

Imaging Summary

Osler Radiologists

The following are based on the latest imaging guidelines from the American College of Radiology, the Canadian Association of Radiologists, Canadian Society of Thoracic Radiology and CDC.

- CDC does not currently recommend CXR or CT to diagnose COVID. Viral testing remains the only specific method. Confirmation with viral testing still required if imaging findings are suggestive.
- There are chest CT findings which are suggestive of COVID but their sensitivity and specificities are uncertain.
 - a. In asymptomatic early presentation, up to 50% of CT chests negative.
 - b. In symptomatic patients, sensitivity ~80-97%.
 - c. In a recent study on over 400 patients with pneumonia
 - PPV 91-100%, NPV 72-93% (excluding one out of 7 radiologists)
- CT should therefore only be conducted for those patients where imaging will impact management of the condition
 - a. Assessing for complications
 - b. Ruling out alternative diagnoses, e.g. pulmonary embolus in right clinical context
- Portable CXRs should be performed when possible instead of standard CXR. CXR is not a sensitive test for COVID-19.
- A CT scanner, where possible, will be designated as the "COVID-19 CT". Where possible, two technologists working together should perform CT with one tech having patient contact and the other remaining clean. All personnel should be wearing appropriate PPE and the patient should be masked. CT will be cleaned between patients as per IPAC requirements.