Toronto – GTA – Hamilton – London Regional Hospital Infection Control

Consensus List of Aerosol-Generating Medical Procedures (AGMP) that Require Airborne(N95) + Droplet + Contact Precautions for Symptomatic Suspected/Confirmed COVID-19 cases

Aerosol-Generating Medical Procedures**

- Intubation -protected protocol in place
- Extubation
- Code Blue protected protocol in place
 - (NB CPR itself is no longer considered AGMP; however, procedures associated with CPR, such as emergent intubation and manual ventilation are AGMP)
- Non-invasive ventilation (e.g., CPAP, BiPAP)
- Manual ventilation
- High frequency oscillation ventilation/jet ventilation
- High-flow oxygen (i.e., AIRVO, Optiflow)
- Open suctioning (e.g. "deep" insertion for naso-pharyngeal or tracheal suctioning, not inclusive of oral suction)
- Bronchoscopy protected protocol in place
- Induced sputum (e.g. inhalation of nebulized saline solution to liquify and produce airway secretions, <u>not</u> natural coughing to bring up sputum)
- Large volume nebulizers for humidity
- Chest tube insertion for trauma (where air leak likely)
- Autopsy
- Nasopharyngoscopy
- Oral, pharyngeal, transphenoidal and airway surgeries (including thoracic surgery and tracheostomy insertion).
- Breath stacking

** only perform if medically indicated

Not Considered Aerosol-Generating Medical Procedures

- Collection of nasopharyngeal or throat swab
- Ventilator circuit disconnect
- Chest tube removal or insertion (unless in setting or emergent insertion for ruptured lung/pneumothorax)
- Coughing
- Oral suctioning
- Oral hygiene
- Gastroscopy or Colonoscopy
- Laparoscopy (GI/pelvic)
- ERCP
- Cardiac stress tests
- Caesarian section or vaginal delivery of baby done with epidural
- Any procedure done with regional anesthesia
- 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 as more than 6L by nasal prongs, venturi/venti masks, HiOx masks, non-rebreather masks

^{*}Unknown risk: High frequency oscillation ventilation and needle thoracostomy

List of Organizations that approve this consensus:

Children's Hospital of Eastern Ontario

Correctional Service Canada

Georgetown University

Halton Healthcare

Hamilton Health Sciences

Health Care Practitioners

Humber River Regional Hospital

Joseph Brant Hospital

Lakeridge Health

London Health Sciences Centre

Mackenzie Health

Markham Stouffville Hospital

McMaster Children's Hospital

North York General Hospital

Queen's University

Queensway Carleton Hospital

Royal Victoria Regional Health Centre

Sault Area Hospital

Scarborough Health Network

Sinai Health System

St. Joseph's Healthcare Hamilton

St. Joseph's Healthcare London

Sunnybrook Health Sciences Centre

The Hospital for Sick Children

The Ontario Agency for Health Protection and Promotion

Toronto East General Hospital

Trillium Health Partners

UHN

Unity Health Toronto

University of Toronto

William Osler Health System