

Medical Staff Dosimetry

Simulation of an Interventional Cardiac Catheterization Procedure

Medical Staff Dosimetry

Restricted Problem – CONRAD WP4 & WP7

Jean-Marc Bordy - Design of a Realistic Calibration
Field for Diagnostic Radiology

Frank Schultz - Simulation of an Interventional
Cardiac Catheterization
Procedure

Lara Struelens - Summary of the Submitted
Problem Solutions

Labs involved
in problem
definition and
analysis:



TU Delft
Delft University of Technology

SCK•CEN
STUDECENTRUM VOOR KERNENERGIE
CENTRE D'ETUDE DE L'ENERGIE NUCLEAIRE

IRSN
INSTITUT
DE RADIOPROTECTION
ET DE SÛRETÉ NUCLEAIRE

Outline

Background info on

- Interventional Cardiology
- Individual Monitoring

Introduction to

- The Medical Staff Dosimetry Problem (P2)

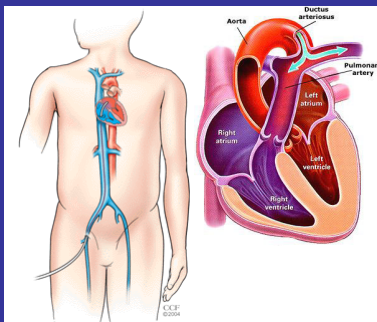


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Interventional Cardiology

Image guided minimal invasive medical procedure
Replaces open heart surgery



catheters and miniaturized instruments

- RF ablation – heart rhythm disturbance
- Patent DA occlusion – disconnect shunt
- ASD closure – close hole in chamber wall
- balloon dilatation – open clogged artery
- diagnostic catheterizations

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The Cleveland Clinic Foundation

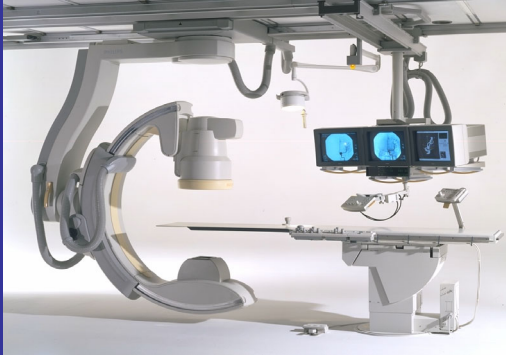
N Engl J Med 2000; 342:256.
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Medical Society



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Fluoroscopy guided catheterization



UMCN, Nijmegen



Cath Lab - UCSF



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Relevance: Individual monitoring

- Protection of workers exposed to ionizing radiation
- EC council directive 96/29/Euratom, 1996
 - national legislation
 - Monitoring personal dose (effective dose)
 - Dose limits
- Personal dosimeter (TLD or film badge, APD)
 - Personal dose equivalent, $H_p(10)$
 - Registration in National Database



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Complication

(highly) exposed workers wear protective clothing

- dosemeter outside apron or under apron?
- position of dosemeter?
- correction factor?

what relation?

- dosemeter reading $\leftrightarrow H_p(10) \leftrightarrow E \leftrightarrow \text{risk}$



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Problem, P2

Simulate an interventional cardiology procedure
(heart catheterization)

Monte Carlo technique

Provided:

- Geometry
- Technical parameters
- Materials properties

Objective:

Variation in personal dose estimates per unit Air Kerma Area Product
due to different participants simulating a clinical situation

Requested:

- Dosemeter reading
at 3 positions on cardiologist,
- without protective clothing
- outside or under the apron
- Organ doses
(effective dose) to the
cardiologist



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Free Choice of Anthropomorphic Phantoms



Mathematical, ADAM
(adult male) 1986
GSF Bericht S-885



Voxel, FAX
(adult female) 2004
Phys. Med. Biol. 49: 5203-5216



Voxelized CT model, Rando
phantom (adult male) 2004
Rensselaer Polytechnic Institute
www.phantomlab.com/rando.html



