



## Software User's Manual

ClearTriage is a decision support tool designed to assist telephone triage nurses by providing access to the Schmitt-Thompson protocols in user-friendly software. This User's Manual offers step-by-step instructions and practical guidance to support nurses in navigating and using ClearTriage efficiently and effectively.

*Note: Technical and Administrative functions (such as customization and reports) are covered in the separate ClearTriage Admin Manual.*

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# Getting Started

Sign in to ClearTriage at <https://app.cleartriage.com>.



It is best to use this URL to sign in rather than [www.cleartriage.com](http://www.cleartriage.com) because [app.cleartriage.com](https://app.cleartriage.com) has more backup mechanisms in place to ensure it's available 24/7.

Three fields are required to sign in:

- **Your First Name:** Enter your first name or another identifier as directed by your organization.
- **Account ID:** Your shared Account ID. All nurses use the same ID to sign in.
- **Password:** Your shared account Password. All nurses use the same password to sign in.

Check Remember Me to retain your name and Account ID for faster sign in. Some browsers will also offer to save your password. If approved by your organization you can use this feature to make it even easier to sign in to ClearTriage.



Add [app.cleartriage.com](https://app.cleartriage.com) to your Favorites or Bookmarks so that you can start ClearTriage with a single click.

Other options to simplify sign in include ClearTriage [Quick Links](#), [SSO](#), and [EHR integrations](#). Contact [ClearTriage Support](#) for more information.

*Note: Our [Terms of Use](#) are available on the sign in page, covering the legal details of using ClearTriage.*

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## Overview of a Triage Call

The general process for handling a triage call in ClearTriage follows four main steps:

1. Initial Assessment and Protocol Selection
2. Triage Using the Question List
3. Complete the Plan of Care
4. Finish the Triage Call

Here is some basic information about each of these four steps:

## 1. Initial Assessment and Protocol Selection

Start by entering notes from your initial assessment in the **Notes** box at the top of the ClearTriage screen. Follow your organization's guidelines on what to include in the initial assessment. After identifying the chief complaint, use the search bar on the left side to locate and select the most appropriate protocol. Review the Criteria on the right to confirm it is the most appropriate protocol, then click on the blue **Next** button at the bottom of the screen to proceed.

## 2. Triage Using the Question List

In the **Triage** tab, use the triage questions (also known as the triage checklist) to determine the disposition. Note that the questions are grouped by disposition and arranged in descending acuity order. Rule out questions from top to bottom until you reach the first positive question. Check the box next to the first positive question to document the response, which will indicate the suggested disposition. If a different disposition is required based on the particular situation, click the **Pencil** icon in the top right of the screen to override the disposition. Otherwise, click the blue **Next** button at the bottom of the screen to continue.

## 3. Complete the Plan of Care

In the **Plan** tab, confirm the next steps by discussing the recommended disposition with the caller, including where and when care will occur. Provide appropriate patient education to the caller by discussing three or four key topics from the **Education** tab. Click on a care advice topic to view and select specific elements of care advice as needed. Provide pediatric medication dosages using the dosing tables if needed. Complete education by sending any care advice **Handouts** as appropriate.

## 4. Finish the Triage Call

Click **Copy** in the bottom right corner of ClearTriage to copy the call note onto the clipboard of your computer. Then go to your EHR (or other system where you store patient notes) and paste the note in the appropriate field. Save the note in your EHR to complete the documentation. Note that for organizations with custom integrations, a Finish Triage button may be displayed instead of the Copy button. Clicking Finish Triage will automatically send your call notes to the patient record, so no pasting is required.

# Narrative Notes

Use the **Notes** box at the top of the screen to enter your initial assessment and other narrative notes. Follow your organization’s guidelines on what to include in these notes. Templates can be pasted into this box if needed. This field is expandable and can be accessed at any time throughout the triage call to add to or edit your note.

