

DICOM in Pathology as a Standard

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Disclosures

Editor of the DICOM Standard (NEMA contract)

NCI FNL Leidos Essex sub-contractor (SME DICOM, de-identification)

NCI Imaging Data Commons (IDC) sub-contractor

Consult with various equipment manufacturers re-DICOM

Interoperability

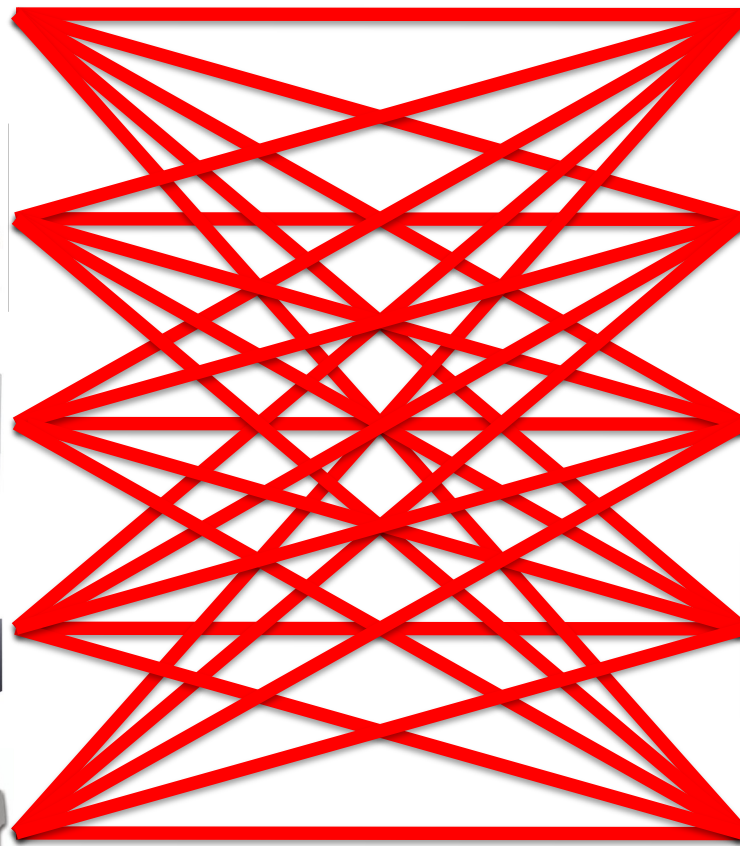
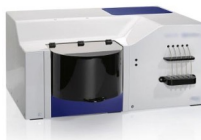
“the ability of two or more systems or components to exchange information and to use the information that has been exchanged”

[IEEE Standard Computer Dictionary: A Compilation of IEEE Standard Computer Glossaries. 1990](#)

