

QIBA CT Volumetry Technical Committee Update Call

02 July 2012 at 11 AM CDT (GMT-5)

Call Summary

In attendance:

James Conklin, MS, MD (Co-chair)
Maria Athelougou, PhD
Andrew Buckler, MS
David A. Clunie, MBBS
Barbara Croft, MD
Paul Garrett, MD
Gregory V. Goldmacher, MD, PhD

David Gustafson, PhD
Richard Jacobs
Philip F. Judy, PhD
Michael McNitt-Gray, PhD
James Mulshine, MD
Uri Shreter, PhD
Michael Silver, PhD

Neil Steinmetz, MD, JD
Daniel C. Sullivan, MD
Ying Tang, PhD
Binsheng Zhao, DSc

RSNA:

Joe Koudelik
Julie Lisiecki

General Discussion

- Brainstorming discussions began during the May QIBA meeting in Chicago to identify revenue generating sources for ongoing QIBA efforts
- Team discussed possible business models in efforts to generate additional revenue for QIBA
 - Dr Mulshine provided an overview of the ATCC business model; presentation available on the QIBA wiki at: http://qibawiki.rsna.org/images/1/1b/ATCC_is_an_independent_private_nonprofit_7-3-12.pdf
 - Fee-for-Service, Fee-for-Artifacts, access to datasets to reflect curation costs, compliance testing, Profile generation...all possible sources of funding support (cost recovery)
- Need an organized way to convert QIBA efforts into tools and services, i.e., develop high-quality products such as imaging materials and applications
- Benefits of fees vs. public/open access curated images discussed
 - Publically available NIH resources have not met Tech Ctte needs
 - Image access should be free
 - Systematic characterization of data would be a fee-for-service that would help recoup necessary support, i.e., the QIBA efforts would enrich image value
- QIBA “document authentication” another possibility to generate revenue
- Must be made clear that QIBA efforts are commensurate with a value
 - e.g., Profile development standardizing quantitative imaging methods is important to the community
 - Helping define a “process” is very useful to industry and derivative to QIBA’s educational mission
- Any revenue model selected will be an evolutionary process
- Cross Technical Committee efforts discussed
 - Pursuing additional CT biomarkers on hold; further discussion needed

Next steps

- Completion of current Advanced Disease (v2) CT Profile
- Small Nodule Profile development; writing group being organized by Dr Mulshine
- Next t-con scheduled for Monday, July 30th at 11 AM (CT)