

2019 QSM Challenge - Stage 1

Welcome to the Submission Form for the first stage of the 2019 QSM Reconstruction Challenge!

* Required

1. Email address *

Submitter Information

2. Your first name *

3. Your last name *

4. Institution (full name) *

5. Department *

6. Lab name *

7. Director/head of the lab (full name) *

8. Full mailing address *

9. Do you or someone from your lab plan to attend the 2019 QSM Workshop?

Mark only one oval.

- Yes
 No
 Maybe

Algorithm information

10. Full name of the algorithm *

Type the full name of the algorithm used to reconstruct this susceptibility map as you would like it to appear in reports and publications resulting from the challenge.

11. Preferred Acronym *

Type the acronym of the algorithm used to reconstruct this susceptibility map as you would like it to appear in reports and publications resulting from the challenge. The maximum number of characters for the acronym is 10.

12. Algorithm-type *

Mark only one oval.

- Closed-form direct solution
 Inverse filtering (TKD-like)
 Spatial-domain iterative reconstruction
 Deep Learning
 Hybrid (multiple categories)
 Other: _____

13. Does your algorithm incorporate information derived from magnitude images? *

Please declare if your algorithm uses additional information derived from magnitude images.

Mark only one oval.

- Yes
 No

14. Regularization terms *

Check all that apply.

- None or does not apply
- L0
- L1
- L2
- Wavelets
- Total-Variation
- Generalized total variation
- Other: _____

15. Did your algorithm use the provided frequency map or the four individual echo phase images?

*

Mark only one oval.

- Frequency map
- Individual echo phase images
- Both

16. Publication-ready description of the reconstruction technique *

Provide a publication-ready summary of the reconstruction technique used to obtain the submitted susceptibility map. We may use this paragraph in its original or modified form to describe your algorithm in reports and publications resulting from the challenge. Please make sure to be sufficiently precise and not too general. Emphasize which established concepts your algorithm relies on and what differentiates it from other algorithms of your lab (if applies). You may reference publications listed in the next section. Maximum 500 characters.

17. Publications that describe the algorithm *

Please list the most relevant publications that describe your algorithm. If the algorithm has not yet been published, please describe if there are plans to publish the algorithm.

18. Algorithm publicly available?

Please paste the link to the website where the algorithm can be downloaded.

19. If your algorithm is not yet publicly available, would you be willing to make it available at the end of the challenge? *

If your algorithm turns out to be among the best performing algorithms, you may be asked to make the programs available for other researchers.

Mark only one oval.

- Yes
- No
- Maybe
- Is already publicly available

Solution information

This section is about specific parametric setting used.

20. Specific information about this solution

Please disclose specific information about the parameter settings used for this submission. This information is particularly important if you submit multiple solutions obtained using different parameters with the same basic algorithm.

Grant permission to publish your solution

21. Herewith, I permit the QSM Challenge committee to publish my uploaded files (calculated maps) after the completion of the challenge. *

Check all that apply.

- Yes (required)

Submission identifier

Each submission needs to be uploaded as a single ZIP file.

Evaluation will be performed in a blinded manner, i.e. the person who will analyze your submission will not have access to the data submitted with this form.

Blinding requires that the uploaded file does not contain identifying information and is unique.

We recommend that you generate a random filename by clicking on the following link (will open in new tab):

<https://www.random.org/strings/?num=1&len=10&digits=on&upperalpha=on&loweralpha=on&unique=on&format=plain&rnd=new>

Copy the random character string in the field below and rename your zip file accordingly.

22. Submission Identifier *

Type your 10-character identifier here. Make sure the file name of your uploaded ZIP-file is identical to the Submission Identifier (followed by: .zip). If your filename does not match the identifier below, we will not be able to map your submission to your name.

A copy of your responses will be emailed to the address you provided

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