

Computed tomography dose index (CTDI) conventionally specifies the patient dose in CT studies. It is measured as the integration of the longitudinal single-slice dose profile (SSDP) by using a 10 cm long pencil ionization chamber. However, the assumption that most of the SSDP is contained within the chamber length may not be valid even for thin slices. Additionally, a simple pencil chamber method for measuring doses in helical CT is not available. Dixon<sup>1</sup> (2003) derived convolution equations for determining the accumulated dose in axial and helical CT from the SSDP. In addition, a new dose measurement method using a small volume ion chamber was suggested. Our work is a thorough experimental verification of this technique. The SSDPs were measured using a diamond detector in a 30 cm long phantom for several slice widths. The integrals over 25 cm length of the SSDPs, measured along the phantom (rotational) axis, were approximately 25-30% higher than the integrals over 10 cm length for almost all slice widths on two scanners. Dose equilibrium was only achieved for scan lengths >35 cm, suggesting the need for longer phantoms and new measuring techniques. These predictions were verified for several scan lengths using an IC-10 ion chamber at the center and periphery of the phantom for helical and axial scanning modes. Central and peripheral doses were found to be up to 29% and 21% higher respectively than pencil chamber readings.

<sup>1</sup>R.L. Dixon, "A new look at CT dose measurement: Beyond CTDI," *Med. Phys.* **30**, 1272-1280 (2003).