



University of Michigan
Department of Radiation Oncology
Division of Radiation Physics

Brachytherapy Rotation I & II

Resident: _____

Rotation staff mentor/ advisor(s): Joann Prisciandaro and
Choonik Lee

Rotation Duration: 2 months each rotation

Rotation Dates: _____

A medical physics resident in radiation oncology at the University of Michigan will be expected to demonstrate the following competencies associated with brachytherapy and radiation safety. Listed below are the minimum standards.

Contents Outline

Knowledge Factors

- List of reading assignments
- Regulations
- General Brachytherapy
- HDR Brachytherapy
- LDR I-125 Eyeplaque
- Shielding
- Others

Practical Factors

- Handling radioactive material (receiving packages)
- HDR
- LDR Eyeplaque
- LDR Therasphere
- IVBT
- Treatment Planning – clinical and test cases

Case Participation

- HDR
- Eyeplaque
- Therasphere
- IVBT
- Others

1. Title 10 of the federal code of regulations (parts 19, 20, & 35)
<http://www.nrc.gov/reading-rm/doc-collections/cfr/>
2. State Regulations (MI-LARA) -
http://www.michigan.gov/lara/0,4601,7-154-11407_35791-232895--,00.html
3. AAPM Task Group #43U, “Dosimetry of Interstitial brachytherapy sources.”
4. AAPM Task Group #56, “Code of practice for brachytherapy physics.”
5. AAPM Task Group #59, “HDR brachytherapy treatment delivery.”
6. AAPM Task Group #64, “Permanent prostate seed implant brachytherapy.”
7. AAPM Task Group #129, “Dosimetry of I-125 and Pd-103 COMS eye plaques for intraocular tumors.”
8. AAPM Task Group #137, “AAPM recommendations on dose prescription and reporting methods for permanent interstitial brachytherapy for prostate cancer.” - Executive Summary
9. AAPM Report 98, “Third-party brachytherapy source calibrations and physicist responsibilities.”
10. AAPM Task Group 138, “A dosimetric uncertainty analysis for photon-emitting brachytherapy sources.”
11. AAPM Task Group 144, “Recommendations of the AAPM on dosimetry, imaging, and quality assurance procedures for Y-90 microsphere brachytherapy in the treatment of hepatic malignancies.”
12. AAPM Report No. 149, “Dose calculation formalisms and consensus dosimetry parameters for intravascular brachytherapy dosimetry,” 2007.
13. AAPM Task Group 186, “Model-based dose calculation methods in brachytherapy beyond the TG-43 formalism.”

