

End-to-End VMAT-TBI Workflow

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Overview



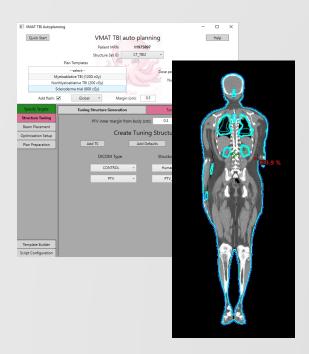
Simulation

2 patients1 phantom



Planning

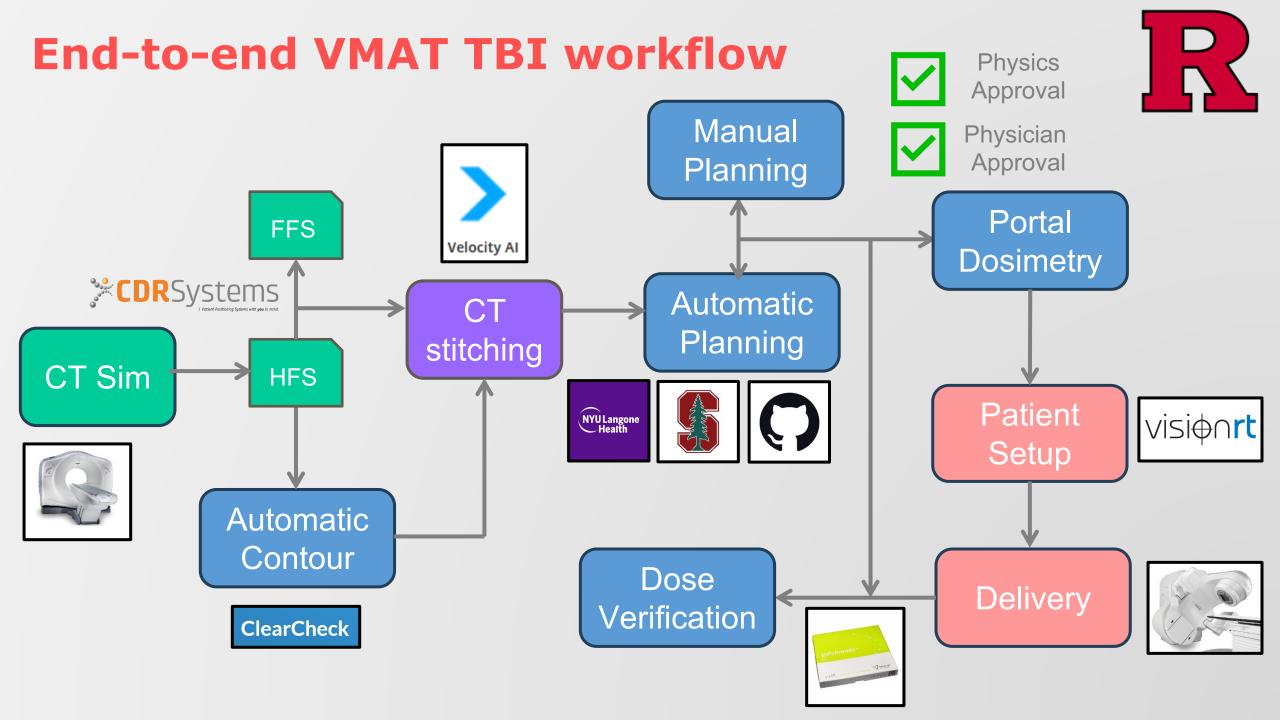
2 patients3 phantom2 algorithms



Delivery

1 phantom





Simulation Technique



Use Vac-Loc Bag + Breast Board



Use a Spinning Couch



Whole-body CT Acquisition



Rando



Patient M



Patient F



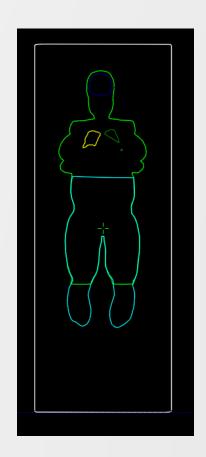
Whole-body CT acquisition workflow

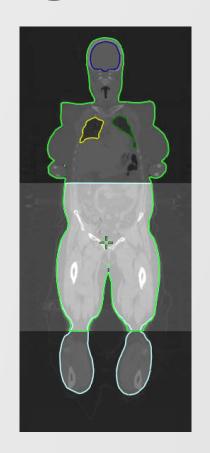


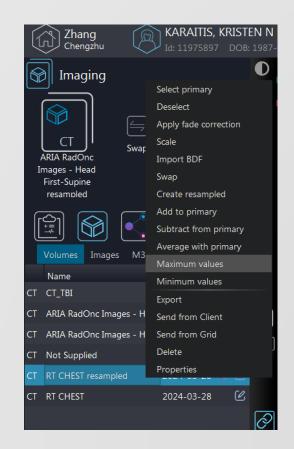
New Series **Chain Registration**

