

Database Split Checklist

A database split may be necessary when one or more providers are leaving a practice and want to take data regarding their patients with them. This document explains Open Dental's process when splitting a database. Database splits can be performed by provider or by clinic.

Notes:

- Splitting the OpenDentImages folder is optional. You may split the folder (for an additional fee) or make a copy for the new location.
- Open Dental cannot change x-ray information. Contact your digital imaging software for options.

General Information

Practice Name: _____

Phone Number(s): _____

Staff Contact Name & Job Title: _____

Designate a staff member who will be in charge of the process for your office and Open Dental's main point of contact

What version of Open Dental are you using? _____

Is there an IT professional helping you? Yes No

If yes, provide their name and phone number: _____

Database Information

How will the database be split? (select one)

By Provider

List Provider Name(s): _____

By Clinic

List Clinic Name(s): _____

Other (as discussed with the Conversions Department)

Digital Imaging Software (X-Rays)

Which digital imaging software does the current database use? _____

Which digital imaging software will the split databases use? _____

Scanned Documents (OpenDentImages Folder)

There are three options for managing the OpenDentImages (AtoZ) folder, which stores scanned documents and other patient images seen in the Imaging Module.

Please choose one option:

- I want to split the OpenDentImages folder.
 - If selecting this option, I understand there is an additional fee for this service.

- I want to make a copy of the OpenDentImages folder.
 - If selecting this option, I understand that I am responsible for placing the copy at the new location.

- I do not need historical scanned documents.

Aging Information

It is recommended that you zero out account balances at the time of the split. Family members, bulk checks, claims, and patient balances may be split out, causing data to be inaccurate in the split database.

- Do you want to zero out the account balances for all patients?** Yes No
- Do you want us to group families together, presplit?** Yes No

Split Process

Write the date each step is completed.

Date Completed

Open Dental ran a test split and installed it on my server. _____

I have reviewed the data in the split and verified that it is as accurate as possible. _____

Check Split Data

You are responsible for checking the split data. If you discover an issue, contact a conversion specialist.

- I have verified that all settings carried over correctly (e.g., schedules, users, providers, operatories).

Only fill out the following information if you have chosen not to zero out account balances for all patients:

Enter the Total Aging of A/R in the current Open Dental Database at the time of the split. \$ _____

Enter the Total Aging of A/R in the test split. \$ _____

Are the account balances in the test split as accurate as possible?
(total balances for all families) Yes No

Acknowledgements

- I understand there is a database split fee as well as an optional OpenDentImages fee. Any fee changes will be communicated in writing or via e-mail. See [Conversions](#) for Split fees
- When splitting by provider or clinic, I understand the following may occur:
 - Settings will be brought over.
 - Aging of A/R will be inaccurate.
 - Insurance plans may be dropped.
 - Bulk checks may be wrong or split.
 - Patients may be split from families.
- I understand that after the database split, there will be no historical Audit Trail data in the split database.
- I understand it is my responsibility to contact my digital imaging software and set up the software in the split database.
- I have checked the test split data and am satisfied with the results.
- I understand that after the final split there will be no further enhancements to my data.
- I understand that the final split will be a new database. After the final split, I will only enter data in the new database. I will not enter new data in the test split.
- I understand that after the final split, I am responsible for reviewing patient accounts and making adjustments as needed.

Open Dental recommends that you do not delete your old database, so it is available for reference.

By signing below, I acknowledge that the information provided is accurate and complete, and that I am authorized to approve and proceed with the Final Database Split.

Print Name, Job Title

Signature

Date

Practice Name

Doctor Name

Phone #