



Plastic Scintillation Detectors: Present Status and Their Application for Quality Assurance and In Vivo Dosimetry

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OUTLINE

➤ Introduction

- Basic properties of PSDs
- Cerenkov stem effect

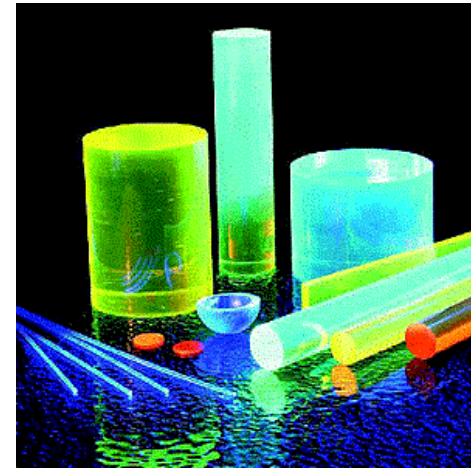
➤ Quality Assurance Applications

- Exradin W1 scintillator
- Small field dosimetry

➤ *In Vivo* Dosimetry

- EBRT: prostate patients
- Other Brachytherapy Studies

➤ Conclusion



DISCLOSURES

- The University of Texas MD Anderson Cancer Center & l'Université Laval have one license agreement with Standard Imaging.
- SB & LB had an NIH/NCI SBIR Phase I grant (1R43 CA153824-01) with Standard Imaging.
- LB & SB had Sponsored Research Agreement with Standard Imaging.
- SB had phase I, II, III Sponsored Research Agreements with Radiadyne, LLC.
- ***Scintillating Fiber Dosimetry Arrays.*** US Patent: 8,183,534, Date Issued: May 22, 2012.
- ***Real-time in vivo Dosimetry Using Scintillation Detectors.*** US Patent: 61/143,294 filed on 01/08/2009, pending.

LECTURES SERIES AT AAPM

- **AAPM 2008** --- introducing PSDs, basics & properties
“Scintillation Dosimetry: Review, New Innovations and Applications”
- **AAPM 2010** --- further studies & validation of PSDs
“Scintillation Dosimetry: From Plastics to Liquids and from Photons/Electrons to Protons”
- **AAPM 2013** --- application of commercial PSDs
“PSDs: Present Status and their Applications for Quality Assurance and In Vivo Dosimetry”

Introduction & Present Status

WHAT IS A PSD?

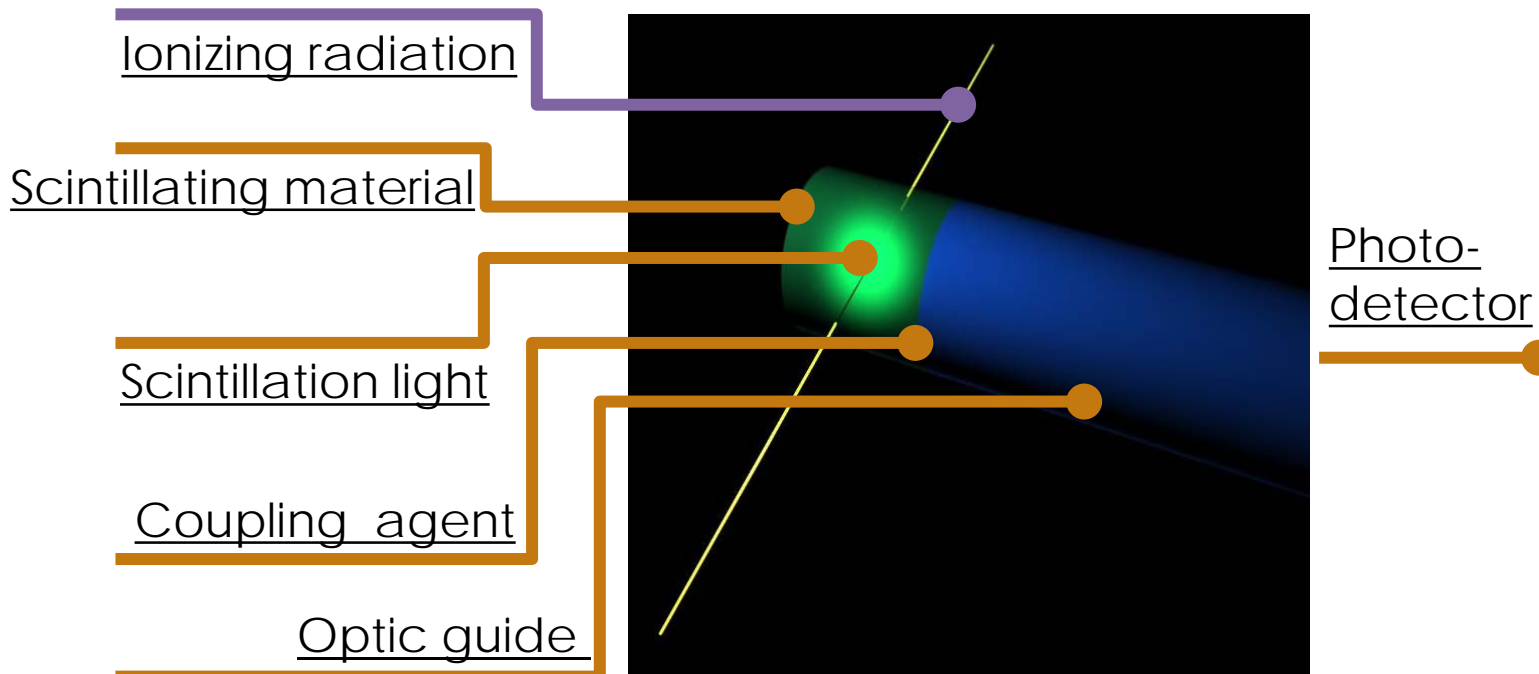
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PLASTIC SCINTILLATING MATERIALS

Introduction

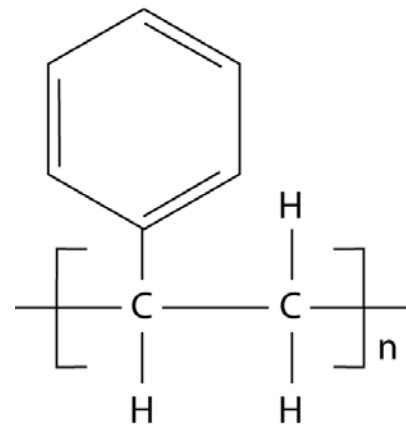
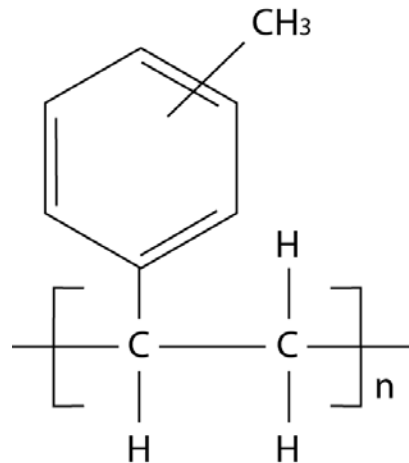
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- Core (bulk solvent)
 - Polyvinyltoluene (*plastic scintillators*)
 - Polystyrene (*plastic scintillating fibers*)



- Cladding (scintillating fibers)
 - Polymethylacrylate (PMMA)
 - Improves transmission of light to optical fiber

- Organic fluors (scintillating materials) are used with a bulk solvent: two components system
 - BC400: >97% PVT, < 3% organic fluors
 - e.g. p-TERPHENYL (C_6H_5 C_6H_4 C_6H_5).
 - Energy deposited in the solvent is transferred to the organic fluor molecules
 - Emission is typically peaked in the violet-blue region.
- “Wavelength shifters” or three components system
 - A third (organic) component can also be used to absorb the organics fluors emitted photons and re-emit at a longer wavelength
 - POPOP [1,4-bis(5-phenyloxazol-2-yl) benzene] to get scintillators emitting in the green or yellow region.

PSDs COMPOSITION

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Parameter	Scintillator	Polystyrene	Water
Density (g/cm ³)	1.032	1.060	1.000
Electron density (10 ²³ e ⁻ /g)	3.272	3.238	3.343
Composition (by weight %)	H: 8.47 C: 91.53	H: 7.74 C: 92.26	H: 11.19 O: 88.81

WATER EQUIVALENCE

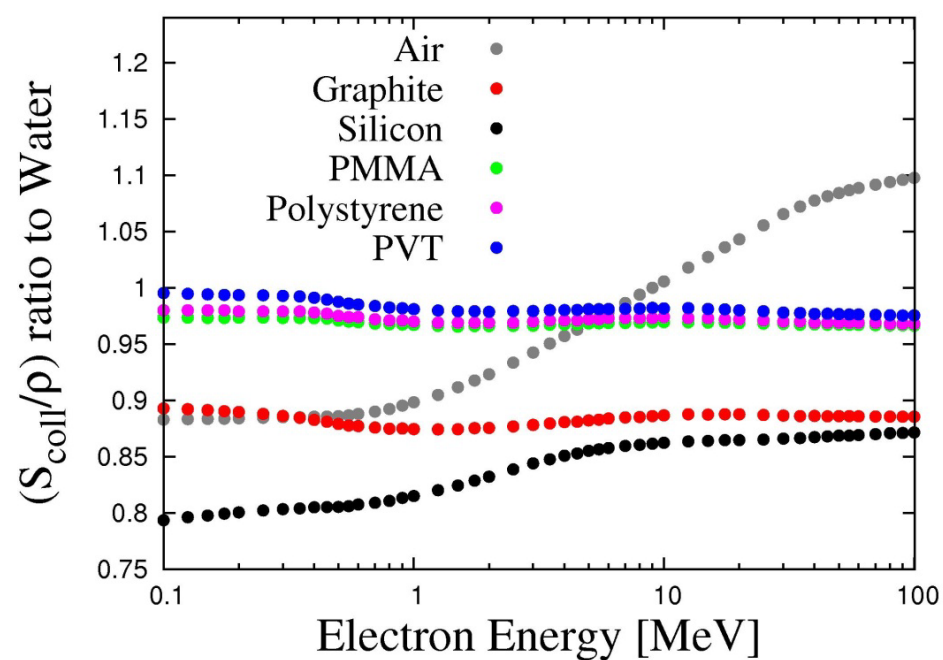
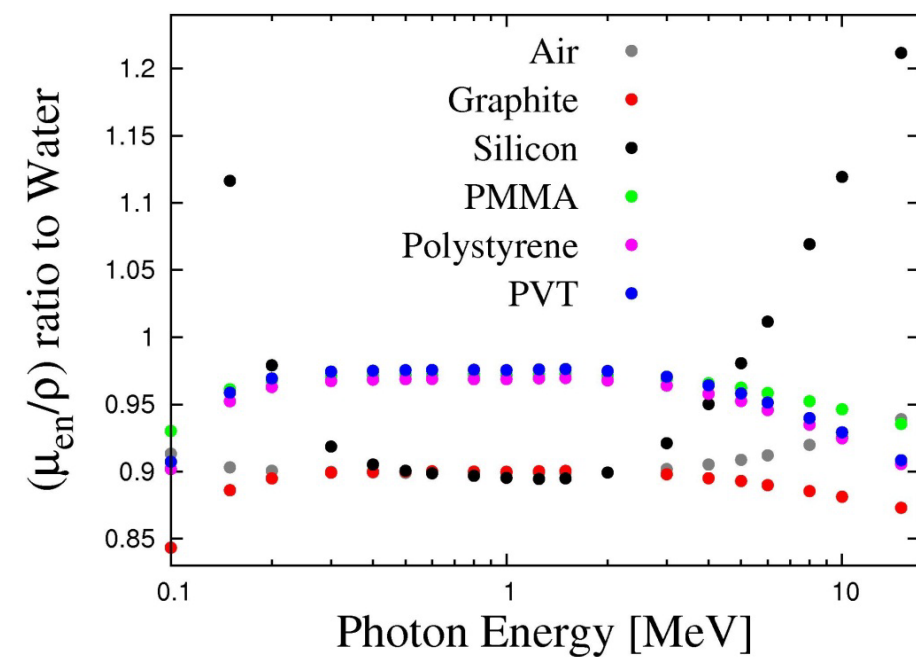
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Data from NIST

PROPERTIES

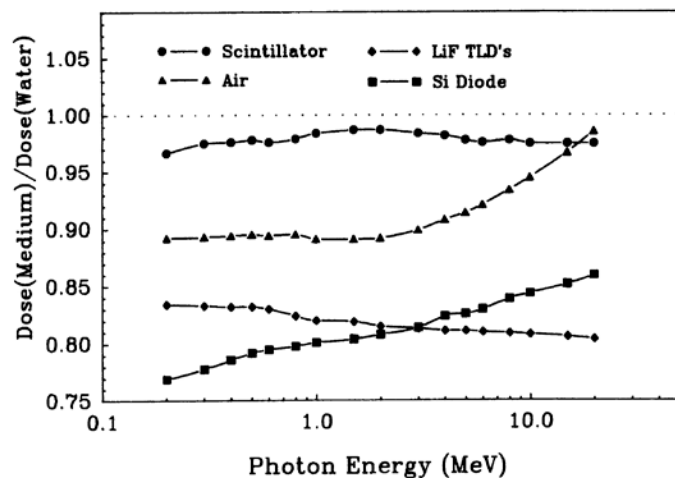
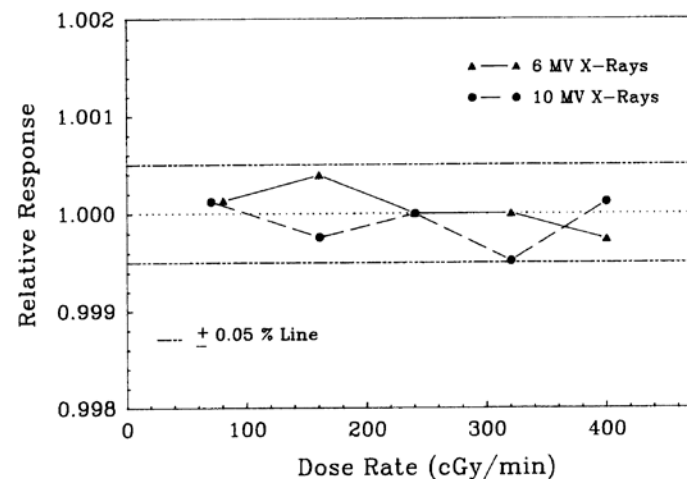
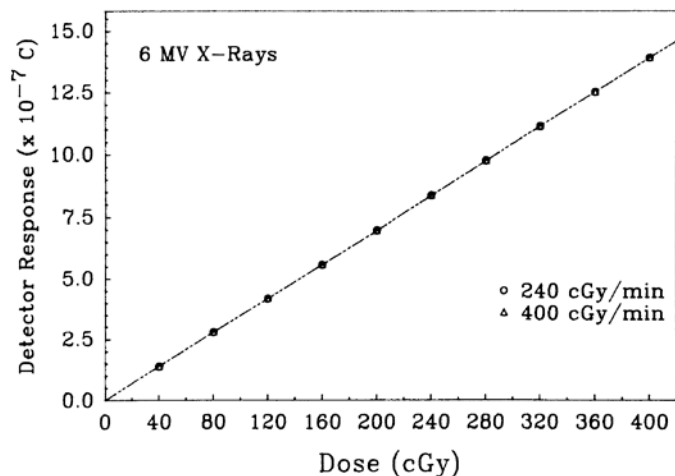
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$$\frac{\overline{D}_{sci}}{\overline{D}_{med}} = 0.980 \pm 0.005$$

Beddar A S, Mackie T R, Attix F H. **Water-equivalent plastic scintillation detectors for high-energy beam dosimetry: I. Physical characteristics and theoretical considerations.** *Phys Med Biol* 37: 1883-1900, 1992.