JOHN PALFREY AND URS GASSER

Interop

The **PROMISE** *and* **PERILS** *of*
HIGHLY INTERCONNECTED
SYSTEMS



Interoperability

via standards

Standard

images

annotations

protocols

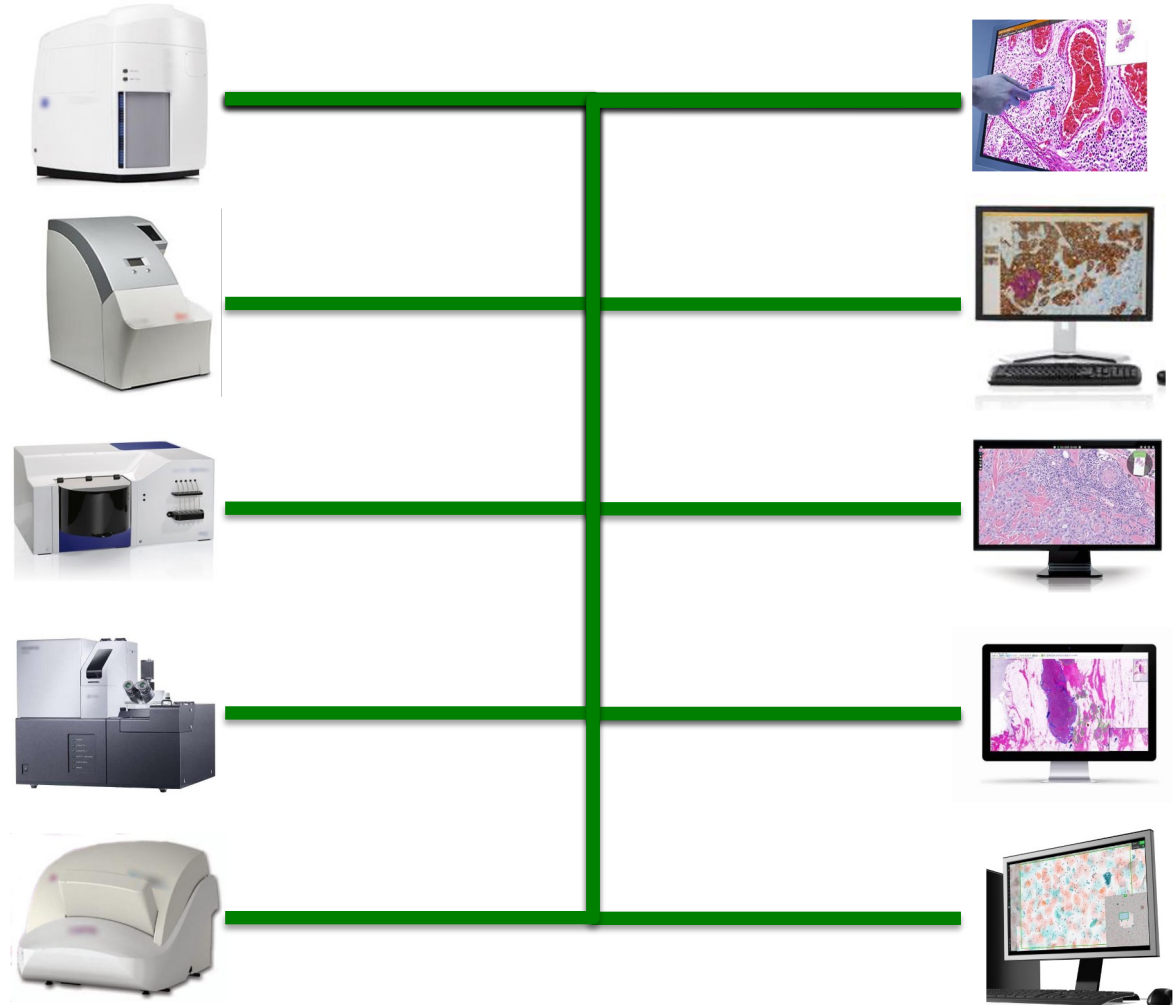
Separation

scanner

archive

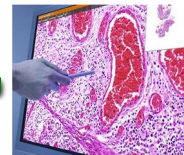
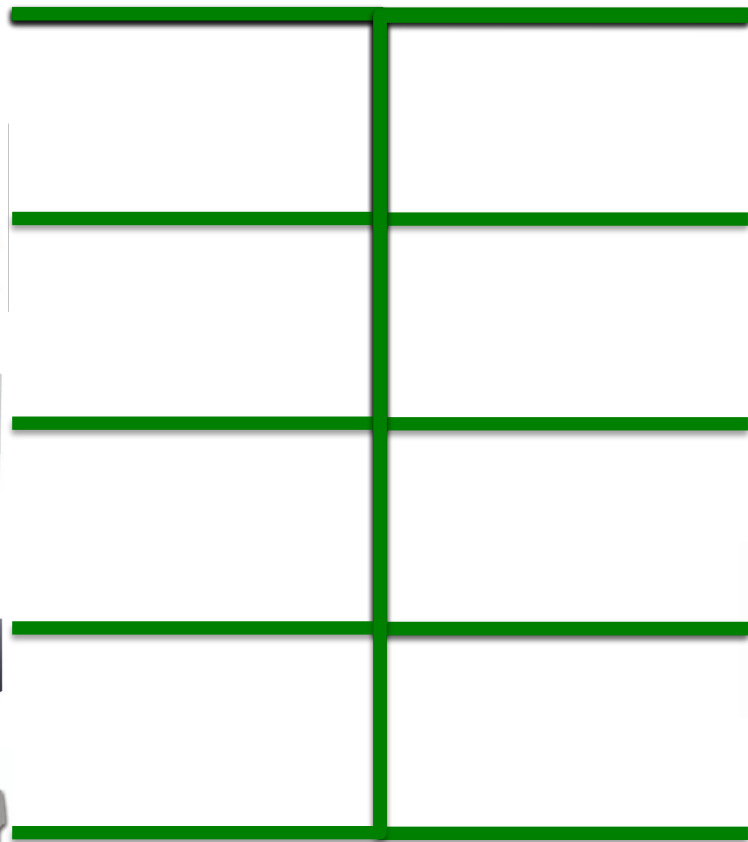
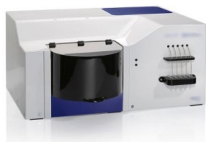
viewer

