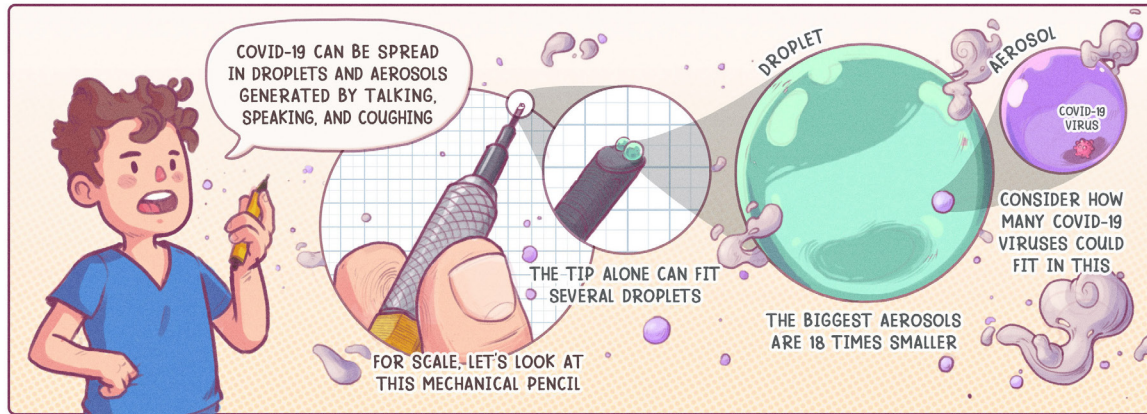


AERATOR

A study from the Bristol Academic Respiratory Unit

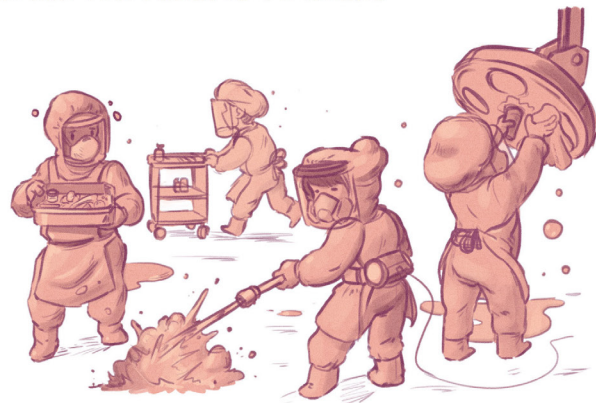
— Comic by Ciléin Kearns ( Antibiotics) —



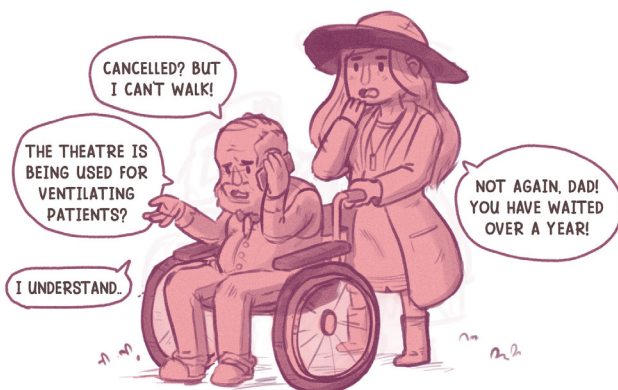
DROPLETS LAND ON SURFACES QUICKLY DUE TO THEIR WEIGHT, BUT AEROSOLS CAN HANG AROUND IN THE AIR FOR MINUTES TO HOURS



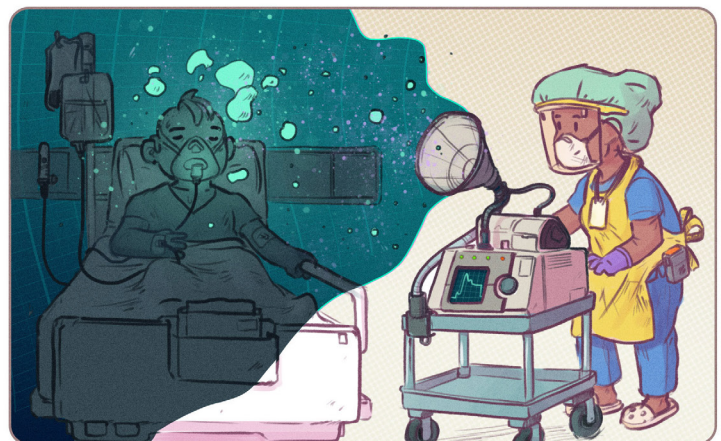
THIS HAS LED TO EXTRA INFECTION CONTROL MEASURES, AND DELAYING OR AVOIDING PROCEDURES AND INVESTIGATIONS TO REDUCE THE RISK OF GENERATING AEROSOLS THAT COULD SPREAD COVID-19



