

# What is the accuracy of chest CT scan in diagnosing COVID-19 in children? What are the common chest CT scan finding in children with

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This rapid review summarizes the available evidence on the accuracy of chest CT scan in diagnosing children with COVID-19. This may change as new evidence emerges.

### **KEY FINDINGS**

**COVID-19?** 

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A poor quality study showed 86.0% (95% CI 73.8, 93.0) sensitivity and 75.9% (95% CI 67.1, 83.0) specificity of chest CT scan in diagnosing COVID-19 in children. The most commonly reported chest CT scan patterns in these patients are ground glass opacities, patchy shadows, and consolidation.

- We found only one study that directly examined the diagnostic performance of chest CT scan in diagnosing COVID-19 in children compared to RT-PCR. It showed that its sensitivity and specificity is 86.0% (95% CI 73.8, 93.0) and 75.9% (95% CI 67.1, 83.0), respectively.
- Based from 39 observational studies, the pooled sensitivity of chest CT scan in diagnosing COVID-19 in children is 69.4% (95% CI 62.5, 76.3).
- Common chest CT scan findings in children with COVID-19 include the following: 1) ground glass opacities, patchy shadows, and consolidation, 2) lower lobe involvement, and 3) unilateral lung lesions.
- An International Expert Consensus on Chest Imaging in Pediatric COVID-19, the Philippine Pediatric Society and the Pediatric Infectious Diseases Society of the Philippines recommend against the use of chest CT scan as an initial diagnostic tool for children suspected to have COVID-19.

**Disclaimer:**The aim of these rapid reviews is to retrieve, appraise, summarize and update the available evidence on COVID-related health technology. The reviews have not been externally peer-reviewed; they should not replace individual clinical judgement and the sources cited should be checked. The views expressed represent the views of the authors and not necessarily those of their host institutions. The views are not a substitute for professional medical advice.

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### **RESULTS**

### Diagnostic Accuracy of Chest CT scan

Only one study reported the accuracy of chest CT scan in diagnosing COVID-19 in children. This poor quality study was done in Wuhan, China and was published last April 2020. It showed that the sensitivity of chest CT scan in diagnosing COVID-19 is 86.0% (95% CI 73.8, 93.0), specificity is 75.9% (95% CI 67.1, 83.0), positive predictive value is 62.3% (95% CI 0.505, 0.728), and negative predictive value is 92.1% (95% CI 72.1, 84.7) [1].

## Common Chest CT Scan Findings

Thirty-nine studies (11 case series [2-12], 1 multi-center prospective cohort [13]), and 27 retrospective cohort reviews [1, 14-40]) which characterize chest CT scan findings in pediatric patients with COVID-19 were included in this review. After screening, 11 of the 39 included studies were assessed to have good quality, 22 were of fair quality, and the remaining six have poor quality.

The pooled sensitivity of these 39 studies on chest of CT scan in diagnosing COVID-19 is 69.4% (95% CI 62.5, 76.3 I<sup>2</sup>=89.89%).

The lower lobe was the most frequently reported lobe with pooled proportions from 13 studies on lower lobe involvement at 45.8% (95% CI 38.8,97.5, I<sup>2=</sup>0).

The pooled proportions from 26 studies of unilateral lung involvement is 33.1% (95% CI 26.5,39.7,  $I^2$ =68.02%). On the other hand, 27 studies reported bilateral lung lesions, with pooled proportions of bilateral lung involvement at 31.2% (95%CI 23.5, 38.8),  $I^2$ =85.15%).

The most commonly reported pattern is ground-glass opacities with a pooled proportion from 32 studies of 43.1% (95%Cl 34.5, 51.6, l²=87.14%). Patchy shadows, reported in 7 studies, have a pooled proportion of 43.8% (95%Cl 19.6, 67.9, l²= 92.66%), while consolidations have a pooled proportion of 26.2% (95% Cl 1.61, 36.3, l²=85.13%) from 15 studies. Other reported findings on the CT scan are as follows: pleural effusion, halo sign, air bronchogram, pleural thickening, crazy paving sign, reverse halo sign, interstitial abnormalities, and lymphadenopathy.

An International Expert Consensus on Chest Imaging in Pediatric COVID-19, the Philippine Pediatric Society and Pediatric Infectious Disease Society of the Philippines do not recommend the use of chest CT scan as an initial diagnostic test in children with COVID-19 [41,42].

### CONCLUSION

Studies which directly investigate the accuracy of chest CT scan in the diagnosis of COVID-19 pneumonia in children is very limited. At present, available studies on chest CT scan in children with COVID-19 are limited to cohort studies and case series.

While chest CT scan findings such as patchy shadows, ground glass opacities, and consolidation, are common in children with COVID-19, these may be similar to the imaging findings of other respiratory viral illnesses.

Limitations of these studies include small sample sizes and heterogenous populations with a wide spectrum of disease severity. Furthermore, there is a possibility of enrolment of the same participant/s in more than one of the included studies in our review.

### **Declaration of Conflict of Interest**

No conflict of interest

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**Table 1. Characteristics of included studies** 

| No. | Title/Author   | Study design                                   | Country             | Population  | Age                                  | Outcomes   | Timing of Chest CT scan  | Type of CT Scan   |
|-----|--|--|---------------------|---|--------------------------------------|--|--|---|
| 1   | Clinical analysis of 25 COVID-<br>19 infections in children  Bai, K. et al. April 2020   | Multi-center<br>retrospective<br>cohort study  | Chongqing,<br>China | 25 children with laboratory-confirmed 2091 nCoV infection by RT PCR admitted from 4 designated hospitals in Chongqing from January 19 to March 12, 2020   | 0.6-17 years<br>(mean 11.0<br>years) | Clinical data and epidemiologic history  | not stated   | not stated  |
| 2   | The early experiences of a single Italian emergency department treating COVID-19 in children  Brisca, G, et. Al                            | Single center<br>retrospective<br>cohort study | Italy               | 24 patients admitted to the emergency department at IRCSS Gaslini Children's Hospital, Genoa, Italy from February 24 to April 16, 2020  | 14 days to 18 years                  | Clinical data and course   | not stated   | Non contrast chest CT scan  |
| 3   | Clinical Characteristics of 5 covid-19 case with Non-respiratory symptoms as the first manifestation in children  Cai, X. et al.  May 2020 | Case Series                                    | Wuhan,<br>China     | 5 patients with non-<br>respiratory symptoms as<br>the first manifestation,<br>later confirmed to have<br>COVID-19 from January<br>23 to February 20, 2020 at<br>the Wuhan Children's<br>Hospital | 2 month- 5.6<br>years                | clinical features of<br>COVID19 with non-<br>respiratory symptoms as<br>first manifestation        | Day 2-9 of symptom onset   | not stated  |
| 4   | Asymptomatic SARSCOV2 infection in children: a clinical analysis of 20 cases  Chen, Jun et al. May 2020                                    | Single center<br>retrospective<br>cohort study | Shenzhen,<br>China  | 20 cases admitted to the<br>Shenzhen Third People's<br>Hospital from January 20<br>to March 4, 2020<br>7 males, 13 females  | 8 month-4 years                      | Main clinical manifestations, course of disease, treatment   | after admission  | High resolution chest CT scan   |
| 5   | Clinical features of pediatric<br>patients with COVID-19: a<br>report of two family cluster<br>cases  Ji, Li-Na et al.<br>March 2020       | Case Series                                    | Beijing,<br>China   | 2 pediatric cases admitted<br>January 25, 2020 and<br>February 3, 2020 at<br>Beinjing Tsinghua<br>Changgung Hospital<br>2 males   | 9-15 years old                       | Epidemiological features,<br>physical examinations,<br>laboratory studies, and<br>clinical outcome | Not stated   | Unenhanced chest CT scan  |
| 6   | CT image features analysis of<br>15 cases of novel coronavirus<br>infection in children<br>Kai, Feng et al.                                | Single-center<br>retrospective<br>cohort study | Shenzhen,<br>China  | 15 cases of new coronavirus infection in children diagnosed by Shenzhen Center for Disease Control and Prevention from January  | 4-14 years old                       | Chest CT examination, clinical data  | with fever: when they visit a doctor; asymptomatic: during the initial RT-PCR; then 3-5 days after admission | Unenhanced chest CT scab=n withToshiba 64-slice spiral CT 135 kV, pitch 0.8, matrix 512 x 512, FOV 320mm x 320mm, slice thickness 5.0mm, slice distance 5.0mm |

