

# Dashboards can support real-time CT dose monitoring



Figure 1. Dashboard use-case

## Big data methods for CT doses analysis and monitoring

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### Filters

### Dose Statistics

### Acquisition Parameters

### Introduction

Computed Tomography is the principal contributor to ionizing radiation exposure of medical origin for the Canadian population [1], a situation that typically prevails in developed countries. CT examination requests are also on the rise, with an increase of 30% from 2010-2020 and an additional expected increase of 18% within the next twenty years [2]. Radiation emission guidance (Diagnostic Reference Levels) is available but might fail to capture the reality of clinical activities.

This project aims at developing a dashboard capable to provide visualization and analytic tools to managers and technical personnel to monitor radiation usage in CT, leading to opportunities to study clinical practice trends and facilitating the identification of outliers to improve health care.

### References:

[1] UNSCEAR. 2008 Report to the General Assembly with Scientific Annexes, Volume I: Sources, Annex A: Medical radiation exposures. Tech. rep. United Nations, 2008.

[2] A. M. Yi-Sheng Chao Alison Sinclair. “The Canadian Medical Imaging Inventory 2019 - 2020”. Canadian Journal of Health Technologies 1.1 (2021), p. 215

### Methods

#### A - Data Collection

Medical data within the clinical center’s PACS is collected in the DICOM format. Sensitive data is de-identified.

#### B - Data Storage and Curation

Data is stored with the open-source software Orthanc. Data curation is assured by automated scripts within the storage.

#### C - Analyzes

Another open-source software, OpenSearch, is used to ingest aggregated data and produce customizable metrics.

#### D - Display

Real-time dynamic dashboards are hosted directly on OpenSearch and available for personalized data exploration.

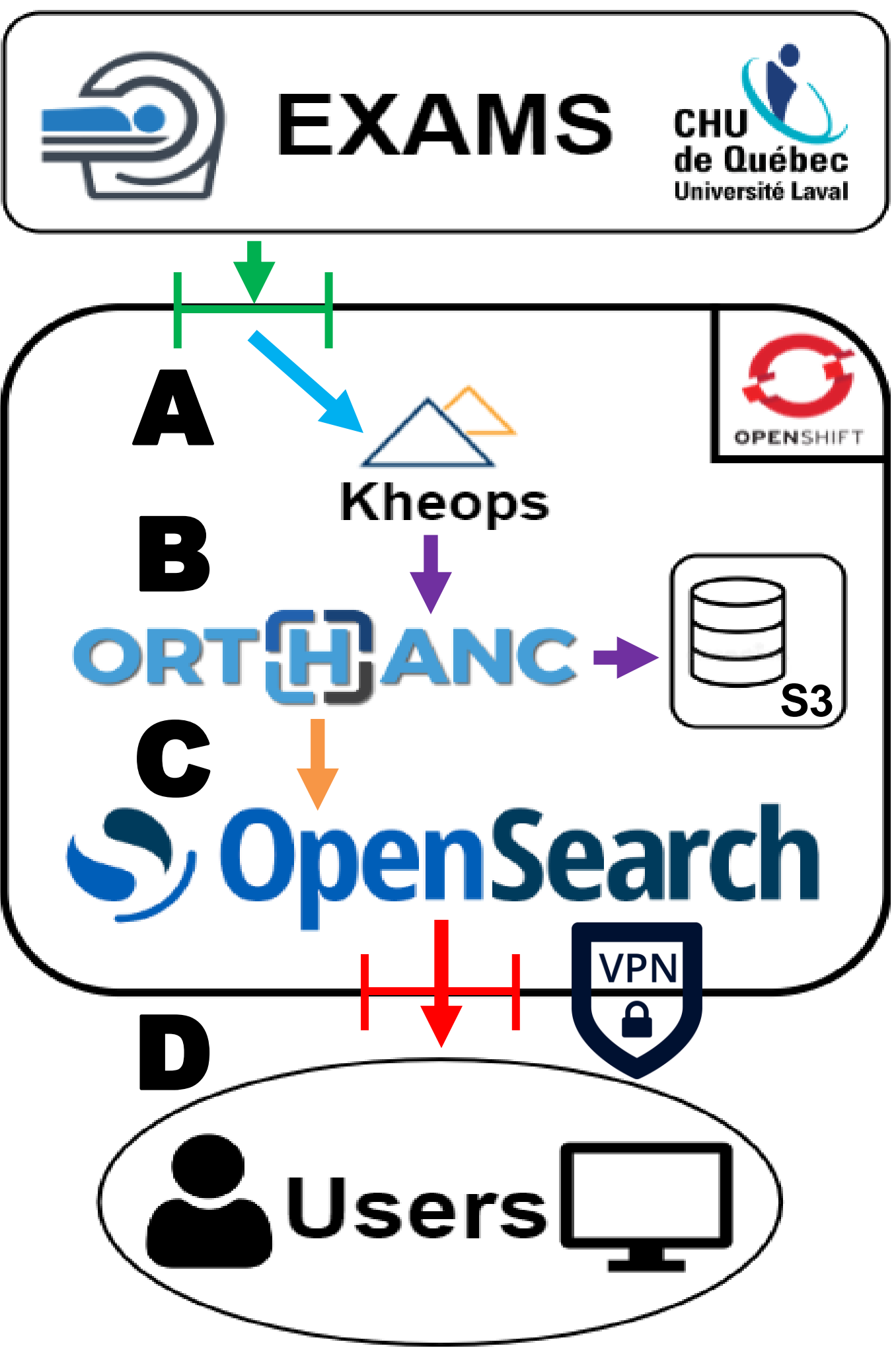


Figure 2. Data workflow

### Results

- ☑ Automated data pipeline that doesn’t interfere with clinical activities
- ☑ FAIR principles integrated within the data workflow
- ☑ Working dynamic dashboards
- ☑ Ensures data standardization
- ☑ Sensible information properly de-identified and securely stored
- ☑ Visualization and analytic tools supporting health professionals and managers needs
- ☑ Real use-case within a clinical context (Figure 1)

