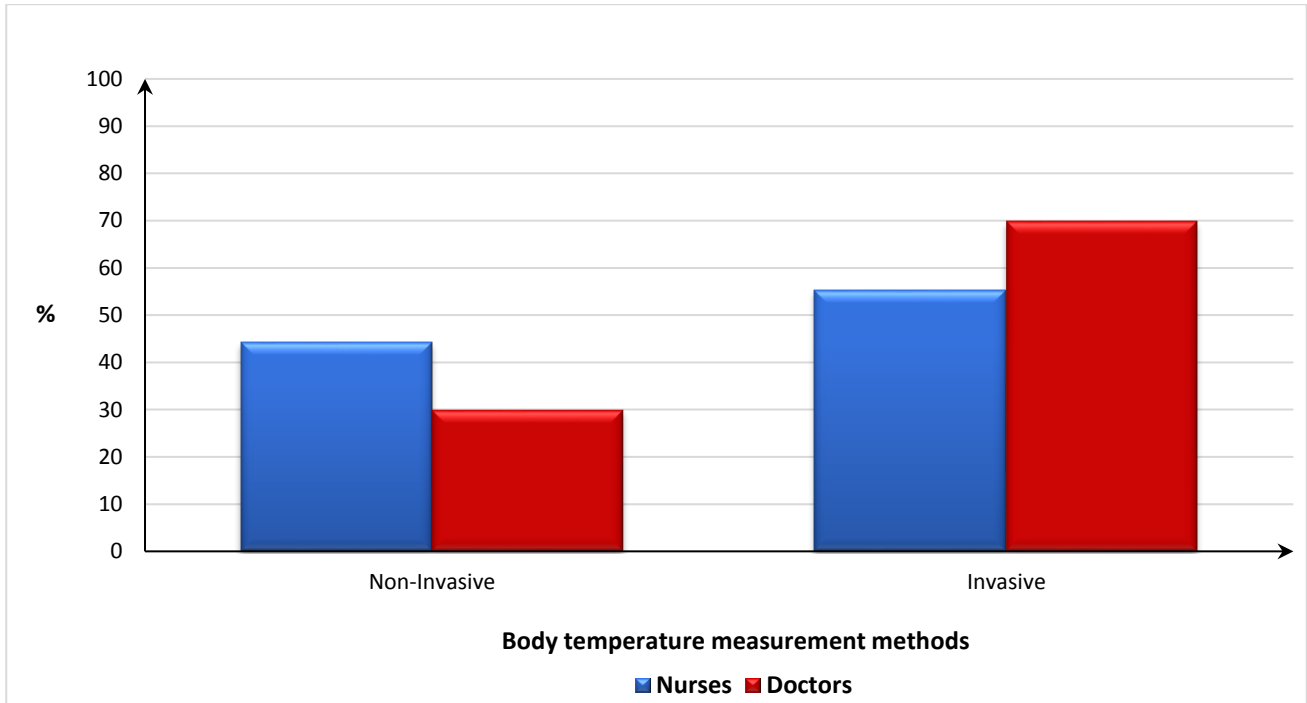
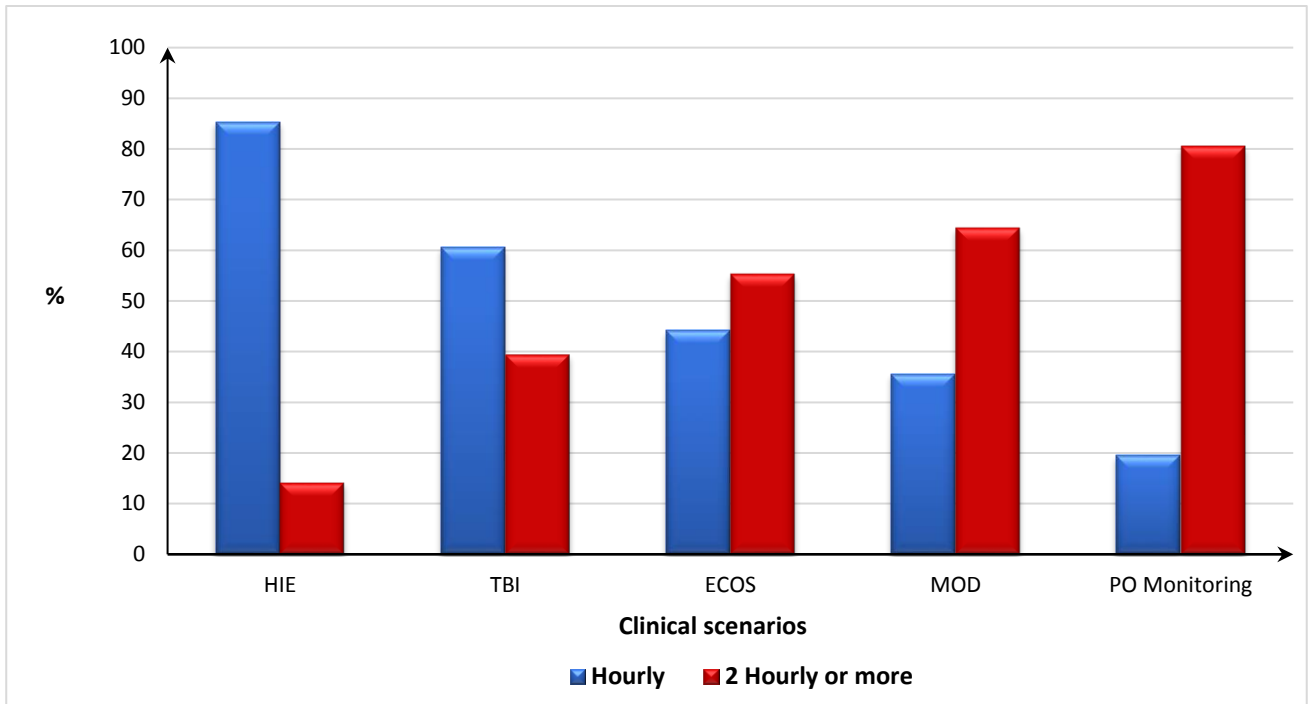


