

SecurView[®] DX/RT Workstation 9.0 Release Notes

MAN-10834 Rev 001

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1. Introduction

The Release Notes provide a listing of New Features, Problems Corrected, and Known Issues in the most recent release of the SecurView[®] DX/RT Workstation software. The 9.x releases include:

Version	Release Date	
9.0	November, 2014	
9.0.1	May, 2015	
9.0.2	April, 2016	

1.1. System Requirements for 9.0

	SecurView DX and RT Workstations	SecurView DX and RT Managers
Operating System	Windows 7	Windows Server 2008
Computer (for customers using Hologic provided hardware)	Dell T7500 or later	Dell T610 or later
Video card for high- resolution displays	DirectX support is required	_

Note: TechMate is not supported in version 9.0.

Please contact your Hologic Account Manager for details on upgrading to the required operating system and hardware.

The Focus feature requires images that are generated from the Dimensions[®] mammography system 1.8.2 or later.

2. Notes for Version 9.x

- **2.1.** New Features in 9.0.2
- 2.2. New Features in 9.0.1
- > 2.3. New Features in 9.0
- > 2.4. Problems Corrected in Version 9.0.2
- **2.5.** Problems Corrected in Version 9.0.1
- > 2.6. Problems Corrected in Version 9.0
- **2.7.** Known Issues in Version 9.0

2.1. New Features in 9.0.2

2.1.1. Unique Device Identifier Information (UDI)

The About tab displays UDI information.

2.2. New Features in 9.0.1

2.2.1. Send Annotations to PACS for Old and Read Studies

In earlier SecurView versions, it was not possible to make user markings and annotations on Old or Read studies and then send the new markings to PACS. Version 9.0.1 allows users to send changed or new markings on Old and Read studies to configured destinations using the Close Study dialog.

2.2.2. High Resolution Color Displays Supported

SecurView now supports high-resolution color displays. The Barco Coronis Uniti[™] 12MP display is available as part of a new SecurView model, or as a display upgrade for existing customers. Contact your Hologic Account Manager for details.

2.2.3. Improved Current and Prior Image Indication

As a visual cue to better differentiate current and prior images in review mode, the study date, digital marker, and stack indicator can be displayed differently for current and prior images depending on available display hardware. For color displays, they are displayed in different colors; for monochrome displays, they are displayed with different brightness levels.



2.2.4. Combine Current and Prior Images in a Single Stack

Hanging snapshots can now be configured to stack current and prior images together in one tile. A new configuration option has been added to the 'Patient evaluation' section of the Hanging Snapshots tab.

2.2.5. Start Cine Mode Automatically for Reconstructed Slices

A new option has been added to the Image Presentation tab under User Preferences to configure cine mode to start automatically whenever reconstructed slices are displayed in a single tiling ReportFlow step.

2.2.6. Send Only Barcoded Accession Number to Application Synchronization

When opening a patient by barcoding an accession number, only the study of the barcoded accession number is sent to Hologic Application Synchronization, and thus to connected reporting applications. In earlier versions all available studies for the patient were included.

2.2.7. New Views and View Modifiers Supported

The ISO and SPEC (specimen) views and NP, AC, IMF and AX view modifiers are now supported in digital markers and hanging snapshot configuration.

2.2.8. MammoNavigator Includes C-View[™] 2D Image Indication

C-View 2D images in TomoHD or ComboHD procedures are indicated by 'C' in the MammoNavigator overview.

2.2.9. Quantra[™] Results Display Updated

Quantra results are displayed with Quantra 2.1 result names, the Quantra version, and Quantra Breast Density Category (QDC) as a, b, c, or d.

2.3. New Features in 9.0

2.3.1. Continuous Zoom

A new button has been added to the toolbar and pie menu to activate Continuous Zoom during image review. It is also possible to select Continuous Zoom as the default cursor tool under User Preferences. When Continuous Zoom is active, any displayed image can be zoomed by clicking on a point of interest and dragging the mouse.



2.3.2. Focus

Focus can be used to easily visualize the correlation from a region of interest in a C-View 2D image to the most representative reconstructed slice. Focus is available in Single and Double tiling.

Whenever a C-View 2D image and the corresponding reconstructed slices are displayed in adjacent viewports, a new button appears with the Tomosynthesis Navigation buttons.



