IHE-RO Technical Committee Face-to-Face January 19-23, 2015 Jan 19-22 at 8:30 AM – 5:30 PM PST Jan 23 at 8:30 – 11:00 AM PST Costa Mesa, California

Technical Committee Chairs: Scott Hadley, PhD Chris Pauer, Accuray

## IHERO Task Force Co-Chairs Dick Fraass, Ph.D., FAAPM, FASTRO, FACR John Buatti, MD

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**Mission Statement:** The American Society for Radiology Oncology (ASTRO) has formed a multi-society Task Force to undertake an initiative to promote the Integration of the Healthcare Enterprise (IHE) – Radiation Oncology (RO), fostering seamless connectivity and integration of radiotherapy equipment and the patient health information systems. The Task Force will include members from ASTRO, RSNA, American Association of Physicists in Medicine (AAPM), the American College of Radiology (ACR) and the Medical Imaging and Technology Alliance (MITA). In addition, members of the International community have also been invited to participate in IHE-RO. The IHE-RO Task Force, in close collaboration with radiotherapy product manufacturers, will develop appropriate integration profiles for radiation therapy and setup a

25 demonstration of seamless communication among the full array of radiotherapy products.

Name	Affiliation	Email	1/19	1/20	1/21	1/22	1/23
Chris Pauer	Accuray	cpauer@accuray.com	Х	Х	Х	Х	Х
Scott Hadley	U. Michigan	swhadley@umich.edu	Х	Х	Х	Х	Х
Jim Percy	Elekta	Jim.percy@elekta.com	Х	Х	Х	Х	Х
Walter Bosch	Wash. Univ.	bosch@wustl.edu	Х	Х	Х	Х	Х
Christof Schadt	Brainlab	Christof.schadt@brainlab.com	Х	Х	Х	Х	Х
Uli Busch	Varian	Ulrich.busch@varian.com	Х	Х	Х	Х	Х
Koua Yang	Philips	koua.yang@philips.com	Х	Х	Х	Х	Х
Sven Siekmann	Brainlab	Sven.siekmann@brainlab.com	Х	Х	Х	Х	Х
Rickard Holmberg	RaySearch	Rickard.holmberg@raysearchlabs.com	Х	Х	Х	Х	Х
Mikael Bertze	RaySearch	Mikael.bertze@raysearchlabs.com	Х	Х	Х	Х	Х
Bruce Curran	VCU	bhcurran@gmail.com		Х	Х	Х	
Sanjay Bari	Elekta	Sanjay.Bari@elekta.com			Х	Х	Х
Harold Beunk	ICT	Harold.Beunk@ict.nl		W			
Wouter Vreeman	ICT	wouter.vreeman@ict.nl		W			
Rishabh Kapoor	VCU/VA	Rishabh.kapoor@va.gov				W	

## Attendees:

X = In person W = via Phone/Webex

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40	I.	a.	(1/19/15 at 8:50 Review Agenda	a – Approved	
		b.		N 150102 Chris to contact	4 teleconference – <b>Approved without objection</b> t Bridget re PC contact for CIS for Consistent Dose profile
			Other broad top	ics to add.	
45		d.		dvancing certain profiles	Discussion of multiple second is a fallow task is a
			discuss	ion of DICOM Sup 147 pr	se. Discussion of profile scenarios to follow technical escription and segmentation. Further input is needed from
			the Chi	nical Advisory Committee.	
50	II.	Business			
				n Items – to be reviewed	later in the meeting
		b.	Topic 1: Leve		
			-	es on IHE-RO activities	
55			1.		eering Committees – an IHE-RO PC meeting is 0 <sup>th</sup> 2:00 pm EST to set priorities.
55			2		n priorities has been communicated to TC: RXRO,
			2.	CPRO remain high prio	-
			3.	Publication of IHE-RO	
					<sup>13</sup> Scott to follow up after Jan 30 IHE-RO SC meeting
60					n IHE-RO Progress for Mar 2015 deadline – due Feb 2.
			4.	Request from ASTRO I	Board regarding products that implement IHE-RO
				Profiles – to be discusse	ed Tuesday afternoon
			5.	Other Updates	
~ -					Hereichneite HL7/IHE workgroup information
65				to TC for Jan 30	).
				O, MITA, ROSSI	recording need for better owereness of UMSS/UI 7
				-	regarding need for better awareness of HIMSS/HL7. Group should be activated to work with the AAPM IT
			۷.	Work Group to develop	-
70			3.		dard is moving forward. It is expected to be released for
				public comment in the r	
			iii. DICO	1	
			1.	Supplement 147 is expe	ected to be released for public comment during the week
				of Jan 26 <sup>th</sup> .	
75			2.	11	m Radiations), 176 (New RT Radiations) to be prepared
				for next release.	
			3.		Profiles have been submitted:
					Clarification of Beam Dose Scope
00					Omitted Beams Sequence In BDI
80				• –	Clarification of RT Image Position Additional SSD Information
				• -•	Add Effective Wedge Angle
				0. 0p±000_n	And Encoure weage Angle

c. Topic 1.3: Prescription first topic

Minutes:

85	i.	Look at DICOM Gen 2 Rx attributes – Uli presented an overview of the RT Physician
		Intent IOD in Sup 147
		1. Physician Intent – intent label, narrative, protocol code, diagnosis code,
		<ul><li>diagnostic image set references.</li><li>2. Prescription Module – definition of targets and anatomic volumes, volume</li></ul>
90		clinical code, dosimetric objectives, treatment phases/fractionation, treatment
70		delivery technique, prior dose
	ii	Decide on Use Case to focus on for Topic 3 from the RXRO Profile draft
	11.	1. Discussion of Use Cases enumerated in RXRO Supplement Draft – Is the
		content Treatment Intent alone, or with Prescription (Simple, Intermediate,
95		Detailed), ?
		2. What are the Actors for this Profile? Should we define a "Producer" and a
		"Consumer" or more context-specific Actors? Minimum scope is TPS-to-TPS
		or TMS-to-TPS communication of Physician Intent/Prescription information.
		3. Sven will flesh-out Transfer Simple Prescription Use case for further
100		discussion on Wednesday.
	[Lunch break 12:30-1	·20 pm DST1
	[Lunch bleak 12.30-1	
	d. Topic	10: BRTO
105	i.	Sven reviewed a draft Change Proposal for the BRTO Profile to support high-
		resolution RT Structure Sets.
	11.	<b>DECISION 150101</b> : Defer inclusion of the following DICOM CPs (enhancements to
		the RT Structure Set IOD) to future Segmentation or BRTO-II Profile(s):
110		1. CP1395 (adds recommended display grayscale, CIELab parameters)
110		<ol> <li>CP1314 (adds Segmented Property Category Code).</li> <li>CP1398 (adds FoR Module, User Defined).</li> </ol>
	iii	Discussion of high-resolution encoding of structure sets
	111.	1. It is assumed that low-res contour consumers check for the existence of a
		Contour Image Sequence (3006,0016) in the Contour Sequence (3006,0040) of
115		the ROI Contour Sequence (3006,0039).
		2. It is possible for a low-res contour consumer to extract a low-res version of a
		high-res Structure Set by eliminating contours that do not contain an Contour
		Image Sequence (3006,0016).
100	т :	3. Sven will update the BRTO Change Proposal for review later in the week.
120		21: ROI Templates
	1.	ITI Infrastructure (ITI TF-1) defines Sharing Value Sets Integration Profile (SVS), but supports only unstructured value sets (code lists).
	ii	DICOM Part 19 defines NativeDicomModel XML encoding of DICOM objects and
	11.	fragments. This approach could be used to transport ROI Template contents.
125	iii.	Future of the DICOM CT Imaging Protocol is not certain (contact Kevin O'Donnell
		regarding its status after the upcoming Vienna meeting). ACTION 150123: Uli,
		Christof to contact Kevin re status of CT Image Protocol at Mar 2015 WG-06 mtg.
	iv.	Defining an XML schema via a NEMA Standard may be easier than getting a DICOM
		Supplement approved. Next steps:
130		1. Define Data Types
		2. Add Publisher, Version to Dictionary and Protocol objects.
	V.	Walter will review Use Case later in the week.

[Adjourn for the day 1/19 at 5:30pm] [Resume 1/20 at 8:30am]

