

Initial measurements with an Ambulatory Static and Gradient Magnetic Field Dosimeter for Workers in MR Environments

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Introduction: There is growing concern for the health and safety of occupational workers who are frequently exposed to magnetic fields present when moving through a spatially non-uniform static magnetic field or during gradient-pulsed magnetic fields outside of the scanner or a combination of the two. Such magnetic field gradients induce electric fields and currents in tissue that depending on the position of the subject relative to source can exceed the relevant EU, ICNIRP and IEEE standards [1]. Furthermore, repeated exposure to strong static magnetic fields should also be treated with caution by adhering to the guidelines in place that limit the time-weighted exposure during an 8-hour working day.

This study details the design and construction of an ambulatory magnetic field dosimeter [2] that measures tri-axial cumulative and instantaneous magnetic fields and magnetic field gradients that occupational workers experience in modern magnetic resonance imaging (MRI) environments. The aim of the study was to measure isotropic gradient-pulsed magnetic field exposures with an ambulatory device at positions shown by Crozier *et al* [1] to induce large current densities and electric fields.

Method: A schematic diagram of the dosimeter is shown in Figure 1, a combination of Hall sensors and sensing coils allow high sensitivity measurements over a large dynamic range of magnetic fields otherwise unattainable by use of a Hall sensor alone. The three axis system allows isotropic measurements over a 1cm³ volume during simultaneous gradient coil switching. The device was used to measure gradient field exposure at $z = 70\text{cm}$, $r = 0\text{cm}$ and $r = 30\text{cm}$, positions where workers are predicted to be exposed to the largest induced current densities and electric fields [1].

A 2T MR system with actively shielded whole-body symmetric gradient coils with an axial length of 1.4 metres and 30mT/m field strength was used. At each radial position, a positioning pilot scan switched the three gradients independently and simultaneously with rise times of 450 μsec , progressively increasing gradient field strengths up to 24 mT/m to invoke the worst case induction scenario. A 4-segment EPI scan with 100 μsec gradient rise times was also performed to record a typical worst case exposure in a daily working routine for an MR worker.

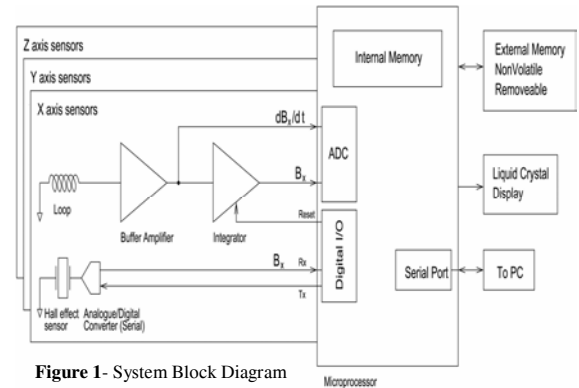


Figure 1- System Block Diagram

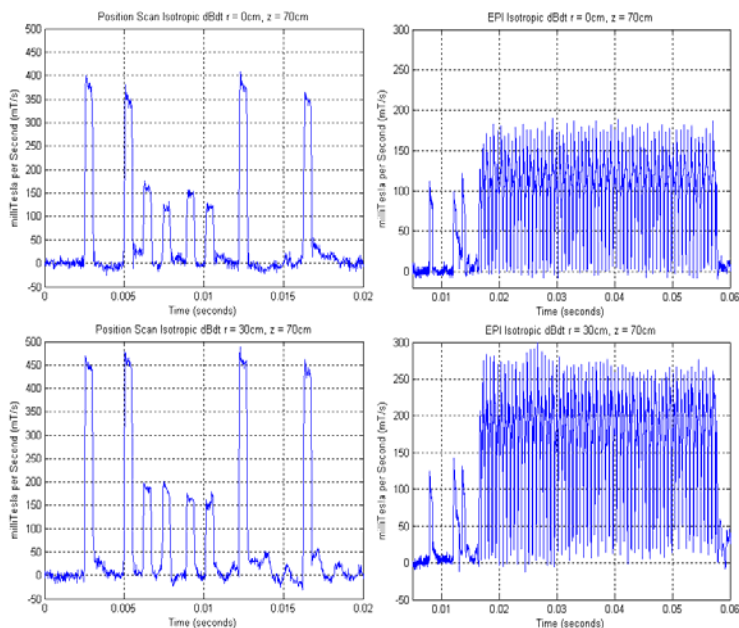


Figure 2 – Isotropic Magnetic Gradient Field Measurements during 1 TR period

117mT, and $B_x = 42.3\text{mT}$ at $r = 0\text{cm}$ and $B_z = 742\text{mT}$, $B_y = 116.4\text{mT}$, and $B_x = 43.7\text{mT}$ at $r = 30\text{cm}$.

Conclusion: This study presents pilot data of measured dB/dt exposures to health care workers near the end of gradient coils. The dosimeter described measures both static and dynamic magnetic fields which are in agreement with prior modelling. It is lightweight and engineered to be worn throughout a working shift. It is envisaged that the dosimeter will assist in determining the true peak and time-averaged exposures of workers in MR environments.

References

- [1] F. Liu, H. Zhao and S. Crozier, *IEEE Trans. Biomed. Eng* (50), p. 804-815, 2003.
- [2] A Magnetic Field Dosimeter - PCT/AU2005/001495.

Acknowledgments

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