

IROC Head and Neck Phantom

Guidelines for *Planning and Irradiating* the IROC IMRT Phantom.

Revised June 2021

The study groups are requesting that each institution keep the phantom for a period of time less than 2 weeks. During this two-week period, the institution will image, plan, and treat the phantom and return it to IROC Houston. Thank you for your cooperation.

This phantom has been designed and constructed by the Imaging and Radiation Oncology Core Houston (IROC). The phantom contains TLD at 8 locations and perpendicular sheets of film. Four TLD are located in the primary PTV, and two each in the secondary PTV and in the organ at risk (spinal cord).

If you have any questions, please contact the appropriate person.

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DOSIMETRY INFORMATION TO BE SUBMITTED:

The following information is to be submitted to the IROC HOUSTON (include in the shipping box):

- Original hard-copy isodose distributions in the axial and sagittal planes through the target volume. Please ensure that each plane fills an entire page and that a scale is printed on the page.
 - The axial plane is essentially the central plane and contains the axial film.
 - The film in the sagittal plane is easily seen in the CT scans.
- A completed **IROC Head and Neck Phantom-Institution Information** form.
- A copy of results of all film and ion chamber QA measurements.
- Please upload the IMRT head and neck phantom digital data. The files to export to the IROC are the digital data for your IMRT head and neck phantom irradiation in DICOM format, and include all CT slices, 3D composite dose file, structure file and plan file. Please inform IROC HOUSTON by email, Nhernand@mdanderson.org, when you finished the upload.

Please follow the login URL: <https://mdandersonorg.sharefile.com>

Login information:

Username: IROC-Credentialing@mdanderson.org

Password: 8989Phantom

- Click on **Shared Folders** then on folder named **IROC H&N phantom**, select the **Add Folder** tab on the top right hand side of the screen. In the **folder name** box, enter your institution name, city and state, then click **Create Folder**.
- Select the folder that you have created, then select **Upload Files** tab on the right hand side. In the Details box please type in **phantom type, irradiation date, and physicist name**. Follow the instruction and upload your files. **Select Send email notification box when done**. Lastly Click Upload Files.

The Phantom should be imaged, planned, and irradiated as if it were an actual protocol patient, incorporating all of your customary quality assurance checks.

DOSE PRESCRIPTION:

The doses to be delivered to the phantom are a factor of 10 less than the protocol dose specifications, namely:

- Primary PTV.
 - 6.6 Gy to at least 95% of the PTV and
 - < 1% of the PTV receives < 93% of the prescribed dose.
- Secondary PTV (Node or Salivary gland):
 - 5.4 Gy to at least 95% of the PTV and
 - < 1% of the PTV receives < 93% of the prescribed dose.
- Organ at risk:
 - < 4.5 Gy, maximum dose.
- Normal tissue:
 - ≤ 110% of the prescribed dose (6.6 Gy).

IRRADIATING THE PHANTOM

- Material included in box:
 - Head Phantom, with 1 or 2 TLD capsules taped to each ear.
 - Phantom insert (already place on head phantom)
 - Envelope with background film (hidden from your view; please don't try to find it)
 - Pillbox to accept TLD from phantom ears.
 - Mailing label to return case to IROC at IROC cost.
 - Traditional IROC TLD block and irradiation table. (Please irradiate this at the time you irradiate the phantom.)
- Adjust the head so that the axial film is perpendicular to the table.
- The adjustment screws in the back of the phantom base should make the phantom adaptable to most head holders.

Procedures:

1. This phantom has only one insert. The same insert is used for both imaging and for treatment.
2. Make sure that there is 2TLD capsules taped into each ear. If they have come out, please tape them back in. They will remain in for the imaging process, then be removed so as to determine background for the Therapy TLD in the insert.
3. CT Scan the phantom as you would a patient. You may wish to scan with 1.5 mm slices especially near the center to better identify the TLD capsules. Rotate the adjustment screws to support and position the phantom.
4. **REMOVE THE TLD CAPSULES FROM THE EARS.** Place in a pillbox labeled "ear TLD".
5. Segment the phantom images contouring the skin, primary and secondary planning target volumes (PTVs) and the organ at risk (OAR) analog (posterior to the primary target volume crescent) and all 8 TLD volumes. TLD are in the locations shown in the diagram superior and inferior to the axial film.

Please use the following names for your contours:

PTV_66 for the 1° PTV

PTV_54 for the 2° PTV

CORD for the OAR

66_Sant_TLD and 66_Iant_TLD for the superior and inferior anterior TLDs in the 1° PTV

66_Spost_TLD and 66_Ipost_TLD for the superior and inferior posterior TLDs in the 1° PTV

SCORD_TLD and ICORD_TLD for the superior and inferior TLDs in the OAR

S54_TLD and I54_TLD for the superior and inferior TLDs in the 2° PTV

- The dimensions of the TLD volume are approximately 10 mm long by 2 mm diameter
 - The outside dimensions of the TLD capsules are 15 mm long by 4 mm diameter, the TLD axis lies in a sagittal plane. (Both the capsules and the TLD should be visible on CT image)
6. Plan the treatment as specified in the DOSE PRESCRIPTION above.
 7. Perform your customary QA of the IMRT plan prior to irradiating the phantom.
 8. Irradiate the IROC TLD block according to the instructions provided. Not applicable for Tomotherapy machines.
 9. Treat the phantom with the developed plan as you would an actual patient. .
 10. Make sure that the "ear TLD" pillbox is on the box.
 11. Include the dosimetry data discussed above. Complete the attached forms. Be sure to include the scale used on the images coming from your TPS. Isodose lines should include at least the following: 6.6, 5.4, 5, 4.5, 4, 3.5 Gy.
 12. Return the complete package to the IROC Houston.

