



*AAPM Computed Tomography Radiation
Dose Education Slides
GE Healthcare Version*

Many of the terms used in these slides can be
found in the CT Terminology Lexicon

[http://www.aapm.org/pubs/CTProtocols/docu
ments/CTTerminologyLexicon.pdf](http://www.aapm.org/pubs/CTProtocols/documents/CTTerminologyLexicon.pdf)

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Disclaimer

- Screen captures are **examples** of a common (or latest) software version only and all software versions are not represented
- The information contained herein is current as of the date shown on the title slide
- The master version of these slides is located at:
 - <http://www.aapm.org/pubs/CTProtocols/documents/EducationSlides.pptx>
- Modification of the content of these slides is **not allowed**.



Vendor Specific Slide Details

- The presence of a vendor name in the footer of the slide indicates that the slide is vendor specific slide
- White text is used throughout to indicate vendor specific language
- An example of a vendor specific slide follows



Generic Parameter/Topic Name

Vendor Specific Name

Vendor screen
capture of how the
acquisition
parameter is set
or how
information on the
topic is displayed

Text describing acquisition
parameter or topic



Motivation

- These slides are provided to aid in understanding the factors that affect radiation dose in CT studies
- Image patients **wisely** and **gently**
 - A CT study should use as little radiation as possible, while still meeting the image quality needs of the exam
 - A CT study that is non-diagnostic because the radiation dose is too low may require rescanning the patient – increasing the total patient dose



imagegently.org

imagewisely.org





Outline

- What is Dose?
- Acquisition Parameter Settings
- Dose Modulation and Reduction
- Dose Display



What Is Dose?

- Volume Computed Tomography Dose Index ($CTDI_{vol}$) is a standardized parameter to measure **Scanner Radiation Output**
 - $CTDI_{vol}$ is NOT patient dose
 - $CTDI_{vol}$ is reported in units of mGy for either a 16-cm (for head exams) or 32-cm (for body exams) diameter acrylic phantom
 - For the same technique settings, the $CTDI_{vol}$ reported for the 16-cm phantom is about twice that of the 32-cm phantom
 - The reported $CTDI_{vol}$ is based on measurements made by the manufacturer in a factory setting
- In these slides, the term "patient dose" is used to describe the absorbed dose to a patient, while the generic term "dose" refers to $CTDI_{vol}$

1. Bauhs, J. A., Vrieze, T. J., Primak, A. N., Bruesewitz, M. R., & McCollough, C. H. (2008). CT Dosimetry: Comparison of Measurement Techniques and Devices1. *Radiographics*, 28(1), 245-253. doi:10.1148/rg.281075024
2. McCollough, C. H., Primak, A. N., Braun, N., Kofler, J., Yu, L., & Christner, J. (2009). Strategies for reducing radiation dose in CT. *Radiologic clinics of North America*, 47(1), 27-40.
3. International Electrotechnical Commission. *Medical Electrical Equipment. Part 2–44: Particular requirements for the safety of x-ray equipment for computed tomography*. 2.1. International Electrotechnical Commission (IEC) Central Office; Geneva, Switzerland: 2002. IEC publication No. 60601–2–44.



How is $CTDI_{vol}$ related to patient dose?

- $CTDI_{vol}$ is not patient dose
- The relationship between the two depends on many factors, including patient size and composition
- [AAPM Report 204](#) introduces a parameter known as the Size Specific Dose Estimate (SSDE) to allow estimation of patient dose based on $CTDI_{vol}$ and patient size
- For the same $CTDI_{vol}$, a smaller patient will tend to have a higher patient dose than a larger patient

What is Dose?

http://www.aapm.org/pubs/reports/RPT_204.pdf



How is $CTDI_{vol}$ related to patient dose?

120 kVp at 200 mAs



32 cm
Phantom

$CTDI_{vol} = 20 \text{ mGy}$

120 kVp at 200 mAs



32 cm
Phantom

$CTDI_{vol} = 20 \text{ mGy}$

Both patients scanned with the same $CTDI_{vol}$
Patient dose will be higher for the smaller patient

What is Dose?



How is $CTDI_{vol}$ related to patient dose?

120 kVp at 100 mAs



32 cm
Phantom

$CTDI_{vol} = 10$ mGy

120 kVp at 200 mAs



32 cm
Phantom

$CTDI_{vol} = 20$ mGy

**Smaller patient scanned with a lower $CTDI_{vol}$
Patient doses will be approximately equal**

What is Dose?



Size Specific Dose Estimate (SSDE)

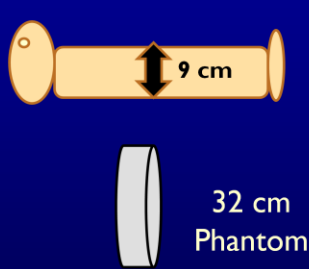
- AAPM report 204 describes a method to calculate SSDE using $CTDI_{vol}$
- Conversion factors based on patient size (e.g., AP or lateral width, effective diameter) are provided to **estimate** patient dose for a patient of that size
- However, SSDE is still not the exact patient dose, as factors such as scan length and patient composition may differ from the assumptions used to calculate SSDE
- SSDE is not dose to any specific organ, but rather the mean dose in the center of the scanned volume

What is Dose?



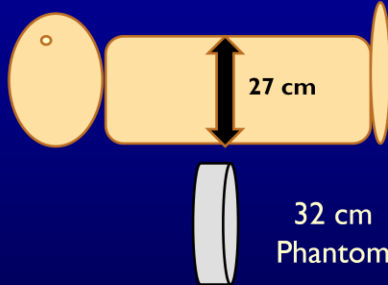
How is $CTDI_{vol}$ related to patient dose?

120 kVp at 100 mAs



$CTDI_{vol} = 10 \text{ mGy}$
 $SSDE = 13.2 \text{ mGy}$

120 kVp at 200 mAs



$CTDI_{vol} = 20 \text{ mGy}$
 $SSDE = 13.2 \text{ mGy}$

Patients have equivalent SSDE

What is Dose?



Why Use $CTDI_{vol}$?

- $CTDI_{vol}$ provides information about the amount of radiation used to perform the study
- $CTDI_{vol}$ is a useful index to track across patients and protocols for quality assurance purposes
- $CTDI_{vol}$ can be used as a metric to compare protocols across different practices and scanners when related variables, such as resultant image quality, are also taken in account
- The ACR Dose Index Registry (DIR) allows comparison across institutions of $CTDI_{vol}$ for similar exam types (e.g., routine head exam)

What is Dose?

1. McCollough, C. H., Leng, S., Yu, L., Cody, D. D., Boone, J. M., & McNitt-Gray, M. F. (2011). CT Dose Index and Patient Dose: They are Not the Same Thing, EDITORIAL, *Radiology* 259(2), 311-316.



Dose Length Product

- The Dose Length Product (DLP) is also calculated by the scanner
- DLP is the product of the length of the irradiated scan volume and the average $CTDI_{vol}$ over that distance
- DLP has units of $mGy \cdot cm$

What is Dose?