QUENCHING EFFECT

- A decrease from the optimal scintillation efficiency, or quenching, can occur under various conditions
 - For organic scintillators, possible thermal quenching
 - Radiation damage can decrease the efficiency (Ionizations lead to temporary and/or permanent molecular damage)
 - Increased absorption due to defects (plastics turn yellow)
 - Need > kGy accumulated doses (10^4 to 10^5 Gy)
 - High LET: proton and ion beams
 - Overlapping excitation sites and molecule damages

BACK IN THE OLD DAYS... 1992

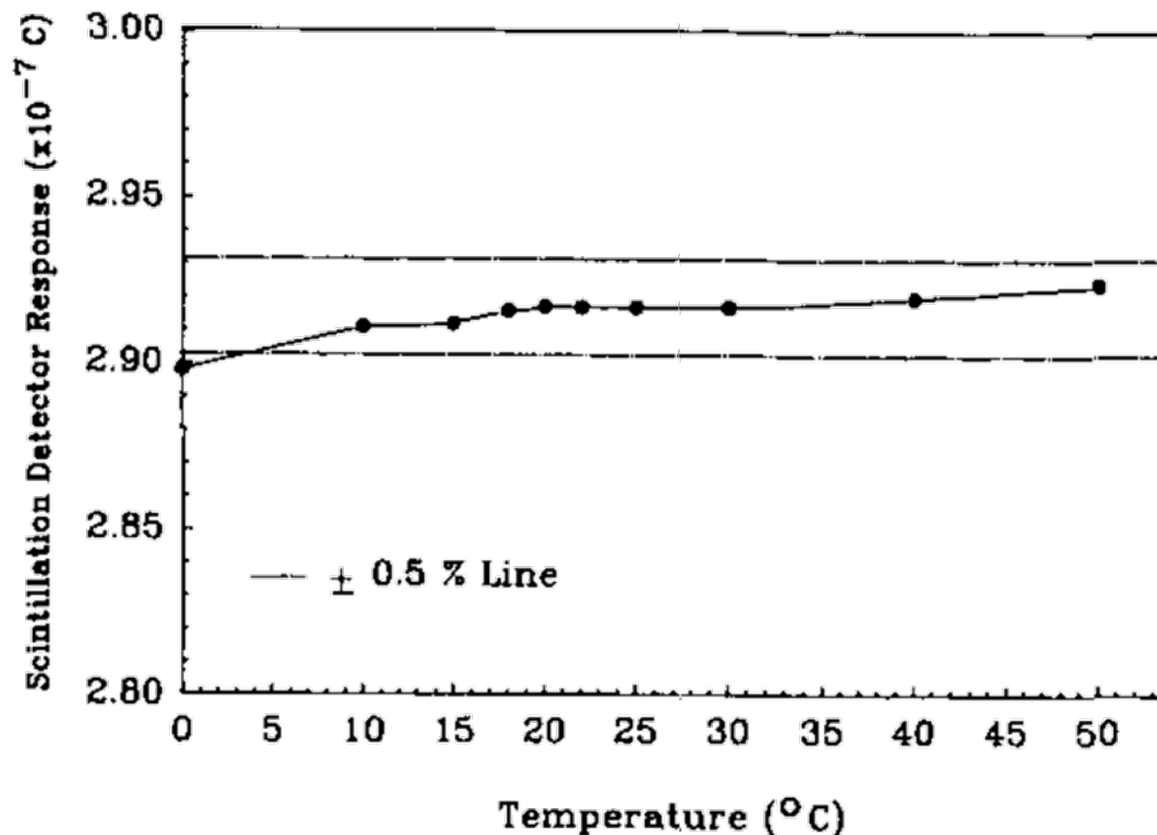
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Negligible temperature dependence reported in initial studies.

Beddar A S, Mackie T R, Attix F H. **Water-equivalent plastic scintillation detectors for high-energy beam dosimetry: I. Physical characteristics and theoretical considerations.** *Phys Med Biol* 37: 1883-1900, 1992.

TEMPERATURE EFFECT

Introduction

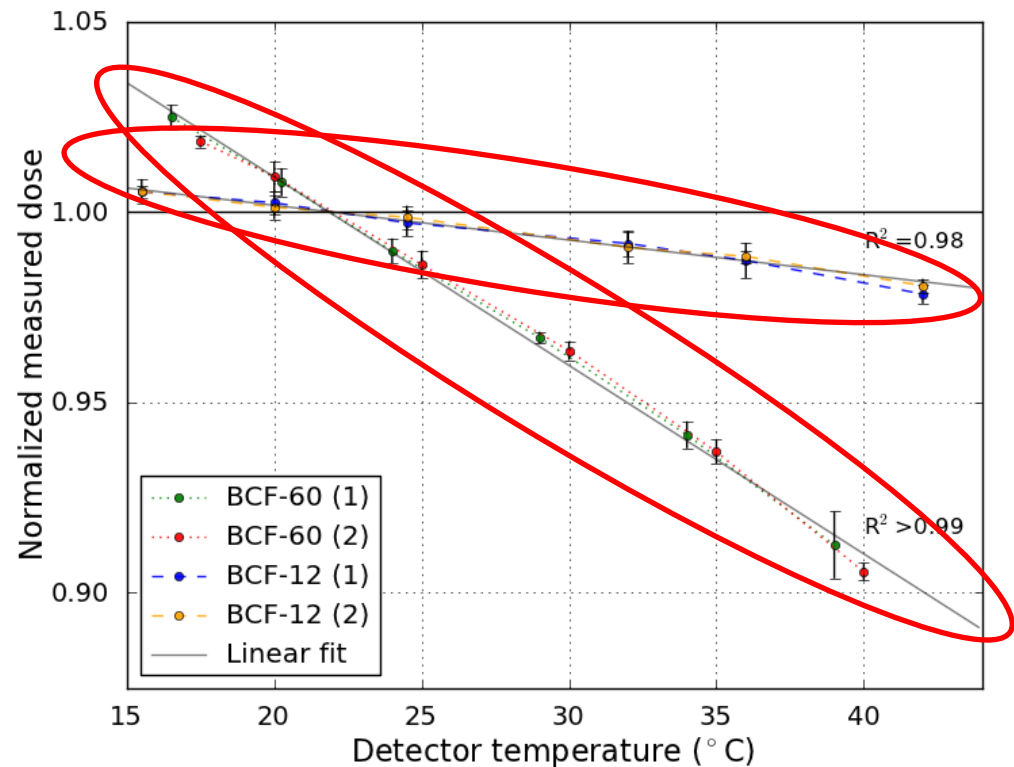
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- BCF-60 Exhibits Non-Negligible Temperature Dependence
 - 0.5% per °C relative to room temperature (22°C).
- BCF-12 Exhibits Smaller Temperature Dependence
 - 0.09% per °C.
- Independent detectors exhibit very similar responses.



Wootton L S, Beddar A S. **Temperature dependence of BCF plastic scintillation detectors.** *Phys Med Biol* 58: 2955-67, 2013.

See also: Buranurak S, Andersen CE, Beierholm AR. **Temperature variations as a source of uncertainty in medical fiber-coupled organic plastic scintillator dosimetry.** *Radiat Meas*, 2013.

SCINTILLATION PROCESS : REFERENCES

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- *JB Birks, The Theory and Practice of Scintillation Counting, Pergamon Press Book, MacMillan, New York, 1964. [Chapters 3 and 6]*
- *GF Knoll, Radiation Detection and Measurement, 3rd Edition, John Wiley and Sons, 2000. [Chapter 8]*
- *WR Leo, Techniques for Nuclear and Particle Physics Experiments, 2nd edition, Springer-Verlag, 1992. [Chapter 7]*
- *FH Attix, Introduction to Radiological Physics and Radiation Dosimetry, John Wiley and Sons, 1986. [Chapter 15]*

The Čerenkov Challenge

STEM EFFECT : ČERENKOV

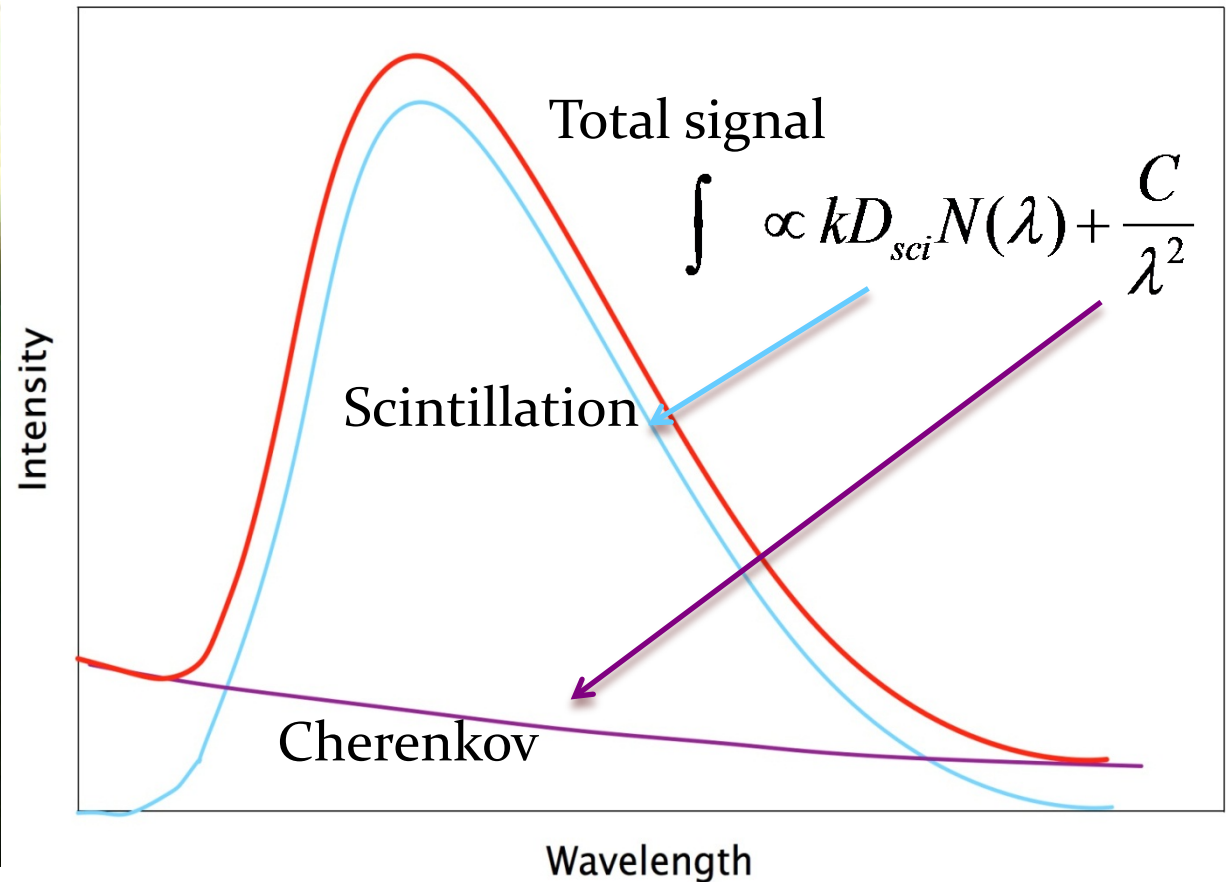
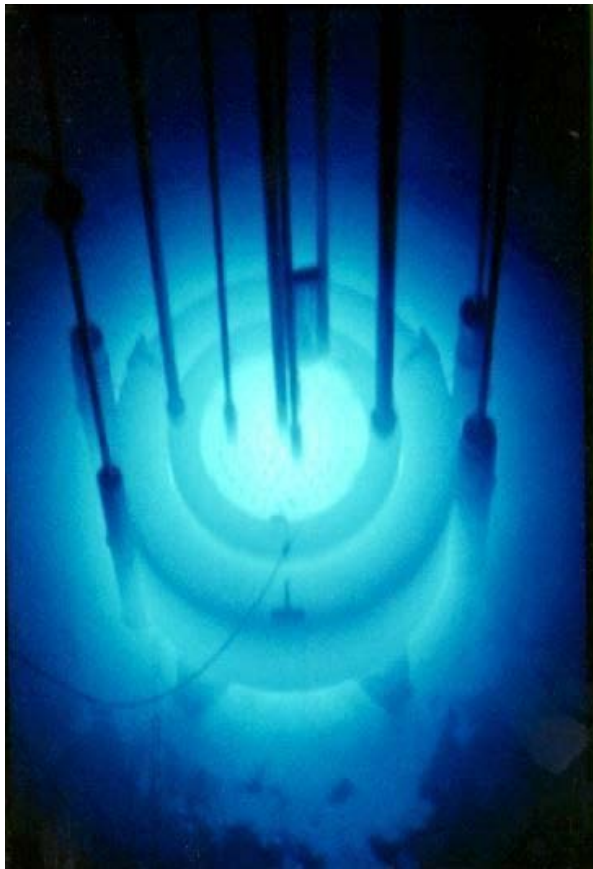
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STEM EFFECT : ČERENKOV

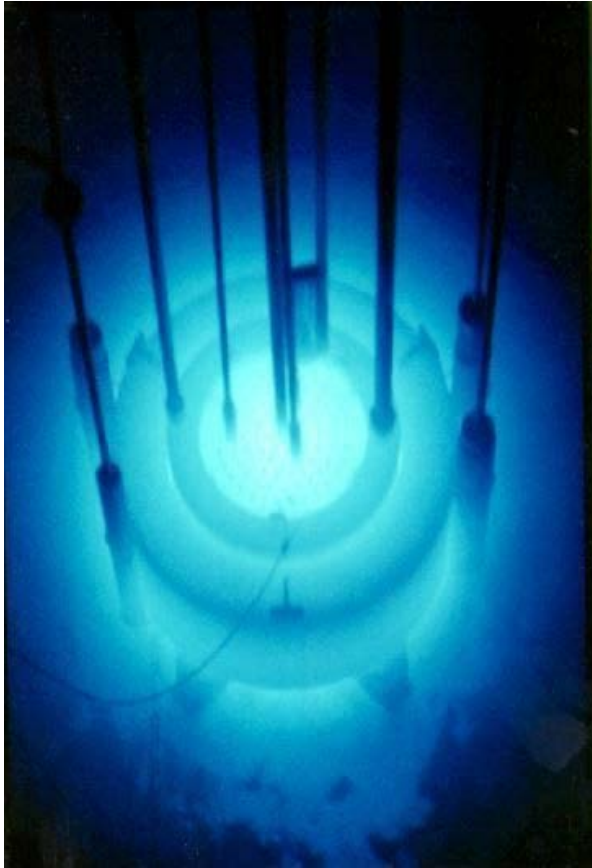
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1. Background fiber subtraction
2. Simple filtering
3. Timing (long decay time)
4. Chromatic removal
5. Hyperspectral decomposition
6. «Avoiding» Čerenkov generation