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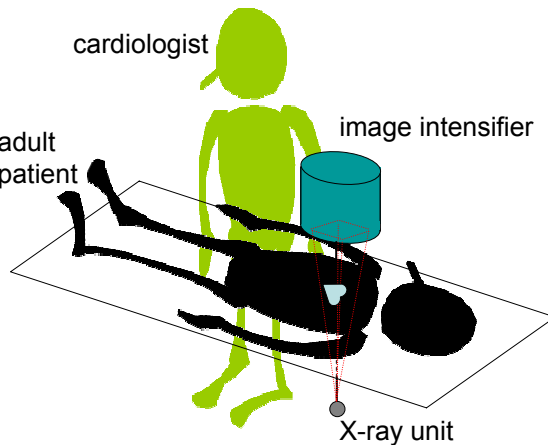
PA irradiation

in AIR

cardiologist

adult
patient

image intensifier



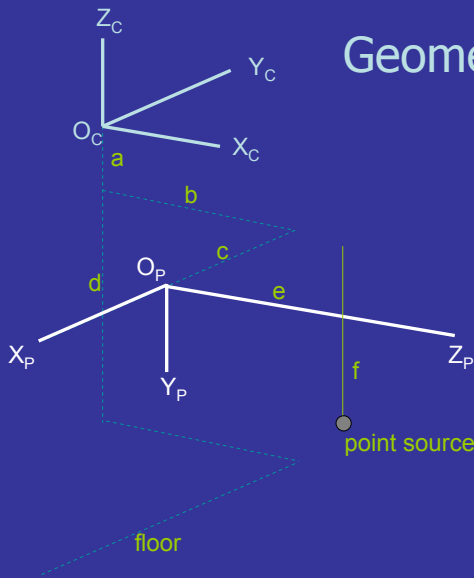
X-ray unit



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Geometry



O_C : “cardiologist” phantom ADAM

O_P : “patient” phantom ADAM

distances (cm):

$a = 76 - (80 + 10) = -14$

(O_C below O_P !)

$b = 0$

$c = (55/2) + 2 + 2 + 10 = 41.5$

(table, dosimeters on and under the apron, 1/2 cardiol. thickness)

$d = 80 + 10 = 90$

(table, 1/2 patient thickness)

$e = 51$

(position of the heart region)

$f = 65 + 10 = 75$

(FSD, 1/2 patient thickness)



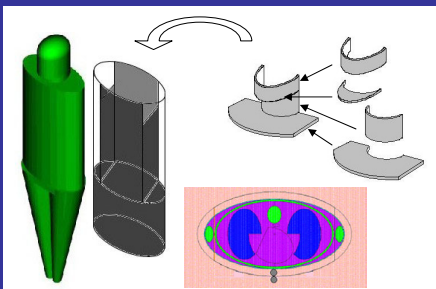
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Protective clothing

The cardiologist may wear a wrap-around protective apron of **0.35 mm Pb-equivalent** material, leaving the arms free

In combination with the apron he also wears a thyroid collar of the same material and thickness



Wrap-around apron and thyroid collar;

example, in case the mathematical phantom ADAM is being used to represent the cardiologist.

The collar covers the front half of the neck, the underside of the chin and part of the lower mandible (in ADAM, from $Z_C = 70$ through $Z_C = 75$, to fully shield the thyroid). A part of the trunk's top surface is also covered, connecting to the apron's front side.



