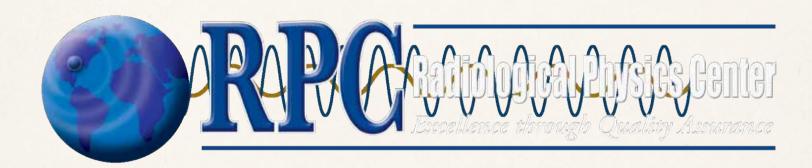
The RPC's QA Activities in Support of Advanced Technology Clinical Trials



April 14, 2009
Geoffrey S. Ibbott, Ph.D.
and RPC Staff

http://rpc.manderson.org

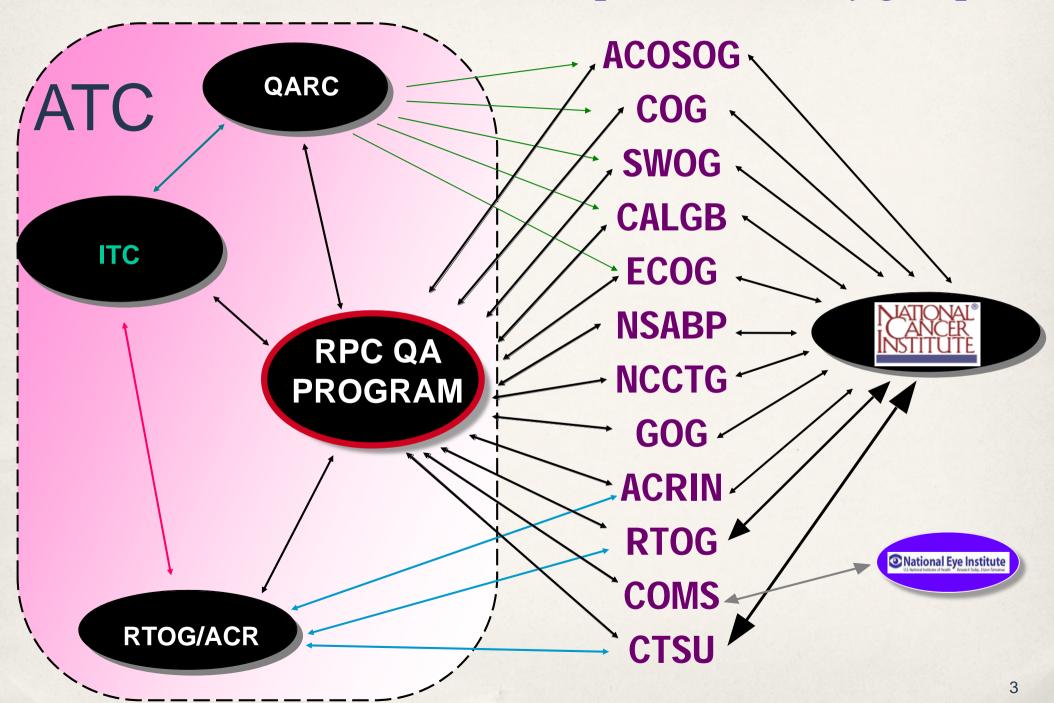


Supported by NCI grants CA10953 and CA81647





RPC has relationships with all study groups



Study Group Participation



Search RPC by Google

GO

Tel: 713-745-8989

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Office Hours:

8 A.M. to 5 P.M. M-F Central time. Holidays

Services

Forms

Publications

Brachy Sources

Research/TG-51

Upcoming Meetings

Joint AAPM/RPC Registry of Brachytherapy Sources Meeting the **AAPM Dosimetric Prerequisites**

Source Registry	Prerequisites	Dosimetry Datasets	Application for Registry
Registry Policy	Disclaimer	3rd Party Checks	TG-43 U1(2004)

