

ANALYTICS FOR HOSPITAL AND HEALTH-CARE DATA

A PROJECT REPORT

Submitted by

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ABSTRACT

This paper is mainly streamered towards hospitals and their health-care data. Due to recent covid-19 pandemic has raised alarms over one of the most overlooked areas to focus. Healthcare management has various use cases for data science, patients health details and their past history with data records. analuysis the data's with a module and exploring the visualization can improve the dataset. In order to discuss health data analytics and the role it plays in the health care sector, we must first understand the data that is being collected and analyzed. There is data being collected on the processes and procedures of the business side of health care, but there is also an enormous amount of health data being gathered, stored and analyzed. Health data is any data relating to the health of an individual patient or collective population. This information is gathered from a series of health information systems (HIS) and other technological tools utilized by health care professionals, insurance companies and government organizations. Consider the impact this has had on the COVID-19 pandemic. The data being collected is analyzed in real time to understand the effects of the virus better and predict future trends so we may slow the spread and prevent future outbreaks. Health care data management has the potential to lead to better care if used properly. With centralized datasets, there is immediate access to necessary information whenever and wherever it is needed. The addition of big data analytics improves efficiency on all fronts. Better data leads to better care.

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CHAPTER 1

INTRODUCTION

The introduction about the analytics for hospital and health-care data with IBM-Cognos and analytics

a. PROJECT OVERVIEW

Recent Covid-19 Pandemic has raised alarms over one of the most overlooked areas to focus on Healthcare. While Healthcare management has various use cases for using data science, patient length of stay is on critical parameter to observe and predict if one wants to improve the efficiency of the healthcare management in a hospital. This parameter helps hospitals to identify patients of high LOS-risk at the time of admission. Once identified, patients with high LOS risk can have their treatment plan optimized to minimize LOS and lower the chance of staff/visitor infection. Also, prior knowledge of LOS can aid in logistics such as room and bed allocation planning. Suppose you have been hired as Data Scientist of Health Man a not for profit organization dedicated to manage the functioning of Hospitals in a professional and optimal manner. The goal is to accurately predict the length of stay of each patient on case by case basis so that the Hospitals can use this information for optimal resource allocation and better functioning. The length of stay is divided into 11 different classes ranging from 0-10 days to more than 100 days.

b. PURPOSE

- i. This type of analysis is used to investigate why an event

happened.

- ii. This form of analysis is used to forecast something that will happen in the future. For example, a hospital might predict, based on trends observed over the past decade, that incoming cardiac patients will most likely increase by 20% this year.
- iii. This is possibly the most important form of analysis in healthcare and the trend that is growing quickest. This form of analysis takes pre-existing data and implements treatment plans. For example, a healthcare provider might use a smart device to automatically analyze a patient's vital signs, preemptively alert them that they're at risk for developing a medical condition, and instruct them to visit their healthcare provider.
- iv. While healthcare data analytics is highly advantageous, it can get pretty complicated, too. Whether the data was collected by assessing important real-time signs or through electronic health records (EHR), it needs to be derived from various sources by following proper government regulations, thus making the process precarious and complex.
- v. Anything from clinical data to patient behaviour, medical expenses, healthcare, or pharmaceuticals data analytics can be employed at the micro and macro level to evidently enhance operations, boost patient care, and

even tackle the overall expenses.

Fig 1.1 Analytics for healthcare

CHAPTER 2

LITERATURE SURVEY

The introduction about the literature survey gone through for the project are briefly discussed in this chapter.

a. EXISTING PROBLEM

As we all know health care organisation will understand of big data analytics. Data mining offers novel information regarding health care helpful for making administrative as well as prediction disease, selection of treatment, health insurance policy. The novel corona virus pandemic outbreak is seriously threatening human health. Security optimization implementation and testing on real world patients Hospitalization cost and the insured population all show a trend of increasing year by year. The users to help to see understand the valuable information provided by data care visual analytics huge amount of structured and unstructured and semi structured data have been generated by various institutions around the world.

This research demonstrates to address lack, this study examines the historical development, architectural design and component functionalities of big data analytics. Data sets can gain unwanted attention from hackers and important information can be leaked to competitors. As each and every patient records are important to the hospital organisation and the data should be protected with security measures. The health industry sector has been confronted the need to manage the big data being produced by various

sources, which are well known for producing high volumes of heterogeneous data lack of standardisation methods and electronic tools. In recent years, there has been much research in medical big data, mainly targeting data collecting data, data analysis and visualisation.

b. REFERENCES

1. Big data analytics for healthcare industry.

Authors: R Sunil Kumar, A Daniel

Published in: 2015 IEEE.

The user to help able to information provided by the healthcare data in any need with the help of system the is developed using the AI with chats analysis and visualization. Analysing the dats with the better understand and current practices, capabilities and challenges related to clinical data analytics. Multiview data analytics requires advanced machine learning techniques.

Merits: The data analysis will help to the hospital organisation with the structured data access at anytime through systems.

Demerits: Data should be maintained and protected as leakage of data could lead to unwanted issues to the organisation in privacy concerns.

2. Intelligent and health care management.

Authors: Yinchuan Wang, .et.al, Zhihan Lv, .et.al,

Published in: 2017 IEEE.

Hospitalization cost and the insured and population all show a trend of increasing year by year. Data analytics become a future escalating tool of all industries including medicine, robotics, etc.,

Merits: As the population increases the productivity also increases so a system can manage this work loads.

Demerits: There is not mandatory to set a employee for data handling as system does it with AI build intelligence.

3. IoT ENABLED SMART HEALTHCARE SYSTEM.

Authors: Syed Rooh Ullah, Divya Tomer, Imran Ahmed.

Published in:2021 IEEE.

IoT enabled devices realtime, interoperability with prediction of disease real data set focusing on

different pandemic symptoms. Unable to predict the data with the right chart and visualaization.

Merits: Data prediction will be viewed in the right visualization and chart with different kind of analysis.

Demerits: Accurate data is needed and analysis the pattern.

4. A FRAMEWORK FOR DATA ANALYTICS BASED ON SYSTEMS.

Author: Alejandro Bal dominos .et.al.,

Published in: 2014 IEEE.

The visual analytics pattern is undertaken and the framework is designed based on the system with the data care information. The user to help the provided by healthcare and information is collected from the hospital organisation. Lack of oraganisational alignment and strategy for data analyticsad strandardized methods and report formation.

Merits: Data accessing is flexible with the designed framework.

Demerits: Maintainance of data fomate should be structured and grouped.

C. PROBLEM STATEMENT DEFINITION

There are multiple problems in the hospital health care organisation as some of the them are mentioned and solved though analysis of the various problem statements.

Fig 2.1 Problem Statement Definition

IDEATION & PROPOSED SOLUTION

CHAPTER 3

IDEATION & PROPOSED SOLUTION

a. EMPATHY MAP CANVAS

An empathy map is a simple, easy-to-digest visual that captures knowledge about a user's behaviors and attitudes. It is a useful tool to help teams better understand their users..

Creating an effective solution requires understanding the true problem and the person who is experiencing it. The exercise of creating the map helps participants consider things from the user's perspective along with his or her goals and challenge.

Fig 3.1 EmpathyMap Canvas

b. IDEATION & BRAINSTORMING

Brainstorming provides a free and open environment that encourages everyone within a team to participate in the creative thinking process that leads to problem solving. Prioritizing volume over value, out-of-the-box ideas are welcome and built upon, and all participants are encouraged to collaborate, helping each other develop a rich amount of creative solutions.

Fig 3.2 Brainstorming 1

2

Brainstorm

Write down any ideas that come to mind that address your problem statement.

