ASCEND®

HEALTH INFORMATION TECHNOLOGY

ASCEND CV® Reporting Quick Start Guide

Version 7.0

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About This Guide

This guide introduces the ASCEND CV® reporting interface, including:

- User interfaces and controls (displays, forms, buttons)
- Steps in the reporting workflow (opening a study, marking it as ready to be read, recording findings, signing the final report).
- Management of data imported from Hospital Information Systems (HIS) and clinical devices (ultrasound scanners, physiologic devices).

In addition to reviewing this guide, you should review the following documentation:

- Your reporting modules' online Usage Guides, titled:
  Cardiac Catheterization
  Cardiac CT
  CMR
  Echocardiography
  Electrophysiology
  Nuclear Cardiology
  Vascular

which each contain multiple PDF presentations detailing how to use the reporting interface to prepare clinical reports.

Finally, you should consult with your Lab Administrator regarding documentation for the following user interfaces:

- Worklist interface for selecting a study for reporting
- Image review interface for reviewing images associated with a study

If you are a Lab or System Administrator that needs to configure, monitor, and maintain the ASCEND CV reporting application and user rights, then please refer to the separate *ASCEND CV Administration Quick Start Guide*.

Using ASCEND CV

ASCEND CV is a valuable tool but is not a substitute for good clinical judgment. The physician signing a study assumes complete responsibility for ensuring the accuracy and completeness of a clinical report generated using the ASCEND CV software, including reviewing the report before signing it.

Opening a Study for Reporting

The **worklist interface** lists the studies available for reporting. Depending on your system configuration, the worklist interface may be provided by your Hospital Information System (HIS), by your Electronic Medical Record system (EMR), or by ASCEND CV.

The exact steps for opening a study will vary depending on the specific worklist interface. Consult with your Lab Administrator for documentation regarding your system's worklist interface. The ASCEND CV worklist interface is described in *Appendix A* of this Guide.

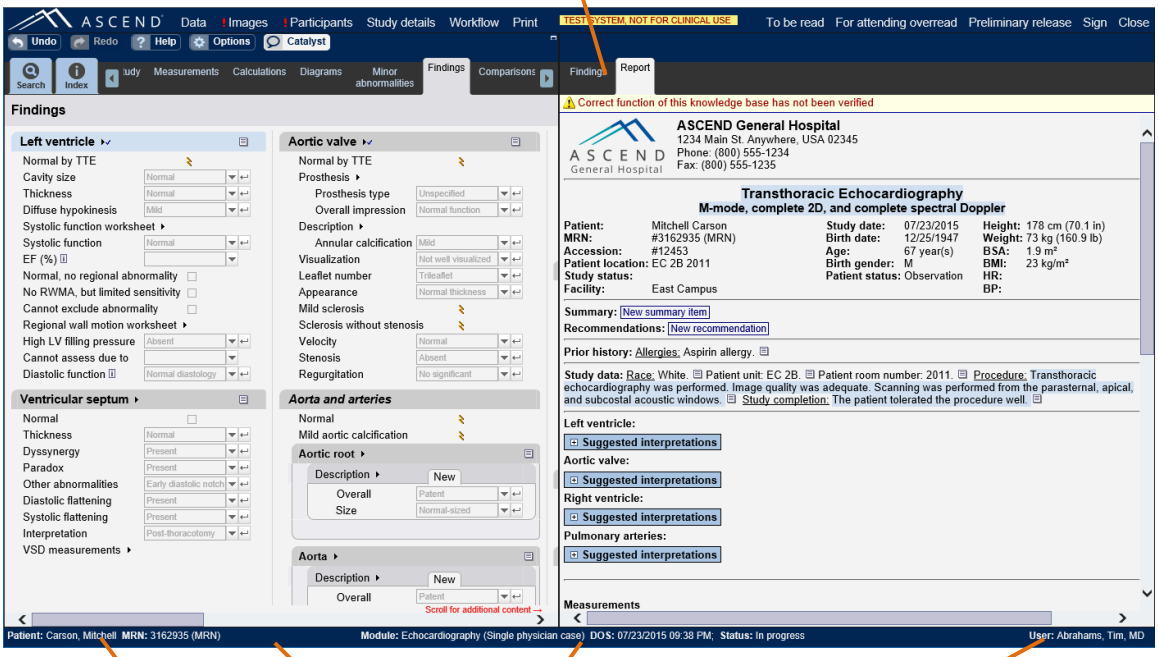
ASCEND CV Reporting Interface

Opening a study from the worklist displays the **ASCEND CV reporting interface**.

Study data toolbar
Review and edit study data

Clinical reporting interface
Review and edit clinical findings

Workflow toolbar
Change study status



Identifies patient

Status bar

Identifies study

Identifies user

Status Bar

The **status bar** at the bottom of the ASCEND CV reporting interface lists key information about the study:

- *Patient*: Patient name and medical record number (MRN)
- *Study*: Reporting module (Echo, Vascular, Cath, etc.), date of service (DOS), and study status
- *User*: Name of user logged into the system

Clinical Reporting Interface

The **clinical reporting interface** occupies the center of the ASCEND CV reporting screen. The tabs on the left side are used to enter data, and the tabs on the right side are used to review the findings in the clinical report.

The data entry tabs, their contents, and the result reporting process will vary depending on the reporting module. The reporting module *Quick Start Guides* describe how to use the clinical reporting interface to prepare clinical reports.

Study Data Toolbar

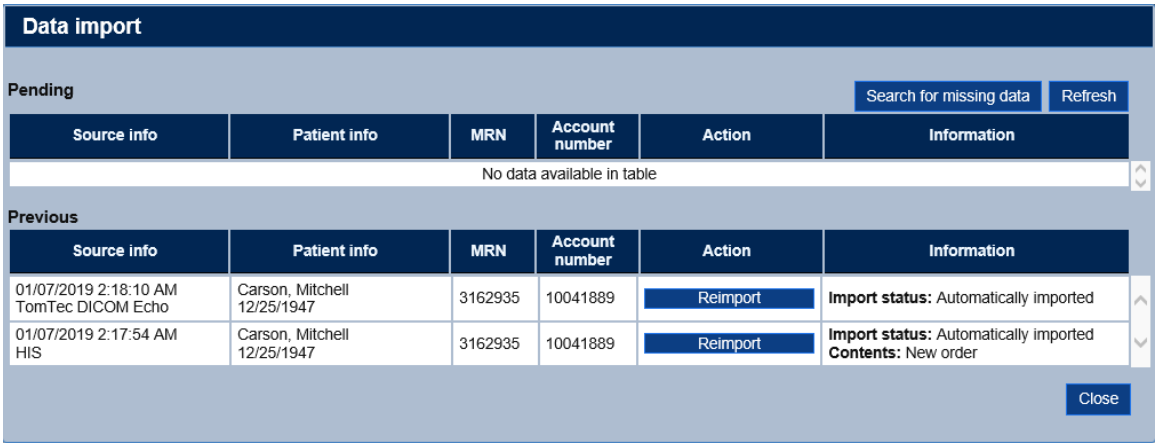
The **study data toolbar** is used to review and edit data related to the study.

Data Button

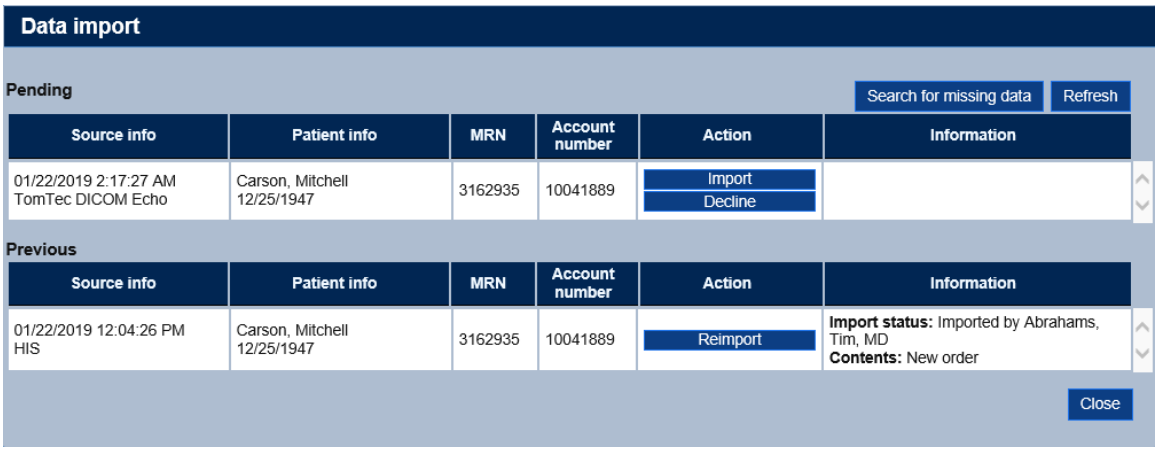
Clicking the **Data** button displays the status of data imported from the Hospital Information System (HIS) and clinical devices, including:

- **Pending**: Data awaiting import into the study
- **Previous***:* Data that has been imported into the study.

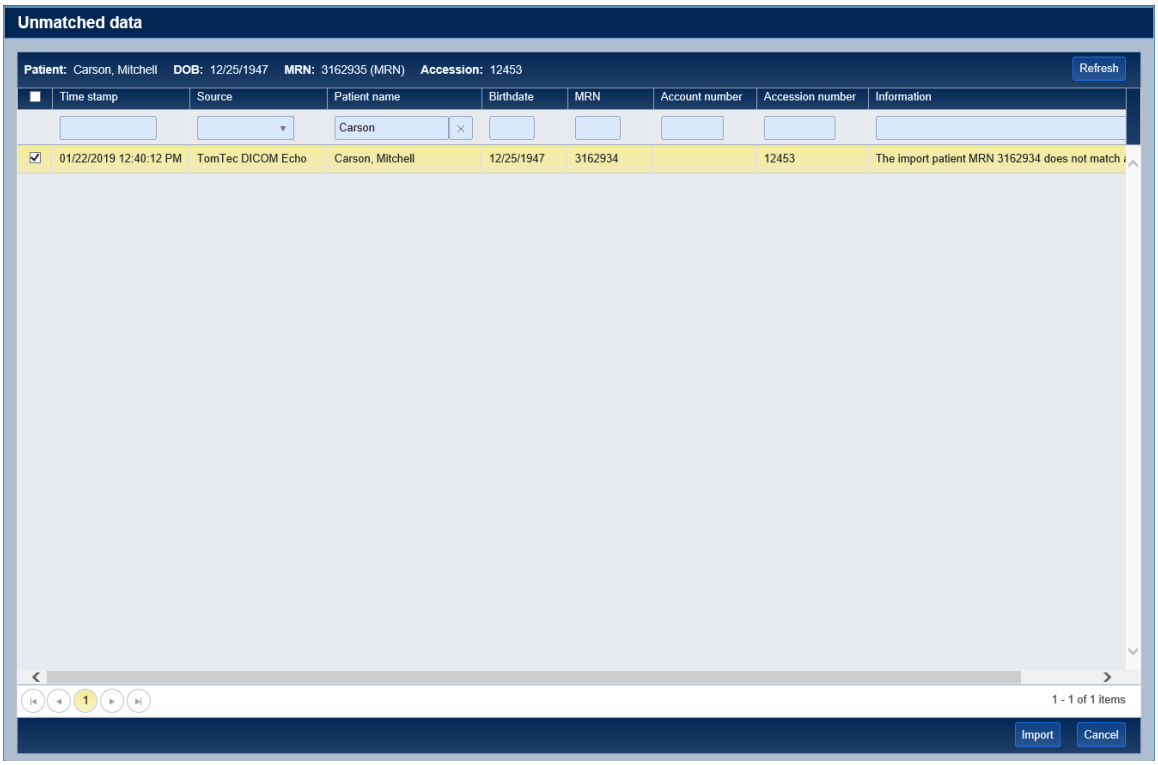
In the example below, an order from the HIS and a set of measurements from an ultrasound machine (TOMTEC DICOM Echo) have been automatically imported.



If the **Data** button is marked with a red exclamation point ! Data, then the study has pending data that has not yet been imported. The example below shows a pending import from an ultrasound machine (TOMTEC DICOM Echo). You should review all pending imports and use the **Import** button to import the data or the **Decline** button to decline import (if, for instance, the data was sent by mistake).



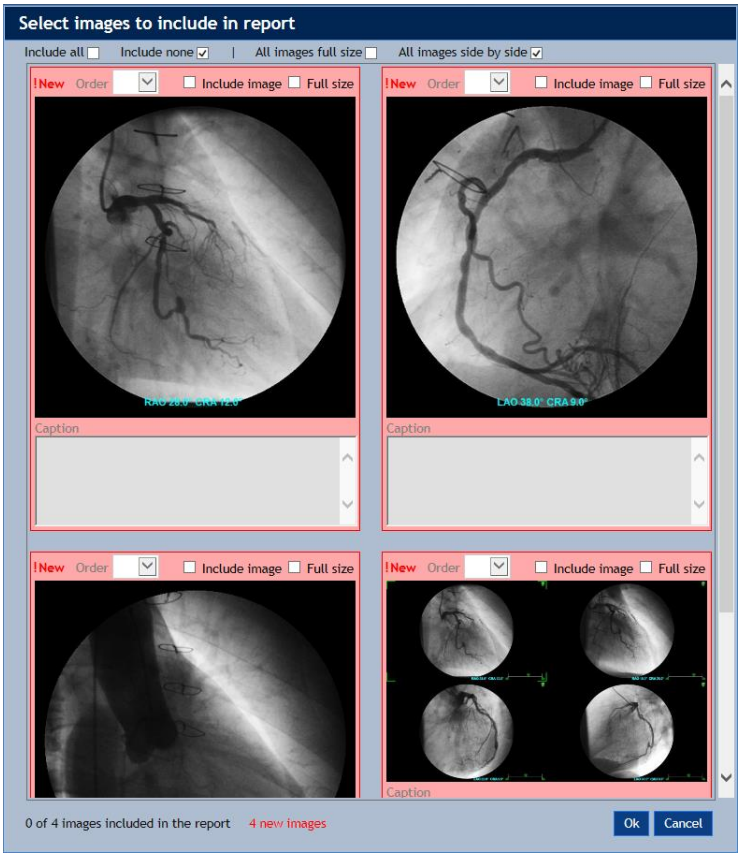
If expected data is not displayed in the pending or previous list, you may search for it using **Search for missing data**.



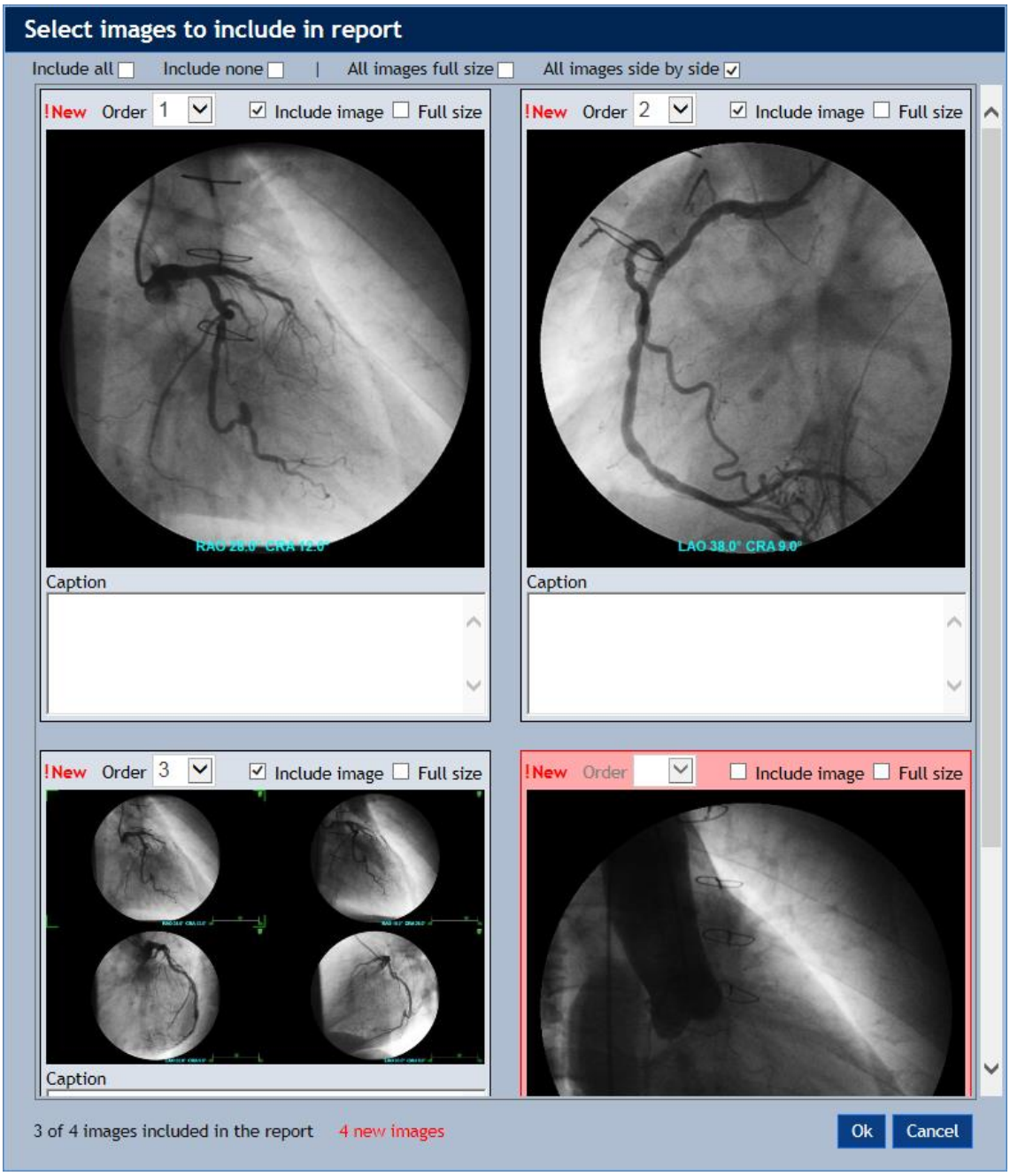
Using this dialog, you can search for the data by Source, Patient name, DOB, MRN, Account number, or Accession number. Select the import(s) that you want to associate with the case and select **Import**.

