

3rd Annual ARDENT Workshop

Schwarzenbruck, 2 October 2014



Part I

Dosimetry with Si diodes

With reference to external photon beam radiotherapy

- 1. Introduction
- 2. Operating principle
- 3. Dosimetric performances (sensor specific)
- 4. Solutions to improve radiation hardness
- 5. Dosimetric performances (device specific)







Introduction

Advantages and drawbacks of Si dosemeters

	Feature	Consequence			
PRO	High specific sensitivity (~650nC/mm ³	Suitable for detectors with high			
	Well developed (and cheap) manufacture technology	spatial resolution			
	Photovoltaic mode (null bias)	Simplified design			
CONS	Radiation Damage	Sensitivity drift with dose Dose rate linearity			
	Not water equivalent (Z=14)	Energy dependence			

Basic ideas are known since long; their exploitation still in progress...

See e.g. R. P. Parker et al, "Silicon PN junction surface-barrier detectors and their application to the dosimetry of X- and gamma-ray beams, Solid state and chemical radiation dosimetry in medicine and biology", symposium proceedings, IAEA, 1967, p. 167.

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Introduction





Features:

- "null bias" (to minimize leackage current; no concerns about signal strength and speed).
- DC coupling.
- Sampling time and reset fixed by electronics (usually T≥10ms).
- Only integrated charge is measured.
- Situation is different for "single event" detectors, where one typically has:
- \circ diode bias at full depletion (full collection and speed).
 - AC coupling (to get rid of reverse current).

Null bias simplifies everithying (chip design, PCB layout, operation...)

Introduction

Basic geometries for single diode detectors







"**Field detectors:**" to characterize radiation fields Buildup: water equivalent, as thin as possible Additional buildup added by the user (H_2O or plastic)





Operating principle

Carrrier diffusion (I)

Assumptions:

- o Excess carriers freely diffuse in the bulk.
- o Diffusion length is limited by recombination.
- Minority carriers reaching depleted region edge, are swept by the field and generate a current.

$$\frac{\partial^2 \Delta n}{\partial x^2} = \left(\frac{\Delta n}{\tau_e} - G\right) \frac{1}{D_e},$$

Diffusion equation

$$D_e = \frac{kT}{q}\mu_e = 37.6cm^2 / s.$$

Diffusivity (at 300K)

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Boundary condition (for a semi-infinite bulk):

∆n(0)=0

i.e. all the electrons approaching the depleted region are promptly swept by electric field.

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A simple model (any drift is ruled out) even if very useful to interpret experimental results

Operating principle Carrier diffusion (II)

Solution of diffusion equation:

$$\Delta n = \frac{GL_e^2}{D_e} (1 - \exp(-x/L_e)).$$
$$L_e^2 = \tau_e D_e.$$
$$j_e(x) = q D_e \frac{\partial \Delta n}{\partial x} = q L_e G e^{-x/L_e}$$

Rule of the thumb: "<u>All the minority carriers generated within a</u> <u>difffusion length from depleted region are</u> <u>collected</u>."

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 $j = j_e(0) = qL_eG.$

j, total current density j_e , electrons current density

q, elementary charge

L_e, minority carriers diffusion lenght



Operating principle

Carrier recombination



Indirect recombination via midgap levels is dominant in silicon.

It is a 2 steps process: capture e, then capture h, or viceversa. Shi J., Simon W. E., 2003, Med. Phys. 30, 2509-19. Shokley W., Read W. T. jr., 1952, Phys. Rev., 87, 835-42.

$$\tau'_{e} \approx \tau_{e} \left(1 + \frac{\tau_{h} + \tau_{e}}{\tau_{e}} \cdot \frac{\Delta n}{p_{0}} \right) \approx \left(1 + \frac{(\tau_{h} + \tau_{e})G\rho_{Si}}{p_{0}E_{i}}R \right)$$

 $\tau_{e/h} = \frac{1}{\sigma_{e/h} v_{e/h} N_t}.$

$$\begin{split} \tau_{e/h}, \mbox{ carriers lifetime;} \\ \Delta n, \mbox{ excess carriers concentration;} \\ p_0, \mbox{ majority carriers equilibrium conc.} \end{split}$$

 $\sigma_{e/h}$, center capture cross sections; $v_{e/h}$, carriers thermal velocity; N_t , center concentration.

