

**Purpose.** To quantify how CT patient doses, and the corresponding scan times, have changed over the last 25 years.

**Method.** We analyzed data for five generations of CT scanners from one vendor (GE), ranging from the 9800 single slice scanner without slip ring technology used in the early 1980s to a 64 slice VCT, the current state of the art. We determined values of  $CTDI_{air}$  and  $CTDI_w$  at a constant kV/mAs. Effective doses were performed for a standard 32 cm chest CT examination performed at 120 kV using contiguous axial scanning on the 9800, and a pitch of 1 on the VCT. Scan times were computed assuming (contiguous) axial images with a 5 mm thickness.

**Results.**  $CTDI_{air}$  of a VCT scanner (30 mGy/100 mAs) is 12% higher than that of a 9800 scanner, whereas the corresponding body VCT  $CTDI_w$  (9.5 mGy/100 mAs) is 53% higher. The increased doses on modern scanners are a result of reduced focus-isocenter distances to accommodate faster rotation speeds, changes in beam shaping filters, and overbeaming used on MSCT scanners. Patient effective doses for a routine chest CT examination are 5 mSv/100 mAs on a VCT and 3.2 mSv/100 mAs on a 9800. Acquisition of 64 axial images for a routine chest CT in the early 1980's took ~5 minutes, whereas modern scanners cover the same volume in only 8 x-ray tube rotations taking ~3 seconds.

**Conclusion.** Over the last 25 years, normalized CT patient doses (i.e., per unit mAs) have increased by ~50%, whereas image acquisition times have been reduced by two orders of magnitude.