

RTOG 1112 Credentialing
Benchmark Case Instructions
1/30/2013

CT dataset file: HCC-BM2-CTs.zip
Patient Name: RTOG1112^HCC-Cred2
Patient ID: HCC1112BMK2

An arterial and venous phase CT are provided for a patient with an isolated right sided HCC unsuitable for surgery, RFA or TACE. Contour and plan, as you would if this patient was being treated "per protocol" RTOG1112, using the arterial phase CT (191 slices) as the primary dataset. The venous phase CT may provide complimentary information and should be reviewed. Contour all normal tissues (as per section 6.4.5 from protocol RTOG1112), as well as the target volumes (as per section 6.4.1-6.4.4). The PTV should be typical of what would be used at your institution (e.g. a 5mm PTV for breath hold).

Reminder: The prescription dose should be the isodose covering 95% of the PTV, and it should be the highest allowable prescription dose (27.5, 30, 35, 40, 45 or 50 Gy in 5 fractions, as per section 6.1.5), while maintaining normal tissue constraints (as per section 6.5). The goal is to treat "per protocol" (as per section 6.7.3 and 6.7.4).

Export and submit DICOM files representing the arterial phase CT, your OAR and TV contours, the plan, and the dose.