

Considerations for Evaluating Ultrasound Units

Zheng Feng Lu, Ph.D., DABR, FAAPM
Clinical Imaging Physicist
Department of Radiology
University of Chicago



CREATIVE SCIENCE. ADVANCING MEDICINE.

Disclosure

No financial disclosures

Testing the “Misfit” Systems

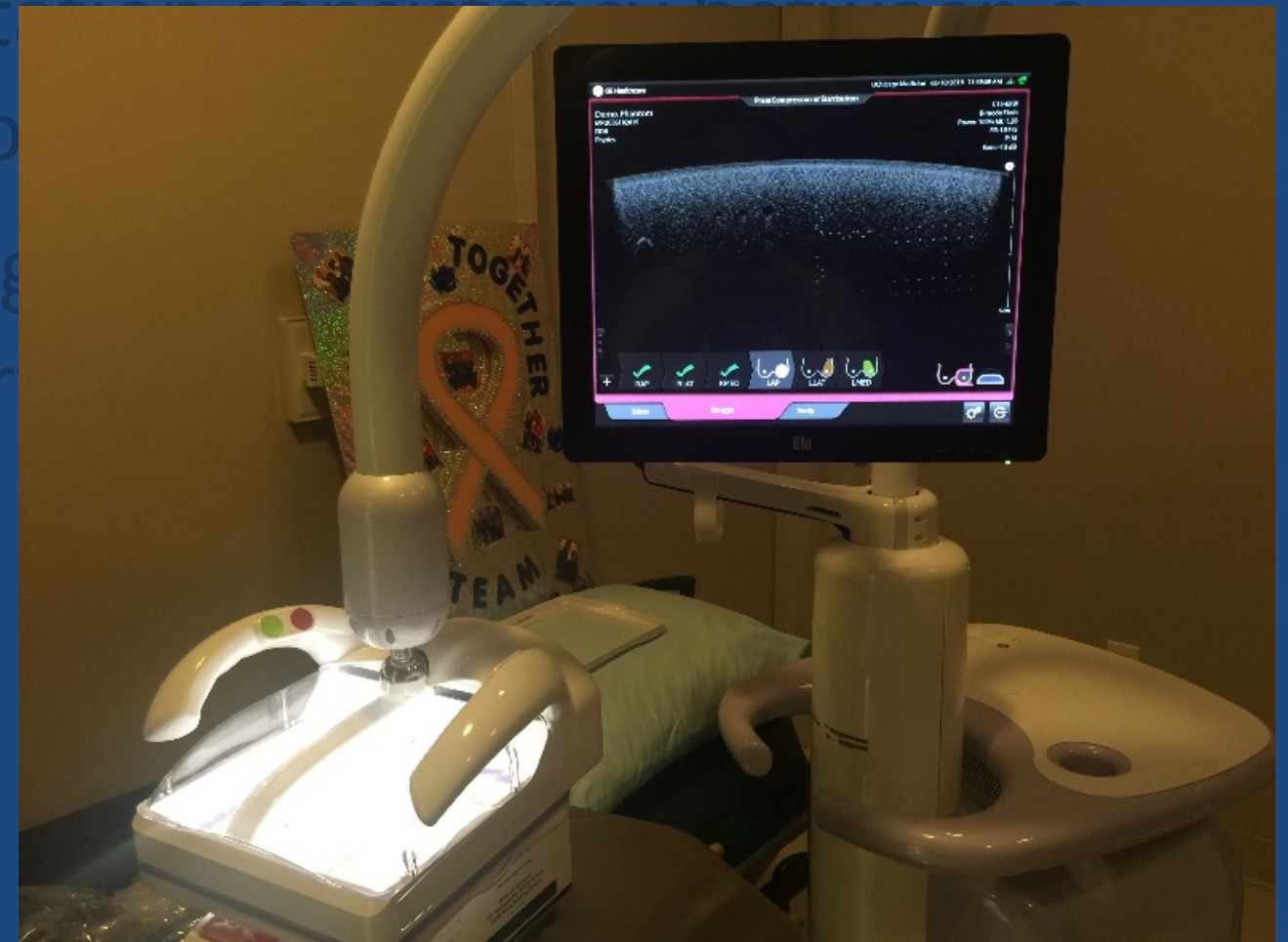
1. Testing an automated whole breast ultrasound screening system (AB US)
2. Testing ultrasound image presentation consistency between a scanner display and a reading room review workstation display
3. Testing under what system settings and the effect of system settings on evaluating system performance

Testing the “Misfit” Systems

1. Testing an automated whole breast ultrasound screening system (AB US)

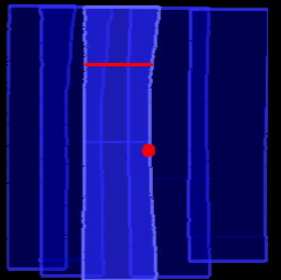
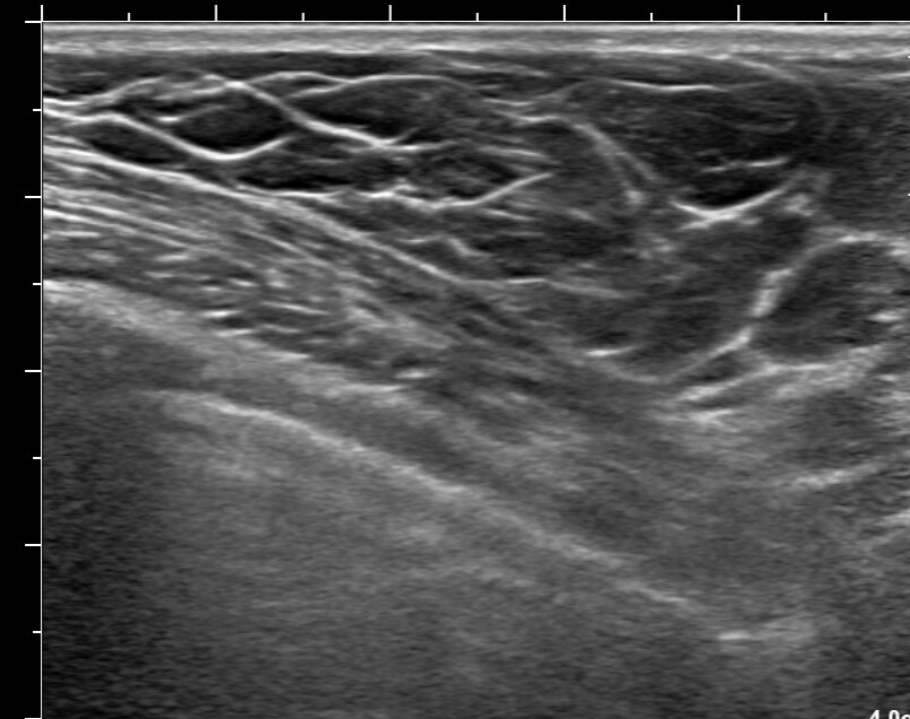


The Axial Cine Approach



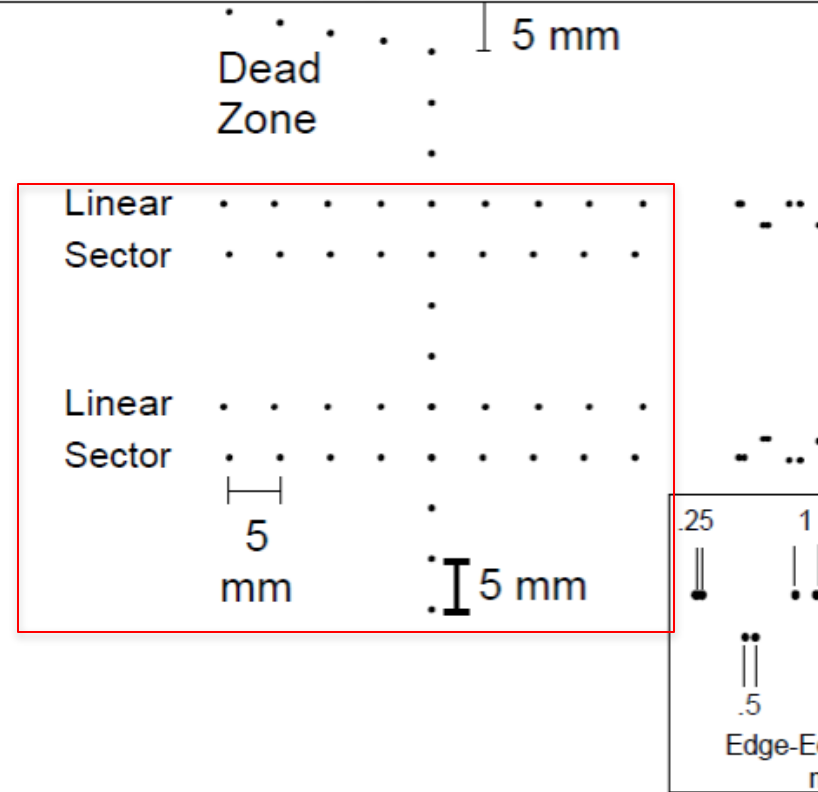
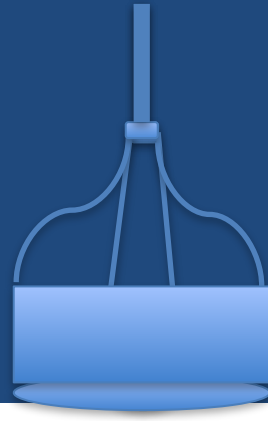
The Coronal Reconstruction Approach