Images Button

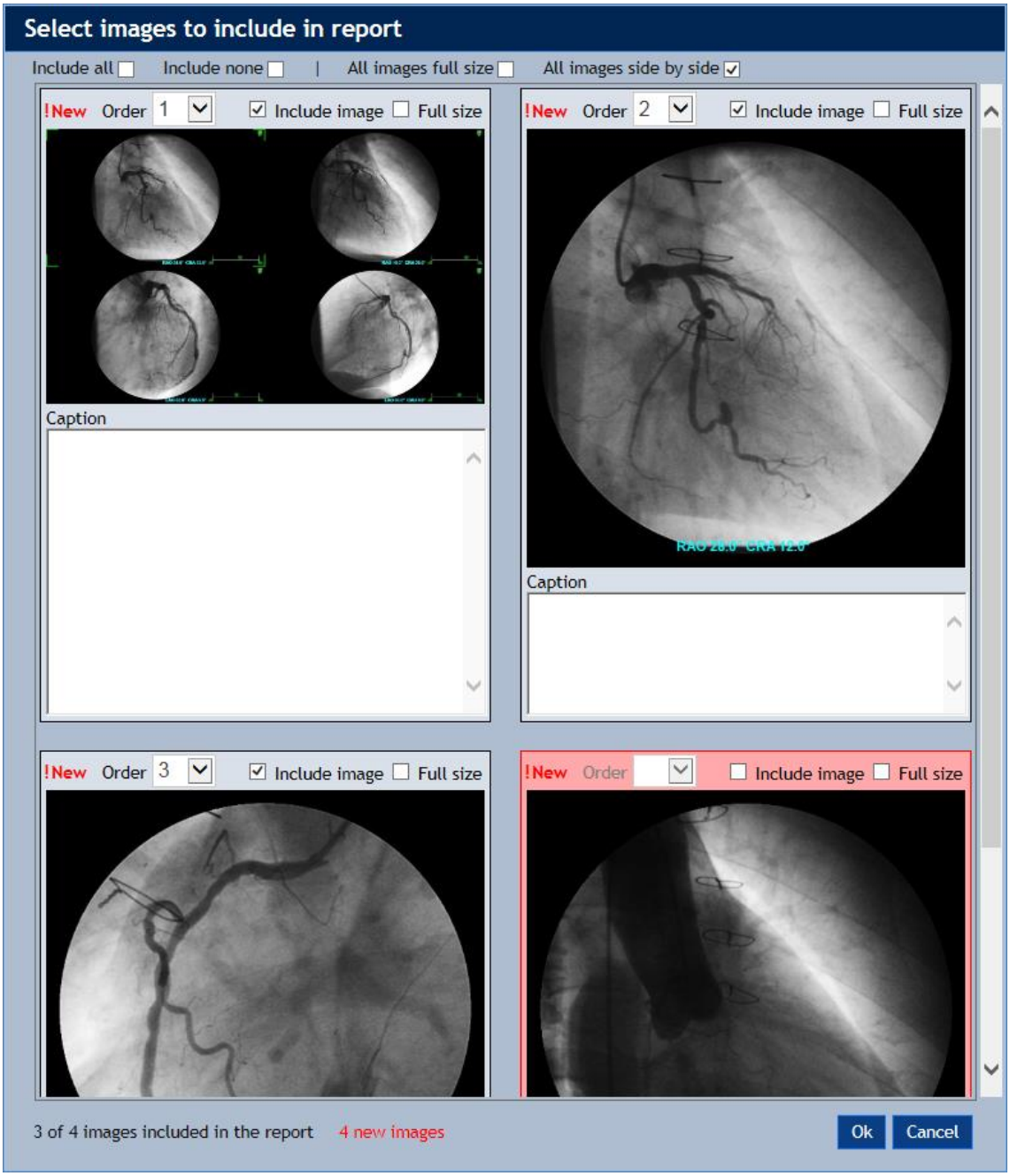
If there are new images, such as DICOM secondary capture, available for selective inclusion in the report, the Images button will display a red exclamation point ! Images. Clicking the **Images** button displays the set of images associated with a study. The example below shows a set of secondary-capture images from a Cath study. Recently added images are displayed within a red frame and include a **!New** marker to make them easy to locate.



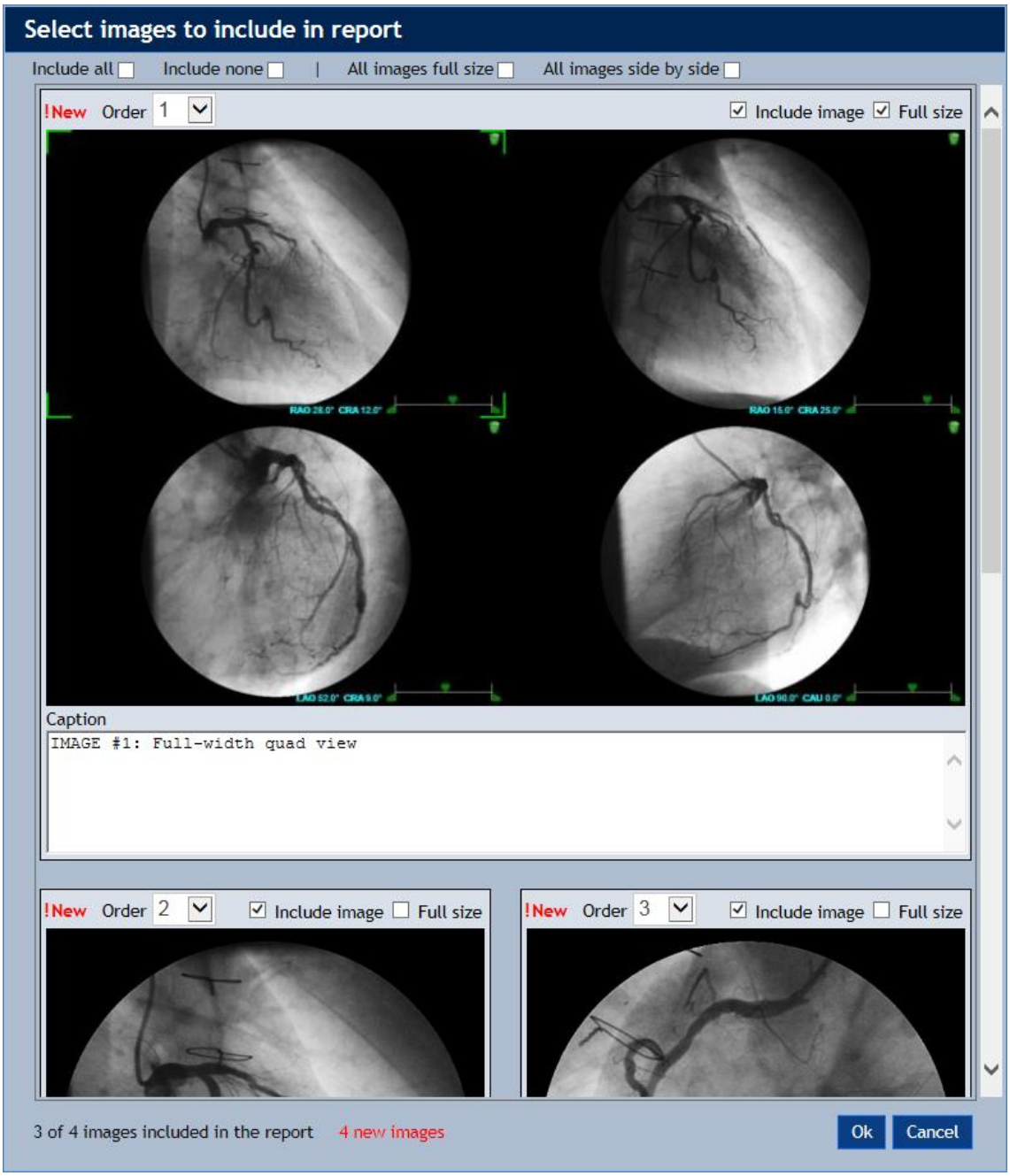
You select the images you want to include on the report using the **Include all**, **Include none**, or **Include image** checkboxes.


Select images to include in report
Include all
Include none
All images full size
All images side by side
!New Order 1
Include image
Full size
RAO 28.0° CRA 12.0°
Caption
!New Order 2
Include image
Full size
LAO 38.0° CRA 9.0°
Caption
!New Order 3
Include image
Full size
Caption
!New Order
Include image
Full size
3 of 4 images included in the report
4 new images
Ok
Cancel

By default, images will be displayed on the report in the order you select them. You can use the **Order** field to change the order. As you change the values in the Order field, the images will be rearranged to reflect your specified ordering.



You can specify the image sizes using the **All images full size**, **All images side by side**, and **Full size** checkboxes, and you can add captions to the images using the **Caption** text boxes.



The display of the images in the report matches their display in the **Images** panel.

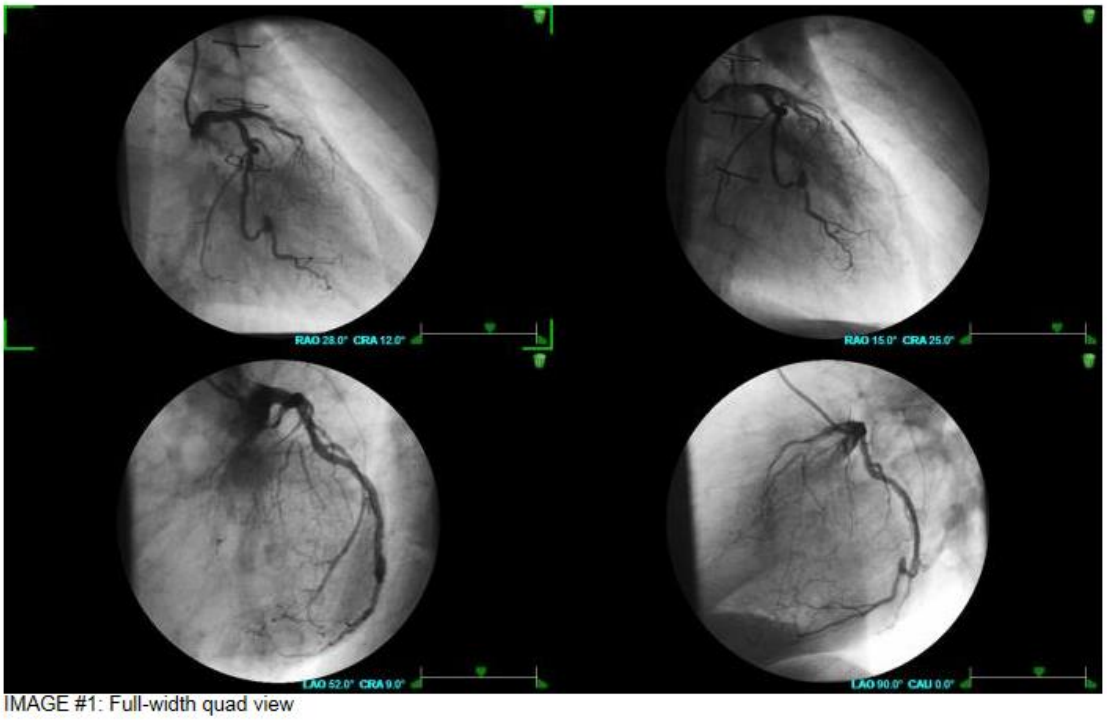


IMAGE #1: Full-width quad view

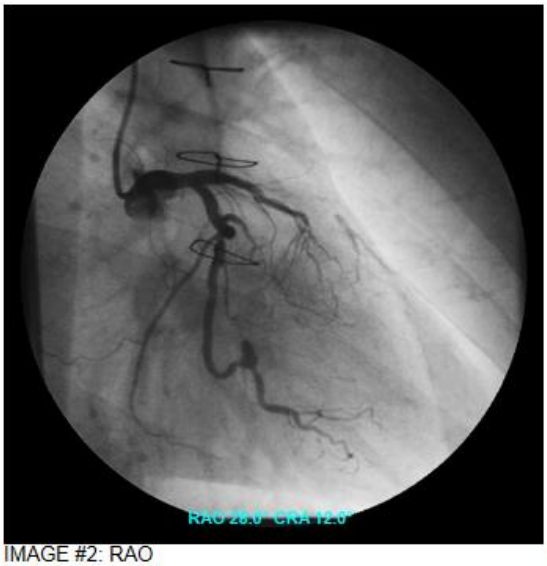


IMAGE #2: RAO

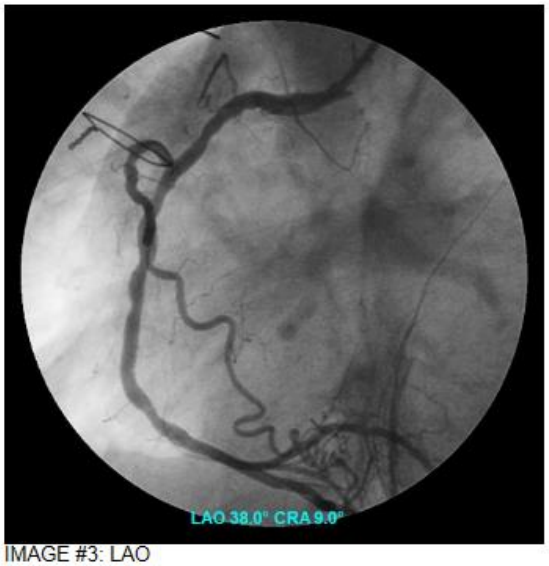
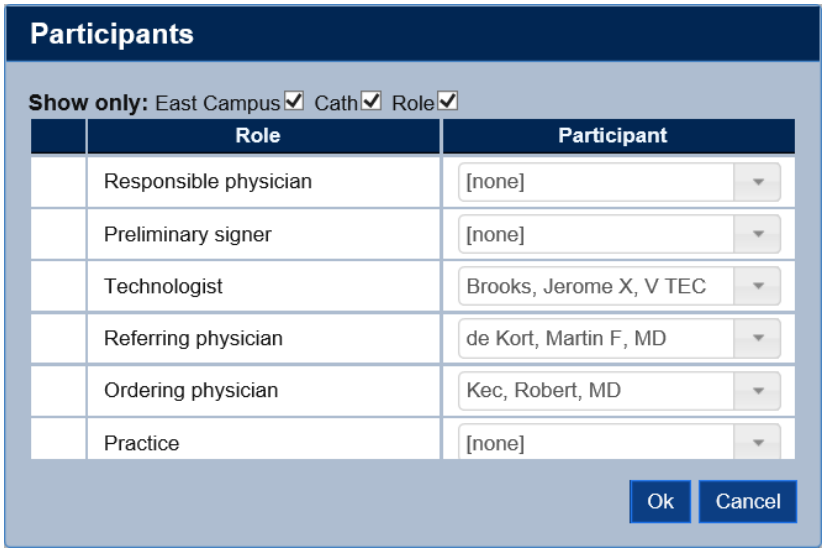


IMAGE #3: LAO

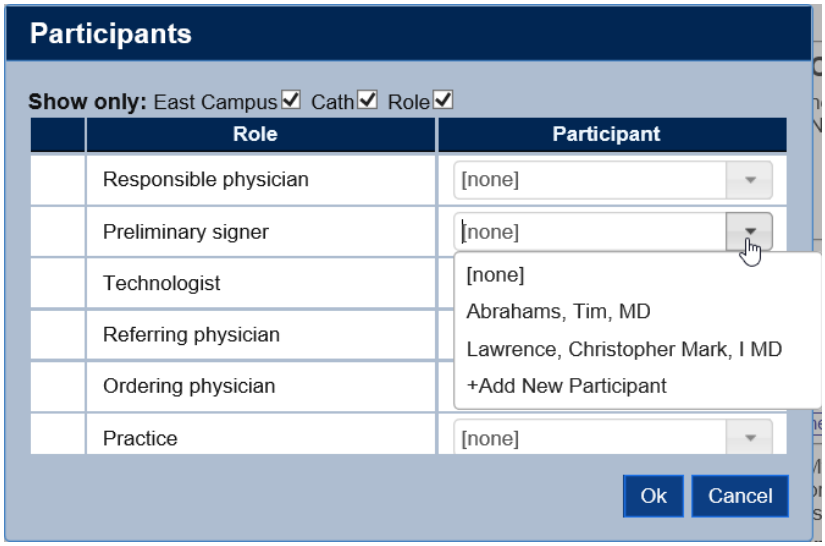
Participants Button

Clicking the **Participants** button displays the set of participant roles associated with the study, including physicians, technicians, and other staff, as well as the practice and the *Responsible physician* (the physician who will sign the report).



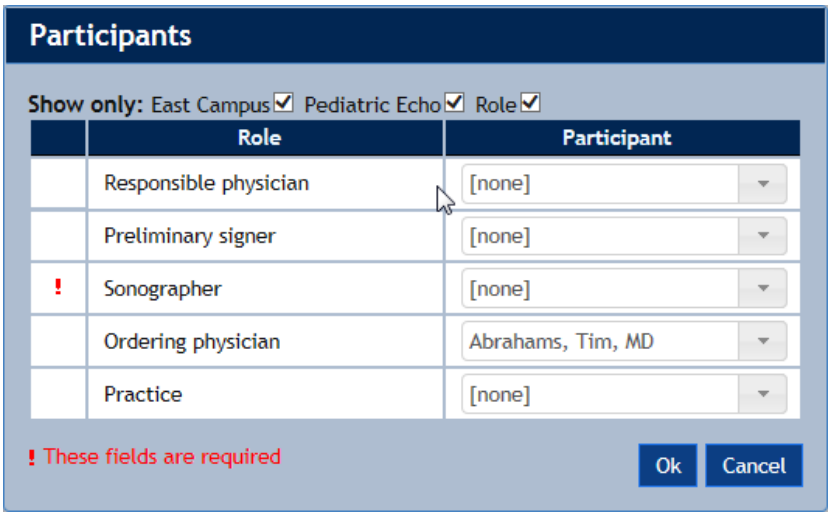
You can use each role's **Participant list** to

- Remove a participant by selecting **[none]** from the list.
- Add a new participant by selecting **+Add New Participant** from the list and entering the new participant's name, ID, address, email, phone number, etc.
- Select one of participants in the list.



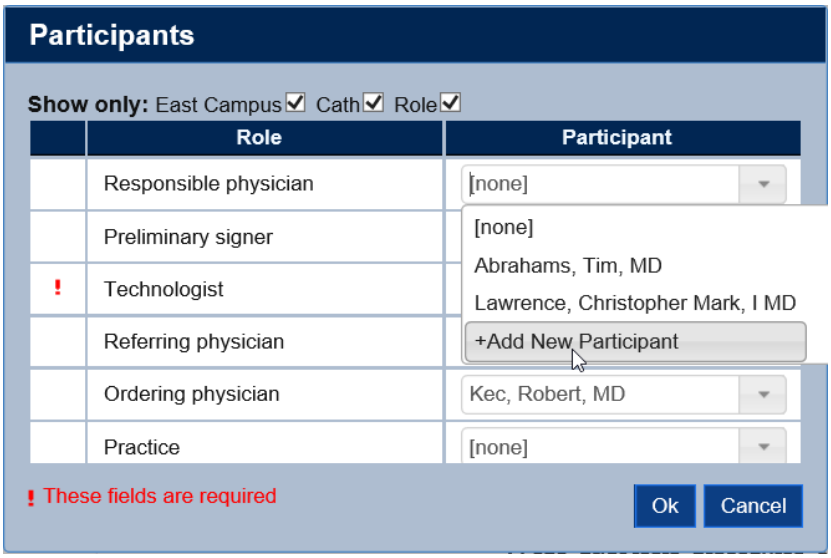
You can filter the participant list by typing part of a name into the text box (e.g., "Law" in the example above). Checking the **Facility**, **Reporting module**, and **Role** checkboxes will filter the participant list to include only those participants who are associated with the specified facility, reporting module, and role.