135

	f. Topic 4: ICT Test Tools
	i. Bruce has distributed Test Tool results from Oct 2014 to vendors. Responses
	regarding the source of problems (Test Tool vs. Product) must be received to validate
140	results of the 2014 Fall Connectation. Some detailed Test Tool results are still missing
	for MMRO and BRTO profiles. Tests could be re-run with corrected Test Tools if
	DICOM objects are available. Requests for data have been sent to vendors.
	ii. Outstanding issue with Fall 2014 Connectathon results – All Test Tool issues have
	now been resolved or entered on ihe-ro-test-tools Issue Tracking.
145	1. BRTO – Procedure C-STORE RQ reported missing by Test Tools.
	(GeomPlanner,) fixed but not yet released. To be updated on issue tracker.
	2. BRTO – Block Seq present, but NULL (zero length) – not legal DICOM
	3. BRTO – Final Cumulative Meterset Weight present in Geometric Plan
	4. MMRO – Registrator Study Date and Time indicated as incorrect by Test
150	Tools (issue #12)
	5. MMRO – Reference Image not in CT Series (DICOM data not available to
	verify)
	6. ARTI – Consumer Actor Test Tool results were not submitted
	7. ARTI – Source to Wedge Tray distance provided for Motorized Wedge (not
155	needed)
	iii. Current state of tools is displayed on ihe-ro.org.
	1. Status (New, Started, Review, Fixed, Verified, Rejected,) is indicated for
	each issue.
	a. Released versions that address issues should be noted in Comment.
160	b. Reporter to update status to Verified when released version has been
	checked. (For issues entered by ICT, this step will need to be done by
	ICT, since they are the owner of the issue.)
	2. New Issue entry was shown. Issue entry includes Summary, SW Version,
	Issue description, Reporter, Status, Attached File, Email notification. Access
165	requires gmail account. See the link to Google Code ihe-ro-test-tools thread on
	the ihe-ro.org Test Tools page.
	3. Issue tracker was well received by TC vendors.
	iv. Data Issues that still need Resolving
	1. Bruce owes MLC plans for ARTI (replace Varian V80 with V120) for six
170	plans (MLC Static, MLC Arc, Conformal Arc, Step-And-Shoot, Sliding
	Window, IMAT/VMAT). Also need to replace Elekta Beam Modulator with
	Versa HD (IHE_ELVHD) in one dataset (Motorized Wedge). All source data
	are available for this work. Issues have been entered on ihe-ro-test-tools
	tracker.
175	2. Test data are also needed for TPPC and TDPC Profiles. Testing on TPPC to
	begin in Spring 2016. Data for these profiles are expected to be created from
	ARTI data by hand editing.
	3. IHE-RO TC to determine schedule for testing new profiles
	v. Assignments
180	1. ACTION 141201* Vendors to submit outstanding Test Tool data to Bruce no
	later than Feb 6.
	2. ACTION 150105 Bruce to report on final Test Tool results the week of Feb 15
	(to allow TC to formally vote release of results).
105	3. ACTION 150106 Bruce to update ARTI MLC and Motorized Wedge plans for
185	Test Tool datasets.

	4. ACTION 150107 Bruce to request that Harold Beunk and Walter Bosch be added to IHE Testing and Tools call list.
190	<ul> <li>g. Topic 21:ROI Templates (continued)</li> <li>i. Alternatives for ROI Template Data Standard</li> <li>1. AAPM IT Work Group – review, publish white paper? AAPM could draft a joint IHE/AAPM document endorsing an (XML) format for ROI Template.</li> </ul>
195	<ul> <li>2. Possible next steps:</li> <li>a. Evaluate profile draft Use Case</li> <li>b. Add DICOM attribute VR, VL specifications</li> <li>c. Create XML Schema</li> <li>ii. Possible Use Cases</li> </ul>
200	<ol> <li>Standardized Segmentation</li> <li>Prescription Anatomy</li> <li>Plan / Dose Evaluation</li> <li>ROIT Profile to focus on Segmentation</li> <li>ACTION 150108 Scott to present to AAPM IT WG and ask for assistance in co- development. (Possible work item for submission to TPC). Scott report in May 2015.</li> <li>ACTION 150109 Walter to add Publisher, Version and DICOM VR/VL info to ROIT</li> </ol>
205	Profile content. (cf . DICOM CT Protocols) for Mar 2015 TC Tcon.
210	<ul> <li>h. Topic 5: TPPC <ol> <li>Christof reviewed open issues in the TPPC Profile draft</li> <li>Single conceptual plan that is represented by multiple RT Plan instances – waiting for Mar 2015 meeting of DICOM WG-07</li> <li>Treatment Time in RT Plan: Should DICOM CP1331 be incorporated? – This is a topic for TDPC, not for TPPC (Tabled).</li> <li>Referenced Dose Reference Sequence – Is a TPS required to consume this</li> </ol> </li> </ul>
215	<ul> <li>value? This value may be used (e.g., for composite plans) or may be ignored (for plan revision). Remove requirement for TPS consumers.</li> <li>4. DECISION 150102: When usage requirements for attributes differ for producer and consumer Actors, the requirements are to be denoted as</li> </ul>
220	<ul> <li><producer>/<consumer>, where <producer> is the requirement for producers, and <consumer> is the requirement for consumers.</consumer></producer></consumer></producer></li> <li>5. Correct error in the direction of arrow for Beam Retrieval (TPPC-yy) in Treatment Replanning Process diagram.</li> <li>6. Update Source to External Contour Distance and Average Beam Dose Point Source to External Contour Distance attributes per DICOM CP1434 (currently</li> </ul>
225	<ul><li>in LB), once the CP is approved.</li><li>7. Update all consumer/producer pair requirements to producer/consumer pairs.</li></ul>
230	<ul> <li>i. Topic 7: Brachytherapy Profile – A140917</li> <li>i. Uli has provided a proposal for development of a content Profile for Brachytherapy Planning and Delivery to the chairs of the Brachytherapy sub-group. Development of this profile is anticipated in collaboration with the Brachytherapy sub-group of DICOM WG-07.</li> </ul>
235	<ul> <li>ii. Approval for a Brachytherapy Profile proposal is needed by IHE-RO Planning Committee is needed to allocate TC resource for development of this profile.</li> <li>iii. MOTION: IHE-RO TC encourages the development of a Profile and Supplement for Brachytherapy Planning and Delivery. Approved unanimously by a quorum of the IHE-RO TC.</li> </ul>

