

AAPM 56th Annual Meeting - Austin, Texas

Image Quality for the Radiation Oncology Physicist: Review of the Fundamentals and Implementation

Image Quality Review II: ***Implementation of Image Quality Assurance***

TH-A-16A-3

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Funding Support, Disclosures, and Conflict of Interest:

None

Implementation of Image Quality Assurance

- Image Guide Radiation Therapy (IGRT) has become the standard of care for patient setup and target localization for external beam therapy.

Implementation of Image Quality Assurance

The expansion and integration of diagnostic imaging technologies such as On Board Imaging (OBI) and Cone Beam Computed Tomography (CBCT) into radiation oncology has required radiation oncology physicists to be responsible for and become familiar with assessing image quality.

AAPM Reports

- 2001 TG-58 Clinical Use of Electronic Portal Imaging
- 2009 TG-104 The Role of In-Room kV X-Ray Imaging for Patient Setup and Target Localization
- 2009 TG-142 Quality Assurance of Medical Accelerators
- 2012 TG-179 Quality Assurance for Image-Guided Radiation Therapy Utilizing CT-based Technologies
- 2014 MPG 2.a Commissioning and Quality Assurance of X-ray based Image-Guided Radiotherapy Systems

TG-142 Table VI Imaging QA

Daily

Planar kV and MV (EPID) imaging

Collision interlocks
Positioning/repositioning
Imaging and treatment coordinate coincidence
(single gantry angle)

Cone-beam CT (kV and MV)

Collision interlocks
Imaging and treatment coordinate coincidence
Positioning/repositioning

Daily QA – Therapist

Monthly QA – Physicist

Annual QA – Physicist

Monthly

Planar MV imaging (EPID)

Imaging and treatment coordinate coincidence
(four cardinal angles)
Scaling^b
Spatial resolution
Contrast
Uniformity and noise

Planar kV imaging^d

Imaging and treatment coordinate coincidence
(four cardinal angles)
Scaling
Spatial resolution
Contrast
Uniformity and noise

Cone-beam CT (kV and MV)

Geometric distortion
Spatial resolution
Contrast
HU constancy
Uniformity and noise

Annual

Planar MV imaging (EPID)

Full range of travel SDD
Imaging dose^e

Planar kV imaging

Beam quality/energy (kVp / HVL)
Imaging dose (output - mR/mAs)

Cone-beam CT (kV and MV)

Imaging dose (CTDI or TG-111)

Implementation of Image Quality Assurance

- TG-142 and other task group reports lists recommended QA tests but do not describe their implementation.
- Radiation oncology physicists may not be familiar or have experience with imaging QA tests and measures that are common for diagnostic physicists.

Implementation of Image Quality Assurance

- The implementation of an image quality program in accordance with Task Group recommendations can be done relatively easily and simply with readily available phantoms.
- Automated image analysis software and phantoms may offer advantages and advanced capabilities, but come with caveats.

EPID Monthly QA

EPID Monthly QA

by: **P. Imbergamo** Date: **09/27/11**

Location: **SNR - Woonsocket, RI**
Unit: **21 EX** Serial #: **2871**

I. Collision Interlocks - alarm sounds & all motions disabled

Location	Pass	Fail	Comments
Arms:	Pass		
Detector:	Pass		

II. MV Detector Positioning & Reproducibility

cover to detector distance (cm): **2.5**

- measure SSD to detector & shift at two different detector distances

Detector Position			SSD (cm)		Diff or Shift (<0.2 cm)			
Vertical	Long	Lat	expected	measured	diff.	(<0.2 cm)	Sup/Inf	RI/LI
60.0	0.0	0.0	57.5	57.5	0.0	Pass	P	P
5.0	0.0	0.0	2.5	2.5	0.0	Pass	P	P

III. EPID Imaging & Treatment Isocenter Coincidence

- place Isocenter Cube tool on couch top at Isocenter using lasers & crosshairs
- load QA patient & take port films at four cardinal angles
- at each angle measured difference between center of steel ball & digital graticule

Gantry Angle	difference (cm)	Pass/Fail (<0.15cm)
0	0.05	Pass
90	0.04	Pass
180	0.05	Pass
270	0.06	Pass

IV. Scaling

- measure Isocenter Cube tool image in X & Y directions

Direction	expected (cm)	measured (cm)	diff. (cm)	% diff	Pass/Fail (<1%)
X	5.0	4.99	-0.01	0.20%	Pass
Y	5.0	4.98	-0.02	0.40%	Pass

V. EPID Calibration

AM Maintenance

1. Dark & Flood Fields

a. Low Dose & High Quality Images

- Imager position: -50.0, 0.0, 0.0 (Auto)
- Jaw Settings: X = 28 Y = 22

Technique	Energy	Rep Rate	Dark	Flood
Low Dose	6	300	X	X
"	6	400	X	X
"	18	400	X	X
High Quality	6	300	X	X
"	6	400	X	X
"	18	400	X	X

EPID QA pg 1

b. Integrated Image

- Imager position: -50.0, 0.0, 0.0 (P5)
- Jaw Settings: X = 38.1 Y = 28.6

Technique	Energy	Rep Rate	Dark	Flood
Int. Image	6	300	X	X
"	6	400	X	X
"	18	400	X	X

2. Dosimetry Calibration

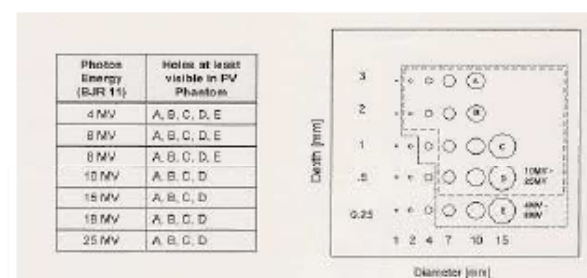
- Imager position: -50.0, 0.0, 0.0 (P5)
- Jaw Settings: X = 10.0 Y = 10.0

		Previous		Current	
Energy	Rep Rate	Date	Value	Date	Value
6	300	8/16/2011	0.097025	9/6/2011	0.0969912
6	400	8/16/2011	0.097217	9/6/2011	0.0974679
18	400	8/16/2011	0.110269	9/6/2011	0.110407

VI. Image Quality (Resolution / Contrast & Noise)

- Imager position: -40.0, 0.0, 0.0 Jaws: 20 X 20
- Acquisition Technique: High Quality Image, 6x/400, 18x/400
- Vegas phantom centered @ 100 cm SSD on couch
- Identify smallest hole (column) with least contrast (row) visualized for both energies
- Enter the diameter corresponding to the smallest hole (column) visualized (see diagram below)
- Enter the letter of the row of the smallest hole with the least contrast visualized (see diagram below)
- Specification: see table & diagram below

Energy	column dia. (mm)	row depth (mm)	% Object Contrast	Pass/Fail
6	10.0	E	0.15	Pass
18	10.0	D	0.18	Pass



EPID QA pg 2

EPID Monthly QA

- I. Collision Interlocks
- II. MV Detector Positioning & Reproducibility
- III. EPID Imaging & Treatment Isocenter Coincidence
- IV. Scaling
- V. EPID Calibration
- VI. Image Quality (Resolution/Contrast & Noise)

EPID Monthly QA

I. Collision Interlocks - alarm sounds & all motions disabled

Location	Pass	Fail	Comments
Arms:	Pass		
Detector:	Pass		

II. MV Detector Positioning & Reproducibility

cover to detector distance (cm):

2.5

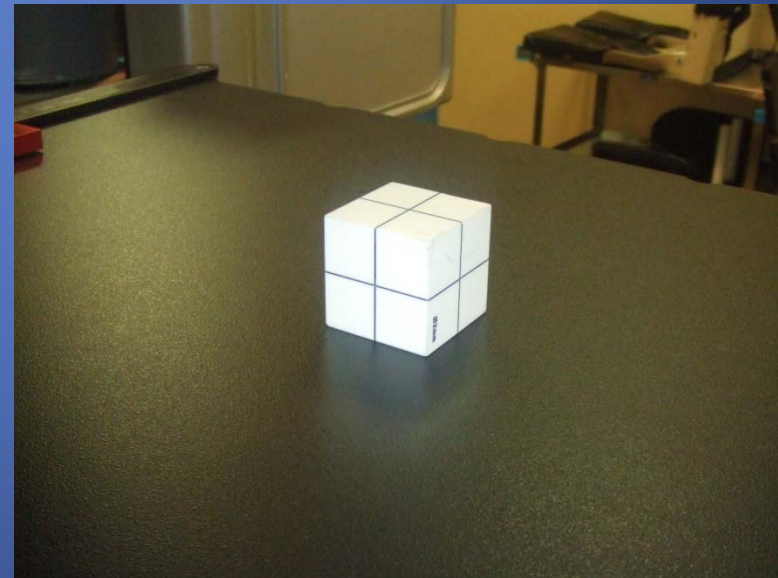
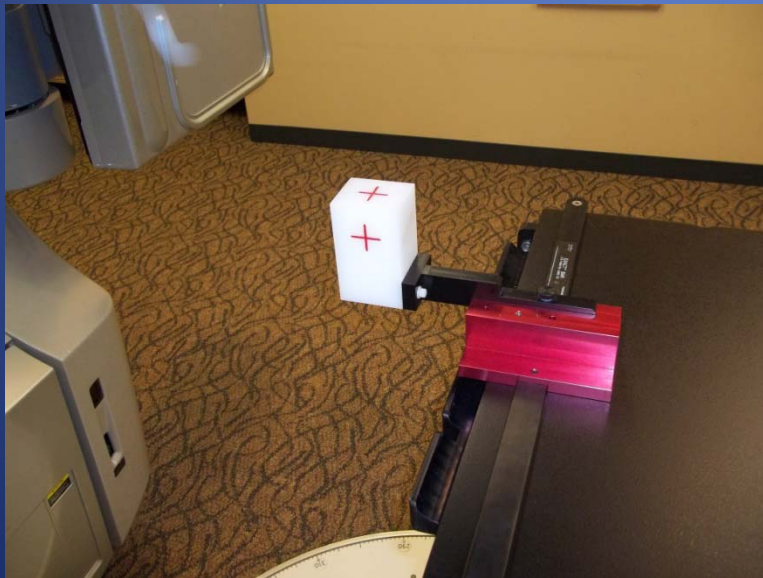
- measure SSD to detector & shift at two different detector distances

Detector Position			SSD (cm)		Diff or Shift (<0.2 cm)			
Vertical	Long	Lat	expected	measured	diff.	(<0.2 cm)	Sup/Inf	Rt/Lt
60.0	0.0	0.0	57.5	57.5	0.0	Pass	P	P
5.0	0.0	0.0	2.5	2.5	0.0	Pass	P	P

III. EPID Imaging & Treatment Isocenter Coincidence

- place Isocenter Cube tool on couch top at isocenter using lasers & crosshairs
- load QA patient & take port films at four cardinal angles
- at each angle measured difference between center of steel ball & digital graticule

Gantry Angle	difference (cm)	Pass/Fail ($\leq 0.15\text{cm}$)
0	0.05	Pass
90	0.04	Pass
180	0.05	Pass
270	0.06	Pass



III. EPID Imaging & Treatment Isocenter Coincidence

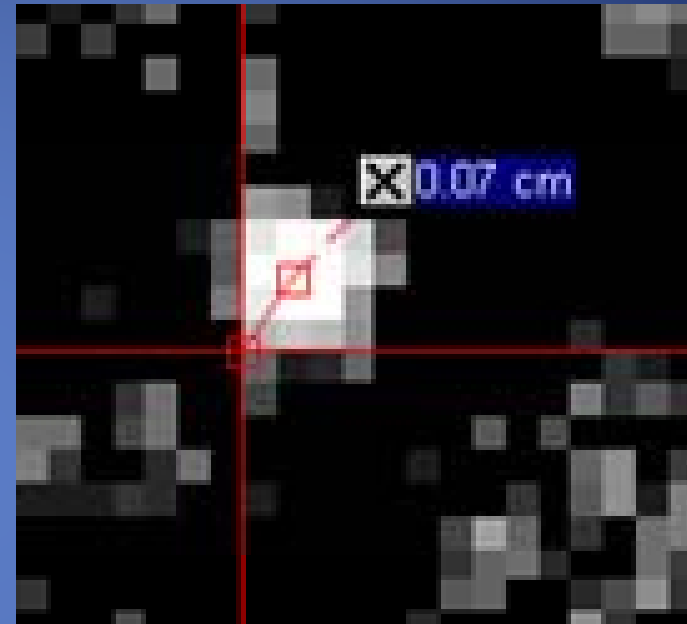
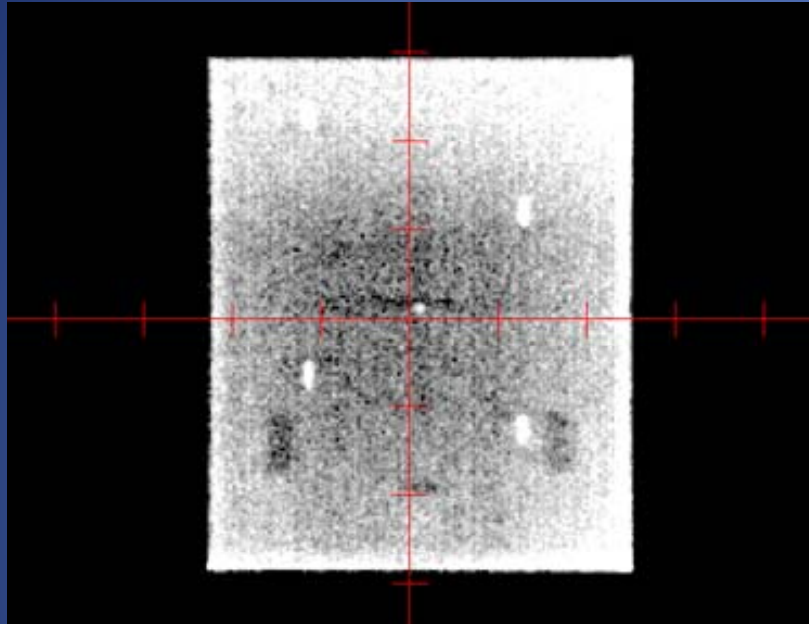


Image at all four cardinal angles

TG 142 tolerance
 ≤ 2 mm non SRS/SBRT
 ≤ 1 mm SRS/SBRT

Gantry Angle	difference (cm)	Pass/Fail (≤ 0.15 cm)
0	0.07	Pass
90	0.04	Pass
180	0.05	Pass
270	0.06	Pass

EPID Monthly QA

IV. Scaling

- measure Isocenter Cube tool image in X & Y directions

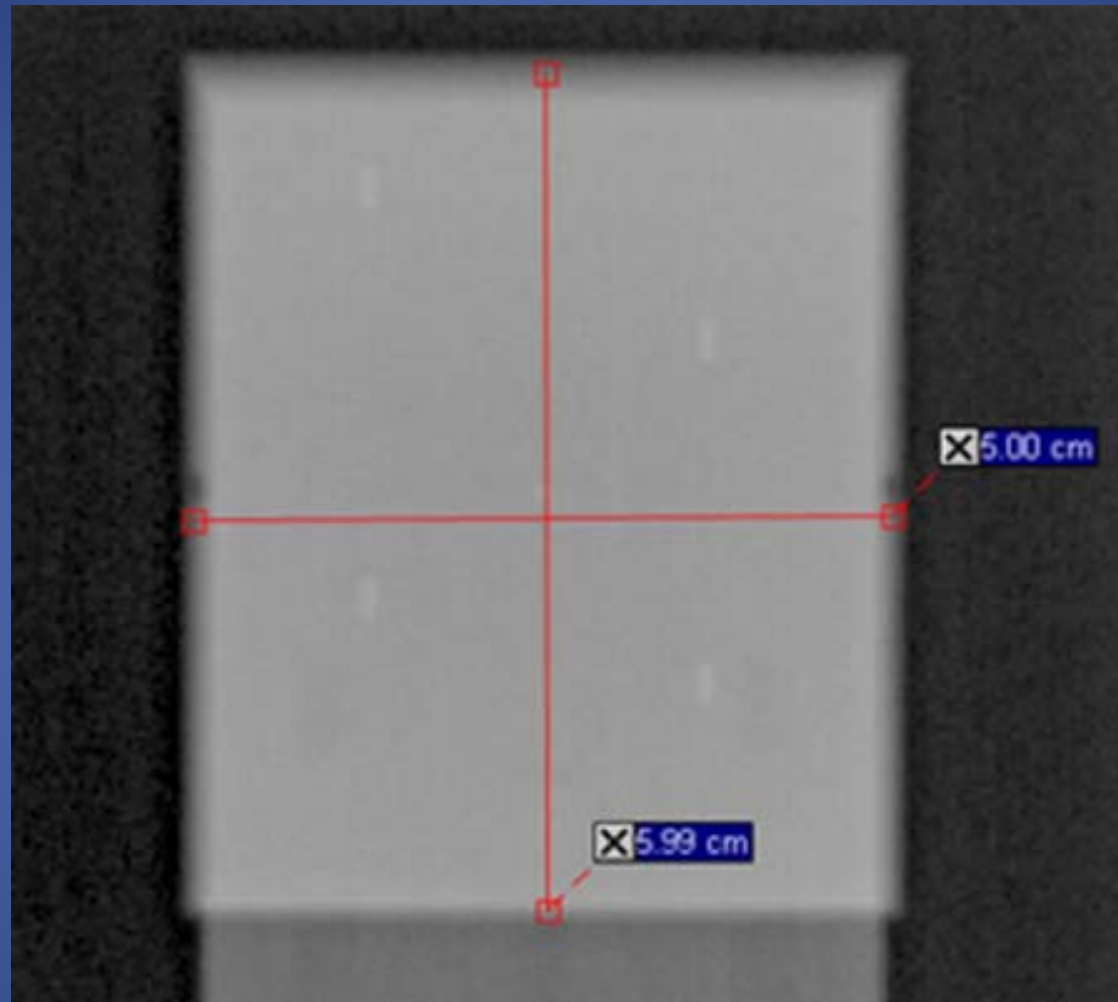
Direction	expected (cm)	measured (cm)	diff. (cm)	% diff	Pass/Fail ($\leq 1\%$)
X	5.0	5.00	0.00	0.00%	Pass
Y	6.0	5.99	-0.01	0.17%	Pass

TG 142 tolerance

≤ 2 mm

measured at SSD typically used
for imaging

IV. Scaling



TG 142 tolerance
 $\leq 2 \text{ mm}$
measured at SSD typically used
for imaging

EPID Monthly QA

V.EPID Calibration

AM Maintenance

1. Dark & Flood Fields

a. Low Dose & High Quality Images

- Imager position: -50.0, 0.0, 0.0
- Jaw Settings: X = 26.7 Y = 20.0

Technique	Energy	Rep Rate	Dark	Flood
Low Dose	6	300	X	X
"	6	400	X	X
"	18	400	X	X
High Quality	6	300	X	X
"	6	400	X	X
"	18	400	X	X

b. Integrated Image

- Imager position: -5.0, 0.0, 0.0 (P5)
- Jaw Settings: X = 38.1 Y = 28.6

Technique	Energy	Rep Rate	Dark	Flood
Int. Image	6	300	X	X
"	6	400	X	X
"	18	400	X	X