Knowledge Factors – List of reading assignment

14. ICRU Report 38, “Dose and volume specification for reporting intracavitary therapy in gynecology”
15. ICRU Report 89, “Prescribing, recording, and reporting brachytherapy for cancer of the cervix”
16. NCRP Report No. 155, “Management of Radionuclide Therapy Patients.” – Chapter 6.
17. ABS guidelines, consensus statements, and task groups – <https://www.americanbrachytherapy.org/guidelines/>
18. C. Haie-Meder *et al.*, “Recommendations from Gynaecological (GYN) GEC-ESTRO Working Group (I): concepts and terms in 3D image based 3D treatment planning in cervix cancer brachytherapy with emphasis on MRI assessment of GTV and CTV,” *Radiotherapy and Oncology*, 74, 235-45 (2005).
19. R. Potter *et al.*, “Recommendations form gynaecological (GYN) GEC ESTRO working group (II): Concepts and terms in 3D image-based treatment planning in cervix cancer brachytherapy – 3D dose volume parameters and aspects of 3D image-based anatomy, radiation physics, radiobiology,” *Radiotherapy and Oncology*, 78, 67-77 (2006).
20. T.P. Hellebust *et al.*, “Recommendations form Gynaecological (GYN) GEC-ESTRO Working Group: Considerations and pitfalls in commissioning and applicator reconstruction in 3D image-based treatment planning of cervix cancer brachytherapy,” *Radiotherapy and Oncology*, 96, 153-60 (2010).
21. Dimopoulos *et al.*, “Recommendations from GYN GEC-ESTRO Working Group (IV): Basic principles and parameters for MR imaging within the frame of image based adaptive cervix cancer brachytherapy,” *Radiotherapy and Oncology*, 103, 113-22 (2012).
22. EMBRACE II protocol, <https://www.embracestudy.dk/UserUpload/PublicDocuments/EmbraceProtocol.pdf>.
23. Tanderup *et al.*, “Applicator reconstruction in cervix brachytherapy,” EMBRACE Appendix, <https://www.embracestudy.dk/UserUpload/PublicDocuments/Applicator%20reconstruction%20catalogue.PDF>.
24. Electronic Brachytherapy Session, 57th Annual AAPM, <http://www.aapm.org/meetings/2015AM/PRAbs.asp?mid=99&aid=28281> (view presentations).
25. AAPM Report No. 152, “The 2007 AAPM response to the CRCPD request for recommendations for the CRCPD’s model regulations for electronic brachytherapy,” 2009.
26. ABS guidelines for (<https://www.americanbrachytherapy.org/guidelines/index.cfm>):
 - a. Uveal Melanoma
 - b. Cervix cancer (part 1 and 2)
 - c. Breast
 - d. Vaginal cuff
 - e. Interstitial
 - f. HDR and LDR prostate
27. Nag, S., and N. Gupta, “A simple method of obtaining equivalent doses for use in HDR brachytherapy,” *Int J Radiation Oncology Biol Phys*, 46 (2), 507-13 (2000).
28. Review ABS Task Groups -
 - a. Cervical cancer
 - b. Breast cancer
 - c. Prostate HDR and LDR
29. IROC Houston source registry: <http://rpc.mdanderson.org/RPC/home.htm>
30. AAPM Brachytherapy Physics Summer School, 2005 conference proceedings.

31. AAPM Clinical Brachytherapy Physics, AAPM Monogram No. 38 (2017 AAPM Summer School)

Knowledge Factors – Regulations (Rotation I)
MUST BE COMPLETED WITHIN FIRST 2 WEEKS OF ROTATION I

Read and demonstrate an understanding of 10CFR19.

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Read and demonstrate an understanding of 10CFR20.

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Read and demonstrate an understanding of 10CFR35.

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Read and demonstrate an understanding the Michigan State regulations.

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Knowledge Factors – General Brachytherapy (Rotation I)

Review and discuss the IROC Houston source registry.

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Read and demonstrate an understanding of AAPM TG-43U report, including different source strength units used for brachytherapy.

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Perform TG-43 calculations for a single, double, and triple source plan.

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Read and demonstrate an understanding of AAPM TG-56 report, in particular, how brachytherapy programs are developed.

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Read and demonstrate an understanding of AAPM TG-59 report. Discuss commissioning and acceptance of remote afterloaders.

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Discuss decay, decay energies (mean energy), and half-lives of brachytherapy sources (e.g., Ra-226, Cs-137, Ir-192, Y-90, Pd-103, Cs-131, and I-125).

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Discuss the advantages and disadvantages of LDR, HDR, and PDR brachytherapy.

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Knowledge Factors – HDR Brachytherapy (Rotation I)

Read and discuss the ICRU-38 report.

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Demonstrates an understanding of GYN (cervical and endometrial), anatomy, staging, and treatment.

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Review and discuss the ABS guidelines, consensus statements, and task group reports for GYN cancers.

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Knowledge Factors – Eye plaque (Rotation I)

Read and discuss COMS protocol.

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Read and demonstrate an understanding of AAPM TG-129 report.

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Knowledge Factors – Handling Radioactive Sources (Rotation II)

Read and demonstrate an understanding of NCRP 155.

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Read and demonstrate an understanding of AAPM Report 98.

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Knowledge Factors – General Brachytherapy (Rotation II)

Read and demonstrate an understanding of AAPM TG-186 report.

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Demonstrates an understanding of breast anatomy, staging, and treatment.

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Demonstrates an understanding of prostate (GU) anatomy, staging, and treatment.

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Review and discuss the ABS guidelines, consensus statements, and task group reports for breast cancer.

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Review and discuss the ABS guidelines, consensus statements, and task group reports for prostate cancers.

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Discuss applicator reconstruction techniques for CT and MR based localization.