iv. A similar approach is anticipated for an Ion Therapy Profile/Supplement.

240	[Lunch break 12:30-1:30 pm PST]
240	<ul> <li>j. IHE Admin         <ol> <li><u>ACTION 150110</u> Bruce to contact Crystal Carter to add RaySearch as a voting member on the TC roster.</li> </ol> </li> </ul>
245	<ul> <li>k. Topic 8: QAPV Review</li> <li>i. Chris reviewed QAPV Supplement (vers. 1.19, Oct 15, 2014)</li> <li>1. Major changes involve removing material that has been placed in DICOM Supplement</li> </ul>
250	<ol> <li>Consistent requirements for items in Dose Reference Sequence and Referenced Dose Reference Sequence</li> <li>DICOM Draft Supplement 185 (vers. 4) was reviewed and updated. This supplement defines Quality Assurance evaluation results for any RT information object. This completes Action item 140904.</li> </ol>
255	<ol> <li>Use generic language for "evaluator" and "evaluated RT object".</li> <li>Add "Level Of Concern" attribute with three Enumerated Values: CRITICAL, MINOR, NONE. (replaces Critical Issue and Finding Assessment attributes).</li> <li>Change IOD name to RT Object Evaluation Results"</li> <li>Numerous changes incorporated in vers. 5 of draft Supplement 185.</li> </ol>
260	<ol> <li>Topic 6: DICOM Content Definitions (TF Vol 3, Ch 7) – Action 140513         <ol> <li>Uli presented a proposal for DICOM Content Template (rev. 10.3) consisting of four parts:</li></ol></li></ol>
265	<ol> <li>Module Definitions</li> <li>Service Definitions</li> <li>The DICOM Content library could simplify the management of content requirements for IHE-RO Profiles. ARTI and other Plan Content Profiles could be greatly simplified</li> </ol>
270	<ul> <li>by restructuring with this approach, i.e., by combining transactions with context-specific (beam-type) requirements for DICOM content.</li> <li>iii. Next step is to discuss DICOM Content Template proposal with Mary Jungers and members of IHE International Board Operations Committee.</li> <li>1. ACTION 150111: Uli to clean up DICOM Content Template based suggestions of TC and create an example of an instantiated document for Mar</li> </ul>
275	<ul> <li>suggestions of TC and create an example of an instantiated document for Mar 11.</li> <li>2. ACTION 150112: Bruce to present updated DICOM Content Template proposal and instantiated example to IHE Operations Committee in March 2015.</li> </ul>
280	iv. Review of Vol. 3, Chapter 7.1 Conventions [Adjourn for the day 1/20 at 5:30pm] [Resume 1/21 at 8:30am]
285	<ul><li>m. Topic 3: Prescription in RO (RXRO)</li><li>i. Sven reviewed a draft RXRO supplement as a straw man to evaluate Use Cases</li></ul>

i. Sven reviewed a draft RXRO supplement as a straw man to evaluate Use Cases (changes captured as *ihe-ro\_rxro\_v1.1.doc*). Requirements for modules and attributes of the RT Physician Intent IOD for the Simple Prescription Transfer were discussed.

