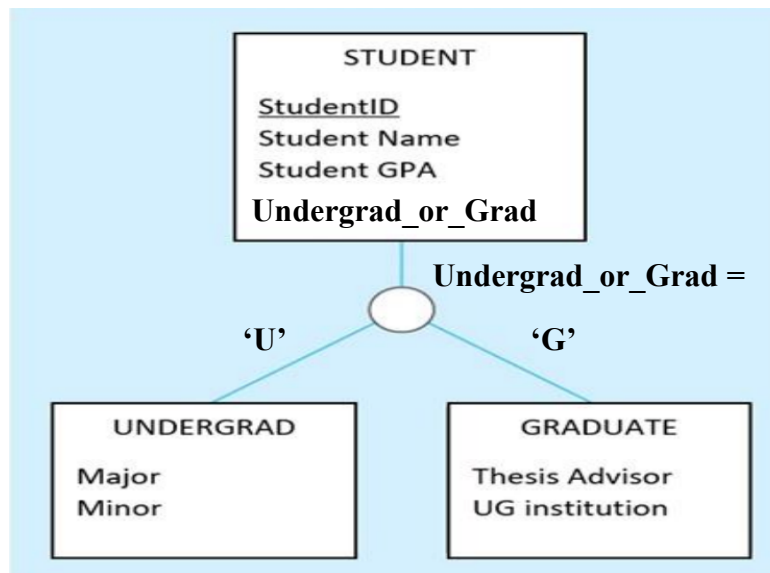
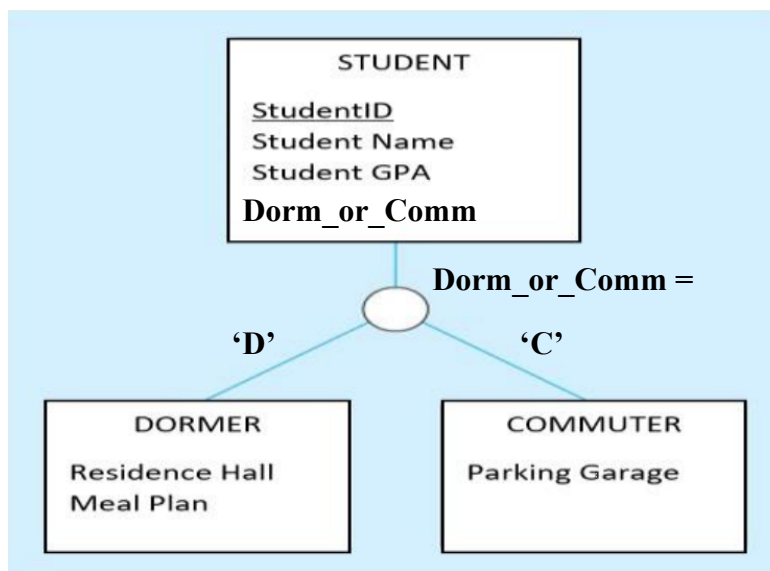


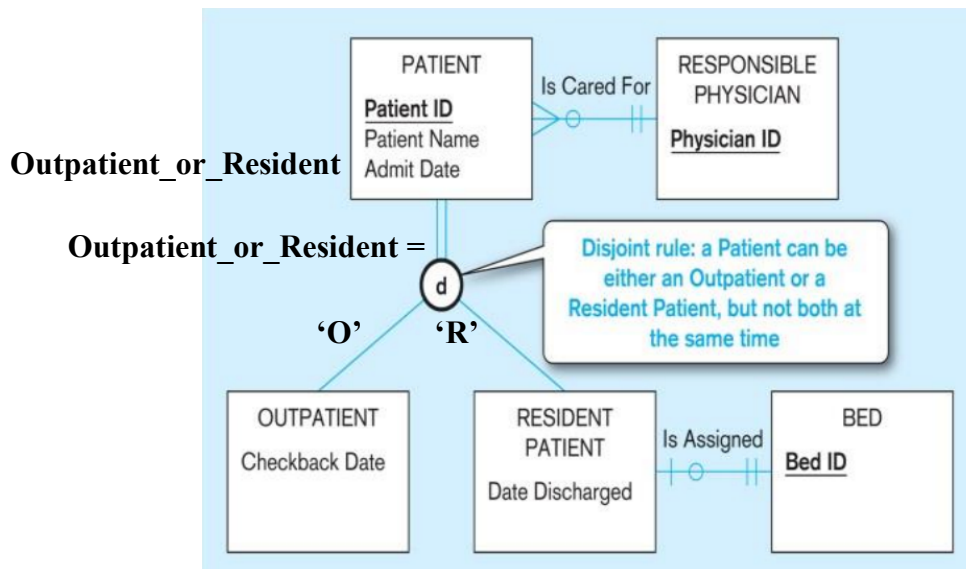
1) a)



