

Government and CSP guidance on Aerosol Generating Procedures (AGPs)

The Government guidance on the interventions classed as AGPs is currently under review. Previous government guidance listed the following as AGPs:

- Intubation, extubation and related procedures such as manual ventilation and open suctioning
- Tracheotomy and related procedures
- Bronchoscopy surgery and post-mortem procedures involving high-speed devices
- Non-invasive ventilation (NIV)
- High-frequency oscillating ventilation (HFOV)
- High flow nasal oxygen (HFNO)
- Induction of sputum

After seeking expert clinical opinion, the CSP advises that additional physiotherapy interventions are potentially AGPs. These include:

- Manual techniques that may trigger a cough and the expectoration of sputum e.g. expiratory vibrations, percussion, manual assisted cough
- Use of positive pressure breathing devices e.g. IPPB; MI-E
- Intra/extra pulmonary high frequency oscillation devices e.g. The Vest, MetaNeb, Percussionaire
- PEP and oscillating PEP devices
- BubblePEP
- Open suctioning, including nasopharyngeal or oropharyngeal suction
- Manual hyperinflation (MHI)
- Saline instillation via and open circuit / endotracheal tube
- Inspiratory muscle training, particularly if used with patients who are ventilated and disconnection from a breathing circuit is required
- Diagnostic interventions that involve the use of video laryngoscopy that can result in airway irritation and coughing

Sources:

1. [Coronavirus information for physiotherapists poster](#)
2. [Physiotherapy Management for COVID-19 in the Acute Hospital Setting: Recommendations to guide clinical practice](#)