

Anonymization of Clinical Radiotherapy Data

Limits to the Advancement of
Clinical Practice Due to HIPPA,
FOIP, and HIA Compliance

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Anonymization of Clinical Data

[The Problem]

- Patient data required for Clinical Trials QA and storage requires standardization in DICOM RT format
- Transfer of data requested by the vendor for troubleshooting of systems is not currently possible
- Cooperative development of treatment techniques for difficult or unique cases between different vendor TPS is not possible

Anonymization Standards

[The Solution]

- Pseudonymization standards for DICOM RT data from radiotherapy systems (Treatment Planning, Treatment Management, Imaging Modalities, PACS) needs to be developed
- Secure encrypted electronic transfer of data using a range of export avenues (SFTP, removable storage, etc.) must be available

Customized Data Transfer

[The Solution]

- A feature that allows the user to customize the list of Default DICOM tags that require anonymization should be available
- User defined data (or data subsets) for export - images, structures, treatment plan, dose, DVH, DRR, treatment record/course, etc.
- Storage of user definable data transfer templates is needed

Advancement of Clinical Practice

[The Benefit]

- Thousands of facilities and all vendors will be able to cooperatively work on wide ranging radiotherapy clinical and systems development challenges!