

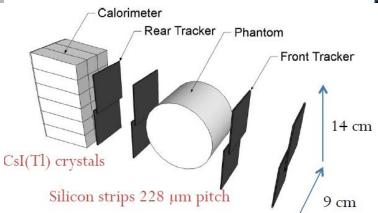


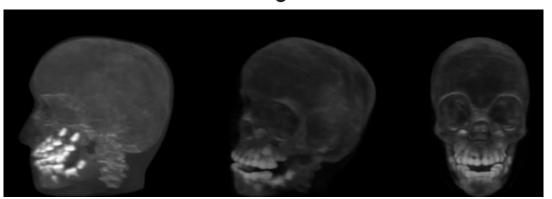
# pCT using LGAD (feasibility study)

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# pCT design: summary

Г	
Energy	≥200 MeV (head)
	~250 MeV (trunk)
Energy spread	≃ 0.1%
Beam intensity	$10^3 - 10^7$ protons/sec
Spatial resolution	< 1 mm
Electron density	< 1%
resolution	
Installation time	< 10 min
Data acquisition time	< 5 min
Reconstruction time	< 15 min (treatment
	planning)
	< 5 min (dose
	verification)
	> 1000 Gy
hardness	< 1%
Measurement stability	
Maximum dose per scan	< 5 cGy
Minimum distance to patient surface	10 cm
	Energy spread Beam intensity Spatial resolution Electron density resolution Installation time Data acquisition time Reconstruction time  Detector radiation hardness Measurement stability Maximum dose per scan Minimum distance to



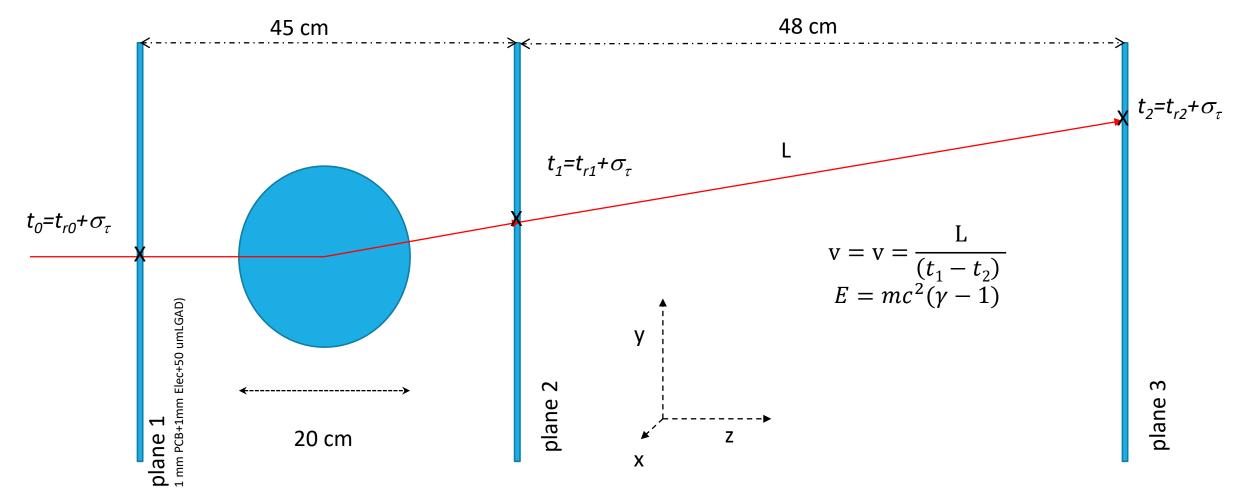
Measure of x, p, E with  $\sigma_x$ < 1mm  $\sigma_E$  < 1%

### MHz DAQ:

A head with 100 p, 1 mm voxel  $7 \cdot 10^8 \text{ p}$ : 10 kHz = 20 hrs 2 MHz = 6 min

