

MR QA/QC for MRgRT

Rick Layman, PhD, DABR
Department of Radiology
July 13, 2015

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Creating a cancer-free world. One person, one discovery at a time.



Quality Assurance and Control

“Quality begins with proper equipment selection”

W.R. Hendee The Selection and Performance of Radiologic Equipment, Baltimore, MD: Williams and Wilkins, 1985, p. 460.

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Quality Assurance and Control

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- Consult with Diagnostic Radiologist and Physicist
- Work collaboratively and develop synergies

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Agenda

MR Siting Considerations

Imaging Quality Control

MR Simulation Specific QC

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Siting Considerations



New Comprehensive Cancer Center

- December 2014 Opening
- 275 private in-patient beds
- Radiation Oncology located on 2nd floor
- 7 LINACS with OBI and CBCT
- CT Simulator
- PET/CT Simulator
- Brachytherapy Suite
- MR Simulator

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Siting Considerations



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Siting Considerations



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MRI Zones

Zone 1: free accessible

Zone 2: interface

Zone 3: restricted area

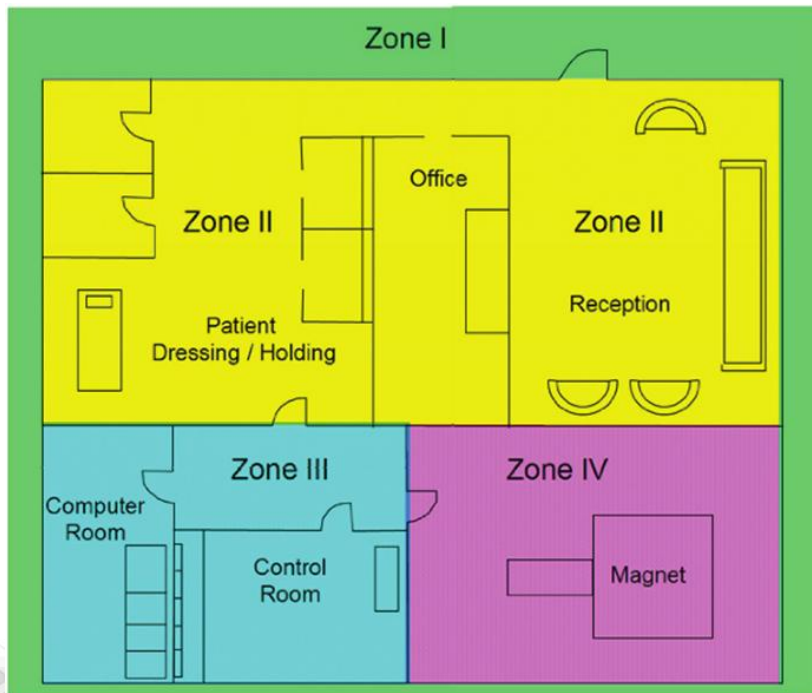
Zone 4: MR magnet room

MR Personnel

Non-MR personnel: patients, visitors, staff

Level 1: passed minimal safety and education training, Zone 3-4

Level 2: extensively trained, gatekeeper of Zone 4



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Siting Requirements – Interfere with Magnet

Source of Interference	1.5T X/Y and Z Axis	3.0T X/Y and Z axis
Steel reinforcement	4'-2"	4'-2"
Water cooling unit, chiller	13'-1"	13'-1"
Transport devices up to 440 lbs	17'-5" / 21'-40"	19'-8" / 22'-11"
Vehicles up to 2,000 lbs	18'-5" / 24'-8"	21'-3" / 26'-2"
Elevators, trucks up to 10,000 lbs	20'-5" / 29'-7"	22'-11" / 31'-2"
AC transformers less than 100 KVA	39'-5" / 26'-2"	39'-4" / 26'-2"
AC cables, motors less than 100 AMPS	9'-10" / 6'-6"	9'-10" / 6'-6"

Note: Example specifications applicable to Siemens Skyra (3T) and Aera (1.5T), Siemens Healthcare, Erlangen, Germany

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Siting Considerations (Magnetic Fringe Fields) – Interfere with Object

