

Thermal Comfort Inventory

The statements below may describe how you feel before surgery. Please choose one of the six numbers that you think most closely matches your feelings at the present moment. Please rate the following statements on a scale of 1 to 6, where 1 is strongly disagree with the statement and 6 is strongly agree with the statement RIGHT NOW. You will answer the questionnaire 2 times before you have your surgery.

	Strongly Disagree					Strongly Agree
My body temperature feels fine	1	2	3	4	5	6
The chair/bed feels cold	1	2	3	4	5	6
The temperature in the room is warm enough	1	2	3	4	5	6
I feel confident	1	2	3	4	5	6
I have enough privacy	1	2	3	4	5	6
I am shivering	1	2	3	4	5	6
My arms are cold	1	2	3	4	5	6
The nurses care about me	1	2	3	4	5	6
I am anxious (nervous)	1	2	3	4	5	6
My feet are cold	1	2	3	4	5	6
My chest area is warm	1	2	3	4	5	6
In general, I feel cold	1	2	3	4	5	6
I feel out of control	1	2	3	4	5	6