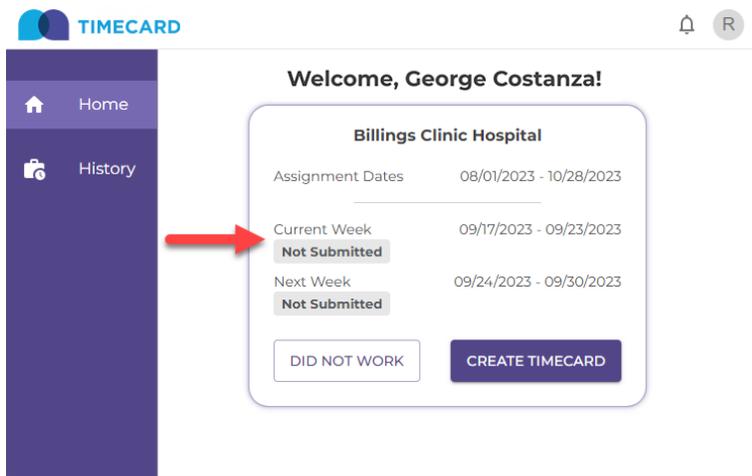


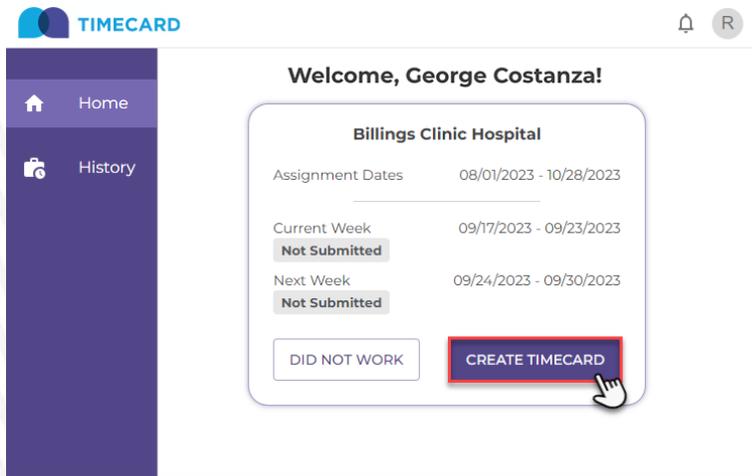
Submitting a Timecard | (Phase II)

This article covers how to submit timecards using the Triage Timecard App.

1. After signing in, you are taken to the Home Page. A card depicting assignment dates for the current and following week are visible.



2. Click Create Timecard to begin the time entry process.



3. Select the day of the week on which you would like to enter hours worked and input Time In, Time Out, and a Lunch.

Select time on the clock using the 24-hour format down to the minute. Repeat the sequence until each day has been entered.

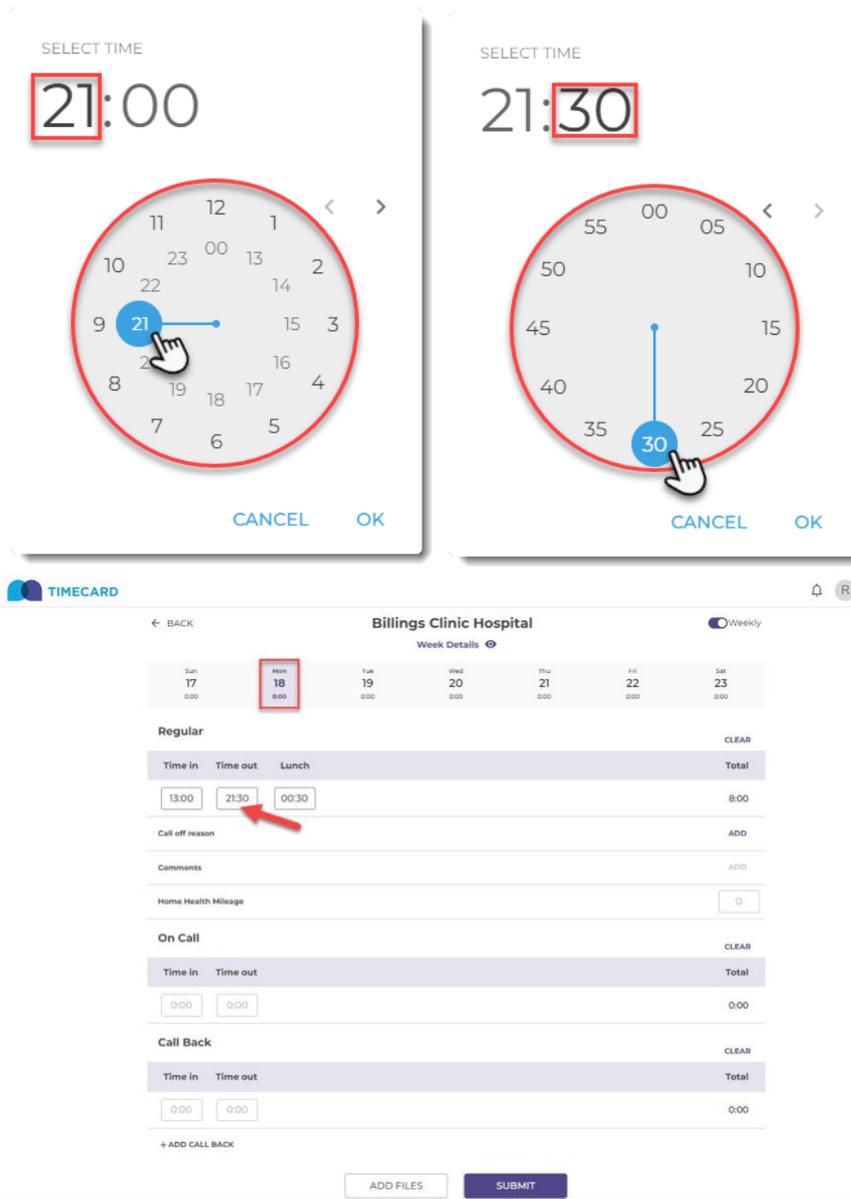
Note:

- **IMPORTANT** | Lunch is required, even if it is zero (00:00).
- Travelers in the State of California with a missed lunch will have up to 1 hour extra each day added to their regular hours.