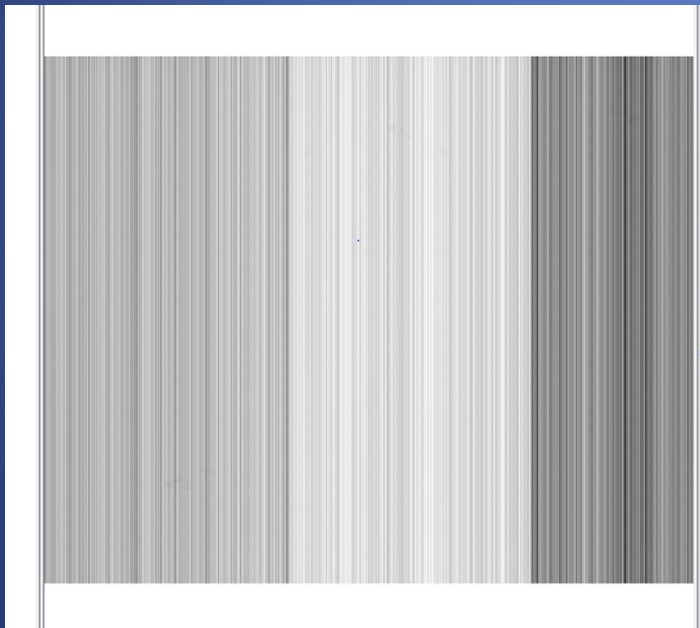
2. Dosimetry Calibration

- Imager position: -5.0, 0.0, 0.0 (P5)
- Jaw Settings: X = 10.0 Y = 10.0

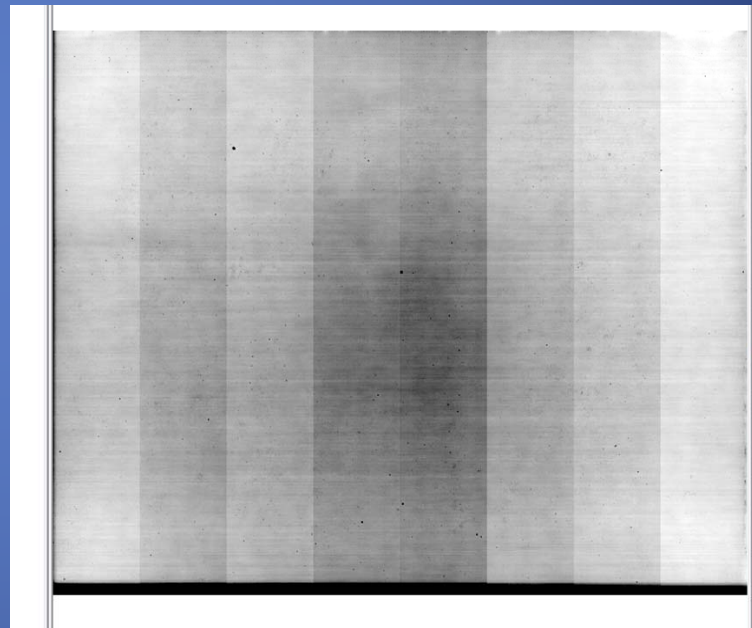
Energy	Rep Rate	Previous		Current	
		Date	Value	Date	Value
6	300	4/2/2014	0.0988869	5/1/2014	0.0989403
6	400	4/2/2014	0.0993320	5/1/2014	0.0993493
18	400	4/2/2014	0.112799	5/1/2014	0.112593

V. EPID Calibration

Dark Fields



Flood Fields



V. EPID Calibration

Dosimetry Calibration

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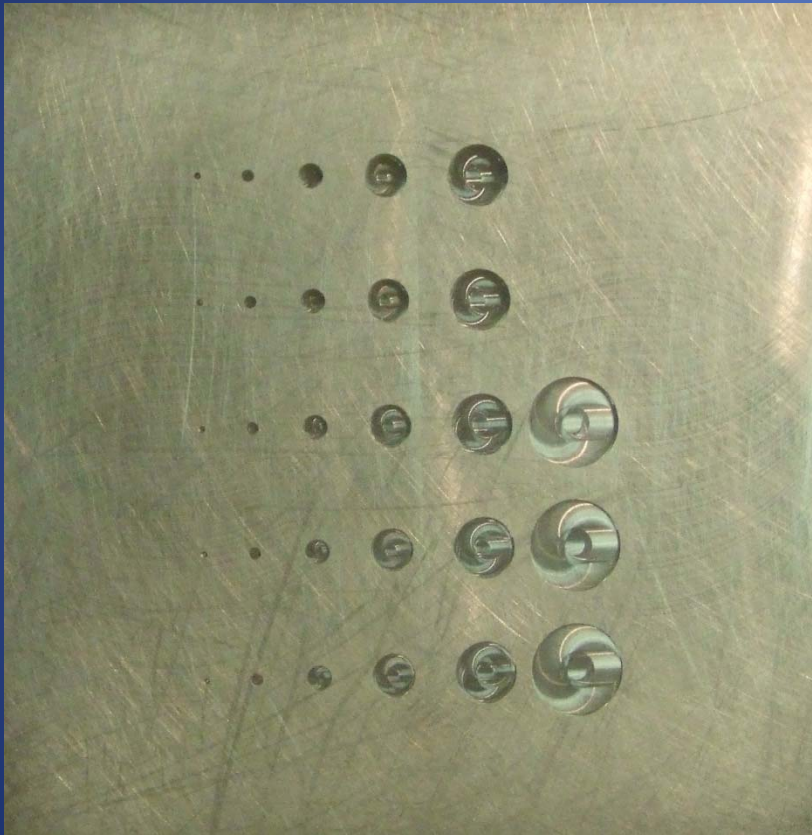
Dosimetry Calibration Modes

	Cal	Energy	Dose Rate	Scanning Mode	Beam Profile	Normalization	Norm. Factor
1	<input type="checkbox"/>	6 MV	100 MU/Min	IDU20-Full-LoK-Integrated	04/02/2014		
2	<input type="checkbox"/>	6 MV	200 MU/Min	IDU20-Full-LoK-Integrated	04/02/2014		
3	<input type="checkbox"/>	6 MV	300 MU/Min	IDU20-Full-LoK-Integrated	04/02/2014	04/02/2014	0.098869
4	<input type="checkbox"/>	6 MV	400 MU/Min	IDU20-Full-LoK-Integrated	04/02/2014	04/02/2014	0.099332
5	<input type="checkbox"/>	6 MV	500 MU/Min	IDU20-Full-LoK-Integrated	04/02/2014		
6	<input type="checkbox"/>	6 MV	600 MU/Min	IDU20-Full-LoK-Integrated	04/02/2014		
7	<input type="checkbox"/>	18 MV	100 MU/Min	IDU20-Full-HoK-Integrated	04/02/2014		
8	<input type="checkbox"/>	18 MV	200 MU/Min	IDU20-Full-HoK-Integrated	04/02/2014		
9	<input type="checkbox"/>	18 MV	300 MU/Min	IDU20-Full-HoK-Integrated	04/02/2014	01/18/2010	0.107938
10	<input type="checkbox"/>	18 MV	400 MU/Min	IDU20-Full-HoK-Integrated	04/02/2014	04/02/2014	0.112799
11	<input type="checkbox"/>	18 MV	500 MU/Min	IDU20-Full-HoK-Integrated	04/02/2014		
12	<input type="checkbox"/>	18 MV	600 MU/Min	IDU20-Full-HoK-Integrated	04/02/2014		
13	<input type="checkbox"/>	20 MV	100 MU/Min	IDU20-Full-2nd-Integrated			
14	<input type="checkbox"/>	20 MV	200 MU/Min	IDU20-Full-2nd-Integrated			
15	<input type="checkbox"/>	20 MV	300 MU/Min	IDU20-Full-2nd-Integrated			

OK
Cancel

VI. Image Quality (Resolution / Contrast & Noise)

Vegas Phantom



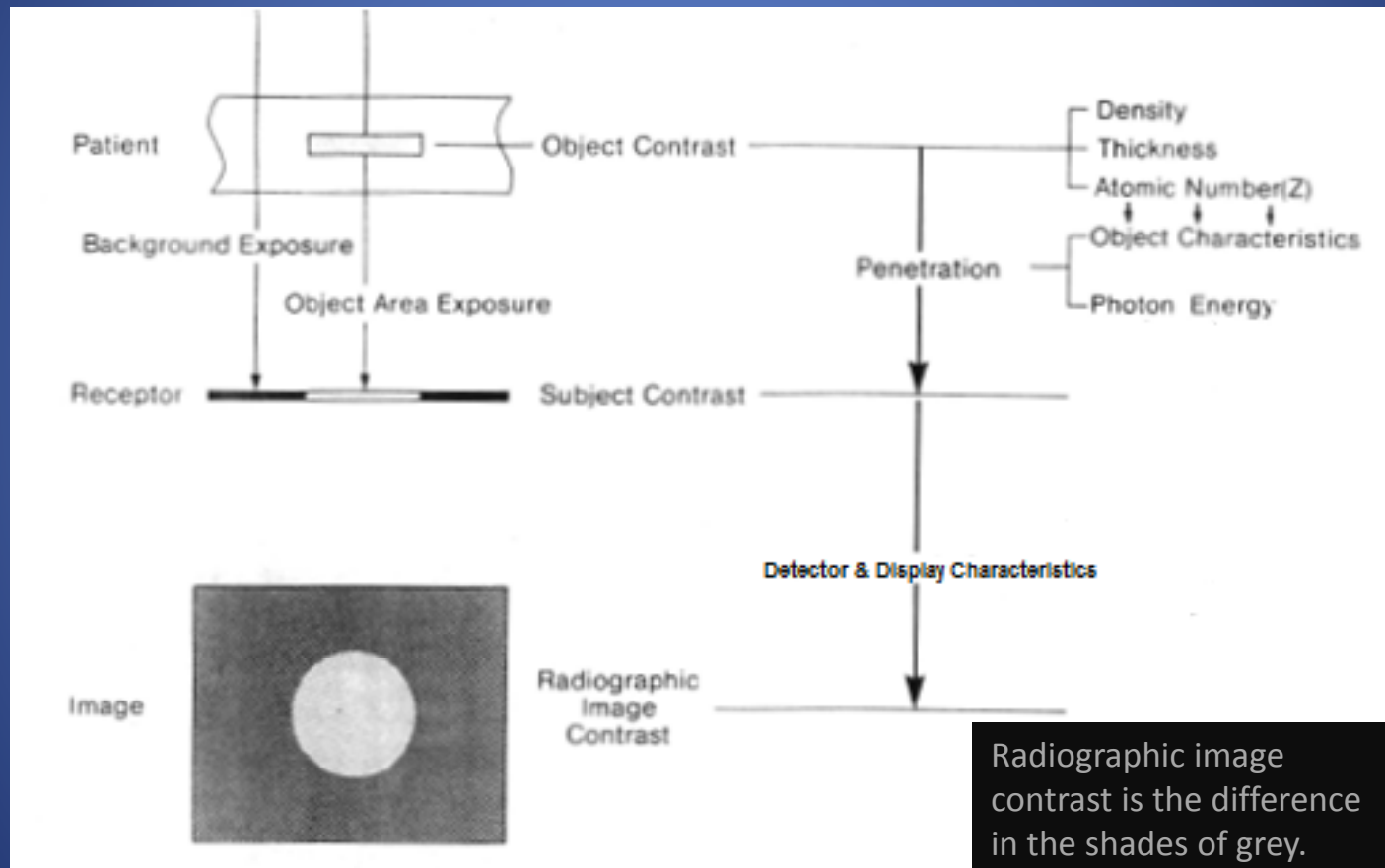
Note: phantom above is flipped over to show holes
normally placed hole side down on the table for imaging

- Aluminum block with columns of circles machined to different depths
– less depth equates to less contrast
- Rows of circles with decreasing diameters
– the smaller the diameter equates to greater detail

VI. Image Quality (Resolution / Contrast & Noise)

Contrast = Difference

- Contrast is the most fundamental characteristic of an image.



Stages of Contrast Development in Radiography

adapted from Sprawls, "Physical Principles of Medical Imaging"

VI. Image Quality (Resolution / Contrast & Noise)

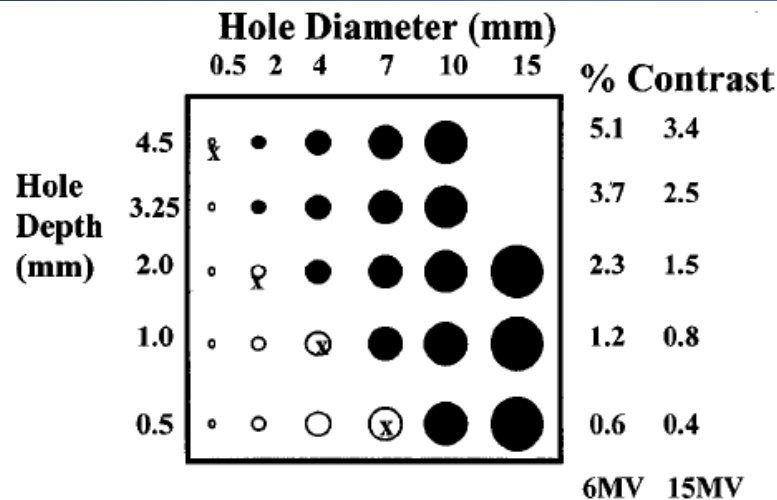


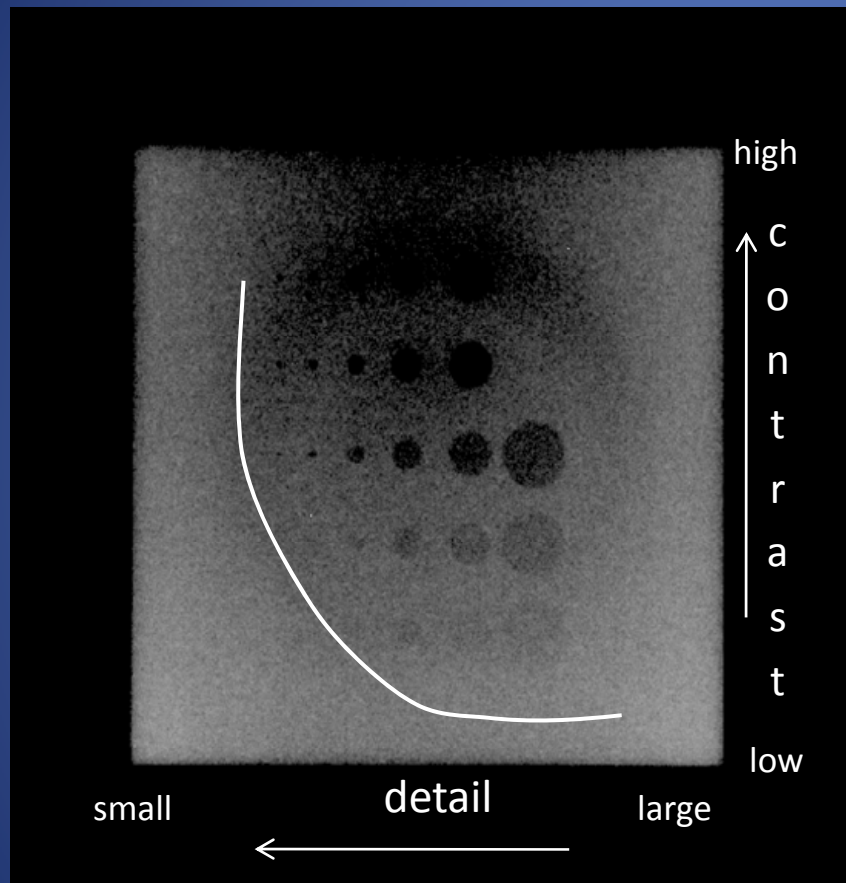
FIG. 10. Aluminum Las Vegas phantom for EPID image contrast and spatial resolution.

from AAPM TG-58

- The Vegas phantom is a contrast–detail phantom.
- Selection of the least visible circle along a column (y-axis) provides a measure of contrast.
- Selection of the smallest visible diameter along a row (x-axis) provides a measure of detail (object size).

VI. Image Quality (Resolution / Contrast & Noise)

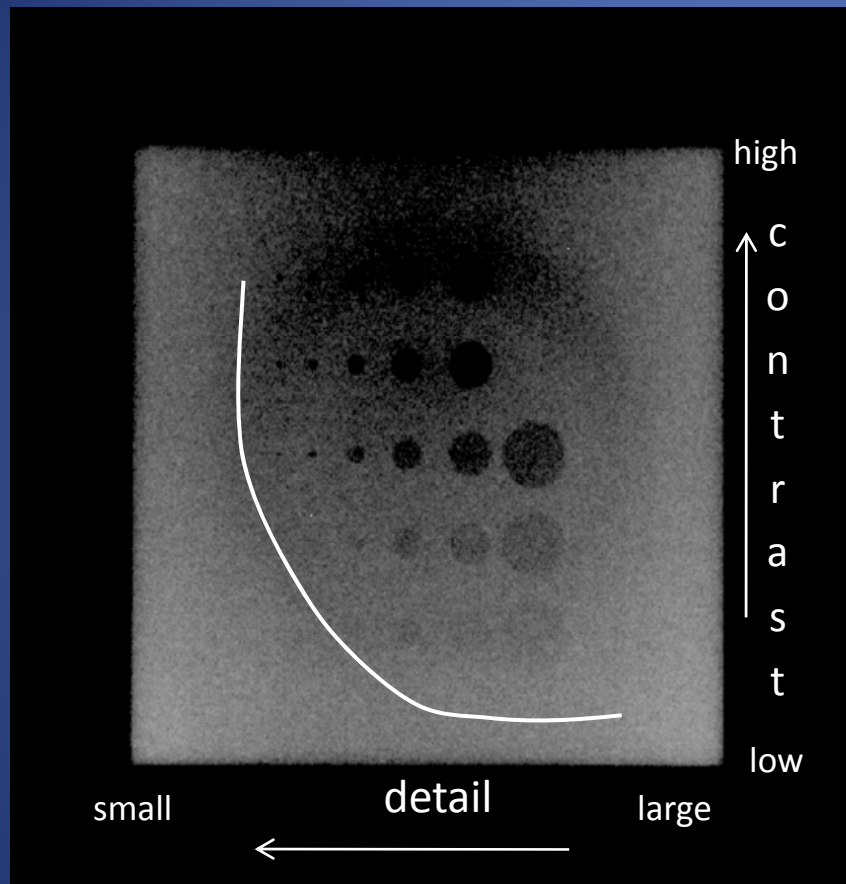
Contrast-Detail Curve



- The image of the Vegas phantom produces a contrast-detail curve.
- The y-axis corresponds to contrast.
- The x-axis corresponds to detail.