⌚ 10 minutes

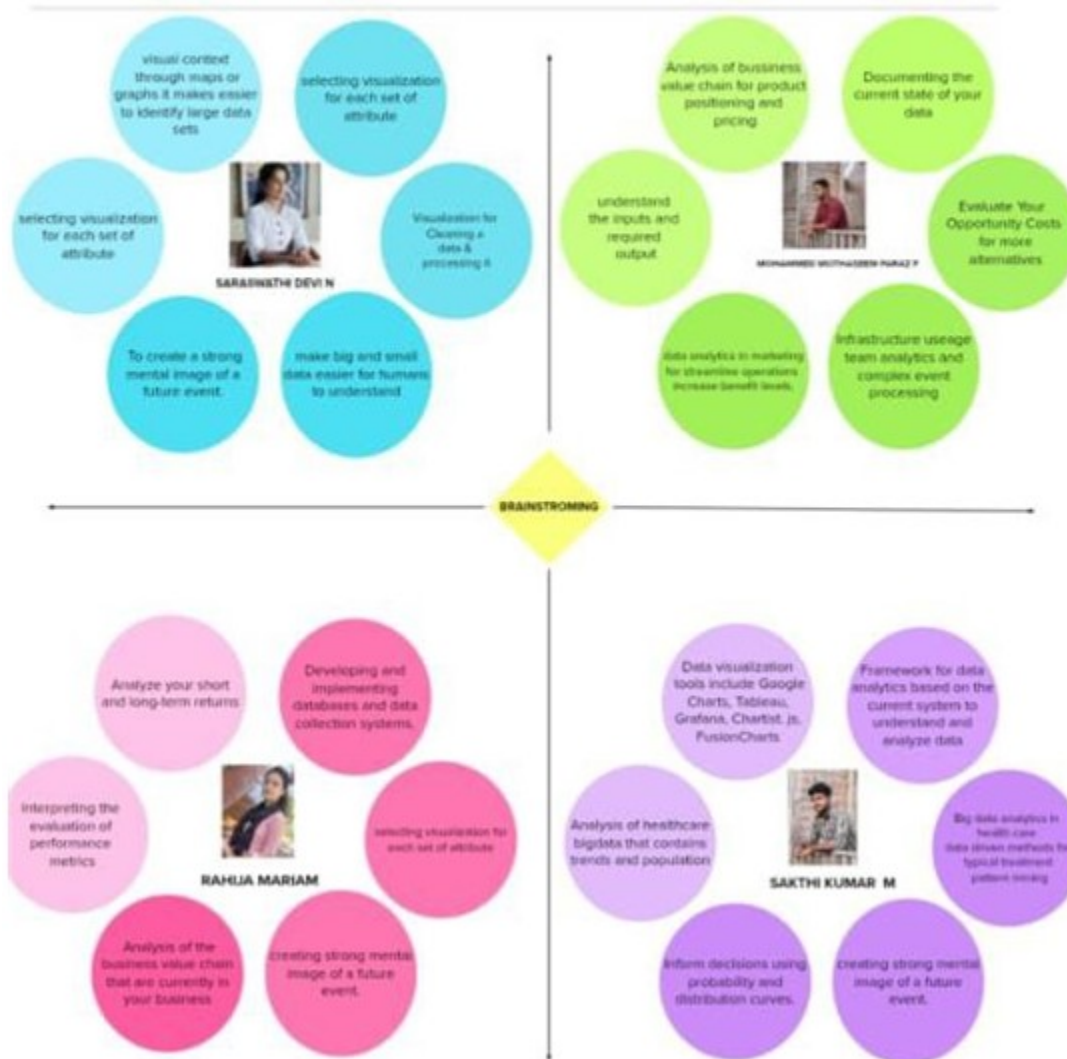


Fig 3.3 Brainstorming 2

3

Group Ideas

Take turns sharing your ideas while clustering similar or related notes as you go. In the last 10 minutes, give each cluster a sentence-like label. If a cluster is bigger than six sticky notes, try and see if you and break it up into smaller sub-groups.

🕒 20 minutes

VISUVALIZATION

Modern data
visualization tools
in healthcare
convert complex
data into user f . .

that are easy to
understand for its
stakeholders, be
they doctors,
patients, or
government

Make use of
all options
such as filter
for better
visuvalization.

USER PRIORITY

Priority setting,
healthcare
rationing,
healthcare
planning,
hospitals

Understand
the input and
required
output

ASSESEMENT OF METRICS

Interpreting
the evaluation
of
performance
metrics

checking
wheather the
visualizations
are upto
expectations

DATASET ANALYSIS

Provide
relavent lable
names for all
the
visualizations

Combine and
visualize all
the relavent
data together

Compare
the results
of all the
visualizations

TREND ANALYSIS

Identifying
pros and
cos trends

Fig 3.4 Brainstorming 3

4

Prioritize

Your team should all be on the same page about what's important moving forward. Place your ideas on this grid to determine which ideas are important and which are feasible.

20 minutes

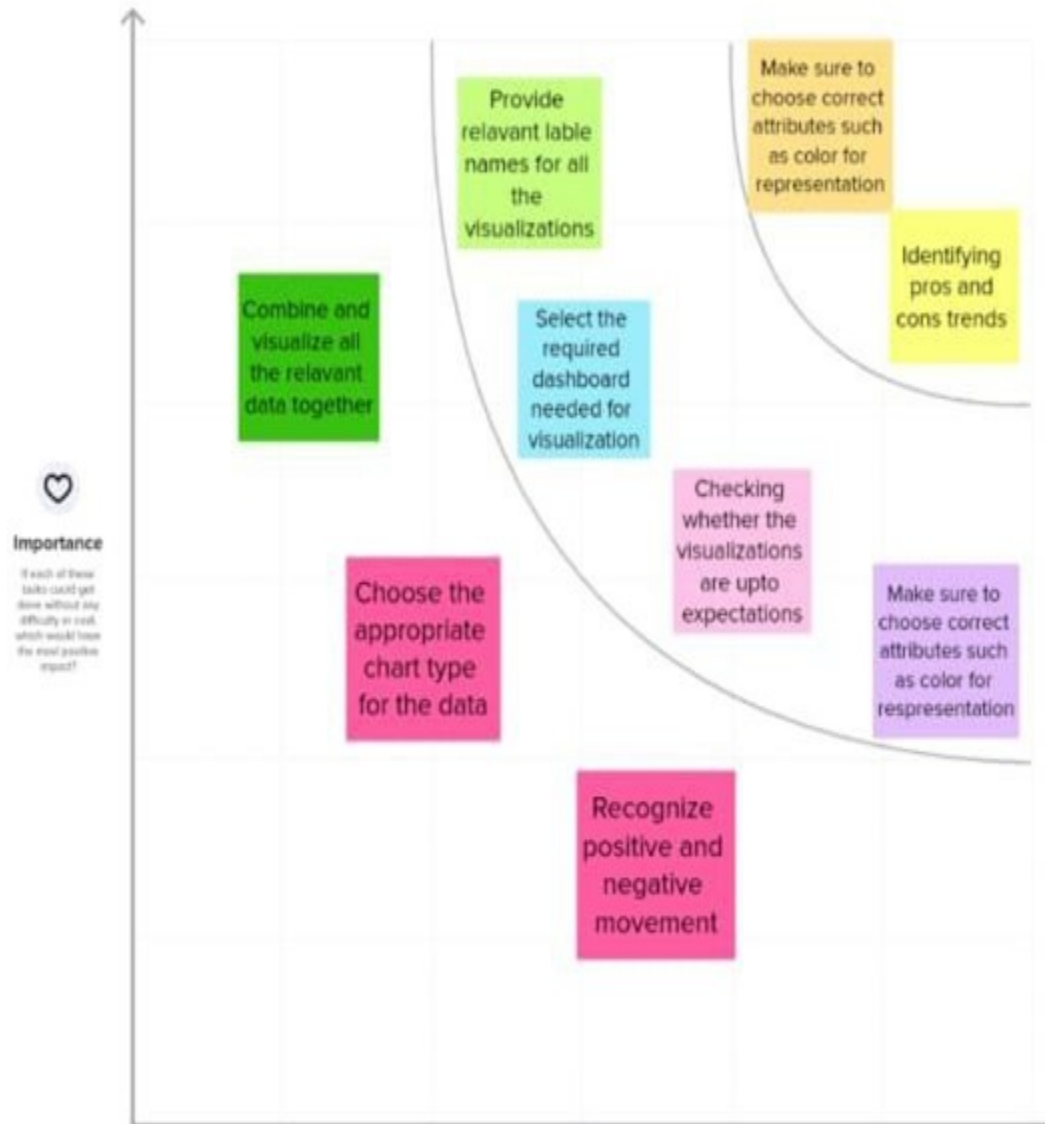


Fig 3.4.1 Brainstorming 4

C. PROPOSED SOLUTION

S.No.	Parameter	Description
1.	Problem Statement (Problem to be solved)	EHR data matched patient-reported data in 23.5 percent of records in a study at an ophthalmology practise. Patients' EHR data did not agree in any way when they reported having three or more eye health complaints.
2.	Idea / Solution description	Predictive analytics can create patient journey dashboards and disease trajectories that can lead to effective, and resultdriven healthcare. It improves treatment delivery, cuts costs, improves efficiencies, and so on.
3.	Novelty / Uniqueness	Healthcare data frequently resides in several locations. from various departments, such as radiology or pharmacy, to various source systems, such as EMRs or HR software. The organisation as a whole contributes to the data. This data becomes accessible and usable when it is combined into a single, central system, such as an enterprise data warehouse (EDW).
4.	Social Impact / Customer Satisfaction	Enhanced diagnosis Improved medical treatment Improved health results Improved relationships with patients More positive health indicators

5.	Business Model (Revenue Model)	The two factors that have the biggest negative effects on hospital income are claim denials and patient incapacity to pay their part. 90% more uncollectible claim denials were written off by hospitals and healthcare systems in 2017 compared to the preceding six years.
6.	Scalability of the Solution	A variety of institutions must store, evaluate, and take action on the massive amounts of data being produced by the health care sector as it expands quickly. India is a vast, culturally varied nation with a sizable population that is increasingly able to access centralised healthcare services.

