

Advice on how to minimise risk aerosol generation during apnoea testing

- During the COVID-19 pandemic it is essential to ensure safety from cross infection during an aerosol generating procedure (AGP).
- While the apnoea test for diagnosing death using neurological criteria does not meet the specific [PHE definition of an AGP](#) there is enough in common with other airway interventions to suggest the apnoea test is best considered an AGP.

Steps to minimise risk aerosol generation during apnoea testing

- 1. Follow local PPE infection control guidance in local ICU for an aerosol generating procedure.**
- 2. Turn off ventilator**
- 3. Clamp endotracheal tube ^a**
- 4. Attach Mapleson C with an attached HMEF with oxygen off**
- 5. Unclamp endotracheal tube**
- 6. Turn on oxygen**
- 7. Perform apnoea test**
- 8. Turn off oxygen**
- 9. Clamp endotracheal tube ^a**
- 10. Reattach ventilator**
- 11. Unclamp endotracheal tube**
- 12. Turn on ventilator and carry out a recruitment manoeuvre**

Note

- a Repeat clamping has been associated with delamination of endotracheal tubes and subsequent complete obstruction and need for reintubation in both the UK and France. If clamping considered necessary, proceed with care.

Guidance on behalf of the Clinical Leads for Organ Donation represented on the National Organ Donation Committee.