

Resource Summary Report

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Harvard Tumor Imaging Metrics Core Facility

RRID:SCR_012298

Type: Tool

Proper Citation

Harvard Tumor Imaging Metrics Core Facility (RRID:SCR_012298)

Resource Information

URL: <https://www.dfhcc.harvard.edu/research/core-facilities/tumor-imaging-metrics>

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Description: Core provides centralized, standardized, accurate, consistent, and timely longitudinal, multimodality anatomic, volumetric and functional tumor metrics including CT, MR, PET/CT and other nuclear medicine imaging studies to evaluate therapeutic response for patients enrolled in DF/HCC oncologic clinical trials. TIMC supports more than 30 tumor response assessment criteria including but not limited to RECIST 1.1, iRECIST, Lugano, LYRIC, IWCLL and RANO. Results of tumor metric analyses are offered on password-protected secure web-based report.

Abbreviations: Harvard TIMC, TIMC

Synonyms: Harvard University Tumor Imaging Metrics Core

Resource Type: service resource, core facility, access service resource

Availability: Open

Resource Name: Harvard Tumor Imaging Metrics Core Facility

Resource ID: SCR_012298

Alternate IDs: SciEx_11619

Old URLs: <http://www.scienceexchange.com/facilities/tumor-imaging-metrics-core>

Record Creation Time: 20220129T080309+0000

Record Last Update: 20260812T044223+0000

Ratings and Alerts

No rating or validation information has been found for Harvard Tumor Imaging Metrics Core Facility.

No alerts have been found for Harvard Tumor Imaging Metrics Core Facility.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 2 mentions in open access literature.

Listed below are recent publications. The full list is available at [RRID](#) .

Wu J, et al. (2026) Sequential involvement of hypoxia and anti-PD-1 treatment in shaping tumor-regional CD39+CD8+ T cells highlights immunotherapy-resistant features in NSCLC. Journal for immunotherapy of cancer, 14(6).

Riaz IB, et al. (2025) Empirical evaluation of artificial intelligence distillation techniques for ascertaining cancer outcomes from electronic health records. NPJ digital medicine, 8(1), 347.