

Patient Information:



Personal Information

1506 Self 1506

Record No. Relation Responsible Party

John J Zimmerman Johnny

Name First M Last Preferred

425 Corte Madera Avenue (763)555-4444

Address Line 1 Home Phone

(763)666-4345

Address Line2 Work Phone

Corte Madera CA 94925- (763)675-1234

City-State-Zip Mobile Phone

USA John@yahoo.com () - -

Country Email Fax

01/04/1998 13 539-00-0000 Male Single

Birth Date Age SSN Gender Marital Status

1 Active

Classification Doctor Hygienist Record Status

- Patients grouped by responsible party.
- First Name
- Last Name
- Middle Initial
- Preferred Name
- Address 1
- Address 2
- City
- State
- Zip
- Home Phone Number
- Work Phone Number
- Mobile Phone Number
- Fax Number
- Email Address
- Gender
- Marital Status
- Birth Date
- Patient SSN
- Doctor of Record
- Hygienist
- Record Status

Notes:

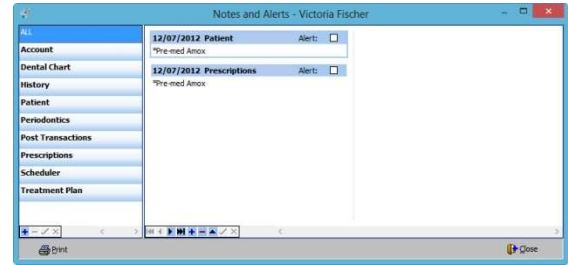


Notes

Medalart: PCN Allergy Notes1: Comments Personotes: 6-4-1 payment for dos 4-4-01 will issue within 10 days for 64.80 AcctNotes1: 12/07/ - NO PRIME DENTAL INS. ONLY AFLAC

- Medicaid ID Number
- Driver's License Number
- Insurance Policy Number

Notes and Alerts:



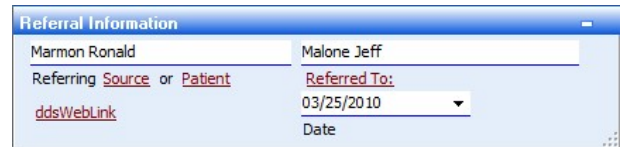
Notes and Alerts - Victoria Fischer

12/07/2012 Patient Alert:

12/07/2012 Prescriptions Alert:

- Premed converts to Dental Chart and Prescriptions Alert
- Clinical Notes convert to Dental Chart
- Insurance Notes convert to Patient as a note
- Ledger Notes convert to Post Transaction as a note
- Ledger Line Convert to Post Transaction as a note
- Account Notes convert to Account as a note
- Appointment Notes convert to Scheduler as a note
- RX Notes convert to Prescriptions as a note
- TX Notes converts to History as a note
- Statement Notes convert to Account as a note
- Med Hist Notes convert to Dental Chart as a note
- Notes on Appointment convert to Scheduler as a note
- Misc Notes convert to Patient as a note
- Marketing Code convert to Patient Alert
- Medical Health Questionnaire convert to Dental Chart Alert

Referral Information:



Referral Information

Marmon Ronald Malone Jeff

Referring Source or Patient Referred To:

ddsWebLink 03/25/2010

Date

- Referring Source
- Referring Patient
- Referred To
- Referred Date
- Referral Source Table

Prescription Table:

Medicine	Dosage	Dispense	Refills
Amoxicillin 500mg	Take 1 tablet three times a day for 10 days.	30 tabs	0
Ativan	Take 1 tab 1 hour before dental appointment.	10 tabs	0
Augmentin XR	Take 2 tabs every 12 hours	40 tabs	0
BE prophylaxis-Amoxicillin		0	0
BE prophylaxis-PCN allergic	Take 2 tablets 1 hour before dental	8	0
capsaicin	Apply small dab to affected area qid	2 tube	6
Chlorhexidine	Fill cap to "fill" line (15ml) Swish in mouth	1 bottle	0
Clindamycin (300mg)	Take 1 tab tid for 10 days	30 tabs	0
clindamycin premed (pcn allergic)	Take 4 tabs 1 hour before dental appointment.	20 tabs	0
Darvocet-N	Take 1 tab every 6 hours as needed.	20 tabs	0
Diflucan (150mg)	Take 1 tablet	1 tab	0
doxycycline	Take 1 tab every day for 90 days.	100 tabs	0
Doxycycline (100MG)	Take 1 tab every 12 hours for 60 days.	120 tabs	0
Erythromycin 250mg	TID for 10 days	30 tabs	0
Furaz	1 tab 2 X day for 5 days	10 tabs	0
Flagyl (250mg)	Take one tab 3 times a day for 1 week. Do	21 tabs	0
Flexeril (5mg)	Take 1 up to 3 times a day as needed for pain.	20 tabs	0
Fluoridex 1.1% neutral sodium fluoride	use as directed	1 tube 4 Oz.	0
Halcion	Take 1 tablet before bedtime and 1 tablet 1	2 tablets	0
Keflex	Take 1 tab qid for 10 days.	40 tabs	0
Keflex 500mg	4 tabs 1 hr prior to dental appointment	32 tabs	0
Magic Mouthwash	Rinse with 1/2 oz. for 30 seconds and spit out	20 oz. bottle	0
Medrol Dosepak	Take as directed on package	1 pack	0
Meprozine (50MG/25MG)	1 qd-4h prn pain	25 tabs	0