Automated Whole Breast Screening Ultrasound: The Axial Cine Approach



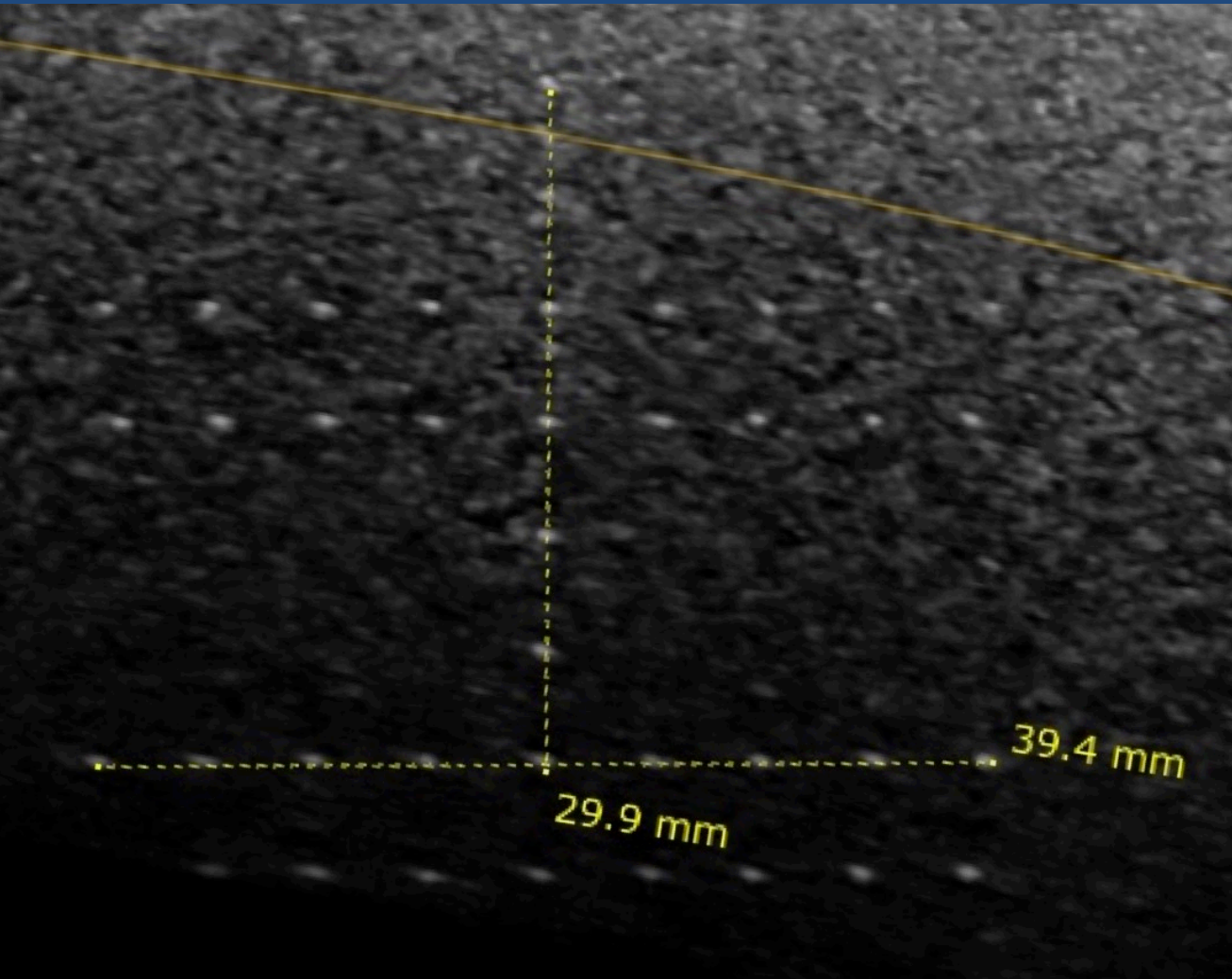
RIGHT : ROW 03
FRAME 050
10:45 : 06.8cm

Automated Whole Breast Screening Ultrasound: The Axial Cine Approach



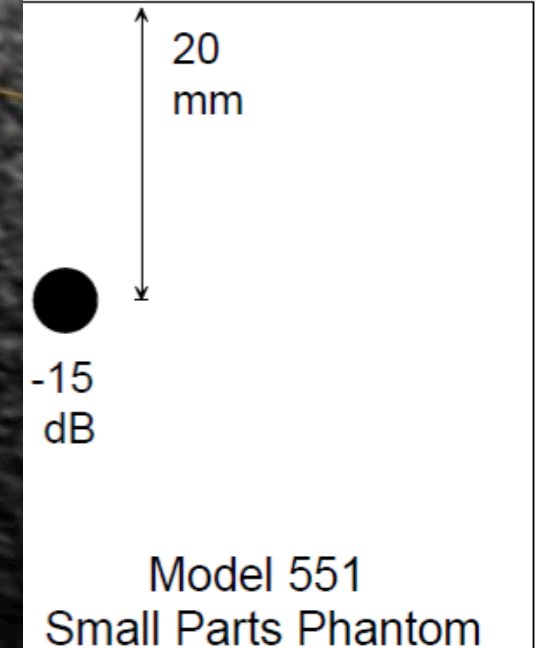
Vertical - Horizontal
Line Targets

Axial-Lateral Resolution
Array



Anechoic Target
Structures

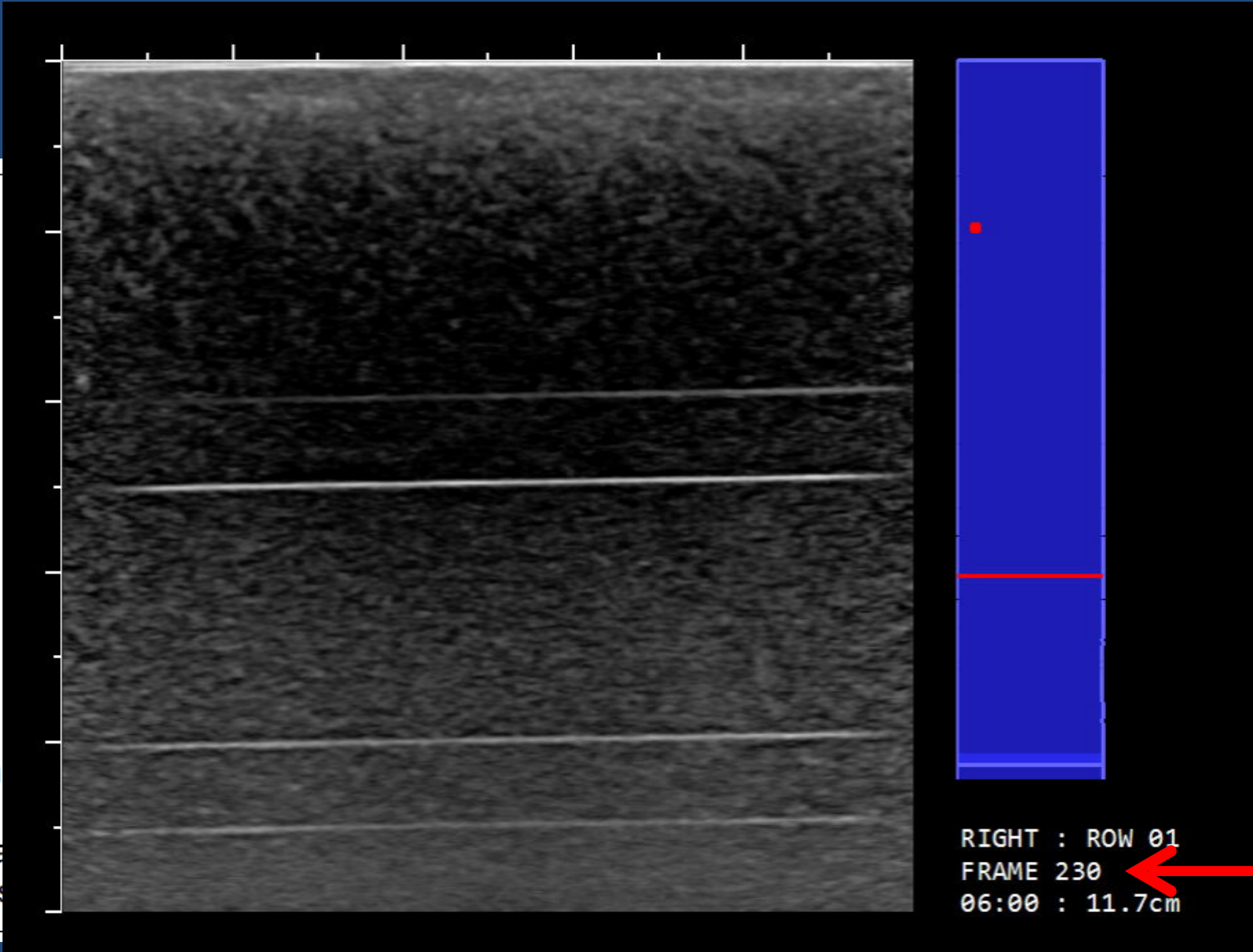
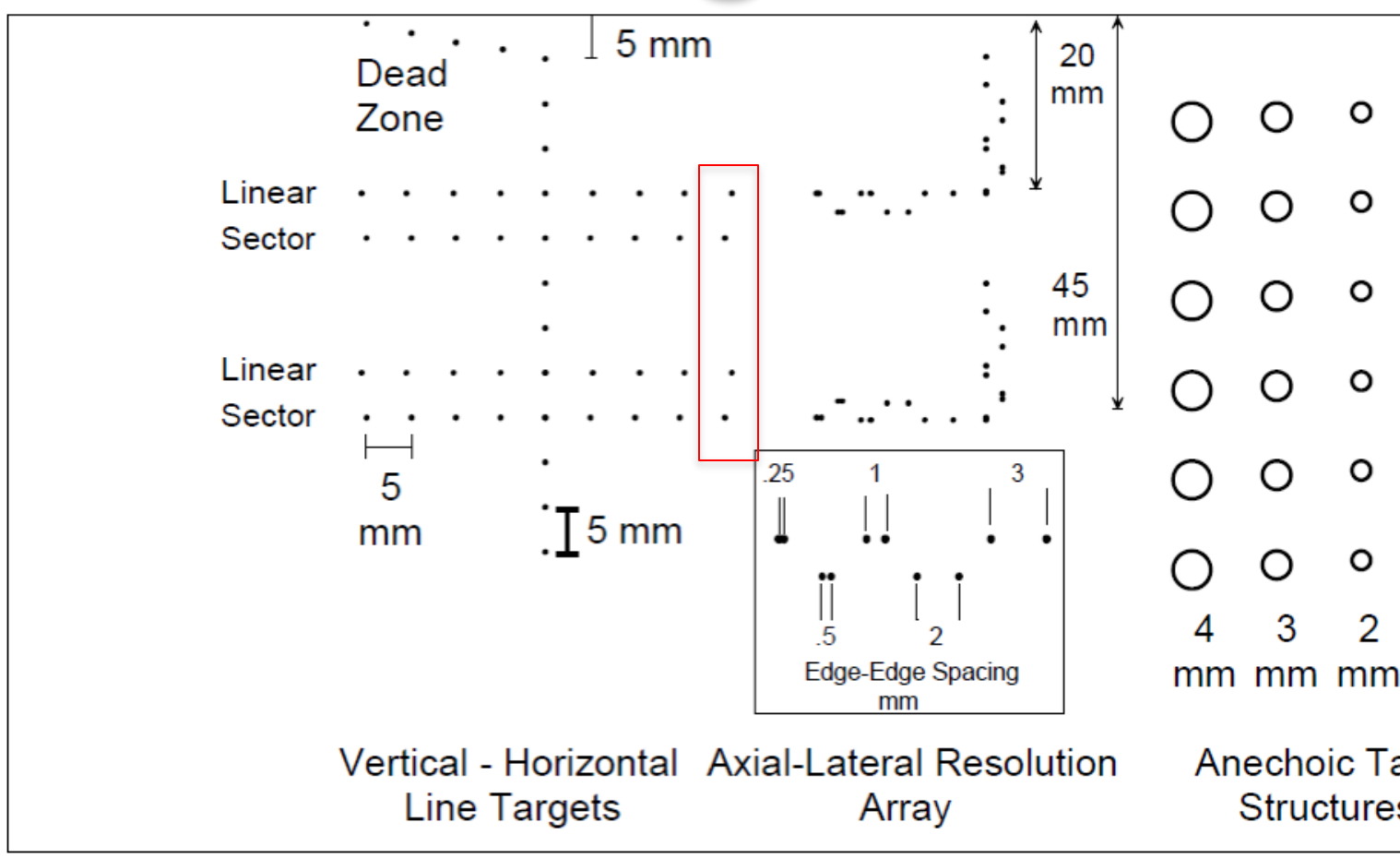
Gray Scale Target
Structures



