

# Developing a CT scan protocol comparison tool

Jamie Dormand

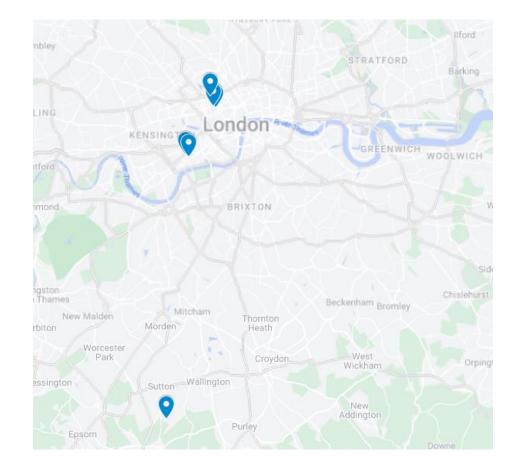
CT Users Group meeting, October 2023



The Physics of Medical Imaging • The Digital Mammography Unit • Laurence King • 12 February 2020

#### **RMH DR Physics: CT**

- 19 CT scanners across 6 sites (including PET/SPECT-CT)
  - 15 of 19 are Siemens units
- 4 x Clinical scientists (3 x MPEs) + 1 x 0.2 WTE
- 2 x Route 2 trainees





#### **CT** Protocols

- Depending on clinical workload, one unit will have dozens of protocols.
- Each protocol is defined using hundreds of parameters.
- Only a small subset of these parameters directly affect dosimetry/IQ.
- Large numbers of parameters can change from seemingly small adjustments.
- New parameters are regularly added during software upgrades.

```
<?xml version="1.0" encoding="UTF-16"?>
<MlScanProtocolType CursorPos="0" VersionId="1481002">
   <ItemList MlScanProtocolTvpe>
    <MlModeEntryType EntryNo="1" ModeScans="1" ModeRecons="1" ModeReconStartIn
       <ItemList MlModeEntryType>
       <MlModeScanType ModeScan="A">
           <ApiId>""</ApiId>
            <ApiLanguageId>""</ApiLanguageId>
            <AutoLoad>false</AutoLoad>
            <BeginPos>1.000</BeginPos>
            <Cardio>false</Cardio>
            <Contrast>false</Contrast>
            <FrameOfReferenceUID>""</FrameOfReferenceUID>
            <Physio>false</Physio>
            <PhysioAverage>M1PhysioAverageLast3</PhysioAverage>
            <PhysioSyntheticTrigger>false</PhysioSyntheticTrigger>
            <RangeName ReadOnly="1" ResID="72">"Topogram"</RangeName>
            <RangeStart>MlRangeStartConsole</RangeStart>
            <RawDataLoid>""</RawDataLoid>
            <Reserve>""</Reserve>
            <Respiratory>false</Respiratory>
            <ScanNumber>1</ScanNumber>
            <ScanParameterInfo>""</ScanParameterInfo>
            <ScanState>MlStateNotScanned</ScanState>
            <ScanTime>5.284</ScanTime>
            <StartDelay>2.000</StartDelay>
            <TubePosition>270.0</TubePosition>
            <VertPos>120.0</VertPos>
            <VertPosForISOCenterAdaption>120.0</VertPosForISOCenterAdaption>
            <AccumulatedTimeTable>""</AccumulatedTimeTable>
            <AEC Aref>0.0</AEC Aref>
            <AEC AttenuationDataAP>""</AEC AttenuationDataAP>
            <AEC AttenuationDataLat>""</AEC AttenuationDataLat>
            <AEC BeginPos>0.000</AEC BeginPos>
            <AEC CurrentDOMmax>0</AEC CurrentDOMmax>
            <AEC CurrentMaxTinFilter>500</AEC CurrentMaxTinFilter>
            <AEC CurrentMean>1</AEC CurrentMean>
            <AEC CurrentProfileAP>""</AEC CurrentProfileAP>
            <AEC CurrentProfileLat>""</AEC CurrentProfileLat>
            <AEC CurrentTheoMean>""</AEC CurrentTheoMean>
            <AEC DoseFactor>1</AEC DoseFactor>
            <AEC DoseProfile>""</AEC DoseProfile>
            <AEC EndPos>-512.000</AEC EndPos>
```



3

#### **CT Protocol Management**

- Export CT protocols at each routine QA visit and before and after any protocol changes.
- Compare old and new exports using WinMerge.
- Record changes found, follow up on unexpected findings with superintendents.
- Manufacturer solutions exist but typically require a subscription per scanner.