PROBLEM SOLUTION FIT

1.CUSTOMER SEGMENT	6.CUSTOMER DRIVEN	5.AVAILABLE SOLUTION
<ul style="list-style-type: none"> Person With Identical Needs Person With Chronic Condition Person With Multiple Illness Tertiary Care Patient 	<ul style="list-style-type: none"> Convincing Consumers There's Choice Inaccessibility Lagging Behind in Consumer Technology 	<ul style="list-style-type: none"> Effective Communication to Patients Grievance Redressal Mechanism. Nurses To focus on Clinical Care
2.PROBLEM/PAIN+(Frequency)	9.ROOT/CAUSE of problem	7.BEHAVIOR +its intensity
<ul style="list-style-type: none"> People for testing and treatment of coronavirus Overflowing waiting room Beds crowded in intensive care units Lack of oxygen cylinders during covid Restricted travel for staffs 	<ul style="list-style-type: none"> Government mandates. Patient safety and quality care. Staffing concerns. Patient satisfaction. Doctor-related issues. Population health management. 	<ul style="list-style-type: none"> Arrangements in schools and colleges for the patient who had covid to avoid spreading Giving Essential resources for the patients (food cloths etc.,) Organizing Vaccination camp
3.TRIGGERS TO ACT	10.YOUR SOLUTION	8.CHANNELS OF BEHAVIOR
<ul style="list-style-type: none"> care of the dying is urgent care Diagnosis of life-limiting conditions 	<ul style="list-style-type: none"> Orientation Training Camp for vaccination and providing free consultation for awareness Developing application for information Creating blood bank app for immediate blood requirements 	<ul style="list-style-type: none"> Strategic Decision Making Physical Advocacy Paid Advertising Customer Services Public Relations Achievement on Social Networks Staff Behavior
4.EMOTIONS before and after		
<ul style="list-style-type: none"> Condemning emotions Self-conscious emotions Suffering emotions 		

Fig 3.5 Problem Solution Fit

CHAPTER 4

REQUIREMENT ANALYSIS

In this chapter, the requirement analysis of the proposed system has been discussed along with the brief explanation about its advantages.

a. FUNCTIONAL REQUIREMENT

Following are the functional requirements of the proposed solution.

FR No.	Functional Requirement (Epic)	Sub Requirement (Story / Sub-Task)
FR-1	Collect data	Data from various sources are collected using different methods in order to provide optimized results.
FR-2	Data Cleaning and Wrangling	When combining multiple data sources, there are many opportunities for data to be duplicated or mislabeled hence we cleanse the data

FR-3	Creating data model	The process of analyzing and defining all the data, as well as the relationships between those bits of data comes under this.
FR-4	Prediction and Analysis	The hidden trends are analyzed and the final results are predicted using machine learning and AI algorithms.

b. NON-FUNCTIONAL REQUIREMENT

Following are the non-functional requirements of the proposed solution.

FR No.	Non-Functional Requirement	Description
NFR-1	Usability	The project must be easy to use. The user needs to have a good experience while working with the interface.
NFR-2	Security	Every user can access the website only if they possess the password. The database is secured with encryption techniques which provides high levels of security.
NFR-3	Reliability	The project must have minimal degree of failure under normal usage and how often does the user get access to this work.
NFR-4	Performance	The project must respond quickly to the user's actions or even if the user has to wait the waiting period must be short.

NFR-5	Availability	The project is platform independent. It runs perfectly on almost every platform.
NFR-6	Scalability	The project allows multiple users to handle the data at the same time. It is highly scalable since adding features and making advancements in the website is uncomplicated.

This chapter dealt with the functional and non-functional requirement analysis of proposed system.

CHAPTER 5

PROJECT DESIGN

a. DATA FLOW DIAGRAMS

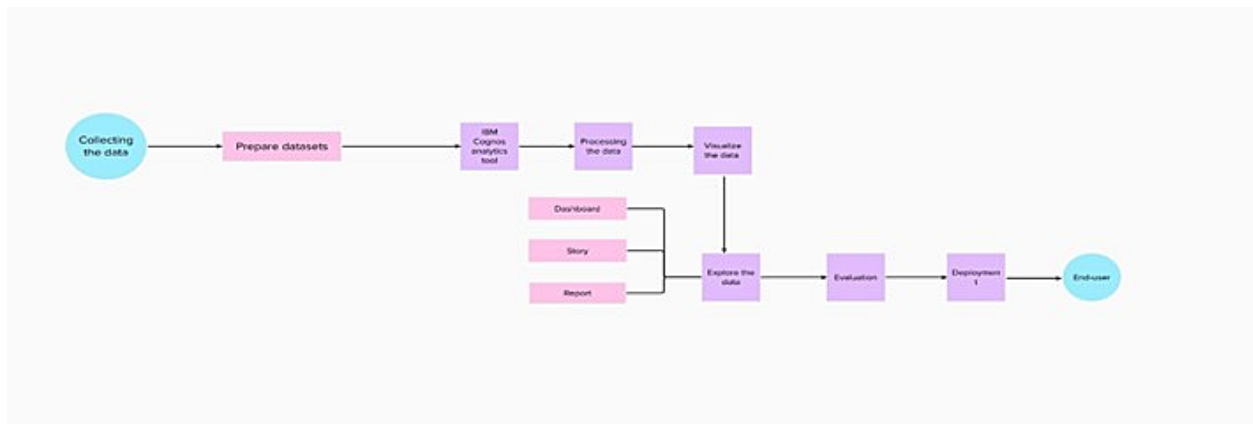


Fig 5.1 Dataflow Diagram

a.SOLUTION & TECHNICAL ARCHITECTURE

i. SOLUTION ARCHITECTURE

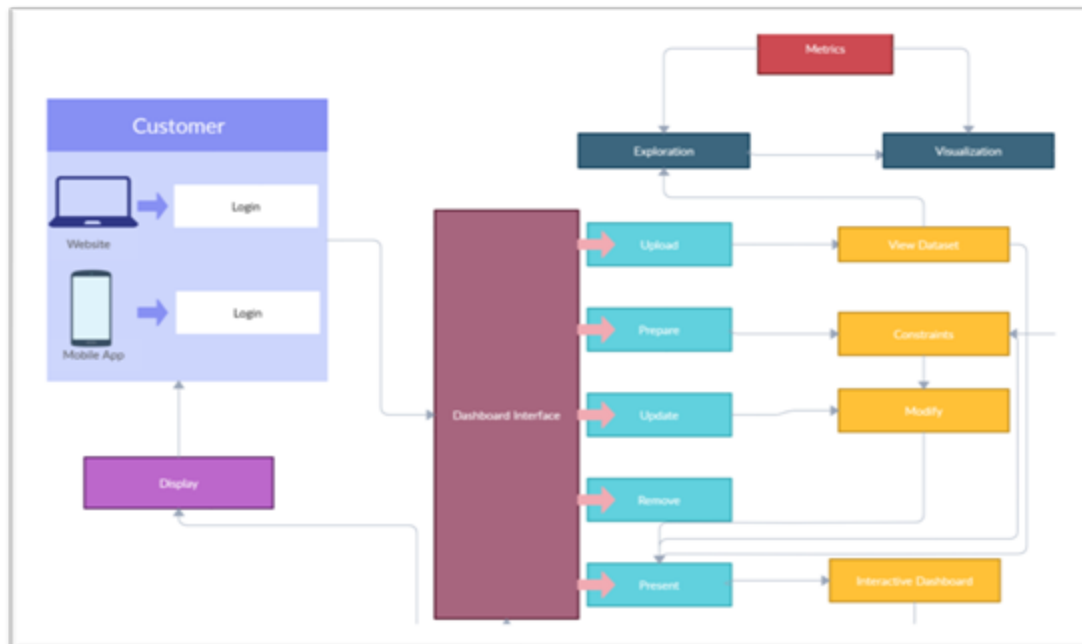


Fig 5.2 Solution Architecture Diagram

ii. TECHNICAL ARCHITECTURE

Fig 5.3 Technical Architecture Diagram

b. USER STORIES

User Type	Functional Requirement (Epic)	User Story Number		User Story / Task	Acceptance criteria	Priority	Release