Model 551
Small Parts Phantom

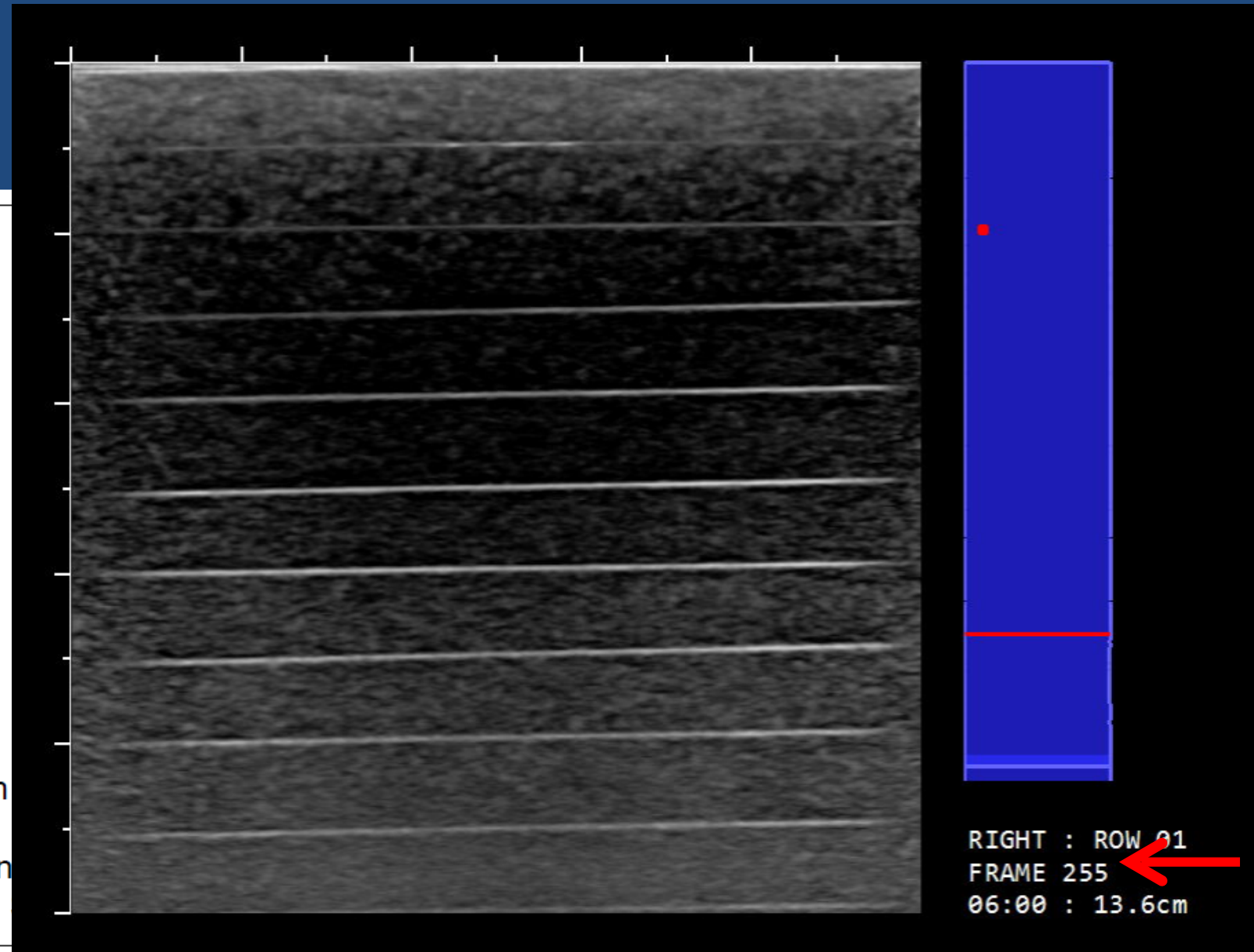
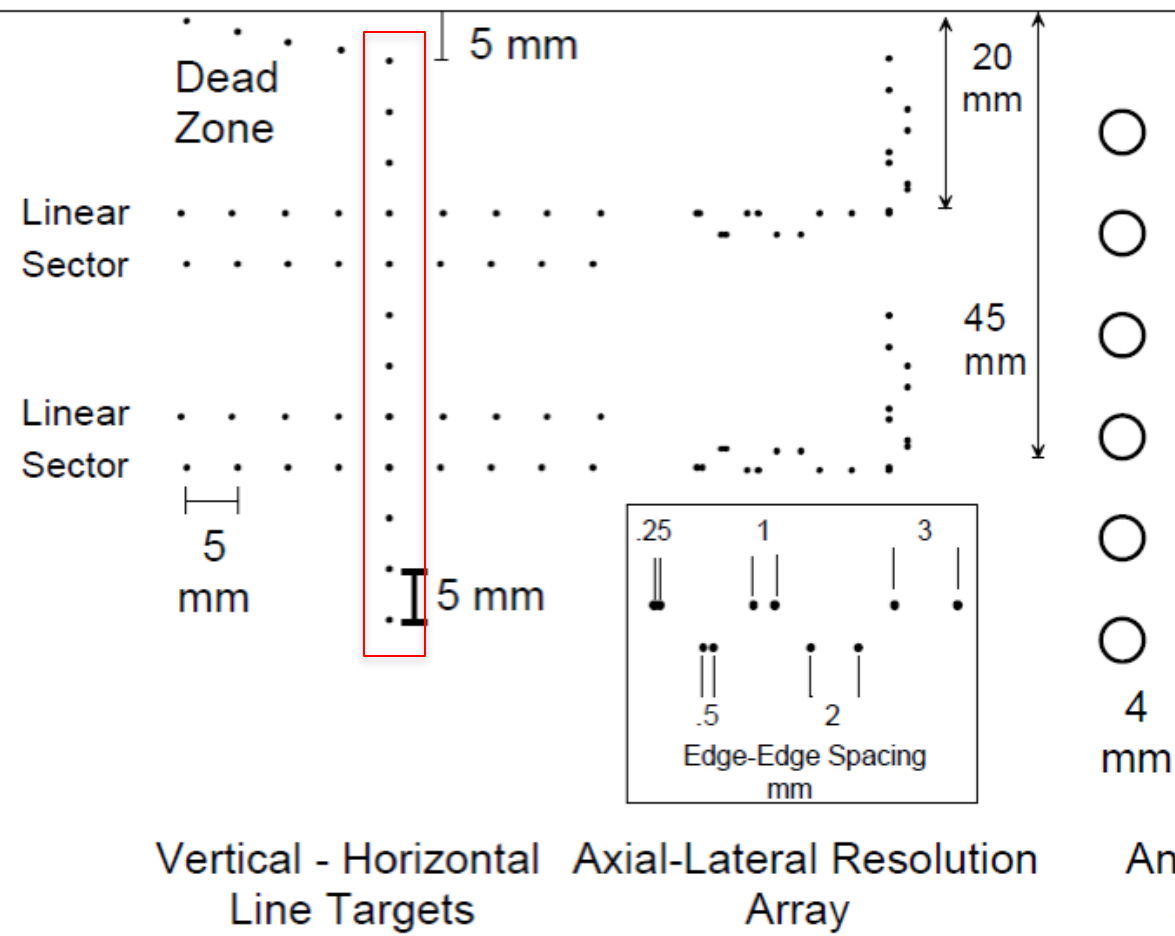
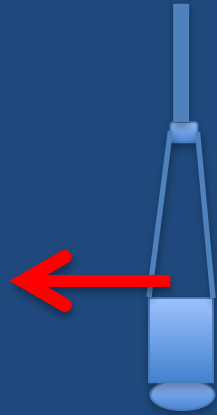
Small Parts QC Phantom

