on a CD/DVD is compiled and you press the „Burn“ button, a job is being sent to the burning robot. The burning robot is able to receive several jobs and processes them autonomously one after another. The jobs are managed by software included in the delivery of the burning robot. The software must be priority installed and configured. Furthermore, it is necessary to configure special settings in digipaX in order to be able to use the device.

Call in the attendant of your digipaX system to install and configure the device and read the appropriate manufacturer’s documentation.

The device must be turned on before the first job will be created. Otherwise, the job will be cancelled with an error.

12.6.2.2 Creating a patient CD



Drive

Occupied: ??? MB
Free: ??? MB
Total: ??? MB

Type:

Burn drive: HL-DT-ST DVD-RAM GSA-H44N
Burning speed: 4X (600 KB/s) ☐ Check data after they are burned in

☒ Burning robot: Label: 1 - Standard - blue Medium: CD

☐ copy to the directory: G:\

options

disc name: digipaX

☐ Anonymized

☒ integrate viewer

image presentation

☐ save only original images
(Current presentation will be not saved.)

☒ as additional presentation state object
(Some viewers can display this sometimes not correctly.)

☐ integrate modifications into the image
(Annotations and measurements cannot be saved in the image.)

Burning in

Burning in Print labels

In the dialog box for creating patient CDs, select the option „Burning robot“. The label to be used is to be selected from a drop-down list, as well as type of the data storage medium. The possible labels are created and edited in the “Label print” tab and subsequently they are immediately available to the burning robot.

After everything is ready, push the button “Burn“. Thereupon, data is being compiled and transferred to the burning robot (that is, copied to the transfer directory). The viewer files are stored in the “SharedData” folder and reused, so that they do not have to be copied repeatedly.

Tip:

To ensure proper completion of the job, digipaX waits for processing of the job files. Processing of these job files by PRIMERA software takes place always subsequently and not simultaneously. As a result, in the case of simultaneous creation of burning jobs at different stations or quick generating the jobs, this verification may take a longer time. This happens certainly rarely but leads to waiting time lasting up to 60 seconds (depending on the job size and computer performance).

12.6.2.3 Deleting data

In the transfer directory set, job files as well as data to be burnt on the CD/DVD are stored. In this directory, the digipaX software creates the „SharedData“ folder in that the files needed for the viewer are stored automatically. The folder can be deleted manually, if needed, for instance, to remove the older viewer versions. The files required are re-transferred upon the next use.

The DICOM files for burning orders are re-deleted automatically. The check takes place upon starting the digipaX stations. Data folders, that are already older than 2 hours, are deleted.

12.7 Feature „Special“

With this additional feature, data for patient CD can be transferred to an external program for further processing. Special data media or special drives can be examples for this.

This feature is available only if it has been activated and configured by your system administrator. Also the name „Special“ can be changed by the administrator.

Please ask your system administrator about functionality of the feature.

13 Label print



Label print is possible only when the associated module has been activated.

13.1 General

Using the "Label Print" tool, you can print patient information on the CD/DVD, such as patient's name, date of birth, patient ID, etc. This information is automatically read from images (DICOM header) and does not need to be entered manually. The program uses the guidelines from the DRG (German Society for X-ray), outlined in the "DRG Guidelines for Handling Media Containing Patient Information" <http://www.dicom-cd.de/specs.php.de>.

There are different templates available for use. These templates can be modified and you can also create your own templates.

To get to this module press the "Patient CD" button and select the "Label Print" tab.

13.2 Printers and media

It is necessary to have a special printer that can print directly on CDs, such as the Canon PIXMA. These types of printers are offered by many manufacturers. There are no special recommendations for your printer model. The only requirement is that the printer is compatible with the Windows operating system. A printer driver must be installed for the appropriate operating system. Additional software is not required.

Printable media are also offered by various manufacturers. You can use both CD and DVD. **It is recommended to adhere to the requirements of DRG directory, which at present does not yet officially support DVDs.**

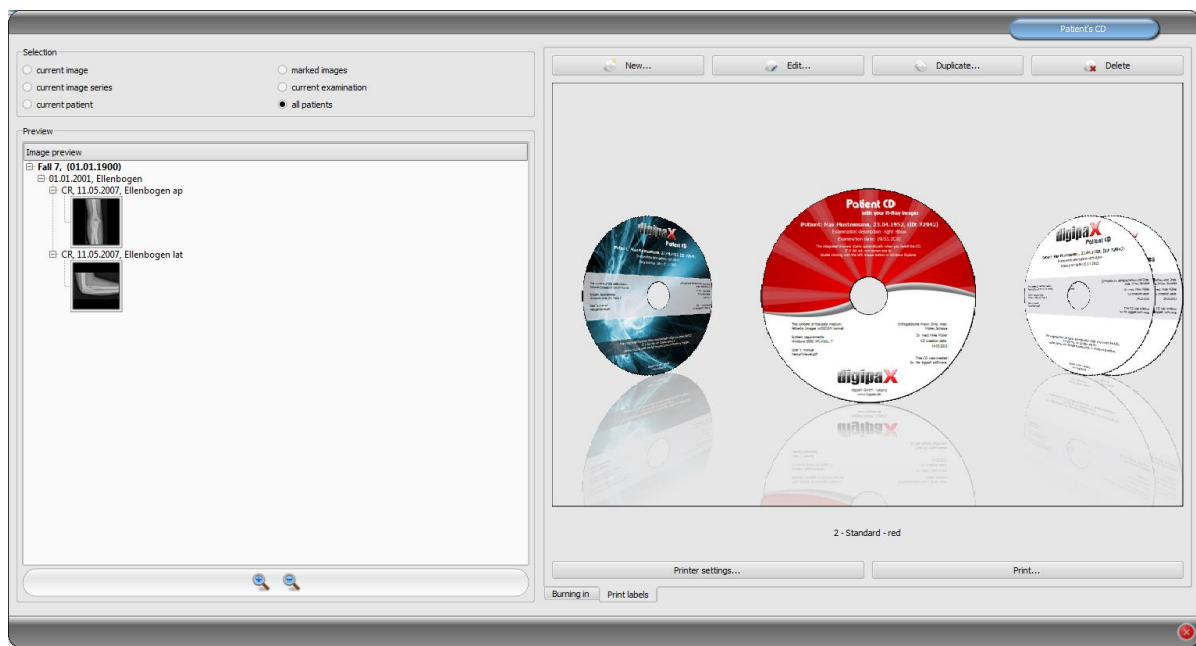
On the part of digipaX, there are no specific recommendations on storage media. It may be that not all media is supported by your printer model. Please refer to your printer documentation. The "Label Print" module is dedicated exclusively to direct CD/DVD printing. The system does not support sticker labels.

13.3 Template selection and printing

The prerequisite is to have the correct printer driver installation and a fully functioning printer. Described here are examples of prints made using the Canon PIXMA iP4000 printer. Included with the installation of digipaX, various CD templates are installed with the images of one patient and for the CD, images of several patients.

Select the patient and click on the patient CD. Usually first you burn the patient CD with the desired images and the desired settings. Then you go to the "Label Print" tab as an available feature for printed media.

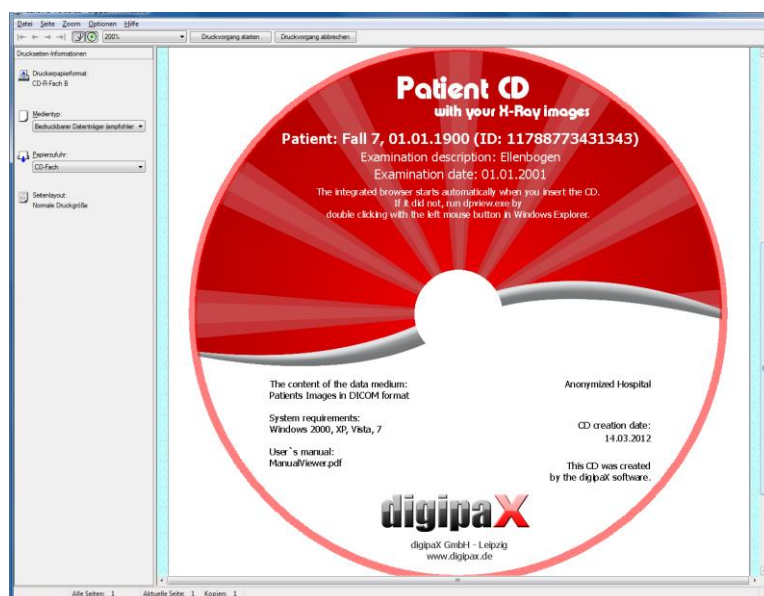
By clicking the mouse on the left and right side of the thumbnails, you can browse different templates. They are sorted alphabetically. Names are displayed at the bottom.



Select the chosen template and click on "Print".

A dialog box opens to choose a printer. There, select the correct printer, through the "Properties" you can activate the preview dialog box and then continue by pressing "Print".

In the next dialog a preview of the data media is displayed. Here you can see how the patient data are automatically loaded from images and applied. This preview may look differently depending on the printer model.

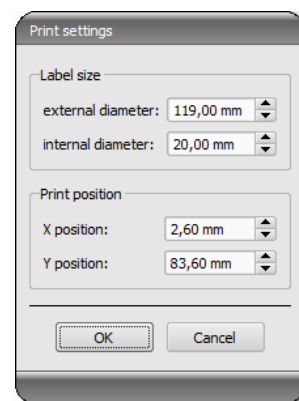


After pressing "Start printing" the data media is printed with the information.

13.4 Printer settings

At this point, you can set the size and position of the data media.

The size of the label refers to the size of the data media. The outer diameter of the printed surface of the CD is usually 118 or 119 mm. The inner diameters of the unprintable area are different. Depending on the manufacturer and version of the media the correct value must be set.



The print position varies depending on printer model and must be set only once, so that while printing on the medium would be exact. By changing the value, the printed image can be shifted to the left / right (item X) and up / down (position Y). With the help of the preview, you can move the printed image with millimetre precision into the right place.



Sample values:

Printer model	Position X	Position Y
Canon PIXMA iP4000	2,60 mm	83,60 mm
Canon PIXMA MG5250	2,60 mm	87,50 mm
Canon PIXMA iP4850	2,80 mm	87,50 mm
Canon PIXMA iP4950	2,60 mm	87,50 mm
Canon PIXMA iP7250	1,60 mm	57,50 mm

13.5 Creating a template

By pressing "New", a new blank print template opens up. First, at the top line you must enter a name for your new print template.

You can set a background image, insert images (or symbols), text boxes, rectangles and lines.



13.5.1 Inserting, editing and deleting elements

The label can have various graphic elements. These elements are always placed and positioned using the mouse. On the right side of the dialog box a page with the properties of the active element is always displayed. Changes in properties are immediately visible on the image. By clicking with the left button, an element is activated.

Background image:

As a background image, you can use any graphic. Recommended graphics are in the "png" format with size of min. 500 x 500 pixels.

To create your own background images you can use the template Photoshop CD-Template.psd from the "Label Print" folder in the installation directory.

Press the "Find File" button and navigate to the desired image. The selected background image will be automatically inserted into the template.

Press the "Remove Background" button and you can delete the image. The background is then back to white.

Insert a text field:

Click on "Insert text box". Then click somewhere on the template and drag the text box to the required shape and size. Using the mouse, you can also move an object in all directions.

The text box functions are described in detail later in this manual, under Point 13.5.2 Editing text fields.

Position and size can also be adapted with millimetre precision using the properties page.

Left position:	10,0 mm	Right position:	110,0 mm
Top position:	25,0 mm	Bottom position:	29,0 mm


Insert image:

As with the background, you can insert any image. Click on the "Insert image" and navigate to the desired image. Using "Open" the graphic is applied. With the mouse you can move the object in all directions and adjust the size.

Insert rectangle:

Inserting a rectangle is an operation just like inserting a text box. Click on "Insert rectangle" and drag a rectangle with the mouse. You can also move the rectangle in all directions and scale with the mouse.

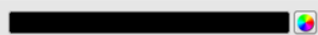
Using editing elements, you can change the properties of the rectangle. There, you can customize the colour and thickness of the border, fill colour, opacity and round corners. The position and size can be customized with millimetre accuracy.

Line colour:			
Line thickness:	0,3 mm		
Fill colour:			
Transparency:	50 %		
Rounding X:	0,0		
Rounding Y:	0,0		
Left position:	0,0 mm	Right position:	120,0 mm
Top position:	45,0 mm	Bottom position:	75,0 mm

Insert line:

Click on "Insert line" and drag the mouse on the template.

On the page with the properties, you can set the colour and thickness of the line and move the line with millimetre accuracy.

Line colour:			
Line thickness:	0,2 mm		
Point 1 X:	0,9 mm	Point 1 Y:	72,1 mm
Point 2 X:	119,8 mm	Point 2 Y:	71,6 mm

Delete elements:

Click on an element you wish to delete and click the „Delete" button to remove that element.

13.5.2 Editing text fields

13.5.2.1 Functions

Description

- serves only to describe the text field, it is not printed (it may be displayed on the edited picture)

Type

- contents of the CD (DICOM tags): content tags are automatically transferred when printing on the field, properties: see point 13.5.2.2 **Guidelines and properties of the CD contents (DICOM tags) in the text box.**
- current date: into the text box the current date is placed
- the data entered by the user when printing: request to enter text before printing
- fixed text: defined static text is placed in the field

Example text:

- enter sample text, for example, what will be displayed on the label preview

Font type and colour:

- adjusting type, colour and size of font

Placement of the text:

- placement of text inside the text box (e.g. left or right justify)

Word wrap:

- when this option is enabled, automatic line wrapping at the end of the text field will be applied, otherwise the text is truncated at the front, rear or both sides

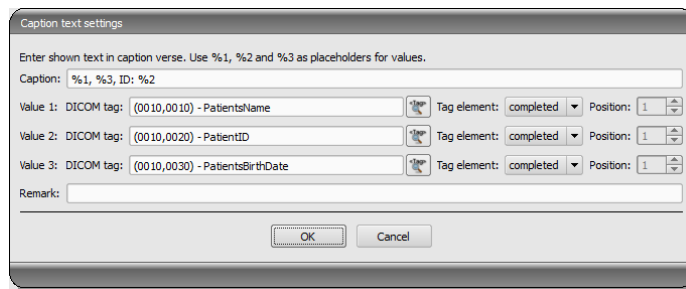
13.5.2.2 Guidelines and properties of the CD contents (DICOM tags) in the text box



Every DICOM image contains information about patient, study and image. All those information is in the so called tags in the DICOM Header of each image. The contents of those tags such as patient name, study, institution are also displayed in the image corners. The DICOM tags are numbered (e.g. tag „0010,0010“ for patient name). How the information can be displayed, is described in the chapter 7.2.7.2 Header information (DICOM Dump).

In the text field you can use values from different tags. If, for example, a name, date of birth and patient ID are entered, then tags (0010.0010) (0010.0020) and (0010.0030) must be loaded. To do this, set the tags for values 1 to 3. Some tags have more elements (e.g. first name, last name, title). If you want to display only one specific element, you can set this option in the tag element. In the signature line, enter the text to be displayed. Where the %1, %2 and %3 act as variables. They are replaced with the actual contents of the tag.

In the example below, the text box looks as follows: Max Mustermann, 01.01.1960, ID: 12345.



The dialog box is titled "Caption text settings". It contains a text area for the caption text, currently showing "%1, %3, ID: %2". Below this are three rows for value settings. Each row has a "Value" field, a "DICOM tag" field, a "Tag element" dropdown, and a "Position" spinner. The first row is for "PatientsName" with tag "(0010,0010)". The second row is for "PatientID" with tag "(0010,0020)". The third row is for "PatientsBirthDate" with tag "(0010,0030)". All "Tag element" dropdowns are set to "completed" and "Position" spinners are set to "1". There is also a "Remark:" text field at the bottom. "OK" and "Cancel" buttons are at the bottom right.

You can create lists for the values of multiple images. This is needed, for example, if there are to be the names of all patients who were saved to a media. For this, the LIST keyword is used on the signature line.

Syntax:

`LIST{<DICOM tags>|<separator>}`

The value for <DICOM tags> is compiled the exact same way as described above for a single row. <Separator> is inserted between each individual data. You should use:

- „nl“ for the new line
- „tab“ for tabs
- any other character, such as a semicolon or a comma

The row looks like the following example: `LIST{%1, %3, ID: %2|nl}`.

13.6 Editing, duplicating and deleting templates

In order to edit a template, you must find it, then click on "Edit". Editing is done in the same manner as creating a template.

The "Duplicate" button creates a copy of the template. The copy has the original name with the addition of "Copy 1" at the end of the name. A copy can be modified and its name changed. The "Delete" button removes the template from the system. Note: This action is irreversible.

All templates are located in the digipaX installation directory in the "Label Print". Each template has its own separate subdirectory with the name of the template. To move a template to another system, you must copy the template folder on that system.

13.7 Requirements for information on data mediums

It is recommended that the instructions contained in the requirements catalogue for data storage media with DRG patients' information is followed accordingly. There, in Section 2.4 a description of how label storage media is provided.

Source:

<http://www.dicom-cd.de/docs/DRG-Anforderungskatalog-2006.pdf>

2.4 Labelling data media

2.4.1 External labelling

In order to label and uniquely identify the data medium, it must have an external description about the contained information that is human readable.

Tip: when using burning robots which can label the data storage media without user intervention, this labeling is mandatory. Systems that cannot label the data storage device must support the user in correct manual labeling of the media, for example, displaying the proposed description in a dialog shown on the screen when ejecting data media.