analyzer



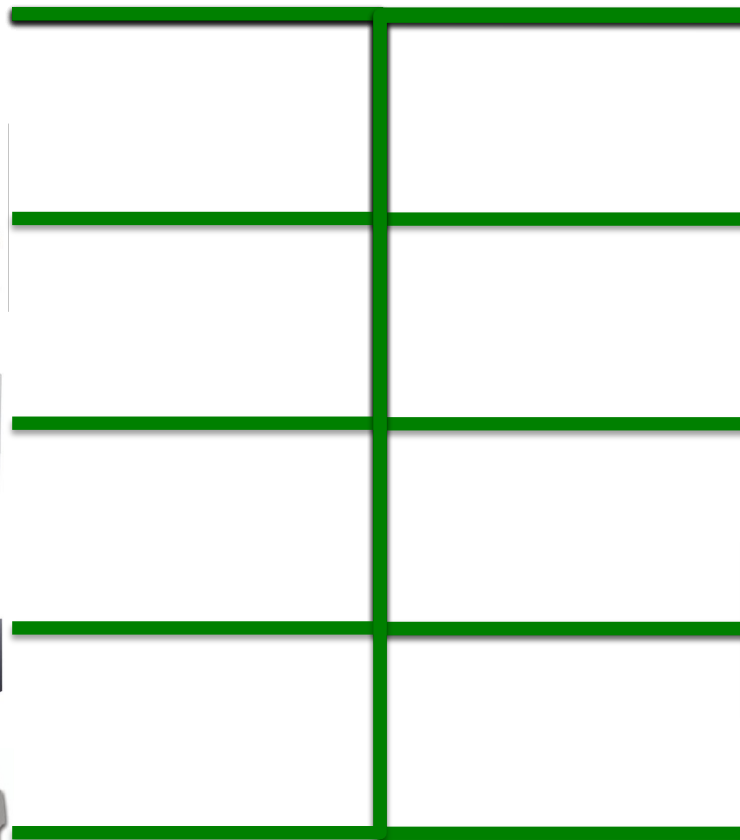
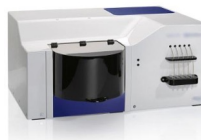
Which standard?

Can there be only one?





Digital Imaging and Communications in Medicine



Why DICOM?

It's everywhere

esp. radiology, cardiology, radiotherapy

increasingly visible light and related 'ologies (enterprise)