Automated Whole Breast Screening Ultrasound: The Axial Cine Approach



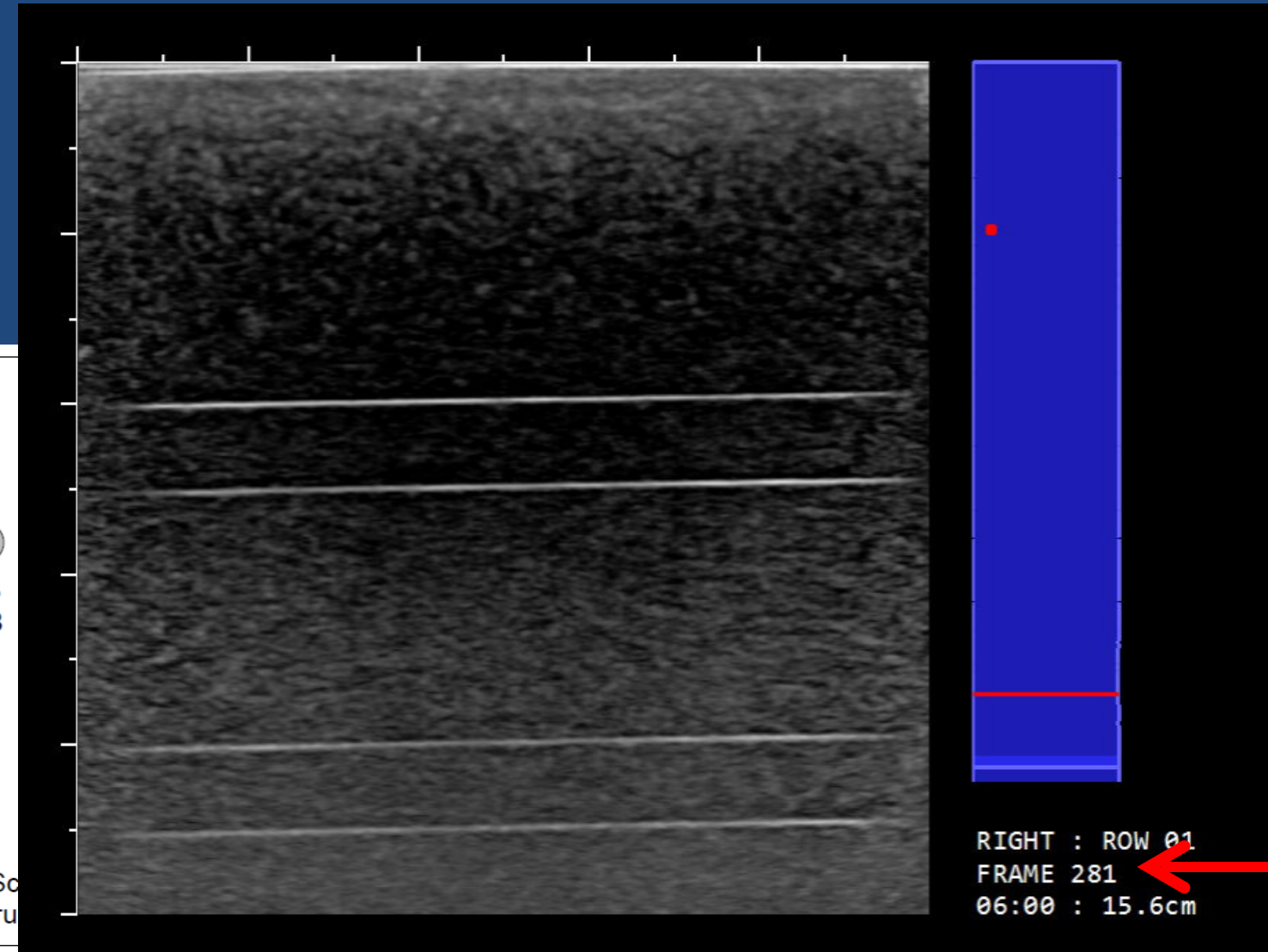
Small Parts QC Phantom

Automated Whole Breast Screening Ultrasound: The Axial Cine Approach



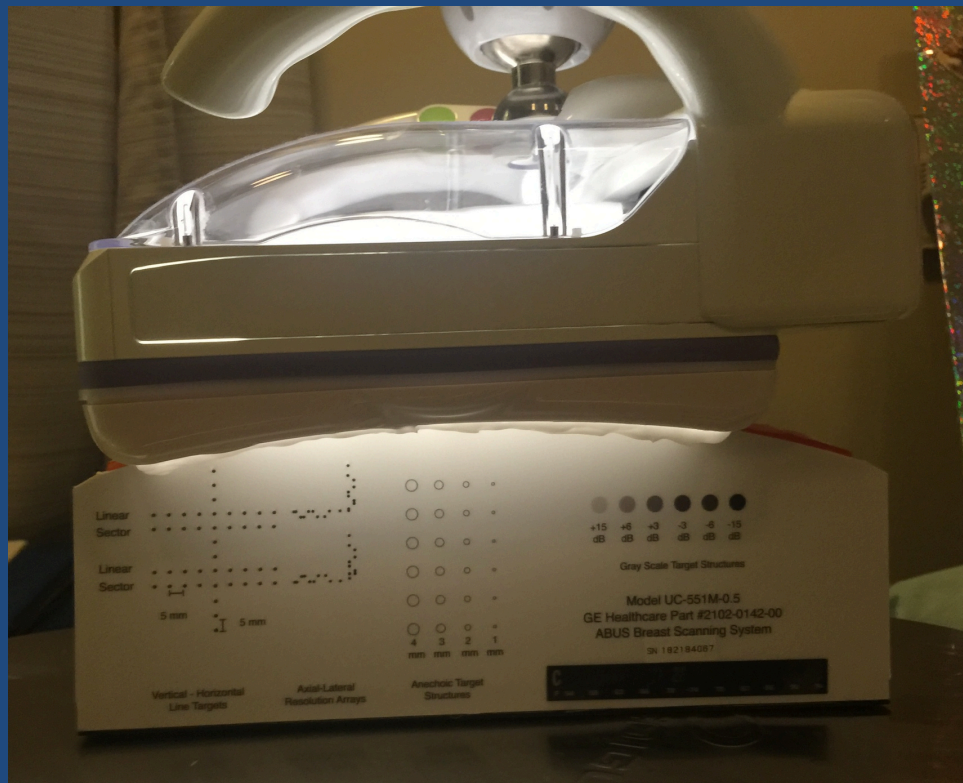
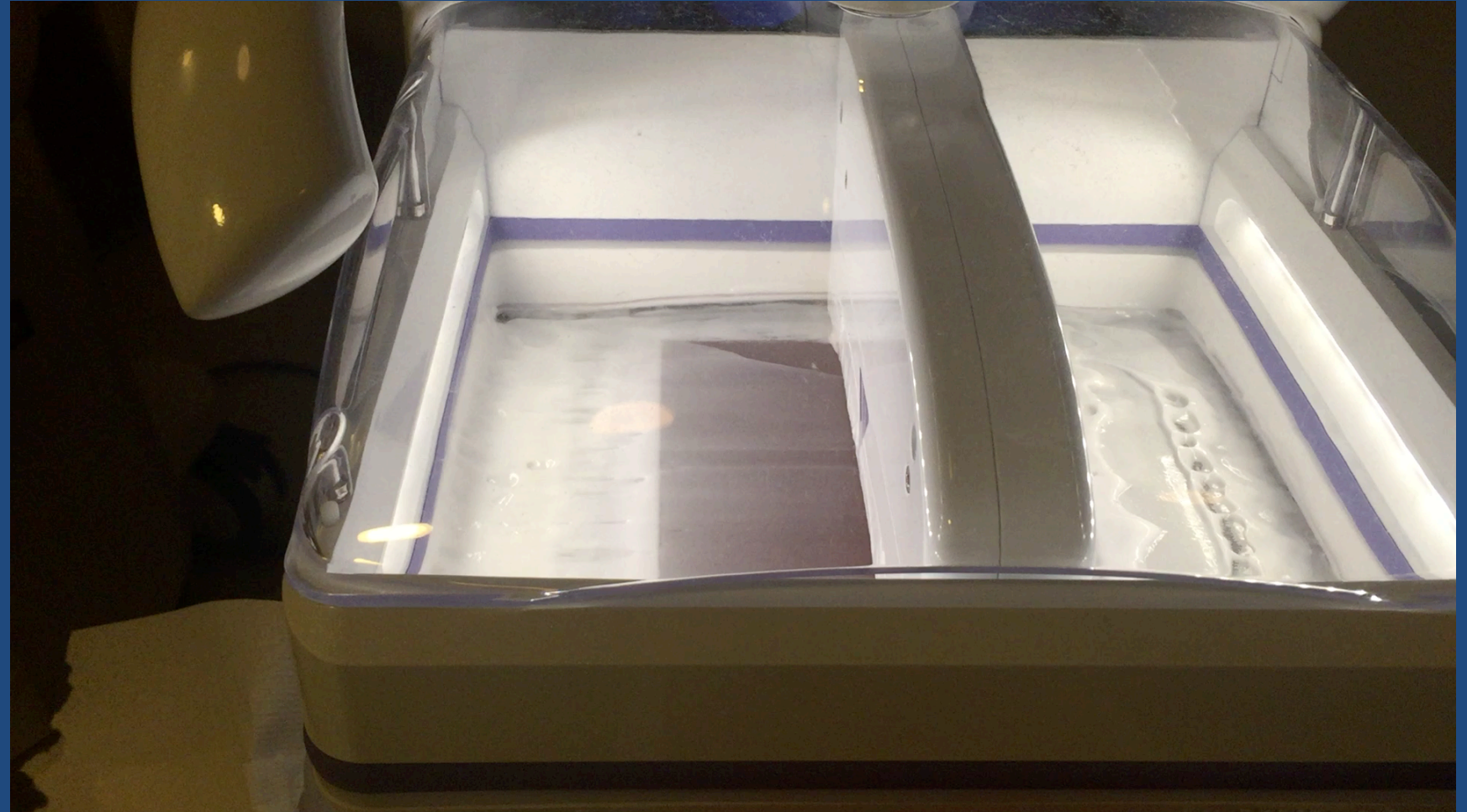
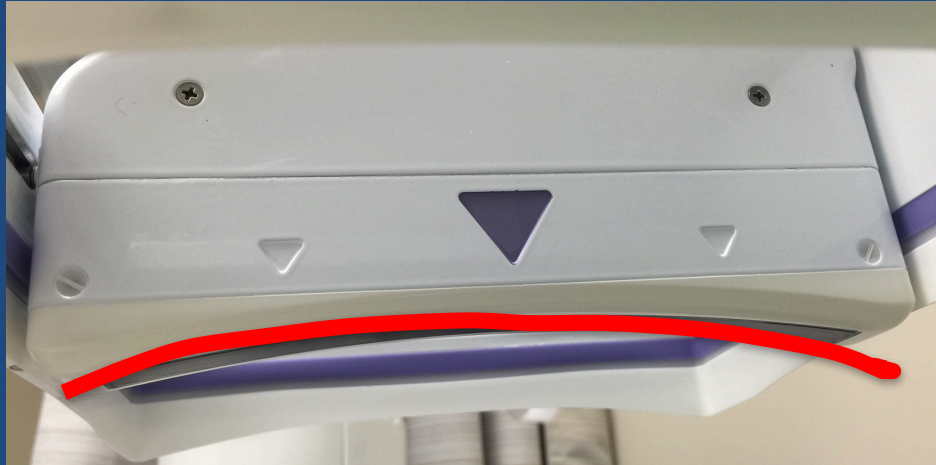
Small Parts QC Phantom

Frame 281 Frame 230

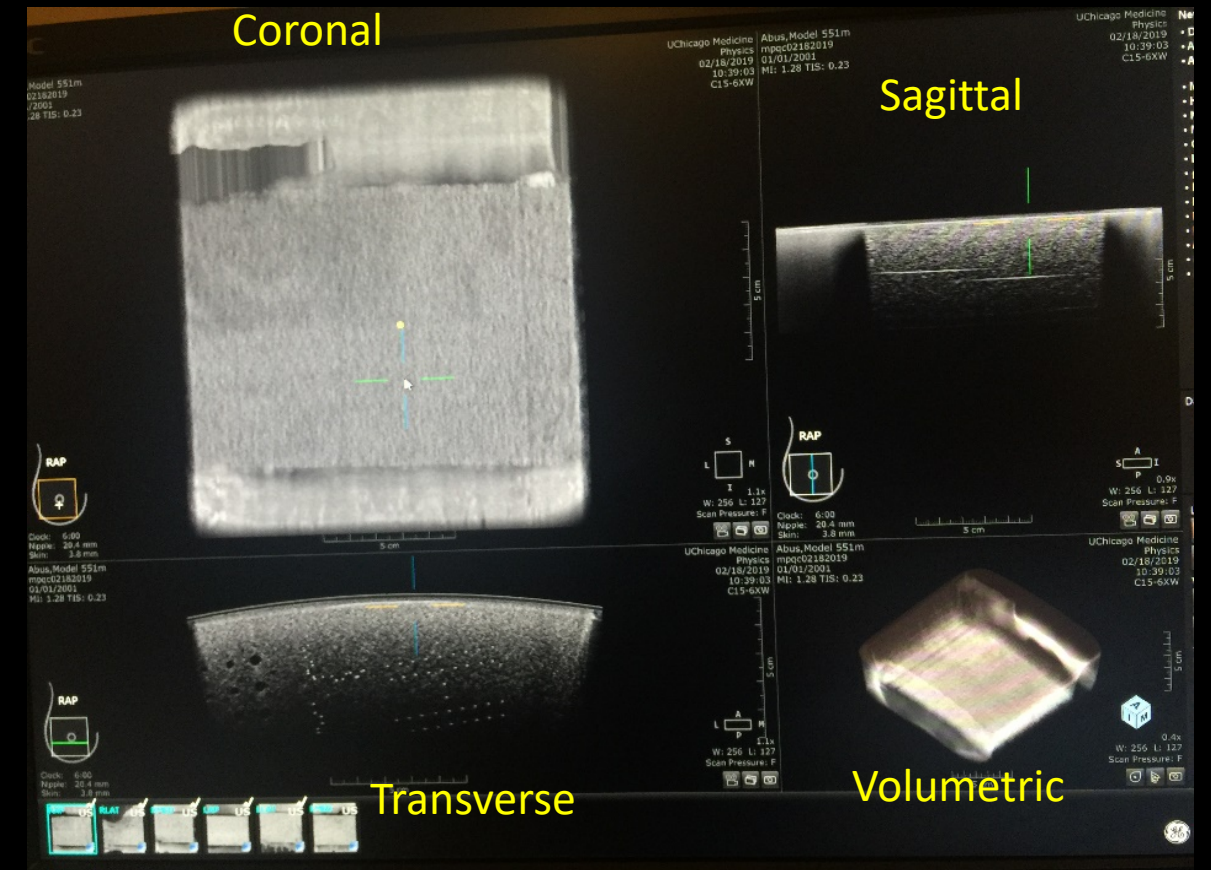


40 mm / (281 - 230) = 0.784 mm per frame interval
Vendor spec: 0.8 mm

Automated Whole Breast Screening Ultrasound: Enlarged Transducer and Coronal Reconstruction Approach



Automated Whole Breast Screening Ultrasound: Enlarged Transducer and Coronal Reconstruction Approach



