



## CHAPTER 10

# Vital Signs and Laboratory Reference Intervals

**PRIORITY CONCEPTS** Cellular Regulation; Perfusion

### CRITICAL THINKING What Should You Do?

The nurse has just received a client from the postanesthesia care unit (PACU) and is monitoring the client's vital signs. On arrival to the unit, the client's temperature was 37.2 °C (98.9 °F) orally, the blood pressure was 142/78 mm Hg, the heart rate was 98 beats per minute, the respiratory rate was 14 breaths per minute, and the oxygen saturation was 95% on 3 L of oxygen via nasal cannula. The nurse returns to the room 30 minutes later to find the client's temperature to be 36.8 °C (98.2 °F) orally, the blood pressure 95/54 mm Hg, the heart rate 118 beats per minute, the respiratory rate 18 breaths per minute, and the oxygen saturation 92% on 3 L of oxygen via nasal cannula. On the basis of these data, what actions should the nurse take?

Answer located on p. 189.

### I. Vital Signs

A. Description: Vital signs include temperature, pulse, respirations, blood pressure (BP), oxygen saturation (pulse oximetry), and pain assessment.

B. Guidelines for measuring vital signs

1. Initial measurement of vital signs provides baseline data on a client's health status and is used to help identify changes in the client's health status.
2. Some vital sign measurements (temperature, pulse, respirations, BP, pulse oximetry) may be delegated to unlicensed assistive personnel (UAP), but the nurse is responsible for interpreting the findings.
3. The nurse collaborates with the health care provider (HCP) in determining the frequency of vital sign assessment and also makes independent decisions regarding their frequency on the basis of the client's status.

 The nurse always documents vital sign measurements and reports abnormal findings to the HCP.

C. When vital signs are measured

1. On initial contact with a client (e.g., when a client is admitted to a health care facility)
2. During physical assessment of a client
3. Before and after an invasive diagnostic procedure or surgical procedure
4. During the administration of medication that affects the cardiac, respiratory, or temperature-controlling functions (e.g., in a client who has a fever); may be required before, during, and after administration of the medication
5. Before, during, and after a blood transfusion
6. Whenever a client's condition changes
7. Whenever an intervention (e.g., ambulation) may affect a client's condition
8. When a fever or known infection is present (every 2 to 4 hours)

### II. Temperature

A. Description

1. Normal body temperature ranges from 36.4° to 37.5° Celsius (°C) (97.5° to 99.5° Fahrenheit [°F]); the average in a healthy young adult is 37.0 °C (98.6 °F).
2. Common measurement sites are the mouth, rectum, axilla, ear, and across the forehead (temporal artery site); various types of electronic measuring devices are commonly used.
3. Rectal temperatures are usually 1 °F (0.5 °C) higher and axillary temperatures about 1 °F (0.5 °C) lower than the normal oral temperature.
4. Know how to convert a temperature to a Fahrenheit or Celsius value (Box 10-1).

B. Nursing considerations

1. Time of day
  - a. Temperature is generally in the low-normal range at the time of awakening as a result of muscle inactivity.
  - b. Afternoon body temperature may be high-normal as a result of the metabolic process, activity, and environmental temperature.

# Elsevier Saunders Vital Signs Answers

**Christian Drosten**

A red circular graphic with a gradient, appearing as a partial circle or a thick curved line, located to the right of the author's name.

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**Case Studies in Nurse Anesthesia** Sass Elisha,2009-12-23

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**Saunders Textbook of Medical Assisting** Diane Klieger,2005 This comprehensive and visually appealing text covers all aspects of both the AAMA and AMT national curricula for medical assisting including medical terminology anatomy physiology and pathophysiology The text is written in a reader friendly style and integrates features designed to foster a greater awareness for students of the consequences of their actions on the job as well as to develop greater empathy for the patient s experience A recurring Ripples on the Pond analogy emphasizes this ripple or consequences effect Case scenarios at the beginning of chapters challenge students to put the chapter content into a real world perspective with follow up questions at the end of chapters that are designed for self reflection homework assignments or class discussion An integrated package includes an interactive skills software program in the text a student workbook with recall application and critical thinking exercises a complete instructor s package and a companion website A Ripples on the Pond theme is designed to help students become more aware of the consequences and the cause and effect of their actions on the job This theme is reinforced visually and in content features throughout the text Patient Centered Professionalism boxes throughout chapters help students think about the chapter content in the perspective of the patient s experience so they can develop empathy for the patient and consider how their actions will be experienced by the patient Coverage of national curriculum competencies with a listing of the AAMA and RMA competencies in the



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