less pathology (yet), historical use of proprietary formats

It's

open to access and use

has lots of free open source tools that support it

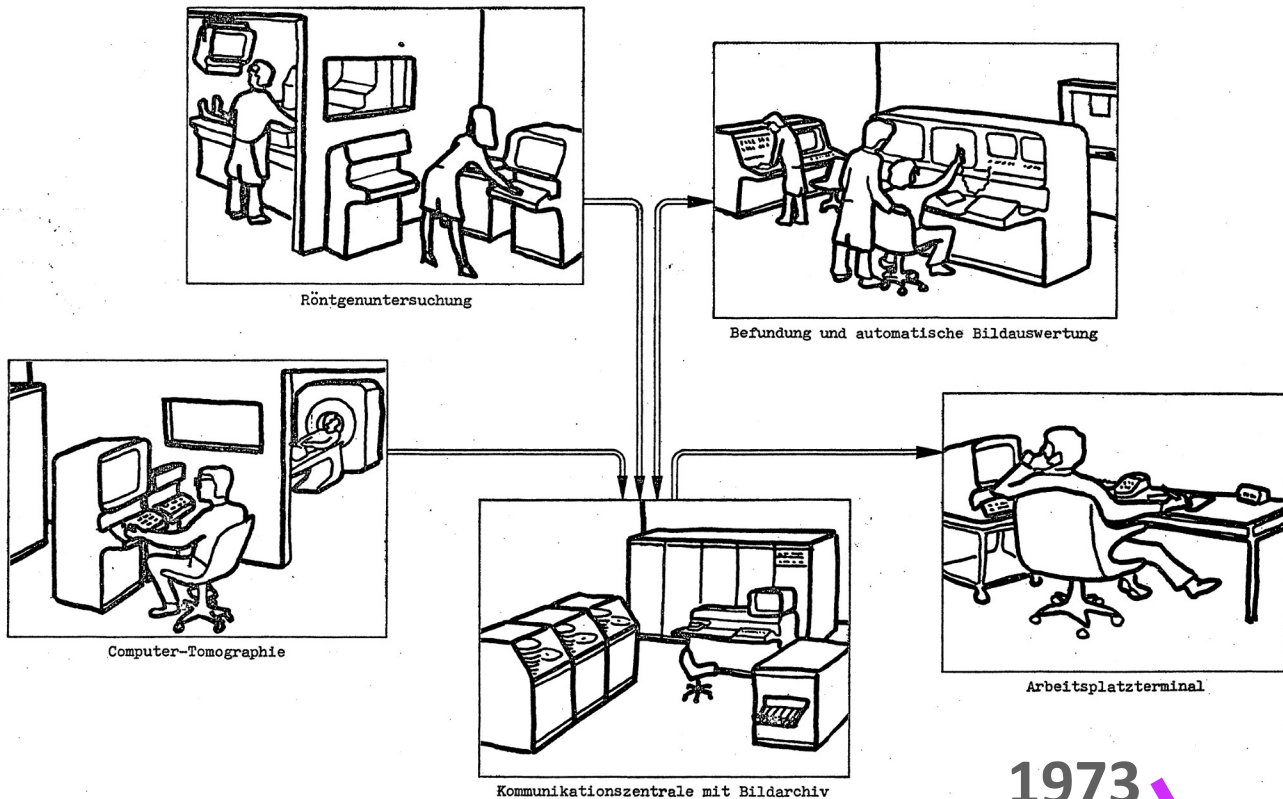
supported and maintained (38 years since 1985 release)

recognized by ISO (12052) and regulators (FDA)

It has all the metadata

identifying and descriptive

patient (subject, case), study, series, image, acquisition, ...



Meyer-Ebrecht D. [Electronic Archival System for X-Rays Images - Work proposal for a research project in the years 1974 and 1975] Elektronisches Archivierungssystem für Röntgenbilder – Arbeitsvorschlag für ein Forschungsprojekt in den Jahren 1974 und 1975. Hamburg, Germany: Philips Research Labs; 1973 Oct.

DICOM for Clinical Use vs. Research Use

Clinical use

- regulated off-the-shelf commercial medical devices
- expect an automated solution out of the box (plug-and-play)
- expect to select best of breed (vendor interoperability)
- leverage hospital/clinic IT infrastructure (archive, security, ...)
- everything else (imaging) is already DICOM-based

Research use (academic, commercial)

- less regulated, more flexible, innovative (cutting/bleeding edge)
- less centralized infrastructure and support (changing w. cloud)
- can still leverage standard solutions, esp. w. open source
- historic vendor-proprietary monolithic solutions, don't have to be
- relies less on data management (out-of-band metadata, CSV files)