 You can include details such as who called, the chief complaint, relevant symptoms, and the severity and duration of the issue in the notes box. This serves as communication with the rest of the care team, so think about "painting a picture" of the call for your colleagues.

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## Protocol Selection

 <b>Back Pain</b>
 <b>Back Pain</b>
 Pregnancy - <b>Back Pain</b>
 <b>Back</b> Injury

Select the most appropriate protocol using the list on the left side of the screen. This is typically done by entering keywords into the **Search** box. Type part or all of the protocol title, or enter words that describe the symptom. Protocols with titles that directly match the search terms appear first, followed by additional options.

If your organization uses a Family account that includes both pediatric and adult protocols, pediatric protocols are identified by a green “P,” while adult protocols are identified by a blue “A”. You can narrow your search by typing “peds” or “adult” in the search box.

After selecting a protocol, review the information in the **Criteria** tab to confirm your selection. This tab includes a brief description of when to use the protocol and suggests related protocols that may be more appropriate. To switch to a related protocol, simply click on its title in the list.

If the patient is experiencing multiple symptoms, always select the most serious symptom. If none of the symptoms are serious, choose the symptom with the highest likelihood of needing to be seen (e.g., earache instead of cough, cold or fever). If uncertain where to start, ask the caller, “Which symptom are you most concerned about?”

*Note: If the patient is experiencing a “fever” along with other symptoms, triage the other symptom(s). Fever is covered in all protocols where fever could be an accompanying symptom.*

Finally, becoming familiar with the full range of available protocols can make protocol selection faster and more accurate. Familiarity with ClearTriage will grow with continued use, but reviewing the [protocol indexes](#) can be especially helpful during the initial learning phase.

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## Protocol Resources

When a protocol is selected, the right side of the screen displays several resource tabs that provide additional information to support the triage process.



### **Criteria**

Displays guidance on when to use the selected protocol and when to consider an alternative. This tab helps confirm appropriate protocol selection and suggests related protocols if needed.

### **Initial Assessment**

Provides symptom-specific assessment questions designed to help develop a clear understanding of the patient's condition. These questions are especially useful for new triage nurses or when handling unfamiliar symptoms. The initial assessment questions should be used on an as-needed basis; it is not required that all of these questions are asked on every call.

### **Background Information**

Offers additional clinical context to support decision-making and fine-tune assessments. This includes common causes (for symptom-based protocols), potential complications (for disease-based protocols), answers to frequently asked questions, and explanations for any triage decisions that may seem unusual. This tab provides comprehensive clinical information and is a valuable source of additional evidence-based details for each protocol.

### **First Aid**

Contains quick-access first aid instructions for managing life-threatening or serious emergencies. This can help minimize injury and damage before the patient is transported to the emergency department or another level of care.

### **References**

Includes links to the references cited by the protocol authors in the creation and updating of the protocols. As new medical research is reviewed and incorporated into the protocols, it is added to the references list. The clinical content in ClearTriage is evidence-based, nationally reviewed, and updated on an annual basis.

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# Using the Triage Checklist

The triage assessment questions in ClearTriage are designed to support—rather than replace—nursing judgment, clinical training, and critical thinking. These questions function as a checklist, not a script, and should be used flexibly based on the clinical context of the call.

In the **Triage** tab, the assessment questions for the selected protocol are grouped by disposition and presented in descending order of acuity. To avoid delays in care for patients with urgent or emergent needs, begin by ruling out questions from top to bottom, starting with the highest-acuity questions.

The triage assessment can be stopped when a positive triage question has been identified and documented. This will indicate the suggested disposition and conclude the assessment portion of the triage call—no further triage questions need to be addressed. Proceed to the Plan tab.

All questions within a disposition group should be ruled out before moving on to the next disposition. However, questions do not need to be asked word-for-word in order to rule them out, the information may already be known through the initial assessment that occurred before selecting the protocol, the patient's medical record, or some other source.