REMOVAL : THE TWO FIBERS METHOD

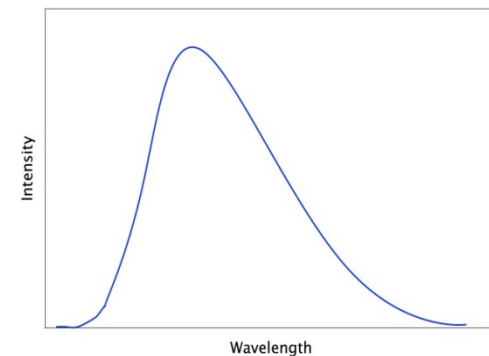
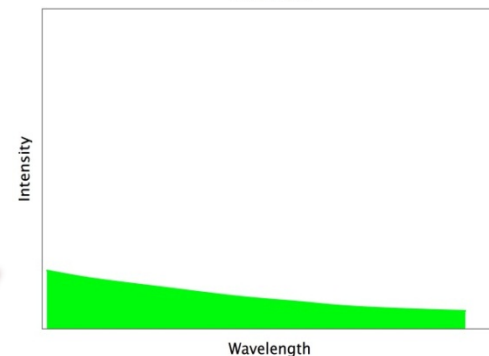
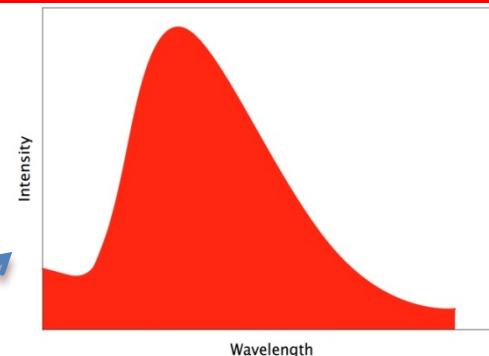
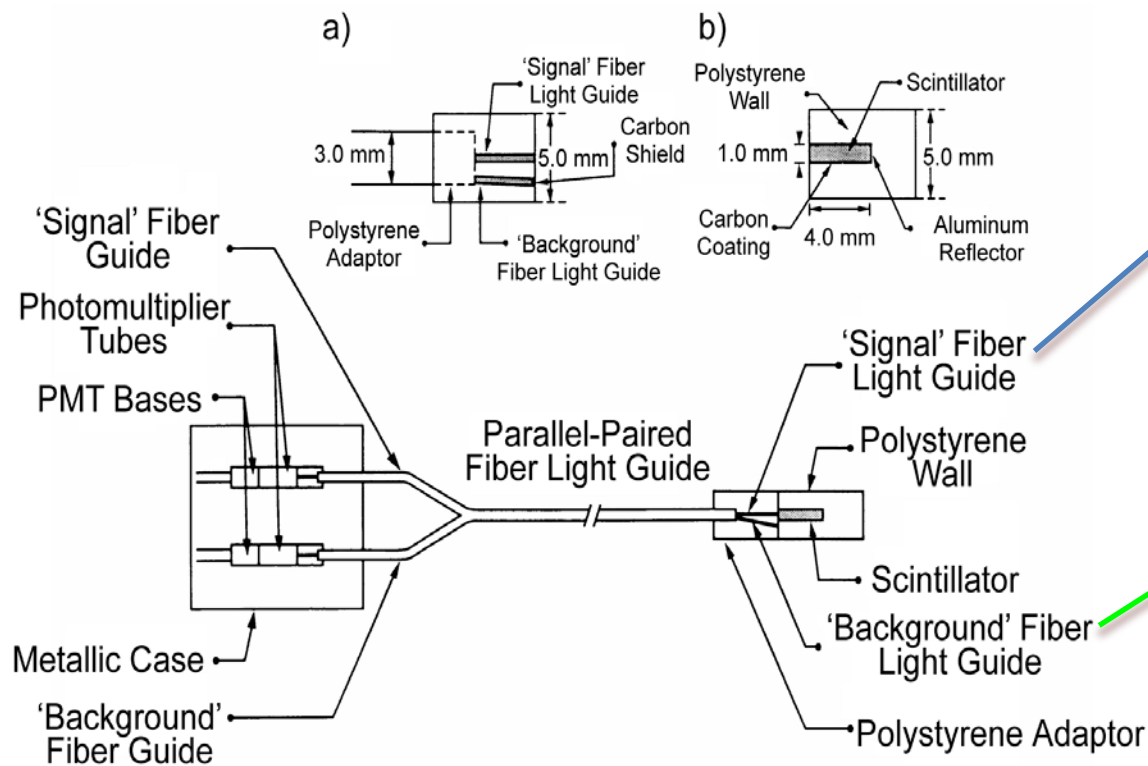
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Beddar A S *et al.* **Water-equivalent plastic scintillation detectors for high-energy beam dosimetry: I. Physical characteristics and theoretical considerations.** *Phys Med Biol* 37: 1883-1900, 1992;

Beddar A S *et al.* **Water-equivalent plastic scintillation detectors for high-energy beam dosimetry: II. Properties and measurements.** *Phys Med Biol* 37: 1901-1913, 1992.

REMOVAL : THE CHROMATIC METHOD

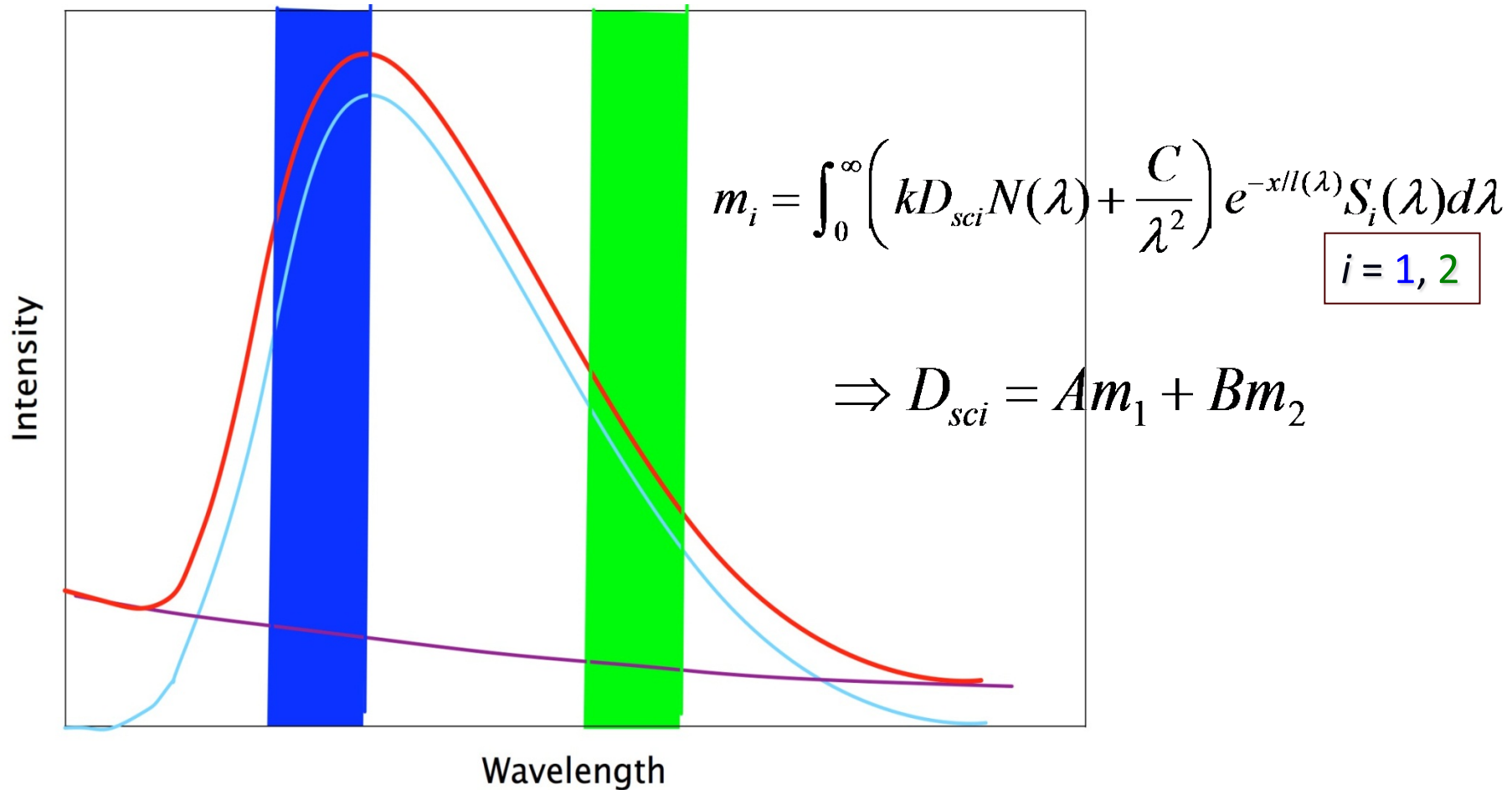
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Fontbonne *et al.* **Scintillating fiber dosimeter for radiation therapy accelerator.** *IEEE* 49(5): 223-2227, 2002.

Guillot M, Gingras L, Archambault L, Beddar S, Beaulieu L. **Spectral method for the correction of the Cerenkov light effect in plastic scintillation detectors: A comparison study of calibration procedures and validation in Cerenkov light-dominated situations.** *Med Phys* 38: 2140-2151, 2011.

ACCURATE PSD = OPTICAL CHAIN

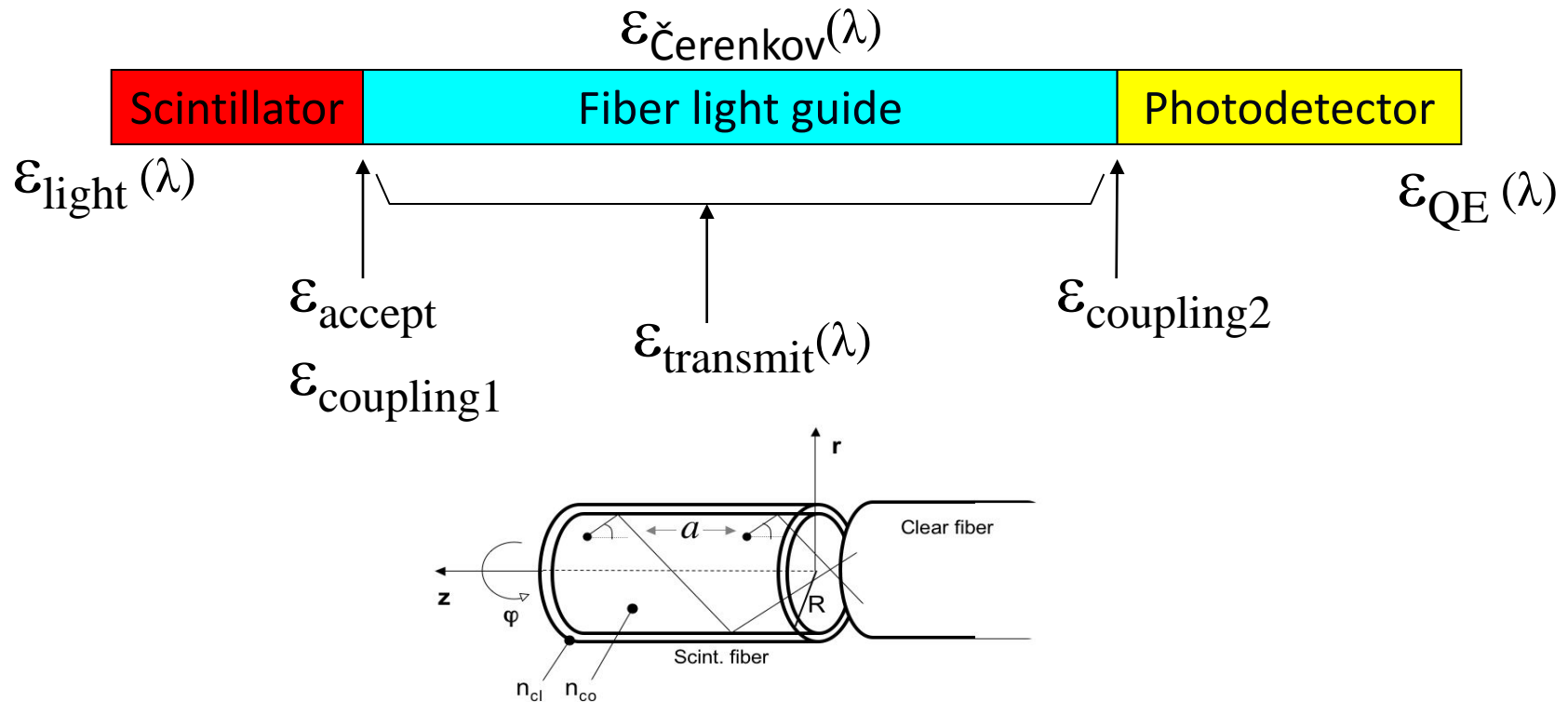
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Plastic scintillating fibers offer a good alternative to regular plastic scintillators:

- Increased light capture due to cladding (> internal reflection)
- The cladding is also water-equivalent/no perturbation

ADVANTAGES OF PLASTIC SCINTILLATORS

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- ✓ Linear response to dose
- ✓ Dose rate independence
- ✓ Energy independence
- ✓ Particle type independence for photons and electrons
- ✓ Insensitive to RF fields
- ✓ Real-time readout
- ✓ Spatial resolution

Quality Assurance

No time to go over all PSD-based devices proposed in the literature.

A recent review can be found here:

Beaulieu L, Goulet M, Archambault L, Beddar S. **Current status of scintillation dosimetry for megavoltage beams.** *J Phys : Conf Ser* 444, 012013, 2013.

EXRADIN W1 SCINTILLATOR

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- Detector:
 - $< 2.3 \text{ mm}^3$ sensitive volume (1)
 - Clear optical fiber for transport (2)
- Photodetector (3)
 - Two channels
 - Chromatic stem effect removal
 - Stay in the vault, but shielded
- Two channels electrometer with dedicated software (4)



CALIBRATION PROCESS

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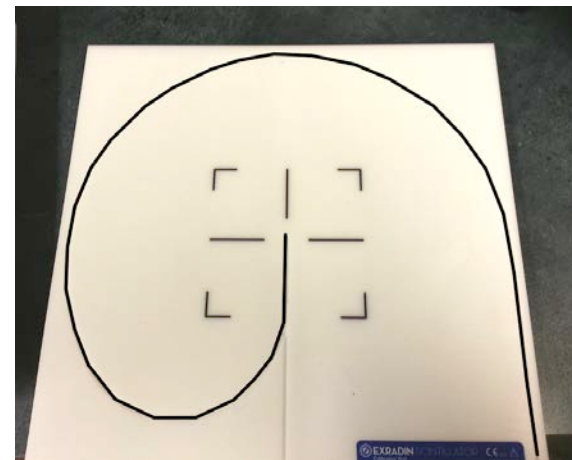
- Irradiation by a known dose
- Vary the amount optical fiber



Fiber in minimum position



Fiber in maximum position



Guillot M, Gingras L, Archambault L, Beddar S, Beaulieu L. **Spectral method for the correction of the Cerenkov light effect in plastic scintillation detectors: A comparison study of calibration procedures and validation in Cerenkov light-dominated situations.** *Med Phys* 38: 2140–2150, 2011.

BASIC MEASUREMENTS : γ & e- PDDS

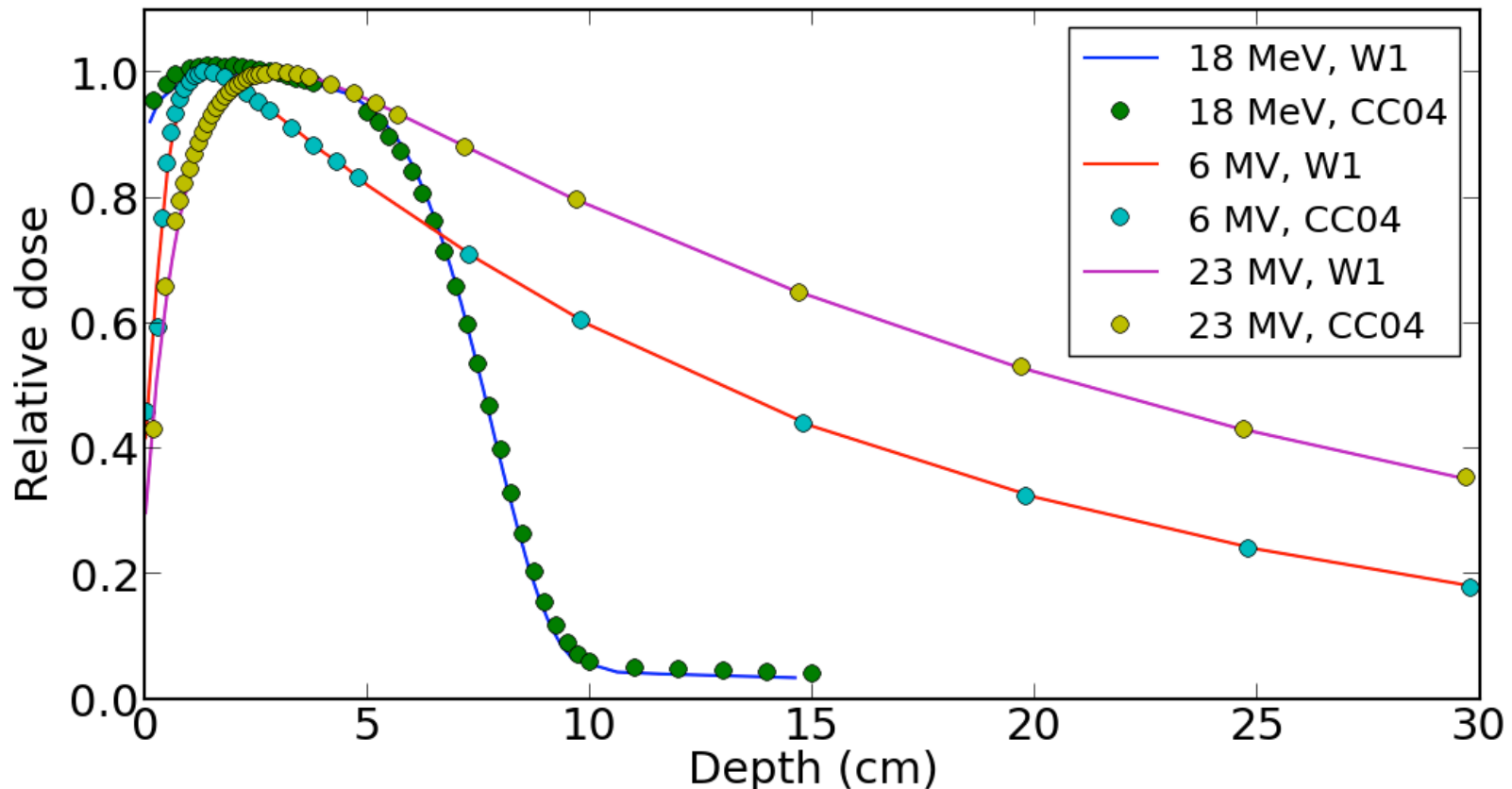
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Lacroix F, Guillot M, McEwen M, Cojocaru C, Gingras L, Beddar AS, Beaulieu L. **Extraction of depth-dependent perturbation factors for parallel-plate chambers in electron beams using plastic scintillation detector.** *Med Phys* 37(8):4331-4342, 2010

