

Ask EuroSafe Imaging Tips & Tricks

IR Working Group

Medical Simulators for Training in Dose Management and Radiation Protection

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Why Simulation?



- **Medical Simulation** is
 - a cross-disciplinary,
 - realistic,
 - and economical **training and feedback method**

Why Simulation?

- Trainees can repeatedly **practice & review** tasks and processes
- Using physical or virtual reality models (ranging from low to high fidelity), to **identify and understand factors which control the system** and/or predict its future behavior
- Simulation is used to **develop, maintain and improve skills** of Image Guided Interventionalists in a protected environment until proficiency is achieved
- **Without harming patients**

Endovascular Simulators

- Shorten the training course
- Provide a safe, virtual, but realistic atmosphere for procedure performance
 - No radiation exposure
- Provide a complete log of the procedure, also considering:
 - Fluoroscopy time
 - Patient exposure
 - Estimate of operator exposure

Any Feature of Cath. Lab Equipment Can Be Simulated

- State of the Art Angiography systems have:
 - Virtually unlimited Fluoroscopy time,
 - DSA,
 - Road Maps,
 - Cone-beam CT and many other options that are based on Ionizing Radiation

Virtual Reality Simulators

- Significant differences have been noted between pre- and post-training performance of procedures when using medical virtual reality simulators
 - with shortening of procedure and fluoroscopy time [1]
- Virtual reality simulation provides a
 - risk-free (including radiation-free) setting
 - in which technical skills can be obtained through repetition [2]

Procedure Planning

- Procedure planning should integrate dose management measures
- The goal is an efficient and optimal use of radiation
 - not an irrational fear or negligence
- Simulation is based on accurate procedure planning

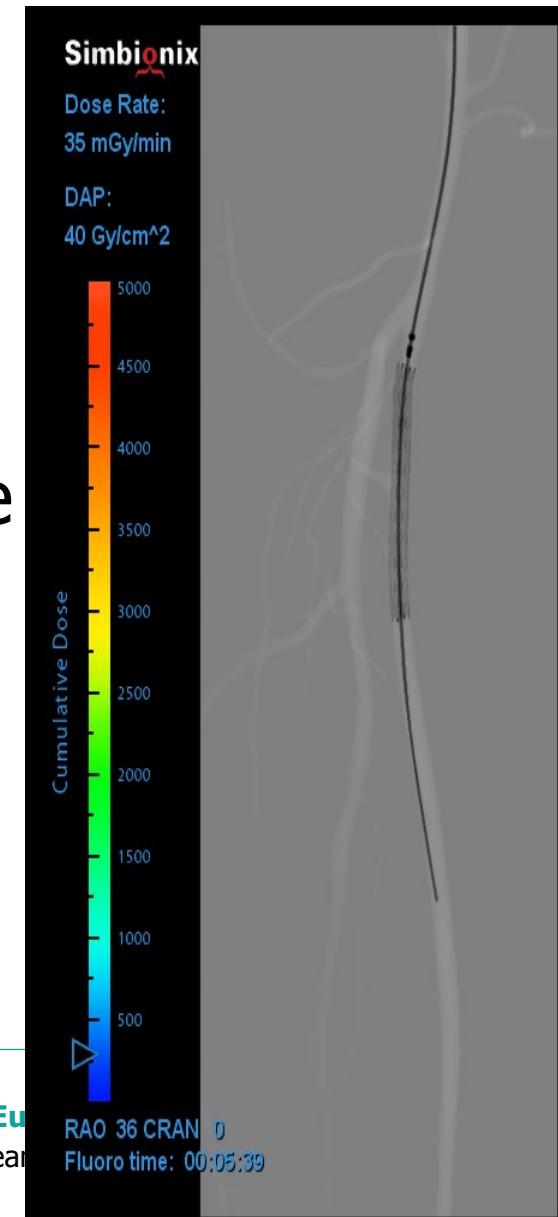
Radiation Protection Simulation - Goals

- Build up physician's awareness to dose levels during interventions
- To provide tools for dose reduction methods
- To practice dose management as an integral part of the hands-on simulation
 - shorten procedure and fluoroscopy time
- To provide scoring and subjective performance metrics
 - measure results
 - follow-up improvement