2.4.2 Content of external labeling (recommendation)

It is recommended to put on the data medium the name and date of birth of the patient, patient ID, date the medium was created, the examination dates and the names of institutions which created the data medium. If on the same data medium many patients are included, it is recommended that you use the appropriate annotations externally on the media. Moreover, it is recommended to put the information about the type of data content on the medium (DICOM, network, DICOM browser, etc.).

14 Job management



REMEMBER!

To avoid unnecessary X-ray screening and any unnecessary radiation exposure to the patients, you should ask the patients if they don't have any previous X-ray images before creating a new job

Via job management (DICOM-Worklist-Management) the jobs can be exchanged between different DICOM systems. MPPS (Modality Performed Procedure Step) for using the job status is thereby not supported.

Fixed date	Patient	receiv. imgs.	Priority
14.01.2013 13:32	Pati 6	0	normal
14.01.2013 13:37	Pati 7	0	normal

Accession no.	Description
201301141340331	Abdomen / a.p.
201301141340342	Abdomen / lateral

Filter: Modality: AS (Angioscopy) Station (AE Title): Fixed date: from 14.01.2013 00:00 to 14.01.2013 23:59

Details: Patient: Pati 7, Patient ID: 11788773431343, Date of birth: 01.01.1900, Sex: other, Pregnant: not pregnant, Referring physician: Dr. med. Homer J. Simpson, Requesting physician: Radiology, Institution: CR (Computed Radiography), Station: Station: , Remarks: .

Select patient

14.1 Pregnancy status

During pregnancy, radiation can pose a higher risk, so pregnant patients should not undergo diagnostic X-ray procedure or have X-rays only with limited radiation exposure. Hence pregnancy status must be asked prior X-raying. If the system recognizes on the basis of data (sex and date of birth) that the patient is female aged between 10 and 60 years, a dialog box for pregnancy status is displayed prior creating the job. The pregnancy status selected in the dialog box is saved max. 24 hours or until reboot of digipaX software, so that the status for this patient is not inquired again in next steps of the study as image acquisition or entry in X-ray journal. If the dialog box is closed without giving information on pregnancy status, the status is regarded as not inquired or not answered – so unknown – and will be inquired again in next steps of the study if need be. This dialog box can be activated or deactivated separately for creating the job, image acquisition or X-ray journal. For these settings please refer to Section 19. The

Pregnancy status

pregnant perhaps pregnant not pregnant

pregnancy status inquiry can be activated or deactivated in the configuration tabs Image acquisition and Job management.

The settings for X-ray journal are specified by the system administrator.

14.2 Presentation of the job and update of the job list

One or more job lists can be configured and coloured representation of the lists can be modified. These settings are adapted by the system administrator.

The lists will be updated according to time interval which is set in the configuration (category Job management – also available for administrators only). In the configuration this automatic updating can be also deactivated.

By using the switch „update“ the update of the list is required.

In the left list all patients are displayed, for which at least one job exists. The list is sorted by date by default, the next date due is at the top of the list. You can rearrange the sort order for each column, e.g. sorting by name or priority. To do so, click the header of the column you want to change. If you select a patient from this list, then all the jobs for this patient will be displayed on the right side of the list. Thereby each job has its unique accession number. Columns can be shown or hidden by clicking with the right mouse-key on head of the tables.

14.3 Filtering the job list

You can select a desired modality as a filter, so i.e. CR for X-ray images or US for ultrasound images, or an AE title of the station, at which the job is to be performed, or a fixed date, on which the study is to be performed. For this, first activate the selection field and then select the desired modality or enter the desired station name or define the beginning and end date. By using the button „update“ (at the top on the right) the job list is recalled, whereby only the jobs, which meet the filter settings, are queried. The settings are saved and will be used again at the next selection of the worklist components.

Please bear in mind that on the stations, on that the image acquisition is run, the job list upon selection of a patient is filtered according to the settings in the configuration. It may vary depending on deviating filtering criteria.

14.4 Creating a job

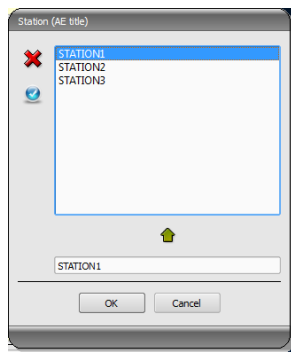
A new job is always created for at present selected, current patient in the system. If many patients have been selected in patient management, no new job can be created.

The data of the patient, for whom the job is just now being created, are displayed in header zone of the dialog box, however they cannot be modified.

On the left side of the dialog box there is an input field for defining the jobs. Part of the body and levels can be defined also through the image on the right side of the dialog box. For this, move the mouse over the image to the desired region of the body till this is colour-marked. Click with the left or right mouse button into this region, in order to display the menu of possible refinements. Select the desired body part/organ and activate desired levels (ray paths) in the opening submenu. You can mark many levels at once and confirm the selection with the menu item „Ready“. Thereupon the selected part of the body, selected refinement and selected level are taken over to the list on the left side of the dialog box. If there is no submenu for beam projections (e.g. MRI) in the organ table, just click on the desired body part/organ. You can add the entries to the list manually, too. For this, click per double-click into the next free entry in the list and enter the desired organ. In the same way, you can edit already existing entries in the list (only if the Procedure Code is backed). Entries can be removed from the list by a small red X (at the top on the right by the side of the list). Per switch underneath „Select from the list“ predefined entries or descriptions can be selected from a stored list. In this dialog box for selection of the description new descriptions can be also added to the list.

If you click the background zone of the image, a menu with all available parties of the body will appear. This list contains possibly further definitions, which none regions of the body are assigned to. Refinements always form submenus.

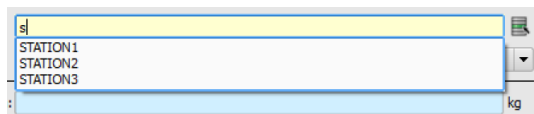
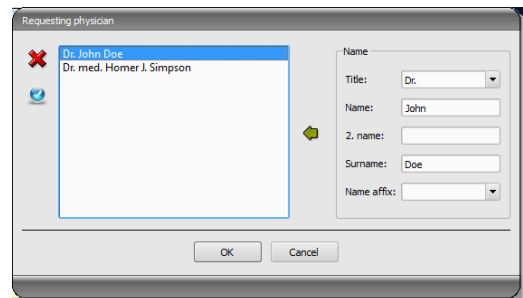
If you click into the context menu into the menu item „Manage...“ you can adjust the lists of the refinements und ray paths (see for this the chapter 14.5 Managing the table of organs and Procedure Codes).



By using the small switches behind the input fields you get each time to a dialog box, in which the defined terms can be fast used again. These can be added with the green arrow to the list, deleted with the red X or selected for use per double-click.

One of the entries can be defined as a default one. This is then already entered in the adequate input field for the job definition, when

the dialog box will be activated. For the patient names, this happens in the same way.



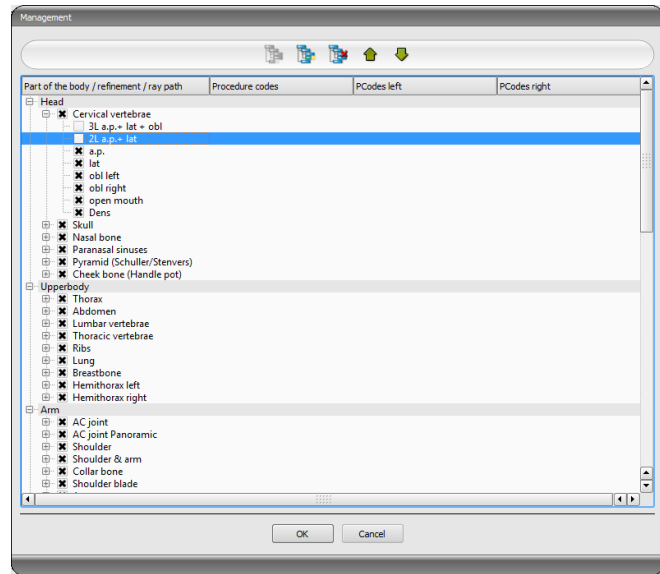
For quick selection of a specific entry from the list do NOT open the list with the button but select by a single-click the row and type in the initial letters of the wanted entry, e.g. „S“. All entries that begin with an „S“ will be listed outright and you can select the wanted entry out of them. If the fields contain personal names, e.g. „Requesting physician“, type in the initial letters of the surname. All entries that begin with the typed-in letter will be listed. Press the arrow key „down“ instead of typing the initial letters in order to display the full list.

When the dialog box for creating the job is confirmed with „OK“, the job is transferred to the set worklist server. If more worklist servers are configured, the desired one is to define in the selection dialog box. If more levels have been entered, one job will be created for each level. This is necessary, because the images are taken on also singly and for each one a new entry is performed in the digital X-ray journal. After the job is created, the program can be minimized to taskbar or system tray by clicking „OK and minimize“.

14.5 Managing the table of organs and Procedure Codes

In the context menu of the image you reach via menu item „Manage...“ to the dialog box for processing the table of organs. The dialog box shows the hierarchically arranged elements for part of the body, refinement and ray path. Both latter can be thereby deactivated. Deactivated entries are not displayed in the context menus for the selection of organs.

The elements for refinements or ray paths can be freely added or deleted. For adding refinement, activate the adequate part of the body or already existing refinement within this part of the body and click on the switch „Add refinement“. A new node will be put on and you can process the designation of the node. For adding a new ray path, activate the adequate refinement or already existing ray path therein and press the switch „Add ray path“. Also for this specify the desired designation.



Some organ tables do not require beam projections (e.g. MRI). Beam projections can be omitted or deactivated in those organ tables. Ask your system attendant about that matter if need be.

Using the switch „Delete selected element“ the active node, including possibly contained subelements, will be deleted. The nodes for the parts of the body cannot be deleted thereby. The entries can be sorted by using the switches with the arrows.

For each ray path so called „Procedure Codes“ can be specified. These are transferred during the transmission and are again accordingly evaluated at the target station. These Codes must be thereby adjusted to the target station as each manufacturer uses his own Codes for the accession to his predefined settings. By a double-click on the adequate cell right in the tree structure you can define the Code for the ray path of this row. Maximal three Codes can be entered for each ray path. The Codes thereby are to be separated with a semicolon („;“). You have to pay attention that as well before as behind the semicolon no blanks are entered, unless these belong to the Code. Thus the Codes can be coevally transferred to many devices. The configuration of the transfer of these Codes and the setting or linking to adequate devices is performed by your administrator.

In the dialog box for job creating the Procedure Code is displayed as a tooltip of the entry in the job list (is displayed if you hold the mouse over that without clicking it). The description of the job cannot be modified in this case. If you enter the jobs manually, so without selecting in the image, you cannot forward any Procedure Codes.

14.6 Deleting job

The selected (marked) job in the list can be deleted with the button „Delete job“ **without a confirmation message**.

Furthermore, the jobs can be automatically deleted after a certain period of time is run out. Deleting of the jobs can be performed only by digipaX systems (depending on the set worklist server) and therefore cannot be performed in certain circumstances at the station at which the jobs are performed, so the images are made, this is a reasonable option in order to automatically delete the jobs. The period of time is thereby to select in this way that all jobs can be surely done in this time.

14.7 Entry in X-ray journal

If there is no X-ray journal activated in this system, the switch for a new entry is missing.

In the dialog box for creating new entry in X-ray journal the values can be already transferred, in order to simplify the work and to obviate the mistakes. According to set configuration 3 different modes are possible:

1. takeover of data from the worklist job
2. takeover of data from the automatically received images
3. no takeover of data

Furthermore, takeover of data of a connected generator and/or dose area product measuring device is possible. If the system is accordingly established by the administrator, received values can be taken over from the table by double-clicking of them or marking of the line with the values and then with arrow key.

14.7.1 Data from worklist job

First mark a job, for which you want to create an entry in the X-ray journal. As far as this is possible the data, like i.e. patient's name and date of birth, are already taken over from the job and entered in the fields of the dialog box for recording entry. The remaining fields are to be filled out accordingly and the entry is to be taken over to the journal by clicking Ok.

14.7.2 Data from received images

As well as for creating a new entry directly in the X-ray journal (see 15 X-ray journal) the automatic image receipt must be activated and correctly configured. New images are forwarded from the image archive to this station. If it is set up by the administrator that the entries are made automatically, you need to do nothing more at this point. If the entries are made manually, the data of the received images serves as a template for the entry in the journal. First select from the list of the newly taken images an image, for which the entry is to be created. All possible, already in DICOM image existing data are taken over to the dialog box. Also here the remaining data are to be filled out and the dialog box is to be quitted with Ok, in order to take over the data to the journal.

14.7.3 Without data transfer

The dialog box with the mask for creating a new entry is fully empty in this case. All data are to be completely entered and to save with Ok in the X-ray journal.

14.8 Display of received images

If image routing is correctly set as well in the image archive as at the digipaX station, the digipaX station can automatically receive the acquired images in the background. If this is the case and the option „Mark with the colour the column with number of received images and entry in the list when image comes in“ in the configuration for job management is activated by the administrator, you will get as user the possibility to control the processing of the jobs. If at the station, which makes the images, no jobs can be deleted, this is a reasonable possibility to recognize, when the jobs are processed ready. If the jobs are deleted at the station (digipaX), which takes on the images, these fall out automatically from the list on this station.

14.9 Quitting the job management

If you have marked a patient in the list of patients, you can use the option „Select patient“ bottom left (or also per double-click into the entry in the list of patients), in order to take over the marked patients to the patient selection (the old selection will be replaced thereby) and subsequently to close the component. If this patient does not exist yet in the list of your patients (data source image archive) he will be created newly and locally.

Moreover, you can jump over directly to the patient management from over here. If you have before selected a patient in the list, this patient will be also selected first as an active patient.

If the X-ray journal is installed and activated, you can jump over directly to the journal. No patient will be selected thereby.

15 X-ray journal

X-ray journal can be opened with the Start button providing that the X-ray journal is activated on the system.

15.1 New entry

A new entry can be made by means of the button on the top left.



This button is available only on the station that is configured for creating X-ray journal entries. Otherwise there is a button for view updating at this place.

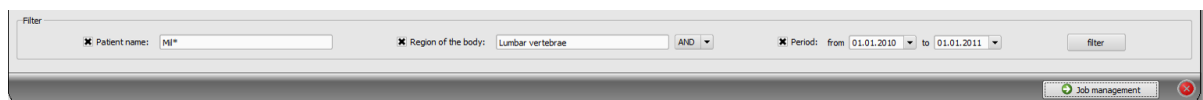
While adding a new entry to the X-ray journal the value from a received image can be taken over if the image receipt is correctly configured in the background. For this, select from the list of images an image, for which the entry is to be created. In the dialog box for recording values the fields are then pre-occupied accordingly with the values from the image. If no image has been selected or the image receipt is not established, all fields are empty. Enter the values in the fields provided and confirm with OK, in order to take on the entry to the journal.

If a generator or dose area product measuring device is connected directly to the system and the settings have been accordingly established by the administrator, the received values of the devices from the table, which is displayed additionally in the dialog box, can be taken over per double-click or with the arrow symbol in the input fields. Once used values are not displayed again at the next activating of this dialog box.

15.2 Viewing X-ray journal

Open the journal as described using the Start button. The content of the X-ray journal is shown. The entries are sorted newest to oldest. The X-ray journal is editable on one station only. You can only view the X-ray journal on all other station but make no new entries. If a new entry is added while viewing the X-ray journal, the view must be updated. In order to do this, click the button „update“ on the top left.

15.2.1 Filtering



In the bottom of the dialog box you can set the filter for patient names, parts of the body and record date. Each time you activate the desired control box (many control boxes can be activated), in order to apply the filter.

Deactivate all control boxes and press the button „filter“, in order to display again the full list of all entries.

The settings are saved and used again for filtering at the next activating the X-ray journal.

15.2.1.1 Patient name

Enter a part of searched name using wildcards („*“) as place holders (i.e. „Sch*“).

15.2.1.2 Region of the body

Specify one or more terms or parts of words in the input field for regions of the body. In the drop-down list box behind it you can determine, if the description of a region of the body must contain all terms (AND) or only one term (OR). By pressing the button „filter“ the entries of the X-ray journal are filtered and only entries are displayed, which contain the determined term(s).

15.2.1.3 Period of time

Specify in the field „from“ the date, on which the filtered list should begin and in the field „to“ the end date of the entries. After pressing the button „filter“ only the entries are displayed, which X-ray date is larger, equal to the start date and lesser, equal to the end date.

15.3 Exporting

You can export complete journal as a CSV file (text file with semicolon as separator between the values), in order to i.e. read in to Excel.

If you have set a filter, this will be applied also for exporting. In this way, the entries will be saved, which also be displayed in the table.

On demand, you can open immediately the exported file with the standard software provided (i.e. Excel) and process further or print out.

15.4 Emptying (deleting)

For emptying the journal entering the deleting password is necessary.

Password: delete

Enter the password and subsequently all entries will be deleted from the X-ray journal.

16 Stitching

16.1 General

This feature can be used to form a full-spine or full-leg panoramic image from a series of “stitched” subimages.

The feature must be enabled for use by your administrator.

