

Effects of Transport on Oral Temperature of Post-Surgical Patients Transported from PACU to Nursing Units

Primary Investigators: Kathy Dureault MSN RN CPAN

St. Joseph Hospital, Orange, California

Co-Investigator: Susan Violette ASN RN CPAN

Introduction: Maintaining normothermia beyond the walls of the PACU is critical for patient stabilization and meeting a predetermined clinical pathway. At one Southern California Community Hospital there were complaints/reports of patients being hypothermic on arrival to the inpatient unit. This was despite the fact that those patients met the criteria of normothermia prior to discharge from PACU.

Identification of the problem: There is a gap in the literature on the effect of intra-hospital transport on patient temperature.

Purpose of the Study: The purpose of this descriptive study was to determine changes in oral temperature resulting from transport between the PACU to inpatient nursing units. One research question guided this study: Does oral temperature change as a result of transport from PACU to inpatient nursing units?

Methodology: A pre-post measurement of oral temperature on a convenience sample of post-surgical adult patients transported from PACU to an inpatient or observation unit. Data was collected by two trained PACU support techs using an author-developed data collection tool. Upon readiness for discharge, and within 2 minutes prior to physically leaving the PACU, the support tech will take an oral temperature per protocol with a designated oral thermometer and document on the data collection tool. The same tech with the same thermometer rechecks and documents the temperature upon arrival to the inpatient unit.

Results: Preliminary data of 82 patients demonstrates a mean temperature reduction during transport of 0.48 degrees F. and that the effects of length of transport on temperature are not significant at this time.

Discussion: Because preliminary data demonstrates that there is minimal effect on temperature from transport, other etiologies must be explored. Effectively stabilizing patient is an essential component of PACU care. In this cost and time-constrained healthcare environment it is imperative to consider stabilization beyond the PACU.

Conclusion: A better understanding of the effects of transport on temperature provides important information to optimize patient condition in limited time.

Implications for perianesthesia nurses and future research: A consistent method of measuring temperature across the continuum of care is essential. A future opportunity exists to compare the temperature of 30 minutes before transport to the temperature of 2 minutes before transport from PACU.