		ii.	What are the implications of Use Case categories for Producers and Consumers? Do
200			these categories define the <i>minimum</i> content, or do they also limit which attributes can
290			be included in a prescription? For prescriptions, whatever content is included by a
		;;;	producer, must be displayed and acted on by the consumer. Additional points of discussion included the following:
			1. Is the RT Treatment Phase Intent required for the Simple Prescription Transfer
			Use Case? Should it be allowed to be present?
295			2. How is the meaning of Prior Dose handled? (e.g., previous course vs. previous
_, _			phase).
			3. Prescription becomes binding at the point at which it is approved. Currently,
			this is at the TMS (or EHR). Approval status is <i>not</i> included in the RT
			Physician Intent IOD.
300			4. Approval of Prescription, Segmentation, Registration, and Plan are separate
			and distinct. Plan Approval may imply approval of upstream Prescription,
			Segmentation, and Registration (if any).
			5. Dosimetric Objective codes for the Simple Prescription Transfer Use Case are
205			to be limited to Prescription Dose, Maximum Dose, and Maximum Mean
305		:	Dose. ACTION 150124: Scott to present Use Case/Scope to IHE-RO Steering Committee at
		1V.	Jan 30 meeting.
			Jan 50 meeting.
	n. T	opic	11: TDW-II Update
310		-	The TC decided in Oct 2014 to retire the TDW Profile at the end of 2015, revise
			TDW-II with explicit handling of the Beams Delivery Instruction, and to reference
			Consistent Dose for External Beam (CDEB) and Treatment Delivery Plan Content
			(TDPC) Profiles.
		ii.	The TDW-II Profile includes the following content:
315			1. Treatment Plan for Delivery, Consistent Dose content
			2. Beams Delivery Instruction
		:::	3. Unified Worklist C-FIND Requirements for Treatment Delivery
		111.	ACTION 150113: Bruce to (a) draft a CP to move DICOM General Module content definitions from TF Appendix to Volume 3, Chapter 7 using Uli's Draft of DICOM
320			Content Templates and (b) merge additional definitions from TDPC into the TF for
320			Mar 1.
			17101 I.
	o. T	opic	16: Treatment Delivery – Plan Content (TDPC)
		i.	Uli reviewed v1.4 of the TDPC Draft Profile ( <i>IHE-RO_TDPC_v1.4.doc</i> )
325		ii.	Coupling between TDW-II and TDPC Profiles was discussed. As structured, the
			TDW-II Profile Draft references TDPC for RT Plan content for conventional External
			Beam Photon and Electron plans. All Plans for TDW-II must also conform to CDEB
			content requirements. Content specifications could be merged into the TDW-II Profile
220			and this was discussed.
330		iii.	<b>DECISION 150103</b> : The consensus of the TC is to keep workflow (TDW-II) and content (TDPC, CDEB) Profiles separate.
		iv	The single Transaction in this Profile is a transfer of plans between producer and
		18.	consumer Actors. This transfer was simplified to a simple C-STORE.
335	[Lunch break 12	:30-1	:30 pm PST]
			-

v. General Series and RT Series requirements for Date and Time is Type RC+ (Must be used if present; If the producer creates a new Series, must be present).

		vi. Equipment Module – Manufacturer and Model must be present. Add requirement that
340		Software Version be present.
		vii. RT Prescription, RT Fraction Scheme, and RT Beam Module content is covered by
		CDEB Profile, no additional requirements to be included in TDPC.
		viii. Add requirement to display shielding device, setup device, setup technique, etc., if
		present.
345		ix. Patient Support positions and angles: TPPC conditions apply.
		x. Tolerance Tables Module – Tolerance Table Label to be displayed, if present.
		Tolerances to be used if present and applicable.
		xi. ACTION 150143: Uli, Bruce to draft TDPC Profile cast in Content Template format –
		out for email review Feb 15, due Mar 1.
350		
	p.	Safety Components of IHE-RO Profiles
		i. Suggestions for March 1 submission to PRO – How does IHE-RO promote patient
		safety?
255		1. Planning Committee to provide introduction and conclusion
355		2. Accomplishments since 2010 Red Journal publication
		3. Prevents misinterpretation of data
		4. Promotes predictable workflows
		5. Reduces workarounds, manual processes.
260		6. Avoid distractions – allows clinicians to focus on the quality of patient care.
360		7. "let the computer what it does best"
		<ol> <li>8. Lessons learned during Connectathon (Bruce)</li> <li>9. Review TG-201 draft for ideas</li> </ol>
		10. Patient ID process built into profiles, tested at Connectations
		11. QAPV addresses treatment delivery safety
365		12. MMRO revised (MMRO-II) to address reliable identification of Frame of
505		Reference
		13. Consistent interpretation, implementation of data standards
		14. safety considerations built into profiles
		15. Promotes trust and cooperation toward a common goal among RT
370		manufacturers
		16. Common technology approaches speed/ease cross vendor issue resolution,
		allowing fewer interruptions to treatment
		17. patient ID tested at Connectation
		18. Specifics: dates, test tools, connectathon
375		19. References: Santanam, et al. QAPV, IJROBP
		ii. ACTION 150125: Chris to draft QAPV content for PRO manuscript for Jan 30.
	q.	Topic 15.5: DCOM Update
		i. The DCOM Utilize Spatial Registration [RO-13] transaction was to be updated to
380		Spatial Registration Retrieval [MMRO-III-2]. However, MMRO-III Profile is in
		Public Comment and cannot yet be referenced.
		ii. ACTION 150114: Walter to update DCOM Utilize Spatial Registration [RO-13]
		transaction to Spatial Registration-II Retrieval [MMRO-II-2]. Reference: RO-18. For
205		Mar 2015 TC Tcon.
385		
	r.	Topic 9.5: Discussion of request from ASTRO regarding products that implement IHE-RO
		Profiles
		i. Need to clarify "products that implement IHE-RO Profiles." Released Products?
		Claimed adherence? Verified adherence at Connectathon? How may test partners?