THIS TAKES EXTRA TIME, AND CAN LEAD TO LONGER WAITING TIMES AND REDUCED ACCESS TO HEALTHCARE GENERALLY

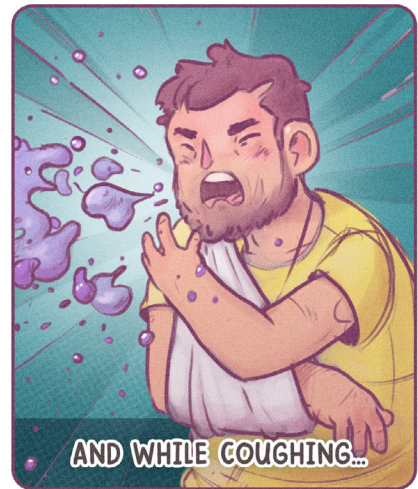


MANY HOSPITALS' ELECTIVE (NON-URGENT) OPERATING LISTS AND CLINIC CAPACITY WERE MARKEDLY REDUCED OR SUSPENDED ENTIRELY IN 2020

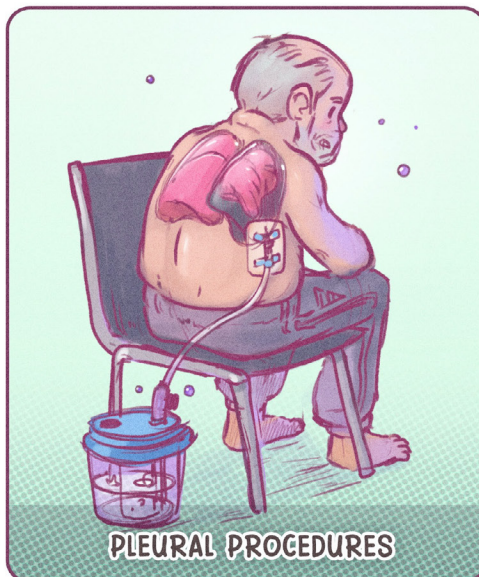
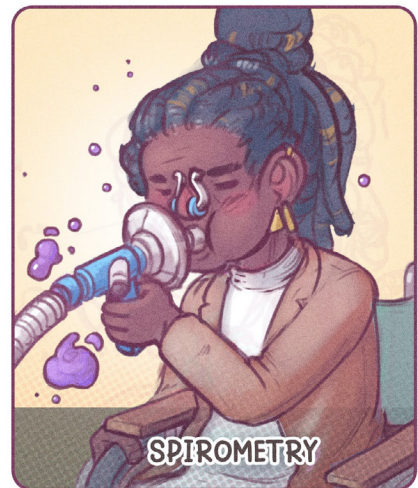
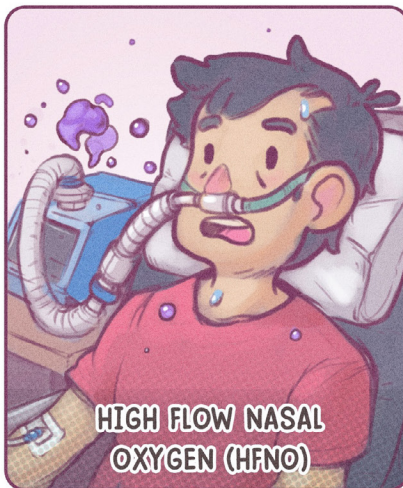


