

**Purpose:**

When artifacts are outside of the CT scan field of view, truncation artifacts generally occur in the images leading to inaccuracies in the CT number (HU) in the affected images. In proton therapy treatment planning, CT numbers are converted to stopping power ratios, calculated dose, beam range and range compensators for the treatment field to cover the target volumes. We have evaluated the effect of the truncation artifacts on proton dos calculation accuracy and range uncertainty for spinal fields used for cranial spinal irradiation.

**Method and Material:**

A thoracic phantom was imaged on a GE16 slice CT scanner using a standard body protocol. Two RMIBonnetissue blocks simulating patient arm/shoulder were placed outside of the scan field of view. Two sets of scans were obtained with and without the bone tissue blocks. Proton treatment plans were generated using Eclipse treatment planning system. Then, treatment plans were compared to each other to determine the differences.

**Result:**

There is an overall 2.0-3.0 HU difference in the target area due to the truncation artifacts. This creates a 2-3 mm difference in the range of the proton beam at 50% dose level between the plans with and without truncation artifacts.

**Conclusion:**

The image artifacts cause uncertainty in dose estimations in the distal edge of the treatment target. The difference between the corrected plan and the truncated plan is on the order of 2-3 mm, which is comparable to the distal margin normally used to account for range uncertainty for the spine field proton therapy treatment planning.