# RSNA Consensus Statement on COVID-19

## Proposed Reporting Language for CT Findings Related to COVID-19

Routine screening CT for diagnosis or exclusion of COVID-19 is currently not recommended by most professional organizations or the US Centers for Disease Control and Prevention

<table>
<thead>
<tr>
<th>COVID-19 pneumonia imaging classification</th>
<th>Rationale (6-11)</th>
<th>CT Findings*</th>
<th>Suggested Reporting Language</th>
</tr>
</thead>
<tbody>
<tr>
<td>Typical appearance</td>
<td>Commonly reported imaging features of greater specificity for COVID-19 pneumonia.</td>
<td>Peripheral, bilateral, GGO* with or without consolidation or visible intralobular lines (&quot;crazy-paving&quot;) Multilocal GGO of rounded morphology with or without consolidation or visible intralobular lines (&quot;crazy-paving&quot;) Reverse halo sign or other findings of organizing pneumonia (seen later in the disease)</td>
<td><em>Commonly reported imaging features of (COVID-19) pneumonia are present. Other processes such as influenza pneumonia and organizing pneumonia, as can be seen with drug toxicity and connective tissue disease, can cause a similar imaging pattern.</em> [Cov19Cy]</td>
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<tr>
<td>Ineterminate appearance</td>
<td>Non-specific imaging features of COVID-19 pneumonia.</td>
<td>Absence of typical features AND Presence of: Multilocal diffuse, unilateral, or bilateral GGO with or without consolidation lacking a specific distribution and are non-rounded or non-peripheral. For very small GGO with a non-rounded and non-peripheral distribution</td>
<td>Imaging features can be seen with (COVID-19) pneumonia, though are non-specific and can occur with a variety of infectious and non-infectious processes. * [Cov19Cle]</td>
</tr>
</tbody>
</table>

### Atypical appearance

Uncommonly or not reported features of COVID-19 pneumonia.

### Absence of typical or indeterminate features AND Presence of: Isolated lobar or segmental consolidation without GGO Discrete small nodules (not peripherals, "tree-in-bud") Lung cavitation Smooth interlobular septal thickening with perihilar effusion

### Negative for pneumonia

No features of pneumonia No CT features to suggest pneumonia.

*"Imaging features are atypical or uncommonly reported for (COVID-19) pneumonia. Alternative diagnosis should be considered." [Cov19Ky]*

*"No CT findings present to indicate pneumonia. (Note: CT may be negative in the early stages of COVID-19.) * [Cov19Ng]*

**Notes:**

1. Inclusion in a report of items noted in parenthesis in the Suggested Reporting Language column may depend upon clinical suspicion, local prevalence, patient status as a EUI, and local procedures regarding reporting.
2. CT is not a substitute for RT-PCR, consider testing according to local recommendations and procedures for and availability of RT-PCR

*Please see (36) for specific definitions of CT findings

*GGO = ground glass opacity.

*Suggested coding for future data mining

Table 1: Proposed reporting language for CT findings related to COVID-19. Including rationale, CT findings and suggested reporting language for each category. Suggested reporting language includes coding of CT findings for data mining. Associated CT findings for each category are based upon available literature at the time of writing in March 2020, noting the retrospective nature of many reports. Including biases related to patient selection in cohort studies, examination timing, and other potential confounders.