20 April 2020

Prioritising Imaging during Coronavirus (COVID-19) pandemic

Clinical radiology plays a central role in modern medicine, informing clinical decision-making by supporting diagnosis, treatment planning, monitoring and a range of interventional treatments across primary, secondary and tertiary healthcare.

Delivery of care in clinical radiology requires close personal contact with patients who may be suspected or known cases of COVID-19 receiving care related to COVID-19 or related to other disease(s). Furthermore, delivery of care in clinical radiology in both hospital and community settings also involves patients attending health services for a period of time, which increases their risk of potential exposure to infection.

As our health systems are impacted by COVID-19, it is crucial that radiology services in both public and private settings, are prioritised according to clinical need to ensure that patients requiring urgent imaging procedures (<24 hours) are seen promptly. Where local circumstances require, the prioritisation of those patients whose imaging cannot be deferred will significantly reduce the need for patients to be in hospital or private practice, protect health care workers from potential COVID-19 infection and conserve health resources, particularly PPE. Procedures that cannot be postponed include but are not limited to procedures to save life and limb or prevent permanent disability.

Decisions to defer should be made in consultation with referrers. Radiology departments and practices should maintain robust communication with all deferred patients indicating the reason for postponement and future contact once certainty is regained. It is also important for departments and practices to continually review their waiting lists and identify those patients whose imaging is becoming more urgent.

RANZCR acknowledges that it would remain the discretion of individual health services and clinicians to determine locally appropriate decisions for imaging, based on clinical judgement, risk of geographical location and the status of COVID-19 at a local level.

Key messages:

- It is crucial that radiology services in both public and private settings, are prioritised according
 to clinical need to ensure that patients requiring urgent imaging procedures (<24 hours) are
 seen without delay.
- Decisions to image or defer should be made in consultation with referrers and on a case-bycase basis
- It remains the discretion of individual health services and clinicians to determine locally appropriate decisions for imaging.
- Procedures that cannot be postponed include but are not limited to procedures to save life and limb or prevent permanent disability.

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Date of Approval: 20 April 2020