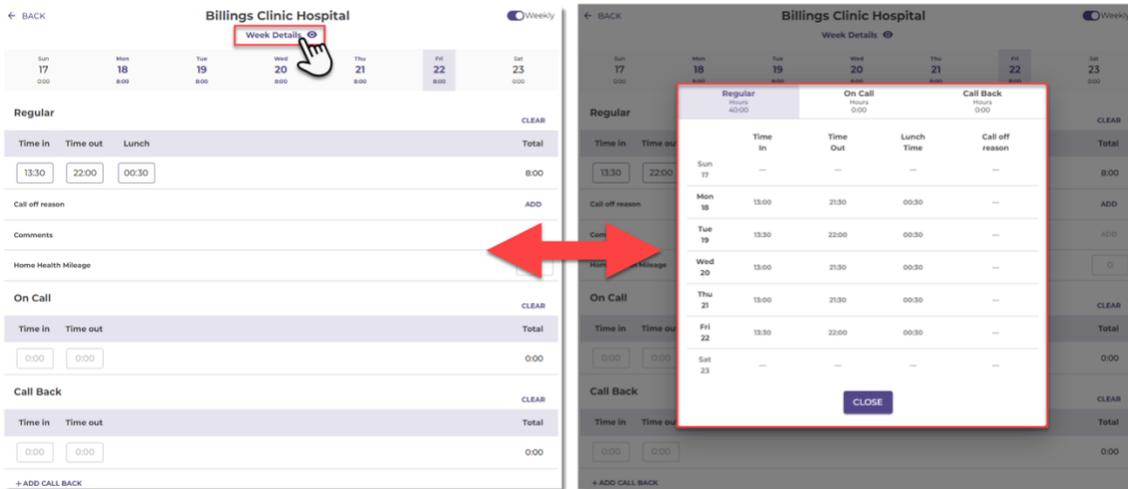


TRIAGE

- Hours are editable and can be removed/updated/deleted during the time entry phase.
- Closing the app or navigating away from the page retains the time entered.
- On Call or Call Back hours cannot be overlapped with Regular hours.



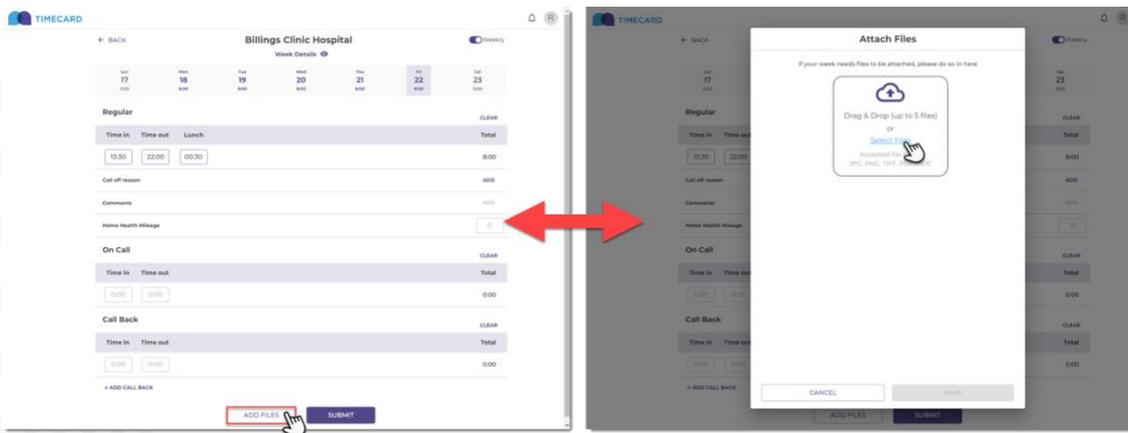
4. Optional | To review entered time for the entire week before submission, click Week Details located directly underneath the name of the facility.



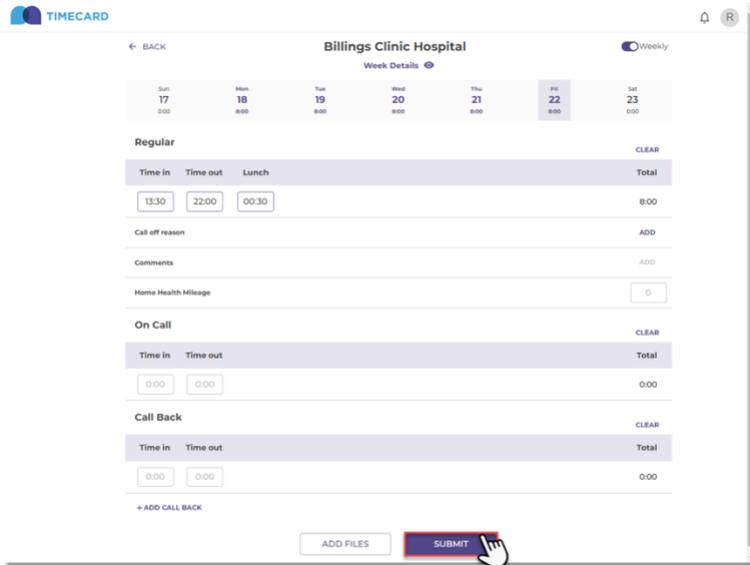
- If necessary, you can upload additional files along with your timecard submission. To accomplish this, click the button labeled Add Files.