GPU recontruction



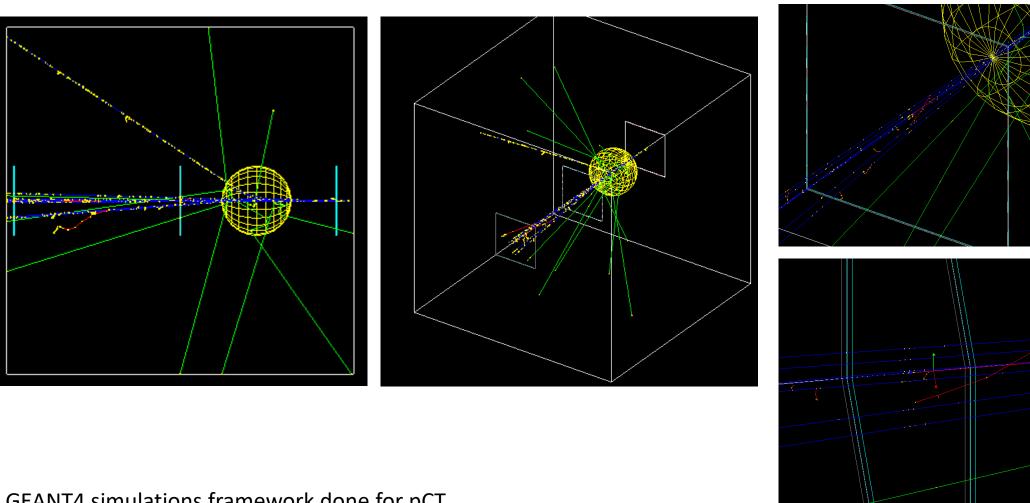


$$E_{phantom} = E_p - E_m$$
  
From  $dt = t_0 - t_1$  one can better assume  $\rho(r)$ 







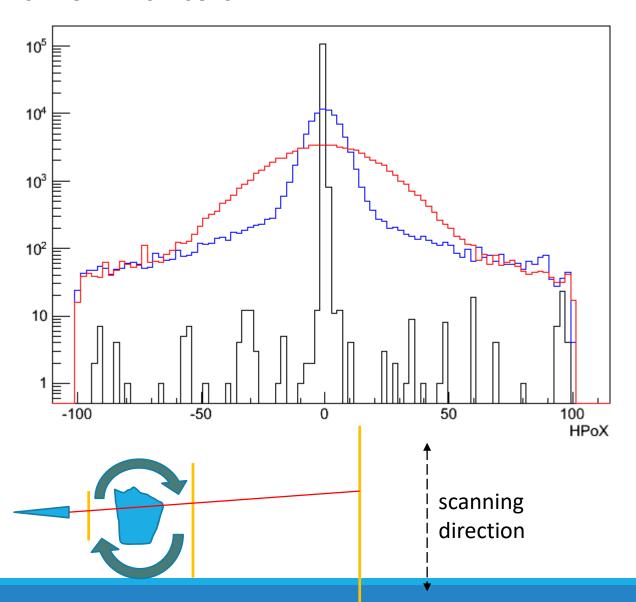


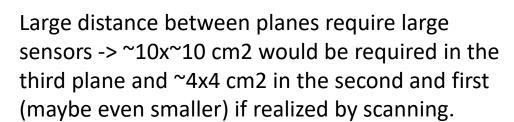
GEANT4 simulations framework done for pCT

What we need is someone who would run this and fully explore the possible benefits of using LGAD!



### SIZE OF THE SENSORS





Different sizes would reduce potential cost.

Head scan required 1e9 reconstructed p.
Presently most use strip sensors -> hours
Requirement: 10-15 min scan with full reconstruction in an hour

## Required DAQ rate >1 MHz:

- <1000 μm position resolution is required lower than 200 μm doesn't help much
- This gives enough floor plan for fast electronics (~1x1 mm² pixels something like ALTIROC)



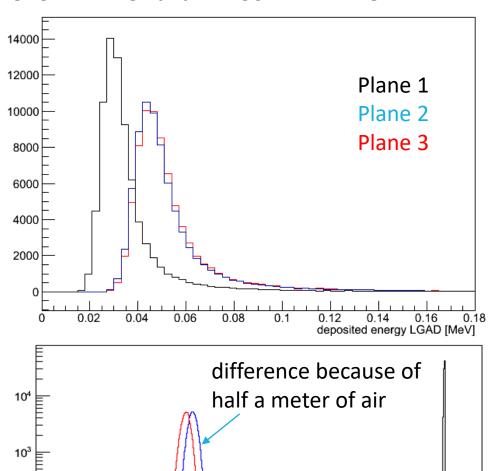
100

120

140

160

proton energy [MeV]





