


Name of Policy:	Use of Gated Radiation Therapy	 THE UNIVERSITY OF TOLEDO Effective Date: 10/1/2017 Initial Effective Date: 10/1/2017
Policy Number:	3364-134-107	
Department:	Radiation Oncology	
Approving Officer:	Chief Executive Officer, UTMC Professor & Chairman, Radiation Oncology	
Responsible Agent:	Technical Manager, Radiation Oncology	
Scope:	Radiation Oncology	
<input checked="" type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy

(A) Policy statement

In accordance with the Prescription and Physician Clinical Treatment Planning note, the Radiation Therapist shall acquire 4D CT scans and deliver gated radiation to the patient.

(B) Purpose of policy

To follow specific procedures for gated patients, as set forth by the Department Procedures. These Departmental Procedures shall include the acquisition of 4D CT scans, breath hold CT scans if required, and the delivery of gated treatments.



(C) Scope

This policy describes the use of radiation therapy that requires treatment gating to account for respiration motion.

(D) Procedure

1. The Radiation Therapist shall review the Physician's Clinical Treatment Planning Note to determine if gating is indicated.
2. At the time of the simulation, the procedure should be explained to the patient
3. CT scans should be acquired in accordance with the Departmental Procedures for the type of gated procedure being ordered (breath hold, free breathing, etc.)
4. If gating has been implemented in the treatment plan design then this will be indicated in physician prescription and on the plan document on the front page.
5. On the first day of treatment a physics staff member will verify and sign off on the gating parameters.
6. For free breathing patients, a regular CBCT may be acquired prior to treatment
7. For breath hold patients, a gated CBCT may be acquired prior to treatment

8. During treatment the patient should be observed for motion and the breath hold signal should be monitored. The gating threshold should be set to 3mm.
9. During treatment, the beam will automatically start and stop based on gating threshold and parameters.

<p>Approved by:</p> <p> _____ Changhu Chen, MD Professor & Chairman, Radiation Oncology</p> <p> _____ Daniel Barbee, RN, BSN, MBA Chief Executive Officer</p> <p><i>Review/Revision Completed By:</i> Michelle Giovanoli</p>	<p>Review/Revision Date:</p> <p>10/1/2017</p>
<p>Next Review Date: 10/1/2020</p>	
<p>Policies Superseded by This Policy:</p>	