

Interface Overview

All reporting modules

ACV 8.0

doc v1



The ASCEND reporting interface is split into two sides. The data entry tabs are shown on the left and recorded findings appear in the viewers on the right. The following examples use an echocardiography study, but the basic interface is the same for all of ASCEND's reporting modules. Let's start by considering the viewers on the right.

The screenshot displays the ASCEND reporting interface. The top navigation bar includes 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below this, a secondary bar contains 'Search', 'Index', 'Prior reports', 'History', 'Study', 'Measurements', 'Calculations', 'Diagrams', 'Minor abnormalities', 'Findings', and 'Report'. The 'History' and 'Findings' tabs are highlighted with red boxes.

History - transthoracic

TTE indications

HPI and indications

Signs and symptoms

- Chest pain
- Dyspnea
- Fever
- Hypotension
- Murmur
- Syncope
- Palpitations

Endocarditis, infections New

- Bacteremia
- Endocarditis

Coronary

- CAD
- Angina pectoris
- Acute coronary syndrome

Myocardial

- CHF
- Cardiomegaly
- Transplant complication
- Primary cardiomyopathy
- Hypertrophic cardiomyopathy

HPI and indications (cont'd)

Pericardial

- Pericardial disease
- Effusion

ECG and rhythm

- Abnormal ECG
- Atrial fibrillation
- Atrial flutter
- SVT
- Cardiac arrest

Valve disease

- Aortic regurgitation
- Aortic stenosis
- Mitral regurgitation
- Mitral stenosis
- Prosthetic valve

Pulmonary disease New

- Pulmonary hypertension

Noncardiac disease

- Chronic hypertension
- Aortic dissection
- Stroke
- TIA

LV function

- Evaluate

LV function (cont)

- Evaluate pre
- Evaluate pos

Past medical history

- Prior MI on date
- MI

Labs, prior procedure

- Prior cath on date
- Prior coronary s
- Prior CABG
- Prior CABG on c
- Prior transplant
- Abnormal ECG

Patient status

- Family history of
- Smoking
- Hypertension
- Diabetes mellitu
- Dyslipidemia

Allergies, diet

- Beta blockers
- Calcium channe

Findings

Summary

- Left ventricle:** The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
- Left ventricle:** There is hypokinesis of the apical anterior and apical walls; moderate hypokinesis of the mid anterior wall.
- [New summary item](#)

Study data

Patient is 70 year(s) old. Patient birthdate: 12/25/1947. Study date: 08/08/2018. White. Birth gender: male. Height: 177.8 cm. Height: 70 in. Weight: 75 kg. Weight: 165 lb. BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm. 120/80 Transthoracic echocardiography. M-mode, complete 2D, and complete spectral Doppler. Outpatient. The patient tolerated the procedure well.

Procedure narrative

Transthoracic echocardiography was performed. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.

Left ventricle

The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.

LV segmental data

Segmental echo data

There is hypokinesis of the apical anterior and apical

The *Findings viewer* is a list of reported findings organized into anatomic and functional sections.

The screenshot displays the 'Findings viewer' interface. The top navigation bar includes 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below this is a secondary bar with 'Search', 'Index', 'Prior reports', 'History', 'Study', 'Measurements', 'Calculations', 'Diagrams', and 'Minor abnormalities'. The main content area is titled 'History - transthoracic' and is divided into several columns of findings.

Findings Report Panel (Right):

- Summary**
 - Left ventricle: The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
 - Left ventricle: There is hypokinesia of the apical anterior and apical walls; moderate hypokinesia of the mid anterior wall.
 - [New summary item](#)
- Study data**

Patient is 70 year(s) old. Patient birthdate: 12/25/1947. Study date: 08/08/2018. White. Birth gender: male. Height: 177.8 cm. Height: 70 in. Weight: 75 kg. Weight: 165 lb. BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm. 120/80 Transthoracic echocardiography. M-mode, complete 2D, and complete spectral Doppler. Outpatient. The patient tolerated the procedure well.
- Procedure narrative**

Transthoracic echocardiography was performed. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.
- Left ventricle**

The cavity size is normal. Wall thickness is normal. ^{Summary} Systolic function is normal. The estimated ejection fraction is 55-65%. ^{Summary} Wall motion is normal; there are no regional wall motion abnormalities. ^{Summary}
- LV segmental data**

Segmental echo data

There is hypokinesia of the apical anterior and apical

The *Findings viewer* also shows content as it is being entered into the system.