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Dose rate dependence: context



Dose rate dependence: basic theory

Sensitivity per unit area of the diode:

$$\frac{S}{A} = \frac{j}{R} = sL_e = \frac{q\rho_{Si}}{E_i}L_e.$$
$$\frac{S}{A} \approx \frac{q\rho_{Si}}{E_i}\sqrt{D_e\tau_e\left(1 + \frac{(\tau_h + \tau_e)G\rho_{Si}}{p_0E_i}R\right)}$$

Dose rate non-linearity, due to traps saturation.

Dose rate linearity is improved by:

- high doping (i.e. high p₀);
- short lifetime.



Practically: this effect is seen only with pulsed radiation (very high instantaneous dose rate)

Dose rate dependence: an extreme case



$$p_{p0} = \frac{1}{q\mu_h \rho} = 1.3 \cdot 10^{15} cm^{-3},$$

$$\Delta n \approx \frac{GL_e^2}{D_e} = \frac{R\rho_{Si}L_e^2}{E_i D_e} \approx 5.5 \cdot 10^{15} cm^{-3}, \text{ (at 0.2 Gy/pulse)}$$

Sensitivity saturates when the excess carriers concentration is comparable to doping level.

In this case the junction electric field is heavily modified.

Dose rate beyond the range of clinical applications.





Dose rate dependence: PRF related effects



- o Observed in few detectors only
- o Sensitivity decrease at low dose rate, more evident at low dose per pulse
- Proposed explanation: Release from traps slower than 1/PRF

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Sensitivity vs dose: basic theory

$$\frac{S}{A} \approx \frac{q\rho_{Si}}{E_i} \sqrt{D_e \tau_e \left(1 + \frac{(\tau_h + \tau_e)G\rho_{Si}}{p_0 E_i}R\right)}$$

If a single trap dominated, Neglecting R-related term

$$\frac{S}{A} = \frac{q\rho_{Si}}{E_i} \sqrt{\frac{D_e}{\sigma_e v_e N_t}} \propto N_t^{-1/2}$$

 N_t grows with Dose, thus τ_e and L_e decrease Consequences:

- o decrease of sensitivity S during use
- o need of priodic recalibration.

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Sensitivity vs dose: oxide related effects



Temperature dependence (I)

Important for in-vivo applications. Accordingly to the outlined theory:

$$\mu_e \propto T^{\gamma}, \gamma \approx -2,$$

svwt = $\frac{1}{S} \frac{dS}{dT} = \left(\frac{1}{4} + \frac{\gamma}{2}\right) \frac{1}{T} \approx -0.3\%$ (@ 300K)

Actually, this is not the case...

- o svwt is usually positive
- o svwt is influenced by irradiation.
- assumption of a single dominant deep level is probably not adequate

Diodes with most pronounced dose-per-pulse dependence exhibit the highest svwt (Van Dam, Radiother. Oncol. 19, 245,1990)



Temperature dependence (II)

All diodes with	nout Pt	doping					1.08 -	15	SORAD 1	Gold u	nirradiat	ed diode	•
Model	Туре	ρ	Pre-	Temp. Coeff. (%/K)			Terror		Ì				
		(Ωcm)	irradiation				1.06		0 - Co-	60 = 0.4	5,%/°C	<u> </u>	¢
									+-6 M	V = 0.06	1 %/°C		
			Dose	⁶⁰ Co	6MV	15-	1.04		- x20-1	0.0 =-¥¦N	50-%4°C-	·/	
			10MeV e-			20MeV	e		1	1		1	1
			(kGy)				1.02					¦	
EDP10	р	0.2	8	0.36	0.38	0.33	e CI		1	/		-	-
EDP30	р	0.2	8	0.39	0.36	0.34	1.00 gi		*****	+the	1		
Isorad Gold	n	35	none	0.16-0.45	0.05-0.1	0.05-0.1	Rel		l ø	1		-	
Isorad Red	n	35	10	0.37	0.22	0.21	0.98				1	+ ¦	
QED Blue	р	0.8	10	0.30	0.30	0.31			<i>P</i> ₁				
QED Red	р	0.8	10	0.29	0.29	0.29	0.96	7	1	1	1		
QED unirr.	р		None	0.34	0.25	0.27	0.04						
1. In most	cases	svwt=0.	2-0.4%/K				10 	ni A. S	15 S. and 2	20 Tempera Zhu T. (25 3 ature (°C C, 2002,	i0 3)	35 4

2. Variation with beam energy only in unirradiatied diodes

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Med. Phy. 29, 622

Quantum noise



Recipe 1: preirradiation...