Useful Concepts/Terms

- The relationships between acquisition parameters and $CTDI_{vol}$ described in the following slides assume all other parameters are held constant
- The relationship between a parameter and $CTDI_{vol}$ is often described as **proportional** in some way
 - The symbol \propto is used to indicate “proportional to”
- Directly proportional means that a change in the parameter results in the same change in $CTDI_{vol}$
 - Example: Doubling the rotation time from 0.5 to 1.0 seconds will double the $CTDI_{vol}$
- Inversely proportional means that a change in a parameter has the opposite effect on $CTDI_{vol}$
 - Example: Doubling the pitch from 1 to 2 will reduce the $CTDI_{vol}$ by half



Acquisition Parameter Settings

- Acquisition Parameters define the technique that will be used and how the scan will proceed
- Acquisition Parameters are set in the user interface where scans are prescribed
- Changing a single Acquisition Parameter while holding everything else constant will typically affect the $CTDI_{vol}$ for that scan
- The following slides describe what that affect is for each parameter



Scan Mode

- CT Scanners offer a variety of **Scan Modes** which describe how the table moves during an exam
- **Scan Modes** include
 - Axial
 - Helical or Spiral
 - Dynamic

The Acquisition Parameters that affect CTDIvol may change amongst different Scan Modes

Acquisition Parameter Settings



Dynamic Scan Mode Notes

- In the Dynamic Scan Mode multiple acquisitions covering the same body region are acquired. Examples of these study types include:
 - Perfusion Studies
 - Bolus Tracking Studies
 - Test Bolus Studies
- Dynamic Scans often have large $CTDI_{vol}$ values because the scanner reports the sum of the $CTDI_{vol}$ values from each rotation
- The reported $CTDI_{vol}$ is NOT skin dose or organ dose

Acquisition Parameter Settings

1. Bauhs, J. A., Vrieze, T. J., Primak, A. N., Bruesewitz, M. R., & McCollough, C. H. (2008). CT Dosimetry : Comparison of Measurement Techniques and Devices. *Radiographics*, 28(1), 245-254.
2. Zhang, D., Cagnon, C. H., Villablanca, J. P., McCollough, C. H., Cody, D. D., Stevens, D. M., Zankl, M., et al. (2012). Peak Skin and Eye Lens Radiation Dose From Brain Perfusion CT Based on Monte Carlo Simulation. *American Journal of Roentgenology*, 198(2), 412-417.



GE Healthcare: Scan Mode

Axial Scan Type

| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (mm) |
|--------|------------------|----------------|--------------|---------------|-------------|---------------|
| Split | | | | | | |
| 1-10 | Axial Full 1.0 s | \$0.000 | \$0.000 | 10 | 5.0 1i | 0.000 |

Zero Interval, 1i mode and same location for Start/End, sets the scanner to acquire the specified Number of Images at the same location to track a contrast bolus for a Test Bolus acquisition.

Acquisition Parameter Settings

In Axial mode, zero interval provides ability to acquire No. of Images at the same table location to provide data with time sensitive information.



GE Healthcare: Scan Mode

Cine Scan Type

Protocol: 1.28 CT Perfusion 350-370 Strcm Series: 3

Anatomical Reference: OM

Patient Orientation: Head First

Patient Position: Supine

Series Description: Perfusion 370 -40ml/4ccsec

Dose Information:

| Images | CTDIvol mGy | DLP mGy-cm | Dose Eff. % | Phantom cm |
|--------|-------------|------------|-------------|------------|
| 1-712 | 530.37 | 2121.48 | 92.60 | Head 16 |

Projected series DLP: 3894.04 mGy-cm
Accumulated exam DLP: 0.00 mGy-cm

| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (mm) | Gantry Tilt | SFOV | kV | mA | Total Exposure Time | Prep Group (s) | ISI (s) | Breath Hold (s) | Breath Time (s) | Voice Lights Timer | Cine Duration (s) |
|--------|----------------|----------------|--------------|---------------|---------------------|---------------|-------------|------|----|-----|---------------------|----------------|---------|-----------------|-----------------|--------------------|-------------------|
| 1-712 | One Full 1.8 s | 39,000 | 325,000 | 712 | 5.0 81 0.30 s | 0.000 | 38.0 | Head | 80 | 180 | 45.01 | 5.0 | 1.0 | II | II | II | 45.0 |

In Cine Mode, Cine Duration defines how long the x-ray is on for a given location. If the interval is 0, the table does not move and the full duration is at the prescribed location, as in CT Perfusion imaging.

Acquisition Parameter Settings

In Cine mode, Cine Durations defines the period of time that x-ray is on for a given location. The interval can be zero such as in CT Perfusion image or be equal to the detector coverage such as in retrospective respiratory gating acquisitions.



Table Feed/Increment

- Is the movement of the table through the bore of the scanner over a full 360 degree rotation
- Units: millimeters/rotation or millimeters/second
- The parameter is known both as **Table Feed** (helical/spiral acquisition) & **Table Increment** (axial acquisition)

Table Feed may affect $CTDI_{vol}$ through its inclusion in Pitch (discussed later)

Acquisition Parameter Settings

AAPM Working Group on Standardization of CT Nomenclature and Protocols

GE Healthcare: Table Feed/Increment

Helical – mm/rot

In Helical, table feed (speed) is expressed in mm per rotation based on the detector coverage and pitch selected. (Note that both mm/rot and mm/s are provided).

Acquisition Parameter Settings

In Helical Table Feed (Speed) is expressed in mm per rotation based on the Detector Coverage and Pitch selected and the Thickness Speed screen.

AAPM Working Group on Standardization of CT Nomenclature and Protocols

GE Healthcare: Table Feed/Increment

Axial and Cine – interval

| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval | Gantry |
|--------|------------------|----------------|--------------|---------------|-------------|----------|--------|
| 1-12 | Axial Full 1.0 s | \$0.000 | \$35.000 | 12 | 5.0 41 | 20.000 | 30.0 |
| 13-28 | Axial Full 1.0 s | \$60.000 | \$135.000 | 16 | 5.0 41 | 20.000 | 30.0 |

Detector Coverage (mm): 1.25, 2.5, 5.0, 10.0, 20.0, 40.0

Rotation Time (s): 0.35, 0.37, 0.4, 0.42, 0.45, 0.47, 0.5, 0.6, 0.7, 0.8, 0.9, 1.0, 2.0

In Axial and Cine, Increment (interval) is expressed in mm based on the detector coverage selected in Interval.

Acquisition Parameter Settings

In Axial and Cine, Increment (interval) is expressed in mm based on the Detector Coverage selected in the Thickness Speed screen. In Axial and Cine, the Increment (Interval) is equal to Detector Coverage.



Detector Configuration

- Is the combination of the number of data channels and the width of the detector associated with each data channel
- The **Detector Configuration** determines the Beam Width or Beam Collimation (nT), which is the number of channels (n) times the detector width associated with each data channel (T)
- For a selected detector width per data channel, a smaller total Beam Collimation usually has a higher $CTDI_{vol}$ than a larger Beam Collimation
 - Example: On a 16 slice scanner with a detector width per channel of 1.25 mm, a collimation of $4 \times 1.25\text{mm}$ is generally less dose efficient than a collimation of $16 \times 1.25\text{mm}$

Users should monitor $CTDI_{vol}$ values when changing detector configuration

Acquisition Parameter Settings



GE Healthcare: Detector Configuration

Axial, Cine, Helical, Cardiac Scan Type - Detector Coverage

The figure displays four screenshots of the GE Healthcare CT acquisition parameter settings interface, arranged in a 2x2 grid. Each screenshot is for a different scan type: Axial (top-left), Helical (top-right), Cine (bottom-left), and Cardiac (bottom-right). The settings are as follows:

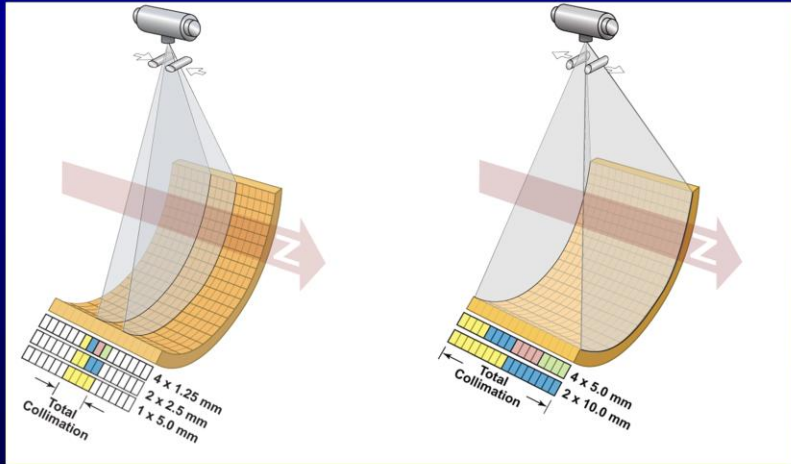
- Axial:** Detector Coverage (mm) [1.25, 2.5, 5.0], Axial Thickness (mm) [10.0, 20.0, 40.0], Coverage Time: 5.0 s, Rotation Time (s) [0.80, 1.25, 2.0, 3.0, 4.0], Pitch & Speed (mm/s) [0.625, 1.25, 2.5, 5.0].
- Helical:** Detector Coverage (mm) [20.0, 40.0], Axial Thickness (mm) [0.625, 1.25, 2.5], Coverage Time: 4.0 s, Rotation Time (s) [0.30, 0.37, 0.4, 0.50, 0.60, 0.80, 0.9, 1.0, 1.20, 1.50], Pitch & Speed (mm/s) [0.625, 1.25, 2.5, 5.0].
- Cine:** Detector Coverage (mm) [1.25, 2.5, 5.0], Axial Thickness (mm) [10.0, 20.0, 40.0], Coverage Time: 2.0 s, Rotation Time (s) [0.80, 1.25, 2.0, 3.0, 4.0], Pitch & Speed (mm/s) [0.625, 1.25, 2.5, 5.0].
- Cardiac:** Detector Coverage (mm) [40.0], Axial Thickness (mm) [0.625, 1.25, 2.5], Coverage Time: 2.0 s, Rotation Time (s) [0.30, 0.37, 0.4, 0.50, 0.60, 0.80, 0.9, 1.0, 1.20, 1.50], Pitch & Speed (mm/s) [0.625, 1.25, 2.5, 5.0].

Detector Configuration for 64 slice systems always acquires using 0.625 mm elements. Detector Coverage defines how much of the configuration is used for the acquisition.

Acquisition Parameter Settings



Detector Configuration



Acquisition Parameter Settings



Pitch

- Is the Table Feed per gantry rotation divided by the beam width/collimation
- *Pitch* is the ratio of two distances and therefore has no units
- Users should monitor other parameters when changing *Pitch*. The scanner may or may not automatically compensate for changes in *Pitch* (for example, by changing the tube current) to maintain the planned $CTDI_{vol}$.

$CTDI_{vol} \propto 1/Pitch$:

Hitachi, Toshiba (no AEC)

$CTDI_{vol}$ independent of *Pitch*:

GE, Siemens, Philips, Neusoft, Toshiba (AEC)

Acquisition Parameter Settings



Pitch

- $CTDI_{vol}$ may not change in the expected manner if the scanner automatically adjust other parameters when the pitch is changed
- The relationships between $CTDI_{vol}$ and pitch for the different vendors are described below
 - $CTDI_{vol}$ inversely proportional to change in pitch: Hitachi, NeuroLogica
 - $CTDI_{vol}$ constant when pitch is changed due to changes to other parameters: GE, Neusoft, Philips and Siemens
 - The relationship between $CTDI_{vol}$ and pitch depends on scan mode or Software version: Toshiba

AAPM Working Group on Standardization of CT Nomenclature and Protocols

GE Healthcare: Pitch

Pitch selection is based on Detector Coverage

| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (mm) | Gantry Tilt |
|--------|--------------------|----------------|--------------|---------------|-------------------------|---------------|-------------|
| 1-81 | Helical Full 0.5 s | 30.000 | 1400.000 | 81 | 5.0 55.00 1.375:1 | 5.000 | 30.0 |

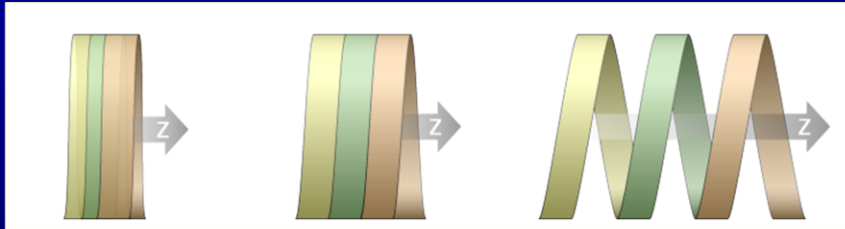
| | | | | | | | |
|------------------------|------------------|------------------|------------------|------|------|------|-----|
| Detector Coverage (mm) | 20.0 | 40.0 | | | | | |
| Helical Thickness (mm) | 0.625 | 1.25 | 2.5 | | | | |
| Pitch & Speed (mm/rot) | 0.516:1 20.62 | 0.894:1 38.37 | 1.375:1 55.00 | | | | |
| Rotation Time (s) | 0.35 | 0.37 | 0.4 | 0.42 | 0.45 | 0.47 | 0.5 |
| | 0.6 | 0.7 | 0.8 | 0.9 | 1.0 | 2.0 | |

Acquisition Parameter Settings

Pitch selection is based on Detector Coverage.



Pitch



Pitch < 1
Beam Width has some overlap at each view angle from rotation to rotation

Pitch = 1
No overlap of Beam Width at each view angle and no view angles not covered at certain table positions

Pitch > 1
Some view angles are not covered by the beam width at certain table positions

Acquisition Parameter Settings



Exposure Time per Rotation

- Is the length of time, in seconds, that the X-ray beam is “on” during a gantry rotation
 - It takes into account the gantry rotation time and angular acquisition range
- Units: seconds
- Users should monitor other parameters when changing *Exposure Time per Rotation*. The scanner may or may not automatically compensate for changes in *Exposure Time per Rotation*(for example, by changing the tube current)

$CTDI_{vol} \propto \text{Exposure Time per Rotation}$

Hitachi, NeuroLogica, Toshiba (no AEC)

$CTDI_{vol}$ independent of Exposure Time per Rotation:

GE, Siemens, Philips, Neusoft, Toshiba (AEC)

Acquisition Parameter Settings



Exposure Time per Rotation

- $CTDI_{vol}$ may not change in the expected manner if the scanner automatically adjust other parameters when the exposure time per rotation is changed
- The relationships between $CTDI_{vol}$ and exposure time per rotation for the different vendors are described below
 - $CTDI_{vol}$ proportional to change in parameter: Hitachi and NeuroLogica
 - $CTDI_{vol}$ constant when the parameter is changed due to changes to other parameters: GE, Neusoft, Philips and Siemens
 - The relationship between $CTDI_{vol}$ and the parameter depends on scan mode or Software version: Toshiba



GE Healthcare: Exposure Time per Rotation

Rotation time is changed and Manual mA value is not changed, CTDIvol is changed.

