

# Scoring Metrics: 1 (low) to 5 (high)

- Applicability/Reach: How broad is the reach of this use case to routine clinical use?
- Safety: What is the value or impact of the use case in terms of improved or enhanced patient safety?
- Technical Ease of Implementation: How easy is the use case to implement?
- Industry Alignment: How well does the use case align with strategic initiatives in the industry? (e.g. ASTRO initiatives and guidelines)

# Support for Decubitus Patient Positioning in RT Workflow

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# Overview of the Use Case

Previous RT data exchange profiles did not include support for decubitus positioning. This use case proposes to add that support.

# The Problem

It is essential that the electronic information used for treatment planning and delivery accurately reflect the actual situation used for imaging and treatment delivery. Workarounds are used when planning systems don't support a decubitus patient position leading to scans to an incorrect label, e.g. head first supine, supported by the planning or delivery system. This improper label is propagated through the entire planning and delivery process unless manually corrected in a system that does support decubitus and allows for it to be corrected.

# The Solution

- Add support for decubitus positioning into the TDW, BRTO and ARTI profiles.

# The Benefit

- Avoids workarounds and mislabeling of decubitus images.

# Issues for Discussion

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# Scoring Metric: Applicability / Reach

- Decubitus treatments are infrequent but do occur routinely in some clinics.



# Scoring Metric: Safety

- Mis-labeling of decubitus images as another imaging type holds the potential for mis-interpretation and mistreatment.

# Scoring Metric: Technical Ease of Implementation

- TBD – yet to be tested

# Scoring Metric: Industry Alignment

- The decubitus position was left of out previous profiles specifically because some systems lack the functionality to deal with them. This may still be a substantial issue with many of the planning and delivery systems and could pose a threat to the implementation of this profile.