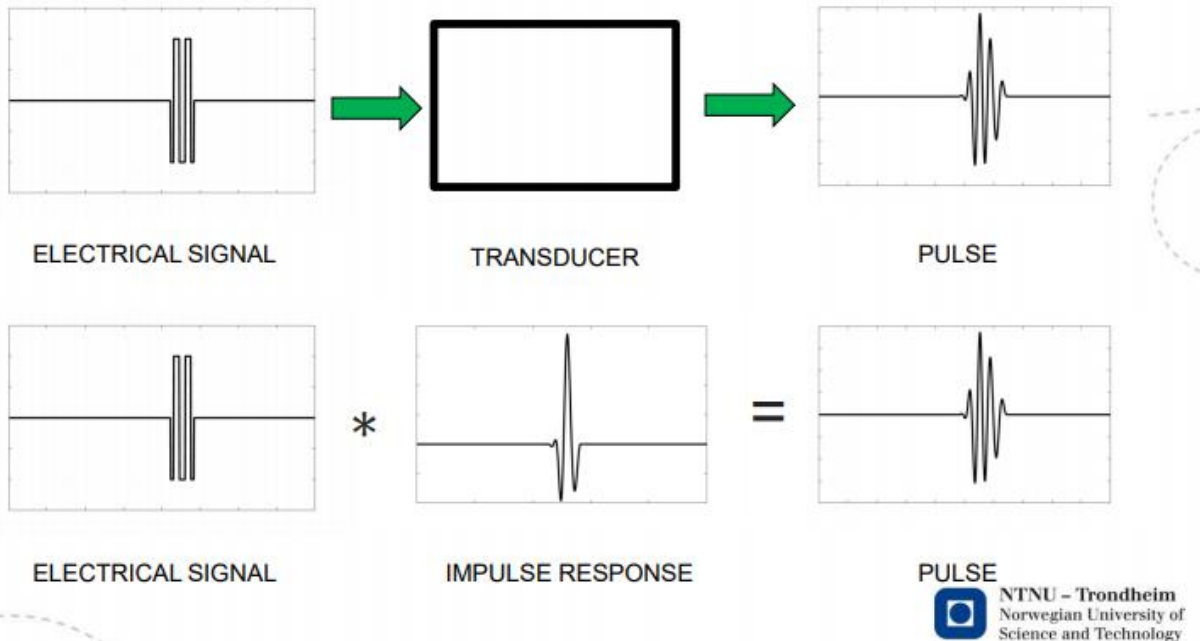


## Pulse echo system (1D) – Transducer (Tx)



2a) Higher frequency and shorter pulse length gives higher resolution. Higher frequency attenuate much faster with depth. Shorter pulse length gives higher resolution because when the signal gets reflected from a surface, the reflected signal will oscillate with the same length as the transmitted pulse length. By using shorter pulse length one can separate two targets close to each other.

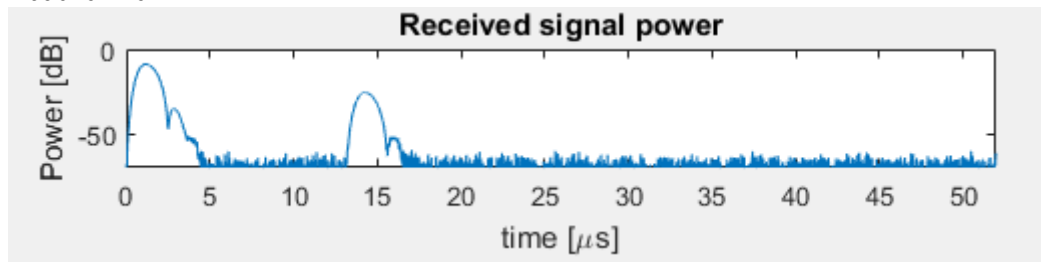
In my case, the center frequency of 4MHz and pulse length of  $0,5 \cdot 10^{-6}$  s gave best resolution.