BASIC MEASUREMENTS : PROFILES

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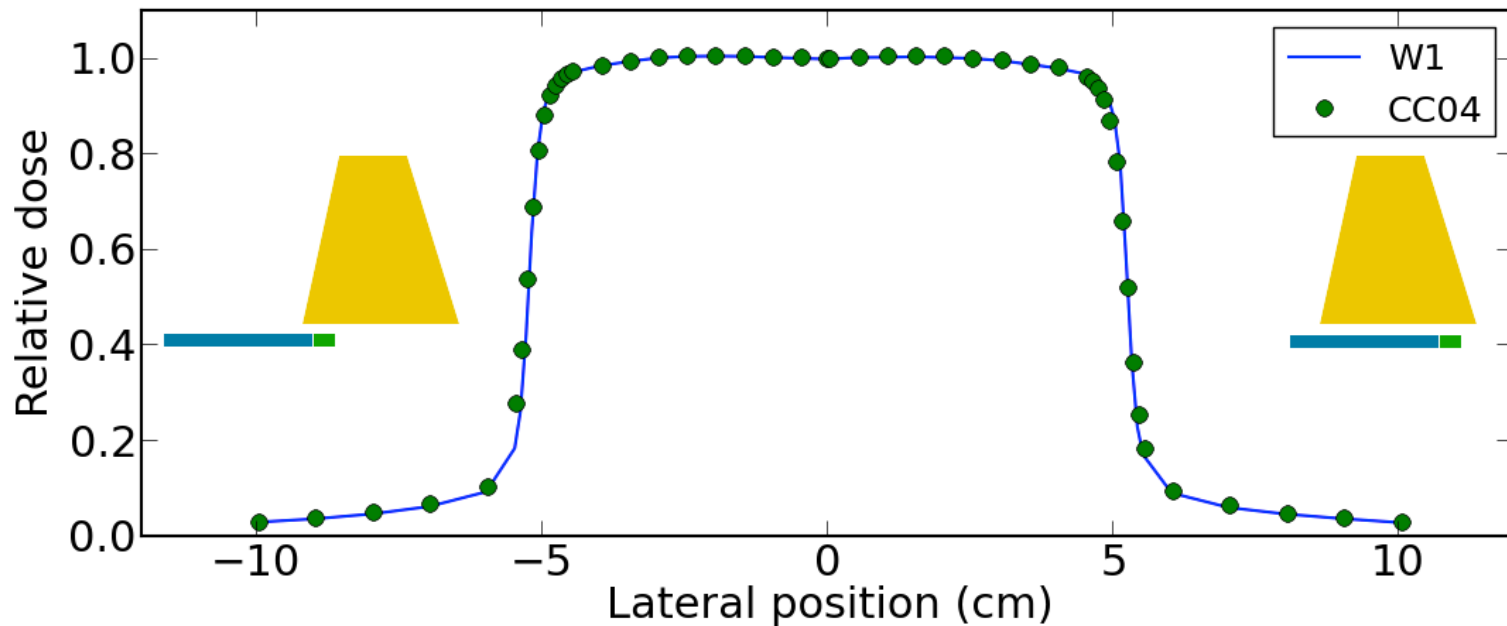
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- No residual stem effect



Small Field Dosimetry

SMALL FIELDS AND RADIOSURGERY

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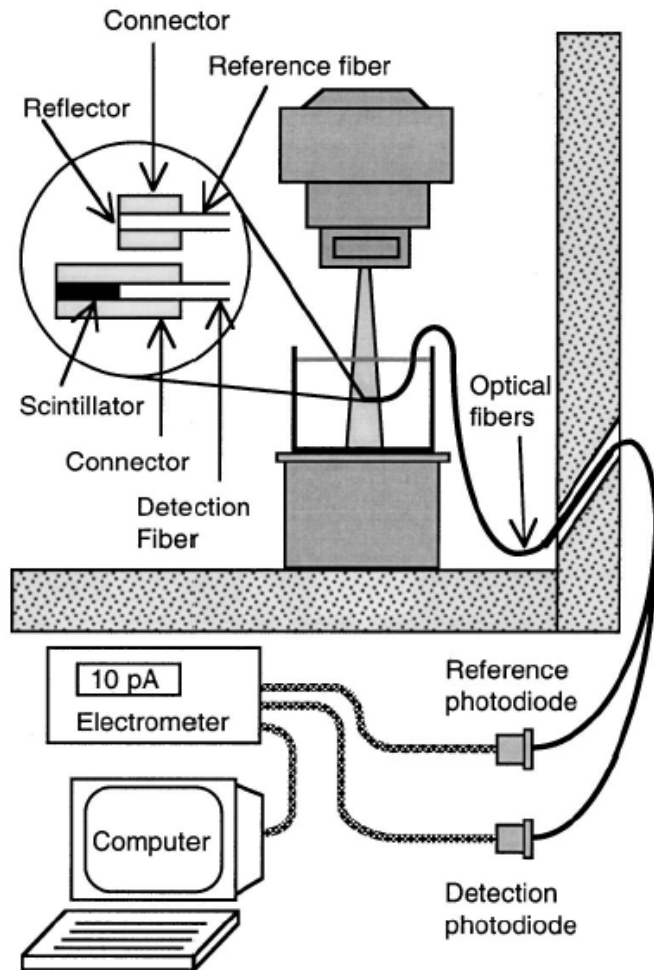


FIG. 1. The miniature scintillating detector in a treatment room.

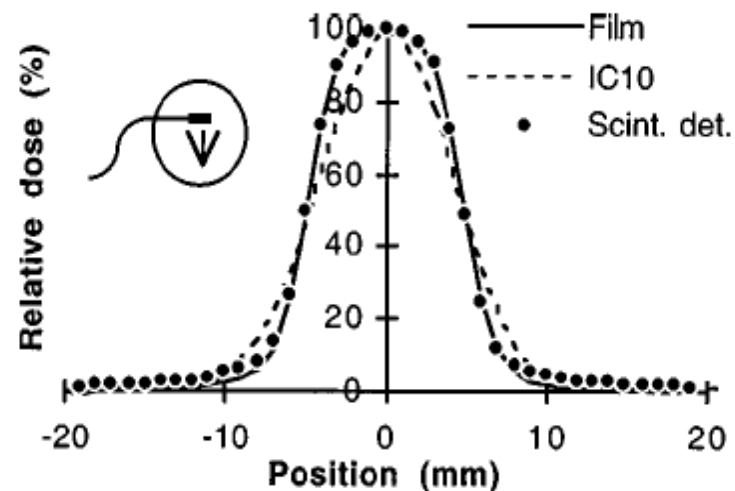
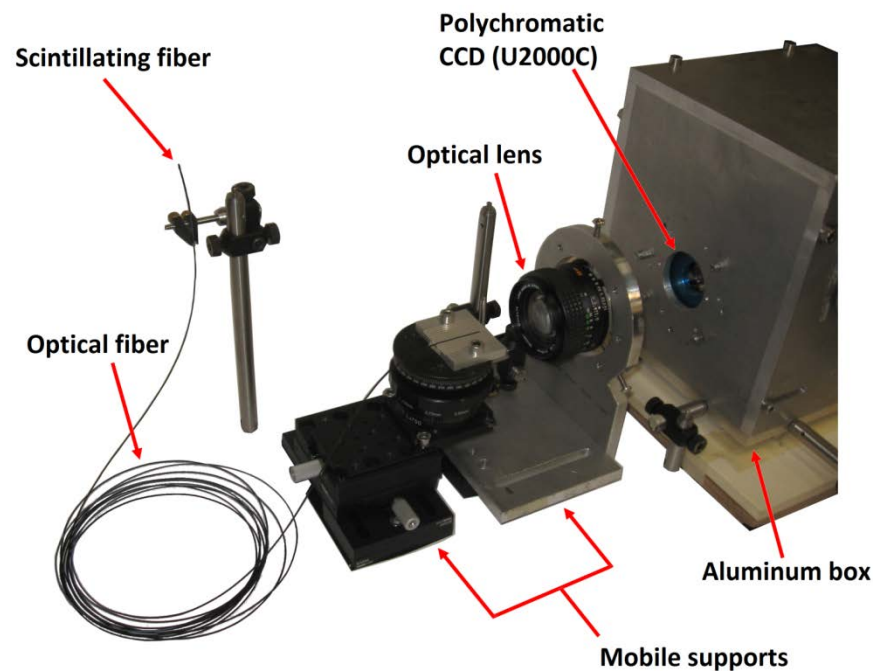


FIG. 9. Axial profiles of a 1 cm diam 6 MV photon beam measured with a ion chamber IC10, a film, and the scintillating detector.

Letourneau *et al.* **Miniature scintillating detector for small field radiation therapy.** *Med Phys* 26: 2555-2561, 1999.

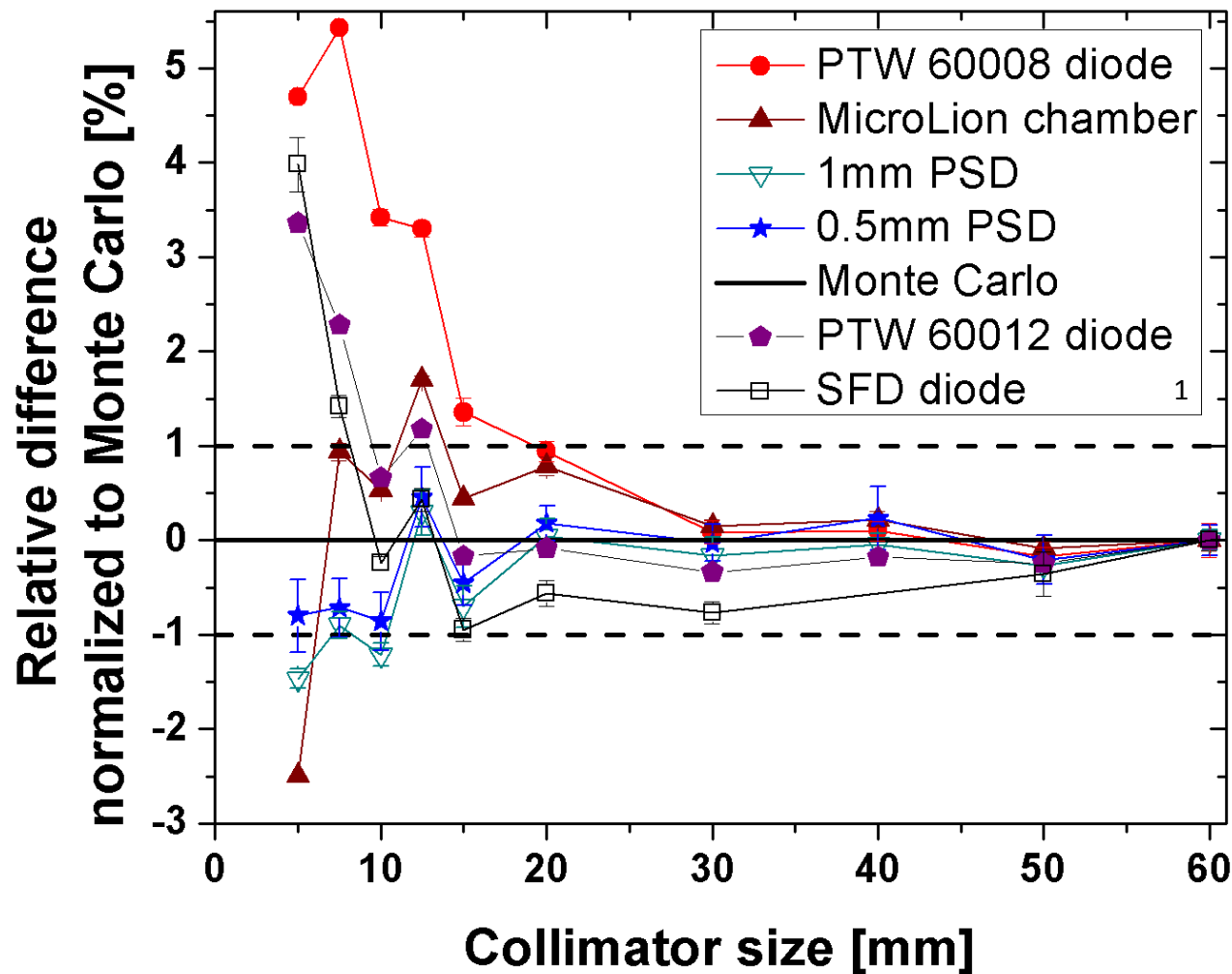
SMALL FIELD : LAB PSD SYSTEM

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- Collimator used: 5, 7.5, 10, 12.5, 15, 20, 30, 40, 50, 60 mm
- Stem parallel to the beam axis with all detectors

