



INSTITUT  
DE RADIOPROTECTION  
ET DE SÛRETÉ NUCLÉAIRE

*Faire avancer la sûreté nucléaire*

## The work in IEC, DICOM and IHE to improve exchange of dose information between imaging modalities

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**ALARA** and the medical sector

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# Problem

- Knowledge of patient exposure due to imaging procedures using ionizing radiation is essential to:
  - Perform quality assurance;
  - Estimate risk;
  - Undertake any **optimization** approach.
  
- In recent years the need to know the patient's exposure has increased:
  - To comply with **national or international regulations** or standards such as European directive 97/43 (DRLs), ACR guidelines, IEC guidance...;
  - To improve knowledge of **population exposure** (DoseDataMed);
  - To collect dose over time for **individual dose report** (SmartCard ).

# Problem

## ■ To know, monitor and manage the dose it is mandatory to:

- **Harmonize** the data and their units (specially dosimetric data),
- **Standardise** exchange of information between imaging devices and PACS (Picture Archiving and Communication System), RIS (Radiology Information system) or HIS (Hospital Information System) from different manufacturers.

## ■ Unfortunately systematic exposure monitoring is difficult:

- The transition from film to digital imaging is always in progress so **several devices still do not inform on the dose**;
- When the dosimetric information exists (i.e. DAP) it is often necessary **to record it manually**;
- With digital radiology, **dosimetric information** may exist but is often **incomplete, not transmitted or associated to an image**;
- **Units** of dosimetric quantities are **not** always **standardised**.

# How to exchange data?

- However for many years efforts have been made to **standardize** and **facilitate the exchange of information**.
- DICOM (Digital Imaging and Communications in Medicine) is a standard to enable the integration of imaging modalities, workstations, printers, and network hardware from multiple manufacturers into a picture archiving and communication system (PACS), and **since 1993 some dosimetric data are transmitted**.
- But dose information in DICOM header:
  - **is not always mandatory** (stored in manufacturer private field);
  - **can vary** from model to model;
  - **is not saved** if the image is deleted.

# Dose reporting evolution

- To overcome **limitations of DICOM header**, a work was undertaken by DICOM in liaison with IEC to register, **separately from the images**, dosimetric and related data.
- This work led to the creation in 2004 of a **DSR (Dose Structured Report)** to capture and collect all information dedicated to dosimetry.
- The DSR contains a set of individual **Irradiation Event (IE)** which contains the relevant technical and dosimetric details for **one single continuous irradiation**. Whether or not the images are stored, IE and DSR are registered.
- Two Dose SR exist :
  - **Supplement 94: Diagnostic X-Ray Radiation Dose Reporting (2005).**
  - **Supplement 127: CT Radiation Dose Reporting (2007).**

# Dose reporting evolution

- In 2007 IEC published a **Publicly Available Specification (PAS)** (IEC/PAS 61910-1 Medical electrical equipment - Radiation dose documentation - Part 1: Equipment for radiography and radioscopy).
- This PAS defines **the relevant radiation quantities** required in a DSR and establishes the equipment relevant levels.
- Two conformance levels are defined:
  - **Level 1** is intended for equipment that produces dose levels below significant deterministic thresholds for all intended uses (**general radiography and fluoroscopy**);
  - **Level 2** is intended for equipment used for procedures that could cause significant deterministic injuries (**interventional systems**).

