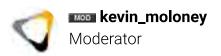


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Sensei Cloud Release 0.1.6171

Sensei Cloud

Weekly Release

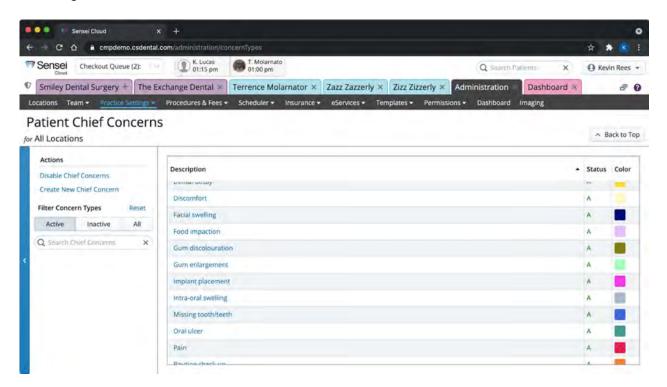
Build 0.1.6171 | May 6th, 2021

This week's Sensei Cloud updates continue to expand core application functionality and deliver on recent customer requests.

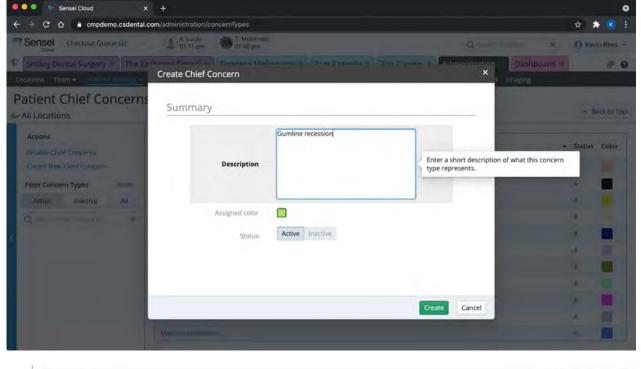
Patient Chief Concern

This week's release includes support for the documentation of patient chief concern as part of your clinical workflows. This enables you to record a primary issue (the chief concern), along with any relevant clinical notes, for a patient appointment or encounter. You can document the patient's chief concern via the Hard Tissue Chart [Patient Tab > Clinical > Hard Tissue Chart] or the Treatment Chart [Patient Tab > Clinical > Treatment Chart] screens.

Manage the list of chief concerns from the new Patient Chief Concerns screen [Administration Tab > Practice Settings > Patient Chief Concerns]. Sensei Cloud comes pre-populated with a list of chief concerns that are available for immediate use. You can create new items and edit or deactivate existing ones. NOTE: Patient chief concern functionality is enabled for your practice by default. If your practice does not document chief concern as part of patient care, click 'Disable Chief Concerns' to hide this functionality. Any existing chief concern data recorded will remain part of patient clinical history, but you will no longer be able to record new chief concerns.

