

# EORTC RTQA Facility Questionnaire

## I. Administrative Data

Name of person submitting this questionnaire  Function

Email address  Phone

Institution

Address

City  Post code

Country

EORTC No  Enter 0 if you don't have it yet

Phone

Hospital/Department website

Reasons for filling the questionnaire

Are satellite radiotherapy units associated with your main institution?

Comment

Status of Department Public  University  Private

Other, please describe

Is your center presently involved in clinical trials

### Responsible contact persons at your site

	Name	Email	Phone
Main contact	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Radiation Oncologists</b>			
GU	<input type="text"/>	<input type="text"/>	<input type="text"/>
GYN	<input type="text"/>	<input type="text"/>	<input type="text"/>
Lung	<input type="text"/>	<input type="text"/>	<input type="text"/>
H&N	<input type="text"/>	<input type="text"/>	<input type="text"/>
Brain	<input type="text"/>	<input type="text"/>	<input type="text"/>
Breast	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Medical Physicists</b>			
GU	<input type="text"/>	<input type="text"/>	<input type="text"/>
GYN	<input type="text"/>	<input type="text"/>	<input type="text"/>
Lung	<input type="text"/>	<input type="text"/>	<input type="text"/>

H&N	<input type="text"/>	<input type="text"/>	<input type="text"/>
Brain	<input type="text"/>	<input type="text"/>	<input type="text"/>
Breast	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Staffing level**  
(fulltime equivalent - FTE)

Number of FTE radiation oncologists	<input type="text"/>
Number of radiation oncologists in training	<input type="text"/>
Number of FTE medical physicists	<input type="text"/>
Number of medical physicists in training	<input type="text"/>
Number of FTE dosimetrists or equivalent	<input type="text"/>
Number of dosimetrists in training	<input type="text"/>
Number of FTE radiation technologists (excluding those above)	<input type="text"/>
Number of radiation technologists in training	<input type="text"/>
Number of radiation technologists per treatment unit present at the time of treatment	<input type="text"/>

Patient workload

Number of new patients\* treated per year

Number of retreated patients\*\* per year

\* Definition of new patient: patient receiving the first radiation treatment (with either radical or palliative intent) for a certain tumor in your department.

\*\* Definition of retreated patient: patient receiving second or more radiation treatment for a certain tumor that was treated before (with RT) in the same department (a boost should not be considered as a retreated patient; treatments at > 1 target volume at the same time with a separate set-up can be counted as > 1).

## II. Data Acquisition for Treatment Planning

**(a) Computed Tomography**

Scanner access

Manufacturer

Model

**Relevant QA / Comment**

**(b) Magnetic Resonance Imaging**

Scanner access

Manufacturer

Model

**Relevant QA / Comment**

**(c) Positron Emission Tomography**

Scanner access  PET  PET/CT

Manufacturer

Model

On site cyclotron

**Relevant QA / Comment**

**(d) Simulation Units**

	Most advanced unit	Additional unit	Additional unit	Additional unit
Type of unit	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Manufacturer	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Model	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year of installation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Virtual simulation	<input type="text"/>			

**Relevant QA / Comment**

**III. 3D Treatment Planning and R&V System**

**a) External beam**

Number of treatment planning systems

	Most advanced TPS	Additional TPS	Additional TPS	Most advanced Record and Verify
Manufacturer	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Model and software version	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year of last update	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of working stations	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Stereotactic RadioSurgery (SRS)	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Stereotactic Body Radiotherapy (SBRT)	<input type="text"/>	<input type="text"/>	<input type="text"/>	

### Algorithms available

Type A:  
primarily based on electronic path

Type B:  
models that in an approximate way consider changes in lateral electron transport (e.g. CC, AAA)

Monte Carlo

Other

What proportion of your radical patients gets a CT-based treatment plan  %

DVH calculation Cumulative  Differential

Ability to sum dose plans

Export of DRR to verification system

**Relevant QA / Comment**

### b) Brachytherapy

Number of brachytherapy planning systems

	Most recent Brachytherapy TPS	Additional TPS
Manufacturer	<input type="text"/>	<input type="text"/>
Model	<input type="text"/>	<input type="text"/>
Software Version	<input type="text"/>	<input type="text"/>
Year of installation	<input type="text"/>	<input type="text"/>