IMPORTANT | Some facilities require additional documentation to be provided before the timecard can be submitted.

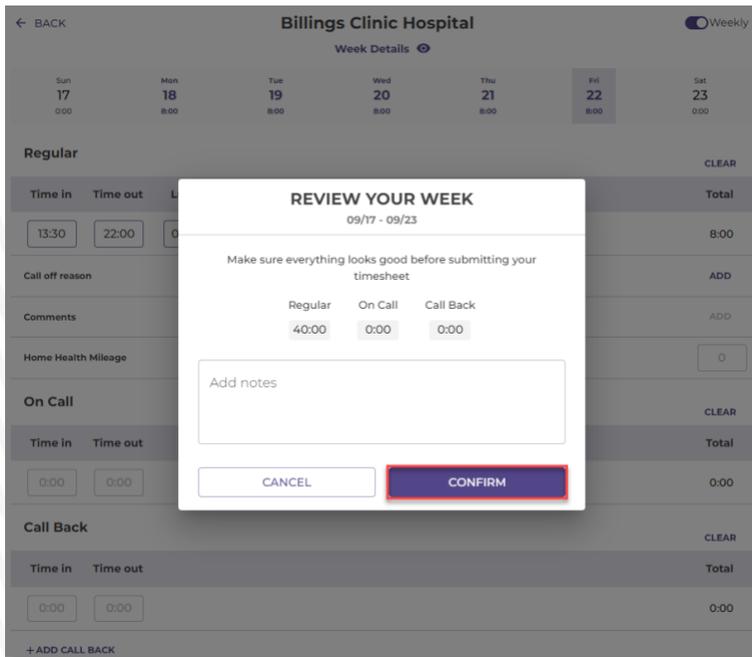
In these cases, you will be unable to submit your timecard until after the proper documentation has been uploaded.



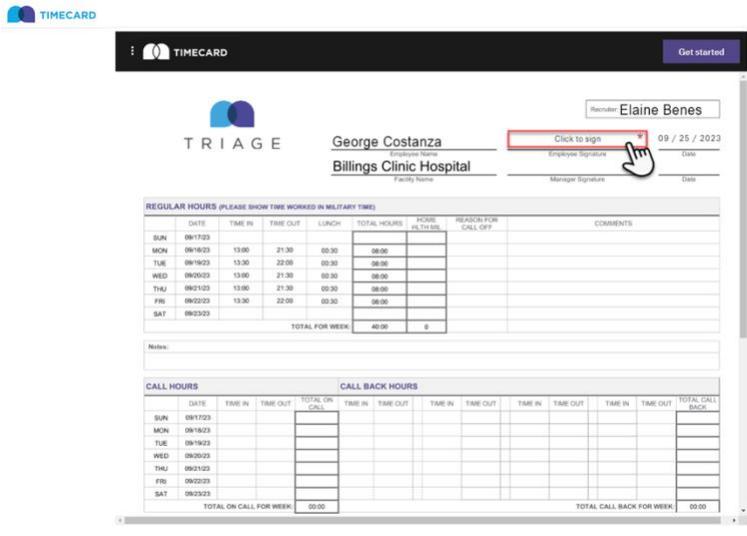
- Upon completion, click Submit.



7. A Review Your Week window appears giving one final opportunity to check the total entered for Regular, On Call, and/or Call Back hours. If correct, click Confirm.



8. You will receive a preview of your completed timecard with the ability to click to sign your name.



TIMECARD Get started

Recruiter: Elaine Benes

TRIAGE **George Costanza** Click to sign 09 / 25 / 2023

Employee Name: George Costanza Employee Signature: _____ Date: _____

Facility Name: Billings Clinic Hospital Manager Signature: _____ Date: _____

REGULAR HOURS (PLEASE SHOW TIME WORKED IN MILITARY TIME)

DATE	TIME IN	TIME OUT	LUNCH	TOTAL HOURS	HOURS PAID	REASON FOR CALL OFF	COMMENTS
SUN 09/17/23							
MON 09/18/23	13:00	21:30	00:30	08:00			
TUE 09/19/23	13:30	22:00	00:30	08:00			
WED 09/20/23	13:00	21:30	00:30	08:00			
THU 09/21/23	13:00	21:30	00:30	08:00			
FRI 09/22/23	13:30	22:00	00:30	08:00			
SAT 09/23/23							
TOTAL FOR WEEK:				48:00	0		

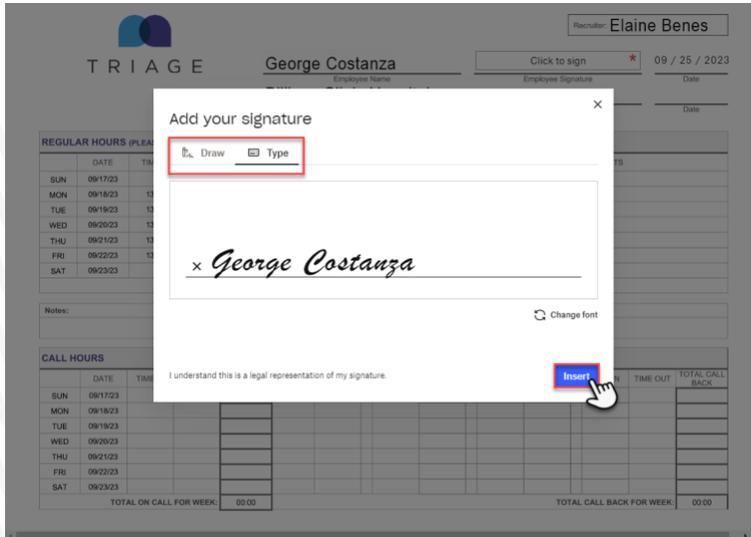
Notes:

CALL HOURS **CALL BACK HOURS**

DATE	TIME IN	TIME OUT	TOTAL ON CALL	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	TOTAL CALL BACK
SUN 09/17/23												
MON 09/18/23												
TUE 09/19/23												
WED 09/20/23												
THU 09/21/23												
FRI 09/22/23												
SAT 09/23/23												
TOTAL ON CALL FOR WEEK:			00:00	TOTAL CALL BACK FOR WEEK:			00:00					

- A signature box will appear with the option to sign or type your name, when finished click Insert.