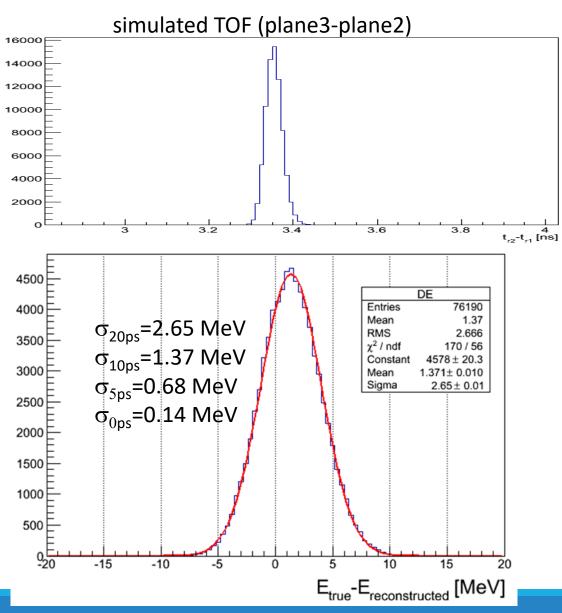
In planes 2 and 3 MPV is around 50 keV (5x larger than for mip)

At a given gain this will improve the time resolution, and allow for 35 um thick LGADs which have been shown to have time resolution of around 20 ps (less Landau fluctuations) with non optimized electronics.

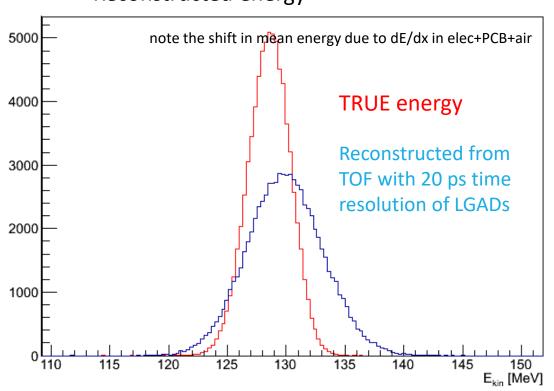
For thin iLGADs for proton detection it is reasonably to assume time resolution of <20 ps

Energy of the protons is reduced by the phantom. This improves the energy resolution as they slow down.









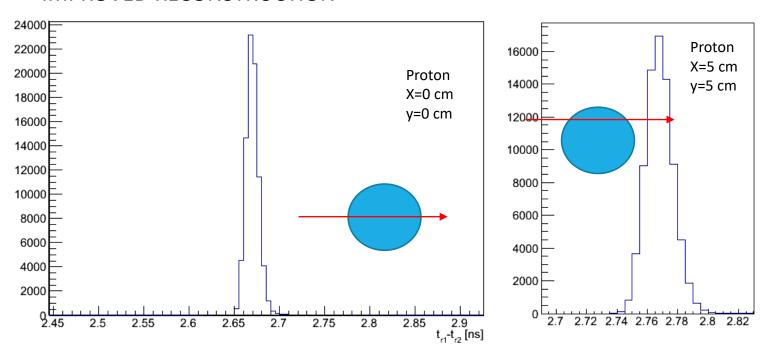
The energy resolution is 2.6 MeV which should be compared to energy resolution of typical CALs!

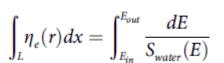
A drawback is that the energy resolution is a function of the material seen by the beam in the phantom -> a possible solution is using a constraint from the timing information from the first two layers

Better time resolution reduces it even further!



### IMPROVED RECONSTRUCTION



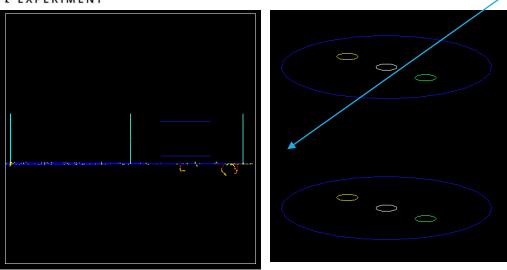


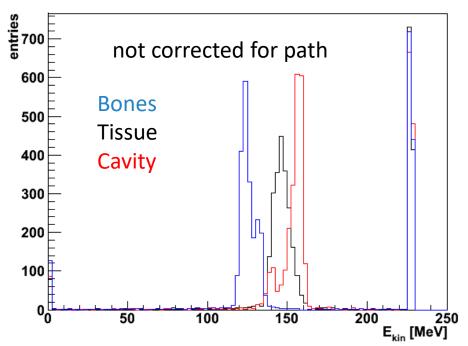
A difference in time t1-t0 can be used to improve MLP calculation -non of the algorithms used so far take this information into account.