- Medicine
- Dosage
- Dispense
- Refills

Patient Prescriptions:

Date	Medicine	Dosage	Dispense	Refills	Provider
1/7/2004	Amoxicillin 500mg	Take 6 tablets 1 hour before appointment.	30	0	Jim Schultz, DDS
8/22/2003	Peridex 0.12%	Rinse 3 times daily until gone.	20oz bottle	1	Melissa Brand, DDS

- Date
- Medicine
- Dosage
- Dispense Refills
- Provider
- eRXStatus

History Reference Tab:

Date	Patient Name	Code	Treatment	Tooth	Surface	Value	Provider
01/20/2012	Victoria	150.00	Comp Oral Eval-New Or Estab Patient			\$55.00	2
01/20/2012	Victoria	220.00	Periodical X-ray - First Film			\$27.00	2
01/20/2012	Victoria	320.00	Panoramic Film			\$55.00	2
01/20/2012	Victoria	1303.00	Child Fluoride - No Prophyl			\$41.00	2
01/20/2012	Victoria	1120.00	Prophylaxis-child			\$51.00	2
02/09/2012	Victoria	2.00	Insurance Check Payment			\$273.28	2
02/09/2012	Victoria	50.90	Participating Insurance Adjustment			(\$1.10)	2
03/07/2012	Victoria	920.00	Amalgam			\$33.00	2
02/07/2012	Victoria	2201.00	Resin Composite 1 Surface, Posterior	14	O	\$126.00	2
03/23/2012	Victoria	2.00	Insurance Check Payment			\$163.38	2
01/20/2012	Victoria	150.00	Comp Oral Eval-New Or Estab Patient			\$55.00	2
01/20/2012	Victoria	1303.00	Child Fluoride - No Prophyl			\$41.00	2
01/20/2012	Victoria	320.00	Panoramic Film			\$55.00	2
01/20/2012	Victoria	1120.00	Prophylaxis-child			\$51.00	2
02/09/2012	Victoria	2.00	Insurance Check Payment			\$245.74	2
02/09/2012	Victoria	50.90	Participating Insurance Adjustment			(\$1.10)	2

- Treatment History – Viewable as History Reference – Does not include deleted transactions [includes Charges, Payments, Debits and Credits]
- Date
- Patient Name
- Code
- Treatment Description
- Tooth
- Surface
- Value
- Provider

Financial Information:

\$469.88	\$0.00	\$0.00	\$0.00	\$469.88
Balance	0 - 30	31 - 60	61 - 90	90+
02/16/2012	03/14/2008 (\$12.18)	03/14/2008 (\$138.60)		
Stmt. Sent	Last Patient Payment	Last Insurance Payment		
\$309.88	Yes	Yes	Yes	
Amount Due	Send Statement	Charge Interest	Send Dunning	

- Account Balances
- Send Statement – Defaults to Yes
- Charge Interest
- Send Dunning

HIPAA Forms and Treatment Information:

- First Visit Date
- Last Visit Date – Pulled from last "D" code
- Last Recall Visit (Last Cleaning)
- Recall Frequency
- Next Recall Date – Based on last recall visit date using recall frequency
- TPO Consent – Defaults to date of conversion
- Failed Appointment (No Show)
- Pre-Med

Insurance and Employer Information:

- Relation to Primary Policy Holder
- Subscriber Name
- Insurance Id – If blank defaults to SSN# if available
- Group Number
- Benefit Assignment
- Insurance Carrier Name
- Employer
- Employment Status – Defaults to Full Time
- Benefit Plan
- Patient Deductible
- Max Benefit

