

Acceptance Testing of a Digital Breast Tomosynthesis Unit

2012 AAPM Spring Clinical Meeting Jessica Clements, M.S., DABR

> Texas Health Presbyterian Hospital

Objectives

- Review of technology and clinical advantages
- Acceptance Testing Procedures
- QC Testing Procedures
- Accreditation Process

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Selenia Dimensions

- 2D Digital Mammography System
- 3D Digital Breast Tomosynthesis

 Received FDA Approval in February of 2011
 - For existing 2D system, a software upgrade is

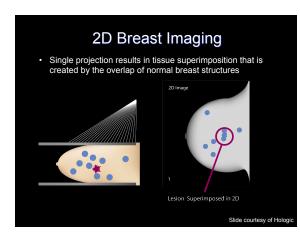
age from the Dimensions QC Manual

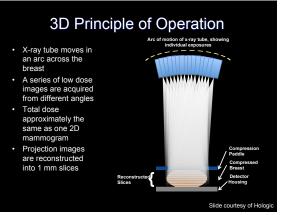
- required to activate DBT – DBT is considered a new
- mammographic modality separate from Full Field Digital Mammography



Unit design

- Allows both 3D and 2D images to be acquired under the same breast compression
- Improved selenium detector, 70 μm pixel size
- High Transmission Cellular (HTC) anti-scatter grid in 2D
- Tungsten target x-ray tube
- Filter options
 - Rh and Ag (2D)
 - Al (3D)

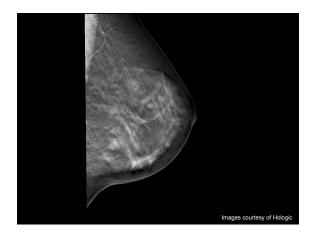




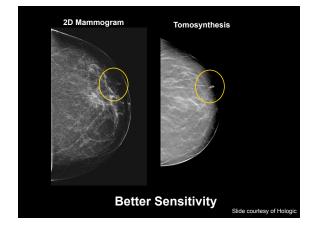
	. The x-ray tube contains a tungsten target nd the following material is the filter used in 3D imaging:
6%	1. tungsten
13%	2. silver
<mark>81%</mark>	3. aluminum
0%	4. rhodium
0%	5. molybdenum
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- 1. tungsten not in unit
- 2. silver 2D only
- 3. aluminum
- 4. rhodium 2D only
- 5. Molybdenum not in unit
- Reference: Ren, B., Ruth, C., Wu, T., Zhang, Y., Smith, A., Niklason, L, "A new generation FFDM/tomosynthesis fusion system with selenium detector", Proc. SPIE 7622, 76220B (2010).

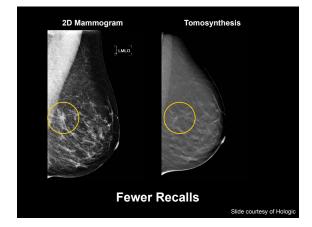














Advantages

- Imaging dense breast tissue
- May decrease recall rate
- Addresses issue of tissue overlap
- Dose within existing limits for 2D mammography

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Personnel Requirements

- Required Training for a medical physicist:
 - Digital Mammography: MQSA Personnel requirements including 8 hours of training in surveying units of digital mammography
 - Digital Breast Tomosynthesis: Must receive at least 8 hours of training in digital breast tomosynthesis modality

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Responsibilities

- Unit must be evaluated by a medical physicist before clinical use commences after the equipment is first installed, moved, or significantly modified
- The medical physicist must review the results of the technologist's QC tests at least annually.
- The results of the overall Quality Assurance and Quality Control program must be reviewed by the medical physicist with the responsible interpreting physician at least annually.

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Acceptance Testing

Required in the following situations:

- New unit

- Upgrade of 2D to include DBT
- After major component upgrades including software, detector, tube, etc.

 Release notes will indicate what tests must be performed after manufacturer upgrades

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Quality Control Tests to be Performed by the Medical Physicist Upon Installation – Table 1-1 QC Manual

	*Mammographic Unit Assembly Evaluation	Collimation Assessment			
	Artifact Evaluation	*kVp Accuracy and Reproducibility			
	*Beam Quality Assessment – HVL	Evaluation of System Resolution			
	AEC Function Performance	Breast Entrance Exposure, AEC Reproducibility and AGD			
	Radiation Output Rate	Phantom Image Quality Evaluation			
	Signal to Noise and Contrast to Noise	Diagnostic Review Workstation Quality Control			
	DICOM Printer Quality Control	Detector Flat Field Calibration			
	Geometry Calibration for Tomosynthesis Option	Compression Thickness Indicator			
	*Compression				
De	Described in the 1999 ACR Mammography QC Manual Press Health				



