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to

## Question: 1

### Features of Pre processing:

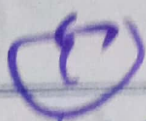
- Preprocessing of digital images is largely automatic.
- Preprocessing is designed to produce artifact-free digital images
- Preprocessing provides electronic calibration to reduce row-to-row column-to-column and pixel-to-pixel response difference.
- The process of pixel interpolation, lag correction and noise correction are automatically applied with most systems.

- Gain images are generated every few months, and offset images are generated many times.
- Offset images and gain images are automatic calibration images designed to make the response of image receptor uniform.
- The preprocessing calibration technique is flatfielding. Digital image receptors and display devices have millions of pixels.
- Digital image generators an electronic latent image that may or not be made visible completely.
- Some voltage variation may be seen along the buses that drive each pixel, the defect is called line noise which cause linear artifacts to appear on final image.

# Features of Postprocessing:

## Image:

- Postprocessing is where digital imaging shines.
- Postprocessing requires intervention by technologist.
- Postprocessing refers to any thing that can be done to a digital radiographic image after it is acquired.
- Postprocessing image performed to optimize the appearance of image for purpose of better detecting pathology.
- Annotation is the adding text on image.
- Dynamic range of images up to 16-bit, 65-536 grey.
- The larger matrix size digital display devices have better spatial resolution b/c of small pixels.
- Multiple digital images must be flipped horizontal or vertically.



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- Pixel shift can be corrected by reregistering the image through techniques.
- Edge enhancement is effective for fractures and small, high contrast tissues.
- Highlighting can be effective.

## Question: 2

Spatial Resolution : Contrast Resolution

Resolution

Resolution

① Ability of imaging system to resolve and render on the image a small, high-contrast image. Ability to distinguish b/w and to image similar tissues.

② Spatial resolution described by the quantity "spatial frequency" is grey scale called 'dynamic range'. The principal descriptor for contrast resolution is grey scale called 'dynamic range'.

③ Spatial frequency is related to the number of line pairs in a given length usually cm, mm.

⑤ Dynamic range is the number of grey shades that an imaging system can reproduce.

④ With higher spatial frequency has better spatial resolution.

Image noise limits contrast resolution.

⑤ At low spatial frequencies, MTF for radiographs should be higher by the MTF of imaging system.

high contrast objects is said to be limited by the MTF of imaging system.

## Question: 3

Characteristics which results in low patient dose:

→ Patient dose reduction should be possible because of the manner in which digital image receptor responds to x-rays and because of properties of DR.  $\downarrow$

Image receptor response:

- > Digital image receptor is linearly related to radiation dose but image contrast resolution does not change with dose.
- > One cannot overexpose or underexpose a digital image receptor.
- > Therefore a digital image should never requires repeated because of exposure factors, which results range approximately

5.0.

• Radiographic techniques for screen-film imaging requires;

(i) that an appropriate kVp be selected on the basis of anatomy that is being examined.

(ii) that the proper mAs be selected to produce proper OD.

• Digital imaging techniques must be approached differently.

• Instead of "dose creep" "technique creep" is used. This will result in low patient dose.

• When examination to be conducted, kVp should start to increase, and reduction in mAs should be noted with successive examination. This results with adequate contrast resolution,



constant spatial resolution and reduced patient radiation dose.

## ① Detective Quantum Efficiency:

→ The descriptor used for medical imaging is DQE.

→ DQE related to the absorption coefficient and to the spatial frequency of the imaging forming x-ray beam.

→ Patient dose in DR should be low because of high DQE of high image receptor.

→ Note that DQE for DR is higher than for CR and CR is slightly higher DQE than Screen-film.

→ Relative value of DQE for various image receptor means that fewer x-rays are required by higher DQE



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receptor to produce an image, results in low pt dose.

The above analysis of image receptor response and DQE shows - that both characteristics of digital image receptors suggest - that patient dose should be less.

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## Question: 4

### Active-matrix liquid-crystal display: (AMLCD)

⇒ The concept of AMLCD is was proposed by Bernard J. Lechner at the RCA Laboratories in 1968.

⇒ The first function of AMLCD with thin-film transistors.

⇒ AMLCD is a type of flat-panel display the only viable technology for

- TV, computers, table computers and smartphones with an LCD screen due to low weight, very good quality, wide colour and response time.
- The most common type of AMOLED contains, beside the polarizing sheets and cells of liquid crystals, a matrix of thin-film transistors to make thin-film transistor liquid crystal display.
- LCDs are superior to (CTMA) displays.
- It has high ~~the~~ property of highly ordered molecular structure, a crystal and the property of viscosity of fluid.
- liquid crystal are linear organic molecules that are electrically charged forming a natural molecular dipole.

- The liquid crystals can be aligned through the action of external electric field.
- AMLD has very intense white backlight that illuminates each pixel.
- Each pixel contains light polarizing filters and films. Color AMLD have red-green-blue filters.
- Spatial resolution improves with higher megapixel display devices.
- Flat panel digital display devices are identified by number of pixels in AMLCD.
- Image luminance:
- \* Aperture ratio is a measure of image luminance of LCDs.
  - \* Aperture ratio is to a display device as "fill factor"

is to digital radiographic detector.

\* Aperture ratios of 50% to 80% are characteristic of medical LCDs.

Ambient light:

\* Liquid crystal displays are designed to better reduce the influence of ambient light on image contrast.

This characteristic of flat panel digital display devices has led to considerable ergonomic design of digital work station.