16.2 Acquisition of radiographs

Firstly, all subimages must be consecutively acquired. The patient must not move during the examination. If necessary, use proper immobilisation methods to assure that the patient does not move, or make it possible to the patient to hold on to something during X-raying. The distance between the tube and the image receptor should be as large as possible. The subimages must be acquired or displayed in such a way that their edges overlap slightly. These overlap fields are then used by the software as reference for generating the panoramic image.



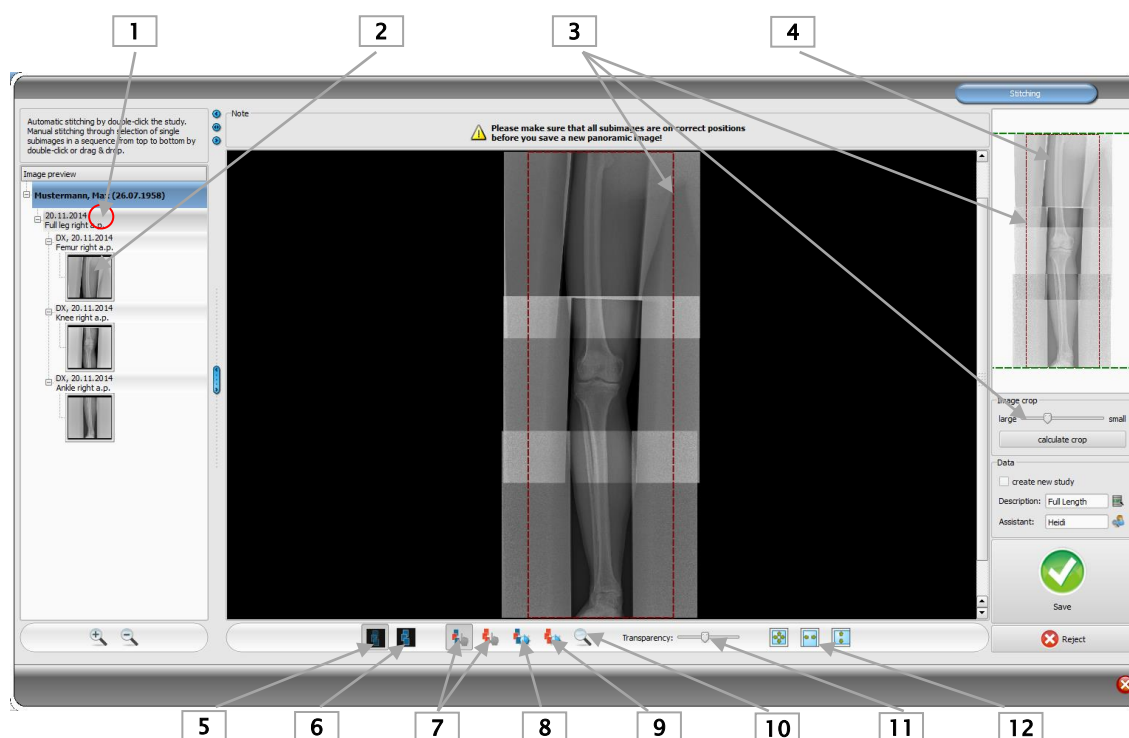
Radiographic markers (lead balls) or rulers can also be used as reference to combine the panoramic image.

16.3 Stitching module overview



Please check once again if all subimages are on correct positions before saving the panoramic image. The tool for transparency will be helpful here.

Load the images into the image viewer and select „Stitching“ in the start menu in order to open a dialog box.



- 1 – Double-click on study node for automatic stitching
- 2 – Double-click on subimage or dragging it for manual stitching
- 3 – Tool and frame for cropping
- 4 – Preview of panoramic image with displayed current subimage
- 5 – Transparent presentation of images to present overlap fields
- 6 – Superimposing images (creates panoramic image with smoothed transitions between subimages)
- 7 – Moving subimage or panoramic image
- 8 – Adjusting Window Level of a subimage
- 9 – Adjusting Window Level of panoramic image
- 10 – Zoom
- 11 – Transparency change (effective for transparent presentation only, see button 5)
- 12 – Adjusting image to window

16.4 Automatic stitching

Double-clicking a study node will start automatic stitching. The software then tries to automatically merge subimages, based on gray levels, remarkable points in the image, and the time of the image acquisition that is stored in the image.

All subimages are displayed transparently to make the overlap fields at their edges visible. If the acquisition is good with sufficient overlaps, the images should automatically be on correct positions. If this is not the case, you need to place the subimages manually as described in section 16.5. When all images are correctly positioned follow section 16.6.

16.5 Manual stitching

Place consecutive subimages by dragging them into the work area, starting with the very top image. Position the images so that the overlapping fields match accurately, using tissue or bone structure, or embedded lead markers or the lead ruler as reference.

There are supportive tools available, such as transparency, window level, and zoom. Zoom is also available with held down the right mouse button and moving the mouse up or down. When all subimages are on correct positions follow section "Saving panoramic image".

You can delete all images from the work area using the „Reject“ button and start the procedure from the beginning.

16.6 Saving panoramic image

If the result is acceptable, you can smooth transitions between adjacent images using the "Overlap images" button (6), and create and check the panoramic image.

If necessary, you can also adjust windowing for the panoramic image using the (9) button. Finally, crop the left and right edge of the panoramic image.

If you want to save the result in a new study, insert the tick symbol.

Name the image and type in the name of the assistant.

Click "Save" to save the panoramic image in the image archive.



17 Sending images

If your system is configured to allow running the process of saving images in archive or any other place in the background, you can keep an eye on the action and intervene as necessary using the module „Sending images“.

When you send images, the system queues them for delivery and then automatically sends them out. The sending process runs in the background, so you can keep working in the program unrestricted.

To check the current sending status you need to open the module „Sending images“. You can access it clicking the Start button on the bottom left.

The current queue comes up on the screen. Normally all images should have been successfully sent and listed on the bottom with the status “sent”.

You can hide sent images marking them with a check mark on the bottom left.

If you want to exit the program before all images are sent, a warning message shows up informing that not all images have yet been sent. No images will be lost though, even when the computer will be shut down. The sending process will be rerun on the next reboot of the digipaX software. However, it is recommended to close the program only after all images have successfully been sent.

If delivery of an image fails, the system will attempt to resend it. The number of allowable failed attempts is specified by administrator of the system. If delivery has failed after the maximum number of attempts, the image will be marked as “undeliverable” and no more attempts will be made.

You can try to resend undelivered images clicking appropriate button on the bottom right. The system will attempt to resend the images as per number of allowable failed attempts specified. If delivery of images is impossible despite repeated attempts, the reason for this must be investigated. Please contact your system administrator.

Undeliverable images remain stored in the queue when you exit the program or shut down your computer.

You can delete undeliverable images clicking the second button on the bottom right. As a result, these images will be permanently removed from the queue.

Sent images remain stored on the list. You can save this list as a file clicking the button “Export protocol” and use it e.g. for statements or statistics later on.

The list of sent images can be removed from the database by use of the button “remove successfully sent from the database”.

18 Image acquisition

18.1 General

Four different modules are designed for image acquisition and only one module may be activated for each station.

The X-ray image acquisition module may be used for acquisition of digital X-ray images from the connected devices, such as CR-Readers or detectors.

The MRI image acquisition module may be used for acquisition of MRI images from the connected MRI devices.

The frame grabber/video image module is designed for acquisition of images or sequences of images from devices which use video outputs and are connected to the system by the proper hardware. They can include e.g. endoscopes, ultrasound instruments, etc. The foot switches may be used as well for acquisition control.

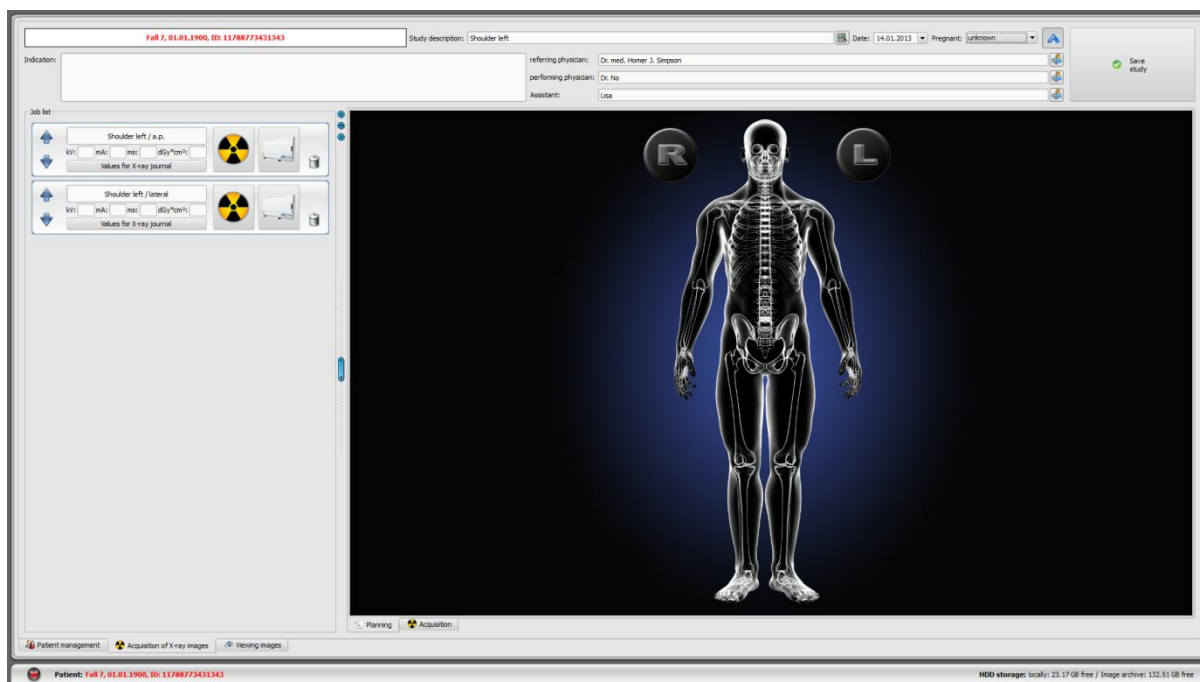
The further devices may be connected by means of image series acquisition module. This is an interface for devices which do not need to be directly connected with digipaX station but independently store image data in the previously specified folder on PC or in the network. These images are then received by digipaX and they are further processed there.



It is necessary to put attention on safe arrangement of cables in installation of hardware to eliminate the risk of accidents or damages of hardware. The foot switches operate with low voltage and they are not dangerous.


18.2 Course of image acquisition/ image receiving with job management

Generally the steps of image acquisition or image receiving are the same for all modules. Select a patient from the component „Job management“, for which you would like to perform the next acquisition. For this, highlight the patient name in the list of patients, get the overview of the details of requests at the bottom of the dialog box and press the switch „Select patient“ (or by double click on the patient's name).



A patient is selected, the program switches over to job planning, in which the jobs assigned to the patient are shown as a list on the left. Holding the mouse over the entries (without clicking it) you can view all details for this job in a tooltip. Now sort the jobs in the order, in which you would like to perform the acquisitions.

On the upper edge there are input fields for recording study description and date as well as pregnancy status. The study description and date are usually applied automatically from the job selected. If it is not so, please enter the accurate data. Specify the proper pregnancy status. For male patients this status is empty of course and cannot be changed.

Underneath there next fields for giving an information on physician, assistant and indications for the patient. If you do not need these details (for instance, in a veterinary surgery), you can leave these input fields blank or hide them with a blue arrow top right . Beside it there is a button for transfer of new images into the image archive.

18.2.1 Planning jobs

Now, you have opportunity to sort the jobs in such order, in that you want to perform the tasks.

If not all jobs are visible, that means the administrator had set up a filter.

You can add next jobs directly to the job planning or delete the jobs. There are also here the same types of organs formatted in tabs available as in the job management. The course of action for selection of body parts and organs for creation of a job is just the same as described in the chapter 14.4. However, no additional details can be entered here. Additionally, the values predefined by the administrator apply automatically to modality and target station (AE title). If different values or further specifications are necessary, use the job management to add next job. In the job planning, also tables of organs and Procedure Codes can be managed (see chapter 14.5).

Tip: If a visual selection of organs is not activated in your system and therefore you have no graphic support for creation of a job available, the job planning is unavailable too. In such case, you can only re-sort the jobs at this point. Please ask the attendant of your system for more information.

Particular jobs can be deleted by use of the wastebasket icon.

From the next step the image acquisition or image receiving is getting started. The further steps vary depending on the module being used.

After the new images are saved, the completed jobs can be finally deleted if needed. This depends on the selected configuration.

The individual acquisition and receiving steps and image/series processing in each module are described below in this guide. More information on this issue you can find in chapters 18.4 X-ray image acquisition, 18.5 MRI image acquisition or 18.6 Framegrabber / acquisition of image series.

18.3 Course of image acquisition/ image receiving without job management

The job planning is also available without job management if visual selection of organs is enabled in your system. The jobs can be created prior to acquisition through the job planning. However, the jobs will not be saved and they will be deleted when closing digipaX if the worklist server is not active.

Select the patient in you clinic management software or in digipaX patient management. The system initiates the job planning. Now, you can create, delete and sort the jobs as described in chapter 18.2.1. Then, start image acquisition/receiving. If you do not want to create jobs, you can switch over directly to image acquisition. In case of acquisition of X-ray images you have to activate the acquisition button in the context menu in the right toolbar. Depending on imaging equipment software it may also be necessary to select manually the organ and beam projection. Acquire image or series and conduct the relevant steps for their processing. You can find them in chapter 18.4 X-ray image acquisition, 18.5 MRI image acquisition or 18.6 Framegrabber / acquisition of image series.

Prior the saving new images the missing data such as description of study, image or series must be given. Use a general study description that will apply to all images of that study, as e.g. „LS, TS“ or “Shoulder, right”. Add a detailed designation for each acquisition as a comment for particular images as e.g. „LS/ap“. Then, enter the further parameters of the acquisition and name or abbreviation of the assistant.

When all data are complete, save the study with the button in the upper right corner.

The date at the top of the acquisition card is taken over automatically from the Windows system time and updated. Prior to saving the date can be changed manually. Afterwards, the date can be updated automatically yet after the reboot of digipaX.

18.4 X-ray image acquisition

18.4.1 General

If the module for acquisition of X-ray images is activated, an additional tab „X-ray image acquisition“ will be displayed. It consists of the parts Planning (if activated) and Acquisition. X-ray image acquisition contains additional functions for acquisition and processing of images.

To the right of this tab the connected devices are shown (this display may require additional activation in the context menu of the toolbox). These fields are temporarily colour-marked during transferring the values (yellow while transferring, green once transferred successfully, red if transfer failed).

Below the tab, there are operational controls for image acquisition and tools for image processing. You can hide resp. unhide unneeded functions and tools via the context menu. To do this, click with the right mouse key on area of the tools and activate or deactivate the functions in the menu displayed.

To the left, there is a job list for the current patient.

18.4.2 Special device functions and safety precautions

So-called Procedure Codes are used for transferring selected organs and beam projection to various devices. These Codes are transmitted along with the X-ray order to the devices and are preset for selected exposure there, without the need for setting the organ and beam projection once again on the devices. This means for a generator that kV and mAs values for an exposure are preset on the basis of these Codes or for a CR-Reader or detector that appropriate filters for image reconstruction on the device are selected.

Therefore, if a false Code was transferred, this could lead to false generator settings and danger for a patient as a result. A false filter in a CR-Reader or detector could lead to a bad image quality, and as a consequence the patient would have to be X-rayed once more and thus exposed to an unneeded radiation.

It is therefore so important to check for every exposure if presets for this exposure are correct.

Type of checking depends upon used device. Please ask your system administrator which devices are used in your system. Absolutely take an extensive training on technical and software matters.

18.4.2.1 Josef Betschart AG generator

Supported device: GENESIS 50 RFT or DT



Prior to each exposure check on the display of the generator console / user interface whether the values for the exposure are correct and change them if need be.

18.4.2.2 Teleoptic detector

Supported devices: ALPHA series, IONA series



If image quality is inadequate, the Procedure Codes must be checked. Please contact your system administrator.

18.4.2.3 XCAN detector

Supported devices: XCAN DR-S system

There are no Procedure Codes for these devices. Organ and beam path must always be selected manually.

18.4.2.4 Perkin Elmer detector

Supported devices: XRpad 4336, XRpad 4343



An error message appears when a Procedure Code is wrong (the device does not know the Code). You can then perform the acquisition with the default settings. This, however, may result with an image in a not optimal quality. It is recommended to correct the settings first and to acquire the image afterwards. Correct the Code, create a new job with the right Code and repeat the procedure. Contact your system administrator if need be.



Please ensure before releasing an exposure that the status „ready to receive“ of the detector is signaled (green message window with the label „Ready“).



When using the WiFi panel (XRpad 4336 WiFi) please monitor the battery charge level. It is shown you as a symbol in the software. If the battery charge level is low change the battery or charge it first. You can find the description how to check the battery charge level in the manual of Perkin Elmer.



If the quality of the image is poor, check the Procedure Codes. Contact your system administrator.



If 2 or 3 devices are used please ensure that the right device is selected (1=table, 2=wall stand or 3=free exposure) before you release the exposure.

18.4.2.5 CR reader iCRco

Supported devices: iCR1000, iCR2600, iCR3600



Prior to each scanning process please check caption in the upper left corner of the iCRco scan dialog box, whether the organ and the beam path correspond to the desired exposure and change them per manual selection if required.



If the quality of the image is poor, check the Procedure Codes. Contact your system administrator.