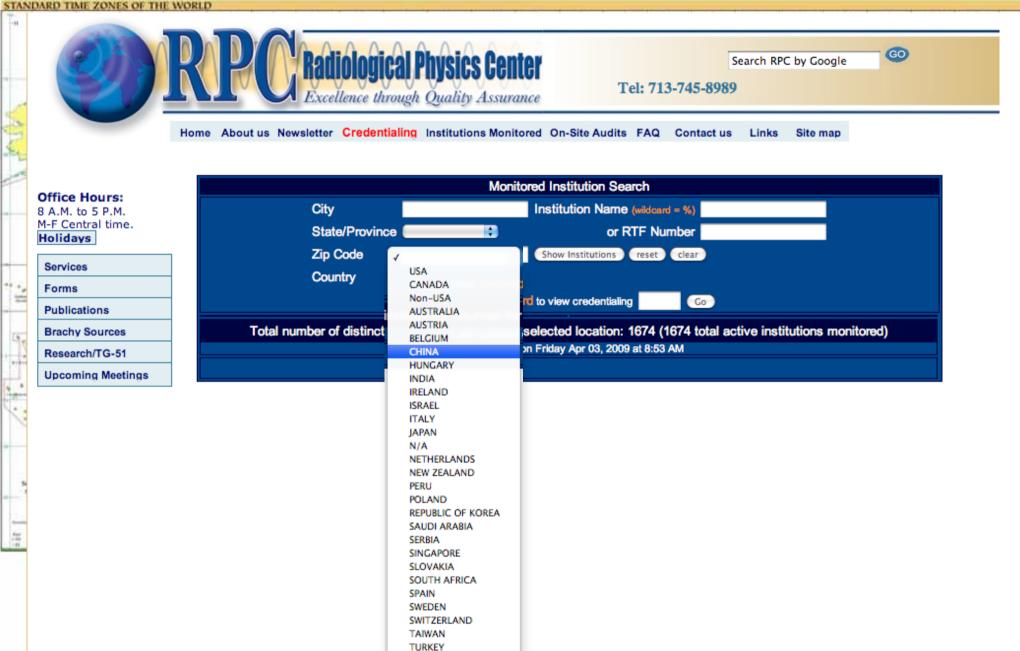
The AAPM, through its Brachytherapy Subcommittee, has determined that the following brachytherapy source models comply with the AAPM's dosimetric prerequisites as set forth in "Dosimetric prerequisites for routine clinical use of new low energy photon interstitial brachytherapy sources: Recommendations of the American Association of Physicists in Medicine Radiation Therapy Committee" Med. Phys. 25, 2269-2270 (1998).



RPC's Monitoring Activities

- Annual checks of machine output
 - 1,672 institutions, 14,188 beams measured with TLD (2008)
- On-site dosimetry reviews
 - ♦50 institutions visited (~150 accelerators measured)
- Credentialing
 - ◆Phantoms, benchmarks, questionnaires, rapid reviews
- Treatment record reviews
 - ◆Review for GOG, NSABP, NCCTG, RTOG (brachy)
- Independent recalculation of patient dose
 - **♦**Continue to find errors





1,674 RT facilities in 27 countries throughout the world, including 52 EORTC members

International Activities (Cont'd.)

- Auditing of EORTC institutions
- Discussions with EORTC
- Presentations at TROG
- Discussions on collaboration with proposed ACDC



Transition to OSL



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On-Site Dosimetry Review Visit

The <u>only</u> completely independent comprehensive radiotherapy quality audit in the USA and Canada

- Identify errors in dosimetry and QA and suggest improvements.
- Collect and verify dosimetry data for chart review.
- Improve quality of patient care.

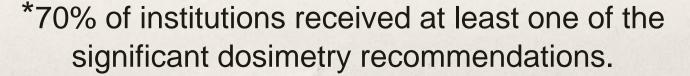




On-Site Dosimetry Review

Selected discrepancies discovered 2004 – 2008

Errors Regarding	Number of Institutions (%)		
Review QA Program	127 (77%)		
*Wedge Transmission	53 (32%)		
*Photon FSD (small fields)	46 (28%)		
Off-Axis, Beam Symmetry	42 (25%)		
*Photon Depth Dose	34 (21%)		
*Electron Calibration	25 (15%)		
*Photon Calibration	22 (13%)		
*Electron Depth Dose	19 (12%)		





RPC's Monitoring Activities

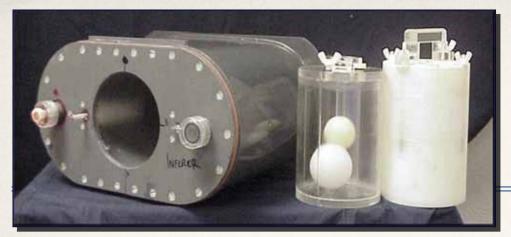
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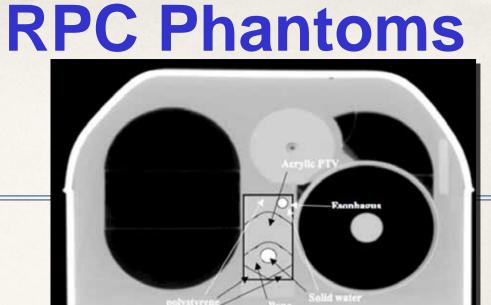
General Credentialing Process

- Previous patients treated with technique
- Facility Questionnaire
- Knowledge Assessment Questionnaire
- Benchmark case or phantom
- Electronic data submission
- RPC QA & dosimetry review
- Clinical review by radiation oncologist





Pelvis (14)



Thorax (15)



H&N (30)