|    |   |  |                     | 16,2020 to February 6,<br>2020  |                                    |  |   |   |
|----|---|--|---------------------|---|------------------------------------|--|---|---|
| 7  | Computed tomography of the lungs in novel corona virus (COVID-19) infection  Lai, W. et al.  March 2020                                   | Case Series                                    | Guangdong,<br>China | 75 males, 10 females 2 children diagnosed with COVID 19 2 males   | 12-16 years                        | Clinical and chest CT features   | intial, repeat after 4,13,17 days   | Unenhanced chest CT scan  |
| 8  | Early CT findings of Coronavirus Disease 2019 (COVID-19) in Asymptomatic children: A single center experience  Lan, L. et al.  March 2020 | Case series                                    | Wuhan,<br>China     | all pediatric patients diagnosed with COVID19 and who underwent CT scan in Zhongnan Hospital of Wuhan University from January 20 to February 28, 2020                     | 7-13 years old                     | clinical and CT features   | on admission  | CT scan 120kV, 100-150mA,<br>slice thickness 1mm, lung<br>window -700, window width<br>1500HU   |
| 9  | Radiographic and Clinical features of Children with Coronavirus Disease (COVID-19) Pneumonia  Li, Bo et al. April 2020.                   | Single-center<br>retrospective<br>cohort study | Hubei,<br>China     | 22 patients 12 males, 10 females  | mean age 6<br>years                | Clinical data, physical<br>examination, laboratory<br>data, radiographic<br>features | not stated  | Non-enhanced Chest CT Scan<br>using a 16-row multi-detector<br>CT scanner (Siemens<br>Somatom), 120kVp, 140mA,<br>5mm collimation, 1.35:1 pitch,  |
| 10 | Clinical and CT features of the COVID19 infection: comparison among four different age groups  Li, W. et al July 2020                     | Single center<br>retrospective<br>cohort study | China               | patients with chest CT examination and positive RT PCR from January 17 to February 21, 2020 at the Fifth Affiliated Hospital of Sun Yat-sen University  5 males, 1 female | mean 5 years                       | Clinical and chest CT features   | Not stated  | Non-enhanced chest CT scan  |
| 11 | Chest computed tomography in children with COVID-19 respiratory infection  Li, Wei et al.   | Case Series                                    | Zhuhai,<br>China    | 5 children who tested positive on a reverse transcriptase- polymerase chain reaction for COVID-19 during the period January 28 to February 8, 2020  4 males, 1 female     | 10 months- 6 years                 | Clinical history, laboratory findings, and chest CT imaging                          | 2-9 days after admission/ onset of symptoms; 5-7 days after initial CT scan | Non enhanced chest CT scan  |
| 12 | Chest CT imaging characteristics of COVID-19 pneumonia in preschool children: a retrospective study  Li, Yang et al.                      | Multi-center<br>retrospective<br>cohort study  | Hubei,<br>China     | 8 preschool children with<br>laboratory-confirmed<br>COVID-19 from 2<br>hospitals from January 26<br>to February 20, 2020<br>3 males, 5 females                           | 1-5 years<br>(median 2.5<br>years) | clinical, initial chest CT imaging data  | At the time of admission  | plain CT scan using multi-<br>detector CT scanner, thickness<br>of the slices 1mm, interslice gap<br>1mm matrix 512 mm x 512mm,<br>tube voltage 80kV, current<br>200mA, pitch 0.813/HP 65.0 |

