Poster #: 15

Title of Abstract: Veo (MBIR) Implementation: process description and lessons learned

Institution: M.D. Anderson Cancer Center

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Modality: CT

Organ System: Multi

Intro: N/A

Purpose: N/A

Methods Used: N/A

Results of Abstract: N/A

Discussion: N/A

Scientific and/or Clinical Significance? PURPOSE 1. Share lessons from a high volume imaging practice using Model-based Iterative Reconstruction (Veo, GE HealthCare). 2. Increase awareness of additional procedural steps with MBIR relative to conventional CT.   CONTENT ORGANIZATION 1. Background   a. What is Veo?   i. Overview of system (hardware/software)   ii. Usage to reduce CT radiation dose   iii. Managing increased processing time   iv. Choosing appropriate patients   v. Delivering timely radiology reports 2. Implementing Veo   a. Iterative approach to gradually reduce dose and increase familiarity with Veo   b. Training technologists 3. Using Veo   a. Technologist workflow   i. Overview of steps.   ii. Checklist to confirm completion of necessary steps   b. Automated Tube Current Modulation   i. Use of appropriate measures of patient size.   ii. Separate abdomen/pelvis scanning.   c. Potential problems and solutions   i. Technologist instructions   ii. Veo artifacts: when and how to correct.   d. Effective use of reconstruction software to create necessary images for radiologic review   e. Formatting studies with Veo and non-Veo images.   Major Teaching Points 1. Veo is a complex technique that can facilitate significant CT radiation dose reduction. 2. While multiple additional steps are needed to effectively implement Veo, these can be accomplished reliably through an organized, systematic approach.

Relationship to existing work This information adds to the base of knowledge regarding MBIR, specifically as it relates to implementation in a practice.

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