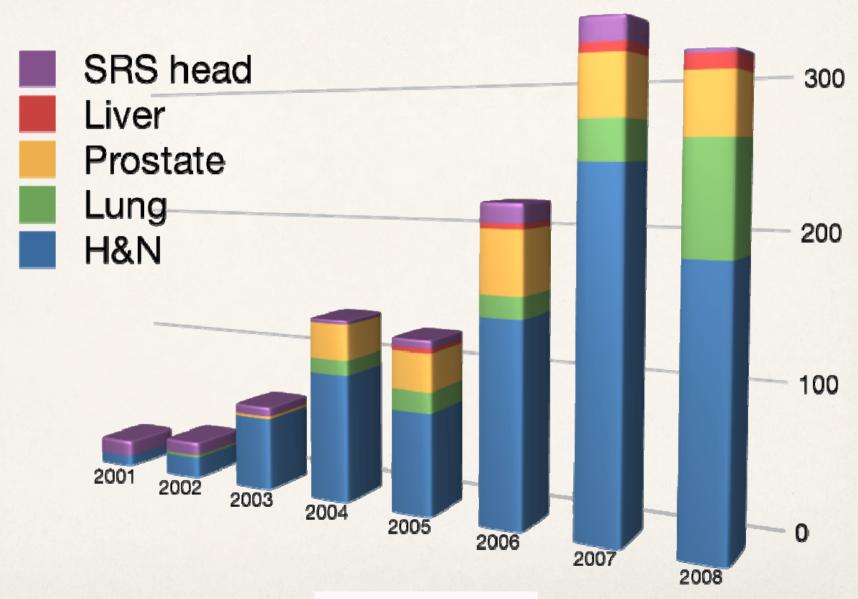


Liver (2)



SRS Head (4)

Number of Phantoms Mailed per Year



Phantom Results

Comparison between institution's plan and delivered dose.

Criteria for agreement: 7% or 4 mm DTA (5%/5mm for lung)

Site	Institutions	Irradia- tions	Pass
H&N	472	631	75%
Pelvis	108	130	82%
Lung	67	77	71%
Liver	15	18	50%



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Purpose of Patient Dose Review

- Maintain low uncertainty in doses delivered to protocol patients by discovering and correcting errors
- Provide study groups with accurate dose data

Improve Clinical Trials



RPC Patient Dose Review

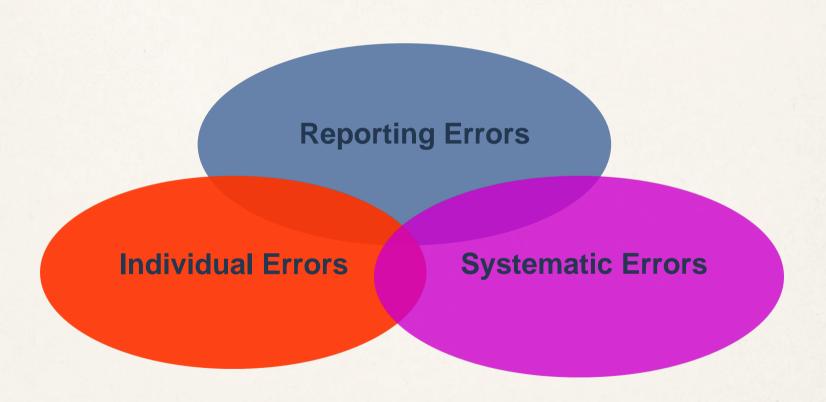
- Independent calculation of tumor dose
- Agree within 5% (15% for implants)
- Verify dose, time, fractionation per protocol
- Notify institution if major deviation seen during review to prevent further deviations



Data Used in Patient Record Review

Visited Institutions	8	Data Needed		Not Yet Visited
Measured	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Machine Output	****	TLD
Measured	4 111	Output Factors	****	Standard
Measured	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Wedge/Tray Factors	****	Standard
Measured	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	Off-axis Factors	****	Standard
Measured	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	Depth Dose	<u>"" ></u>	Standard
Measured	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	End Effect	****	None

Errors Greater than 5% (15% for Brachytherapy) Found in Patient Record Review



Errors > 5% (15% for brachy) Found in Dose Review

- 1% Systematic errors
- 11% Individual errors
- 27% Reporting errors

Without RPC review 39% of the doses used by the study group would be incorrect



Future Projects

- Monte Carlo beam modeling in CERR for IMRT and heterogeneous dose calculations
 - Continue development for 3 major manufacturers
 - Extend development to non-TG-51 compliant machines
 - Increase use for patient record reviews
- Increase the use of rapid reviews via electronic means
- Facilitate electronic data submission, review and access for GOG protocols



Future Projects (cont'd.)

- 4. Contribute to retrospective studies of lung patients using Monte Carlo calculations
- Develop procedures to perform clinical and technical reviews for charged particle dose delivery
- Analyze impact to patient calculation results using single closest TLD vs averaged TLD results

