## Chapter 7

# Principles of Exposure and Image Quality

### Learning Objectives

- List the prime factors of exposure
- State the formula for determining milliampereseconds (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 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

- 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

 $mA \times time = mAs$ 

200 mA  $\times$  0.05 seconds = 10 mAs

Which mA and time combination produces the greatest number of x-rays?

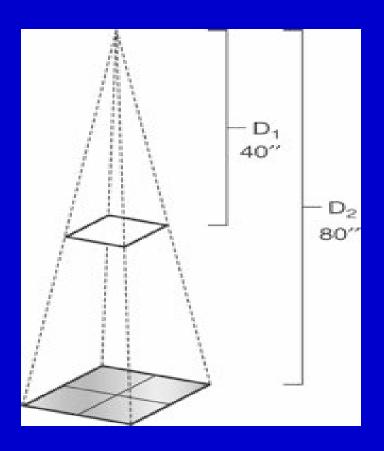
- a) 200 mA and 0.1 seconds
- b) 200 mA and 0.2 seconds
- c) 100 mA and 0.3 seconds
- d) 100 mA and 0.5 seconds

- Kilovoltage (kVp)
  - Controls the wavelength and energy of the x-ray beam
  - Energy is related to the ability of the x-rays to penetrate the patient and reach the IR
    - Increasing or decreasing kVp increases or decreases the wavelength, energy, and penetration of the x-ray beam respectively, but not in direct proportion

Which kVp will result in the most penetration?

- a) 60 kVp
- b) 80 kVp

- 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



Which SID will result in the smaller radiation field?

- a) 40"
- b) 72"

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

$$I_1 = (D_2)^2$$

$$I_2 = (D_1)^2$$

$$I_1$$
 = Original Intensity  
 $I_2$  = New Intensity  
 $D_1$  = Original SID  
 $D_2$  = New SID

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



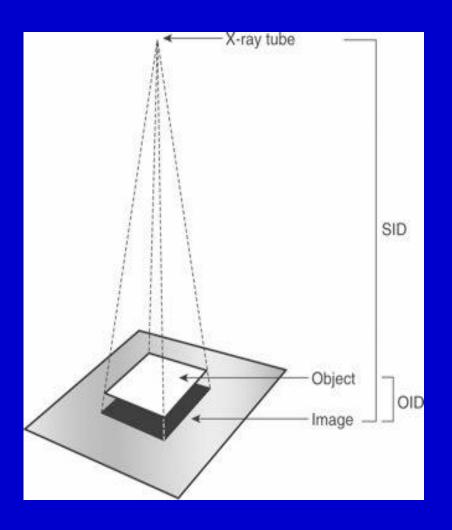
- Contrast or difference in density between adjacent areas of the image
  - Visibility of detail is affected
  - kVp is primary controller
  - Subject contrast is the variation in beam intensity after it passes through the patient
  - Radiographic contrast is the combination of IR and subject contrast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



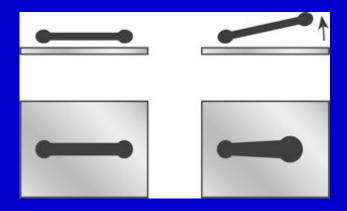
#### Contrast

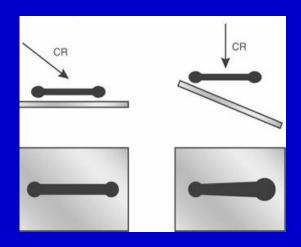
- Optimal contrast may be high or low depending on the composition of the body part
- Low contrast = less difference between densities
- High contrast = greater difference between densities

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



- 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





#### Recorded Detail

- Refers to image clarity
- Affected by
  - Motion
  - Quantum mottle
  - Focal spot size
  - Intensifying screen and film speed
  - Film/screen contact
- Also referred to as resolution, sharpness, definition, or detail

A radiographic image with quantum mottle:

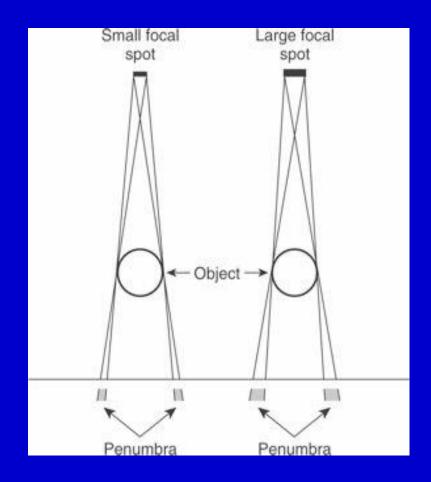
- a) is grainy
- b) has more density
- c) has less density

#### **Geometric Factors**

- Factors
  - SID
  - OID
  - Focal spot size
- Use factors to reduce penumbra or image blur

### **Geometric Factors**

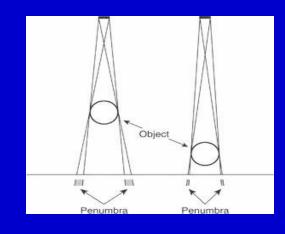
- Focal Spot Size
  - Small focal spots
     produce less
     penumbra, resulting
     in a sharper image



#### **Geometric Factors**

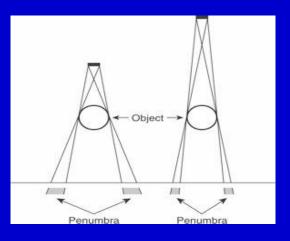
#### OID

 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
- Intensifying Screen Speed
  - Faster screen speeds produce quantum mottle or grainy appearing images
- Film/Screen Contact
  - Gaps between the intensifying screen and film result in image blur

Which screen speed produces the best recorded detail?

- a) fast
- b) slow

## Summary

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

## Summary

- 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