Two important exceptions apply:

- Within a disposition level, the question list can be scanned and any question may be documented as a positive question without following a specific order. This is because all questions within a given disposition group lead to the same outcome.
- While it is often most efficient to triage sequentially, there is no requirement to rule out questions in a strict order within a disposition. The only requirement is to rule out all questions before advancing to the next disposition group.



For After Hours users only: ClearTriage After Hours protocols provide targeted care advice based on the triage question(s) marked Yes. Selecting the most accurate triage question or questions will ensure that relevant and appropriate education topics are presented for review and discussion with the patient.

## *Documenting the Positive Triage Question*

Within ClearTriage Admin, an account-level setting allows administrators to choose how the triage is documented for all nurses using your account. Two options are available: documenting the positive triage question only, or documenting the positive and negative triage questions.

**Documenting only the positive triage question:** If your organization has chosen to document the first positive triage question only, you will document by checking the box next to the first

positive triage question. A statement will be included in your call note indicating that all higher acuity questions were negative.

See in Office or Video Visit within 3 Days

<input type="checkbox"/> Moderate back pain (e.g., interferes with normal activities) and present > 3 days	 
<input checked="" type="checkbox"/> Pain radiates into the thigh or further down the leg	 

**Documenting the positive and negative triage questions:** If your organization has chosen to document the positive and the negative triage questions, Yes and No buttons will be displayed next to the left side of each assessment question. The positive and negative triage questions will all be included in the call note. In addition, "Add Note" appears as an option next to each question allowing you to optionally document question-specific information about why you marked that question as yes or no.

See in Office or Video Visit within 3 Days

<input type="radio"/> <input type="radio"/> Moderate back pain (e.g., interferes with normal activities) and present > 3 days	 
<input checked="" type="radio"/> <input type="radio"/> Pain radiates into the thigh or further down the leg	 

 To select no to all questions within a disposition, use the **No** button with the down arrow in the disposition header. Do this only if all questions in that group have been ruled out.

<b>NO</b> ↓
<input type="radio"/> <input type="radio"/>
<input type="radio"/> <input checked="" type="radio"/>

## Triage Questions - Additional Information

ClearTriage includes visual indicators that provide additional context or guidance for certain triage questions. These icons appear to the right of specific questions and are designed to support informed, efficient clinical decision-making.



**First Aid Icon:** Appears next to some questions in the emergency-level dispositions. Hovering over this icon reveals brief first aid instructions that may be shared with the caller if the answer to that question is **Yes**. These instructions can help manage the situation until further medical care is received.



**Information Icon:** Appears next to questions across various dispositions. Hovering over this icon reveals either a rule-out or reason statement. Rule-out statements list

potential causes for the symptom being evaluated. Reason statements explain why the question is included in that disposition group. These statements provide clinical insight that can be especially helpful if the caller's responses are vague, and can support more targeted questioning. They also serve as a valuable tool for developing clinical reasoning.



**Video Visit Eligible Icon:** Identifies questions related to symptoms that may be appropriate for a telehealth visit, either alone or in combination with a lab visit. If your organization is using this feature, prompts will appear to document whether a video visit was offered and whether it was accepted when a question with this icon is marked as positive. Answers to those prompts are included in the call note.

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## Disposition Guidance

After selecting a positive triage question, disposition guidance appears in a colored bar below the selected question. The first two lines of the guidance are visible by default; select the down arrow to view the full guidance text.

- 
- You need to be examined or have a video telemedicine visit.
  - PCP OFFICE VISIT: Let me give you an appointment.

This guidance provides additional instructions for how to proceed with the indicated disposition, and can be tailored to your organization within ClearTriage Admin.