390	<ul><li>ii. How many products were brought to a Connectathon? How many passed, but could not present a full Integration Statement? How many Integration Statements?</li><li>iii. IHE-RO has been cited by MITA/Advamed, NEMA, and the FDA as a means for demonstrating interoperability in product filings.</li></ul>
395	[Adjourn for the day 1/21 at 5:40pm] [Resume 1/22 at 8:30am]
400	<ul> <li>Topic 9.5: Discussion of request from ASTRO regarding products that implement IHE-RO Profiles (continued)</li> <li>iv. ACTION 150115 : Bruce to extract vendor/product statistics from Connectathon results and forward to Chris by Tues 1/27. Done.</li> <li>v. ACTION 150116: Chris, Bruce, Scott to draft response to ASTRO by Jan 30.</li> <li>vi. ACTION 150117: Vendors to send Chris a list of tested and/or released products manufactured to IHE-RO Profile specifications by Jan 28.</li> </ul>
405	s. Topic 9: Connectathon Spring 2015
410	i. Profiles to be tested 1. Formal testing a. ARTI
410	b. BRTO c. MMRO-II
	d. DCOM
	2. Informal testing a. TDW
415	b. TPPC
	c. TPIC?
	ii. Preparation (ACTIONS): $1 - \frac{ACTION 150120}{C}$ (Chris. Crustal) Registration form to be ready by Ech 12 <sup>th</sup>
	<ol> <li>ACTION 150130: (Chris, Crystal) Registration form to be ready by Feb 13<sup>th</sup></li> <li>ACTION 150131: Rickard to provide Info on travel/lodging ready by Mar 1<sup>st</sup></li> </ol>
420	<ol> <li>ACTION 150132: Bruce, Scott, Walter to update planning instructions by Mar 1<sup>st</sup></li> </ol>
	<ul> <li>4. ACTION 150133: Crystal to announce registration, travel/lodging by Mar 9<sup>th</sup></li> <li>5. ACTION 150134: Vendor to register by April 1<sup>st</sup></li> <li>6. ACTION 150135: Walter to distribute Test data and planning instructions by</li> </ul>
425	April 15 <sup>th</sup>
	7. ACTION 150136: Vendors to prepare Producer Actor data for start of Connectation May $4^{th}$
	Connectathon May 4 <sup>th</sup> 8. ACTION 150137: Walter to create test tracking documents for start of
	Connectathon May 4 <sup>th</sup>
430	iii. Meeting site: any issues?
	1. Networking, power infrastructure to be provided by host
	2. ACTION 150118: Mikael to investigate Internet access for (cloud-based) test systems for Mar 15.
	iv. Ion Sub-group Informal Testing
435	1. Informal testing for RT Ion Plan exchange in concert with IHE-RO
	Connectation? May involve additional 4-5 vendors, 10-15 individuals.
	2. ACTION 150119: Uli to recommend to Ion Sub-group to conduct informal testing of RT Ion Plan exchange in parallel with the IHE-RO Spring 2015
	Connectation in Stockholm. (Ion sub-group members to register as observers