VI. Image Quality (Resolution / Contrast & Noise)

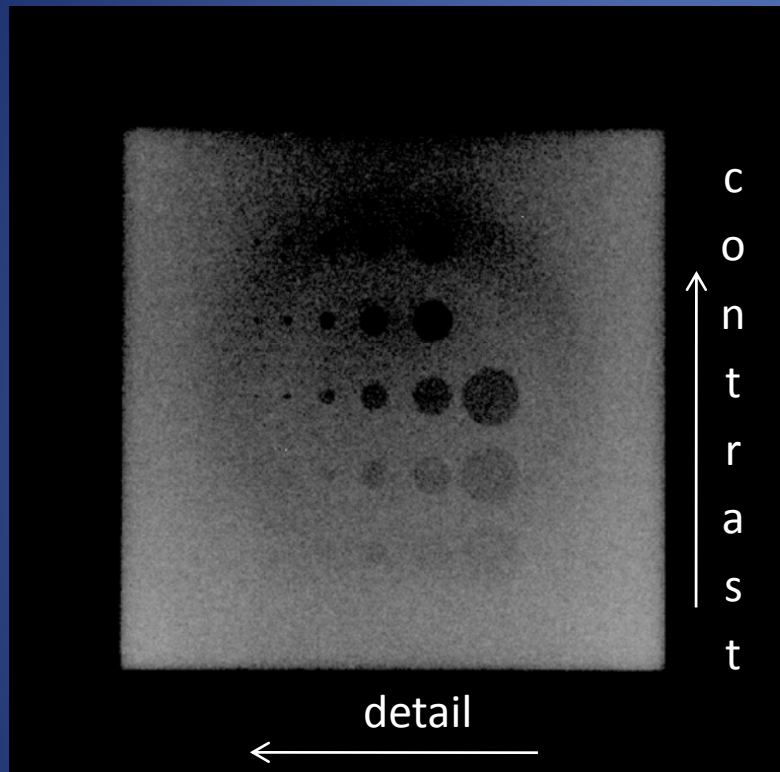
Contrast-Detail Curve



- As the holes get smaller and less in depth they become more difficult to visualize due to decreased contrast.
- The curve on the image is analogous to a visibility threshold.

VI. Image Quality (Resolution / Contrast & Noise)

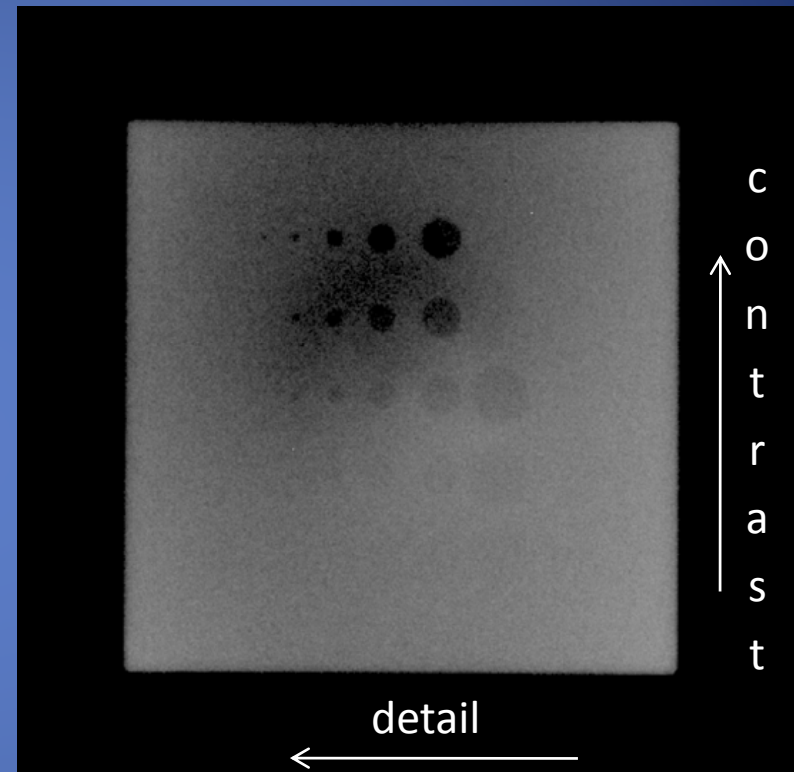
6 MV



6 MV: less penetration of the holes to that of the background

Increased Contrast

18 MV



18 MV: greater penetration of the holes to that of the background

Decreased Contrast

VI. Image Quality (Resolution / Contrast & Noise)

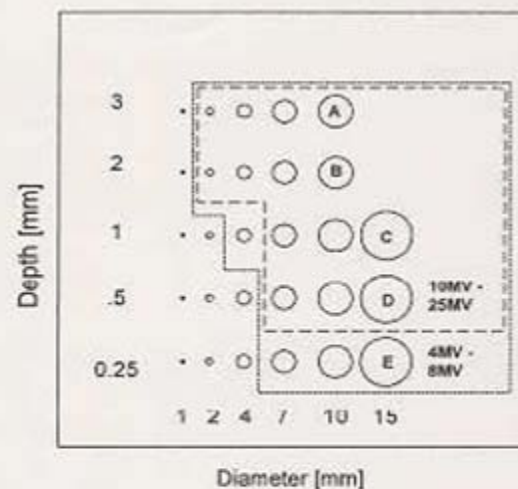


- Imager position: -40.0, 0.0, 0.0 Jaws: 20 X 20
- Acquisition Technique: High Quality Image (4 MU) 6X & 18X 400 MU/min
- Vegas phantom centered @ 100 cm SSD on couch
- Use window & level functions. Adjust ambient lighting.

VI. Image Quality (Resolution / Contrast & Noise)

Energy	column dia. (mm)	row depth (mm)	% Object Contrast	Pass/Fail
6	7.0	E	0.15	Pass
18	4.0	D	0.18	Pass

Photon Energy (BJR 11)	Holes at least visible in PV Phantom
4 MV	A, B, C, D, E
6 MV	A, B, C, D, E
8 MV	A, B, C, D, E
10 MV	A, B, C, D
15 MV	A, B, C, D
18 MV	A, B, C, D
25 MV	A, B, C, D



TG 142 tolerance
Baseline

TG-142: Baseline means that the measured data are consistent with or better than ATP data.

OBI Monthly QA

OBI Monthly QA

by: **P Imbergamo** Date: **05/01/14**
 Location: **SNR - Woonsocket, RI**
 Unit: **2T EX** Serial # **2817**

I. Collision Interlocks - alarm sounds & all motions disabled

Location	Pass	Fail	Comments
Arms:	Pass		
Detector:	Pass		

II. kV Detector Positioning & Reproducibility

cover to detector distance (cm): **3.0**

- rotate gantry to 90° so kV detector is at floor
- measure distance to detector grid & shift at two different detector distances

Detector Position			distance (cm)		Diff or Shift (~0.2 cm)			
Vertical	Long	Lat	expected	measured	diff.	(~0.2 cm)	Sup/Inf	Rt/Lt
60.0	0.0	0.0	55.2	55.1	0.1	Pass	P	P
20.0	0.0	0.0	15.2	15.2	0.0	Pass	P	P

III. kV Source Positioning

source to faceplate distance (cm): **14.5**

- place kV source at 100, 0, 0 (P1)
- rotate gantry to 270° so kV source is at floor
- measure from source face plate to isocenter

kV Source Position			distance (cm)		Diff (~0.2 cm)			
Vertical	Long	Lat	expected	measured	diff.	(~0.2 cm)		
100.0	0.0	0.0	85.5	85.5	0.0	Pass		

IV. Imager Alignment & Scaling

1. Scaling

- setup blade calibration plate on couch top @ 100 cm SSD
- level gantry to 90° so kV detector is at floor
- place kV source at 100, 0, 0 & detector at 50, 0, 0
- in OBI Maintenance take an image using Single Pulse Full Resolution
- measure distance between 10 x 10 pair of lines in X & Y directions

technique:	Single Pulse Full Resolution		
kVp:	60	mA:	16.0
ms:	8.0		

Direction	expected (cm)	measured (cm)	diff. (cm)	Pass/Fail (~0.2 cm)
X	10.0	10.00	0.00	Pass
Y	10.0	10.00	0.00	Pass

2. Imager Alignment

- using the image from above zoom out until the center circle on the plate is visible
- select the Area Histogram icon & select "Show Details".
- change Hor Pos to 1024 & Vert Pos to 768
- drag the upper left hand corner of the ROI box until it intersects the center of the circle
- record the Hor Pos & Vert Pos of the center pixel position

	center pixel position			Pass/Fail (<10 pixels)
	expected	measured	diff.	
Horizontal position	1024	1021.30	2.70	Pass
Vertical position	768	771.49	3.49	Pass

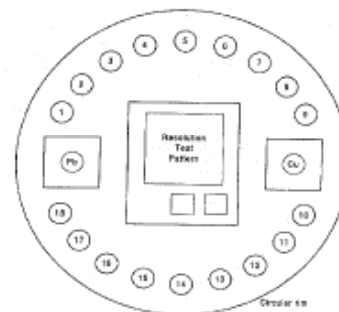
V. OBI Imaging & Treatment Isocenter Coincidence

- place Isocenter Cube tool on couch top at Isocenter using lasers & crosshairs
- place kV source at 100, 0, 0 & detector at 50, 0, 0
- in OBI Maintenance take an image at four cardinal angles
- at each angle measured difference between center of steel ball & digital graticule

technique:	FF Last Image Hold		
kVp:	50	mA:	16.0
ms:	8.0		

Gantry Angle	kV source Angle	difference (cm)	Pass/Fail (<0.15cm)
270	180	0.11	Pass
0	270	0.10	Pass
90	0	0.07	Pass
180	90	0.12	Pass

VI. Image Quality - Leads Test Tool



Resolution Test Patterns: There are 20 separate groups of test patterns, each group representing 5 lines and 5 spaces, giving a 5:5 line pair. The following table gives the spatial frequencies in the pairs per inch.

Group Number	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
Line Pairs per Inch	5	5.62	5.99	6.38	6.79	7.22	7.67	8.14	8.62	9.11	9.61	10.12	10.65	11.19	11.75	12.32	12.90	13.50	14.11	14.73

Leadwire Test Pattern: 18 (25 x 5.0) Uniform Resolution Test Pattern

Line Pairs per Inch	5	5.62	5.99	6.38	6.79	7.22	7.67	8.14	8.62	9.11	9.61	10.12	10.65	11.19	11.75	12.32	12.90	13.50	14.11	14.73
mm	1.27	1.33	1.39	1.46	1.52	1.58	1.65	1.72	1.79	1.86	1.93	2.00	2.07	2.14	2.21	2.28	2.35	2.42	2.50	2.57

OBI Monthly QA

- I. Collision Interlocks
- II. kV Detector Positioning & Reproducibility
- III. kV Source Positioning
- IV. Imager Alignment & Scaling
- V. OBI Imaging & Treatment Isocenter Coincidence
- VI. Image Quality – Leeds Test Tool
 1. High Contrast Resolution (spatial resolution)
 2. Low Contrast Resolution

OBI Monthly QA

I. Collision Interlocks - alarm sounds & all motions disabled

Location	Pass	Fail	Comments
Arms:	Pass		
Detector:	Pass		

II. kV Detector Positioning & Reproducibility

cover to detector distance (cm): 3.0

- rotate gantry to 90° so kV detector is at floor
- measure distance to detector grid & shift at two different detector distances

Detector Position			distance (cm)		Diff or Shift (<0.2 cm)			
Vertical	Long	Lat	expected	measured	diff.	(<0.2 cm)	Sup/Inf	Rt/Lt
60.0	0.0	0.0	55.2	55.1	0.1	Pass	P	P
20.0	0.0	0.0	15.2	15.2	0.0	Pass	P	P

III. kV Source Positioning

source to faceplate distance (cm): 14.5

- place kV source at 100, 0, 0 (P1)
- rotate gantry to 270° so kV source is at floor
- measure from source face plate to isocenter

kV Source Position			distance (cm)		Diff (<0.2 cm)		
Vertical	Long	Lat	expected	measured	diff.	(<0.2 cm)	
100.0	0.0	0.0	85.5	85.5	0.0	Pass	

IV. Imager Alignment & Scaling

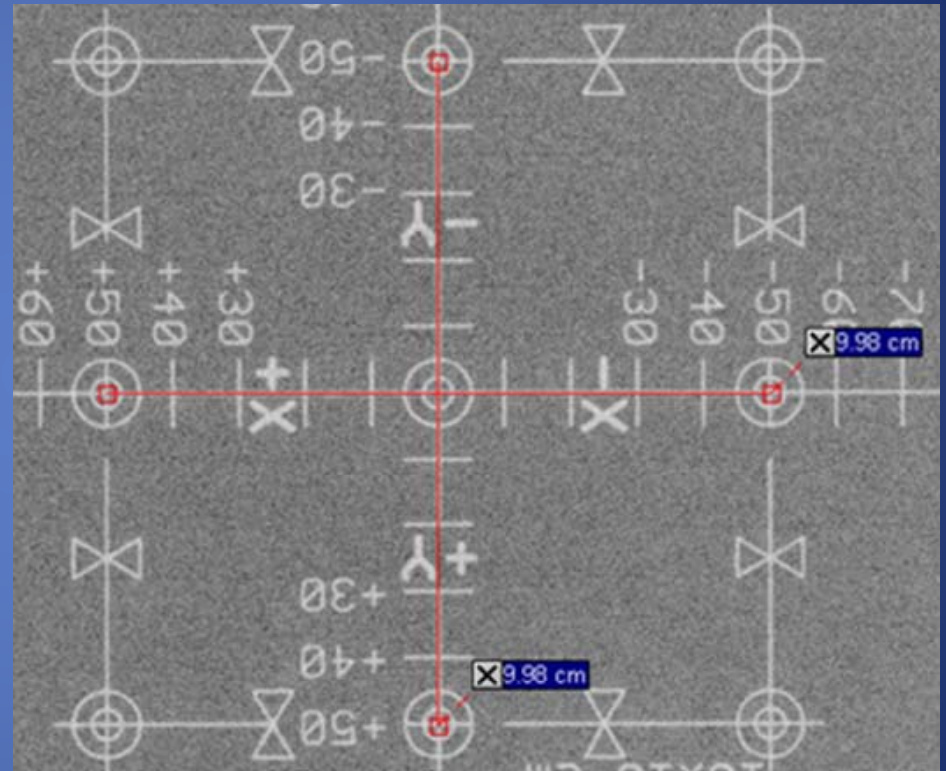
1. Scaling

- setup blade calibration plate on couch top @ 100 cm SSD
- level gantry to 90° so kV detector is at floor
- place kV source at 100, 0, 0 & detector at 50, 0, 0
- in OBI Maintenance take an image using Single Pulse Full Resolution
- measure distance between 10 x 10 pair of lines in X & Y directions

technique:	Single Pulse Full Resolution				
kVp:	60	mA:	16.0	ms:	8.0

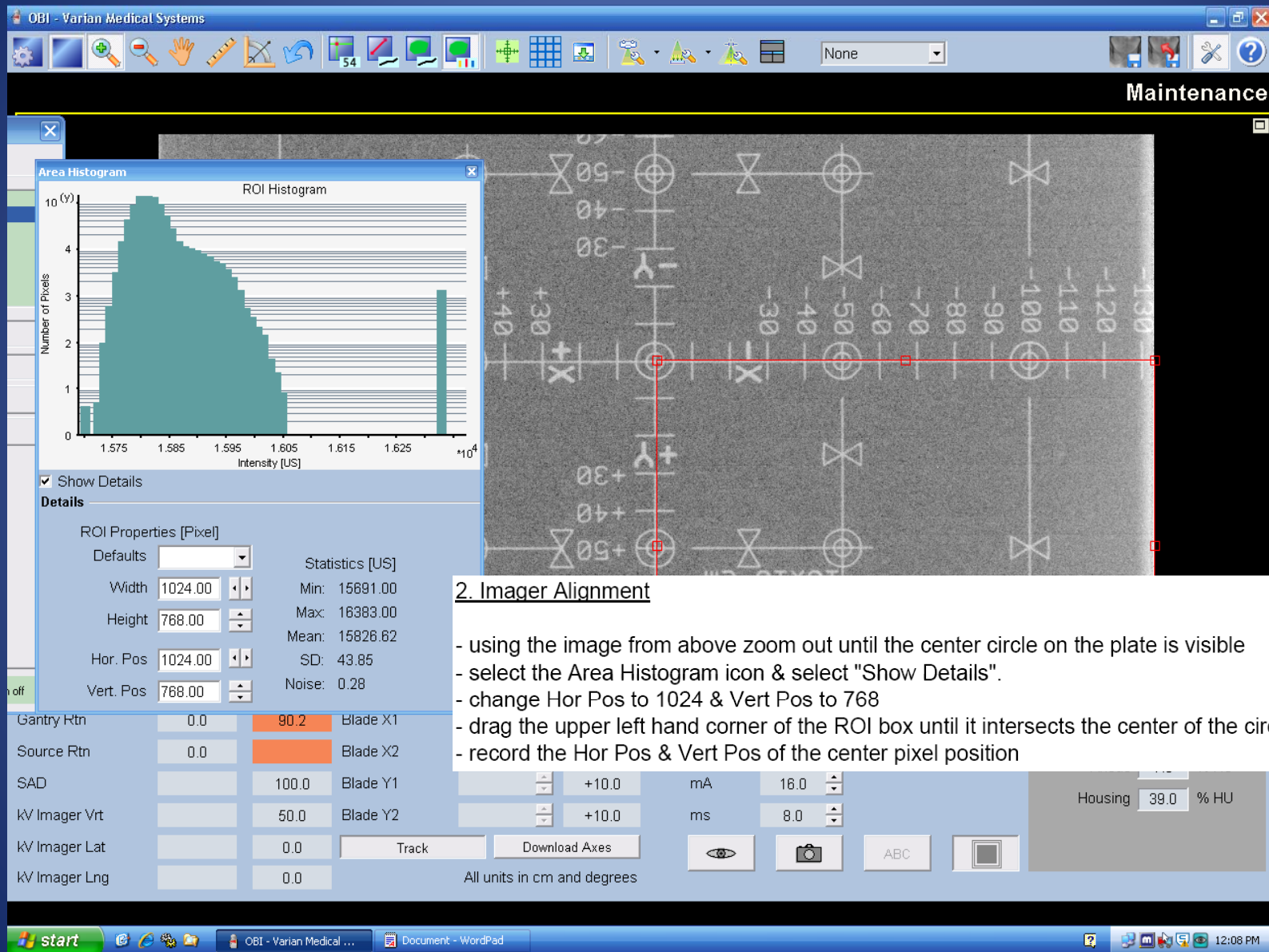
Direction	expected (cm)	measured (cm)	diff. (cm)	Pass/Fail (<0.2 cm)
X	10.0	9.98	0.02	Pass
Y	10.0	9.98	0.02	Pass

TG 142 tolerance
 ≤ 2 mm non SRS/SBRT
 ≤ 1 mm SRS/SBRT



Calibration plate should be accurately aligned to isocenter so the image may be used for the alignment test