Customer (Web user)		USN-1		As a user, I can register for the application by entering my email, password, and confirming my password.	I can access my account / dashboard	High	Sprint-1
		USN-2		As a user, I will receive confirmation email once I have registered for the application	I can receive confirmation email & click confirm	High	Sprint-1
		USN-3		As a user, I can register for the application through Gmail	I can register & access the dashboard	Medium	Sprint-1
	Login	USN-4		As a user, I can log into the application by entering email & password	I can access the dashboard	High	Sprint-1
	Dashboard	USN-5		As a user, I can upload the datasets to the dashboard	I can access various operations	High	Sprint-1
	View	USN-6		As a user, I can view the patient details	I can view the visual data and the result after the prediction	High	Sprint-2
Admin	Analyse	USN-7		As an admin, I will analyse the given dataset	I can analyse the dataset	High	Sprint-2
	Predict	USN-8		As an admin, I will predict the length of stay	I can predict the length of stay	High	Sprint-2

Table 5.1 User Stories

CHAPTER 6

PROJECT PLANNING & SCHEDULING

a. SPRINT PLANNING & ESTIMATION

MILESTONES	ACTIVITY LIST
MILESTONE-1	Collecting the data based on the application
MILESTONE-2	Uploading the collected data on the IBM COGNOS platform
MILESTONE-3	Data exploration in the IBM COGNOS platform
MILESTONE-4	Data visualization in the IBM COGNOS platform
MILESTONE-5	Creating an interactive dashboard
MILESTONE-6	Displaying the prepared dashboard
MILESTONE-7	Preparing a standard dataset and removing the unwanted data using the python programming
MILESTONE-8	By using the various algorithm and exploring the result and getting the accurate result with the help of an algorithm which give more accuracy
MILESTONE-9	Displaying the result according to the required format for example displaying the Length Of Stay of a patient
MILESTONE-10	Deployed in the GitHub

Table 6.1 Sprint Planning and Estimation

b. SPRINT DELIVERY SCHEDULE

Sprint	Functional Requirement (Epic)	User Story Number	User Story / Task	Story Points	Priority	Team Members
Sprint-1	Registration	USN-1	As a health care provider I can create account in IBM cloud and the data are collected.	20	High	2 Members
Sprint-2	Analyze	USN-2	As a health care provider all the data that are collected is cleaned and uploaded in the database or IBM cloud.	20	Medium	2 Members
Sprint-3	Dashboard	USN-3	As a health care provider I can use my account in my dashboard for uploading dataset.	10	Medium	2 Members
Sprint-3	Visualization	USN-4	As a health care provider I can prepare data for Visualization.	10	High	2 Members
Sprint-4	Visualization	USN-5	As a health care provider I can present data in my dashboard.	10	High	2 Members

Table 6.2 Sprint Delivery Schedule

c. REPORTS FROM JIRA

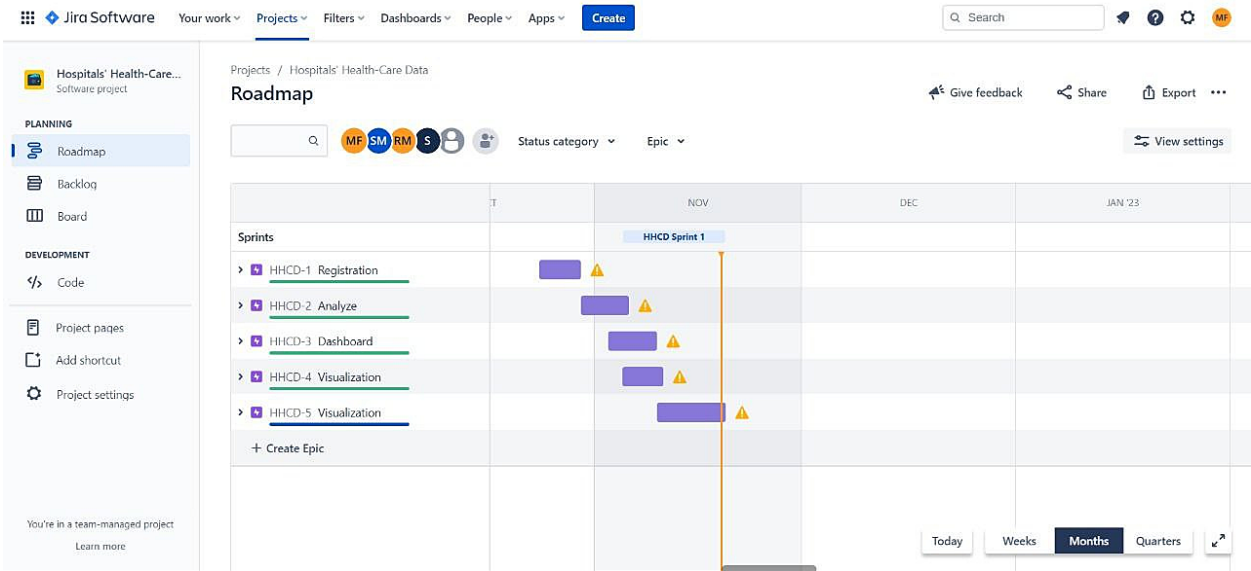
JIRA BOARD

The screenshot shows the Jira Board interface for the 'HHCDC Sprint 1' project. The left sidebar contains navigation options: PLANNING (Roadmap, Backlog, Board) and DEVELOPMENT (Code, Project pages, Add shortcut, Project settings). The main area displays the 'Board' view with three columns: 'TO DO', 'IN PROGRESS', and 'DONE 5 ISSUES'. The 'DONE' column contains three issues: HHCD-10 (Visualization), HHCD-6 (Registration), and HHCD-9 (Visualization). Each issue card shows a description, a label, a status, and an assignee. The top right of the board shows a search bar, a 'Complete sprint' button, and a 'GROUP BY' dropdown set to 'None'.

BACKLOGS

The screenshot shows the Jira Backlog interface for the 'HHCDC Sprint 1' project. The left sidebar is the same as the board view. The main area displays the 'Backlog' view with a list of issues. The issues are: HHCD-6 (Registration, DONE, ME), HHCD-9 (Visualization, DONE, S), HHCD-8 (Dashboard, DONE, RM), HHCD-7 (Analyze, DONE, SM), and HHCD-10 (Visualization, IN PROGRESS, SM). Below the list, there is a 'Create issue' button and a section for 'Backlog (0 issues)' with a 'Create sprint' button. The bottom of the backlog section shows a message 'Your backlog is empty.'