Note: If you choose to type your name, a variety of fonts are available, by clicking  Change font



Recruiter: Elaine Benes

TRIAGE **George Costanza** Click to sign 09 / 25 / 2023

Employee Name: George Costanza Employee Signature: _____ Date: _____

Facility Name: Billings Clinic Hospital Manager Signature: _____ Date: _____

REGULAR HOURS (PLEASE SHOW TIME WORKED IN MILITARY TIME)

DATE	TIME IN	TIME OUT	LUNCH	TOTAL HOURS	HOURS PAID	REASON FOR CALL OFF	COMMENTS
SUN 09/17/23							
MON 09/18/23	13:00	21:30	00:30	08:00			
TUE 09/19/23	13:30	22:00	00:30	08:00			
WED 09/20/23	13:00	21:30	00:30	08:00			
THU 09/21/23	13:00	21:30	00:30	08:00			
FRI 09/22/23	13:30	22:00	00:30	08:00			
SAT 09/23/23							
TOTAL FOR WEEK:				48:00	0		

Notes:

CALL HOURS **CALL BACK HOURS**

DATE	TIME IN	TIME OUT	TOTAL ON CALL	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	TIME IN	TIME OUT	TOTAL CALL BACK
SUN 09/17/23												
MON 09/18/23												
TUE 09/19/23												
WED 09/20/23												
THU 09/21/23												
FRI 09/22/23												
SAT 09/23/23												
TOTAL ON CALL FOR WEEK:			00:00	TOTAL CALL BACK FOR WEEK:			00:00					

Add your signature

Draw Type

George Costanza

Insert Change font

I understand this is a legal representation of my signature.

- On the upper right corner, click the button labeled Continue.

Continue

Ⓞ You have completed all required fields. Please click 'Continue'.



George Costanza
Employee Name

Billings Clinic Hospital
Facility Name

Recruiter: **Elaine Benes**

George Costanza *

Employee Signature

09 / 25 / 2023

Date

Manager Signature

Date

REGULAR HOURS (PLEASE SHOW TIME WORKED IN MILITARY TIME)								
	DATE	TIME IN	TIME OUT	LUNCH	TOTAL HOURS	HOME HLTH MIL	REASON FOR CALL OFF	COMMENTS
SUN	09/17/23							
MON	09/18/23	13:00	21:30	00:30	08:00			
TUE	09/19/23	13:30	22:00	00:30	08:00			
WED	09/20/23	13:00	21:30	00:30	08:00			
THU	09/21/23	13:00	21:30	00:30	08:00			
FRI	09/22/23	13:30	22:00	00:30	08:00			
SAT	09/23/23							
TOTAL FOR WEEK:					40:00	0		

Notes:

11. Click the button labeled, I agree to accept the Terms of Service.

Almost done.

I agree to be legally bound by this document and the Dropbox Sign [Terms of Service](#). Click on 'I Agree' to sign this document.

Edit I agree



Recruiter: **Elaine Benes**

George Costanza
Employee Name

Billings Clinic Hospital
Facility Name

George Costanza *

Employee Signature

09 / 25 / 2023

Date

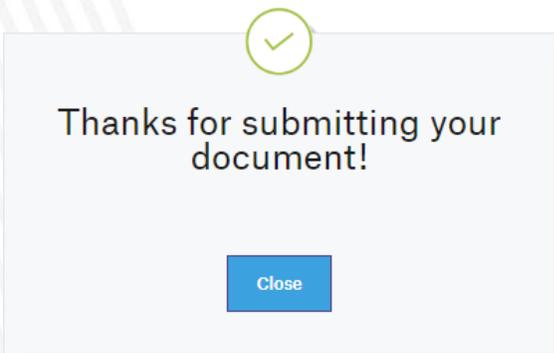
Manager Signature

Date

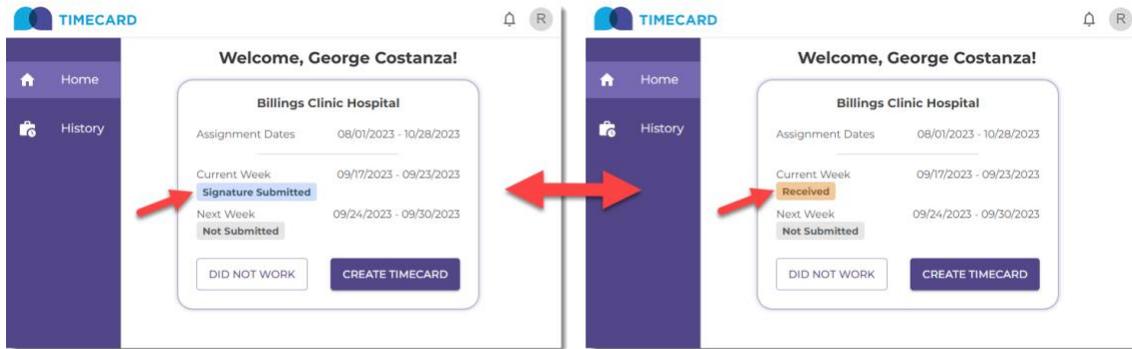
REGULAR HOURS (PLEASE SHOW TIME WORKED IN MILITARY TIME)								
	DATE	TIME IN	TIME OUT	LUNCH	TOTAL HOURS	HOME HLTH MIL	REASON FOR CALL OFF	COMMENTS
SUN	09/17/23							
MON	09/18/23	13:00	21:30	00:30	08:00			
TUE	09/19/23	13:30	22:00	00:30	08:00			
WED	09/20/23	13:00	21:30	00:30	08:00			
THU	09/21/23	13:00	21:30	00:30	08:00			
FRI	09/22/23	13:30	22:00	00:30	08:00			
SAT	09/23/23							
TOTAL FOR WEEK:					40:00	0		

