

**Purpose:** Development of a novel QA phantom and technique designed to evaluate the accuracy of VMAT delivered dose to the GTV when tumor motion is present.

**Materials and Methods:** We have modified the Arccheck cylindrical QA phantom for VMAT delivery by designing a dynamic insert that can be accommodated in the central cavity of the detector and dosimetrically monitored. This was achieved by the use of a custom made water equivalent sphere with 5 imbedded mosfets. This sphere was encapsulated in a lung insert that can be accommodated by both the cylindrical QA phantom AND a thorax dynamic phantom. The motion of the dynamic phantom was preprogrammed for different trajectories including prerecorded traces of lung implanted fiducials from a previous study. A 4DCT scan was performed on the static/moving target and a VMAT treatment plan was correspondingly generated. These plans were mapped and calculated on the corresponding VMAT QA phantom (static/dynamic). The mosfets and the arccheck dose measurements from the treatment delivery were compared with the expected values obtained from the TPS.

**Results:** Arccheck absolute dose analysis between measurement and calculation using  $\pm 3\%/3\text{mm}$  shows more than 98% of diodes passing for both static and dynamic phantom with and without the lung phantom insert. Mosfet static measurement showed 2% agreement with the calculated value ( $5450 \pm 120$  vs  $5250 \pm 20$  cGy). The dynamic measurement showed a larger spread than calculated ( $6900 \pm 140$  vs  $7000 \pm 250$  cGy) indicating an accentuated interplay effect between MLC motion and tumor motion.

**Conclusion:** We have developed a novel device to perform VMAT QA on moving tumors and to quantitatively estimate the dosimetric difference between the treatment plan and delivery. Our method is used to investigate a large variety of dose discrepancies including interplay effect and respiratory motion variation.