A Comparison of CT Number to Relative Linear Stopping Power Conversion Curves Used by Proton Therapy Centers



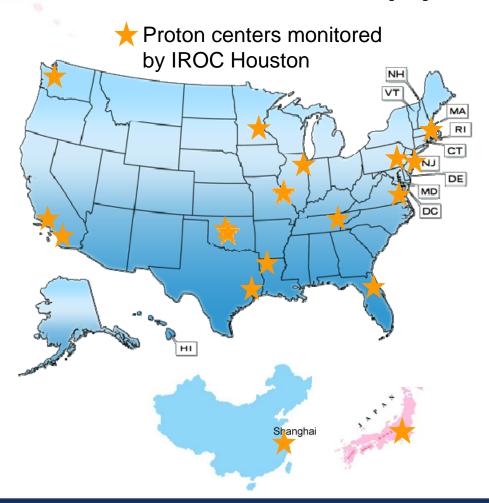


Paige A. Taylor, MS, DABR IROC Houston July 14, 2015



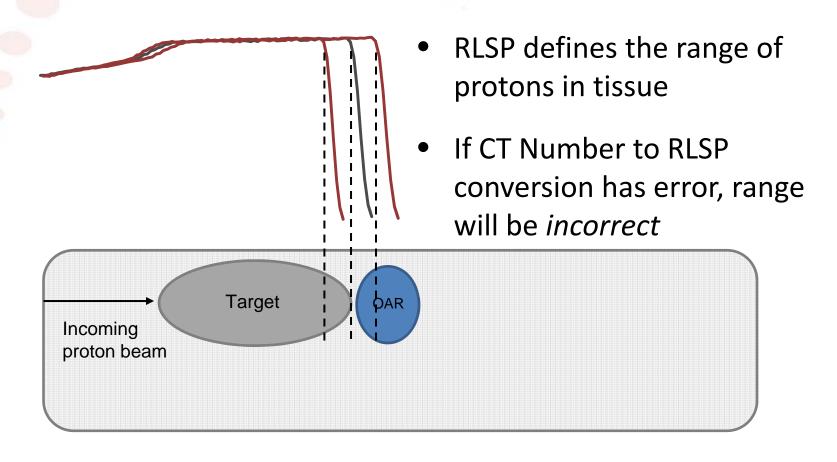
IROC Houston and Proton Therapy

- IROC Houston (RPC) has monitored proton centers since 2006
- Currently monitor 18
 centers (2 abroad) all are
 interested in NCI-funded
 clinical trials
- GOAL: comparable and consistent dose delivery



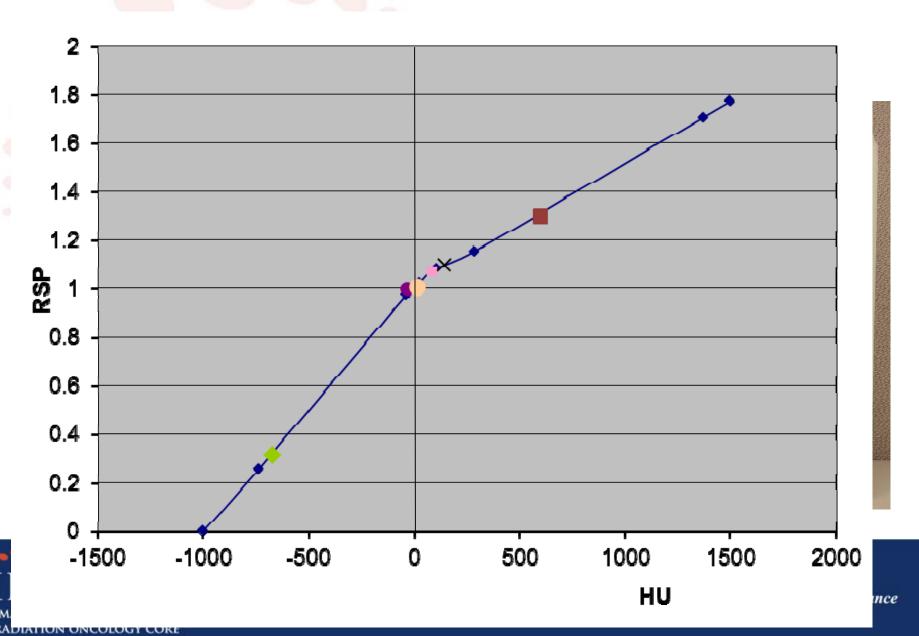


Why do we want consistency?