IROC Head and Neck Phantom- Institution Information

Institution: _____

Address: _____

Person performing irradiation: _____

Physicist to receive report: _____

Oncologist to receive report: _____

Oncologist email to receive report: _____

Person to call in case of questions: _____

Phone Number: _____ Fax Number: _____

Email address: _____

Treatment Unit used for irradiation:

Manufacturer: _____ Model (Head model if Elekta): _____

In-house specification: _____ Serial number: _____

Photon Energy Nom _____ (MV) FFF beam _____ SRS beam _____

Intensity Modulation Device:

___ Multileaf Collimator: Model: _____

___ Other: _____

IMRT Technique:

___ Segmental (step and shoot) MLC ___ Dynamic MLC ___ Tomotherapy

___ VMAT ___ Rapid Arc Other: _____

Please enclose original copies of your treatment plans. Include the slices where the films are and scaling factors. FTP the digital treatment plan.

Treatment Planning System:

Manufacturer: _____ Model: _____ Algorithm _____

Software: _____ Version Number: _____

Treatment of Phantom:

Date of Irradiation: _____

Indicate the dose delivered to the TLD as determined by your treatment planning computer

TLD	Mean Dose(Gy)	Min Dose(Gy)	Max Dose(Gy)
Ant 1° PTV superior(66 Sant)			
Ant 1° PTV inferior (66 I ant)			
Post 1° PTV superior (66 S post)			
Post 1° PTV inferior (66 I post)			
2° PTV superior (S54)			
2° PTV inferior (I54)			
Organ at risk superior (S cord)			
Organ at risk inferior (I cord)			

Results of IMRT QA (please attach copies of measurement data): _____

Did you adjust the MU based on these results? _____ If so, how much? _____

Did you irradiate the phantom in service or clinical mode? _____

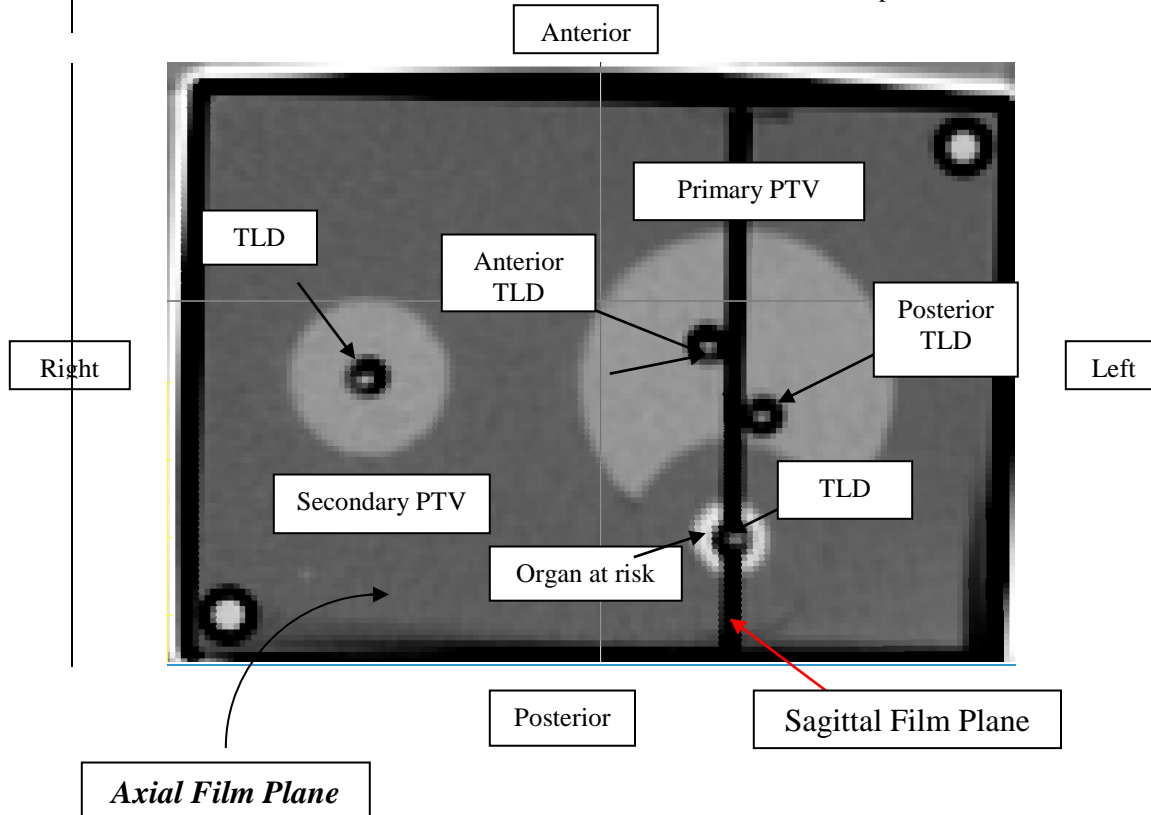
Did you use your record and verify system? _____

Attach copies of the treatment plan including a plan in the axial and sagittal film planes

Comments: _____

For Office Use Only	Batch TLD 16 EBT3 LOT # 03022001	Phantom ID #	Code	Date Sent	Date Rec'd

This is a cross sectional view of the insert. The TLD are located superior and inferior to the axial film.



Notes:

- For H&N # 2 and #4 The Primary PTV is on the right side
- You need to deliver 6.6 Gy to the 1^oPTV (in 1 or more fraction). Total dose to the 1^oPTV 6.6 Gy.
- Please do not write on the phantom, you are welcome to use masking tape to aid on the localization, make sure to remove the tape after irradiation.
- There is 4 TLDs on the ears, 2 on each ear, please don't forget to remove all of them.

Thanks

Phantom team @ IROC HOUSTON