

## QIBA FDG-PET/CT Tech Ctte Update Call

March 2, 2012 at 9 am CST

### Call Summary

#### In attendance:

Richard Frank MD, PhD (co-chair)

Richard Wahl, MD (co-chair)

Keith Allberg

Andrew Buckler, MS

Paul Carson, PhD

Paul E. Christian

Patricia Cole, PhD, MD

Barbara Croft, MD

Constantine Gatsonis, PhD

Howard Higley, PhD

John M. Hoffman, MD

Martin Lodge, PhD

Brian Nelson, PhD

Ling X. Shao, PhD

Anne M. Smith, PhD

Daniel C. Sullivan, MD

John Sunderland, PhD

Valerie Treyer, PhD

Scott D. Wollenweber, PhD

John Wolodzko, PhD

Jeffrey Yap, PhD

Brian Zimmerman, PhD

#### RSNA

Joe Koudelik

Julie Lisiecki

#### Discussion regarding Year-3 NIBIB funded project ideas (Drs. Wahl and Frank)

- Mr. Buckler reviewed committee progress via an updated Gantt chart and demonstrated how the funded projects relate to the current groundwork tasks
  - Clinical performance vs. clinical utility projects discussed
- Small-scale trials discussed; may not possess sufficient performance characteristics to validate a biomarker
  - Question as to whether or not the sample is sufficient for a clinical reading with larger numbers
  - Dr. Wahl – looking for linkage between biomarker and outcomes
- Necessity of Field Testing discussed; more consideration needed due to high cost
  - Question was raised whether the group should presume that the Profile is correct and that a field test is not required.
- Gantt chart must be updated with the latest Round-2 funded projects
- Round-1 funded project updates:
  - SARC 11 links scanner performance to drug therapy outcomes
  - Cannot have good utility if performance is not reliable
  - Category for road show project not visible on chart
- Group needs to determine how to assess vendor Compliance to the Profile
  - This does not address whether or not everyone can perform the task
  - It outlines whether or not one can meet the criteria of the Profile

#### Suggestions for new projects

- Tumor Glycolytic Volume
- Consider central nervous system (new biomarker) – brain uptake of FDG-PET; quantifying an amyloid agent and possibly pairing with a corresponding Profile
- Consider use of existing datasets, similar to SARC 11, and link data to outcomes where FDG-PET has been used respectively; clinical utility groundwork
  - Work on reproducibility and additional analysis on datasets with cancer exploration
  - Amyloid PET agents are not useful unless they are quantitative

#### Next steps:

- Discuss final Profile edits on next call prior to release for Public Comment
- Latest version of Profile available on the QIBA wiki: [http://qibawiki.rsna.org/index.php?title=FDG-PET\\_tech\\_ctte](http://qibawiki.rsna.org/index.php?title=FDG-PET_tech_ctte)
- Dr. Kinahan to follow up with Dr. Shao regarding software tracking details
- Mid-March: 1st draft of NIBIB application renewal needed; Early April final draft of application needed

**Next call:** to discuss Profile at **9 am (CT), March 9th**