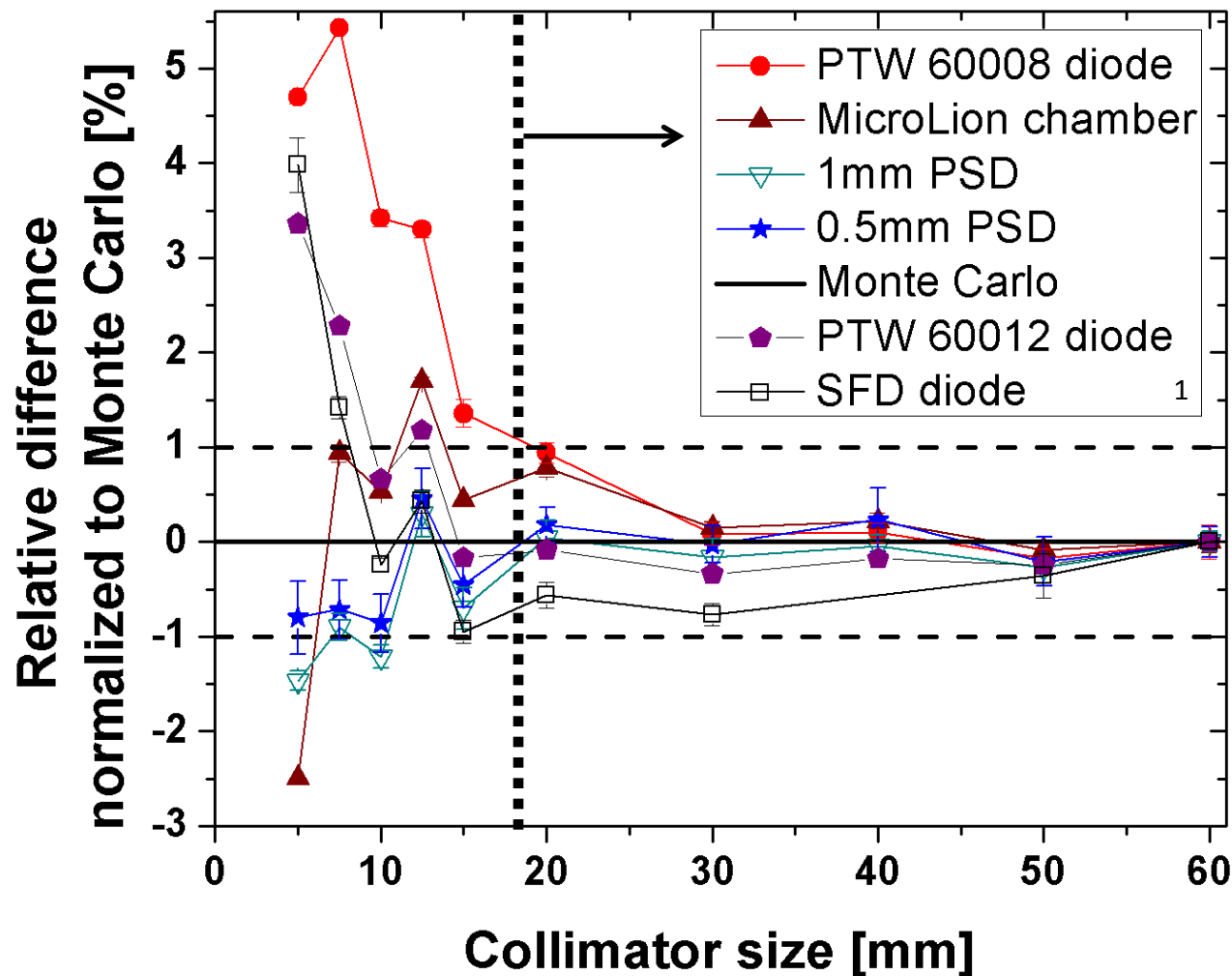
TOTAL SCATTER FACTORS



¹ Araki, Med. Phys.
33 (2006)

Morin J, Beliveau-Nadeau D, Chung E, Seuntjens J, Theriault D, Archambault L, Beddar S, Beaulieu L. **A comparative study of small field total scatter factors and dose profiles using plastic scintillation detectors and other stereotactic dosimeters: the case of the Cyberknife.** *Med Phys* 40(1): 011719, 2013.

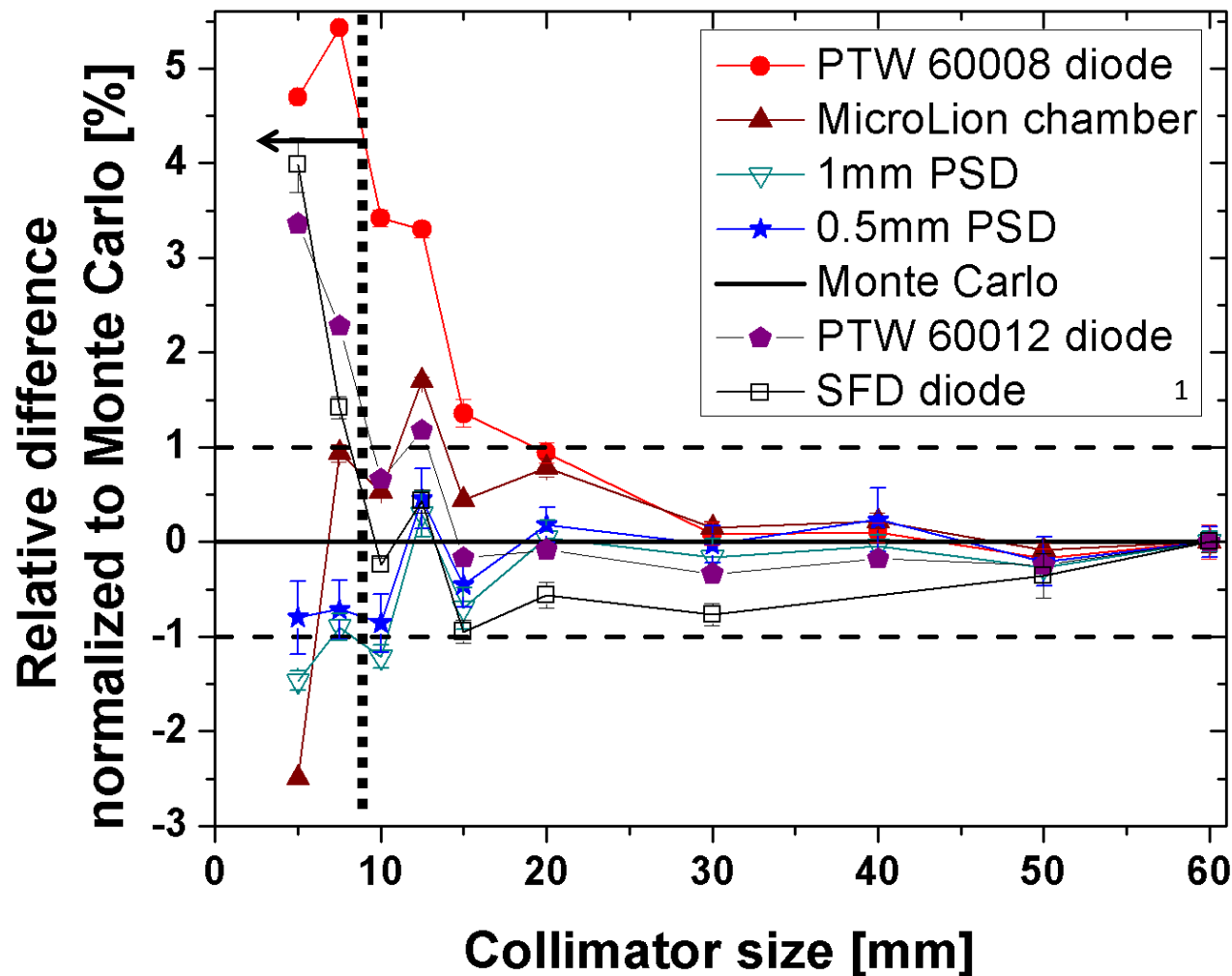
TOTAL SCATTER FACTORS



¹ Araki, Med. Phys.
33 (2006)

Morin J, Beliveau-Nadeau D, Chung E, Seuntjens J, Theriault D, Archambault L, Beddar S, Beaulieu L. **A comparative study of small field total scatter factors and dose profiles using plastic scintillation detectors and other stereotactic dosimeters: the case of the Cyberknife.** *Med Phys* 40(1): 011719, 2013.

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TOTAL SCATTER FACTORS

Detectors	Collimator diameter [mm]	Correction factors	Literature	Difference [%]
PTW 60008 diode	5	0.950	0.944 ¹	0.6
	7.5	0.942	0.951 ¹	0.9
PTW 60012 diode	5	0.963	0.957 ²	-0.6
	7.5	0.971	0.967 ²	-0.4
SFD diode	5	0.957	0.952 ³	-0.5
	7.5	0.980	0.976 ³	-0.4
MicroLion chamber	5	1.020	1.023 ⁴	0.3
	7.5	0.984	0.997 ⁴	1.3

¹Francescon *et al.* J Appl Clin Med Phys **10** (2009)

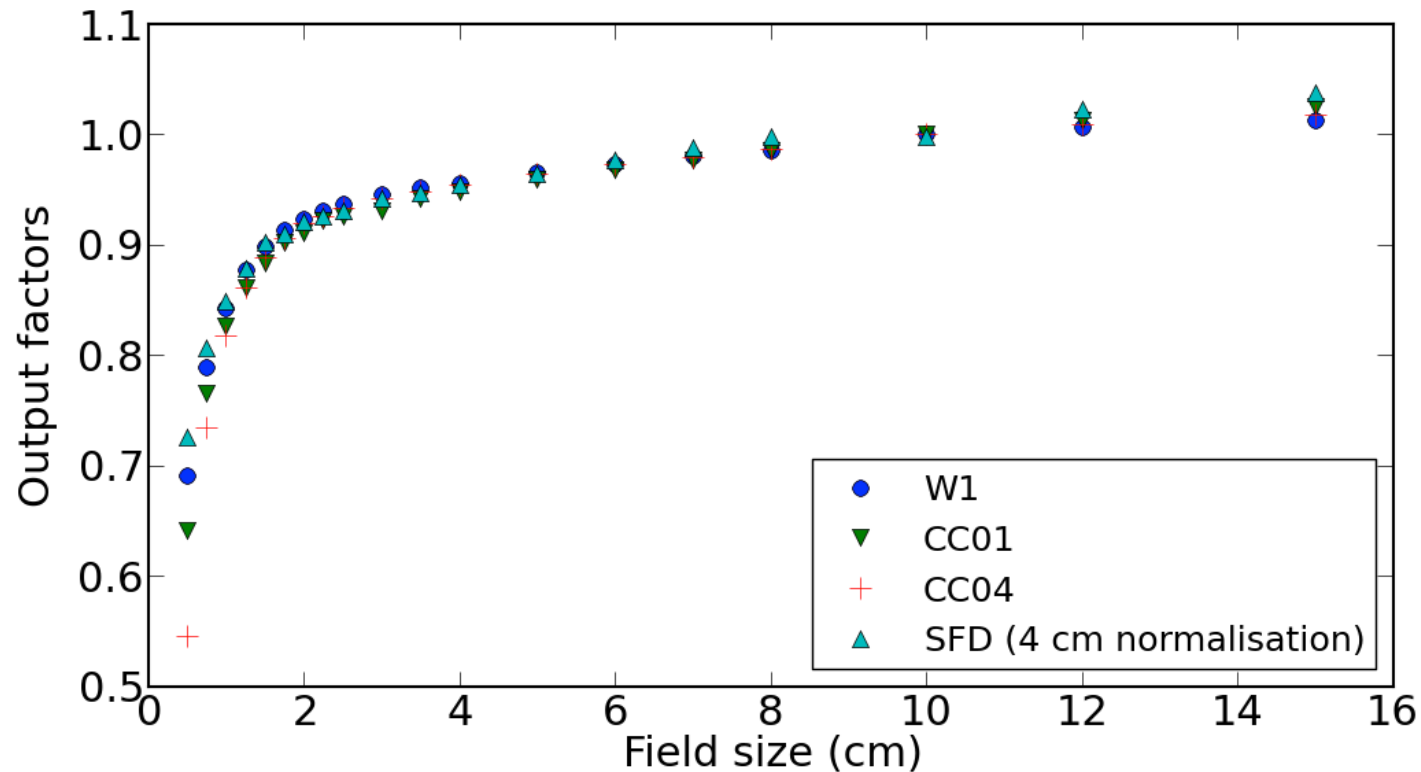
²Francescon *et al.* Med Phys **35** (2008)

³Araki. Med Phys **33** (2006)

⁴Francescon *et al.* Med Phys **38** (2011)

SBRT COMMISSIONING : EXTRADIN W1

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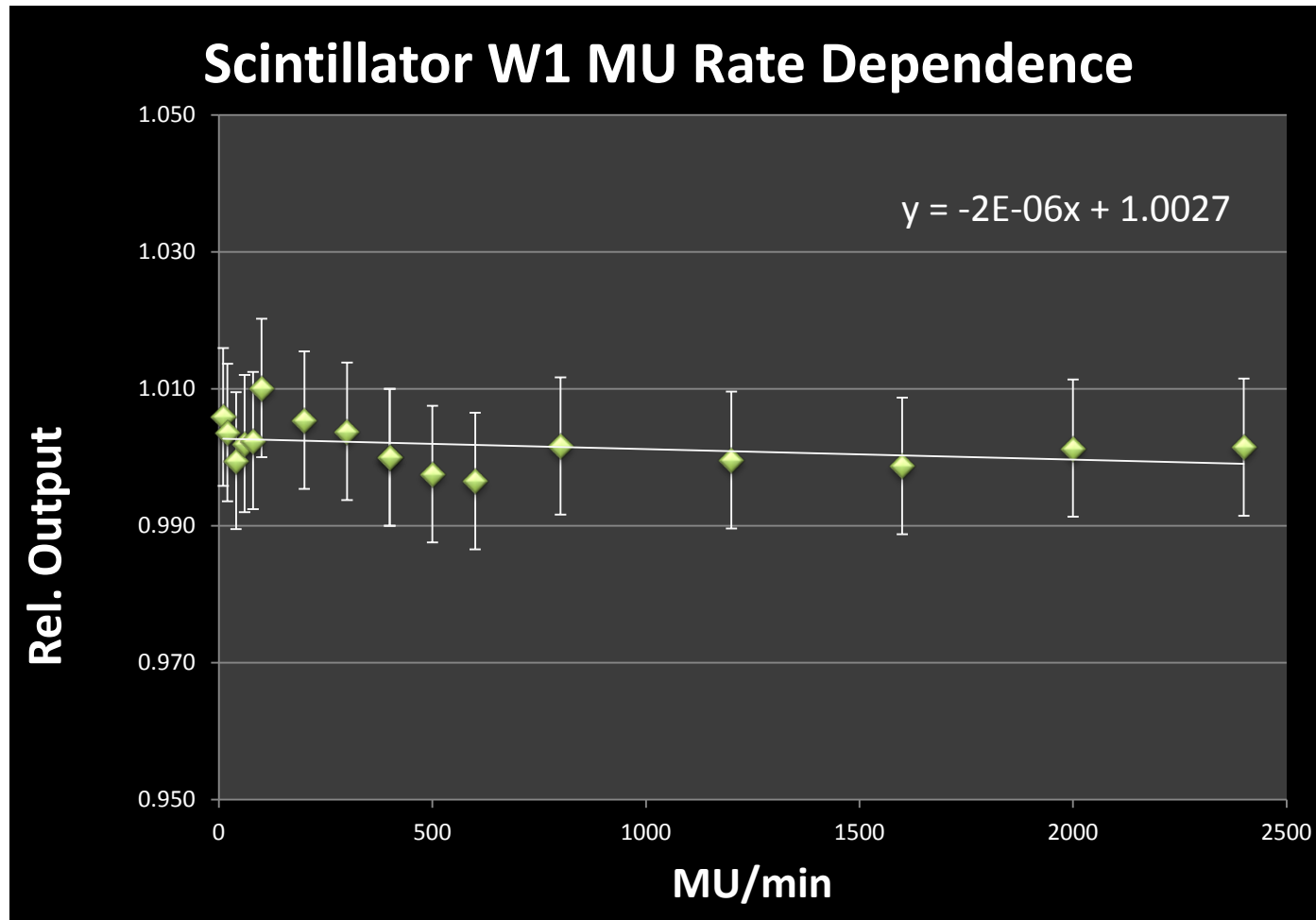
– Same conclusion as with the laboratory system!

DOSE RATE INDEPENDENCE

- High dose rate delivery: > 2000 MU/min ?
- How do Ion Chambers fit in?
 - P_{ion} is affected by dose rate
- Comparison to the Exradin W1 PSD

DOSE RATE INDEPENDENCE : FFF BEAMS

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DOSE RATE INDEPENDENCE

- Calibrate and measure at different dose rates
 - High dose rate: 6MV, SRS mode, short (60 cm) SSD
 ≈ 2700 MU/min

Detectors	Dose ratio (% diff)	Corrected dose ratio
A12 / W1	0.989 (1.1%)	0.998 (0.2%)
CC13 / W1	0.991 (0.9%)	1.005 (0.5%)
IBA SFD / W1	0.943 (5.7%)	N/A

- Even worse in electrons : 6.3% correction needed!

DOSE RATE INDEPENDENCE

- Ion chambers affected by changes in P_{ion}
 - Fully corrected by measuring P_{ion} at a given dose rate
 - W1 PSD is independent of dose rate at least up to 2700MU/min (max. tested!)

In Vivo Dosimetry

- Advantages of internal *in-vivo* dosimetry:
 - Point of measurement can be placed directly adjacent to organ at risk or within treatment volume.
- Direct verification of treatment.
- Detect adverse events or treatment variances, potentially stop treatment and re-assess.
- Clinical validation to monitor patient treatment delivery is underway.