Protocol: 6.2 Chest Abd Pelvis 0.40.5 s 5m Series: 2

Dose Information

| Images | CTDIvol mGy | DLP mGy-cm | Dose Est. % | Phantom cm |
|--------|-------------|------------|-------------|------------|
| 1-61 | 6.68 | 243.82 | 92.60 | Body 32 |
| 62-122 | 10.03 | 365.47 | 92.60 | Body 32 |

Projected series DLP: 608.29 mGy-cm
Accumulated exam DLP: 0.00 mGy-cm

| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (mm) | Gantry Tilt | SFOV | kV | mA | Total Exposure Time | Prep Group (s) | ASD (s) | Breath Hold (s) | Breath Time (s) | Voice Lights Timer | Close Duration (s) |
|--------|--------------------|----------------|--------------|---------------|-------------------------|---------------|-------------|------------|-----|-----|---------------------|----------------|---------|-----------------|-----------------|--------------------|--------------------|
| 1-61 | Helical Full 0.4 s | 30.000 | 1300.000 | 61 | 5.0 50.00 1.375:1 | 5.000 | 30.0 | Large Body | 120 | 300 | 2.65 | 30.0 | 1.3 | N | N | 2 T | 2.0 |
| 62-122 | Helical Full 0.4 s | 30.000 | 1300.000 | 61 | 5.0 50.00 1.375:1 | 5.000 | 30.0 | Large Body | 120 | 300 | 3.98 | 35.0 | 1.3 | N | N | 2 T | 2.0 |

Acquisition Parameter Settings

If the Rotation Time is changed and the Manual mA value is not changed, the CTDIvol will be changed.



Tube Current

- Determines the number of electrons accelerated across the x-ray tube per unit time
- Units: milliAmperes (mA)
- $CTDI_{vol}$ is directly proportional to **Tube Current**

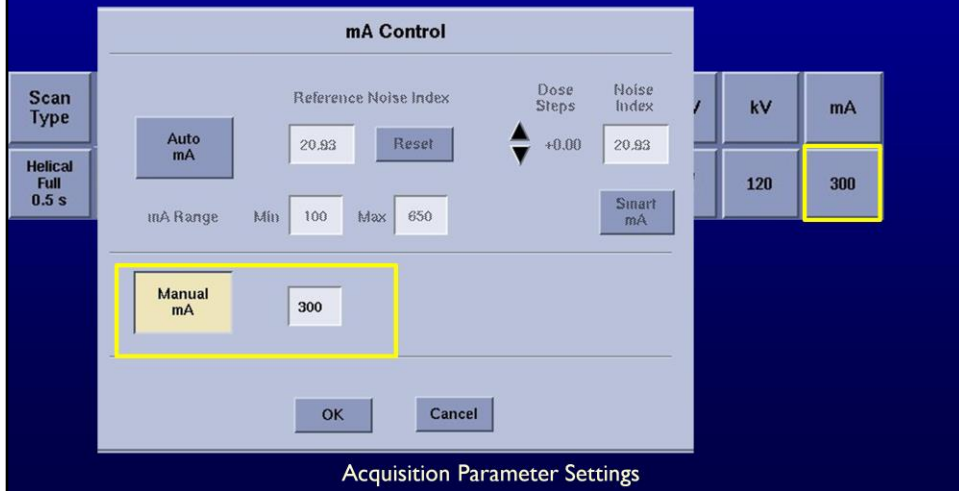
$$CTDI_{vol} \propto \text{Tube Current}$$

Acquisition Parameter Settings



GE Healthcare: Tube Current

Manual mA Control



Manual mA Control allows entry of explicit mA value with in the valid mA range of 10 to 835mA depending on X-Ray tube and generator type.



Tube Potential

- Is the electrical potential applied across the x-ray tube to accelerate electrons toward the target material
- Units: kiloVolts (kV or kVp)
- CTDI_{vol} is **approximately** proportional to the square of the percentage change in **Tube Potential**

$$\text{CTDI}_{\text{vol}} \propto \left(\frac{kV_{\text{new}}}{kV_{\text{old}}} \right)^n$$

$n \approx 2 \text{ to } 3$

Acquisition Parameter Settings

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GE Healthcare: Tube Potential

Manual kV Control pop-up

| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (mm) | Gantry Tilt | SFOV | kV | mA | Total Exposure Time |
|--------|------------------|----------------|--------------|---------------|-------------|---------------|-------------|------|-----|-----|---------------------|
| 1-12 | Axial Full 1.0 s | \$0.000 | \$55.000 | 12 | 5.0 4i | 20.000 | \$0.0 | Head | 120 | 300 | 3.00 |

Acquisition Parameter Settings

Using Manual kV control, kV is selected from pop-up menu for selection of 80, 100, 120, 140 kV.



Tube Current Time Product

- Is the product of Tube Current and the Exposure Time per Rotation
- Units: milliAmpere-seconds (mAs)
- $CTDI_{vol}$ is directly proportional to Tube Current Time Product

$$CTDI_{vol} \propto \text{Tube Current Time Product}$$

Acquisition Parameter Settings



GE Healthcare: Tube Current Time Product

mAs is manual calculation of mA x rotation time

Group 1 – 200mA x 1s = 200mAs at 140kV

Group 2 – 320mA x 1s = 320mAs at 120kV

| Images | | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (mm) | Gantry Tilt | SFOV | kV | mA | Total Exposure Time | Prep Group (s) | ISD (s) | Breath Hold (s) | Breathe Time (s) | Voice Lights Timer | Cine Duration (s) |
|--------|-------------------|-----------|----------------|--------------|---------------|-------------|---------------|-------------|------|-----|------|---------------------|----------------|---------|-----------------|------------------|--------------------|-------------------|
| 1-12 | Actual Full 1.0 s | \$0.000 | \$55.000 | 12 | 5.0 41 | 20.000 | \$0.0 | Head | 140 | 200 | 3.00 | 0.0 | 1.3 | N | N | N | N | 2.0 |
| 13-28 | Actual Full 1.0 s | \$00.000 | \$135.000 | 16 | 5.0 41 | 20.000 | \$0.0 | Head | 120 | 320 | 4.00 | 1.0 | 1.3 | N | N | N | N | 2.0 |

Acquisition Parameter Settings



Field Of Measurement

- Is the diameter of the primary beam in the axial plane at the gantry iso-center
- Units: millimeters (mm)
- $CTDI_{vol}$ may decrease with a decrease in the Field of Measurement
 - The relationship is vendor specific

Users should monitor the $CTDI_{vol}$ values when changing the Field of Measurement

Acquisition Parameter Settings



GE Healthcare: Field of Measurement

Scan-Field-of-View is used to define this parameter on GE CT systems. SFOV is selected by a body region button and maps to (25 or 32) or 50 cm.

Select the desired SFOV.

| | | | | | | | | | | | | | | | |
|--------------------------|--------------------|----------------|--------------|---------------|-------------------------|----------------|-------------|------------|-----|-------------|---------------------|------------|--|--------|--|
| Select the desired SFOV. | | | | | | | | | | | | | | | |
| Ped Head | | Ped Body | | Small Head | | Head | | Small Body | | Medium Body | | Large Body | | Cancel | |
| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (min) | Gantry Tilt | SFOV | kV | mA | Total Exposure Time | | | | |
| Split | | | | | | | | | | | | | | | |
| 1-61 | Helical Full 0.5 s | \$0.000 | 1300.000 | 61 | 5.0 55.00 1.375:1 | 5.000 | \$0.0 | Large Body | 120 | 300 | 3.32 | | | | |

Acquisition Parameter Settings

Scan-Field-of-View is used to define this parameter. Scan-Field-of-View is 32 or 50cm depending on mode selected. Some model maybe 25 or 50cm.