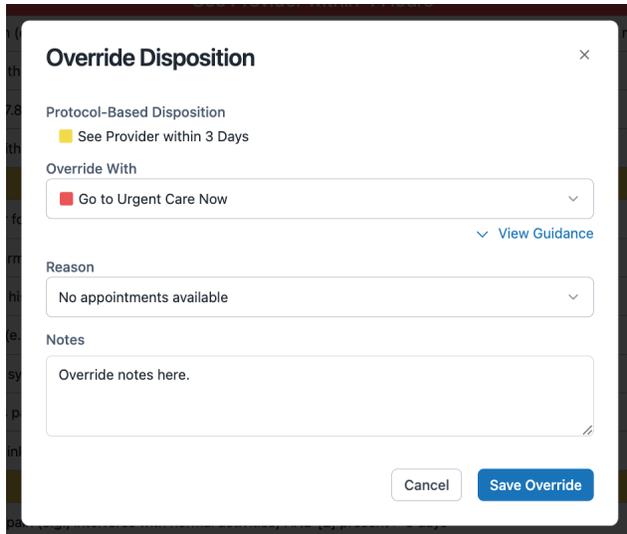
The same disposition guidance is also available in the colored bar at the top of the **Education** section in the **Plan** tab of the call. The disposition guidance will always match the overall disposition for the call (which can be impacted by overriding the disposition or using more than one protocol on the call).

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## Overriding the Disposition

There may be situations where overriding a suggested disposition is warranted. Factors such as timing, access to care, or specific needs of the patient may necessitate this.

After selecting a positive triage question, the recommended disposition appears in the top right corner of the screen. To override this disposition, select the **Pencil** icon located next to the recommendation.



**Override Disposition** [X]

Protocol-Based Disposition  
See Provider within 3 Days

Override With  
Go to Urgent Care Now [v] [View Guidance](#)

Reason  
No appointments available [v]

Notes  
Override notes here.

Cancel Save Override

From the dropdown menu, select the appropriate override disposition along with a reason from the list of common override justifications. If none of the listed reasons apply, select Other and enter relevant notes. Once an override is applied, the new disposition for the call will be displayed in the top right corner of the screen along with an override indicator.

To update or remove an override, select the pencil icon again. Use the **Clear Override** button to revert to the original protocol-based disposition or select a new disposition for the override.

When the triage call is completed, the final call note will include both the original protocol-based disposition and the override disposition. The override disposition will serve as the final disposition for the encounter.

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## Providing Education

After selecting a positive triage question, standardized and peer-reviewed patient education can be reviewed with the caller in the **Education** tab. Care advice topics are initially collapsed, each displayed in a blue header bar. Click on any topic header to expand and view individual teaching points. To expand all topics at once, select the **Expand All** button in the top right corner.

Document the care advice topics and individual teaching points you discuss with the caller by clicking on the corresponding checkboxes. Focus on the top few pieces of advice that best fit the patient's situation to avoid overwhelming the caller and to support retention of key information.

*Always review all teaching points under the **Reasons to Call Back** section. This is critical to ensure patient safety and to reinforce when further medical attention may be needed.*

Education Handouts

See in Office or Video Visit within 3 Days

**Back Pain** Expand All

- Reassurance and Education - Back Pain
- Cold or Heat
- Sleep
- Continue Activity
- Pain Medicines
- Pain Medicines - Extra Notes and Warnings
- Reasons To Call Back
  - Severe pain not better after taking pain medicines
  - Moderate pain (interferes with normal activities) lasts over 3 days
  - Pain begins to shoot into the leg
  - Pain lasts over 2 weeks
  - Fever occurs
  - Numbness or weakness occurs
  - Loss of control of your bladder or bowel

**Efficiency Tips:**

- Double-click the checkbox next to a topic header to select all teaching points in that topic. You may consider double-clicking the header checkbox to select all teaching points in a topic, then uncheck any that are not discussed.
- Selecting an individual teaching point automatically selects the corresponding topic header—there is no need to select both separately.

 After Hours users reminder: Available care advice for After Hours is based on the positive triage question(s) selected in the **Triage** tab. If relevant care advice is not visible, return to the Triage tab to select an additional positive question. Even if this does not change the call's disposition, it may surface additional related patient education.