# Dose reporting evolution

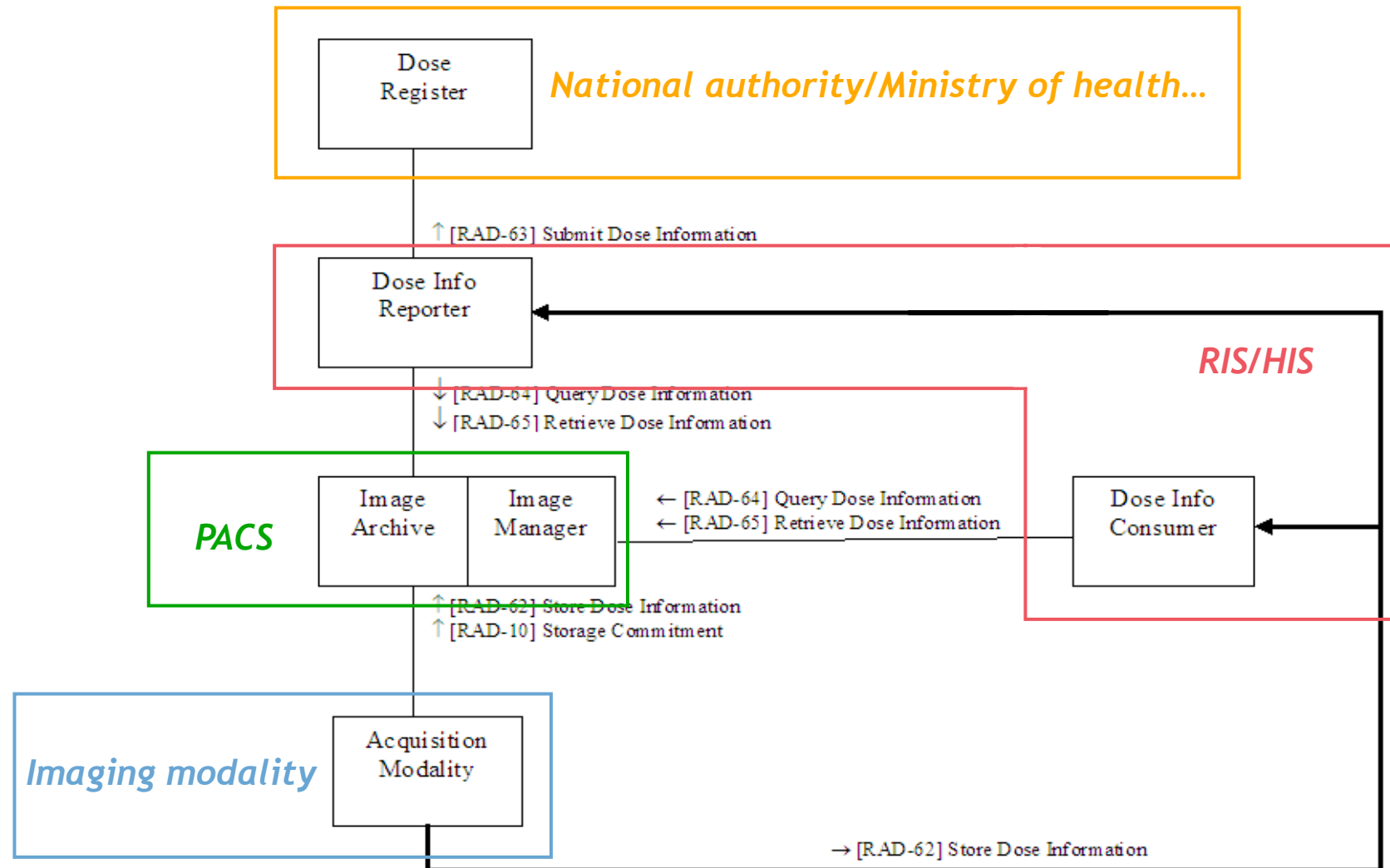
- To fulfil the demand of professionals to monitor the radiation dose delivered to their patient, IHE has developed a profile « **Radiation Exposure Monitoring (REM) Integration Profile** ».
- **Integrating the Healthcare Enterprise (IHE)** is an initiative of professional societies to collaborate with industry and coordinate standards-based solutions to problems that span multiple vendors systems.
- This REM Profile **facilitates the collection and distribution of information** about estimated patient radiation exposure resulting from imaging procedures.

# IHE REM Profile ([www.ihe.net](http://www.ihe.net))

- The REM Profile addresses **plain X-ray, CR, DR, fluoroscopy, angiography, mammography and CT**.
- This profile is based on **DICOM SR** (Projection X-ray and CT) and uses **5 “actors”** in order to realize the transactions.
- This profile provides:
  - **Details** (patient demographics, study information, imaging technique and geometry, and typical dose metrics like CTDIvol, DLP, DAP, AGD, and DRP) **for each irradiation event** (IE);
  - An **implementation guide for vendors** for the automatic capture of dose information during a procedure and making it part of a patient record;
  - An effective shorthand for sites to use in **purchase specifications**.



# IHE REM Profile: Actors & Transactions



# IHE REM Profile status

■ The first REM Profile demo was presented at JFR'2009.



■ In 2011 the REM profile was tested at two **Connectathons**:

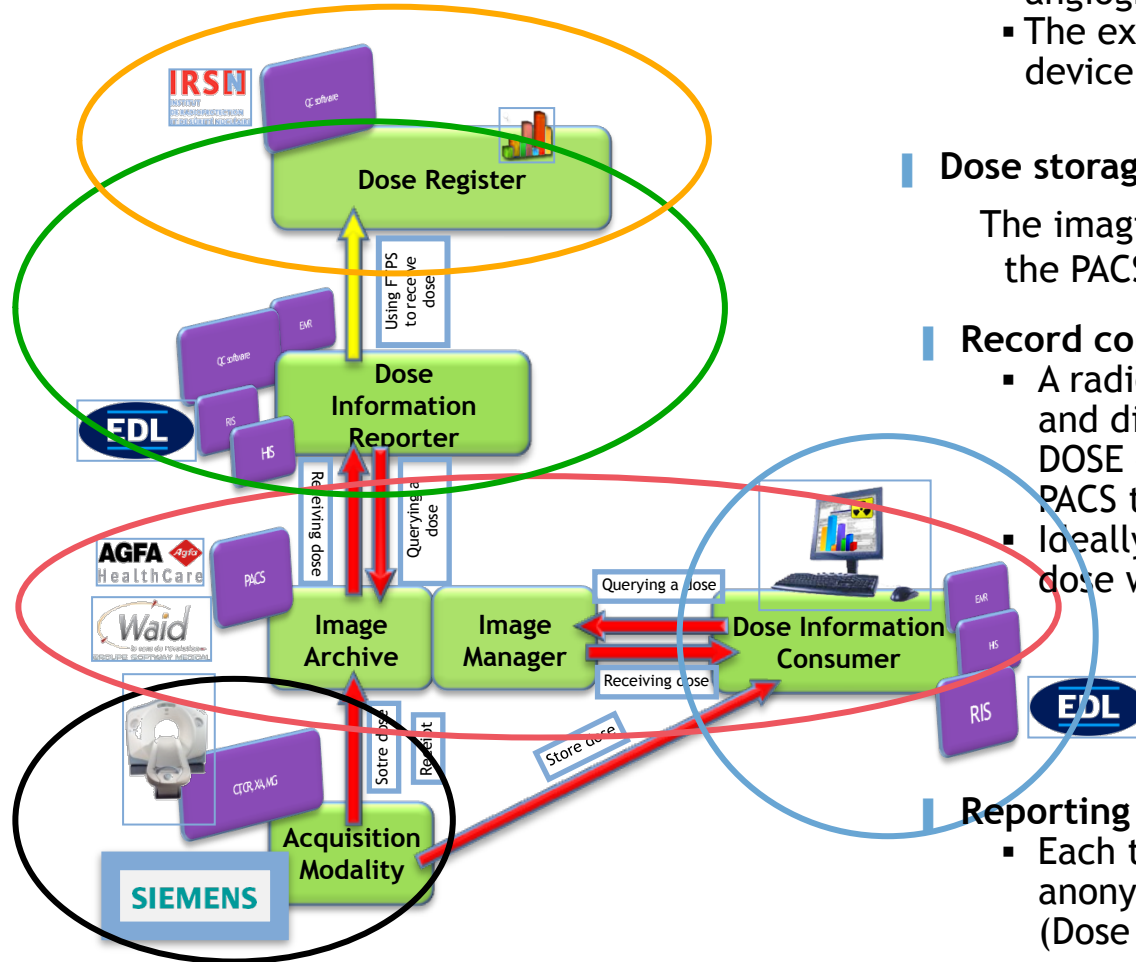
- IHE North America Connectathon 2011 - January 17-21, Chicago (USA)
- IHE-Europe Connectathon 2011 - April 11-15, Pisa (Italy).

During **Connectathons** IHE provides a detailed implementation and testing process to promote the adoption of standards-based interoperability by vendors and users of healthcare information systems.

## Actors and Vendors involved in the 2009 demo

Company	Product name	Acquis. Modality	Image Manager	Dose Info Consumer	Dose Info Reporter	Dose Register
SIEMENS	Artis Zee	X				
AGFA Healthcare			X	X		
SOFTWAY	Medseen		X	X		
EDL	Xplore			X	X	
IRSN	Experimental					X

# Demo scenario



## Image acquisition

- A patient is referred to the hospital for an angiography.
- The examination is performed and the imaging device generates a new DICOM SR object

## Dose storage

The imaging device pushes the DICOM SR objects to the PACS, as well as the RIS.

## Record consultation

- A radiologist reviews the patient's study on the PACS and dictates on the RIS. He views the presence of a DOSE object and can read the report as well on the PACS that on the RIS.
- Ideally, the RIS would be able to compare current dose with recommended values.

## Reporting

- Each time a study is dictated, the RIS pushes an anonymized DOSE SR to the registry using FTPS. (Dose Information reporter).

## Dose management for public health

- All dose reports, coming from different modalities are centralized in the registry.

