

Template Customization Guide for Clinic Administrators (EverHealth Scribe)

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Who is this guide for?

This guide is written for Practice Administrators who manage EverHealth Scribe on behalf of one or more providers. No technical background is needed. If you can configure settings and communicate with your clinical team, you have everything you need to get started.

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Additional resources

- [Using EverHealth Scribe During Patient Visits](#)
- [Customize Your Clinical Note Templates using EverHealth Scribe](#)
- [Reviewing and Editing a Clinical Note using EverHealth Scribe](#)
- [Sending Your Note to DrChrono using EverHealth Scribe](#)
- [EverHealth Scribe – Managing Note Templates \(Quick Guide\)](#)
- [Best Practices using EverHealth Scribe](#)
- [Using EverHealth Scribe in DrChrono \(Video\)](#)
- [Using EverHealth Scribe with the Mobile App](#)
- [Using EverHealth Scribe with the Mobile App \(Video\)](#)
- [EverHealth Scribe Frequently Asked Questions \(FAQ\)](#)

Getting started

Before you touch any settings, the most important step is talking to your providers. A few conversations up front will save you hours of adjustments later.

Step 1 — Talk to Your Providers

Meet with each clinician or group of clinicians who will use EverHealth Scribe. Ask them:

- How detailed do they want their notes to be?
- Which sections should use a fixed structure (like a checklist), and which should be written in free-flowing sentences?
- Are there specialty-specific details they always need to include (for example, OB/GYN counseling notes or orthopedic imaging details)?
- Do they rely on information from a patient's previous visits?

Step 2 — Review the Default Template

EverHealth Scribe comes with a standard template that all clinics start with. It includes these main sections:

- Subjective / History of Present Illness (HPI)
- Objective / Physical Exam
- Assessment

- Plan
- Review of Systems (ROS) and other structured fields

Get familiar with this baseline before making changes. You'll build on top of it, not start from scratch.

Step 3 — Decide What Should Be the Same for Everyone

Some things should be consistent across your entire clinic for compliance and quality reasons. Consider standardizing:

- Disclosure statements (e.g., a note that the documentation was AI-assisted)
- Supervision statements for supervised providers
- Normal physical exam and ROS templates
- Specialty-specific blocks (e.g., pediatrics, behavioral health)
- Legally or clinically required language

Step 4 — Decide Where Providers Can Personalize

Not everything needs to be locked down. Give your providers flexibility in areas that don't affect compliance:

- Their preferred writing style and tone
- How much detail they include in the HPI
- How they format their Assessment and Plan
- Their own shortcut phrases (more on this in the Voice Macros section)

Template types

EverHealth Scribe uses two different approaches for building note sections. Understanding the difference helps you choose the right setup for each part of the note.

Structured (Discrete) Sections	AI-Written (Generative) Sections
Best for: Review of Systems, Physical Exam, Social History, standardized clinic blocks	Best for: HPI, Assessment, Plan, Medical Decision Making
How it works: Normal findings are pre-filled. Providers only document what is abnormal or different.	How it works: The AI listens to the visit and writes a narrative note. Over time, it learns each provider's style.

Attestations

An attestation is a required statement that gets automatically added to notes. You can set these up once and they will appear on every relevant note without providers needing to remember to add them.

Types of Attestations You Can Set Up

- Global attestations that appear on every provider's note (e.g., a disclosure that AI was used in documentation)
- Template-specific attestations that only appear on certain visit types
- Scenario-based attestations triggered by specific situations (e.g., pregnancy counseling or controlled substance discussions)

Admin Best Practice- Build a central library of attestation statements for your clinic first, then assign each one to the right templates. This way, if the language ever needs to change, you only update it in one place.

Voice macros

Voice macros are shortcuts that let providers insert a block of pre-written text just by saying a trigger word or phrase during a visit. Think of them like text expanders for clinical documentation.

Examples of What You Can Create

- Patient education blocks for specific conditions
- Standard medication management language
- Procedure descriptions
- Counseling language (e.g., smoking cessation, prenatal counseling)



Admin Best Practice - Create a shared macro library for common clinic-wide phrases. Then allow providers to add their own personal macros on top of that for any phrasing they prefer to use individually.

Inline instructions

Inline instructions let you embed rules inside templates that trigger automatically based on what is said during a visit. You do not need to be technical to understand these – think of them as "if this, then that" rules for your notes.

Examples

- If the patient is under 18, automatically include a guardian consent block
- If the provider says "post-op," insert the surgical follow-up protocol
- If a chronic condition is mentioned, include the relevant disease management care plan



When to Use Inline Instructions

Use these sparingly and only for situations that are safety-critical, legally required, or specific to a clinical specialty. Overusing conditional logic can make templates harder to manage over time.

Template maintenance

Setting up templates is not a one-time task. Plan to monitor and improve them on an ongoing basis, especially in the first few weeks after going live.

What to Watch For

- Provider feedback during the first 2 to 4 weeks – this is your most valuable signal
- AI output that does not match what providers expected
- Any section where providers are making a lot of manual corrections (this usually means the template needs adjustment)
- Changes to billing or compliance requirements

Recommended Ongoing Actions

- Run a quarterly template review with your Provider Champions
- Add or adjust macros as you identify recurring phrases
- Update templates whenever clinic policies or procedures change
- Reach out to CarePilot support for complex tuning or advanced adjustments

Clinic governance

A clear ownership model prevents templates from drifting or going stale. Here is the structure we recommend:

Role	Responsibilities
Clinic Template Owner (Admin)	Creates and maintains all clinic-wide templates. Main point of contact for template issues.
Provider Champions (1 per specialty)	Represents their specialty's needs, reviews AI output quality, and escalates template issues.
Providers	Use templates consistently, report issues early, and give honest feedback on what is or is not working.
EverHealth Support	Handles provisioning, user setup, and EHR integration questions.
CarePilot Support	Handles advanced logic, model tuning, and complex template behavior.

Suggested Onboarding Timeline

Days 1-2 : Review and gather requirements	Admin reviews the default templates and meets with providers to understand their needs and preferences.
Days 3-5: Configure templates	Admin sets up clinic-wide templates and configures provider-level personalization areas.
Week 2: Go Live with Feedback Loop	Providers begin using templates in real visits. Admin actively collects feedback and tracks issues.
Weeks 3-4: Refine and Calibrate	Admin makes adjustments based on provider feedback. Optional calibration session with CarePilot support.
Quarterly: Governance Reviews	Admin and Provider Champions review templates together and make updates as policies or clinical needs change.

Support

- [Access DrChrono Support](#)
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