The screenshot displays the ASCEND software interface. The top navigation bar includes 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below this is a secondary navigation bar with 'Search', 'Index', 'Prior reports', 'History', 'Study', 'Measurements', 'Calculations', 'Diagrams', and 'Minor abnormalities'. The main content area is titled 'History - transthoracic' and is divided into several columns of medical indicators with checkboxes and expandable arrows.

History - transthoracic

- TTE indications**
 - HPI and indications
 - Signs and symptoms: Chest pain, Dyspnea, Fever, Hypotension, Murmur, Syncope, Palpitations
 - Endocarditis, infections: Bacteremia, Endocarditis
 - Coronary: CAD, Angina pectoris, Acute coronary syndrome
 - Myocardial: CHF, Cardiomegaly, Transplant complication, Primary cardiomyopathy, Hypertrophic cardiomyopathy
 - HPI and indications (cont'd)
 - Pericardial: Pericardial disease, Effusion
 - ECG and rhythm: Abnormal ECG, Atrial fibrillation, Atrial flutter, SVT, Cardiac arrest
 - Valve disease: Aortic regurgitation, Aortic stenosis, Mitral regurgitation, Mitral stenosis, Prosthetic valve
 - Pulmonary disease: Pulmonary hypertension
 - Noncardiac disease: Chronic hypertension, Aortic dissection, Stroke, TIA
 - LV function: Evaluate
 - LV function (cont'd)
 - Evaluate pre
 - Evaluate pos
 - Past medical history: Prior MI on date, MI
 - Labs, prior pro: Prior cath on da, Prior coronary s, Prior CABG, Prior CABG on c, Prior transplant, Abnormal ECG
 - Patient status: Family history of, Smoking, Hypertension, Diabetes mellitu, Dyslipidemia
 - Allergies, diet: Beta blockers, Calcium channe

Findings Report

Summary

- Left ventricle:** The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
- Left ventricle:** There is hypokinesia of the apical anterior and apical walls; moderate hypokinesia of the mid anterior wall.
- [New summary item](#)

Study data

Patient is 70 year(s) old. Patient birthdate: 12/25/1947. Study date: 08/08/2018. White. Birth gender: male. Height: 177.8 cm. Height: 70 in. Weight: 75 kg. Weight: 165 lb. BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm. 120/80. Transthoracic echocardiography. M-mode, complete 2D, and complete spectral Doppler. Outpatient. The patient tolerated the procedure well.

Procedure narrative

Transthoracic echocardiography was performed. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.

Left ventricle

The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.

LV segmental data

Segmental echo data

There is hypokinesia of the apical anterior and apical

The *Report viewer* shows content as it will appear in the final report. The sentences that appear in the *Findings viewer* and *Report viewer* are the same and are editable, although the *Report viewer* also includes headings, tables, and measurements, while the *Findings viewer* does not.

Study - transthoracic

Study data

Patient		
Height (cm)	177.8	
Height (in)	70	
Weight (kg)	75	
Weight (lb)	165	
Heart rate (bpm)	72	
Systolic (mm Hg)	120	
Diastolic (mm Hg)	80	

Study status and location

Patient status: Outpatient
 Study status: Routine
 Location: Procedure room
 Procedure room number:
 Study type: Transthoracic (TTE)
 Study components: 3 items recorded
 Teaching case:
 Teaching case details:
 Changes from preliminary:
 IAC candidate:

Technical notes [not on report]

IAC - echocardiography: Enforce compliance

Procedure

Transthoracic Echocardiography
 M-mode, complete 2D, and complete spectral Doppler

Urgent and Significant Findings

- Left ventricle: The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
- Left ventricle: There is hypokinesia of the apical anterior and apical walls; moderate hypokinesia of the mid anterior wall.
- New summary item

Recommendations: New recommendation

Study data: Race: White. Procedure: Transthoracic echocardiography was performed. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows. Study completion: The patient tolerated the procedure well.

Left ventricle: The cavity size is normal. Wall thickness is normal. ^{Summary} Systolic function is normal. The estimated ejection fraction is 55-65%. ^{Summary} Wall motion is normal; there are no regional wall motion abnormalities. ^{Summary}

Regional wall motion: There is hypokinesia of the apical anterior and apical walls; moderate hypokinesia of the mid anterior wall. ^{Summary}

Aortic valve: The valve is structurally normal. The valve is trileaflet. ^{Summary} Cusp separation is

The data entry forms appear on the left side of the interface and are organized into related groups called **Tabs**. The *History* tab is selected and displayed below.

