|  |  |
| --- | --- |
|  | Mammography Accreditation Program **Test Image Data** 1891 Preston White Drive, Reston, VA 20191-4397 |

|  |
| --- |
| This form is used to record the technical factors used for the phantom. Complete a separate form for each mammography unit being evaluated. All information on this sheet must be accurate and complete. |

**PRIVILEGED and CONFIDENTIAL • PEER REVIEW**

**Code of Virginia 8.01-581.17**

# SYSTEM IDENTIFICATION

**Mammography unit room #: Mammography unit manufacturer:**

**Mammography unit model name:**  **Year manufactured:**

**Computed radiography manufacturer** (CR only)**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Computed radiography model** (CR only)**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Primary interpretations are from** (FFDM only) check one**:**  soft copy  hard copy

# PHANTOM IMAGE

**Phantom type:**  Original ACR Phantom (4 inch square phantom)          ACR Digital Phantom (12 x 7.5 inch rectangular phantom)

**Original ACR Phantom:**  Gammex (Sun Nuclear) Model 156  Fluke Biomedical Model 18-220  CIRS Model 015

**ACR Digital Phantom manufacturer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phantom model: \_\_\_\_\_\_\_\_**

**Phantom serial number** *(on side of phantom)***: Wax insert serial number** *(appears on image)***:**

**Phantom image background optical density (film submissions only):**

**Technical factors used to produce the phantom image:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Phantom Exposure** | **Date** | **AEC Mode** | **kVp** | **Time**  *(after exposure)* | **mAs**  *(after exposure)* | **Nominal Focal Spot** | **Tube Target** | **Filter** |
| AEC  Manual |  |  |  | sec  msec |  | mm | Molybdenum (Mo)  Rhodium (Rh)  Tungsten (W) | Molybdenum (Mo)  Rhodium (Rh)  Aluminum (Al)  Silver (Ag) |