in asymptomatic patients. These abnormalities progress from the initial focal unilateral to diffuse bilateral ground-glass opacities and will further progress to or coexist with lung consolidation changes within 1 to 3 weeks(159). The role played by radiologists in the current scenario is very important. Radiologists can help in the early diagnosis of lung abnormalities associated with COVID-19 pneumonia. They can also help in the evaluation of disease severity, identifying its progression to acute respiratory distress syndrome and the presence of secondary bacterial infections(160). Even though chest CT is considered an essential diagnostic tool for COVID-19, the extensive use of CT for screening purposes in the suspected individuals might be associated with a disproportionate risk-benefit ratio due to increased radiation exposure as well as increased risk of cross-infection. Hence, the use of CT for early diagnosis of SARS-CoV-2 infection in high-risk groups should be done with great caution (292).

More recently, other advanced diagnostics have been designed and developed for the detection of SARS-CoV-2 (345, 347, 350-352). A reverse transcriptional loop-mediated isothermal amplification (RT-LAMP), namely, dLACO, has been developed for rapid and calorimetric detection of this