Patient Name: _____ RT#: _____

SIM_PANCREAS_LIVER

		Therapist	
Setup	Oral contrast: 15 cc of Omni 350 diluted in 16 oz water (2 servings)		
	Prior images reviewed in PACS (or in MIM if rescan) to determine GTV extent		
	Zero lasers before setting up patient		
	Anzai transducer placed over inferior sternum		
	No respiratory signal saturation at inspiration or expiration		
	If MR 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 centered vertically in bore (if not, center then re-acquire LAT topogram)		
	AP Topogram acquired		
	FOV+OAR Check acquired		
	Confirm OAR filling (if re-setup required, repeat Topograms and FOV+OAR Check)		
	Determine largest patient diameter using "FH CT Sim FOV Check" MIM workflow		mm
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 Inspiration phase		
	Sync points at Expiration phase		
	Quality of respiratory waveform (breathing consistency)		
	Set iMAR preset based on Table 1 (below)		
	If patient diameter exceeds 50cm, set HD FOV size to *diameter*		
	If rescan CT, append text "RESCAN" to reconstucted series description		
OPT: IV Contrast Scan Prescription	Pre-monitoring slice positioned at diaphragm		
	ROI placed in decending aorta		
	Set contrast volume and injection rate based on Table 2 (below)		
	Acquisition time for breath hold arterial and hepatic phase images	< 15	sec
	Adjust button clicked for CAREDose		
	Clicking Adjust button did not alter contrast delay		
IV Contrast Reconstruction	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 4D-CT images screened for clipping		
	Scan reference set using "FH CT Sim" MIM workflow		
	Initials/Date:		

Table 1 *: iMAR Presets*

Implant	**iMAR Preset**
Anzai bellows	Pacemaker
Stent	Extremity
Impaled buck shot	Dental
Spine Rods	Shoulder
Spine screws, pins	Spine
Extremity pin	Extremity
None	Off

Table 2 *: IV contrast parameters for Omnipaque 350*

Patient Weight	**Volume [ml]**	**Rate [ml/sec]**
Up to 100 lbs	72	2.4
101 - 120 lbs	88	2.9
121 - 140 lbs	104	3.4
141 - 159 lbs	120	4.0
Over 160 lbs	128	4.2

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Documentation Checklist

		Therapist
Pertinent 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:	

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