Recipe 1: ...p-type...



Recipe 1: ...low resistivity.

Use of low resistivity improves recombination, as expected. Even the effect of neutron-contaminated beams is negligible.

Table: " Φ factor" for diodes of two resistivities, at different pre-irradiation levels.

Detector	Pre-irradition	Pre-irradiation Beam quality					
type	Dose	8MV	21MV	20MeV	70MeV		
	(kGy)			e⁻	p+		
10Ωcm	0	1.00	1.00	1.00	1.00		
	3	1.0	0.96	0.97	0.95		
	10			0.98			
	25			0.99	0.92		
0.2Ωcm	0	1.00	1.00	1.00	1.00		
	3	1.00	1.00				
	5			1.00	1.00		
	10			1.00			
	50	1.00	1.00		1.00		

 $\Phi = \frac{S_{Si}(highR)}{S_{IC}(highR)} / \frac{S_{Si}(lowR)}{S_{IC}(lowR)}$

Grusell E. and Rikner G., 1993, Phys. Med. Biol. 38, 785-792.

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Recipe 2: Pt doping



Pt introduces a recombination level at:

 $\begin{array}{l} {\sf E}_{\sf V} {\rm +0.42eV}, \\ {\sigma}_{\sf h} {\rm =2.7x10^{-12}cm^2} \\ {\sigma}_{\sf e} {\rm =3.2x10^{-14}cm^2}. \end{array}$

Large σ are effective in reducing $\tau_{e/h}$.

If center concentration is high enough:

- it dominates against radiation induced centers (S independent on dose);
- o traps saturation cannot be reached
- o (no dose rate dependence).

Jursinic P. A. and Nelms B. E., 2003, Med. Phys. 30, 870. Baliga, Sun, 1977, IEEE Trans. Electron Devices 24, 685



Comparison of commercial detectors

	Manufacture	Model	Туре	Pt	ρ	Preirradiation		
					(Ωcm)	Dose	Energy	
						(kGy)	(MeV)	
\bigtriangledown	Nuclear Ass.	Veridose Green	n	yes	NA	8	10	
\diamond	Scanditronix	EDP10	р	no	0.2	8	10	
Х	Scanditronix	EDP20	р	no	0.2	confidential		
0	Sun Nuclear	Isorad Gold	n	no	35	none		
+	Sun Nuclear	Isorad Red	n	no	35	10	3	
*	Sun Nuclear	Isorad-p Red	р	no	0.8	10	10	
\land	Sun Nuclear	Isorad-3 Gold	n	yes	10	none		
X	Sun Nuclear	QED Red	n	yes	10	none		
∇	Sun Nuclear	QED Blue	р	no	0.8	10	10	
Δ	Sun Nuclear	QED Red	р	no	0.8	10	10	

Low dose rate dependency and reproducibility is obtained with: a) p type, pre-irradiated, low resistivity; b) Pt doping.

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Recipe 3: Epitaxial guarded diodes (I)

Example: p-type substrate



- e⁻ generated under the guard: collected by the guard
- e⁻ generated in the substrate: recombine (due to high doping)

Active volume is geometrically defined!

