

Case History

42 y.o female non-smoker presented with a right level II lymph node (~ 3 cm) and a right palatine tonsil mass without involvement of the base of tongue or soft palate. Tumor clinically was <2 cm. FNA of neck node showed p16+ squamous cell carcinoma. PET confirmed tonsil tumor, single neck node, and no metastatic disease.

After Multi-Disciplinary head and neck tumor board discussion, the patient underwent a TORs radical tonsillectomy procedure with selective right neck dissection of levels 2-4. Path showed a 2.1 cm tumor with a microscopic positive deep medial resection margin. No perineural or lymphovascular invasion were identified. One level II lymph node was positive (1.9 cm without ENE), the remaining 20 lymph nodes from level II, III, IV were negative

Contouring Homework

- Contour the CTV volume for the tonsil resection bed as CTVp on slice 80 and 84.
- For this part of the exercise, assume that the path on the primary is the same, but there are 3 positive level II nodes instead of 1 (all <2 cm in size). Based on this new paradigm, contour the CTV(s) for the adjuvant RT that you would offer in this scenario on slices 84, 90, and 111. You may choose to contour using CTV50, CTV54, CTV60, or CTV66 depending on the dose that you select.