

Positioning Checklist

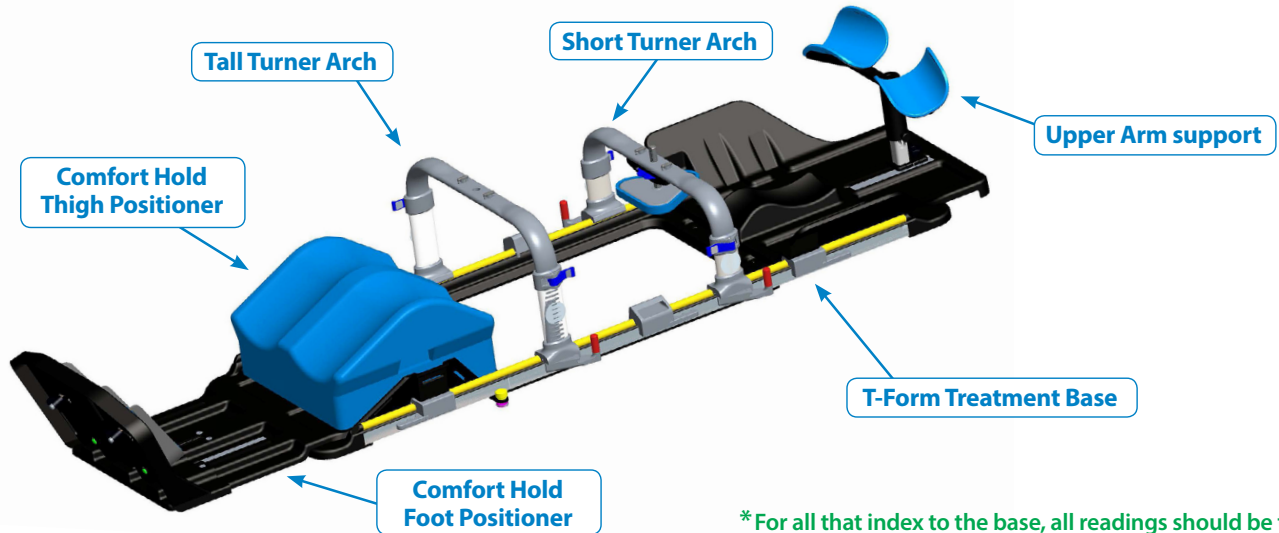
Omni V SBRT System (SBRT-4500)

Patient Name _____

Date _____

Area of RX- orientation _____

Patient I.D. _____



*For all that index to the base, all readings should be taken from reading the white dot on the side of the apparatus.

T-Form Treatment Base

Indexed to couch @ _____ & _____

SecureFit Bar TOP: A1 B1 C1 D1 E1 F1

SecureFit Bar Bottom: A2 B2 C2 D2 E2 F2

Upper Arm Support

* Index to Base: _____ mm

Vertical Height: A B C D E F

Superior to Inferior (0-15 cm): _____ cm

(Left Arm Angle) Forearm Cups (Right Arm Angle)

1 2 | 1 2

Thigh Positioner

* Index to Base: _____ mm

With Riser Without Riser

Foot Positioner

Foot Plate Position (0-16 cm): _____ cm

(Left Foot) Cup Position (Right Foot)

Straight Straight
 Splayed Splayed

Cup Padding: In Out

Thigh Strap (not pictured above)

Shin Knee Thigh

Velcro Belt @ _____ & _____

Respiratory Belt (not pictured above)

* Index to Base @ _____ mm

Velcro Belt @ _____ & _____

Pressure Gauge @ _____

Insert: Yes No

SecureVac Cushion Used

T-Vac Cushion (T-Shape, 2 Chamber)

Tri-Vac Cushion (3 Chambers)

Other: _____

Turner Arches

Short Arch

* Index to Base @ _____ mm

Vertical Index Course Adjust

(S1-S9) _____

Respiratory Plate

Fine Adjustment

(10-90) _____

Tall Arch

* Index to Base @ _____ mm

Vertical Index Course Adjust

(T1-T16) _____

Respiratory Plate

Fine Adjustment

(10-90) _____