|    |   |  |                     |   |  |  |  | and dose lenth product 36-51 mGycm  |
|----|---|--|---------------------|---|--|--|--|---|
| 13 | Clinical and CT imaging<br>features of the COVID-19<br>pneumonia: Focus on<br>pregnant women and children<br>Liu, Huanhuan et. al.          | Case Series                                    | Hubei,<br>China     | 4 children with laboratory-<br>confirmed and clinically-<br>diagnosed COVID-19<br>pneumonia<br>2 males, 2 females   | 2 months to 9 years                        | Clinical and chest CT imaging data   | Median of 2 days from onset of symptoms                    | non-enhanced chest CT examination, 64 section multidetector CT scanner 120kV, automatic tube current (120-380) mA, tickness 507mm, slice interval 5mm, rotation speed 0.5s, helical pitch 1:0875:1 or 1.375:1 |
| 14 | High-Resolution Computed<br>Tomography Manifestations<br>of 5 Pediatric patients With<br>2019 Novel Coronavirus<br>Liu, Menggi et al.       | Case Series                                    | Chingqing,<br>China | 5 cases of pediatric patients with 2019 novel coronavirus 4 males, 1 female   | 7 months-13<br>years                       | Clinical and chest CT features   | Initial and follow-up 5-13 days after admisison/ treatment | Unenhanced chest high resolution CT scan  |
| 15 | Detection of COVID-19 in<br>Children in Early January<br>2020 in Wuhan, China<br>Liu, W. et al.<br>March 2020                               | Case Series                                    | Wuhan,<br>China     | 6 patients detected with<br>SARS-CoV-2 from<br>January 2 to January 8<br>2 males, 4 females   | 1 to 7 years<br>(median 3<br>years)        | Clinical data and CT findings  | Not stated   | Not stated  |
| 16 | SARS-COV2 infection in children  Lu, X. et al.  March 2020  | Cohort   | Wuhan,<br>China     | 171 chidren with confirmed SARSCOV2 infection from January 28 to Feruary 26  104 males, 67 females  | 1 day to 15<br>years (median<br>6.7 years) | epidemiologic<br>characteristics, clinical<br>features, radiologic<br>findings                                       | Not stated   | Not stated  |
| 17 | Clinical characteristics and<br>radiologic features of children<br>infected with the 2019 novel<br>coronavirus<br>Lu, Y. et al.<br>May 2020 | Case Series                                    | Guangzhou,<br>China | 9 children infected with the<br>2019-nCoV from January<br>22 to February 9, 2020<br>admitted to Guangzhou<br>Women and Children's<br>Medical Center<br>5 males, 4 females | 2 month to 5 years                         | clinical characteristics and radiologic features   | Not stated   | 64 section spiral CT system 120 kV tube 87 voltage, 50e70 mA tube current 0.5 s/rot bulb rotation 88 speed, and 0.2 mm slice thickness.   |
| 18 | A single-center, retrospective study of COVID-19 features in children: a descriptive investigation  Ma, Hujing et al.                       | Single center<br>retrospective<br>cohort study | Wuhan,<br>China     | 158 children 16 years of age and under who had a family or social history of COVID-19 exposure, recruited from January 21-February 14, 2020  28 males, 22 females         | 0.9-7 years old                            | Demographic information, clinical symptoms, laboratory result, outcome data  Chest CT without IV contrast features   | Not stated   | Chest CT without intravenous contrast was per- formed on all patients using a Siemens SOMATOM Definition AS128 or GE Optima CT 660 with a 1-mm or 0.625-mm slice thickness                                    |
| 19 | Clinical features of children<br>with SARSCOV2 infection: an<br>analysis of 115 cases<br>Ma, Yao-Ling et al.<br>March 2020                  | Single-center<br>retrospective<br>cohort study | Wuhan,<br>China     | 115 cases of outpatient<br>diagnosis and emergency<br>diagnosis of COVID-19<br>73 males, 42 females   | 51 days to 15<br>years old                 | Epidemiological contact,<br>clinical symptoms,<br>laboratory tests, and chest<br>CT imaging findings of the<br>lungs | Not stated   | Not stated  |