QC Measurements Performed on Review Workstation

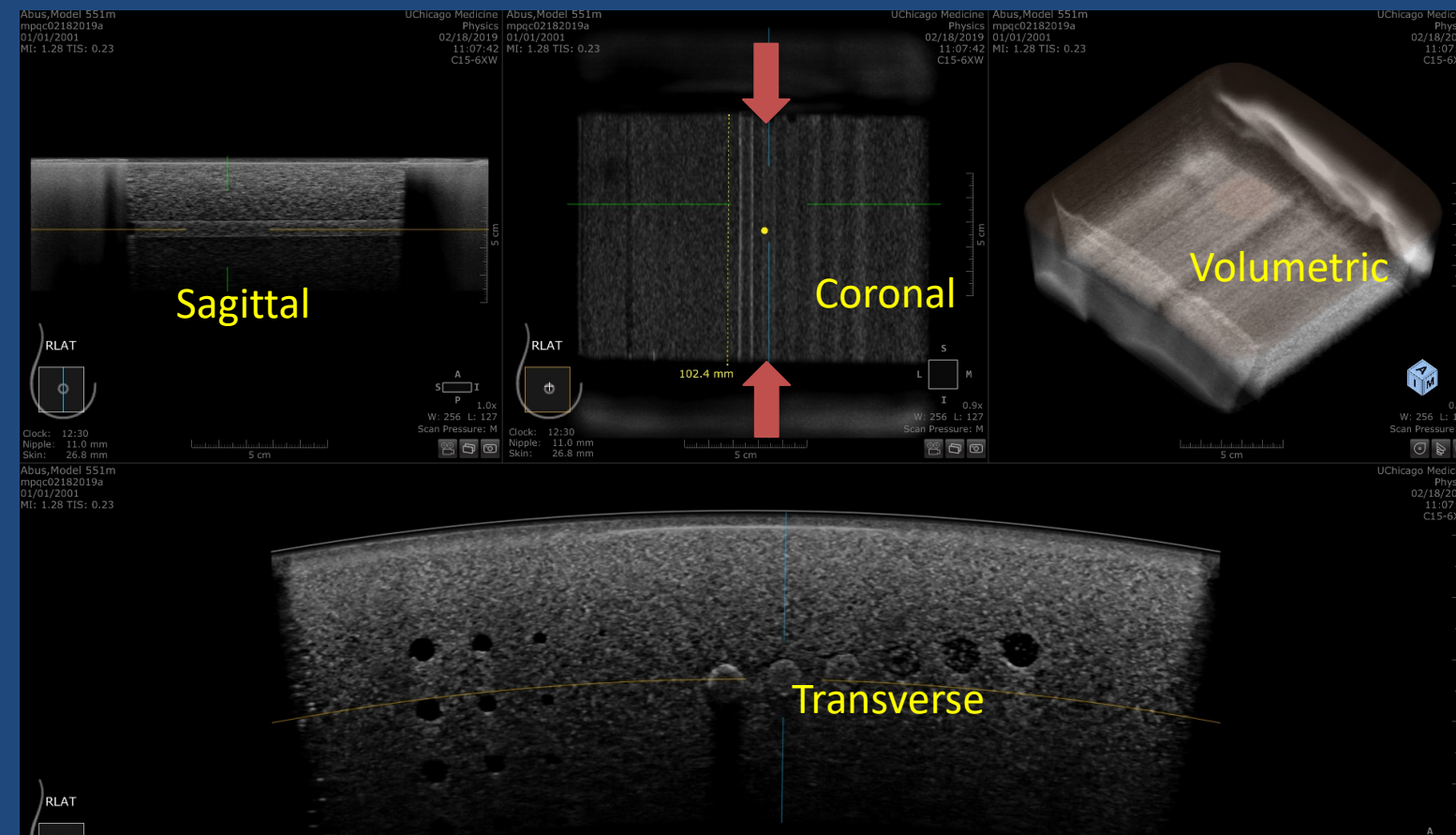
Distance Accuracy in the Direction of the Transducer Movement

Required in an AB US QC phantom design:

Place line targets with known separation in the elevational direction, or place built-in targets with known sizes, for distance accuracy testing in the direction of transducer movement.

Workaround:

The coronal view was reconstructed from the set of transverse images acquired as the transducer traveled. The string lines were along the transducer movement direction. The phantom dimension is 10.6 cm according to the vendor specification. The measured phantom width from this test was 102.4 mm. Therefore, the deviation was within 5%.



coming soon

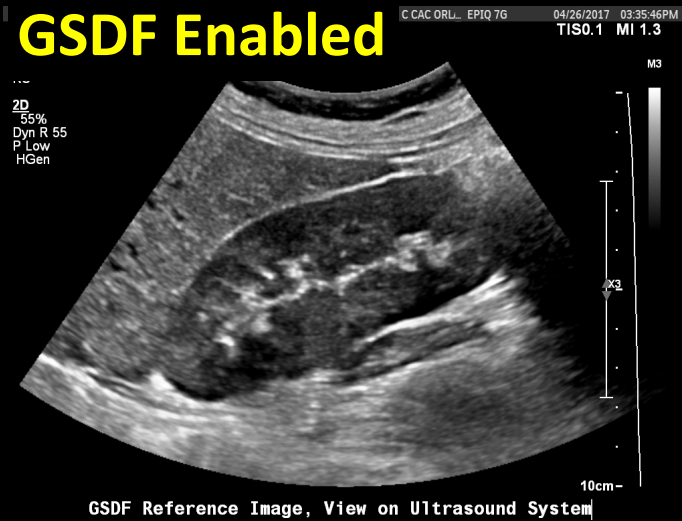
A prototype AB US phantom has included spherical voids as well as other targets. This prototype phantom is being tested right now.

Testing the “Misfit” Systems

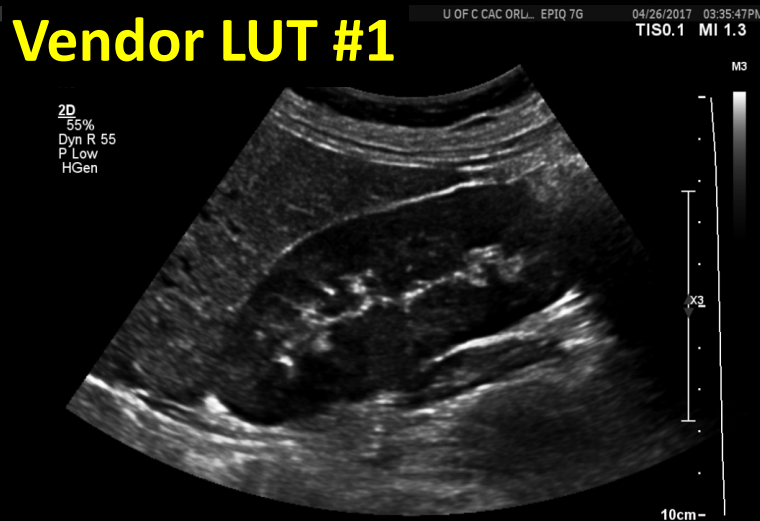
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Image Display Consistency: Between Scanner Display and Reading Room Display

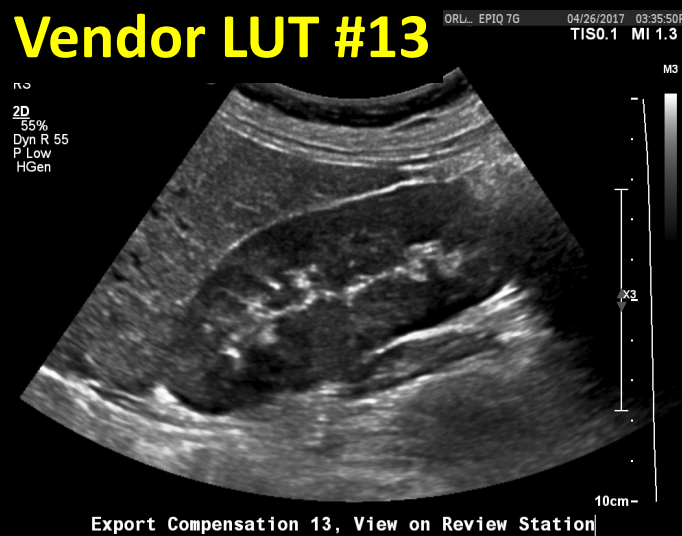
GSDF Enabled



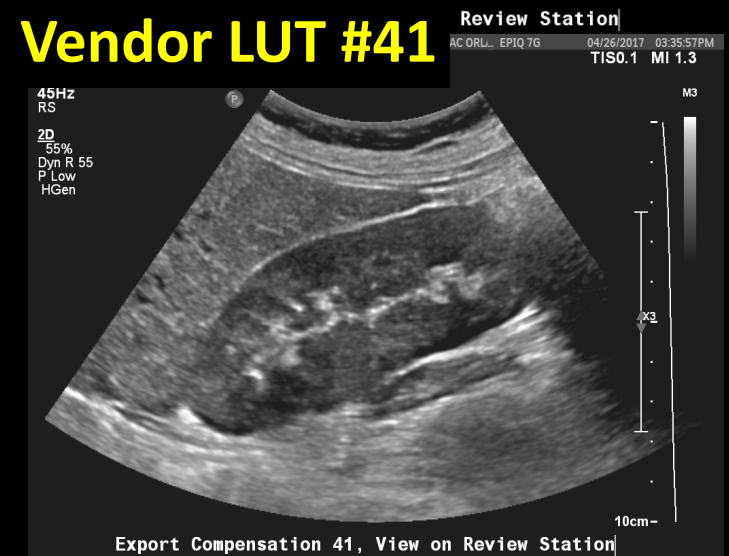
Vendor LUT #1



Vendor LUT #13



Vendor LUT #41



Vendor LUT #45



Vendor LUT #46



How to match presentation on various displays?

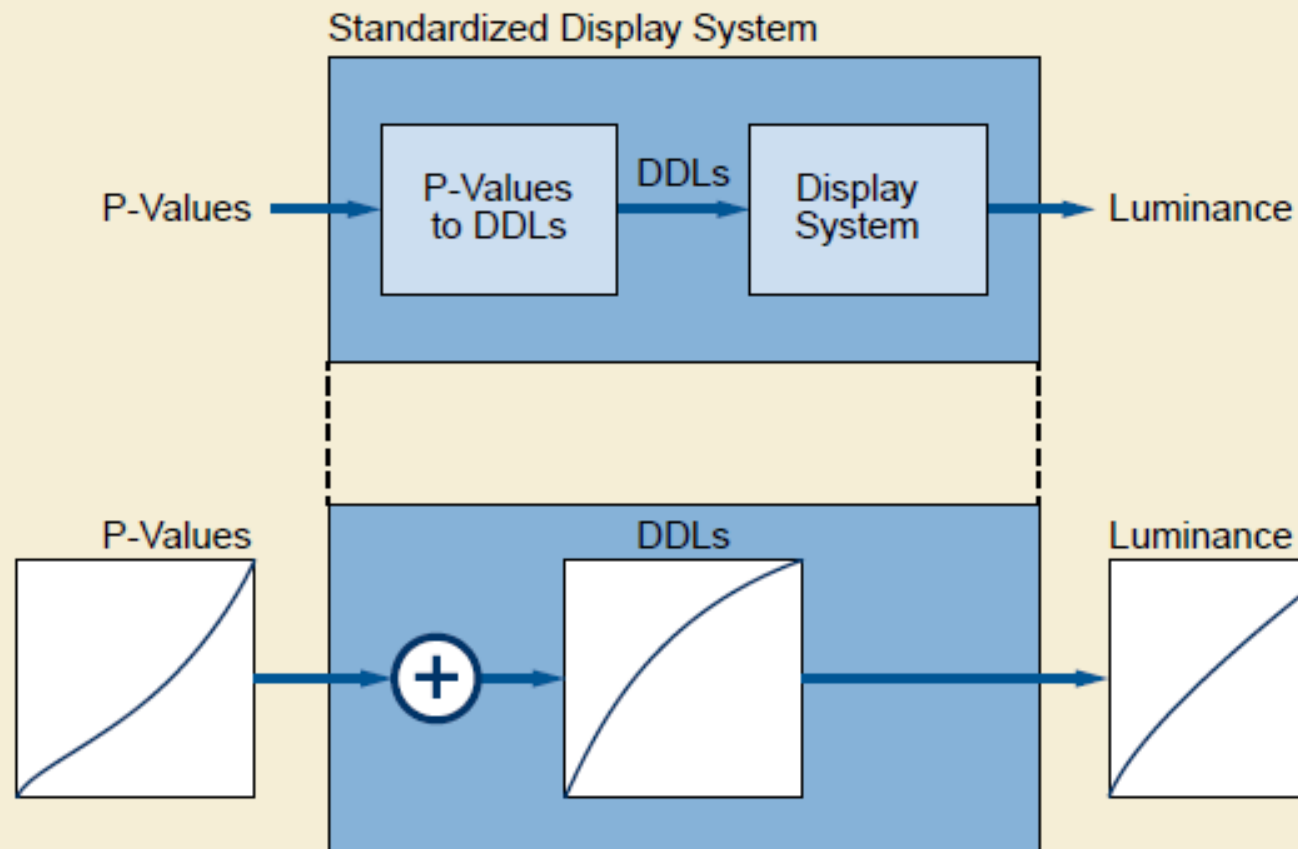
DICOM GSDF

NEMA DICOM Part 14 (<http://dicom.nema.org/medical/dicom/current/output/pdf/part14.pdf>)

Digital Driving Level (DDL): A digital value given as an input to a display system to produce a luminance.