18.4.2.6 CR reader Kodak

Supported device: PoC360



Prior to each scanning process please check caption in the image box of the scan software, whether the organ and the beam path correspond to the desired exposure.



If an incorrect Procedure Code was entered (a Code that the device does not know), an error message appears. If this is the case, cancel the scanning process, rectify the Code, create a new order with the correct Code and repeat the scanning process. Contact your system administrator if need be.

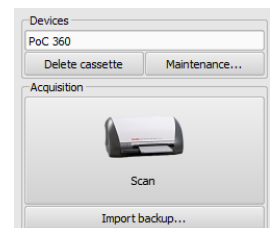


If image quality is inadequate, the Procedure Codes must be checked. Please contact your system administrator.

Additional switches for deleting cassette and maintenance works are available for this device.



Please note that a cassette that has not been fully deleted must not be used for next image acquisition!



18.4.2.7 CR reader Orex

Supported devices: PcCR 1417

There are no Procedure Codes for these devices. Organ and beam path must always be selected manually.

18.4.2.8 CR reader Carestream

Supported devices: Carestream Vita LE, Carestream Vita Flex, Carestream Classic

18.4.2.8.1 Carestream Vita LE



Please check caption in the image box of the scan software, whether the organ and the beam path correspond to the desired exposure.



If an incorrect Procedure Code was entered (a Code that the device does not know), an error message appears. If this is the case, cancel the scanning process, rectify the Code, create a new job with the correct Code and repeat the scanning. Contact your system administrator if need be.

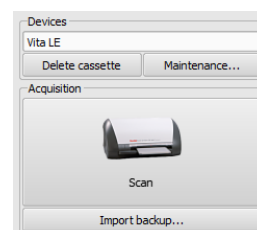


If image quality is inadequate, the Procedure Codes must be checked. Please contact your system administrator.

Additional switches for clearing the cassette and maintenance works are available for this device.



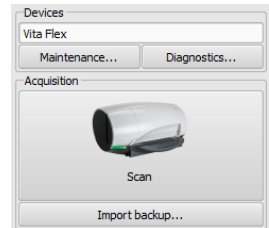
Please note that a cassette that has not been completely cleared must not be used for acquiring next images!



18.4.2.8.2 CR reader Carestream Vita Flex

Additional switches for maintenance works and diagnostic purposes are available for this device.

Reading and clearing the cassette happens by using the button „Scan“. There are the functions Scan, Clear, Eject and Cancel in the scanning dialog box. Additionally the option “High resolution” can be enabled.



If an incorrect Procedure Code was entered (a Code that the device does not know), an error message appears. If this is the case, cancel the scanning process, rectify the Code, create a new job with the correct Code and repeat the scanning. Contact your system administrator if need be.



If image quality is inadequate, the Procedure Codes must be checked. Please contact your system administrator.



Please note that a cassette that has not been completely cleared must not be used for acquiring next images!

18.4.2.8.3 CR reader Carestream Classic

Supported devices: Carestream Classic



Please check caption in the Carestream software, whether the organ and the beam path correspond to the desired exposure and change them per manual selection if required.



If image quality is inadequate, the Procedure Codes must be checked. Please contact your system administrator.

18.4.2.9 Connecting other devices / systems via DICOM Worklist



Prior to each exposure please check on the device or in the software, whether the organ and the beam path correspond to the desired exposure. Contact your system administrator for more information.



If image quality is inadequate, the Procedure Codes must be checked. Please contact your system administrator.

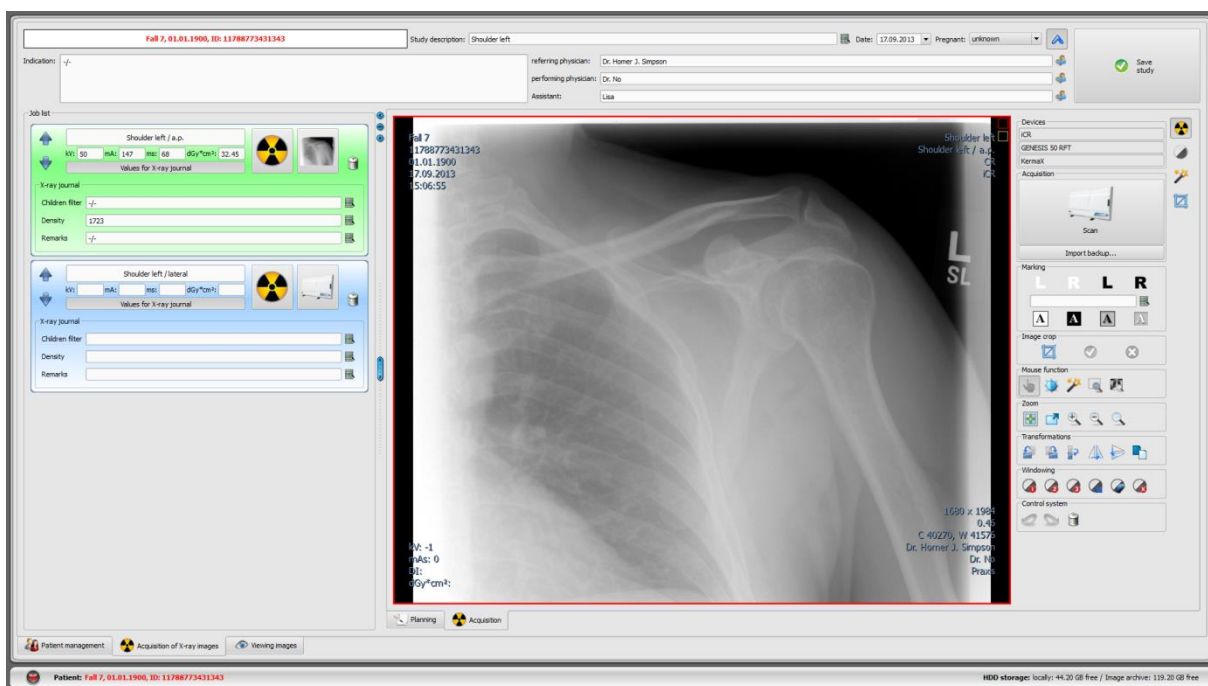
18.4.3 Course of X-ray image acquisition

Course of an X-ray image acquisition is determined by the system in use and can differ from steps described here. The exact course of an image acquisition depends on the combination of the X-ray system, image acquisition technology, connected devices as well as installed software and settings. If you have any questions please ask your system attendant. However, basically the steps are performed as the ones described in this section.

You can start acquisition of images after selection of patient. Select required job and click on the acquisition icon. If you are operating a generator that uses Procedure Codes for default settings and transfer of these Codes is supported by digipaX, start the acquisition along with the transfer of the Procedure Codes by pressing the “Send settings to generator” button. After that, take a shot of the patient. For the shot, it is also necessary to enter the exposure parameters in the appropriate fields, if there are not entered automatically. When entering values, use decimal separator set in the region and language settings of Windows (usually a comma). For entering the mAs value, decimal numbers (decimal places) are not allowed according to DICOM standard. However, the administrator may activate the option “Allow for mAs as decimal number” in the configuration.

Afterwards, you can read the image in the job and send it to digipaX by pressing the “Start image transfer” button.

Optionally, an additional large button for image acquisition can be activated via context menu in the right toolbar. If you want to use it, make sure that the required job is marked in blue (by single-clicking the job) to assign the acquired image correctly. If no job is marked in blue or the marked job already contains an image, the next empty job without images will be used. It is recommended to execute all acquisitions directly through the buttons for jobs and hide the right button. Please observe exactly the order of the steps to ensure proper assign of jobs, Procedure Codes, exposure parameters and images.



After you start the acquisition process, the acquisition program of the manufacturer of the device opens, with which the image data is transferred.



Caption and Symbol on the button for image acquisition may differ on your installation. It depends on the system configuration.

Multiple devices:

If separate exposure units are used for the table and wall stand or even a third device for free exposures, you need to select the right unit. This is usually automatically sorted by the system.



Check and rectify the selection if needed before you release the exposure.



Table



Wall stand



Free exposure

There is a symbol for each exposure unit (if exists) on the right edge with the information on status of the device. The topmost symbol is for the table, the middle one for the wall stand and the bottommost for the free exposures.

For devices operating on the rechargeable battery the battery capacity is also shown.



Device with an external power supply



Device with a battery power supply



No device found – searching still running

By clicking on the symbol detailed information on the device as well as the signal strength for devices connected to wi-fi networks are shown.

If the first image is a read-in image, it is assigned to the appropriate job and displayed as a small thumbnail in the job as well as in a large format in the window. While reading and transferring image data, next acquisition can be already performed in certain circumstances. Software for reading the image data (not digipaX) is to be closed after each acquisition.

The images are being assigned to a new study and each of them is being stored in its own series. The examination name is created automatically through the jobs or you enter the name manually.

Specify X-ray technician's name. After you have processed all the jobs and all the data has been completed, you can finish the procedure. To do this, click on "Save study" button to transfer the new images to the archive.

18.4.4 Marking images



Function Markings is available only if the adequate module is enabled.

Before you save your radiographs you can mark them with markers (the function “Marking images” must be enabled in the configuration on the page “Image acquisition”). For example, you can select one of the virtual lead markers (L or R) clicking it with the left mouse button and moving the mouse over the image. You will see a picture of the lead marker that can be modified in its size with the mouse scroll wheel or with the plus / minus keys on the keyboard. Move the symbol in the wanted position and drop it there with the next click of the left mouse button. The symbol is then permanently embedded in the image and inseparably attached to it. You can revert the latest action immediately after doing it using the arrow buttons under the toolboxes. Once the image has been saved, the markers may not be removed from it.

You also can embed texts in images. Type the text as you wish in the box „free text“ or select one of defined textes from the list. 4 buttons for the text set-up provide you with the following options: black text on white background, white text on black background, black text without background, white text without background, whichever is offered for the current image. The size of the text field can also be modified in the same way as the one of virtual lead markers.

Markings and texts once saved may not be removed.

18.4.5 Image crop



Funtion Image crop is available only if an adequate module is enabled.

Before you save your images you can crop them in order to cut off their edges. This has the following advantages:

- you can see immediately just the needed area of the image with no need to zoom the image first,
- lower memory usage,
- quicker data transfer,
- quicker image presentation and processing (e.g. windowing).

However, there is also a risk that the important information on image might also be cut off in this process.



The original image is available only as a backup in the list of newly acquired images. Once the cropped image has been saved in the archive, the cut edges may not be reproduced for this image.

Manual setting of the rectangle for image crop:

To crop the presented image click the button "Mark area". Afterwards double-click the image with the left mouse button, in order to mark the corner points for the area needed. Now you see a preview of the image area to be cropped.

Automatic calculation of the rectangle for cropping the collimation:

For some acquiring devices (e.g. Perkin Elmer) an automatic calculation of the image crop for cutting off the collimation is possible.

Also here click the button „Mark area“ first. Now the area of the collimation will be calculated and the rectangle for cropping set automatically. You still can adjust them using the mouse. Ask your system administrator whether this function is available for your acquiring device.

Check and save:

Check this preview once again to ensure that relevant information on image has not been cut off along with cropping. By clicking the button „Accept“ you confirm the image crop and the operation will be executed. The image is still not yet saved, this means not automatically transferred into the archive. You can undo the executed operation, as well as other operations, by clicking the button "Undo". By clicking the button "Reject" you cancel the marking and you can set a new one. In this way, you can always delete a wrong marking.

18.4.6 Image transformations / windowing / filters / shutter

Before you save your new images you can postprocess them e.g. transform (rotate/mirror), set the filters or modify windowing etc. To do this, you can use the mouse functions and zoom tools as in the image viewer (see section 7.2.1 and 7.2.2) as well as the tools for windowing and transformations (see section 7.3.1 and 7.3.2).

There are slider bars for windowing with presets and detailed tools for filters and display shutter in the tool boxes on the right.

Rotations, mirroring, windowing etc. are saved directly in the image and transferred along with it to the archive. These modifications are displayed immediately on other stations, where the image is retrieved.

In the configuration (page „Image acquisition“) you can set up automatic rotations and mirroring that then are applied at once to all new images.

18.4.7 Rejecting images

Single images or image series can be rejected. This means that they are not transferred to the archive, but deleted. Click either the Recycle Bin in the job and then select "Delete image only" or click the thumbnail in the job to display it in a large format in the viewer, and then click on "Reject" button bottom right in the toolbox. A confirmation message appears, which is to be answered with „Yes“. The generator values or the dose area product values, that had already been assigned to the image, are also removed.

18.4.8 Additional devices

As described above, the further devices, like i.e. X-ray generator or dose area measuring device can be connected to the system. These transfer automatically new values to the system or the system asks the devices cyclically whether new values are present. As soon as new values are available, they are assigned either to the current (marked in blue) job resp. image or to the next one on the list that still contains no values. Otherwise, an empty job is created and the values are assigned to it.

Therefore, please pay attention to the order of the jobs if you want to acquire several images one after another with the X-ray device and yet afterwards transfer them to the digipaX. If incorrect values had been assigned to an image, you have to enter correct values manually in the fields before you send the image to the archive.

18.4.9 Backups

For each acquired image creating backup is the first action before the image will be further processed. If there are additional devices connected, their values will also be backed up.

For restoring an image from the backup first activate a patient, to whom these images are assigned. Next use the button „Import backup...“ below the switch for image acquisition. In the dialog box the thumbnails of the acquired images, the name of the patient (for whom this image has been acquired) and the date and time of the acquisition are shown. Select the record, which is to be imported, and confirm with „Ok“. The image is imported as if it had been just read-in. A new job in a new study is created. If you are still working on a study that has not been saved yet, the job will be attached to this study. Now, fill out the input fields with required values in the usual manner. After you have acquired all the images or imported them from the backup, save the complete study using the button in the right upper corner.

18.4.10 X-ray journal

If the X-ray journal module is enabled on the station, on that new images are being loaded, new entries in the X-ray journal are made after saving the study. Generating the X-ray journal entry is doing automatically. In the display box of a job, there is a switch „Values for X-ray journal“. By clicking on this button, further input fields are shown. Here, you can add the values which are to be entered along with this acquisition in the journal. If a required mandatory entry is missing, a warning message appears prior to saving the study and the study cannot be completed. It is necessary to complete missing entries and click again on “Save study“.

Which values are taken over along with the image acquisition into the X-ray journal and which of them are mandatory or optional data, it must be priorly set by the admin.

18.4.11 Exposure index acc. to EN 62494-1

The tool “Exposure index” helps you to adjust the settings of the X-ray system with the target to achieve the optimal image quality with an “As Low As Reasonably Achievable” radiation dose to the patient. This tool is available only if the image acquisition and post-processing are performed directly in digipaX.

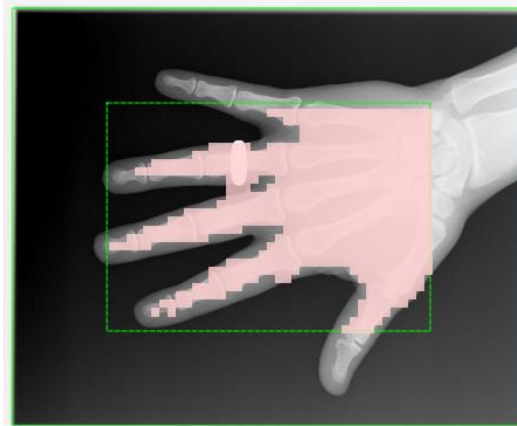
If the deviation index (DI) value after the image acquisition drifts far away from zero, you should analyse the reason of this fact using this tool in order to take the appropriate countermeasures.

Before you save the image, click the toolbox „Exposure index“. A mask will be laid over the image and the exposure index value, fixed target value, deviation index value and the determined grey scale will be shown. The deviation index is calculated from the target value and the exposure index. The grey scale is an average grey scale of pixels within the present-mask (based on a non-processed raw image).

When opening the toolbox, the calculated collimation as well as the calculated mask are presented as an overlay over the object.



Please check here if the mask is positioned correctly.

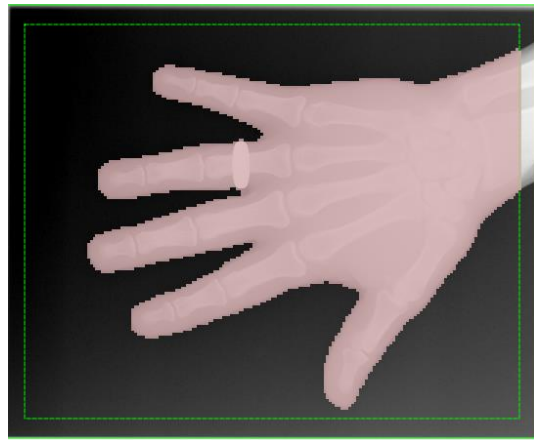
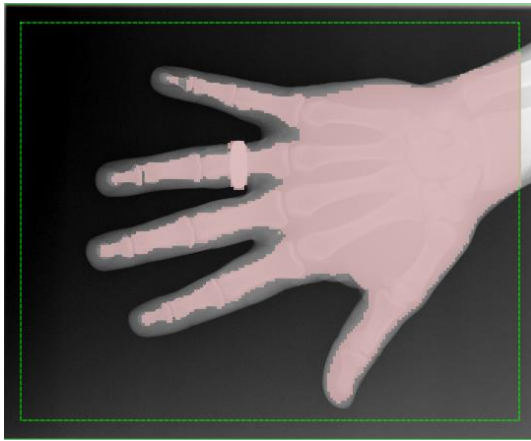


The collimation is calculated automatically by the system (continuous green line). A predefined edge is added to the collimation (dashed green line).