| 20 | Clinical and radiological characteristics of pediatric patients with COVID-19: focus on imaging findings  Mohammadi, A. et al. June 2020                                    | Single center<br>retrospective<br>cohort study | Urmia, Iran                        | 27 pediatric patients with COVID-19 pneumonia between January 23 to March 25, 2020  10 males, 17 females   | mean 4.7<br>years                                     | clinical and radiologic<br>findings of pediatric<br>patients with COVID-19<br>pneumonia | initial day of hospitalization       | Siemens SOMATOM, Toshiba<br>Alexion: low dose mode,<br>automatic tube current<br>modulation with a voltage of<br>120 kVp, matrix size of 512 ×<br>512, increment and thickness of<br>1.5–2 mm |
|----|---|--|------------------------------------|--|---|---|--------------------------------------|---|
| 21 | Clinical and epidemiological features of 36 children with coronavirus disease 2019 (COVID-19) in Zhejiang, China: an observational cohort study  Qiu, H. et al. March 2020. | Multi-center<br>retrospective<br>cohort study  | Zhejiang,<br>China                 | 36 children infected with<br>SARSCOV2 infection from<br>January 17 to March 1,<br>2020 in 3 hoospitals in<br>Zhejiang, China<br>23 males, 13 females                       | 1-16 years old  | epidemiologic data and clinical features  | Not stated                           | Not stated  |
| 22 | Novel coronavirus infection in<br>children outside of Wuhan,<br>China<br>Shen, Q. et al.<br>March 2020 (38)   | Single center<br>retrospective<br>cohort study | Hunan,<br>China                    | 9 hospitalized patients<br>diagnosed with COVID-19<br>between January 8 to<br>February 19, 2020<br>3 males, 6 females  | 1-12 years old<br>(median 8<br>years old)             | epidemiologcial, clinical,<br>laboratory, and radiologic<br>characteristics             | Not stated                           | Not stated  |
| 23 | Pediatric coronavirus disease<br>2019 (COVID-19): An insight<br>from west of Iran<br>Soltani, J. et al.<br>May 2020   | Multi-center<br>prospective<br>cohort study    | Iran                               | 30 children diagnosed as<br>probable or confirmed<br>COVID19 cases from<br>March 1 to April 15, 2020<br>in Hamadan and Kurdistan<br>province                               | 1 day to 15<br>years (mean 6,<br>median 5.5<br>years) | clinical, laboratory, radiological characteristics                                      | Not stated                           | Not stated  |
| 24 | CT features of coronavirus<br>disease (COVID-19) in 30<br>pediatric patients<br>Steinberger, S. et al.<br>May 2020  | Multi-center<br>retrospective<br>cohort study  | China                              | 30 pediatric patients with<br>laboratory confirmed<br>COVID-19 who were at six<br>centers in China from<br>January 23, 2020 to<br>February 8, 2020<br>15 males, 15 females | 10 months-18<br>years (median<br>10 years)            | clinical characteristics and<br>CT features   | Not stated, 11 had follow-up CT scan | Non-contrast chest CT scan, slice thickness of 1-5mm  |
| 25 | Clinical features of pediatric patients with coronavirus disease  Song, Wenliang et al. April 2020  | Single-center<br>retrospective<br>cohort study | Xiangyang<br>City, Hubei,<br>China | 16 children diagnosed with<br>COVID-19 at Central<br>Hospital of Xiangyang City<br>between Janurary 31,<br>2020 and March 17, 2020   | 11.5 month-<br>14 years<br>(median 8.5<br>years)      | Clinical features,<br>laboratory testung and<br>imaging                                 | on the day or 1 day after the RT-PCR | Not stated  |
| 26 | Clinical features of severe<br>pediatric patients with<br>coronavirus disease 2019 in<br>Wuhan: a single center's<br>observational  | Single-center<br>retrospective<br>cohort study | Wuhan,<br>China                    | 8 severely or critically ill<br>patients with COVID-19<br>who were treated at the<br>Intensive Care Unit,<br>Wuhan Children's Hospital                                     | 2 months to 15<br>years                               | Clinical characteristics and chest imaging results                                      | Not stated                           | Not stated  |

