QIBA Diffusion-Weighted Imaging MR Biomarker Committee (BC) Call

Thursday, August 15, 2019 at 2 PM (CT)
Call Summary

Participants RSNA

Michael Boss, PhD (Co-Chair) Dariya Malyarenko, PhD Savannah Partridge, PhD Joe Koudelik Thomas Chenevert, PhD (Co-Chair) Nancy Obuchowski, PhD Lisa Wilmes, PhD Susan Stanfa

Amita Dave, PhD

Moderator: Dr. Boss

Review of Previous Call Summary

• The notes from July 25, 2019 were approved as presented

Round-2 Public Comments on DWI-MR Profile Resolution Process

- Formatted DWI-MR comment resolution document to be posted on the <u>Comment Resolutions page</u> of the QIBA
 Wiki
 - o QIBA Process Cmte is working on making key pages on Wiki easier to locate
 - This Wiki page still needs to be populated with comment resolution documents from QIBA Groups other than the CT Volumetry BC
 - Dr. Boss provided an overview of the <u>Google Sheets public comment resolutions template</u>, which is available for use. DWI BC members who participate in other BCs across QIBA were encouraged to use this template for comment resolution in those respective Profiles.
 - o The DWI Public Comment Round 2 resolutions document will be posted soon
 - o Public Comment Round 1 resolutions to be reformatted into the template for inclusion on wiki page
- 3.6.1: Profile Activities Discussion Section
 - Discussion re: minimum Time to Echo (TE)
 - The following text was added: "Care should be taken to utilize the same scan parameters across exams, particularly within a study. For example, close attention should be paid to the TE, which should be consistent across exams"
 - Mention of k-space undersampling was added and references to be added accordingly
 - It was decided that the Profile would allude to techniques and provide references, but would not delve further into the topic
 - DWI-MR BC consensus needed re: articles to include; Dr. Boss to send references (DWI reduced k-space, rFOV, multi-shot) to RSNA staff for circulation
 - There was unease re: the location of a "shall" statement in a discussion section; "shall" with was replaced with "can" in: "Whenever possible, true zero b-value should be acquired; when hardware or software makes this not possible, b<50 s/mm² can be acquired in lieu of true-zero b-values.</p>
- 3.11 / 3.11.1: Image QA/Discussion Section
 - Specific instructions on method for SNR measurements deemed helpful, i.e. reference to Appendix E
 - Proposed resolution was accepted (App. E contains reference to NEMA methods)
 - In-line reference to Appendix E.2 was made, and reference to appropriate NEMA guidance was added
 - Additional references need to be added and more discussion may be needed

- In Figure 2, values for SNR for (a) and (b) would be instructive AND/OR reporting the average ADC in a common ROI
 - No action was taken, but future revisions of the profile may consider incorporating similar images for which SNR is available via methods described in Appendix E.2
 - More discussion is needed on this topic off-line
- The following comment was an email submission (not included in the comments spreadsheet): low SNR in figure 3C may be due to high liver iron, but iron was not mentioned as a QC issue in validity of liver ADC evaluation.
 - Arguably, this effects the liver and not a liver lesion
 - It was resolved that this would not be addressed in present version of the profile, but may be considered in the future
- 3.12.1: Image Distribution Discussion Section disposing data should be a suggestion and not a requirement; if data were generated on the scanner as DICOM images, they should be archived
 - o This requirement was removed from the specification table and checklist
- Appendix D: Dr. Boss to finish incorporating responses from Canon Medical Systems re: phantom protocol into the Profile working draft
- Highlighting indicating new text related to breast will be removed before the Profile is converted to a PDF and sent out for a vote-to-publish as Stage 2: Consensus

Next Steps

- References for undersampling techniques in 3.6.1 to be addressed
- References and texts for SNR evaluations in 3.11.1 and Appendix E to be addressed (Dr. Boss to follow up with Drs. Chenevert and Malyarenko separately)
- Both rounds of public comment resolution to be compiled and posted on the <u>Comment Resolutions QIBA Wiki</u>
 page
- During the September 19 DWI-MR BC t-con, the following actions will be taken:
 - o Last review at the DWI-MR Profile
 - Complexity presented by including multiple organs to be addressed re: an <u>approach</u> to <u>Stage 3:</u>
 <u>Technically Confirmed</u>
- A BC vote-to-publish the DWI-MR Profile as Stage 2: Consensus to be initiated upon completion of the BC <u>review</u> <u>process</u>; the goal is to complete this by <u>Oct. 31</u>
 - To proceed with a vote-to-publish, Drs. Boss and Chenevert to simply confirm that the Profile is ready and request staff send an e-ballot to eligible BC voting members
 - Email ballot will then be sent to eligible BC voters, with a separate notification to inform non-voters

Next DWI-MR BC Call: Thursday, September 19, 2019 at 2 PM CT