**Relevant QA / Comment**

### IV. Patient Immobilisation and Verification

- 1) Manufacturer/Model for Breast
  - 2) for Prostate
  - 3) for H&N
  - 4) for Lung (thorax)
- If developed "in house", please, describe

Stereotactic frame used

Perform frameless SRS

### Verification

#### Patient Set-up

Laser

Reflectors / IR camera

Orthogonal kV imager

#### Verification by

EPID detector

CT  Cone beam CT

MRI

kV imager

Film

Ultrasound

Respiratory gating

Tumor tracking

Robotic couch

Other

Frequency of field position verification

Comment

### V. Treatment Delivery

#### Number of external treatment units

LinAc  Tomotherapy  VERO  Cyber Knife  Gamma Knife  Co-60

	Most Advanced Unit	Additional Unit*	Additional Unit*	Additional Unit*
Unit Type	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Manufacturer	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Model	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year of Installation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Number of similar units	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Photon Energy lowest/highest (MV)	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>
Electron				

Energy lowest/highest (MeV)	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>
Stereotactic RT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fractionated stereotactic RT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Stereotactic Radiosurgery (SRS)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
IMRT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
VMAT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MLC	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MLC resolution at isocenter (mm)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
IGRT	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Average number of patients/day	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

\*from newer to older

**Relevant QA / Comment**

**Brachytherapy Treatment Units**

	Most advanced	Additional	Additional
Manufacturer	<input type="text"/>	<input type="text"/>	<input type="text"/>
Model	<input type="text"/>	<input type="text"/>	<input type="text"/>
Year of Installation	<input type="text"/>	<input type="text"/>	<input type="text"/>
Average number of patients/month	<input type="text"/>	<input type="text"/>	<input type="text"/>

**After-loading System**

HDR  PDR  LDR

Permanent Seed implant

**Relevant QA / Comment**

**VI. Quality Assurance**

**Periodicity of QA**

	Photon output (cGy/MU)	Equipment used
Daily	<input type="text"/>	<input type="text"/>
Weekly	<input type="text"/>	<input type="text"/>
Monthly		

Yearly

Photon energy (MV) Equipment used  
Daily    
Weekly    
Monthly    
Yearly

Photon homogeneity (flatness and symmetry) Equipment used  
Daily    
Weekly    
Monthly    
Yearly

Electron Output  times per  month   
Electron Energy  times per  month   
Electron Homogeneity (flatness and symmetry)  times per  month   
Mechanical alignment  times per  month   
(e.g.: imaging and isocenter co-incidence, mlc position, ...)  
Treatment equipment checks  times per  month

**Calibration Point**

Low energy photons  Gy in  cm depth at  cm SSD  
High energy photons  Gy in  cm depth at  cm SSD

Type of ion chamber used for beam calibration   
Type of electrometer used for beam calibration   
Are chambers/electrometers calibrated in a reference laboratory   
Water phantom   
Use of films   
Independent MU calculation check (double MU calculation)   
How do you measure actual dose distribution?   
Periodicity of measuring actual dose distribution

**Relevant QA / Comment**

Frequency of treatment review    
Compensation for treatment interruption on  Other   
Has your site participated in external IMRT credentialing

Does your TPS transfer plans to your phantom for QA?

**Relevant QA / Comment**

**Beam Output Audit (BOA)**

BOA is mandatory and has to be submitted along with the Facility Questionnaire.

Year of last audit	Highest photon energy	Lowest photon energy	Electrons
National	<input type="text"/>	<input type="text"/>	<input type="text"/>
International	<input type="text"/>	<input type="text"/>	<input type="text"/>
Private company	<input type="text"/>	<input type="text"/>	<input type="text"/>
Others	<input type="text"/>	<input type="text"/>	<input type="text"/>