Resample & Merge

Import





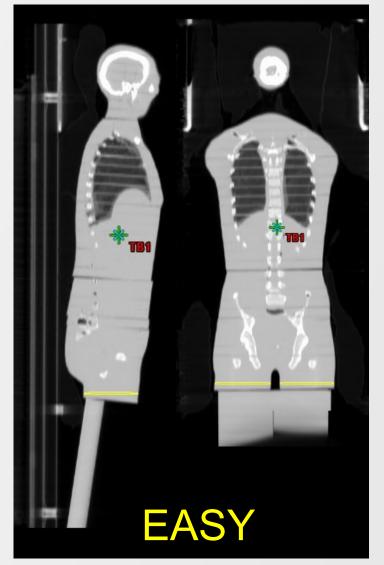




Whole-body CT Result



Rando



Patient M



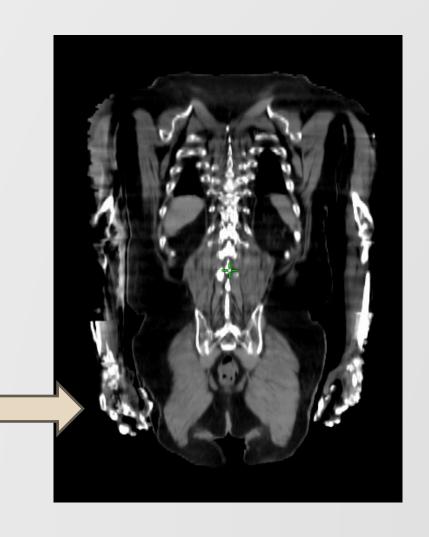
Patient F



Caveat: Maximum Intensity Projection Misregistration under inter-scan patient motion



Patient M



Artifacts

Treatment planning options

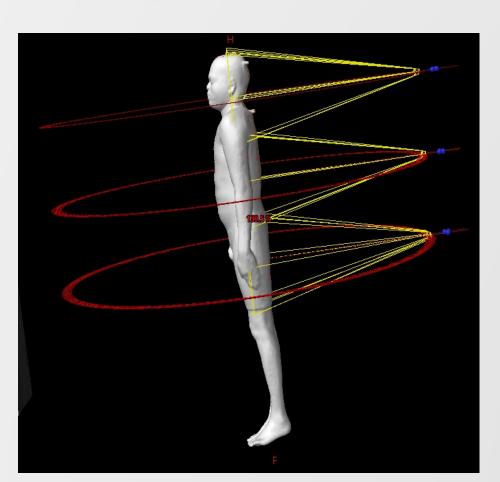


	Stanford Approach	NYU approach	
#Iso-centers	3~4 + 1~2	7~10	
Total Fields	11~12	11~12	
Automation (Customization)	Yes (Yes)	Yes (No)	
Planning Time	Planning Time 5 hours (CPU) Unknown (GPU)		
Treatment Time	Estimated 1~1.5 hrs	Estimated 1~1.5 hrs	

