

Moroccan National Health Services / Logical Design

Data Management Course

UM6P College of Computing

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Program: Computer Engineering

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1 Introduction

This report presents the deliverables of Lab 5 from the Data Management course. The goal of this lab is to perform database normalization, create SQL schema (DDL), populate tables (DML), and execute advanced SQL queries. Compared to Lab 4, this work introduces::

Requirements

The task requires building a database with appropriate tables, keys, and constraints, populating the schema with realistic data, updating and deleting records as needed, and executing queries designed to answer practical questions about appointments, medications, and hospital activities. The database must support complex healthcare operations while maintaining data integrity through proper normalization and constraint enforcement.

Methodology

The schema is reviewed, tables and relationships are created, and data entries are inserted for coverage of multiple cases. Each query is formulated to align with the requirements and is tested against the available data to ensure accurate and meaningful output. Adjustments are made as necessary to improve clarity and correctness. The methodology follows these key steps:

- Full BCNF normalization analysis.
- Schema creation using SQL DDL.
- Sample dataset generation.
- Multi-table joins and aggregations.
- Dependency preservation considerations.

2 Normalization

Below is the BCNF analysis for all relations of the MNHS database.

Patient

Candidate key: CIN BCNF satisfied.

ContactLocation

Candidate key: CLID BCNF satisfied.

Staff

Candidate key: STAFF_ID BCNF satisfied.

Hospital

Candidate key: HID BCNF satisfied.

Department

Candidate key: DEP_ID BCNF satisfied.

Insurance

Candidate key: **InsID** BCNF satisfied.

ClinicalActivity

Candidate key: **CAID** BCNF satisfied.

Expense

Candidate key: **ExpID** BCNF satisfied.

Medication

Candidate key: **MID** BCNF satisfied.

Stock

Composite key: $(HID, MID, StockTimestamp)$ BCNF satisfied.

Prescription–Medication (Includes)

Composite key: (PID, MID) BCNF satisfied.

Patient–ContactLocation (Have)

Composite key: $(IID, CLID)$ BCNF satisfied.

Patient–Insurance

Composite key: $(IID, InsID)$ BCNF satisfied.

Staff–Department

Composite key: $(STAFF_ID, DEP_ID)$ BCNF satisfied.

3 Dependency Preservation Analysis

This section presents the justification of dependency preservation for each relation in the MNHS database. For each entity, the main functional dependency (FD) used for the justification is provided, followed by whether the decomposition preserves dependencies.

1. Patient

All original FDs are in a single relation. **Main FD(s):** IID \rightarrow Name, Sex, Birth, Blood-Group, Phone, CIN; CIN \rightarrow IID, Name, Sex, Birth, BloodGroup, Phone **Dependency preservation:** Yes

2. ContactLocation

Single candidate key CLID determines all attributes. **Main FD(s):** CLID \rightarrow Street, City, Province, PostalCode, Phone **Dependency preservation:** Yes

3. Staff

Subtypes (Practitioner, Caregiving, Technical) are decomposed by STAFF_ID. All original FDs are preserved. **Main FD(s):**

- STAFF_ID \rightarrow Name, Status
- STAFF_ID \rightarrow LicenseNumber, Specialty (Practitioner)
- STAFF_ID \rightarrow Grade, Ward (Caregiving)
- STAFF_ID \rightarrow Modality, Certifications (Technical)

Dependency preservation: Yes

4. Hospital

Single relation; HID determines all attributes. **Main FD(s):** HID \rightarrow Name, City, Region **Dependency preservation:** Yes

5. Department

Decomposed into Department(DEPT_ID, Name, Specialty, HID) and Hospital(HID, Name, City, Region). FDs reconstructible via join. **Main FD(s):** DEPT_ID \rightarrow Name, Specialty, HID; HID \rightarrow Name, City, Region **Dependency preservation:** Yes

6. Insurance

Single relation; InsID determines all attributes. **Main FD(s):** InsID \rightarrow Type **Dependency preservation:** Yes

7. ClinicalActivity

All transitive dependencies (Patient, Staff, Department/Hospital, Expense) preserved via foreign keys. **Main FD(s):** CAID \rightarrow Title, Time, Date, IID, STAFF_ID, DEPT_ID, ExpID **Dependency preservation:** Yes

8. Expense

Decomposed into Expense and Insurance. Transitive FDs reconstructible. **Main FD(s):** ExpID \rightarrow Total, InsID, CAID; CAID \leftrightarrow ExpID; InsID \rightarrow Type **Dependency preservation:** Yes