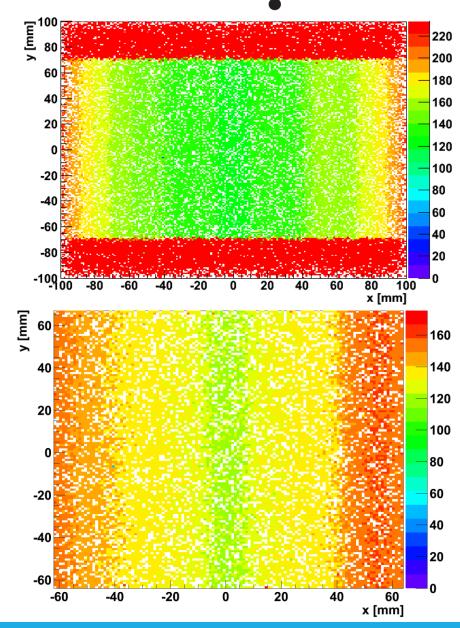


Same energy loss and hit position but different dt=t0-t1 A possible advantage over the conventional pCT and can significantly improve the reconstruction of MPL!

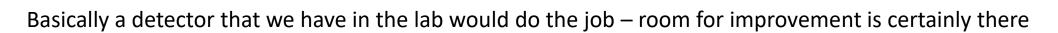


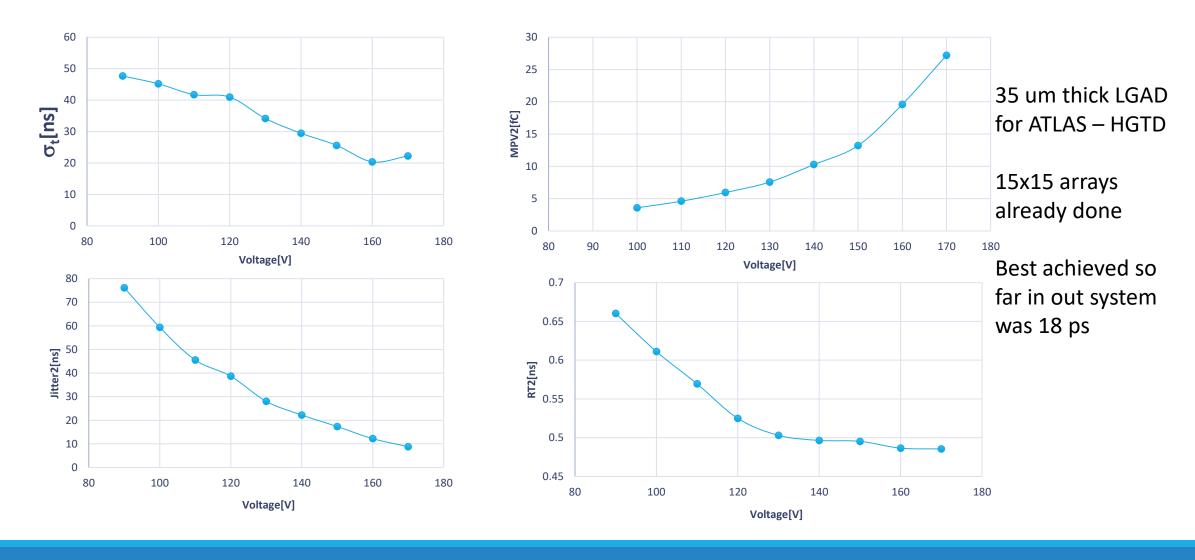














I think LGADs are ideal detectors for pCT:

- great simplification of the device no complicated calorimeter needed.
- pixelated LGADs provide good position resolution even with what has been achieved today (ALTIROC)
- iLGAD would be ideal, but with larger pixels also conventional may be good enough (to be checked)
- with improvement of timing resolution to some ~15 ps (already achievable on the test bench in our lab) we can achieve energy resolution of 1.5 MeV which is around 1% of the Ep (to be converted to WEP)
- the fact that we have timing information from all three layers allows for better determination of MLP and in combination with other two improve proton energy resolution.
- LGADs are very fast and can easily achieve 1 MHz acquisition rate or even much higher
- the system can be lightweight and can more easily allow for scanning using even smaller modules say 4x4 cm2 in all four planes.

If Slovenia is really going to take part in any form of proton therapy in the future this may be interested for us.