

interview technique with an independent interviewer. The focus group was conducted shortly after the completion of the first clinical placement. The themes that came from this were then used to create a survey for group B. This was also completed shortly after their first clinical placement. Additionally this survey was also undertaken by supervising qualified RTs from the clinical placements.

Results: Results: The results from the focus group A showed that the students did not fully grasp how the concepts applied to the final plan and this left them feeling very underprepared for their clinical placement and that this was reflected back to them by supervising qualified staff. Group B however, felt themselves to be much better prepared and reasonably confident to undertake clinical placement a view which was supported by the supervising radiation therapists.

Conclusion: Conclusion: The alteration of the teaching delivery had allowed the students to start the paper by thinking critically about a plan and then supporting this thinking with new knowledge. Although this was a very steep learning curve for the students at the beginning of the paper the final assessment and course evaluations also indicated that they had a much better overall grasp by the end.

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"We're all here for the patient": exploring the process of interprofessional learning

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Purpose or Objective: This qualitative study aimed to explore student perceptions and experiences of the Interprofessional Education (IPE) programme focused on long-term condition management.(1) A secondary aim was to explore the experiences of radiation therapy students who recently joined the programme.

Material and Methods: Three focus groups were conducted. All 41 students who participated in the IPE programme (dietetics; n=4, medicine; n=18, physiotherapy; n=6, radiation therapy; n=13) were invited to attend one of the two interdisciplinary focus groups. Students from radiation therapy were also invited to attend a unidisciplinary focus group. Focus groups were audio-recorded and transcribed verbatim. Data were independently analysed by two researchers within the framework of Thematic Analysis.(2) Themes were determined following parallel coding and research team verification.

Results: Thirty-four students participated in the interprofessional focus groups and 13 radiation therapy students participated in their unidisciplinary focus group. Three key themes emerged related to i) learning ii) perceived long-term professional benefits and iii) the structure and content of the programme. An additional theme emerged from the radiation therapy focus group related to how they perceived, and considered they were perceived by, the medical students.

Conclusion: Participants considered the programme to be a valuable learning opportunity which had direct relevance to their clinical careers. Listening to the insights of students is an important means of discovering what, for them, constitutes a meaningful and positive learning experience. Providing students with an opportunity to learn about each

other should be prioritised within IPE programmes in order to allow them to effectively learn with and from each other.

References:

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Margin assessment for feline and canine radiotherapy using a custom cranial immobilisation device

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Purpose or Objective: The purpose of this study was to observe the daily positioning correction errors in feline and canine radiotherapy, using a custom cranial immobilization device and KV onboard imaging. Then further assess the data for margin definition in the event of an unguided approach (without the possibility of daily imaging) for treatment use with the identical positioning device.

Material and Methods: Canine and feline patients with cranial tumors were treated using a custom made cranial immobilization device, consisting of: a plastic plate which is fixed to the couch, a detachable custom molded bite block, and a custom fitted vacuum foam cushion supporting the neck, thorax and body. The patients were imaged daily before treatment, , thereby correcting all positioning errors in lateral, vertical and longitudinal directions. The shift values were then saved to a data base for later analysis.

Results: 8 patients (3 feline, 5 canine) and a total of 93 post-imaging corrections were observed in 3 directions (lateral, vertical, and longitudinal). Upon assessment of the data, the formula:

$PTV\ Margin = 2\sigma + 0.7\sigma$ (van Herk et al.)

was used to calculate margin for the unguided approach. A result of 3mm x 2mm x 3mm (lateral, vertical, longitudinal) was found.

Conclusion: Based on the results, the margin of an unguided approach using the custom positioning system, would need to be extended from 2mm (margin used for image guided treatment planning) to 3mm in the lateral and longitudinal directions, while vertical would remain at 2mm.

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Waiting times for IMRT as a Quality Indicator: A study from a Tertiary Hospital in Saudi Arabia

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Purpose or Objective: To assess the compliance of our protocol of ≤ 10 working days (WD) for IMRT.

Material and Methods: A retrospective analysis of all cases treated between October 2010 and December 2014. Waiting