Devices	Field Strength	1.5T X/Y and Z axis	3.0T X/Y and Z axis
Small motors, watches, cameras, credit card	3.0 mT	6'-1" / 9'-2"	6'-11" / 10'-6"
Computers, magnetic disk, processors	1.0 mT	7'-3" / 11'-6"	7'-7" / 13'-2"
Cardiac pacemakers, x-ray tubes, insulin pumps	0.5 mT	8'-3" / 13'-2"	8'-7" / 15'-2"
Color monitors, CT scanner	0.15 mT	9'-9" / 16'-1"	11'-2" / 20'-1"
LINAC	0.1 mT	10'-4" / 17'-1"	12'-6" / 22'-4"
X-ray image intensifier, gamma camera, PET/cyclotron	0.05 mT	13'-1" / 22'-3"	16'-1" / 26'-11"

Note: Example specifications applicable to Siemens Skyra (3T) and Aera (1.5T), Siemens Healthcare, Erlangen, Germany

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MR Artifact

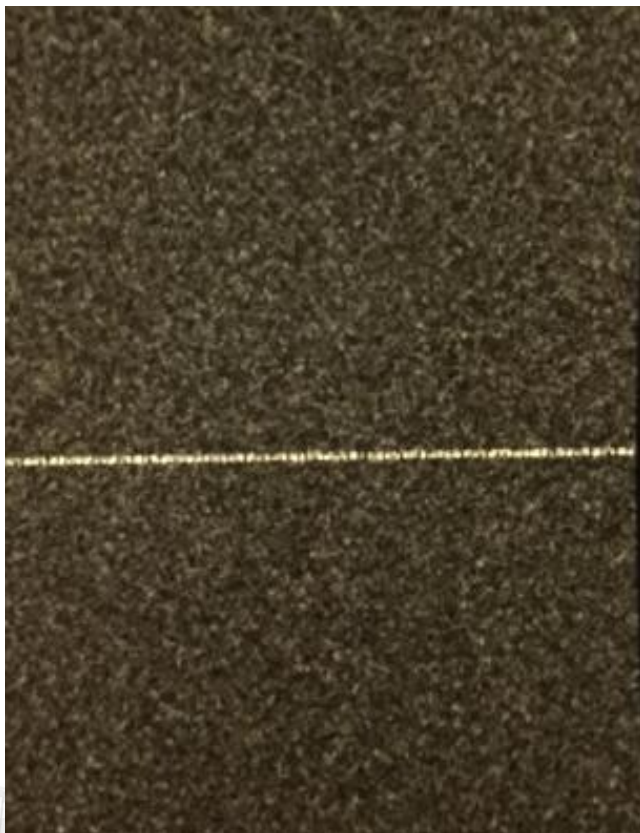


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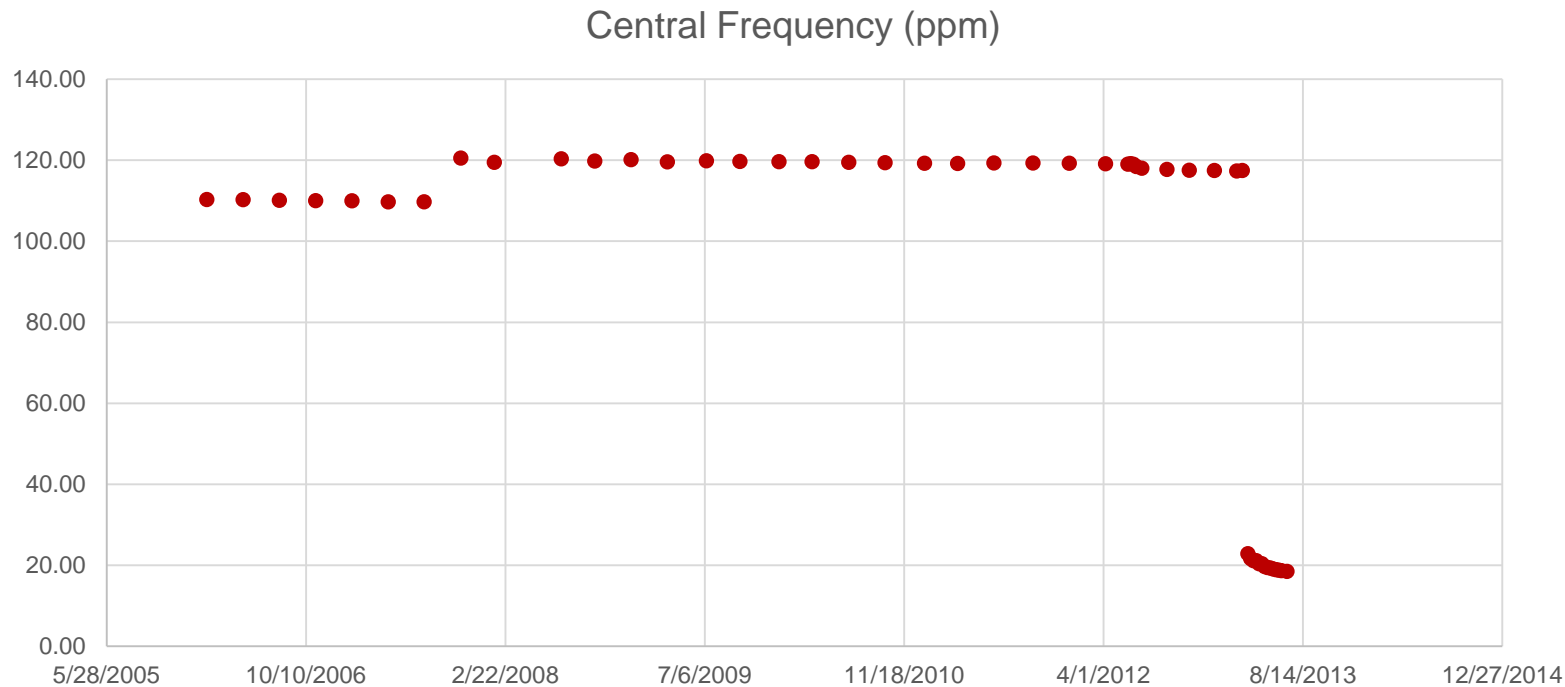
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MR Artifact



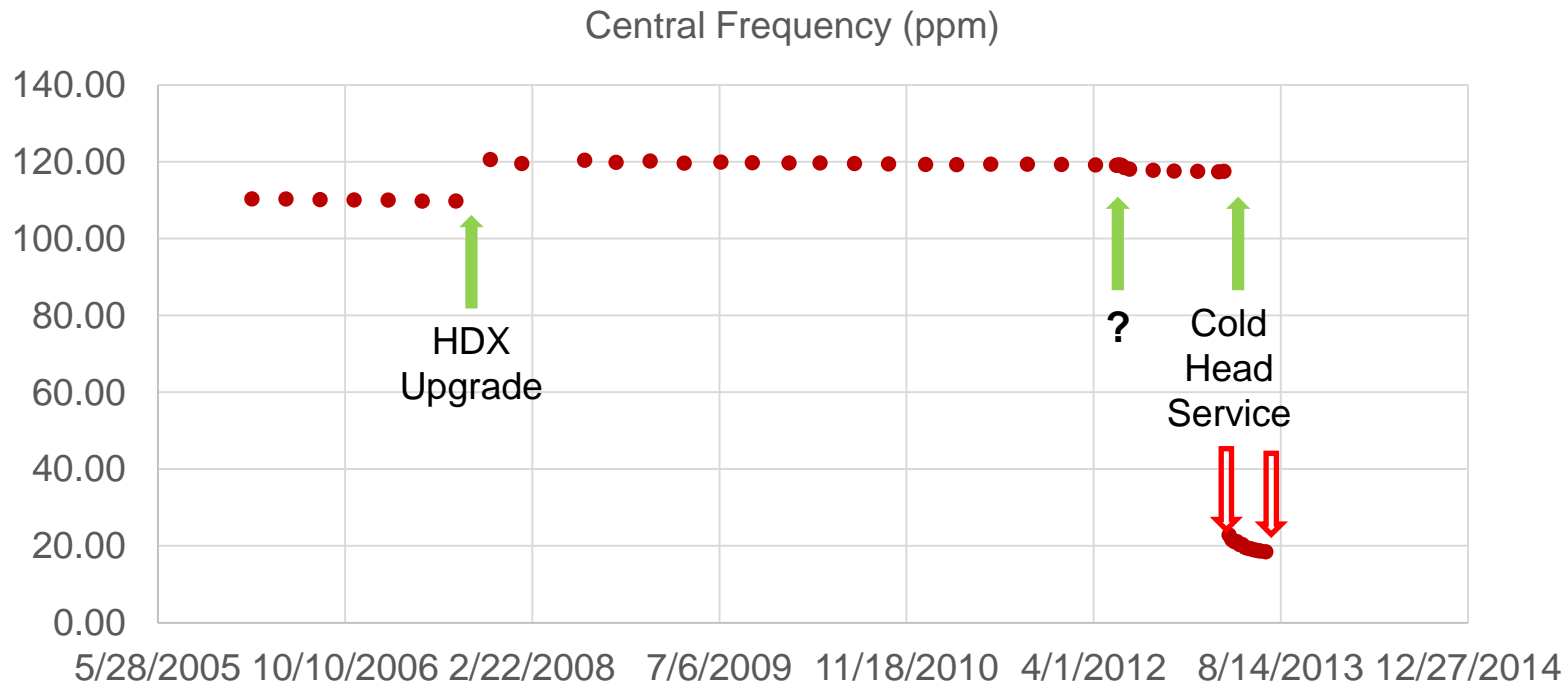
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QC Example - CF Change Over Time



