RT#:

Patient Name:

SIM_ABDOMEN	Г	Therapist	٦
Setup O	ral contrast: 15 cc of Omni 350 diluted in 16 oz water (2 servings)	morapier	
	reviewed in PACS (or in MIM if rescan) to determine GTV extent		
0	Zero lasers before setting up patient		
	Anzai transducer placed over inferior sternum		
	No respiratory signal saturation at inspiration or expiration		
If M	R Sim ordered, alpha cradle/vacloc accomodates RF coil bridges		
	Re-zero couch coordinates at scan reference point		
Localizers	Organ shielding removed prior to Topogram		
	LAT Topogram acquired		
Confirm patient center	red vertically in bore (if not, center then re-acquire LAT topogram)		
	AP Topogram acquired		
	FOV+OAR Check acquired		
Confirm OAR fillin	g (if re-setup required, repeat Topograms and FOV+OAR Check)		
	st patient diameter using "FH CT Sim FOV Check" MIM workflow		m
4D-CT Prescription	Scan prescription includes heart through top of crest		
	Superior/Inferior slice coverage extends GTV+10cm		
Prescription does	not extend outside topograms (otherwise, re-acquire topograms)		
	If BMI > 30, set tube potential to 140 kVp		
	Set respiration rate flag (>6, >9, >12)		
	Adjust button clicked for CAREDose		
4D-CT Reconstruction			
	Sync points at Expiration phase		
	Quality of respiration waveform (breathing consistency)		
	Set iMAR preset based on Table 1 (below)		
	If patient diameter exceeds 50cm, set HD FOV size to diameter		
If resc	an CT, append text "RESCAN" to reconstucted series description		
OPT: IV Contrast Scan	Prescription Contrast delay	60	s
	Set contrast volume and injection rate based on Table 2 (below)		
	Acquisition time for breath hold image	< 15	s
	Adjust button clicked for CAREDose		
	Clicking Adjust button did not alter contrast delay		
IV Contrast Reconstru	ction Set and position reduced FOV over target volume		
	Confirm iMAR preset off		٦
Post-Scanning	Do we have what we need? If not, resolve or repeat if necessary		٦
-	Reconstructed 4D-CT images screened for clipping		1
	Scan reference set using "FH CT Sim" MIM workflow		1
	Initials/Date:		٦

## Table 2 : IV contrast parameters for Omnipaque 350

Patient Weight	Volume [ml]	Rate [ml/sec]
Up to 100 lbs	72	1.4
101 - 120 lbs	88	1.7
121 - 140 lbs	104	2.0
141 - 159 lbs	120	2.4
Over 160 lbs	128	3.5

Table 1 : iMAR Presets				
Implant	<b>iMAR Preset</b>			
Anzai bellows	Pacemaker			
Stent	Extremity			
Impaled buck shot	Dental			
Spine Rods	Shoulder			
Spine screws, pins	Spine			
Extremity pin	Extremity			
None	Off			

Version 1.3 Date: 10/4/2018 Patient Name:

**Documentation Checklist** 

RT#:

		Therapist
ertinent Info	Time out	
	Pregnancy test (if patient female under 50 years of age)	
	Treatment consent	
	IV contrast questionnaire	
	Implanted device info (pacemaker / defibrillator / neurostimulator)	
	Clinical trial or research consent	
Mosaiq	Delete duplicate	
	Diagnosis	
	Attending MD (Global)	
	CSN	
	Setup documentation in D&I (Care Plan, Rad Rx, Site Simulation)	
	RTT note of patient time preference	
	Schedule treatments	
	Schedule pre-, mid-, and post-treatment pacemaker interrogations	
	Concurrent chemo flag	
	Code capture (consult charge should be date of consult)	
	Scan and upload documents	
	Upload setup photos	
	Check for MD note	
	Quick Order: 4D sorting	
	Quick Order: Image registration	
	Quick Order: In vivo dosimetry (MOSFET, TLD, OSL)	
	QCL (INITIAL SIM / FT INITIAL SIM / INITIAL SIM 4D)	
	QCL MD: Note	
	QCL MD: Peer Review	
	QCL PHY: SDC - In Vivo Dosimetry	
	QCL: Nursing	
EPIC	Check in appointment	
	Chief complaint	
	Episode of care (radiation treatment/radiation treatment)	
	Schedule verification sim (i.e., verification/linac sim)	
	Upload face photo	
	Charge IV contrast	
	Progress note (all contrast info for any and all contrast used)	
	Document IV removal (if needed)	
	Check out appointment	
Post-Scan Info	Bladder, rectum prep instructions (same for MR sim, if ordered)	
	MRI safety questionnaire	
	Initials/Date:	