QIBA Volumetric CT Weekly WebEx Calls - June 30th, 2008

Discussion Overview
Possible phantoms
- FDA phantom (Myers/Petrick), anatomically specific to lungs
- UC-Davis phantom(IRAT/Boone), simple design with just spheres or more complicated one with 55 modules

Clinical Issues – develop clinical efficacy recommendations
- Clinically meaningful measurements – at what point can humans pick up size differences
- Change assessment
  - Overall survival
  - Quality of life improvement

Use existing materials (phantoms and data-RIDER) and put together in a new way, assess all platforms

Merck needs DICOM3 images, provided through a transparent/public venue, willing to financially support some activities

Agenda/action items from June 30, 2008:
A. Phantom study to get us started:

(A.1) Charles Fenimore to contact Wendy Hayes and produce draft of study design:
   Incorporate sources of variability from our team's matrix, augmented by Rick's insights (findings), as experimental factors (for example, do not hold algorithm constant as it is indicated in the matrix as a source of variability)
   Utilize phantoms as described by Nick Petrick and John Boone… both, not just one type, to get the most data and insight from the pilot
   Study design should statistically determine effects due to the factors, by prescribing how many scans to do, how many centers, etc.
   Consult Wendy Hayes to add clinical value and implications on study design
   Use Biochange 2008 as a pattern

(A.2) Dr Boone to share phantom data collected at UC Davis

(A.3) Drs Boone and Petrick coordinate with Dr Fenimore - phantom supply

(A.4) Dr Clarke NIST overview and contacts\\for phantom measurements
   Recommend how to move forward to leverage current data/and efforts and meet current specific purposes

B. Recommendation on approaching clinical efficacy: Larry Clarke, Ron Gottlieb, Larry Schwartz to talk off-line for input

Future Agenda Topics
- Review progress against action items
- Consider primary vs. metastatic disease