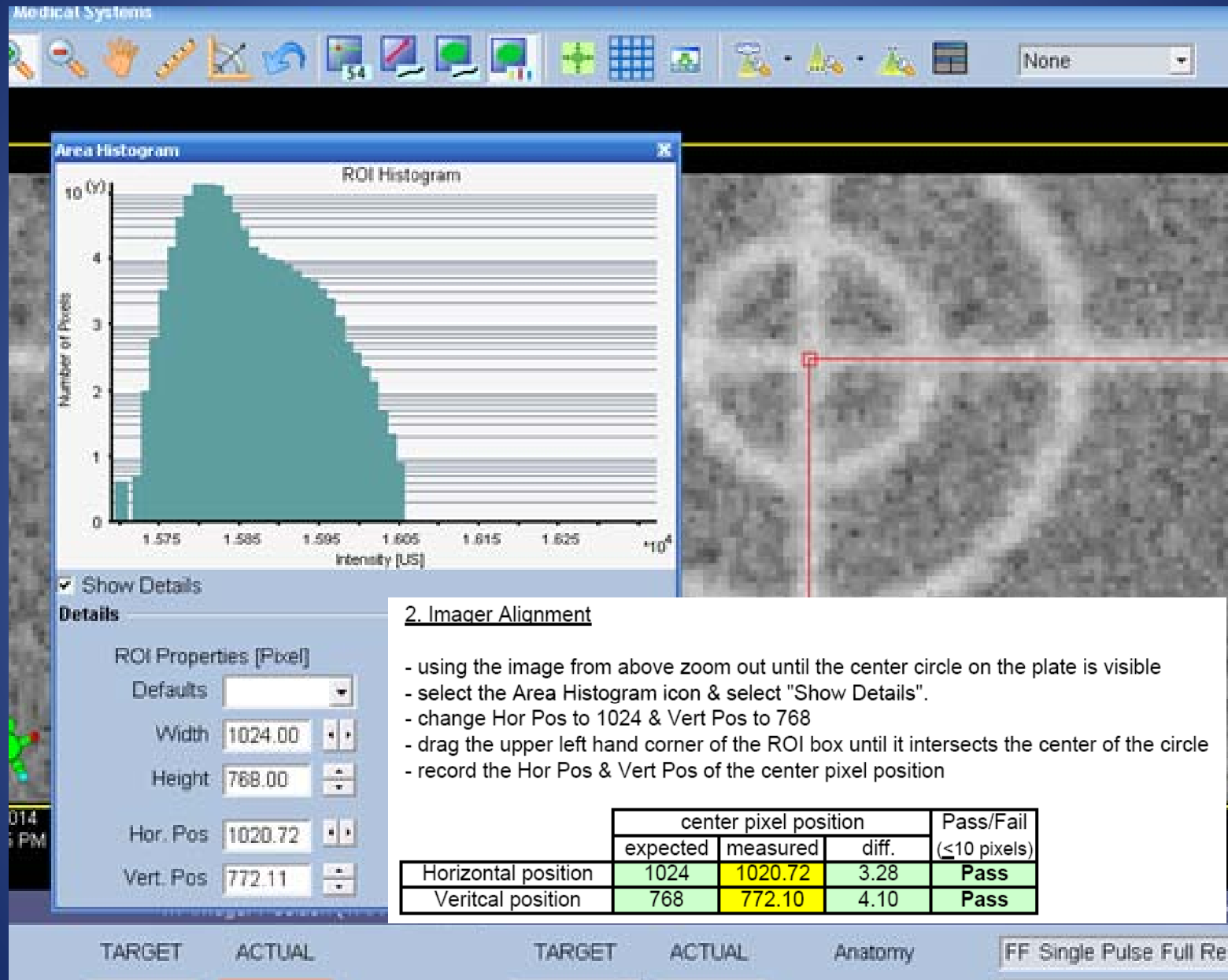
kV Imager Alignment



2. Imager Alignment

- using the image from above zoom out until the center circle on the plate is visible
- select the Area Histogram icon & select "Show Details".
- change Hor Pos to 1024 & Vert Pos to 768
- drag the upper left hand corner of the ROI box until it intersects the center of the circle
- record the Hor Pos & Vert Pos of the center pixel position

kV Imager Alignment



V. OBI Imaging & Treatment Isocenter Coincidence

- place Isocenter Cube tool on couch top at isocenter using lasers & crosshairs
- place kV source at 100, 0, 0 & detector at 50, 0, 0
- in OBI Maintenance take an images at four cardinal angles
- at each angle measured difference between center of steel ball & digital graticule

technique:	FF Last Image Hold				
kVp:	50	mA:	16.0	ms:	8.0

Gantry Angle	kV source Angle	difference (cm)	Pass/Fail (<0.15cm)
270	180	0.11	Pass
0	270	0.13	Pass
90	0	0.07	Pass
180	90	0.12	Pass



V. OBI Imaging & Treatment Isocenter Coincidence

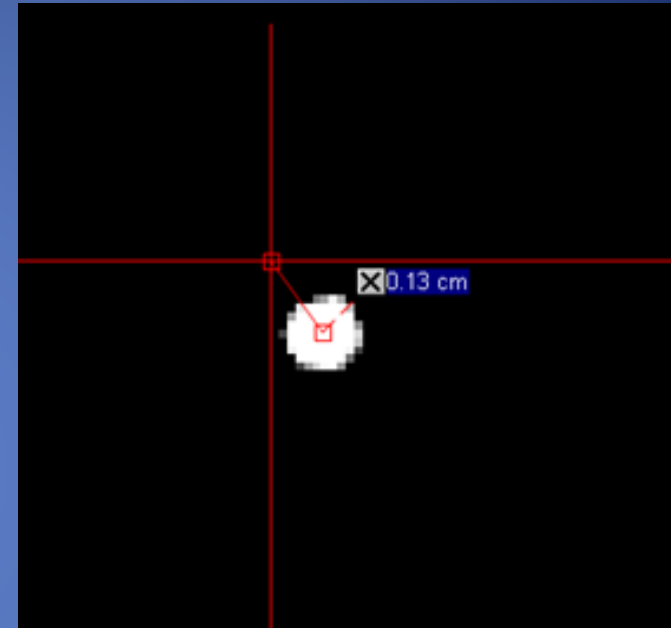
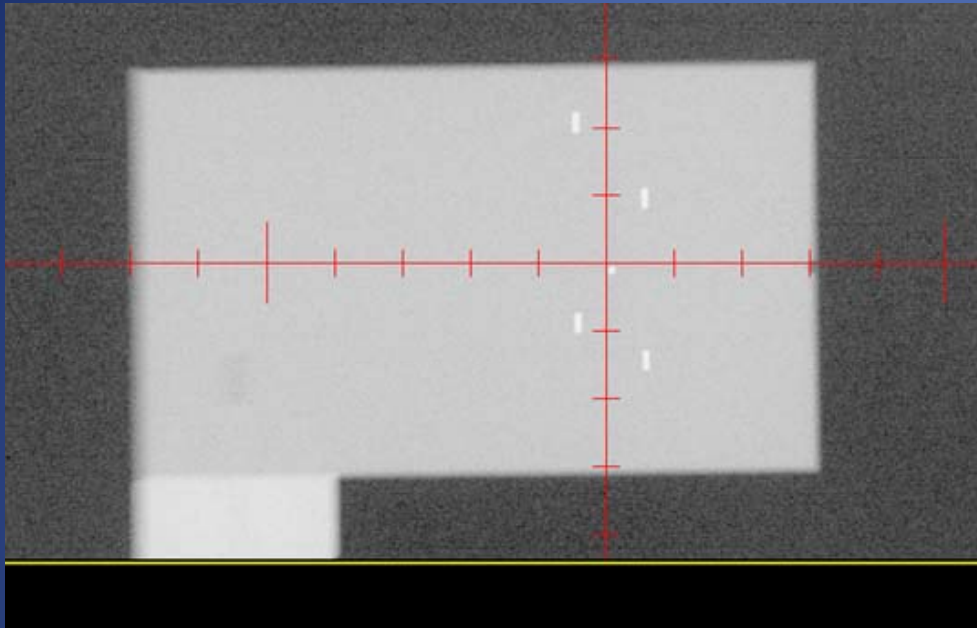


Image at all four cardinal angles

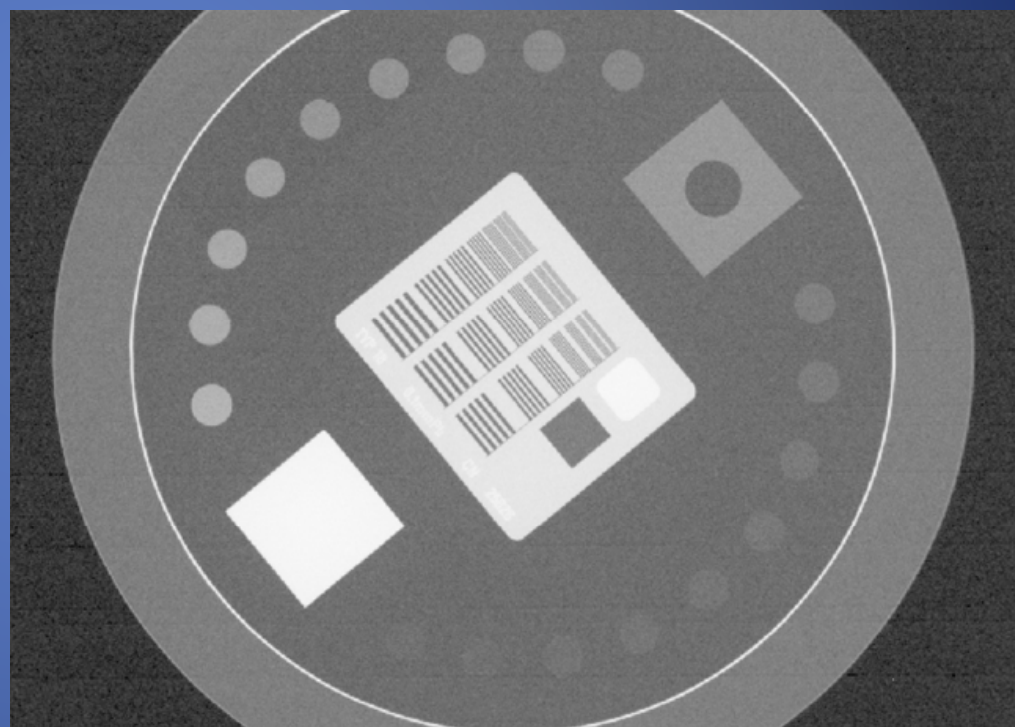
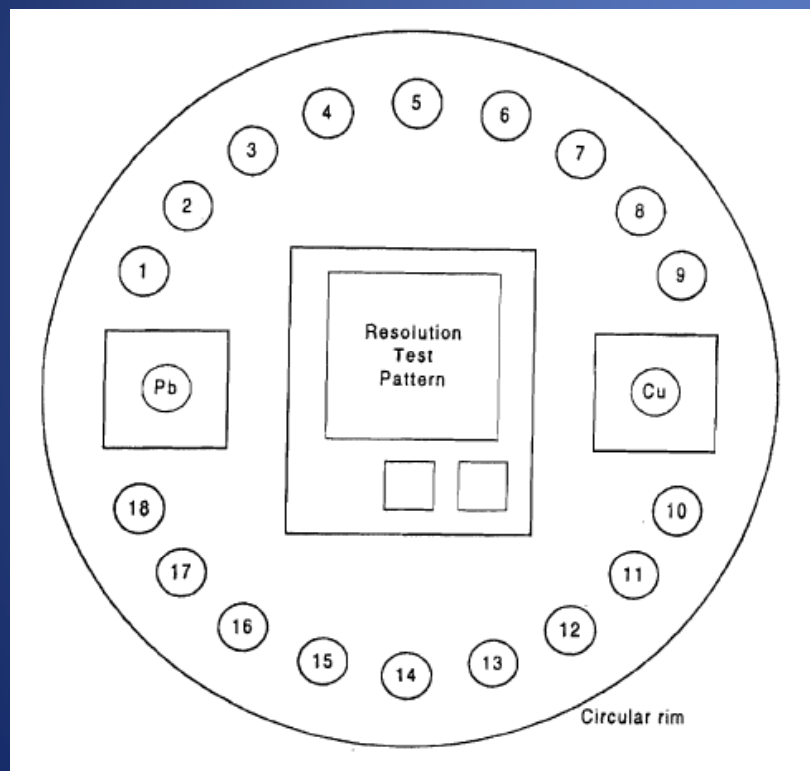
TG 142 tolerance
 ≤ 2 mm non SRS/SBRT
 ≤ 1 mm SRS/SBRT

Gantry Angle	kV source Angle	difference (cm)	Pass/Fail (≤ 0.15 cm)
270	180	0.11	Pass
0	270	0.13	Pass
90	0	0.07	Pass
180	90	0.12	Pass

OBI Monthly QA

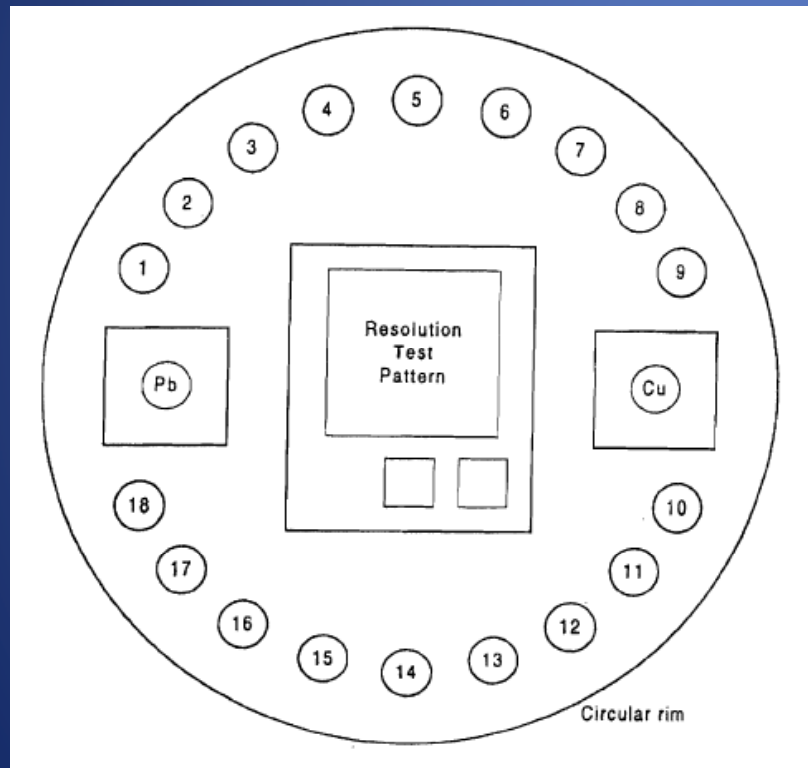
VI. Image Quality - Leeds Test Tool

1. High Contrast Resolution
2. Low Contrast Resolution



VI. Image Quality - Leeds Test Tool

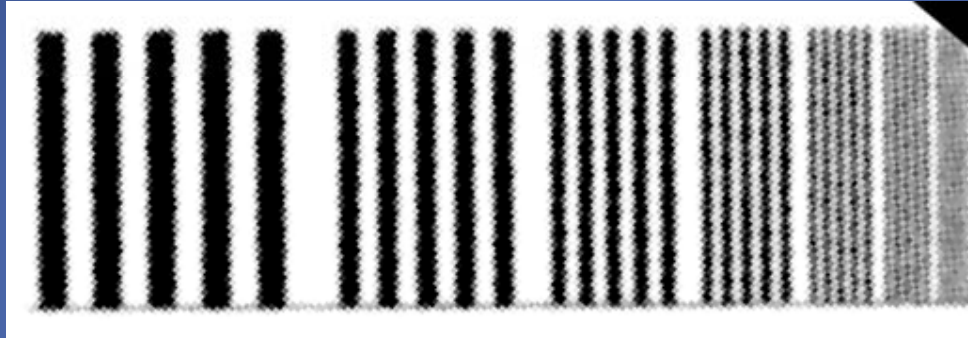
Leeds TOR 18FG Phantom



- 18 circular discs of 8 mm diameter with decreasing contrast used to assess low contrast resolution.
- Line pair test pattern centered in phantom to assess high contrast resolution.
- Measurement of low and high contrast resolution require different imaging techniques.

VI. Image Quality - Leeds Test Tool

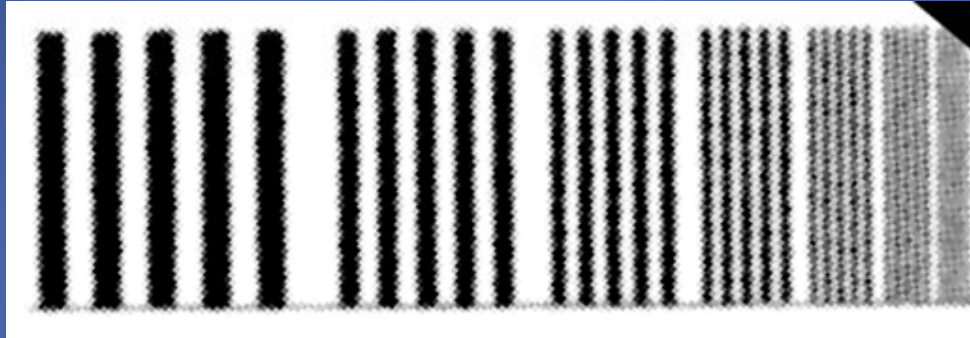
1. High Contrast Resolution



- High Contrast or Spatial Resolution describes the ability of an imaging system to separate (resolve) objects that are close together.

VI. Image Quality - Leeds Test Tool

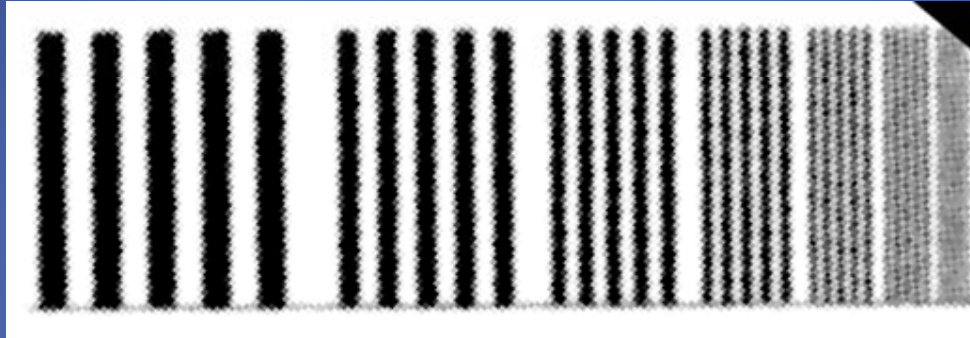
1. High Contrast Resolution



- High Contrast Resolution is measured by a line pair test pattern, a series of open spaces and Pb bars that repeat with increasing frequency.

VI. Image Quality - Leeds Test Tool

1. High Contrast Resolution

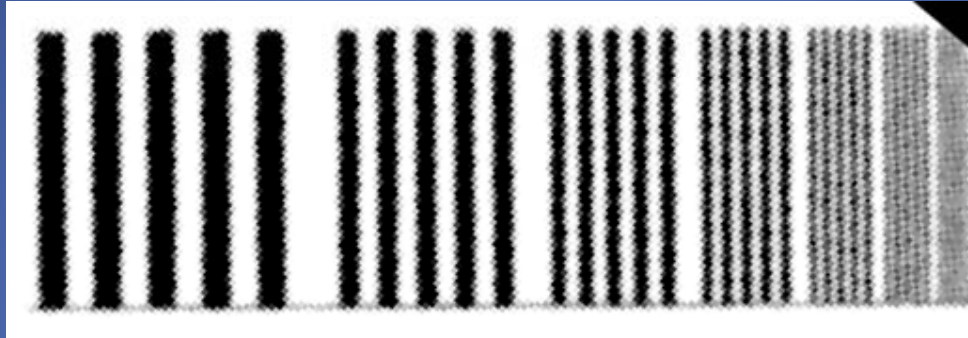


- The higher the spatial frequency (lp/mm) observed the greater the resolution.

