

Checklist for Submission of Radiation Oncology Quality Assurance Materials

Patient Initials: _____ Registration #: _____ RT Start Date: _____

Sender's Name: _____ Phone #: _____

Email: _____

Radiation Oncologist: _____ Email: _____

Please enclose a copy of this Checklist together with the RT materials you submit. All materials must be labeled with the protocol and assigned registration number.

Submission of treatment plans in digital format as DICOM RT is **required**. This digital data must include treatment planning CT, structures files, plan files and dose files. Any items on the list below that are not part of the digital plan submission may be included with this transmission.

The use of TRIAD for RT data submission on this study is preferred. In the event that a site has not completed all steps required for TRIAD data submission in time to meet the timeline for pre-treatment review, data submitted via sFTP will also be accepted.

For data sent via sFTP, a notification email should be sent to sFTP@qarc.org with the **protocol # and registration # in the subject line**. Please refer to IROC Rhode Island website for instructions on sending digital data (www.QARC.org).

Non DICOM RT data not sent via Triad or sFTP may be sent by email to datasubmission@qarc.org with the protocol # and registration # in the subject line. Data may also be sent via courier.

The following materials must be submitted one week prior to the start of radiotherapy for the required pre-treatment review.

DATE
SUBMITTED

- _____ Copies of pre-study and pre-op diagnostic CT or PET/CT scans with corresponding imaging reports
- _____ Digital RT Treatment Plan (DICOMRT format) that includes the treatment planning CT, structure, dose and plan files
- _____ Treatment planning system summary report that includes the MU calculations, beam parameters, calculation algorithm, and volume of interest dose statistics
- _____ Dose volume histograms (DVH) for the composite treatment plan for all target volumes and required organs at risk
- _____ Prescription sheet for the entire treatment
- _____ RT-1 Dosimetry Summary Form www.qarc.org/forms/IROC_RT-1DosimetrySummaryForm.pdf
- _____ Motion Management Reporting Form www.qarc.org/forms/IROC_MotionManagementForm.pdf

Final Review materials must be submitted within 21 days of the completion of radiotherapy:

- _____ Copy of the Radiotherapy Daily Treatment Chart, including prescription, daily and cumulative doses
- _____ RT-2 Radiotherapy Total Dose Record www.qarc.org/forms/IROC_RT2RadiotherapyTotalDoseRecord.pdf
- _____ Documentation of any modifications made subsequent to the review of the original treatment plan

Please email: datasubmission@qarc.org or phone: **(401) 753-7600** for clarification as necessary.
Thank you for your ongoing co-operation.