

Directions on Aerosol-Generating Medical Procedures (AGMPs)

| Table A: AGMPs where an N95 mask is always required |
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| N95 to be used for duration of AGMP only then resume previous level of precautions¹ |
| <ul style="list-style-type: none"> • All Code Blues (where AGMP required e.g. cardiopulmonary arrest. Note: compressions² alone is not considered an AGMP) • Non-invasive ventilation for duration of therapy (e.g., CPAP, BiPAP, AIRVO, Optiflow) <ul style="list-style-type: none"> ○ Non-PUI or non-COVID-19 patients (single room, or may use curtain where single room not available) ○ PUI or COVID-19 patients (single room, preferably negative pressure) • The act of intubation <u>in all care areas</u>, then resume droplet and contact precautions for ongoing care • High frequency oscillation ventilation/jet ventilation • Dental work with high speed drilling • Bronchoscopy • Induced sputum (e.g. inhalation of nebulized saline solution to liquify and produce airway secretions, <u>not</u> natural coughing to bring up sputum) |

| Table B: AGMPs where an N95 mask is only required if patient is on droplet and contact precautions |
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| N95 to be used for duration of AGMP then resume droplet and contact precautions¹ |
| <ul style="list-style-type: none"> • Extubation • Open suctioning (e.g. “deep” insertion for naso-pharyngeal or tracheal suctioning, <u>not</u> inclusive of oral suction) • Tracheotomy/tracheostomy procedures (insertion/removal/decannulation, <u>not</u> routine trach care with inner cannula change) • Use of mechanical cough-assist device • Chest tube insertion for trauma (where air leak likely) • Large volume nebulizers for humidity (e.g., trach mask with cool humidity set up) • Manual ventilation (when unable to maintain full seal) • Autopsy (when on droplet and contact precautions at time of death) • Nasopharyngoscopy, laryngoscopy • Oral, pharyngeal, transphenoidal and airway surgeries (including thoracic surgery and tracheostomy insertion) |

¹ Conservation strategies for N95 masks may apply if further AGMPs are anticipated.

² Should a staff member provide compressions alone, without an AGMP occurring they may do this without an N95. Once an AGMP is planned as part of care all staff in area must don an N95 prior to and while the AGMP is occurring.

NOTE: As always, healthcare workers must perform a risk assessment prior to each patient interaction and select PPE accordingly.

FOR YOUR REFERENCE: A list of procedures that are not considered AGMPs accessed [here](#) (p. 3)