



Aerosol Generating Medical Procedures (AGMP) List

Decision making about appropriate PPE selection requires use of the SHA AGMP Risk Stratification Algorithm (attached). An N95 respirator is required when AGMP procedures are performed on CoVID-19 positive or high risk patients. [Routine Practices](#) should be followed for AGMP procedures performed on low risk or COVID-19 negative patients.

AGMP	Unclear AGMP Potential	Not AGMP
<ul style="list-style-type: none"> ✓ Intubation ✓ Extubation ✓ Code Blue ✓ Non-invasive ventilation (e.g., CPAP, BiPAP) ✓ Manual 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) (suggest avoid where possible) ✓ Bronchoscopy ✓ Induced sputum (e.g. inhalation of nebulized saline solution to liquefy and produce airway secretions, <u>not</u> natural coughing to bring up sputum) ✓ Chest tube insertion for trauma (where air leak likely) or tension pneumothorax ✓ Autopsy ✓ Nasopharyngoscopy ✓ Oral, pharyngeal, transphenoidal and airway surgeries (including thoracic surgery and tracheostomy insertion) ✓ Breath stacking ✓ Cough assist device ✓ High Frequency Ventilation 	<p><i>The following situations require risk stratification of the patient (refer to SHA Risk Stratification Algorithm*). In intermediate or high risk of COVID-19, treat as AGMP.</i></p> <ul style="list-style-type: none"> • Ventilator circuit disconnect (assuming filter in place) • Gastroscopy • ERCP • Transesophageal Echocardiogram (TEE) • Nebulization 	<ul style="list-style-type: none"> ✗ Collection of nasopharyngeal or throat swab ✗ Chest tube removal or insertion (unless in setting or emergent insertion for ruptured lung/pneumothorax) ✗ Coughing ✗ Oral suctioning ✗ Oral hygiene ✗ Colonoscopy ✗ Laparoscopy (GI/pelvic) ✗ Cardiac stress tests ✗ Caesarian section or vaginal delivery of baby done with epidural ✗ Any procedure done with regional anesthesia ✗ Nasogastric/nasojenjunal tube/gastrostomy/gastrojejunostomy/ jejunostomy tube insertion ✗ Bronchial artery embolization ✗ Chest physiotherapy (outside of breath stacking, cough assist or deep suctioning) ✗ Supplemental O2 up to 15L/min – can include nonrebreather and venturi mask delivery ✗ Compression only CPR ✗ AED use

* SHA AGMP Risk Stratification Algorithm can be found on page 2.



SHA AGMP Risk Stratification Algorithm

