ALLIANCE A091605

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 labeled with the protocol and assigned registration number	
Submission of treatment plans in digital format as DICOM RT is <u>requ</u> structures files, and plan and dose files. Any items on the list below the included with this transmission.	
This study prefers the use of <u>TRIAD</u> for RT data submission. In tTRIAD data submission in time to meet the timeline for on-treatment For data sent via sFTP, a notification email should be sent to <u>sFTP@subject line</u> . Please refer to IROC Rhode Island website for instruction	review, data submitted via SFTP will also be accepted. eqarc.org with the protocol # and registration # in the
Non DICOM RT data not sent via Triad or sFTP may be sent by ema registration # in the subject line. Data may also be sent via courier/Fa	
The following materials <u>must be submitted within at least</u> interventional review:	one week prior to the start of radiotherapy for
DATE SUBMITTED	
Diagnostic imaging studies with reports (only if used for Copy of digital RT Treatment Plan (DicomRT format) Treatment planning system summary report that include and volume of interest dose statistics DRRs (Not required for IMRT) RT-1 Dosimetry Summary Form www.qarc.org/forms/IR Motion Management Reporting Form (if applicable) www	es the MU calcs, beam parameters, calculation algorithm, ROC_RT-1DosimetrySummaryForm.pdf
Final Review materials must be submitted within 21 days of the	completion of radiation:
Completed RT Daily Treatment Chart, including prescri RT-2 Total Dose Record www.qarc.org/forms/IROC_ Documentation listed above showing modifications from IGRT data – Volumetric IGRT data in DICOM format for registration file (REG file) for each fraction if available file	RT2RadiotherapyTotalDoseRecord.pdf n the original submission (if not previously submitted). r each of the 3 treatment fractions, including DICOM spatial

Version date: 07/16/2018

Please contact study CRA by email (<u>DataSubmission@qarc.org</u>) or phone: (401) 753-7600 for clarification as

necessary. Thank you for your ongoing co-operation.