P. Puech - J. Chabriaix

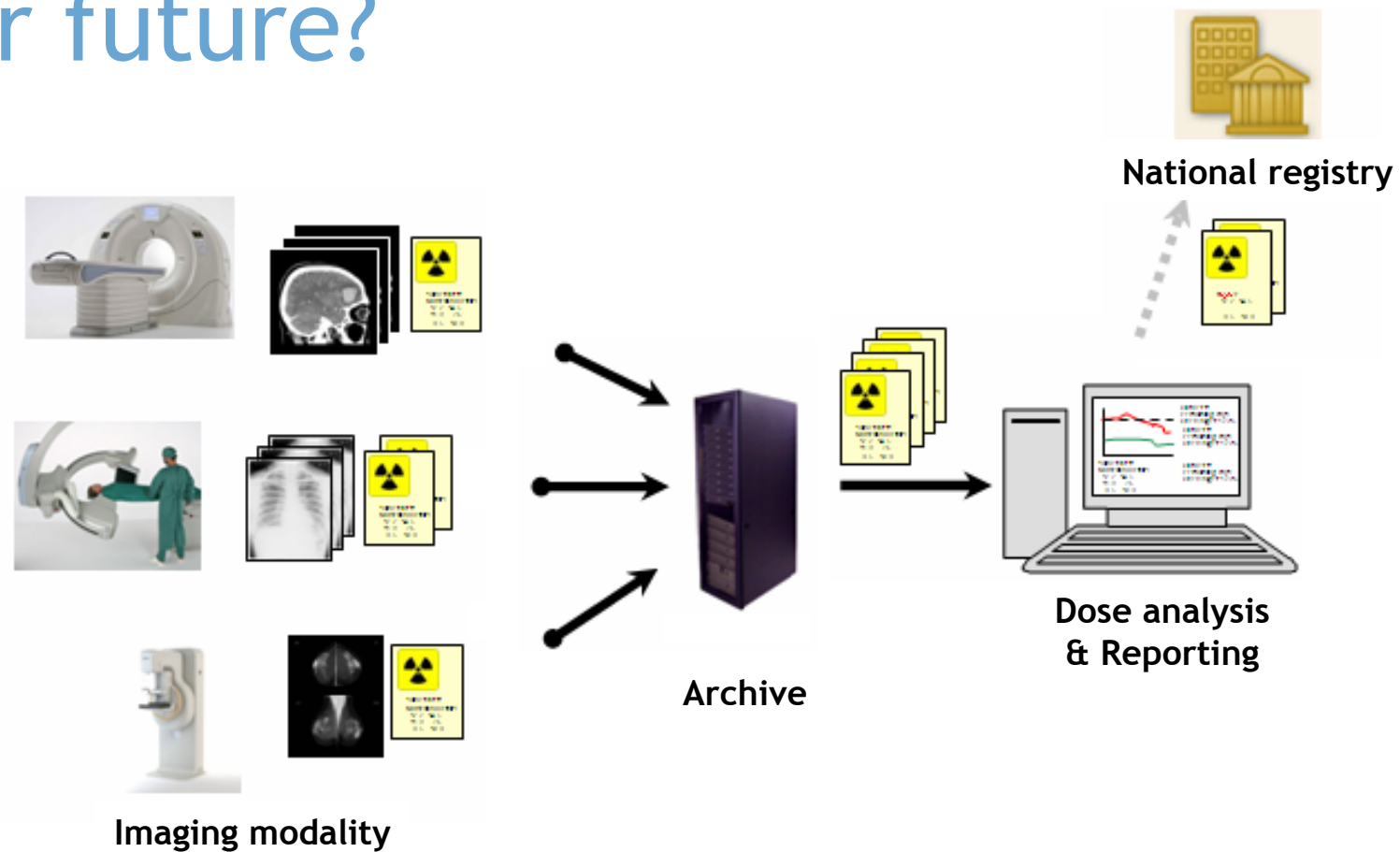
## Companies and actors involved in 2011 Connectathons for REM Profile

Company	Acquis. Modality	Image Manager	Dose Info Consumer	Dose Info Reporter	Dose Register
AGFA Healthcare	X	X	X		
American College of Radiology					X
Aware, Inc		X		X	
Cerner Corporation		X			
EDL			X	X	
ETIAM	X				
GE Healthcare	X	X	X		
Global Imaging OnLine		X	X		
InfiMed, Inc.	X				
INFINITT				X	
Karos Health		X			
Krucom AB		X		X	X
medavis		X			
MedicalCommunications		X			
Philips Medical Systems	X				
Sectra Imtec AB		X			
Siemens Medical Solutions	X				
SOFTWAY MEDICAL		X			
Swissray Medical AG	X				
TELEMIS S.A.		X			
Toshiba Medical Systems	X				
VISUS Technology Transfer		X			

# Conclusion

- Today the **standards** to collect, exchange and store dosimetric information exist and are coordinated by the **IHE REM Profile**.
- This profile allows to answer to the main needs **to follow the patient dose** either at the level of patient file, of service or institution. It allows to transmit data to regional and/or national registers.
- Therefore, radiologists, physicists... **must** require suppliers of equipment (imaging modality, PACS, RIS), **implementation of the IHE REM Profile** when a new equipment is acquired or when a recently installed system is upgraded.

# Near future?



## Thank you for your attention