

**COVID-19: Aerosol Generating Procedure List and Guidance**

Before Performing Procedure	
Supplies	<p>PRIOR to performing aerosol generating procedures on COVID suspected/confirmed patients, obtain the following supplies from the unit supply room:</p> <ul style="list-style-type: none"> • N-95 mask • Goggles • Gown • Gloves (may obtain from patient's room)
Aerosol Generating Procedures	
Medical Procedures	<ul style="list-style-type: none"> • Endoscopy including EGD, Bronchoscopy, and Transesophageal Echocardiogram <ul style="list-style-type: none"> ○ Endoscopy in COVID patients is highly discouraged • Intubation • Cardiopulmonary Resuscitation (CPR) • Tracheostomy placement • Extubation • Fiberscope Endoscopic Evaluation of Swallow (FEES)
Bedside Care (non-intubated patients)	<ul style="list-style-type: none"> • NG / Dobhoff placement • Sputum-Induction / Sputum-Expectoration • Nasopharyngeal Swab (testing for COVID)
Bedside Care (intubated patients)	<ul style="list-style-type: none"> • Suctioning (should be treated as aerosol generating due to high risk of circuit disruption). Oral suctioning is NOT aerosol generating in intubated patient. • Trach Mask Trials • Manipulation of Ventilator Circuit (including disconnecting circuit or cuff leak testing) • Tracheal Aspiration • "mini" bronchoalveolar lavage (mBAL) • Nasopharyngeal Swab (testing for COVID)
Respiratory Support	<ul style="list-style-type: none"> • CPAP* • BIPAP* • IPPV (intermittent positive pressure ventilation) • Metered-dose Inhaler (MDI) or nebulized medication <ul style="list-style-type: none"> ○ Refer to Pharmacy policy for selection of MDI versus nebulized medication
<p>* CPAP / BIPAP should be avoided in known COVID-19 patients. If used, HEPA filter should be attached to exhalation port</p> <p>** Patient rooms should be considered "high risk" post aerosol generating procedure for 69-minutes if standard room – OR 28-minutes if negative airflow room</p>	