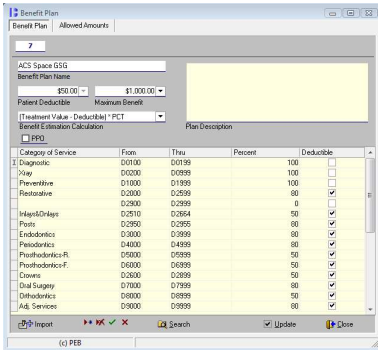
Second Insurance and Employer Information:

- Relation to Primary Policy Holder
- Subscriber Name
- Insurance ID – If Blank pulls from Subscriber
- Group Number
- Benefit Assignment
- Insurance Carrier Name
- Employer Name
- Benefit Plan
- Pat Deductible
- Max Benefit

Insurance Carrier:

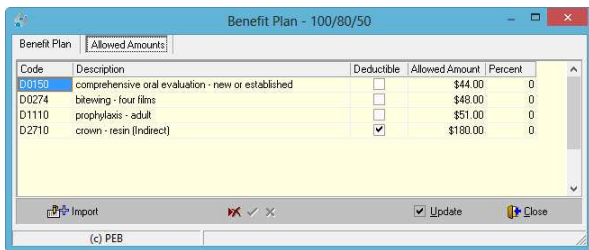
- Insurance Carrier Name
- Address 1
- Address 2
- City
- State
- Zip
- Phone
- Fax
- Email
- Contact
- Payer ID
- Payer Office
- Submission Type – Defaults to Electronic
- Form Type current ADA Form
- Provider ID – Defaults to 1
- Insurance Type – Defaults to Dental

Benefit Plan:



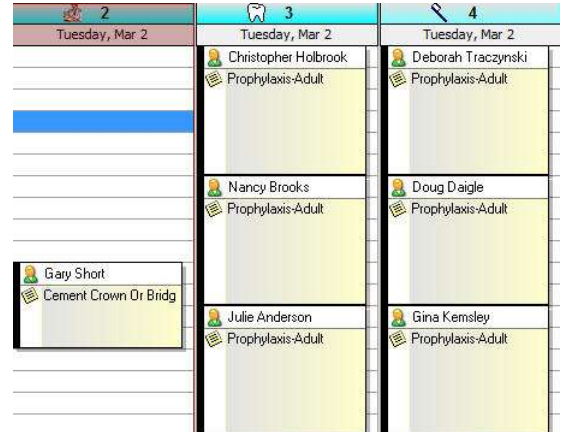
- Benefit Plan Name
- Patient Deductible
- Maximum Benefit
- Benefit Estimation Calculation – Defaults to (Treatment Value – Deductible) * PCT)

Benefit Plan Allowed Amounts Tab:



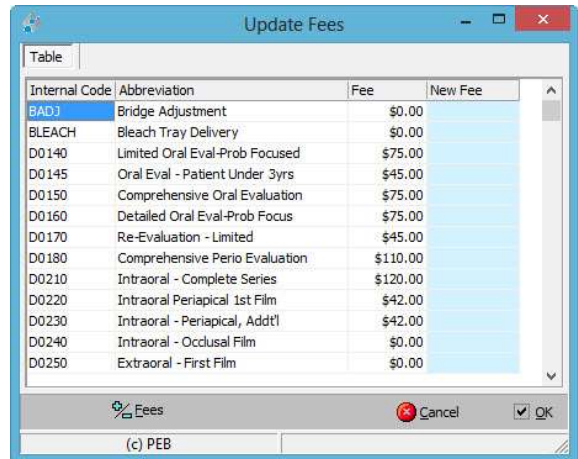
- Code
- Description
- Deductible
- Allowed Amount
- Percent

Appointment Book:



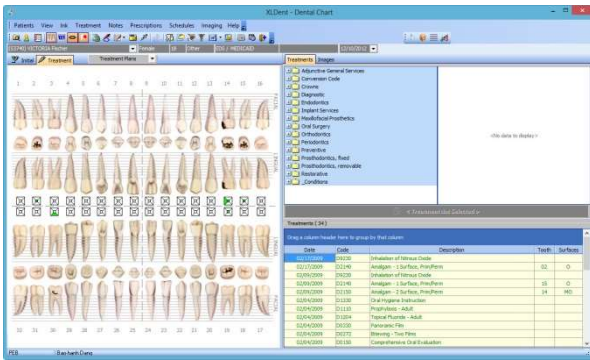
- Practice Appointments will convert to appropriate column
- Patient Name
- Appointment Date
- Appointment Time
- Appointment Length
- Appointment Notes
- Appointment Details