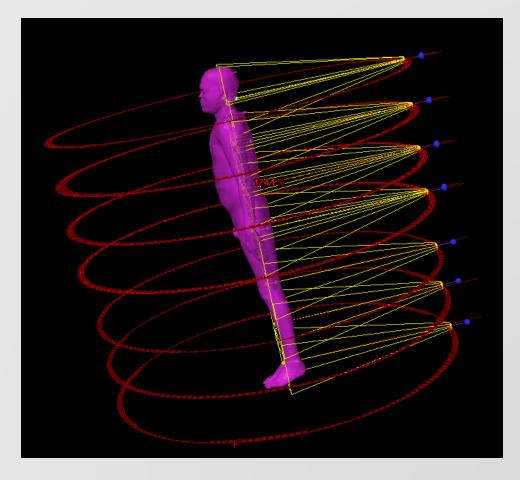
Iso-center placement



Stanford

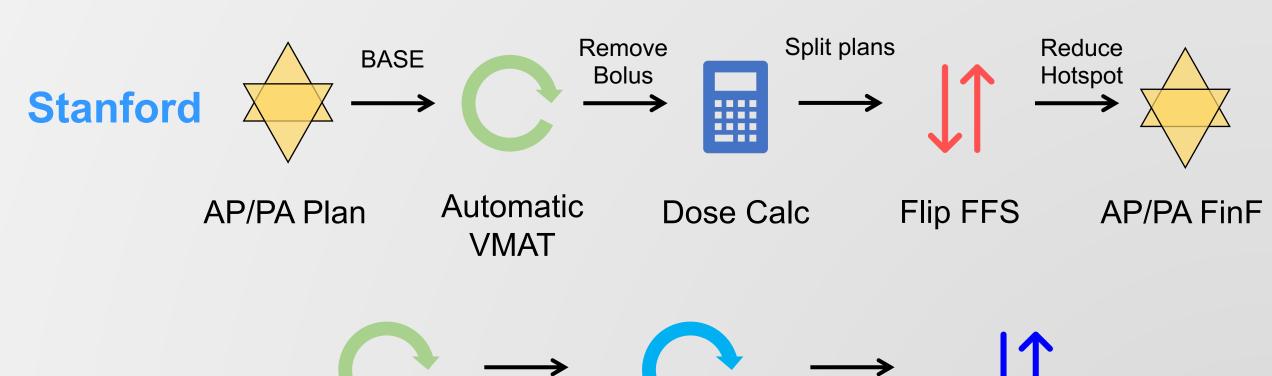


NYU



Planning workflow





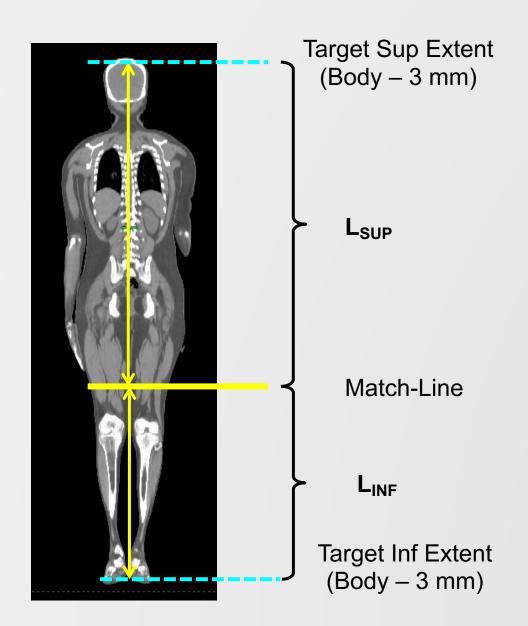
NYU

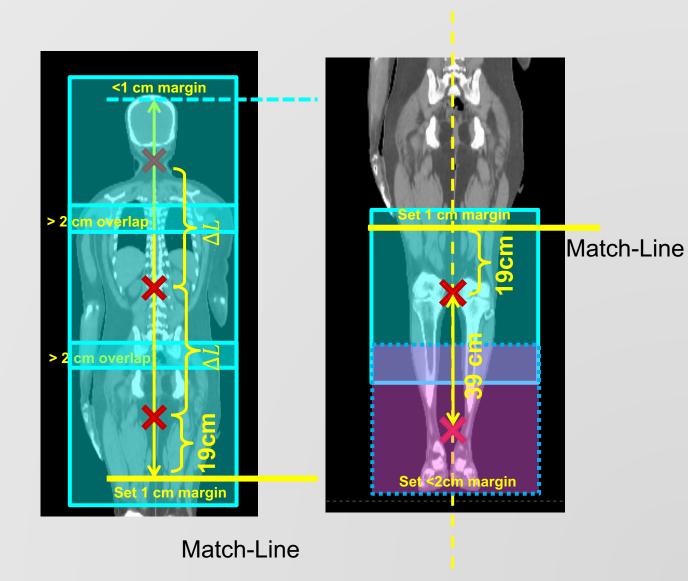
Automatic VMAT

Automatic Reoptimization Automatic Reverse Aperture

A recap: Stanford approach

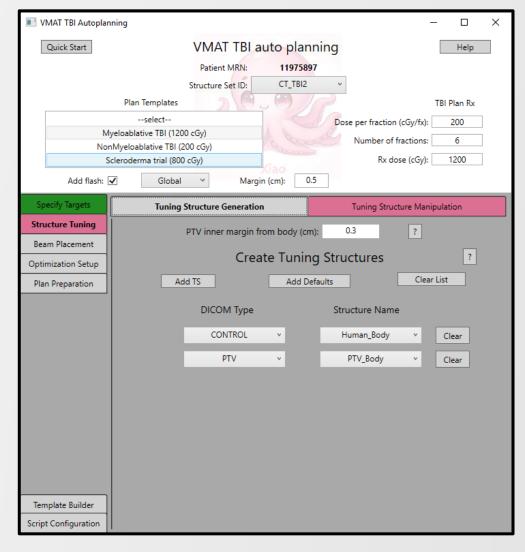






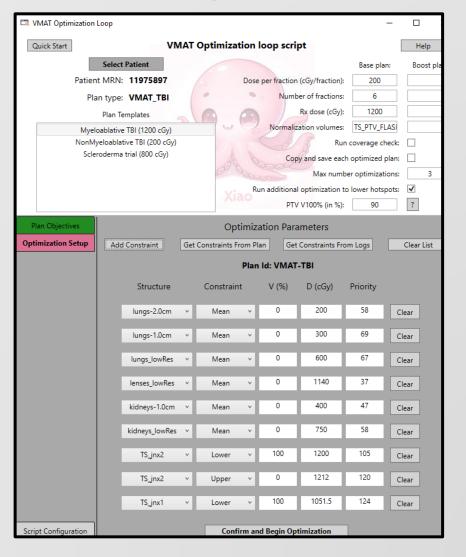
Script: Stanford approach

Planning Structure + Beam Placement





VMAT Optimization

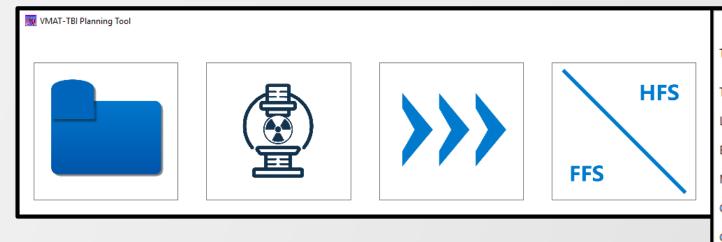


Script: Treatment Planning: NYU approach



Integrated scipt workflow

configuration



Configuration Auto Plan

Cooler & Heater

Reverse FFS

TemplateViewerWindow		
TEMPLATE PARAMETERS	VALUES	
Template ID	NYU VMAT	
Linac ID	NBR_TB2	
Energy ID	6X	
MLC ID	ML1279	
Calculation Algorithm ID	AAA_1610	
Grid Resolution (cm)	0.5	
Total Dose (cGy)	1200	
Number of Fractions	6	
Dose Rate (MU/min)	600	
PTV margin from body (mm)	3	
	OAR / Sparing	Margin (mm)
Lungs Sparing	Yes	3
Kidneys Sparing	Yes	0
Liver Sparing	No	

