Patient Assessment and Intent	
☐	Special Considerations for radiotherapy (e.g. pacemakers, ICDs, pumps, etc.)
☐	Previous radiotherapy treatments
Simulation	
☐	Physician directive for imaging technique, setup and immobilization (this may include: contrast, scanning orientation, immobilization device, etc.)
☐	Description of target location on physician planning directive (e.g. RUL Lung, H&N, L1-L4)
☐	Patient set up, positioning and immobilization: Appropriate and documented
☐	Image quality and usability: CT Scan Artifacts, range, FOV, etc.
☐	Motion management: 1) MD directive, 2) breath-hold parameters, 3) gating parameters, 4) 4D-CT parameters and data set
☐	Registration/Fusion of image sets (CT, PET, MRI, etc.)
☐	Patient Orientation - CT information matches patient setup
☐	Transfer and selection of image set in treatment planning system
Treatment Planning	
	Contouring Checks
☐	Target/OAR contours - e.g., discernible errors, missing slices, mislabeling, gross anatomical deviations.
☐	PTV and OAR Margin - as specified in the chart and/or per protocol
☐	Body/External contour
☐	Density overrides applied as needed (e.g., High-Z material, contrast, artifacts, etc.)
☐	Consideration of Supporting Structures (e.g., couch, immobilization and ancillary devices, etc.)
	Prescription checks (physician intent/Rx vs. treatment plan)
☐	Final plan and prescription approval by physician
☐	Prescription (with respect to standard of care, institutional clinical guidelines or clinical trial is applicable)
☐	Site and laterality (incl. medical chart to confirm laterality)
☐	Prescription vs consult note *(e.g., physician report in EMR on plans for treatment)*
☐	Total dose, dose/fractionation, number of fractions
☐	Fractionation pattern and regimen (e.g., daily, BID, Quad Shot, regular plan follow by boost, etc.)
☐	Energy, modality, technique
☐	Bolus and/or additional shielding *(e.g., eye shields, testicular shields, etc. as applicable)*
	Standard operating procedures of practice followed or correctly used
☐	Treatment Technique (e.g. 3D, IMRT, VMAT, SBRT, etc.)
☐	Delivery System *(e.g., standard linac, CyberKnife, Tomotherapy, etc. as applicable)*
☐	Beam Arrangement
☐	Beam Deliverability
☐	MU, Energy, Dose Rate, Field Delivery Times
☐	Field Size and Aperture, Bolus Utilization, Beam Modifiers (e.g., wedges, electron and photon blocks, trays, etc.)
☐	Treatment plan warnings/errors
☐	Naming - Field ID or Name, Course and Plan ID
☐	Tolerance Table
☐	Potential for Collision
☐	Setup Shifts use standard SOP
☐	Physics consult (e.g., evaluation of dose to pacemaker, previous treatment, etc.)
	Dose distribution and overall quality of the plan
☐	Target Coverage and target planning objectives
☐	Sparing of OARs and OAR planning objectives
☐	Plan conforms to clinical trial (as applicable)
☐	Structures used during optimization
☐	Physician designed apertures
☐	Dose Distribution (e.g., gradients, hot spots, etc.)
☐	Reference Points and Plan Normalization
☐	Calculation Algorithm and Calculation Grid Size
☐	Prior Radiation accounted for in plan
☐	Plan Sum (e.g., Original plus boost plans)
	Dose verification
☐	Second calculation check and/or QA performed
☐	Verification plan for patient specific QA measurement
☐	Request for in-vivo dosimetry
	Isocenter checks (documentation of isocenter location, e.g. shifts, multiple isocenters)
☐	Isocenter: Placement and consistency between patient marking and setup instructions
☐	Additional Shifts
☐	Multiple Isocenters
	Setup for image-guidance and ancillary systems
☐	Matching Instructions (e.g., 2D/2D, 3D, etc.) and MD directive for IGRT
☐	Matching Structures
☐	Reference CT
☐	Isocenter on reference image(s), 2D or 3D
☐	DRR Association and Image quality
☐	Imaging Technique and Regiment (e.g., daily, weekly, etc.)
☐	Parameters and setup for specialized devices (e.g., ExacTrac, VisionRT, RPM, etc.)
☐	Isocenter for specialized devices (e.g., VisionRT, ExacTrac, etc.)
	Task schedules
☐	Scheduling of safety-critical tasks (e.g., weekly chart checks, IMRT QA, etc.)
	Checks for a replan, adaptive plan or verification plan (i.e. original plan on new CT)
☐	Full Plan Check if New Plan Generated
☐	Old/New CT Registration
☐	Isocenter Placement
☐	Deformed or New Contours
☐	DVH comparison
☐	CTV/PTV Coverage
☐	Organs at Risk Dose Limits
Deviations	
☐	Any unexpected deviations entered into incident learning system

THE FOLLOWING SECTION IS RELEVANT FOR MULTI-VENDOR ENVIRONMENTS (TPS/OIS)

	Data transfer from TPS to a 3rd party OIS (e.g., Eclipse to MOSAIQ, Pinnacle to ARIA, etc.)
☐	Field ID or Name
☐	Dose/Fraction, fractionation pattern, treatment regimen, number of fractions
☐	Dose tracking, dose breakpoints
☐	Treatment Technique
☐	Treatment Machine
☐	Beam Arrangement
☐	Energy, gantry, collimator, couch, tolerance table, beam modifiers (e.g., wedges, trays)
☐	Field size and aperature, MLC control points
☐	MU, Dose rate, field delivery times
☐	DRRs
☐	Imaging sequence to be performed (if programmed in TPS)