Conclusions

1. Arm posture correction prior to imaging in breast radiotherapy was found not to improve the setup based on planar x-ray images (CBCT = ground truth).

2. Surface based setup can be used to improve the initial setup, but target position should be verified using e.g. kV-MV imaging.

Methods

Results

Arm posture was outside tolerance (5 mm) in 86% of the treatment fractions.

Correcting the arm posture did not lead to any significant (p=0.86) differences in kV-MV setup errors compared to the group with no arm correction.

If patient setup had been based solely on surface scanning larger setup errors would have been observed (p<0.005).