Notes:

12. A message stating, "Thanks for submitting your document!" appears.



13. The homepage will be updated with the timecard status:



IMPORTANT | you can only request edits to timecards that have not been processed for the current or the next pay period.

1. On the left side, click History.

Addendum

Call Off Reason & Comments

If necessary, you can indicate when and why they missed a shift due to calling off.

1. To choose a call off reason and provide a comment, you can click the word Add.

← BACK Weekly

Billings Clinic Hospital

Week Details

Sun	Mon	Tue	Wed	Thu	Fri	Sat
17 0:00	18 7:30	19 0:00	20 8:00	21 8:00	22 8:00	23 0:00

Regular CLEAR

Time in	Time out	Lunch	Total
0:00	0:00	0:00	0:00

Call off reason ADD

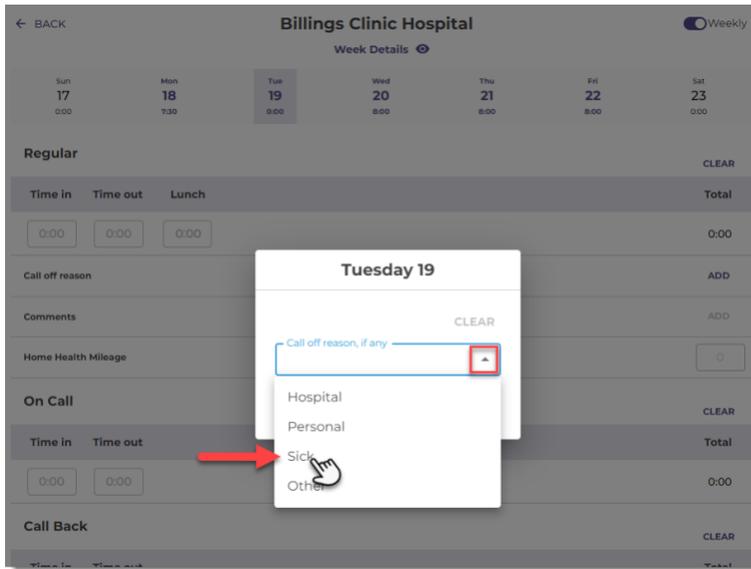
Comments ADD

Home Health Mileage 0

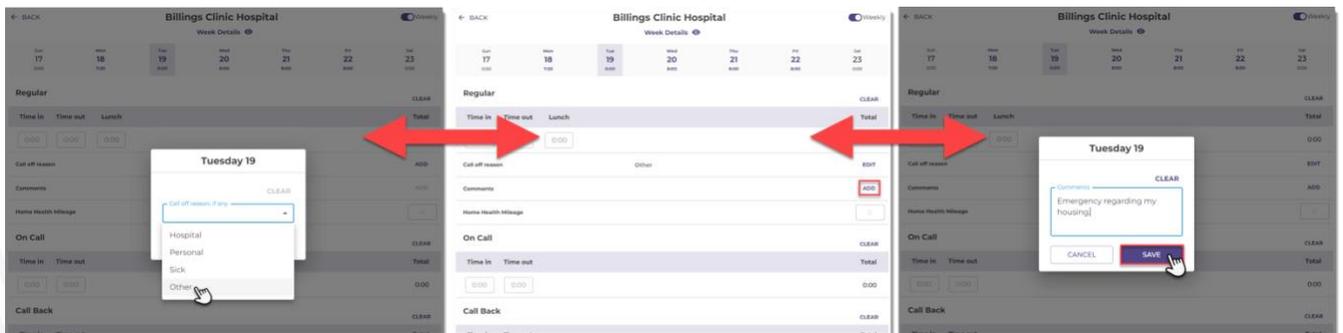
On Call CLEAR

Time in	Time out	Total
0:00	0:00	0:00

2. From the dropdown, select a reason: Hospital, Personal, Sick, or Other.

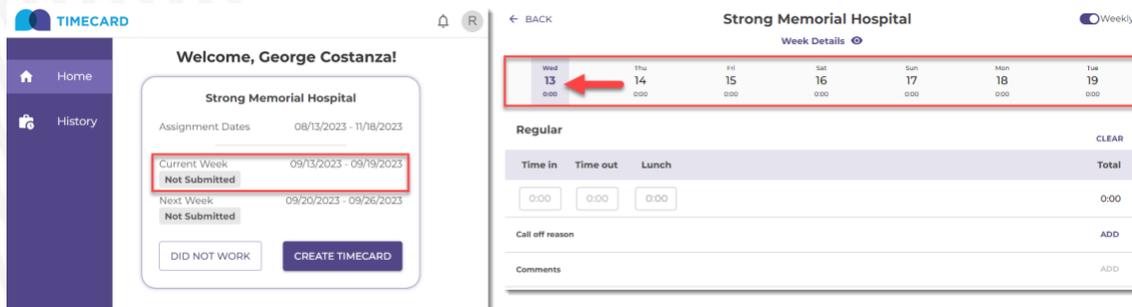


IMPORTANT | If Other is chosen from the dropdown, the Comments field will be enabled.