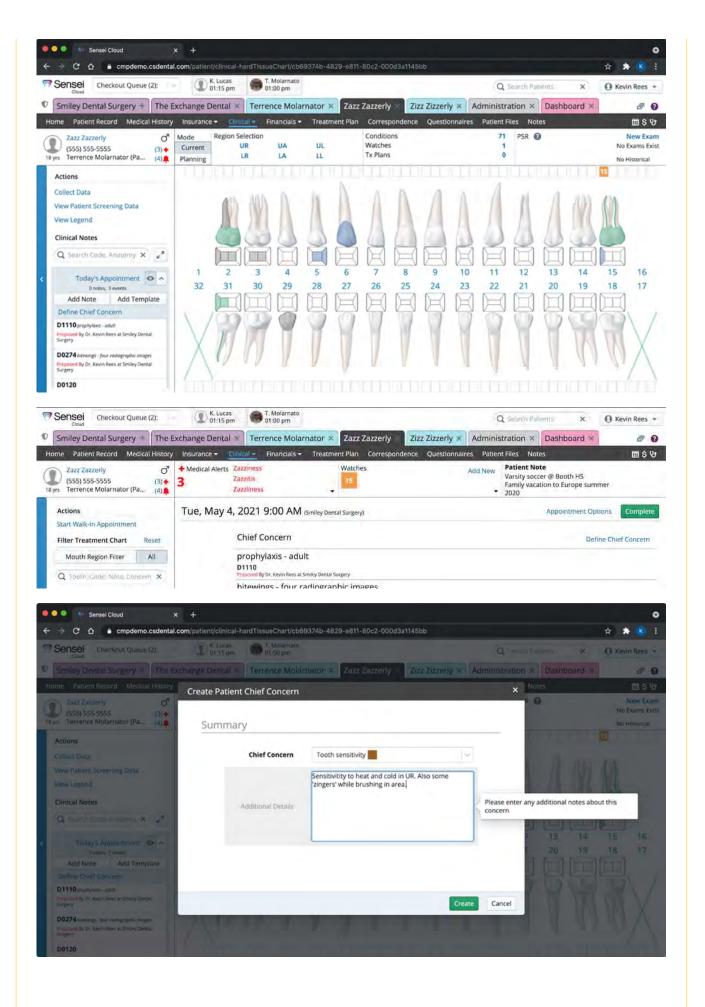


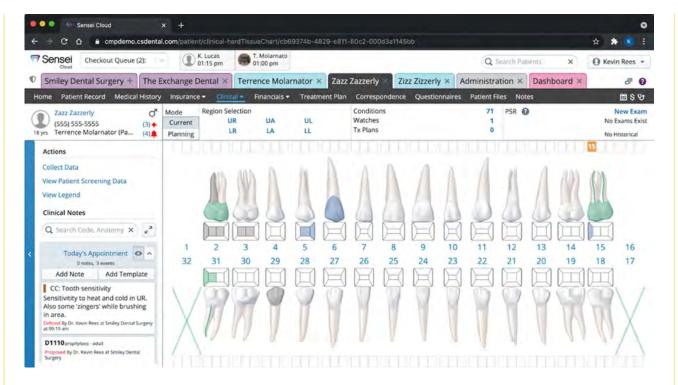
Click 'Create New Chief Concern' and then enter a (unique) description for the issue, which will be used whenever it is documented. Select an assigned color to make it more readily recognized when displayed in clinical contexts. Once created, this item will be available for documenting patient chief concerns.



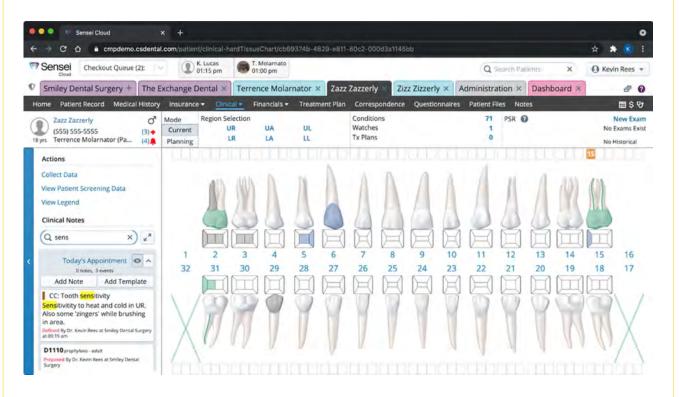


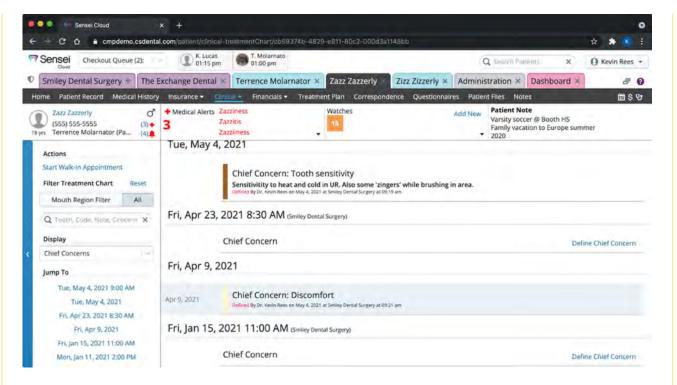
As previously mentioned, patient chief concerns can be documented in the Hard Tissue Chart and/or Treatment Chart screens [Patient Tab > Clinical > ...]. Click on 'Define Chief Concern' in the side panel of the Hard Tissue Chart (or within the associated date block of the Treatment Chart) to document the patient's primary issue. You can search for and select any (active) chief concern and enter any relevant notes. Once created, the chief concern is recorded as a clinical event in the patient's history. NOTE: Chief concern events can be edited or removed, similar to clinical notes. Simply hover over the event and click on the displayed icons. Any edits to existing clinical events are displayed; associated audit trail history is also available.