The edge must be large enough so that no areas outside the collimation are included, but on the other hand it cannot cut the object either. A mask is laid over the object and shows which areas of the image are used for calculation of the exposure index. The mask shall only overlay the X-rayed object.

If there are any deviations, you can readjust the areas using 3 slider bars. The values for the calculation will then be changed accordingly.

In the example image above the edge must be changed to the extent that the hand will lay completely within the edge.



The raster of the mask can be refined and the selection reduced or enlarged with the „Accuracy“ control so that the object will be covered by the mask optimally.



Moreover, check the target value. Please ask your technician for assistance if need be.

If the values are acceptable, you can save the image.

If the exposure index still drifts far away from zero despite correct settings for the edge and the mask, you should adjust the dose appropriately when acquiring the image. If the exposure index goes far in plus range, the dose should be reduced, if the value goes contrariwise in minus range, the dose should be increased if the image quality is poor. A low dose with the good image quality is an optimum. If the images are still acceptable with the negative value, increasing the dose is rather not necessary.



If major deviations of the exposure index still exist despite proper settings of X-ray parameters, mask and target value, the exposure index or even the entire X-ray system needs recalibration. Please contact with your technician in this matter.

18.4.12 Grid line suppression

If a detector manufactured by PerkinElmer (see 18.4.2.4) and a stationary anti-scatter grid is used in your X-ray system, they can leave grid-line shadows on the image. These shadows can be optionally suppressed using a specific algorithm. This function must be enabled by the system administrator.

The grid-line shadows are automatically suppressed along with the acquisition of an image. Whether the shadows are suppressed on the image, you can see in the DICOM-Header of the image by checking the DICOM tag 0018,1166 used for this purpose.

0018,1166 = empty or nonexistent -> grid-line shadows not suppressed

0018,1166 = FIXED -> grid-line shadows suppressed

18.4.13 Problem shooting

What to do when the cassettes have got mixed up and the order of images is not correct?

The jobs can be resorted prior to saving in required order and then they will be saved in this order. The description for the image and all acquisition values can also be modified manually. Therefore, please make sure that the descriptions, values and order are modified accordingly before the study will be saved.

What happens if a false patient was still activated?

If new images have been assigned to a false patient, they can be first deleted (rejected). For this, reject individual images and delete the jobs. Next, the right patient will be opened and one of the last acquisitions will be imported by using the switch „Import backup...“. See 18.4.7 Rejecting images and 18.4.9 Backups.

If the images have already been saved, you can assign them to the right patient using editing function. Editing and deleting functions must be enabled by your system administrator (see chapter 8.9.2).

What happens if the device data have been already transferred before the patient is opened?

Device data are also protected in backups. Therefore, first activate a desired patient and import the device data from the backups. Next read also the image data as usually in and save them.

What happens if it is tried to exchange a patient or close a program although not all images of the active patient are saved?

A message appears, that first all images of the active patient are to be saved or rejected. The patient cannot be exchanged and the program cannot be closed if the unprotected images still exist.

What happens if the system has a crash during acquisition process?

Start the application again. If you are not sure, if possibly already started saving followed successfully, activate the patient from the patient management and check the images of this patient.

First open the list of backups and check if the image or images exist as a backup, in order to restore not saved images. If yes, then import the backup for already correctly selected patient and perform the saving once again. If there are no backups, then on next click on image acquisition button a dialog is shown which allows to import this images once again. If you select import than existing images are imported and can be saved normally. If no image data are imported, the user's manual of the device is to be used, in order to restore the image data, and contact the system attendant (service), if necessary.

18.5 MRI image acquisition

18.5.1 General

If the MRI image acquisition module is enabled, an additional tab „MRI image acquisition“ is shown. The tab consists of the parts Planning (if enabled) and Acquisition. The MRI image acquisition comprises additional functions for image acquisition and image processing.

On the right side of this tab connected devices are shown (it may be necessary to enable this display in context menu of the toolbox first). These fields are temporarily highlighted in colors while receiving values (yellow during receiving, green after successful receipt, red if receipt failed).

Beneath there are control elements for image acquisition and tools for image processing. You can hide and unhide unneeded functions and tools via context menu. In order to do this, click with the right mouse button in tool area and activate or deactivate needed functions in the menu displayed.

On the left side there is a job list for a current patient.

18.5.2 Special device functions and safety precautions



It is strictly necessary to check before every acquisition whether presets for the desired acquisition are correct.

The kind of checking depends on device being used. Ask your system attendant what devices are being used in the system. Absolutely let yourself be instructed in detail about technology and software prior start-up.



There can be restrictions on use of MRI devices. These include e.g. cardiac pacemakers or other implanted and metallic objects. Detailed restrictions are defined by manufacturers of devices and must be strictly observed.

18.5.2.1 MRI Scanner S.P. Helpic Ltd.

Supported devices: Everest 1.5T, Renex 0.3T



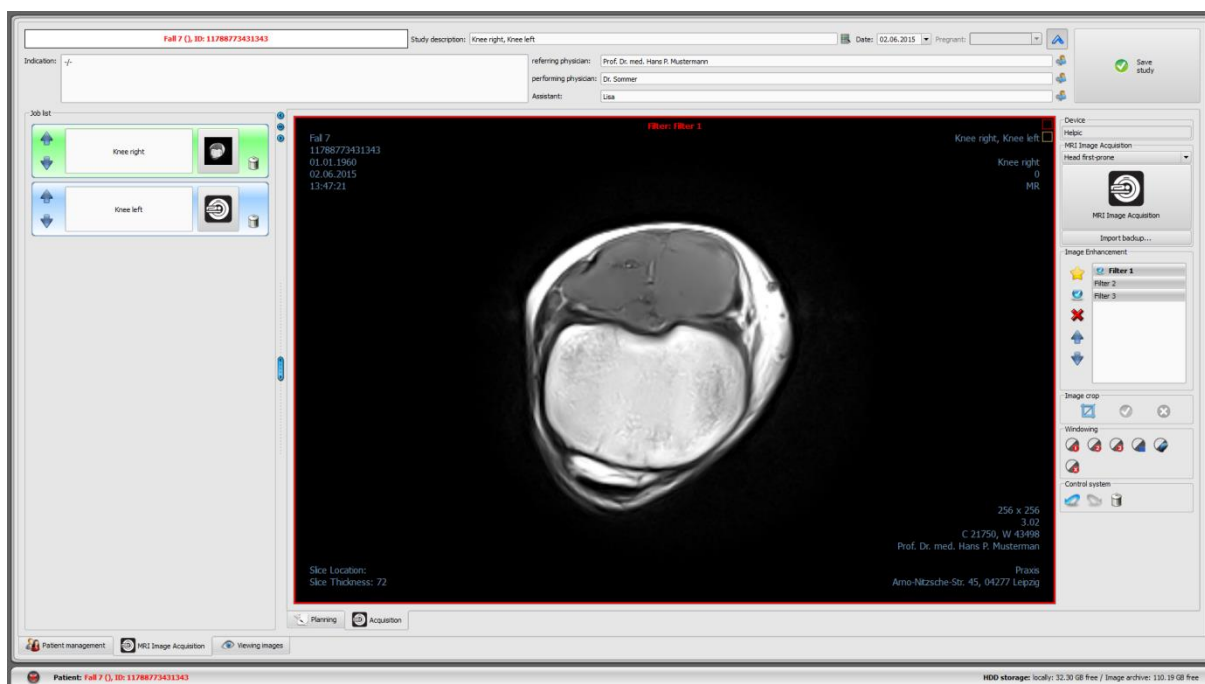
There is information on patients as well as study to be performed and transferred. This is to be checked by the user before performing image acquisition.

No Procedure Codes are transferred.

18.5.3 Course of MRI image acquisition

You can start acquisition procedure after patient is selected. Select required job, set the appropriate lying position of the patient in the right drop-down menu, and click on the acquisition icon. Following this, perform the acquisition of the patient.

Optionally, an additional large button for image acquisition can be activated via context menu in the right toolbar. If you want to use it, make sure that the job required has been marked in blue priorly (by single-clicking the job) so that the acquired image is assigned correctly. If no job is marked in blue or the marked job already contains an image, the next empty job without images will be used.



After you start the acquisition process, the acquisition program of the manufacturer of the device for device control, image acquisition and image data transfer opens.

When the first images are a read-in, they are assigned to the appropriate job and displayed as a small thumbnail in the job as well as in a large format in the window. While the MRI scanning device acquires the next series, you can view the already acquired series in the image viewer. You can switch between the cards of the MRI image acquisition and the image viewer. The software for reading image data (not digipaX) is to be closed after completing each acquisition.

The images are being assigned to a new study and each of them is being stored in its own series. The study name is created automatically through the jobs or you enter the name manually.

Specify X-ray technician's name. After you have processed all the jobs and all the data has been completed, you can finish the procedure. To do this, click on "Save study" button to transfer the new images to the archive.

18.5.4 Image enhancement (MRI filters)

18.5.4.1 General

You can still post process the newly acquired images before saving them by using special MRI filters. The filters are used to optimize various areas in the images. A variety of algorithms for sharpening, smoothing as well as contrast enhancement are used. In order to be able to use these filters, the module must be enabled through licensing. Furthermore, an additional dongle must be installed and it must also be enabled. Then the files are available as filters that are to be integrated first. If you have any question about availability and function of the filters, please ask your system attendant.

18.5.4.2 Safety precautions

**Image quality:**

The image quality should be evaluated by experienced radiologists.

**Filter files:**

To avoid mistakes in use, structure the filters with understandable names (e.g. sharpening, smoothing, contrast enhancement etc.).

Make backups for your filter files.

**Original images:**

If image processing fails, or the system has a crash during the image processing, the most recent original images without filters are always available in the backup.

**System updates:**

After upgrading your system (hardware, operating system or antivirus programs etc.) check whether the filters are still functional.

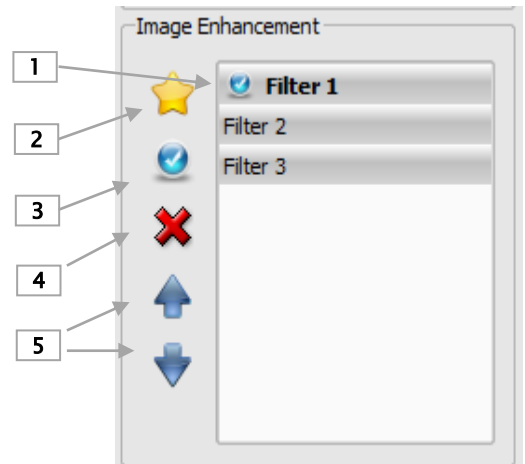
**Modifications of acquiring device:**

If any modifications in acquiring device are made, such as new firmware or changes in settings, the filters must be possibly re-adjusted in order to avoid worsening of image quality.

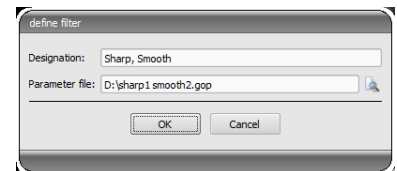
If any questions or problems arise, please ask your system attendant.

18.5.4.3 Settings

- 1 – Enable / disable filter
- 2 – Add filter to the list
- 3 – Delete filter from the list
- 4 – Set / cancel filter as default
- 5 – Move filter on the list



In order to add a new filter to the list, click on the icon (2) and open required filter, enter a new name and click OK. The new filter is now available. In order to delete the filter, click on the switch 3.



You can set a default filter by use of switch 4. This filter will be then automatically used for each acquisition. To do this, click first on the appropriate filter and then on the switch. In order to delete the default filter, make both steps once again.

You can change sequence of the filters on the list using the switch 5.

18.5.4.4 Using filters

You have to set filters before saving the MRI images. Changes are permanently stored in the series. In order to set a filter, click on the entry on the list (1). You can set the filters multiply and mixed in any sequence. It is shown at the upper edge of the image what filters are set. You can undo each of the steps using both cursor keys for control. Adjust the filters until you have reached required result.

18.5.5 Marking images



Function Marking images is available only if the adequate module is enabled. Marking images must also be enabled in the configuration on the page „Image acquisition“.

Before you save your images you can mark them with markers. For example, you can select one of the virtual lead markers (L or R) clicking it with the left mouse button and then moving the mouse over the image. You will see a picture of the lead marker that can be modified in its size with the mouse scroll wheel or with the plus / minus keys on the keyboard. Move the symbol in the wanted position and drop it there with the next click of the left mouse button. The symbol is then permanently embedded in the image and inseparably attached to it. You can revert the latest action immediately after doing it using the arrow buttons under the toolboxes. Once the image has been saved, the markers may not be removed from it.

You also can embed texts in images. Type the text as you wish in the box „free text“ or select one of defined textes from the list. 4 buttons for the text set-up provide you with the following options: black text on white background, white text on black background, black text without background, white text without background, whichever is offered for the current image. The size of the text field can also be modified in the same way as the one of virtual lead markers.

Markings and texts once saved may not be removed.

18.5.6 Image crop

Before you save your images you can crop them in order to cut off their edges. This has the following advantages:

- you can see immediately just the needed area of the image with no need to zoom the image first,
- lower memory usage,
- quicker data transfer,
- quicker image presentation and processing (e.g. windowing).

However, there is also a risk that the important information on image might also be cut off in this process.



The original image is available only as a backup in the list of newly acquired images. Once the cropped image has been saved in the archive, the cut edges may not be reproduced for this image.

Image cropping is always applied to all images of the selected MRI series.

To crop a presented series press the button „Mark area“. Afterwards double-click the image with the left mouse button in order to mark the corner marks of the targeted area. Now you

see in the image a preview of the area to be cut off. **Check once again in this preview, have you not cut-off any important information on the image by cropping.** Click the button “Accept” to confirm cropping and the operation will be executed. Crop is not saved, hence is not automatically transferred to the image archive. You can undo the executed operation, as well as other operations, using the button “Undo“. You can cancel the marking clicking the button “Reject“ so that you can set a new one. In this way, you can delete a wrong marking.

18.5.7 Windowing

You can still modify windowing before saving. For this, the switches for automatic windowing as in the image viewer (see section 7.3.2) are available.

Modifications of windowing are being saved directly in the image and transferred along with the image to the archive. These modifications are displayed immediately on other stations, on that the image is obtained.

18.5.8 Rejecting images

Single images cannot be rejected but only a selected series. This means that they are not transferred to the image archive but deleted. Click either the Recycle Bin in the job and then select “Delete image only“, or click the thumbnail in the job to display the series in a large format in the viewer, and then click “Reject” button on the bottom right in the toolbox. A confirmation message appears, which is to be answered with „Yes“.

18.5.9 Importing backup

A backup is created for each acquired image series. If necessary, images can be restored from the backup directory. For restoring images from the backup directory, first activate a patient, to whom these images are to be assigned. Next use the button „Import backup...“. In the dialog box the thumbnails of the acquired images as well as the date and time of the series and name of the patient (for whom the images have been acquired) are shown. Select the acquisition to be imported and confirm with „Ok“. The image series is imported back and assigned to a new job.

18.5.10 Problem shooting

What happens if a false patient was still activated?

If new images have been assigned to a false patient, they can be first deleted. For this, reject individual images and delete the jobs. Next, the right patient will be opened and one of the last acquisitions will be imported by using the switch „Import backup...“. For more please refer to 18.5.8 Rejecting images and 18.5.9 Importing backup.

If the images have been already saved, you can also import these for a correct patient from the backups and save once again, false saved images of the first patient must however be deleted from the image archive by your system attendant or administrator or using the delete function (see chapter 8.9).

What happens if it is tried to exchange a patient or close a program although not all images of the active patient are saved?

A message appears that first all images of the active patient are to be saved or rejected. The patient cannot be exchanged and the program cannot be closed as long as the unprotected images still exist.

What happens if the system has a crash during acquisition process?

Start the application again. If you are not sure whether possibly already started saving followed successfully, activate the patient from the patient management and check the images of this patient.

If the images are not yet saved or are incompletely saved, you need to import the images from the backup. To do this, open the list of backups and import the backup (see also 18.5.9 Importing backup) for already correctly selected patient and perform the saving once again.

18.6 Framegrabber / acquisition of image series

18.6.1 General

The “Frame grabber” module allows acquiring of single images or the entire image series from the external source by video converter and their transfer to the image archive. The prerequisite for frame grabber is an image source with a video interface such as Composite or a S-Video connector that for connecting the video connector. This converter processes the image data and transmits them to computer. Only devices from the manufacturer “The Imaging Source can be used. The system administrator will provide information on technical details and will assist you in selection of the most appropriate equipment.

There are devices which must be embedded in computer permanently and such which may be connected through the external USB. They may be operated by keyboard, mouse or external foot switch. Foot switches with USB connections or serial connections (COM port) can be used. If a foot switch with a USB connection is used, it would be the best if the foot switch has two programmable pedals. “F5” key on computer keyboard shall be assigned to the first pedal, and “F9” key – to the other pedal, and you may freely select to which pedal – right or left – will be assigned which of these both keys. Programming is generally made using the software delivered with the switch.

The requirement for use of a foot switch with a serial connection is that the computer must have a serial connection available. Nowadays, many PCs have **no more** such connection and a serial port must be first installed.

Information how to connect and install the device is provided in documentation attached by the manufacturer. Such installation must be absolutely made by professional.

