

Standard 25

Revised: 2003, 2006, 2009
Reviewed: 1991, 1994, 1997, 2000

CARE OF THE PATIENT WITH FEVER (GREATER THAN 101° F)

OBJECTIVES:

1. To promote normal body temperature.
2. To prevent dehydration.
3. To promote comfort.
4. To monitor patient for signs and symptoms of infection.

PROCESS STANDARDS:

1. The physician will be notified of initial elevation of temperature greater than 101 and/or as ordered.
2. The patient's temperature will be checked at least every 4 hours while febrile.
3. The patient's temperature will be checked within 2 hours of administration of any antipyretic.
4. The patient will be encouraged to take fluids by mouth if not contraindicated.
5. The patient will be observed for tremors, chills, delirium and convulsions. The physician will be notified immediately if any complications occur.
6. The patient will be monitored for signs and symptoms of infection, (i.e., abnormal WBC count, purulent wounds, respiratory distress).

OUTCOME STANDARDS:

At the time of discharge:

1. The patient will remain alert and responsive.
2. The patient will maintain a temperature within a normal range for the patient.
3. The patient will be adequately hydrated as evidenced by normal skin turgor/moist mucous membranes.
4. The patient communicates increased comfort.
5. Signs of acute infection will not be present at discharge.

HAVE I DOCUMENTED:

*Assessment/Reassessment

Temperature-Identify Temperature and record route every 4 hours

Physiological manifestations /Neurological status i.e. tremors, chills, delirium, convulsions, presence or absence of sweating

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HAVE I DOCUMENTED continued:

- *Nursing Interventions including medication administration
 - Non pharmacologic measures i.e. fan, removing bed coverings, clothing; ice bags to axilla/groin; tepid water baths, bed rest
 - Physician notification
- * Patient education regarding treatment, home and follow-up care
- * Patients response to teaching and interventions
 - Effects of antipyretics
 - Response to nursing actions i.e. shivering, decreased temperature, increased comfort

At The Time of Discharge:

- * Temperature within the patients' normal range for past 24 hours
- * Nutritional status
- * Absence of signs/symptoms related to infection
- * Patient/family communicates understanding of home and follow-up care

Reference:

1. Ralph, B. and Taylor, C. (2008) *Hyperthermia related to increased metabolic rate*: [AR, LA, OK Libraries - LSU - Shreveport -- Nursing Diagnosis Reference Manual, Sparks and Taylor's - 7th Ed. \(2008\)](#) Ambler, Pa.: Lippincott, Williams and Wilkins.
2. Ralph, B. and Taylor, C. (2008) *Hyperthermia related to illness*: [AR, LA, OK Libraries - LSU - Shreveport -- Nursing Diagnosis Reference Manual, Sparks and Taylor's - 7th Ed. \(2008\)](#) Ambler, Pa.: Lippincott, Williams and Wilkins.