M. Bruzzi et al., Appl. Phys. Lett., 90 (2007) 172109 1-3.

Recipe 3: Epitaxial guarded diodes (II)



Energy dependence: origin



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Energy dependence: effects on measurements



Energy dependence: shield design



- o A large improvement is obtained by shielding the chip from low energy backscattering
- o Shielded diodes shall be used only when necessary (sub-optimal for small fields and electrons)





Energy dependence: software correction (I)



Energy dependence: software correction (I)



Angular dependence

Angular dependence is dominated by assembling Almost no effect related to flat chip geometry



M. Westermark et al., Phys. Med. Biol. 45, 685, 2000.
P. Björk et al., Med. Phys. 27 (11), 2000
P. A. Jursinic, Med. Phys. 36 (6), 2171 (2009)
Barbés et al., Med. Phys. 41, 012102 (2014)





Small field dosimetry (I)



Small field dosimetry (II)

Silicon promising...

few points to be clarified:

- a) How relevant is energy dependence?
- b) Which physical parameters determines energy dependence (Z, density?)



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Small field dosimetry (III)

Silicon promising...

few points to be clarified:

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- a) How relevant is energy dependence?
- b) Which physical parameters determines energy dependence (Z, density?)
- c) Improvement with inhomogeneities in assembling (e.g. air volumes)?





LINAC commissioning: LDA99 (IBA Dosimetry)



Sensor:p-type didApplications:RelativeDetectors active area: 3.1mm^2 ;Active volume: 0.15mm^2 ;Sensitivity:100 nC/G;Buildup:~1 mm

p-type diode, pre-irraidated; Relative dosimetry in a water phantom 3.1mm²; 0. 15mm³; 100nC/Gy; ~1mm





Multi purpose: MapCheck2 (Sun Nuclear)



Patient plan QA: ArcCHECK (Sun), Delta⁴ (Scandidos)



LINAC QA: Tomo Dose and SRS profiler (Sun Nuclear)





- First Si monolithic dosimeter
- Design mutuated from high-energy physics
- N-type silicon, 1-10kΩcm, 300µm thick.
- Readout based on X2CHIP integrator from RAL (UK)
- Detector is biased (V_{rev}=20V)

I. Redondo-Fernández et al., Nucl. Instr. Meth. A 563 (2006) 229. Manolopoulos, S. et al., *Phys. Med. Biol.* **54**, 485 (2009).

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128 diodes, 250 μm pitch





Si Module:

p-type epitaxial diodes, 50 μ m epi layer thickness Overmetal strips to pads along one single side. Diffused guardring structure.

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D. Menichelli et al., Nucl. Instr. and Meth. A, 583, 109 (2007)
C. Talamonti et al., Nucl. Instr and Meth. A., 583 (2007) 114
C. Talamonti et al., Nucl. Instr. And Meth. A 658, 84 (2011)



Assembled detector: Up to 3x3=9 modules (19x19cm²) TERA06 readout (INFN Turin)



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Research prototypes "MAESTRO" 2D array

C. Talamonti et al., "2D Monolithic Epitaxial Silicon Detector for Application in Radiotherapy," presented at RESMDD 2012, Florence, 10-12 October 2012.





SRS cone diameter (mm)

"Magic Plate" (Wollongong)



11x11 single diodes
P-type (100Ωcm), 50µm epi layer
0.5x0.5mm² active area
Pre-irradiation: 1.3kGy (6MV)+40kGy (⁶⁰Co)

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J. H. D. Wong et al., Med. Phys. 39 (5) 2012, 2544. US2010/0164534 A1



Transmission or phantom detector mode Chips embedded in thin plastic/kapton layers (proprietary technology) 1cm pitch

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"Magic Plate-512"



Monolithic Array, Bulk p-type substrate ⁶⁰Co pre-irradiation Readout based on Texas AFE0064 Mouted on flexible FR4, PMMA buildup

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A. H. Aldosari, Med. Phys., 41, 091707 (2014).



IBA "1D Si Array"



24cm active length, 1mm pitch Assembling of 64 pixels monolithic modules Connected to "Zebra" electrometer with a molti-pole shielded cable. C. Talamonti et al., "Novel Silicon Array for quality assurance in photon and proton therapy," AAPM annual congress, Austin, July 2014.





Part III

Final remarks and future perspectives

- State of the art
- Semiconductor design
- System design
- Competing technologies*

*Huge bibliography; I can provide references about specific issues to the interested persons

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Remarks and perspectives

State of the art summary

Present situation

- Solutions available to manufactor high performances Si dosimeters
- Consolidated readout scheme: photovoltaic, DC coupling, current integration, no bias
- o Single diodes are widely used for scanning, in-vivo and OF measurements (small fields)
- o Commercial Arrays (of single diodes) cover most applications but in-vivo (ScandiDos solution announced).
- o Current research: mainly exploiting high spatial resolution (typically with monolithic array)
- Multichannel electrometers with ADC are available (e.g. INFN Tera0x, TI and Analog...)