- 2 recent Vision 20/20 papers in Medical Physics

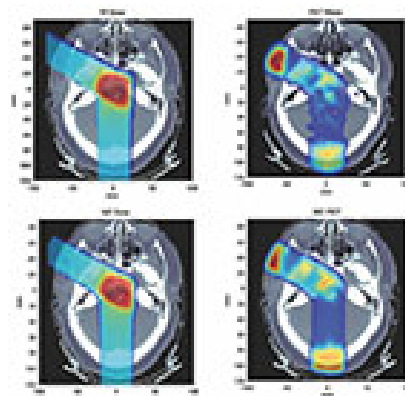
Editor's Picks



***In vivo* dosimetry in brachytherapy**

Kari Tanderup, Sam Beddar, Claus E. Andersen, Gustavo Kertzscher, and Joanna E. Cygler

Med. Phys. 40, 070902 (2013)



***In vivo* dosimetry in external beam radiotherapy**

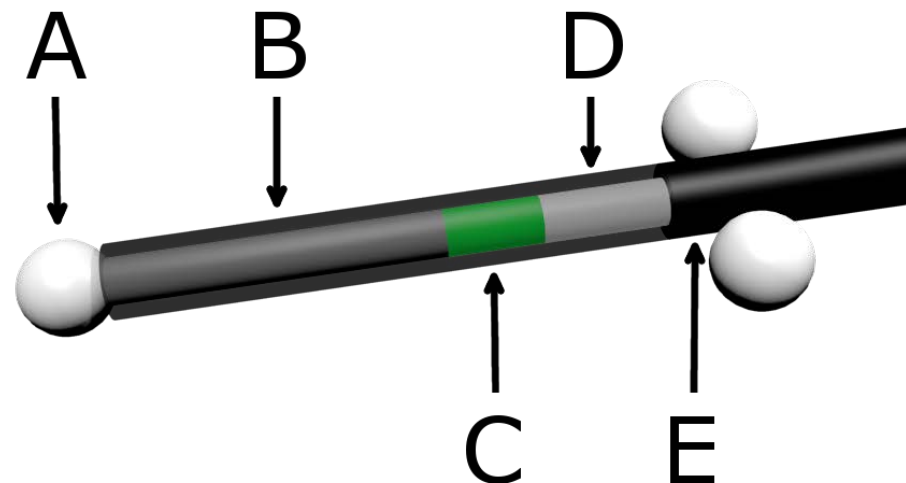
Ben Mijnheer, Sam Beddar, Joanna Izewska, and Chester Reft

Med. Phys. 40, 070903 (2013)

SYSTEM DESIGN

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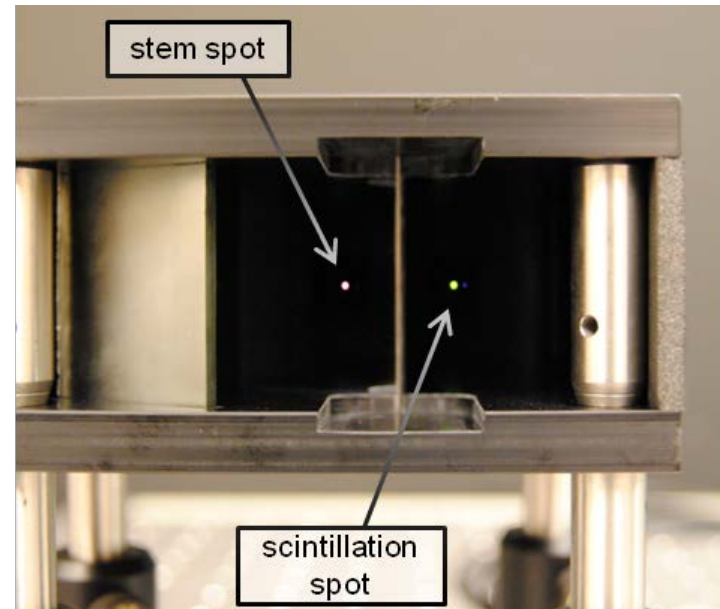
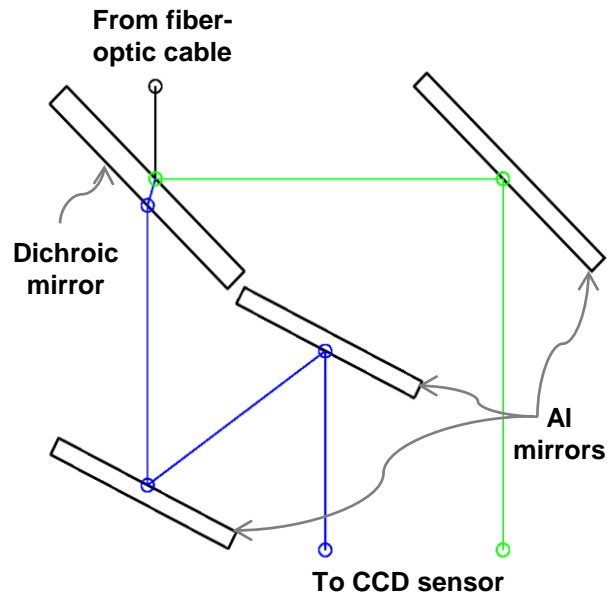
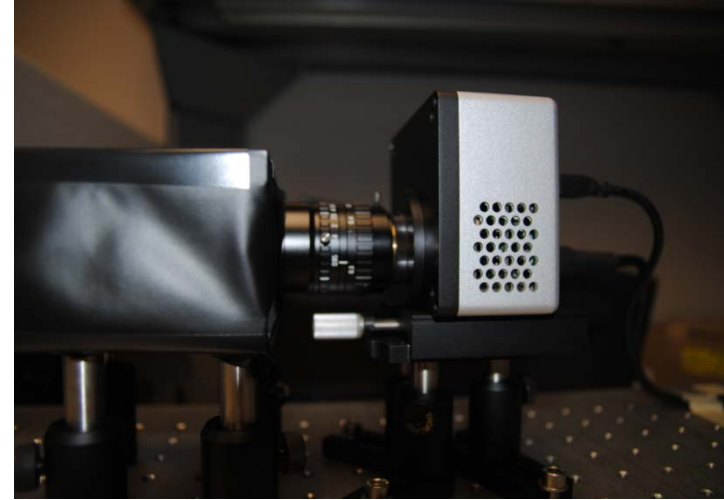
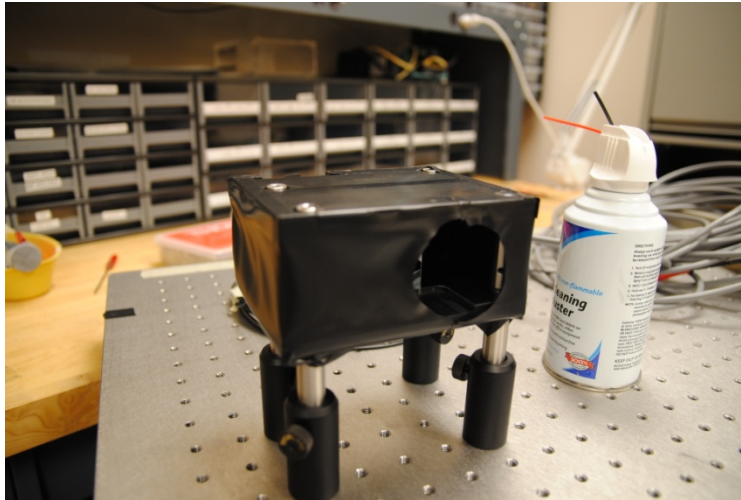
- BCF-60 Scintillating Fiber optically coupled to clear plastic optical fiber with cyanoacrylate.
- Fiducials used as surrogate to localize scintillating fiber.
 - All fibers are water-equivalent
- Light transmitted by clear optical fiber and captured by a CCD camera.



A – Ceramic fiducials
B – Carbon spacer
C – Scintillating fiber
D – Optical fiber
E – Polyethylene jacketing

SYSTEM DESIGN – DICHOIC MIRROR

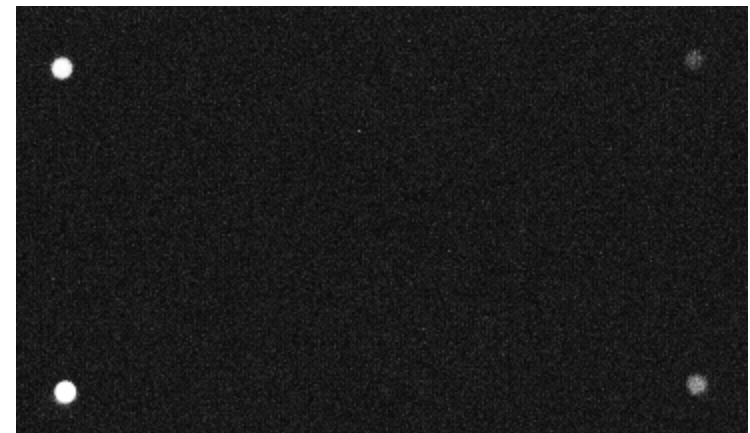
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SYSTEM DESIGN – PHOTODETECTOR

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- Andor Luca S CCD Camera
 - Captures light output from scintillator.
 - Intensity measured by summing pixel values in region of interest (ROI).
 - Black box shields from the ambient light.



PROTOCOL DESIGN

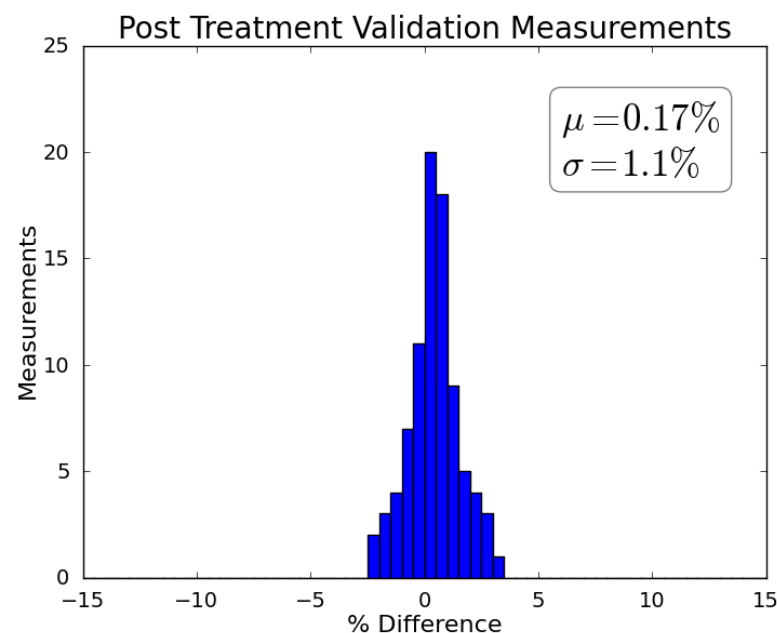
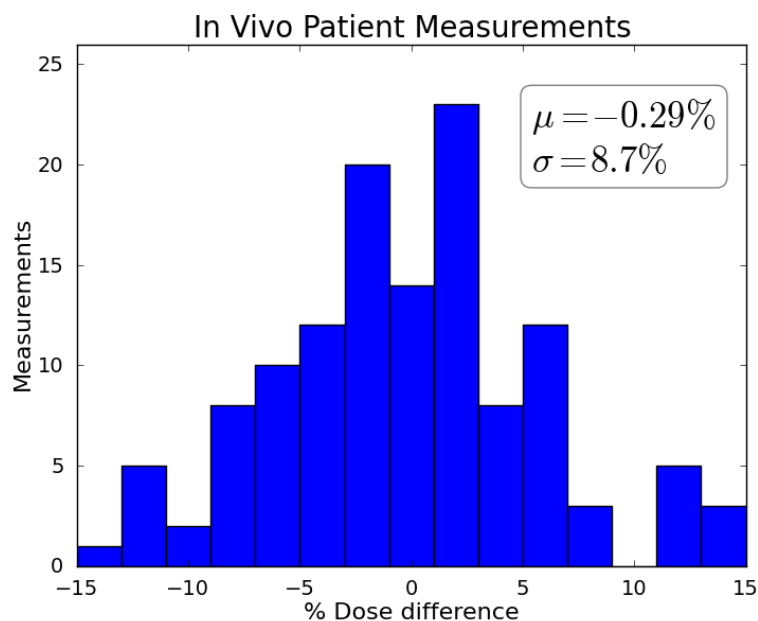
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- IRB approved protocol for Prostate cancer patients
 - PSDs can be attached to rectal balloon used for immobilization
- *In-vivo* measurements during two fractions each week (Tue, Thu)
- Set of PSDs fabricated for each patient
 - Latex sheath insulated PSDs to facilitate re-use for same patient



- Daily CT for *in-vivo* fractions
 - Necessary to localize detectors
- Simple validation of PSDs performed after each treatment
 - 200 cGy delivered in simple, static, fixed geometry
 - Deviations $> 2\%$ are considered indicative of loss of proper function
 - Non-functioning detectors re-calibrated or discarded and re-fabrication of new detectors
- 5 Patients enrolled (142 total measurements).
 - Only 5 thrown out due to problems with software (2) or detectors' malfunction (3).

MEASUREMENT RESULTS



- Histogram of differences between measured and calculated doses.
- Differences centered around zero: no systematic error.



MEASUREMENT RESULTS

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Patient	Measurements	Average Difference [95% Confidence Interval]*	Standard Deviation	Validation
1	30	-2.6% [-4.7%, -0.4%]	5.5%	-0.1%
2	28	-1.1% [-3.8%, +1.6%]	7.0%	0.5%
3	30	1.5% [-1.0%, +4.0%]	6.6%	0.3%
4	28	3.2% [-2.2%, 8.6%]	13.9%	0.5%
5	21	-3.3% [-6.3%, -0.3%]	6.5%	-0.5%

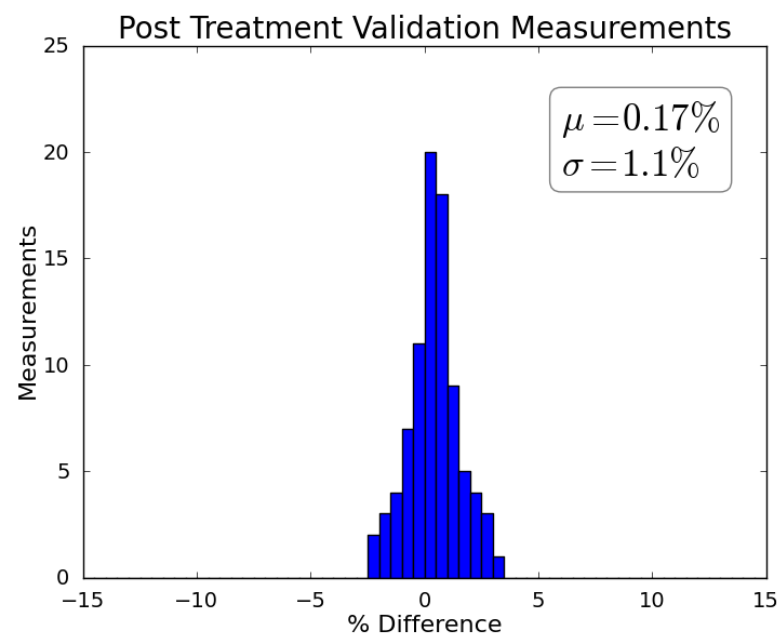
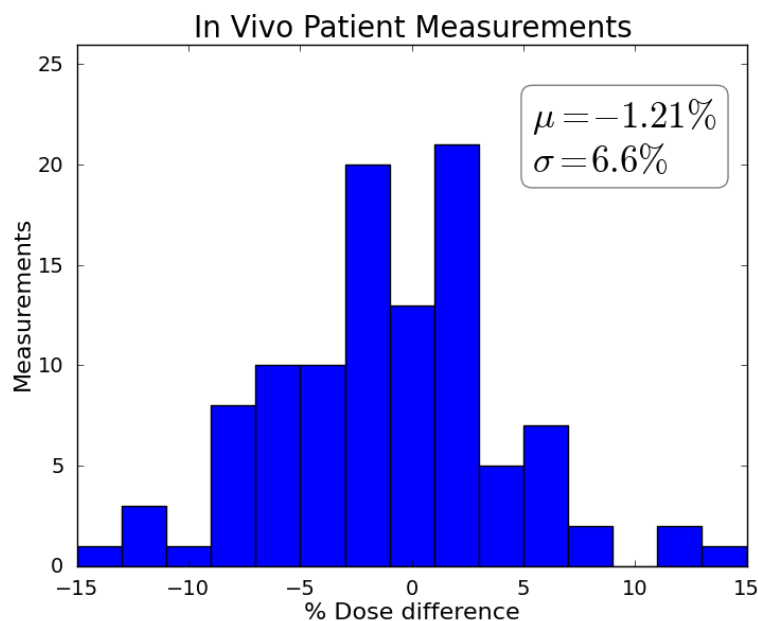
Metric	Aggregate Analysis
Average of Means	-0.5% [-4.0%, +3.0%]
Standard Deviation of Means	2.8%
Measurements within $\pm 10\%$	82% (90% w/out Pt. 4)

$$1\text{Sigma: } \sqrt{\left(\frac{1}{N-1} \sum (x - \bar{x})^2\right)}$$

$$\text{Confidence Interval of the Mean: } \bar{x} \pm \frac{1.96\sigma}{\sqrt{N}}$$

*Calculated using student t distribution with N-1 degrees of freedom.

