



# Telephone Triage Protocols for School Age Populations: Age Six to Eighteen years

*Sheila Quilter Wheeler*

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*Telephone Triage Protocols for School Age Populations (Age Six to 18 Years)* is the *first and only* age-based, patient-centered, completely customized guidelines specific to school age, adolescent and young adult populations.

**Comprehensive** The guidelines address over 1,500 medical conditions -- the most common presenting symptoms -- as well as rare, but predictable emergent symptoms. Each protocol includes screening questions, home treatment or first aid directives, and supplemental information.

**User Friendly** Descriptions of conditions are detailed enough to assure confident decision-making, yet concise enough to eliminate excessive, time-consuming and confusing cross-referencing. This reduces decision fatigue – a known contributor to error. Symptom descriptions, home treatment and first aid instructions are written in 5th-8th grade lay language to facilitate patient-centered communications.

**Standards-Based** This system, when used correctly, reduces common errors: inadequate data collection, jumping to conclusions, and selection of the wrong guideline.

**Authoritative, Expert Task Force** The guideline set was collaboratively developed over a two-year period, with the collective expertise of twenty nurses, nurse practitioners and physicians.

**Promotes Risk Management** Since 1995, these guidelines have been used in 300-500 sites nationally without a single report of errors, omissions or malpractice.

**Transparent** A semi-algorithmic and pattern recognition hybrid design, so users can understand and appreciate the why, how and where of the system elements.

**A Generic Guideline** supports nurses in cases where existing protocols may not apply, with general descriptions of emergent, urgent, acute and non-acute conditions.

**User's Guide** An 80-page user's guide thoroughly describes the overall design, as well as different elements, search engine strategy and terminology.

**Decision-making strategy** A synthesis of both algorithm and heuristics or pattern recognition, the design mimics the brain's natural problem solving strategy. Medical decision expert, Vimla Patel, PhD., in research, validated this real world approach to decision-making.

**User Friendly Dispositions** Five clearly defined, consistent dispositions promote clear follow up instructions. Users are spared frustrating searches through long lists of disposition options.

**Easy on your budget** – electronic software can cost your facility hundreds of thousands of dollars. Even *growing your own* paper protocols, is time consuming, expensive and may not produce high quality results.

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