**Supplementary Table 1 – Differences between the computerized version of CLARIPED and the original manual version.**

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|  | **Computerized CLARIPED**  | **Manual CLARIPED**  | **Justification** |
| VIPE score | Axillary temperature (degrees Celsius): Hyperthermia36-37.4 = 0 37.5-38.5 = 1 > 38.5 = 2 Hypothermia35.5-35.9 = 135-35.4 = 2  | Axillary temperature (degrees Celsius): Hyperthermia36-37.4 = 0 37.5-38.5 = 1 > 38.5 = 2 | Some children with hypothermia were classified as blue. |
| **Discriminators** |
| General appearance | “No prostration” – blue level | No prostration – green level | Children without any disease had been classified as green. |
| Fever report (Axillary temperature in degrees Celsius) | Orange ≥ 37.5 in infants < 3 months oldYellow≥ 38.5 in children 3-36 mth old (< 3 yr. old)Green ≥ 37.5 in children > 36 mth old (≥ 3 yr. old) | Orange≥ 38.5 in infants <3 months oldYellow ≥ 37.5 in children <3 months old≥ 38.5 in children <3 years old ≥ 39 at any age | Many older children with fever and mild illness had been inappropriately classified as yellow. Some young infants with a low fever and serious infections had been classified as yellow rather than orange. |
| Airway / Breathing | Green Cough, runny nose, sneeze, sore throat  | GreenNo discriminators | Many children with respiratory illnesses had been inappropriately classified as blue (level for patients without acute disease and no urgency). |
| Neurological | OrangeCapillary blood glucose (CBG) < 60 mg/dLYellowCBG 60-80 mg/dL | OrangeCBG < 40 (≤ 1 yr. old) or < 60 (> 1 yr. old)Yellow CBG 40-60 (≤ 1 yr. old) or 60-80 (> 1 yr. old) | The goal was to simplify. |
| Burn | OrangeModerate to severe > 10%YellowMild < 10% | OrangeModerate > 20%YellowMild < 10% | Burns with a body surface area of 10-20% were not covered in the old version, although most burns in children are classified as orange due to pain |
|  | **Computerized CLARIPED**  | **Manual CLARIPED**  | **Justification** |
| Comorbidities | Discriminators for immunosuppression and diabetes were maintained Discriminators for sickle cell anemia were addedOrangeSickle cell anemia in a child 1-5 yr. old with fever ≥ 38.5 oC or Sickle cell anemia in a child < 1 yr. old with any fever ≥ 37.5 ºCYellowSickle cell anemia in a child 1-5 yr. old with fever < 38.5 oC | There were only discriminators for immunosuppression and diabetes  | Some referral hospitals for haemato-oncology requested these discriminators. |
| **Explanatory notes** |
| Capillary blood glucose (CBG, mg/dL): perform the test in all patients with | a) altered level of consciousnessb) recent or current seizurec) lethargyd) previous history of diabetese) report of thirst + hungry + polyuria and weight loss | Capillary blood glucose (CBG, mg/dL): perform the test in all patients with altered level of consciousness, recent or current seizure, lethargy, or previous history of diabetes. | The aim of adding this item (report of thirst + hungry + polyuria and weight loss) was to identify the symptoms of the first episode of diabetes. |
| Immunosuppression | After chemotherapy, active nephrotic syndrome, chronic corticosteroids (> 3 mo.), congenital immunodeficiencies. | After chemotherapy, active nephrotic syndrome, chronic use of corticosteroids. | Improve the characterization of immunosuppression. |
| Blood pressure | The item about blood pressure (BP) was removed from the explanatory notes  | Always measure (BP) in case of altered level of consciousness, recent or current seizure, suspected dengue fever, edema of the lower limbs, or generalized (anasarca). | In cases of altered consciousness and recent or current seizures, the patient is referred for rapid or immediate medical care, and BP measurement during triage would only delay the referral. The other conditions that require BP measurement (suspected dengue, lower limb edema, or anasarca) are already included in the discriminator table |
|  | **Computerized CLARIPED**  | **Manual CLARIPED**  | **Justification** |
| Corrections for translation and/or typing errors |
| Gastrointestinal | Yellow Report of persistent vomiting or current vomiting. | Yellow Present seizure or report of persistent vomiting. | Inappropriate translation for publication in English. |
| Trauma | Orange – mild TBI with < 12h and no report of loss of consciousness or vomiting.Yellow – mild TBI with>12h without loss of consciousness and without vomiting. | OrangeTBI with < 12h and no report of loss of consciousness or vomiting YellowTBI with>12h without loss of consciousness and without vomiting | Inappropriate translation for publication in English. |
| Bleeding / Wound | Green Small bleeding | GreenSmall bleeding Small wound with mild bleeding | Wrong typing |
| Pele | RedUrticaria with significant respiratory difficultyOrangeUrticaria with facial edema and/or hoarseness | RedUrticaria with stridor and significant respiratory difficultyOrangeUrticaria with facial edema | Inappropriate translation for publication in English |