Interoperability boundaries for pathology imaging

Access to input data

images ✓ *DICOM WSMI (tiled pyramids)*

annotations ✓ *DICOM SEG, SR, ANN*

protocols ~ *DICOMweb query, metadata, frames*

Sharing of output data

images ✓ *DICOM parametric maps (tiled pyramids)*

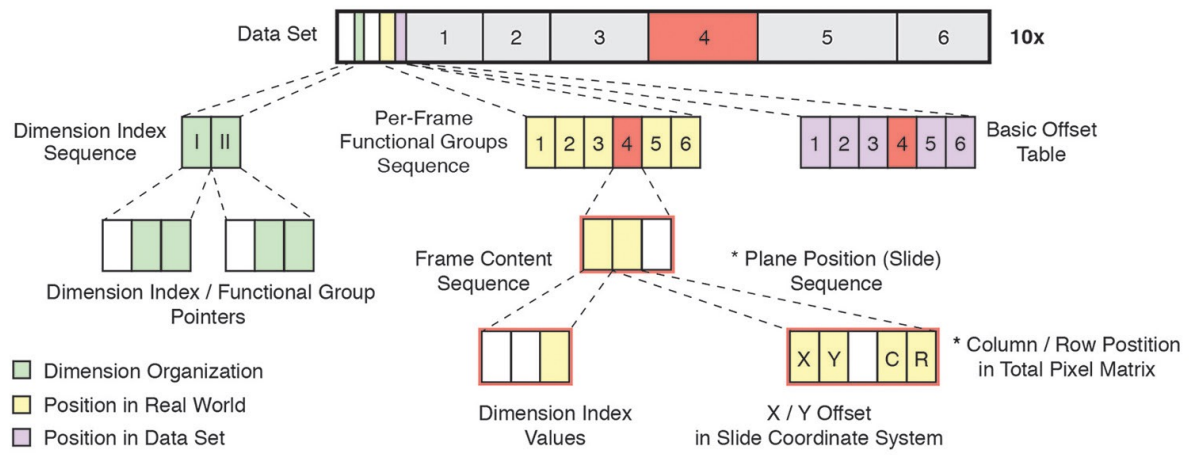
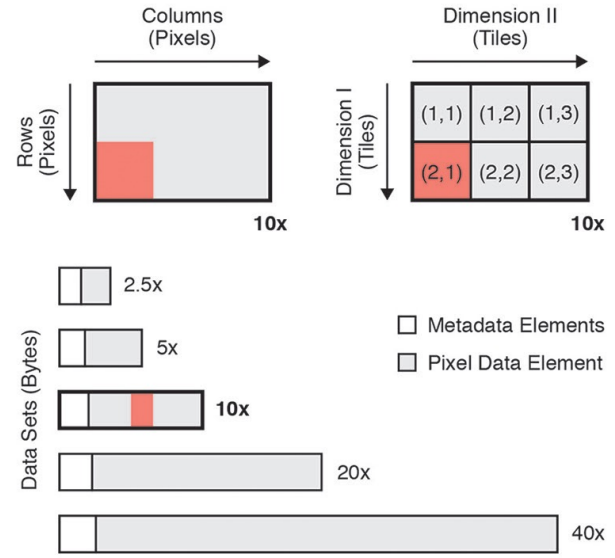
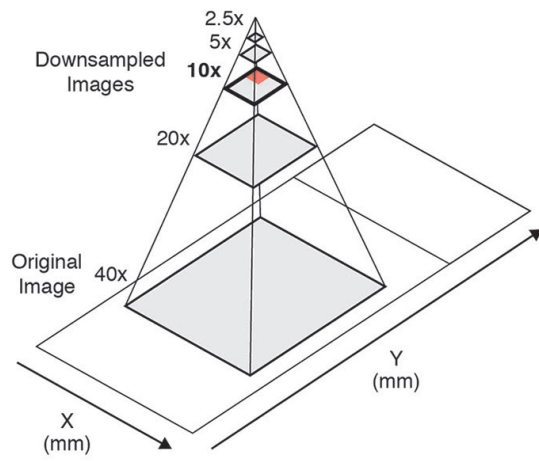
annotations ✓ *DICOM SEG, SR, ANN*

protocols ~ *DICOMweb STOW*

Management of workflow

application selection ✗

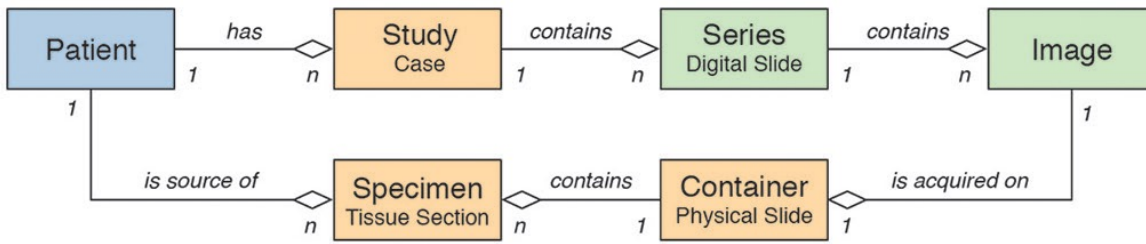
application orchestration ~ *DICOMweb UPS*