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Dosemeter



Sphere with radius of 1 cm
Filled with ICRU 4-element tissue
Dosemeter reading is absorbed dose to the center, " $H_p(10)$ "

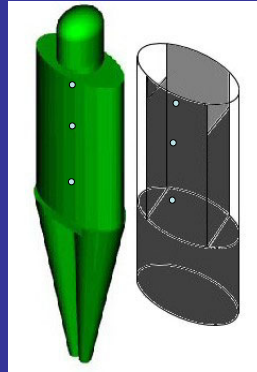
Dosemeters are worn on the front of the trunk at 3 levels:

- waist
 - chest
 - neck,
- either outside or under the apron

When using the ADAM phantom, the choice would be

- waist: $Z_c = 20$ cm
- chest: $Z_c = 50$ cm
- neck: $Z_c = 69$ cm,

in the sagittal plane of symmetry

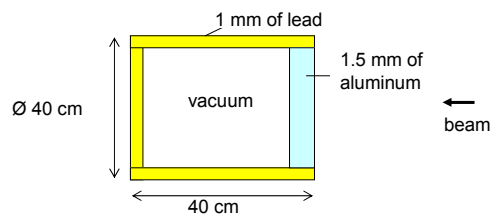


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Other objects

Image Intensifier (II)



L.Struelens, SCK-CEN

Patient table

Not modeled; width = 55 cm, surface at 80 cm above floor
Cardiologist leans against the table

Air

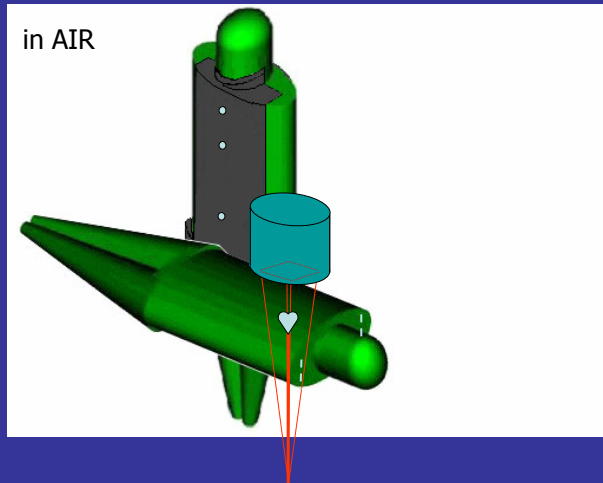
Surrounding dry air is present, with composition and density according to ICRU specification



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Geometry for 2 ADAM Phantoms



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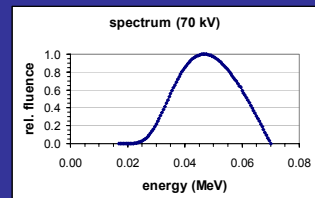


Technical parameters

Beam quality:

X-ray beam of 70 kV
Filtration: 4.5 mm Al + 0.2 mm Cu

Anode angle is 12 degrees
The generator is assumed to show 0% ripple



IPEM SRS-78

Distances:

FSD = 65 cm
FID = 95 cm

Field size:

17 cm x 17 cm at image intensifier



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Materials

material:	fraction by weight					
	PMMA	water	ICRU tissue	ICRU air	aluminum	lead
element						
hydrogen	0.080538	0.111894	0.101	-	-	-
nitrogen	-	-	0.026	0.755268	-	-
oxygen	0.319614	0.888106	0.762	0.231781	-	-
carbon	0.599848	-	0.111	0.000124	-	-
argon	-	-	-	0.012827	-	-
aluminum	-	-	-	-	1.0	-
lead	-	-	-	-	-	1.0
			density (g cm ⁻³)			
	1.19	1.0	1.0	1.205x10 ⁻³	2.699	11.35



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Tasks

2.1 Calculate “dosemeter readings” per unit of dose area product, at waist, chest and neck level

- a) without protective clothing
- b) above the 0.35 mm Pb wrap-around apron
- c) under the 0.35 mm Pb wrap-around apron

reference values for Individual Monitoring Protocol?

and, optionally,

2.2 Calculate **effective dose** to the cardiologist per unit of dose area product,

- a) if no protective clothing is worn
- b) if the cardiologist wears a 0.35 mm Pb wrap-around apron (+ thyroid collar)

reference values for SWG2?



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Participants' Solutions

See next lecture:

Lara Struelens - Monte Carlo modelling for medical staff dosimetry

Questions / Comments?



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