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QC Example - CF Change Over Time



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Updates and Changes to ACR MRI QC Manual

- Interslice RF interference removed
- Magnetic homogeneity and percent image uniformity procedure changes
 - $\geq 87.5\%$ for systems up to 1.5T
 - $\geq 82\%$ for 3T systems
- Signal ghosting added
 - $\leq 2.5\%$
- Low-contrast detection
 - 9 rows total for systems up to 1.5T
 - 37 rows for 3T systems
- Assessment of MR safety program

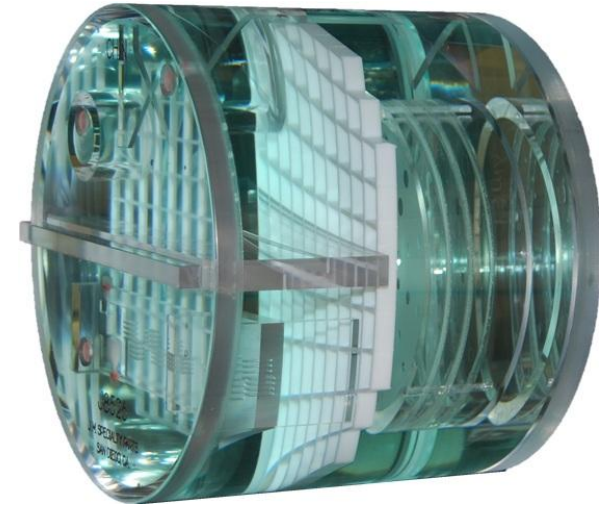
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ACR MRI Phantom

- Filled with nickel chloride and sodium chloride solution (10 mM NiCl_2 and 75 mM NaCl)
- Length 148 mm
- Diameter 190 mm
- J.M. Specialty Parts Inc



ACR MRI Phantom

- Must be capable of providing tests ***substantially equivalent*** to the ACR phantoms and after they have been approved by a QMP or MR scientist.

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QMP Responsibilities

- **Commission testing**

2015 Magnetic Resonance Imaging

QUALITY CONTROL MANUAL

Radiologist's Section

MRI Technologist's Section

Medical Physicist/MRI Scientist's Section

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2015 Magnetic Resonance Imaging

QUALITY CONTROL MANUAL

Radiologist's Section

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QMP Responsibilities

- Commission testing
- **Annual testing**
 - ACR, 12 months not to exceed 14 months
 - JC, 12 months not to exceed 13 months
- **Repeat appropriate testing after major repair or upgrade**

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2015 Magnetic Resonance Imaging

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QMP Responsibilities

- Commission testing
- Annual testing
 - ACR, 12 months not to exceed 14 months
 - JC, 12 months not to exceed 13 months
- Repeat appropriate testing after major repair or upgrade
- **Establish Quality Control program**
 - **Baseline measurements and action limits**
 - **Establishment of new baseline values if needed after major repair**
- **Review QC records at least annually**

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2015 Magnetic Resonance Imaging

QUALITY CONTROL MANUAL

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- Repeat appropriate testing after major repair or upgrade
- Establish Quality Control program
 - Baseline measurements and action limits
 - Establishment of new baseline values if needed after major repair
- Review QC records at least annually
- **Assessment of MR safety program**