With the “Acquisition of image series” module, the image data is created by a third-party system and transferred to the digipaX for further processing. The program receives then this data and processes it further.

18.6.2 System requirements for frame grabber

The computer with adequate capacity is required for processing of images with several images per second speed. The following table presents the minimum requirements which must be met by computer to operate the frame grabber with digipaX.

Processor	Dual Core or Quad Core Processor min. 2,5 GHz or higher
Operating memory	2 GB RAM or higher
Operating system	Windows XP (SP3), Windows Vista (SP2), Windows 7 (SP1), Windows 8.1, Windows 10 (only Business/Pro or higher)
Software	DirectX 9c or higher
Graphics	min. 128 MB DVI (Dual), min. 1280 x 1024
Hard disk	System disk min. 60 GB
Network	1000BaseT (Gigabit Ethernet)
Device interfaces	free USB 2.0 port for external devices or free plug-in socket (most frequently PCI or PCIe) for devices embedded in computer and an additional USB connection if a USB foot switch is used COM port if a serial foot switch is used

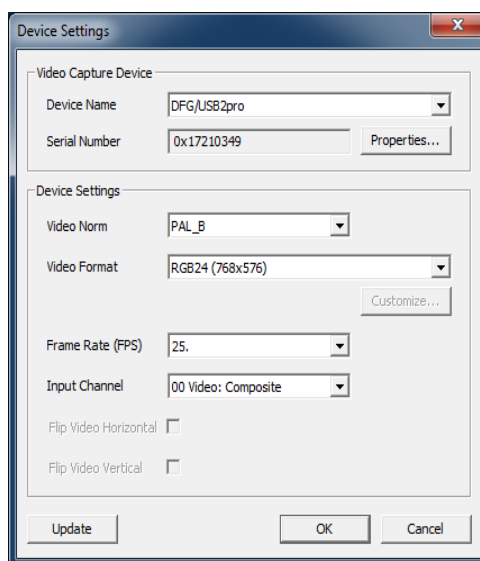
18.6.3 Frame grabber setup in digipaX

The “Frame grabber” module must be licensed and launched to be available in digipaX system. Also configuration in digipaX shall be made by professional. If this module is activated, new toolbar for device configuration and control is available.

The “Video source” and “Configuration” buttons are used for selection and configuration of the connected device. The elements of configuration and operation become active only when exactly ONE patient is opened. If more patients are opened, these elements are inactive. The image data can not be assigned to wrong patients in this way.

18.6.3.1 Video source

- **Device Name:** if video device is installed correctly, “Device name” appears on the list. If this list is empty then device was installed incorrectly or it does not meet the requirements specified above. If several devices are on this list, you shall select one of them.
- **Serial Number:** provides series number for the selected device.
- **Properties:** opens the dialog box for various, exact device adjustments. You can find more information in manufacturer’s documentation.
- **Video Norm:** sets the video standard. This standard depends on video source or image source. PAL standard is commonly used in Europe.
- **Video Format:** it is recommended to use the highest image resolution in connection with the best colour depth available in device.
- **Frame Rate:** specifies how many images per second is delivered by video source. With 25 images per second speed the new image is transmitted by video source every 40 milliseconds.
- **Input Channel:** video interface at video converter to which the video source is connected.



There are no generally binding values for each of these settings. They always depend on the used hardware and they can differ. More information on this issue may be found in documentation delivered by manufacturers of hardware, video converter and image source or video source.

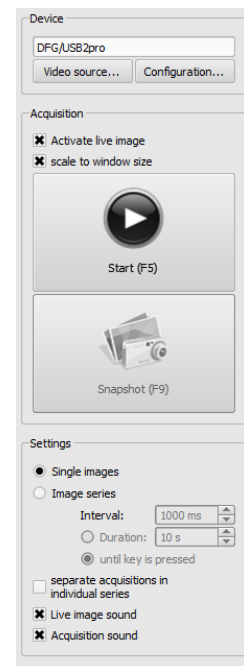
18.6.3.2 Configuration

The same dialog box is opened there for various exact settings as for “Video source/Properties”. The difference is that the dialog box may be opened and settings may be made also with the active live image transfer.

18.6.4 Frame grabber operating elements

The mouse or keyboard may be used for operation. Furthermore, it is possible to connect the external foot switch to the computer. This allows that the device can be operated with feet, with hands free for video source operation. “F5” key (Activate live image) and “F9” key (Release snapshot) may be freely assign to the foot switch pedals, for the most convenient device operation for you.

- **activate live image:** shows image with active live transmission in browser.
- **Scale to window size:** increases or decreases image to window size.
- **Start (F5):** activates live image transmission. This action may be activated by mouse clicking, pushing the “F5” key on keyboard or by the proper foot switch pedal. The again pushing will stop transmission. **It must be remembered that the acquired images or series may be processed after stopping the live transmission only.**
- **Snapshot (F9) at single image setting:** the snapshot of current video transmission is made by mouse clicking, pushing “F9” key or relevant foot switch pedal.
- **Acquisition (F9) at image series setting:** the sequence of images is acquired for the specific period of time by mouse clicking, pushing “F9” key or relevant foot switch pedal. More information – in point “Image series”.
- **single images:** switches the acquisition switch into snapshots. Only single images are always acquired.
- **image series:**
 - interval: – determines in how many milliseconds the image is acquired. It shall be remembered that the maximum number of images per second depends on both the installed frame grabber and computer capacity.
 - duration: – acquisition will be automatically finished after the set time. The activation of acquisition by mouse clicking or once pushing of “F9” key or relevant foot switch pedal.
 - until key is pressed: – acquisition is activated by mouse clicking, pressing the “F9” key or relevant foot switch pedal and it is activated as long as the key is kept pressed.
- **Separate acquisitions in individual series:**

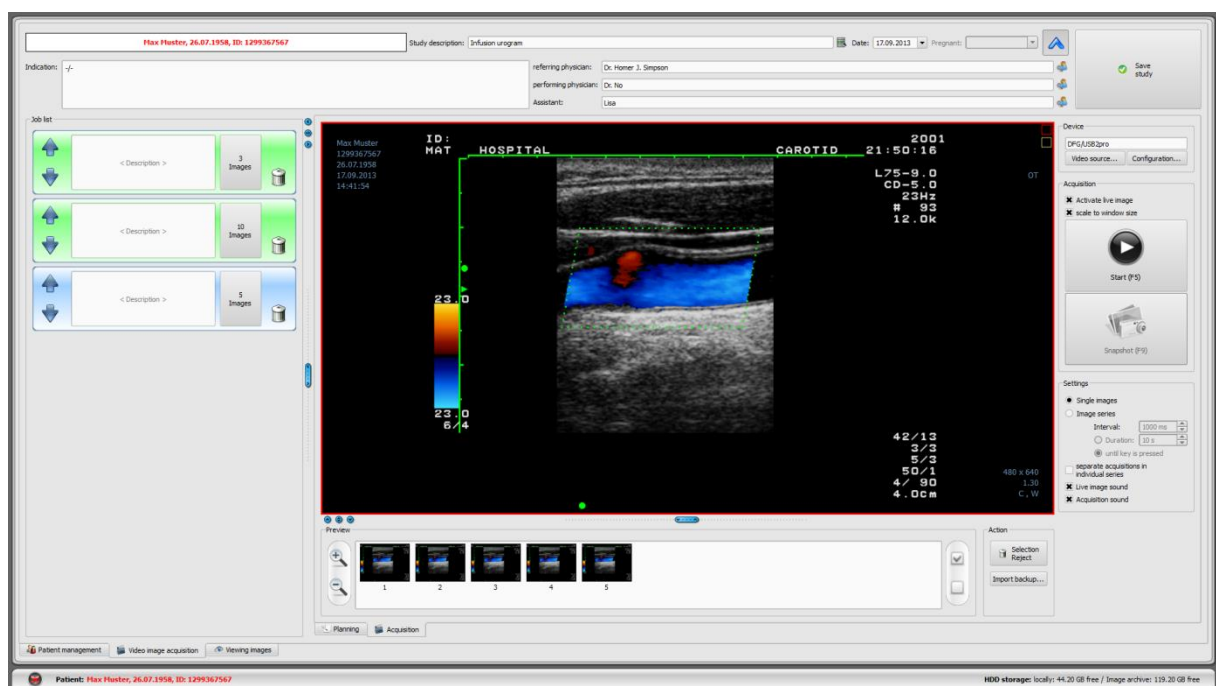


- with the option Single images each image is saved in an individual series and in this way, it can be individually annotated
 - with the option Image series a new acquisition in a new series is started with each keystroke
 - **Live image sound:** sound is played during live image presentation for control purposes
 - **Acquisition sound:** sound is played during each acquisition for control purposes either.
- For signal tone playback, the computer or the screen must be equipped with load speakers and the load speakers must be adjusted appropriately. Please ask your system attendant for assistance if need be.

18.6.5 Acquisition by frame grabber

If the job management is active, a tab for job planning and management is also displayed here. To load an image series, start the live image transmission by clicking on the appropriate icon in the job or mark the job in blue and press the „Start” button in the toolbox to the right or the „F5” key resp. the foot-operated switch (if used).

The acquired single images or sequences of images appear as candidates in preview in the bottom while the number of single images is displayed in the job. As soon as the live image transmission has been stopped, the acquired images may be processed further.



After activation of single images, with each snapshot a new image is being acquired and added to the list of candidates of an active job. With every new start of the live image transmission next job is being approached. The job after job may be processed in this way using the job management. If no jobs had been created before, they are being created automatically upon start the live image.

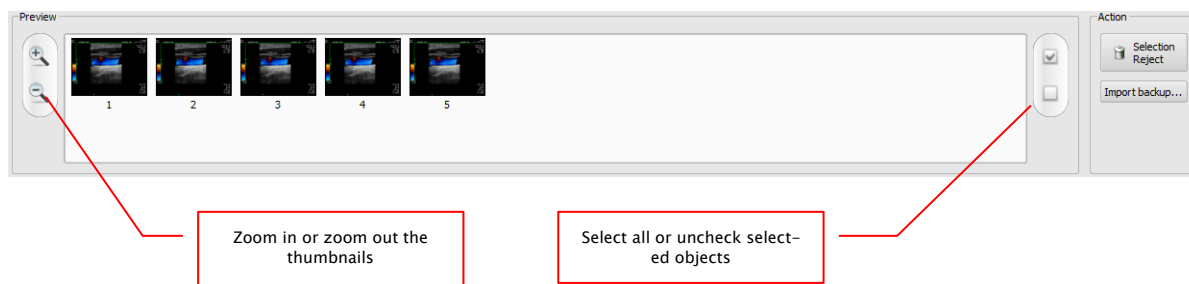
Also when “image series” option is set, all acquired images are put into single series and this series is closed when live image transmission is stopped.

The further data processing and storing in archive are described in chapter 18.6.7 Processing and storing acquired images.

18.6.6 Acquisition with image series acquisition module

The images are acquired from a third-party system and transmitted to the computer and software receives this data. With transmission of the first image, digipaX waits for waiting period set by the system administrator. If no further images are acquired within this period, the acquired images are automatically added to the list of candidates of the activated job and stored in the new series. If you intentionally want to acquire multiple series for single patient, the best possible method is to acquire images by series in the third-party system and then transmit the closed series to digipaX and wait for series importing by digipaX. Then you can continue the procedure without previous storing of the acquired series with the next series. You can finish with proper processing of images and storing them in archive.

18.6.7 Processing and storing acquired images



The candidates are displayed in preview when you click on series in the left job list. The thumbnails can be zoomed in or out for better representation. By double-clicking on a thumbnail, it is being displayed in a large format in the viewer. You can check the images prior to saving them and eliminate those that are not to be saved. Mark the images that are not to be saved with a single click on the thumbnail (it is now marked in blue) and then click on the “Reject selected” button. By clicking on “Unmark selected”, all images will be unmarked again. If you want to reject complete series, click once on “all selected” and “Reject selected” or click directly on Recycle Bin in the job and then “Delete images only”.

When you are finished with post processing of all series, put in necessary data in the appropriate fields and then click on „Save study” to transfer the series to the archive.

18.6.8 Importing backups

The backups of acquired snapshots or image sequences are created for each live image or image series transmission. They may be recovered from backups if necessary. For this, you must previously activate the patient to which images shall be assigned. Click on “Import backup...”. In the dialog box the thumbnails of the acquired images with the date and time, and number of the images as well as name of the patient (for whom the images have been acquired) are shown. Select acquisition to be imported and confirm with the “OK” button. The snapshots or sequences of images are re-imported and assigned to the new job. Alternatively, you can assign the backup to an existing job, marking it previously in blue and then importing the backup.

18.6.9 Problem shooting

What happens if a false patient was still activated?

If new images have been assigned to a false patient, they can be first deleted (rejected). Next, open the appropriate patient and import again one of the latest acquisitions by means of „Import backup...“ button. For more see 18.6.7 Processing and storing acquired images and 18.6.8 Importing backups.

If the images have already been saved, they can also be imported for the appropriate patient from the backup and re-saved for that patient. Incorrectly saved images of the first patient must be, however, deleted from the image archive by your system attendant or admin or using the delete function (see chapter 8.9).

What happens if the device data have been already transferred before the patient is opened?

This can happen only when using the image series acquisition module.

If no patient is opened, the image data remain in the specified transfer folder. As soon as a patient is opened, these image data are imported and assigned to this patient. You can subsequently continue with usual storing procedure of images.

What happens if one's trying to change patient or shutdown the program although not all images of the active patient are yet saved?

A message appears that all images of the active patient must be stored or rejected first. The patient cannot be changed and the program cannot be quitted until unsecured images exist.

What happens if system crashes during acquisition?

Re-launch the application. If you are not sure whether possibly started storing process could be successfully completed, activate the patient via patient management and check the images of this patient.

When using the image series acquisition module, all still not completely imported images are read once again for the patient and you can proceed with the storing procedure as usually. If this does not happen or you work with the frame grabber module, you must first import the images from backup. In order to do this, open the list of backups and import the backup for the already properly selected patient, afterwards proceed with storing images.

18.7 Tomosynthesis image acquisition

18.7.1 General

If the module for acquisition of tomosynthesis images is activated, an additional tab „Tomosynthesis image acquisition“ is shown. It consists of the parts Planning (if activated) and Acquisition. The module Tomosynthesis image acquisition contains additional functions for acquisition and processing images. It is possible to acquire single radiographs as well as tomosynthesis image series.

To the right of this tab connected devices are shown (this display may require additional activation in the context menu of the toolbox). These fields are temporarily colour-marked

when receiving values (yellow when receiving, green when received, red when receiving failed).

Below the tab, there are operational controls for image acquisition and tools for image processing. You can hide or unhide unneeded functions and tools via the context menu. To do this, click with the right mouse key the tool section and activate or deactivate the functions displayed in the menu.

You can see a a job list for the current patient on the left.

18.7.2 Special device functions and safety precautions

So-called Procedure Codes are used for sending selected organs and beam projections to various devices. These Codes are transmitted along with the X-ray job to devices and are preset for selected acquisition without the need for re-setting the organ and beam projection on the device. This means for a generator that kV and mAs values for an exposure are preset on the basis of these Codes.

If a false Code was transferred, this could lead to false generator settings and cause danger for a patient.

It is therefore so important to check for every exposure if presets for this exposure are correct.

Type of check depends upon devices used. Please ask your system administrator what devices are used in the system. Absolutely take an extensive training on techniques and software.

18.7.2.1 Josef Betschart AG generator

Supported device: GENESIS 50 RFT or DT



Prior to each exposure check on the display of the generator console / user interface whether the values for the exposure are correct and change them if need be.

18.7.2.2 Teleoptic detector

Supported devices: Phoenixray

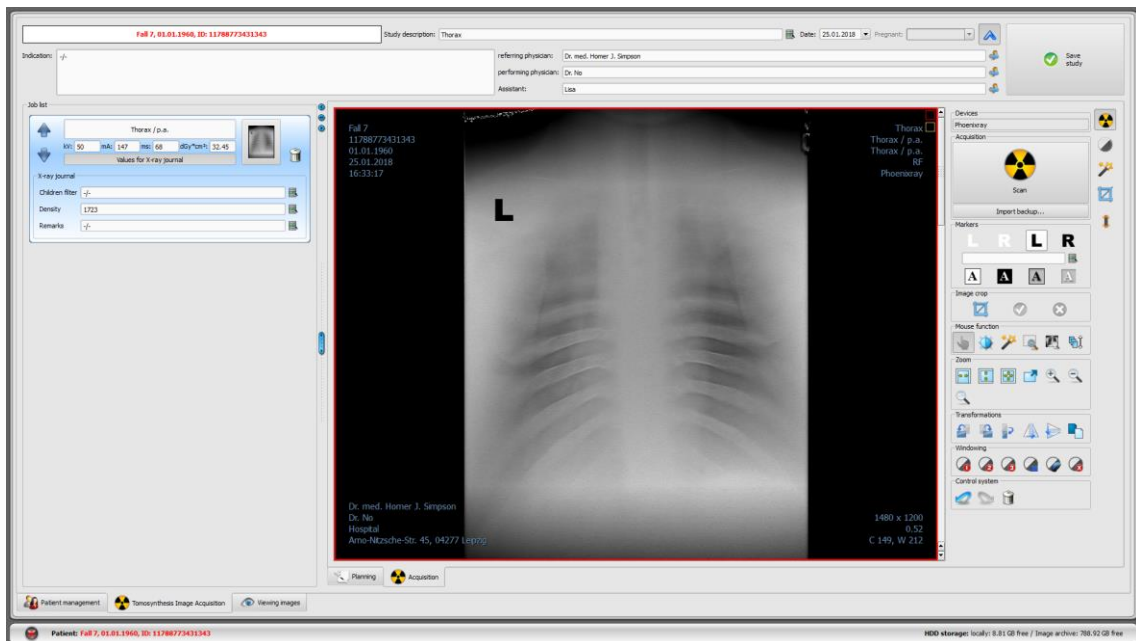
No Procedure Codes are transferred to the device.

