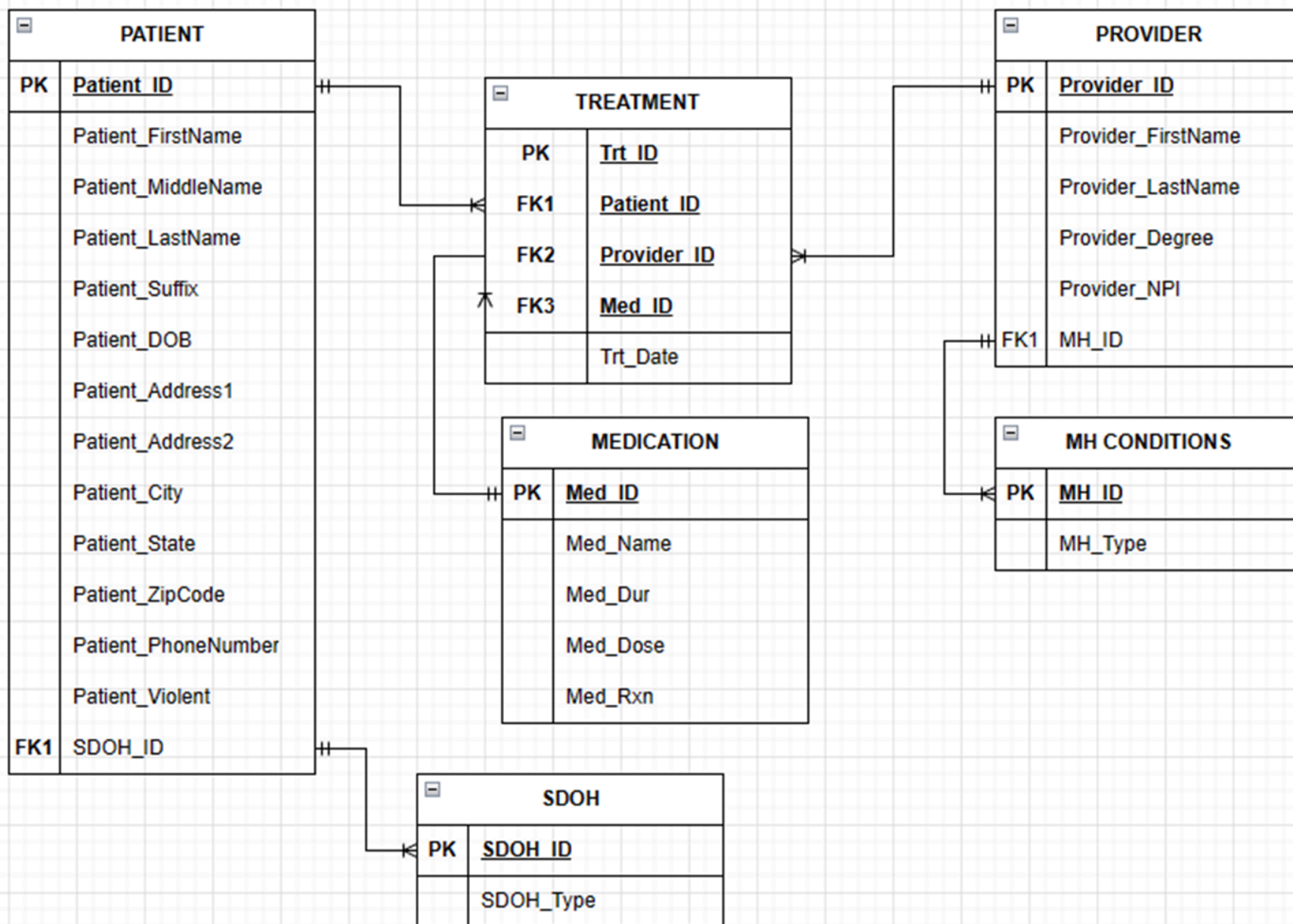Group 1: ER Diagram and Data Dictionary | Maris Leonard, Ashwati Nair, Alison Onken, Theresa Sax, Trevor Singh

PATIENT

PK	Patient_ID
	Patient_FirstName
	Patient_MiddleName
	Patient_LastName
	Patient_Suffix
	Patient_DOB
	Patient_Address1
	Patient_Address2
	Patient_City
	Patient_State
	Patient_ZipCode
	Patient_PhoneNumber
	Patient_Violent
FK1	SDOH_ID