The screenshot displays the ASCEND software interface. At the top, a navigation bar includes buttons for Undo, Redo, Help, Options, and LEARN. Below this is a secondary bar with Search, Index, Prior reports, and a highlighted History tab. The main interface is split into two panes.

Left Pane: History - transthoracic

- TTE indications**
- HPI and indications**
 - Signs and symptoms*
 - Chest pain
 - Dyspnea
 - Fever
 - Hypotension
 - Murmur
 - Syncope
 - Palpitations
 - Endocarditis, infections**
 - Bacteremia
 - Endocarditis
 - Coronary**
 - CAD
 - Angina pectoris
 - Acute coronary syndrome
 - Myocardial**
 - CHF
 - Cardiomegaly
 - Transplant complication
 - Primary cardiomyopathy
 - Hypertrophic cardiomyopathy
- HPI and indications (cont'd)**
 - Pericardial**
 - Pericardial disease
 - Effusion
 - ECG and rhythm**
 - Abnormal ECG
 - Atrial fibrillation
 - Atrial flutter
 - SVT
 - Cardiac arrest
 - Valve disease**
 - Aortic regurgitation
 - Aortic stenosis
 - Mitral regurgitation
 - Mitral stenosis
 - Prosthetic valve
 - Pulmonary disease**
 - Pulmonary hypertension
 - Noncardiac disease**
 - Chronic hypertension
 - Aortic dissection
 - Stroke
 - TIA
 - LV function**
 - Evaluate

Right Pane: Findings Report

- Summary**
 - Left ventricle:** The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
 - Left ventricle:** There is hypokinesia of the apical anterior and apical walls; moderate hypokinesia of the mid anterior wall.
 - [New summary item](#)
- Study data**

Patient is 70 year(s) old. Patient birthdate: 12/25/1947. Study date: 08/08/2018. White. Birth gender: male. Height: 177.8 cm. Height: 70 in. Weight: 75 kg. Weight: 165 lb. BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm. 120/80. Transthoracic echocardiography. M-mode, complete 2D, and complete spectral Doppler. Outpatient. The patient tolerated the procedure well.
- Procedure narrative**

Transthoracic echocardiography was performed. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.
- Left ventricle**

The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
- LV segmental data**

Segmental echo data

There is hypokinesia of the apical anterior and apical walls; moderate hypokinesia of the mid anterior wall.
- Aortic valve**

The valve is structurally normal. The valve is trileaflet. Cusp separation

Within the tabs, data can be entered into data entry fields that are directly on the tab, or additional content can be accessed by clicking on finding group headings. In this example, *HPI and indications* is a finding group heading. Clicking the heading opens all of the data entry forms and content associated with patient history.

The screenshot displays a medical software interface with a dark blue header and a light grey sidebar. The main content area is titled "History - transthoracic" and contains several tabs: "TTE indications", "HPI and indications", "Pericardial", and "Pericardial disease". A red arrow points to the "HPI and indications" tab. A red box highlights a detailed data entry form for "HPI and indications".

The "HPI and indications" form includes the following sections:

- History source:** Chart and patient
- Signs, symptoms:** Asymptomatic
- Pain, discomfort:** New, Severity: Moderate, Location: Chest, Symptom: Pain
- Peripheral vascular:**
- Other signs and symptoms:** Cardiac/respiratory: Murmur
- Rhythm/ECG:**
- Congenital HD:** New, 1° syndrome: Complex congen
- CAD, ACS, MI:** New, Syndrome: CAD
- Cardiac function, disease:** New, Syndrome: Congestive heart fail

On the right side of the form, there are several dropdown menus for "Cardiac function, disease (cont'd)":

- Resulting CHF: Present
- Valve disease: New, Severity: Moderate, Syndrome: Aortic stenosis
- Pericardial disease: Syndrome: Effusion
- Vascular disease
- Hypertension, renal disease
- Endocarditis, infections
- Pulmonary disease
- Systemic disease
- Neoplastic disease
- Trauma/injury
- Coding and indications

The background shows a "Summary" panel with text such as "1. Left ventricle: The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities."

Tab sets are a group of tabs that represent the work flow for the selected study. The example shown below is the tab set for a complete transthoracic echo study.