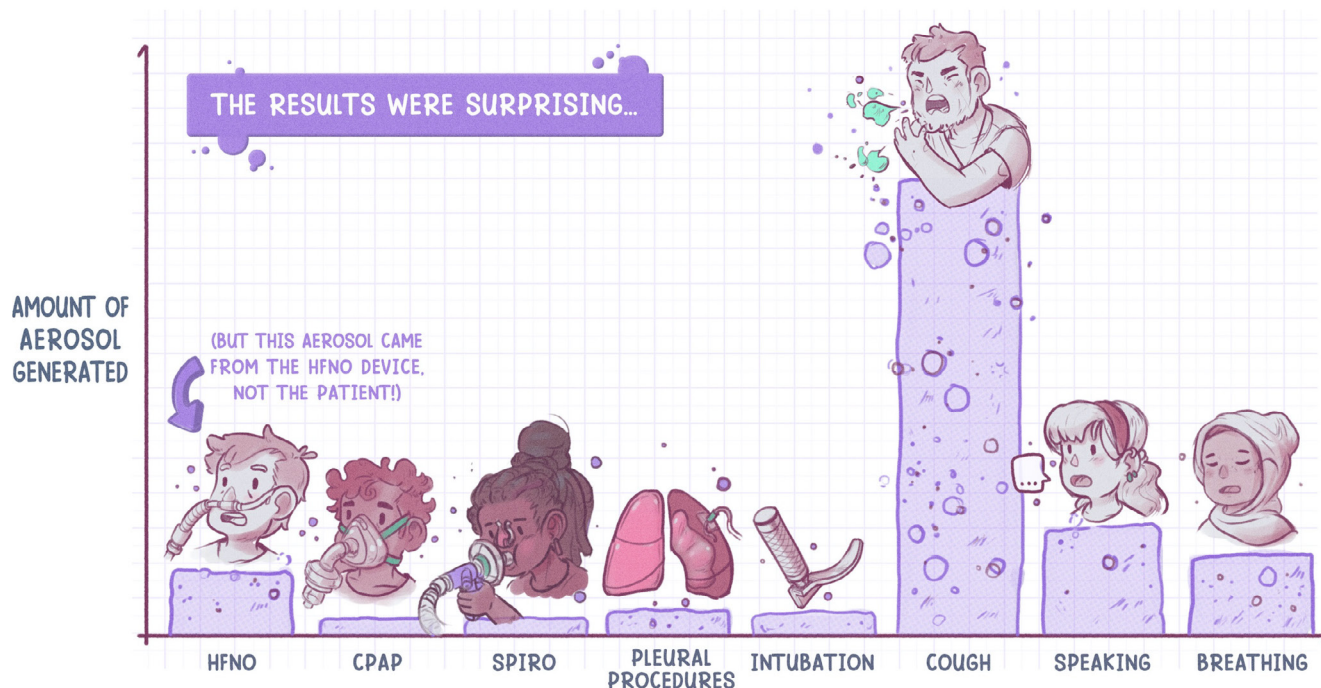
USING STATE OF THE ART AEROSOL MEASURING EQUIPMENT DOCTORS AND SCIENTISTS FROM THE UNIVERSITY OF BRISTOL MEASURED THE AEROSOLS PRODUCED BY MEDICAL PROCEDURES THOUGHT TO BE AEROSOL GENERATING (AGP'S)

ACROSS A SERIES OF STUDIES, MEASUREMENTS OF AEROSOL LEVELS WERE TAKEN
WITH BOTH HEALTHY VOLUNTEERS AND HOSPITALISED PATIENTS WITH COVID-19



THE TEAM ALSO TOOK AEROSOL MEASUREMENTS FOR COMMON, IMPORTANT
MEDICAL CARE AND PROCEDURES THOUGHT TO BE AEROSOL GENERATING





THE STUDY SHOWED THAT A COUGH GENERATED FAR MORE AEROSOL THAN ANY OF THE MEDICAL PROCEDURES OR INVESTIGATIONS STUDIED



SO FRONT-LINE STAFF IN CLOSE PROXIMITY TO COUGHING PATIENTS WITH COVID-19 ARE LIKELY TO BE AT HIGHEST RISK



THE APPROACH IN THIS STUDY COULD BE USED TO HELP ASSESS THE RISK OF OTHER MEDICAL PROCEDURES TO ENSURE WE PROTECT OUR PATIENTS & STAFF WHERE NEEDED, AND KEEP THE HEALTH SERVICE RUNNING STRONG!