## Pediatric Medication Dosages

Common over the counter pediatric **Medication Dosages** are available for all pediatric protocols in the **Plan** tab. Using the dropdown menu, select the desired medication to access

the weight- or age-based dosing table and select the medication dosage provided to include that information in your call note.

Medication:

Ibuprofen (Advil) v

Child's weight (pounds)	12-17 lbs	18-23 lbs	24-35 lbs	36-47 lbs	48-59 lbs	60-71 lbs	72-95 lbs	96+ lbs
Total amount	50 mg	75 mg	100 mg	150 mg	200 mg	250 mg	300 mg	400 mg
Infant Drops 50 mg/1.25 ml	1.25 ml	1.875 ml	2.5 ml	3.75 ml	5 ml	--	--	--
Liquid 100 mg/1 teaspoon	0.5 tsp	0.75 tsp	1 tsp	1.5 tsp	2 tsp	2.5 tsp	3 tsp	4 tsp
Liquid 100 mg/5 milliliters	2.5 ml	3.75 ml	5 ml	7.5 ml	10 ml	12.5 ml	15 ml	20 ml
Chewable 100 mg tablets	--	--	1 tab	1.5 tabs	2 tabs	2.5 tabs	3 tabs	4 tabs
Junior-strength 100 mg tablets	--	--	--	--	2 tabs	2 tabs	3 tabs	4 tabs
Adult 200 mg tablets	--	--	--	--	1 tab	1 tab	1 tab	2 tabs



Additional medication information is available below the dosing table.

## Sending Educational Handouts

ClearTriage includes a large library of educational handouts written at a sixth-grade reading level. These handouts reinforce the care advice provided and can help increase compliance and reduce follow-up calls. Handouts can be sent by email, text message, or shared as a link.

Select the **Handouts** tab to view handouts related to the selected protocol and check the boxes next to the handouts you want to send. The preview button allows for the review of a handout prior to sending.

After checking the box to indicate caller consent to send the handout, enter the recipient's email address or phone number and click Send. If sent by email, a PDF of the handout(s) will be included as an attachment. If sent by text, a link to the handout(s) will be included in the text. A confirmation will appear when the handout is sent.

The call note will include documentation indicating which handouts were sent and the delivery method.

### Select Handouts

ENGLISH (3) Selected SPANISH

- Acetaminophen (Tylenol) Dosage Table  
- Fatigue with Infections - Normal  
- Fever - How to Take the Temperature  
- Fever (Age 1-5)  
- Ibuprofen (Advil, Motrin) Dosage Table  
- Viral Infection  
- Colds - Frequent but Normal  
- Fever - Facts Versus Myths  
- Fever (Age 0-1)  
- Fever (Age 6-21)  
- Medical Visits - Making Them Easier  

Find more handouts...

### Email or Text Handouts

I have obtained consent from the caller to send the selected handouts, having informed them that there may be some level of risk that it could be seen by a third party. ⓘ

Recipients **Ready to send 3 handouts**

support@cleartriage.com

Preview Email 

Send Again

+ Add Recipient

### Additional Options:

- Add Recipient: Send the same handouts to multiple recipients.
- Find More Handouts: Search the complete handout library for additional handouts to send.
- Spanish Handouts: Toggle to view and send Spanish-language handouts when available.



To share a handout using your secure messaging system or patient portal, copy a link to the handout you'd like to share using the link button next to that handout, then paste the link into your secure messaging system. Links must be copied and pasted one at a time.



## Finishing the Triage Call

After completing the triage call, the final step is to transfer the call note to your EHR or other patient record system. Most organizations do this using the Copy button while others have custom integrations.



**To copy the call note to your EHR**, select the green **Copy** button in the bottom right corner of ClearTriage, then navigate to the appropriate location in the EHR and paste the note into the field you wish to document in. Save the note in your EHR as you normally would to complete the encounter.

