

**QIBA Process Committee Meeting**  
Tuesday, October 18, 2022, at 2 pm (CT)  
*Meeting Summary*

**Attendees:**

Kevin O'Donnell, MASC (Chair)  
Michael Boss, PhD (Vice Chair)

Nancy Obuchowski, PhD  
Dan Sullivan, MD

**RSNA Staff:**

Joe Koudelik  
Susan Stanfa

**Next Steps / Action Items:**

**Profile Naming Convention**

- The [Profile Editions QIBA Wiki page](#) containing details on the naming format, rationale, and usage was reviewed
  - Items added to “usage” (where / when / how Profiles might be referenced)
  - Titling Profile with BC name or biomarker, e.g., DWI (imaging method) vs. ADC (biomarker), etc.: consider whether it is possible to extract more than one measurand from the same type of scan and if that would need to be specified
- This will be the PC agenda item for Q4 CC meetings

**Review of Estimates of Precision Guidance Text**

- Discussion was continued re: *minimum* Stage 4 Trial requirements, which had been intended to be applicable across modalities
- “Site is not involved in the technical conformance testing of the profile”:
  - Stage 3 (generalizability of feasibility/practicality) and Stage 4 (generalizability of performance) may be performed by the same sites
  - Using different sites for Stage 4 would expand the Stage 3 results (a nice-to-have situation to increase feasibility testing) ... discussion to continue during the Nov 1 meeting
  - Suggestion to move this item from the minimum requirements list to a "Nice to Have" section
  - Few participating sites indicate a "marketing issue" regarding promoting Stage 3-4
  - If new sites are added, the Stage 3 result would be expanded, however, they might not understand/follow the Profile as well, weakening the Stage 4 validity; on the other hand, if requirements cannot be followed well, it may mean that the Profile needs to be corrected
  - Since Stage 3 doesn't measure performance, the biostatistics would be ok
- “Two or more independent clinical sites, though additional sites may be encouraged”:
  - “Independent” was defined as the two imaging departments are different in terms of the procedures the technologists, physicists, and radiologists follow (and training, guidelines, policies)
  - Often being different business entities tends to achieve this result due to competitive pressures and organizational realities, e.g., Duke Durham and Raleigh have different CEO/COO/Chief Staff (they are "administratively independent", but the same staff member does the QA for Everyone; all are tuned to the same practices)
- Mr. O'Donnell to send edits to staff for inclusion in the notes and circulation for PC member review
- SC review and approval would be needed prior to posting the document on the QIBA Wiki

**Next Process Committee Meeting:** Tuesday, November 1, 2022, at 2 p.m. (CT) **[1<sup>st</sup> & 3<sup>rd</sup> Tuesdays]**

**Zoom link:** <https://rsna-org.zoom.us/j/89877175730?pwd=V282c2FPSU1vdDhWejJrSGZYTVZdz09>

Meeting ID: 898 7717 5730

Passcode: Process