General remarks:
- Preferred imaging technique for Covid-19: (low-dose) chest CT
- CT should not be used as a diagnostic test to replace PCR testing
- CT should not be used in asymptomatic persons
- When CT is used in specific indications for ‘triage’, this should always be followed by PCR testing
- Radiologists should be actively involved in multidisciplinary teams that decide on workflow of Covid-19 patients

Emergency Department

Clinical suspicion Covid-19, but no need for hospitalization → No imaging
Clinical suspicion Covid-19, hospitalized to triage-ward or isolation ward → Imaging depending on clinical need
Patients with ‘acute’ pathology that need urgent surgery, intubation, invasive therapies,… → Consider (low-dose) chest CT
Patients that will be hospitalized with high risk of infection, including patients with comorbidities (f.e. geriatric patients), or specific patient groups (f.e. neutropenic patients, …), … → Consider (low-dose) chest CT

Hospitalized patients Covid +
Imaging when clinical deterioration
In general, no follow-up imaging to determine regression of findings