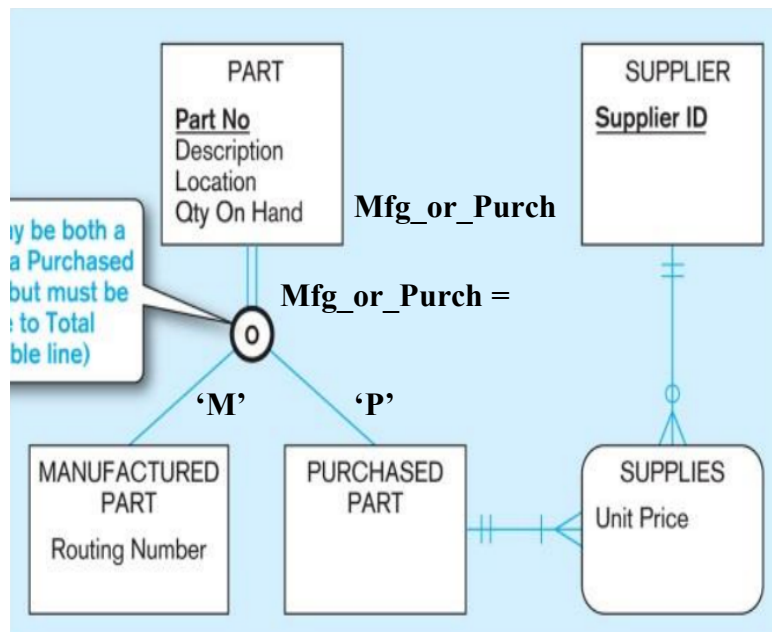
b)



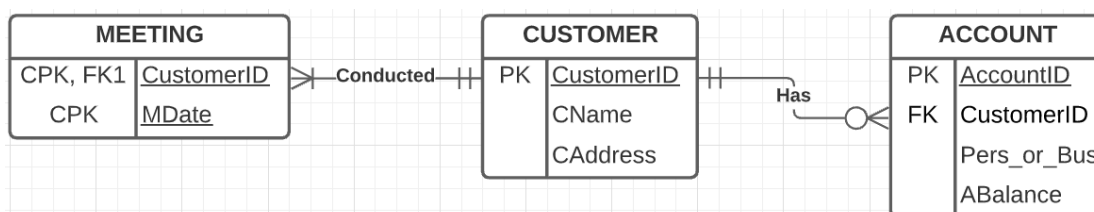
c) A scenario that might require a different subtype discriminator would be if the organization wanted to identify whether a patient would require a bed assigned to them, in which the subtype discriminator and attribute might be Bed_Needed and can be set to either 'N' as an OUTPATIENT or 'Y' as a RESIDENT_PATIENT.



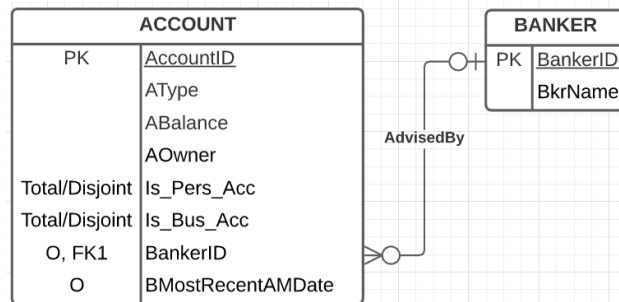
d) A scenario that might require a different subtype discriminator would be if the organization wanted to identify whether a part was supplied by an external supplier, in which the subtype discriminator and attribute might be From_Supplier and can be set to either 'N' as an MANUFACTURED_PART or 'Y' as a PURCHASED_PART.



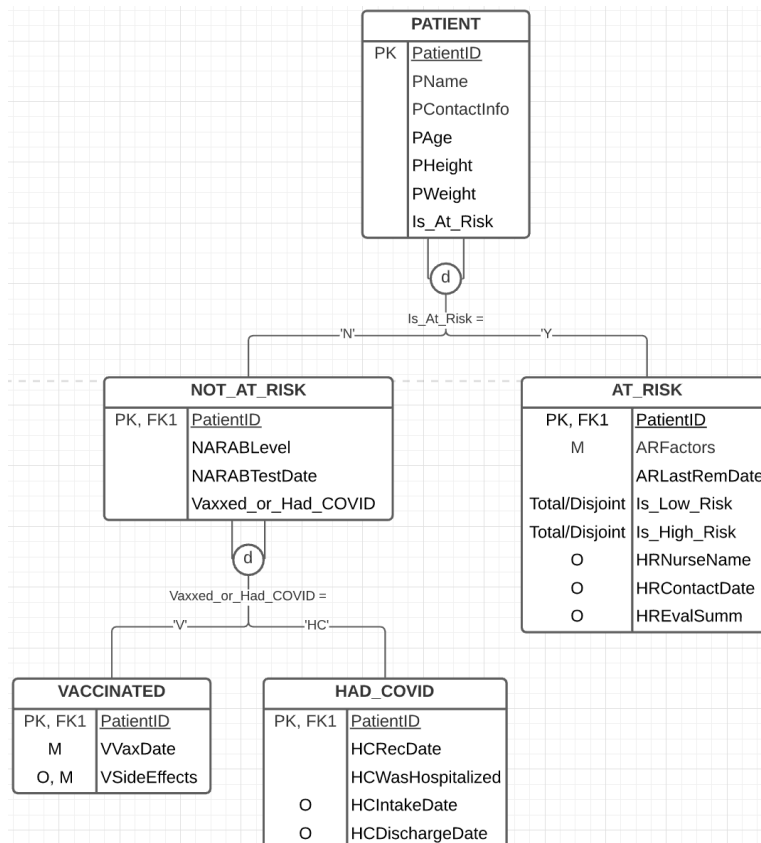
- 2) a) I would not create a supertype/subtype relationship for this problem because there is no unique distinction between whether an account is categorized as personal or business.