ROADMAP

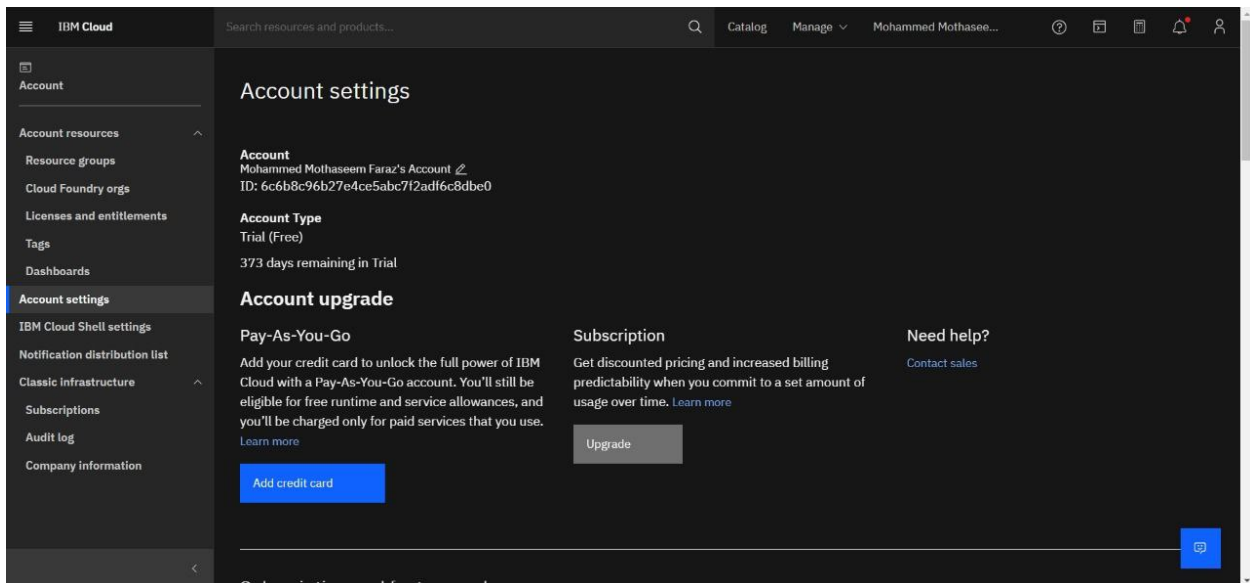


CHAPTER 7

CODING AND SOLUTIONING

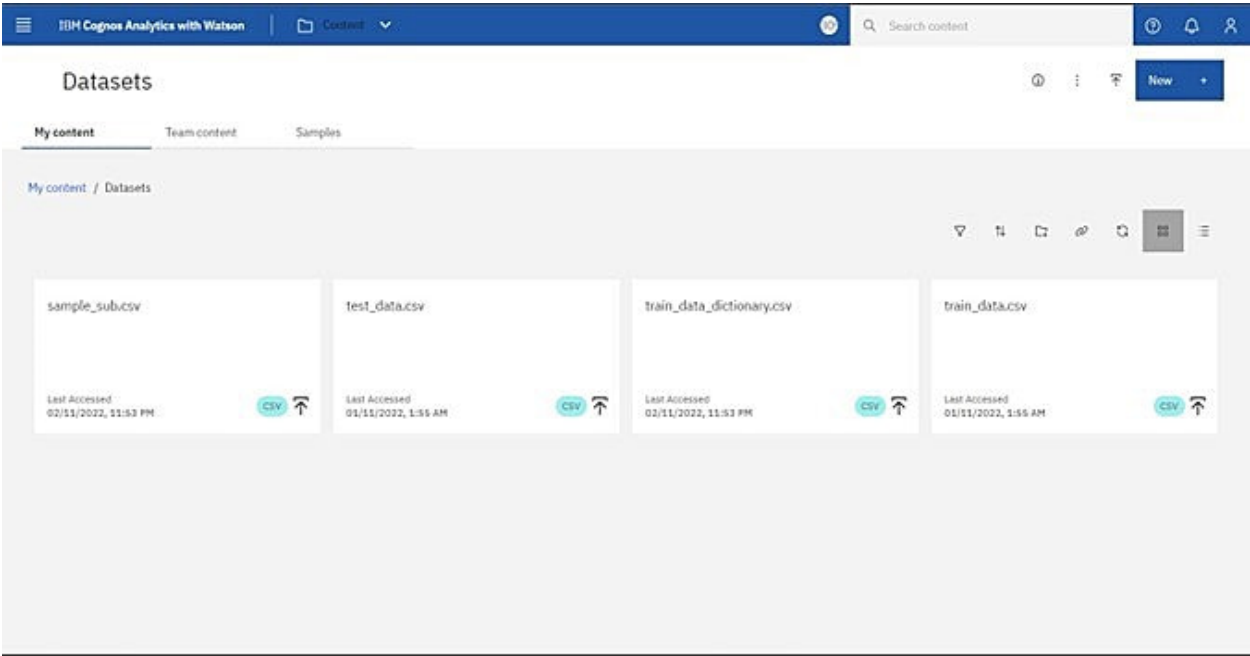
a. CREATE AND CONFIGURE IBM CLOUD SERVICES

USN 1: As a user, I will create IBM cloud account.

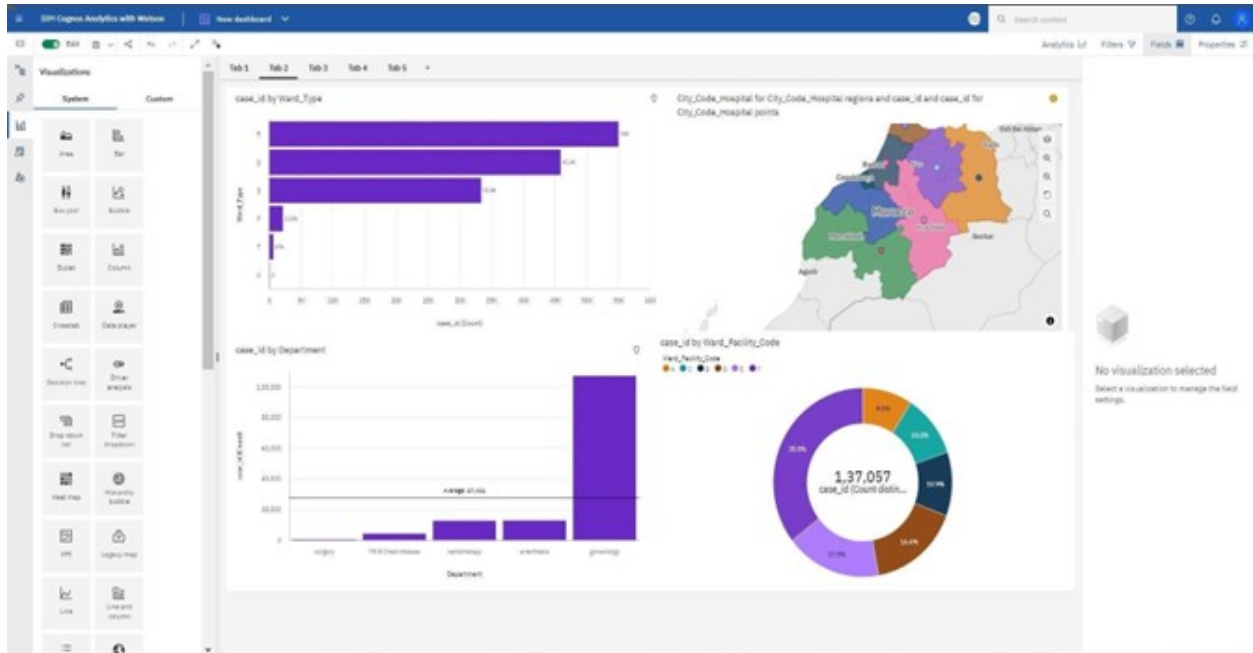


USN 2: As a user, I will create IBM cognos account.