TREATMENT

PK	Trt_ID
FK1	Patient_ID
FK2	Provider_ID
FK3	Med_ID
	Trt_Date

PROVIDER

PK	Provider_ID
	Provider_FirstName
	Provider_LastName
	Provider_Degree
	Provider_NPI
FK1	MH_ID

MEDICATION

PK	Med_ID
	Med_Name
	Med_Dur
	Med_Dose
	Med_Rxn

MH CONDITIONS

PK	MH_ID
	MH_Type

SDOH

PK	SDOH_ID
	SDOH_Type

								Data Dictionary
Table	**Name**	**Description**	**Type**	**Format**	**Range**	**Required**	**PK/FK**	**FK Reference Table**
PATIENT	Patient_ID	Patient's Identification Number	Integer (5)	99999	00001-99999	Yes	PK	
	Patient_FirstName	Patient's First Name	Character (50)	Xxxx				
	Patient_MiddleName	Patient's Middle Name	Character (50)	Xxxx				
	Patient_LastName	Patient's Last Name	Character (50)	Xxxx				
	Patient Sufix	Patient's Suffix	Character (10)	Xxxx				
	Patient_DOB	Patient's Date of Birth	Date	MM/DD/YYYY				
	Patient_Address1	Patient's Address	Character (100)	Xxxx				

	Patient_Address2	Patient's Address 2 (i.e., Apartment number, Suite Number, etc.)	Character (100)	Xxxx			
	Patient_City	Patient's City	Character (100)	Xxxx			
	Patient_State	Patient's State	Character (2)	XX			
	Patient_ZipCode	Patient's Zip Code	Integer (5)	99999			
	Patient_PhoneNumber	Patient's Phone Number	Integer (9)	999 999 9999			
	Patient_Violent	Does the patient have a history of violence or is the patient violent	Character (10)	Xxxx			
	SDOH_ID	Social Determinant of Health Identification Number	Integer (5)	99999	00001-99999	FK	SDOH

PROVIDER	Provider_ID	Provider's Identification Number	Integer (5)	99999	00001-99999	Yes	PK	
	Provider_FirstName	Provider's First Name	Character (50)	Xxxx				
	Provider_LastName	Provider's Last Name	Character (50)	Xxxx				
	Provider_Degree	Provider's Degree (i.e., MD, DO, NP, etc.)	Character (50)	XX				
	Provider_NPI	Provider's National Provider Identification (NPI) Number	Integer (10)	9999999999				
	MH_ID	Mental Health Identification Number	Integer (5)	99999	00001-99999		FK	MH_CONDITIONS
MEDICATION	Med_ID	Medication Identification Number	Integer (5)	99999	00001-99999	Yes	PK	
	Med_Name	Medication Name	Character (200)	Xxxx				

	Med_Dur	Medication Duration (i.e, 1 time per day for 30 days)	Character (100)	Xxxx				
	Med_Dose	Medication Dosage	Character (100)	Xxxx				
	Med_Rxn	Medication Reasoning	Character (500)	Xxxx				
SDOH	SDOH_ID	Social Determinants of Health Identification Number	Integer (5)	99999	00001-99999	Yes	PK	
	SDOH_Type	Social Determinants of Health type (i.e, transportation, education, employment, etc.)	Character (500)	Xxxx, Xxxx				
MH_CONDITIONS	MH_ID	Mental Health Identification number	Integer (5)	99999	00001-99999	Yes	PK	

	MH_Type	Mental Health Type (i.e., depression, anxiety, substance abuse, etc.)	Character (500)	Xxxx, Xxxx				
TREATMENT	Trt_ID	Treatment Identification Number	Integer (5)	99999	00001-99999	Yes	PK	
	Patient_ID	Patient Identification Number	Integer (5)	99999	00001-99999	Yes	FK	PATIENT
	Provider_ID	Provider Identification Number	Integer (5)	99999	00001-99999	Yes	FK	PROVIDER
	Med_ID	Medication Identification Number	Integer (5)	99999	00001-99999		FK	MEDICATION
	Trt_Date	Treatment Date	Date	MM/DD/YYYY				