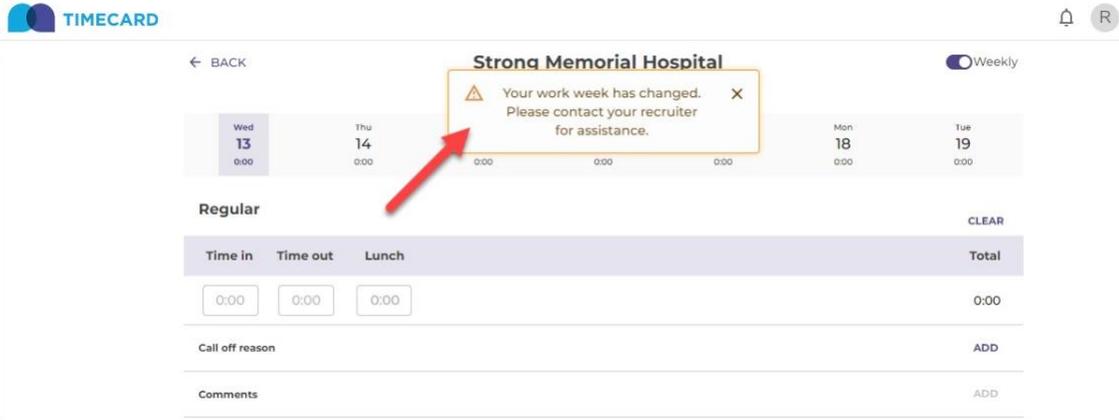


Alternate Work Week

If you are on an alternate work week, you will see dates and days according to your specific schedule.



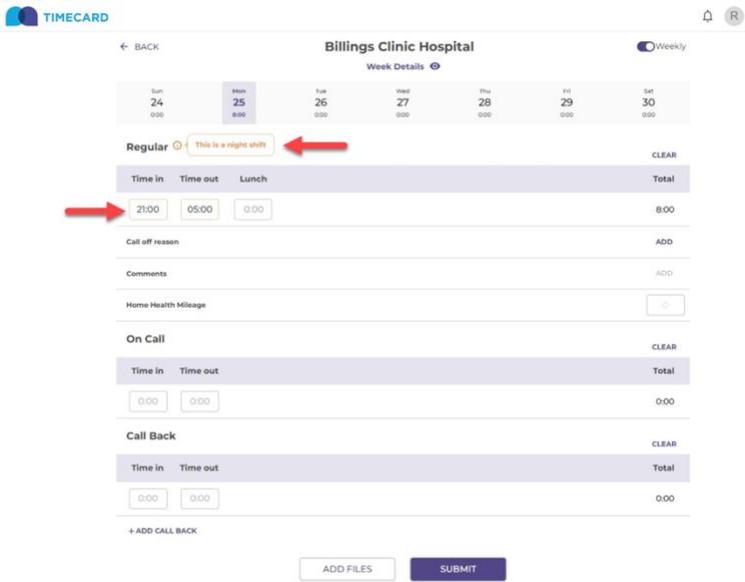
Note: In rare cases, if an alternate work week is changed by payroll before you have started entering your time for the week, you will see a message to contact your recruiter.



Overnight Shift

If the time out entry falls on the next day, the shift is considered an overnight shift. When this occurs, a visual indicator will appear stating, "This is a night shift."

Note: Hover over the  icon to view verbiage.



Did Not Work

You can submit a Did Not Work Timecard for an active pay period from the home page.

1. Click the button labeled, Did Not Work.

Welcome, George Costanza!

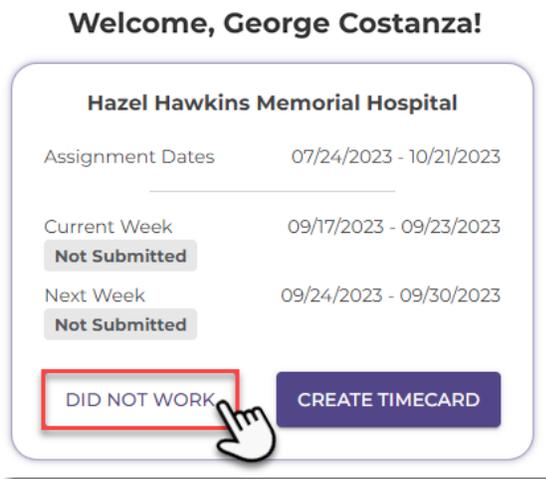
Hazel Hawkins Memorial Hospital

Assignment Dates 07/24/2023 - 10/21/2023

Current Week 09/17/2023 - 09/23/2023
Not Submitted

Next Week 09/24/2023 - 09/30/2023
Not Submitted

DID NOT WORK **CREATE TIMECARD**



2. If correct, next click the button labeled, Confirm.

Welcome, George Costanza!

Hazel Hawkins Memorial Hospital

Assignment Dates 07/24/2023 - 10/21/2023

Current Week 09/17/2023 - 09/23/2023
Not Submitted

Next Week 09/24/2023 - 09/30/2023
Not Submitted

DID NOT WORK **CREATE TIMECARD**

Double checking that you didn't work this week.
You won't get paid if you select Confirm.

CANCEL **CONFIRM**

Welcome, George Costanza!