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Knowledge Factors – HDR Brachytherapy (Rotation II)

Read and demonstrate an understanding of the GEC-ESTRO recommendations for volume based treatment planning for cervical cancer.

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Read and demonstrate an understanding of the GEC-ESTRO recommendations for volume based treatment planning for cervical cancer.

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Review and discuss the ICRU 89 report.

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Knowledge Factors – Others (Rotation II)

Read and discuss the AAPM report 149 (IVBT).

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Read and discuss the AAPM TG-64 report (Prostate LDR).

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Read and discuss the AAPM TG-137 report (Prostate LDR).

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Read and discuss the AAPM TG-144 report (microspheres).

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Discuss electronic brachytherapy.

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Practical Factors – Handling Radioactive Sources (Orientation and Rotation I)

Receive and check in radioactive sources into inventory

Signature / Date	
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Discuss personal protection techniques and appropriate methods for storing sources (with regard to security and accountability).

Signature / Date	
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Discuss operation and appropriateness of different survey instruments.

Signature / Date	
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Perform hot lab survey and quarterly inventory. Discuss leak checks of sealed sources.

Signature / Date	
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Complete source room competency.

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Complete and demonstrate an understanding of radioactive material packaging and transportation lecture.

Signature / Date	
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Discuss the process in which sealed sources and equipment are calibrated.

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Practical Factors – HDR (Rotation I)

Observe morning QA.

Signature / Date	

Perform morning QA independently.

Signature / Date	
Signature / Date	
Signature / Date	
Signature / Date	
Signature / Date	

Participate in source exchange QA.

Signature / Date	
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Perform monthly QA.

Signature / Date	
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Perform patient survey before and after the HDR treatment.

Signature / Date	
Signature / Date	
Signature / Date	

Participate/discuss 2nd check of treatment plans.

Signature / Date	
Signature / Date	
Signature / Date	

Generate test and/or clinical GYN treatment plans (cylinder, R&T, Miami, etc.).

	Applicator Type	Reviewed by:
1		
2		
3		
4		
5		

Practical Factors – LDR Eye Plaque (Rotation I)

Generate an eye plaque treatment plan.

Signature / Date	
Signature / Date	
Signature / Date	
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Assay eye plaque I-125 seeds.

Signature / Date	
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Observe and discuss eye plaque procedure.

Signature / Date	
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Perform a post implant survey.

Signature / Date	
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Perform a post removal survey.

Signature / Date	
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Practical Factors – HDR (Rotation II)

Perform morning QA independently.

Signature / Date	
Signature / Date	
Signature / Date	
Signature / Date	
Signature / Date	

Perform/participate in annual QA.

Signature / Date	
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Review and perform a BED and EQD2 calculation.

Signature / Date	
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Generate test and/or clinical prostate treatment plans.

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Practical Factors – LDR Therasphere (Rotation II)

Calculate activity required for Therasphere treatment.

Signature / Date	
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Assay Therasphere vials before and after the infusion.

Signature / Date	
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Practical Factors – IVBT (Rotation II)

Calculate dwell times required for IVBT treatment.

Signature / Date	
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Brachytherapy Case Participation

Document participation in planning, checking, delivering, and administrative paperwork of following implants.

HDR Cylinder (single or multi-channel)

	Date	Supervisor	Note
1			
2			
3			
4			
5			

HDR Tandem and Ring/Split ring

	Date	Supervisor	Note
1			
2			
3			
4			
5			

HDR Interstitial (Prostate or Gyn)

	Date	Supervisor	Note
1			
2			
3			
4			
5			

LDR Eyeplaque

	Date	Supervisor	Note
1			
2			
3			
4			
5			

** HDR test cases are available under the patient name "\$QA_HDR, Test patient" (Reg # jip03). Instructions for use are located under the shared directory, \Physics\2010 Teaching\Physics Residents\Rotations\Brachytherapy and rad safety rotation.

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LDR Therasphere

	Date	Supervisor	Note
1			
2			
3			
4			
5			

IVBT

	Date	Supervisor	Note
1			
2			
3			
4			
5			

LDR Prostate

	Date	Supervisor	Note
1			
2			
3			
4			
5			

Others

	Date	Supervisor	Note
1			
2			
3			
4			
5			