18.7.3 Course of tomosynthesis image acquisition

After the patient is selected, you can start acquisition procedure. If no jobs are planned for this patient yet, create one firstly through the planning tab. Afterwards select the required job and click the job icon.

Optionally you can activate an additional large button for image acquisition via context menu in the right toolbar. If you want to use it, make sure that the required job is marked in blue (by single-clicking the job) so that the acquired image is assigned correctly. If no job is marked in blue or the marked job already contains an image or image series, the next empty job without images will be used. It is recommended to execute all acquisitions by direct use of the buttons for jobs and hide the right button. Please observe exactly the order of the

steps to ensure that the jobs, Procedure Codes, exposure parameters and images are assigned correctly.



After you start the acquisition process, the acquisition program of the manufacturer of the device for device control, image acquisition and image data transfer opens.

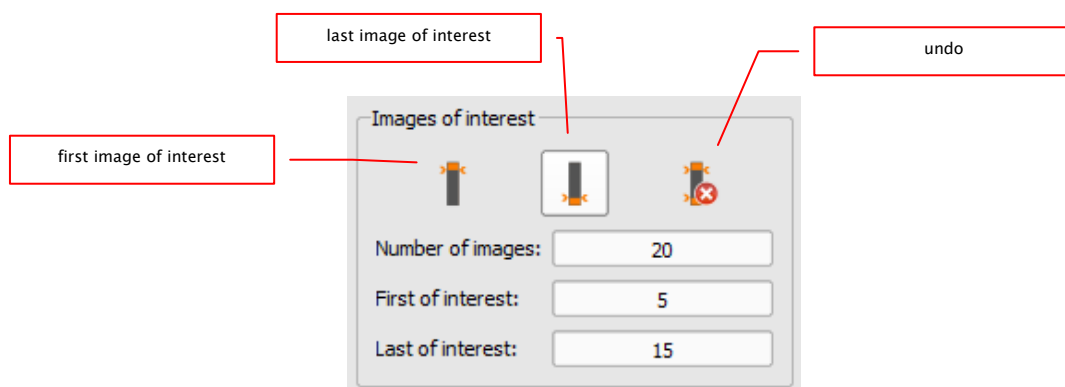


Caption and Symbol on the button for image acquisition may differ in your installation, depending on system configuration.

18.7.4 Images of interest



This function allows you to cut off irrelevant images at the beginning and at the end of a captured series of the images from tomosynthesis. In this way the series are reduced to images that are suited or relevant to the study.



After image acquisition click the appropriate icon on the right side of the toolbar. Scroll to the first image of interest, and click the button „first image of interest“. Then scroll to the last relevant image, and click the button „last image of interest“. There are two „virtual cut-

off marks“ set. When you scroll through the series the images of no interest are covered by a gray shroud to keep them under control. You can reverse preceding steps by pressing the button „undo“.

When you are done here, follow all next necessary steps (see the sections below). When you finally save the study the images that are marked hier as „of no interest“ will be cut off and only the images „of interest“ will be transferred to the archive.

18.7.5 Marking images

Markings made for tomosynthesis image series will be applied to all images in the series.



Function Markings is available only if the adequate module is enabled.

Before you save your images you can mark them with markers (the function “Marking images” must be enabled in the configuration on the page “Image acquisition”). For example, you can select one of the virtual lead markers (L or R) clicking it with the left mouse button and then moving the mouse over the image. You will see a picture of the lead marker that can be modified in its size with the mouse scroll wheel or with the plus / minus keys on the keyboard. Move the symbol in the wanted position and drop it there with the next click of the left mouse button. The symbol is then permanently embedded in the image and inseparably attached to it. You can revert the latest action immediately after doing it using the arrow buttons under the toolboxes. Once the image has been saved, the markers may not be removed from it.

You also can embed texts in your images. Type the text as you wish in the box „free text“ or select one of defined textes from the list. 4 buttons for the text set-up provide you with the following options: black text on white background, white text on black background, black text without background, white text without background, whichever is offered for the current image. The size of the text field can also be modified in the same way as the one of virtual lead markers.

Markings and texts once saved may not be removed.

18.7.6 Image crop

Image crop made for tomosynthesis image series will be applied to all images in the series.



Function Image crop is available only if the adequate module is enabled.

Before you save your images you can crop them in order to cut off their edges. This has the following advantages:

- you can see immediately just the needed area of the image with no need to zoom the image first,
- lower memory usage,
- quicker data transfer,
- quicker image presentation and processing (e.g. windowing).

However, there is also a risk that the important information on image might also be cut off in this process.



The original image is available only as a backup in the list of newly acquired images. Once the cropped image has been saved in the archive, the cut edges may not be reproduced for this image.

To crop the presented image press the button “Mark area”. Afterwards double-click the image with the left mouse button, in order to mark the corner points for the area needed. Now you see a preview for the image area to be cropped.

Check and save:



Check this preview once again, that important information on image has not been cut off along with cropping. Scroll with the mouse wheel through the image series or use a slider on the right image edge to check how the cropping affected all other images of the series and that no relevant parts of images in the series have been cropped.

By clicking the button „Accept“ you confirm the image crop and the operation will be executed. The image is still not yet saved, this means not automatically transferred into the archive. You can undo the executed operation, as well as other operations, by clicking the button “Undo”. By clicking the button “Reject” you cancel the marking and you can set a new one. In this way, you can always delete a wrong marking.

18.7.7 Image transformations / windowing / filters / shutter

Before you save your new images you can postprocess them e.g. transform (rotate/mirror), set the filters or modify windowing etc. To do this, you can use the mouse functions and zoom tools as in the image viewer as well as the tools for windowing and transformations.

There are slider bars for windowing with presets and detailed tools for filters and display shutter in the tool boxes on the right.

Rotations, mirroring, windowing etc. are saved directly in the image and transferred along with the it to the archive. These modifications are displayed immediately on other stations, where the image is retrieved.

In the configuration (page „Image acquisition“) you can set up automatic rotations and mirroring that then are at once applied to all new images.

Changes in tomosynthesis image series are applied to all images of the series.

18.7.8 Rejecting images

Single images or image series can be rejected. This means that they are not transferred to the archive, but deleted. Click either the Recycle Bin in the job and then select “Delete image only” or click the thumbnail in the job to display it in a large format in the viewer, and then click the “Reject” button on the bottom right in the toolbox. A confirmation message appears, which is to be answered with „Yes“. The generator values that had already been assigned to the image are also deleted.

18.7.9 Additional devices

As described above, the further devices, e.g. X-ray generator, can be connected to the system. They automatically transfer new values to the system or the system asks the devices cyclically whether new values are present. As soon as new values are available, they are assigned either to the current (marked in blue) job resp. image or to the next one on the list that still contains no values. Otherwise, an empty job is created and the values are assigned to it.

18.7.10 Backups

For each single image or series of images a backup is created before further processing can be continued. If additional devices are connected, their values will also be backed up. Backup contains also the images that were cut off as recognized to be „of no interest“ (see section 18.7.4).

For restoring an image or a series of images from the backup you need to activate the patient, to whom these images are assigned. Afterwards use the button „Import backup...“ below the button for image acquisition. In a dialog box thumbnails of acquired images, name of the patient (for whom this image has been acquired) and date and time of the acquisition are shown. Select the record, which is to be imported, and confirm with „Ok“. The image is imported as if it had just been read-in . A new job in a new study is created. If you are still working on a study that has not yet been saved, the job will be attached to this study. Now fill the input fields with required values as usually. After all images have been acquired or imported from the backups, save the completed study using the button in the right upper corner.

18.7.11 Problem shooting

What to do when the order of images is not correct?

The jobs can be resorted prior to saving in required order and then they will be saved in this order. The description for the image and all acquisition values can also be modified manually. Therefore, please make sure that the descriptions, values and order are modified accordingly before the study will be saved.

What happens if a false patient was still activated?

If new images have been assigned to a false patient, they can be deleted. To do this, reject single images and delete the jobs. Then the right patient will be opened and one of the last acquisitions will be imported using the button „Import backup...“. See 18.7.8 Rejecting images Rejecting images and 18.7.10 Backups.

If the images have already been saved, you can assign them to the right patient using editing function. Editing and deleting functions must be enabled by your system administrator.

What happens if it is tried to exchange a patient or close a program when still not all images of the active patient are saved?

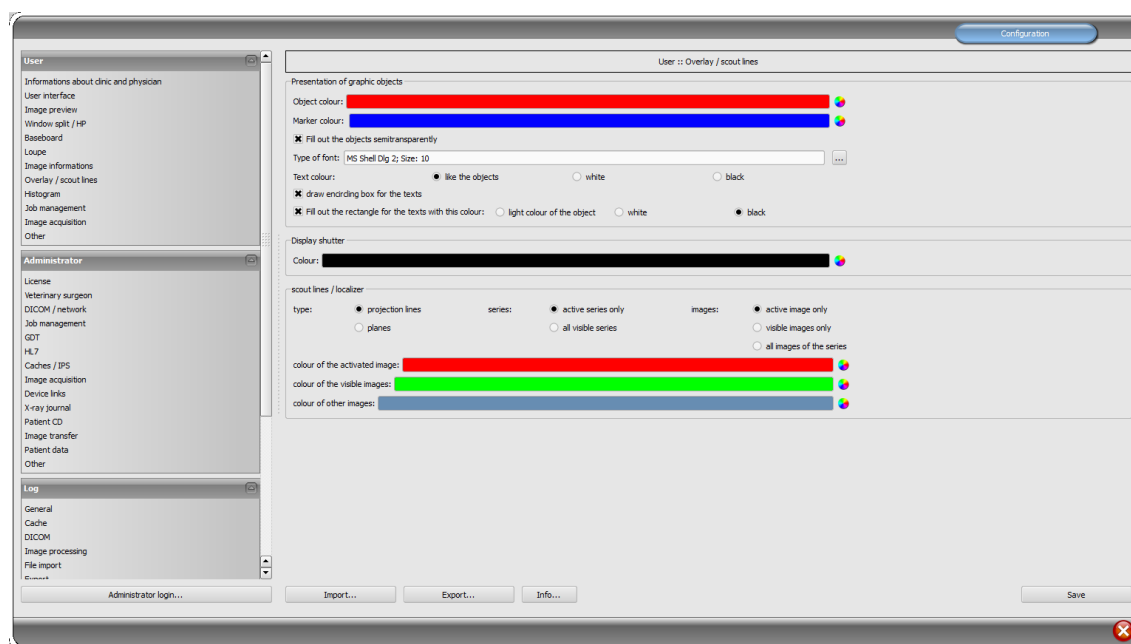
A message appears that first all images of the active patient are to be saved or rejected. The patient cannot be exchanged and the program cannot be closed as long as unsecured images exist.

What happens if the system crashes during acquisition process?

Restart the application. If you are not sure that a possibly initiated saving process has been successfully completed, activate the patient from the patient management and check the images of this patient.

To restore still unsaved images, open the list of backups and check whether the image resp. images exist as a backup. If yes, import the backup for the correctly selected patient and resave the images. If there is no backup, click the button for image acquisition and a dialog box shows up that allows you to reload these images. Afterwards, the possibly existing image data are imported and can be saved normally. If no image data are imported, please refer to the user's manual of the device, how to restore the image data. Also contact your system administrator (service) if necessary.

19 Configuration



There is a central place for the program configurations. The configurations and also the different log outputs are thereby divided in adequate groups user, administrator and log. Configurations for the group administrator are modifiable only with the administrator rights. The administrator must log in at each selection of these components using the „Administrator login...“. Users, which are logged in as administrators, can load the full configuration or it's part from INI file or save in such a file by using „Import...“ or „Export...“. By using the switch „Info...“ the information on product can be displayed.

Following settings can be made in the configuration:

- **Information on clinic and physician**

Institution: name of a clinic, hospital etc.

Address: location of the clinic

Physician name: name of the physician of this station

Physician number / company identification number: identification number of the physician in the case of clinics or company identification number (may be empty)

- **User interface**

Monitor: settings and placement of monitors. If you are using multiple monitors, the specific components of the individual settings can be displayed on all or only on certain monitors – histogram and EasyReport can be turned off on all monitors (including also acquisitions and the job table, when the acquisition module is inactive) – the patient management tab can be displayed on only one screen – you can adjust the placement of monitors



Multi-monitor module is covered by an additional license and requires separate launching – after launching, the number of used monitors depends on the installed hardware – without a license digipaX can only be displayed on one of the available monitors

Design: different possibilities for presentation

Position of toolbars: for the monitors in portrait mode the placing on the left is recommended – this happens automatically or can be determined explicitly (displaying toolbars must be activated for each screen)

Toolbox height (window placing): for the monitors in portrait mode a short toolbox and wider bottom working bar (histogram) is recommended – this happens automatically or can be determined explicitly

Font: setting up font size and type for descriptions of the buttons and windows as well as for tables, tips and information etc. in the program

Symbol size: setting up symbol size on the program buttons

▪ Image preview

List view preview tree: selection of tags, according to which the images are to be sorted, sorting direction and definition of a displayed text in image nodes (the same principle as for information on image)

The following tags can be used for sorting or displaying:

0x0008, 0x0016	SOPClassUID
0x0008, 0x0018	SOPInstanceUID
0x0020, 0x0013	InstanceNumber
0x0008, 0x0023	ContentDate
0x0008, 0x0033	ContentTime
0x0028, 0x0008	NumberOfFrames
0x0008, 0x0022	AcquisitionDate
0x0008, 0x0032	AcquisitionTime
0x0028, 0x0002	SamplesPerPixel
0x0028, 0x0010	Rows
0x0028, 0x0011	Columns
0x0028, 0x0101	BitsStored
0x0008, 0x0008	ImageType
0x0054, 0x0400	ImageID

Drop-down mode: expand latest study: only images of the latest study are being expanded; expand all: after a patient is selected, all study nodes and image series nodes

are being expanded in the tree structure, in this way all images of the patient are displayed in the preview; collapse all: all study nodes are being collapsed and no image preview is displayed – it will be directed the study and image series selected, which is to be viewed; automatically: without activated latest study node is expanded and all thumbnails are displayed, if image record is activated the study nodes are closed and only newly created study is being expanded

new studies first: sorting order in the thumbnail preview so that the latest studies are displayed on the top; old studies first: sorting order in the thumbnails preview so that the oldest studies are displayed on the top

Display mode image series: alternatively, all images of one image series are displayed in a preview tree or only one image of the series is displayed (this is adjustable separately for each type of image) – first select on the left an adequate modality, i.e. CT, and then on the right, which settings for this type of image are to be applied (all images or only the first, middle or last image of the series)

Others: loading study structure in the background that upon recall of a patient retrieval of the nodes (studies, series and images) runs in the background and the system is ready sooner (if this option is deactivated, the retrieval of all DICOM information is conducted first before a display in the preview tree is generated)

▪ **Window split / HP**

Activating: the series of the most recent study are automatically displayed in the image viewer at opening of a patient; window is automatically split by default and each series is „hang-up“ in a subwindow: when double-clicking on the node of the study, the series of this study are hang-up either and the window split is adjusted automatically, if the Hanging Protocols module is enabled, it is checked as the first step, whether the protocol for the type of images of this study is defined – if yes, the images are automatically presented according to the defined protocol; the same happens when the study is double-clicked

Monitor: when using the MultiMonitor module you specify here, which monitor the option of automatic hanging up is to be activated for

Select modality: for each modality an individual setting can be selected

Window split: automatically means that the window is split automatically correspondingly with the number of the series that are to be displayed, otherwise the image viewer is split always in the lines and columns set up and the images of the series are displayed therein

Hanging Protocols: color selection for the description fields of the images of the current or selected study, and color selection for the description fields of the prestudy; font type setting for the description fields of images; when ticked the description of the appropriate images or images list is additionally displayed

▪ **Baseboard**

Monitoring: with the tick mark monitoring for this drive can be switched on or off; select any directory for the drive on the disc, which is to be monitored (this can be also network path); with the prefix a displayed text in the baseboard can be proceeded; if the free capacity of the drive exceeds a critical value, a warning is emitted once a session, if the ca-

capacity is lower than the double critical value, the value is signalled in red, otherwise normally black

Update interval: interval in seconds, in which the displayed free storage space is to be updated

▪ Loupe

Rectangle: usage of a rectangle loupe in the viewer with the specified pixel measures or automatic size

Circle: usage of a circle loupe in the viewer with the specified diameter or automatic size

Automatic size: width and height of the rectangle or diameter of the circle will be set for a third of a current window width or window height of the image window, depending on that which value is smaller

Zoom factor: zoom factor for the image cut out, which is presented in the loupe (referring to original image)

▪ Information on image

Text colour: colour with which the information in the image corners is to be shown

Font type: font type for presentation

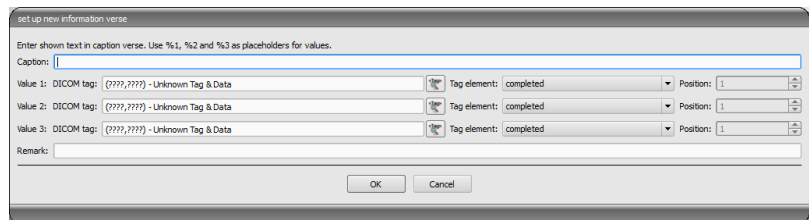
Zoom factor: with it font type can be adapted (font size adapts also automatically to window size)

Shaded: the writ can be possibly poorly seen on the images with the white background, so with this option a shadow can be backed – if the images are black or dark, this is not hardly seen

Group elements: for each type of image (modality) you can determine which information is to be shown in the overlay corners. First select the desire type and next the option

„use these settings“, if the default settings are to be used. Click into the desired box, in order to determine the corner of the displaying and next

the switch „new entry in active field“, in order to add an element to this box. In the caption row you can enter any desired text, which should appear on the images. Use %1, %2 and %3 as „Variables“ (place holders). These will be exchanged by the defined DICOM tags in the display. You can also let display only a part of the tags if needed, i.e. a part of the person name or the value at the determined place for tags, which allow many values (multiplicity). By a double-click into the entry in the list fields or with the switch „process active entry“ you can delete these. Use the switch „delete active entry“, in order to remove this from the list. If you want to move or copy the entries within a list field or between the list fields, you can move these with the pressed left mouse button (drag & drop). For this, hold the Shift key pressed on, in order to move the entry. Without Shift this will be copied.



