

Siemens Ct Scanner Somatom Definition Service Manual

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Dual Source Flash CT ScannerSiemens CT Scanner Somatom Definition
SOMATOM Definition Edge Scan time: 3.7 s Scan length: 137 mm 100 kV, 98 mAs CTDI vol: 11.39 mGy DLP: 179 mGy cm Eff. dose: 2.5 mSv HR: 81 bpm Excellent details with high heart rates.

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Dual Source CT Scanner Moving beyond the simple adding of detector rows, SOMATOM Dual Source scanners use two X-ray sources and two detectors at the same time.

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The Siemens SOMATOM Definition Flash is a whole-body CT scanner that optimizes scan time and dose efficiency, allowing for successful imaging on a variety of patients.

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Background and Aims:With the Alberta Stroke Program Early Computed Tomography Score (ASPECTS), 10 brain-regions are dichotomously scored on presence of ischemic stroke damage. Considerable variability in CT-scanner parameter settings is seen in clinical practice. Optimized parameters could improve the performance of ASPECTS software. We evaluated the influence of CT-scan parameter settings on computed ASPECTS (c-ASPECTS 2.0.1, Frontier, Siemens Healthineers, Forchheim, Germany).Methods:Prospectively, patients with acute stroke symptoms received a Non Contrast CT-scan (Siemens Somatom Definition Edge). Thirty consecutive patients with middle cerebral artery (MCA) occlusion were included. c-ASPECTS were assessed in images with different Siemens CT reconstruction kernels (J30s/J37s/J40s and H20s/H30s/H31s) and slice thicknesses (2.0-5.0 mm). Ground truth ASPECTS was provided by an expert with unrestricted data access. Scans (J40s: 5.0 mm and J30s: 2.0 mm) were evaluated by four readers for ASPECTS. For every combination of parameters, we calculated the agreement of ground truth with c-ASPECTS and c-ASPECTS regions, respectively. Agreement of c-ASPECTS across all parameter combinations was assessed. Correlation of ground truth with readers and c-ASPECTS was calculated.Results:Comparison of ground truth with c-ASPECTS and c-ASPECTS regions across all parameter combinations shows ICCu2019s of 0.421-0.609 and agreement of 0.80-0.82, respectively. No significant differences were found between images reconstructed with different kernels or slice thicknesses. Agreement of c-ASPECTS across all parameter combinations shows an ICC of 0.936. Comparison of ground truth with readers and c-ASPECTS resulted in comparable correlations (ICCu2019s of 0.541-0.811 and 0.519, respectively).Conclusions:Reconstruction kernels and slice thicknesses do not significantly affect the performance of c-ASPECTS.

Split-filter dual-energy computed tomography (DECT) has recently been implemented for clinical use as an added feature to the Siemens SOMATOM Definition Edge CT scanner. This split-filter technique is referred to as TwinBeam (Siemens Healthcare, Forchheim, Germany). TwinBeam is a novel modality performed with an x-ray source operated at 120 kVp and a removable split-filter made of adjacent 0.05 mm of gold and 0.6 mm of tin. This dissertation explores the use of TwinBeam for imaging pancreas and liver tumors for radiation therapy applications. This dissertation also compares the new split-filter system to other DECT modalities based on spectral separation and dose allocation. Accurate tumor delineation is crucial for stereotactic body radiation therapy. Unfortunately, tumor delineation using conventional single-energy CT (SECT) images can be a challenge for pancreatic adenocarcinomas and liver tumors where contrast between the tumor and surrounding healthy tissue is low. The first part of this work investigates the utility of TwinBeam to improve pancreas and liver tumor visibility as quantified by contrast and contrast-to-noise-ratio (CNR) for radiation therapy applications. The visibility of pancreatic adenocarcinomas was found to substantially increase with TwinBeam virtual monoenergetic images (VMIs), while the increase in visibility of liver tumors was not universal but was observed for certain patients. The investigation of other dual-energy images, including relative electron density and effective atomic number images, were also explored for tumor delineation. The difference between tumor and healthy tissue based on these images varied by tumor location but still provided additional information to complement VMIs and aid in tumor delineation. The accuracy of TwinBeam iodine-enhanced images was investigated and used to quantify the iodine concentration within pancreas and liver tumors and surrounding healthy tissue during bi-phasic imaging for radiation therapy simulation. The accuracy was found to be dependent on patient size; therefore, a methodology to determine the iodine concentration within 3D contours from patient datasets was established. First order texture analysis was also performed using TwinBeam VMIs and analyzed as a function of reconstruction energy. Mean CT number and standard deviation increased with decreasing energy for virtual monoenergetic images (VMIs), while skewness and kurtosis were seen to be stable and did not change as a function of reconstructed energy. A subjective contouring study with split-filter DECT images was performed to investigate the current implementation of TwinBeam for delineating pancreas and liver tumors for radiation therapy applications. Three contouring sessions were conducted several days apart. Four clinicians were asked to contour the pancreas or liver gross target volume (GTV) on one of three different TwinBeam DECT images (VMI, iodine-enhanced, or virtual SECT image). Tumor conspicuity, tumor edge sharpness, contouring confidence, and image quality were also scored on a five-point scale. The GTVs were compared using Jaccard coefficient (JC), Dice similarity coefficient (DSC), Hausdorff distance (HD), and overall volume. Tumor edge sharpness score negatively correlated with HD for both the pancreas and liver cases. The intra-clinician and inter-clinician variability were analyzed across the different image types. For some pancreas and liver cases, the TwinBeam VMIs decreased the variability of the GTVs compared to the virtual SECT image. Monte Carlo models of split-filter DECT with peak tube voltages of 120kVp and 140 kVp were developed based on measurement of half-value layer and beam profile from the Siemens SOMATOM Definition Edge scanner. These two models were used to characterize split-filter DECT based on spectral separation and dose allocation and to investigate the potential benefits of increased tube voltage. Overall, the spectral separation increased with peak tube voltage, and dose allocation was unchanged with increased tube voltage for larger phantom sizes. The impact of the spectral differences caused by the split-filter on CT dosimetry was also investigated; the energy dependence across the beam was found to vary with ionization chambers used for CT dosimetry.

