

RSNA Statement on COVID-19 and Imaging Updated: 5/25/22

The Radiological Society of North America (RSNA) is committed to excellence in patient care through education and research.

- RSNA is committed to connecting radiologists and the radiology community to the most timely and useful COVID-19 information and resources.
- RSNA has established COVID-19 volunteer task forces to equip radiologists around the world with the tools and latest imaging research they need to navigate the COVID-19 outbreak <https://www.rsna.org/covid-19>.
- RSNA supports the COVID-19 guidance set forth by the [Centers for Disease Control and Prevention](#) and the [World Health Organization](#), including common safety precautions such as physical distancing, avoiding crowds, wearing a mask, and frequent hand washing.
- [The Centers for Disease Control and Prevention](#), the [World Health Organization](#), the [American College of Radiology](#) and the Radiological Society of North America agree that diagnosis of COVID-19 requires detection of SARS-CoV-2 RNA or antigen in respiratory specimens and do not recommend the use of chest imaging (CXR or CT) to diagnose COVID-19.
- Radiologists and other health professionals share the public's concerns about safety, especially when it comes to seeking medical care unrelated to COVID-19. In response to these concerns, the medical community is taking extra precautions to reduce the risk of virus exposure as much as possible.
- After receiving the COVID-19 vaccine, patients may develop enlarged lymph nodes in their underarms. On mammography or screening breast ultrasound images, this can mimic the appearance of serious conditions like cancer.
- Recent retrospective radiology studies are reporting a range of 2.4%-35% for axillary adenopathy (swollen lymph nodes in underarms) in women undergoing screening mammography and/or ultrasound.
 - In these studies, axillary adenopathy was detected as early as one day and as late as 71 days following vaccination. Adenopathy is reported to persist for up to 43 weeks. The initial presentation of radiologically detected adenopathy may be later, and the duration is much longer than clinically detected adenopathy.
[“Axillary Adenopathy after COVID-19 Vaccine: No Reason to Delay Screening Mammogram”](#)
[“Incidence of Axillary Adenopathy in Breast Imaging After COVID-19 Vaccination”](#)
- Given the deficit of screening mammography in 2020 secondary to COVID concerns and the negative impact on patient health for early breast cancer detection the [Society of Breast Imaging](#) (SBI) along with other organizations have revised their initial guidelines for the management of axillary adenopathy in patients with a recent COVID-19 vaccination. These guidelines refer specifically to asymptomatic, average risk women with no breast cancer history and no previously diagnosed malignancy that might involve the axillary lymph nodes such as lymphoma.
- For women scheduling a screening mammogram, the SBI no longer recommends delaying screening mammograms around COVID-19 vaccinations.

- Although most people with COVID-19 get better within weeks of illness, some people experience post-COVID conditions, also known as long COVID. CDC and experts around the world are working to learn more about short- and long-term health effects associated with COVID-19, who gets them, and why. Information about [post-COVID conditions](#) is updated by the CDC.
- [RadiologyInfo.org](#), the patient-focused website co-sponsored by RSNA and the American College of Radiology, provides information on the safety precautions imaging facilities have implemented and advises patients on how to prepare for imaging exams during the COVID-19 pandemic.

RSNA is a strong advocate for quality, safety, equity, and strict adherence to appropriateness criteria in medical imaging and radiation oncology. Through its peer-reviewed journals, education programs and annual scientific assembly, RSNA continually informs radiologists, medical physicists, radiation oncologists and other radiology professionals of the latest technologies and research developments designed to improve radiologist performance and enhance patient safety.