You can now search and filter a patient's clinical history by chief concern events. This includes the ability to search by the chief concern description (name) or any additional note text that was added. Within the Treatment Chart, you can also filter down the displayed contents to only those [chief concern] items.



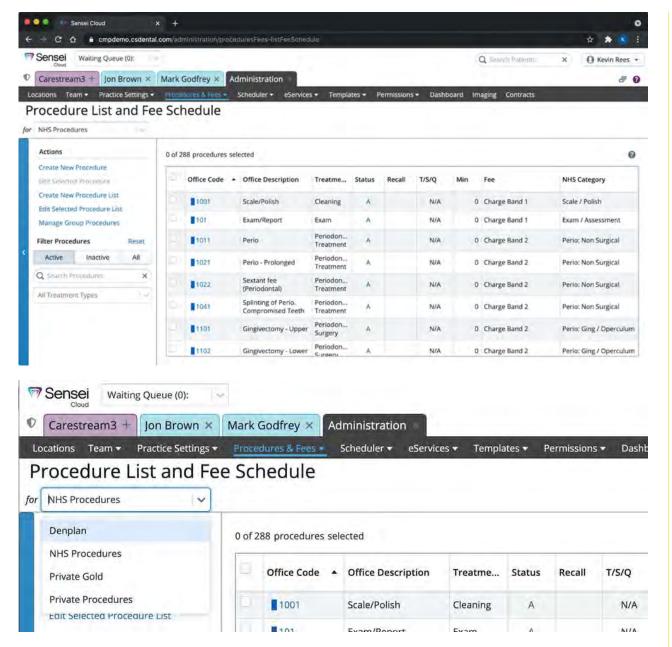


We hope that these new charting capabilities improve your clinical documentation workflows. Please send us your feedback on what works well and what additional enhancements are needed.

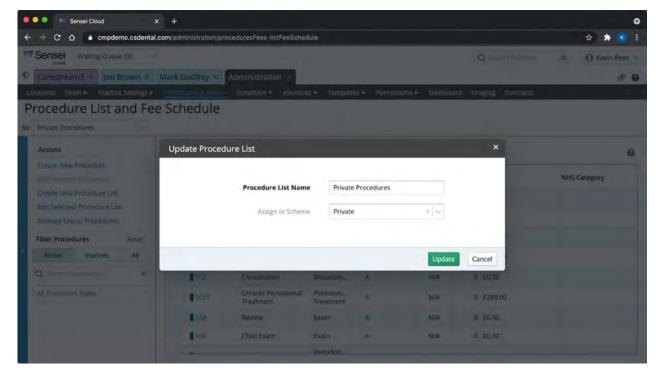
Support for Multiple Procedure / Fee Lists

In response to customer feedback, you can now create multiple Procedure Lists, enabling you to manage different treatment and fee options for your patient population. Multiple procedure lists provide your practice with the ability to maintain different service and fee schedules that can be used when scheduling, planning, or completing work in different contexts (e.g., in different locations, by different providers, for different patient populations).

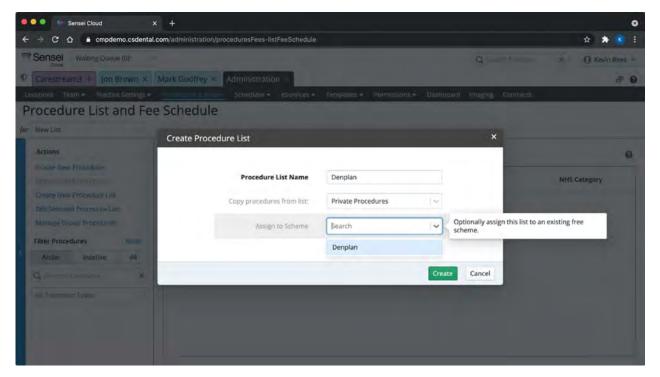
Procedure Lists are managed via the existing Procedure List and Fee Schedule screen [Administration > Procedures & Fees > Procedure List & Fee Schedule]. Existing procedure lists can now be selected in the banner, which then displays its contents. Once selected, the procedure list can be managed, including creating new procedures, editing existing procedures, and editing the details of the list itself (e.g., its name and associations). NOTE: Unless your practice creates additional Procedure Lists, workflows related to the use of procedures will not change (e.g., creating treatment plans, posting charges, scheduling procedures in appointments).

