Supplemental Material

CT-based delineation of organs at risk in the head and neck region:
DAHANCA, EORTC, GORTEC, HKNPCSG, NCIC CTG, NCRI, NRG Oncology and TROG consensus guidelines.
C.L. Brouwer, R.J.H.M. Steenbakkers et al., Radiotherapy and Oncology 2015

Step-by-step contouring of the brachial plexus:

- Locate the C5 root at the intervertebral foramen between C4 and C5
- Locate the anterior and medius scalene muscles
- Contour the space between the two muscles from the foramina to the lateral border of the muscles. On cuts where there is no intervertebral foramen, the medial border is just against the bony vertebral body
- Continue inferiorly with same guideline down to C8 root, which exits in between C7 and T1
- Around and below the level of C8 nerve, the subclavian artery can be seen. The brachial plexus runs posterior and lateral to the subclavian at this level. Lateral border of 1st rib becomes the medial border.
- As the T1 nerve root exits between the T1 and T2 vertebral bodies, it usually takes a slightly superior route around the apex of the lung and goes laterally just inferior to the 1st rib to merge with the nerve bundle from above.
- Continue inferiorly to contour the brachial plexus along the posterior and lateral aspect of the subclavian vascular bundle until the level of the cranial border of the sternum. If the brachial plexus is wrapped around the vascular bundle on the most inferior slices, the vascular structure is included in the contour.