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| Patient Name | <Full Name> |
| CR Number | <Patient Id 1> |
| Date of Birth | <Date of Birth> |

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| Radiation Oncologist : <Primary Care Physician> | **CT Scan Exam. Number :** |
| Dosimetrist : | Scan Couch Height : |
| Physicist : | Lap Laser Coordinates : **Sagittal (X)** =       mm |
| Number of CT Slices : | **Coronal (Z)** =      mm |

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| **Contrast:**  **LOT Number:** **Expiry Date:** |

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| **Treatment Site(s)** : 1. 2. |
| **Patient Orientation** : |
| Posirest-2 Indexed at with   * Upper Arm Support with RT = & LT **=** * Lower Arm Support = * Black Mattress (120cm) Abutting the Posirest-2 lung board   Distance (Digital readout) between AP Tattoo and INF edge of the Posirest-2 board =  cm    Chin To SSN = “” cm |
| **Safety straps are needed:** |
| Tattoos Reference : AP Is      cm &      cm of |
| AP Straightening Is      cm of AP |
| Setup At the Level of |
| Others: (**Please type in the area below**) |

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| TTH =      cm with ruler | |
| Initial of therapist who performed tattoo procedure: **M.R.T. (T) Date:** **<Date of Service>** | |
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| **Photograph** | **Template** |
| Additional CT Sim Notes (i.e. Radiation Oncologist/ Physicist/ Dosimetrist present; Non-standard Setup): | |

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| --- | --- |
| Patient Name | <Full Name> |
| CR Number | <Patient Id 1> |
| Date of Birth | <Date of Birth> |

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| ***RPM Information (Retrospective Phase Technique)*** | | |
| **Duration (Sec)** | | |
| Expiration |  | |
| Inspiration |  | |
| Breathing Period |  | |
|  | | |
| **Cine Time Settings for 4DCT scan** | | |
| Cine Duration = Breathing Period + 1.5 second |  | |
| Cine Duration Between Images = Breathing Period / 12 |  | |
|  | | |
| **RPM File Name (CR#\_Exam#\_Series#.vxp) for 2.5mm** |  | |
| ***CT Scans Information*** | | |
| **Type of CT Scans** | **Number of Slices** | **Series Number** |
| 4DCT Scan (Whole Lung with 2.5mm) |  |  |
| Free Breathing Scan |  |  |

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| Additional Notes for 4DCT Scan: |

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