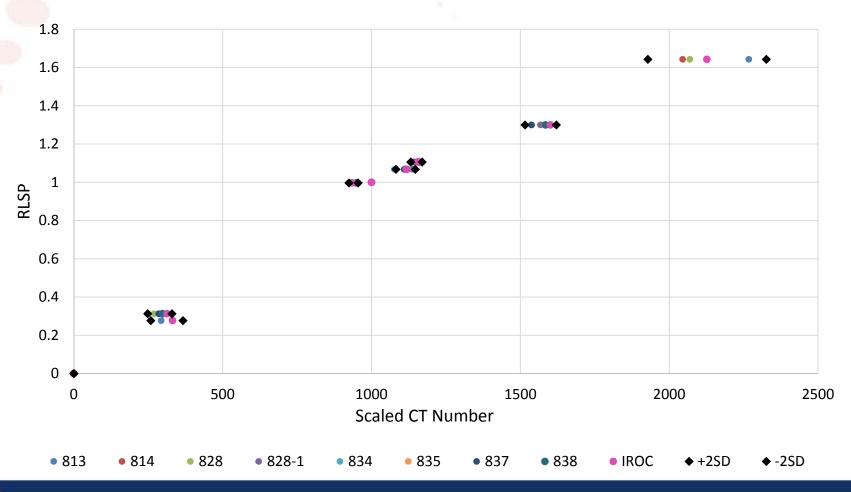


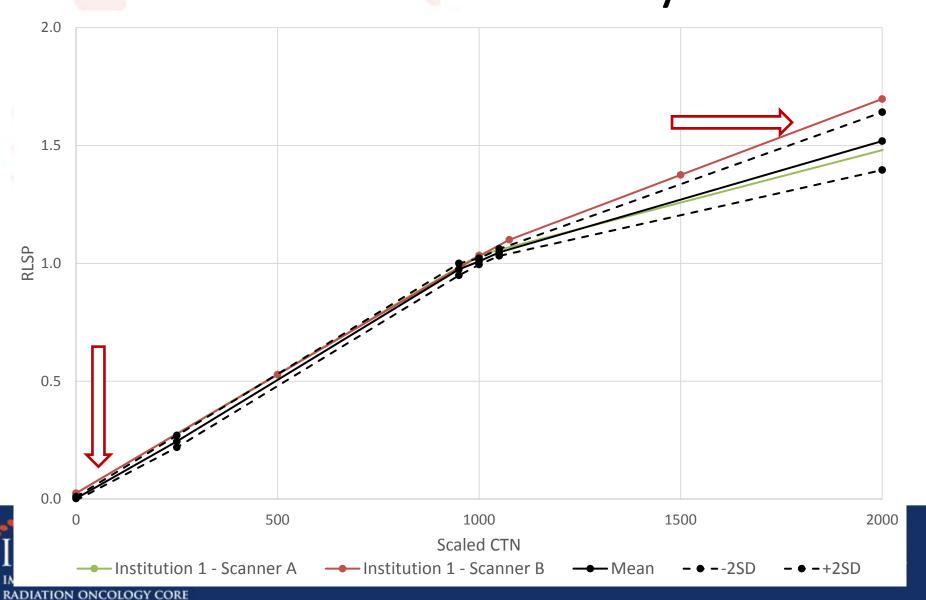


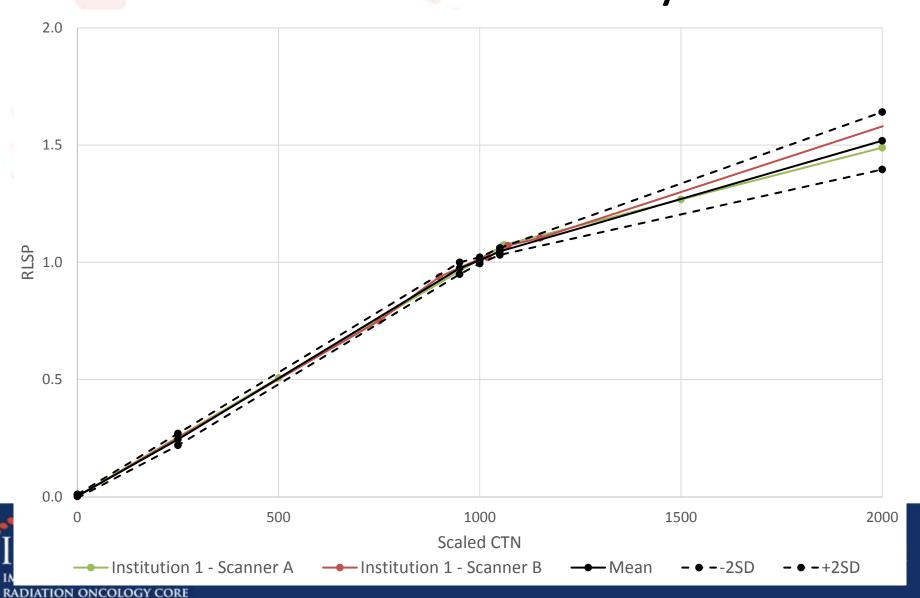
How can IROC Houston catch errors in

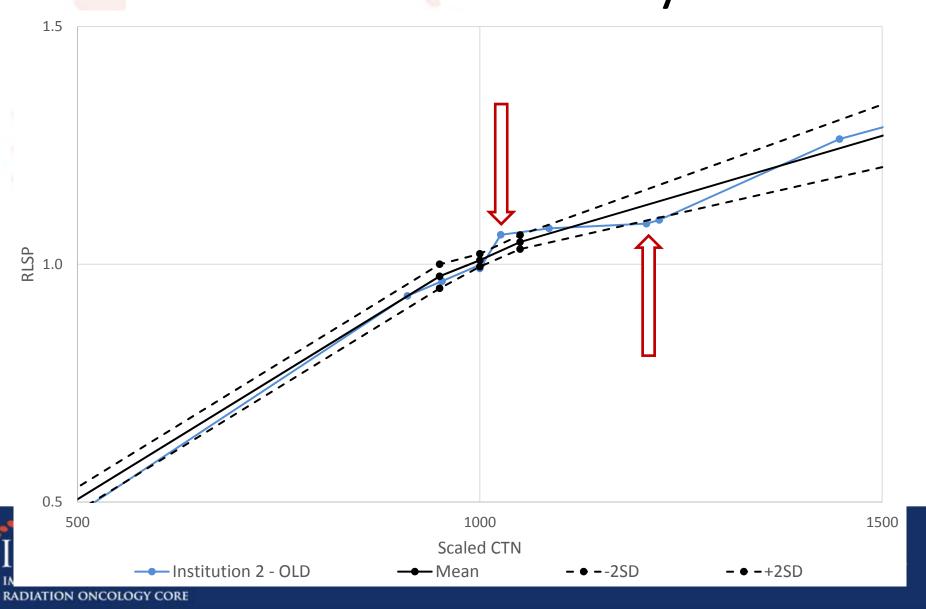


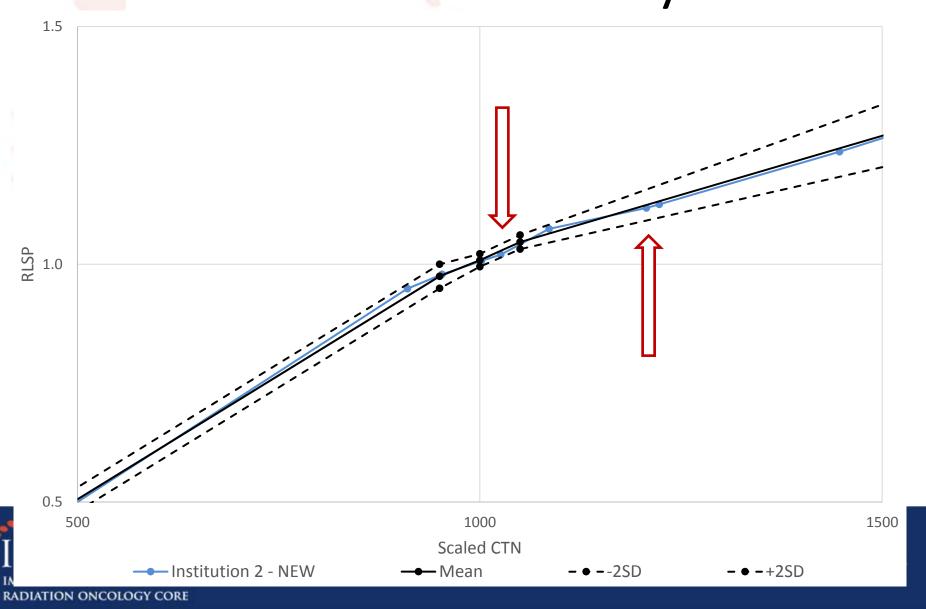
Scaled CTN for IROC Houston Phantom