Phantom study: NYU approach



Rx: 12 Gy, 6 fx, 2 Gy/fx

HOT SOPT 126%

V120 = 0.1% V110 = 15%

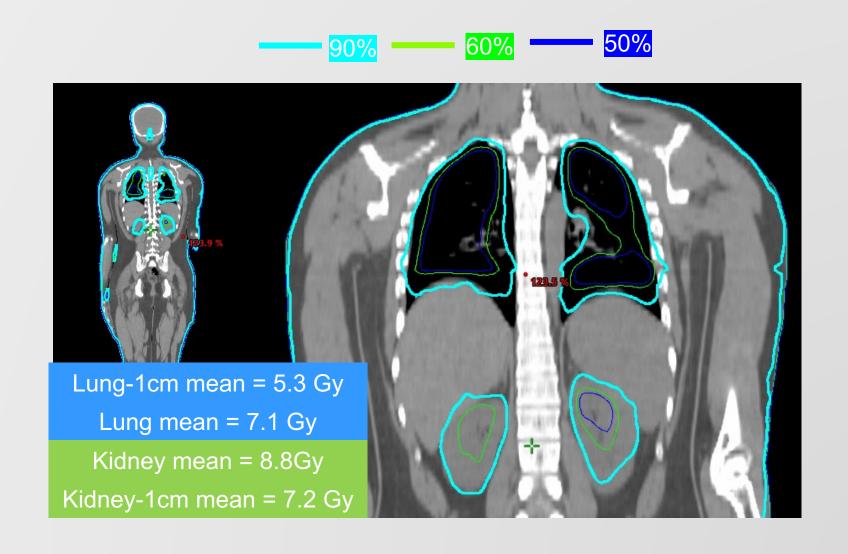
D90 = 99%

D95 = 97%

D90 = 100%

V95 = 97.2%

V100 = 90%



Phantom study: Stanford approach



Rx: 12 Gy, 6 fx, 2 Gy/fx

HOT SOPT 126%

V120 = 0.1% V110 = 15%

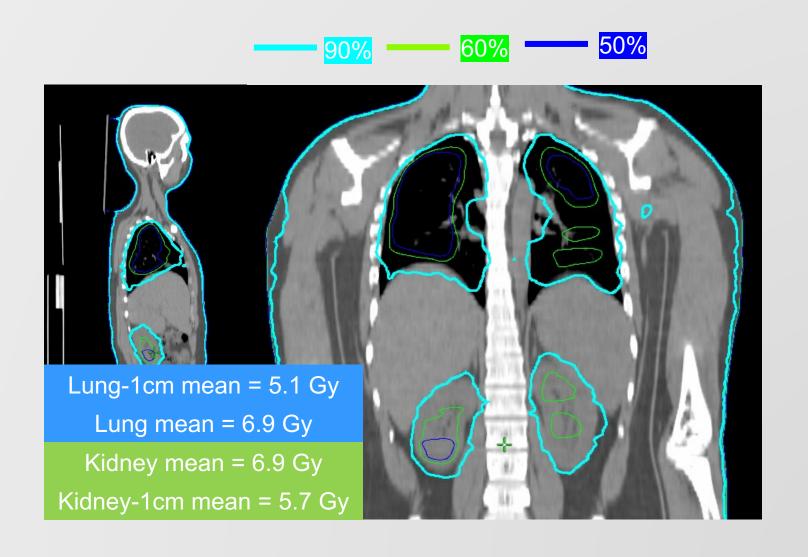
D90 = 99%

D95 = 97%

D90 = 100%

V95 = 97%

V100 = 88%



Real patient case: Stanford approach



Rx: 12 Gy, 6 fx, 2 Gy/fx

HOT SOPT 126%

V120 = 0.1% V110 = 18.0%

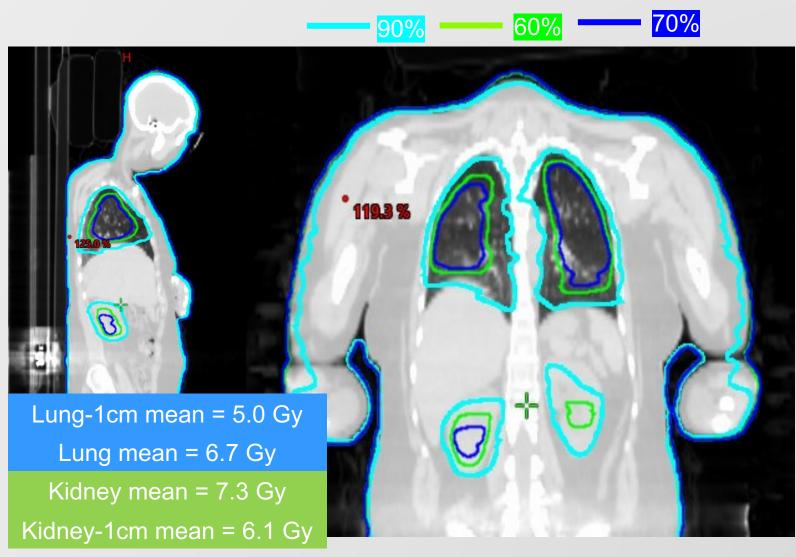
D90 = 98%

D95 = 96%

D90 = 100%

V95 = 98%

V100 = 91%



End-to-end Treatment on Rando