Action Categories

Category A: If any of the following quality control tests that evaluate the performance of the *image acquisition components* of the Selenia Dimensions system produces results that fall outside the action limits as specified by the manufacturer, the source of the problem must be identified and corrective action must be taken before any further examinations are performed.

examinations are performed. Category B: If any of the following quality control tests that evaluate the performance of a diagnostic device used for mammographic image interpretation (i.e. DICOM printer, physician's review station) produces results that fall outside the action limits as specified by the manufacturer, the source of the problem must be identified and corrective action. Clinical imaging can be continued and alternative approved diagnostic devices must be used for mammographic image interpretation. Clinical imaging can be continued and alternative approved diagnostic devices must be used for mammographic image interpretation. Clinical imaging can be continued and alternative approved diagnostic devices must be used for mammographic image interpretation. Category C: If any of the following quality control tests that evaluate the performance of components <u>class</u> than the digital image receptor of the diagnostic devices used for mammographic image interpretation produces results that fall outside the action limits as specified by the manufacturer, the source of the problem must be identified and corrective action must be taken within hitty days of the test date. Clinical imaging and mammographic image interpretation can be continued during this period.

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Technologist QC to be performed by the medical physicist at acceptance

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Detector Flat Field Calibration

- Pre-programmed set of exposures of the flat-field acrylic phantom without a compression paddle
- Review preview images for foreign objects, gross artifacts, or other nonuniformities or collimation interference
- · Performed weekly by technologist
- Category A

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Geometry Calibration for

- Image the provided geometry phantom as specified
- Evaluated automatically by software in the system
- · Performed by technologist semiannually
- Category A



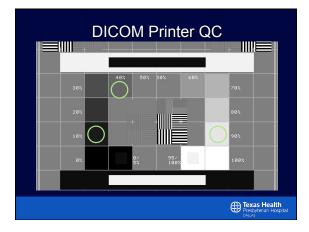
Compression Thickness Indicator

- Compress the 7.5 cm spot contact compression paddle onto the ACR phantom using full automatic compression of approximately 30 pounds
- · Record the thickness indicated
- Performed by the technologist bi-weekly
- Category C

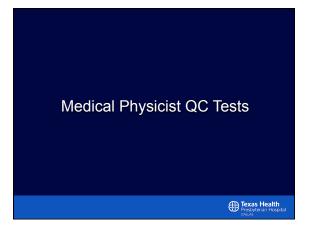
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DICOM Printer QC

- A SMPTE pattern is printed from the imaging system and optical densities are measured.
- Mid density (40%), lower density (90%), and density difference (10%-40%)
- Limit: +/-0.15
- Performed by the technologist weekly
- Category B









- Measure the deviation between x-ray field and edges of the image receptor: 24x29, 18x24 (L), 18x24 (C), 18x24 (R), and 18x29 cm tomo Measure distance with digital ruler
- X-ray field must not extend by more than 2% SID on any side of the detector
 Category C

from the Dimensions QC Manua



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Collimation

- Measure the deviation between x-ray field and light field: 24x29 cm paddle
- Use ready pack, GafChromic film, or other test tool to visualize x-ray field
- The total misalignment of the edges of the light field and the x-ray field along either the length or the width of the visually defined field at the plane of the breast support surface must not exceed 2% of the SID
- Category C

Collimation

- Measure the deviation between compression paddle and edges of the image receptor: 24x29, 18x24 cm, and small breast (if available)
- The anterior edge of the compression paddle must be aligned just beyond the chest wall edge of the image receptor so that it does not appear in the mammogram. The anterior edge must not extend beyond the chest wall edge of the image receptor by more than 1% of the SID.
- Category C

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Beam Quality Assessment

- Follow the ACR manual
- Protect the detector with lead
- To measure in 3D mode, use zero degree tomo mode
- Only minimum HVL limits apply
- Category C

T	W	w	W	2 1 1
Target material	VV	VV	VV	~ 📮 🦳
Filter	Rh	Ag	AI" 🆓	
Paddle in place	Yes	Yes	Yes	_
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Artifact Evaluation

- Image the flat field phantom (4 cm thick acrylic block – manufacturer provided)
 - No compression paddle
 - All filters in each imaging mode (conventional, tomo, magnification)
 - Rotate phantom 180* between exposures
 - View full resolution images for artifacts
 - Print flat field pattern as 2560x3328 for 8x10" film and 3328x4096 for 24x30 cm film, both as True Size Printing
 - Category C

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Artifact Examples

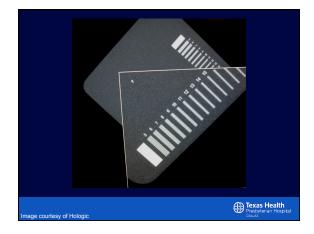
- Dead pixels
 - cluster of 16 or more
 - complete or partial row or column