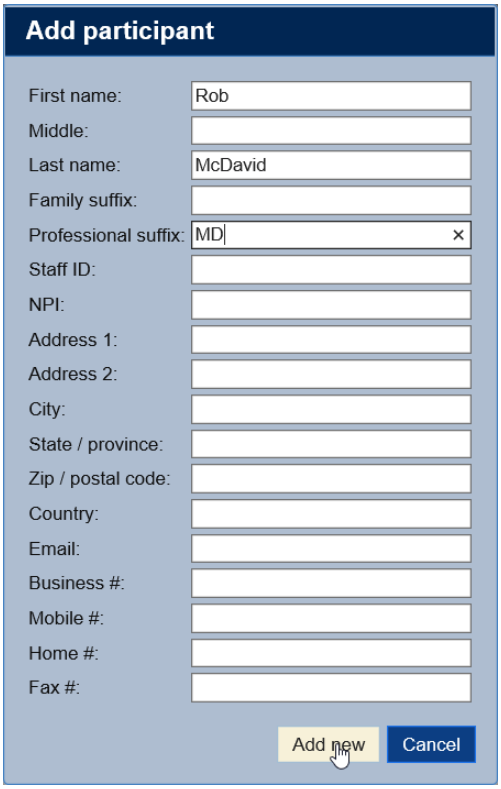
If the **Participant** button is marked with a red exclamation point **!**, then there are required participants that have not been specified. The required participant roles are marked with a red exclamation point **!** (Sonographer, in the example below). All required participants should be specified before a report is signed.



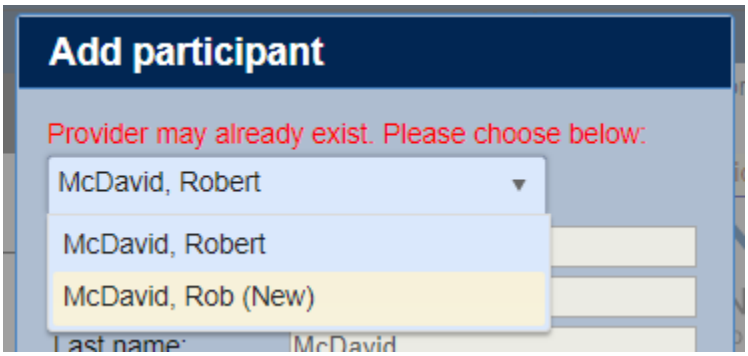
ASCEND CV is designed to reduce the likelihood that duplicate providers are created. For example, if during reporting, a clinician adds a provider that is a likely duplicate, they will be prompted to confirm whether this is an existing provider or whether a new provider should be created.

In the example below, the clinician attempts to add a new responsible physician – Rob McDavid, MD – for the study whose last name and first character of the first name match an existing provider, Robert McDavid, MD:



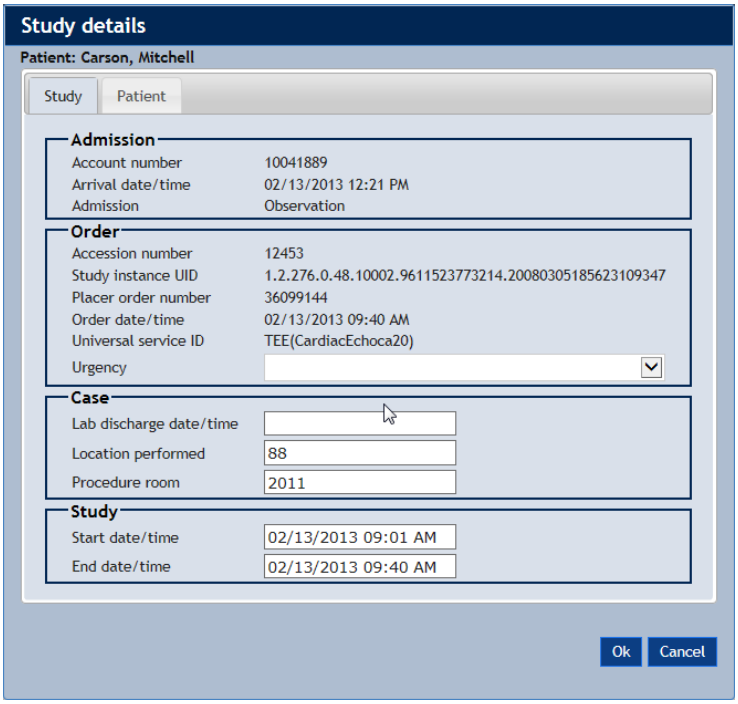


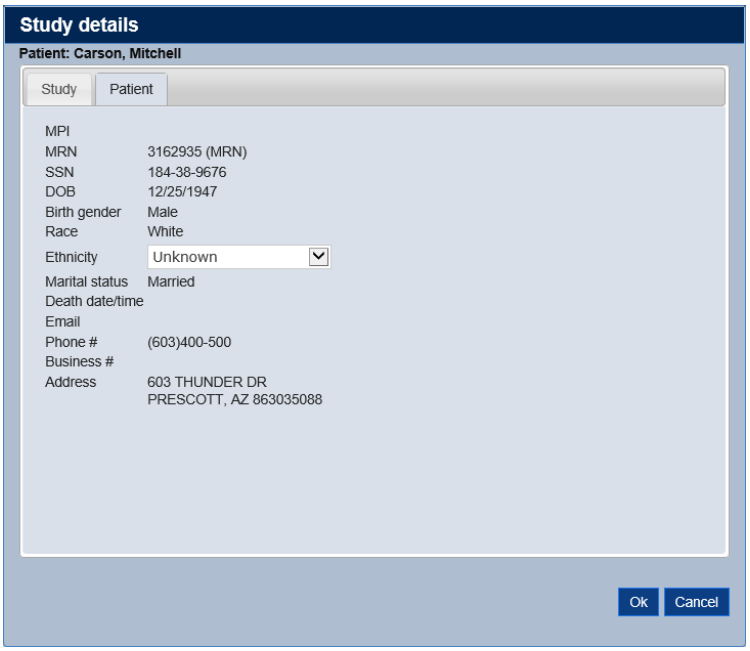
In this case the user can use the dropdown menu to either add a new Rob McDavid or select the existing Robert McDavid as responsible physician:



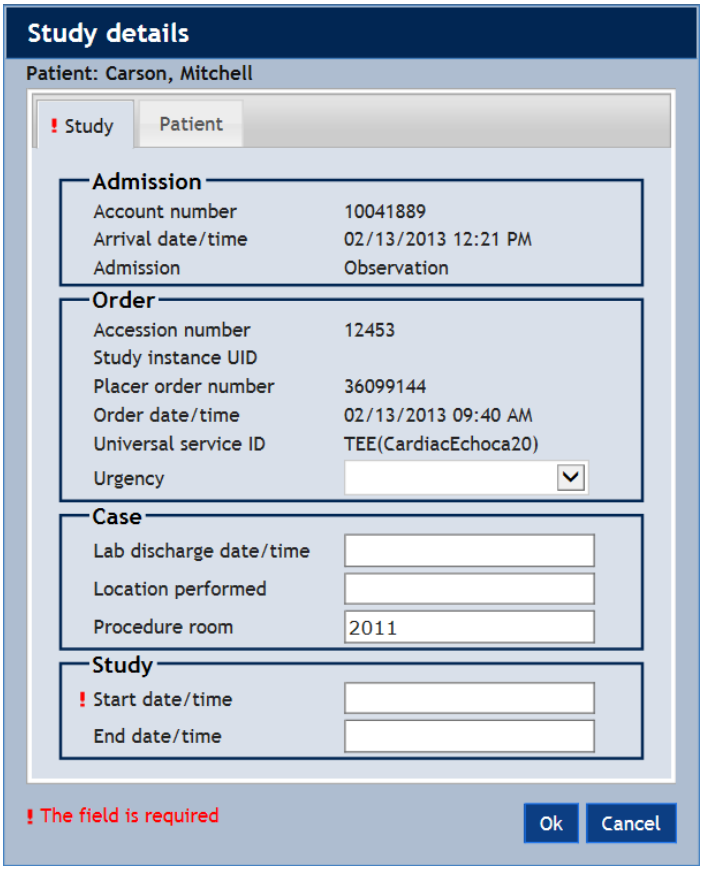
Study Details Button

Clicking the **Study details** button displays detailed information regarding the study and the patient. The fields with white data entry boxes are editable. The remaining information is presented for review only.



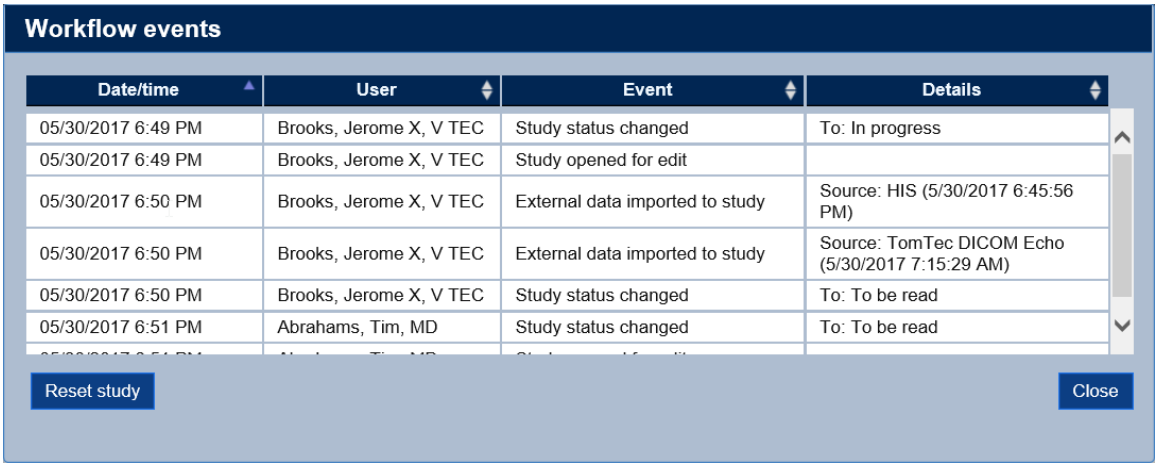


If the **Study details** button is marked with a red exclamation point **!**, then there are required study details that have not been specified. The required fields are marked with a red exclamation point **!** (study start date/time, in the example below). All required study detail fields should be specified before a report is signed.


Study details
Patient: Carson, Mitchell
! Study
Patient
Admission
Account number 10041889
Arrival date/time 02/13/2013 12:21 PM
Admission Observation
Order
Accession number 12453
Study instance UID
Placer order number 36099144
Order date/time 02/13/2013 09:40 AM
Universal service ID TEE(CardiacEchoca20)
Urgency
Case
Lab discharge date/time
Location performed
Procedure room 2011
Study
! Start date/time
End date/time
! The field is required
Ok
Cancel

Workflow Button

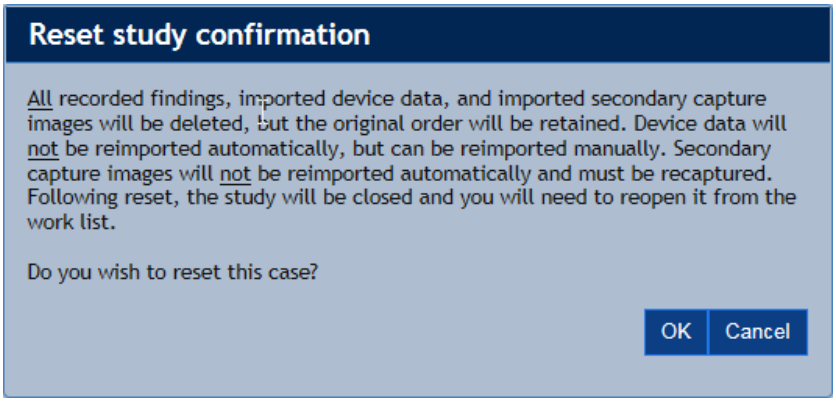
Clicking the **Workflow** button displays a list of events related to the study – including study creation, data imports, editing sessions, and study status changes.



In rare instances, you may need to use the **Reset study** button to return a study to the state immediately after it was created. Note that resetting a study deletes all data imported from clinical devices, including images, and all recorded findings. When a study is reset, all secondary capture images must be recaptured or retransmitted from the image viewer. Any device data will need to be manually re-imported via the **Data** UI after the reset.

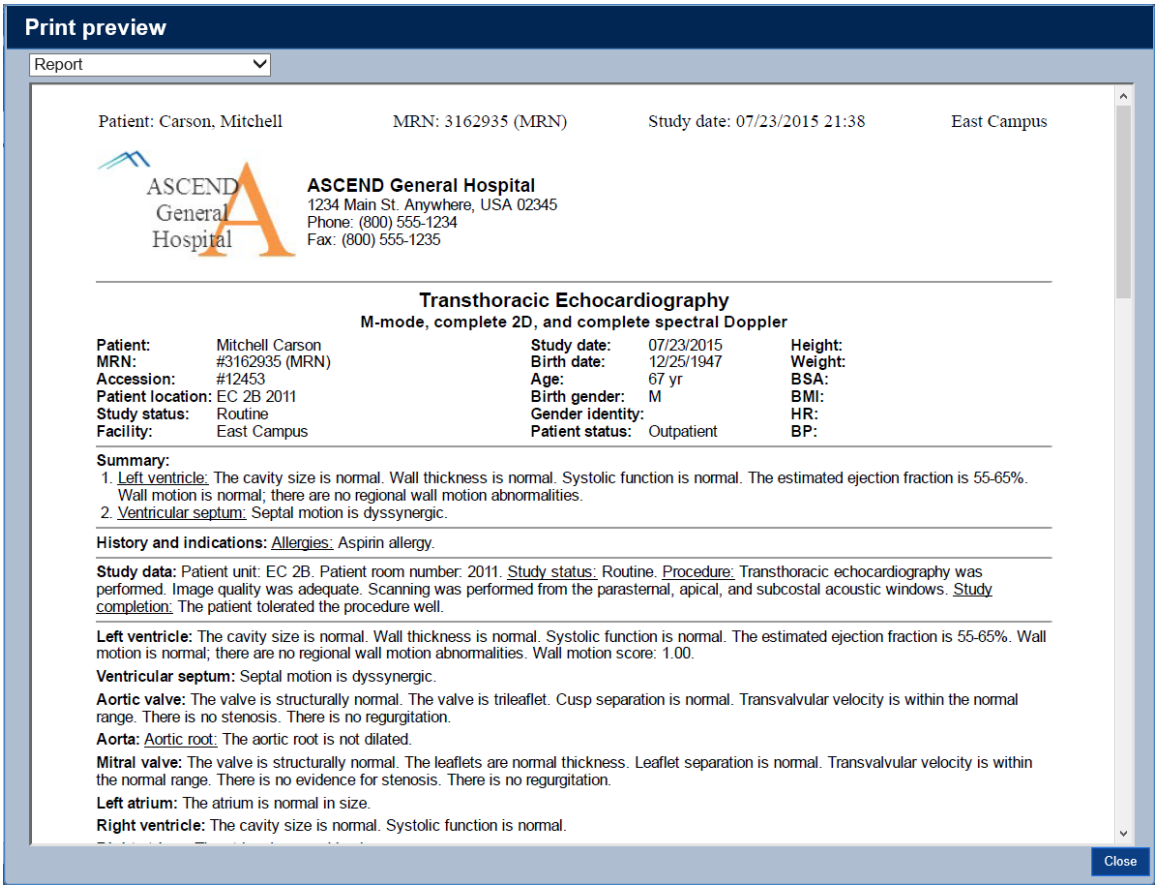
You might reset a study, for instance, if an incomplete/incorrect data import was done or if a number of incorrect findings were inadvertently recorded in a previous reporting session. Note that the clinical reporting interface's **Undo** button can be used to remove incorrect findings immediately after they are added.

Studies may be automatically reset before being opened if either new data is received from a device that had previously sent data, or if a message was received that changed the reporting module of the study.



Print Button

Clicking the **Print** button displays the reports associated with the study using the PDF viewer installed on your system (Adobe Reader® in the example below). Use the **Report selector** to choose the report to preview and click your PDF viewer's **Print** button to print the report.



Reporting Toolbar

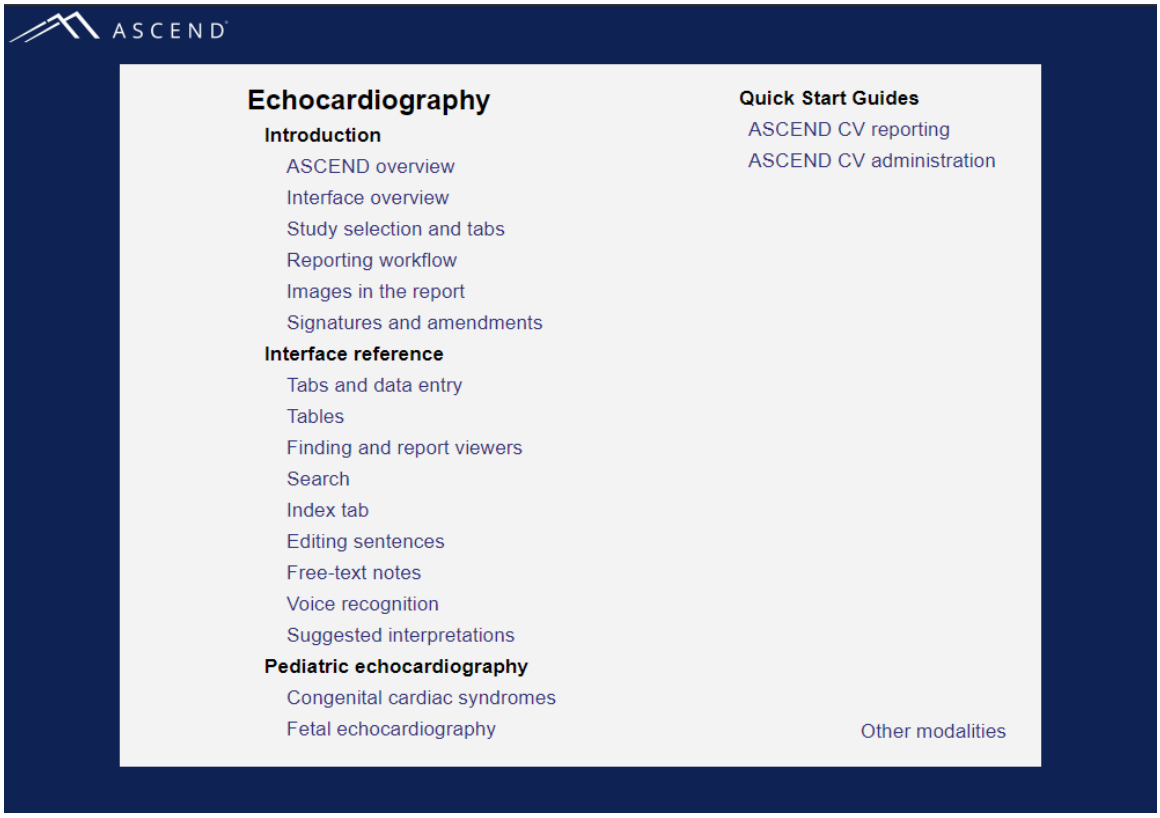
The **Reporting Toolbar** is used to facilitate reporting in ASCEND CV.

Undo and Redo

If you make a mistake while entering measurements or report data, you can click **Undo** to reverse the change. If you undo a change accidentally, you can reapply it by clicking **Redo.** Undo and redo can be utilized to undo or redo the last 9 actions. If more than 9 actions need to be undone, the user will need to reset the study. Once the study has been closed and re-opened, undo will no longer be available for any past actions.