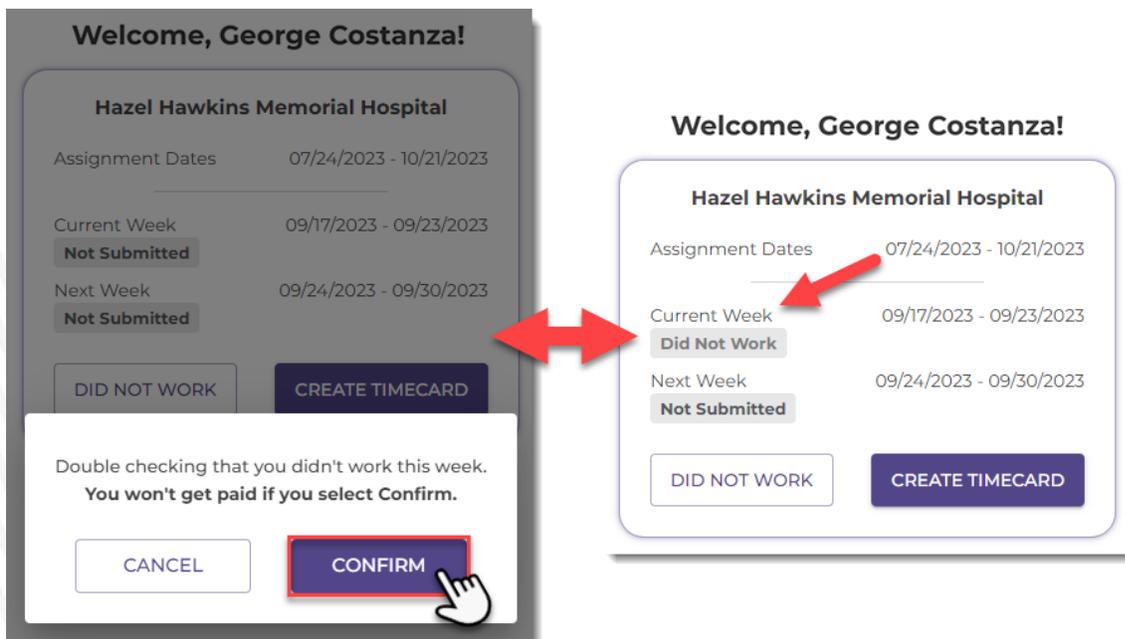
Hazel Hawkins Memorial Hospital

Assignment Dates 07/24/2023 - 10/21/2023

Current Week 09/17/2023 - 09/23/2023
Did Not Work

Next Week 09/24/2023 - 09/30/2023
Not Submitted

DID NOT WORK **CREATE TIMECARD**



Manager Signature

Hospitals or MSPs may require a manager to sign your Timecard prior to submission. If necessary, you will experience the following workflow.

1. Complete Steps 1-7 of the Timecard submission process.
2. Upon clicking the button labeled, Submit, collection of the Manager's signature begins. Click Add New.

REVIEW YOUR WEEK
09/17 - 09/23

Make sure everything looks good before submitting your timesheet

Regular	On Call	Call Back
40:00	0:00	0:00

 **ADD NEW**

Select Manager ▼

Add notes

CANCEL **CONFIRM**

3. Enter the manager's Full Name, Email Address, and click Confirm.
 - Note: An Email is sent to the manager requesting their signature.

REVIEW YOUR WEEK
09/17 - 09/23

Make sure everything looks good before submitting your timesheet

Regular	On Call	Call Back
40:00	0:00	0:00

CANCEL

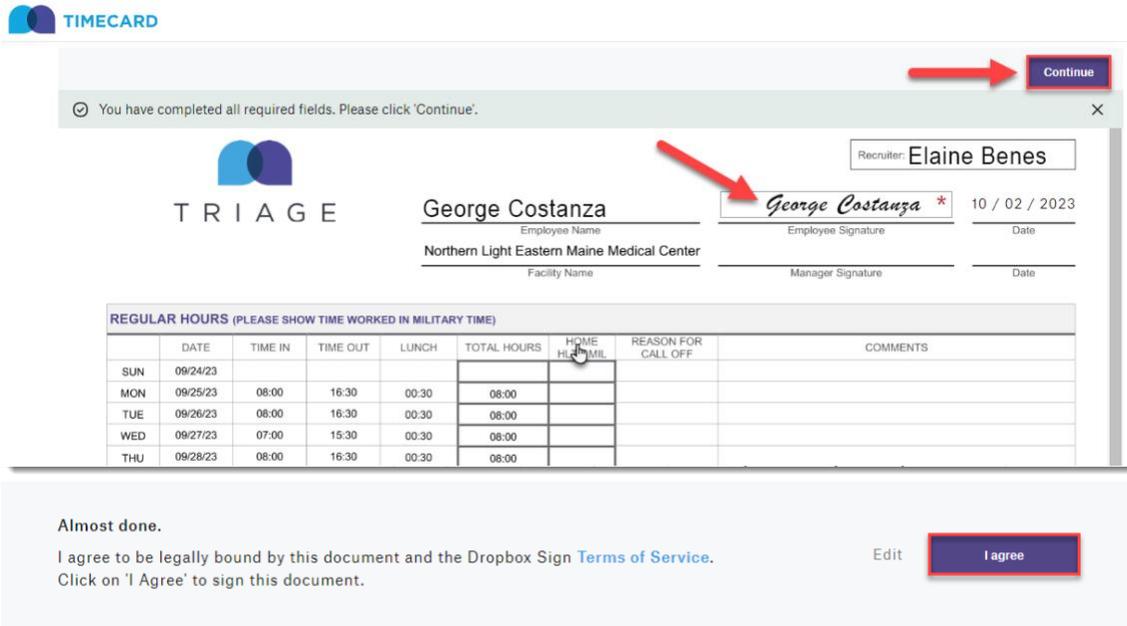
Manager Full Name* 

Manager Email* 

Add notes

CANCEL **CONFIRM** 

4. You will see a preview of your completed timecard with the ability to click to sign your name. When finished, click Continue, and click I agree to the Terms of Service.



