Chapter 7 PRINCIPLES OF EXPOSURE AND IMAGE QUALITY

Learning Objectives

- List the prime factors of exposure
- State the formula for determining milliampere-seconds (mAs) and explain how this unit is useful to the radiographer
- * Explain the radiographic effect of the four prime factors of exposure
- ❖ Define radiographic distortion and explain the difference between magnification and shape distortion

Learning Objectives

- * Recognize changes in radiographic density and state the exposure factors used to control radiographic density
- ❖ Identify high, low, and optimum contrast on a radiograph and state the exposure factor that primarily controls radiographic contrast

Learning Objectives

- ❖ Define *spatial resolution* or *recorded detail* and list factors that influence it
- List and explain the geometric factors that affect recorded detail and explain why magnification affects detail
- List and discuss methods for minimizing motion blur on radiographs

Prime Factors of Radiographic Exposure

- The prime factors affecting radiographic exposure include
 - Milliamperage (mA)
 - Exposure time (s)
 - Kilovoltage (kVp)
 - SID (source-image receptor distance)

- Milliamperage (mA)
 - * Affects the exposure rate or number of x-ray photons produced per second
 - Exposure is directly proportional to mA
 - ❖ Doubling mA results in a doubling of the number of electrons used to produce the x-ray beam
 - ❖ Halving mA results in a halving of the number of electrons used to produce the x-ray beam

- Exposure Time
 - Controls how long the exposure lasts
 - * Exposure is directly proportional to the exposure time
 - ❖ Doubling or halving exposure time results in a doubling or halving of the number of electrons used to produce the x-ray beam respectively

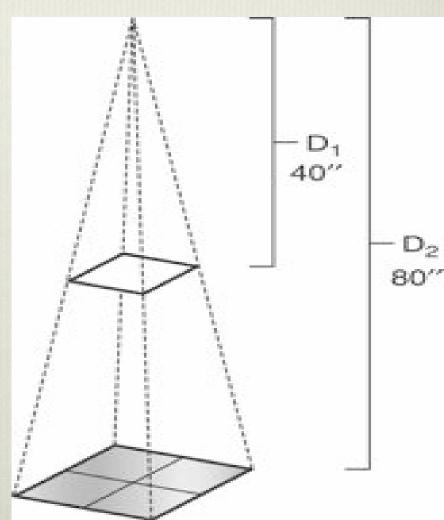
- Milliampere-seconds (mAs)
 - * Indicates total number of x-rays in an exposure
 - Exposure and patient dose are directly proportional to mAs
 - Product of mA and time
 - Primary controlling factor of density

 $mA \times time = mAs$

200 mA \times 0.05 seconds = 10 mAs

- Kilovoltage (kVp)
 - Controls the wavelength and energy of the x-ray beam
 - Controls the power and speed of the electrons in the tube current
 - * Energy is related to the ability of the x-rays to penetrate the patient and reach the IR
 - The primary controlling factor of penetration and contrast
 - * Increasing or decreasing kVp increases or decreases the wavelength, energy, and penetration of the x-ray beam respectively, but not in direct proportion

- Source Image Receptor Distance (SID)
 - X-rays diverge or spread as they exit the tube
 - Amount of divergence depends on length of the SID and affects the intensity of the x-ray beam



❖ The inverse square law states that radiation intensity is inversely proportional to the square of the distance

$$I_1 = (D_2)^2$$

$$\frac{1}{I_2} = \frac{(D_1)^2}{(D_1)^2}$$

I₁ = Original Intensity
 I₂ = New Intensity
 D₁ = Original SID
 D₂ = New SID

Question

If the radiation intensity at 30" is 10 mR, what will the intensity be at 60"?

- a) 40 mR
- b) 20 mR
- c) 5 mR
- d) 2.5 mR

- Density or overall blackness of the radiograph
 - * Affects visibility of image detail
 - * Is primarily controlled by mAs (although kVp and SID also influence density)



- Contrast or difference in density between adjacent areas of the image
 - Visibility of detail is affected
 - kVp is primary controller
 - Subject contrast (tissue density) is the variation in beam intensity after it passes through the patient
 - * Radiographic contrast is the combination of IR and subject contrast
 - * Fog from scatter radiation or image processing can reduce contrast



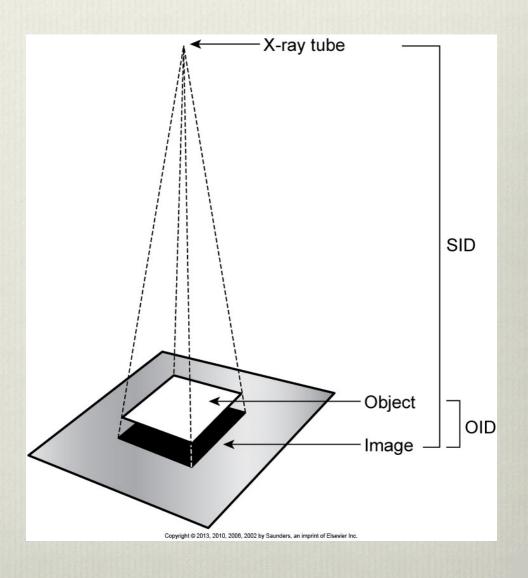
Long scale (low contrast)