Line pair (lp) = open space + Pb bar = 2 lines

VI. Image Quality - Leeds Test Tool

1. High Contrast Resolution



- Spatial frequency is analogous to object size or resolution as given by:

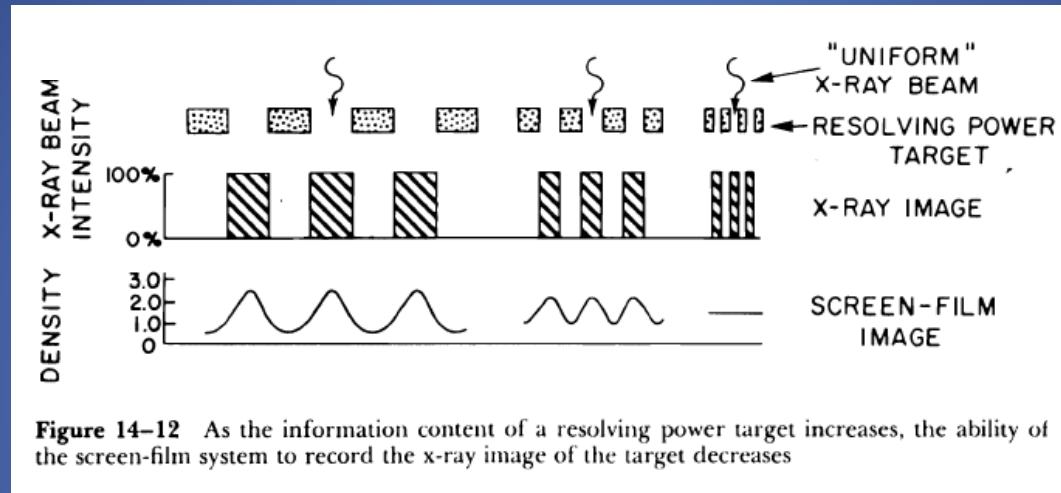
$$F = 1/(2\Delta) \text{ or } \Delta = 1/(2F) = 1/[2(\text{lp/mm}_{\text{obs}})]$$

where: Δ = object size resolved (mm)

F = spatial frequency or
of lp/mm observed

VI. Image Quality - Leeds Test Tool

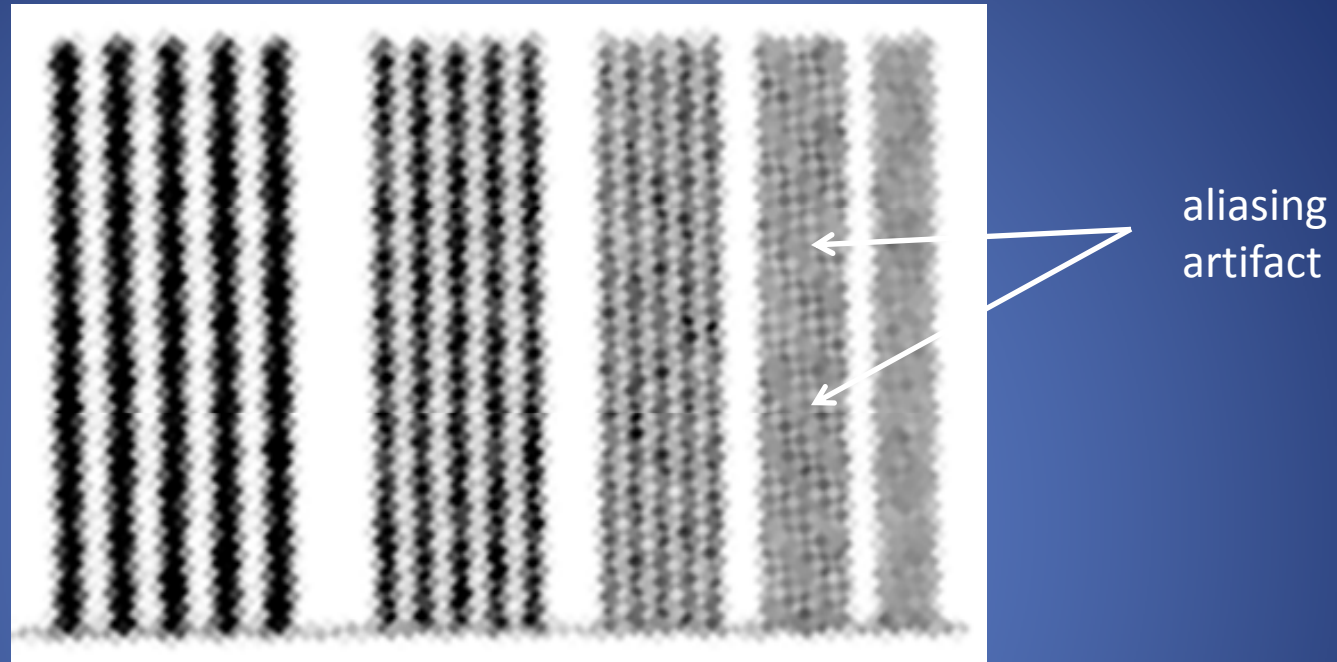
1. High Contrast Resolution



from Christensen's Physics of Diagnostic Radiology

- As spatial frequency increases the ability of the imaging system to record it decreases due to decreased image contrast between the objects.

High Contrast Resolution & Aliasing



- Digital images can exhibit aliasing due to undersampling of higher frequencies per the Nyquist limit.
- Aliasing results in the frequency wrapping back onto the image at a lower frequency appearing as a blurring or moire pattern.

VI. Image Quality - Leeds Test Tool

1. High Contrast Resolution

1. High Contrast Resolution

- place gantry to 90° so kV detector is at floor
- remove couch from beam path & remove any OBI filter
- place kV source at 100, 0, 0 & detector at 50, 0, 0
- place Leeds Test Tool on diagonal on detector cover
- image and window & level to resolve greatest lp/mm (see diagram)

technique:	Single Pulse Full Resolution				
kVp:	50	mA:	50.0	ms:	6.0



- Measurement of high contrast resolution requires the test pattern to be imaged under conditions of high contrast (low kVp) and low noise (increased exposure).
- Place the phantom at a diagonal to avoid interference with line rastering.

VI. Image Quality - Leeds Test Tool

1. High Contrast Resolution

- Magnify the resolution pattern
- Adjust window and level for the sharpest display.
- Adjust ambient lighting.
- Select highest lp/mm resolved.

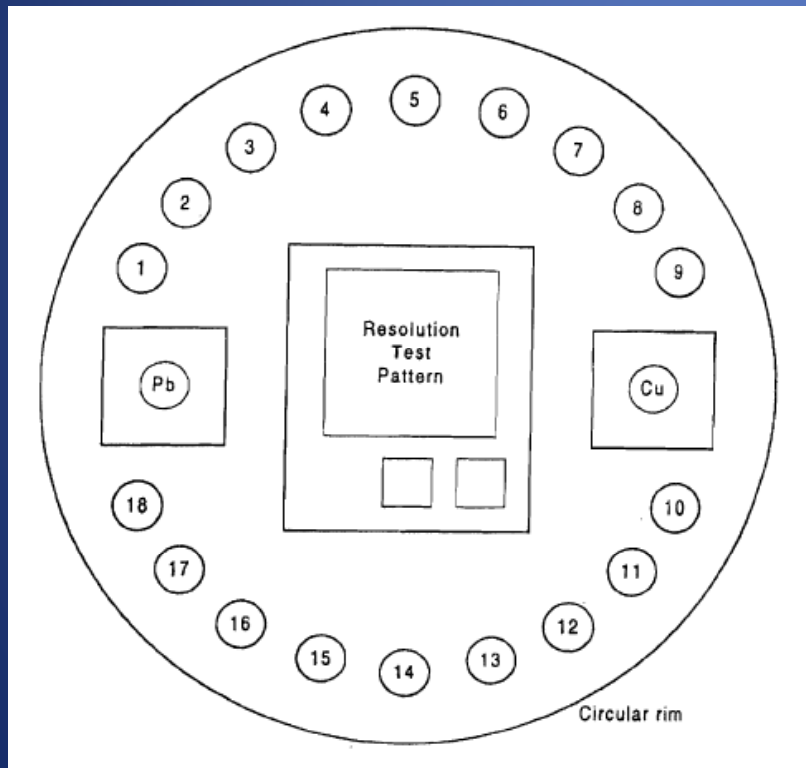


TG 142 tolerance
Baseline

VI. Image Quality - Leeds Test Tool

2. Low Contrast Resolution

Leeds TOR 18FG Phantom

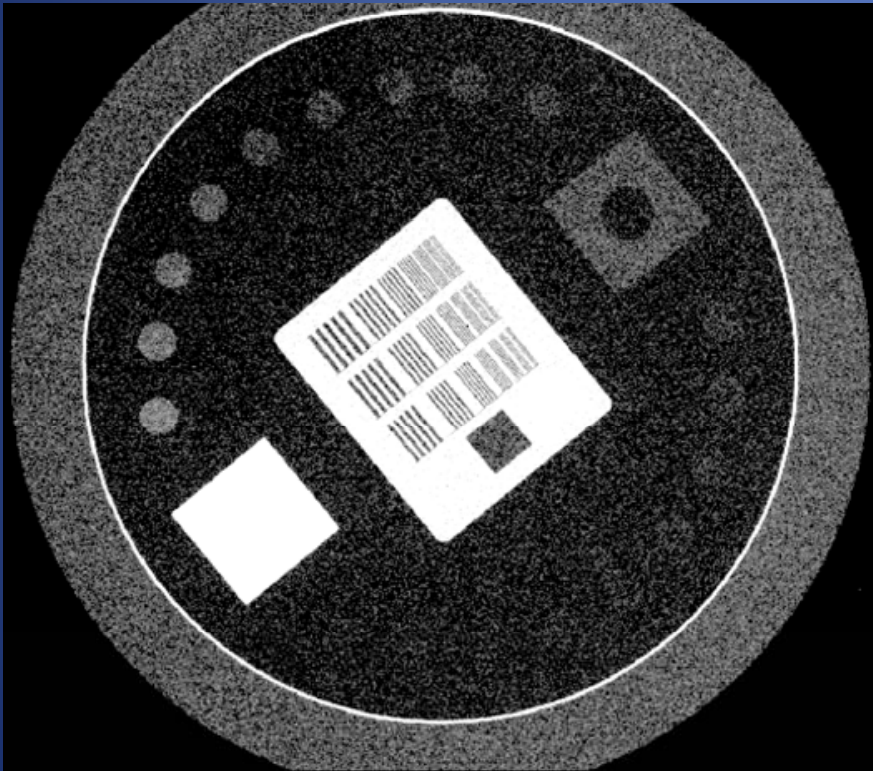


- 18 circular discs of 8 mm diameter with decreasing contrast used to assess low contrast resolution.
- Low contrast resolution is the ability to discern objects in an image that only slightly differ from each other (object & background).
- In other words, it is the ability to visualize grey on grey.

clinical example: the ability discern liver mets from normal liver on CT

VI. Image Quality - Leeds Test Tool

2. Low Contrast Resolution



- The ability to visualize low contrast objects is limited by the noise present in the image.
- Low contrast resolution is noise limited and Signal to Noise Ratio (SNR) dependent.

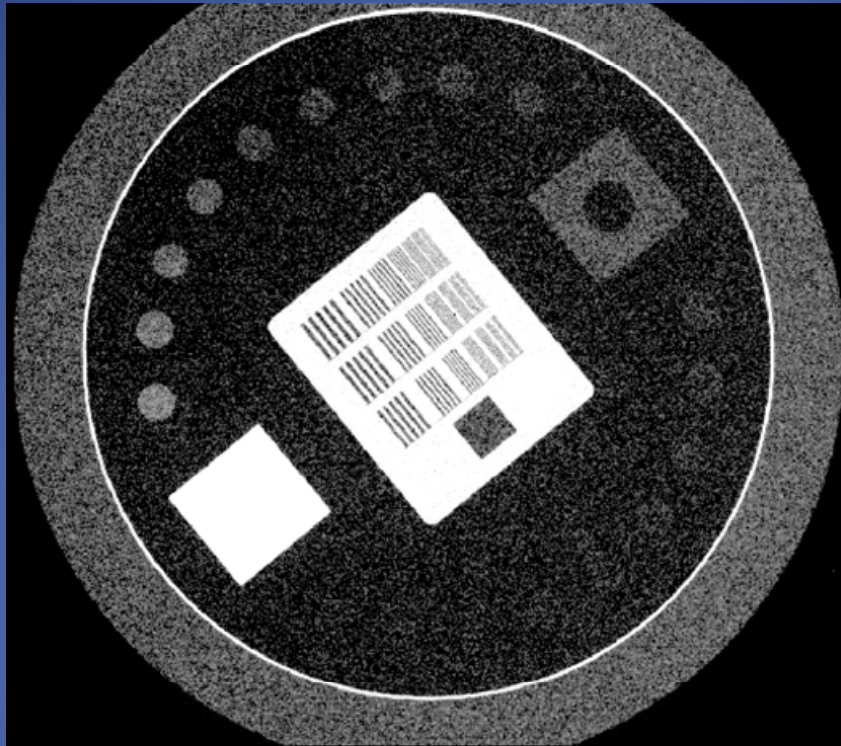
VI. Image Quality - Leeds Test Tool

2. Low Contrast Resolution



- 1 mm Cu filter at the x-ray tube and a higher kVp are used to create conditions of decreased contrast/signal from the phantom and increased noise.
- Resulting in a reduced SNR and a noisier image to assess low contrast resolution.

2. Low Contrast Resolution



TG 142 tolerance
Baseline

2. Low Contrast Resolution

- Use setup from above
- Attach 1mm Cu filter to kV source faceplate
- image and window & level to resolve the lowest contrast disc (highest disc # - see diagram)
- turn off lights & view from a distance, as necessary

technique:	Single Pulse Full Resolution				
kVp	85	mA	500	ms	40

Disc # resolved	12	Pass/Fail > 12	Pass
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CBCT Monthly QA

CBCT Monthly QA - Pelvis

by: **P Imbergamo** Date: **05/01/14**

Location: **SNR - Woonsocket, RI**
Unit: **21 EX** Serial #: **2811**

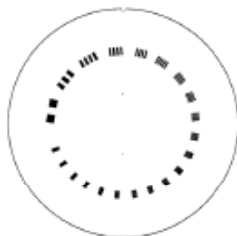
- center the CATPHAN phantom at isocenter
- Mode up a QA patient & perform standard pelvis head scans, per the following (DICOMRT - TESTPT_TT-OB-01357a - RP.3247.Catphan.dom)

Standard Pelvis Scan Technique

slice (mm):	2.5	FOV:	450	resolution:	384x384	fan:	half
filter:	body	kvp:	125	mA:	60	ms:	8519

I. High Contrast Resolution

- review the High Resolution Module & select the highest line pattern (1-21) that is resolved

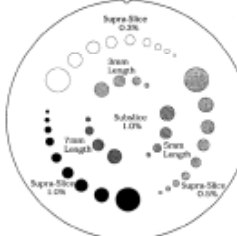


Window Range:	Bone				
Lp/cm resolved	4	mm resolved	1.25	Pass/Fail	Pass

Spec: at least 4 lp/cm (1.25 mm) resolved

II. Low Contrast Resolution

- review the Low Contrast Resolution Module
- record the # of holes resolved for the lowest % contrast level for the 1% Supra Slice targets



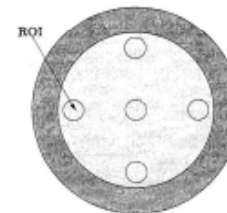
Window Range:	liver				
# of holes resolved	5	mm resolved	6.0	% Contrast resolved	1.0

Pass/Fail	Pass
-----------	------

Spec: 15 mm or less @ 1.0 % contrast

III. Noise and Uniformity

- review the Image Uniformity Module & record the mean CT# and std dev for the water
- use 20 x 20 Area Histogram - show details

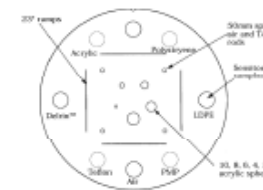


Spatial Uniformity & Noise			
Location	CT #	s	% Noise
Center	4.23	5.69	0.57
Top	4.83	7.35	0.74
Right	6.19	6.85	0.69
Bottom	6.83	6.20	0.62
Left	4.07	7.18	0.72
% SU:	0.276	Range:	Pass

Specification: Range: center +/- 40 HU

IV. CT# Constancy, Linearity & Contrast Scale

- review the Sensitometry Module & record the mean CT# for the material inserts listed



1. CT# Constancy & Linearity

Material	u	CT #	expected	diff	Pass/Fail
air	0.000	-994.37	-1000	-5.63	Pass
pmp	0.155	-183.12	-200	-16.88	Pass
ldpe	0.172	-92.53	-100	-7.47	Pass
poly	0.186	-38.33	-35	3.33	Pass
acrylic	0.214	128.39	120	8.39	Pass
derin	0.243	348.94	340	8.94	Pass
teflon	0.359	978.55	990	11.45	Pass

2. Contrast Scale

CT# H ₂ O	4.23	CT# air	-994.37
CS (meas)	1.81E-04	CS	1.90E-04
% Diff:	-4.60%		

- Specifications:
- Plot should be linear with an R² value close to 1.0
 - Measured & theoretical contrast scale should not differ significantly
 - measured CT# & expected difference < 40 HU

V. Spatial Linearity Accuracy

Measure distance between small rods in center of CT # Constancy Image above

	Measured	Expected	Diff	% Diff	Pass/Fail
Horizontal	4.96	5.00	-0.04	0.8%	Pass
Vertical	4.96	5.00	-0.04	0.8%	Pass

spec: accurate to w/in 1%

CBCT Monthly QA

- I. High Contrast Resolution
- II. Low Contrast Resolution (pelvis scan only)
- III. Uniformity and Noise
- IV. CT# Constancy, Linearity, & Contrast Scale
- V. Spatial Linearity Accuracy

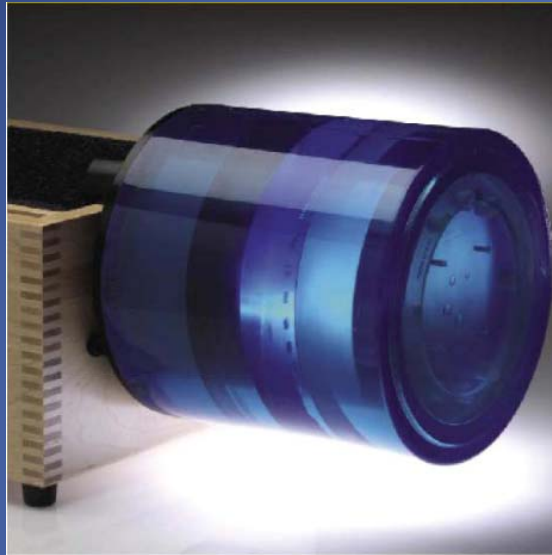
Cone Beam Computed Tomography

- Elekta and Varian both offer gantry mounted CBCT systems comprised of a kV x-ray source and flat panel detector that share a common isocenter with the MV beam.
- Both systems utilize full (360°) rotation and partial angle scans.
- Bow tie filters are used to attenuate the edges of the kV beam.