History - transthoracic

TTE indications

HPI and indications

Signs and symptoms

- Chest pain
- Dyspnea
- Fever
- Hypotension
- Murmur
- Syncope
- Palpitations

Endocarditis, infections New

- Bacteremia
- Endocarditis

Coronary

- CAD
- Angina pectoris
- Acute coronary syndrome

Myocardial

- CHF
- Cardiomegaly
- Transplant complication
- Primary cardiomyopathy
- Hypertrophic cardiomyopathy

HPI and indications (cont'd)

Pericardial

- Pericardial disease
- Effusion

ECG and rhythm

- Abnormal ECG
- Atrial fibrillation
- Atrial flutter
- SVT
- Cardiac arrest

Valve disease

- Aortic regurgitation
- Aortic stenosis
- Mitral regurgitation
- Mitral stenosis
- Prosthetic valve

Pulmonary disease New

- Pulmonary hypertension

Noncardiac disease

- Chronic hypertension
- Aortic dissection
- Stroke
- TIA

LV function

- Evaluate

LV function (cont'd)

- Evaluate pre-chemotherapy
- Evaluate post-chemotherapy

Past medical history

- Prior MI on date...
- MI

Labs, prior procedures

- Prior cath on date...
- Prior coronary stent on date...
- Prior CABG
- Prior CABG on date...
- Prior transplant on date...
- Abnormal ECG

Patient status, risk factors

- Family history of CAD
- Smoking
- Hypertension
- Diabetes mellitus
- Dyslipidemia

Allergies, diet, and meds

- Beta blockers
- Calcium channel blockers

Findings **Report**

Summary

- Left ventricle:** The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
- Left ventricle:** There is hypokinesis of the apical anterior and apical walls; moderate hypokinesis of the mid anterior wall.
- [New summary item](#)

Study data

Patient is 70 year(s) old.
 Patient birthdate: 12/25/1947.
 Study date: 08/08/2018.
 White. Birth gender: male.
 Height: 177.8 cm.
 Height: 70 in. Weight: 75 kg. Weight: 165 lb.
 BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm.
 120/80 Transthoracic echocardiography.
 M-mode, complete 2D, and complete spectral Doppler.
 Outpatient. The patient tolerated the procedure well.

The *Index* tab is a special tab that gives access to all of the content within the reporting interface, in addition to the major tabs for the different study types.

The screenshot displays the software interface with the **Index** tab selected in the top navigation bar. The **Index** panel is open, showing a hierarchical list of content categories. The **Index** button in the top bar is highlighted with a red box. The **Tables** section in the Index panel is also highlighted with a red box. The right-hand pane shows a **Summary** section with a list of findings, including "Left ventricle" and "New summary item".

Index

- History**
 - HPI and indications ▶
 - Past medical history ▶
 - Labs, prior procedures ▶
 - Allergies, diet, and meds ▶
 - Patient status, risk factors ▶
- Study**
 - Study data ▶
 - Procedure narrative ▶
 - Adverse outcomes ▶
 - Baseline ECG ▶
 - Technical notes [not on report] ▶
 - Urgent and critical findings ▶
 - Referral letter notes ▶
 - Discharge ▶
- Findings**
 - Pulmonary veins ▶
 - Systemic veins ▶
 - Right atrium ▶
 - Atrial septum ▶
 - Left atrium ▶
 - Tricuspid valve ▶
 - Mitral valve ▶
- Findings (cont'd)**
 - Right ventricle ▶
 - Ventricular septum ▶
 - Left ventricle ▶
 - LV segmental data ▶
 - Pulmonic valve ▶
 - Aortic valve ▶
 - Pulmonary artery ▶
 - Aorta ▶
 - Systemic arteries ▶
 - Pericardium, extracardiac ▶
 - Stress data ▶
 - Stress ECG ▶
 - Staged echo imaging ▶
- Conclusions**
 - Impressions ▶
 - Recommendations ▶
- Tables**
 - Stress table ▶
 - Stress summary table ▶
- Content tabs**
 - Pulmonary arteries ▶

Content tabs (cont'd)

- Staged data ▶

Special tabs

- Diagrams ▶
- Measurements ▶
- Calculations ▶
- Prior reports ▶
- Startup macros ▶

Study-specific tabs

- TTE**
 - History ▶
 - Study ▶
 - Minor abnormalities ▶
 - Findings ▶
 - Comparisons ▶
 - Conclusions ▶
- TEE**
 - History ▶
 - Study ▶
 - TEE ▶
 - Conclusions ▶
- Congenital**
 - History ▶

Summary

- Left ventricle:** The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities.
- Left ventricle:** There is hypokinesia of the apical anterior and apical walls; moderate hypokinesia of the mid anterior wall.
- [New summary item](#)

Study data

Patient is 70 year(s) old. Patient birthdate: 12/25/1947. Study date: 08/08/2018. White. Birth gender: male. Height: 177.8 cm. Height: 70 in. Weight: 75 kg. Weight: 165 lb. BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm. 120/80. Transthoracic echocardiography. M-mode, complete 2D, and complete spectral Doppler. Outpatient. The patient tolerated the procedure well.