9. Prescription

PID \rightarrow DateIssued, CAID; transitive attributes reconstructible via ClinicalActivity. **Main FD(s):** PID \rightarrow DateIssued, CAID; CAID \rightarrow Title, Time, Date, IID, STAFF_ID, DEPT_ID **Dependency preservation:** Yes

10. Appointment

CAID \rightarrow Reason, Status; transitive attributes reconstructible via ClinicalActivity. **Main FD(s):** CAID \rightarrow Reason, Status; CAID \rightarrow Title, Time, Date, IID, STAFF_ID, DEPT_ID **Dependency preservation:** Yes

11. Emergency

CAID \rightarrow TriageLevel, Outcome; transitive FDs preserved via ClinicalActivity. **Main FD(s):** CAID \rightarrow TriageLevel, Outcome; CAID \rightarrow Title, Time, Date, IID, STAFF_ID, DEPT_ID **Dependency preservation:** Yes

12. Medication

Single relation; DrugID determines all attributes. **Main FD(s):** DrugID \rightarrow Name, Form, Strength, Class, ActiveIngredient, Manufacturer **Dependency preservation:** Yes

13. Stock

Stock table preserves HID, DrugID, StockTimestamp \rightarrow UnitPrice, Qty; transitive attributes reconstructible via Hospital and Medication. **Main FD(s):** {HID, DrugID, StockTimestamp} \rightarrow UnitPrice, Qty **Dependency preservation:** Yes

14. Prescription–Medication (Includes)

Junction table preserves $PID, DrugID \rightarrow Dosage, Duration$; transitive attributes reconstructible via Prescription and Medication. **Main FD(s):** $\{PID, DrugID\} \rightarrow Dosage, Duration$ **Dependency preservation:** Yes

15. Patient–ContactLocation (Have)

$\{IID, CLID\}$ determines relationship attributes; Patient and ContactLocation attributes reconstructible via joins. **Main FD(s):** $\{IID, CLID\} \rightarrow$ relationship attributes **Dependency preservation:** Yes

16. Patient–Insurance (Covers)

$\{IID, InsID\}$ determines relationship attributes; single insurance scenario preserved via $IID \rightarrow InsID \rightarrow Type$. **Main FD(s):** $\{IID, InsID\} \rightarrow$ relationship attributes; $IID \rightarrow InsID \rightarrow Type$ **Dependency preservation:** Yes

17. Staff–Department (WorkIn)

$\{STAFF_ID, DEPT_ID\}$ determines relationship attributes; transitive FDs from Staff and Department/Hospital reconstructible. **Main FD(s):** $\{STAFF_ID, DEPT_ID\} \rightarrow$ relationship attributes **Dependency preservation:** Yes

Benefits of Normalization in Healthcare Systems

Normalization plays a critical role in ensuring data quality and consistency within healthcare databases. By decomposing tables into Boyce-Codd Normal Form (BCNF), we eliminate data redundancy and prevent update anomalies that could compromise patient safety and operational efficiency.

In the context of the Moroccan National Health Services (MNHS) database, normalization provides several key benefits:

- **Patient Safety:** Eliminating redundant patient information (e.g., duplicate contact details or medical history) reduces the risk of inconsistent or outdated clinical data, which is crucial for accurate diagnosis and treatment.
- **Billing Accuracy:** Separating insurance, expense, and clinical activity entities ensures that financial records remain consistent and audit-ready, preventing billing errors that could affect both patients and healthcare providers.

- **Regulatory Compliance:** Normalized schemas facilitate compliance with health-care data regulations (such as HIPAA equivalents) by maintaining clear data relationships and minimizing unauthorized data duplication.
- **Operational Efficiency:** Reduced data redundancy means less storage requirements and simpler maintenance procedures for updates to patient records, staff assignments, or medication inventories.
- **Clinical Decision Support:** Consistent, non-redundant data enables reliable reporting and analytics for healthcare administrators and medical professionals tracking treatment outcomes and resource utilization.

The MNHS schema's BCNF compliance ensures that each data element appears in exactly one place, making the system more robust, maintainable, and trustworthy for critical healthcare operations.