TABLE I. Relevant scan parameters for each system. For acquisition angle, cw means clockwise and ccw means counterclockwise rotation during image acquisition, as viewed from the patient table. The OBI can acquire images rotating either direction and chooses based on current gantry position. On the XVI, F0 is the designation for no filter and F1 is the designation for a full bowtie filter.

Scan site	XVI			OBI		
	Head	Chest	Pelvis	Head	Chest	Pelvis
kV collimator	S20	M20	M10	–	–	–
kV filter	F0	F1	F1	Full bowtie	Half bowtie	Half bowtie
kVp	100	120	120	100	110	125
mA	10	40	64	20	20	80
ms/projection	10	40	40	20	20	13
No. of projections	361	643	643	360	655	655
Total mA s	36.1	1028.8	1646.1	145	262	680
Acquisition angle	350°–190° cw	273°–269° cw	273°–269° cw	88°–292° cw/ccw	88°–92° cw/ccw	88°–92° cw/ccw
Acquisition time (s)	~70	~120	~120	~30	~60	~60
Axial field of view (cm)	27	41	41	25	45	45
Long. field of view (cm)	26	26	12.5	18	16	16

CBCT Monthly QA - Catphan



Diagrams taken from Catphan manuals, which are all available online.

Catphan Phantom Family

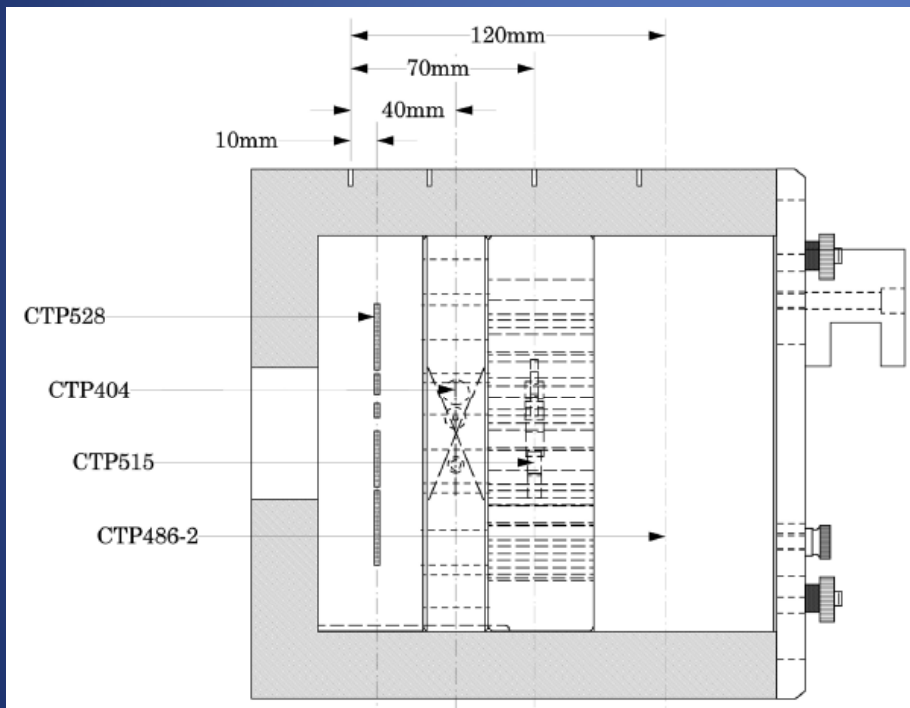
Catphan	M1	M2	M3	M4	M5	
503	404	528	486			Elekta
504	528	404	515	486-2		Varian
600	404	591	528	515	486	Siemens

Module Inserts

Slide provided by Mark Wiesmeyer of
Standard Imaging

CBCT Monthly QA

Catphan 504



Phantom composed of different test modules

- CTP528: High Contrast Resolution
- CTP404: CT# Constancy & Linearity, Contrast Scale, & Spatial Linearity Accuracy
- CTP515: Low Contrast Resolution
- CPT486-2: Uniformity and Noise

CBCT Monthly QA



- Setup and center the phantom at isocenter.
- All imaging qa may be acquired in one scan if the longitudinal FOV covers the phantom.

CBCT Monthly QA

- One scan at pelvis technique & bow tie filter

Standard Pelvis Scan Technique

slice (mm):	2.5	FOV:	450	resolution:	384x384	fan:	half
filter:	body	kVp:	125	mA	80	ms:	8619

- One scan at standard dose head technique & bow tie filter

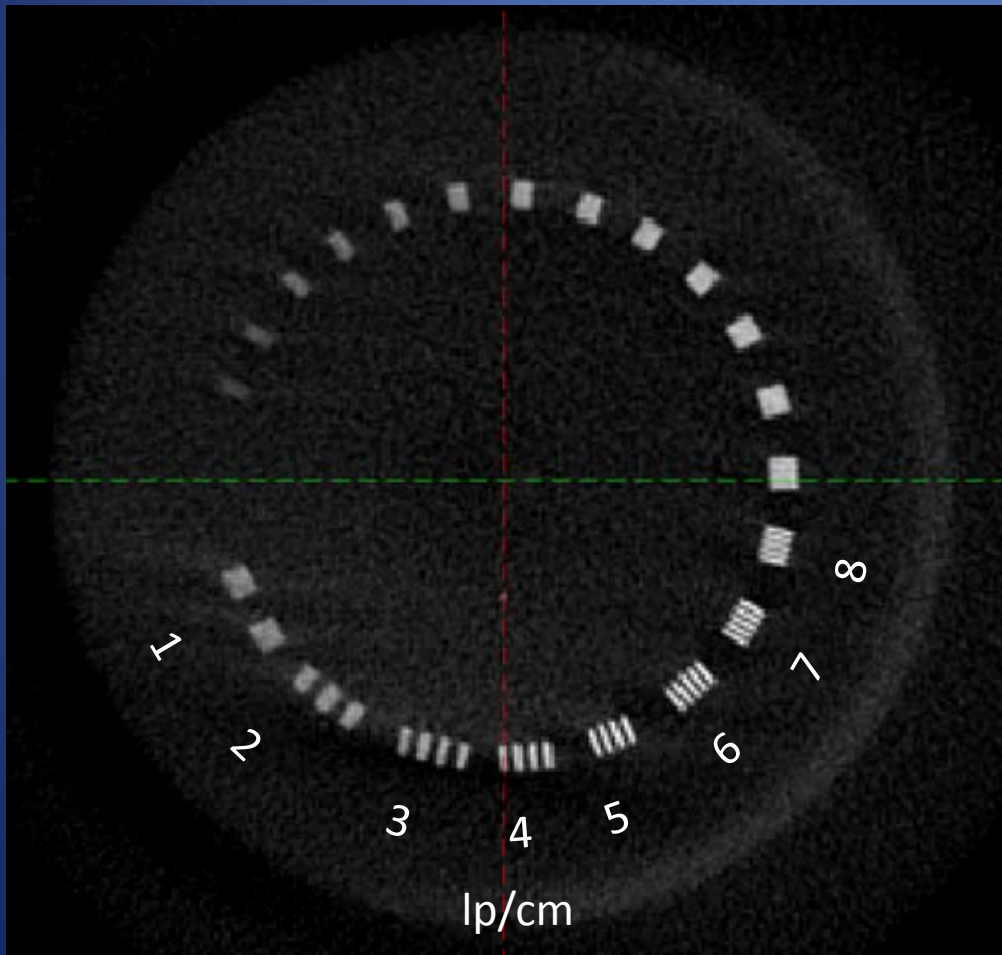
Standard Dose Head Scan Technique

slice (mm):	2.5	FOV:	250	resolution:	384x384	fan:	full
filter:	head	kVp:	100	mA	20	ms:	7480



CBCT Monthly QA

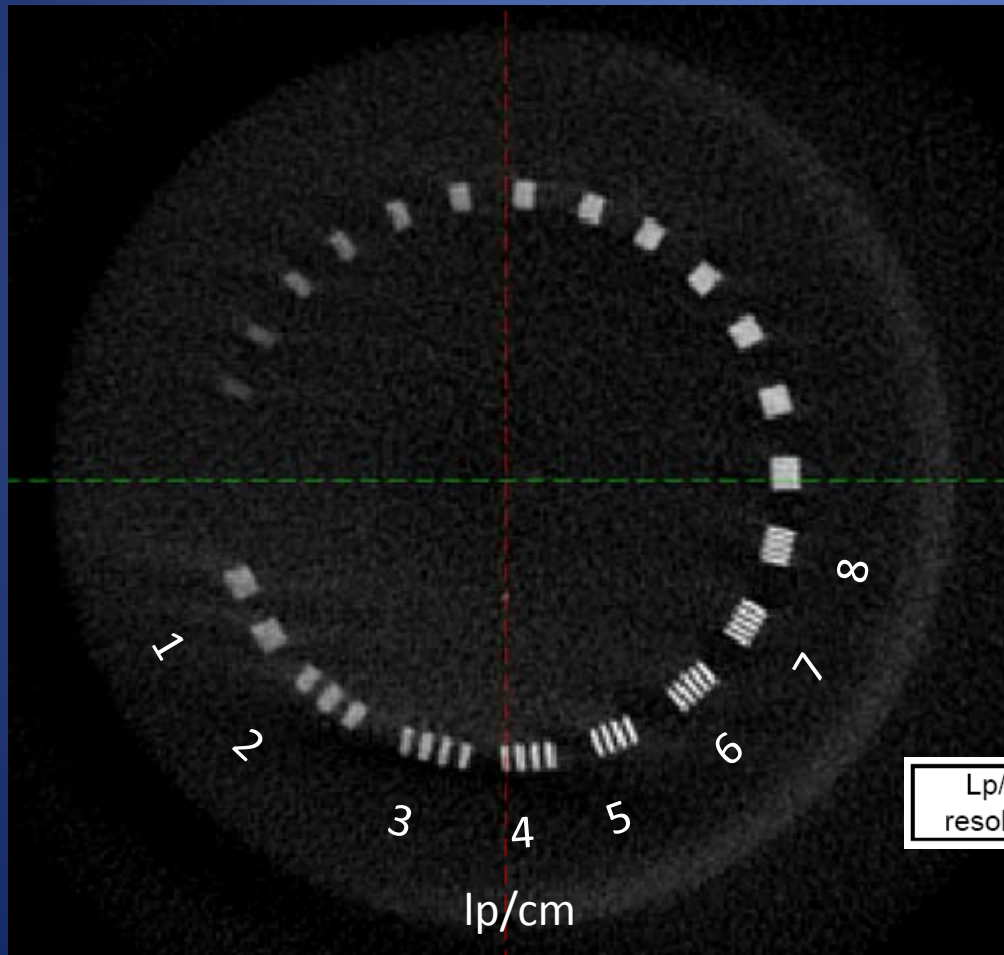
I. High Contrast Resolution



- CTP528: High Contrast Resolution module
- Array of increasing lp/cm test patterns (1 -21 lp/cm)
- Select “bone window” and adjust for sharpest display
- Magnify as necessary and select highest lp/cm resolved

CBCT Monthly QA

I. High Contrast Resolution



- Image analysis is the same for CBCT high contrast resolution as that of the OBI.

$$\Delta = 1/(2F) = 1/[2(lp/cm_{obs})]$$

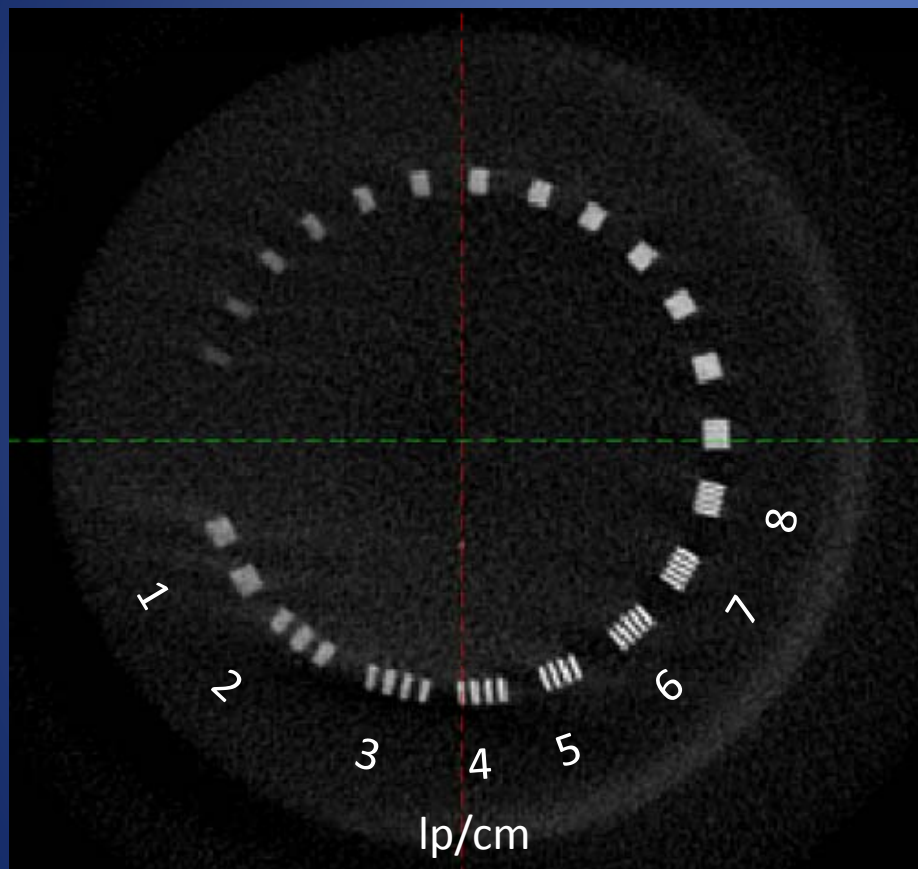
where: $\Delta \times 10$ = object size resolved (mm)

F = spatial frequency or
of lp/cm observed

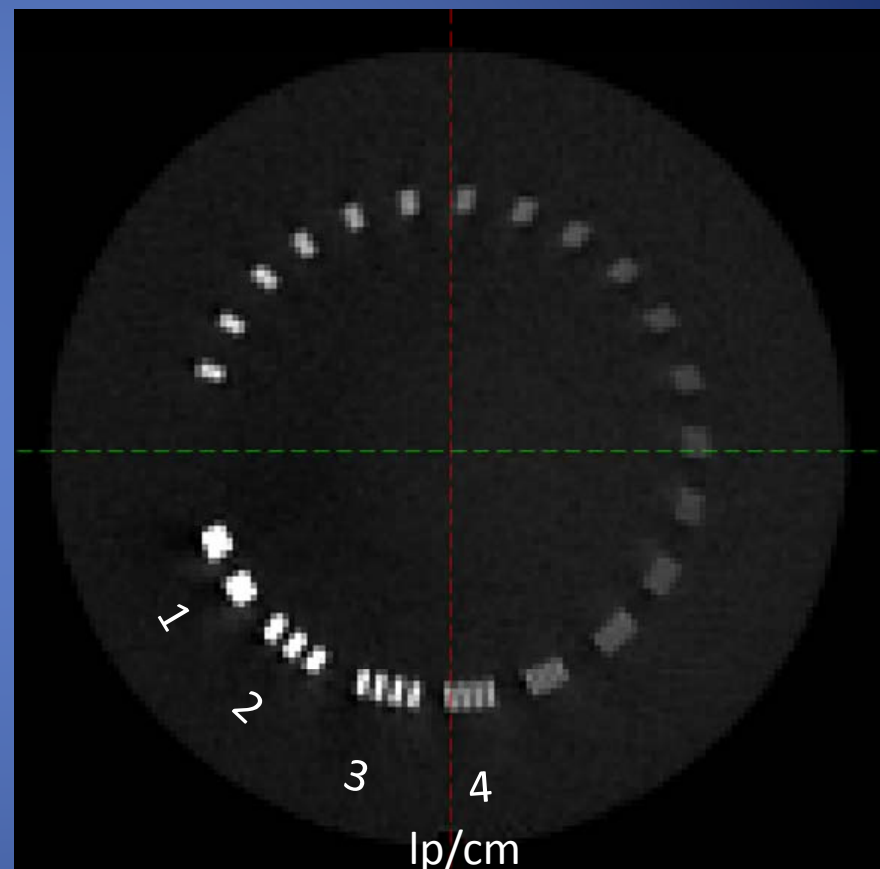
Lp/cm resolved	8	mm resolved	0.63	Pass/Fail ≥ 6 lp/cm	Pass
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CBCT High Contrast Resolution

Head vs Pelvis Scan



Standard-Dose Head



Pelvis

CBCT High Contrast Resolution

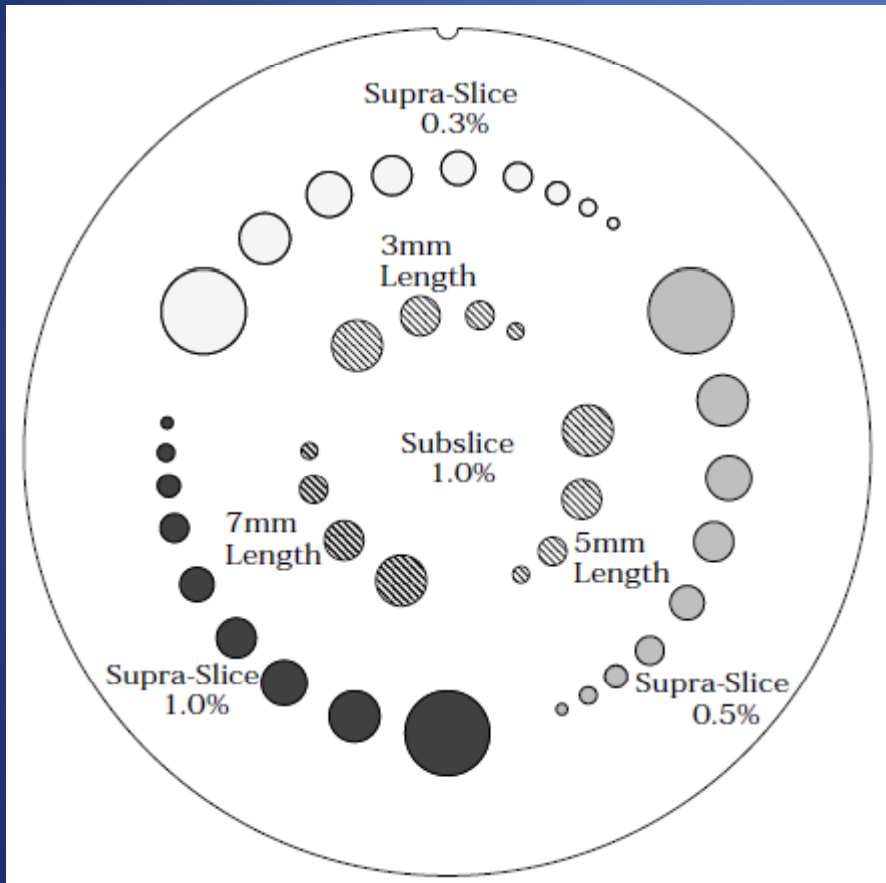
Head vs Pelvis Scan

- High contrast or spatial resolution is greater for the head scan due to pixel size
- Varian uses a default matrix of 384 x 384
- Axial Field of View
 - Standard Head: 250 mm
 - Pelvis: 450 mm
- Varian acceptance specification
 - Standard Head: ≥ 6 lp/cm
 - Pelvis: ≥ 4 lp/cm

