<table>
<thead>
<tr>
<th>Bronchoscopy in the Era of COVID-19</th>
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<tbody>
<tr>
<td>Providing Timely Care. Minimizing Exposures.</td>
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### 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)

### 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 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

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

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**CHEST Bronchoscopy Domain Task Force**