Procedure narrative

Transthoracic echocardiography was performed. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.

Left ventricle

The cavity size is normal. Wall thickness

Study findings can be entered through the data entry forms located in each tab by selecting items from a combination of **pick lists**, **checkboxes**, or **quick report macros**. **Quick report macros** are indicated by a lightning bolt icon.

The screenshot displays the 'Findings' tab of a medical software interface. The top navigation bar includes 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below this, a secondary bar shows 'Search', 'Index', and a series of tabs: 'Study', 'Measurements', 'Calculations', 'Diagrams', 'Minor abnormalities', 'Findings', and 'Report'. The 'Findings' tab is active, showing three main sections: 'Left ventricle', 'Ventricular septum', and 'Aortic valve'. Each section contains a list of data entry fields with dropdown menus and checkboxes. In the 'Left ventricle' section, the 'Normal, no regional abnormality' checkbox is highlighted with a red box. The 'Aortic valve' section also has a red box around the 'Normal by TTE' quick report macro, which is indicated by a lightning bolt icon. The right-hand side of the interface shows a 'Study data' summary, a 'Procedure narrative', and a 'Left ventricle' summary, all with expandable sections. At the bottom of the 'Findings' section, there is a 'Description' field with a 'New' button and a 'Scroll for additional content' arrow.

Pick lists allow the entry of single or multiple findings into the report. They are designated with a down arrow after the text field. Below is an example of a column of pick lists.

The screenshot displays a software interface with a top navigation bar containing 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below this is a secondary bar with 'Search', 'Index', and several menu items: 'Study', 'Measurements', 'Calculations', 'Diagrams', 'Minor abnormalities', 'Findings', and 'Report'. The main area is divided into two columns of pick lists.

Left Column: Findings

- Ventricular septum (cont'd)**
 - VSD measurements ▶
- Aortic valve**
 - Normal by TTE
 - Prosthesis ▶
 - Prosthesis type: Unspecified
 - Overall impression: Normal function
 - Description ▶
 - Annular calcification: Mild
 - Visualization: Not well visualized
 - Leaflet number: Trileaflet
 - Appearance: Normal thickness
 - Mild sclerosis
 - Sclerosis without stenosis
 - Velocity: Normal
 - Stenosis: Absent
 - Regurgitation: Absent
- Aorta and arteries**
 - Normal
 - Mild aortic calcification
 - Description ▶
 - Visualization: Poorly visualized
 - Size: Normal-sized

Right Column: Findings

- Aorta and arteries (cont'd)**
 - Aortic pathology ▶
 - Coronary arteries ▶
- Mitral valve**
 - Normal by TTE
 - Visualization: Not well visualized
 - Prosthesis ▶
 - Prosthesis type: Unspecified
 - Overall impression: Normal
 - Annulus
 - Leaflets: Normal thickness
 - Bowing, prolapse: Absent
 - Velocity: Normal
 - Stenosis: Absent
 - Regurgitation: No significant
- Left atrium**
 - Normal by TTE
 - Visualization: Not well visualized
 - Size: Normal
- Pulmonary veins**
- Right ventricle**
 - Normal by TTE

Report Panel (Right Side):

- The valve is structurally normal. The valve is trileaflet. Cusp separation is normal. Transvalvular velocity is within the normal range. There is no stenosis. There is no regurgitation.
- Systemic arteries**
 - Aortic root:** The aortic root is normal-sized.
- Mitral valve**
 - The valve is structurally normal. Leaflet separation is normal. Transvalvular velocity is within the normal range. There is no evidence for stenosis. There is no significant regurgitation.
- Left atrium**
 - The atrium is normal in size.
- Right ventricle**
 - The cavity size is normal. Systolic function is normal.
- Pulmonic valve**
 - Transvalvular velocity is within the normal range. There is no regurgitation.
- Pulmonary artery**
 - The main pulmonary artery is normal-sized. The tricuspid jet envelope definition is inadequate for estimation of RV systolic pressure. There are no indirect findings (abnormal RV volume or geometry, altered pulmonary flow velocity profile, or leftward septal displacement) to suggest moderate or severe pulmonary hypertension.
- Tricuspid valve**
 - The valve is structurally normal. Leaflet separation is normal. Transvalvular velocity is within the normal range. There is no evidence for stenosis. There is no regurgitation.
- Right atrium**
 - The atrium is normal in size.