TG 142 tolerance
Baseline

CBCT Monthly QA

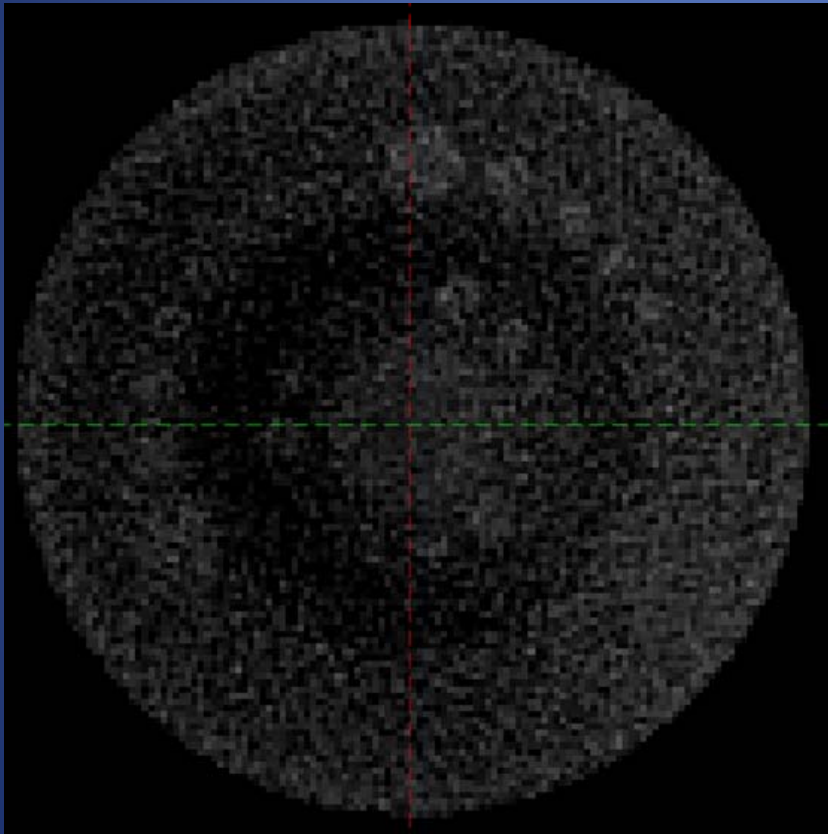
II. Low Contrast Resolution



- CTP515: Low Contrast Resolution module
- Array of discs with decreasing diameters at different contrast levels (Supra-slice)
- Disc diameters decrease from 15 mm to 2 mm

CBCT Monthly QA

II. Low Contrast Resolution

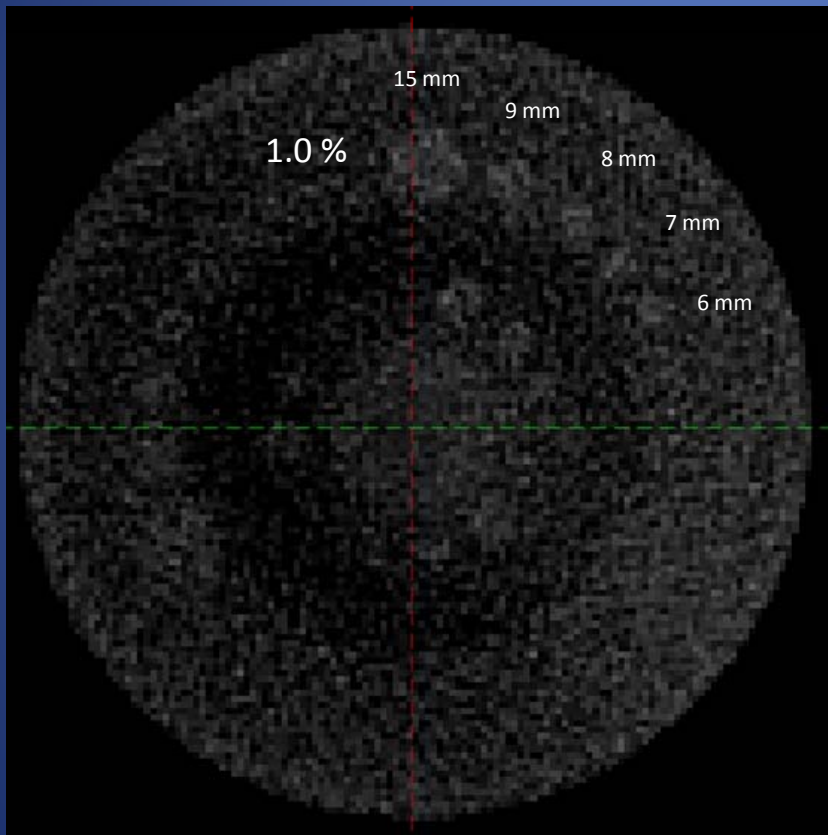


Pelvis Scan Technique

- The same conditions for low contrast resolution discussed for the OBI apply.
- ***Low contrast resolution is noise limited and SNR dependent.***
- Since the Standard Head scan is a low dose (mAs) technique this test does not apply.
- Pelvis scan only.

CBCT Monthly QA

II. Low Contrast Resolution



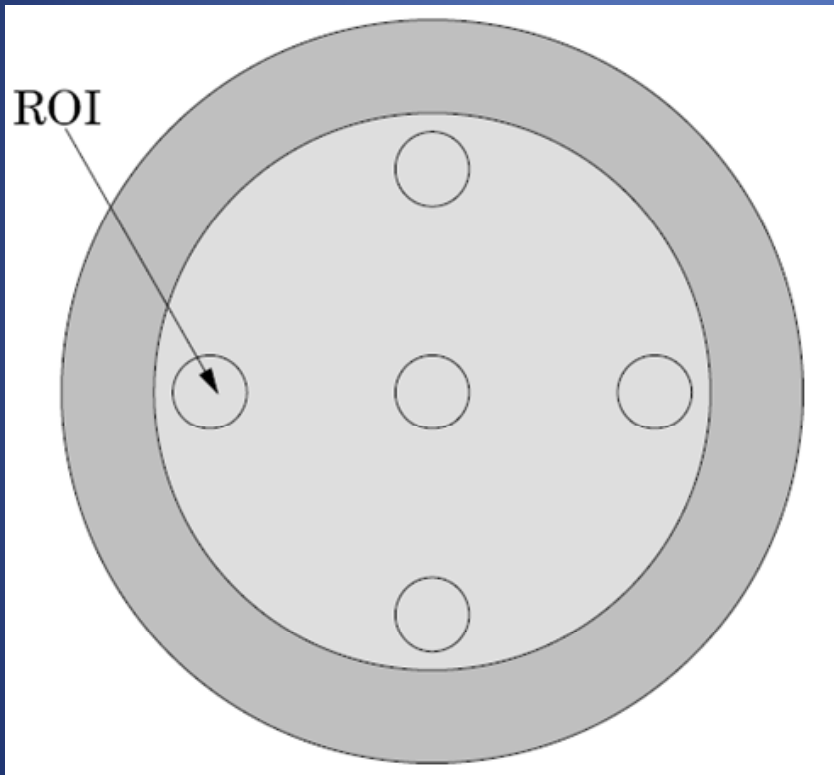
TG 142 tolerance
Baseline

- Dim or turn off room lights and view from a distance as necessary.
- Use a low contrast window setting such as liver or abdomen, and adjust as needed.
- Select smallest disc visible.

# of holes resolved	4	mm resolved	7.0	%Contrast resolved	1.0
		Pass/Fail ≤ 15 mm	Pass		
Spec: 15 mm or less @ 1.0 % contrast					

CBCT Monthly QA

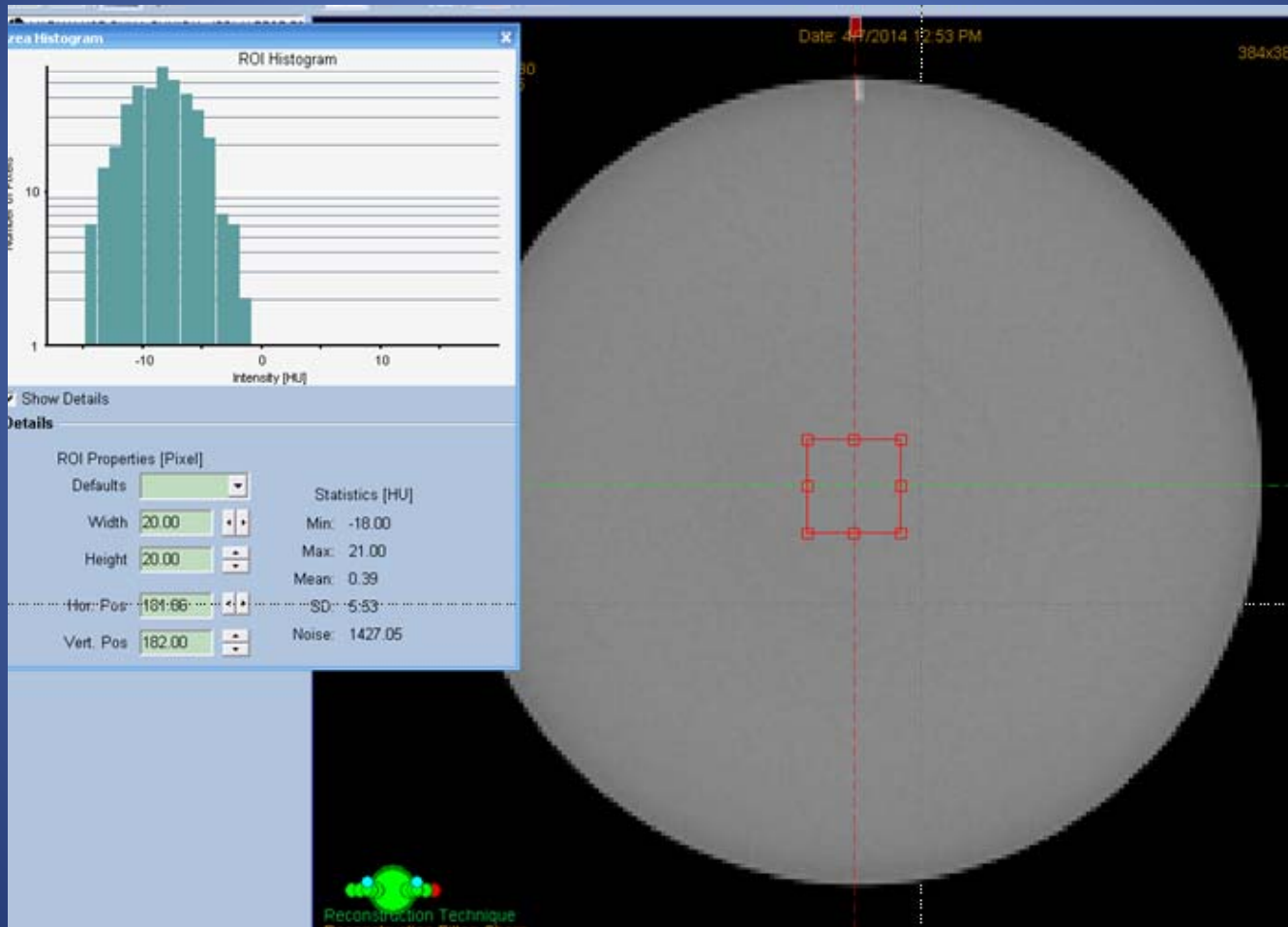
III. Uniformity & Noise



- CTP486-2: Image Uniformity module
- Uniform material designed to be within 2% (20 HU) of water's density.

CBCT Monthly QA

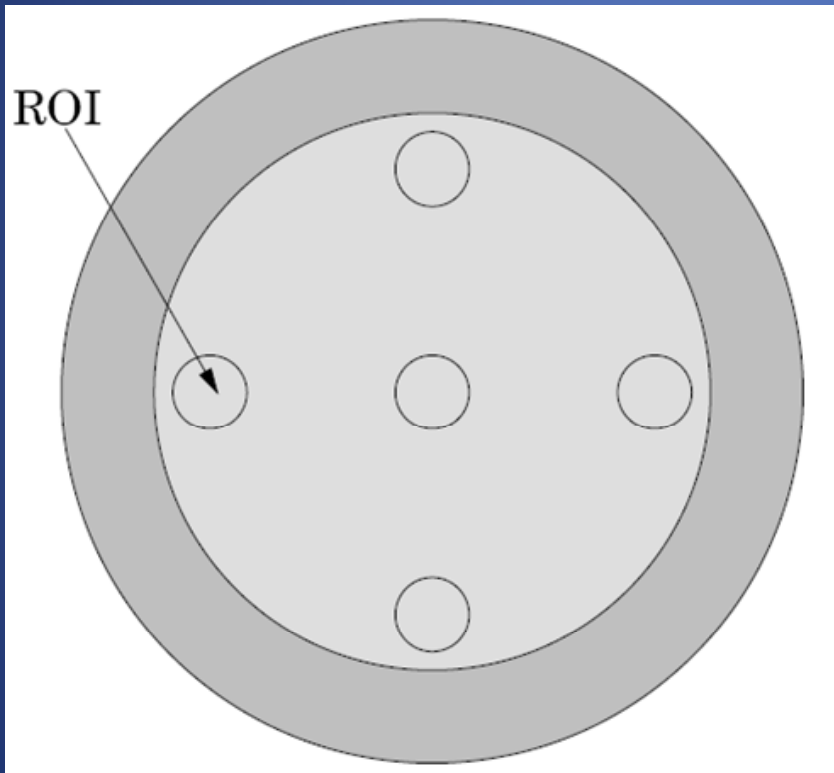
III. Uniformity & Noise



CTP486-2: Image Uniformity module

CBCT Monthly QA

III. Uniformity & Noise



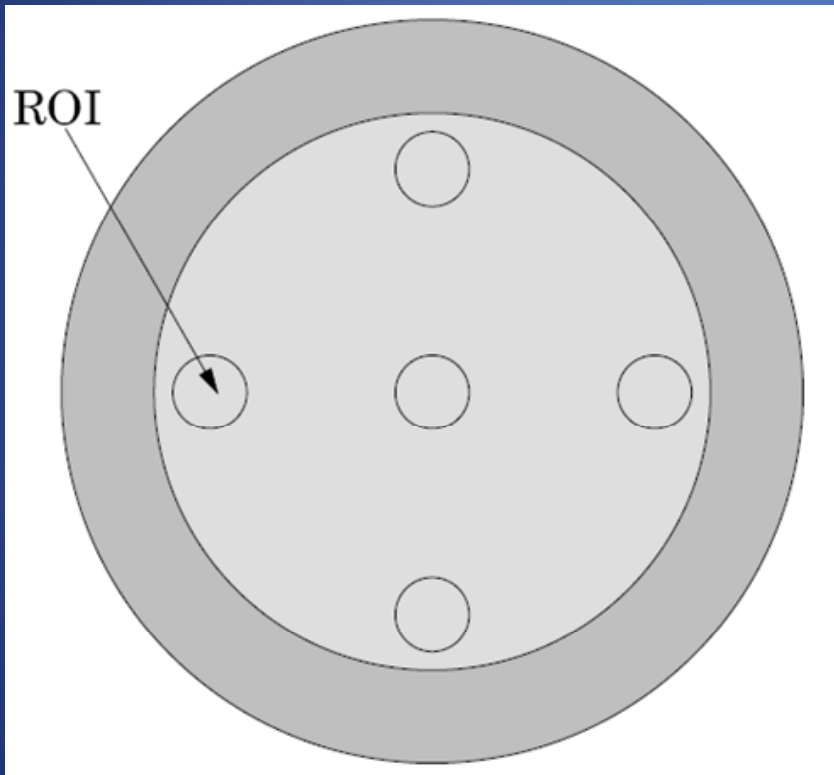
Spatial Uniformity & Noise			
Location	CT #	s	% Noise
Center	4.23	5.69	0.57
Top	4.83	7.35	0.74
Right	6.19	6.85	0.69
Bottom	6.83	6.20	0.62
Left	4.07	7.18	0.72
% SU:	0.276	Range:	Pass

Specification: Range: center +/- 40 HU

- Record the mean CT # & std dev for center & peripheral locations
- Use suitably sized ROI (20x20)
- Use center slice of module
- Avoid crescent shape artifact on head scans

CBCT Monthly QA

III. Uniformity & Noise

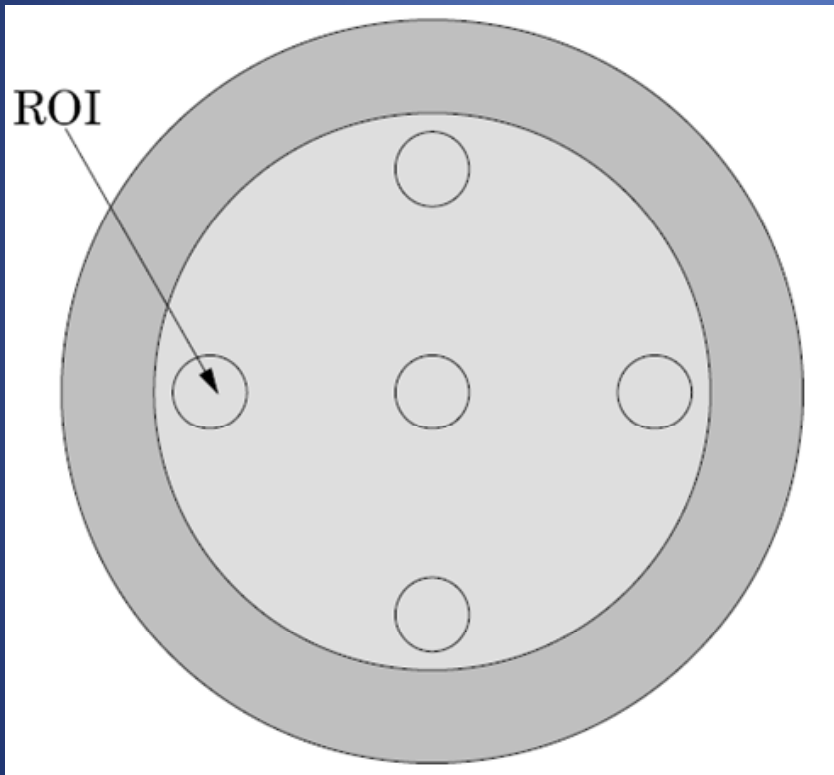


- % Spatial Uniformity is an expression of the maximum contrast of the ROI's measured.
- $\% \text{ SU} = (\text{CT\#}_{\text{max}} - \text{CT\#}_{\text{min}}) / 10$
- Should be $< 3\%$
- Varian spec: range $\pm 40 \text{ HU}$ from the center ROI HU