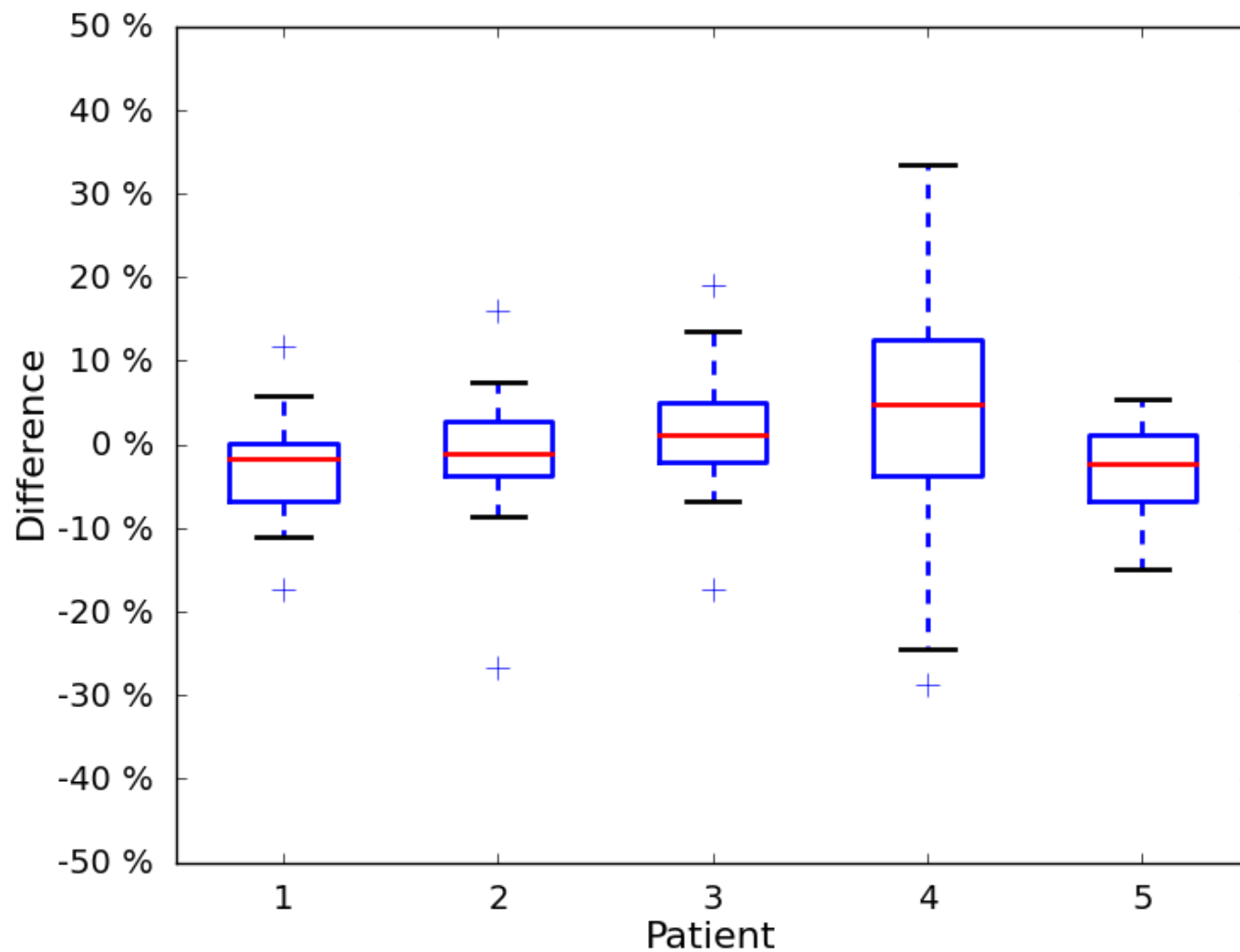
MEASUREMENT RESULTS



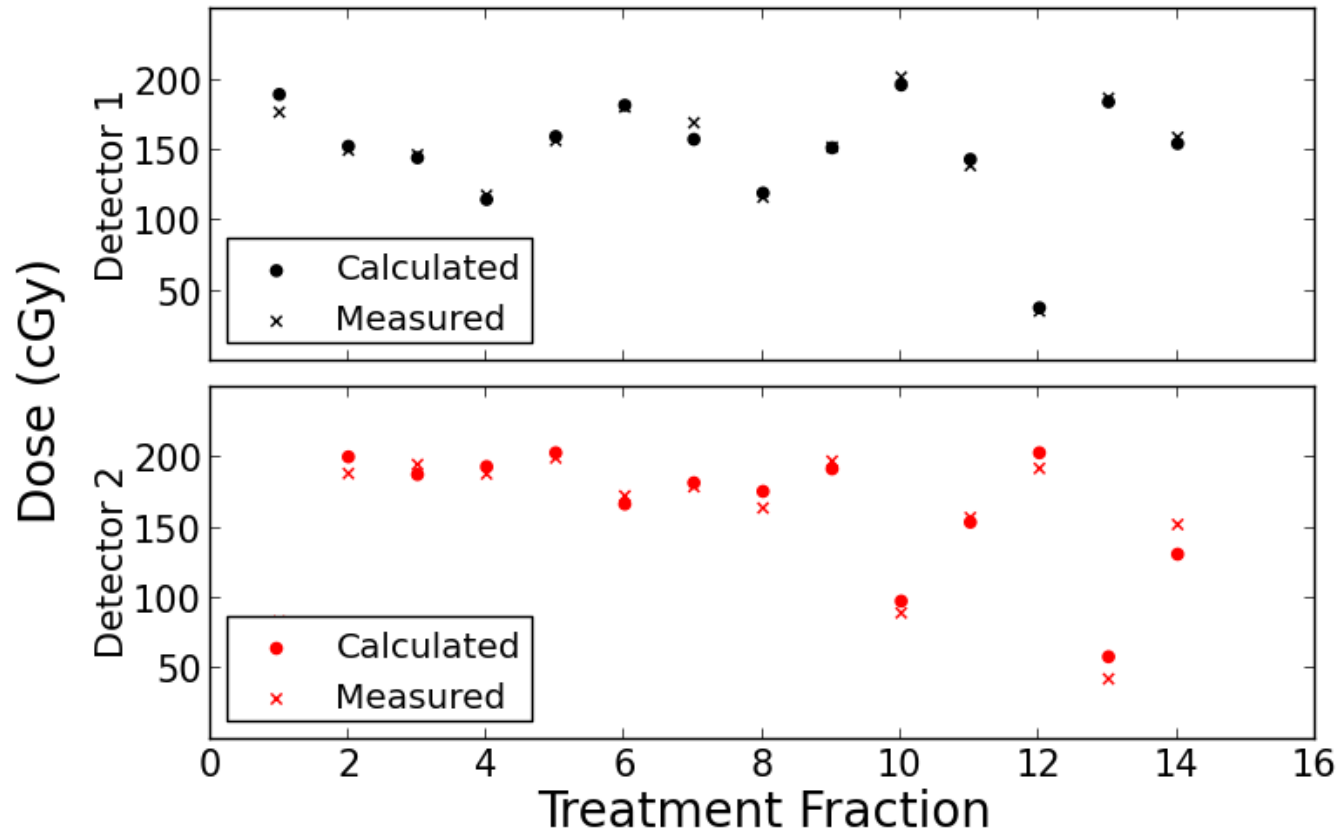
- Histogram of differences between measured and calculated doses.
- Differences centered around zero: no systematic error.

MEASUREMENT RESULTS

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MEASUREMENT RESULTS

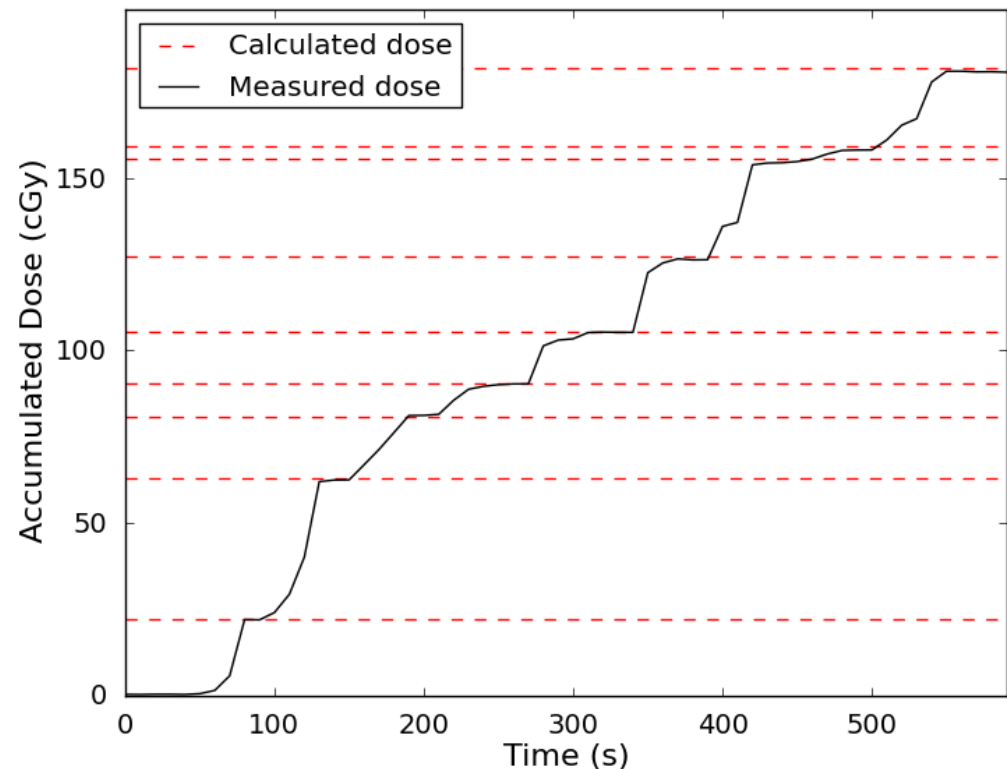


Day to day agreement between detectors and TPS throughout a sample patient treatment (patient #2, $\sigma = 7\%$).



MEASUREMENT RESULTS

- Demonstration of achievable real-time accuracy.
- Solid line: measured dose in real-time.
- Dashed lines: indicate the cumulative dose calculated after each beam/segments delivery by the TPS.
- Plateaus in measured dose indicate beam-off. (Should coincide with the dashed lines)



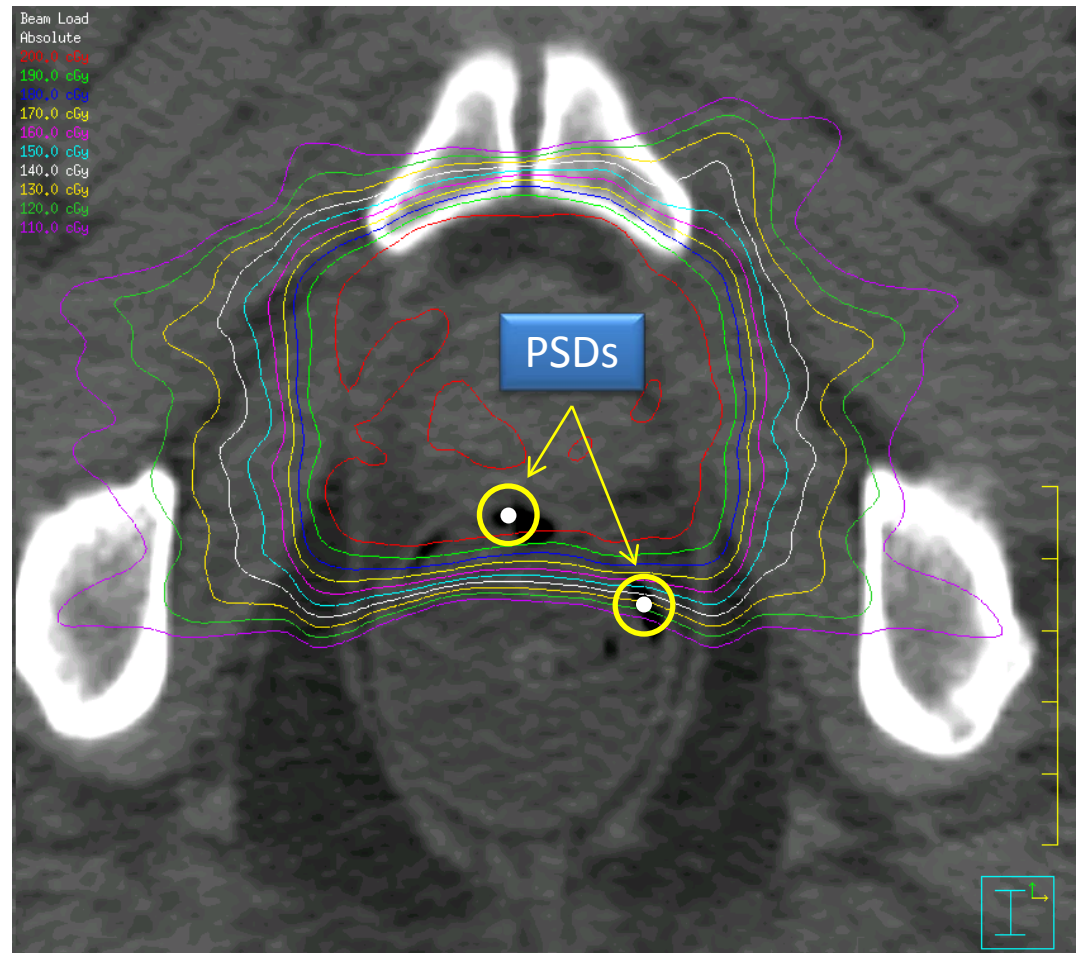
MEASUREMENT RESULTS

- Additionally, detectors were well tolerated by patients.
 - 4/5 did not notice a difference between balloons with and without detectors.
 - 1 could tell a difference but said it was tolerable.
- Treatment workflow was not compromised by the adaptation of the in-vivo dosimetry system and the detector placement within the patient.
 - Clinical implementation is feasible and should be non-disruptive to the daily treatment workflow.