USN 3: Loading the datasets

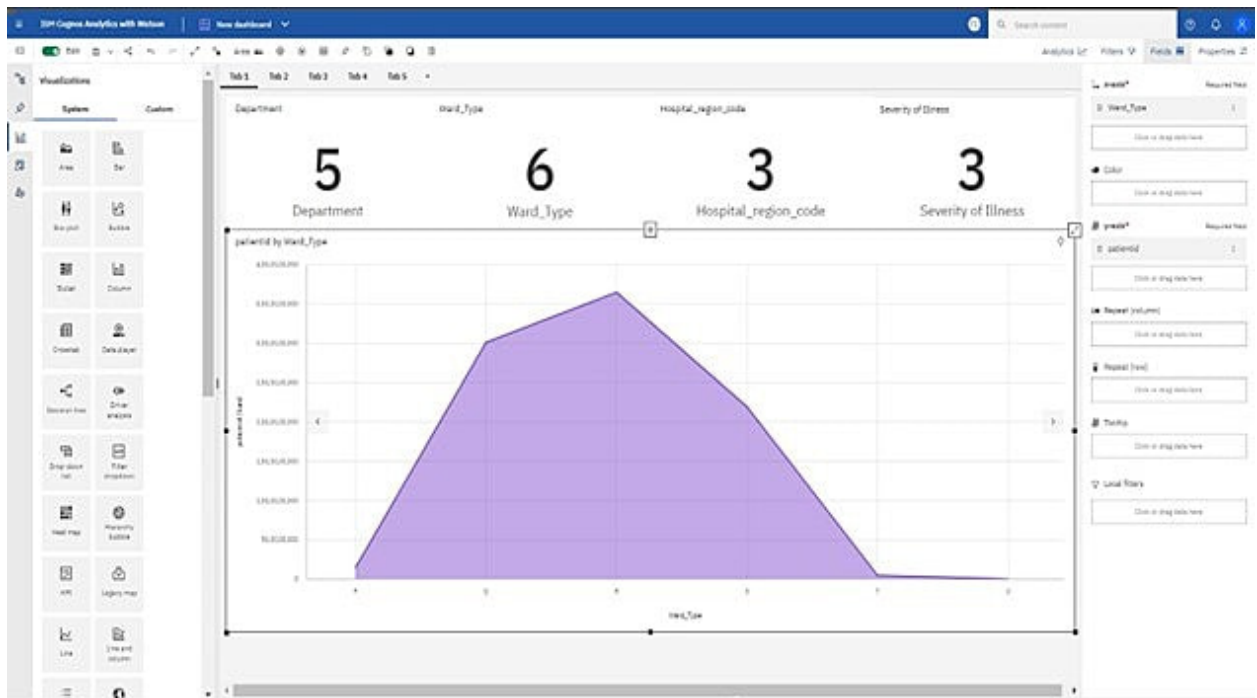


USN 4: Data analysing with different visualisation chart

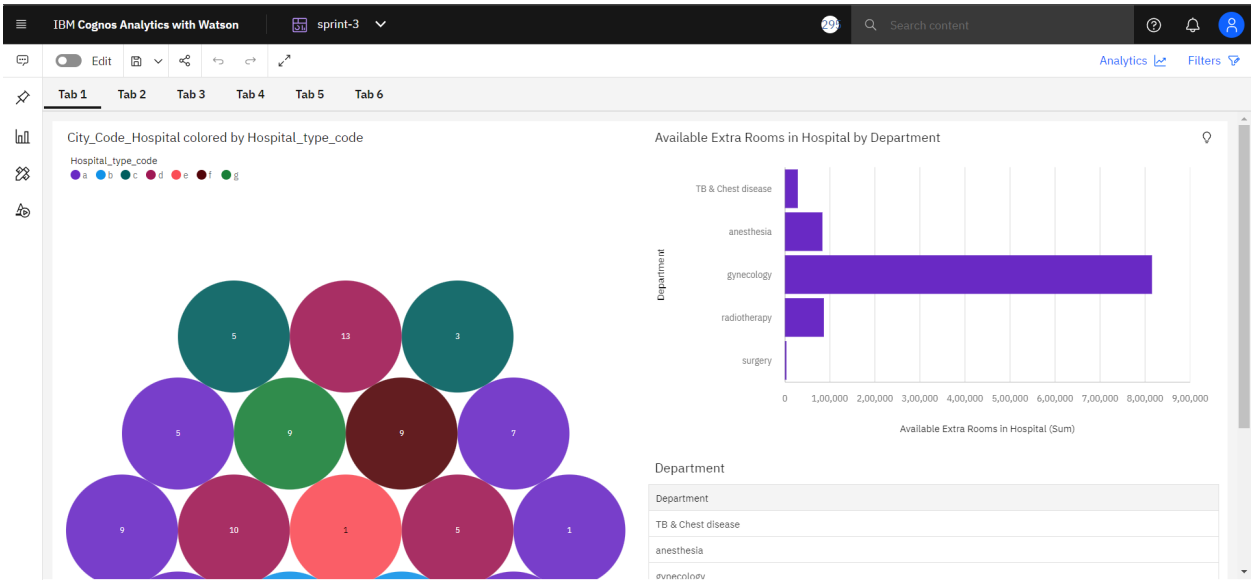


b. Data Visualizations

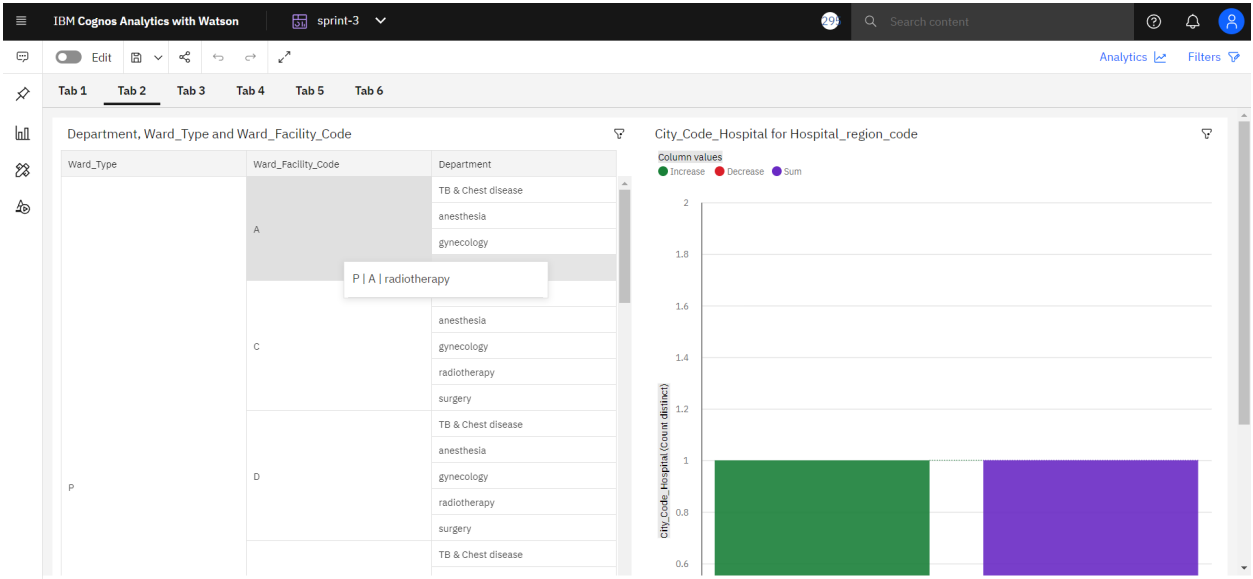
USN 5: Number of Patients By ward types.



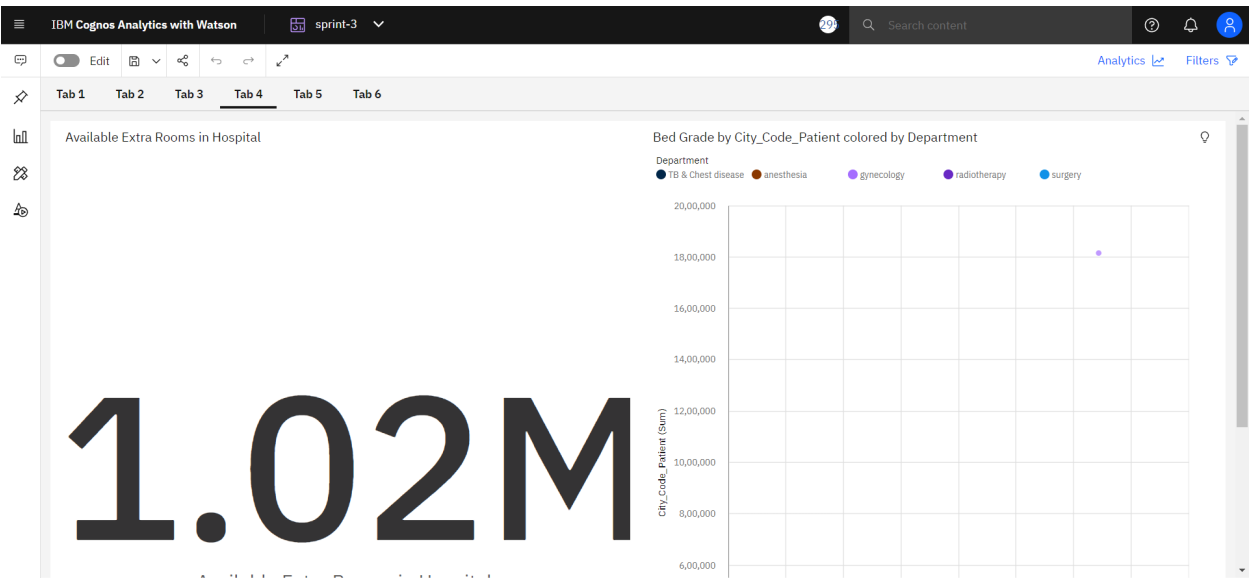
USN 6: Dashboard to show number of patients.



