

**IROC Rhode Island QA Center (QARC)
RT-1 Dosimetry Summary Form
EA2182 Only**

*Protocol #: _____ *Registration #: _____
 *Radiotherapy Dept: _____
 Physicist/ Dosimetrist: _____
 Radiation Oncologist Name: _____ Radiation Oncologist Email: _____

CLINICAL DATA

Clinical Stage: _____ TNM Stage: T _____ N _____ M _____ Histology: _____
 Has patient had a biopsy? (Y/N) _____ Date: _____ Has patient had a surgical excision? (Y/N) _____ Date: _____

***Describe the original primary tumor size prior to any resection/excision in mm (please note that this should be determined by the radiation oncologist at the time of treatment planning, when all clinical and radiographic data is available) _____ mm**

TREATMENT INFORMATION

DATE OF FIRST TREATMENT _____
 Randomization: _____ Arm A (standard-dose CRT) _____ Arm B (De-intensified CRT)
 Resources utilized by the treating radiation oncologist to assist in target delineation (please check all that apply):
 _____ Appendix _____ eContour _____ Published Atlases/Consensus Planning Guidelines
 Treatment Technique: _____ TomoTherapy _____ IMRT (SMLC or DMLC) _____ Rotational IMRT (VMAT)
 Planned Daily Imaging with: _____ kv _____ cone beam CT _____ Other _____
 Heterogeneity Calculations: _____ Yes _____ No Bolus Thickness if used: _____ cm
 Vaginal Dilator used: _____ Yes _____ No _____ N/A Male patient
 Patient Position: _____ Prone _____ Supine with Frog Leg _____ Supine with straight leg
 Margins used for CTVp to PTVp: _____ mm Margin used for CTVn to PTVn: _____ mm

NOTE: You Must include Treatment Planning System Summary Reports (which includes monitor unit calculations, beam parameters, calculation algorithm and volume of interest dose statistics pages) with data submission.

Protocol Treatment Site	Daily Dose (cGy)	Total Number of Fractions	Total Dose (cGy)	Prescription Isodose Surface (e.g. 95%)	Number of Beams	Beam energy (e.g. 6X, 6e)
PTVp (Primary)						
PTVn (Nodal)						

This form was completed by:
 *Print Name: _____
 *Date: _____
 *Email: _____
 *Phone: _____

Please save and submit along with the digital RT plan to QARC via sFTP
 Or
Attach to Email to DataSubmission@QARC.org
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