

Avaliar a incidência de TEP nas angiotomografias (angioTCs) de tórax de pacientes com COVID-19 confirmado, provenientes da internação ou emergência do Hospital de Clínicas de Porto Alegre (HCPA).

Métodos:

Foram analisados retrospectivamente os laudos de angioTCs de tórax para TEP realizadas no período de 15/03/2020 a 31/07/2020, em pacientes oriundos da internação ou emergência do HCPA, com COVID-19 confirmado por reação em cadeia da polimerase da transcrição reversa (RT-PCR).

Foram excluídos os exames com qualidade técnica inadequada para avaliação do TEP, pelo menos, até os ramos lobares das artérias pulmonares.

A interpretação das imagens e a elaboração dos respectivos laudos foram realizadas por médicos radiologistas do Serviço de Radiologia do HCPA.

Resultados:

Foram analisadas 105 angioTCs de tórax, das quais 4 foram excluídas por qualidade inadequada das imagens. A incidência de TEP encontrada foi de 29,7%. Contudo, é necessário mencionar que, em 14 dos exames negativos para TEP, os ramos segmentares das artérias pulmonares não puderam ser adequadamente avaliados por questões técnicas, seja por artefatos de movimento ou por opacificação inadequada dos vasos pelo meio de contraste.

Conclusão:

A incidência de 29,7% de TEP agudo nos pacientes com COVID-19 internados no HCPA foi semelhante à relatada na literatura. Tal dado serve como fundamento para que as equipes envolvidas na assistência médica tracem estratégias de prevenção do TEP e considerem, mesmo em pacientes em anticoagulação profilática e sobretudo em um contexto de piora aguda da função respiratória, a possibilidade desse diagnóstico.

**3166**

**COMPARISON BETWEEN CHEST CT FINDINGS RELATED TO COVID-19 BASED ON RSNA CONSENSUS AND RT-PCR: INITIAL EXPERIENCE ON A TERTIARY HOSPITAL IN BRAZIL.**

CAUÃ OLIVEIRA ROCHA; TÁSSIA ANDREA DURÃES PRIOSTE; CARLO SASSO FACCIN; MATEUS SAMUEL TONETTO; PEDRO GLUSMAN KNIJNIK; PIETRO WALTRICK BRUM; BRASIL SILVA NETO; TIAGO SEVERO GARCIA

HCPA - Hospital de Clínicas de Porto Alegre

Brief Introduction: The Radiological Society of North America (RSNA) proposed four categories for reporting CT findings potentially attributable to COVID-19, as known: typical, atypical, indeterminate for covid-19 and negative for pneumonia (4).

The purpose of this study is to compare the diagnostic accuracy between the CT findings according to RSNA classification with the gold standard RT-PCR assay in patients of Hospital de Clínicas de Porto Alegre (HCPA).

Methods: We retrospectively enrolled all patients admitted at HCPA due to suspected COVID-19 who underwent both RT-PCR and chest CT, from 03/13/20 to 08/18/20. The CT scans were open-label reviewed by one radiologist and classified according to RSNA categories. We evaluated 2 different scenarios. In the first one, we considered as a positive test only chest CTs classified as typical, and in the second one, those classified as typical and indeterminate. The sensitivity, specificity, positive predictive value (PPV), negative predictive value (NPV), and accuracy were calculated in both scenarios.

Results: So far, 1054 chest CTs have been reviewed and 400 (28.0%) of these patients have been diagnosed with COVID-19 confirmed by RT-PCR.

Among the 400 CT scans with RT-PCR confirmed, 283 were classified as typical, (70.8%), 104 as indeterminate (26.0%), and 13 as atypical or negative (3.3%). Considering only the typical classification as a positive test, sensitivity, specificity, positive predictive value, and accuracy were 70.8%, 97.2%, 94.0%, and 87.2%, respectively. Considering the typical and the indeterminate classification as a positive test, sensitivity, specificity, negative predictive value, and accuracy were 96.8%, 67.0%, 97.1%, and 78.3%, respectively.

Comment: The RSNA classification showed high specificity and accuracy for typical findings, greater than that reported by other authors, although sensitivity was lower (2, 3). In the second scenario, in which typical and indeterminate CT scans were considered a positive test, RSNA classification evidenced a high VPN.

Our preliminary results should be evaluated with caution, regarding some bias like open-label review by only one radiologist. However, considering the pandemic we are facing and the recommendation to perform chest CT in moderate to severe cases, we believe that the proposed classification could be considered as an auxiliary tool in the screening, early diagnosis and isolation of these patients (6).

**3170**

**IMPACTO DA PANDEMIA DE COVID-19 NA DEMANDA POR EXAMES DE IMAGEM NO HCPA**

MARIANA MENDES KNABEN; MATEUS TORRES AVELAR DE LIMA; RICARDO HENRIQUE BILYCZ CORRÊA; TÁSSIA ANDREA DURÃES PRIOSTE; ALINE LOPES MORAES; NATÁLIA BOCACCIO MAINARDI; GABRIEL PETROLI; CARLO SASSO FACCIN; TIAGO SEVERO GARCIA;

HCPA - Hospital de Clínicas de Porto Alegre

Introdução:

A pandemia da doença causada pelo novo coronavírus (COVID-19) gerou inúmeros desafios para os sistemas de saúde em 2020, observando-se alterações nas demandas por recursos, em especial no que diz respeito aos exames de imagem. Nos hospitais do Brasil, são escassos os estudos que analisam as mudanças nas demandas por exames durante a atual pandemia.

Objetivos: