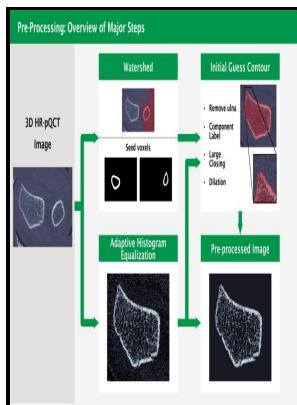


# Quantitative comparison of automatic contouring algorithms.

University of Kansas - A comparative study on the contour tracking algorithms in ultrasound tongue images with automatic re



Description: -

-Quantitative comparison of automatic contouring algorithms.

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## Comparison of different automatic methods for the delineation of the total metabolic tumor volume in I

On the decoding path, we used a  $2 \times 2$  transposed convolution and a residual block layer between the two  $3 \times 3$  convolution layers followed by a ReLu activation function. The bilateral filtering kernel contains three sub-kernels: 1 an spatial domain Gaussian kernel; 2 an image intensity domain Gaussian kernel; and 3 a DVF domain Gaussian kernel.

## Comparative clinical evaluation of atlas and deep

In general, automatic contouring and manual contouring are in agreement for all the volumes considered. Study of the effect of PET machinery was analyzed using the independent non-paired sample t test applied to the previous normalized data of TMTV using logarithms.

## Automatic detection of contouring errors using convolutional neural networks

Automatic contouring is directly related to the quality of the image registration. But as bilateral filtering is capable to smooth the image while keeping sharp edges, we found in the box region the bone structures have been better reconstructed with bilateral filtering with a sharper edge e.

## Comparative clinical evaluation of atlas and deep

Comparison between software tools BI versus LIFEx.

## Comparison of different automatic methods for the delineation of the total metabolic tumor volume in I

Deep-learning-based auto-segmentation is considered to yield an acceptable accuracy as well as good reproducibility for clinical use. The intersection of these two planes is a straight line segment, part of the contour curve at that contour height.

## **Comparison of different automatic methods for the delineation of the total metabolic tumor volume in I**

Large deformable diffeomorphic image registration was performed to map each CT set from the peak-inhale respiration phase to the CT image sets corresponding with subsequent respiration phases.

### **Evaluation of measures for assessing time**

Both digital phantom and initial patient pilot studies confirmed the improved motion estimation and image reconstruction ability. CONCLUSIONS A process for automatic contouring based on deformable image registration of respiratory CT phases from a 4D CT scan has been developed and coupled with a commercial treatment planning system. So it is not fair to make a parallel comparison between our results and their algorithms.

### **Automatic detection of contouring errors using convolutional neural networks**

LL analyzed the patient study results; YL helped with allocating manuscript time from clinical duty of the authors; DC and TZ revised the manuscript. Lastly, the CNN-based tool was evaluated on 60 patients' CT scans to investigate the possibility to detect contouring failures.

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