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System Resolution

- Uses system limiting spatial resolution as performance indicator
- 18x24 cm compression paddle
- High contrast resolution pattern that can test up to 15 lp/mm with 1 lp/mm steps from 3-15 lp/mm
- Pattern is placed on flat field phantom approximately 1 cm from chest wall edge, with pattern angled 45* to the anodecathode axis





System Resolution

- In 2D, limiting resolution must be greater than 7 lp/mm
- In 3D, must be greater than 3 lp/mm
- Category A

	thode	n the test pattern is approximately 45° to the anode- axis and when imaging in tomosynthesis mode, the m limiting spatial resolution must be greater than:
82%	1.	3 lp/mm
	2.	5 lp/mm
<mark>18%</mark>	3.	7 lp/mm
	4.	9 lp/mm
	5.	11 lp/mm
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- 1. 3 lp/mm
- 2. 5 lp/mm
- 3. 7 lp/mm minimum in 2D mode
- 4. 9 lp/mm
- 5. 11 lp/mm

Reference: Hologic: Quality Control Manual Selenia Dimensions 2D FFDM Selenia Dimensions DBT, 2011 (Part Number MAN-01965 Revision 002) p. 35

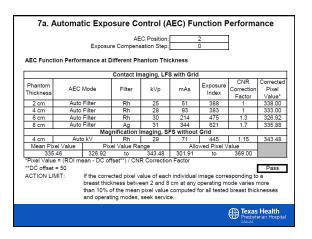
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AEC Function Performance

- Record exposure index (and exposure parameters) for phantom thicknesses (BR-12 or acrylic) in various AEC modes used clinically in conventional, tomo, and magnification modes.
- Subtract DC offset (50)
- Apply CNR correction factor to convert to corrected pixel value
- The application of correction factors allows comparison of various thicknesses.

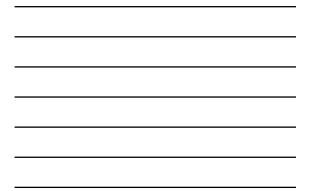








AEC Position: 2 Exposure Compensation Step: 0 AEC Function Performance at Different Phantom Thickness								
ALGIUNG				naging, LFS				
Phantom Thickness	AEC	Mode	Filter	kVp	mAs	Exposure Index	CNR Correction Factor	Correcter Pixel Value*
2 cm	Auto	o kV	AI	26	42	236	0.7	265.71
4 cm	Auto	o kV	AI	29	60	290	0.91	263.74
6 cm	Auto	o kV	AI	33	79	439	1.46	266.44
8 cm	Auto	o kV	AI	36	114	613	2.37	237.55
Mean Pix	el Value	Pix	el Value Ra	inge	Allo	wed Pixel V	alue	
258		237.55	to	266.44	232.52	to	284.20	
Prixel Value = (ROI mean - DC offset*) / CNR Correction Factor **DC offset = 50 ACTION LIMIT: If the corrected pixel value of each individual image corresponding to a breast thickness between 2 and 8 cm at any operating mode varies more than 10% of the mean pixel value computed for all tested breast thicknesse and operating modes, seek service.			nore					



AEC Function Performance

- The system is trying to maintain a constant pixel value independent of AEC mode, operating mode, breast thickness, or technique
- The pixel value of each image at any operating mode must not vary by more than 10% of the mean pixel value.
- Category C

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AEC Performance at different compensation steps

- Image 4 cm of phantom at the range of compensation steps. Each step is designed to result in an additional 15% change in dose to the ACR phantom.
- Compensation steps are not used in 3D
- Calculate ratios by dividing pixel value at a given step by the mean pixel value at step zero. Allowed ratio at each step.
- Category C

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	Contact Imaging, LFS with Grid						
Phantom Thickness	AEC Mode	Exp Comp	Pixel Value*	Ratio**	All	owed Rati	o**
4 cm	Auto-Filter	-3	195	0.59	0.56	to	0.66
4 cm	Auto-Filter	-2	237	0.71	0.66	to	0.78
4 cm	Auto-Filter	-1	283	0.85	0.78	to	0.92
4 cm	Auto-Filter	0	334	1.01			
4 cm	Auto-Filter	0	329	0.99			
4 cm	Auto-Filter	0	333	1.00			
4 cm	Auto-Filter	1	383	1.15	1.06	to	1.24
4 cm	Auto-Filter	2	450	1.36	1.22	to	1.43
4 cm	Auto-Filter	3	518	1.56	1.4	to	1.64
4 cm	Auto-Filter	4	606	1.83	1.61	to	1.89
4 cm 4 cm Pixel Value =	Auto-Filter	- DC offset (50	518 606	1.56 1.83	1.4	to	1.64