Vac-Loc

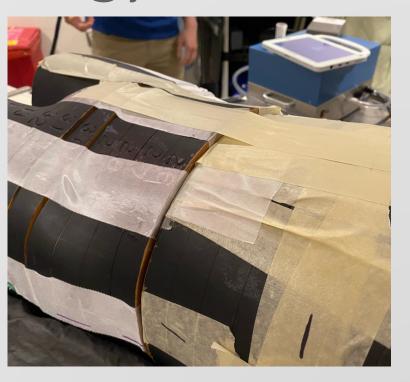


Water Slab as legs

Breast board



Displacement @ junctions



4-iso plan VMAT + APPA



Rx: 12 Gy, 6 fx, 2 Gy/fx

HOT SOPT 130%

V120 = 0.1% V110 = 18.0%

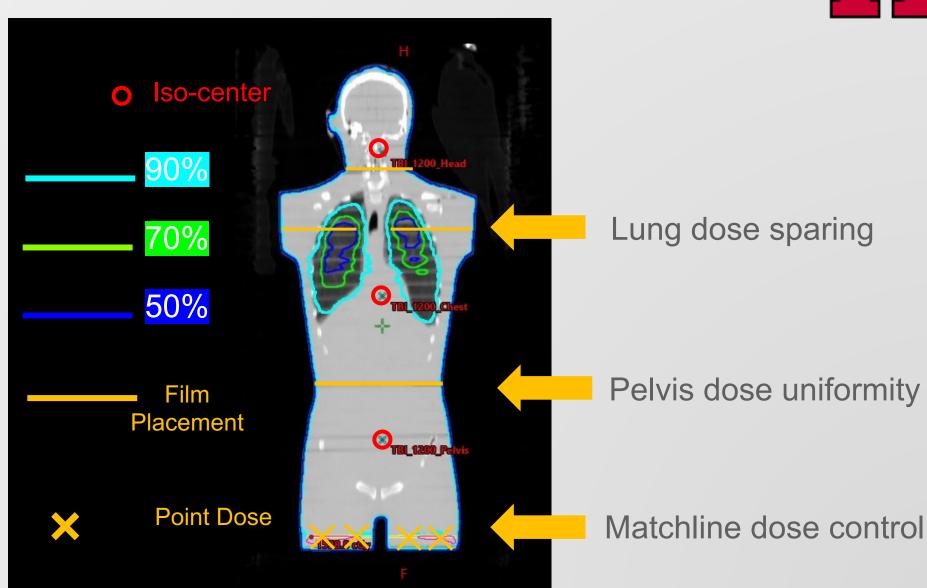
D90 = 98%

D95 = 96%

D90 = 100%

V95 = 98%

V100 = 91%

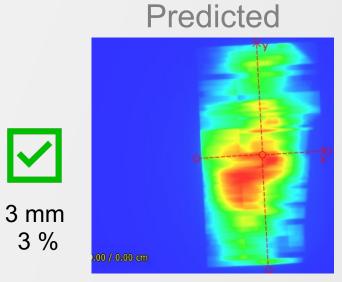


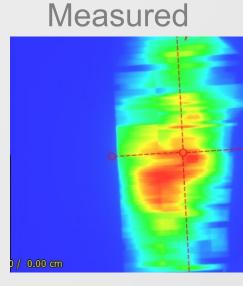
Portal Dosimetry QA



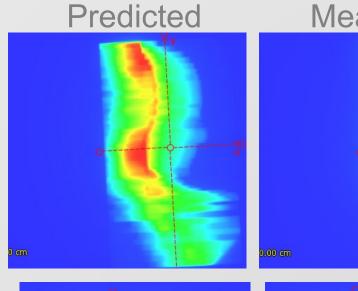


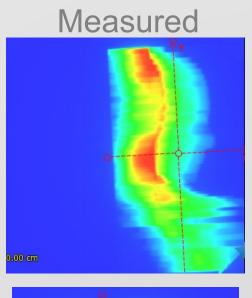
Head

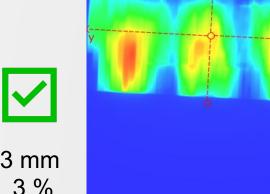


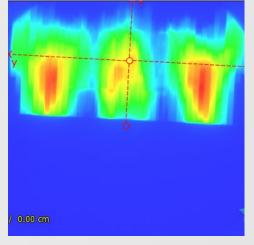






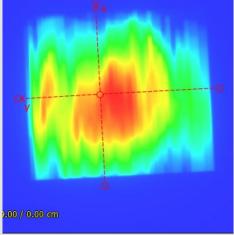