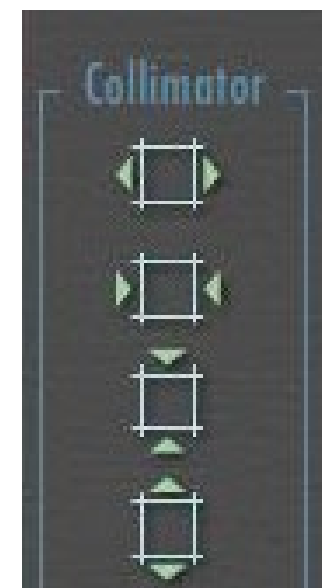
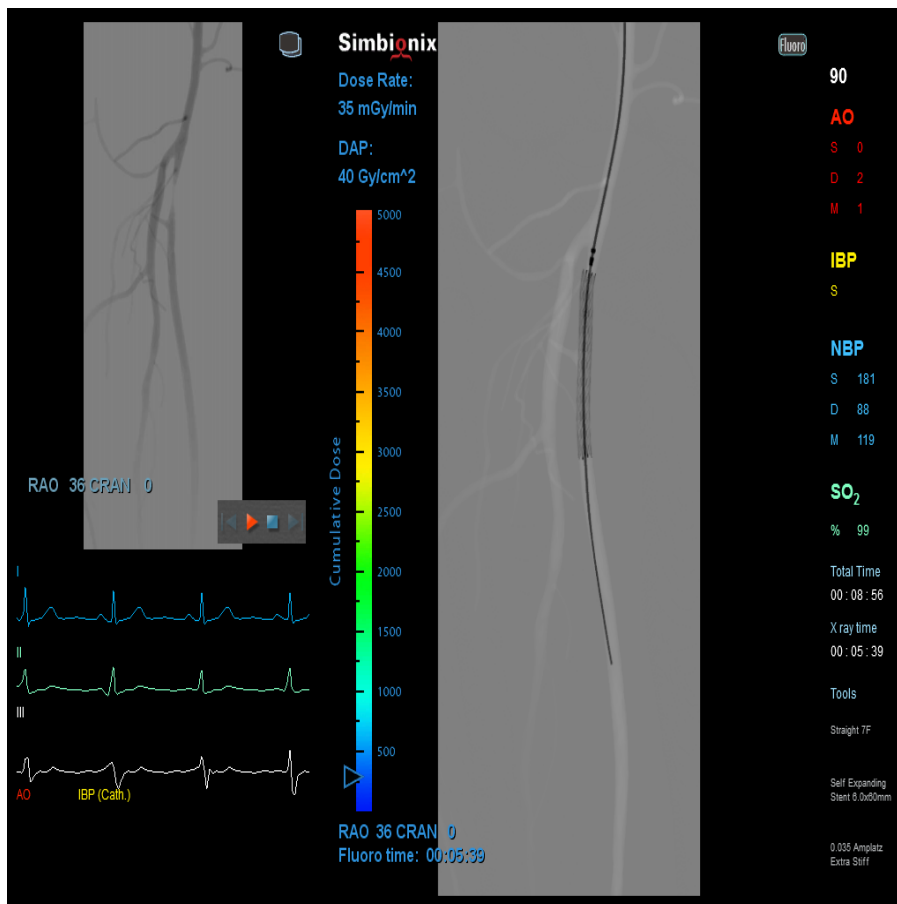


Real Time Dose Display

- Dose Rate/Cumulative Dose (mGy)
- Side Bar with Cumulative Dose/Dose Rate
- DAP $\text{mGy}\cdot\text{cm}^2$



Off-Fluoro Collimation



Messages and Alerts

These alerts are displayed intermittently according with time of procedure

Please remember to put on your protective wear:



Lead Apron



Thyroid Shield



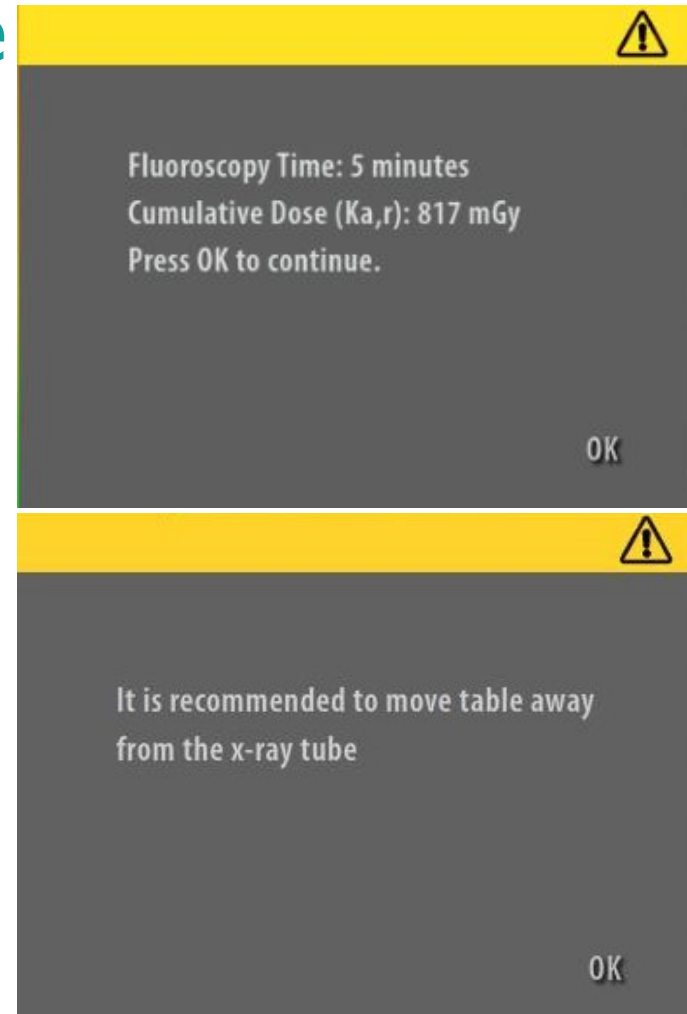
Protective Gloves



Protective Eyewear



Dosimeters



Performance and Dose Report

- Displayed at the end of each session
- Stored in the system in order to follow-up the progress of trainee

Procedure Dose Report



#	Metric	Benchmark	Results	Score
1	Fluoroscopy Time (Min)	<07:00	02:20	1/13
2	# of DSA Frames	<150	29	1/13
3	# of Roadmaps	<4	2	1/13
4	Max Frame Rate (fps)	<=3	3	1/13
5	Cumulative Dose (mGy)	<1000	61	1/13
6	Total DAP (mGy/cm2)	<44	7	1/13
7	Effective Dose (mSv)	<98.0	0.856	1/13
8	Operator's Effective Dose (mSv)	<0.3	0.009	1/13
9	Collimation Used (% of time)	>95%	85%	0/13
10	SSD < 45cm (% of time)	<5%	47%	0/13
11	SID > 90cm (% of time)	<5%	99%	0/13
12	Magnification used (% of time)	<15%	0%	1/13
13	Oblique projections used (% of time)	<30%	15%	1/13

Total Score

77%



OK

Radiation Safety Plug-in



Radiation Safety package

- Realistic and safe radiation safety training
- Hands-on training to newly-hired or current staff
- Hospital credentialing and privileging
- Skill center radiation training for nurses and techs
- Implementing an effective radiation safety program

Procedure Training Objectives

- Balancing between dose and image quality – ALARA
- Understanding deterministic and stochastic effects
- Understanding when and why high doses occur
- Adjusting table and detector height for optimal exposure
- Use of LIH, pulse rate and dose level to limit fluoroscopy dose
- Cine and DSA, frame rate and fluoro store
- Magnification, collimation, wedge filters, and virtual guidance

Procedure Training Objectives

- Reducing dose for steep angulation or large patients
- Varying beam angle and keeping extremities out of the beam
- Staff positions relative to direct beam and scatter
- Benefits of using protective wear and shielding
- Lowering dose throughout the case, not just after a notification

Summary

- Medical Simulation is an integral part of training personnel in the interventional suite
 - State of the art endovascular simulators allow training in complex interventions without staff radiation exposure
 - Effective and safe procedure performance saves exposure
- Virtual and augmented reality will become an indispensable tool in medical simulation and training [4]
- Simulation training is an ***effective tool for creating safe environment and prevention of unnecessary patient and staff exposure***

REFERENCES

1. Management of Patient and Staff Radiation Dose in Interventional Radiology: Current Concepts. Bartal G, Vano E, Paulo G, Miller D. Cardiovasc Intervent Radiol (2014) 37:289–298
2. Weisz G et al (2007) The use of interventional cardiovascular simulation to evaluate operator performance: the carotid assessment of operator performance by the Symbionix carotid Stenting Simulator Study (ASSESS). J Soc Simulation Healthcare 2(1)
3. Van Herzeele I, Aggarwal R, Neequaye S, Hamady M et al (2008) Experienced endovascular interventionalists objectively improve their skills by attending carotid artery stent training courses. Eur J Vasc Endovasc Surg 35(5):541–550
4. Is there a place for virtual reality simulators in assessment of competency in percutaneous renal access? Yasser A. Et al. World Journal of Urology volume 34, pages 733–739(2016)