

RTOG Post-Implant Dosimetry Data Form (T5)

Case _____

Patient _____/Physician: _____

Source: _____

Doses are based upon TG 43 Dosimetry

Date of Pre-Implant TRUS Study: _____

Number of slices on pre-implant TRUS _____

TRUS volumes

CTV _____ cm³ PTV _____ cm³

Date of Implant: _____

Basic Dosimetry Information

1. Average activity per seed as measured by institution:

Source Strength: _____U Date:

2. Midpoint apparent activity stated by the vendor:

Source Strength: _____U Date:

3. Number of Seeds Used:

4. Number of Needles Used:

5. Prescribed _____ Gy TG 43/NIST 99 Dosimetry
Dose:

6. Peripheral _____ Gy TG 43/NIST 99 Dosimetry
Dose:

Post Implant CT Analysis

Date of Implant _____

Date of Post-Implant _____

CT: _____

No. of Seeds Counted on Post Implant A/P Radiograph

Prostate

Prostate is defined on _____ slices.

Post-Implant Volume (ETV) as determined from post-implant

CT _____ cm³

V₁₀₀ _____ % $\frac{V_{90}}{\%}$ V₈₀ _____ %

V₁₅₀ _____ % $\frac{D_{90}}{\text{Gy}}$

Urethra: Maximum Dose U₂₀₀
 _____ Gy $\frac{\quad}{\text{cm}^3}$

Rectum: Maximum Dose R₁₀₀
 _____ Gy $\frac{\quad}{\text{cm}^3}$