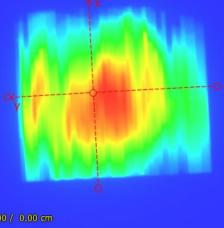






3 mm 3 %





3 %

3 mm 3 %

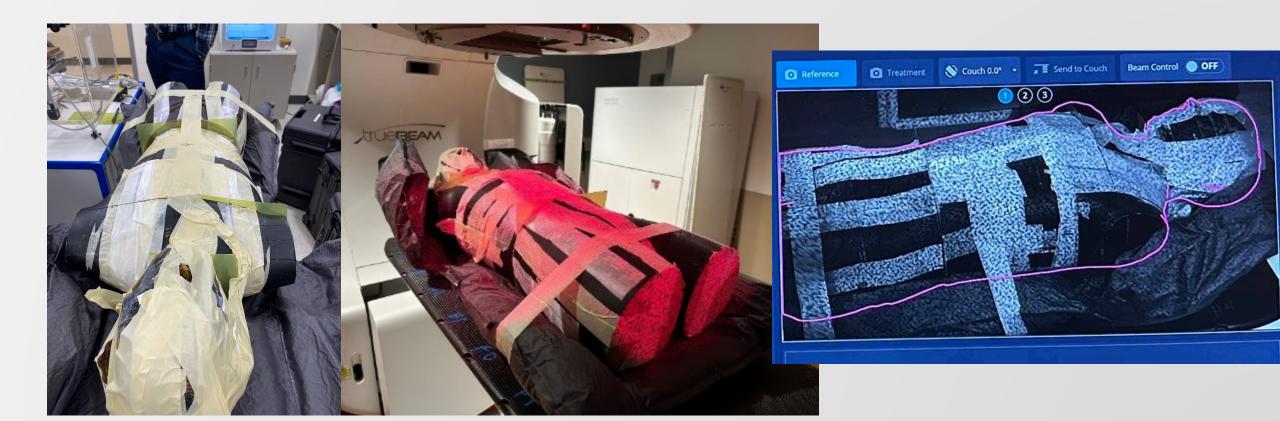
Setup and OSMS contour



Film Setup

Treatment setup

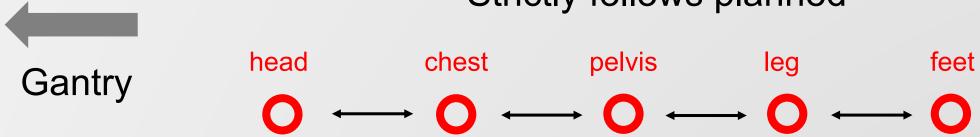
Posture video

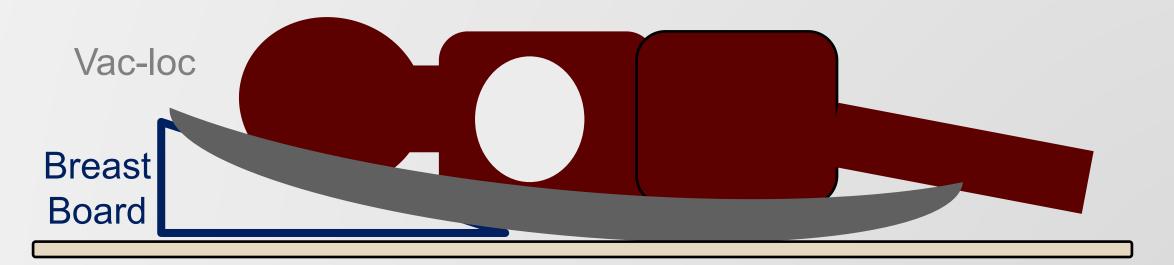


Delivery: VMAT



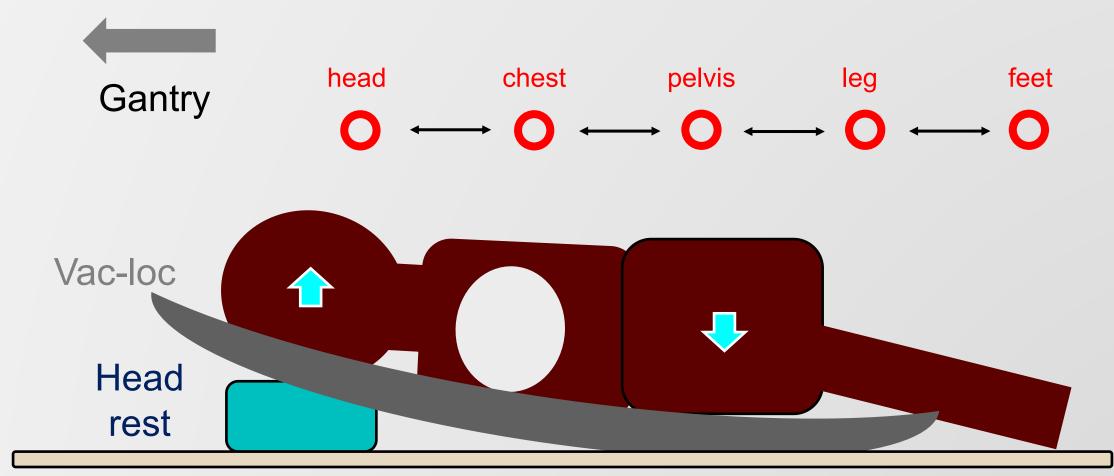
Strictly follows planned





Delivery: VMAT





Delivery: VMAT







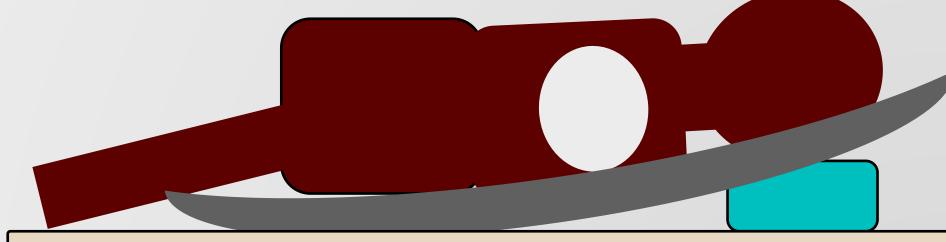








head



kV/OSMS Setup Report



	IGRT before shift (cm)	kVCBCT shift (cm)	IGRT after shift (cm)
Chest	(0.01, -0.02)	(0.03, 0.01)	(-0.02, 0.01)
	0.04	0.03	0.04
