

# DICOM Review



WG-14: Security

• Utilizes an open standards development process that encourages the involvement and consensus of both manufacturers and users

NE MA, Sailey 1752 1008 Rooth 17" Stopet Florestee, VA 22209 Phy. (102) 843-3250

Arta (Micain Amakorg

• Specification of a conformance mechanism so that a user can determine whether or not devices are likely to interoperate

### **DICOM** Review

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- DICOM Standards Committee (DSC)
  - DICOM's executive body whose members are imaging equipment manufacturers, physician organizations, and other interested groups
    - 27 manufacturer members
    - 20 user members
    - 11 general interest members
  - AAPM now a voting member of the DSC as a "User" organization
- DICOM's activities are coordinated through MITA, a division of the National Electrical Manufacturers Association (NEMA)

### The DICOM Standards Committee

Secretary General Secretary	MITA (Medical Imaging & Technology Alliance) Stephen Vastudi, MITA strategicil medicalintaging org
Producer Co-Chair	Kevin O'Donnell, Toshiba Madacal Research Institute USA Institute USA
User Co-Chair	John A. Carrino, MD. MPH, American College of Radiology Johns Hopkins School of Medicine Johns 20 days etc.



WG-28: Physics

### DICOM "workflow"

- Working groups propose "Work Items" based on suggestions from members, users or at the direction of the DSC
- Work Items are divided into Supplements and Change Proposals (sometimes called Correction Proposal or Items)
  - Supplements define new objects, content or structure
  - Change Proposals modify the existing Standard

 Table of Contents

 9.00

 9.01

 9.02

 9.02

 9.03

 9.04

 9.05

 9.05

 9.05

 9.05

 9.05

 9.05

 9.05

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**DICOM Standard Status\*** 

Maintained by David A. Clunie dclunie@dclunie.com

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## <u>DICOM "workflow"</u> Base Standards working group (WG06) maintains the overall consistency of the DICOM standard Some of WG06 responsibilities include:

- Execution of the DICOM Maintenance Process (i.e. development of Change Proposals)
- Technical coordination and guidance for all WG's
- Review and official approval of all Work Items before Public Comment, Letter Ballot and Final Text releases
- Once the Work Item is complete, WG06 petitions the DSC to approve the Work Item and it is sent out for Public Comment

### DICOM "workflow"

\* http://medical.nema.org/



- During Public Comment phase anyone can make comments on the Work Item
  - All comments must be responded to before the Work Item can proceed in the approval process
- DSC then authorizes the Work Item for Letter Ballot by DICOM members
  - Each of the 58 members are allowed one vote
- Change proposals do not always require the same rigorous review process and are often "batched" for Public Comment and Letter Ballot

e.g. for typographical errors, etc.



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<ul> <li>Currently has Chairs United States</li> </ul>	and Secretariats from both Europe and	
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# WG28 Physics WG28 Physics - Current Roadmap: Risks Identified • Physics wish-list could get too far ahead of vendor and user expectations • Evaluation of the accuracy of data registered in the DICOM Radiation Dose Structured Report (SR) • Might not be able to recruit enough physicists, equipment vendors & service providers for the resulting specifications to be effective, balanced and adopted • Methods for capturing and recording operator dose • Work with MITA X-Ray Interventional Working Group on development of "Physics Mode" •

### Structured Report (SR)



- Supplement 23 for new Image Object Definition (IOD)
   approved in April 2000
- Support for conventional free text reports and provide the capability to record structured information
  - Convey the interpretation text and record the DICOM identifiers (i.e. attributes) of selected images and/or data
- Information stored in "Templates" (TID)
  - Templates are given in Part 16: Content Mapping Resource







### Development of Patient Dose SR Work Item



- Current Radiation Dose SR contains only information about the x-ray system or information the x-ray system can determine, e.g.:
  - radiation output, geometry, x-ray source, detector system, etc.
- Estimation of patient or organ dose requires:
  - X-ray system information
  - Models of the patient/organs
  - Radiation interaction within the patient
- Methods to do patient dose estimations are being developed and improved continuously
  - storage of these estimations in a different object would allow more versatile utilization of the data



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TID 100014

TID 10015

CT Dose Check details

Scanning length

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- User Quality Control Mode
  - Standard that applies to x-ray equipment intended to perform interventional procedures
  - Defines a set of minimum requirements designed to more easily facilitate quality control at the facility level
  - Items pertinent to the following quality control elements are contained in the Standard:
    - physical testing of equipment
    - electronic audit of system configuration
    - electronic reporting of relevant data and information



### Goals - User Quality Control Mode

- Provide a set of quality tools on imaging equipment for:
  - Quality Control testing to detect degradation of X-ray related components.
  - Access to and export of "for processing", and "for presentation" images suitable for external digital image quality testing
  - Calibration inputs from the physicist required for fields in the Radiation Dose Structured Report (RDSR)
  - Electronic documentation of system configuration and technical factors invoked by each Exam Protocol Selection Button (EPSB)
     Export in spreadsheet format
  - Access to RDSR