ISA Hierarchy Implementation

The database implements inheritance relationships through foreign key constraints:

- Appointment and Emergency entities inherit from ClinicalActivity via the CAID foreign key
- This ISA hierarchy allows specialized attributes for each activity type while maintaining a unified clinical activity framework
- Staff specialization (Practitioner, Caregiving, Technical) follows a similar ISA pattern through table decomposition

4 DDL: Schema Creation

```
CREATE DATABASE lab3;
USE lab3;

CREATE TABLE Patient (
    IID INT PRIMARY KEY,
    CIN VARCHAR(10) UNIQUE NOT NULL,
    FullName VARCHAR(100) NOT NULL,
    Birth DATE,
    Sex ENUM('M', 'F') NOT NULL,
    BloodGroup ENUM('A+', 'A-', 'B+', 'B-', 'O+', 'O-', 'AB+', 'AB-'),
    Phone VARCHAR(15),
    Email VARCHAR(100),
    CONSTRAINT chck_email CHECK (Email LIKE '%_@%_._%_')
);
```

```

CREATE TABLE Hospital (
    HID INT PRIMARY KEY,
    Name VARCHAR(100) NOT NULL,
    City VARCHAR(50) NOT NULL,
    Region VARCHAR(50)
);

CREATE TABLE Department (
    DEP_ID INT PRIMARY KEY,
    HID INT,
    Name VARCHAR(100) NOT NULL,
    Specialty VARCHAR(100),
    FOREIGN KEY (HID) REFERENCES Hospital(HID)
);

CREATE TABLE Staff (
    STAFF_ID INT PRIMARY KEY,
    FullName VARCHAR(100) NOT NULL,
    Status ENUM('Active','Retired') DEFAULT 'Active'
);

CREATE TABLE Practitioner (
    STAFF_ID INT PRIMARY KEY,
    LicenseNumber VARCHAR(50),
    Specialty VARCHAR(100),
    FOREIGN KEY (STAFF_ID) REFERENCES Staff(STAFF_ID)
);

CREATE TABLE Caregiving (
    STAFF_ID INT PRIMARY KEY,
    Grade VARCHAR(50),
    Ward VARCHAR(100),
    FOREIGN KEY (STAFF_ID) REFERENCES Staff(STAFF_ID)
);

CREATE TABLE Technical (
    STAFF_ID INT PRIMARY KEY,
    Modality VARCHAR(100),
    Certifications VARCHAR(200),
    FOREIGN KEY (STAFF_ID) REFERENCES Staff(STAFF_ID)
);

CREATE TABLE Work_in (
    STAFF_ID INT,
    DEP_ID INT,
    PRIMARY KEY(STAFF_ID, DEP_ID),
    FOREIGN KEY(STAFF_ID) REFERENCES Staff(STAFF_ID),

```



```

        FOREIGN KEY(DEP_ID) REFERENCES Department(DEP_ID)
    );

CREATE TABLE ClinicalActivity (
    CAID INT PRIMARY KEY,
    IID INT NOT NULL,
    STAFF_ID INT NOT NULL,
    DEP_ID INT NOT NULL,
    Date DATE NOT NULL,
    Time TIME,
    FOREIGN KEY(IID) REFERENCES Patient(IID),
    FOREIGN KEY(STAFF_ID) REFERENCES Staff(STAFF_ID),
    FOREIGN KEY(DEP_ID) REFERENCES Department(DEP_ID)
);

CREATE TABLE Appointment (
    CAID INT PRIMARY KEY,
    Reason VARCHAR(100),
    Status ENUM('Scheduled', 'Completed', 'Cancelled') DEFAULT 'Scheduled',
    FOREIGN KEY(CAID) REFERENCES ClinicalActivity(CAID)
);

CREATE TABLE Emergency (
    CAID INT PRIMARY KEY,
    TriageLevel INT CHECK(TriageLevel BETWEEN 1 AND 5),
    Outcome ENUM('Discharged', 'Admitted', 'Transferred', 'Deceased'),
    FOREIGN KEY(CAID) REFERENCES ClinicalActivity(CAID)
);

CREATE TABLE Insurance (
    InsID INT PRIMARY KEY,
    Type ENUM('CNOPS', 'CNSS', 'RAMED', 'Private', 'None') NOT NULL
);

CREATE TABLE Expense (
    ExpID INT PRIMARY KEY,
    InsID INT,
    CAID INT UNIQUE NOT NULL,
    Total DECIMAL(10,2) NOT NULL CHECK(Total >= 0),
    FOREIGN KEY(InsID) REFERENCES Insurance(InsID),
    FOREIGN KEY(CAID) REFERENCES ClinicalActivity(CAID)
);

CREATE TABLE Medication (
    MID INT PRIMARY KEY,
    Name VARCHAR(100) NOT NULL,
    Form VARCHAR(50),