This process copies all relevant information—narrative note, triage assessment details, protocol used, disposition, care advice, and any handouts sent—directly to your clipboard for easy transfer.



**For organizations with custom integrations**, a **Finish Triage** button will replace the Copy button. Selecting Finish Triage will automatically send the call note to the patient record, no copying or pasting is required.



Once the note is copied and pasted or sent, no additional steps are required within ClearTriage to complete the triage. If you need to make changes to the note afterward, either make changes in ClearTriage and copy/paste again, or update the documentation directly in your EHR.

After completing the documentation, the **Reset** button at the bottom of ClearTriage will reset the screen so you are ready to take another call. Make sure you have saved the call note in your EHR before pressing Reset in ClearTriage.

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## Using More Than One Protocol

ClearTriage supports the use of multiple protocols within a single triage call. This functionality allows for efficient triage when a patient presents with more than one symptom.

### *When to Use Multiple Protocols*

Use more than one protocol when symptoms are unrelated and involve different body systems (e.g., hypertension and a poison ivy rash). For related symptoms—such as nausea and vomiting—use only the protocol that addresses the most urgent symptom. The **Criteria** tab within each protocol provides guidance on selecting the most appropriate protocol.

*Note: When a caller reports **fever and another symptom**, always select the protocol associated with the other symptom. Fever-related questions are included in protocols where fever can commonly occur. The Fever protocol should only be used when fever is the sole symptom or when the accompanying symptom is unrelated (e.g., anxiety).*

While uncommon, more than two protocols can be used on a single call. Before doing so, confirm that the symptoms are truly unrelated and not already addressed within a selected protocol.

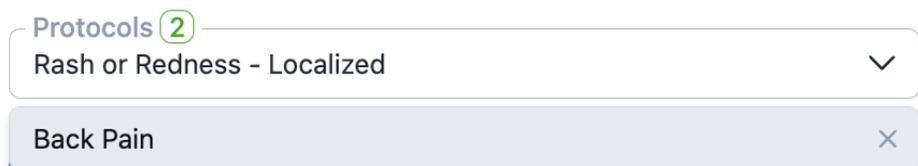
## How to Use Multiple Protocols

To add a second protocol during a triage call:

1. Select the **plus (+)** button next to the current protocol.
2. Search for the additional protocol using the search bar.
3. Review the protocol's **Criteria** tab to confirm appropriateness.
4. Click **Add to Call** to include it in the triage session.

Proceed with triage for the second symptom as usual—rule out higher acuity questions from top to bottom, select the first positive question, and complete the plan of care and caller education.

If multiple protocols are needed from the beginning of the call, both can be added in advance in the **Protocols** tab by selecting the **plus (+)** button next to each protocol in the search list.



Switch between protocols using the dropdown menus on the **Triage** and **Plan** tabs. This flexibility is useful when the caller provides new or out-of-order information, allowing the triage process to adapt to the flow of the call.

To remove a protocol no longer needed in the call, click the **X** button next to the protocol name.

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## Menu Icon

The ClearTriage menu, accessed by selecting the **Menu Icon (☰)** in the upper-right corner of ClearTriage, provides quick access to several important tools and informational pages. These options allow you to access ClearTriage Admin, personalize your ClearTriage experience, view account details, and more.

## Admin Options

ClearTriage administrators can sign in to the **Admin** tool by selecting one of the three Admin options—Settings, Customization, and Reports—from the menu. After selecting one of these options, you will be prompted to enter your administrator credentials. Completing this two-step sign-in grants access to the Admin tool and features.

For more information about how to use ClearTriage Admin, reference the ClearTriage Admin Manual.

## Reminders

Reminders allow a user to add custom information related to a particular protocol as a reminder to other users. This can be used for organizational policies, workflow variations, or important reference information. By default, all users will be able to add or edit reminders. If your organization chooses, editing reminders can be restricted to admin access only in Account Settings.