440		and sign Connectathon Participation Agreement.) Response expected after Feb 3 <sup>rd</sup> 2015 Ion Sub-group T-con.
		v. Connectathon Test Archive
		1. Brainlab has graciously agreed to provide a test Archive instance for the Connectathon.
445		vi. Judging prep
		<ol> <li>ACTION 150120 Walter to arrange Test Committee (Bruce, Scott, Walter,) T-con for mid-Feb to prepare the Connectathon test plan and documents (see ACTION items 140507, 140508, 140509) by Feb 7.</li> </ol>
450	t.	DPDW Profile Status
		i. Uli provided an update on the status of the DPDW Profile. Tomas Schwerer is now the chair of the DPDW sub-group
		ii. A face-to-face meeting of the DPDW group is planned for the week of March 23-27.
455		This is the week following a WG-07 meeting and concurrent with a DICOM WG-06 meeting. It is not yet clear whether there will be sufficient attendance to make this
		meeting worthwhile.
		<ul> <li>iii. Alternative meeting opportunities include ESTRO (April 24-28, 2015 in Barcelona, Spain).</li> </ul>
460	u.	Topic 18.5: HIS Workgroup / HIMSS / HL7 next steps – Tabled in favor of CPRO discussion
	v.	Topic 12: Consistent Patient Identification (CPRO)
		i. Rishabh reviewed Clinical Impact Statement and Profile Draft documents for the
165		CPRO Profile modeled on a Radiology scheduled workflow profile. It uses DICOM
465		Modality Worklist to communicate patient identification between a TMS and an acquisition modality. This is not primarily a workflow profile, but requires patient
		information and schedule to be present in TMS prior to worklist query.
		ii. An Order Placer Actor (component of TMS or OIS?)
		1. Manages patient identification for registered patients
470		2. Schedules CT Simulation
		iii. A related RO-HIS Draft Profile manages the communication and updating of scheduling information between HIS and Rad Onc (TMS).
		iv. Use Cases
		1. Patient registered in TMS in standalone clinic (no communication with HIS).
475		2. Patient registered in HIS. TMS queries HIS for patient ID
		3. Patient registered in TMS and updates HIS
		v. Next steps (Rishabh, Scott, Bruce): query TMS, HIS vendors (Elekta, Varian, Epic, Cerner) regarding what interfaces exist and what solutions are possible.
		vi. ACTION 150140: Review CPRO/RO-HIS status at Feb TC Tcon.
480		
	w.	TDW-II (continued)
		i. The TDW-II Supplement is to include Content Definitions including Character Sets. Support is to be expanded beyond ISO-IR-100.
		ii. Content requirements for C-FIND have been moved to section 7.5.1.1.1.
485		iii. Content requirements for RT Beams Delivery Instruction are now in 7.4.2.1.1.
		1. The Omitted Beams Sequence is used to specify partial deliveries for
		continuation of plan delivery.
		2. General discussion of references to DICOM Standard <i>editions</i> in IHE-RO Profiles. There is some value in identifying the edition of the standard
490		associated with particular transactions, i.e., to identify features supported in the

referenced edition, but the exact relationship between versions of IHE-RO Profiles, editions of the DICOM Standard, and releases of DICOM toolkits is not well-defined.

## 495 [Lunch break 12:30-1:30 pm PST]

500 505	<ol> <li>Beam Delivery Order / Auto-sequencing discussion – Specified beam delivery order should not be ignored, but may not be deliverable by TDD for technical reasons. (A given beam delivery order may not be feasible, efficient, or safe.) Add condition: "If present should be used if the delivery device allows."</li> <li>The Fraction Number shall not vary within the BDI Beams Sequence – i.e., only a single delivery fraction number may be specified by a BDI instance.</li> <li>ACTION 150121: Chris to review Section 9.5 (Security) in TDW-II by Feb 19.</li> <li>The question was raised whether to include RT Beams Treatment Record in the Consistent Dose in External Beam (CDEB) Profile.</li> </ol>
	x. Topic 18:Profile Status Review
	i. TPPC Discussion
510	1. TPPC changes relative to ARTI
	a. Stereo applicators
	b. Arc beams
	c. High dose technique
	d. Average beam dose depth, etc.
515	e. Minor producer/consumer changes
	f. Distinguish TMS and TPS Actor behavior
	2. TPPC Options
	a. Include dose tracking? (Consistent Dose)
520	b. Restructure using DICOM Content Templates?
520	3. Project Timeline
	a. Common modules to be restructured (includes Template Introduction and Sample Profile TDPC)
	i. Re-factor of Common Modules – (see Action 150113: Bruce,
	due end of Feb 2015)
525	ii. Draft proposal for Template Format for IHE – (see Action
	150111: Uli, out for email review Feb 15, due Mar 1)
	iii. Draft TDPC Profile cast in Content Template format – (see
	Action 150143: Uli, Bruce, out for email review Feb 15, due
	Mar 1)
530	b. Chris to perform CDEB edits by Feb 7 for email review by TC (see
	Action 150122).
	c. TPPC – to be reviewed at May 2015 meeting
	y. Consistent Dose in External Beam (CDEB) Profile review
535	i. Review of draft CDEB Profile document
	(IHE_Consistent_Dose_DICOM_Content_Profile_1.3.doc)
	ii. Discussion of architecture – Actors?
	1. Consistent Dose Plan Producer (~TPS)
	2. Consistent Dose Tracker (~TMS)
540	3. Consistent Dose Record Producer (~TDD)
	iii. Transactions