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2015 Magnetic Resonance Imaging

QUALITY CONTROL MANUAL

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QMP Annual Tests

- Setup and table position accuracy
- Center frequency
- Transmitter gain or attenuation
- Geometric accuracy
- High-contrast spatial resolution
- Low-contrast detectability
- Artifact evaluation
- Film printer QC (if applicable)
- Visual checklist
- Magnetic field homogeneity
- Slice position and thickness accuracy
- Performance testing for coils used clinically
 - SNR
 - Percent image uniformity
 - Percent signal ghosting
- Soft-copy (monitor) QC

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2015 Magnetic Resonance Imaging

QUALITY CONTROL MANUAL

Radiologist's Section

MRI Technologist's Section

Medical Physicist/MRI Scientist's Section

MRI QC Technologist's Responsibilities

- Setup and table position accuracy
- Center frequency
- Transmitter gain or attenuation
- Geometric accuracy measurements
- High-contrast spatial resolution
- Low-contrast detectability
- Artifact evaluation
- Film printer QC (if applicable)
- Visual checklist

All Performed Weekly

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MR Simulation Specific Tests

Daily

- Gantry lasers with center of image plane

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MR Simulation Specific Tests

Daily

- Gantry lasers with center of image plane

Weekly

- **Gantry lasers with respect to imaging plane**
- **Lateral wall lasers with respect to gantry lasers and scan plane**
- **Wall lasers with respect to the imaging plane**
- **Ceiling laser with respect to the imaging plane**
- **Orientation of MR tabletop with respect to imaging plane**
- **Table vertical and longitudinal motion**
 - RT tolerance is typically $\pm 1\text{mm}$ while most manufacturer's specify $\pm 2\text{mm}$
- **Table indexing and position**
- **Scan localization**

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MR Simulator Acceptance Testing Results

A5. LAP Laser

Geometry

LAP Laser to MR Laser: 310 mm

LAP Laser to MR Isocenter: 1132 mm

Calibration

Calibration Accuracy: ± 4 mm

Pulse Sequence (High FA)

SPGR, FA 20°, 340mm FOV, 256x256, 5mm slice, 1 slice, 11 slices, TR/TE = 31/MIN ms, NEX 4, BW 250 kHz, Auto Shim.

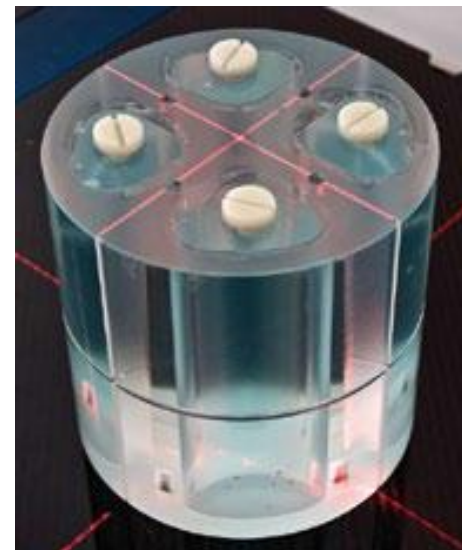
Image Quality

Laser	SNR	Ghosting Ratio
ON	174.6	0.03%
OFF	258.9	0.01%

Any Noticeable Imaging Artifact? No

If yes, Type of Artifact: N/A

Comment: The vendor LAP laser calibration phantom is not available. Calibration was done with Vitamin E capsules with ~9 mm diameter.



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MR Distortion Analysis

- Commercially available head phantom (body phantom prototype)
- Spatial resolution of 0.1 mm

