Elevated body temperature is called fever. Fever is considered an important body defense for destroying infectious microorganisms.

**POLICY:**

It is the policy that all HealthPOiNT employees will obtain a body temperature reading on all patients, at each clinic visit.

**PROCEDURE:**

A. **Guidelines**
   1. Temperatures are taken as ordered by the physician, as instructed by the nurse and following facility policy. Elevated temperatures (greater than 99 orally or 100 rectally) are generally taken every 4 hours.
   2. Recheck unusual high or low temperatures (oral <97 and >99, axillary < 96 and > 98, rectally < 98 and > 100) with another thermometer, and report rechecked unusual temperatures to the nurse or physician immediately.
   3. If the patient has just finished smoking, eating or drinking anything cold or hot, wait about 15 minutes before taking an oral temperature.

B. **Procedural Guidelines**
   1. Oral temperature:
      a. Attach a probe cover to the thermometer.
      b. Remember to ask the patient when they last ate, drank, or smoked. If the patient has done any of these, it is recommended to wait 15-30 minutes before taking the temperature.
c. Place the thermometer under the patient’s tongue in the posterior sublingual pocket. Instruct the patient to keep their mouth closed and breathe at a normal rate to ensure the tissue maintains a consistent temperature.

2. Axillary temperature:
   a. Attach the probe cover to the thermometer.

   b. Place the bulb of the thermometer in the center of the axilla or armpit. Place the arm tightly across the chest to prevent movement of the thermometer.

   c. Make sure none of the patient’s clothing is between the thermometer and the patient’s skin, as this could result in a false reading. While the axilla temperature is noninvasive, it is the least accurate method. The axillary temperature is always one degree lower than the oral route. A normal axillary reading is 97.6 degrees.

3. Rectal temperature:
   a. Attach a probe cover to the thermometer.

   b. Ask the patient to assume a lateral position or lay on their side. Place a newborn either on his/her side or stomach. Place a young child on his/her side with knees flexed, or prone across the lap.

   c. Place lubricant on the probe up to about 1 inch above the bulb of the thermometer. Insert the thermometer between 0.5 inches to 1.5 inches depending on the patient’s size and age. (Infant 0.5 inches, Child 0.9 inches, Adult 1.5 inches). The rectal route is thought to be the most reliable measurement of temperature. The reading is always one degree higher than the oral route. A normal rectal temperature is 99.6 degrees.

4. Temporal temperature:
   a. Place the head of the temporal thermometer on the left side of the patient’s forehead.

   b. Press the button and while holding the button down, drag the thermometer across the forehead and behind the right ear, depress the button. The reading will appear as soon as the button is depressed.

   c. Some models will vary on technique, please refer to the instruction manual for specific techniques. The temporal route is noninvasive, safe, and accurate. A normal temporal temperature is 98-100.4 degrees.

5. Report any elevated temperatures to the Nurse or Physician in charge of the patient.
RELATED POLICY:

REFERENCES:

Texas Department of Aging and Disability Services, 2013
Florida Community Health Centers, Inc., June 2012

REQUIRED BY:

ATTACHMENTS/ENCLOSURES:
TITLE: Temperature (Oral, Axillary, Rectal, and Temporal)

Scope/Purpose: To create a standard process for performing accurate body temperature measurement by using a thermometer.

Division/Department: All HealthPOiNT Clinics  

Original Date: 08/01/2013  

Policy/Procedure #:  

___New ___Replacement for:

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Date of Revision Description of Changes

12/05/2013  Updated to new format

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