



# Standards in Medical Imaging:

A Tale of Two Layers

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#### **DICOM: Traditional Data Standard**

Defining how to encode and exchange information with unambiguous semantics



- Broad scope
  - Intentionally addresses MANY use cases
  - "Swiss Army Knife"
  - Generalize, inclusive,
- Priority: make most/all things possible
  - You decide how to apply it to your problem



# IHE: Profiling

 Profiling: Describing the application of <u>existing</u> standards to address a <u>specific use case</u>



- Narrower Scope:
  - Focus on ONE use case
- Constrain Underlying Standards
  - Select among alternative methods
  - Remove/reduce optionality
- Priority: Interoperability; common usage



## IHE in One Slide

- IHE helps vendors implement & test functions that span multiple systems
- Profiles are implementation guides
  - how to use existing standards
  - to address a specific problem scenario
- Connectathons are test events
  - managed testing of Profile implementations
- IHE helps users purchase & integrate multi-system solutions
  - list required IHE Profile support in RFPs





#### **DICOM & IHE Similarities**

- Open Process
  - Permit & encourage participation by all stakeholders
  - Public Comment for wider input



- Freely Available
  - dicom.nema.org
  - www.ihe.net
- Ongoing Development
  - Maintenance & extension process
  - New supplements every year





#### DICOM & IHE - Differences

DICOM	IHE
Open-ended development	Annual cycle
Published ~5 times per year	Published annually
DICOM Conformance Statement - Detailed functionality (Long)	IHE Integration Statement - Profile/Actor summary (Brief)
Occasional implementation demos	Annual Connectathon test events
Central oversight (WG-6)	Varies by domain

# **Examples of Layering**

- Simple Case: <u>Radiation Records</u>
  - Adding Architecture
    - DICOM Radiation Dose Structured Report object
    - IHE Radiation Exposure Monitoring Profile
- Advanced Case: <u>Imaging Workflow</u>
  - Assembling Services
    - DICOM Worklists + DICOM MPPS + DICOM Storage + DICOM Storage Commitment
    - IHE Scheduled Workflow Profile
  - Bridging Standards
    - HL7 Orders -> DICOM Worklists

# DICOM RDSR

# Radiation Dose Structured Report Object

#### TID 10013 CT IRRADIATION EVENT DATA Type: Extensible Order: Significant

	NL	Rel with Parent	VT	Concept Name	VM	Req Type	Condition	Value Set Constraint
1			CONTAINER	EV (113819, DCM, "CT Acquisition")	1	М		
2	>	CONTAINS	TEXT	EV (125203, DCM, "Acquisition Protocol")	1	U		
3	>	CONTAINS	CODE	EV (123014, DCM, "Target Region")	1	М		DCID (4030) CT and MR Anatomy Imaged
4	>	CONTAINS	CODE	EV (113820, DCM, "CT Acquisition Type")	1	М		DCID (10013) CT Acquisition Types
5	>	CONTAINS	CODE	EV (G-C32C, SRT, "Procedure Context")	1	U		DCID (10014) Contrast Imaging Technique
6	>	CONTAINS	UIDREF	EV (113769, DCM, "Irradiation Event UID")	1	М		
7	>	CONTAINS	CONTAINER	EV (113822, DCM, "CT Acquisition Parameters")	1	М		
8	>>	CONTAINS	NUM	EV (113824, DCM, "Exposure Time")	1	М		Units = EV (s, UCUM, "s")
9	>>	CONTAINS	INCLUDE	DTID (10014) Scanning Length	1	М		
10	>>	CONTAINS	NUM	EV (113826, DCM, "Nominal Single Collimation Width")	1	М		Units = EV (mm, UCUM, "mm")
11	>>	CONTAINS	NUM	EV (113827, DCM, "Nominal Total Collimation Width")	1	М		Units = EV (mm, UCUM, "mm")
12	>>	CONTAINS	NUM	EV (113828, DCM, "Pitch Factor")	1	MC	IF row 4 equals (P5- 08001, SRT, "Spiral Acquisition") or equals	Units = EV ({ratio}, UCUM, "ratio")

# **DICOM Dose Reports**

- "SR Objects" DICOM Structured Reports
  - Easily ingested (and regurgitated) by PACS
- Granularity: "Irradiation Event"
  - Accumulated Dose over Study, Series
- Templates :
  - CT, Projection X-Ray (Mammo, Fluoro, DR/CR)
  - PET/NM
- Not addressed: RT



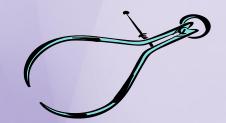


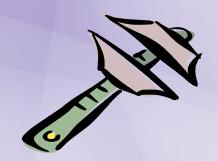




# **Key Measurements**

- CT Dose
  - DLP, CTDIvol, kVP, mA, sec, ...
  - SSDE [ Optional; see AAPM 204 ]
- Projection X-Ray Dose
  - DAP, Dose@RP, kVP, mA, sec, Fluoro Time, ...
  - CR/DR: Exposure Index, Deviation Index
- Mammography Dose
  - AGD, Entrance Exposure@RP, kVP, mA, sec, ...
  - Compression, Half Value Layer
- Nuclear Medicine (New)
  - Administered Activity, Date/time, Route of Administration, ...





#### Other Details in Dose SR

- Full Patient / Order / Study Details
- Unique ID for each Irradiation Event
- Equipment ID, Ordering Doc, Performing Tech
- Patient Size, Orientation, Anatomy Imaged
- Imaging Geometry
- X-Ray Filtering & Collimation Details
- Anode Target Material
- Calibration, Phantom, Dosimeter, Patient Model

# CT IRRADIATION EVENT DATA Type: Extensible Order: Significant Concept Name VM Req Condition

Value Set Constraint

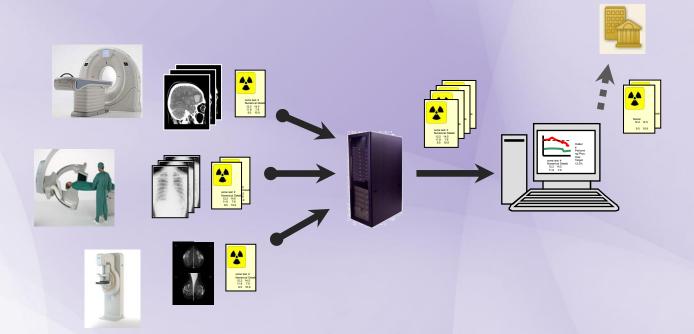
TID 10013

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# **IHE REM Profile**

Radiation Exposure Monitoring



# Trip to IKEA



- Off-the-shelf...
  - 43 vendors passed IHE Connectathon testing
  - 34 modality products (<u>CT</u>, XA, DR, MG)
  - All major CT vendors shipping in 2012
  - 26 archive products, 18 dose "consumers"
  - 9 dose reporters, 4 dose registry
- NEMA XR-25 & 29 CT Dose Check, etc
  - All new CT products

#### **IHEREM**

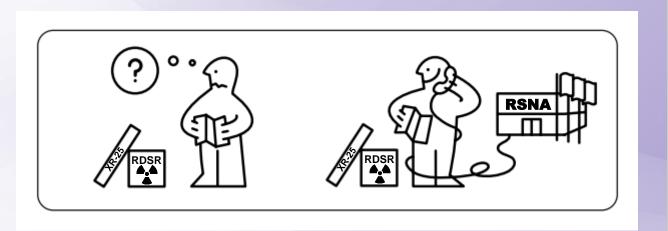


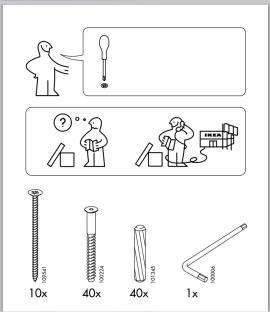
I ntegrating theH ealthcareE nterprise

R adiation E xposure M onitoring

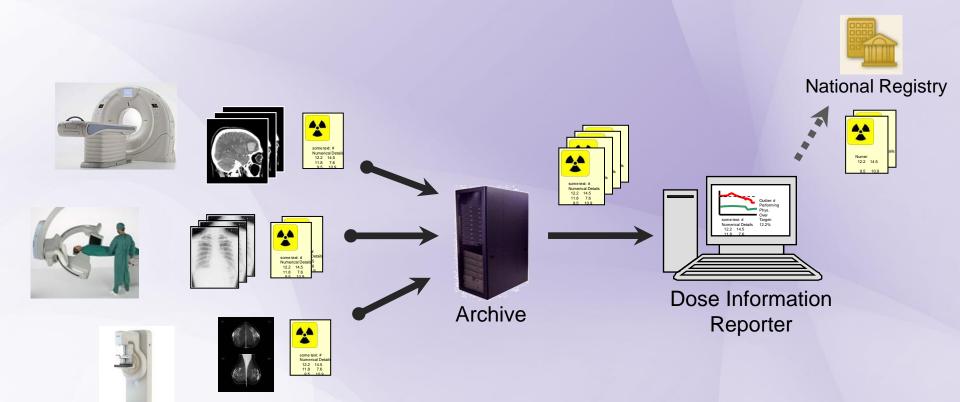


# The pieces exist; Assembly is straightforward





### **IHE Radiation Exposure Monitoring Profile**



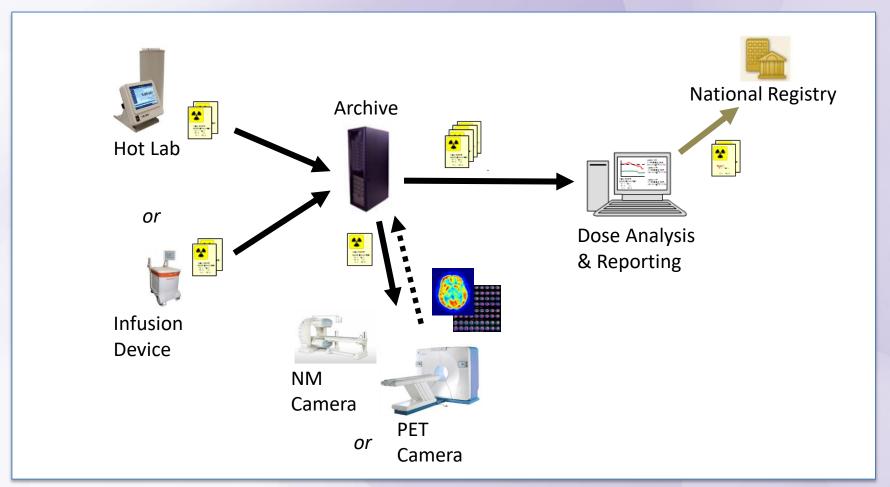
# Using SR Dose Reports

- Radiation QA
  - Periodically Query / Retrieve Reports from Archive
  - Set policies/standards and flag deviations
  - Set goals for improvement and track progress
  - Implement protocol changes and compare difference in dose
- Regulation
  - E.g. Automatically insert dose metrics into diagnostic reports
- Patient Impact Evaluation
  - E.g. if Patient identified after the scan as pregnant
- Dose Mapping
  - Store data in realtime from Modality to Mapping Workstation

# Using SR Dose Reports

- National Registries
  - Anonymize and submit Dose Reports to Registry
  - Compile Population Risk Estimations
  - Derive Dose Reference Levels (DRLs)
  - Provide Site-Site Comparisons
- Individual Dose Record
  - Collect Dose Reports over time
- Clinical Trials
  - Collect Dose together with Images
  - Demonstrate both improved detection & reduced dose

#### IHE REM-NM Profile (2016)



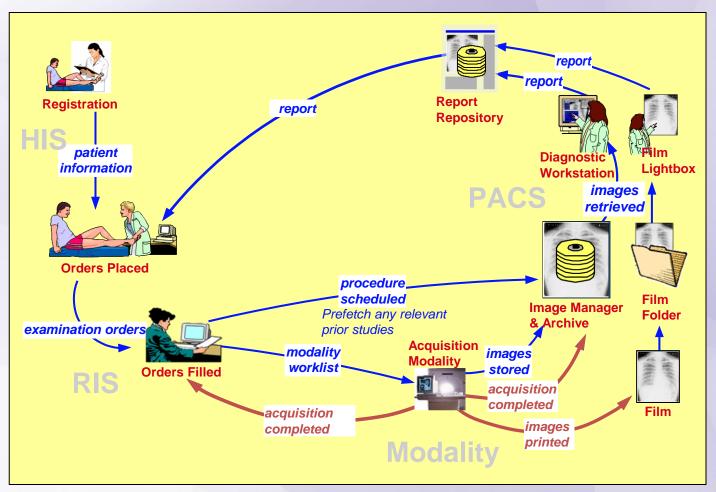
# Finding Products

- IHE REM
  - Testing: IHE Connectathon <a href="http://connectathon-results.ihe.net">http://connectathon-results.ihe.net</a>
  - Product: IHE Integration Statement <a href="http://product-registry.ihe.net">http://product-registry.ihe.net</a>
- DICOM RDSR
  - Product: DICOM Conformance Statement
- NEMA XR-25 Dose Check
  - Vendor commitment; all new products

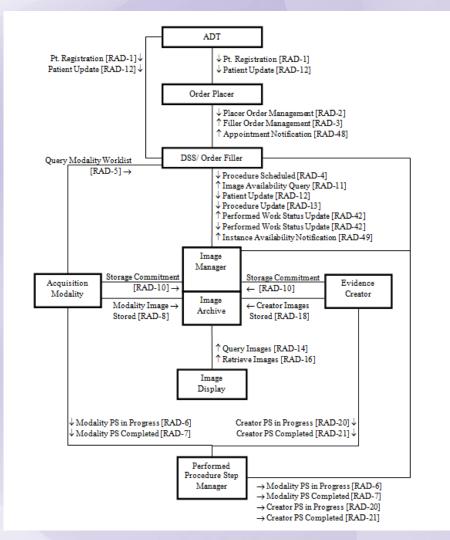
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#### Scheduled Workflow Profile



# Actor / Transaction Diagram\*



\* Now with improved symmetry

# Key DICOM Services

- DICOM Modality Worklist
  - Provide demographics and order details
- DICOM Modality Performed Procedure Step (MPPS)
  - Provide logging/tracking of procedure status
- DICOM Storage Commitment
  - Provide confirmation of data storage
- DICOM Instance Availability Notification
  - Provide notification of data availability

### Modality Worklist – Query

- Modality (SCU) queries RIS (SCP)
  - Query can include filters: (AKA Matching Key Attributes)
    - Date/Time of Study
    - Patient Name, ID
    - Accession #
    - Performing System Name
    - Modality
    - Etc.
  - May indicate desired Return Key Attributes
  - Query strategies
    - Narrow query try to just get specific results
    - Broad query do additional result filtering on the modality

### MPPS – In Progress

- Indicates a procedure step is In Progress
- Timing is not prescribed
  - SCU may send at "start of procedure"
  - SCU may send after completion
- Tracking Attributes
  - Accession#, SPS ID, Study UID
  - Patient Demographics, etc
  - Logical to populate these from the Modality Worklist
- May provide progress details
  - Data produced
  - Protocol codes performed
- Implicit "Notification" of unscheduled/trauma cases
  - MPPS does not correspond to any SPS
  - SCP may choose to "backfill" an order or perform other reconciliation

## MPPS – Usage

- Billing
  - Details of procedures actually performed
  - Can bill sooner and more accurately
- Procedure Status Monitoring
  - Ordering physician can see if started/acquired/cancelled
- Workflow
  - Radiologist can see exams pending/ready for reading
- Patient Tracking
  - Know where patient is/was at a certain time
- Key Benefits
  - Accurate, detailed data on performed steps
  - Can provide up to date status

## Storage Commitment – Usage

- Modality requests after storage complete
- Catches network outage losses
- Catches PACS outage losses
- Catches "I thought the morning shift staff sent all their studies to PACS" losses

- Key Benefits
  - Reduces lost data
  - Eliminates manual confirmation time

# Mapping HL7 Order to DICOM MWL

DICOM Attribute	DICOM Tag	HL7 Description	HL7 v2.3.1 Segment	HL7 v2.5.1 Segment	Notes
Patient's Name	(0010,0010)	Patient Name	ORM PID:5	OMG PID:5	See note 10
Patient ID	(0010,0020)	External Patient ID	ORM PID:3.1	OMG PID:3.1	See note 5
Issuer of Patient ID	(0010,0021)	External Patient ID	ORM PID:3.4	OMG PID:3.4	See note 5
Medical Alerts	(0010,2000)	Relevant Clinical Info	ORM OBR:13	OMG OBR:13	
Requesting Physician	(0032,1032)	Ordering Provider	ORM OBR:16	OMG OBR:16	
Accession Number	(0008,0050)				Generated by the department system scheduler
Reason for the Requested Procedure	(0040,1002)	Reason for Study	ORM OBR:31	OMG OBR:31	May be a code or text; if code, then code meaning (display name) should be used; see also (0040,100A)

## A Profile in Two Parts

- Scheduled Workflow (SWF)
  - Order & acquisition workflow
  - ADT, HIS, RIS, PACS, Modality, Workstation
  - "Backbone of Radiology"
    - Electronic orders, worklists
    - Dataflow, tracking
    - Avoid manual entry, custom interfaces
    - "Close the loop"
  - Value proposition
    - Reduce errors
    - Improve throughput
    - Reduce costs

- Patient Info Reconciliation (PIR)
  - Patient identity changes
  - ADT, HIS, RIS, PACS
  - "Second half of SWF"
    - Propagate and coordinate demographic changes
    - Keep all systems on the same page
  - Value proposition
    - Reduce errors
    - Improve throughput
    - Reduce costs

# Participate!

#### DICOM & IHE invite new members & contributors

- Application process; Patent disclosure policy
- dicom.nema.org
- dicom@medicalimaging.org
- www.ihe.net
- radiology@ihe.net

Great opportunity to <u>learn</u>
Great opportunity to <u>contribute</u>



# Questions?