#### CT Protocol Management: Old system

Location P	ane >	🗧 T:\T\Chelsea Siemens Definition Flash\2020 09 29\ExportedScanProtocols\Import\Abdomen\AbdoPelvis_Bleed_bolustrack_3Ph.Adult 🗧	T:\T\Chelsea Siemens Definition Flash\2023 10 02\ExportedScanProtocols\Import\Abdomen\AbdoPelvis_Bleed_bolustrack_3Ph.Adult 🛛 =
		<imastore>false</imastore>	<imastore>false</imastore> ^
		<inheritance>true</inheritance>	<inheritance>true</inheritance>
		<interventionmprslice>1.00</interventionmprslice>	<interventionmprslice>1.00</interventionmprslice>
		<irec>MlIRecOff</irec>	<irec>MlIRecOff</irec>
		<irecstrengths>"-1"</irecstrengths>	<irecstrengths>"-1"</irecstrengths>
		<pre><irsfilter_asa>MlASAOff</irsfilter_asa></pre>	<irsfilter_asa>MlASAOff</irsfilter_asa>
		<pre><irsfilter_asatable>""</irsfilter_asatable></pre>	<irsfilter asatable="">""</irsfilter>
			<pre><irsfilter_imartable>""</irsfilter_imartable></pre>
		<pre><irsfilter_pfotable>""</irsfilter_pfotable></pre>	<irsfilter_pfotable>""</irsfilter_pfotable>
		<irsrecontime>0.001</irsrecontime>	<irsrecontime>0.001</irsrecontime>
		<kernel>"B30f"</kernel>	<kernel>"B30f"</kernel>
		<kernelname>"B30"</kernelname>	<kernelname>"B30"</kernelname>
		<lastscan4recon>1</lastscan4recon>	<lastscan4recon>1</lastscan4recon>
		<mapreconuid>4</mapreconuid>	<mapreconuid>4</mapreconuid>
		<pre><matrixresolution>MlRectangular512</matrixresolution></pre>	<matrixresolution>MlRectangular512</matrixresolution>
			<pre><metalartifactreduction>MlMarOff</metalartifactreduction></pre>
		< <u>Mirror&gt;MlMirrorNone</u>	<mirror>MlMirrorNone</mirror>
		<multireconincr>1.000</multireconincr>	<multireconincr>1.000</multireconincr>
		<nonlinearlookuptable>0</nonlinearlookuptable>	<nonlinearlookuptable>0</nonlinearlookuptable>
		<pre><noofslicesactual_recon>10</noofslicesactual_recon></pre>	<noofslicesactual_recon>10</noofslicesactual_recon>
		<pre><noofsliceseffective_recon>64</noofsliceseffective_recon></pre>	<noofsliceseffective_recon>64</noofsliceseffective_recon>
		<obese>true</obese>	<obese>true</obese>
		<onlinereconpossible>false</onlinereconpossible>	<onlinereconpossible>false</onlinereconpossible>
		<pre><organfov>380</organfov></pre>	<organfov>380</organfov>
		<originalscanbegin3d>0.000</originalscanbegin3d>	<originalscanbegin3d>0.000</originalscanbegin3d>
		<pre><originalscanend3d>-270.000</originalscanend3d></pre>	<pre><originalscanend3d>-270.000</originalscanend3d></pre>
		<pfo>MlOff</pfo>	<pfo>MlOff</pfo>
		<physiooverlappedrecon>MlOn</physiooverlappedrecon>	<physiooverlappedrecon>MlOn</physiooverlappedrecon>
_		<physiopeaktimestamps>""</physiopeaktimestamps>	<physiopeaktimestamps>""</physiopeaktimestamps>
		<physiotestseries>MlOff</physiotestseries>	<physiotestseries>MlOff</physiotestseries>
		<postprocessingcommand>""</postprocessingcommand>	<postprocessingcommand>""</postprocessingcommand>
		<postprocessingnlsid>0</postprocessingnlsid>	<postprocessingnlsid>0</postprocessingnlsid>
		<preventgaps_recon><b>false</b></preventgaps_recon>	<preventgaps_recon>false</preventgaps_recon>
		<pvbeginvec>0.0000000000;0.000000000;0.00000000000</pvbeginvec>	
		<pre><pvendvec>0.0000000000;0.000000000;0.00000000;0.000000</pvendvec></pre>	<pre><pvendvec>0.0000000000;0.000000000;0.00000000000</pvendvec></pre>



## **CT Protocol Comparison Tool: Specifications**

- Project managed using Redmine and Git.
- Developed using Python.