Acquisition Technique

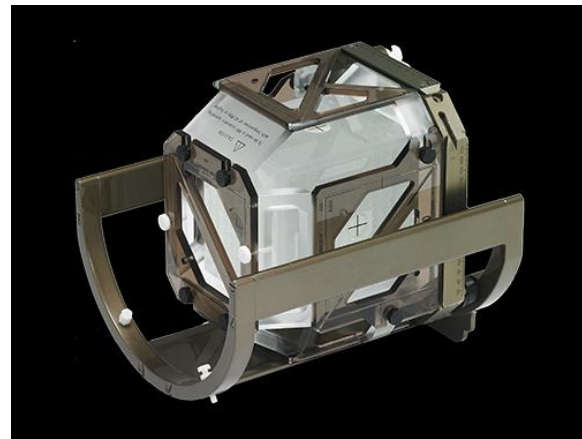
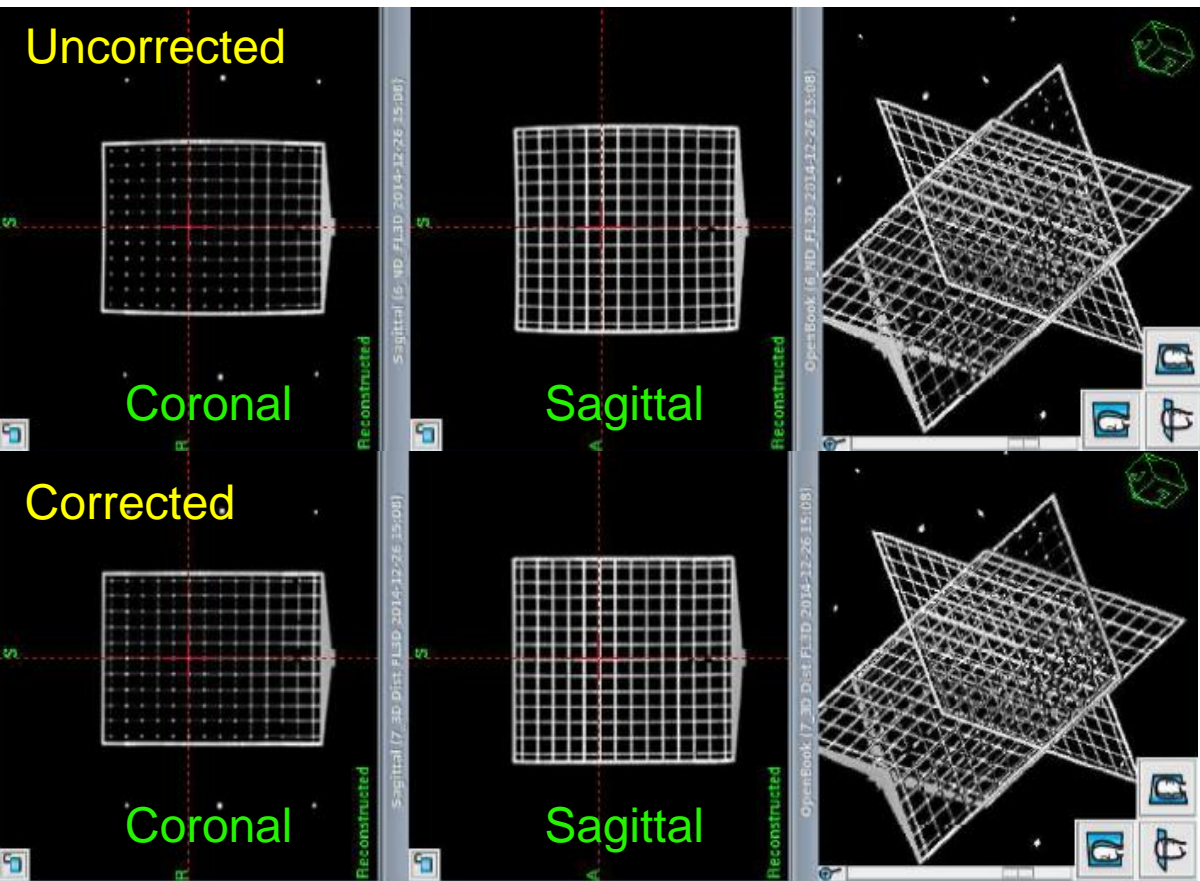
- 3D OEM gradient distortion correction is turned ON
- 3D T1 weighted sequence with 1 mm³ isotropic voxels (GE-FLASH, Philips-Fast Field Echo, Siemens-VIBE)
 - 2 NEX
 - TE ~ 4 ms
 - TR ~ 9 ms
 - Flip angle ~ 10°
 - Pixel BW ~ 120 Hz
 - Percent sampling 100%
 - Percent phase FOV 100%

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MR Head Distortion Phantom Testing



