

Application for QIBA Project Funding

| Title of Proposal: Inter-scanner/inter- phantom | -clinic comparison of reader n | lodule sizing in C1 imaging of a |
|--|-------------------------------------|---|
| QIBA Committee/Subgroup: QIBA Voli | ume CT/Group 1C | |
| NIBIB Task Number(s) which this proje | | |
| Project Coordinator or Lead Investiga | | |
| Last Name: Clunie | First Name: David | Degree(s): MBBS |
| e-mail: | Tel #: | 2 28 2 2 (2) 2 2 |
| Institution/Company: CoreLab Partne | rs | |
| Amount Requested: | | |
| Please check the primary category fo | r this proposal from among the | following: - 1.d. |
| lacksquare 1. Identification of Technica | l Characteristics and Standards | |
| a. Creation and refiner specific clinical utility | nent of protocols for image acquisi | ition, analysis, quality control, etc., for |
| 🔲 b. Phantom developme | ent and testing | |
| c. Identification and a | ssessment of intra-reader bias (1) | and variance across scanners and center |
| d. Identification and as | ssessment of inter-reader bias and | variance across scanners and centers |
| e. Other | | |
| 2. Clinical Performance Grou | undwork | |
| lacksquare a. Assessment of intra- | reader sensitivity and specificity | |
| lacksquare b. Assessment of inter-reader sensitivity and specificity | | |
| C. Other | | |
| 3. Clinical Efficacy Groundwe | ork | |
| ☐ b. Characterization of | | 'accepted-as-standard' method |
| c. Characterization of | · | |
| ☐ d. Development/merge☐ e. Other | r of databases from trials in suppo | ort of qualification |
| | | |
| 4. kesources (money and/or | people) committeed from other sou | irces. |
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Please provide a one-page summary that includes the following information:

Project Description-

Inter-scanner/inter-clinic comparison of reader nodule sizing in CT imaging of a phantom.

Primary goals and objectives-

In support of QIBA profile development, this reader study will characterize uncertainty in volume and other reader-based sizing of phantom nodules in CT imagery collected on scanners from several vendors. We will:

- 1. develop an imaging protocol that includes:
 - a standard multi-scanner branch (based on ACRIN 6678)
 - an image quality-based, device-independent branch
- 2. analyze the accuracy and precision of sizing measures for all design factors including: site/device, imaging protocol factors, nodule characteristics & reader, and
- 3. determine the minimum detectable level of change that can be achieved when measuring nodules in phantom datasets.

Deliverables-

- 1 Define the imaging protocol: the imaging protocol is required for all 5 CT imagers.
- 2 Develop a general design for the study: Draft study plan is complete. Critical review and possible modifications remain.
- 3 Execute the imaging protocol on the FDA phantom and make the imagery available for markup.
- 4 **Read the imagery** Recruit and work with a Core lab to develop and carry out a reader study.
- 5 Analyze the data develop a mature analysis of the effects of factors including CT device and imaging site on the uncertainty in phantom lesion sizing. The analysis will rely on both NIST and UCLA statisticians.

Timeline- [with intermediate measureable milestones.]

- 1. Imaging protocol delivered by 12/31/10
- 2. Final study design 1/31/2011
- 3. Imaging completed 2/28/11
- 4. Reading study completed: 4/30/11
- 5. Analysis and draft report completed: 6/30/11.

Reading of the imagery at a contract research organization (CRO)

This work element is scheduled to take 2 months, a shorter period than that needed in comparable earlier QIBA reading studies. If we cannot find a contract research lab to read on a voluntary basis, the availability of funding could accelerate the process. The estimated time for each of 5 readers to mark up 80 nodules for each of 3 sizing measures is 24 hours. For 5 readers the total estimated reading time is 120 hours (Dr. David Clunie).