|    | Sun, Dan et al.  |  |   | from January 24 to February 24, 2020   |   |   |                                       |   |
|----|--|--|---|--|---|---|---------------------------------------|---|
| 27 | SARS-CoV2 infection in infants under 1 year of age in Wuhan City, China  Sun, Dan et al. June 2020   | Single center<br>retrospective<br>cohort study | Wuhan,<br>China   | 6 males, 2 females 36 infants with SARSCOV2 infection in Wuhan Children's Hospital from January 26 to March 22, 2020 22 males, 14 females                          | 2-12 months<br>(mean 6.43<br>month)                       | clinical features, chest imaging findings, laboratory test results, and clinical outcomes   | Not stated                            | Not stated  |
| 28 | Epidemiological and Clinical<br>Characteristics of 10 Children<br>with Coronavirus Disease<br>2019 in Changsa, China<br>Tan, Yu-pin et al.<br>April 2020 | Single-center<br>retrospective<br>cohort study | Changsa,<br>China   | 10 children with confirmed<br>COVID-19 from January<br>27 to March 10,2020 in the<br>First Affiliated Hospital of<br>Hunan Normal University<br>3 males, 7 females | 1-12 years<br>(mean 7<br>years)                           | Epidemiological and demographic information, signs and symptoms on admission, laboratory results, coinfection, CT findings, treatment and outcome | Not stated                            | Not stated  |
| 29 | A retrospective study of the clinical characteristics of COVID-19 infection in 26 children  Tang, Anjue et. al.  March 2020                              | Single-center<br>retrospective<br>cohort study | Shenzhen,<br>China  | 26 cases of children (>1 year old and <14 years old) In the Third People's Hospital of Shenzhen from January 16 to February 8, 2020                                | 1-13 years old  | Clinical manifestations,<br>laboratory results, chest<br>CT, treatment methods<br>and outcomes  | Not stated                            | Not stated  |
| 30 | Clinical analysis of 31 cases of 2019 new coronavirus infection in children from six provinces (autonomous regions) in northern China  Wang, Duan et al. | Multi-center<br>retrospective<br>cohort study  | Shaanxi,<br>Ningxia,<br>Hebei,<br>Henan, and<br>Shandong<br>provinces,<br>China | 9 males, 17 females 30 cases of children with 2019-nCoV infection in 21 hospitals from January 25 to February 21, 2020 15 males, 15 females                        | 6 months to 17<br>years old                               | Clinical manifestations, laboratory examination, imaging examinations, and treatment  | Not stated                            | Not stated  |
| 31 | Epidemiological and Clinical<br>Characteristics of Children<br>with Coronavirus Disease<br>2019<br>Wu, Qin et al.  | Multi-center<br>retrospective<br>cohort study  | China   | 74 pediatric cases<br>admitted to 2 hospitals<br>from January 20 to<br>February 27, 2020<br>44 males, 30 females   | Median of 6 years   | Baseline information,<br>clinical manifestations,<br>laboratory and radiologic<br>findings, treatment, and<br>outcome                             | Not stated                            | Not stated  |
| 32 | Clinical and CT features in pediatric patients with COVID-19 infection: different points from adults  Xia, Wei et al.                                    | Single-center retrospective cohort study       | Wuhan,<br>China   | 20 pediatric inpatients with<br>COVID-19 infection from<br>January 23 to February 8,<br>2020<br>13 males, 7 females  | 1 day to 14<br>days (median<br>2 years and<br>1.5 months) | Clinical and laboratory data, chest CT findings   | Initial, Advanced, Critical, Recovery | Noncontrast chest CT studies were performed on SOMATOM Definition AS 128 unit with the following parameters 12 0 Kv 100 to 150 mA, 0.5mm collimation, and 1:! Pitch |
| 33 | A follow-up study of children infected with SARS-COV2 from Western China   | Multi-center retrospective cohort study        | 4 provinces in Western China  | 32 children confirmed with SARS-CoV-2 infection  | mean 10 years   | History of exposure, demographic characteristics, laboratory  | Not stated                            | Not stated  |