2b) by decreasing the frequency from 4MHz to 2.5MHz and increase the pulse length from 0.5 to  $1 \cdot 10^{-6}$  s gives higher SNR.

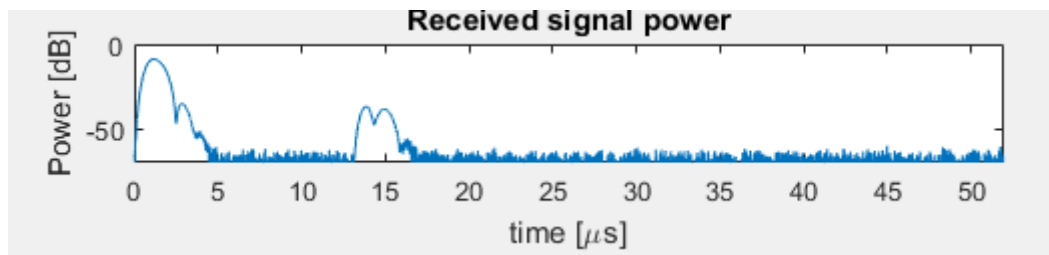
2c) By increasing the frequency from 2.5MHz to 3MHz and have a pulse length of  $1 \cdot 10^{-6}$ , I get a good resolution and high SNR.

3) If the thickness of the fat layer is  $\lambda/2$  I get lower SNR due to destructive interference. If the fat layer is  $\lambda/4$  I get high SNR due to constructive interference. The reason for this is that we get a phase shift from the first interface due to pressure release, and a rigid reflection from the second interface. So, the reflected waves from the  $\lambda/4$  add up in phase, while the reflected waves from  $\lambda/2$  will not add up.

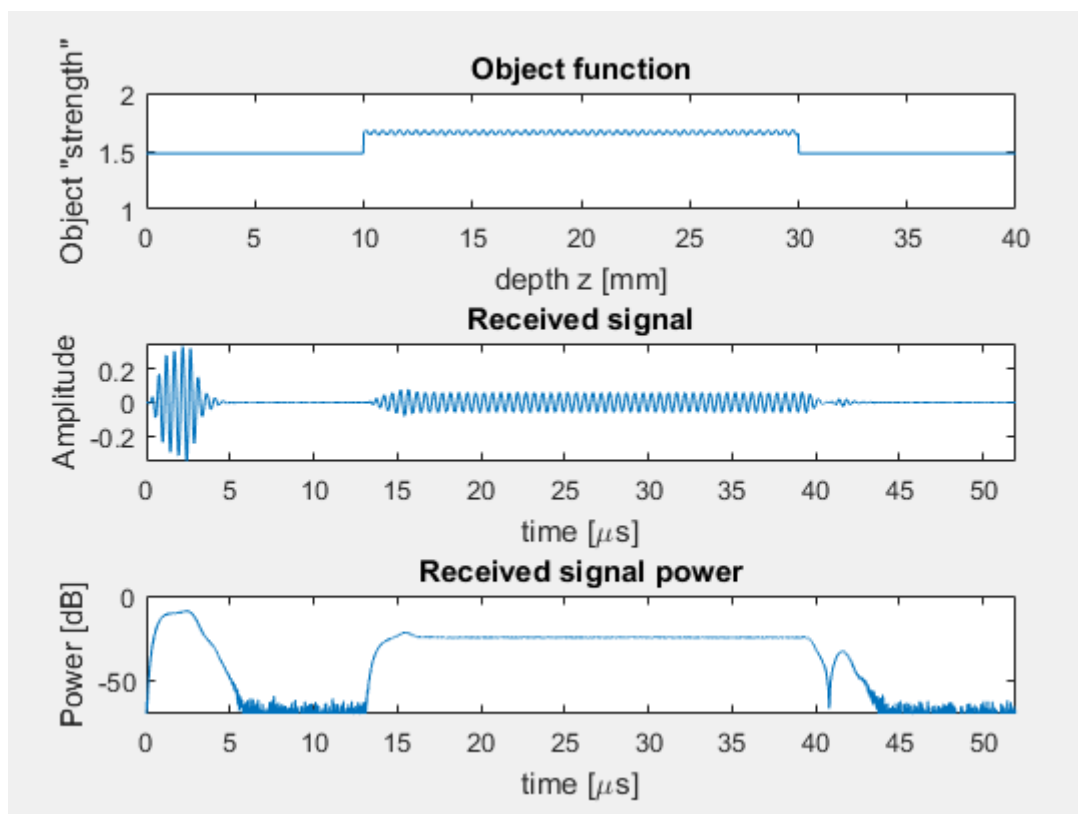
For  $\lambda/4$ :