TIMECARD

You have completed all required fields. Please click 'Continue'.

Recruiter: Elaine Benes

George Costanza
Employee Name

*George Costanza **
Employee Signature

10 / 02 / 2023
Date

Northern Light Eastern Maine Medical Center
Facility Name

Manager Signature

Date

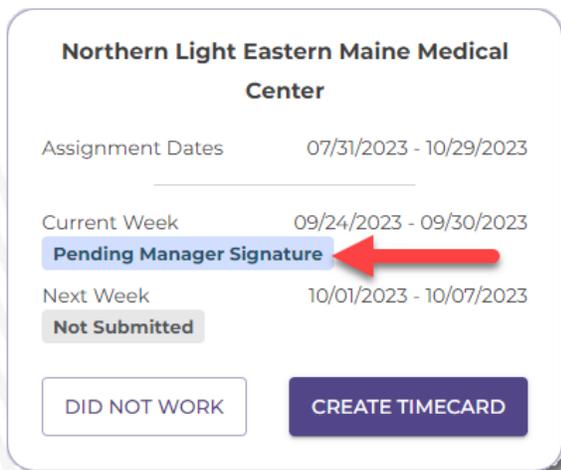
REGULAR HOURS (PLEASE SHOW TIME WORKED IN MILITARY TIME)								
	DATE	TIME IN	TIME OUT	LUNCH	TOTAL HOURS	HOME HOURS	REASON FOR CALL OFF	COMMENTS
SUN	09/24/23							
MON	09/25/23	08:00	16:30	00:30	08:00			
TUE	09/26/23	08:00	16:30	00:30	08:00			
WED	09/27/23	07:00	15:30	00:30	08:00			
THU	09/28/23	08:00	16:30	00:30	08:00			

Almost done.

I agree to be legally bound by this document and the Dropbox Sign [Terms of Service](#).
Click on 'I Agree' to sign this document.

Edit **I agree**

5. Until the manager signs, your homepage will show Pending Manager Signature.



Northern Light Eastern Maine Medical Center

Assignment Dates 07/31/2023 - 10/29/2023

Current Week 09/24/2023 - 09/30/2023

Pending Manager Signature

Next Week 10/01/2023 - 10/07/2023

Not Submitted

DID NOT WORK **CREATE TIMECARD**

6. Manager receives timecard via email and digitally signs the timecard.

Continue

✔ You have completed all required fields. Please click 'Continue'.
✕



TRIAGE

Recruiter: Elaine Benes

George Costanza

Employee Name

Northern Light Eastern Maine Medical Center

Facility Name

George Costanza

Employee Signature

Cosma Kramer *

Manager Signature

10 / 02 / 2023

Date

10 / 02 / 2023

Date

REGULAR HOURS (PLEASE SHOW TIME WORKED IN MILITARY TIME)

DATE	TIME IN	TIME OUT	LUNCH	TOTAL HOURS	HOME HLTH MIL	REASON FOR CALL OFF	COMMENTS
SUN 09/24/23							
MON 09/25/23	08:00	16:30	00:30	08:00			
TUE 09/26/23	08:00	16:30	00:30	08:00			
WED 09/27/23	07:00	15:30	00:30	08:00			

7. Homepage displays Timecard status updates as signatures are received.

Northern Light Eastern Maine Medical Center

Assignment Dates 07/31/2023 - 10/29/2023

Current Week 09/24/2023 - 09/30/2023

Signature Submitted

Next Week 10/01/2023 - 10/07/2023

Not Submitted

DID NOT WORK
CREATE TIMECARD

Northern Light Eastern Maine Medical Center

Assignment Dates 07/31/2023 - 10/29/2023

Current Week 09/24/2023 - 09/30/2023

Received

Next Week 10/01/2023 - 10/07/2023

Not Submitted

DID NOT WORK
CREATE TIMECARD

Precept/Charge

If your assignment includes Precept/Charge responsibilities and a rate has been entered on your dealsheet, a field labeled as such will be available to enter qualified hours.

Note:

- This is not a required field, but, when used, regular hours will need to be entered on the same day.
- You will only need to enter total hours in this field.
- Precept/Charge hours cannot exceed the total for regular hours.

Regular CLEAR

Time in	Time out	Lunch	Total
15:00	23:00	00:30	7:30
Call off reason			ADD
Comments			ADD
Precept/Charge			07:30
Home Health Mileage			0

← ⓘ Precept/Charge hours exceed Regular hours. sky

Sun	Mon	Tue	Wed	Thu	Fri	Sat
10 0:00	11 7:30	12 0:00	13 0:00	14 0:00	15 0:00	16 0:00

Regular CLEAR

Time in	Time out	Lunch	Total
15:00	23:00	00:30	7:30
Call off reason			ADD
Comments			ADD
Precept/Charge			07:45
Home Health Mileage			0

Home Health Mileage

If an assignment includes Home Health Mileage, a field labeled as such is always available to enter total miles.

Note:

- This field is displayed for everyone.
- No max number of miles.
- Only positive numbers are accepted, decimals are allowed.

Regular CLEAR

Time in	Time out	Lunch	Total
06:00	15:00	00:30	8:30
Call off reason			ADD
Comments			ADD
Precept/Charge			0:00
Home Health Mileage			15

Future dated time entry is disallowed.

Note: Time cannot be entered in the future. Submission will be enabled after the last completed day as scheduled. If you attempt to enter time in the future, you will be presented the following prompt which details:

