RTOG Study No 0920

Case #

PLACE LABEL HERE

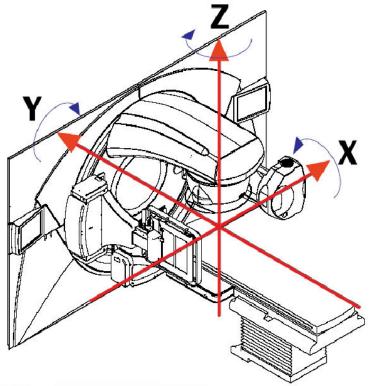
Institution Name

Institution No. RTOG Patient ID

IGRT data from: ______ (specify treatment machine) **Patient Initials** INSTRUCTIONS: Submit this form at patient's entry on study. Complete the information by filling in AMENDED DATA YES boxes or blanks as requested. See separate page for instructions. Isocenter Isocenter **IGRT** Isocenter Couch Couch Was a Tr# **IGRT** Couch Date shift X shift Y shift Z rotation rotation repositioning rotation time technique² $(mm)^1$ $(mm)^1$ $(mm)^1$ around X around Y around Z pt^3 made pre-tx? $(_{0})^{1}$ $(_{\rm o})^{1}$ $(_{0})^{1}$

(Please make sure to use correct positive or negative sign. Note that the shifts are defined as the difference between planned isocenter and imaging center, i.e. shift = planned isocenter – imaging center. For example, if the imaging center is 1.0 cm in the positive X direction from the isocenter, this should be reported as an X shift of -1.0cm or -10mm)

¹Record shift and rotation numbers according to the following definition of the dimensions:



Definition of XYZ dimension (arrowheads indicate positive directions for shifts & rotations)

Notes:

² An institution should have a primary means of IGRT.

KVCB = KV Cone Beam CT scan

MVCB = MV Cone Beam CT scan

KVCT = KV Fan Beam CT scan (e.g., in-room diagnostic CT)

MVCT = MV Fan Beam CT scan (e.g., Tomotherapy)

MVorth = MV orthogonal images

KVorth = KV orthogonal images

However, an institution may use a backup system for IGRT if necessary – for example if an institution's KVCB is not working one day, they may use MVorth. Portal imaging with radiographic film (MVForth) can be used for backup only.

Provide some additional information for your imaging technique that will help to estimate imaging dose:

kV, mAs, MU# used:	
CT scanning angles: _	
Rotational Isocenter: _	
Other:	

- A = Prior to treatment -- Immediately after immobilizing patient using marks on mask no prior imaging;
- B = Re-imaging -- Prior to treatment but after a previous positioning and/or imaging procedure.
- C = Post-treatment imaging.

³ When the Images were obtained relative to treatment.

* Please provide any information of the registration process that can help to assess the registration results (e.g., if the registration is a fully automatic result from the software; if any specific structure is used for alignment; if any specific ROI is used during registration; if any manual adjustment is involved etc. Please provide another sheet if the space in this form is not enough.)	