Statements can be inserted into the report by selecting a single finding from a pick list.

The screenshot displays a medical software interface with a 'Findings' panel on the left and a 'Report' panel on the right. The 'Findings' panel is organized into sections: 'Ventricular septum (cont'd)', 'Aortic valve', 'Aorta and arteries', 'Mitral valve', 'Left atrium', 'Pulmonary veins', and 'Right ventricle'. Each section contains various parameters and their values, often with dropdown menus. A red arrow points to the 'Mitral valve' 'Visualization' dropdown menu, which is open, showing options: 'Well visualized', 'Not well visualized', 'Poorly visualized', and 'Not visualized'. The 'Report' panel on the right contains text describing the findings, including sections for 'Systemic arteries', 'Mitral valve', 'Left atrium', 'Right ventricle', 'Pulmonic valve', 'Pulmonary artery', 'Tricuspid valve', and 'Right atrium'. The interface also features a top navigation bar with 'Undo', 'Redo', 'Help', 'Options', and 'LEARN' buttons, and a secondary bar with 'Search', 'Index', 'Study', 'Measurements', 'Calculations', 'Diagrams', 'Minor abnormalities', 'Findings', and 'Report' tabs.

Default entries for pick lists appear as grayed text. A default entry can be recorded with a single click by using the *Return/Enter* icon next to the downward-facing arrow. When a selection is made, this icon becomes a *Delete* icon which, when clicked, removes the corresponding statement from the report.

The screenshot displays the ASCEND software interface, specifically the Findings section. The top navigation bar includes buttons for Undo, Redo, Help, Options, and LEARN. Below this, a secondary navigation bar shows tabs for Study, Measurements, Calculations, Diagrams, Minor abnormalities, Findings, and Report. The Findings section is divided into several categories:

- Ventricular septum (cont'd)**
 - VSD measurements ▶
- Aortic valve** (expanded)
 - Normal by TTE
 - Prosthesis ▶
 - Prosthesis type: Unspecified
 - Overall impression: Normal function
 - Description ▶
 - Annular calcification: Mild
 - Visualization: Not well visualized
 - Leaflet number: Trileaflet
 - Appearance: Normal thickness
 - Mild sclerosis
 - Sclerosis without stenosis
 - Velocity: Normal
 - Stenosis: Absent
 - Regurgitation: Absent
- Aorta and arteries** (expanded)
 - Normal
 - Mild aortic calcification
 - Description ▶
 - Visualization: Poorly visualized
 - Size: Normal-sized
- Aorta and arteries (cont'd)**
 - Aortic pathology ▶
 - Coronary arteries ▶
- Mitral valve** (expanded)
 - Normal by TTE
 - Visualization: Well visualized
 - Prosthesis ▶
 - Prosthesis type: Unspecified
 - Overall impression: Normal
 - Annulus
 - Leaflets: Normal thickness (highlighted with a red box)
 - Bowing, prolapse: Absent
 - Velocity: Normal
 - Stenosis: Absent
 - Regurgitation: No significant
- Left atrium** (expanded)
 - Normal by TTE
 - Visualization: Not well visualized
 - Size: Normal
- Pulmonary veins**
- Right ventricle** (expanded)
 - Normal by TTE

The right side of the interface shows a report preview with text describing the findings for each category, such as "The valve is structurally normal. The valve is trileaflet." and "The atrium is normal in size." A red arrow at the bottom of the Findings section points to "Scroll for additional content →".

Multi select pick lists are used to select more than one item to create a sentence.