# Question: 5

## Picture Archiving and Communication System:- (PACS):-

- Radiology has adopted digital imaging very rapidly.
- When PACS fully implemented it not only allows the acquisition but also storage of each medical image in digital form.
- PACS improves image processing, viewing, storage, recall and interpretation.
- Four principal components of PACS are;
  - display system
  - storage system
  - Network
  - acquisition system

## PACS Network:

- It is effective and quick & also easy to use.
- Computer scientists use the term network to describe the manner in which computers can be connected to interact with one another.
- Networks are used for medical data in some countries.

Any hospital at any time can enter the unique identifiers and access the medical records for patient.

- In Radiology network may consist of various types of devices that allow storage, retrieval, and viewing of image. PACS remote etc.

## Tele-radiology:

- It is the process of remote transmission and viewing of image.

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NEMA has produced a standard imaging format called "DICOM".

At any time images are transferred to clients within or outside the hospital through PACS.

## PACS System Storage:

Image storage requirement are determined by the no. of images and images of data file size.

$$\text{Image file size} = \text{matrix size} \times \text{grey scale bit depth.}$$

Backup images storage is accommodated offsite at a digital data storage vendor.

By using PACS the workflow chart is greatly reduced leads to improved efficiency.

## Question: 6

### What is Artifacts: definition:

- An Artifacts are any false visual feature on medical image.
- It interfere with diagnosis and must be avoided.
- It can be controllable when causes of artifacts are understood.

### Types of Artifacts:

Three digital radiographic image - artifacts are;

- (i) Image receptor artifacts
- (ii) Software artifacts
- (iii) Objects artifacts.

#### (i) Image receptor artifacts:

- It occurs due to rough handling, dust and scratches.
- Pixel malfunction



## • Ghost images :

The appearance of Ghost images occurs b/c of incomplete erase of previous image .

## Avoidance:

• Artifact produce by dust can be corrected easily with proper cleaning. ~~unless~~

• Scratches or pixel malfunction requires replacement of image receptor.

• Ghost artifacts can be avoided by additional signal erasure technique. IP should be erased again before use .

## ② Software Artifacts:

• The artifacts produce during development of software.

• In software development life cycle artifacts usually refers to (things) that are produced by people involved in process.

### • Examples:

→ Document design

→ data models

→ workflow → test matrices

→ setup → script → plans.

→ architecture of software.

• Processing artifacts also occur due to dead pixels & row / column of pixels.

### Avoidance:

• Before ~~using~~ an image is prepared "for processing" several manipulation of output of an image receptor may be necessary for correctness of artifacts.

• Anti-virus to software also done.

### ③ Object Artifacts:

These artifacts are arises due to technologist's error in patient positioning, x-ray collimation and also due to histogram selection.

Backscatter also can be troublesome b/c Back Scatter produce phantom images.

#### How to avoid:

Technologist should be experienced.

Back side of Image receptor should be shielded to reduce backscattering x-ray.

Accurate patient position.

Accurate x-ray collimation.

## Question : 7

### Basis for data Compression:

- \* Compression is the act of flattening soft tissue to improve optical density.
- \* Transmitting and achieving the amount of data is technically difficult therefore compression are used.
- \* Data Compression take advantages of redundancy of data as occurs with exposure to raw x-ray beam.
- \* Up to 50MB per image on a 24- x 30-cm IP, a four-view digital mammography study can generate 200MB.

# Lossless Compression:

- \* An image file that is compressed in lossless mode can be reconstructed same as original.
- \* It reduce data file to 10% (10:1) to 50% (2:1) of original file.
- \* It is not satisfactory for large image files because of unacceptable transmission and manipulation time.
- \* It up to 3:1 generally considered acceptable and helpful in digital radiographic image mangment.

# Lossy Compression:

- \* It provide compression factor up to 100:1
- \* Lossy compression is that which is something

greater than an order  
of magnitude less than  
10:1, such level supports

tele-radiology.

\* Lossy compression is not  
acceptable for archiving  
mammography images for  
~~the~~

\* It can cause CAD  
system to miss lesion due  
to compression artifacts.

## Question: 19

→ If x-ray field is not  
properly collimated, sized,  
positioned then errors may  
occur.

### Improper collimation:

∴ Collimation is projected  
x-ray beam area for  
patient radiation dose. \*

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Due to

- Improper collimation, the histogram can be improperly analyzed which results in artifacts.
- The use of three collimated margins usually works but few than three are used than artifact will results.
- If images are not collimated and centered than image exposure will not be accurate and cannot used for image quality evaluation.

## Partitioning:

- If multiple field is projected onto a single IP each must have clear, collimated edges and margins b/w each field this process is called **partitioning**.
- The exposure field recognition algorithm is unable to match image histogram

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If the fields are not clear.

- This algorithm is based on edge detection or corner detection.

## Alignment:

- Alignment of exposure field on the IP is important in the same way as collimation.

- If it is not oriented with size and dimension of the IP, image artifacts can appear.



## Question : 8

For Processing and  
For presentation of  
an image:

- \* For processing images are manipulated for presentation images that radiologic technologist can use for ~~QR~~ QC and for interpretation by radiologist.
- \* Before an image is prepared for processing several manipulation of the output of an image receptor may be necessary to correct for potential artifacts.
- \* Such artifacts can cause occurs because of dead pixels, rows and columns.

\* Preprocessing manipulation  
 known as flat fielding  
 is performed resulting  
 in a uniform response to uniform  
 x-ray beam.

### NOTE \*

\* For processing image is  
 obtained from raw data  
 set of digital radiographic  
 image.

\* The image which is obtained  
 by manipulating of "for  
 processing" know  
 as for - presentation  
image.