Standardized Display System: A device that produces luminance values that are related to input P-values by the Grayscale Standard Display Function (GSDF).

P-Value: P stands for presentation. P-values are the digital image values sent to a Standard Display System. According to DICOM Part 3, P-Values are intended to be independent of the specific class or characteristics of the display device.

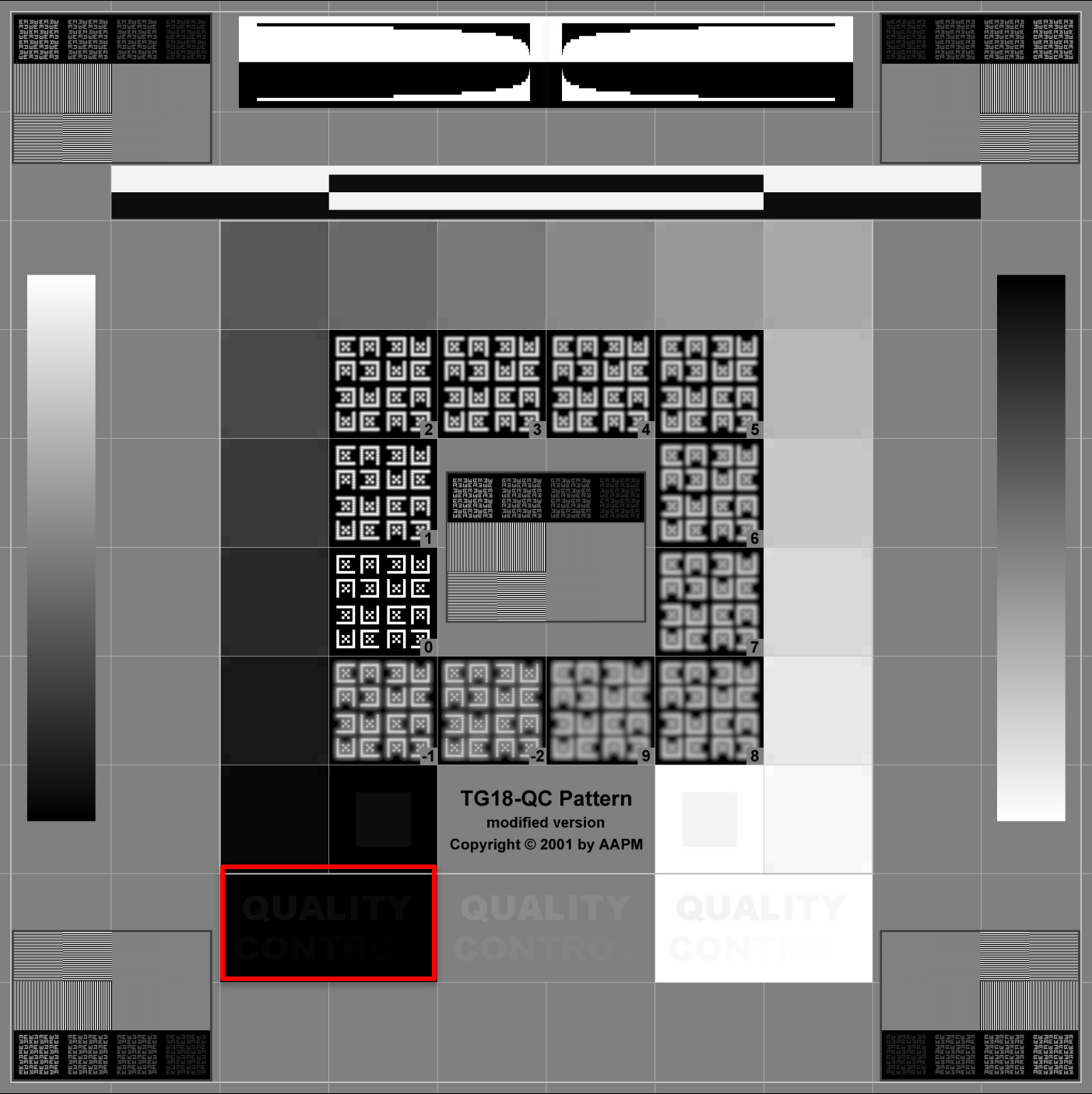


Steps to Achieve Image Presentation Consistency

1. GSDF standardized monitors are desirable for ultrasound scanners (manufacturers).
2. The digital values sent to PACS are in P-value space (manufacturers).
DICOM Standard
3. Performance evaluation and quality control testing on ultrasound image displays are needed (both users and manufacturers)

Visual Inspection

TG18-QC



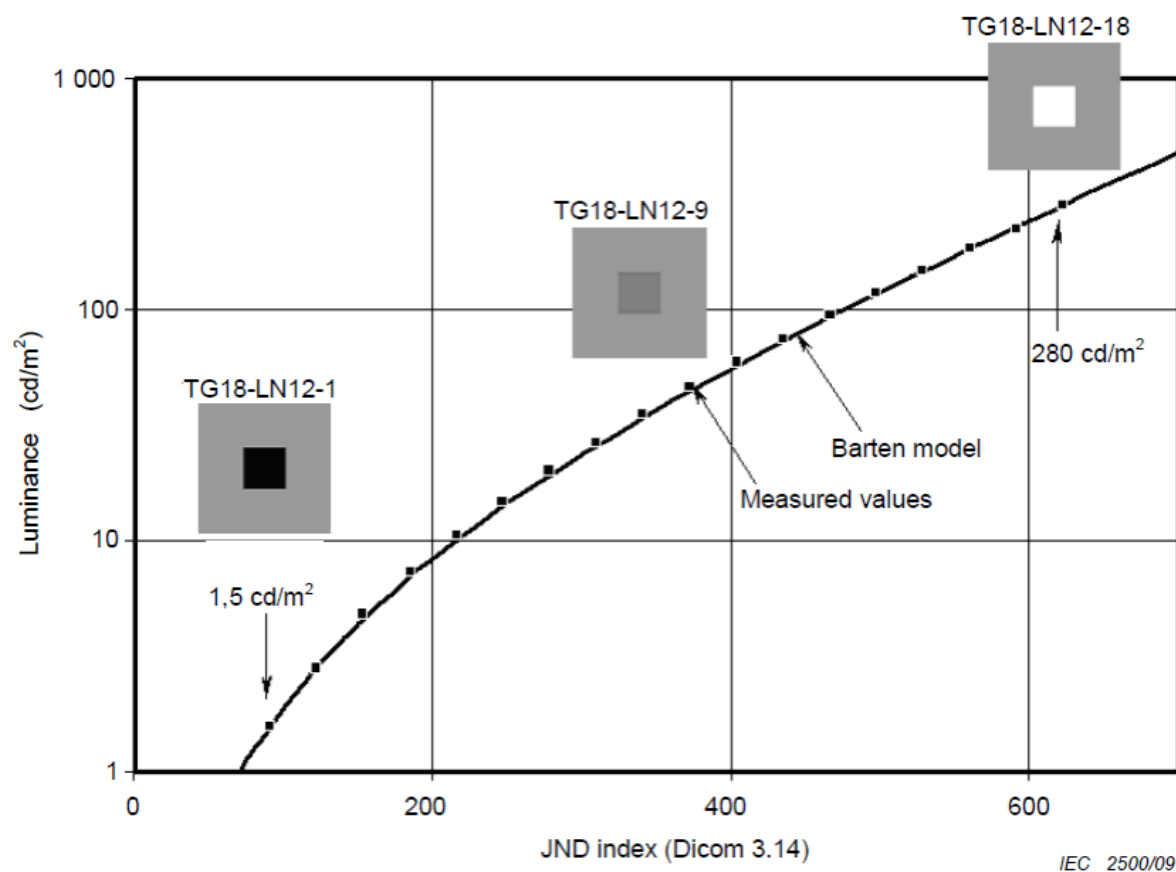
Location:		-		Test Date:		-	
Physicist:		-					
Manufacturer	Model	S/N	Unit ID	DOM			
-	-	-	-	-			
DISPLAY MONTIOR PERFORMANCE							
1) Display Cleanliness				Pass			
2) Visual Inspection of Display Performance With Test Patterns:							
Overall Display Quality Assessment: TG18-QC	0%-5% contrast patches visible?			pass			
	95%-100% contrast patches visible?			pass			
	Line-pair patterns distinct (center & corners)?			pass			
	Grayscale ramps smooth?			pass			
	Three "Quality Control" with various contrasts visible (TG18-QC)?			QUALITY CONTROL	QUALITY CONTROL	QUALITY CONTROL	
	Four low contrast corner patches in sixteen luminance patches from darkest to brightest (TG18-QC): Circle the patches that the four corner patches are visible.			1; 5; 9; 13;	2; 6; 10; 13;	3; 7; 11; 14;	4; 8; 12; 16;
	No artifacts (corss talk, video signal artifacts, etc.) ?			pass			
Luminance Response Visual Inspection: TG18-CT	Half-moon target at the center of each patch visible: Circle the patches that the half-moon targets are visible.			1; 5; 9; 13;	2; 6; 10; 13;	3; 7; 11; 14;	4; 8; 12; 16;
	Four corner patches at each patch visible: Circle the patches that the four corner patches are visible.			1; 5; 9; 13;	2; 6; 10; 13;	3; 7; 11; 14;	4; 8; 12; 16;
Luminance Uniformity Visual Inspection: TG18-UN80	No small- to medium-sized, low-contrast, and irregularly-shaped patterns or region visible?			pass			
	Luminance uniform over the entire display area (i.e. global uniformity)?			Pass			
3) Photometer Measurements of Display Performance							
Luminance Response Function: TG18-LN (18 points)	L'min (cd/m^2)			0.06			
	L'max (cd/m^2)			163.12			
	LR = L'max / L'min			2529			
	*Criteria[1-3]: LR > 250			pass			
Ambient Luminance	*Criteria [3]: AR = Lmin/Lamb >= 1.5?			pass			
Contrast Response	*Criteria [3]: GSDF deviation from baseline within 20%?			pass			

*Criteria references: 1) IEC 62563-1 Medical electrical equipment - Medical imaingn dislay svstems - Part 1: Evaluation methods; 2) ACR-AAPM-SIIM Technical Standard for I
"Assessment of Display Performance For Medical Ima

TG316 Work-in-progress

Photometer Measurements

Luminance Response Function



IEC 62563-1 Edition 1.0 2009-12
“Medical electrical equipment – Medical image display systems
– Part 1: Evaluation methods

Location:

-

Test Date:

-

Physicist:

-

Manufacturer	Model	S/N	Unit ID	DOM
-	-	-	-	-

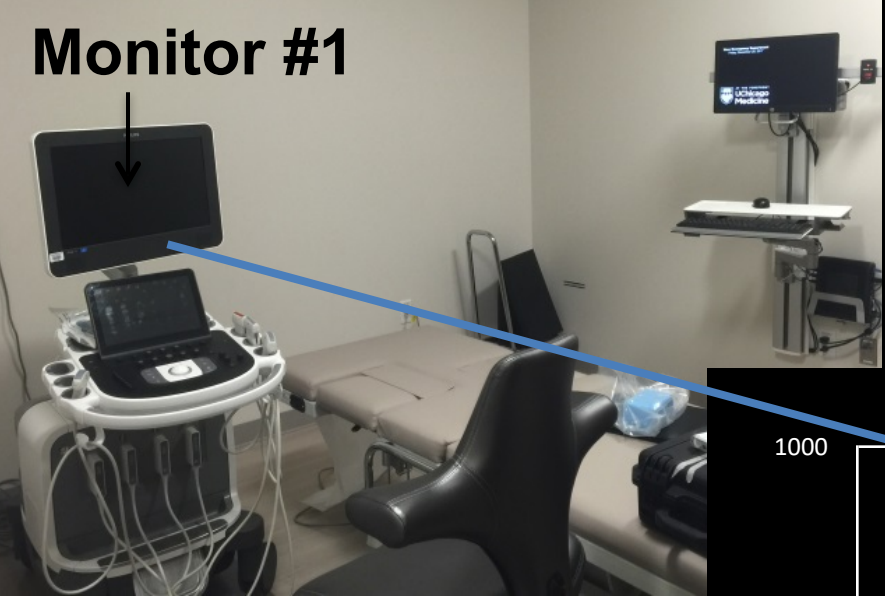
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TG316 Work-in-progress

