ABOUT BODY TEMPERATURE

- The body temperature is regulated by the hypothalamus in the brain. Core temperature is the temperature below the subcutaneous tissue.
- It is recorded orally, per axilla, per rectum or via the ear canal.
- The normal range of body temperature is 36°–37.5°C, this may vary according to the site used for measurement. It can be more than 0.4°C higher than the oral temperature and 0.2°C lower than the rectal temperature (Jamieson et al, 2002).
- The patient’s condition and reason for recording the temperature will give an indication of how frequently it should be recorded.

REASONS FOR RECORDING

- To establish a baseline.
- To monitor response to infection.
- Hyperthermia.
- During and after an operation.
- During blood transfusion.

MONITORING TEMPERATURE

- Equipment needed: disposable/electronic thermometer; watch with second hand; cover for electronic thermometer; gloves and tissues (if recording per rectum).
- Observe the patient’s general condition. Refer to the patient’s observation chart.

ORALLY

- Wash hands and explain procedure to patient.
- Check that the reading on the thermometer is 34°C (Mallett and Dougherty, 2000).
- Apply a plastic sheath to the probe if required.
- Ask the patient to open his or her mouth.
- Place the probe under the tongue.
- Ask the patient to close his or her mouth.
- Remove the thermometer on hearing the audible tone.
- Record the thermometer on the patient’s observation chart.
- Dispose of sheath and wash hands.

PER AXILLA

- Wash hands and explain the procedure to the patient.
- Help the patient to loosen any clothing for easy access to the axilla.
- Once the thermometer is prepared ensure the axilla is dry and place the probe in the axilla.
- Ask the patient to hold his or her arm across his or her chest.
- Remove the probe as required (see manufacturer’s guidelines).
- Measure the temperature and record on patient’s observation chart.
- Clean/dispose of used thermometer according to policy.

PER RECTUM

- Refer to manufacturer’s guidelines.
- Explain procedure to patient.
- Wash hands and apply gloves.
- Ensure patient’s privacy.
- The patient should lie on his or her side with knees bent.
- Gently insert the thermometer probe 2–4cm into the patient’s anus (Jamieson et al, 2002).
- Remove the thermometer probe after the required time.
- Wipe around the patient’s anus and ensure patient’s comfort.
- Dispose of gloves and wash hands.
- Record the temperature on patient’s observation chart.
- Clean/dispose of the used thermometer according to policy.

VIA THE EAR CANAL

- The tympanic thermometer uses infrared light to read temperature.
- Wash hands and explain procedure to patient.
- Ensure that you have good access to the patient’s ear.
- Apply the disposable cover.
- Place the probe in the ear.
- Measure the temperature and record on patient’s observation chart.
- Dispose of cover and wash hands.

FURTHER READING


The information given serves as a general reference. Nurses should consult their individual trust policies on clinical procedures.