

# Medical Physicist's ACR DM QC Test Summary

**Facility Name** \_\_\_\_\_ **MAP ID-Unit#** \_\_\_\_\_  
**Address** \_\_\_\_\_ **Room ID** \_\_\_\_\_  
 \_\_\_\_\_ **Report Date** \_\_\_\_\_  
 \_\_\_\_\_ **Survey Date** \_\_\_\_\_

**X-Ray Unit Manufacturer** \_\_\_\_\_ **Model** \_\_\_\_\_  
**Control Panel Serial #** \_\_\_\_\_ **Manufacture Date** \_\_\_\_\_ **Installation Date** \_\_\_\_\_  
**DM Unit Type:**  Digital radiography (DR)  Computed radiography (CR)  Digital Breast Tomosynthesis (DBT)  
**Unit Use:**  Diagnostic and screening mammography  Diagnostic only  Screening only  
**Survey Type:**  Mammography equipment evaluation (MEE) - Full  MEE - Partial  Annual survey  
**Equipment Tested:**  DM unit  AW monitor  RW monitor  Viewbox  Printer Other: \_\_\_\_\_  
**Oversight Level:**  Medical physicist on-site  Medical physicist oversight  
**Quality Control Manual Used for Survey and Facility QC:** 2018 ACR Digital Mammography QC Manual (with 2D and DBT QC)

**Medical Physicist** \_\_\_\_\_ **Signature** \_\_\_\_\_

## QC Test Results

Test	Pass/Fail*			CA
	2D**	2D Add-on DBT	DBT	
<b>Medical Physicist Tests</b>				
1. Mammography Equipment Evaluation - MQSA Reqs				
2. ACR DM Phantom Image Quality				
3. DBT Z Resolution				
4. Spatial Resolution				
5. DBT Volume Coverage				
6. Automatic Exposure Control System Performance				
7. Average Glandular Dose				
8. Unit Checklist				
9. Computed Radiography (if applicable)				
10. Acquisition Workstation Monitor QC				
11. Radiologist Workstation Monitor QC				
12. Film Printer QC (if applicable)				
13. Evaluation of Site's Technologist QC Program				
14. Evaluation of Display Device Technologist QC Program				
15. Manufacturer Calibrations (if applicable)				
16. Collimation Assessment				
MEE/Troubleshooting - Beam Quality (HVL) Assessment				
MEE/Troubleshooting - kVp Accuracy and Reproducibility				
Troubleshooting - Ghost Image Evaluation				
Troubleshooting - Viewbox Luminance				
<b>Technologist QC Evaluation</b> Date reviewed if after new unit MEE:				
1. ACR DM Phantom Image Quality				
2. Computed Radiography Cassette Erasure (if applicable)				
3. Compression Thickness Indicator				
4. Visual Checklist				
5. Acquisition Workstation Monitor QC				
6. Radiologist Workstation Monitor QC				
7. Film Printer QC (if applicable)				
8. Viewbox Cleanliness (if applicable)				
9. Facility QC Review				
10. Compression Force				
11. Manufacturer Calibration (if applicable)				
Optional - Repeat Analysis				

**Your Phantom Results - 2D**

Fiber ( $\geq 2.0$ )

Speck grp ( $\geq 3.0$ )

Mass ( $\geq 2.0$ )

AGD ( $\leq 3.0$  mGy)

**Your Phantom Results - DBT**

Fiber ( $\geq 2.0$ )

Speck grp ( $\geq 3.0$ )

Mass ( $\geq 2.0$ )

AGD ( $\leq 3.0$  mGy)

\* "Pass" means all components of test passes; "Fail" means any or all components fail; if "CA" checked, see Corrective Action Summary  
 \*\* or DBT acquisition only