TG 142 tolerance
Baseline

CBCT Monthly QA

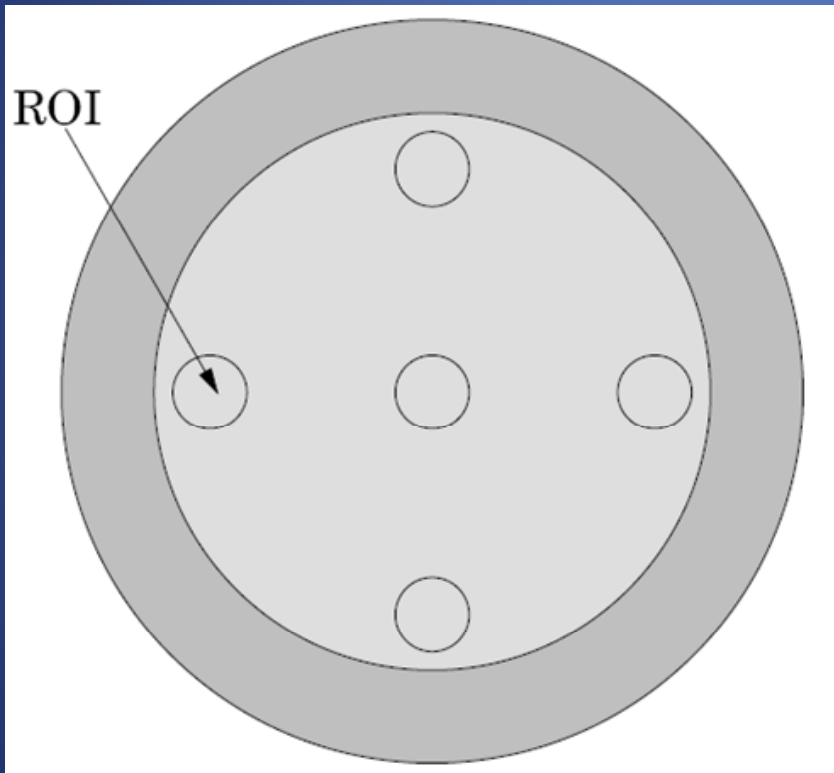
III. Uniformity & Noise



- As stated previously noise limits the visibility of low contrast detail.
- Noise in CT is the standard deviation of CT# (σ) expressed as a % of the linear attenuation coefficient of H₂O (μ_w) corrected for contrast scale (CS).
- % Noise $\approx (\sigma \cdot CS \cdot 100) / \mu_w$

CBCT Monthly QA

III. Uniformity & Noise

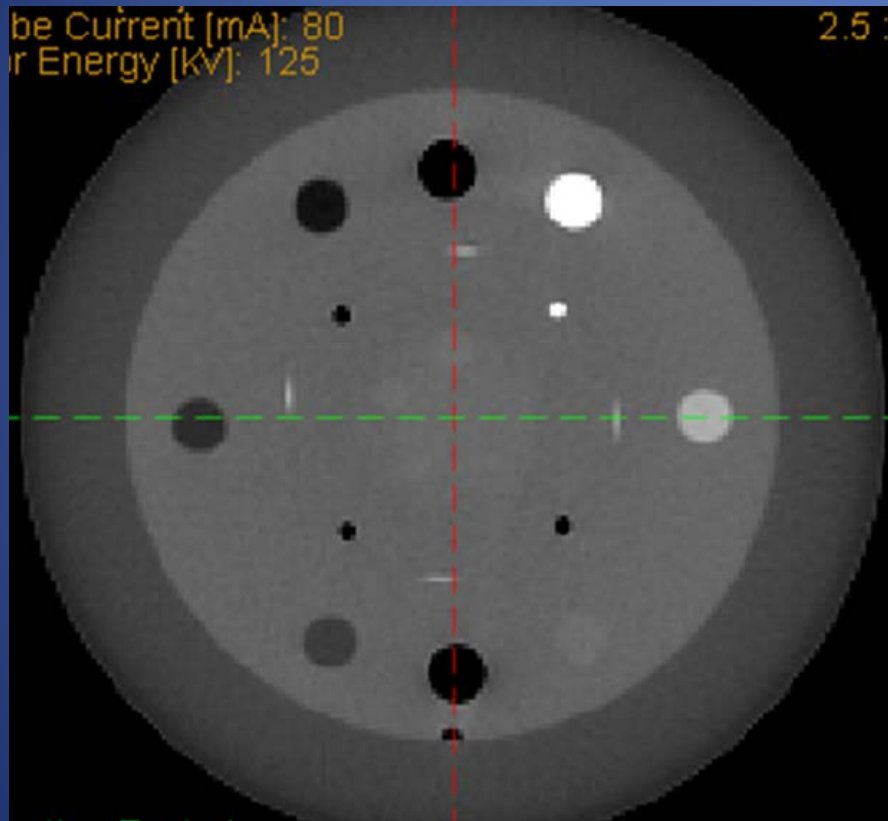


- Contrast Scale (CS) is the change in linear attenuation coefficient per CT# relative to that of H₂O.
- $CS \approx 1.9 \times 10^{-4} \text{ CT\#/cm}^{-1}$ & $\mu_w \approx 0.19 \text{ cm}^{-1}$ for CT kVp ≈ 120 so,
- $\% N \approx (\sigma \cdot CS \cdot 100) / \mu_w$
 $\% N \approx \sigma / 10$
- % Noise should be $\approx 1.0 \%$ for the pelvis scan and $\approx 3.0 \%$ for the head scan due to lower mAs used.

TG 142 tolerance
Baseline

CBCT Monthly QA

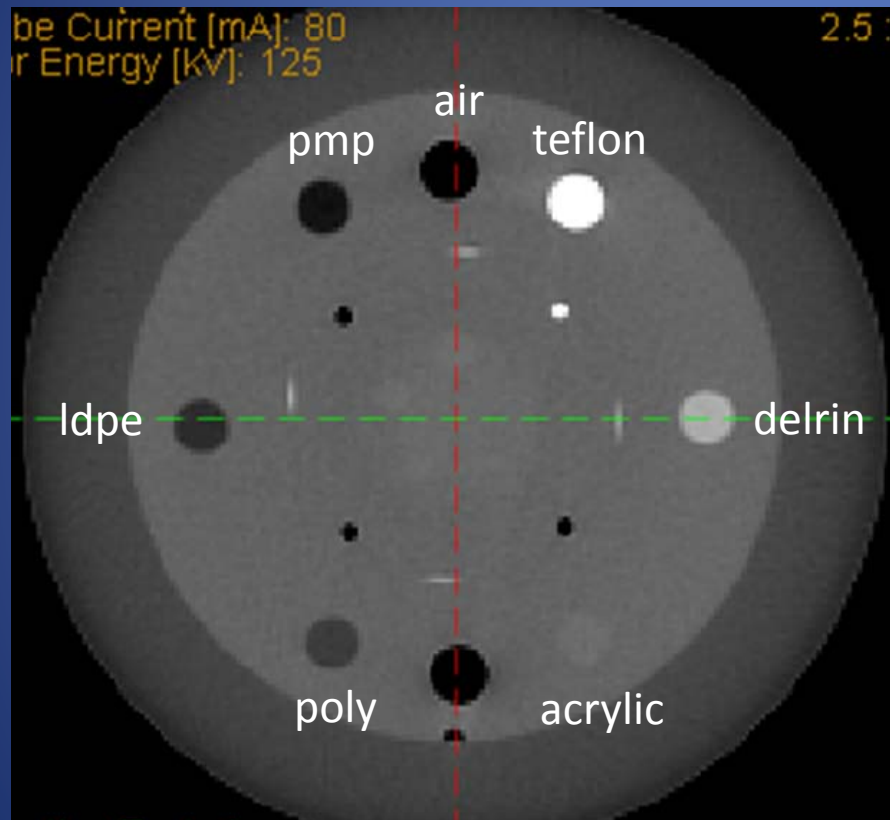
IV. CT# Constancy, Linearity, & Contrast Scale



- CTP404 module
- Seven sensitometric targets used to assess:
 1. CT# Constancy & Linearity
 2. Contrast Scale

VI. CT# Constancy, Linearity, & Contrast Scale

1. CT# Constancy & Linearity

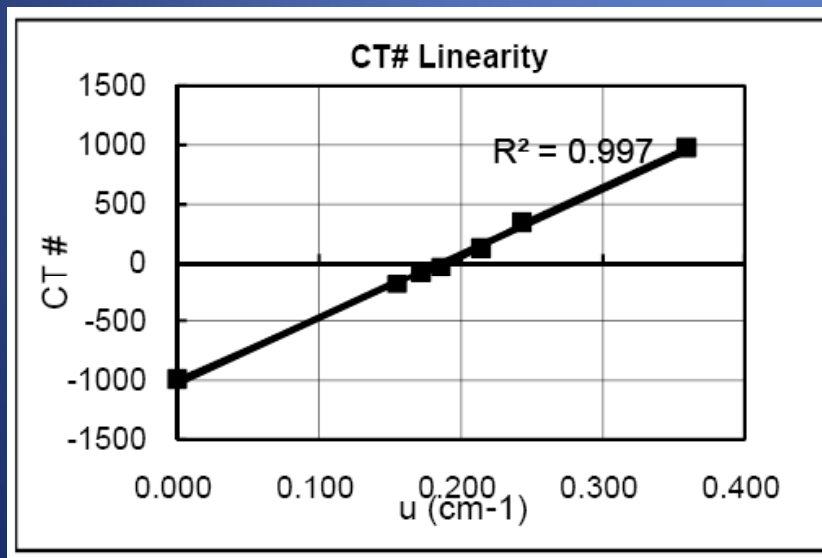


- Use center of the module to avoid partial volume effect.
(4 wire ramps centered symmetrically in image)
- Window & level to visualize targets
- Draw ROI within target
- Measure CT# of the ROI of each target

VI. CT# Constancy, Linearity, & Contrast Scale

1. CT# Constancy & Linearity

Material	μ	CT #	expected	diff	Pass/Fail
air	0.000	-994.37	-1000	-5.63	Pass
pmp	0.155	-183.12	-200	-16.88	Pass
ldpe	0.172	-92.53	-100	-7.47	Pass
poly	0.186	-38.33	-35	3.33	Pass
acrylic	0.214	128.39	120	-8.39	Pass
delrin	0.243	346.94	340	-6.94	Pass
teflon	0.359	978.55	990	11.45	Pass

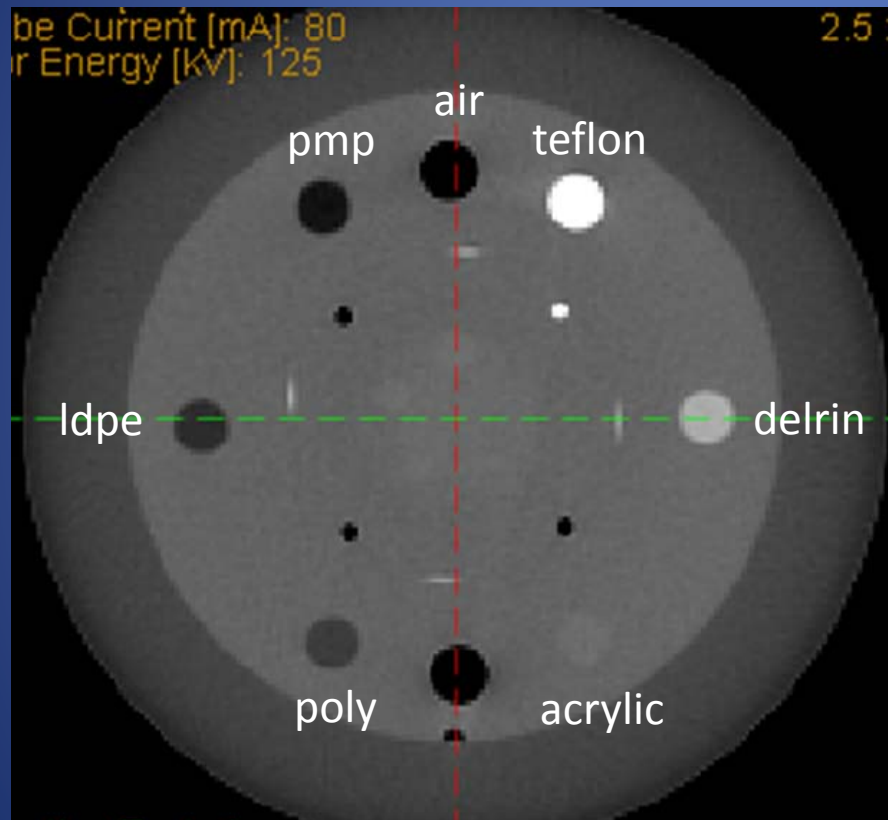


- Varian spec: measured and expected CT#'s should be within ± 40 HU
- Plot of CT# vs. μ should be linear with an R^2 value of close to 1.0

TG 142 tolerance
Baseline

VI. CT# Constancy, Linearity, & Contrast Scale

2. Contrast Scale



- Contrast Scale (CS) is the change in linear attenuation coefficient per CT# relative to that of H₂O.
- $CS \approx (\mu_m - \mu_w) / (CT\#_m - CT\#_w)$
- $CS_{\text{theoretical}} = 1.9 \times 10^{-4}$
 assuming: $\mu_w = 0.19 \text{ cm}^{-1}$ $CT\#_w = 0 \text{ HU}$
 $\mu_m = 0.0 \text{ cm}^{-1}$ $CT\#_m = -1000 \text{ HU}$
 (w = H₂O & m = air)

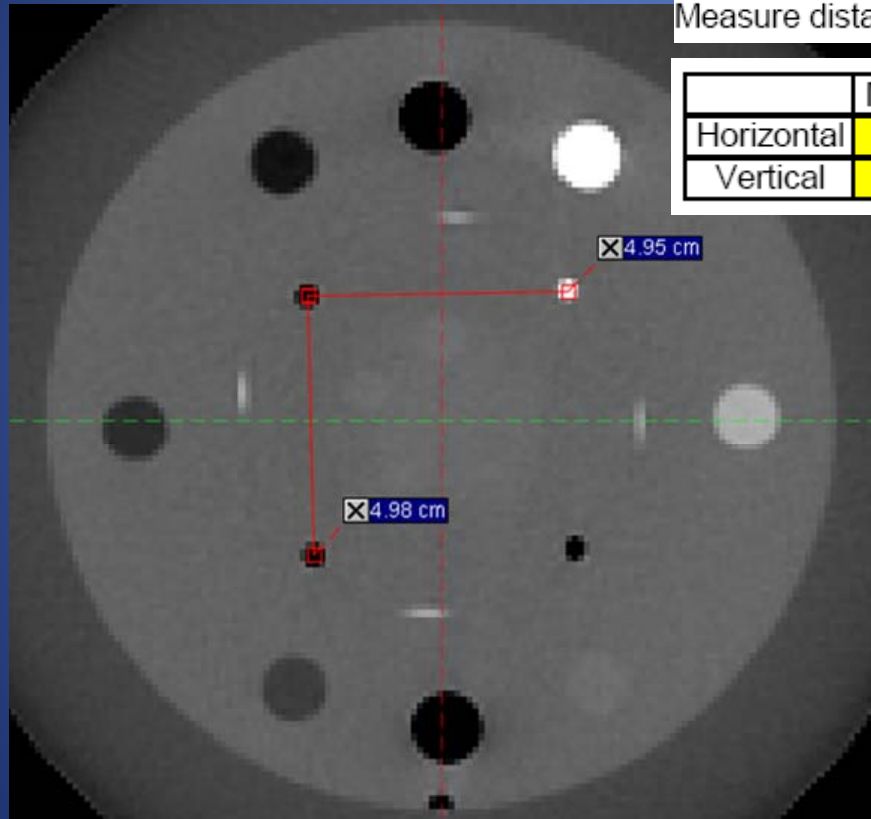
2. Contrast Scale

CT# H ₂ O:	4.23	CT# air:	-994.37
CS (meas):	1.90E-04	CS:	1.90E-04
% Diff:		0.14%	

- Measured & theoretical contrast scale should not differ significantly

CBCT Monthly QA

V. Spatial Linearity Accuracy



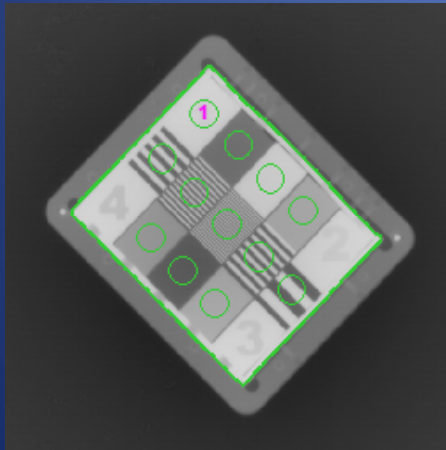
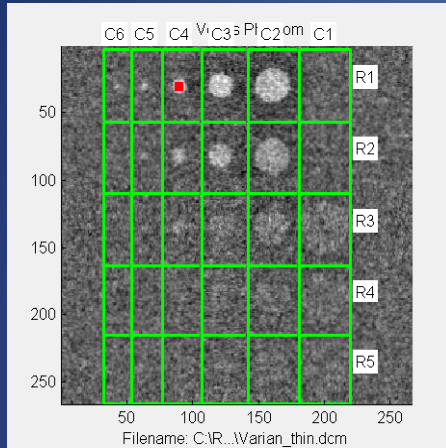
Measure distance between small rods in center of CT # Constancy image

	Measured	Expected	Diff	% Diff	Pass/Fail
Horizontal	4.95	5.00	-0.05	1.0%	Pass
Vertical	4.98	5.00	-0.02	0.4%	Pass

spec: accurate to w/in 1%

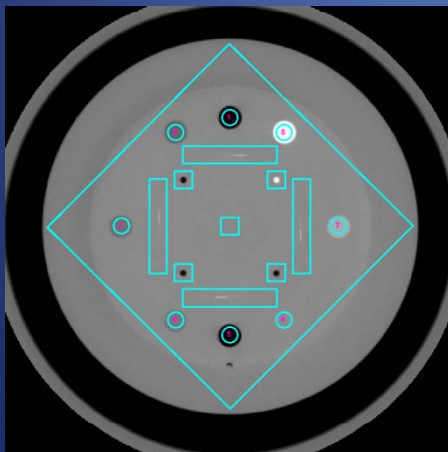
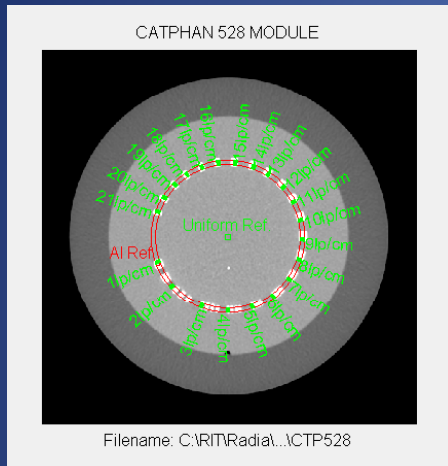
TG 142 tolerance
 ≤ 2 mm non SRS/SBRT
 ≤ 1 mm SRS/SBRT

Comments on Automated Image Analysis



- Automated image analysis software and phantoms can be a useful tool in the collection, analysis, and trending of image qa data.
- They can eliminate viewer bias and provide calculation of advanced imaging metrics if proper and consistent techniques are used.
- As with any tool the user must understand its use and limitations, the expected results and how to interpret them.
- Without this understanding the process can become unnecessarily complicated and the results obtained may be confusing and meaningless.

Comments on Automated Image Analysis



- Automated image analysis software is not an essential tool to implement a TG compliant imaging QA program.
- I recommend that before investing in an automated system a physicist first become familiar with image qa testing and understand the interpretation of the results by manual methods.
- This will allow you to become familiar with the tests, results, problems and pitfalls, as well as the strengths and weaknesses of the testing methodology.
- Thereby allowing you to better assess the utility and value of an automated system for your clinical application.

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