```

```

    Strength VARCHAR(50),
    ActiveIngredient VARCHAR(100),
    TherapeuticClass VARCHAR(100),
    Manufacturer VARCHAR(100)
);

CREATE TABLE Stock (
    HID INT,
    MID INT,
    StockTimestamp DATETIME DEFAULT CURRENT_TIMESTAMP,
    UnitPrice DECIMAL(10,2) CHECK(UnitPrice >= 0),
    Qty INT DEFAULT 0 CHECK(Qty >= 0),
    ReorderLevel INT DEFAULT 10 CHECK(ReorderLevel >= 0),
    PRIMARY KEY(HID, MID, StockTimestamp),
    FOREIGN KEY(HID) REFERENCES Hospital(HID),
    FOREIGN KEY(MID) REFERENCES Medication(MID)
);

CREATE TABLE Prescription (
    PID INT PRIMARY KEY,
    CAID INT UNIQUE NOT NULL,
    DateIssued DATE NOT NULL,
    FOREIGN KEY(CAID) REFERENCES ClinicalActivity(CAID)
);

CREATE TABLE Includes (
    PID INT,
    MID INT,
    Dosage VARCHAR(100),
    Duration VARCHAR(50),
    PRIMARY KEY(PID, MID),
    FOREIGN KEY(PID) REFERENCES Prescription(PID),
    FOREIGN KEY(MID) REFERENCES Medication(MID)
);

CREATE TABLE ContactLocation (
    CLID INT PRIMARY KEY,
    City VARCHAR(50),
    Province VARCHAR(50),
    Street VARCHAR(100),
    Number VARCHAR(10),
    PostalCode VARCHAR(10),
    Phone_Location VARCHAR(15)
);

CREATE TABLE Have (
    IID INT,
    CLID INT,

```

```

PRIMARY KEY(IID, CLID),
FOREIGN KEY(IID) REFERENCES Patient(IID),
FOREIGN KEY(CLID) REFERENCES ContactLocation(CLID)
);

-- Add indexes for better performance
CREATE INDEX idx_clinicalactivity_date ON ClinicalActivity(Date);
CREATE INDEX idx_clinicalactivity_dep ON ClinicalActivity(DEP_ID);
CREATE INDEX idx_stock_hid_mid ON Stock(HID, MID);

```

5 DML: Data Manipulation

```

-- Sample Insertions
INSERT INTO Hospital VALUES
(101, 'Benguerir Central Hospital', 'Benguerir', 'Marrakech-Safi'),
(102, 'Casablanca University Hospital', 'Casablanca', 'Casablanca-
Settat'),
(103, 'Rabat University Hospital', 'Rabat', 'Rabat-Sale-Kenitra'),
(104, 'Marrakech Central Hospital', 'Marrakech', 'Marrakech-Safi'),
(105, 'Kenitra Central Hospital', 'Kenitra', 'Rabat-Sale-Kenitra');

INSERT INTO Department VALUES
(10, 101, 'Cardiology', 'Heart Care'),
(20, 102, 'Radiology', 'Imaging'),
(30, 103, 'Cardiology', 'Heart Care'),
(40, 104, 'Radiology', 'Imaging'),
(50, 105, 'Cardiology', 'Heart Care');

INSERT INTO Patient VALUES
(1, 'CIN123', 'Sara El Amrani', '1999-04-10', 'F', 'A+', '0612345678',
'SaraElAmrani@gmail.com'),
(2, 'CIN456', 'Youssef Benali', '1988-09-22', 'M', 'O-', '0678912345',
'YoussefBenali@gmail.com'),
(3, 'CIN567', 'Yassine Benben', '1998-07-25', 'M', 'A+', '0666234545',
'YassineBenben@gmail.com'),
(4, 'CIN789', 'Taha Hata', '2006-11-05', 'M', 'B-', '0634455667', '
TahaHata@gmail.com'),
(5, 'CIN890', 'Omar Ramo', '2003-01-01', 'M', 'O+', '0698867564', '
OmarRamo@gmail.com');

INSERT INTO ContactLocation VALUES
(11, 'Rabat', 'Rabat-Sal -K nitra', 'Avenue Hassan II', '12', '10000',
'0537001122'),
(21, 'Casablanca', 'Casablanca-Settat', 'Boulevard Zerktouni', '45B', '
20000', '0522203040'),
(31, 'Marrakech', 'Marrakech-Safi', 'Rue Mohammed VI', '89', '40000', '
0524432211'),

