## Aerosol-Generating Medical Procedures, adapted from the Toronto Region Hospital Operations Committee IPAC Consensus List of Aerosol-Generating Medical Procedures (AGMP)

## **Aerosol-Generating Medical Procedures**

- Intubation
- Extubation
- Cardio Pulmonary Resuscitation (NB chest compressions and cardioversion/defibrillation are not considered AGMP; however, procedures associated with CPR, such as emergent intubation and manual ventilation are AGMP)
- Non-invasive ventilation (e.g., CPAP, BiPAP) (suggest avoid where possible)
- Manual ventilation
- High-flow oxygen (i.e., AIRVO, Optiflow, not 5L oxygen by nasal prongs) (suggest avoid where possible)
- Open suctioning (e.g. "deep" insertion for naso-pharyngeal or tracheal suctioning, not inclusive of oral suction) (suggest avoid where possible)
- Bronchoscopy (suggest avoid where possible)
- Induced sputum (e.g. inhalation of nebulized saline solution to liquify and produce airway secretions, not natural coughing to bring up sputum) (suggest avoid where possible)
- Large volume nebulizers for humidity (suggest avoid where possible)
- Autopsy
- Nasopharyngoscopy
- Oral, pharyngeal, transphenoidal and airway surgeries (including thoracic surgery and tracheostomy insertion) (tracheostomy should be avoided if possible).
- High frequency oscillation ventilation (suggest avoid where possible)
- Needle thoracostomy

## Not Considered Aerosol-Generating Medical Procedures

- Collection of nasopharyngeal or throat swab
- Ventilator circuit disconnect
- Chest compressions
- Chest physiotherapy
- Chest tube removal or insertion (unless in setting of emergent insertion for ruptured lung/pneumothorax)
- Coughing, expectorated sputum, sneezing
- Oral suctioning
- Oral hygiene
- Gastroscopy, colonoscopy, ERCP
- Laparoscopy (gastrointestinal/pelvic)
- Endoscopic retrograde cholangiopancreatography
- Cardiac stress tests
- Caesarian section or vaginal delivery of baby done with regional anaesthesia
- Any procedure done with regional anaesthesia
- Electroconvulsive therapy (ECT)
- Transesophageal echocardiogram (TEE)
- Nasogastric/nasojejunal tube/gastrostomy/gastrojejunostomy/jejunostomy tube insertion
- Bronchial artery embolization
- Chest physiotherapy (outside of breath stacking)
- Oxygen delivered at less than or equal to 6 liters per minute by nasal prongs and less than or equal to 15 liters per minute by Venturi masks and non-rebreather masks
- Intranasal medication administration such as naloxone

**NOTE**: In some cases a procedure may be listed an non-AGMP, but WRH has recommended a higher level of PPE (e.g. nasopharyngeal swab collection). **Refer to specific WRH Care guidelines**. For non-AGMP there is no need for a room to sit for any period of time to clear airborne particles or aerosols from the room.

Reference: <u>https://www.entcanada.org/wp-content/uploads/PublicHealthOntario-covid-19-aerosol-generation-coughs-sneezesApr-12.pdf</u>