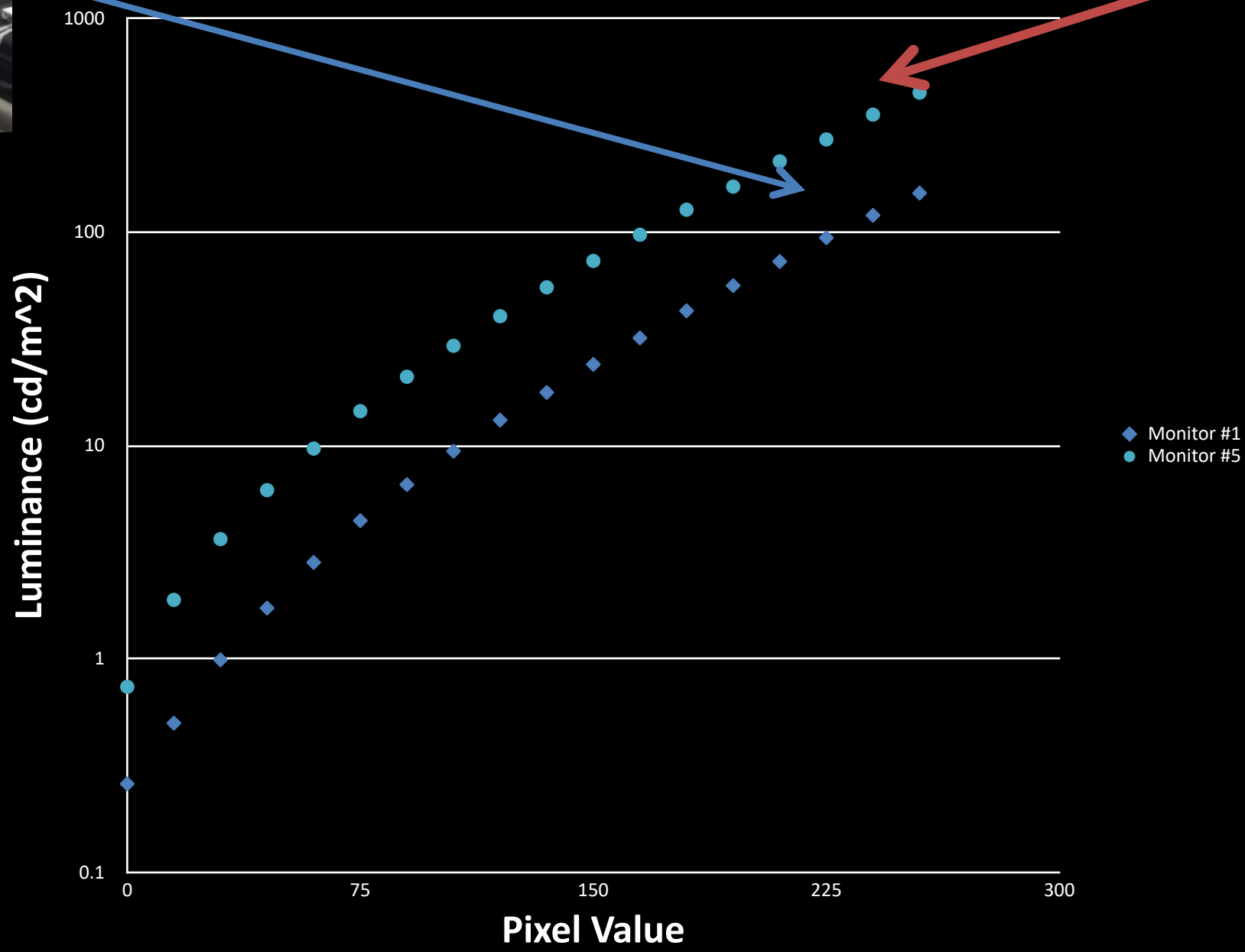
Monitor #1



Monitor #5



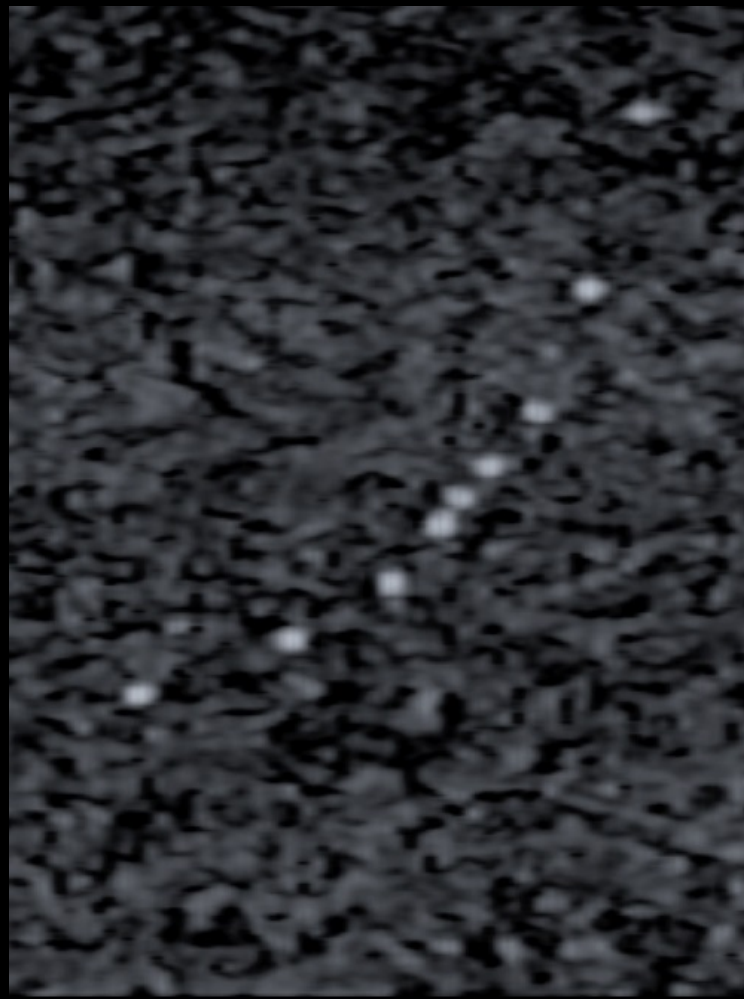
Variations Within the Image Presentation Chain



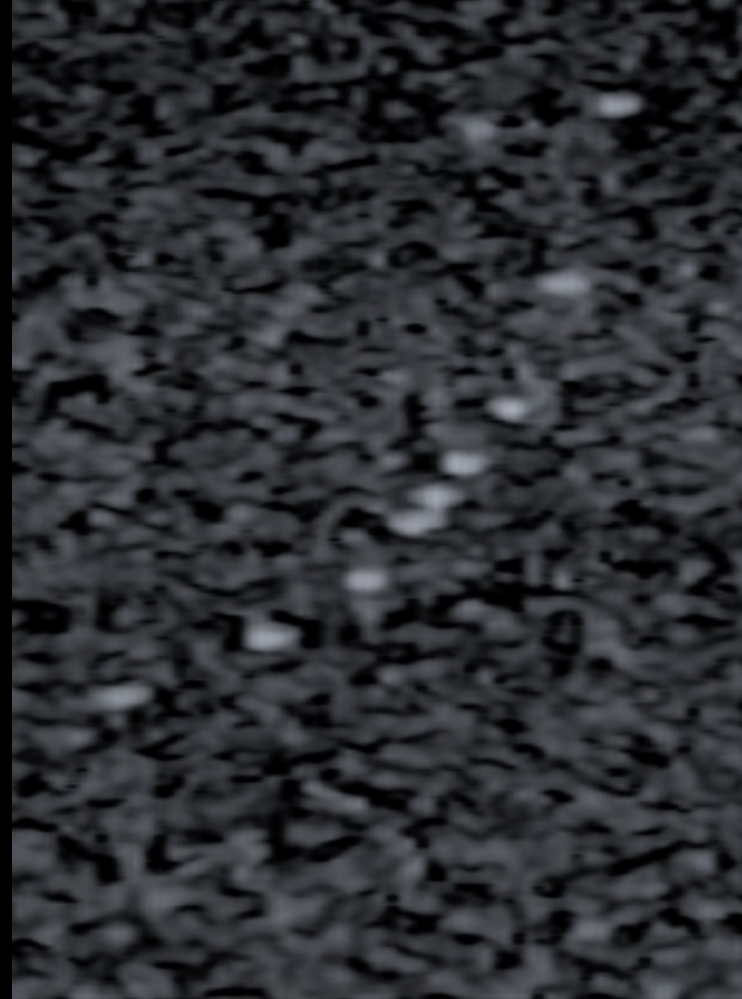
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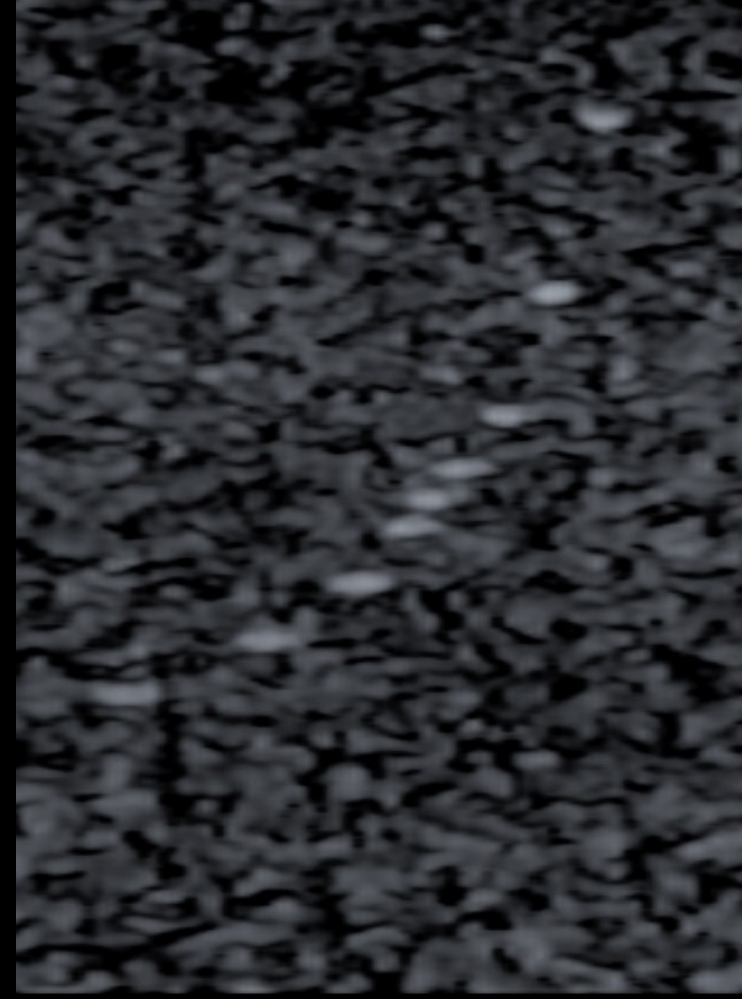
#1 Speed of Sound Effect