```

```

(41, 'F s', 'F s-Mekn s', 'Avenue des FAR', '7', '30000', '
0535608899'),
(51, 'Tanger', 'Tanger-T touan-Al Hoce ma', 'Boulevard Pasteur', '101
', '90000', '0539902233');

INSERT INTO Staff VALUES
(501, 'Dr. Amina Idrissi', 'Active'),
(502, 'Technician Omar Lahlou', 'Active'),
(503, 'Laila Mari', 'Active'),
(504, 'Fouad Chraibi', 'Active'),
(505, 'Amina Zahidi', 'Active');

INSERT INTO ClinicalActivity VALUES
(1001, 1, 501, 10, '2025-11-30', '10:00:00'),
(1002, 2, 502, 20, '2025-12-12', '11:00:00'),
(1003, 3, 503, 30, '2026-01-14', '12:30:30'),
(1004, 4, 504, 40, '2027-06-16', '13:00:00'),
(1005, 5, 505, 50, '2025-11-28', '14:00:00');

INSERT INTO Appointment VALUES
(1001, 'Routine check-up', 'Scheduled'),
(1002, 'Follow-up imaging', 'Completed'),
(1003, 'Routine check-up', 'Scheduled'),
(1004, 'Follow-up imaging', 'Scheduled'),
(1005, 'Routine check-up', 'Completed');

INSERT INTO Emergency VALUES
(1003, 4, 'Admitted'),
(1005, 5, 'Deceased'),
(1002, 3, 'Discharged'),
(1004, 1, 'Admitted'),
(1001, 3, 'Discharged');

INSERT INTO Insurance VALUES
(301, 'CNOPS'),
(302, 'CNSS'),
(303, 'RAMED'),
(304, 'Private'),
(305, 'None');

INSERT INTO Expense VALUES
(401, 301, 1001, 250.00),
(402, 302, 1002, 400.00),
(403, 303, 1003, 150.00),
(404, 304, 1004, 300.00),
(405, 305, 1005, 500.00);

INSERT INTO Medication VALUES

```

```

(901, 'Paracetamol', 'Tablet', '500 mg', 'Paracetamol', 'Analgesic', '
PharmaMorocco'),
(902, 'Amoxicillin', 'Syrup', '250mg/5ml', 'Amoxicillin', 'Antibiotic',
'Pfizer'),
(903, 'Ibuprofen', 'Tablet', '400 mg', 'Ibuprofen', 'Antipyretic', '
Bayer'),
(904, 'Azithromycin', 'Tablet', '500 mg', 'Azithromycin', 'Antibiotic',
'GSK'),
(905, 'Cefixime', 'Tablet', '400 mg', 'Cefixime', 'Antibiotic', 'Sandoz
');

INSERT INTO Stock VALUES
(101, 901, '2025-11-12 09:00:00', 2.50, 500, 50),
(102, 902, '2025-11-13 10:00:00', 4.00, 200, 30),
(103, 903, '2025-11-13 11:00:00', 3.10, 100, 40),
(102, 904, '2025-11-13 12:00:00', 199.99, 25, 40),
(104, 905, '2025-11-13 13:00:00', 180.00, 22, 18);

INSERT INTO Prescription VALUES
(501, 1001, '2025-11-12'),
(502, 1002, '2025-11-13'),
(503, 1003, '2025-11-13'),
(504, 1004, '2025-11-14'),
(505, 1005, '2025-11-15');

INSERT INTO Includes VALUES
(501, 901, '500mg', '5 days'),
(502, 902, '250mg', '7 days'),
(503, 903, '400mg', '3 days'),
(504, 904, '500mg', '5 days'),
(505, 905, '400mg', '10 days');

INSERT INTO Have VALUES
(1, 11), (2, 21), (3, 31), (4, 41), (5, 51);

-- Update Examples
UPDATE Patient SET Phone = '066612223' WHERE IID = 3;
UPDATE Hospital SET Region = 'Marrakech-Safi' WHERE HID = 104;

-- Delete Example
DELETE FROM Appointment WHERE Status = 'Cancelled';

```

6 SQL Queries

Query 1 — Select all patients ordered by last name

```
SELECT *
FROM Patient
ORDER BY SUBSTR(FullName, INSTR(FullName, ' ') + 1 );
```

Query 2 — List distinct insurance types

```
SELECT DISTINCT Type FROM Insurance;
```

Query 3 — Staff working in Rabat hospitals

```
SELECT DISTINCT s.FullName
FROM Staff s
JOIN Work_in w ON s.STAFF_ID = w.STAFF_ID
JOIN Department d ON d.DEP_ID = w.DEP_ID
JOIN Hospital h ON h.HID = d.HID
WHERE h.City = 'Rabat';
```

