**Purpose:** In Gamma Knife (GK) stereotactic radio -surgery, highest acc uracy of d ose calculation is important .The attenuation of e ach single beam in GK is de termined by their path s. The path, where e ach beam pa sses through the skull to the tumor , is determinedbythemea surementofskull ra dius. Toestimate thepathattenuationeffecton thedosecalculationisim portantf or cliniciansindeciding selection of the gamma angle, blocking beam and helmet size, etc . The purpose of this study was to de sign and tes ta new method to assess the bea m path attenuation effecents on dose computation in GK. **Methodand Materials:** Asim ulationofGKC -model wasemployedforthisstud y. The skull wasini tially assumed to be a spherical bulb. Shot locations in the periphery of the bulb were te sted. Shot ce nter dose a nd each beam's contribution was calculated using the tissue maximum ratio (TMR) formula foreac h path. The simulation of the inhomogeneity calculation is a nappro ach similar the procedure of finding the different p aths from differ ent bea ms. The dose point at differe nt beam contribution is quantitativelycalculated with variation difference. **Results:** The data from several typical plug locations showed that the pathle ngth difference could be over 50% and ensuring TMRchange scouldbe asmucha s 20% of the averagevalue. Thesing lebea mp rofiles at the shot center were variable; however, the composite profiles from the total beams did not s how significant change s. **Conclusion:** O ur method to calculate the different p ath lengthofsinglebeamfr omGK tr eatment planningsimulation models howsthatthebeam pathpa rameters a ffect GK treatment planning. The be amprofile changes based on path lengthvariation s. These f indings suggest thenecess ityofc onsidering dos ec ontributions tothenormaltissuefromdif ferent beampa ths.