Head	(0.10, -0.04)	(-0.24, -0.1)	(0.35, -0.04)
	0.24	0.26*	0.41*
Pelvis	(0.34, 0.26)	(0.27, 0.20)	(0.07, 0,06)
	0.44	0.33	0.12
Leg	(-0.01, 0)	(0, 0)	(0.01, 0)
	0.07	0	0.07

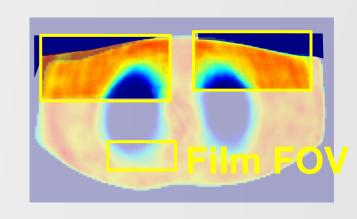
Dosimetric Evaluation

Point dose <5%

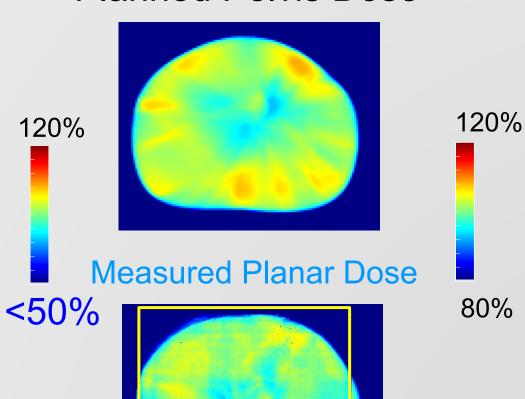


Planned Lung Dose

Measured Planar Dose



Planned Pelvis Dose



Discussion



- Leg Posture Matchline underdose?
- Arms at chest, or at sides?
- Immobilization vac-lock, mask?
- OSMS Tolerance setup uncertainty?
- Spinning couch attenuation how much?
- Boost plans additional constraint







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