Patient Name:

RT#:

SIM_HEADNECK

		Therapist	
Setup Prior im	ages reviewed in PACS (MIM if rescan) to determine GTV extent		
	Zero lasers before setting up patient		
	Re-zero couch coordinates at scan reference point		
Localizers	Organ shielding removed prior to Topogram		
	LAT Topogram acquired		
Confirm patient centered vertically in bore (if not, center then re-acquire LAT topogram)			
	AP Topogram acquired		
	FOV Check acquired		
Determine largest patient diameter using "FH CT Sim FOV Check" MIM workflow			mm
Planning CT Prescriptic	n Scan prescription includes eyes through carina		
	Superior/Inferior slice coverage extends GTV+10cm		
Prescription does	Prescription does not extend outside topograms (otherwise, re-acquire topograms)		
	Adjust button clicked for CAREDose		
Planning CT Reconstru	ction Set iMAR preset based on Table 1 (below)		
	If patient diameter exceeds 50cm, set HD FOV size to diameter		
If resca	an CT, append text "RESCAN" to reconstucted series description		
OPT: IV Contrast Scan	Prescription Contrast delay	40	sec
	Set contrast volume and injection rate based on Table 2 (below)		
	Adjust button clicked for CAREDose		
	Clicking Adjust button did not alter contrast delay		
IV Contrast Reconstruc	tion Set and position reduced FOV over target volume		
	Confirm iMAR preset off		
Post-Scanning	Do we have what we need? If not, resolve or repeat if necessary		
	Reconstructed planning CT images screened for clipping		
	Scan reference set using "FH CT Sim" MIM workflow		
	Initials/Date:		1

Table 1 : iMAR Presets

Implant	iMAR Preset
Dental fillings	Dental
Neurostimulator	Pacemaker
Port	Pacemaker
Pacemaker	Pacemaker
Pacemaker leads	Pacemaker
Unilateral shoulder prosthesis	Shoulder
Bilateral shoulder prosthesis	Hip Implants
Spine Rods	Shoulder
Spine screws, pins	Spine
None	Off

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

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:	