Beam Shaping Filter

- Is the scanner component that modifies the energy spectrum and spatial distribution of the primary beam
- **Beam Shaping** may include a bow tie filter and/or flat filters
- $CTDI_{vol}$ is affected by a change in **Beam Shaping Filters**
 - The relationship is vendor and filter specific

Users should monitor $CTDI_{vol}$ values when changing the Beam Shaping Filter

Acquisition Parameter Settings



GE Healthcare: Beam Shaping Filter

Scan Field of View – SFOV selects the bowtie filter.
GE systems have 2 or 3 bowtie filters.

Select the desired SFOV.

| | | | | | | | |
|----------|----------|------------|------|------------|-------------|------------|--------|
| Ped Head | Ped Body | Small Head | Head | Small Body | Medium Body | Large Body | Cancel |
|----------|----------|------------|------|------------|-------------|------------|--------|

| Images | Scan Type | Start Location | End Location | No. of Images | Thick Speed | Interval (mm) | Gantry Tilt | SFOV | kV | mA | Total Exposure Time |
|--------|--------------------|----------------|--------------|---------------|-------------------------|---------------|-------------|------------|-----|-----|---------------------|
| 1-61 | Helical Full 0.5 s | \$0.000 | I300.000 | 61 | 5.0 55.00 1.375:1 | 5.000 | \$0.0 | Large Body | 120 | 300 | 3.32 |

Acquisition Parameter Settings

SFOV selects the bowtie or which there can be 3 depending on system – small, medium large.

Small – Ped Head, Ped Body, Small Head, Small Body, Cardiac Small

Medium – Head, Medium Body, Cardiac Medium

Large – Large Body, Cardiac Large

Some systems may only have 2 bowtie.

Small – Ped Head, Ped Body, Head, Small Body, Cardiac Small

Large – Large Body, Cardiac Large



Acquisition Parameter Settings Summary

| Parameter | Relationship to $CTDI_{vol}$ |
|-------------------------------------|---|
| Scan Mode | Changes in the Scan Mode may affect $CTDI_{vol}$ |
| Table Feed/Increment | Table Feed affects $CTDI_{vol}$ through its inclusion in Pitch |
| Detector Configuration | Decreasing the Beam Collimation typically, but not always, increases the $CTDI_{vol}$ |
| Pitch | $CTDI_{vol}$ relationship to pitch is vendor dependent |
| Exposure Time Per Rotation | $CTDI_{vol}$ relationship to exposure time per rotation is vendor dependent |
| Tube Current | $CTDI_{vol} \propto \text{Tube Current}$ |
| Tube Potential | $CTDI_{vol} \propto (kVp_1/kVp_2)^n$ $n \sim 2$ to 3 |
| Tube Current Time Product | $CTDI_{vol} \propto \text{Tube Current Time Product}$ |
| Effective Tube Current Time Product | $CTDI_{vol} \propto \text{Effective Tube Current Time Product}$ |
| Field of Measurement | Changes in the Field of Measurement may affect $CTDI_{vol}$ |
| Beam Shaping Filter | Changes in the Beam Shaping Filter may affect $CTDI_{vol}$ |



Dose Modulation and Reduction

- Many CT scanners automatically adjust the technique parameters (and as a result the $CTDI_{vol}$) to achieve a desired level of image quality and/or to reduce dose
- Dose Modulation and Reduction techniques vary by scanner manufacturer, model and software version



Automatic Exposure Control (AEC)

- Automatically adapts the Tube Current or Tube Potential according to patient attenuation to achieve a specified image quality
 - Automatic adjustment of Tube Current may not occur when Tube Potential is changed
 - **Centering the patient in the gantry is VITAL for most AEC systems**
- AEC aims to deliver a specified image quality across a range of patient sizes. It tends to increase $CTDI_{vol}$ for large patients and decrease it for small patients relative to a reference patient size

The use of Automatic Exposure Control may decrease or increase $CTDI_{vol}$ depending on the patient size and body area imaged and image quality requested

Dose Modulation and Reduction



GE Healthcare: Automatic Exposure Control (AEC)

AutomA/Smart mA are AEC modes for non-gated modes.

mA Control

Reference Noise Index: 14.68 (Reset) +0.00 (Steps) 14.68 (Noise Index)

Auto mA

mA Range: Min 50 Max 700

Smart mA

Manual mA: 350

OK Cancel

| | | | | | | | | | |
|------------|-----|--------------|-----------|-----------------|-----------------|------------|-------------|------------------|-----------|
| SFOV | kV | mA | DFOV (cm) | R/L Center (mm) | A/P Center (mm) | Recon Type | Matrix Size | Recon Option | Auto Apps |
| Large body | 120 | 700 14.68 | 36.0 | 80.0 | 80.0 | Std | 512 | Plus 400/50 SSS0 | Off |

Auto Scan Accept Series Auto Transfer R1 R2 R3 R4 R5 R6 R7 R8 R9 R10

Dose Modulation and Reduction



GE Healthcare: Automatic Exposure Control (AEC)

ECG Modulation is AEC modes for retrospective gated cardiac helical mode.

The image shows a software dialog box titled "mA Control". It contains several input fields and buttons. A yellow rectangular box highlights the "ECG modulated mA" section, which includes a "Full mA Range" label, "Start Phase" (65), "End Phase" (85), "Min" (220), and "Max" (500) fields. Below this, there is a "Manual mA" field set to 500. At the bottom of the dialog are "OK" and "Cancel" buttons.

| Parameter | Value |
|-------------|-------|
| Start Phase | 65 |
| End Phase | 85 |
| Min | 220 |
| Max | 500 |
| Manual mA | 500 |

Dose Modulation and Reduction



Image Quality Reference Parameter

- Is the AEC parameter that is set by the user to define the desired level of image quality
- Changing the Image Quality Reference Parameter will affect the $CTDI_{vol}$

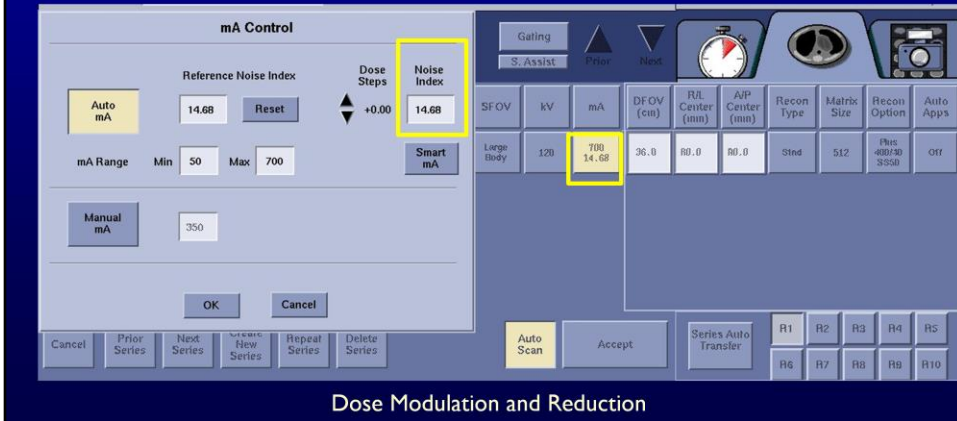
The effect on $CTDI_{vol}$ when changing the Image Quality Reference Parameter is vendor dependent

Dose Modulation and Reduction



GE Healthcare: Image Quality Reference Parameter

Noise Index (not reference noise index) defines image noise (Std. Dev.) in the acquisition when AutomA or SmartmA is enabled.