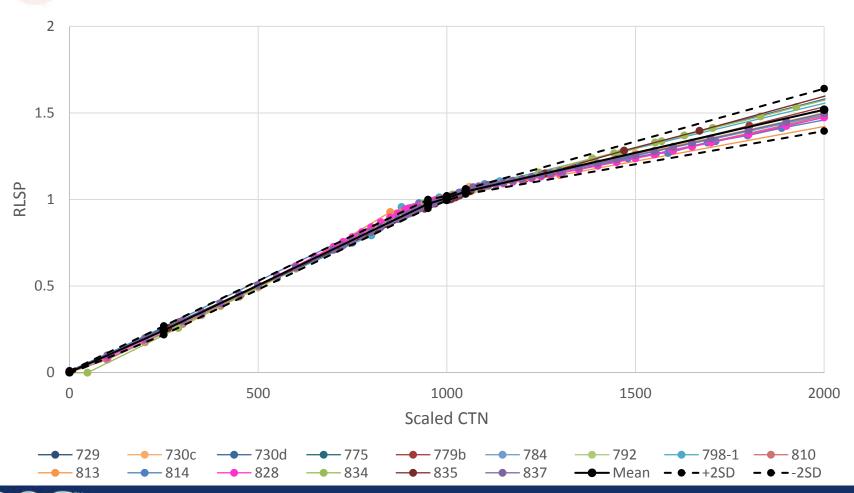




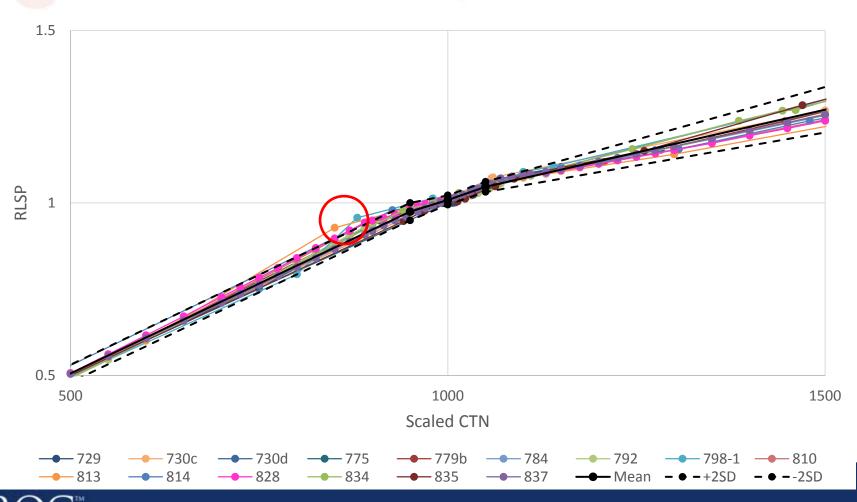




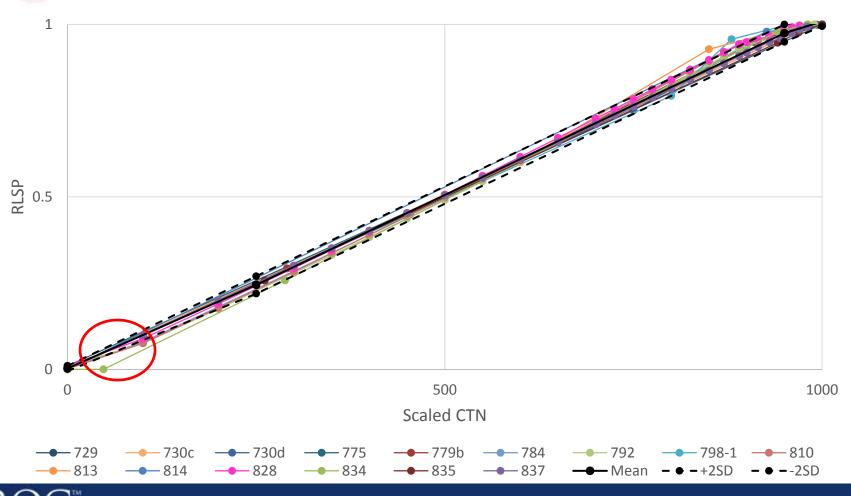
Where is there still room for improvement?



Where is there still room for improvement? Fatty tissue



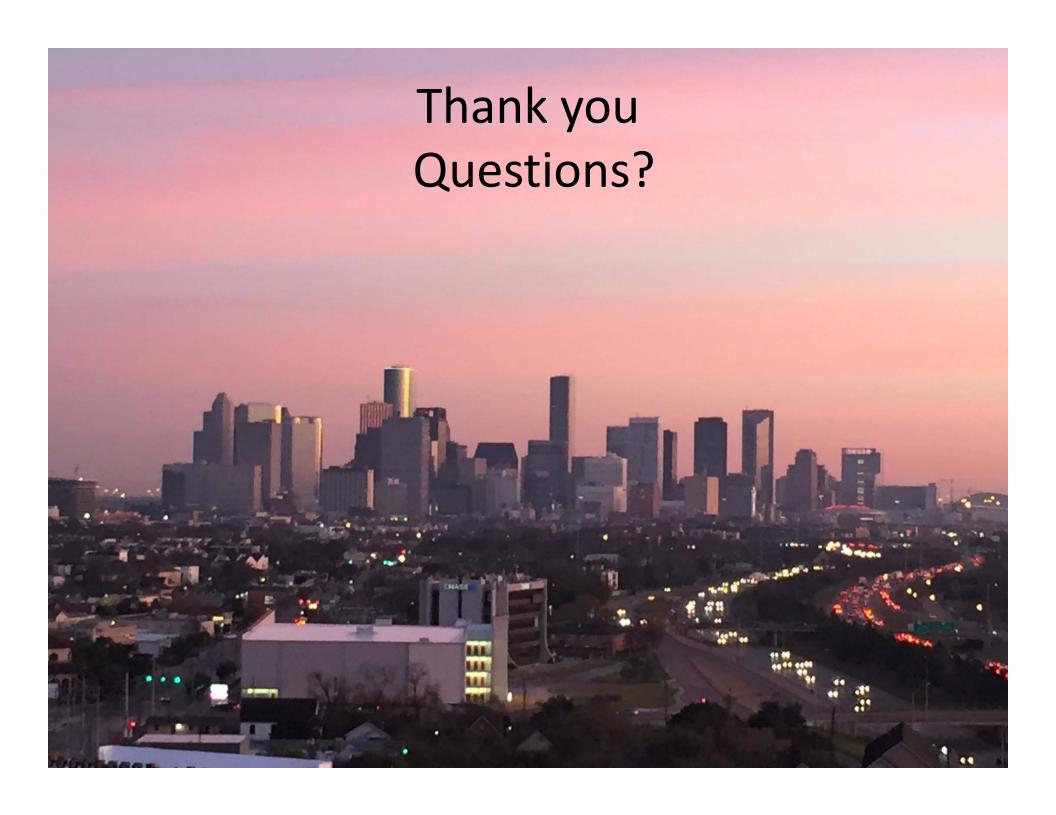
Where is there still room for improvement? Low CT Numbers



CTN-RLSP

- Phantom and on-site dosimetry audits have caught several errors and discrepancies among proton center CTN-RLSP conversion curves
- Several institutions have implemented corrections
- Still a few outliers around fatty tissue and low CTNs





On-site Dosimetry Audits

 20 on-site dosimetry audits for scattered, uniform scanning, and PBS systems

Review:

- Absolute calibration
- Dosimetry for reference and patient fields
- Treatment planning procedures
- Machine & patient-specific QA
- IGRT
- CT vs. RLSP calibration curve

