QIBA CT Volumetry Field Test Design (Task Force) Call #4

30 March 2015 at 11 AM CT

Notes provided by Dr. Goldmacher

In attendance:

Gregory V. Goldmacher, MD, PhD, (Co-Chair)
Lawrence Schwartz, MD (Co-Chair)
Maria Athelogou, PhD
Hubert Beaumont, PhD
Andrew Buckler, MS
Eric Perlman, MD
Nicholas Petrick, PhD
Jenifer Siegelman, MD, MPH
Daniel Sullivan, MD
Ying Tang, PhD
Amit Vasanji, PhD

RSNA:

Joe Koudelik
Julie Lisiecki

Discussion of eligibility for patients and sites on 3/30/2015:

Regarding test/re-test scans with IV contrast:

- It is too difficult to make the case that the scientific value from repeat scans with contrast overcomes the risk to patients of double dosing contrast, even if that risk is not large.
- The proposal that emerged is that we should move forward planning to do the field test without contrast, even for liver lesions and lymph nodes.
- We will also re-examine the idea of animal model scans to show the amount of variability that comes from contrast dosing issues. Combining the non-contrast measurement with animal data can define performance, and amount of variability measured from animal data can help make the case that human trials are necessary.

Inclusion/exclusion criteria:

- We may need to choose patients who have the kind of malignancy where they will need a non-contrast scan done as part of their clinical CT.
- Perhaps neuroendocrine tumors, perhaps HCC.
- Patients who have more than one tissue involved (lung and liver, liver and lymph nodes, etc.).

Institutions:

- We need institutions where CT of the abdomen and pelvis involves a non-contrast phase.
- Initially, we will ask at:
  - Columbia
  - Duke
  - Moffitt
  - University of Chicago
  - Dana-Farber

Next call: Field Test Task Force Group, April 6th – 11 am CT – to continue discussion