Noise Index is Image Quality Parameter which sets the image noise in the image. Scout is used to determine patient attenuation characteristics and size and along with Noise Index the mA per rotation for the acquisition is determined.



Image Quality Reference Parameter

- A change in the Image Quality Reference Parameter will affect the $CTDI_{vol}$
- Setting the parameter for “increased” image quality (e.g., lower noise) will result in more dose
 - Decreasing the Noise Index will result in an increase in the $CTDI_{vol}$
- Setting the parameter for “decreased” image quality (e.g., more noise) will result in less dose
 - Increasing the Noise Index will result in a decrease in the $CTDI_{vol}$

Dose Modulation and Reduction

Decreasing the Noise Index means lower noise in the image which means increase mA resulting in increased $CTDI_{vol}$.

Increasing the Noise Index (NI) means higher noise in the image which means decreasing mA resulting in decreased $CTDI_{vol}$.

Noise Index will vary based on the slice thickness selected due to the difference in image noise relative to slice thickness. The same NI should never be used across all slice thicknesses.



Longitudinal Tube Current Modulation

- Is an AEC feature that adjusts the Tube Current as patient attenuation changes in the longitudinal direction
- The CT Localizer Radiograph is used to estimate patient attenuation

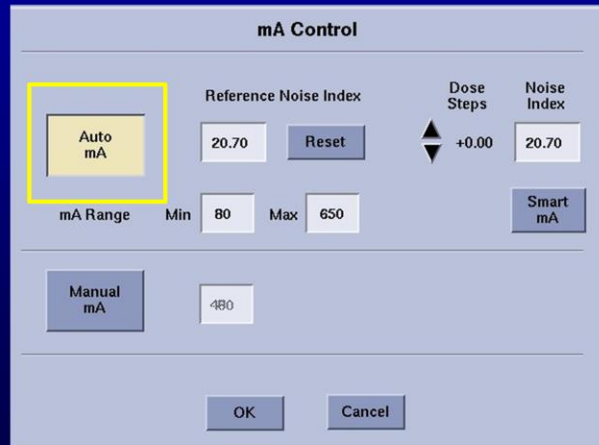
The use of Longitudinal Tube Current Modulation may decrease or increase $CTDI_{vol}$ depending on the patient size and body area imaged and image quality requested

Dose Modulation and Reduction



GE Healthcare: Longitudinal Tube Current Modulation

AutomA is modulation along Z



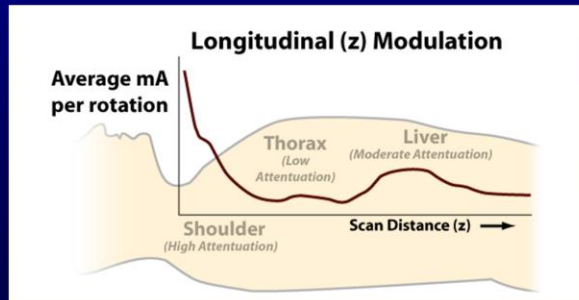
Dose Modulation and Reduction

AutomA modulates the mA along Z for each rotation.



Longitudinal Tube Current Modulation

- Longitudinal Tube Current Modulation (AutomA) uses information from
 - One view localizer scans (uses the last localizer taken).



Dose Modulation and Reduction



Angular and Longitudinal Tube Current Modulation

- Is an AEC feature that incorporates the properties of both **Angular and Longitudinal Tube Current Modulation** to
 - Adjust the Tube Current based on the patient's overall attenuation
 - Modulate the Tube Current in the angular (X-Y) and longitudinal (Z) dimensions to adapt to the patient's shape

The use of Angular and Longitudinal Tube Current Modulation may decrease or increase $CTDI_{vol}$ depending on the patient size and body area imaged and image quality requested

Dose Modulation and Reduction



GE Healthcare: Angular and Longitudinal Tube Current Modulation

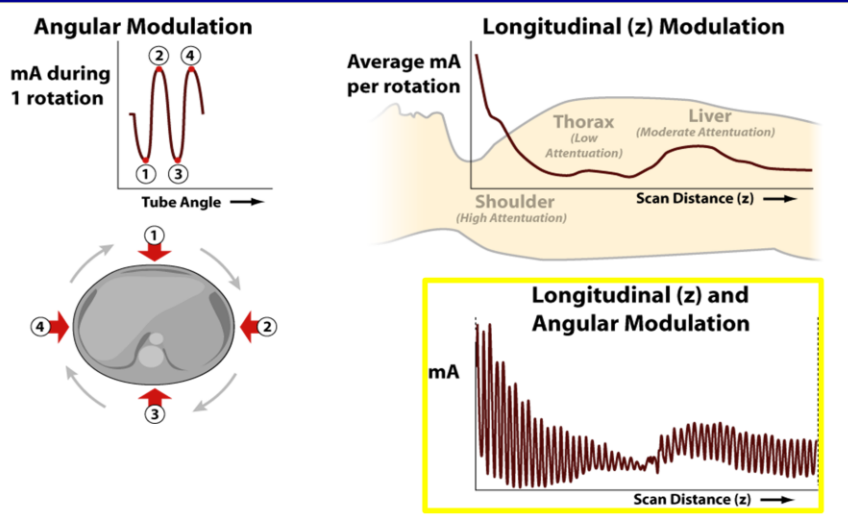
SmartmA modulates the mA in X, Y and Z

The image shows a software dialog box titled "mA Control". It contains several controls for setting tube current parameters. At the top left is a yellow button labeled "Auto mA". To its right is a text field containing "20.70" and a "Reset" button. Further right is a "Dose Steps" control with a vertical double-headed arrow and the value "+0.00". To the right of that is a "Noise Index" control with a text field containing "20.70". Below these are "mA Range" controls with "Min" and "Max" labels and text fields containing "80" and "650" respectively. A yellow box highlights a "Smart mA" button on the right side of the dialog. At the bottom left is a "Manual mA" button with a text field containing "480". At the bottom center are "OK" and "Cancel" buttons.

Dose Modulation and Reduction



Angular and Longitudinal Tube Current Modulation



Dose Modulation and Reduction



ECG-Based Tube Current Modulation

- Is an AEC feature used with prospectively gated cardiac imaging that adjusts the Tube Current based on the phase within the cardiac cycle
- There are important heart rate considerations to take into account when using prospective gating

The use of ECG-Based Tube Current Modulation with prospective gating will decrease $CTDI_{vol}$ compared to retrospective gating