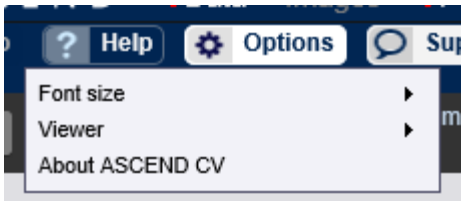
Help

Clicking the **Help** button will launch a new window with documentation relating to the current study's reporting module. You can also view documentation for other modalities by clicking the Other Modalities link.



Options

The **Options** menu allows you to change the screen **Font size** of the reporting UI and configure the highlighting of findings in the **Viewer**. **About ASCEND CV** contains important version information about ASCEND CV and the reporting module of the current study.



Learn

If it is enabled, the Catalyst **Learn** button will also display. The **Learn** button provides on demand "over the shoulder" support for clinicians who have questions or need assistance documenting a specific detail when completing their report. Catalyst's support feature is staffed by ASCEND's experienced clinical application and informatics specialists during normal business hours.

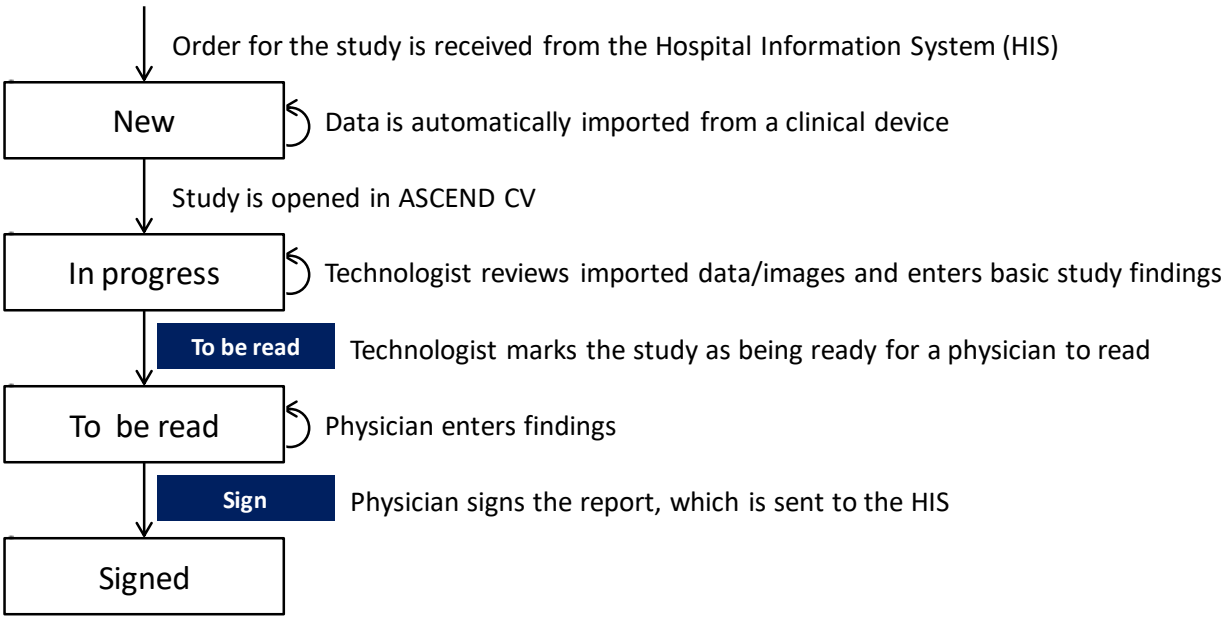
Workflow Toolbar

The **Workflow Toolbar** is used to move a study through the reporting workflow.

ASCEND CV can be configured to support a variety of workflows. In the following sections, we will review several of the more common workflows. Consult with your Lab Administrator regarding the reporting workflows used at your facility.

Basic Reporting Workflow

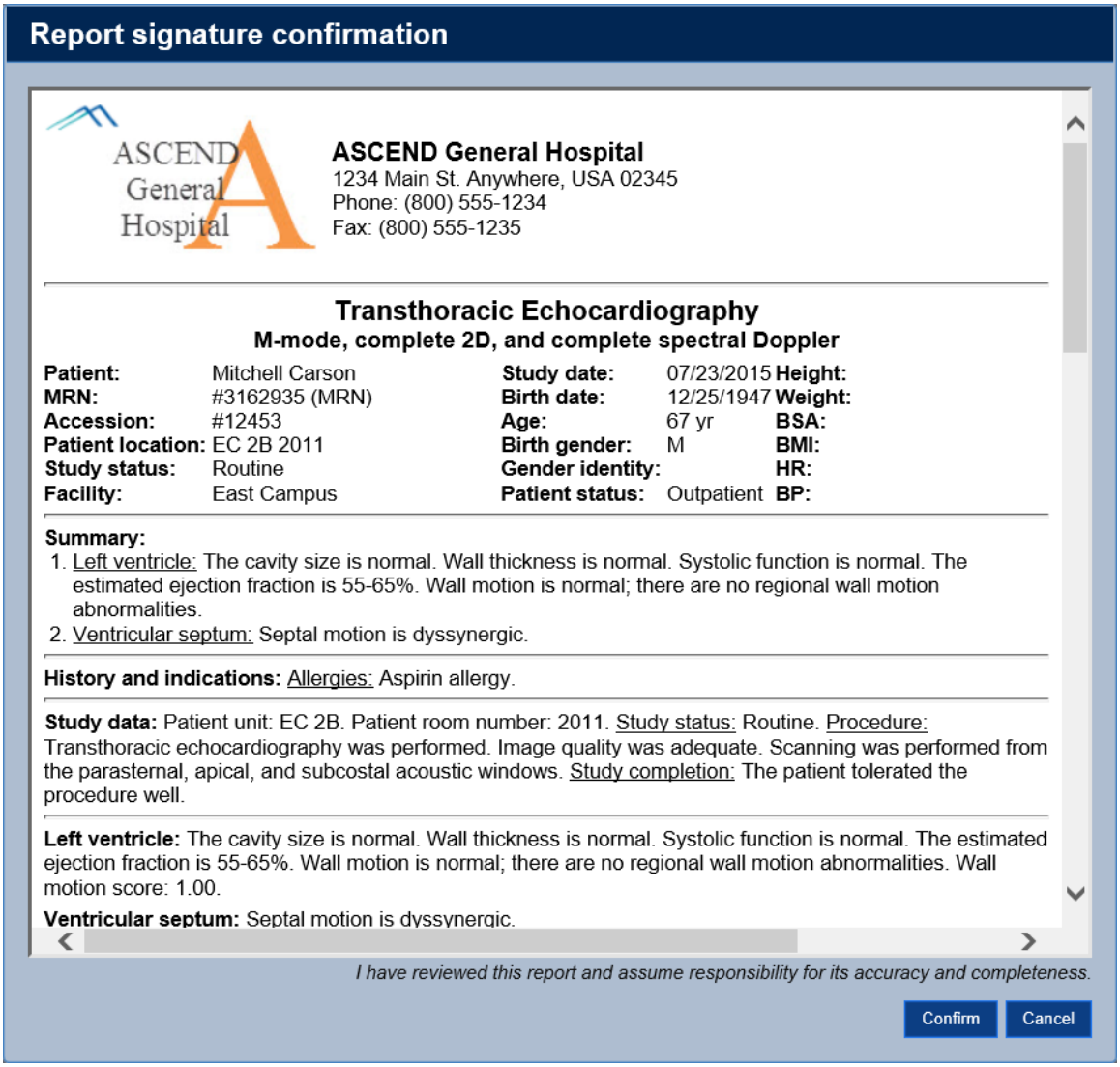
The basic reporting workflow used in ASCEND CV is shown below. The boxes represent the statuses that a study passes through as the report is completed by a technologist and physician. The straight arrows represent actions that move the study from one status to the next. Loops indicate actions that change the study's data or findings, while keeping the study status unchanged.



Clicking the **To be read** button in the Workflow Toolbar moves the study from the status *'In progress'* to the status *'To be read'*, indicating to reading physicians that the study is ready to be read.

Clicking the **Close** button closes the ASCEND CV reporting interface. Note that recorded data is automatically saved as it is recorded; no explicit *Save* action is required.

Clicking the **Sign** button displays the completed report and asks for confirmation of signing. Clicking the **Confirm** button completes the signing process, including moving the study from the status *'To be read'* to the status *'Signed'*, sending the signed report to the HIS and closing the ASCEND CV reporting interface.



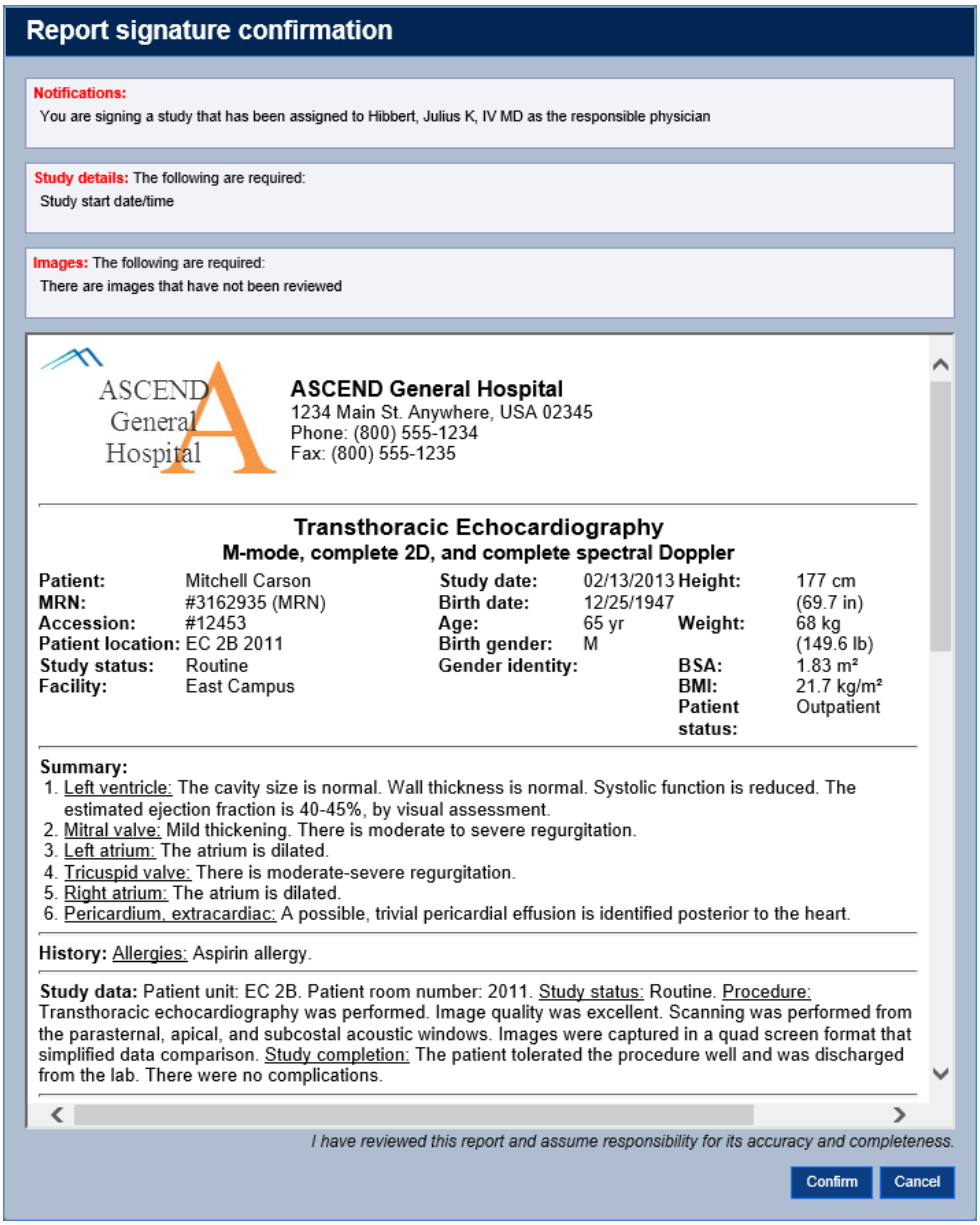
The confirmation dialog will display warning notices above the report if the study has

- Pending (unprocessed) device data that has not been imported or declined. These are listed in the **Pending** table on the **! Data** form
- Required participants that have not been specified. These are marked with a red exclamation point (**!**) on the **! Participants** form.
- Required study details that have not been specified. These are marked with a red exclamation point (**!**) on the **! Study details** form.
- Required clinical findings that have not been recorded. These are marked with a red exclamation point (**!**) in the findings/report viewer.
- Pending (unprocessed) secondary-capture images that have not been selected or declined. These are listed on the **! Image** form.

In addition, a precautionary notice will be displayed if the physician signing the study is different from the *Responsible physician* assigned to the study or is not a member of the practice assigned to the study.

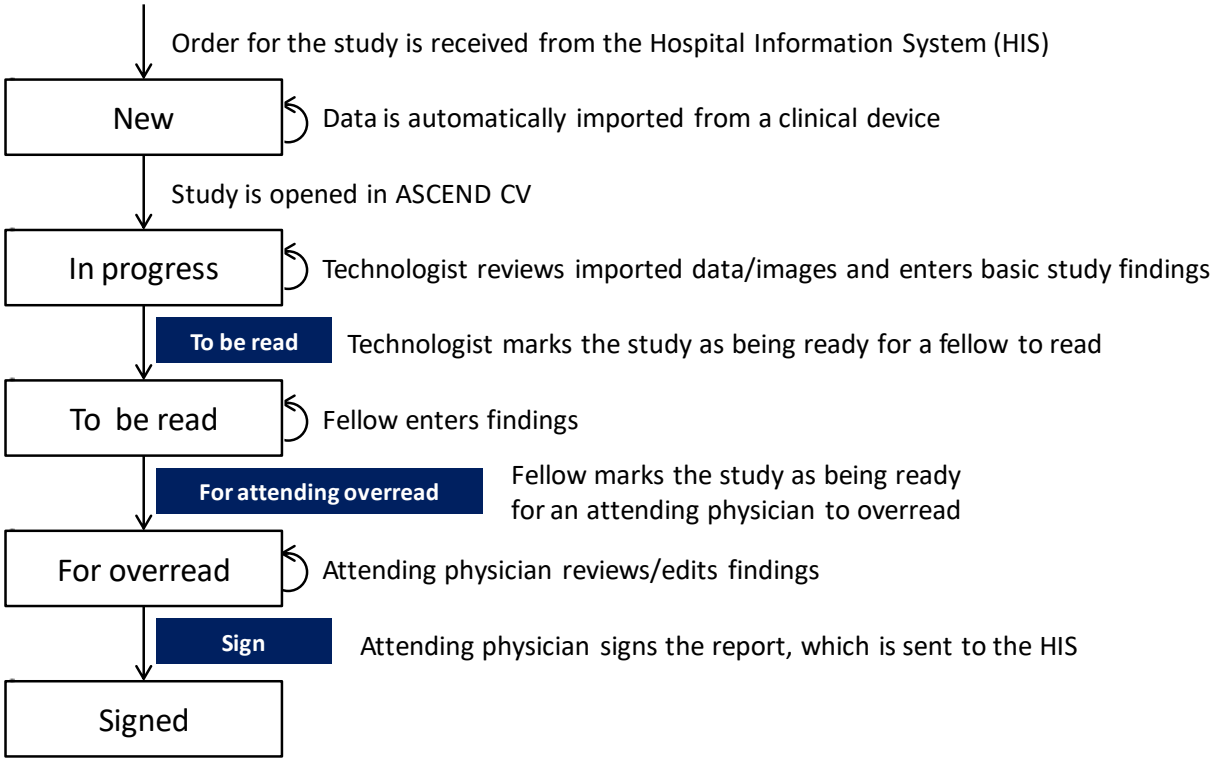
Your system can be configured by your Lab administrator to

- Only display the confirmation dialog when such issues exist (in the absence of such issues, the report will be signed without confirmation).
- Require you to resolve some or all such issues before signing a study.
- Never display the confirmation dialog.



Overread Workflow

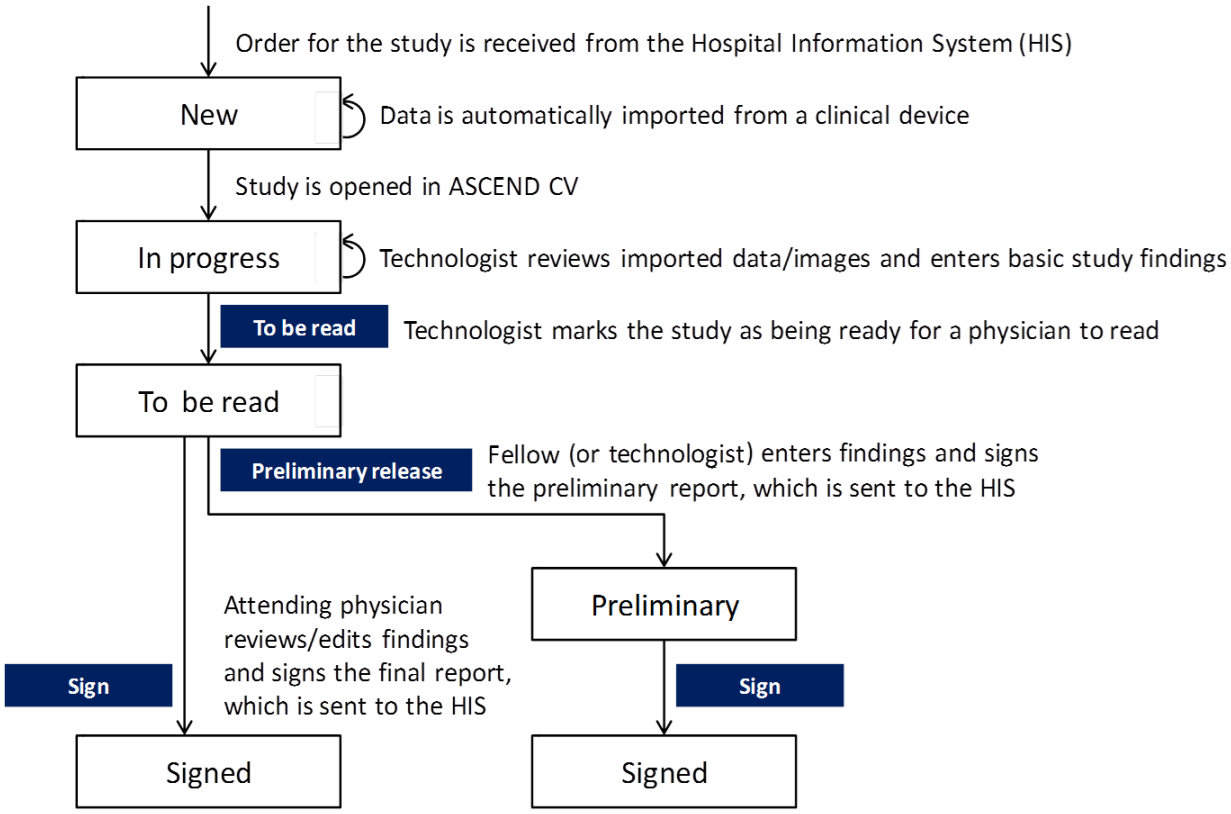
ASCEND CV can be configured to support a workflow that includes Cardiology fellows. In this workflow, a fellow creates an initial report and clicks the **For attending overread** button to move the study from the status *'To be read'* to the status *'For overread'*. An attending physician reviews and/or edits the report and signs it.