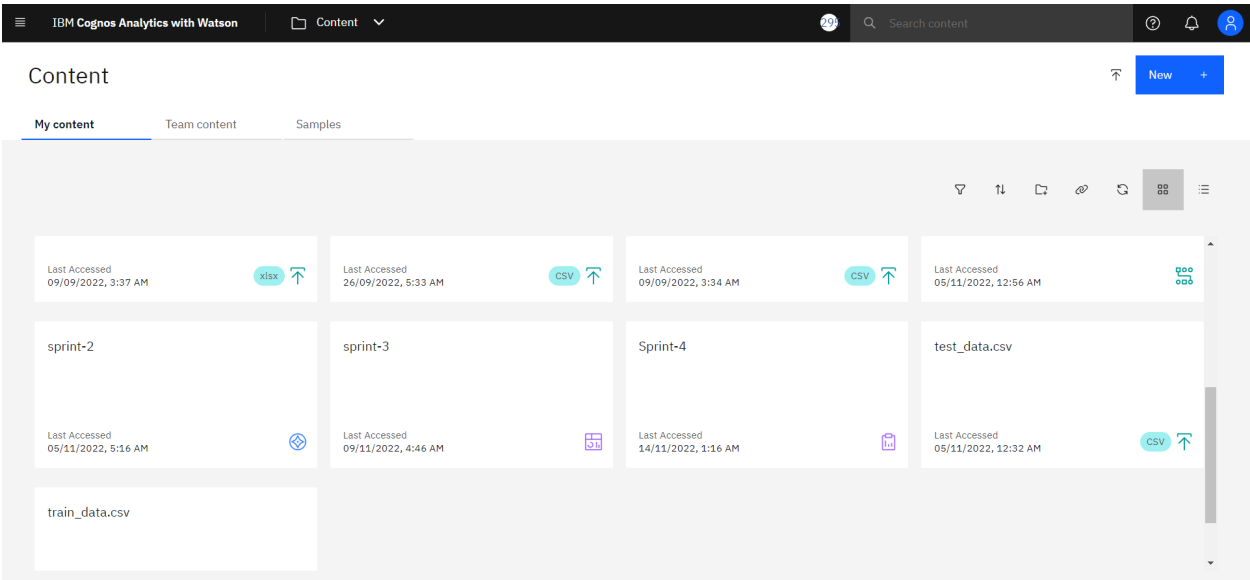
USN 7 : Age wise patients with department and severity filters.



USN 8: Dashboard with Hierarchy bubble and radial visuals.



USN 9: Select the dataset.



USN 10: Prepare the dataset.

The screenshot shows the IBM Cognos Analytics interface. On the left, the 'Data module' pane lists 'hospital_care_data' with sub-items 'train_data.csv' and 'test_data.csv'. The main area displays a 'Grid' view of the data. The table has columns: Row Id, case_id, Hospital_code, Hospital_type_code, City_Code_Hospital, Hospital_region_code, Available E...in Hospital, and Department. The data is sorted by Row Id.

Row Id	case_id	Hospital_code	Hospital_type_code	City_Code_Hospital	Hospital_region_code	Available E...in Hospital	Department
1	1	8	c	3	Z	3	radiotherapy
2	2	2	c	5	Z	2	radiotherapy
3	3	10	e	1	X	2	anesthesia
4	4	26	b	2	Y	2	radiotherapy
5	5	26	b	2	Y	2	radiotherapy
6	6	23	a	6	X	2	anesthesia
7	7	32	f	9	Y	1	radiotherapy
8	8	23	a	6	X	4	radiotherapy
9	9	1	d	10	Y	2	gynecology
10	10	10	e	1	X	2	gynecology
11	11	22	g	9	Y	2	radiotherapy
12	12	26	b	2	Y	4	radiotherapy
13	13	16	c	3	Z	2	radiotherapy
14	14	9	d	5	Z	3	radiotherapy
15	15	6	a	6	X	4	gynecology
16	16	6	a	6	X	3	gynecology

USN 11: Null values cleaning process.

The screenshot shows the 'Edit calculation' dialog in IBM Cognos Analytics. The 'Name' field is 'City_Code_Patient'. The 'Expression' field contains the following code:

```
1 IF ( City_Code_Patient is missing )
2 THEN ( median (City_Code_Patient ))
3 ELSE City_Code_Patient )
```

The 'Validation Results' section shows a green checkmark and the message: 'The expression is valid.' The dialog has 'Cancel' and 'OK' buttons at the bottom.

The screenshot shows the IBM Cognos Analytics with Watson interface. The top bar includes the logo, the text "IBM Cognos Analytics with Watson", a dropdown menu for "hospital_care_data", a search bar, and user icons. The left sidebar shows a "Data module" with a search bar and a list of data sources: "train_data.csv", "test_data.csv", and various fields like "Row Id", "case_id", "Hospital_code", "Hospital_type_code", "City_Code_Hospital", "Hospital_region_code", "Available E...in Hospital", and "Department". The main area displays a "Grid" view of the data, showing a table with 16 rows and 9 columns. The columns are: "T1", "Row Id", "case_id", "Hospital_code", "Hospital_type_code", "City_Code_Hospital", "Hospital_region_code", "Available E...in Hospital", and "Department". The data is as follows:

T1	Row Id	case_id	Hospital_code	Hospital_type_code	City_Code_Hospital	Hospital_region_code	Available E...in Hospital	Department
	1	1	8	c	3	Z	3	radiotherapy
	2	2	2	c	5	Z	2	radiotherapy
	3	3	10	e	1	X	2	anesthesia
	4	4	26	b	2	Y	2	radiotherapy
	5	5	26	b	2	Y	2	radiotherapy
	6	6	23	a	6	X	2	anesthesia
	7	7	32	f	9	Y	1	radiotherapy
	8	8	23	a	6	X	4	radiotherapy
	9	9	1	d	10	Y	2	gynecology
	10	10	10	e	1	X	2	gynecology
	11	11	22	g	9	Y	2	radiotherapy
	12	12	26	b	2	Y	4	radiotherapy
	13	13	16	c	3	Z	2	radiotherapy
	14	14	9	d	5	Z	3	radiotherapy
	15	15	6	a	6	X	4	gynecology
	16	16	6	a	6	X	3	gynecology

USN 12:Python pandas with numpy.

```
import pandas as pd
```

```
import numpy as np
```

```
import matplotlib.pyplot as plt
```

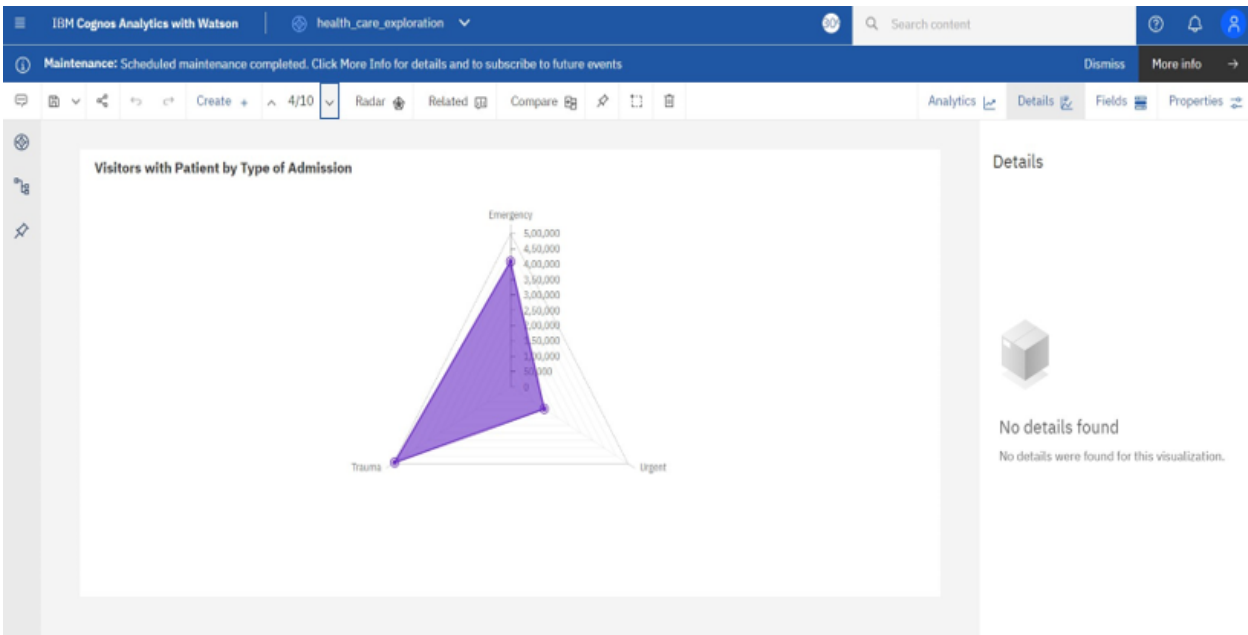
```
import seaborn as sns
```

```
%matplotlib inline
```

