



Nasal endoscopy and laryngoscopy examination of ENT patients

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This applies to outpatient and ward examinations. The same precautions apply to examination of the oral cavity and anterior rhinoscopy as they can also generate droplet spread and viral transmission.

Everybody performing ENT endoscopy knows this can cause droplet spread and aerosol generation due to sneezing and coughing despite Public Health England (PHE) not listing flexible or rigid endoscopy as an Aerosol Generating Procedure (AGP).

ENTUK is of the opinion that AGP level of protection is required and proportional to the risk.

1. Make sure endoscopy is absolutely necessary for management of the patient, for example patients with a significant risk of cancer or airway obstruction.
2. Consider whether to use or avoid topical decongestant and local anaesthetic solution to reduce chances of sneezing and coughing during examination. If necessary, use pledgets of cotton wool soaked in solution rather than a spray.
3. Wear theatre clothes (scrubs) and full PPE disposable gloves, gown, face mask, visor and hair protection.
 - a) Gloves – disposable, changed for each patient with appropriate hand washing in-between.
 - b) Gowns – minimum AAMI Level 2 gown (minimal to low fluid barrier protection).
 - c) masks – **ENTUK advises FFP3 masks for endoscopy examination.** Normal surgical masks offer only limited protection against coronavirus. FFP2 has 94% filtration percentage and maximum 8% leakage to inside. FFP3 has 99% filtration percentage and 2% leakage to inside. USA has different standards (e.g. N95 filters = 95%). FFP2 may be considered if just taking a history and not examining patient with endoscope. Reusable respirators have filters which need changing every 3-8 hours, according to conditions. **Fit testing of masks is compulsory** and training must be provided by the hospital. PHE guidance and YouTube videos may provide education in advance of fit testing.
 - d) eyes – **must be protected with full face visor or goggles.** These are an important portal of entry for viral particles.
 - e) disposable theatre hat.
4. **Endoscopy should be carried out by video monitoring** rather than use of eyepiece.

5. Removal of PPE is a high-risk moment of the procedure and great care must be taken not to contaminate self or others during this process.

6. In a known case of COVID-19 infection, the highest-level protection has to be taken, using full respirator, negative pressure room, reduction of personnel, etc.

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