Patient Name	):	RI#:[_		
SIM_SPINE				
_		Γ	Therapist	7
Setup	Prior images review	wed in PACS (MIM if rescan) to determine GTV extent		
		Re-zero lasers before setting up patient		
		Re-zero couch coordinates at scan reference point		
Localizers		Organ shielding removed for topogram		
		LAT Topogram acquired		
Confirm pati				
		AP Topogram acquired		
		FOV Check acquired		
Deterr	mine largest patient d	iameter using "FH CT Sim FOV Check" MIM workflow		mm
Planning CT	Prescription	Superior/Inferior slice coverage extends GTV+10cm		
Prescrip				
		Adjust button clicked for CAREDose		
Planning CT	Reconstruction	Set iMAR preset based on Table 1 (below)		
	If patient of	diameter exceeds 50cm, set HD FOV size to diameter		
		Copy iMAR and HD FOV settings to recon job 2		
Post-Scanni	ng Do we have	e what we need? If not, resolve or repeat if necessary		
	Re	Reconstructed planning CT images screened for clipping		
		Initials/Date:		

Table 1: iMAR Presets

<u>Implant</u>	iMAR Preset
Spine Rods	Shoulder
Spine screws, pins	Spine
None	Off

Version 1.3 Date: 10/4/2018

Patient Name:	KI#:	
Documentation Che	ecklist	
Davinant Info	Time and	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)	
Massia	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:	