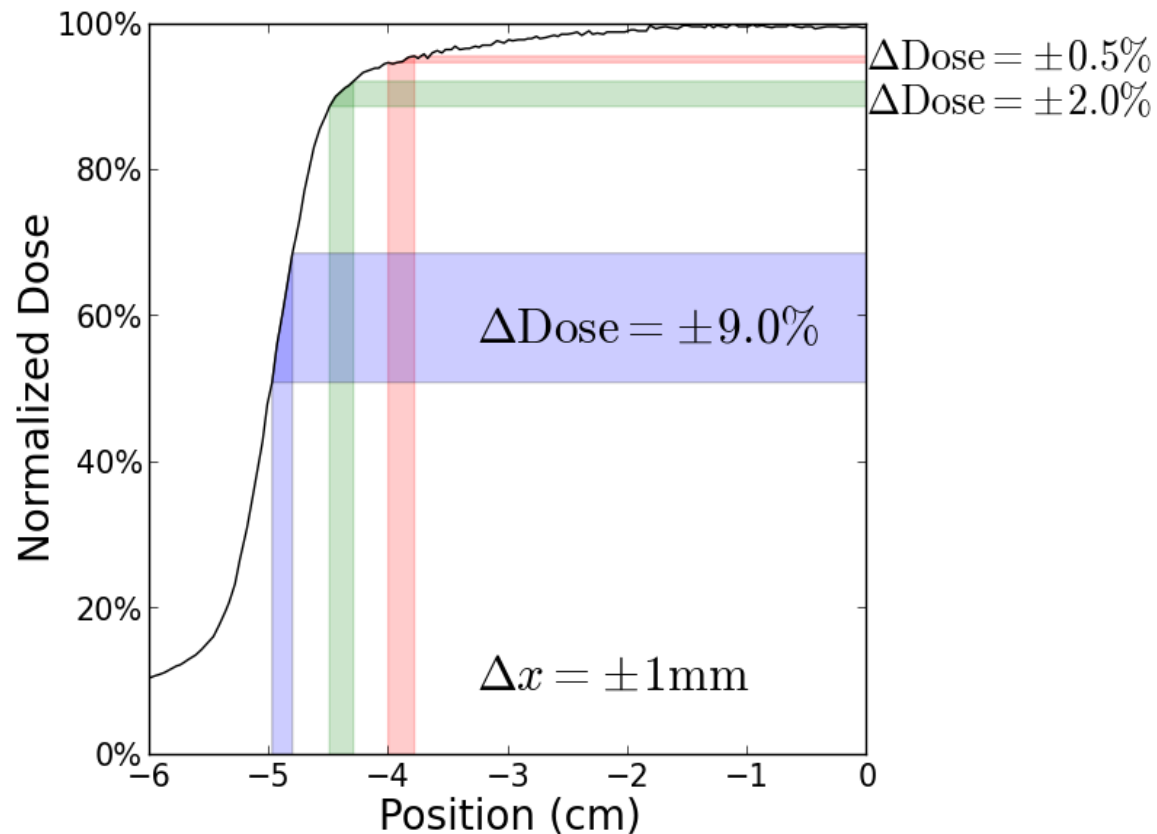
DISCUSSION

- Ideally detectors are positioned anteriorly.
 - Homogeneous and larger doses.
- Balloon is occasionally rotated, positioning detectors laterally in rectum.
 - High dose gradient.
 - Smaller doses.



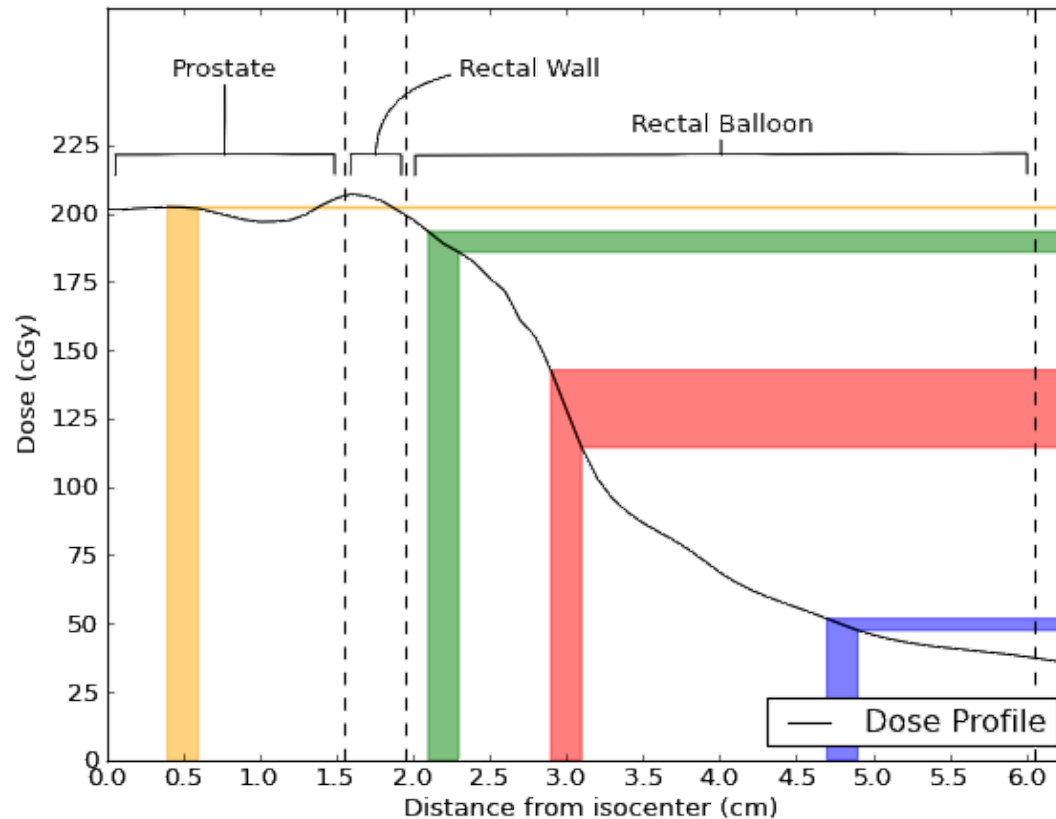
DISCUSSION

- The effect of positional uncertainty on expected dose uncertainty depends greatly on magnitude of the dose gradient.
- Shallow gradient diminishes the effect of positional uncertainty.
- Steep high dose gradient exacerbates the effect of positional uncertainty.



DISCUSSION

Patient dose profile taken from isocenter to posterior rectum.



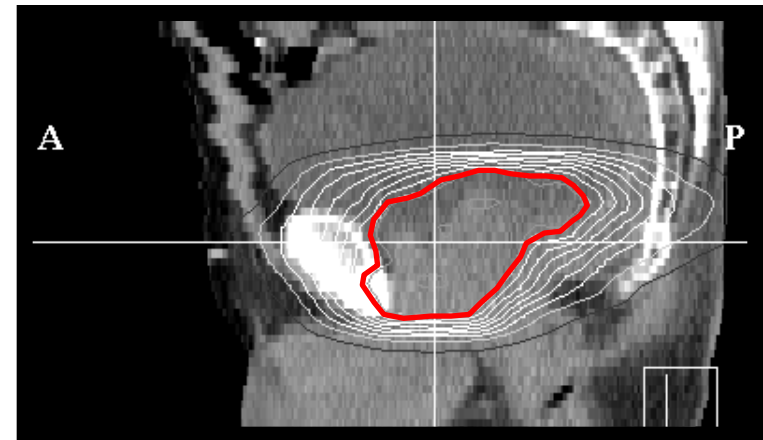
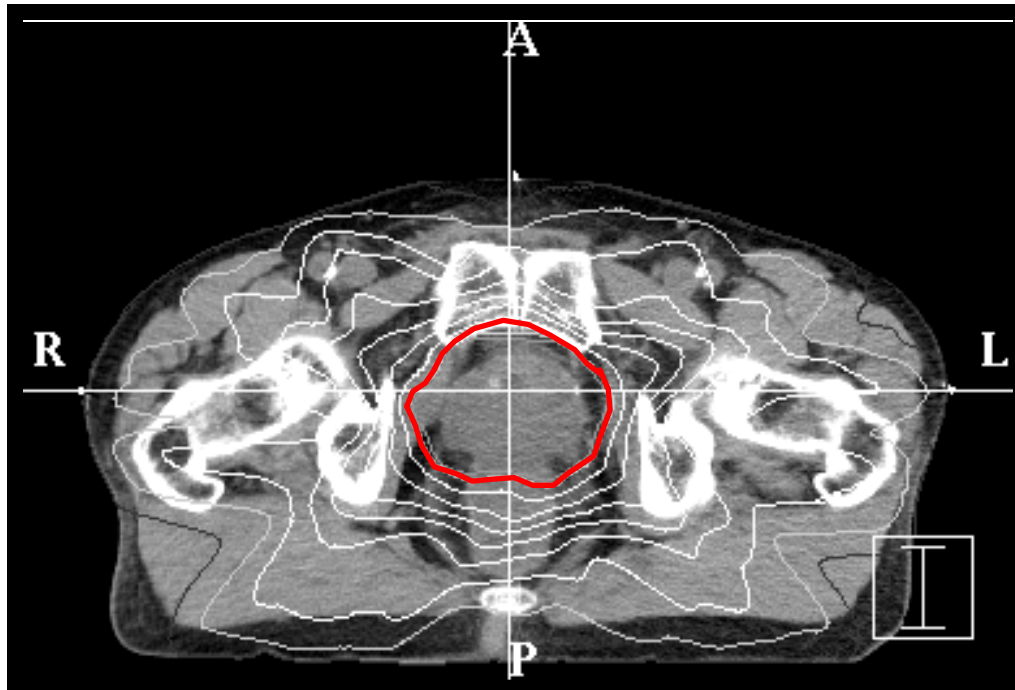
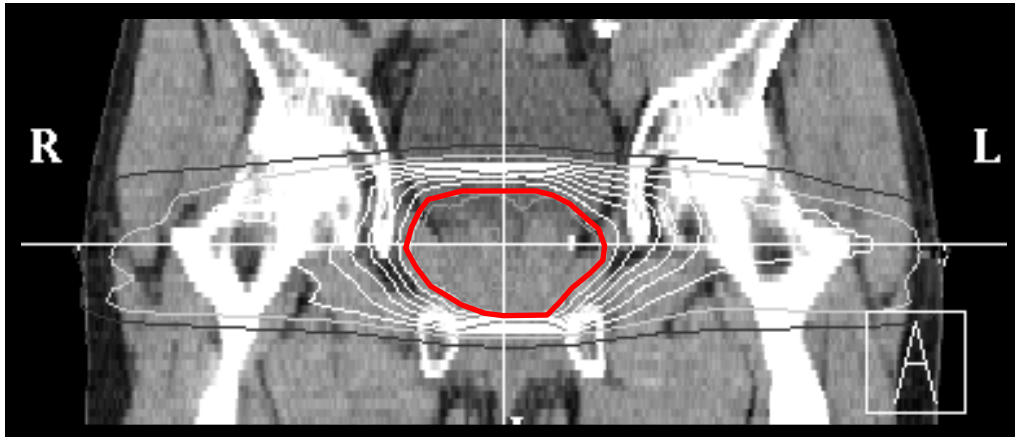
Lateral rectum exhibits the steepest dose gradient: Lower absolute dose inflates % difference.

- Measurements with calculated doses > 170 cGy (corresponding to an anteriorly positioned detector) exhibit $-1.4\% \pm 4.7\%^*$ average agreement.
- Measurements with calculated doses < 170 cGy (corresponding to laterally/posteriorly positioned detectors) exhibit $0.7\% \pm 11.1\%^*$ average agreement.
- Anterior dose measurements are more consistent.

*Mean and standard deviation of 65 and 72 measurements respectively, considered in aggregate regardless of patient of origin.

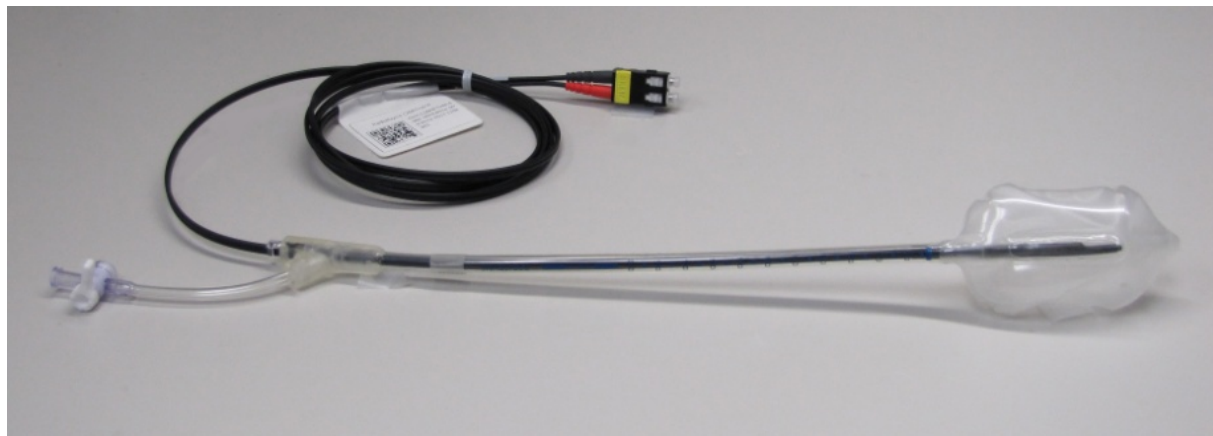
DISCUSSION : PROSTATE MOTION ???

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25 treatment CTs acquired
during a course of 42 TxS

Lei Dong (MDACC), 2002



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- Easy User Interface with Data Report Export to EMR



Courtesy of John Isham, CEO, RadiaDyne

OTHER RELEVANT STUDIES USING PSDs FOR *IN VIVO* DOSIMETRY (*IN PHANTOM OR IN PATIENTS*)

Lambert J, Nakano T, Law S, Elsey J, McKenzie DR, Suchowerska N. ***In vivo* dosimeters for HDR brachytherapy: a comparison of a diamond detector, MOSFET, TLD, and scintillation detector.** *Med Phys* 34(5): 1759-65, 2007.

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Cartwright LE, Suchowerska N, Yin YB, Lambert J, Haque M, and McKenzie DR. **Dose mapping of the rectal wall during brachytherapy with an array of scintillation dosimeters.** *Med Phys* 37: 2247–2255, 2009.

Archambault L, Briere TM, Poenisch F, Beaulieu L, Kuban DA, Lee A, Beddar S. **Toward a real-time in vivo dosimetry system using plastic scintillation detectors.** *Int J Radiat Oncol Biol Phys* 78(1): 280-287, 2010.

Suchowerska N, Jackson M, Lambert J, Yin YB, Hruby G, McKenzie DR. **Clinical trials of a urethral dose measurement system in brachytherapy using scintillation detectors.** *Int J Radiat Oncol Biol Phys* 79(2): 609-15, 2011.

OTHER RELEVANT STUDIES USING PSDs FOR *IN VIVO* DOSIMETRY (*IN PHANTOM OR IN PATIENTS*)

Therriault-Proulx F, Briere TM, Mourtada F, Aubin S, Beddar S, Beaulieu L. **A phantom study of an in vivo dosimetry system using plastic scintillation detectors for real-time verification of ^{192}Ir HDR brachytherapy.** *Med Phys* 38(5): 2542-51, 2011.

Therriault-Proulx F, Archambault L, Beaulieu L, Beddar S. **Development of a novel multipoint plastic scintillation detector with a single optical transmission line for radiation dose measurement.** *Phys Med Biol* 57(21): 7147-7159, 2012.

Klein D, Briere TM, Kudchadker R, Archambault L, Beaulieu L, Lee A, Beddar S. **In-phantom dose verification of prostate IMRT and VMAT deliveries using plastic scintillation detectors.** *Radiat Meas* 47(10): 921-929, 2012.

Therriault-Proulx F, Beddar S, Beaulieu L. **On the use of a single-fiber multipoint plastic scintillation detector for (^{192}Ir) high-dose-rate brachytherapy.** *Med Phys* 40(6): 062101, 2013.

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... and all others who have contributed to the field of scintillation dosimetry.

WHAT IS SO SPECIAL ABOUT THE 3 COLORS ?

- **AAPM 2008** --- introducing PSDs, basics & properties
“Scintillation Dosimetry: Review, New Innovations and Applications”
- **AAPM 2010** --- further studies & validation of PSDs
“Scintillation Dosimetry: From Plastics to Liquids and from Photons/Electrons to Protons”
- **AAPM 2013** --- application of commercial PSDs
“PSDs: Present Status and their Applications for Quality Assurance and In Vivo Dosimetry”

The 3 colors of scintillators R-G-B

