# Positioning Bolus with a Tattoo-free Workflow

Jacob Curran



# Who am I?

- SABR and Motion Management
  Radiographer at Lincoln County Hospital
  and East Midlands Radiotherapy
  Network
- Three Varian Truebeam machines all with AlignRT Advance
- Tatooless and all Head and Neck patients treated in an open mask with SGRT for setup and monitoring

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The problem with bolus

Why bolus has always been a nightmare!

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The solution for bolus

How I think SGRT makes it significantly less of a nightmare!

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Data and examples

Comparing the old way to the new, some case studies and what's next.

# The Problem



#### Predates Tattoo-free

Bolus positioning has always been awkward.



#### Multiple Materials

Different bolus materials, some SGRT friendly, some not.



# **Increased Complexity**

As techniques grow more complex so to does the bolus.



# So what's the answer?

Bolus is difficult with tattoos so surely removing them makes it even harder?







# Postural Video



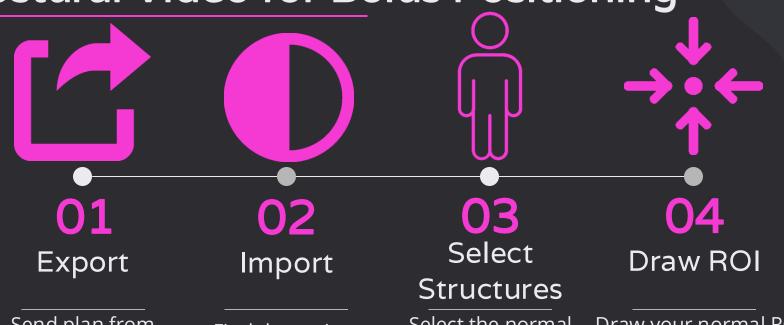
# Easy

A toddler could do it.

# Quick

Quicker than measuring from a tattoo.

# Postural Video for Bolus Positioning



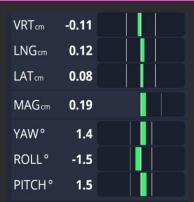
Send plan from planning system to AlignRT.

Find the patient under 'New Plans Received'.

Select the normal structures plus the bolus structure.

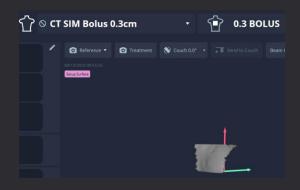
Draw your normal ROIs but also draw an ROI over the bolus structure.

# Postural Video for Bolus Positioning



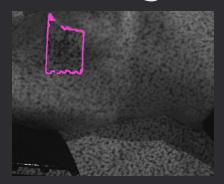
Position Patient

Follow the normal procedure to position the patient.



Switch Structure

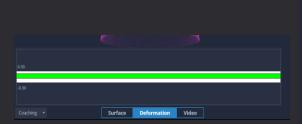
Switch over to the bolus structure.



Position Bolus

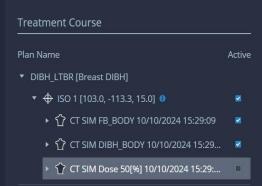
Get the bolus so it's within the pink lines, using different camera angles.

# **DIBH Workaround**



# Position Patient

Ensure patient is achieving breath hold.



### Preparation tab

Switch to preparation to deactivate the free-breathing surface.



#### SGRT Capture

Get the patient into breath hold, position the bolus and take an SGRT capture to use on subsequent fractions.

# Audit



# Retrospective Analysis

Of five patients for each bolus type with each placement method



# Three Bolus Types

3D-Printed Shaped Parrafin Generic Sheet Bolus



#### Placement Methods'

Measurements from tattoo Postural Video







# 3D-Printed

### Tattoos

Average Discrepancy (mm/°)		Discre	gest pancy n/°)
Vert	0.34	Vert	0.68
Long	0.37	Long	2.16
Lat	0.16	Lat	0.64
Yaw	0.8	Yaw	4.1
Roll	3.2	Roll	8.5
Pitch	4.1	Pitch	6.2

### Postural Video

Average		Largest	
Discrepancy (mm/°)			pancy n/°)
· , , , ,		· · ·	
Vert	0.11	Vert	0.35
Long	0.14	Long	0.22
Lat	0.07	Lat	0.31
Yaw	0.4	Yaw	1
Roll	0.8	Roll	2.4
Pitch	0.7	Pitch	1.4



# **Shaped Parrafin**

#### Tattoos

### Postural Video

Number of Fractions with 100% Bolus Coverage		
9/15		
12/20		
16/30		
25/30		
7/10		
66%		

Number of Fractions with 100% Bolus		
Coverage		
Breast	18/20	
Pelvis	20/20	
Pelvis	27/30	
H&N	30/30	
Palliative Pelvis	13/15	
Average	94%	



# **Generic Sheet Bolus**

#### **Tattoos**

Number of Fractions with 100% Bolus Coverage		
Palliative Breast	6/6	
Breast	9/15	
Palliative Pelvis	9/10	
Palliative SCF	5/5	
Palliative Pelvis	10/10	
Average	85%	

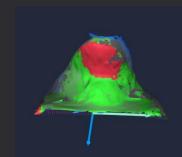
#### Postural Video

Number of Fractions with 100%			
Bolus Coverage			
Palliative	5/5		
Shoulder			
Palliative Chest	10/10		
Breast	15/15		
Pelvis	20/20		
Palliative Chest	10/10		
Average	100%		

# Air Gaps?

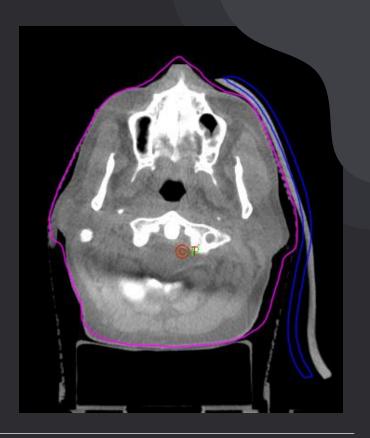


Postural video does a great job but sometimes on CBCT air gaps can be seen.



#### Deformation

After positioning the bolus, the deformation tab can highlight air gaps.



# The next step



#### **3D-Printed Mould**

A negative of the bolus is 3D-Printed to create a mould for silicone.



# AlignRT friendly Silicone

The silicone is dyed a flesh color so it can be detected by AlignRT.



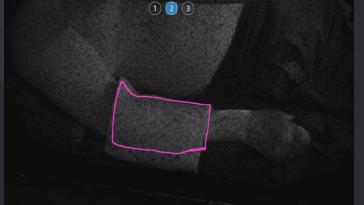
#### Postural Video

Primary positioning with postural video, if air gaps are seen deformation can be used.









# Case Study

### VMAT Right Forearm

Complex case with bolus required over anterior forearm.

#### **SGRT**

SGRT used to position the arm and the bolus.

# Any Questions?