Breast Entrance Exposure, AEC Reproducibility and AGD

- Combine AGD for both conventional and tomosynthesis exposures for a total average glandular dose.
- If AGD exceeds 300 mrad for 4.2 cm effective breast thickness, seek service or technique adjustment.
- Category A

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Radiation Output Rate

- Exposure at maximum mAs setting and 28 kVp (W/Rh)
- Dose Rate (mGy/sec) = Exposure Rate (mR/s) x 0.00873 mGy/mR
- Seek service if output rate is less than 2 mGy/s (230 mR/sec)
- Category C

age from the Dimensions QC Manual



	The total mean glandular dose to the ACR Mammographic Accreditation phantom must not exceedmGy per view when combining the conventional and the tomosynthesis exposures at the recommended techniques for imaging an average breast:
6%	1. 2 mGy
89%	2. 3 mGy
<mark>6%</mark>	3. 4 mGy
0%	4. 5 mGy
0%	5. 6 mGy
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- 1. 2 mGy
- 2. 3 mGy
- 3. 4 mGy
- 4. 5 mGy
- 5. 6 mgy

Reference: Hologic: Quality Control Manual Selenia Dimensions 2D FFDM Selenia Dimensions DBT, 2011 (Part Number MAN-01965 Revision 002) p. 35

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Phantom Image Quality Evaluation

- Image the ACR phantom in both conventional and tomo mode
- The largest 5 fibers, 4 spec groups and 4 masses must be visible or 4.5/4/3.5 is acceptable if SNR and high contrast resolution of the system are passing
- · Performed by the technologist weekly
- Category A

	nd Contrast-To-Noise urements	
 Conventional phantom image Automatic ROI creation available 	Integration Control of	
$SNR = \frac{mean_{background} - DC_{affset}}{std_{background}}$ $CNR = \frac{mean_{background} - mean_{dist}}{std_{background}}$	Namio Schurt 1927 Carlos Regen Los Charlos Regen	
$Diff = \frac{CNR_{measured} - CNR_{base}}{CNR_{base}} \times 100$	Of Real 116	
Image and equations from the Dimensions QC M	anual Texas Health Presbyterian Hospit	al

Signal-To-Noise and Contrast-To-Noise Measurements

- SNR should be equal to at least 40 and the CNR should not change by more than +/- 15% of the baseline value
- Category A

	6. Failure of the phantom image quality evaluation is considered an action category
100%	1. A
0%	2. B
0%	3. C
0%	4. D
0%	5. E
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Correct Answer
1. A
2. B
3. C
4. D
5. E
Reference: Hologic: Quality Control
Manual Selenia Dimensions 2D FFDM
Selenia Dimensions DBT, 2011 (Part
Number MAN-01965 Revision 002) p.
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		hantom image quality evaluation should be med with the tomosynthesis acquisition by a technologist at least:
0% 12% 6%	_	yearly semi-annually monthly
82% 0%	4.	weekly daily
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- 1. yearly
- 2. semi-annually
- 3. monthly
- 4. weekly
- 5. daily

Reference: Hologic: Quality Control Manual Selenia Dimensions 2D FFDM Selenia Dimensions DBT, 2011 (Part Number MAN-01965 Revision 002) p. 35

Diagnostic Review Workstation Quality Control

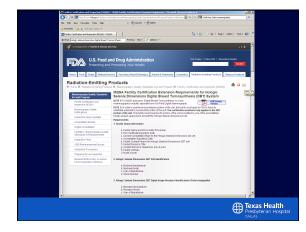
- Suggested equipment photometer supplied by the manufacturer with each diagnostic review workstation
- Measure the white level and the DICOM GSDF compliance for LCD monitors; also display black level and white level uniformity performance for each CRT display
- Pass/fail criteria varies by monitor type and model
- Category B

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Accreditation

- The 2D portion of the unit is accredited using standard FFDM procedures

 ACR, SAR, SIA, and STX
- The DBT portion of the unit must apply to and be approved by the FDA for extension of their certificates to include the use of a DBT unit
 - MQSA Facility Certification Extension Requirements for Hologic Digital Breast Tomosynthesis



 The only approved accreditation body for the digital breast tomosynthesis portion of the Hologic Dimensions unit at this time is: 			
<mark>6%</mark>	1. The American College of Radiology		
0%	2. The State of Texas		
0%	3. The State of Iowa		
0%	4. The State of Arkansas		
<mark>94%</mark>	5. The US Food and Drug Administration		

- 1. The American College of Radiology
- 2. The State of Texas
- 3. The State of Iowa
- 4. The State of Arkansas
- 5. The US Food and Drug Administration

Reference: US FDA website:

http://www.fda.gov/Radiation-EmittingProducts/ MammographyQualityStandardsActan dProgram/