Dose Modulation and Reduction



GE Healthcare: ECG-Based Tube Current Modulation

ECG Modulation changes mA based on target phase range for Full mA

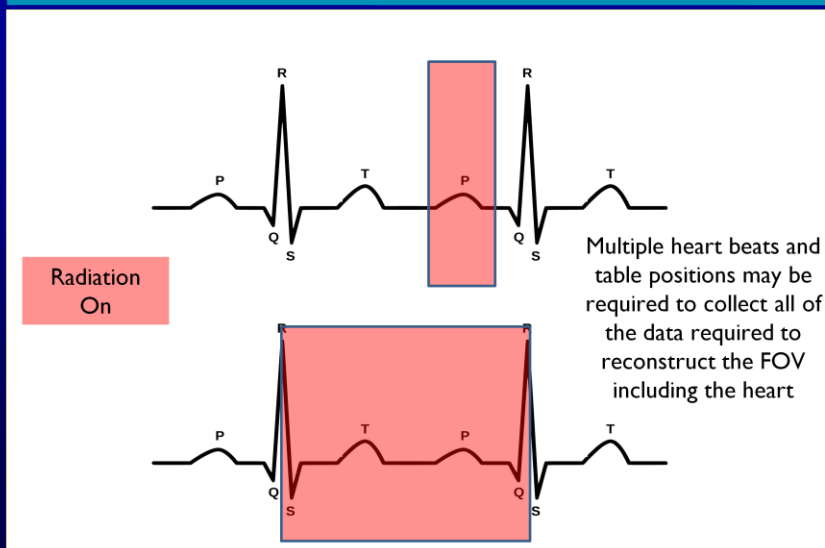
The image shows a software dialog box titled "mA Control" with a light blue background. It contains several input fields and buttons. A yellow rectangular box highlights the "Full mA Range" section, which includes "Start Phase" (65) and "End Phase" (85) fields. Below this, there are "Min" and "Max" labels. The "mA Range" section has "220" and "500" fields. The "Manual mA" section has a "500" field. At the bottom, there are "OK" and "Cancel" buttons. The text "Dose Modulation and Reduction" is visible at the very bottom of the dialog box.

| Control | Value |
|---------------------------|---------|
| ECG modulated mA | Enabled |
| Full mA Range Start Phase | 65 |
| Full mA Range End Phase | 85 |
| mA Range Min | 220 |
| mA Range Max | 500 |
| Manual mA | 500 |

ECG Modulation modulates the mA over the R-R interval providing full/max mA for specified phase range and modulates mA lower for rest of the phases. ECG Modulation is most beneficial in providing a dose savings when low heart rates are encountered.



ECG-Based Tube Current Modulation





Organ-Based Tube Current Modulation

- Is an AEC feature that allows for the tube current to be decreased or turned off over radiosensitive organs on the patient periphery, such as the breasts or eye lenses
- To maintain image quality, tube current may need to be increased at other view angles

The use of Organ-Based Tube Current Modulation may reduce the absorbed dose to organs at the surface of the body but may increase the absorbed dose to other organs

Dose Modulation and Reduction



GE Healthcare: Organ-Based Tube Current Modulation

Organ Dose Modulation

The screenshot displays two overlapping windows from a GE Healthcare software interface. The 'ODM Information' window is in the foreground, showing a radio button labeled 'On' which is selected and highlighted with a yellow box. Below this, there are fields for 'Start Location' (S5.11) and 'End Location' (S45.11). At the bottom of this window are buttons for 'Add Region', 'Delete Region', 'OK', and 'Cancel'. The 'mA Table Information' window is partially visible behind it, showing a table with columns for 'Scan #', 'A', 'R', 'P', and 'L'. The table contains three rows of data for scans 1, 2, and 3. A yellow box highlights the 'mA' column in the table, showing values of 15.00 for scan 1 and 21.21 for scan 2. A white arrow points from the 'ODM' button in the top toolbar to the 'mA' column in the table.

| Scan # | A | R | P | L |
|--------|-----|-----|-----|-----|
| 1* | 96 | 133 | 138 | 133 |
| 2* | 99 | 134 | 142 | 134 |
| 3* | 100 | 134 | 143 | 134 |

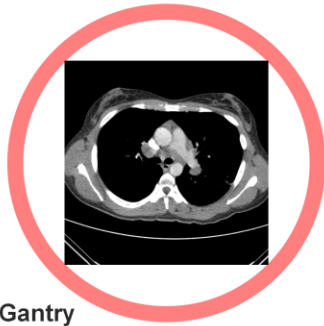
| Scan # | A | R | P | L | mA |
|--------|----|----|----|----|-------|
| 1 | 65 | 69 | 65 | 69 | 15.00 |
| 2 | 59 | 62 | 59 | 62 | 21.21 |
| 3 | 50 | 50 | 50 | 50 | |

Dose Modulation and Reduction

Organ Dose Modulation allows for modulation of mA in dose sensitive areas such as the orbit and anterior chest.

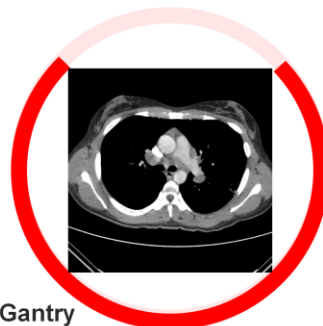


Organ-Based Tube Current Modulation



Gantry

Conventional



Gantry

Organ-Based Modulation

Dose Modulation and Reduction

De-Identified Image used with IRB approval



Automatic Tube Potential Selection

- Is an AEC feature that selects the tube potential according to the diagnostic task and patient size in order to achieve the desired image quality at a lower $CTDI_{vol}$

The use of Automatic Tube Potential Selection is intended to decrease $CTDI_{vol}$ while achieving the image quality required for a specific diagnostic task and patient attenuation

Dose Modulation and Reduction

AAPM Working Group on Standardization of CT Nomenclature and Protocols

GE Healthcare: Automatic Tube Potential Selection

In kV Assist, the system suggests the lowest dose kV based on the previously inputted kV, mA, Noise Index, the selected clinical task, selected aggressiveness of dose reduction. If accepted this new kV is constant and the mA and NI are adjusted to provide dose savings

| SFOV | kV | mA | Total Exposure Time | Prep Group (s) | ISD (s) | Breath Hold (s) | Breathe Time (s) | Voice Lights Timer | Cine Duration (s) |
|------------|--------|-----------|---------------------|----------------|---------|-----------------|------------------|--------------------|-------------------|
| Large Body | 80 CTR | 650 22.95 | 0.69 | 30.0 | 1.0 | N | N | 2 T | 2.0 |

Dose Modulation and Reduction

kV Assist provides capability to select the kV with lowest dose for the clinical task prescribed using the patient attenuation characteristics obtained from the scout image to determine patient size.



Automatic Tube Potential Selection

- Tube Potential is not modulated in the same fashion as Tube Current
- It does not change with different tube positions (view angles) around the patient
- The Tube Potential for a specific patient, anatomic region and diagnostic tasks is selected and held constant for that acquisition, though it may be changed to a different tube potential for a different diagnostic task

Dose Modulation and Reduction



Iterative Reconstruction

- Is a feature that uses the information acquired during the scan and repeated reconstruction steps to produce an image with less “noise” or better image quality (e.g., higher spatial resolution or decreased artifacts) than is achievable using standard reconstruction techniques

The use of Iterative Reconstruction by itself may not decrease $CTDI_{vol}$; with use of Iterative Reconstruction, image quality will change and this may allow a reduction in the $CTDI_{vol}$ by adjusting the acquisition parameters used for the exam

Dose Modulation and Reduction

AAPM Working Group on Standardization of CT Nomenclature and Protocols

GE Healthcare: Iterative Reconstruction

ASiR – Adaptive Statistical Iterative Reconstruction

Dose Modulation and Reduction

ASiR is a image noise (std. dev.) reduction tool which allows user to reduce image noise for existing parameters to improve image quality or increase image noise through reduction in dose and then use ASiR to reduce image noise to return to similar image quality.