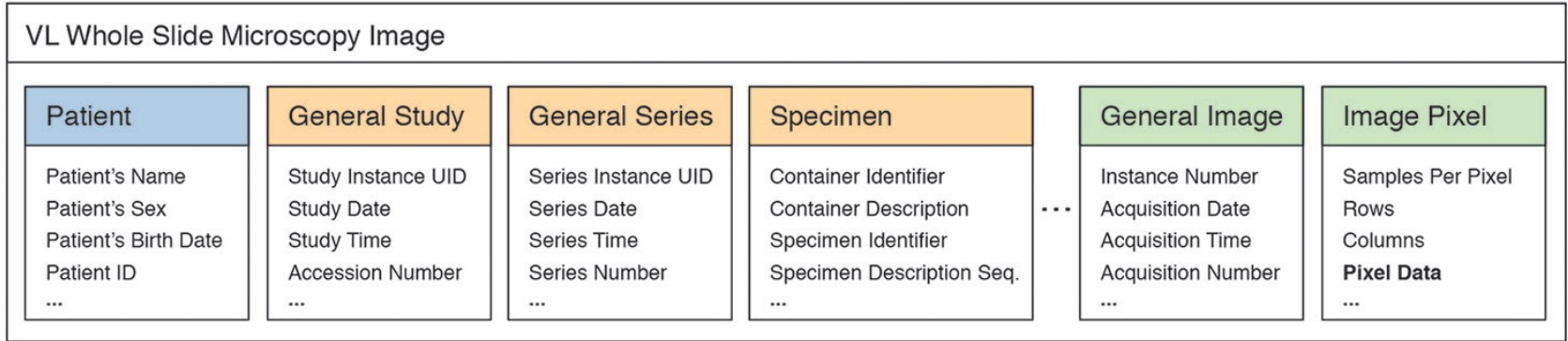
It's the metadata, stupid

<http://medium.com/digital-trends-index/its-the-metadata-stupid-12a4fc121e45#.4zhwdz5y0>

