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題　　目：加粗體16級
姓　　名：加粗體13級
作者單位：加粗體13級
內　　文：研究目的(加粗體11級，內文10級)
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- 電子壁報檔案製作範例，如投影片第2-3頁。
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中華民國醫事放射學會(題目：標楷體加粗16級)

姓名[1,2] XXX[2] (標楷體加粗13級)
[1]作者單位
[2]作者單位 (若有) (標楷體粗體13級)

中文範例

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研究目的 (中文標楷體加粗11級，內文10級)

發表內容涵蓋目前放射技術的新發展與醫病關係等十大主題安排如下： 一般放射診斷影像技術、特殊影像造影技術（血管攝影、超音波、電腦斷層）、磁振造影技術、醫學影像處理與品質保證、輻射安全與醫病關係、放射治療技術、核子醫學影像技術、醫事放射師臨床教育評估、非游離輻射影像技術、醫學影像新技術之發展等[1]。

材料與方法

發表內容涵蓋目前放射技術的新發展與醫病關係等十大主題安排如下： 一般放射診斷影像技術、特殊影像造影技術（血管攝影、超音波、電腦斷層）、磁振造影技術、醫學影像處理與品質保證、輻射安全與醫病關係、放射治療技術、核子醫學影像技術、醫事放射師臨床教育評估、非游離輻射影像技術、醫學影像新技術之發展等。

圖一：第57次年會暨國際醫學影像學術研討會

結果

發表內容涵蓋目前放射技術的新發展與醫病關係等十大主題安排如下： 一般放射診斷影像技術、特殊影像造影技術（血管攝影、超音波、電腦斷層）磁振造影技術、醫學影像處理與品質保證、輻射安全與醫病關係、放射治療技術、核子醫學影像技術、醫事放射師臨床教育評估、非游離輻射影像技術、醫學影像新技術之發展等。

表一：第49次年會暨國際醫學影像學術研討會

Set1	T60Gy+3D conformal 10Gy
Set2	IMRT 70Gy
Set3	T9Gy+IMRT 61Gy
Set4	T18Gy+IMRT 52Gy
Set5	T27Gy+IMRT43Gy
Set6	T36Gy+IMRT34Gy

表二：第49次年會暨國際醫學影像學術研討會

	A	B	C	D	E
Conventional dose (Gy)	-	9	18	27	36
IMRT Dose (Gy)	70	61	52	43	34
Total fractions	33	28+5	24+10	20+15	16+20
Fraction size	2	2.18	2.17	2.15	2.12
GTV Dose (Gy)	77	71.6	72	70.6	72.5
GTV BED (Gy)	74	73.9	74.2	72.0	74
GTV Dose uniform	0.2	1.11	1.3	3.53	1.85

結論

發表內容涵蓋目前放射技術的新發展與醫病關係等十大主題安排如下： 一般放射診斷影像技術、特殊影像造影技術（血管攝影、超音波、電腦斷層）磁振造影技術、醫學影像處理與品質保證、輻射安全與醫病關係、放射治療技術、核子醫學影像技術、醫事放射師臨床教育評估、非游離輻射影像技術、醫學影像新技術之發展等。

參考文獻

Lin SS, Huang HP, Yang JS et al. DNA damage and endoplasmic reticulum stress mediated curcumin-induced cell cycle arrest and apoptosis in human lung carcinoma A-549 cells through the activation caspases cascade- and mitochondrial-dependent pathway. Cancer Letters, 2008; 272: 77-90

1.吳偉愷、羅煥鉅，腫瘤增生造影劑的發展與應用，中華放射線技術學雜誌2008; 32(2): 209-216

中華民國醫事放射學會
第59次年會暨國際醫學影像學術研討會
The 59th Annual Meeting of TWSRT andt he International Conference of Medical Imaging
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英文範例

Efficacy comparison with Different Conformal Radiotherapy on NPC

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Purpose(Times New Roman, 11 Points, Bold type)

The study was designed to compare the dose distribution difference and the sparing effect of normal tissue among conventional treatment technique, 3D conformal radiotherapy and intensity modulated radiotherapy on a 52 years old nasopharyngeal cancer (NPC) victim.

Materials and Methods

The stage T1B0M0 of NPC patient was received to the study. The treatment plan was divided into six sets as shown in Table 1. According to ICRU 50 report, the clinical tumor volume (CTV) and gross target volume (GTV) for NPC should be given respectively 60Gy and 70Gy. For inverse treatment planning, the dose constrain for CTV and GTV were 60-24Gy and 70Gy, respectively. The completed treatment planning were then evaluated by dose volume histogram (DVH) and biological effect dose (BED) for their uniformity, conformal and physical dose distribution [1].

Table1 Treatment planning sets for this study

Set1	T60Gy+3D conformal 10Gy
Set2	IMRT 70Gy
Set3	T9Gy+IMRT 61Gy
Set4	T18Gy+IMRT 52Gy
Set5	T27Gy+IMRT43Gy
Set6	T36Gy+IMRT34Gy

Results

IMRT achieved higher BED and better conformal dose distribution. The critical organ likes parotid gland dose was 38Gy less than the conventional treatment technique of 67Gy. We recommend the patient should be treated by IMRT for the initial treatment planning. In light of dose distribution, CTV remained 64Gy while GTV was increased to 72Gy. Inversely, if IMRT was only used for tumor boost, it was unable to decrease the critical organ's dose, it also damaged the physical dose distribution and BED.

Table2 Efficacy comparison between different schedule of IMRT treatment combine with conventional treatment

	A	B	C	D	E
Conventional dose (Gy)	-	9	18	27	36
IMRT Dose (Gy)	7	61	52	43	34
Total fractions	6	28+	24+	20+	16+
Fraction size	3	5 18	10 17	15	20
GTV Dose (Gy)	1	71.6	72	50	22
GTV BED (Gy)	2	53.9	74.2	62	51
GTV Dose uniform	6	7.11	1.3	03	1.8

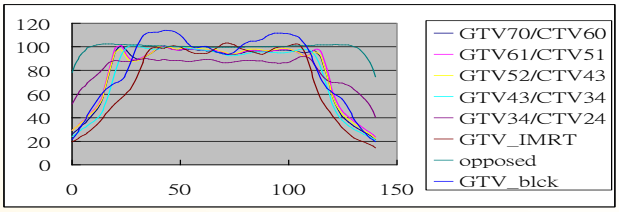

Fig1 Beam uniformity across target

Discussion

The application of IMRT for NPC patient is good way to increase GTV dose with decreasing normal tissue complications [2].

Conclusion

The application of IMRT for NPC patient is good way to increase GTV dose with decreasing normal tissue complications.

References

1. Ropper AH, Samuels MA, Klein JP. Adams and Victor's principles of neurology. 10th edition, USA, The McGraw-Hill Companies, 2014: 293-309
2. Liu CC, Chung JG, Lin SS. Amentoflavone induced cell cycle arrest and apoptosis in human breast cancer MCF-7 cells through mitochondria-dependent pathway. 5th Annual Cancer Drugs Research & Development, February 21-22, Phoenix, Arizona, USA, 2008