

Is Your NextGen Environment Carrying Data You Don't Need?

A 10-minute Data Diet self-assessment for practices evaluating storage, hosting, archive, migration and retention decisions.

MEASURE

CLASSIFY

REDUCE

HOW TO USE THIS

Spend 5–10 minutes with 1–2 teammates. Don't overthink the answers. Mark “Unsure” when ownership or data is unclear. Use the results to decide what questions you want answered in San Diego.

Prepared by Shared IT

Can you answer these without calling three people?

Unknowns are often the first signal that data growth is unmanaged.

Years on NextGen	<hr/>
Production database size	<hr/>
Document / image share size	<hr/>
Test database size	<hr/>
Reporting database size	<hr/>
Number of acquired practices	<hr/>
Old systems still retained	<hr/>
Hosting / cloud change planned?	<hr/>

Mark what may be accumulating in production or expensive storage.

The goal is not to delete data blindly. It is to identify what should be retained live, archived, or reviewed for disposition.

- ☐ Historical document revisions
- ☐ Inactive / deceased patient data
- ☐ Orphaned records
- ☐ Duplicate records
- ☐ Old scanned images
- ☐ Oversized test databases
- ☐ Reporting copies
- ☐ Historical data no longer needed live
- ☐ Legacy conversion artifacts
- ☐ Old practice / location data

Rule before action

Retention, legal, clinical and business rules should determine what moves—not storage pressure alone.

What does the data footprint affect today?

Rate the operational consequence—not just the storage bill.

Area	Impact	What we observe
Backup windows	☐ Low ☐ Med ☐ High	_____
Restore / recovery time	☐ Low ☐ Med ☐ High	_____
Database performance	☐ Low ☐ Med ☐ High	_____
Hosting / storage cost	☐ Low ☐ Med ☐ High	_____
PHI exposure surface	☐ Low ☐ Med ☐ High	_____
Reporting / query performance	☐ Low ☐ Med ☐ High	_____
Migration complexity	☐ Low ☐ Med ☐ High	_____

Start defining the business rules

Every major data category should have an intentional destination.

ARCHIVE

Move out of production but keep accessible and searchable.

Examples to discuss:

- older clinical history
- legacy system data
- records needed for continuity / legal access

EXPUNGE

Permanently remove only when policy, legal and clinical requirements allow it.

Examples to investigate:

- expired revisions
- duplicates
- orphaned records
- non-required test data

RETAIN

Keep live when it is needed for active clinical, operational, legal or reporting use.

Ask:

- who defines this?
- is the rule documented?
- is it consistently applied?

What is the one data category you most want quantified?

Is a Data Diet worth quantifying?

Mark Yes, No or Unsure.

Question	Status
We know our current production DB and file-share sizes.	☐ Yes ☐ No ☐ Unsure
We have documented retention rules for major data categories.	☐ Yes ☐ No ☐ Unsure
Our test / reporting copies are intentionally sized.	☐ Yes ☐ No ☐ Unsure
We know what historical data can leave production.	☐ Yes ☐ No ☐ Unsure
We have quantified the hosting / storage impact of old data.	☐ Yes ☐ No ☐ Unsure
We have an archive strategy for legacy or inactive data.	☐ Yes ☐ No ☐ Unsure

2+ “No” or “Unsure” answers → quantify before you make a hosting, migration, archive or retention decision.

UGM offer: discounted \$2,500 Data Diet Assessment • read-only analysis • written findings • archive / expunge / retain recommendations • debrief