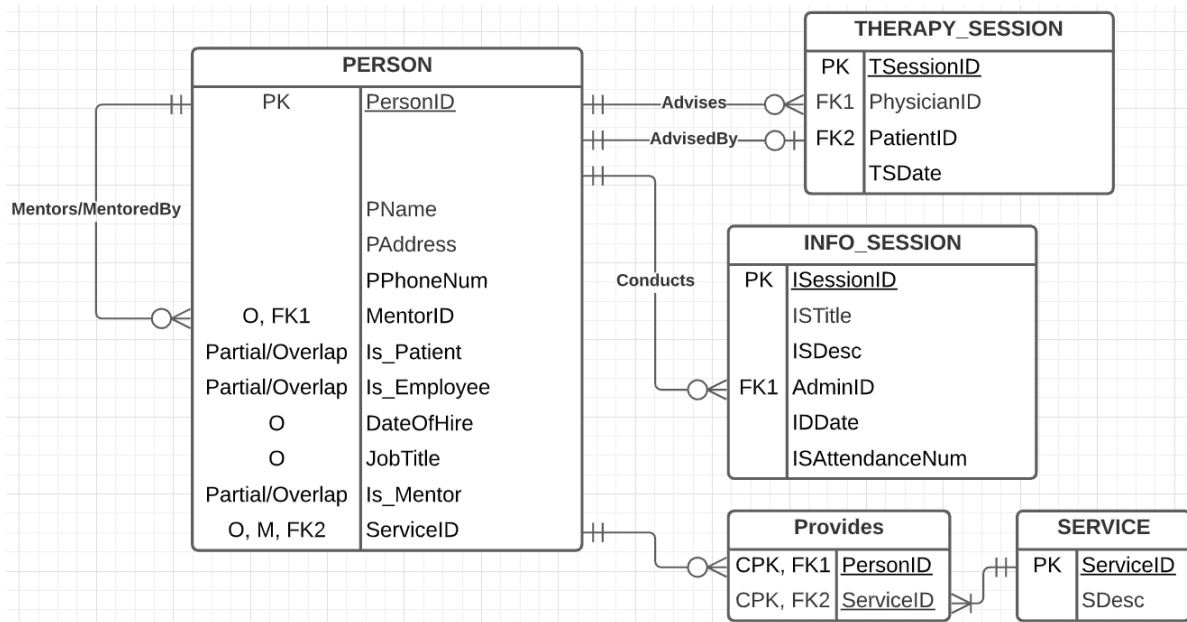
b) I would not create a supertype/subtype relationship for this problem because the only unique attribute distinction between whether an account is categorized as a personal or business account is that business accounts are assigned a personal banker that the bank also records the most recent annual owner/banker meeting date of. This total designation and disjoint overlap relationship can be handled using attribute flags indicating between personal or business accounts and optional attributes for the additional business account attributes.



3) I would create a supertype/subtype relationship for this problem because there are unique attribute distinctions between whether a patient is categorized as at-risk or not, in which patients in this database must be of total designation and disjoint overlap. Additionally, there are unique attribute distinctions for determining how a patient is assumed to be not-at-risk, either by vaccination or previously having COVID. An at-risk patient only has unique attribute distinctions for high risk, but not for low risk. Since the only additional data being recorded for high-risk patients is their assigned nurse's name, contact date, and evaluation summary, this can be handled using attribute flags.

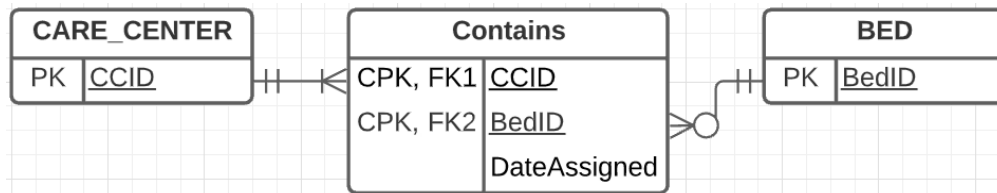


4)



5)

- a) Yes
- b) Yes
- c) No
- d) Yes
- e) A foreign key to the primary key of PERSON (e.g., PersonID)
- f) Yes
- g) Many
- h) Many
- i) One
- j) One
- k) Many
- l) No, a Care Center is a type of Work Unit, not part of one
- m) No, a Care Center is a type of Work Unit, not the other way around
- n) True
- o)



p)