▪ Overlay / scout lines

Presentation of graphic objects:

Object colour: colour for drawing graphic objects

Marker colour: colour of markers (corner and end points, central points etc.) for editing the objects

Fill out the objects semitransparently: while drawing filled out image objects, these will be drawn semitransparently, if this option is activated, so that you can recognize the image behind it, otherwise they will filled out fully with the above colour

Font type: font type, which is to be used for text objects

Text colour: with the above selected colour, white or black

Draw encircling rectangle for texts: if this option is activated, an encircling rectangle for the texts in the above selected colour for graphic objects will be drawn; thereby these can be better read in certain circumstances

Fill out rectangle for text with this colour: if this option is activated, the encircling rectangle for text objects will be filled out with the selected colour (the above selected semitransparency will be also used), otherwise the rectangle will not be filled out and the image will be seen; the same colour can be used like for the objects (lighter), white or black

Display shutter:

Colour: the colour, with which the hidden areas are to be overlaid

Scout lines / Localizer:

Type: "Projection lines" – with this option, only intersection lines of the images resp. projections of edges are presented; "Plane" – with this option the images are shown as sectional plane three-dimensionally.

Series: "Only active series" – with this option, only projection lines resp. planes of an active series are shown; "All visible series" – with this option projection lines resp. planes of all visible series are shown – **Please note:** This option works not until the option "visible images only" or "all images of the series" is activated.

Images: "active image only" – with this option, only projection lines resp. planes of an active image are shown; "visible images only" – projection lines resp. planes of all visible images are shown; "all images of the series" – all projection lines resp. planes of all visible images of all series are shown.

Colour of the activated image: colour of the scout lines of the active image (pane)

Colour of the visible images: colour of the scout lines of other (inactive) panes

Colour of other images: colour of other (invisible) images

▪ Histogram

Shorten left and right: with this options, the values in the left and right edge of the histogram will be set on the maximum value between them, so that the display of the whole histogram is well possible in the window. If the important areas will be thereby cut off or the values between these limits are still presented too small, the size can be accordingly reduced or enlarged.

Smooth histogram for display: smoothes the histogram for displaying with the set number of runs. The images will be not smoothed thereby. This is used only for better presentation of the histogram.

Values: on the x-axis only the values will be shown, which are actually used in the image, or all values, which could appear based on the colour depth of the image

- **Job management**

Fields of the job management: select all fields, which you want to use during the work with the jobs. Deactivate the fields, which you do not want to use.

Use colour-marking of the fields: if this option is activated, the data fields will be backed in the different application ranges according to their meaning. If this option is deactivated, no colours will be used (white).

- **Image acquisition**

Delete worklist job: deletion of jobs asking the user or automatically after image/image series storing or the jobs are not deleted

Status message saving: setting the message display time duration (in seconds) or entering 0, if message shall be not displayed (status message displays information on conducted operations for the just stored image)

Backups: number of the backups which are to be created (the oldest one is always deleted, when this number is exceeded)

Pregnancy status: when acquiring an image, a pregnancy status field is shown and a dialog box for pregnancy status inquiry is displayed if the status has not already been given (for more information please refer to Section 14.1)

Job number: this feature activates during an image acquisition an additional field for manual input or correction of a job number and saves these modifications in the image in the DICOM tag Accession Number

Markings: activating markings; selecting image types of virtual characters; setting font type for free texts

Automatic image transformations: for each new acquired image these transformations are made automatically

Learning function: if „learn Window Level“ is used the system learns the settings for windowing when acquiring an X-ray image (for each acquisition type separately) and uses them for the next acquisition. If “learn exposure parameters” is used the system memorizes the generator settings for the exposure (kV, mAs) for the organ and the beam path, and enters them automatically in the input fields in the future

Image acquisition button: it is possible there to set another description and another symbol for X-ray image acquisition.

- **Others**

Archive data: after opening the program this setting is used for retrieving the list of patients (Initializing) and if an update of the data is needed

Mouse function windowing: synchronic with the below displayed histogram or transposed, in order to retain the usage from another system

MagicSharp filter: minimum and maximum values for MagicSharp filter can be limited (in this ways, strong tile effects can be avoided), contrast enhancement can be activated automatically with the amount defined here using the mouse function

Scroll mode images: images can be changed with mouse scroll or the “Page up” and “Page down” keys. This setting specifies, whether thereby only one image series can run, change also over the limits of an image series can follow and therefore all images of an study can run or even over all images of a patient, so over the limits of an study to the next study

Presentation of zoomed images: if this option is activated, the pixels will be zoomed in and no smoothing follows (the images operate pixelated, details can be seen better in certain circumstances); if the option is activated, the strongly enlarged images will be smoothed (the images operate milder; details can blur in certain circumstances)

Presentation of marked images: showing or not the blur for marked images (if not, only a red point in the top right corner)

Information / messages: for some actions the tips in a small window in the bottom right monitor edge are output – display duration can be set here or these messages can be deactivated completely

Units of measurement: use this option to set whether the measurement values to be used are in "mm/mm²", or "cm/cm²"


Patient management/ additional search field: when this option is activated, two additional search fields for the name and patient-ID are available in the patient management in that, by entering the first letters or digits of the surname or ID you can jump over directly to the required patient in the table

Patient management/ maximum number of match results: setting of the maximum number of data records that will be displayed at archive query (standard value is 500, a too high value may slow down the archive query); when this option is deactivated, all match results are shown

For the view of the log outputs select in the group „log“ the desired category. After that the log outputs of this category are displayed on the right of the window. The outputs in the log window can be marked with the mouse and Ctrl + A and copied to clipboard with Ctrl + C. Then they can be inset again and also saved there in any editor. Moreover, a log file global.log is led in the installation directory, in which all activities of the application are minuted.

20 Exiting the software

20.1 Exiting the program

You exit the program with the symbol  in the top right corner of the headline or with the red X in the Windows frame for closing the main window (depending on configuration). Thereby the application is minimized only to a System Tray Icon, which you find on the bottom right (red X as a symbol), unless otherwise set by the administrator. The application is still active in the background and can be opened again via context menu of the System Tray Icon. Via this context menu the application can also be explicitly completely exited.

You can safely let the application run in the background and do not have to exit it before you shut down your computer.

If you hold any of the control keys (Shift, Ctrl or Alt) pressed on while closing the main window (red X in the top right corner), then the application will be immediately completely closed and not reduced to the System Tray Icon. The same happens if closing with Alt + F4.

20.2 Hardware shutdown

It is necessary for full system shutdown to disconnect devices and computer from power supply. The disconnectable power output strips may be used for this purpose.



The Windows system must be correctly shut down prior switch-off of the computer. Otherwise, system may be damaged and become useless.

21 GDT interface

GDT identification: GDT-D-11

Anytime, so as well at the program start as during the operation, a GDT file can be forwarded to the program. The forwarding follows thereby in the set communication directory and in the set format. The settings are made by your administrator.

GDT record type	Action
6301: delivery of master data	<ul style="list-style-type: none"> patient to the GDT file forwarded is set up locally, if he does not yet exist in the set image archive at the program start or if no other components are opened, the patient management will be opened
6302: request for a new study	<ul style="list-style-type: none"> first, a patient is set up locally, if he does not yet exist in the system next, he will be selected for work at the program start or if no other components are opened: <ul style="list-style-type: none"> A) only the patient is activated, if the module image record is activated and the record thereby is performed directly at this or B) a worklist component has been started and a dialog box for creating a new job is activated, if the image record is not activated or the application has been started with /w as a parameter
6311: show study data	<ul style="list-style-type: none"> patient is also here first set up locally, if necessary and selected no component is started, but all available studies of this patient are displayed in a preview tree and can be viewed immediately in a viewer the first image of study is displayed (if a date of study has been forwarded and an study with this date will be found) the component patient CD is loaded if the application was started with „/pcd“ parameter

Data can be also passed back to other systems, i.e. when the study is ready. This follows also via GDT files in the set communication path.

22 Veterinary version

The system can operate as a veterinary version. Thereby the special settings will be made by your administrator and you can work with animals as patients. Thereby data of animal and its owner will be recorded, modified and displayed as your patient data.

Hereafter the parts of the program are explained, which change by doing this. Basically structure of the program stays the same.

Note: saving data of animals is not provided by international DICOM standard (on which the architecture of the system bases). Hence the special settings will be made by your administrator, in order to save the values of other DICOM tags. The images, which will be recorded in this way, are therefore not or only conditionally „compatible“ with other systems (i.e. animal name or animal species will not be displayed correctly in another system or its value will appear in another place in the system). However, operative performance of the systems is not endangered.

22.1 Patient management

The table of patients contains the following columns: animal name, owner`s name, animal species, patient ID, owner`s date of birth and data source.

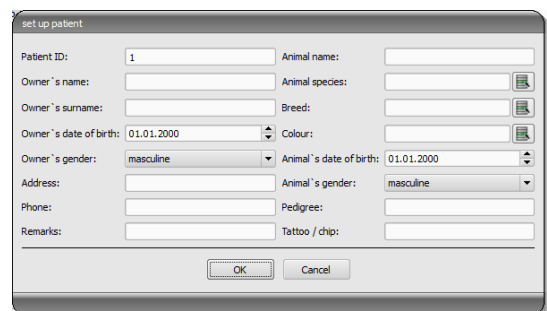
The following search fields can be used, in order to search for a patient in the table: animal name, owner`s name and patient ID.

For the data source „image archive“ it cannot be filtered by sex of a patient, like in a normal program version, but by animal species. Enter animal species in this input field, like you use it also for recording the animals and next use the button „Query“, in order to update the table of patient.

While recording or modifying the patients as well owner`s data as animal data are queried. Maybe some fields are not available on your system.

These have been disabled by your administrator, as they are irrelevant and the system is easier in operating.

While sending images to image archive, the data in the veterinary version cannot be manipulated.



22.2 Job management

In the table of patients of the upcoming jobs animal name (owner`s name), animal species and number of received images, if necessary, are displayed. So, the owner`s name is in the brackets behind the animal name. In the detailed view for a job the further animal data are shown.

The dialog box for creating job does not show an image for organ selection, unless separately established. Entering data follows therefore fully manually as a text.

22.3 Special measurements (Vet)

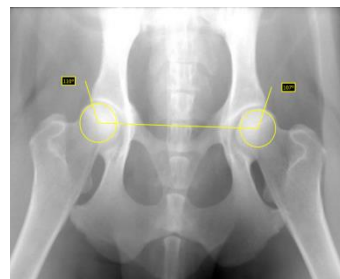
HD (Hip Dysplasia)

Measurement of Norbert angle

X-ray image: ventrodorsal view of hips (rear limbs fully stretched)

When doing this measurement, graphic objects are automatically placed in the image first. These objects are to be adjusted to the image accordingly. In order to do this, drag the circles over femoral heads first and then the lines to the corners of the acetabulum.

The angles are automatically updated and displayed in the measurement fields.



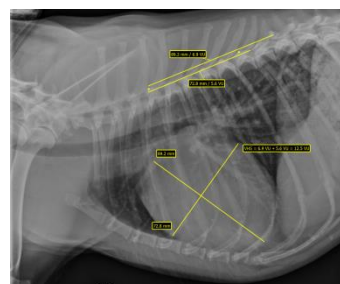
VHS (Vertebral Heart Score)

Evaluation of cardiac size

X-ray image: thorax lateral (image done at the inspiration)

Drag the line for longitudinal axis of the heart and the other line for width of the heart. Thereafter set a point on the cranial edge of thoracic vertebra (T4) and a point on the cranial edge of thoracic vertebra (T9).

Lengths of the heart axes are drawn in the vertebral column. The measurement results are expressed in vertebral units (VU).

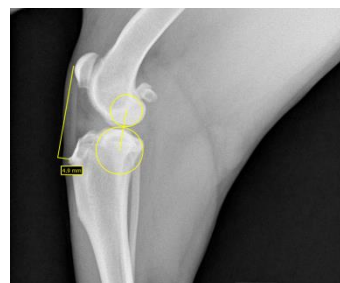


TTA (Tibial Tuberoses Advancement)

Determination of TTA distance

X-ray image: lateral image of a knee

Place by a single click on the left mouse button a central point of the circle on the femur and then by a next click a central point of the circle on the tibia. Thereafter place a point at the patella top and a next one at the tuberositas tibiae. Finally correct the circles and points. The circles should touch each other.



TPA (Tibial Plateau Angle)

Determination of tibial plateau angle for TPLO (Tibial Plateau Leveling Osteotomy)

X-ray image: lateral image of a knee with hock

Place one point on the cranial and one point on the caudal edge of the tibial plateau and then two points for the line through eminentia intercondylaris and a central point of the talus.

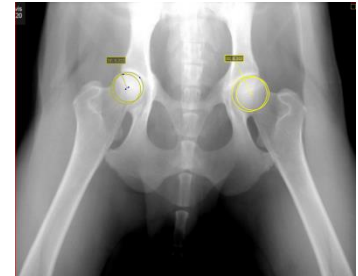


DI (distraction index) for PennHIP testing method

The distraction index is a ratio of the linear distance between the centre of the femoral head and the centre of the acetabulum to the radius of the femoral head.

X-ray image: hip ventrodorsal (X-ray in distraction)

Place each of circles up to the edge of the femoral head and the acetabulum. Start from each centre on and drag up the circle.



22.4 Print

For print, a standard header is accordingly adapted. Always a patient ID is shown. The remaining values depend on data fields, which are activated in configuration. If animal sex has been activated by your administrator, this row will be output with the standard header at the printing.

22.5 Patient CD

If you have selected the option for anonymizing for creating patient CD, first the values will be exchanged like in a normal program version (see 12 Patient CD) and next as follows:

- owner's name: "AnonymOwner" or "AnonymOwner1", "AnonymOwner2" etc. for many patients
- owner's date of birth: 01.01.2000
- owner's sex: O (other)
- animal name: "AnonymAnimal" or "AnonymAnimal1", "AnonymAnimal2"

If the viewer is to be integrated with the patient CD, the setting for veterinary version will be forwarded to it. So, the viewer uses the same settings like the ones used in your system.

22.6 Export

For export an additional option is available that allows for exporting DICOM images in the DICOM veterinary standard (see also 10.2.2.2 Export).

22.7 Others

Information, which will be shown in so called tooltips (short info fields shown with the mouse without clicking it after a short waiting time), contain as well owner's data as animal data. These tooltips are used in the preview tree of the selected patient (left) and in the tree views for studies. The preview tree shows also animal name and owner's name in brackets. Also animal name and owner's are shown in brackets on a baseboard.

23 Enabling LOCALITE OrthoPlaner



Enabling is only possible if the adequate module was activated.

With digipaX, the co-operation with LOCALITE OrthoPlaner software is possible. For forwarding an image to LOCALITE please open it and press an appropriate button in the function field or top right in the toolbar (if it is on). This switch is available only if the module is enabled.



Once you have the processing ready done, send the image into the archive and close LOCALITE. Afterwards update the digipaX data of the patient and a new image will be available

24 Others



24.1 Tables

Many tables can be adapted. By dragging a column head the columns can be changed. By right-clicking into an entry in a head row the columns can be unhidden or hidden in appearing context menu.

24.2 Tooltips

The most buttons, data or configuration fields contain so called „tooltips“. If you move the mouse over a field without clicking it, after short while a small help-window at the mouse position appears. In this way you receive the information on this field – action, which can be performed via this field or meaning of the configuration possibilities.

24.3 Exiting program

You exit the program by pressing the Start button bottom left and then „End“ button or  icon in the right upper corner of the header (if it is displayed) or by pushing Alt + F4 keys. If your system is configured to be minimized only into system tray upon closing, in addition to the actions described you have to push and hold the Shift key or click with the right mouse key on the red  symbol right in the system tray and then on “End”.

24.4 License

The software is protected by a license protection. Activation of the system follows by administrator. The administrator requests a license file from a manufacturer and brings it in into the system.

Product: digipaX

Manufacturer: digipaX GmbH
Arno-Nitzsche-Str. 45
04277 Leipzig
Germany

This product is CE approved: CE 0494

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