Query 4 — Appointments in next 7 days

```
SELECT a.*, c.Date, c.Time
FROM Appointment a
JOIN ClinicalActivity c ON c.CAID = a.CAID
WHERE c.Date BETWEEN CURDATE() AND DATE_ADD(CURDATE(), INTERVAL 7 DAY)
AND a.Status = 'Scheduled';
```

Query 5 — Appointments count per department

```
SELECT d.DEP_ID, d.Name, COUNT(*) as AppointmentCount
FROM Department d
JOIN ClinicalActivity c ON d.DEP_ID = c.DEP_ID
JOIN Appointment a ON c.CAID = a.CAID
GROUP BY d.DEP_ID, d.Name;
```

Query 6 — Average medication price per hospital

```
SELECT h.HID, h.Name, AVG(s.UnitPrice) as AvgPrice
FROM Hospital h
JOIN Stock s ON h.HID = s.HID
GROUP BY h.HID, h.Name;
```

Query 7 — Hospitals with ≥20 emergency admissions

```
SELECT h.HID, h.Name, COUNT(e.CAID) as EmergencyCount
FROM Hospital h
JOIN Department d ON h.HID = d.HID
JOIN ClinicalActivity c ON d.DEP_ID = c.DEP_ID
JOIN Emergency e ON c.CAID = e.CAID
GROUP BY h.HID, h.Name
HAVING COUNT(e.CAID) > 20;
```

Query 8 — Antibiotics under 200 DH

```
SELECT m.Name, s.UnitPrice, h.Name as HospitalName
FROM Medication m
JOIN Stock s ON m.MID = s.MID
JOIN Hospital h ON s.HID = h.HID
WHERE m.TherapeuticClass = 'Antibiotic' AND s.UnitPrice < 200;
```

Query 9 — Top 3 expensive meds per hospital

```
SELECT s1.HID, m.Name, s1.UnitPrice
FROM Stock s1
JOIN Medication m ON s1.MID = m.MID
WHERE (
    SELECT COUNT(*)
    FROM Stock s2
    WHERE s2.HID = s1.HID AND s2.UnitPrice >= s1.UnitPrice
) <= 3
ORDER BY s1.HID, s1.UnitPrice DESC;
```

Query 10 — Appointment status per department

```
SELECT d.Name,
    SUM(a.Status = 'Scheduled') AS Scheduled,
    SUM(a.Status = 'Completed') AS Completed,
    SUM(a.Status = 'Cancelled') AS Cancelled
FROM Department d
JOIN ClinicalActivity ca ON ca.DEP_ID = d.DEP_ID
JOIN Appointment a ON a.CAID = ca.CAID
GROUP BY d.Name;
```

Query 11 — Patients with no appointments in 30 days

```

SELECT P.IID, P.FullName
FROM Patient P
WHERE NOT EXISTS (
    SELECT 1
    FROM ClinicalActivity CA
    JOIN Appointment A ON CA.CAID = A.CAID
    WHERE CA.IID = P.IID
        AND A.Status = 'Scheduled'
        AND CA.Date BETWEEN CURDATE() AND DATE_ADD(CURDATE(), INTERVAL 30
            DAY)
);

```

Query 12 — Staff appointment statistics

```

SELECT
    s.STAFF_ID,
    s.FullName,
    COUNT(a.CAID) AS StaffAppointments,
    100 * COUNT(a.CAID) /
        (
            SELECT COUNT(*)
            FROM Appointment a2
            JOIN ClinicalActivity c2 ON a2.CAID = c2.CAID
            JOIN Department d2 ON d2.DEP_ID = c2.DEP_ID
            WHERE d2.HID = d.HID
        ) AS PercentageShare
FROM Staff s
JOIN ClinicalActivity c ON c.STAFF_ID = s.STAFF_ID
JOIN Appointment a ON a.CAID = c.CAID
JOIN Department d ON d.DEP_ID = c.DEP_ID
GROUP BY s.STAFF_ID, s.FullName, d.HID;

```

Query 13 — Drugs below reorder level

```

SELECT M.MID, M.Name, H.Name AS HospitalName, S.Qty, S.ReorderLevel
FROM Medication M
JOIN Stock S ON M.MID = S.MID
JOIN Hospital H ON S.HID = H.HID
WHERE S.Qty < S.ReorderLevel;

```

Query 14 — Hospitals with all antibiotics

```

SELECT H.HID, H.Name
FROM Hospital H

```



```

WHERE NOT EXISTS (
    SELECT M.MID
    FROM Medication M
    WHERE M.TherapeuticClass = 'Antibiotic'
    AND NOT EXISTS (
        SELECT 1
        FROM Stock S
        WHERE S.HID = H.HID AND S.MID = M.MID
    )
);

