

AbstractID:9363Title:Phantom Study of Evaluating the Geometrical Accuracy of Stereotactic Radiosurgery System Using CBCT and AlignRTTM

Purpose: CBCT and AlignRT are used as secondary imaging devices to set up a phantom with a couch-mounted stereotactic system. The geometrical accuracy of the radiosurgery system is investigated with the EPID and house-made phantom. **Method and Materials:** Leksell frame with a couch-mounted setup device are used to set up a house-made phantom with 3 unknown targets. Philips large bore CT scanner and ADAC Pinnacle planning computer are used to delineate the target and isocenters are determined. The phantom with water is initially setup by using the helical scan then, CBCT is applied to apply table correction. Its movement is monitored with the AlignRT system. The differences between the table correction from the Elekta CBCT system and independent AlignRT are reviewed and found to be ± 0.02 mm. The tertiary cones are attached and portal images are taken for various gantry/table angles (according to AAPM 54 Reports). The wafers are removed with out changing position in order to get higher contrast images of the targets in EPID. Tertiary cones are attached and portal images are taken to determine the geometrical uncertainties. The images are exported to house-made software to analyze these uncertainties with $\frac{1}{2}\pi$ pixel accuracy (one pixel = 0.25 mm). **Results:** The geometrical uncertainties of the couch-mounted radiosurgery system was estimated by determining the offset between two centers of circles (from cone and target). A house-made software determined the offset over different gantry and table angles (according to AAPM 54 Report). The maximum offset was found to be 0.8 mm and average offsets are 0.5 mm ± 0.25 mm. The dosimetric effects due to the geometrical uncertainties are ± 0.5 mm ± 0.5 mm in three major axes. **Conclusion:** The phantom is very effective to estimate the geometrical uncertainty of the radiosurgery system and will be used as a monthly QA as well as before-treatment QA devices.