In attendance:

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<tr>
<th>Name</th>
<th>Institution</th>
<th>Role</th>
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<tr>
<td>Samuel G. Armato III, PhD (Co-Chair)</td>
<td>Rudresh Jarecha, MBBS</td>
<td>Kevin O’Donnell, MASc</td>
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<tr>
<td>Gregory V. Goldmacher, MD, PhD (Co-Chair)</td>
<td>Philip F. Judy, PhD</td>
<td>Nicholas Petrick, PhD</td>
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<td>Andrew Buckler, MS</td>
<td>Hyun Grace Kim, PhD</td>
<td>Daniel Sullivan, MD</td>
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<td>Heang-Ping Chan, PhD</td>
<td>Michael McNitt-Gray, PhD</td>
<td>Ying Tang, PhD</td>
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<td>Charles Fenimore, PhD</td>
<td>Shintaro Nawata, MD</td>
<td>Pierre Tervé, MS</td>
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<td>David Gustafson, PhD</td>
<td>Nancy Obuchowski, PhD</td>
<td>Lifeng Yu, PhD</td>
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<td>Lubomir Hadjiyski, PhD</td>
<td>Michael O’Connor, PhD</td>
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<td>RSNA:</td>
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<td>Joe Koudelik</td>
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<td>Julie Lisiecki</td>
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Continued Discussion: Field Test and Logistics

- Dr. Jenifer Siegelman has volunteered to serve as the Coordinating PI for the project, and a formal project proposal has been submitted for consideration for Round-5 funding.

Important considerations to be resolved:

- These volunteer sites that have been identified and contacted are:
  - Duke University (Dr. Ehsan Samei)
  - Harvard/Brigham and Women’s (Dr. Jenifer Siegelman)
  - Columbia University (Drs. Larry Schwartz and Binsheng Zhao)

- One additional site is needed. Factors that make for a good site:
  - An engaged PI (radiologist) and oncologist are needed at each site
  - Feasibility of protocol implementation and IRB approval
  - Established track record of each site’s clinical trial accrual
  - Availability of an experienced Research Coordinator at each site
  - Scanners to be used and protocols needed for each
    - Scanners must have the ability to scan and re-scan the liver within specific time window
    - Scanners physically located so that “coffee break” timing is feasible
    - Ideally, scanners from vendors not already covered, but not a requirement

- Drs. Goldmacher and Siegelman to follow up with the following potential sites and PIs:
  - Moffitt Cancer Center (Dr. Robert Gillies)
  - Mayo Clinic (Dr. Lifeng Yu)
  - University Medical Center Gröningen (the Netherlands) (Dr. Peter M.A. van Ooijen)

- A central data repository must be identified that can accommodate non-image data, anonymization, and storage
  - Under consideration:
    - RSNA / QIDW
    - Dr. Kalpathy-Cramer’s expertise may be needed

- Budget impact must be reconsidered due to change in scan numbers:
  - 88 patients for chest + 88 patients for abdomen = 176 patients total

- Statistical analysis changes to accommodate design changes:
  - Dr. Obuchowski suggested interim analysis at ~50% recruitment to see whether data can be pooled.
  - Pooling of liver scans (w/ contrast), chest scans (w/o contrast) and lymph nodes suggested.
    - Analysis will need to be designed and set up well before end of data collection.

- Timeline proposed
  - 0-6 months: Obtain IRB approval and general set-up
  - 6-18 months: cases collected
  - 18-24 months: reads performed and analyzed
Future discussion topics for the committee:
  - Profile
  - Field Test
  - Conformance as it relates to readers, specifically
  - Clinical confirmation for the Profile
  - Reports on progress from Drs. Petrick / Zhao (mid-July or later)
  - Reports on progress from Drs. Samei / Sahiner

Action items
- Dr. Goldmacher to invite / remind presenters about upcoming presentations to the BC
- RSNA Staff to coordinate two ad-hoc calls / doodle poll for physicists, statisticians (Profile)
- All are welcome to provide suggestions for summer call schedule topics: Gregory.Goldmacher@iconplc.com

RSNA / MIRC:
The Medical Imaging Resource Center (MIRC) is a set of free software tools to support radiology teaching files and imaging clinical trials. The Clinical Trials Processor (CTP) allows you to move data with the most powerful anonymizer in the industry. Employed by the National Cancer Institute, the CTP can anonymize all DICOM objects with a single click and send data across institutions, dramatically minimizing errors and saving you time. It supports industry-standard protocols and can be configured to work with all commercial PACS systems.

Next Calls:
- TBD - Continuation of Field Test Planning Discussion / (to confirm with co-chairs)
- Ad-hoc calls for physicists and statisticians