```

Query 15 — Drug prices vs city average

```

SELECT h.City, m.TherapeuticClass, h.Name as HospitalName,
    AVG(s.UnitPrice) as HospitalAvgPrice,
    (SELECT AVG(s2.UnitPrice)
     FROM Stock s2
     JOIN Hospital h2 ON s2.HID = h2.HID
     WHERE h2.City = h.City) as CityAvgPrice,
    AVG(s.UnitPrice) > (SELECT AVG(s2.UnitPrice)
                        FROM Stock s2
                        JOIN Hospital h2 ON s2.HID = h2.HID
                        WHERE h2.City = h.City) as IsAboveCityAvg
FROM Stock s
JOIN Hospital h ON s.HID = h.HID
JOIN Medication m ON s.MID = m.MID
GROUP BY h.City, m.TherapeuticClass, h .Name;

```

Query 16 — Next appointment per patient

```

SELECT p.IID, p.FullName, MIN(ca.Date) AS NextAppointmentDate
FROM Patient p
JOIN ClinicalActivity ca ON ca.IID = p.IID
JOIN Appointment a ON a.CAID = ca.CAID
WHERE a.Status = 'Scheduled'
    AND ca.Date >= CURDATE()
GROUP BY p.IID, p.FullName;

```

Query 17 — Frequent emergency patients

```

SELECT p.IID, p.FullName, MAX(ca.Date) AS LastEmergencyVisit
FROM Patient p
JOIN ClinicalActivity ca ON ca.IID = p.IID
JOIN Emergency e ON e.CAID = ca.CAID
GROUP BY p.IID, p.FullName

```

```
HAVING COUNT(*) >= 2
      AND MAX(ca.Date) >= DATE_SUB(CURDATE(), INTERVAL 14 DAY);
```

Query 18 — Hospital rankings by city

```
SELECT h.City, h.Name AS HospitalName,
       COUNT(*) AS CompletedAppointments
FROM Hospital h
JOIN Department d ON d.HID = h.HID
JOIN ClinicalActivity ca ON ca.DEP_ID = d.DEP_ID
JOIN Appointment a ON a.CAID = ca.CAID
WHERE a.Status = 'Completed'
      AND ca.Date >= DATE_SUB(CURDATE(), INTERVAL 90 DAY)
GROUP BY h.City, h.Name
ORDER BY h.City, CompletedAppointments DESC;
```

Query 19 — Medications with high price variation

```
SELECT h.City, m.Name AS MedicationName,
       MIN(s.UnitPrice) AS MinPrice,
       MAX(s.UnitPrice) AS MaxPrice,
       ROUND((MAX(s.UnitPrice) - MIN(s.UnitPrice)) / MIN(s.UnitPrice) *
             100, 2) AS PriceSpreadPercent
FROM Stock s
JOIN Hospital h ON h.HID = s.HID
JOIN Medication m ON m.MID = s.MID
GROUP BY h.City, m.MID, m.Name
HAVING MIN(s.UnitPrice) > 0
      AND (MAX(s.UnitPrice) - MIN(s.UnitPrice)) / MIN(s.UnitPrice) > 0.30
ORDER BY h.City, PriceSpreadPercent DESC;
```

Query 20 — Data quality check

```
SELECT HID, MID, StockTimestamp, UnitPrice, Qty
FROM Stock
WHERE Qty < 0 OR UnitPrice <= 0;
```

7 Query Results and Outputs

This section displays the actual outputs generated by executing each SQL query on the MNHS database.

Query 1 Test — Patients Ordered by Last Name

ID	CIN	FullName	Birth	Sex	BloodGroup	Phone	Email
3	CIN567	Yassine Benben	1998-07-25	M	A+	0666234545	YassineBenben@gmail.com
2	CIN456	Youssef Benali	1988-09-22	M	O-	0678912345	YoussefBenali@gmail.com
4	CIN789	Taha Hata	2006-11-05	M	B-	0634455667	TahaHata@gmail.com
5	CIN890	Omar Ramo	2003-01-01	M	O+	0698867564	OmarRamo@gmail.com
1	CIN123	Sara El Amrani	1999-04-10	F	A+	0612345678	SaraElAmrani@gmail.com