GE Healthcare: *Iterative Reconstruction*

- Iterative Reconstruction using ASiR is completed using Projection Data
- Changing the % of ASiR will affect the resultant image quality; it **WILL NOT** affect the $CTDI_{vol}$ of the scan
- In consultation, the radiologists and medical physicists may adjust the acquisition parameters for studies reconstructed using ASiR based on the imaging task and patient population, dose concerns, and the needs of the interpreting radiologist(s)

Dose Modulation and Reduction

ASiR is an iterative reconstruction mode which use scan date to create a model and then blend the noise reduced image model and original image model to create images with lower image noise.



GE Healthcare: *Iterative Reconstruction*

- Iterative Reconstruction using Veo A Model Based Approach
- Turning On Veo will affect the resultant image quality; it WILL NOT affect the $CTDI_{vol}$ of the scan
- In consultation, the radiologists and medical physicists may adjust the acquisition parameters for studies reconstructed using Veo based on the imaging task and patient population, dose concerns, and the needs of the interpreting radiologist(s)

Dose Modulation and Reduction

Vevo is a model based iterative reconstruction which can provide high quality image at low doses.



Dose Display

- Information about the $CTDI_{vol}$ planned for each scan is typically displayed before the exam on the user console
- Information about the $CTDI_{vol}$ delivered by each scan is typically reported in a data page or DICOM structured dose report
- Dose information provided after the exam typically also includes the DLP and the CTDI phantom size. These may also be included in information displayed before the scan.



Display of Planned $CTDI_{vol}$

- $CTDI_{vol}$ is displayed before a study is performed based on the selected technique parameters
- It is important to check $CTDI_{vol}$ before a study is performed to ensure that the output of the scanner is appropriate for the specific patient and diagnostic task

$CTDI_{vol}$ is displayed for each planned acquisition

Dose Display



GE Healthcare: *Display of Planned CTDI_{vol}*

Dose Information Area on View Edit screen

| Dose Information | | | | |
|-----------------------|----------------------------|---------------|----------------|---------------|
| Images | CTDI _{vol} mGy | DLP mGy·cm | Dose Eff. % | Phantom cm |
| 1-61 | 6.68 | 243.82 | 92.60 | Body 32 |
| Projected series DLP: | | | 243.82 | mGy·cm |
| Accumulated exam DLP: | | | 0.00 | mGy·cm |

Dose Display

Dose Information area is always available on the View Edit screen to review dose information for the current proposed acquisition and the Accumulated exam DLP if additions series have already been acquired.



Post Study Data Page

- Following the completion of a study, a **Post Study Data Page** is created that includes information on the delivered $CTDI_{vol}$ and DLP and the phantom size used to calculate these values
- Information is displayed for each series

Dose Display



GE Healthcare: Post Study Data Page

Dose Report – Series 999

| Patient Name: System Use | | Exam no: 198 | | | |
|--------------------------|---------|--------------------|---------------|--------------|------------|
| Accession Number: | | Nov 22 2011 | | | |
| Patient ID: 22345 | | Discovery CT750 HD | | | |
| Exam Description: Chest | | | | | |
| Dose Report | | | | | |
| Series | Type | Scan Range (mm) | CTDIvol (mGy) | DLP (mGy-cm) | Phantom cm |
| 1 | Scout | - | - | - | - |
| 2 | Helical | I20.250-I285.250 | 6.29 | 207.51 | Body 32 |
| Total Exam DLP: | | | | 207.51 | |
| Attention | | | | | |
| 1/1 | | | | | |

W:1 L:-2

Dose Display

Dose Report provides CTDIvol, DLP, Phantom Size along with the Scan Type, Scan Range for each series/group and Total Exam DLP.



Post Study Data Page - $CTDI_{vol}$

- $CTDI_{vol}$ is displayed for each series after a study is performed and is calculated based on the technique factors used to acquire the data
- It is useful to check $CTDI_{vol}$ after a study is performed to ensure that the output of the scanner was as expected

$CTDI_{vol}$ is displayed for each completed acquisition

Dose Display



Post Study Data Page - DLP

- DLP is displayed for each series after a study is performed and is calculated based on the technique factors and scan length used

DLP is displayed for each completed acquisition and is typically summed for all of the acquisitions

Dose Display



Post Study Data Page – CTDI Phantom

- The CTDI Phantom used for each acquisition in the study is typically displayed
- Different phantoms may be used to calculate the $CTDI_{vol}$ for different acquisitions in the same study (and may vary by vendor)
 - Head and C-Spine Example
 - Body Phantom used to report $CTDI_{vol}$ for C-Spine portion of exam
 - Head Phantom used to report $CTDI_{vol}$ for Head portion of exam

Dose Display



Summing Dose Report Values

- $CTDI_{vol}$ values for separate series are NOT to be summed to give a “total” $CTDI_{vol}$ for a study
 - This is especially true if the series cover different anatomic regions
- DLP is typically summed over all series in the Post Study Data Page to provide an estimate of the total patient exposure
 - Extreme care should be taken when considering summed DLPs because different phantoms may have been used to calculate the $CTDI_{vol}$ values used to determine DLP
- A medical physicist should be contacted if patient specific dose estimates are required

Dose Display



Dose Notification Levels

- **Notification Levels** may be set on a CT scanner for each series within an exam protocol
- If the planned $CTDI_{vol}$ is above the **Notification Level** and triggers the notification, the user has the opportunity to edit or confirm the technique settings
- **Notification Levels** may be exceeded when appropriate for a specific patient or diagnostic task (e.g., in very large patients or contrast bolus monitoring scans)

Dose Display



GE Healthcare: Dose Notification Levels

Dose Check – CTDIvol and DLP notification levels

Dose Check Management Tool

NV (Notification Value) Checking

CTDIvol
DLP

AV (Alert Value) Checking

CTDIvol (mGy)
DLP (mGy·cm)

Add Age Threshold

Protocol Change Control

On

Save

Audit Tool
User Admin. Tool
Quit

Dose Check Setup

| Images | CTDIvol mGy | DLP mGy·cm | NV | |
|--------|----------------|---------------|---------|-----|
| | | | CTDIvol | DLP |
| 1-321 | 13.11 | 347.37 | 16 | 522 |

Est. max Z location CTDIvol: 13.11 mGy

Projected series DLP: 347.37 mGy·cm

Accumulated exam DLP: 0.00 mGy·cm

The Dose Notification feature complies with the NEMA XR-25 standard.

Dose Display

Dose Check Management allows user to enable Notification Value checking. In each protocol, the user can define a Notification Value for CTDIvol and DLP based on the clinical goal of the protocol.



Dose Alert Levels

- **Dose Alert Levels** require specific action by the operator to continue scanning
- **Dose Alert Levels** are typically much higher than Notification Levels and take into account all series within the exam
- Triggering a **Dose Alert** requires that the operator confirm the protocol and settings are correct by entering in his or her name. Optionally, sites may require that the operator provide a brief explanation in the provided field

Dose Display



GE Healthcare: *Dose Alert Levels*

Dose Check Alert Values for CTDIvol and DLP can be set for Adult and Pediatric

Dose Display

The Dose Alert feature complies with the NEMA XR-25 standard.

Dose Check Alert Values can be set for CTDIvol and DLP for Adult and Pediatrics in the Dose Check Management screen.



Radiation Dose Structured Reports

- Radiation Dose Structured Reports (RDSRs) are provided in newer software versions in a defined DICOM format
- They provide the most complete set of information regarding the irradiating events
- The reports are very detailed and require an RDSR viewer for easy visualization of relevant information

Dose Display



Questions

- Please contact the medical physicist providing support for your CT practice, your lead technologist, supervising radiologist or manufacturer's application specialist with questions regarding these important topics and concepts.



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