Fee Table:



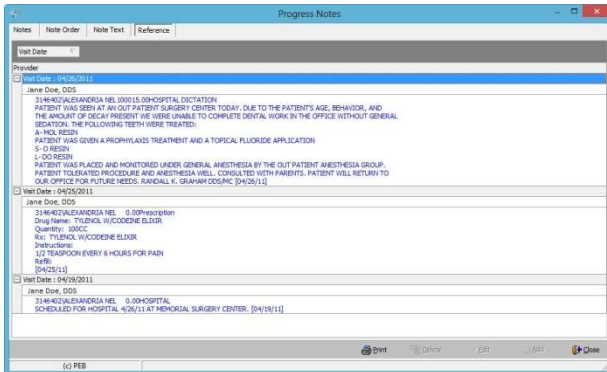
- Procedure Codes
 - ◆ Active ADA Codes
 - ◆ Base Code Abbreviation
- Standard Fee

XLChart™:



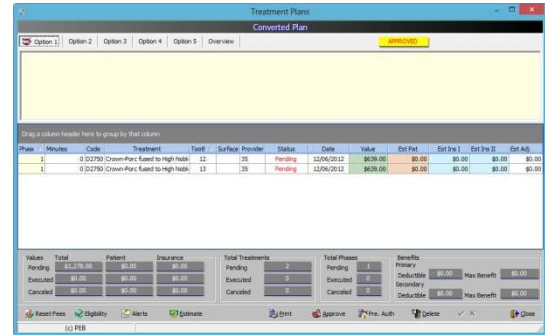
- Restorative Chart -- As a visual representation of treatment completed on valid ADA codes only. This will be recorded as Initial Treatment in XLChart™
- Date
- Patient Name
- Code
- Treatment
- Tooth
- Surface
- Value
- Provider

Progress Note Reference Tab



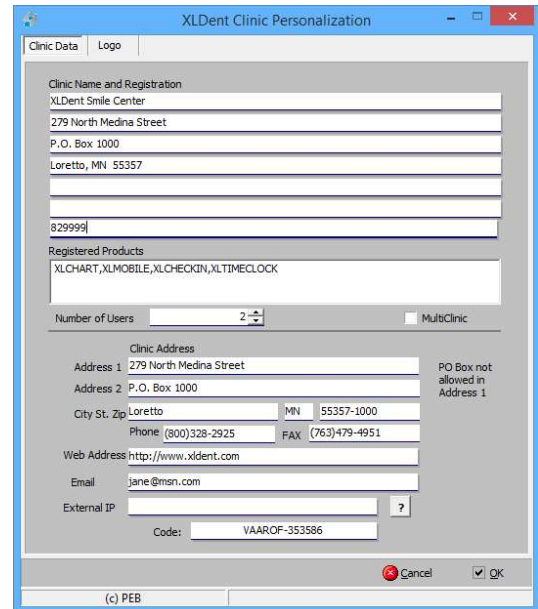
- Date
- Note Detail

Treatment Plans:



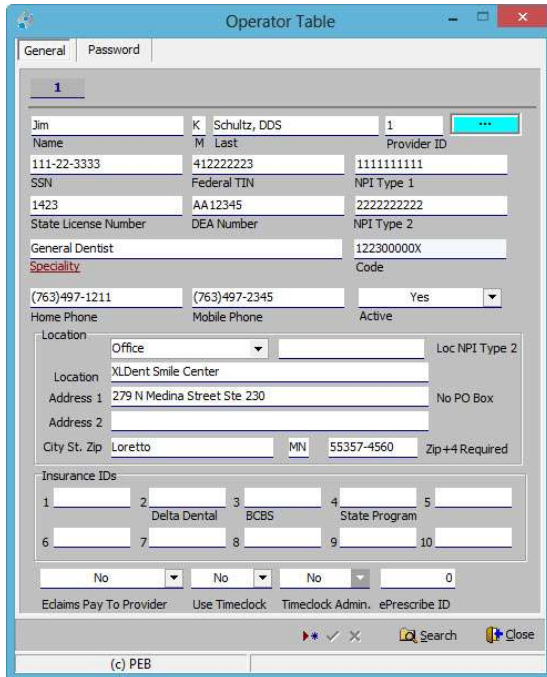
- Phase – Defaults to 0
- Minutes – Defaults to 0
- Code
- Treatment Description
- Tooth
- Surface
- Provider
- Status – Defaults to Approved
- Date
- Value
- Patient Value – Defaults to 0
- Insurance Value I – Defaults to 0
- Insurance Value II – Defaults to 0