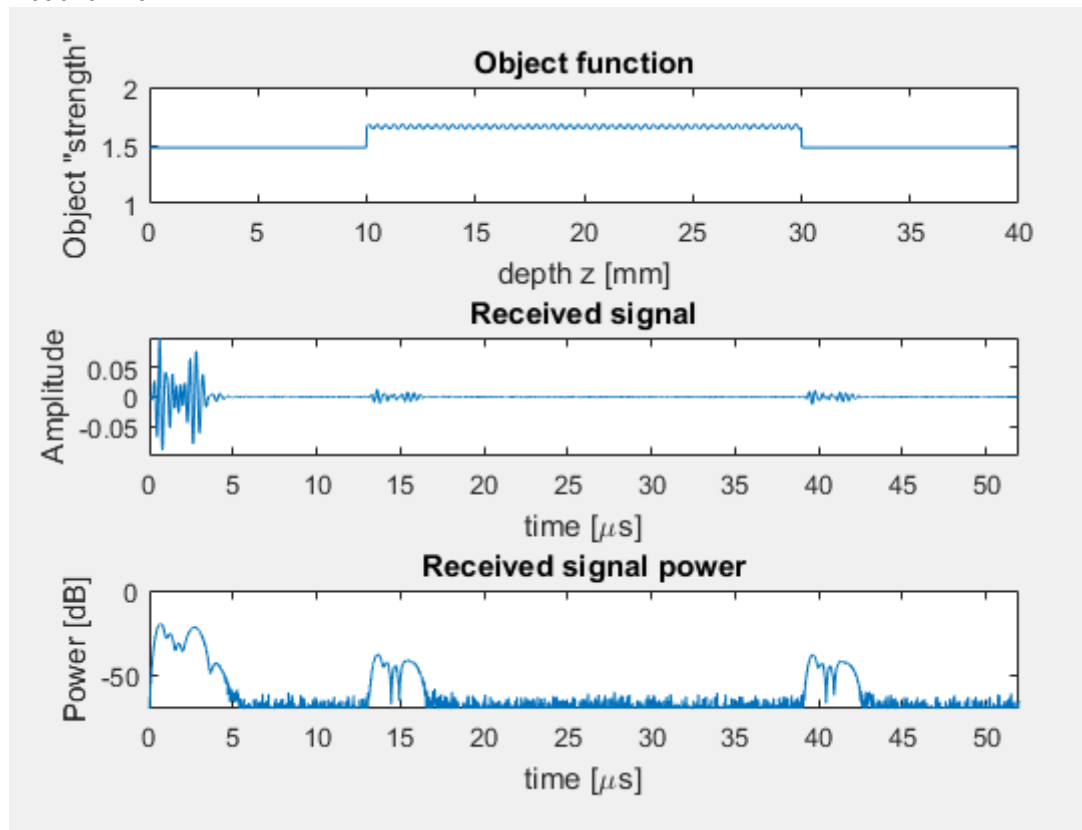
For  $\lambda/2$ :



4) With the center frequency of 2MHz:



With the center frequency of 4MHz:



The explanation about this effect is that, since the variation of the medium is at 2MHz and the center frequency is 2MHz, we are moving with the variation in the medium. Meaning that we are detecting a signal from the medium throughout the whole medium (muscle tissue). So if we are in the medium(muscle), we are detecting. And since the transmitted frequency and the variation frequency are the same, the detected signal will in average ad up.