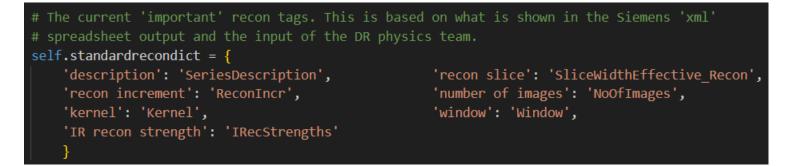


• "This software will accept as input two folder locations containing the .Adult and .Child xml files extracted from the UserProtocols.ar files exported from a Siemens CT scanner. It will then process all the files and perform a comparison of the pertinent contents of the files and presenting these changes in an understandable way to the user. In this way, changes to the protocol files that are due to file format changes or similar that do not reflect clinical changes to the protocols can be safely disregarded, whilst clinical changes to the protocols can be easily highlighted."



#### **CT Protocol Comparison Tool: Design**

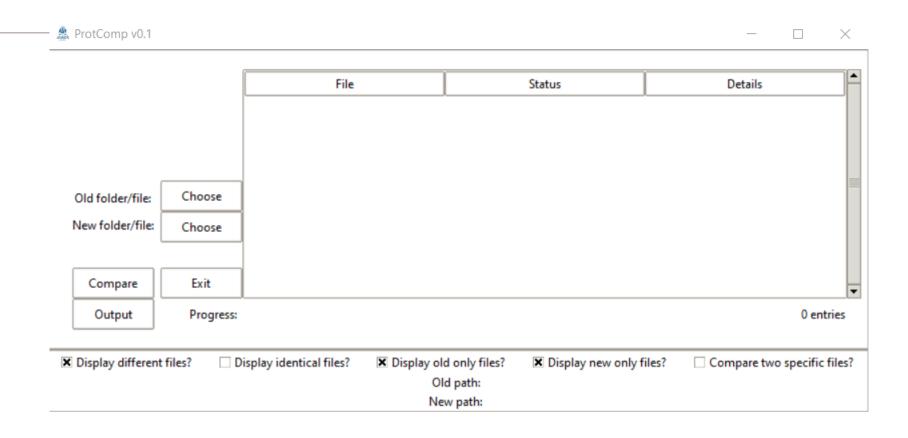
- filecmp package used to compare file/folder structures.
- Xml tags in changed files parsed using lxml package.
- Defined list of 'important' tags compared between files.



- Tkinter package used to create GUI.
- Pyinstaller used to create .exe.
- Protocols where filenames have been changed are found by calculating the percentage of identical tags between them – if >95% of tags match, protocols are assumed to be the same.



#### **Live Demonstration**





### Is it worth comparing protocols?

- Cardiac CT scanner protocol Quality Reference mAs was reduced by RMH Physics as part of an optimisation project.
- Issues with the scanner the following weekend, manufacturer used remote diagnostics to reset scanner to their backup state. No AxREM form, Physics not informed.
- Dose audit a few weeks later showed no reduction in dose indicators. Protocols exported and compared, no change to Q. Ref. mAs! ~25 patients inadvertently scanned with higher mAs.
- Incident reported to CQC, root cause found. Protocols now exported/compared on a monthly basis. Following discussions with Siemens, systems will be backed up before software updates.



#### **Future Development**

- Tool currently used exclusively by DR Physics. Further documentation required to support use by radiographers.
- Still requires comparison to be manually processed, potential for automating process.
- Tool can only be used with Siemens CT scanners. Siemens SPECT/PET-CT and other manufacturers use different protocol formats, development required.
- Changes to formatting in the future may require further development to maintain functionality.



# Acknowledgements

# Ed McDonagh RMH DR Physics