| 34 | Xu, Hongmei et al.  The clinical and   | Single-center                                  | Wuhan,                      | between January 24 and<br>February 12, 2020<br>17 males, 15 females<br>82 children infected with   | 3 days-16                               | findings, radiologic findings and clinical outcomes  Symptoms, laboratory                        | Not stated  | Not stated   |
|----|--|--|-----------------------------|--|---|--|---|--|
|    | epidemiological features and<br>hints of 82 confirmed COVID-<br>19 pediatric cases age 0-16 in<br>Wuhan, China<br>Yu, Hui et al. | retrospective<br>cohort study                  | China                       | COVID-19, on February 1-<br>20, 2020 at Wuhan<br>Children's Hospital<br>51 males, 31 females   | years                                   | results, chest radiography<br>and CT findings  |   |  |
| 35 | Clinical characteristics of 34 Children with Coronavirus Disease-2019 in the West of China Zhang, Che et al.                     | Multi-center<br>retrospective<br>cohort study  | China                       | 34 admitted children with<br>laboratory-confirmed<br>SARS-CoV-2 from 4<br>hospitals during January 1<br>to February 23, 2020<br>14 males, 20 females     | 1-144 months<br>(media 33<br>months)    | Demographic information,<br>medical and exposure<br>history, CT scan,<br>therapeutic information | Not stated  | Not stated   |
| 36 | Clinical Characteristics of<br>Children with Coronavirus<br>Disease 2019 in Hubei, China<br>Zheng, Fang et. al.                  | Multi-center retrospective cohort study        | Wuhan,<br>China             | 24 children aged 1 month<br>-14 years admitted to<br>hospitals with COVID-19<br>between February 1 to<br>February 10, 2020                               | 1 month -14<br>years (media 3<br>years) | Clinical and laboratory<br>data, radiological<br>characteristics, treatments<br>and outcomes     | on admission  | Not stated   |
| 37 | Chest CT findings and clinical features of coronavirus disease 2019 in children  Zhong, Zheng et al.                             | Single center retrospective cohort study       | Hunan<br>province,<br>China | laboratory confirmed pediatric COVID19 patients 4 males, 5 females   | 3 months-12 years                       | clinical history, laboratory results, and epidemiological characteristics, CT scan results       | same day as being diagnosed<br>and on follow-up (2-3 days after<br>treatment) | Not stated   |
| 38 | Clinical features and chest CT manifestations of 2019 coronavirus in infants  Zhou, Yun et al.                                   | Single-center<br>retrospective<br>cohort study | Shenzhen,<br>China          | 9 infants (0-3 years old)<br>patients diagnosed with<br>COVID-19 from January<br>20 to February 10,2020<br>4 males, 5 females                            | 0-3 years old<br>(median age 1<br>year) | Clinical data and chest CT data  | Same day or 1 day after the throat swab                                       | 64-slice spiral CT scan: tube voltage 80-120 kV, FOV 200x200mm, reconstruction layer thickness 0.8mm |
| 39 | Clinical characteristics of a case series of children with coronavirus disease 2019 Zhu, Li et al. March 2020                    | Case Series                                    | Jiangsu,<br>China           | 10 children ahed from 1 to<br>18 years with confirmed<br>COVID19 from 3<br>designated hospitals in 3<br>cities of Jiangsu province<br>5 males, 5 females | 1 year 7<br>months to 17<br>years old   | Demographic,<br>epidemiological, and<br>clinical data  | On admission  | Not stated   |