But when we increase the frequency to 4 MHz, we get variation in the transmitted frequency and the tissue frequency. Meaning that we are not getting any detection of the medium except at the boundaries.

Code:

```

Z=ones(size(z))*Z1;
for i=(1+round(z1/dz):1+round(z2/dz))
    Z(i)=1.66+0.02*sin(2*pi*(1/0.385e-3)*z(i));
end

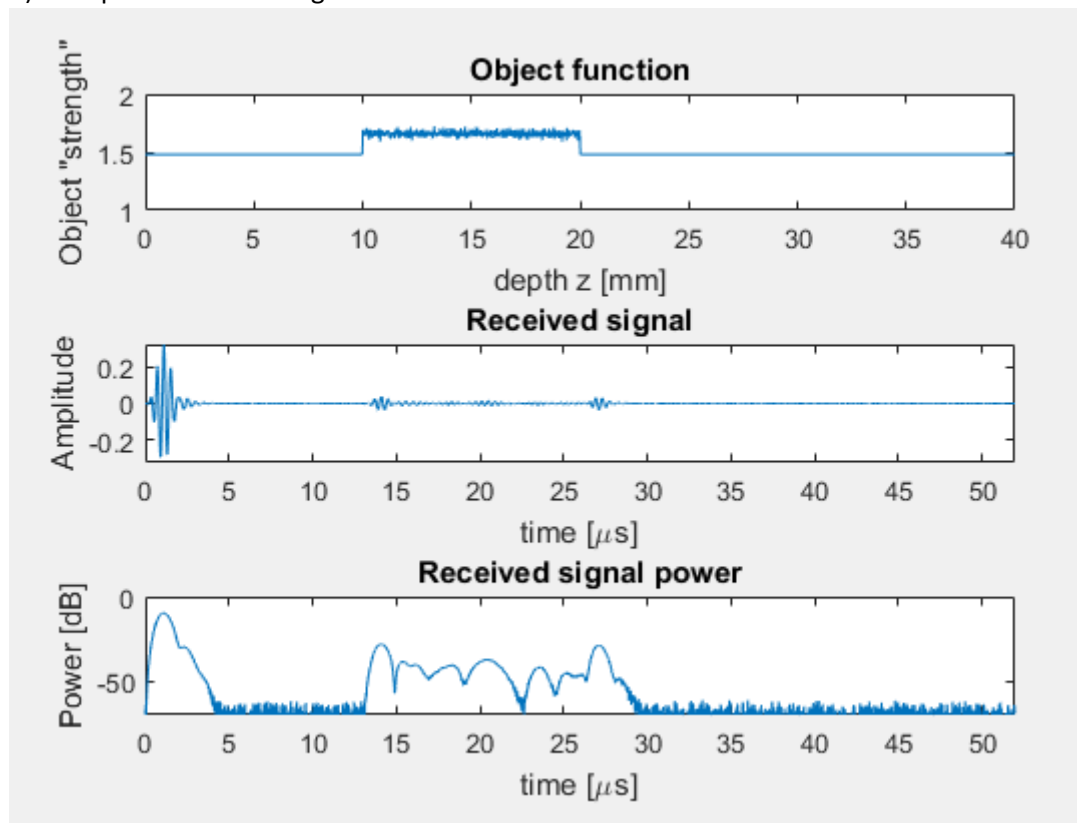
```

