



Code:

**Radiation Therapy Special Case Report Template**  
**Topic: TOTAL BODY IRRADIATION**

**IDENTIFICATION:**

MRN: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**PATIENT DETAILS:**

Initials: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Date of TBI: \_\_\_\_\_

**LINK TO CURRICULUM/LEARNING OUTCOMES:**

*Include section of curriculum document and learning outcomes addressed, e.g., Radiation Oncology Physics, Learning Outcome 17.1, p.24*

Curriculum Section:	Learning Outcomes:	Page Number:

**CLINICAL SYNOPSIS:**

Tumour Site	Histological Type	TNM	and/or	Stage

**Case Summary**  
*Total body irradiation (expand)*

**Brief history**  
*Include features of history, examination and investigations relating to THIS treatment*

**Prognostic factors, including pathological features**





**MANAGEMENT PLAN:**

**Summary of overall management plan**

*Include any further assessment prior to treatment, the treatment plan (including surgery and chemotherapy) and the likely program for follow-up*

**What is the purpose of treatment?**

*Be specific to THIS patient e.g., cure, pain control, local control*

**Rationale for Radiation Therapy**

**Key management issues**

**TREATMENT DETAILS:**

**Treatment prescription**

*Include positioning, beam arrangement, modality, energy, dose/fractionation schedule*

**Normal tissues/structures**

*Specify dose volume constraints and how respecting these may impact on technique*

**Potential acute and late toxicities of treatment and likelihood of these**





**Comment on technique – alternatives and limitations**

**Plan appraisal– potential improvements and/or justification of technique used**

*Attach isodose plot(s) and/or DRRs and/or DVHs and/or photographs if this assists explanation or learning*

**REFLECTION:**

Word count guide: 100-400

**Comments on issues learned/special features of this case**

*Refer to learning outcomes for total body irradiation in the Curriculum document and in the Learning Portfolio*

**What was your direct input in the management of this patient?**

*Note: this may vary but might include initial assessment for RT, assisting with positioning and immobilisation, volumes contoured, plan viewed and discussed with Supervisor/radiation therapists (maximum 3 lines)*

**SIGN OFF:**

*The report is 'complete' when the factual components of this case have been documented correctly and the Supervisor believes the trainee has used this exercise to progress further learning. Please refer to the Assessment Guide/Criteria on the [College website](#).*

\_\_\_\_\_  
**Signature of Clinical Supervisor**

\_\_\_\_\_  
**Signature of Trainee**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Date**

