

# Release notes

## Summary

This document contains the updates included in the Patient application version 1.268 and the Medical content version 1.158. There are no updates on Clinic or Manage in this release. The changes are expected to be launched to production on the 2nd of September.

## Patient application

### Changes in version 1.268

#### 1 SMS provider update (Link Mobility)

Due to changes that are to be implemented by our SMS provider LinkMobility on September 1st, **the platform will no longer send SMS to numbers with the country code for North Macedonia (+389)** without an additional fee.

If you want to ensure that these numbers will receive SMS in the future, please reach out to your Customer Success Manager so that we can arrange a solution for the additional fee.

Customers with patients using +389 numbers will be contacted directly.

#### 2 Updated async confirmation page

*This change only applies to customers that have patient-initiated async flows.*

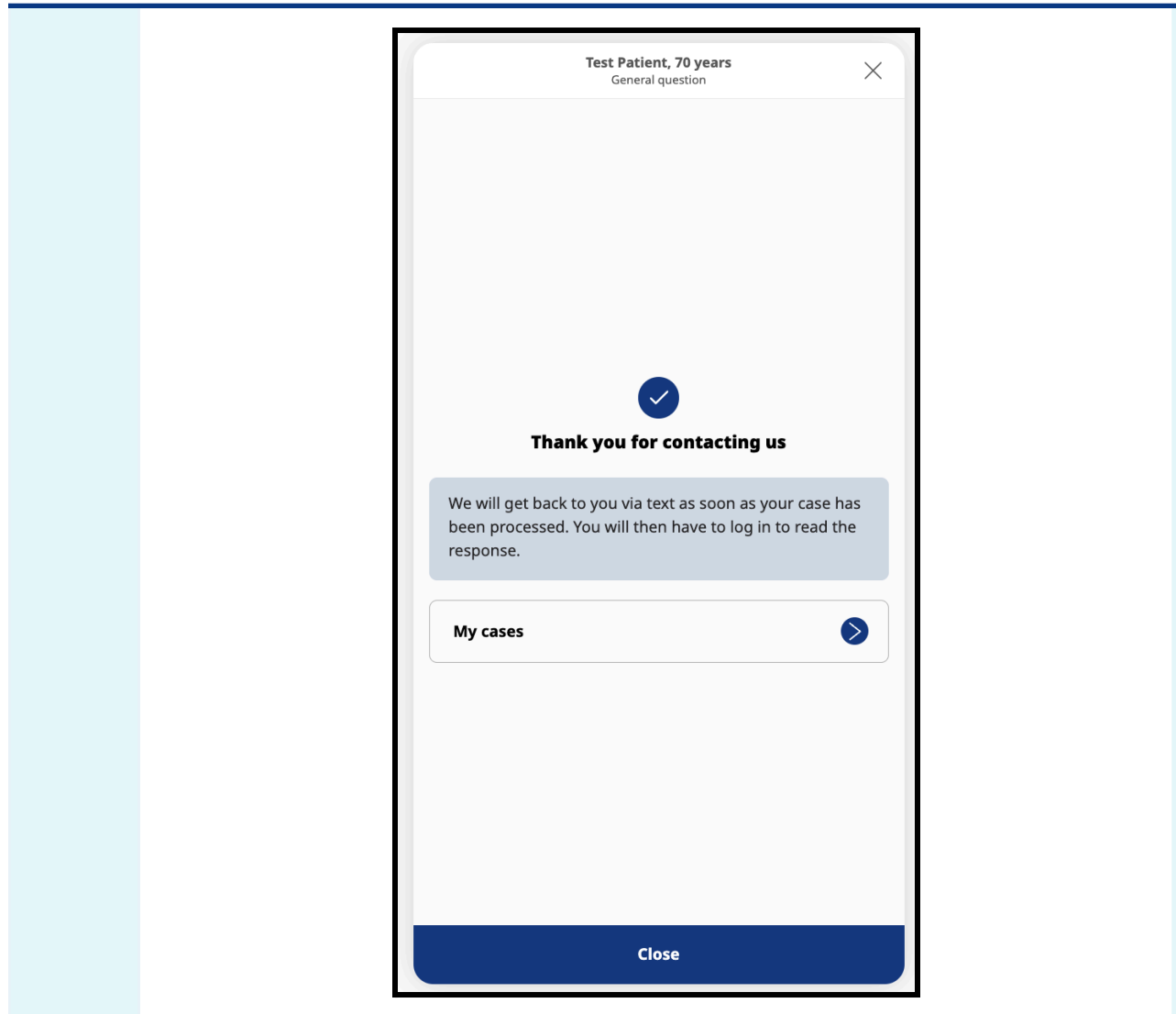
We have implemented a new confirmation page, which is shown after an async appointment has been created by a patient. Previously, patients first ended up in an empty chat after creation which could be confusing. Additionally, if the patient exited the chat and then tried to

return to the async chat before it was received, they landed on an old confirmation page which has now been replaced.

With this change, the patient will not reach the chat until a practitioner has received and started the async chat.

The new confirmation page contains a title and an information text. The information text is reused from the old confirmation page. This means that if the text has previously been configured for you as a customer, your customer-specific text will also be reused on the new confirmation page.

If you want to change the information text you can reach out to our support team.



## Medical Content

### Changes in version 1.158

#### Medical content populating the Triage product

The changes apply directly upon release for all customers, except for those with partner-specific questionnaires.

#### 1 Deescalation in the questionnaire *abnormalBleeding*

To reduce over-triage, a deescalation has been made in the questionnaire *abnormalBleeding*. The change applies to abdominal pain that is not recognized as menstrual pain, with or without bleeding. Patients with moderate pain that does not feel manageable, now receive the urgency level "Promptly" instead of "Immediate". If the pain is mild and feels manageable, the urgency level is instead "Planned".

#### 2 Change made to mental health questionnaires

In mental health questionnaires, one response option has been removed from the question about psychosis-like symptoms. This concerns the response option "Thoughts change places, get stuck and rush away". The change was made to reduce over-triage and affects the following questionnaires:

- *insomnia*
- *addiction*
- *crisisAndGrief*
- *depression*
- *neuropsychiatric*

### 3 Deescalation in the questionnaire *gi*

To reduce over-triage, a change has been made to the questionnaire *gi*. If a patient has stomach pain as their primary symptom, questions have been added regarding how long it has been since the onset and whether the symptoms have worsened.

### 4 Updates in the questionnaire *muscle*

Updates have been made to the questionnaire *muscle* to align with RGS updates and to reduce over-triage.

The urgency level for the RGS advice “Swelling or pain in the calf or entire leg” has been lowered from “Promptly” to “Acute”.

A question regarding “muscle cramps in multiple parts of the body at the same time” has also been added, with follow-up questions about whether they are currently ongoing, and when they started.

### 5 Minor changes to the questionnaire *earSymptoms*

Minor changes have been made to the questionnaire *earSymptoms*. A symptom question has been redesigned so that you can select multiple options at the same time. To avoid questions about the cause of onset being asked multiple times, all causes of onset have also been combined into one question.

### 6 Minor change to the questionnaire *headache*

A minor change has been made to the questionnaire *headache* for patients over 50. If the headache has not been recognized previously, the urgency level shall be “Planned”.

## **Observe!**

What is included in the release notes is what is intended to be released. Be aware that the development is currently under regression testing and have to pass the tests in order to be released. Therefore, if a change is made to the release that will affect what is written in the release notes, a new version of release notes will be communicated.

## **Questions**

If you have any questions, please contact Platform24 Support or your Customer Success Manager.