Preliminary Report Workflow

ASCEND CV can be configured to support a workflow that uses preliminary reports. In this workflow, a fellow (or technologist) can create a preliminary report by clicking the **Preliminary release** button to sign the preliminary report and send it to the HIS. This moves the study from the status *'To be read'* to the status *'Preliminary'* (the right branch in the figure below). An attending physician then reviews and/or edits the report and signs it.

If a preliminary report was not created, the study remains in the *'To be read'* status and the attending physician edits the findings and signs the report (the left branch in the figure below).



It is possible for an ASCEND CV system administrator to customize the preliminary banner and also add additional text at the very top of a preliminary report, if the default banner is not sufficient. Also, custom mini-banner text can be configured for just above the preliminary report signature line.

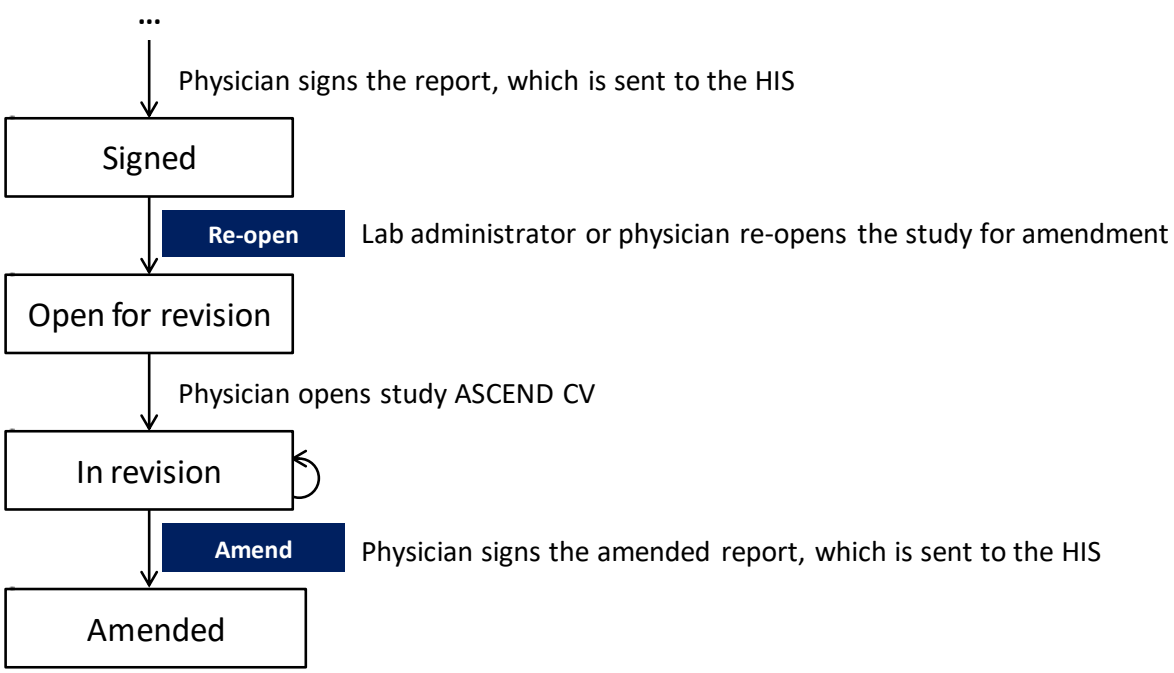
Amendment Workflow

ASCEND CV allows for the amendment of a signed report, where the amendment process can be configured to include any or all of the following:

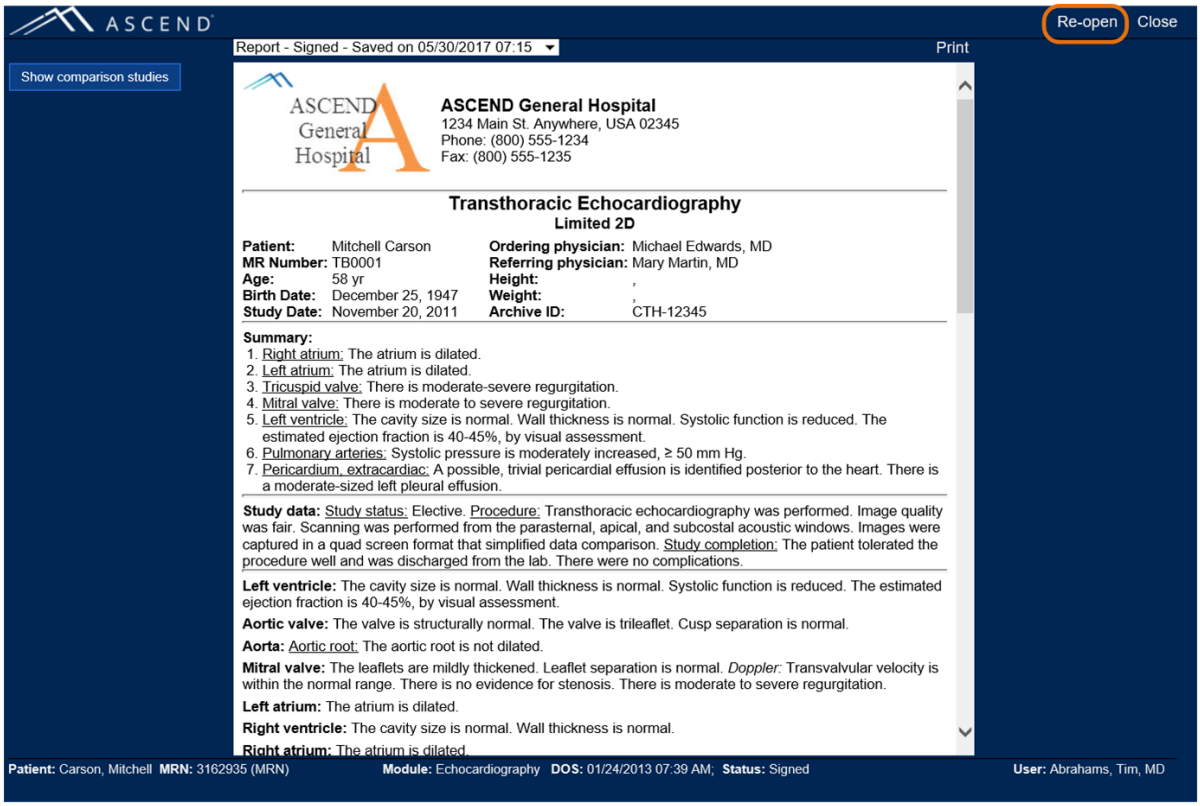
- Whether or not the amending user must enter a reason for amending the report, purely for noting in the audit log and not shown on the amended report. By default, this is required.
- Adding a block of text as an addendum to the report. ASCEND CV can be configured to require an addendum on every amended report. In addition, the position of the addendum within the report itself can be configured. By default, this is required.
- Modifying a report by adding missing findings and/or deleting incorrect findings. ASCEND CV can be configured to either permit or prevent the modification of report findings during the amendment process. By default, this is permitted.

The physician that signed a report is always allowed to open that same report for amendment. The ability to initiate the amendment of any type of report at one or more facilities is also granted to lab administrators.

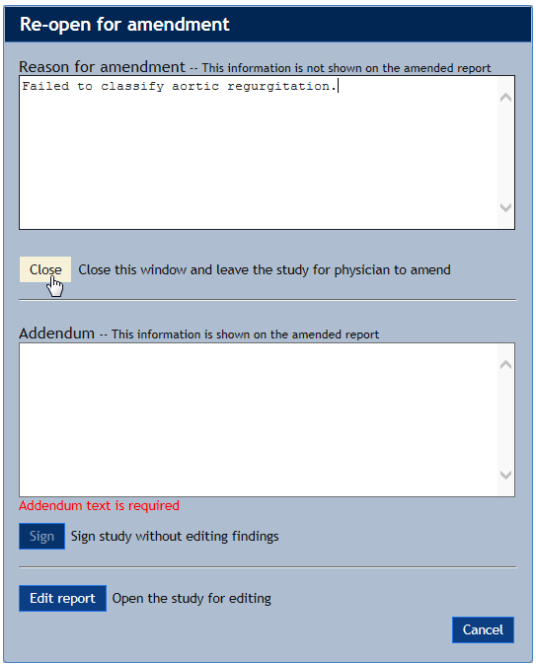
Note that ASCEND CV retains copies of all signed reports (preliminary, signed, and amended).



When a signed study is opened, ASCEND CV displays the signed report.



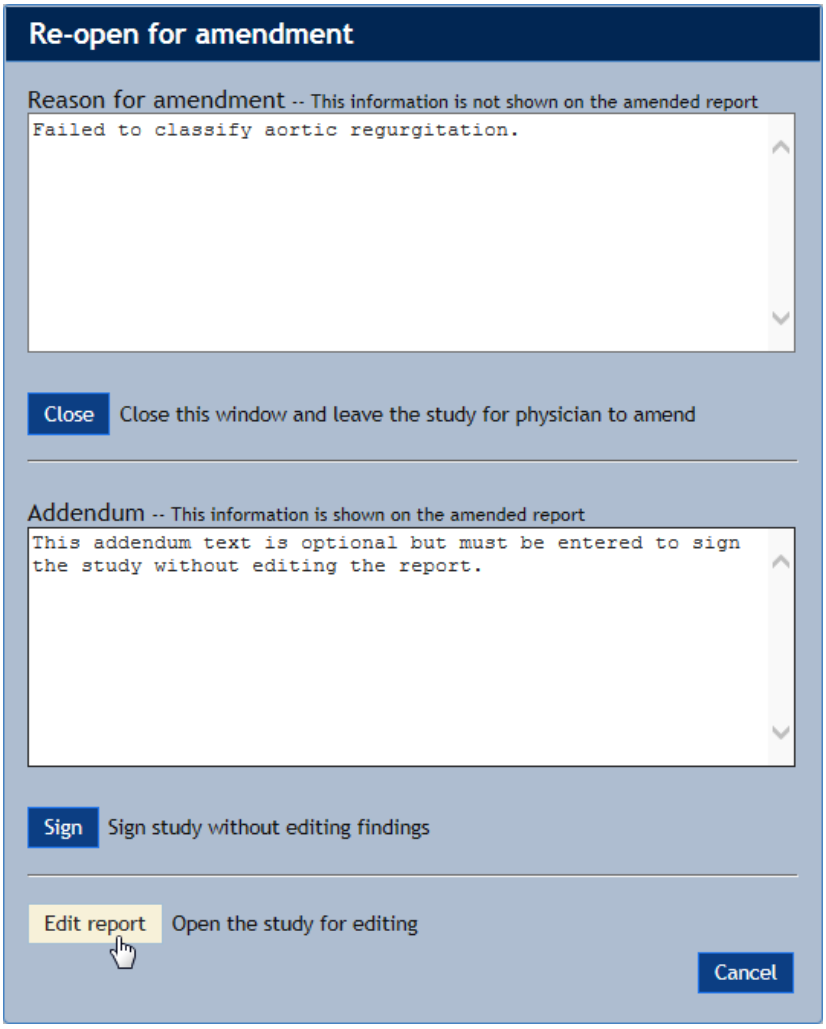
Clicking the Re-open button initiates the amendment process and requests a reason that the study is being re-opened for amendment. Note that the reason must be provided. However, it is only listed in the audit log and not displayed on the report.



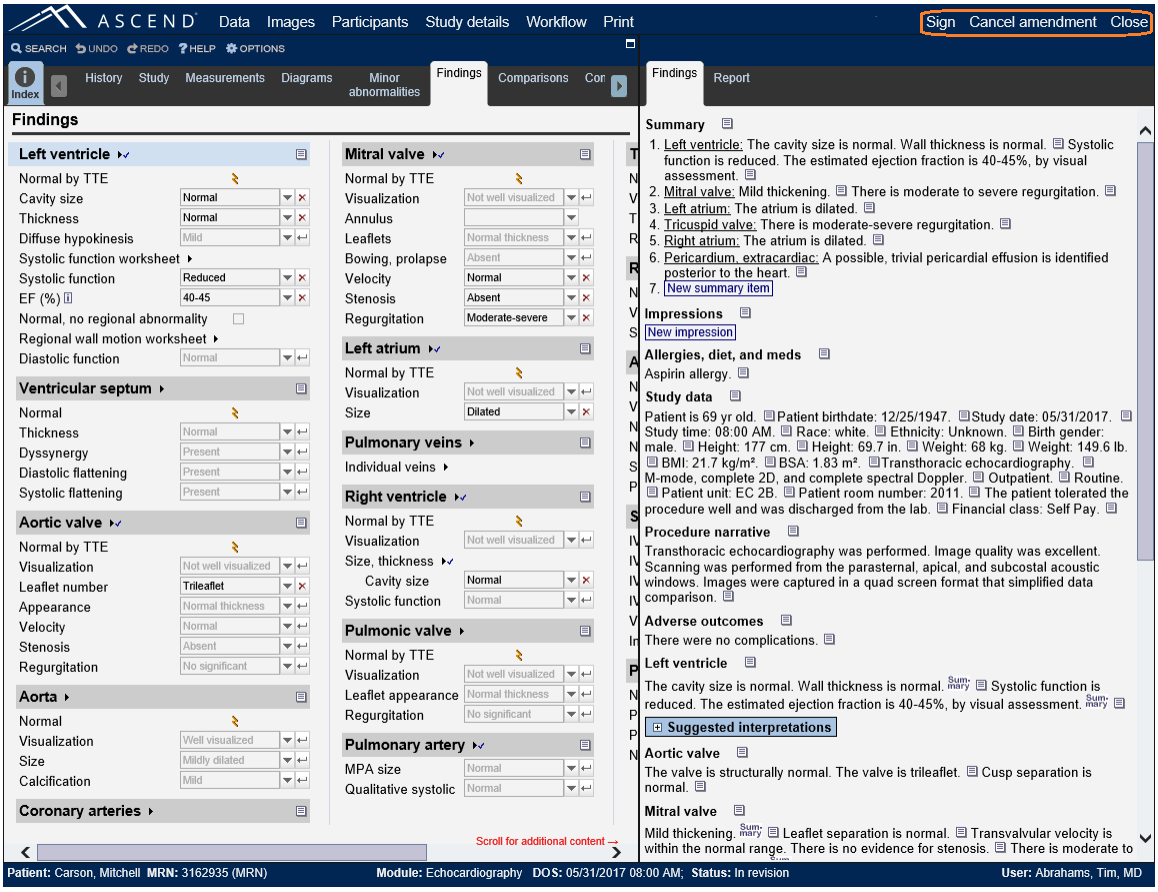
If ASCEND CV has been configured to permit editing of report findings during the amendment process, then an **Edit report** button will be displayed at the bottom of the "Re-Open for amendment" dialog (as shown above).

The Amendment dialog can also be closed, leaving the report in a state where another physician can amend it; but more often the same user that has re-opened the report for amendment will do one of the following:

- Add addendum text and re-sign the report as amended
- or further edit the report body with or without addendum text (if so configured)

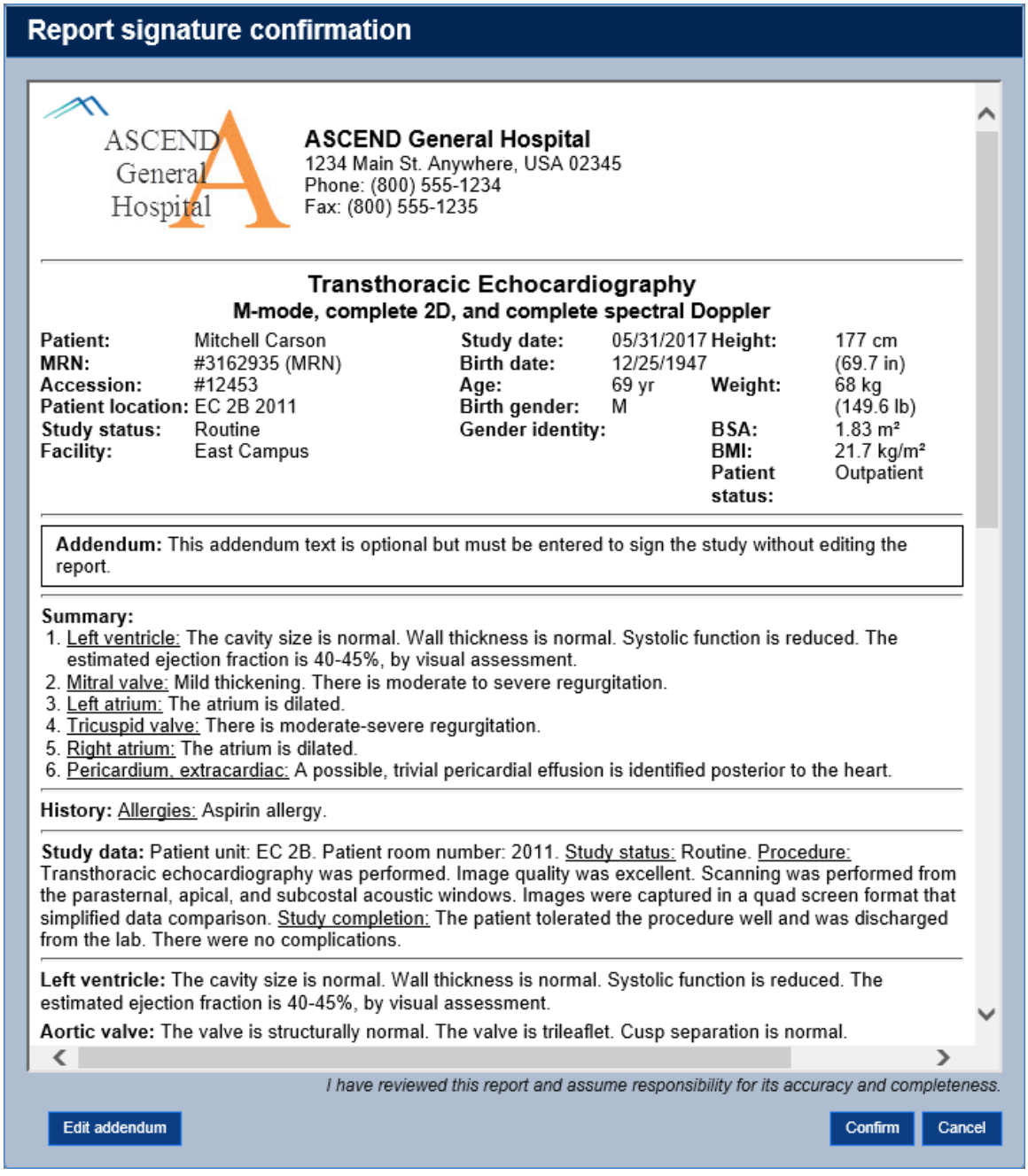


Clicking the **Edit report** button changes the study status to *'Open for revision'* and opens the report for further editing. Buttons in the top-right allow the physician to sign the amended report, cancel the amendment process, or close the report in-progress, allowing the editing and amendment to be completed later:



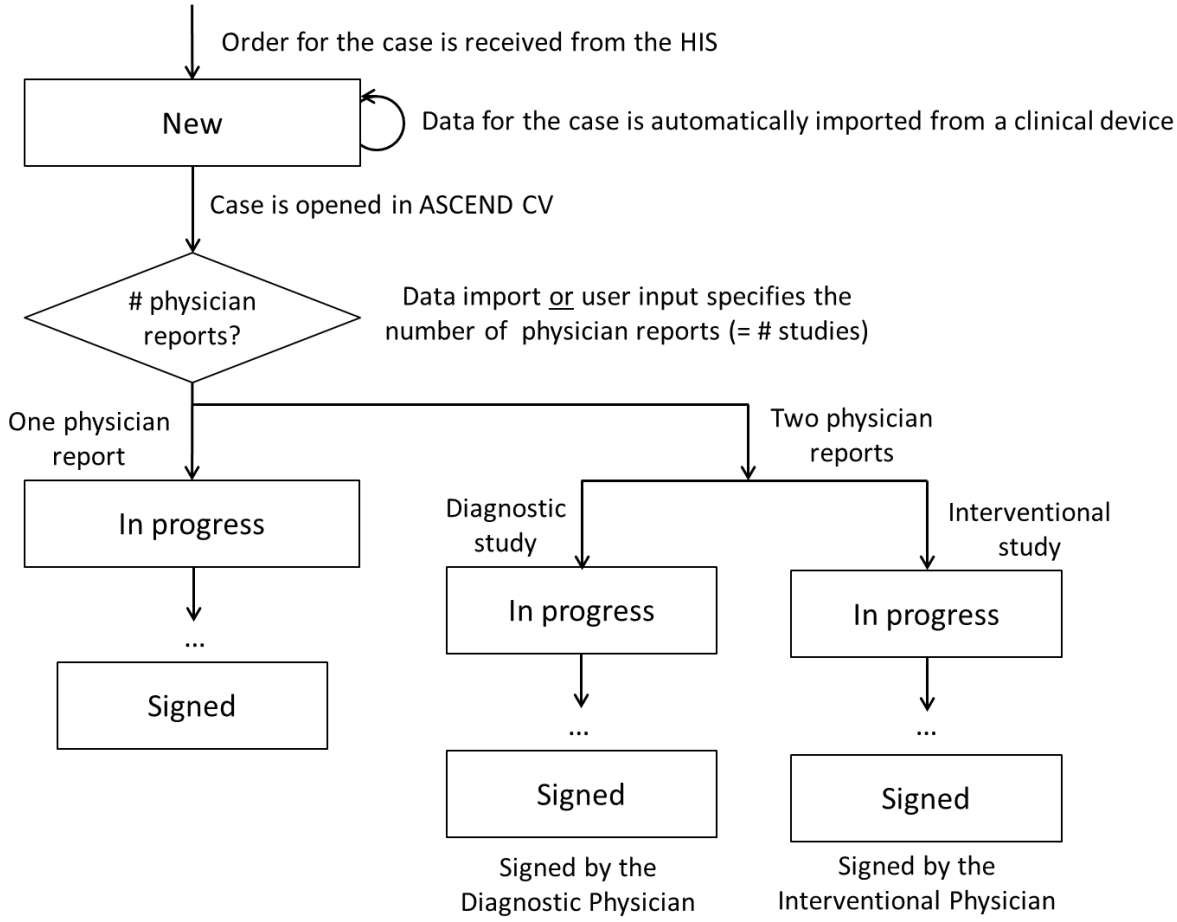
Note that when a study is re-opened to allow editing of report findings, the patient and order information will automatically be updated to reflect any changes sent by the Hospital Information System (if the patient's address has changed since the original report was signed, for instance). Confirm that the patient and order information is accurate for the study being amended and, if necessary, manually edit this information.

Clicking the **Sign** button on either the **Amend report** form or the ASCEND CV reporting interface displays the amended report (note the inclusion of an addendum below) and may ask for confirmation of signing. Clicking the **Confirm** button completes the amendment process, moving the study to the status *'Amended'* and sending the amended report to the HIS.



“Split Case” Workflow

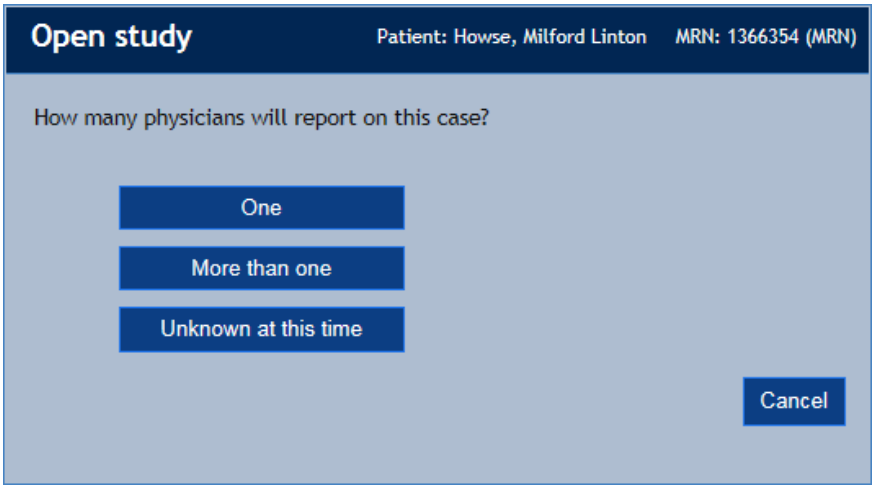
ASCEND CV can be configured to allow multiple physicians to report separately on a case. For example, a Cath case might consist of a diagnostic study performed by one physician followed by an interventional study performed by a different physician, where both studies share the same order (same accession number) and are recorded as a single case by the Cath lab’s physiologic monitoring system, but where each physician creates a report for their study.



Another two-physician example includes a Nuclear Stress split case which is completed by a stress ECG physician in combination with the imaging physician. In this case, the final combined report consists of the Stress ECG report with signature concatenated to the end of the Nuclear Imaging report with separate signature.

Specifying the Number of Physician Reports for a Case

Usually for Cath cases, the number of physician reports is recorded by a clinical device and passed to ASCEND CV, prior to the case being opened for reporting in ASCEND CV. If the number of physician reports has not yet been specified when a case is opened in ASCEND CV, the user will be asked to specify this number.

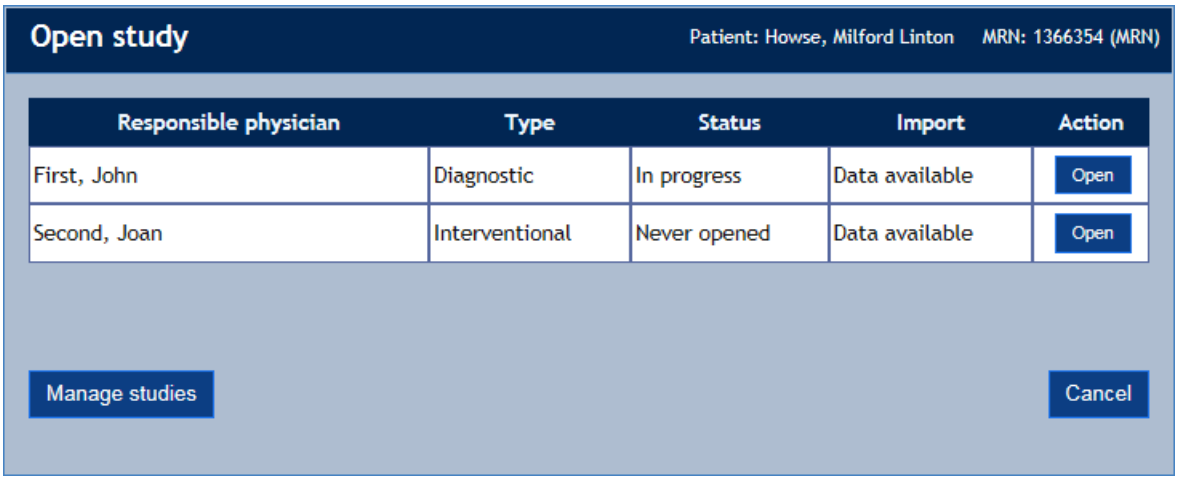


- Selecting "One" specifies that the case will have one physician report – or equivalently, one *Responsible physician*.
- Selecting "More than one" will "split" the case into two separate studies – each with its own report and *Responsible physician*.
- Selecting "Unknown" defers answering of this question until the next time a user opens the case in ASCEND CV. In the interim, reporting on the case will proceed as if there will be only one physician report.

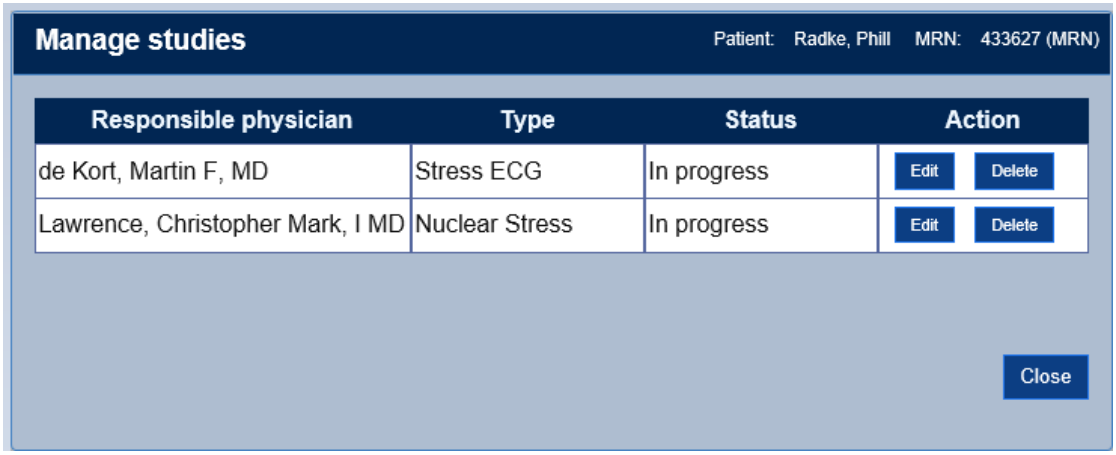
Note that the number of physician reports must be specified before any reports for the case can be signed.

Opening a Study in a Multi-study Case

If a case has multiple studies, ASCEND CV will display the following form for a Cath case:



- Selecting an **Open** button opens the associated study for reporting.
- Selecting the **Manage studies** button displays a form for editing a study's *Responsible physician* or *Study type* or for deleting a study. The following example is for a two physician Nuclear Stress case:



Note that this same form can be displayed during reporting by selecting the **Manage studies** button on the **Study data toolbar**.

Completing a "Split" Case

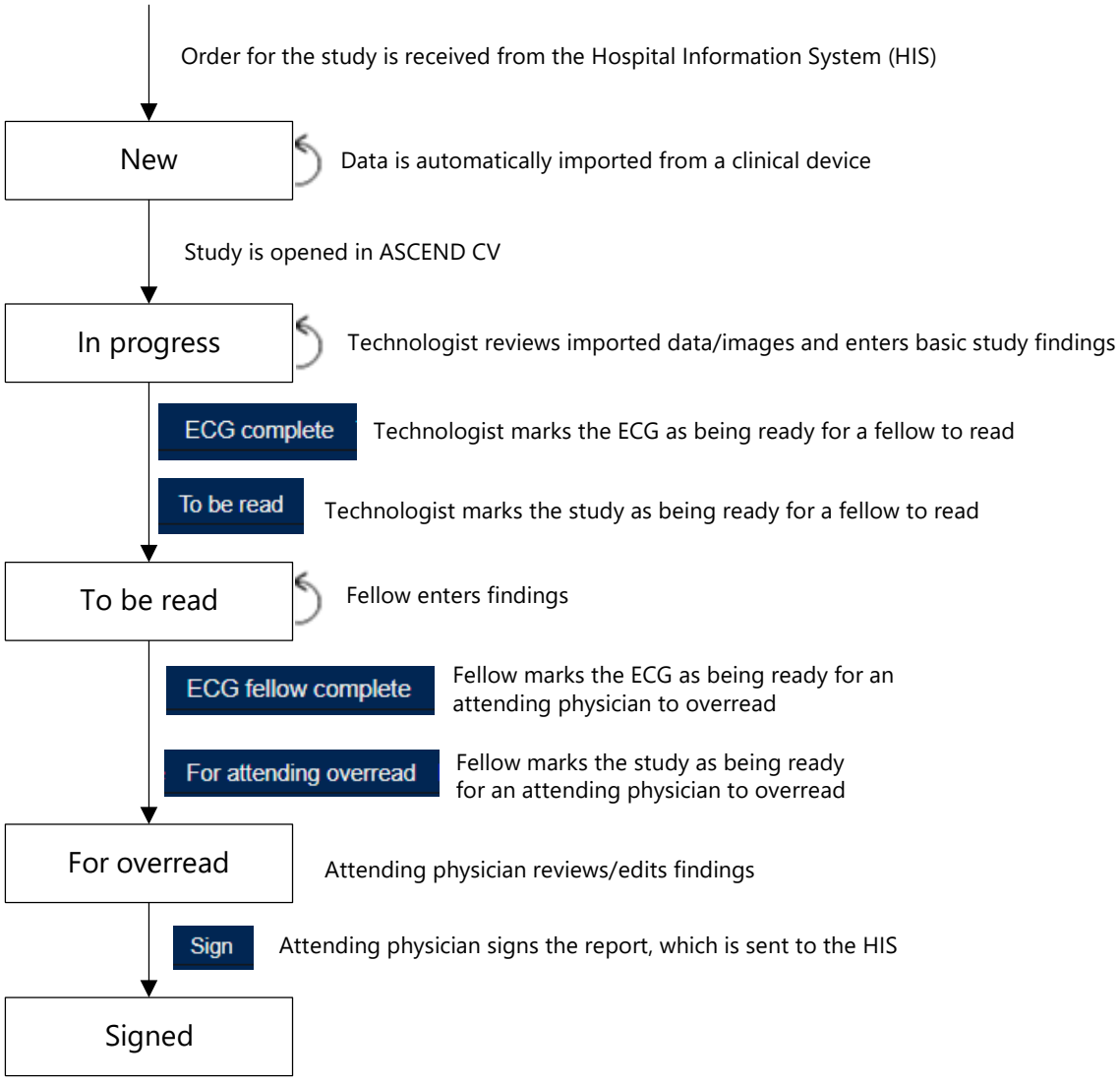
Each study proceeds separately through its own reporting workflow – including

- Data import, with the data imported divided between the two studies appropriately
- Data entry and review
- Signing

In the case of a Nuclear Stress split case, the Stress ECG study must be signed before the nuclear imaging portion can be signed. The final complete result consists of the Stress ECG report concatenated to the end of the Nuclear imaging report.

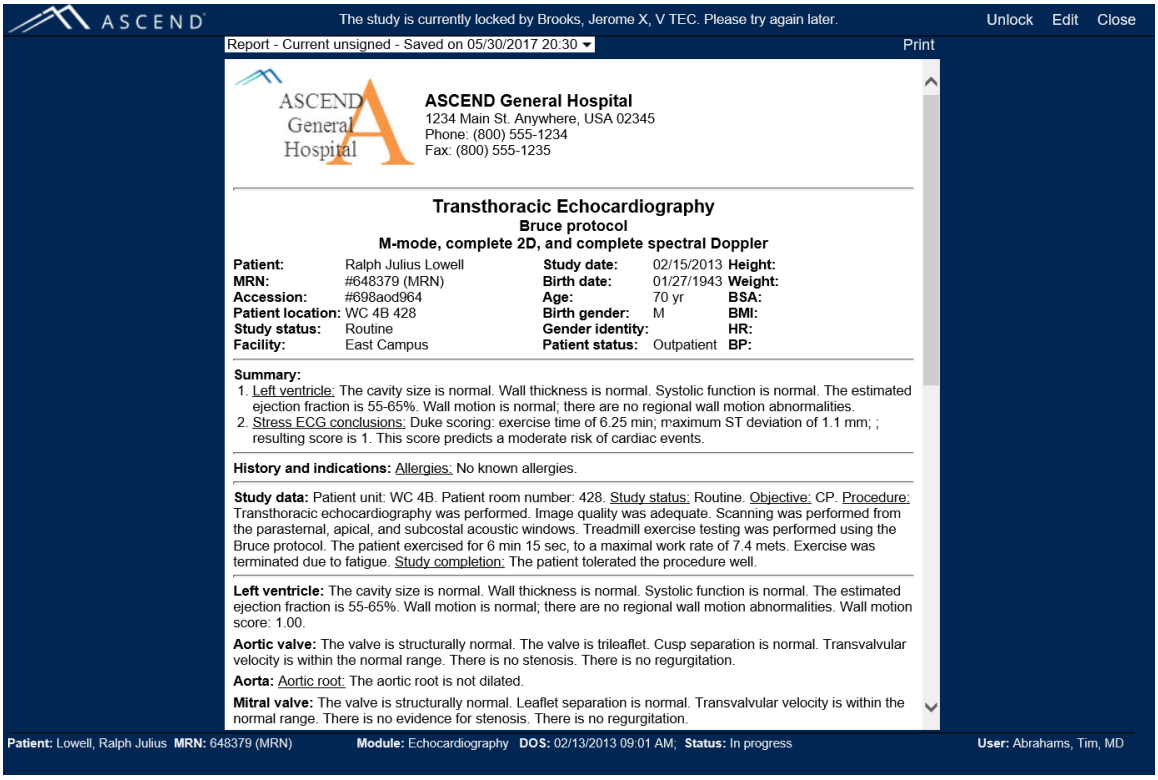
Multiple Technician Workflow

ASCEND CV can be configured to support multiple technicians for Stress Imaging studies in any of the other workflows. In these workflow variants, one technician reports on ECG stress data, while another reports on imaging. Once the imaging has been reviewed, the **ECG complete** button marks the stress ECG review complete for the "To be read" status. If "For overread" is enabled and configured for multiple technicians, there will be an **ECG fellow complete** button that serves the same purpose for the fellow's review. If these workflow steps are skipped, a warning message will appear that the ECG piece has not been completed. However, they are optional and do not need to be clicked. if enabled. for a report to move onto the next step in the workflow.



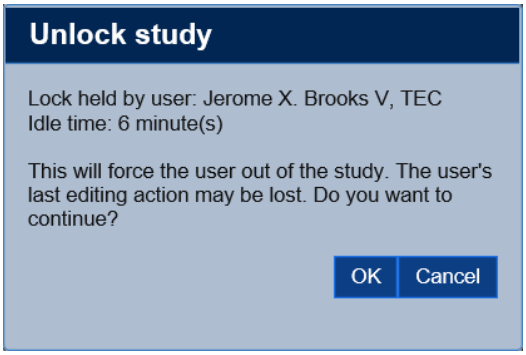
Force Closing Another User's Reporting Session

If you view a study that is already open for editing by another user, you will be presented with a report preview screen. From this screen, you can select the most recently saved version of the study or any previously confirmed or signed version for review.