- Dimension 14x13x11 cm³
- Spatial resolution 0.1 mm

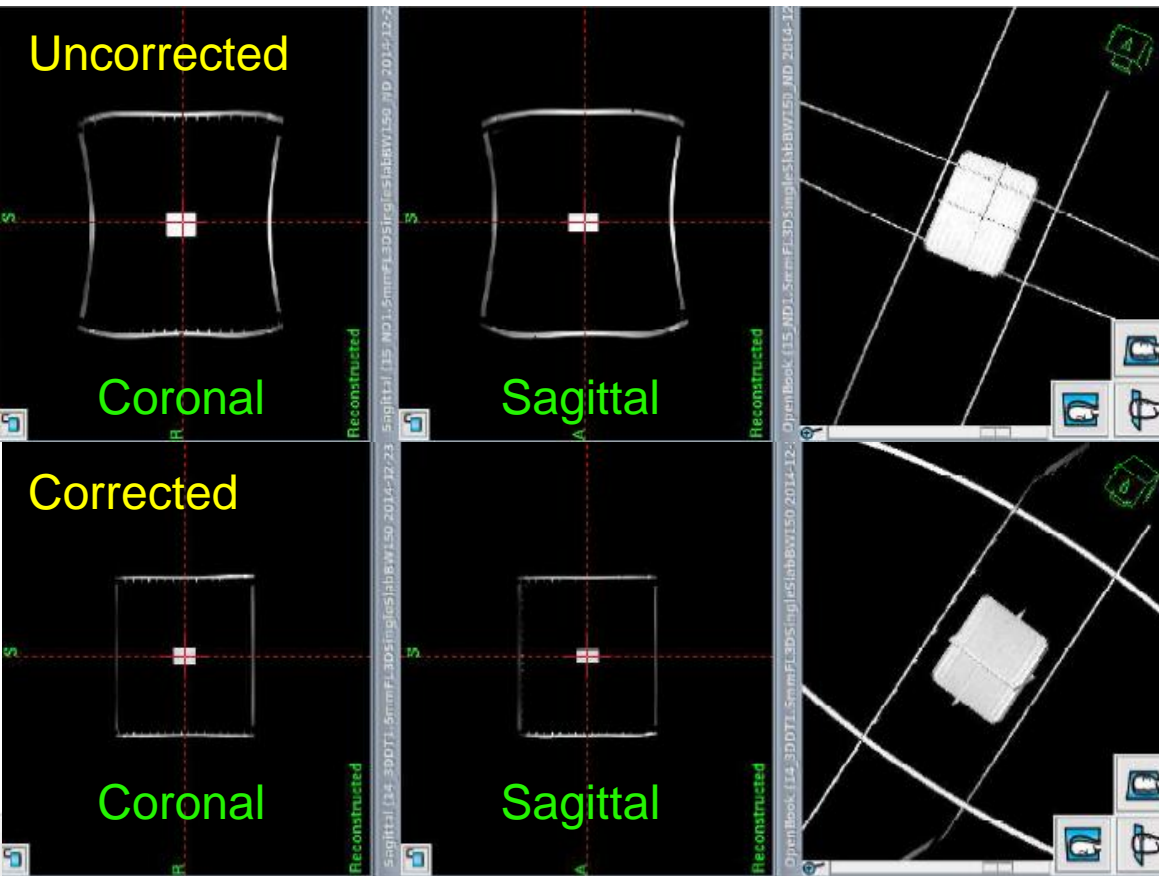
Images courtesy of Lanchun Lu, PhD

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MR Body Distortion Phantom Testing



- 37 cm diameter
- 32 cm length
- 1562 mineral oil points
- Spatial resolution $<1 \text{ mm}^3$ isotropic voxel

Images courtesy of Lanchun Lu, PhD

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Future Considerations

- New phantom design with improved tolerances
- Deformable co-registration
- Multi-modal fusion and co-registration

