

QIBA Lung Nodule Assessment in CT Screening Writing Group

11 July 2013 at 3 PM CST

Call Summary

In attendance:

Samuel G. Armato III, PhD (Co-chair)
David S. Gierada, MD (Co-chair)
James L. Mulshine, MD (Co-chair)

Michael McNitt-Gray, PhD
Anthony P. Reeves, PhD
Daniel C. Sullivan, MD
David F. Yankelevitz, MD

RSNA:

Joseph Koudelik
Madeleine McCoy

Profile Discussion

- Versioning issues were discussed.
- Dr. Yankelevitz presented an overview of technical parameters to be considered for the Profile and image acquisition protocol.
 - How scans should be acquired, stored and viewed
 - Slice thickness reading standard
 - FDA guidance
 - Create expectation of overall process
 - Define variance levels of compliance
 - Overview of best practices
 - Best approach to see nodules of a specific size.
 - Iterative reconstructions discussed as part of the Claim language
 - Definition of a boundary (threshold) for nodule size.
 - Set a standard for a 1cm nodule, develop a Claim, then set assumptions for larger nodules.
 - Reduction of dose (ALARA)
 - NLST papers quoted 2.5 mg
- Suggestion to follow the UPICT Protocol Template to provide a common format to the Profile.
 - RSNA Staff to circulate the latest versions of the UPICT Template Major headers outline and the UPICT Template v1.0
- The group agreed to reach out to the European NELSON study representatives for their input regarding their approach to patient placement and nodule size distribution.
- Recommendation was made to work with Mr. Avila regarding phantom use as a calibration tool.

Next steps

- The UPICT Template documents to be circulated by RSNA Staff.
- Discussion of edits to continue on the next t-con.
- Dr. Mulshine to reach out to Dr. Yankelevitz and Mr. Avila regarding technical parameters and to focus on specifications.
- Dr. Gierada to work on action items for the next t-con.
- Dr. McNitt-Gray to report on dose considerations.

- The next t-con will be **Thursday, July 25th at 3 PM (CDT)**