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Dear Chief of Radiation Oncology:

As the PI of ACR Quality Research in Radiation Oncology (QRRO), formerly known as the Patterns of Care Study (PCS) in Radiation Oncology, and funded by the National Cancer Institute (NCI) since 1973, I am honored to follow our distinguished colleagues, Drs. Gerald Hanks and Simon Kramer.

PCS has conducted serial surveys of radiation oncology practice in the United States and has presented and published data about our national practice that have allowed radiation oncologists to document their widespread high quality care. Numerous initiatives are only now underway to create studies that will provide the type of data for other specialties that radiation oncologists have enjoyed for almost thirty years.

We are now conducting a national survey of current practice under the QRRO grant from the NCI. Your institution has been selected by a random sampling procedure to be visited in this upcoming survey. I hope that you will agree to participate, as so many of our colleagues have done in previous years. Our visit normally takes approximately three working days. Every effort is made not to interfere with the day to day work of your department. A Clinical Data Abstractor (CDA) from the QRRO office will visit your facility to examine records for a sample of patients treated in 2005-2007 for several disease sites. The CDA will also abstract copies of the post brachytherapy CT scan of prostate cases that match study criteria.

We understand you will need to follow the requirements set forth by your facility with regards to HIPAA and maintaining the confidentiality, privacy and protection of your patients' health information. The ACR's Institutional Review Board (IRB) has approved several sample documents to assist you with the submission for approval of this project to your Privacy Board or IRB. These documents are included with this correspondence and can also be found on the QRRO web site at www.qrro.org. The confidentiality and anonymity of all data will be scrupulously maintained in accordance with the review and approval of the project by the ACR's Institutional Review Board.

We are pleased to inform you that this QRRO survey project has been *provisionally qualified* by the American Board of Radiology (ABR) as a Practice Quality Improvement (PQI) Project toward maintenance of certification (MOC) for the diplomates.

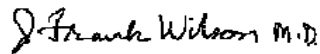
We trust this may serve as an additional incentive toward the decision for your institution to participate on the survey. As part of your participation QRRO will provide instructions and tools to assist in the diplomates' PQI effort. Based on the criteria set forth by the ABR, this may also qualify as a Quality Improvement Initiative for other accrediting agencies.

In the past, we have found it helpful to have one person at the participating institution designated as the contact person. We will try to minimize the burden on the contact person. We would appreciate it if you could give us the name and contact information of this contact person on the enclosed FAX response form.

The success of QRRO depends on the voluntary assistance of radiation oncologists throughout the United States at the facilities selected for our stratified random sample. A high participation rate is essential to assure the scientific validity of the study. I hope you will help us continue the success of QRRO by agreeing to participate. If you have any questions about the survey, please call Dr. Jean Owen at 215-574-3164. We have enclosed a response form to be FAXed to 215-940-8816 or 215-928-0153 and/or emailed to QRRO@acr-arrrs.org indicating your willingness to participate.

We look forward to hearing from you at your earliest convenience and hope that we may count upon your support of this important undertaking.

Sincerely,



J. Frank Wilson, M.D.
Principal Investigator, Quality Research in Radiation Oncology

JFW/lm

Attachments: Response Fax Form
IRB Executive Summary
IRB Request for Waiver of Authorization
IRB Access and Confidentiality Agreement
QRRO Process Brochure



Measuring Quality Indicators to Improve Patient Care