If your ASCEND CV lab administrator has configured the application to allow reporting users to force close other studies, you will also be presented with an **Edit** button near the top right. If you click on **Edit,** a notification will be displayed that the study is currently locked (open for edit) by another user:

If you click **Unlock** you will be presented with a confirmation dialog:

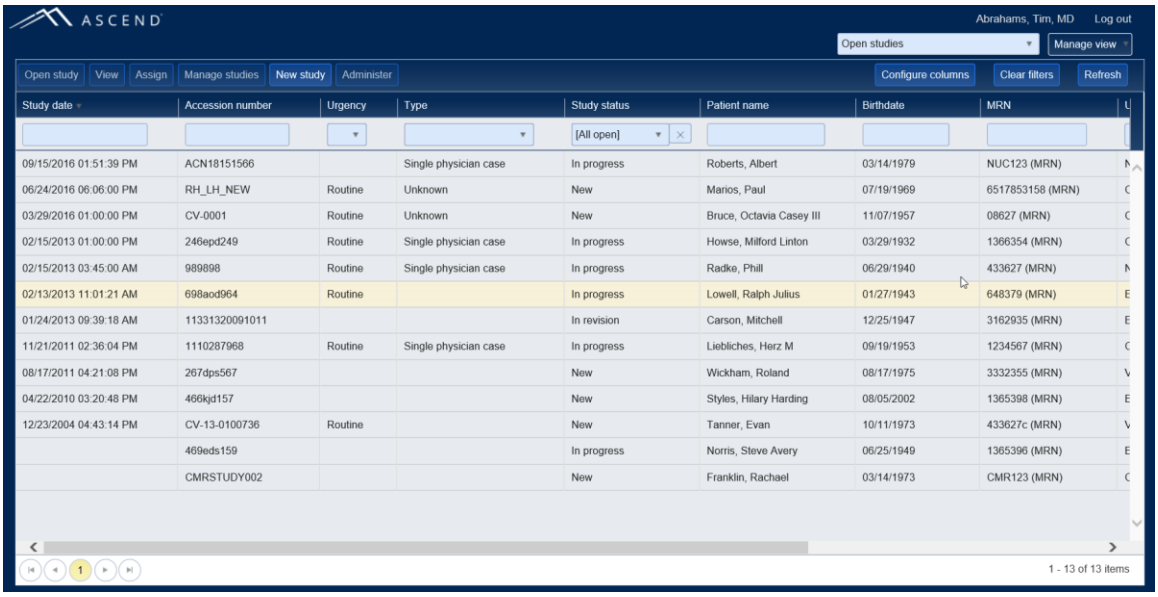


If you then click **OK,** you will have unlocked the study for editing by another user, including yourself. If you now click on the **Edit** button, you will succeed in opening the study for edit.

Appendix A – ASCEND CV Worklist

Depending on your system configuration, your worklist interface may be provided by your Hospital Information System (HIS), by your Electronic Medical Record system (EMR), or by ASCEND CV. This Appendix describes the ASCEND CV worklist interface.

The **ASCEND CV worklist** displays the list of studies available for reporting or review.

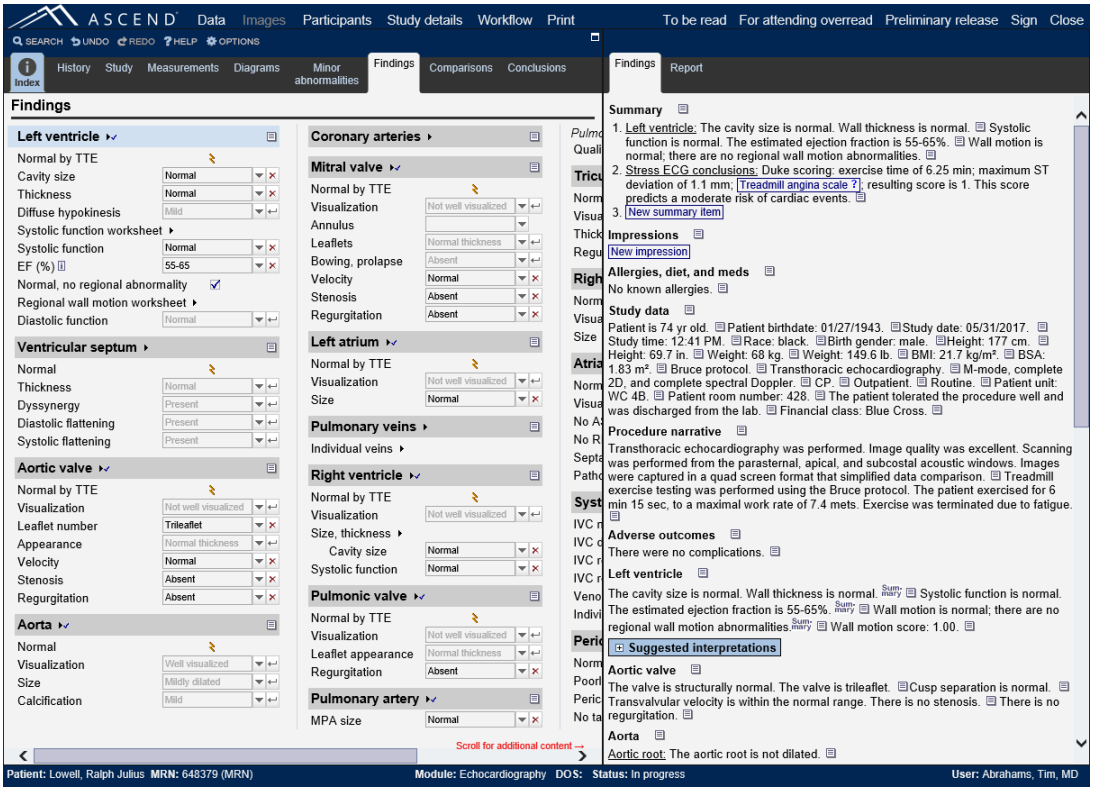


Refreshing the Worklist

Clicking the **Refresh** button refreshes the worklist, displaying newly arrived orders or newly assigned studies, for example.

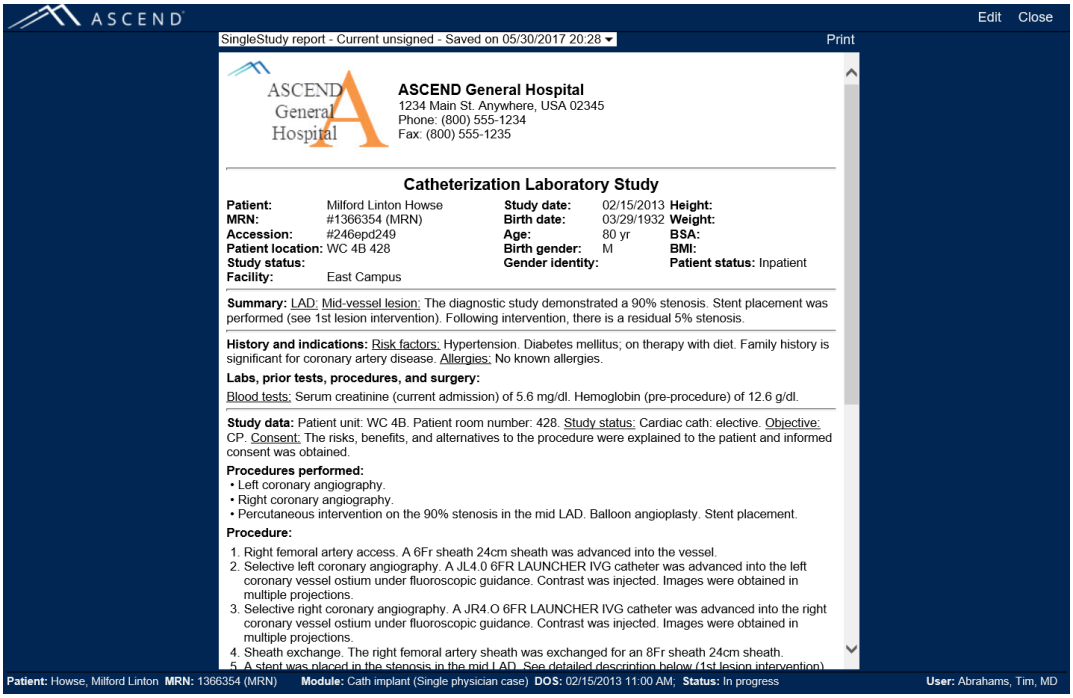
Opening a Study for Reporting

Selecting a study from the worklist and clicking the **Open study** button, or double-clicking the study, opens the study in the ASCEND CV reporting interface. Once you have completed reporting, clicking the appropriate workflow (such as **To be Read**, **Preliminary release**, or **Sign**) or the **Close** button on the workflow toolbar returns you back to the worklist.

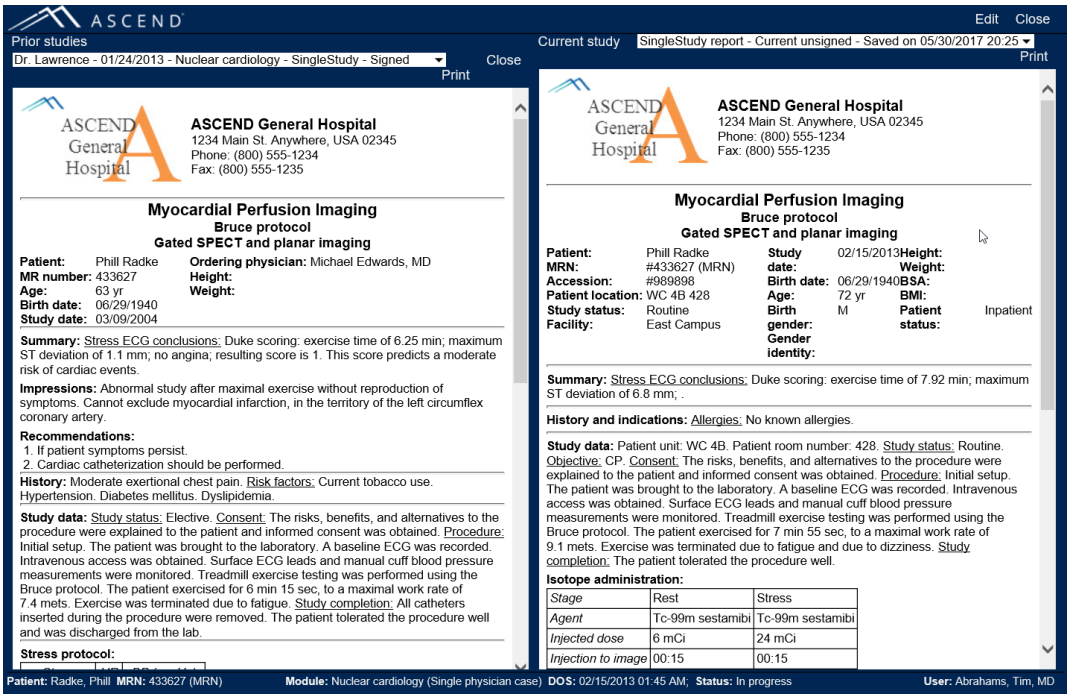


Previewing a Report

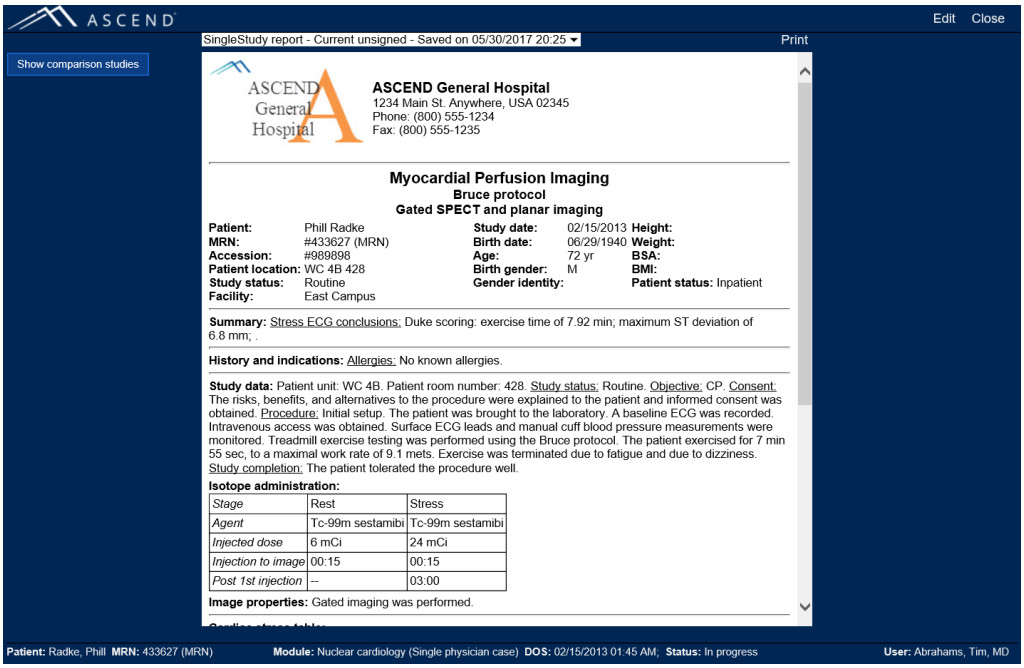
Selecting a study from the worklist and clicking the **View** button displays the report associated with the selected study.



If there are prior Cardiology studies for the patient associated with the selected study, then a Show comparison studies button will be displayed in the top-left. Pressing the button displays any prior reports (left) alongside the report for the selected study (right).



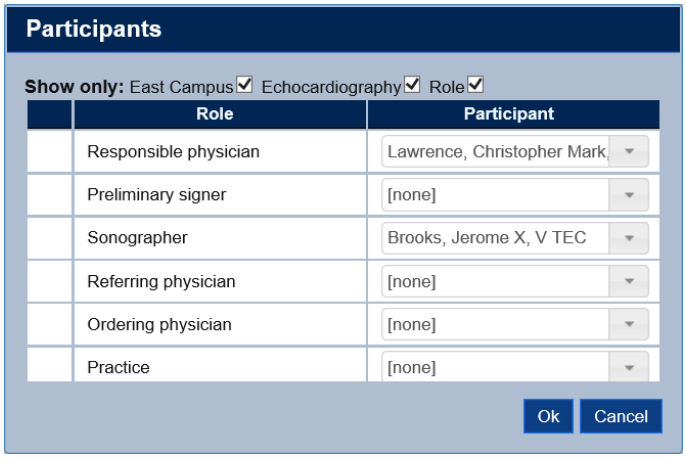
Clicking Close in the Prior Studies section will return to displaying just the current study.



If you wish to edit the selected study, clicking the **Edit** button will open the study in the ASCEND CV reporting interface. Note that if the study is currently opened for reporting by another user, and if your ASCEND CV lab administrator has configured the application to allow force close other studies, after clicking **Edit,** you will be prompted to terminate the session of the other user, along with an indication of how long that user's session has been idle.

Assigning a Study

Selecting a study from the worklist and clicking the **Assign** button displays the participants for the study and allows you to assign participants to roles. See the *Participants Button* section of this Guide for details.



Managing Worklist Views

You can configure the worklist to meet your needs:

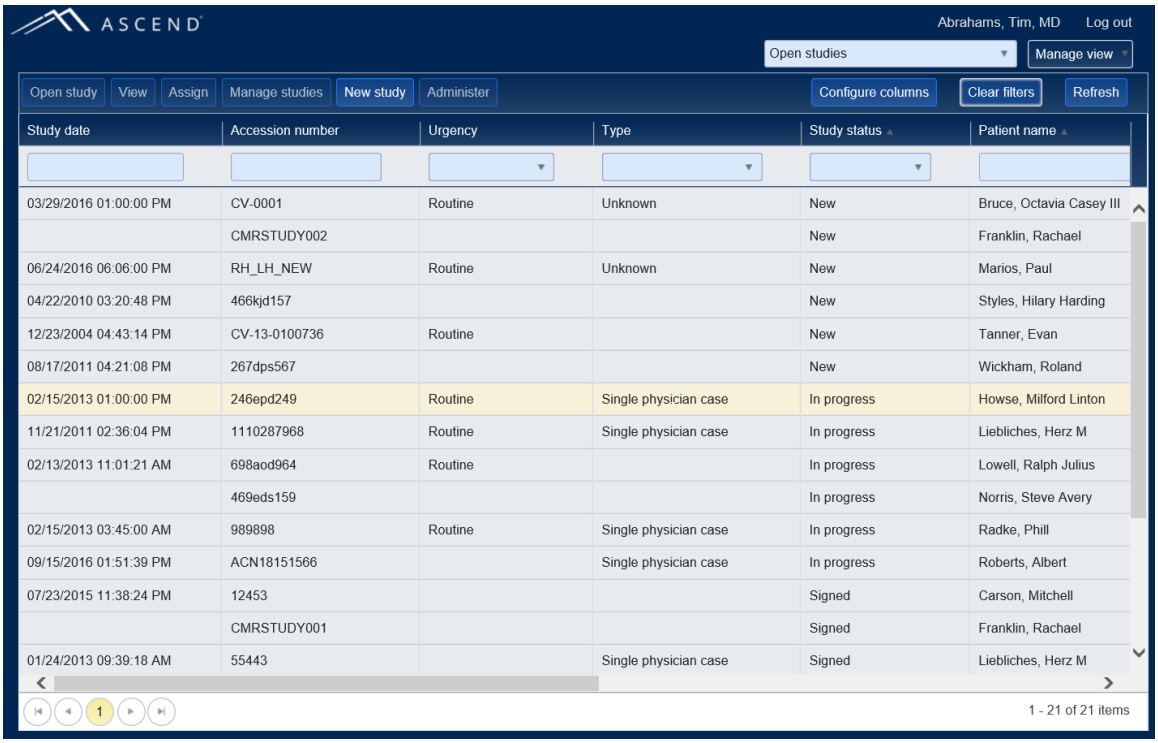
- The worklist can be **sorted by column entry**. Clicking on a column heading such as **Study status** toggles between:
    - Unsorted 

with no arrow
    - an increasing sort 

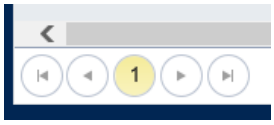
with an up arrow
    - a decreasing sort 

with a down arrow

Clicking on multiple columns combines the sorts across all columns, grouped in the order the columns were clicked. For example, clicking on Study Status, followed by clicking on Patient name creates a nested or grouped sort ordered by patient name within increasing status progression, as seen below:



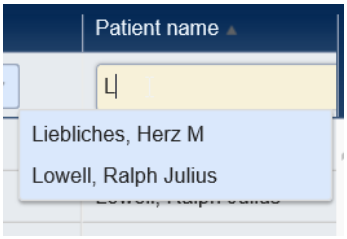
- The worklist, when longer than a single screen or page, can be traversed using the worklist paging control at the bottom left.



,
These buttons will display hover text to remind you of their function. From left to right they are:

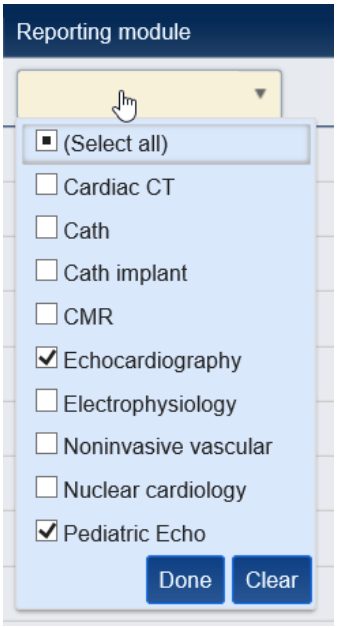
  - Go to the first page
  - Go to the previous page
  - [current page number – not a button]
  - Go to the next page
  - Go to the last page

- The worklist can be **filtered by column entry**. Entering text in a column's filter box (below the column heading) displays only those studies that contain the specified text in the specified column (the studies that contain "L" in the *Patient name* column, in the example below).