Practice Information



- Practice Demographic Information
- Clinic Name
- Clinic Address and Phone
- Clinic Logo

Operator Table:



The screenshot shows a software window titled "Operator Table" with two tabs: "General" and "Password". The "General" tab is active, showing a form for entering provider information. The form includes fields for Name (Jim K. Schultz, DDS), Provider ID (1), SSN (111-22-3333), Federal TIN (412222223), NPI Type 1 (1111111111), State License Number (1423), DEA Number (AA12345), NPI Type 2 (222222222), Speciality (General Dentist), Code (122300000X), Home Phone ((763)497-1211), Mobile Phone ((763)497-2345), Active (Yes), Location (Office), Loc NPI Type 2 (XL Dent Smile Center), Address 1 (279 N Medina Street Ste 230), Address 2, City (Loretto), State (MN), Zip (55357-4560), Insurance IDs (1-10), and checkboxes for Reclaims Pay To Provider, Use Timedock, Timedock Admin., and ePrescribe ID.

- Provider Information for all Doctors and Hygienists
- First Name
- Middle Initial
- Last Name
- Provider ID – Same as previous software
- SSN
- Federal TIN
- NPI Type 1
- State License Number
- DEA Number
- NPI Type 2
- Specialty
- Home Phone
- Mobile Phone
- Active
- Location – Defaults to Office Name
- Location Address1 and 2
- Location City, State, Zip
- Insurance ID's – If available

Files Needed

?:\dmate\data*. * excluding Images folder or dmback file
Need field.ddf, fieldext.ddf, file.ddf and index.ddf

Disclaimer:

The success of the conversion is largely based on the data provided. Please be aware that not all data will be transferred. Information that is incorrect or corrupt in your previous system will not be corrected by the conversion. Therefore, some information will need to be manually entered. Verification of conversion data is dependent on supplied fax documents by end user.

Duplicate Patients:

Some Practice Management software will allow entry of patients and other information multiple times without warning of duplication. Due to the nature of the database conversion process, there are some items that you should review on the conversion evaluation to identify this duplication. One such item is the duplication of Patient records. To assist you in locating duplicate patients, the XLDent[™] Name and Address listing is provided during the evaluation process. Please contact your XLDent[™] representative with any questions regarding this process. We look forward to helping you with a smooth transition to XLDent[™].

Special Conversion Considerations:

Conversions are in constant development, in the event you have questions about data being converted or require special consideration. Please contact your XLDent[™] Representative.

Items that do not convert:

Specific areas that will not convert include, but are not limited to, the following:

- ⊗ Periodontal Charting
- ⊗ Payment Plans/Contract Balances
- ⊗ Outstanding Insurance Claims & Claim Notes
- ⊗ EasyScan Documents
- ⊗ Patients marked as Dead
- ⊗ Inactive Insurance Carriers
- ⊗ Tertiary and Quaternary Insurance
- ⊗ Appointment Blocks
- ⊗ Blank Patient Appointments

Notes on Conversions:

- Guarantors will not convert with their original id number. A new number will be re-assigned during the conversion. Guarantors will be linked to the responsible party for family groupings.

- Inactive accounts with balances should be reactivated or written off prior to final conversion. This will be determined at the time of preliminary conversion.
- Appointments marked as Confirmed will convert as Confirmed Patient.
- Appointments with invalid ADA codes will not convert over in the appointment. Ex. 00274

Below are some additional notes concerning some of the items that will or will not be converting.

Gender

When this is not converted or not entered into current system it will default to Unspecified.

Marital Status

When this is not converted or not entered into current system it will default to Other.

First Visit Date

When this is not converted or the patient does not have a first visit date, it will be assigned to the date of the conversion. This is done so the New Patient Report will be accurate for new patients entered into XLDent[™]. This can be manually changed.

Recall Frequency

When this is not entered into current system it will default to 0. This will have to be manually updated after loading the converted database.

Patient Treatment Plans

Only the last 12 months of treatment plans will convert.

End of Month and End of Year will be processed during the conversion. You will be starting a new month and a new year after the conversion. You will want to maintain the End of Month and End of Year totals or reports from your previous system. At the end of the actual month and year, you will combine the totals from XLDent[™] and the totals from your previous system to get an accurate Month to Date and Year to Date total.

If posting after conversion cutoff date in your existing practice management software, reports will be inaccurate for End of Month and End of Year due to duplicate entry.

Actual data varies from dataset to dataset, visual representation may be different.