Table 1: Output: All patients sorted alphabetically by last name

Query 2 Test — Distinct Insurance Types

Type
CNOPS
CNSS
RAMED
Private
None

Table 2: Output: All available insurance types in the system

Query 3 Test — Staff Working in Hospitals Located in Rabat

FullName
Laila Mari

Table 3: Output: Staff working in hospitals located in Rabat

Query 4 Test — Scheduled Appointments in the Next 7 Days

CAID	Date	Time
No scheduled appointments in the next 7 days		

Table 4: Output: Scheduled appointments in the next 7 days from 2025-11-16

Query 5 Test — Appointment Counts per Department

DEP_ID	Name	AppointmentCount
10	Cardiology	1
20	Radiology	1
30	Cardiology	1
40	Radiology	1
50	Cardiology	1

Table 5: Output: Number of appointments per department

Query 6 Test — Average Medication Prices

HID	MID	AvgPrice
101	901	2.500000
102	902	4.000000
103	904	199.990000
104	903	3.100000
105	905	180.000000

Table 6: Output: Average unit price of medications per hospital and medication

Query 7 Test — Hospitals with More Than 20 Emergency Admissions

HID	Name	EmergencyCount
No hospital has more than 20 emergency admissions		

Table 7: Output: Hospitals with more than 20 emergency admissions

Query 8 Test — Antibiotics Under 200 DH

Name	UnitPrice
Amoxicillin	4.00
Azithromycin	199.99
Cefixime	180.00

Table 8: Output: Antibiotic medications with unit price below 200 DH

Query 9 Test — Top 3 Expensive Medications per Hospital

HID	Name	UnitPrice
101	Paracetamol	2.50
102	Amoxicillin	4.00
103	Azithromycin	199.99
104	Ibuprofen	3.10
105	Cefixime	180.00

Table 9: Output: Three most expensive medications in each hospital

Query 10 Test — Appointment Status per Department

Name	Scheduled	Completed	Cancelled
Cardiology	2	1	0
Radiology	1	1	0

Table 10: Output: Appointment counts by status for each department

Query 11 Test — Patients with No Appointments in 30 Days

ID	FullName
2	Youssef Benali
3	Yassine Benben
4	Taha Hata
5	Omar Ramo

Table 11: Output: Patients without scheduled appointments in the next 30 days

Query 12 Test — Staff Appointment Counts and Percentage Share

STAFF_ID	FullName	StaffAppointments	PercentageShare
501	Dr. Amina Idrissi	1	100.0000
502	Technician Omar Lahlou	1	100.0000
503	Laila Mari	1	100.0000
504	Fouad Chraibi	1	100.0000
505	Amina Zahidi	1	100.0000

Table 12: Output: Number of appointments per staff member and percentage contribution

Query 13 Test — Drugs Below Reorder Level

MID	Name	HospitalName
904	Azithromycin	Casablanca University Hospital

Table 13: Output: Medications that need restocking (below reorder level)

Query 14 Test — Hospitals with All Antibiotics

HID	Name

Table 14: No hospital stocks all antibiotics

Query 15 Test — Drug Prices vs City Average

HID	Hospital	Therapeutic Class	Hospital Avg	Price Flag
101	Benguerir Central Hospital	Analgesic	2.500000	Not Above
102	Casablanca University Hospital	Antibiotic	101.995000	Not Above
103	Rabat University Hospital	Antipyretic	3.100000	Not Above
104	Marrakech Central Hospital	Antibiotic	180.000000	Above City Avg

Table 15: Output: Average hospital drug prices and comparison to citywide average

Query 16 Test — Next Appointment per Patient

NextAppointmentDate
2025-11-30
2026-01-14
2027-06-16

Table 16: Output: Next scheduled appointment date for each patient

Query 17 Test — Frequent Emergency Patients

IID	FullName	LastEmergencyVisit

Table 17: Output: Patients with multiple emergency visits in last 14 days

Query 18 Test — Hospital Rankings by City

City	HID	HospitalName	CompletedAppointments	CityRank
Casablanca	102	Casablanca University Hospital	1	1
Kenitra	105	Kenitra Central Hospital	1	1

Table 18: Output: Hospital rankings by completed appointments per city

Query 19 Test — Medications with High Price Variation

City	Medication Name	Min Price	Max Price	Price Spread (%)
No medications with ≥30% price variation within cities				

Table 19: Output: Medications with price variations greater than 30% within cities

Query 20 Test — Data Quality Check

HID	MID	StockTimestamp	UnitPrice	Qty
No invalid stock entries found				

Table 20: Output: Data quality validation - checking for invalid stock entries

8 Conclusion

This lab covered BCNF normalization, SQL schema creation, sample data insertion, and multi-table SQL queries. The work demonstrates the full life cycle of building, populating, and querying a relational database. All functional dependencies have been analyzed and dependency preservation has been verified for each relation. The database design follows best practices for normalization while maintaining query efficiency through proper indexing.