

# AHOD0831 Data Checklist

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**Patient Initials:** \_\_\_\_\_ **COG #:** \_\_\_\_\_ **RT Start Date:** \_\_\_\_\_

## **P1 Cycle Response Review Materials (SUBMIT AS SOON AS P1 CYCLE MATERIALS ARE AVAILABLE.):**

- \_\_\_\_\_ PreStudy CXR with report
- \_\_\_\_\_ PreStudy NCAP CT with report
- \_\_\_\_\_ PreStudy PET scan with report
- \_\_\_\_\_ PreStudy Staging and Response Worksheet
- \_\_\_\_\_ P1 Cycle PET scan with report (if previously positive)
- \_\_\_\_\_ Request for Diagnostic Review Form

## **P2 Cycles Response Review Materials (SUBMIT AS SOON AS AVAILABLE.):**

- \_\_\_\_\_ CTs with reports (involved areas)
- \_\_\_\_\_ PET scan with report (if previously positive)
- \_\_\_\_\_ Staging and Response Worksheet
- \_\_\_\_\_ Request for Diagnostic Review Form

## **Pre-treatment RT Review Materials (SUBMIT AS SOON AS AVAILABLE.):**

- \_\_\_\_\_ Pre-RT NCAP CT with report
- \_\_\_\_\_ Pre-RT PET scan with report (if previously positive)
- \_\_\_\_\_ Any additional diagnostic studies used to determine volumes
- \_\_\_\_\_ DRRs (orthogonals for IMRT)
- \_\_\_\_\_ Isodoses (axial, sagittal, coronal)
- \_\_\_\_\_ DVHs
- \_\_\_\_\_ Treatment planning system summary report that includes the monitor unit calculations, beam parameters, calculation algorithm, and volume of interest dose statistics
- \_\_\_\_\_ Digital treatment plan (RTOG or DICOM RT format)
- \_\_\_\_\_ Independent check of the calculated dose (for IMRT)
- \_\_\_\_\_ Explanation if recommended doses to organs at risk are exceeded
- \_\_\_\_\_ Portals (as soon as available)
- \_\_\_\_\_ RT-1/IMRT Dosimetry Summary Form
- \_\_\_\_\_ Motion Management Form (for Thorax tumors treated w/ IMRT)

## **Final RT Review Materials (SUBMIT WITHIN 1 WEEK OF FINISHING RT):**

- \_\_\_\_\_ RT-2 Form
- \_\_\_\_\_ Daily RT treatment chart with prescription
- \_\_\_\_\_ Any modifications to previous submission

## **1st Relapse Review Materials (SUBMIT AS SOON AS AVAILABLE):**

- \_\_\_\_\_ All imaging studies performed

## **2nd Relapse Review Materials (SUBMIT AS SOON AS AVAILABLE):**

- \_\_\_\_\_ All imaging studies performed

MAIL ALL DATA TO: QARC, 640 George Washington Highway, Suite 201, Lincoln, RI 02865

If you need verification of receipt of this data, please write your name & email address:

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