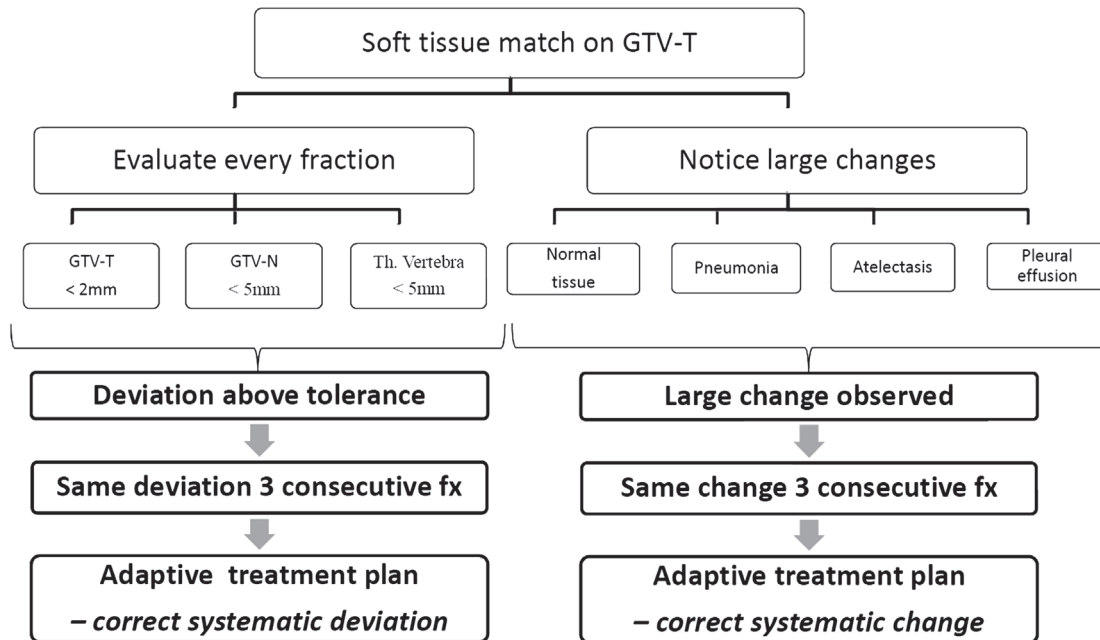
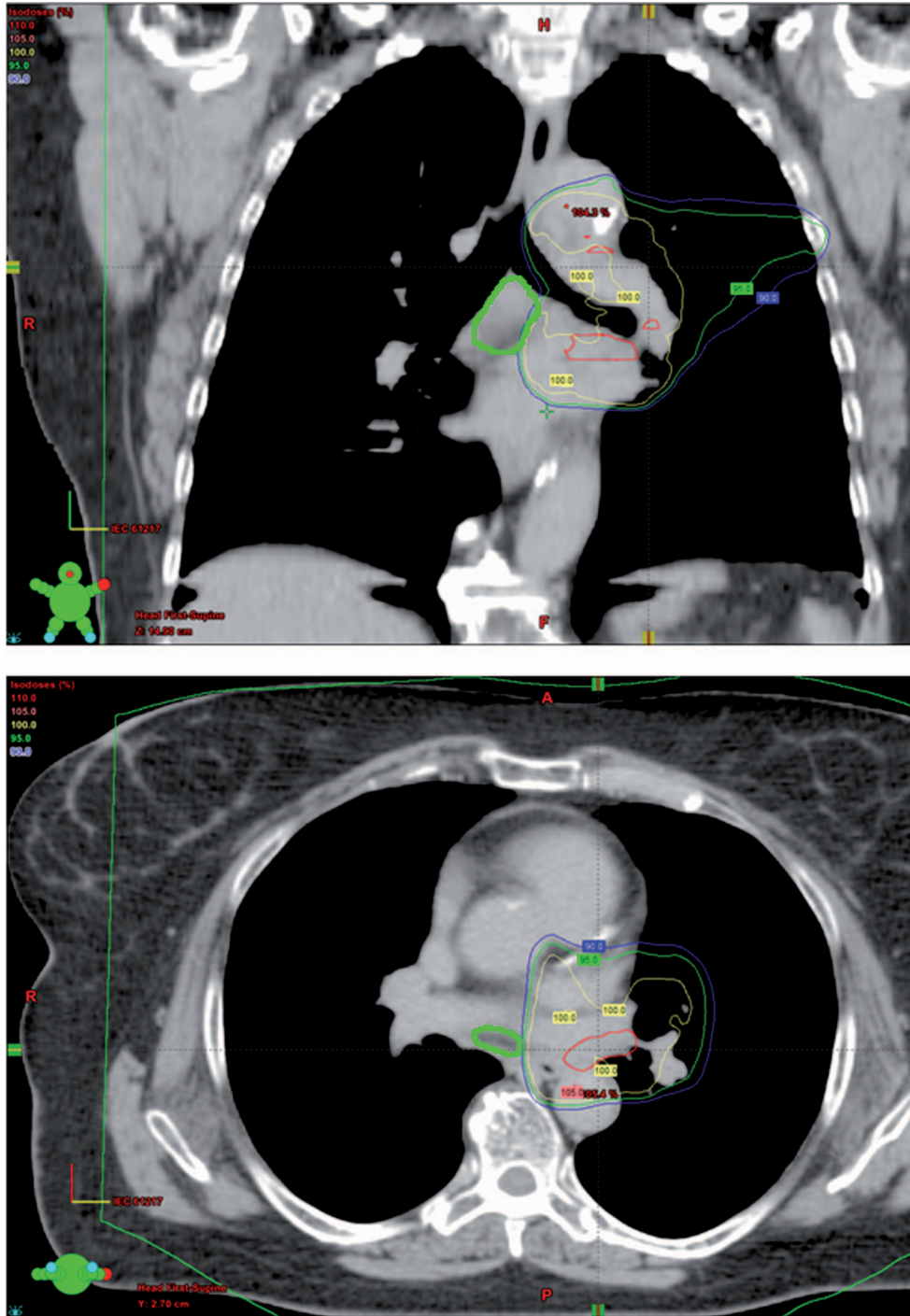


Supplementary material for Tvilum M. et al. Clinical outcome of image-guided adaptive radiotherapy in the treatment of lung cancer patients, Acta Oncologica, 2015; 54: 1430–1437.



Supplementary Figure 1. The adaptive strategy was based on soft tissue match and daily online evaluations by the Radiation Therapists (RTTs). They evaluated if the position of the tumour (GTV T), the lymph nodes (GTV N), and the thoracic vertebrae was within the preset tolerances shown in the diagram. Furthermore, the RTTs noted appearance/disappearance of atelectasis, pleural effusion or pneumonia. If any change above tolerance was seen online for three consecutive fractions, a medical physicist evaluated if the patient would benefit from a re-plan.



Supplementary Figure 2. The 95% isodose line with the GTV from the planning CT registered on the recurrence CT. Lymph node failure is delineated (green) and is located outside the previously treated lymph node-site (red) but touching the 95% isodose line.