Appendix 1. This appendix was part of the submitted manuscript and has been peer reviewed. It is posted as supplied by the authors



* 4 respondents were unsure: 3 ($n = 3/591$, 0.51%) nurses and 1 ($n = 1/341$, 0.3%) doctor.

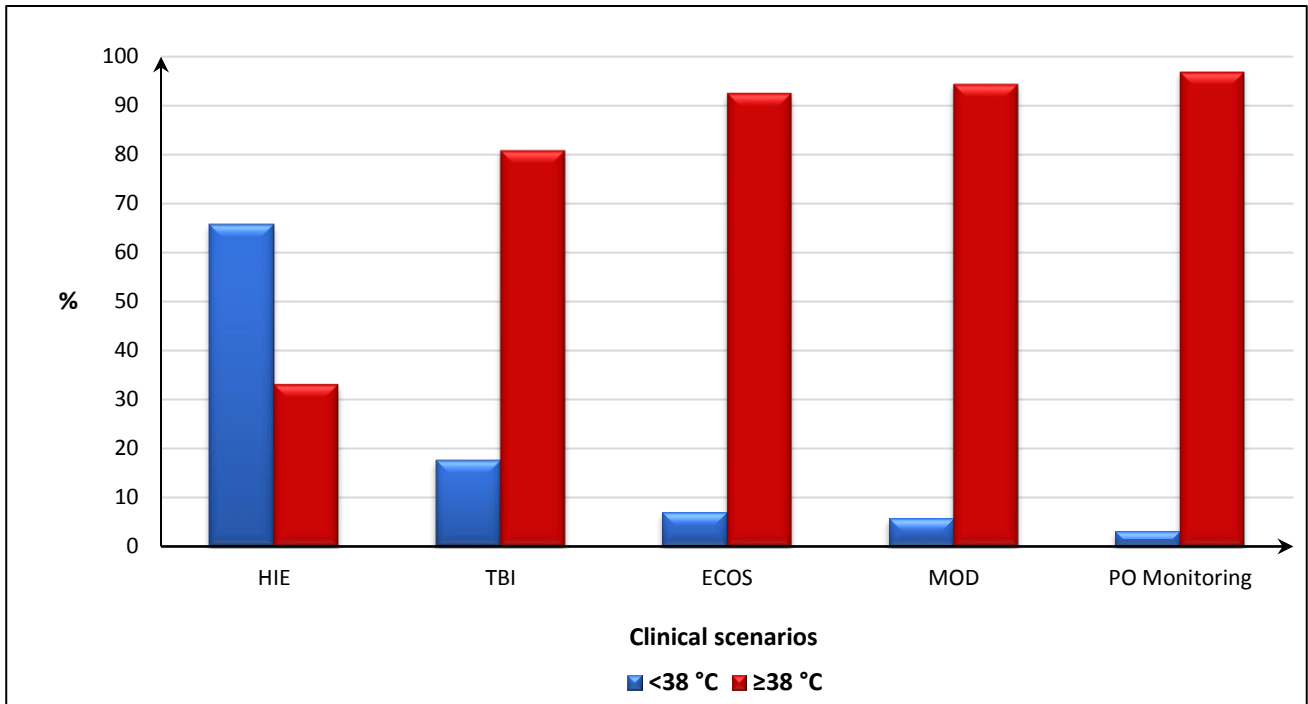
eFigure1. Preferred body temperature measurement methods by nurses and doctors in a mixed population of ICU patients*.



* 2 respondents were unsure about the timing of body temperature measurement in patients with: HIE ($n = 1/184, 0.54\%$), and ECOS ($n = 1/188, 0.53\%$)

HIE= suspected Hypoxic Ischaemic Encephalopathy after cardiac arrest; TBI= Traumatic Brain Injury; MOD= Multi-Organ Dysfunction; ECOS= Extra-Corporeal Organ Support; PO Monitoring= Post-Operative monitoring.

eFigure 2. Preferred timing of body temperature measurement in 5 clinical scenarios*.



* 6 respondents were unsure about the highest measured limit of body temperature that they believed requires cooling in patients with HIE ($n = 2/184$, 1.1%), TBI ($n = 3/193$, 1.5%) and ECOS ($n = 1/188$, 0.53%).

HIE= suspected Hypoxic Ischaemic Encephalopathy after cardiac arrest; TBI= Traumatic Brain Injury; MOD= Multi-Organ Dysfunction; ECOS= Extra-Corporeal Organ Support; PO Monitoring= Post-Operative monitoring.

eFigure3. Preferred highest measured limit of body temperature that respondents believed requires cooling the patient in 5 clinical scenarios*.