QIBA FDG-PET Biomarker Committee (BC) Call

03 March 2017 at 9 AM CT

Draft Call Summary

In attendance:			**RSNA**
Rathan Subramaniam, MD, PhD, MPH (co-chair)	Paul Kinahan, PhD	Anne Smith, PhD	Joe Koudelik
John Sunderland, PhD (co-chair)	Martin Lodge, PhD	Na Sun, PhD	Julie Lisiecki
Scott Wollenweber, PhD (co-chair)	Nancy Obuchowski, PhD	Mitsuaki Tatsumi, MD	
Terry Brown	Amy Perkins, PhD	Timothy Turkington, PhD	
Jerry Froelich, MD	Eric Perlman, MD	Richard Wahl, MD	
Howard Higley, PhD	Ramkumar Saptharishi, PhD	Dewen Yang, MD, PhD	

Moderator: Dr. Wollenweber

NIBIB Update (Dr. Kinahan)

- The current NIBIB contract ends in September 2017. All funds are presently allocated.
- Due to other NIBIB funding/grant obligations, additional funding for QIBA is not available for 2017-2018
- QIBA leadership is considering applying for a no-cost extension to allow for existing research work to fully utilize existing funds for more in-depth research and analysis
- Potential may exist for supplemental NIBIB grant funding for individual PIs; QIBA leadership will be exploring this option in the future
- No additional projects related to the FDG-PET Profile, are anticipated after Round-6
    - Two main activities/projects have been funded, including the groundwork study for the field test and the DRO
- Dr. Wollenweber noted that QIBA leadership has re-invigorated the Sustainability Task Force, led by Dr. Annette Schmid, and hopes that many new ideas will come forth from the group

Profile Status

- Practical implementation of technical verification for the Profile was discussed
- Discussion points included:
    - How to gather and use data to test the claims
    - Endpoints of the study
    - Timing for test-re-test studies
    - Using advanced reconstruction techniques
    - Detective response function
    - How readings are done?
    - How to document that the checklist was followed accurately?
    - How to recruit sites
    - What correlations must be considered?
- These questions must be considered for the next Profile phase – clinical confirmation
- A mechanism is needed for the analysis
- The BC is considering 5 sites with 10 patients per site as an ideal "mini- clinical trial" that would move the Profile to the next phase
- Statistical input is needed
- Another possibility may involve working with a collaborative partner (e.g. ACR), or joining an existing study

Other

- Dr. Perkins reminded the group regarding outstanding DICOM changes that were proposed to the current format description for line 956
- Dr. Kinahan will follow up with Dr. Perkins offline

Nuclear Medicine WebEx Schedule:

Mar 10: Amyloid BC

Mar 17: SPECT BC

Mar 24: NM Leadership / TBD

Apr 07: FDG-PET BC