The screenshot displays a medical software interface with a multi-select pick list for 'Purpose' in a procedure narrative. The pick list is highlighted with a red box and contains the following items:

- Diagnosis
- Ventricular function
- Valve function
- Pulmonary pressures
- Outflow obstruction
- Pericardial effusion
- Post procedure effusion
- Post pacing intervention
- Post intervention evaluation
- Preoperative diagnosis
- Postoperative evaluation
- Pericardiocentesis
- Myocardial biopsy
- Balloon atrial septostomy
- Pre device closure
- Post device deployment

The interface also shows patient data, study data, and a procedure narrative text area. The procedure narrative text area contains the following text:

Transthoracic echocardiography was performed for diagnosis, ventricular function evaluation, and assessment of valvular function. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.

Special controls in some pick lists let support the entry of date and/or time. They can be used to enter imprecise dates such as 2018, summer of 2018, and August 2018, or exact dates such as 08/08/2018.

The screenshot displays a medical software interface with a dark blue header and a light blue sidebar. The main content area is divided into several sections. At the top, there are navigation buttons for 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below these are 'Search' and 'Index' buttons. The 'History' section is active, showing 'Study', 'Measurements', 'Calculations', 'Diagrams', 'Minor abnormalities', and 'Findings'. The 'Findings' section is expanded, showing 'Past medical history' and 'Study data'. The 'Past medical history' section is further expanded to show 'MI' (Myocardial Infarction) with a 'Date' pick list. The pick list is open, showing a calendar view for August 2018, with 'Aug-08-2018' selected. A red arrow points from the 'Date' field to the selected date in the pick list. The 'Study data' section shows patient information: 'Patient is 70 year(s) old. Patient birthdate: 12/25/1947. Study date: 08/08/2018. White. Birth gender: Male. Height: 177.8 cm. Height: 70 in. Weight: 65 kg. Weight: 165 lb. BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm. 120/80. Transthoracic echocardiography. M-mode, complete 2D, and complete spectral Doppler. Outpatient. The patient tolerated the procedure well.' The 'Procedure narrative' section shows: 'Transthoracic echocardiography was performed for diagnosis, ventricular function evaluation, and assessment of valvular function. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.' The 'Left ventricle' section shows: 'The cavity size is normal. Wall thickness is normal. Summary. Systolic function is normal. The estimated ejection fraction is 55-65%. Summary. Wall motion is normal; there are no regional wall motion abnormalities. Summary. Wall motion score: 1.00.' The 'V segmental data' section shows: 'Segmental echo data Summary.' The 'Aortic valve' section shows: 'The valve is structurally normal. The valve is trileaflet. Summary. Cusp separation is normal. Transvalvular velocity is within the normal range. There is no stenosis. Summary. There is no reauritation. Summary.' The 'LV function' section shows: 'Evaluate Beta blockers Calcium channel blockers'. The interface also includes a 'History - transthoracic' section with 'HPI and indications (cont'd)', 'LV function (cont'd)', and 'Allergies, diet, and'. The 'Past medical history' section includes 'MI' (1 New), 'Arrhythmic' (Sudden death), 'Venous thromboembolic' (Pulmonary embolus), and 'Pulmonary' (COPD exacerbation). The interface also includes a 'Scroll for additional content' button.

Select or Type pick lists support the ability to choose an item from a list or to add a new item via the text field. In the example shown below, *Cardiology Suite* was typed in the text field to specify the study location.

The screenshot displays a medical software interface for a 'Study - transthoracic'. The top navigation bar includes 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below this is a secondary navigation bar with 'Search', 'Index', 'History', 'Study', 'Measurements', 'Calculations', 'Diagrams', 'Minor abnormalities', 'Findings', and 'Report'. The main content area is divided into several sections:

- Study data:** Fields for Patient (Height, Weight, Heart rate, etc.), Study status and location (Patient status, Study status, Location), and Procedure (Study type, Study compo, Teaching cas, etc.).
- Procedure narrative:** Fields for Transthoracic echo (Procedure performed, Purpose, Ultrasound machine, etc.).
- Urgent and critical findings:** Fields for Significance, Finding, Reported by, etc.
- Adverse outcomes:** Field for No complications.

The 'Location' field in the 'Study data' section is highlighted with a red arrow pointing to a 'Select or Type' dropdown menu. The dropdown menu lists various locations: Procedure room, Emergency department, Bedside, Outpatient area, Echo lab, Physician office, Cath lab, ICU, EP lab, CCU, Nuclear lab, ICU/CCU, Stress lab, PICU, Vascular lab, MICU, Operating room, NICU, Recovery, and SICU. The text 'Cardiology Suite' is entered in the text field of the dropdown.