MEDT4165

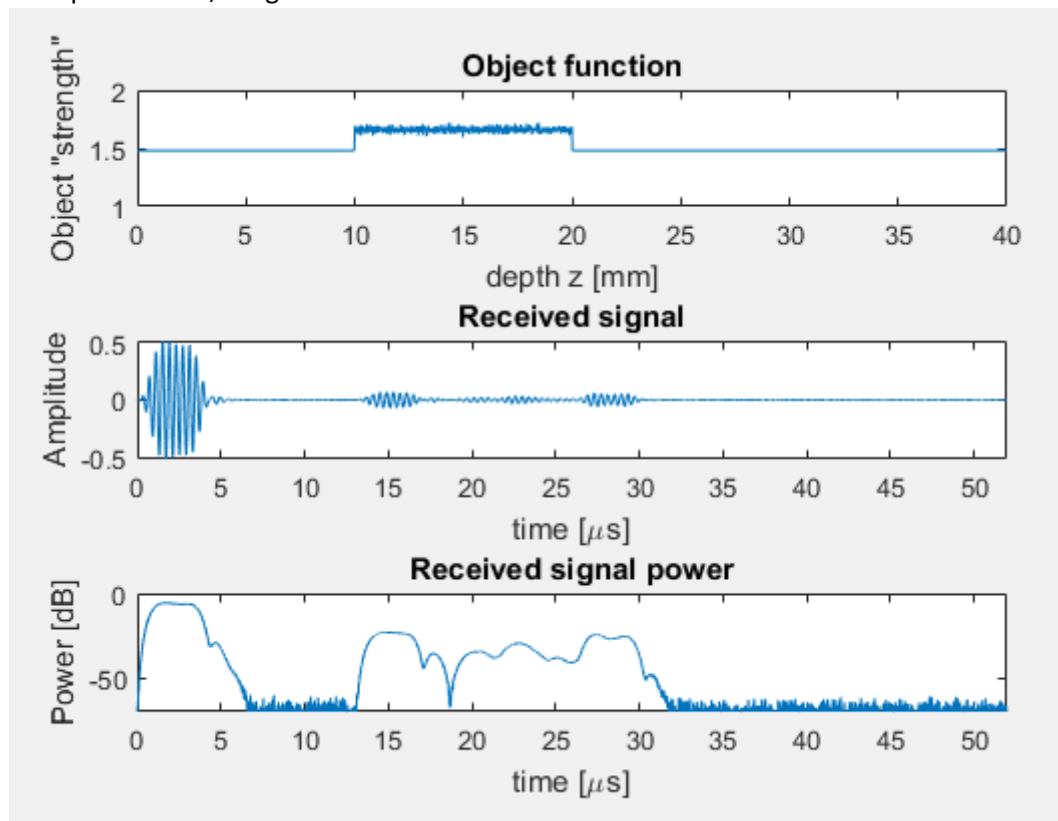
Exercise 3

Abdullah Zahir

5) For  $T_p = 0.6 \times 10^{-6}$  s we get:



For  $T_p = 3 \times 10^{-6}$  s, we get:



As one can see, we get rapid variations of the received signal for  $T_p = 0.6 \times 10^{-6}$  s. This is because the bandwidth of the signal is smaller. The effect of smaller bandwidth is that the variations of the

MEDT4165

Exercise 3

Abdullah Zahir

reflected wave at the interface is shorter, resulting in rapid change in the received signal. With a longer bandwidth hence longer pulslength, one gets longer variations of the reflected wave at the interface. This means that the rapid variations in the recieved signal is proportional to the puls lenght. This implies that the corrolation length is proportional to the puls length. So when the  $T_p$  is small, we get small corrolation length and rapid variations of the received signal, and vice versa.

Code:

```
Z=ones(size(z))*Z1;
%Z( (1+round(z1/dz):1+round(z2/dz)) );

Gn=normrnd(1.66,0.02,[size(Z),1]);

count=1;
for i=(1+round(z1/dz):1+round(z2/dz)) %medium with fat/muscle
    Z(i)=Gn(count);
    count=count+1;
end
```