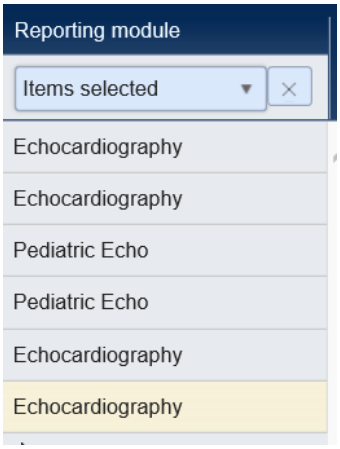


You can either click the mouse outside the dropdown to clear the matching list and display all patient names beginning with "L", or sub-select one of the matches to display only the studies associated with that one patient.

Columns with predefined options can be filtered by selecting one or more choices from the associated filter list. Note that after selecting choices, you may need to click somewhere else on the worklist to close the filter list.

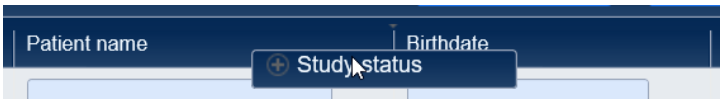


In either case, the filtered column will display **Items selected** to indicate that it is being filtered.

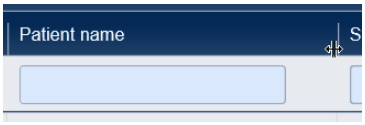


Clicking the  will clear the individual filter. Clicking the **Clear filters** button will clear all filters set across all columns.

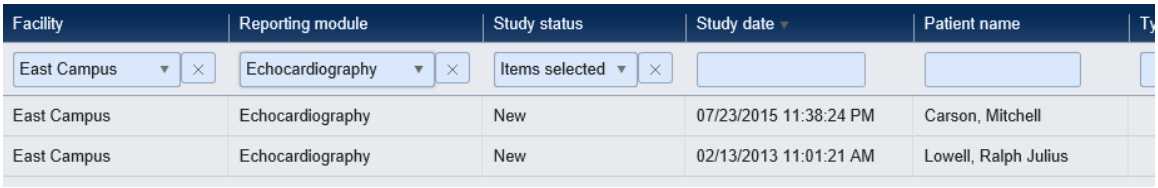
- The worklist **columns can be reordered**. To reposition a column in the worklist, drag its column heading (*Study status* in the example below) to a new location and drop it.



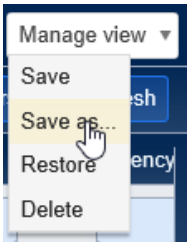
- The worklist **column widths can be adjusted**. To narrow/widen a column, grab its column divider (the dotted line in the example below) and drag it left/right.

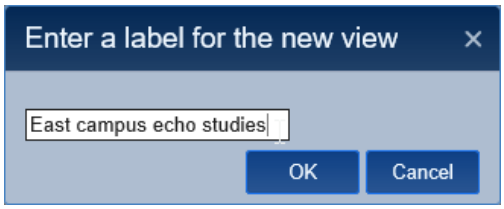


Once you have a worklist configuration that you like, you can save it as a named **worklist view** for future use. The example below shows a worklist whose columns have been reordered and contain open (unsigned) Echocardiography studies performed at the East Campus, sorted by study date/time.

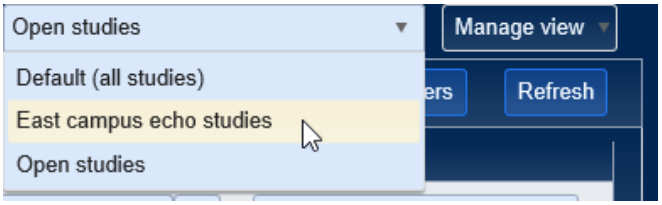


This view can be saved as an "East campus echo studies" worklist view by clicking the **Manage view** button, selecting **Save as**, and specifying the name of the new view.





The "East campus echo studies" view is then available in the **worklist view** selector.



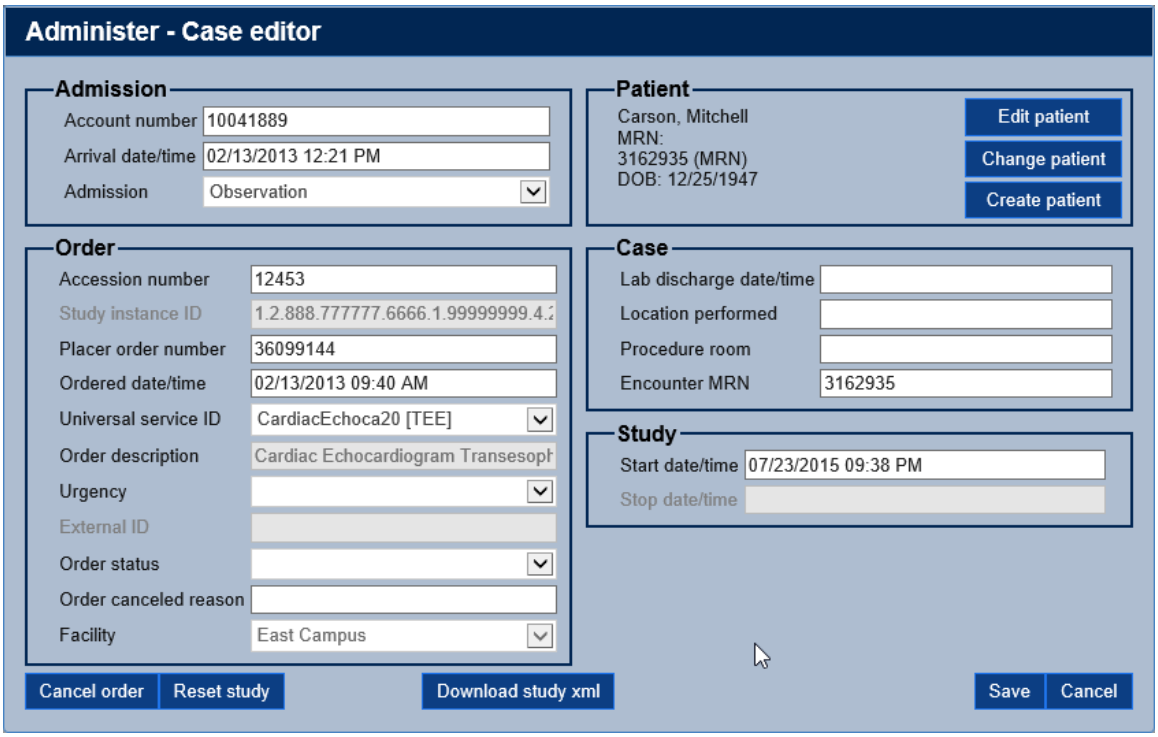
Administering a Study

(Requires Lab Administrator privileges)

Selecting a study from the worklist and clicking the **Administer** button displays a form containing information about the study (*Order*, *Case*, and *Study* blocks) and the associated patient (*Patient* and *Admission* blocks). Note that the **Administer** button will only be displayed on the worklist if you have *Lab Administrator* privileges.

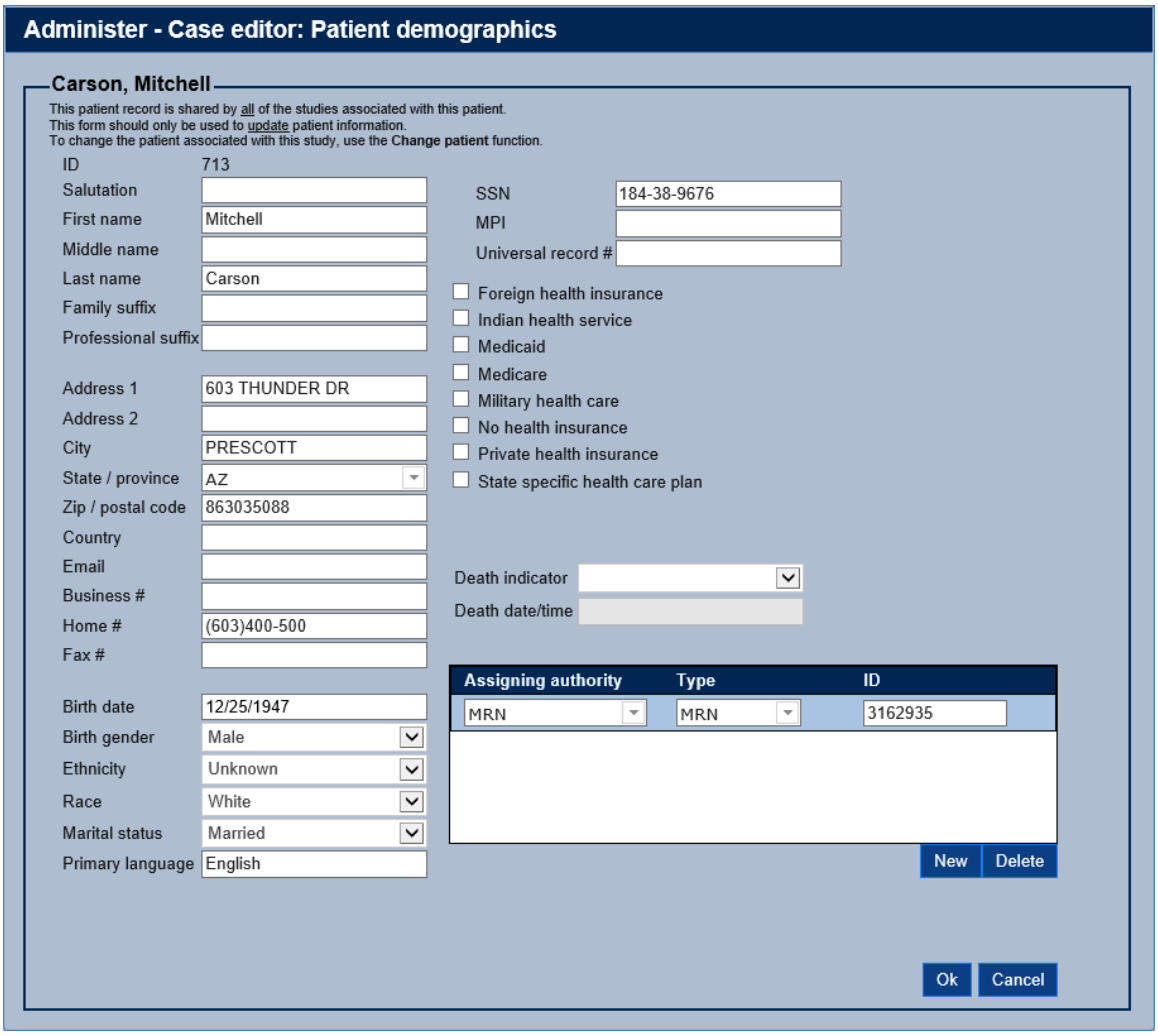
Editing Study Data

The study fields with **black** text are editable. The fields with gray text are presented for review only. Click the **Save** button to save the edited study data.



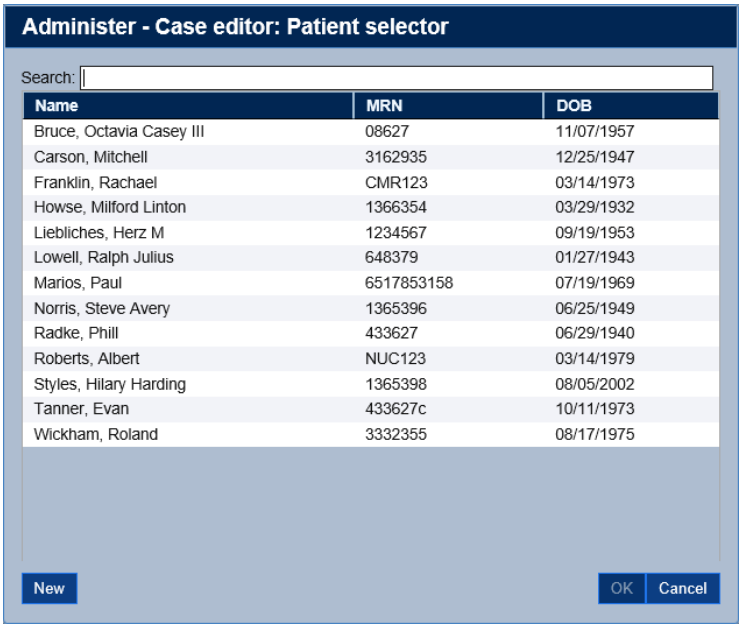
Editing Patient Data

Clicking the **Edit patient** button displays a form for editing data about the patient associated with the study.

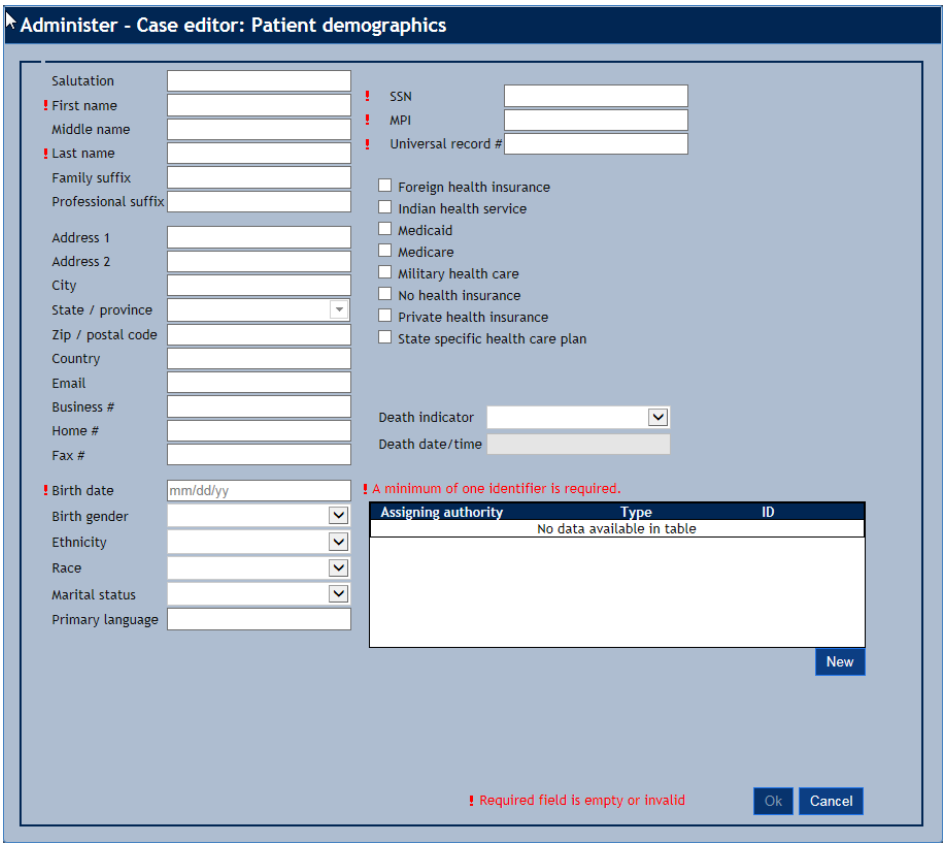


Note that this patient data record is shared by all the ASCEND CV studies for the patient. This form should only be used to update information on the selected patient, not to change the patient associated with the study.

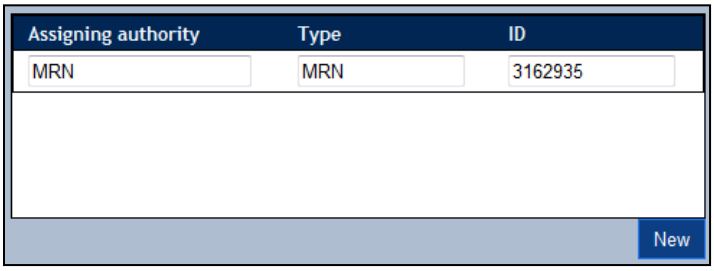
Clicking the **Change patient** button displays a form for selecting a different patient for the study. Adjust the name or portion of the name you are searching for in the Search text box to constrain the list of patients.



Clicking either the **Create patient** button on the Case Editor form, or the **New** button on the Patient Selector form will display a new form for entering a new patient for the study.



The fields marked with a red exclamation point (!) are required and must be specified. Note that you must specify at least one patient identifier – master patient index number (MPI), universal record number, or medical record number (MRN) – using either a named field or the patient identifier panel.

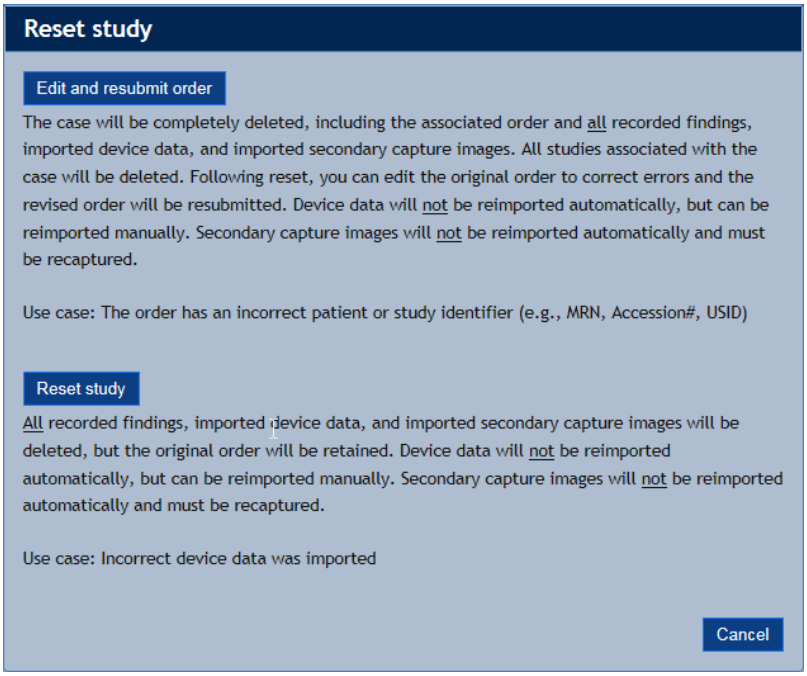


Canceling a Study

Clicking the **Cancel order** button cancels the study. You might use this option if an ordered study will not be performed for some reason. Note that only unsigned studies can be canceled. If no data has been recorded for the study (beyond the data imported with the order), then the study is removed from the ASCEND CV database. Otherwise, the study is marked as *'canceled'* but the associated data is retained in the ASCEND CV database.

Resetting a Study

Clicking the **Reset study** button returns a study back to its initial state immediately after processing of the associated order. Note that resetting a study deletes all data imported from clinical devices and all recorded findings. Only unsigned studies can be reset.



Clicking the **Reset study** button resets the study by (re)processing the original order. You might use this option to reset a study if incorrect device data was imported or a number of incorrect findings were recorded.

Clicking the **Edit and resubmit order** button displays the **Administer** form (shown above) allowing editing of order data before the order is (re)processed. Note that, in this case, all the study fields on the **Administer** form will be editable. You might use this option to reset a study if the original order contained an incorrect study identifier (Accession #, facility, or Universal Service ID).

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