This open access book gives a complete and comprehensive introduction to the fields of medical imaging systems, as designed for a broad range of applications. The authors of the book first explain the foundations of system theory and image processing, before highlighting several modalities in a dedicated chapter. The initial focus is on modalities that are closely related to traditional camera systems such as endoscopy and microscopy. This is followed by more complex image formation processes: magnetic resonance imaging, X-ray projection imaging, computed tomography, X-ray phase-contrast imaging, nuclear imaging, ultrasound, and optical coherence tomography.

Abdominal Imaging, a title in the Expert Radiology Series, edited by Drs. Dushyant Sahani and Anthony Samir, is a comprehensive reference that encompasses both GI and GU radiology. It provides richly illustrated, advanced guidance to help you overcome the full range of diagnostic, therapeutic, and interventional challenges in abdominal imaging and combines an image-rich, easy-to-use format with the greater depth that experienced practitioners need. Select the best imaging approaches and effectively interpret your findings by comparing them to thousands of images that represent every modality and every type of abdominal imaging. Find detailed, expert guidance on all diagnostic, therapeutic, and interventional aspects of abdominal imaging in one authoritative source, including challenging topics such as Oncologic Assessment of Tumor Response and How to Scan a Difficult Patient. Efficiently locate the information you need with a highly templated, well-organized, at-a-glance organization.

New Techniques in Cardiothoracic Imaging emphasizes emerging methods in computed tomography, magnetic resonance imaging, positron-emission tomography, and similar technology. Effective use of these tools can facilitate the identification, analysis, and treatment of diseases and disorders commonly encountered in daily clinical practice. The contribu

This book offers a comprehensive and topical depiction of advances in CT imaging. CT has become a leading medical imaging modality, thanks to its superb spatial and temporal resolution to depict anatomical details. New advances have further extended the technology to provide physiological information, enabling a wide and expanding range of clinical applications. The text covers the latest advancements in CT technology and clinical applications for a variety of CT types and imaging methods. The content is presented in seven parts to offer a structure across a board coverage of CT: CT Systems, CT Performance, CT Practice, Spectral CT, Quantitative CT, Functional CT, and Special Purpose CT. Each contain chapters written by leading experts in the field, covering CT hardware and software innovations, CT operation, CT performance characterization, functional and quantitative applications, and CT systems devised for specific anatomical applications. This book is an ideal resource for practitioners of CT applications in medicine, including physicians, trainees, engineers, and scientists.

Dual-energy CT is a novel, rapidly emerging imaging technique which offers important new functional and specific information. In this book, physicists and specialists from different CT manufacturers provide an insight into the technological basis of, and the different approaches to, dual-energy CT. Renowned medical scientists in the field explain the pathophysiological and molecular background of the technique, discuss its applications, provide detailed advice on how to obtain optimal results, and offer hints regarding clinical interpretation. The main focus is on the use of dual-energy CT in daily clinical practice, and individual sections are devoted to imaging of the vascular system, the thorax, the abdomen, and the extremities. Evaluations and recommendations are based on personal experience and peer-reviewed literature. Plenty of carefully chosen high-quality images are included to illustrate the clinical benefits of the technique.

When the domestic government, the private sector, and people in various professional fields talk about long-term care issues, they all focus on creating a warm and home-like care institution. However, we actively emphasize the importance of community-based long-term care. For aging in place, the development of domestic non-institutional care is still in its infancy, and some long-term care needs must still be met through institutional care, and the facilitation of the extension or outreach of community-based care and respite service platforms for the development of community-based long-term care still rely on institutional care. The history of the development of long-term care in Taiwan is much shorter than that of Japan, Europe, the United States, and Canada. Despite years of hard work and rapid development, the long-term care resources needed to establish a complete system in terms of universalization, fairness, accessibility, and selectivity are not available. In the future, based on the soundness of institutional care, it is hoped that outreach will move toward the goals of community care and aging in place. We hope the studies in this Special Issue will help further develop clinical medicine for healthcare and sustainability.

Computed tomography of the heart and cardiovascular system continues to show an impressive and tremendously successful development. Technical improvements translate into new applications and enhanced diagnostic accuracy and the new diagnostic opportunities may potentially be beneficial for many individuals with known or suspected cardiovascular dis

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