Clicking this button will activate the Focus mode. When Focus is active, clicking on a feature in the C-View 2D image will cause the reconstructed slices viewport to switch to the most representative slice.

When using the Focus mode, the scroll wheel on the mouse or keypad can be used to scroll through the reconstructed slices, even when the cursor is on the C-View 2D image. In addition, if Cine mode is applied to a focused reconstructed slice, local cine mode is applied automatically with the focused reconstructed slice as the center slice.

It is possible to apply a single instance of Focus by holding the [CTRL] key on the keyboard while clicking on the C-View 2D image.

Note: Focus requires images that are generated from the Dimensions mammography system 1.8.2 or later.

2.3.3. Performance Improvements

Version 9.0 takes advantage of 64-bit architecture to improve performance in the following areas:

Preparation time for Tomosynthesis images

The time to prepare images for presentation after they arrive at the system has been improved for both BTO and SCO formats.

Preparation time for Ultrasound images

The time to prepare ultrasound images after they arrive at the system has been improved for images that are routed to either the MG viewer or the MM viewer.

General image display

The time to open a case in review mode and to display images as you advance from one ReportFlow step to the next has been improved.

2.4. Problems Corrected in Version 9.0.2

2.4.1. Double-click to Single Tiling Behavior with Stacked Images

In previous versions of SecurView, stacked images showed the top time point after the user scrolled to a different time point and then double-clicked on the image. This problem has been corrected.

2.5. Problems Corrected in Version 9.0.1

2.5.1. Incorrect Image Orientation when Scrolling through Stacked Priors

Under certain circumstances, if the user scrolled through stacked priors rapidly, immediately after displaying a patient's images or advancing to a new ReportFlow step, some images were displayed in an incorrect orientation. This problem has been corrected.

2.5.2. Auto-fetch Stops Working After Failed Query

If a query to PACS initiated by the Auto-Fetch process failed, it could result in Auto-Fetch stopping indefinitely. The problem has been corrected.

2.6. Problems Corrected in Version 9.0

2.6.1. Burning Patient Data to DVD

In earlier versions, on client workstations when patient data was burned to DVD that spanned more than one disk, a failure occurred. This problem has been corrected.

2.6.2. Invalid Implementation Class UID

In version 8.4, an invalid implementation class UID resulted in the inability to establish connections with some PACS. This problem has been corrected.

2.7. Known Issues in Version 9.0

2.7.1. Digital Marker Appears on US Images Stacked with MG images

When ultrasound images are stacked with mammography images in a MG viewer tile, the laterality/view digital marker for the mammography image appears also on the ultrasound image.

2.7.2. AIE Filter Behavior Swapped in Magnifier

Within the Magnifier when AIE filtering is licensed, the AGR (aggressive) option applies the moderate AIE filter, and the MDR (moderate) option applies the aggressive AIE filter. For a workaround, contact Technical Support.

2.7.3. Ultrasound Measurement Calculations

When Pixel Spacing and Sequence of Ultrasound Regions are both present in an ultrasound image, SecurView uses the Pixel Spacing value to calculate measurement lengths.

2.7.4. Preparation Times for Color Ultrasound Images

Longer than normal preparation times may occur when color ultrasound images are sent to SecurView using compression transfer syntaxes. This problem can be resolved by disabling support for compression transfer syntaxes so that ultrasound images are sent uncompressed from PACS or from modalities. For assistance, contact Technical Support.

2.7.5. Annotations Displayed Incorrectly on Reduced Resolution Center Slice of SCO Image

If an annotation is made on a tomosynthesis image sent as Hologic SCO to a SecurView workstation, and then stored to PACS as a GSPS, the marking may appear at the wrong location on a PACS viewer if displayed on the reduced resolution center slice stored in the public pixel data attribute of a Hologic SCO image.

2.7.6. C-View BTO Diagnostic Print is not True Size

When C-View 2D images that have been received in BTO format are printed in Diagnostic mode, they are not printed True Size, as is expected, but rather are sized to fit the film area. If Diagnostic mode printing is required, the C-View 2D images should be printed from the Dimensions mammography system, or the C-View 2D output format on the Dimensions mammography system should be changed from BTO to MG. C-View 2D images in MG format can be printed True Size in Diagnostic mode on the SecurView workstation.

3. Security Enhancements

3.1. OS Patches from Microsoft

SecurView 9.0 is validated with Microsoft security updates for Windows Server 2008/Windows 7 x64 through December 2015.