Open issues

- Energy dependence
 - large fields (>10x10cm²): photoelectric effect;
 - very small fields (<1x1cm²) : unclear.
- Best use of high resolution possibilities offered by Si processing Trade off between area coverage, pixel pitch, cost, readout complexity







Remarks and perspectives

Semiconductor design

Diodes shall be radiation hard (recipes exist)

- Low dS/dD, to preserve calibration (a user calibration procedure must be given!);
- Low dose rate dependence (especially with unflattened beams)
- Quantum noise may be not negligible if pixels are very small (important for small fields).
- Angular and energy dependence shall be faced at system level.

Monolithic arrays or single diodes?

- Monolithic chips are convenient only if full area coverage is required;
- Monolithic: better uniformity; assembling is only conceptually easier.
- Array of single diodes cost effective if pitch is not too small, depending on assembling technology

If monolithic, which module size?

- Few full wafers? Many small chips? A tradeoff is needed.
- ✤ Large area chips are fashinating but: lower yeld, huge replacement costs.
- Attention to important axes (central axes covered with 3x3, not with 2x2...)
- Fan out is not obvious...



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Final remarks and perspectives

System design

General rule

One shall have in mind the final application, and a consistent feedback from clinics!

Assembling

- No energy dependence worsenign (minimal amount of high-Z materials, especially upstream)
- o Scattered photon shielding: may be a problem for electrons and small fields
- o Mechanical stability, even with temperature changes
- No damage to chips (e.g. scratches)

Readout complexity

- Parallel readout needed by diodes (multiplexing available only with MAPS)
- Number of readout ICs and costs rise with #pixels
- Critical for 2D applications: #pixels∝(1/pitch)², #pixels∝(detector size)²
- Integrating IC cannot placed inside clinical radiation field (parasitic signal generation)
- Reliability and power consuption are worsened by high complexity



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Final remarks and perspectives

Competing technologies (already commercialized)

Air filled ionization chambers

- o "Gold standard" (highest dosimetric performances)
- o E.g. IBA MatriXX and StarTreck, Sun IC Profiler, PTW Octavius 1500 and 729
- o 7-10mm pitch, prototypes down to 3.5mm
- No cost problems in covering large surfaces
- a:Si flat panels: (software for LINAC-embedded Epid)
- o Large area (up to 40x40cm2) and high resolution (200μm) thanks to a:Si deposition and multiplexing.
- o Pretty expensive, radiation hardnes not completely clear, few manufactures.
- Indirect detection (aim is imaging), need software correction
- o EPIdose (Sun), EpiGray (Dosisoft), Dosimetry Check (Math Resolution), Epidos products
- o Research about stand alone devices

Liquid filled ionization chambers (e.g. PTW Octavius SRS)

- Better spatial resolutions due to higher sensitivity (2.5mm available)
- "Gold standard" attribute of air is lost;
- Problems with dose per pulse and stability

Scintillating detectors, coupled with cameras (e.g. IBA Lynx for protons)

• Prototypes developed for photons (including scintillating liquids/gel)

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Final remarks and perspectives

Competing technologies (research stage)

Monolithic Active Pixel Sensors (MAPS)

- o Cristalline silicon equivalent of a:Si flat panel
- o Potentially more performing
- A lot of reasearch, no commercial applications.
- o Size limited by cost and wafer size

Arrays of scintillating fibers, or of fibers coupled with scintillators

o Readout with cameras, photodiodes of PMT

GEM detectors,

- Usually coupled with pads or scintillator/optical systems
- o Mainly proposed for proton- and hadron-therapy, or medical imaging.
- Few experiments with photons; advantages are unclear.

Diamond arrays

- o Experiments with monolithic poly-cristalline diamond (to reduce cost) arrays
- o Is diamond really better performing with small fields (which are the case of interest)?



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Thank you