545	<ol> <li>Consistent Dose Plan Storage</li> <li>Consistent Dose Record Storage</li> <li>Review of Attribute requirements for CDEB transactions</li> <li>Profile Option         <ol> <li>Support for multiple targets – not supported by all Dose Trackers</li> <li>ACTION 150122: Chris to incorporate edits and send out for review at next TC Tcon, due Feb 7.</li> </ol> </li> </ol>
550	[Adjourn for the day 1/22 at 5:30 pm] [Resume 1/23 at 8:35am]
555	<ul> <li>z. Topic 14: Treatment Planning – Image Content (TPIC) <ol> <li>Uli reviewed open issues with the TPIC Profile</li> <li>Require Series Date and Time – covered in TDPC.</li> <li>General Equipment – manufacturer, model, SW version are required (R+)</li> <li>Reported Values Origin – no additional requirements</li> <li>Referenced RT Plan – shall be present (was: required if associated with a plan)</li> </ol> </li> </ul>
560	<ol> <li>Referenced Beam Number – Shall be present if beam reference is known (RC+*).</li> <li>RT Beam Limiting Device Sequence – Shall not be present for DRR, May be present otherwise.</li> </ol>
565	<ol> <li>The Exposure Sequence needs to be cleaned up. The condition is that it is not present for DRRs is already in standard: remove all conditions referring to DRR.</li> <li>Image position for non-normal image plane – clarified in DICOM CP 1439.</li> <li>RT Image geometry (angles, etc.) note revised.</li> </ol>
570	<ul> <li>10. Requirements for RT Image Instance/Content/Acquisition date and time? Image Content Date, Time required for all images. Acquisition Date, Time required for all acquired images.</li> <li>11. Allow Image Type of FLUENCE? Yes. No additional requirements needed.</li> <li>12. Pixel Intensity Relationship – Request to DICOM WG-06 to remove the necessity to have Pixel Intensity Relationship (0028,1040) present.</li> </ul>
575	<ul> <li>13. Projection of structures on RT Images: use Curve Module (retired) or RT Structure Set (complex).</li> <li>14. Require use of 16-bit image pixels for DRRs? (Other image types may continue to use 8-bit.) To be reviewed further.</li> <li>15. Remove signed image pixels for 16-bit images. (DICOM requires unsigned for</li> </ul>
580	<ul> <li>aa. Topic 15: Treatment Delivery – Image Content (TDIC) –</li> <li>i. ACTION 150144: Uli to update RT Image definitions in TPIC and TDIC based on TPIC discussions for Mar 11.</li> </ul>
585	bb. Action Item Review
	<ul> <li>cc. Other business</li> <li>i. ACTION 150145: Chris to put Segmentation Profile discussion on agenda for next TC Tcon.</li> </ul>
590 II	. Future Meetings

a. IHE-RO Meetings

	i. IHE-RO EU Connectathon – May 4-8, 2015, TC Mtg May10-13, 2015 in Stockholm
595	(RaySearch Labs) ii. IHE-RO NA Connectathon – Sep 21-25, 2015, TC Mtg Sep 27-30, 2015, preferred
595	location is Washington, DC, alternate is Melbourne, FL.
	iii. IHE-RO Meeting at ASTRO – Oct 21-24, 2015 in San Antonio, TX
	b. Other meetings through 2015
600	i. AAPM July 12-17, 2015 in Anaheim, CA
	ii. DICOM WG-7 Mar 16-20, 2015 Washington, DC
	iii. DICOM WG-7 Jul 15-18 in Anaheim, CA
	iv. DICOM WG-7 Nov 2-6, 2015 location TBD
	v. IHE European Connectathon, Apr 20-24, 2015 in Luxemburg
605	vi. World Congress on Medical Physics and Biomedical Engineering, Jun 7-12, 2015,
	Toronto
	vii. ESTRO Forum Apr 24-28, 2015 in Barcelona – GEC meeting?
	viii. PTCOG May 18-23, 2015 in San Diego, CA

## 610

IV. Adjournment – meeting was adjourned at 11:00 am PST.