



Fig. 3.1: Model geometry showing the investigated lesions embedded in a 4 cm wide soft tissue domain. Axial and lateral directions mimic that of a typical ultrasound transducer placed along the top boundary of the domain. The simplest case of a circular lesion embedded in a soft tissue domain located superior to hard underlying bone is shown in (a). In order to investigate the interference caused by closely-located lesions, the case shown in (b) was investigated. Because of the relatively unknown and variable geometric properties of deep tissue injury lesions, cases (c) and (d) were investigated where the lesion edges were blurred and the lesion was actually a large collection of small lesions, respectively. Finally, to investigate detection sensitivity in a realistic setting, case (e) was investigated where an MRI-acquired deep tissue injury was overlaid on a slice from the Visible Human Project such that the injury lesion was located immediately superior to an ischial tuberosity.

Simulated ultrasound images were acquired through the convolution of a point spread function with a normally distributed background map of scattering centres [127]. These images were then combined with a finite-element deformation model of the strained tissue to generate both pre- and post-compression images of the lesions and surrounding tissue. These images were fed into a tissue strain estimation algorithm to determine the detection sensitivity of the technique. Finally, the technique was validated against a physical phantom model using a subset of the simulated cases.