The Relationship of Chest X-Ray in COVID-19 Patients and Disease Severity in Arifin Achmad General Hospital Riau

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INTRODUCTION

Coronavirus Disease 2019 (COVID-19) is caused by Severe Acute Respiratory Syndrome Coronavirus-2 (SARS-CoV-2) infection and was first reported in Wuhan, China at the end of December 2019. World Health Organization (WHO) declared COVID-19 as a pandemic on 11 March 2020.1,2 The manifestations of COVID-19 are similar to SARS-CoV and MERS-CoV which affect lung organs and also have a wide impact on other organs, such as cardiovascular, gastrointestinal tract, liver, kidneys, eyes, and skin. The most common clinical manifestations are cough, shortness of breath, fever, and sore throat. The clinical course of the patient could be without clinical symptoms, then worsen to a critical condition and become ARDS, respiratory failure, and death.3-5 Imaging plays an important role in the diagnosis and management of COVID-19. Chest X-ray is considered to be the first-line imaging modality for the initial triage of suspected COVID-19 cases. Although chest X-ray is considered insensitive for detecting pulmonary involvement in early-stage disease, they can be useful diagnostic tools for monitoring rapid progress in critically ill patients who are admitted to the intensive care unit (ICU). Chest X-ray can reflect disease severity, thus it is useful for monitoring the changes in chest X-ray during treatment.6-9

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Jurnal Respirasi, p-ISSN: 2407-0831; e-ISSN: 2621-8372.
Accredited No. 200/M/KPT/2020; Available at https://e-journal.unair.ac.id/JR. DOI: 10.20473/jr.v7.i3.2021.114-121
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