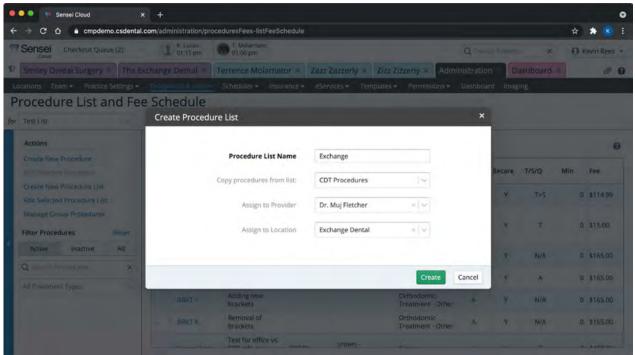


By default, your practice's existing procedure list / fee schedule is displayed. The existing procedure list for US practices has been named 'CDT Procedures', while UK practices will have two procedure lists - one for existing NHS procedures ('NHS Procedures') and another for existing private procedures ('Private Procedures'). NOTE: These procedure lists can be renamed by clicking 'Edit Selected Procedure List' and entering a new (unique) name to describe this list.



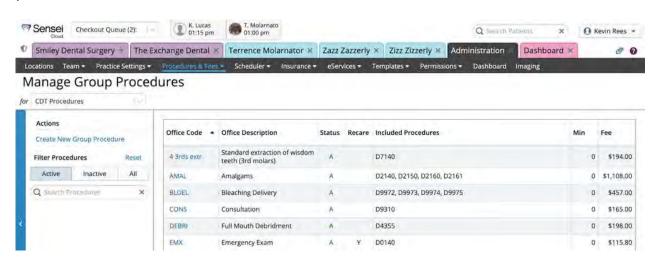
Click 'Create New Procedure List' and provide a (unique) name for the new list. To pre-populate the list with procedures, you can copy those from another existing list. Additionally, you can associate a procedure list with certain contexts of use. For US practices, a procedure list can be assigned to a provider and/or a location. Whenever a patient's default doctor or hygienist (assigned in their Patient Record) matches that of a procedure list, it will be the default list presented for procedure-based workflows (e.g., treatment planning). For UK practices, a procedure list can be assigned to a patient Scheme and is then presented by default whenever the patient's assigned scheme (defined in their Patient Record) matches a procedure list. NOTE: New procedure lists are not automatically generated for all existing schemes and will need to be created, if needed. For UK customers, the new Procedure List must be associated with an existing patient scheme before it can be used. Only one procedure list can be assigned to a given scheme.



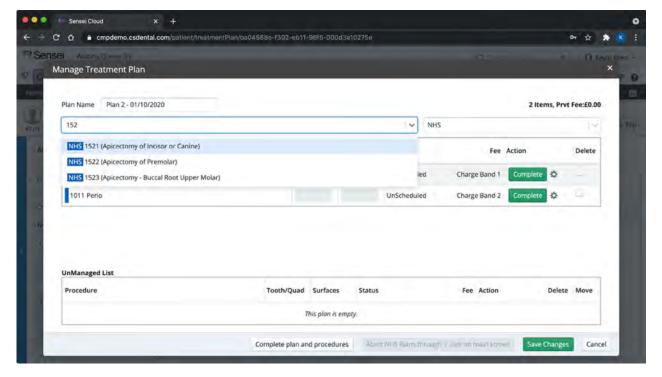


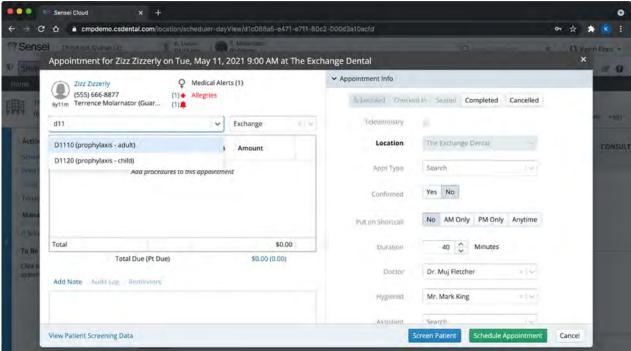
Once a new procedure list is created, it is automatically selected and displayed in the Procedure List and Fee Schedule screen. From here, you can create and add new procedures to the list, edit existing procedures that have been copied to the list, or deactivate existing procedures to prevent their future use. NOTE: All procedure-based actions that occur within a specific procedure list, such as new procedures or fee changes, only apply within the currently selected list.

Group procedures, which function as 'explosion codes' or 'procedure templates', are now associated with a given procedure list [Administration Tab > Procedures & Fees > Manage Group Procedures]. As with the Procedure List and Fee Schedule screen, you can select the desired procedure list in the Manage Group Procedures screen's banner. When creating and managing group procedures, you can only select items (codes) from the associated procedure list. NOTE: Copying procedures from an existing list when creating a new procedure list will not also create copies of that list's associate group procedures.



After you have created your procedure lists, they are available for use whenever searching for procedures to use within your scheduling, clinical, and financial workflows. As previously discussed, a specific procedure list may be selected by default, based on your present context. For example (in the US), if the patient's default doctor is associated with a specific procedure list, then it is selected by default when creating a new treatment plan or scheduling an appointment. Or (in the UK), if the patient's assigned Scheme is associated with a procedure list, then it is selected by default. When searching for and selecting procedure codes, only those from the selected list are available. However, you have the option to select an alternate procedure list, or mix and match procedure codes from multiple lists when needed.



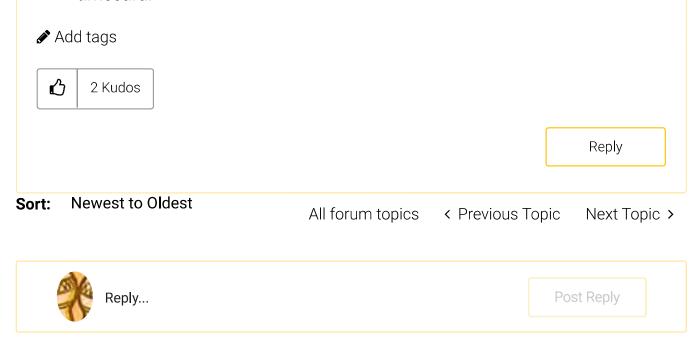


We hope that this expansion of the Procedure List and Fee Schedule functionality provides value for your clinical, scheduling, and financial workflows. We look forward to feedback on this new functionality and what additional enhancements might be useful.

Optimizations and Fixes

The following fixes and optimizations have been added to Sensei Cloud this week.

- 1. [UK ONLY] Per the current recommendations, the COVID-19 screening question for patient age has been adjusted to 70 years old.
- 2. [UK ONLY] Per the current recommendations, the COVID-19 screening questionnaire has been enhanced to include questions regarding testing status, results, and recommended self-isolation (based on NHS Test and Trace).
- 3. Addressed an issue in which a chair's non-working (closed) hours were sometimes not visually represented in the Schedule DayView when associated with a provider that has no working hours on a given day.
- 4. Resolved a defect in which a specific order of operations used when completing an appointment could sometimes prevent the team member from logging back in.
- 5. Removed a restriction that prevented the cancellation of non-COT claims while in the process of electronic submission. NOTE: COT claims for orthodontic contracts cannot be cancelled until they have been fully transmitted to the clearinghouse.
- 6. Fixed a bug in the Timecard Reporting UI that would sometimes generate an issue with displaying valid date values when printing a team member's timecard.





Carestream Dental LLC 3625 Cumberland Blvd. Ste. 700 Atlanta, GA 30339

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