

Bronchoscopy in the Era of COVID-19

Providing Timely Care. Minimizing Exposures.



Indications

- Emergent/Urgent
 - Urgent airway intervention (massive hemoptysis, foreign body aspiration)
 - Cancer-related (new lung mass, staging)
 - Infection in an immunocompromised host
- Non-urgent
 - Cough
 - Infection in a non-immunocompromised host
 - Chronic infection or lung disease (MAI, ILD)



Bronchoscopy in Suspected or COVID +

- Most experienced (limited number) team
- Standard PPE plus N95 or PAPR in pre-procedure, procedure, and recovery areas
- Negative pressure room for all phases of care
- Closed door policy with HEPA filter
- Consider use of disposable bronchoscopes
- Terminal clean of utilized rooms



COVID-19 Testing

- Testing 24 to 72 hours before procedure
- Positive for COVID-19
 - If emergent/urgent, proceed with bronchoscopy
 - Otherwise delay procedure 30 days
- Previously confirmed COVID-19
 - No additional testing indicated
 - Delay procedure 30 days after initial positive test unless emergent/urgent



Bronchoscopy in COVID -

- Standard PPE plus N95 during bronchoscopy
- Standard PPE in pre-procedure and recovery areas
- Negative pressure room for bronchoscopy