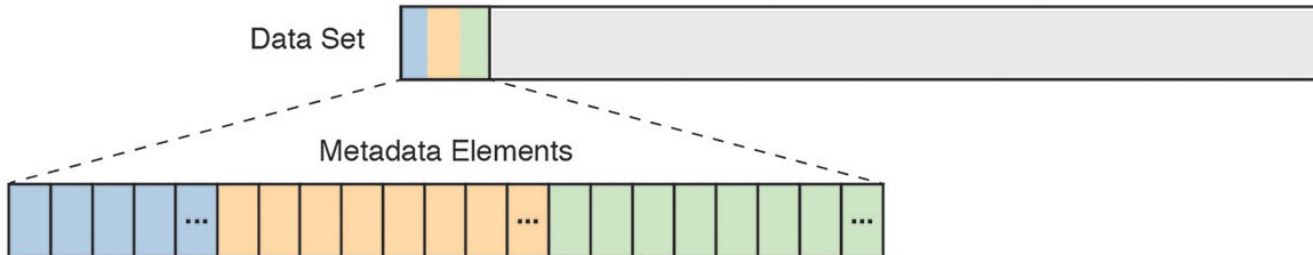


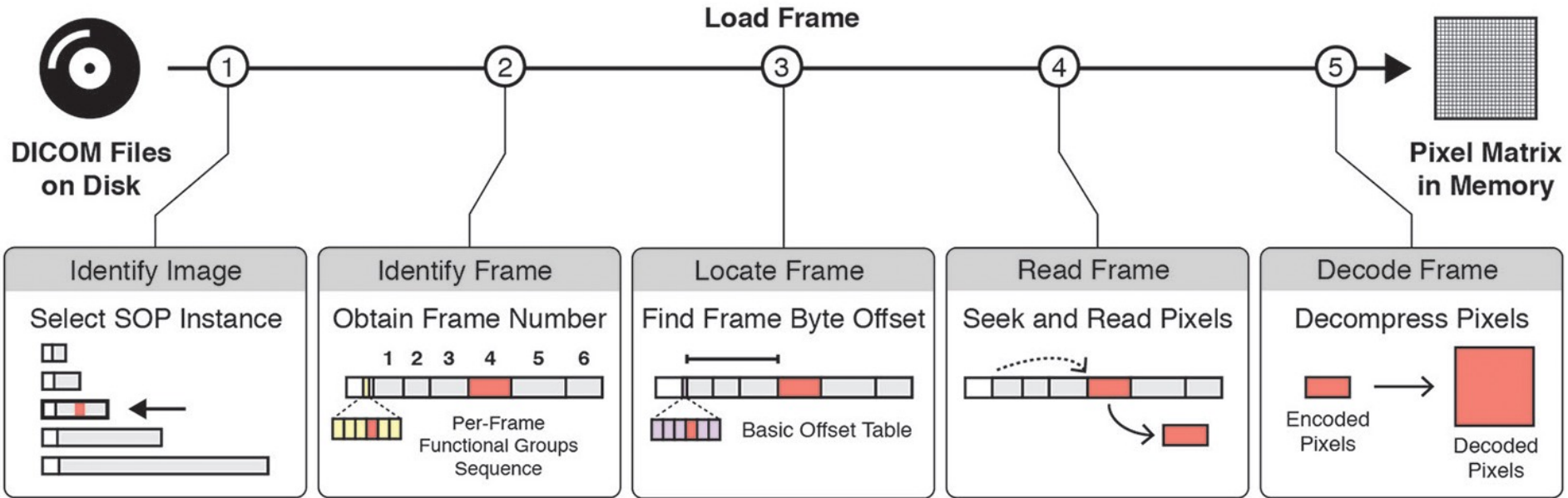
Information Source

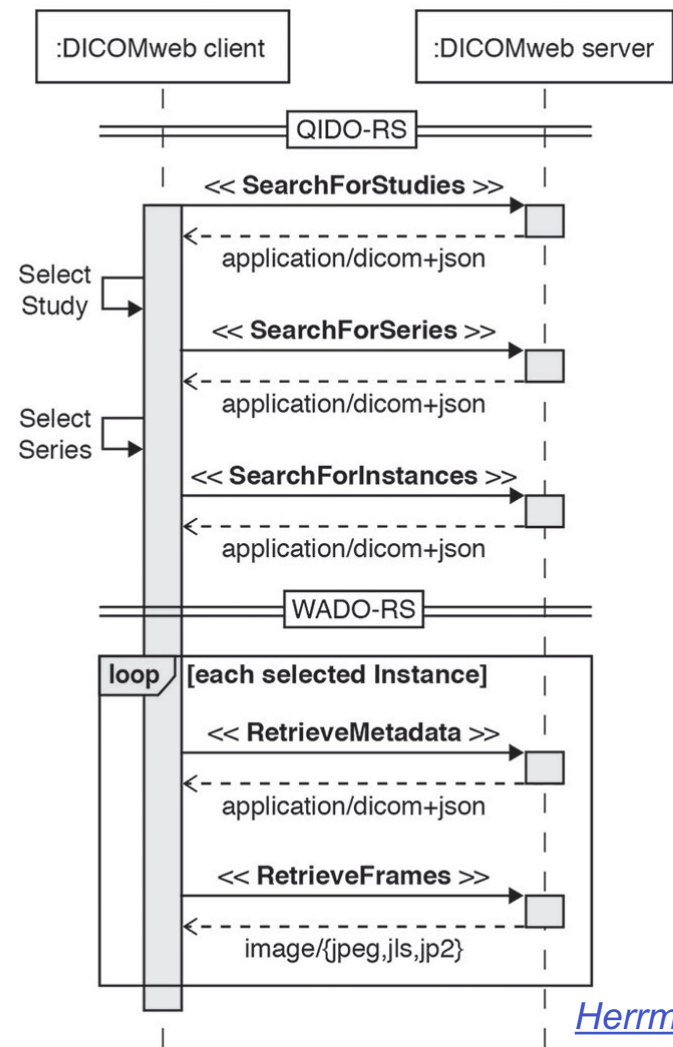
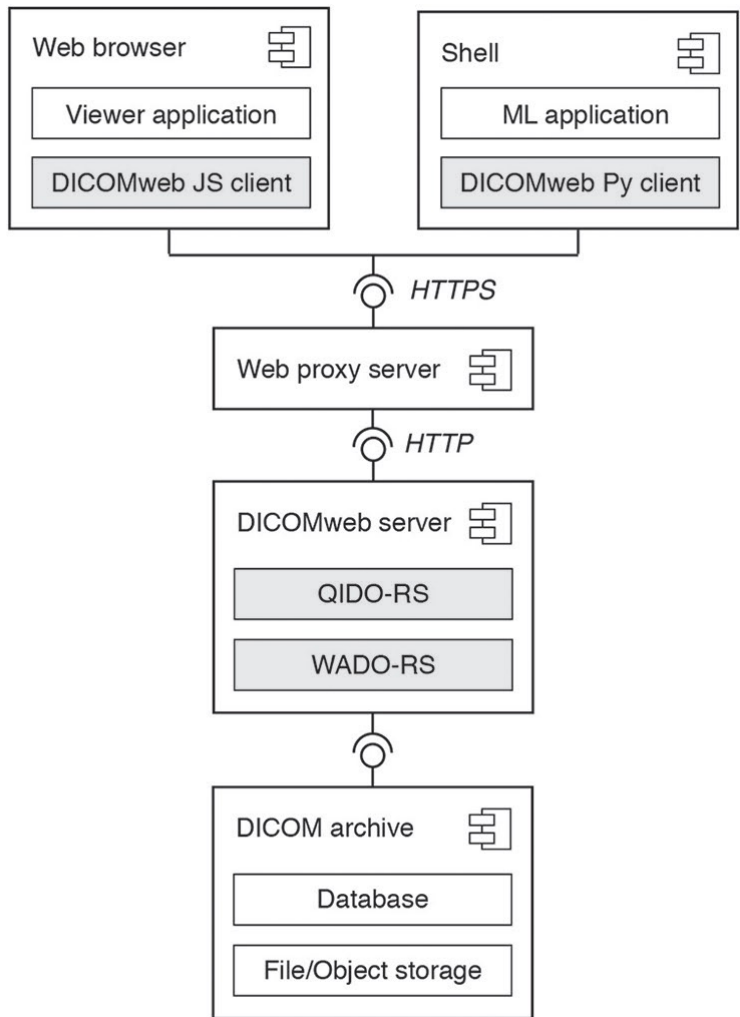
- Microscope
- Laboratory Information System
- Electronic Medical Record



Pixel Data Element







Why not TIFF?

TIFF is a fine format, popular among researchers, open source tools
The basis of many WSI scanner vendors' proprietary formats
Even has limited standardization of metadata possibilities (OME-XML)
Too many vendor variants wrt. metadata (often absent, incomplete)

It's just not what the commercial clinical medical imaging world uses
DICOM is very TIFF-like wrt. tiled pyramid WSI pixel data encoding
Easy to transcode (losslessly) between DICOM WSI and TIFF
Commercial and open source converters available
Increasingly WSI scanner vendors are offering DICOM natively
Need for TIFF reduced by DICOM support in OpenSlide, BioFormats
Can use dual-personality DICOM-TIFF (e.g., as in IDC)

Bottom line ...

Digital pathology not really as different or special as claimed

Use the same standard everyone else uses

Incrementally extend the standard prn

Layer application-specific functionality on standard mechanisms

Leverage enterprise archive (storage and business continuity)

Leverage enterprise security mechanisms

Use DICOM, improve DICOM

Don't take no for an answer from scanner and other vendors

Don't allow vendors to demand more for a DICOM license

HOW STANDARDS PROLIFERATE:

(SEE: A/C CHARGERS, CHARACTER ENCODINGS, INSTANT MESSAGING, ETC.)

SITUATION:
THERE ARE
14 COMPETING
STANDARDS.

14?! RIDICULOUS!
WE NEED TO DEVELOP
ONE UNIVERSAL STANDARD
THAT COVERS EVERYONE'S
USE CASES.



SOON:

SITUATION:
THERE ARE
15 COMPETING
STANDARDS.



Digital Imaging and Communications in Medicine