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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 : Head First - Supine** |
| **For C1 to T4** |
| **MED-TEC S-Frame Base board Only**   1. Indexed on treatment couch at **F1** 2. Thermoplastic Mask 3. Neckrest 4. Black Mattress (120cm) Abutting the Grid 5. With SUP Edge Indexed at **C** at |
| **For T5 to T12** |
| **One Platform**   1. Head End Indexed at **H3** 2. Foot End Indexed at **F5** 3. Lateral Position at   **Monarch Overhead Arm Positioner + T-shaped Vac Lok**   1. Indexed on ONE Platform at **H5.5** 2. One Piece Handleat and Hand Position at 3. Vac Lok Indexed on ONE Platform at & 4. With SUP Edge Indexed at **C** at |
| **For L1 to L5** |
| **One Platform**   1. Head End Indexed at **H3** 2. Foot End Indexed at **F5** 3. Lateral Position at   **T-shaped Vac Lok**   1. Indexed on ONE Platform at & 2. With SUP Edge Indexed at **C** at |
| **References** |
| 1. Chin To SSN = cm 2. Transverse laser @ AP Tattoo Indexed at |
| **Safety straps are needed:** |
| Tattoos Reference : AP Tattoo Is  cm &  cm of |
| AP Straightening Tattoo Is  cm of AP Tattoo |
| LAT Setup Tattoo At the Level of |
| TTH =  cm with ruler |
| Initial of therapist who performed tattoo procedure: **M.R.T. (T) Date:** **<Date of Service>** |
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| Additional CT Sim Notes (i.e. Radiation Oncologist/ Physicist/ Dosmetrist present; Non-standard Setup): |

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