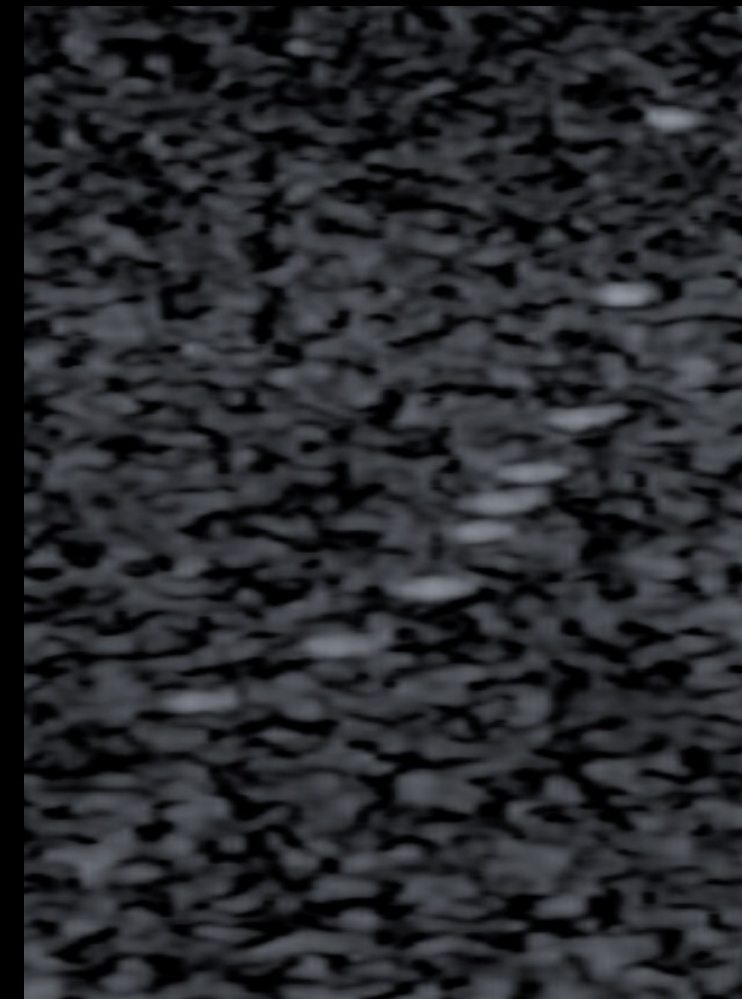
SOS 1460



SOS 1500



SOS 1540



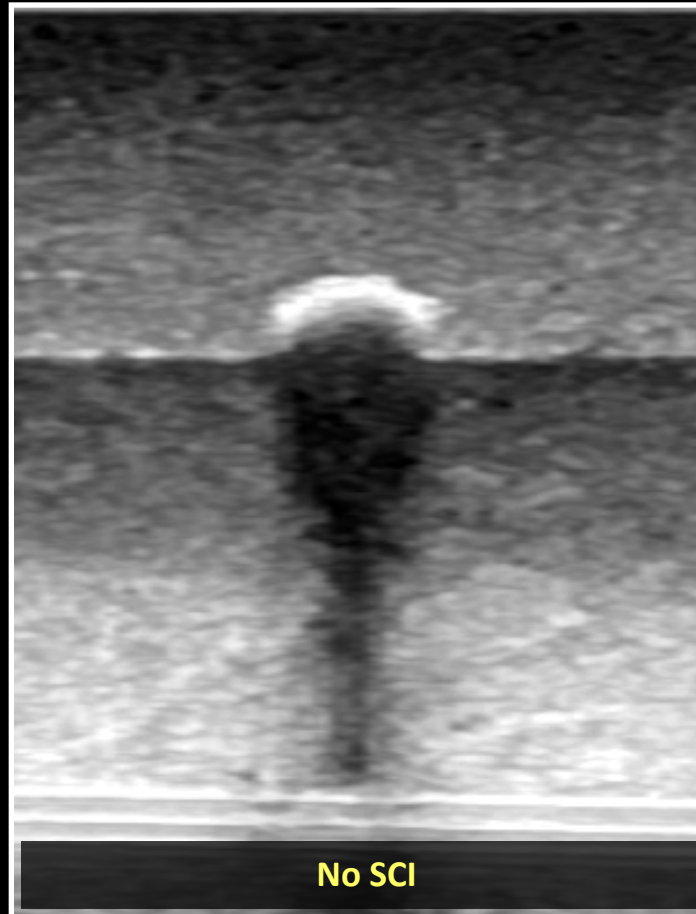
SOS 1580

- Urethane phantom with the actual speed of sound of 1450 m/s.
- When speed of sound is not correct, decreased lateral resolution is observed

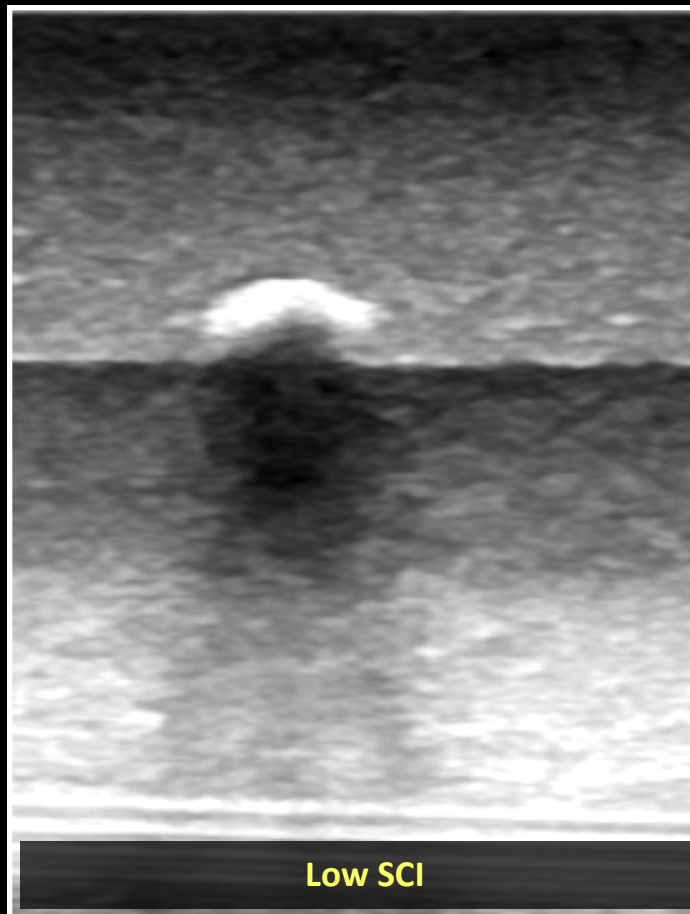
#2 Spatial Compound Imaging Effect

No SCI

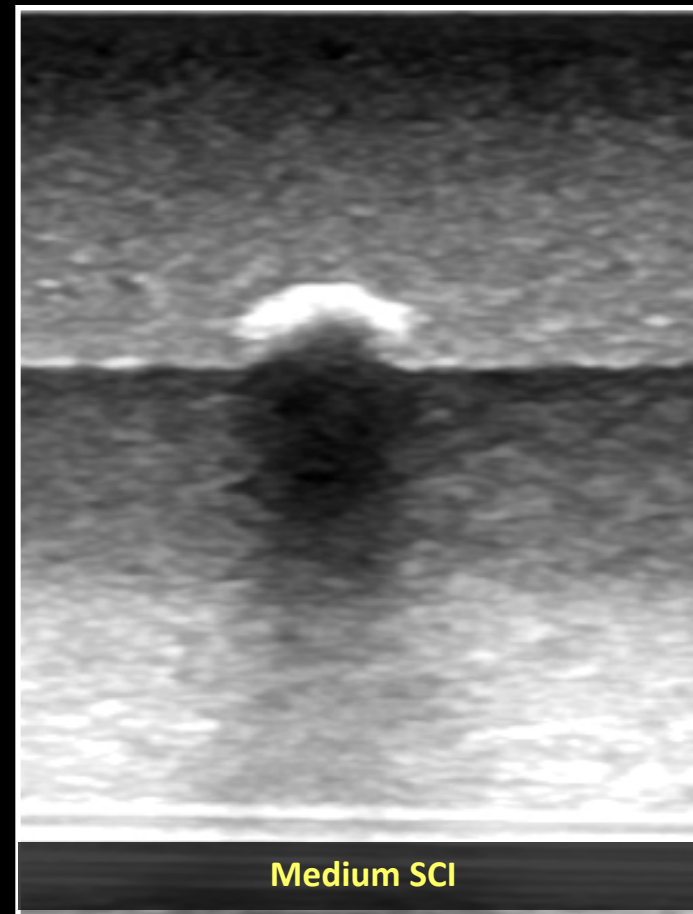
Increasing SCI



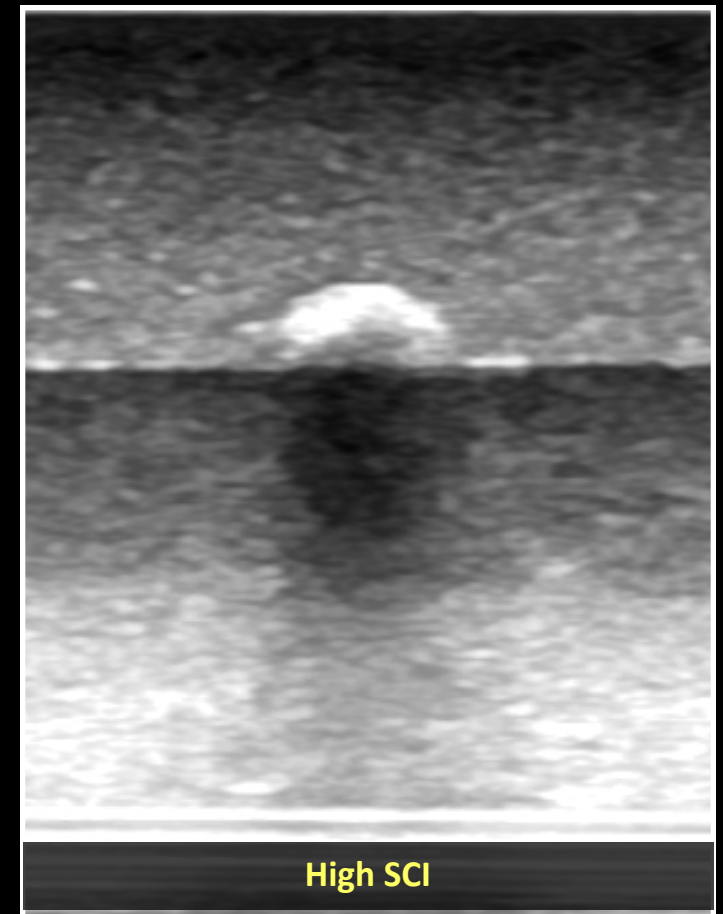
No SCI



Low SCI



Medium SCI



High SCI

- Ultrasound beam is steered into different angles and multiple steered frames are rendered
- The resultant image is less speckled and has higher signal-to-noise ratio
- As spatial compounding is increased, shadowing is decreased

#2 Spatial Compound Imaging Effect



No spatial compounding

With spatial compounding

#2 Spatial Compound Imaging Effect



No spatial compounding

With spatial compounding

Acknowledgement

Ingrid Reiser, Ph.D., DABR
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University of Chicago



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Senior Physics Resident
Department of Radiology
University of Chicago



Chao Guo, Ph.D.
Junior Physics Resident
Department of Radiology
University of Chicago



ANY QUESTIONS?

Contact Zheng Feng Lu at:

[*zlu@radiology.bsd.uchicago.edu*](mailto:zlu@radiology.bsd.uchicago.edu)

