

Daily ITC Tasks

- Checking incoming email
- Processing new randomizations
- Processing daily mail
- Answering Phone calls
- Processing incoming FTP data cases
- Processing Credentialing cases
- Digitizing simulation & port films
- Database entry

Misc. Tasks

- Checking for delinquent data for randomized cases
- Checking for Cases to send to PI for OARs
- Emails to institutions trying to get credentialed--- may have sent partial data, no other response
- Sending cases for DVA
- Ordering Supplies for ITC
- Sending emails for delinquent data

Digital Data to Be Submitted to ITC

- Electronic digital data plan sent by FTP or media
- DDSI online form
- Color isodoses—sent as JPEGs or mailed
- Email sent to ITC---study number, case #, benchmark, dryrun, why resubmitted, modality

Reasons for Problem Submissions

- Protocol unclear
- Web site unclear
- Participants are inexperienced
- Participants don't read

Problems with FTP Submissions

- Data missing files---CTs sent, missing Dose file, Plan, or Structure file
- Data not in RTOG or DICOM format—usually, Pinnacle format
- Grid margin and or resolution not set correctly in Plato
- Missing structures
 - Missing breast ipsi
 - No thyroid
 - No skin on External beam PBI
- Dose file sent for single fraction not all ten
- Multiple plans, dose, structure files sent in DICOM

Problems with Data Identification

■ What we get

- dcmcd
- dryrun----dry
- 975642
- IMRT
- 010506
- Smith
- dloJW00690051_552_l.tar

■ What we need: labels with study number, case, modality, e.g.,

- 0126_3Ddryrun
- 0413mammo
- 0225Phantom

Problems with FTP Submissions

- No email to ITC describing data sent
- Email sent—unable to identify institution
- Re-submissions without explanation
- DDSI form not sent immediately after digital data FTP'd

Problems with 0413 Submissions

- Rapid Review Submissions on Thursday or Friday afternoons---with intent of starting patient on Monday
- Significant number of resubmissions, often on same day
- Phone calls during processing—6 calls one day during processing of one rapid review case
- Data from one institution submitted by another ---no mention to ITC of this
- Directory file names--need meaningful information, i.e.— Study number, case number, benchmark/dryrun/phantom, modality.
- Institution credentialed using media (CD) submission— now want to use FTP (for *Rapid Review* case).

Frequently Asked Questions (1)

- We want to participate in RTOG Protocol ????? --
What do I need to do?
 - First, please refer to the ATC website <http://atc.wustl.edu> ; click on specific protocol number
 - You will need to be credentialed.
 - You will need to setup an FTP account to send data.
 - You must be able to submit four items to ITC
 - Digital treatment planning data (in RTOG or DICOM format)
 - DDSI form (online web form)
 - Color isodoses
 - Email to ITC after submitting digital data

Frequently Asked Questions (2)

- What is the “ITC”, the “ATC”? – What’s the difference?
 - The ATC is the Advanced Technology Consortium. It’s members include the ITC, RPC, RTOG, QARC, RCET. The members work in conjunction to facilitate the advancement of the advanced technology clinical trials.

Frequently Asked Questions (3)

- What is an FTP account and how do I get one?
 - An FTP account allows your institution to send electronic digital data (from your treatment planning system) to the ITC.
 - Only one account is issued to an institution and is used for all studies that require digital data to be sent to the ITC.
 - At most institutions, it is the Physicist or dosimetrist who send the digital data.

Frequently Asked Questions (4)

- What do I need to do to become credentialed?
 - First, please visit the ATC website (<http://atc.wustl.edu>) and select the page for the protocol for which you want to be credentialed.
 - Credentialing requirements are protocol specific and may include any or all of the following:
 - Online Facility Questionnaire
 - Dry Run – (previously-treated patient, planned per protocol with digital treatment planning data submitted to the ITC.
 - Phantom – contact the RPC to request a phantom. The phantom will be mailed to your institution. Plan and irradiate according to instructions and submit treatment planning data with color isodoses to the ITC.

Frequently Asked Questions (5)

- What do send (and where) for ATC-supported protocols?
 - Section 12.2 in the RTOG protocols normally lists what is to be sent to ITC
 - The ATC website will also have a data submission checklist that lists what needs to be sent
 - The ITC address and contact information is on the ATC website:

**Image Guided Therapy QA Center
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St. Louis, Mo. 63108**

Frequently Asked Questions (6)

- What do I send to the ITC?
 - Digital treatment planning data sent by FTP or media
 - DDSI online form
 - Color isodoses – emailed as JPEGs or express mailed
 - Email sent to ITC, identifying protocol number, case number,
whether benchmark or dryrun, why resubmitted, treatment modality

Examples:

RTOG 0126 case 55

RTOG 0413 mammosite benchmark

RTOG 0225 Phantom,

RTOG 0413 case 24 resubmitted with corrected contours.

Frequently Asked Questions (7)

- Where do I find the forms?
 - The Facility Questionnaire and DDSI form are found on the ATC website <http://atc.wustl.edu>
 - These online forms require a user name and password. (The user name and password is not the same as for your FTP account.)
 - You may call or email the ITC to receive the username and password for forms.

Frequently Asked Questions (8)

- Where do I get a Case Number ?
 - Case numbers are assigned when a patient is registered or randomized with the cooperative study group.
 - Case numbers are sent to data managers as part of registration/randomization confirmations.
 - Check with your research associate/data manager for case numbers.
 - The NSABP B39/RTOG 0413 trial has a 9 digit number assigned for each case:
 - the first 2 numbers will be 79
 - the next 4 are the case number
 - The last 3 numbers are specific to the institution.
- Thus, 790165032 is case 0165.
- For credentialing submissions (“dry-run”, benchmark, phantom) there is no case number – use “dry”, “dryrun”, “benchmark”, or “phantom” to identify data.