### Adding a New Reminder:

To add a new reminder, start by navigating to the protocol and tab you wish to add the reminder to. Open the menu and choose **Add Reminder**. Enter the text for the reminder, format as needed, optionally enter a Title, then select Create.

#### Create New Reminder ×

You are creating a new reminder that will show for **Influenza (Flu) - Seasonal** on the **Protocol** tab.

Title (optional)

Reminder title

T Normal

B

I

U

S

☰

☰

☰

☰

☰

T 14px

🔗

A

🔗

Enter reminder text...

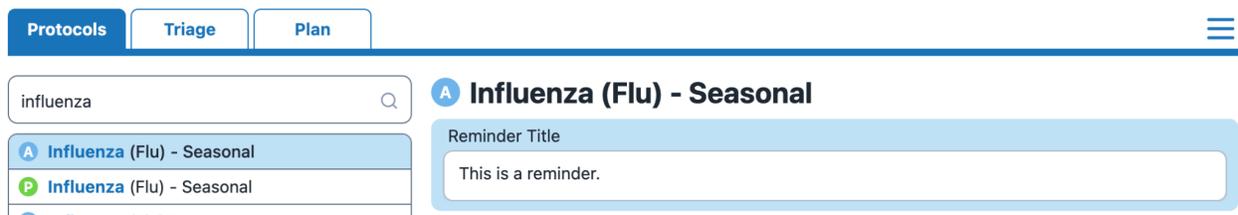
Cancel

Create



Formatting options support bold, italics, highlighting, and more. Add hyperlinks as needed to link to additional resources or support information.

After creating a reminder, it will be visible for all users when they are on that protocol and tab.



### Editing a Reminder:

To edit or delete an existing reminder start by navigating to the protocol and tab the reminder is on, then select the menu and choose **Edit Reminder**. You will then be able to edit the reminder and save, or delete the reminder by selecting the Delete Reminder button in the bottom left of the window.

## Other Menu Items

### App Color

ClearTriage allows users to customize the app's accent color for easier visual recognition—particularly helpful if you work in multiple environments or simply prefer a specific color scheme.

After opening the menu, select **App Color** and choose your preferred color from the available options. Color selection is user-specific and does not affect other users in your organization.

### About

The About section, accessible from the main menu, provides key information about your ClearTriage account and subscription. This page is helpful for verifying account details or when contacting ClearTriage Support.

Information displayed in the About section:

- Account ID - The unique identifier for your organization's ClearTriage account.
- Content Set(s) - The type and year of the clinical content your account uses (e.g., Office Hours or After Hours; Pediatric, Adult, or Family).
- User - The name or identifier of the currently logged-in user.
- Subscription End Date - The date your organization's current subscription expires.
- # of Subscriptions - The number of concurrent user subscriptions available for your account.

A link to the standard ClearTriage Terms of Use is also available in the About section.

## Help

Access to ClearTriage support resources, protocol indexes, and contact information is available in the **Help** section of the menu. Here are links to the information provided in the Help section:

### Support Resources

- [Written Resources](#) - Includes links to the Clinical User's Guide, Software User's Guide, Protocol Indexes, and more.
- [Training Videos](#) - Instructional videos to help nurses get started or for a quick refresher of ClearTriage features.
- [Carol Rutenberg's Telephone Triage Videos](#) - Expert insights from Carol Rutenberg on essential telephone triage concepts.
- [FAQ's](#) - Quick answers to our most frequently asked questions.

Anatomical Protocol Indexes include links to the relevant indexes for your account. All of the available protocol indexes can also be found on our main [Protocol Indexes](#) page.

Additionally, the Help section includes quick contact information for [ClearTriage Support](#).

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## Need Additional Support?

ClearTriage is designed to be intuitive and easy to use, helping nurses to focus on the patient and provide excellent care. For questions or additional assistance, reach out to ClearTriage directly at **800-755-3545** or [support@cleartriage.com](mailto:support@cleartriage.com).