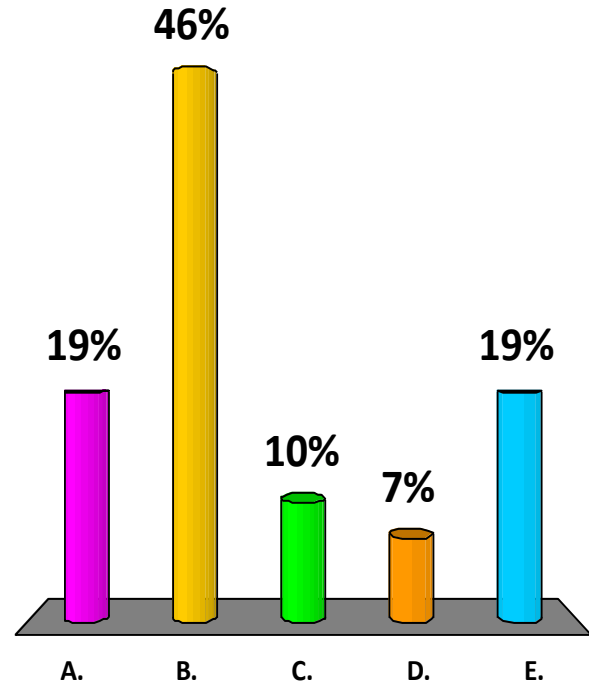
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Which of the following items is least likely to impact the performance of the MR system?

- A. C-arm in an adjacent room
- B. External lasers
- C. Forklift operated in area behind the MR
- D. Power injector
- E. Patient monitoring device within the MR room



Which of the following items is least likely to impact the performance of the MR system?

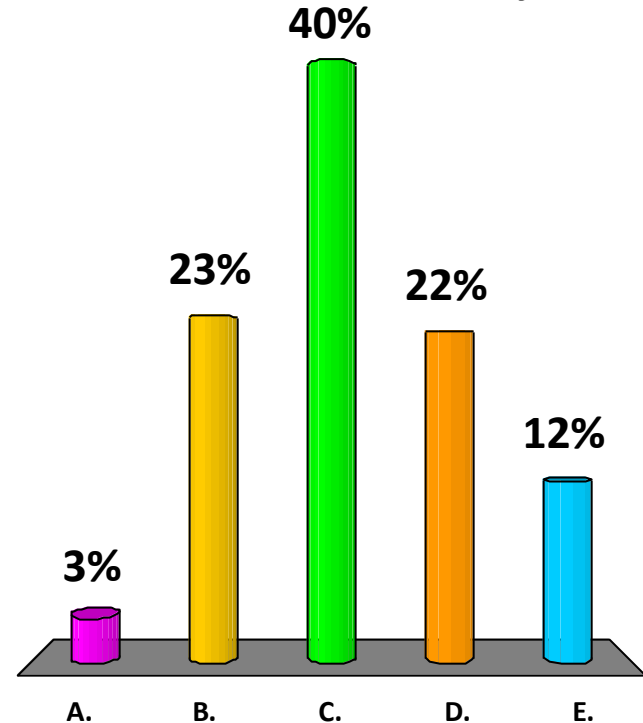
ANSWER: A C-arm in an adjacent room

The performance of the c-arm could be impacted by the MRI but the distance of the c-arm would be too great to cause any interference with the MR system

Reference: All OEM specification cut sheets. Example,
<https://ftp.siemensmedical.com/pp-cutsheets/mr/skyra/Cutsheet-10024.pdf>

Based on the current technologies available for evaluation and equipment performance, what is the achievable MR laser accuracy?

- A. 4.0 mm
- B. 3.0 mm
- C. 2.0 mm
- D. 1.0 mm
- E. <1.0 mm



Based on the current technologies available for evaluation and equipment performance, what is the achievable MR laser accuracy?

Answer: C 2.0 mm

The manufacturer tolerance is 2.0 mm accuracy.

Reference: OEM equipment manuals, ECRI, MD Buyline

Additional References

- ACR website (www.acr.org)
 - MRI Accreditation Program Requirements
 - Breast MRI Accreditation Program Requirements
 - Phantom Test Guidance for the ACR MRI Accreditation Program
- ACR-AAPM Technical Standard for Diagnostic Medical Physics Performance Monitoring of Magnetic Resonance Imaging (MRI) Equipment
- AAPM Report No 100: Acceptance Testing and Quality Assurance Procedures for Magnetic Resonance Imaging Facilities
- Kanal E, Barkovich AJ, Bell C, et al. ACR guidance document on MR safe practices: 2013. *Journal of Magnetic Resonance Imaging*. 2013; 37(3): 501-530.
- Gilk T, Kanal E. Interrelating sentinel event alert #38 with the ACR guidance document on MR safe practices: 2013. An MRI accreditation safety review tool. *Journal of Magnetic Resonance Imaging*. 2013; 37(3):531-543. The James