The right side of the screen shows a 'Findings' report. The 'Study data' section includes: Patient is 70 year(s) old. Patient birthdate: 12/25/1947. Study date: 08/08/2018. White. Birth gender: male. Height: 177.8 cm. Height: 70 in. Weight: 75 kg. Weight: 165 lb. BMI: 23.7 kg/m². BSA: 1.93 m². 72 bpm. 120/80. Transthoracic echocardiography. M-mode, complete 2D, and complete spectral Doppler. Outpatient. Cardiology Suite. The patient tolerated the procedure well.

The 'Procedure narrative' section includes: Transthoracic echocardiography was performed for diagnosis, ventricular function evaluation, and assessment of valvular function. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.

The 'Left ventricle' section includes: The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities. Wall motion score: 1.00.

The 'LV segmental data' section includes: Segmental echo data.

The 'Aortic valve' section includes: The valve is structurally normal. The valve is trileaflet. Cusp separation is normal. Transvalvular velocity is within the normal range. There is no stenosis. There is no regurgitation.

Checkboxes are used to toggle the inclusion/removal of a single finding in the report. *Normal, no regional abnormality* is an example of a finding that can be recorded with a checkbox. When this checkbox is unchecked, the corresponding statement is removed from the report.

The screenshot displays a software interface for recording medical findings. The top navigation bar includes 'Undo', 'Redo', 'Help', 'Options', and 'LEARN'. Below this is a secondary menu with 'Search', 'Index', 'History', 'Study', 'Measurements', 'Calculations', 'Diagrams', 'Minor abnormalities', 'Findings', and 'Report'. The 'Findings' section is active, showing three main categories: 'Left ventricle', 'Ventricular septum (cont'd)', and 'Aortic valve'. Each category contains a list of findings with associated dropdown menus and checkboxes. A red arrow points from the 'Normal, no regional abnormality' checkbox in the 'Left ventricle' section to the text 'Normal, no regional wall motion abnormalities' in the 'Report' section. The 'Report' section on the right shows a summary of findings, including 'Transthoracic echocardiography was performed for diagnosis, ventricular function evaluation, and assessment of valvular function...' and 'The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities. Wall motion score: 1.00.'

Quick report macros can be configured to record multiple findings with a single click. When clicked, the *Normal by TTE* quick report macro records all of the normal statements highlighted in blue in the *Findings viewer* in the example below.

The screenshot displays the software's 'Findings' and 'Report' sections. In the 'Findings' panel, the 'Left ventricle' section is expanded, and 'Normal by TTE' is highlighted with a red box. A red arrow points from this box to the 'Report' panel, where the text 'The cavity size is normal. Wall thickness is normal. Systolic function is normal. The estimated ejection fraction is 55-65%. Wall motion is normal; there are no regional wall motion abnormalities. Wall motion score: 1.00.' is highlighted in blue. The 'Report' panel also shows other sections like 'Aortic valve', 'LV segmental data', 'Systemic arteries', 'Mitral valve', and 'Left atrium', each with a 'Summary' icon.

The *Findings viewer* and *Report viewer* support bidirectional communication with the data entry forms on the tabs. Clicking on a finding in either of the viewers automatically syncs to and displays the form through which it was entered.

The screenshot displays a medical software interface with a dark blue header containing navigation buttons: Undo, Redo, Help, Options, and LEARN. Below the header is a secondary navigation bar with tabs for Study, Measurements, Calculations, Diagrams, Minor abnormalities, Findings, Findings, and Report. The main content area is titled 'History - transthoracic' and is divided into several columns of medical categories. A red box highlights a 'Signs, symptoms' form for 'Pain, discomfort'. The form includes the following fields:

Severity	Moderate	▼	✕
Location	Chest	▼	✕
Symptom	Pain	▼	✕
Character	Atypical	▼	↔
Associations	Dyspnea	▼	↔
Timing	Episodic	▼	↔
Primary indication			<input type="checkbox"/>

The 'Findings' panel on the right shows a list of findings, with 'Moderate chest pain.' highlighted. A red arrow points from this finding to the 'Signs, symptoms' form. Other findings in the panel include 'HPI and indications', 'Study data', 'Procedure narrative', 'Left ventricle', 'Patient status', 'LV segmental data', and 'Aortic valve'. The 'Procedure narrative' section contains the text: 'Transthoracic echocardiography was performed for diagnosis, ventricular function evaluation, and assessment of valvular function. Image quality was adequate. Scanning was performed from the parasternal, apical, and subcostal acoustic windows.'



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