Short scale (high contast)

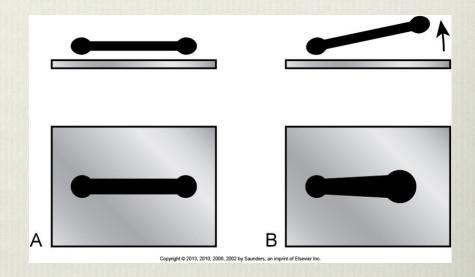
Contrast

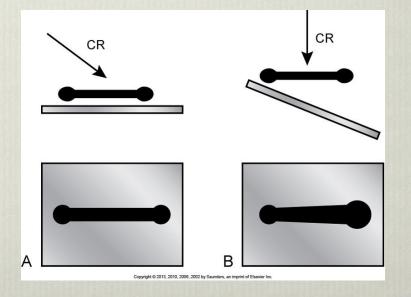
- Optimal contrast may be high or low depending on the composition of the body part
- * Low contrast = less difference between densities
- * High contrast = greater difference between densities

- Size Distortion or Magnification
 - Anatomic part appears larger than it actually is
 - Affected by
 - SID greater
 - * OID minimal



- Shape Distortion or Unequal Magnification
 - Length or shape of anatomy is misrepresented
 - May be caused when body part is not parallel to the IR or when the CR is angled





Spatial Resolution/Recorded Detail

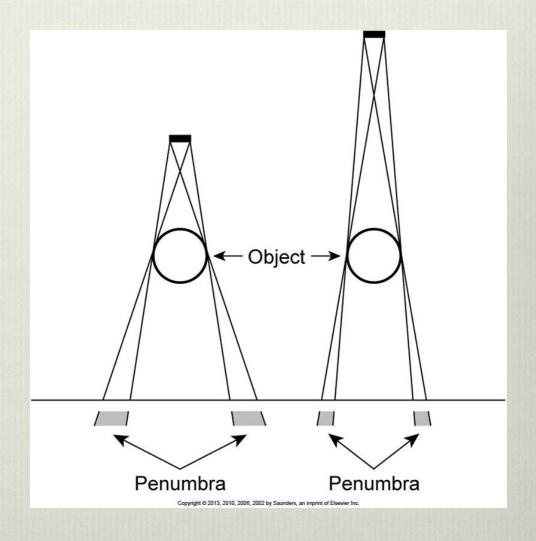
- * Refers to image clarity
- Affected by
 - Motion can be avoided by using a short exposure time/educating patient
 - Quantum mottle –grainy or mottled (spotty) due to mAs or kVp set too low
 - * Focal spot size small focal spot for greater detail
 - * OID/SID decrease OID for greater detail/increase SID for greater detail
- * Also referred to as resolution, sharpness, definition, or detail

Factors Affecting Image Detail

- Factors which control formation of image
 - * SID
 - * OID
 - Focal spot size
- Use factors to reduce penumbra (unsharp edges) or image blur

Factors Affecting Image Detail

- Focal Spot Size
 - Small focal spots
 produce less
 penumbra, resulting in
 a sharper image



Factors

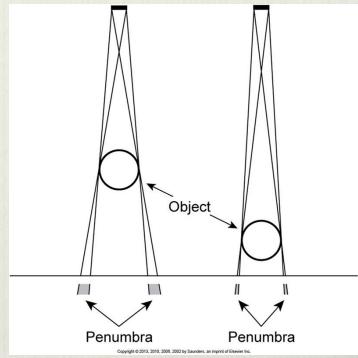
* OID

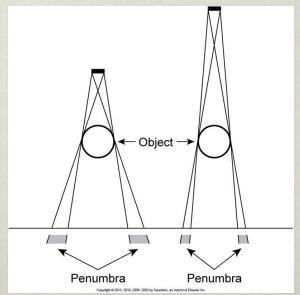
 Reducing the distance between the object and IR decreases penumbra

* SID

* Increasing the distance between the radiation source and IR decreases penumbra

Use the shortest OID and longest SID practical





Other Factors Affecting Image Detail

Motion

- * Movement of the patient, IR, and x-ray tube will cause blurring
- Can be voluntary (normally controllable) or involuntary (tremors, heartbeat, peristalsis)
- * Effective communication is a key factor in avoiding motion in the image
- Principal means of controlling motion is to use a short exposure time

Summary

- * The prime exposure factors are milliamperage, exposure time, kVp, and SID
- ❖ The prime exposure factors are manipulated to control the radiographic quality factors: density, contrast, and distortion

Summary

- Spacital Resolution/Recorded detail refers to the image clarity
- Penumbra is the inherent blurriness in the radiographic image
- Penumbra may be reduced and image sharpness increased by using the appropriate SID, OID, and focal spot size
- ❖ Image sharpness may also be affected by motion, intensifying screen speed, and film/screen contact