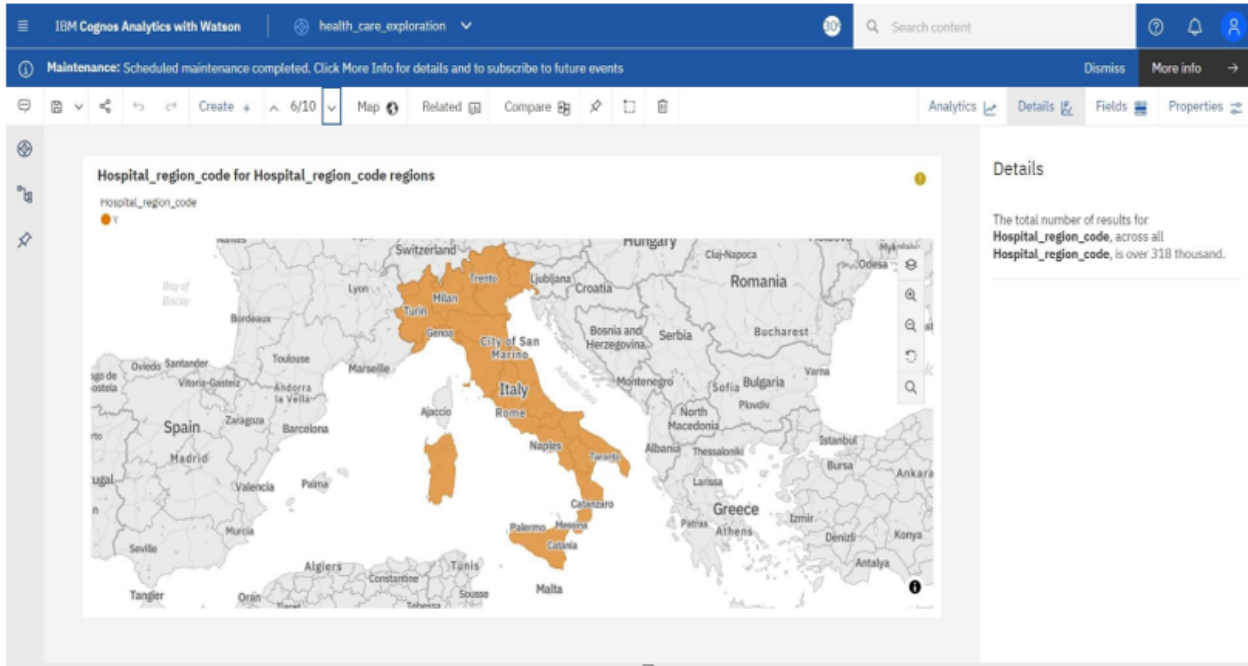
```
df= pd.read_csv("C:/Users/nprav/OneDrive/Desktop/Healthcare_Data/train_data.csv")
```

```
df
```

USN 13: Visitors with patient by type of admission.

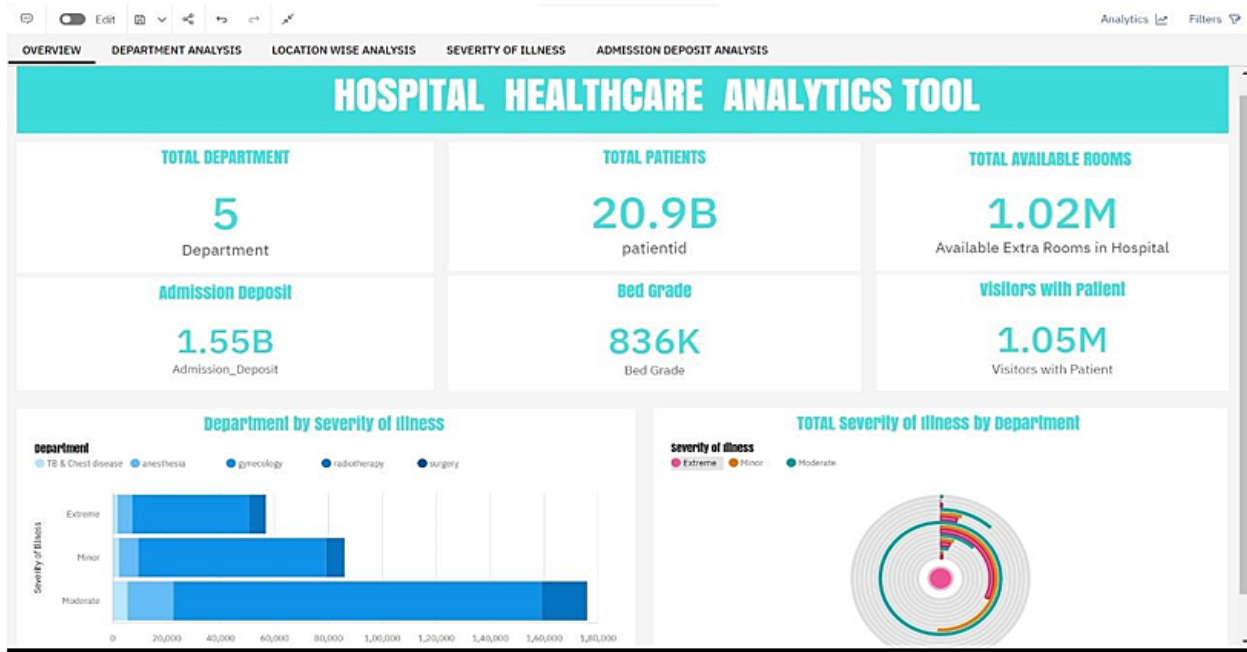


USN 14: Hospital region code for hospital region code regions.

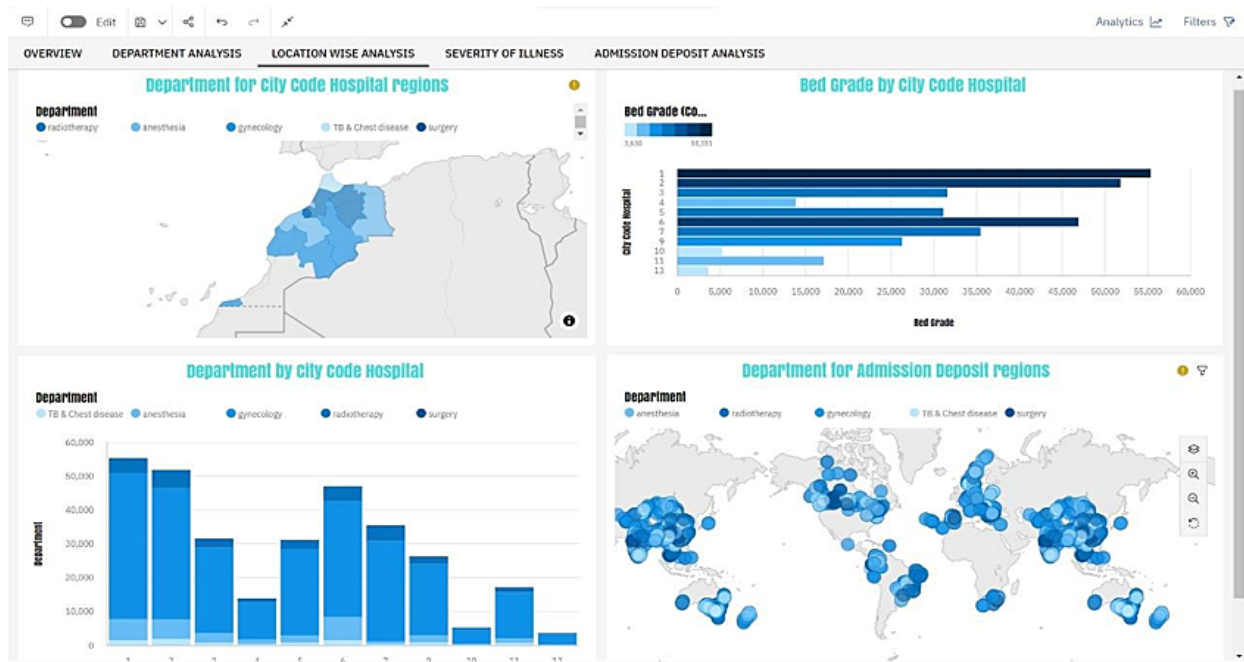


c. DASHBOARD CREATION WITH DATASETS.

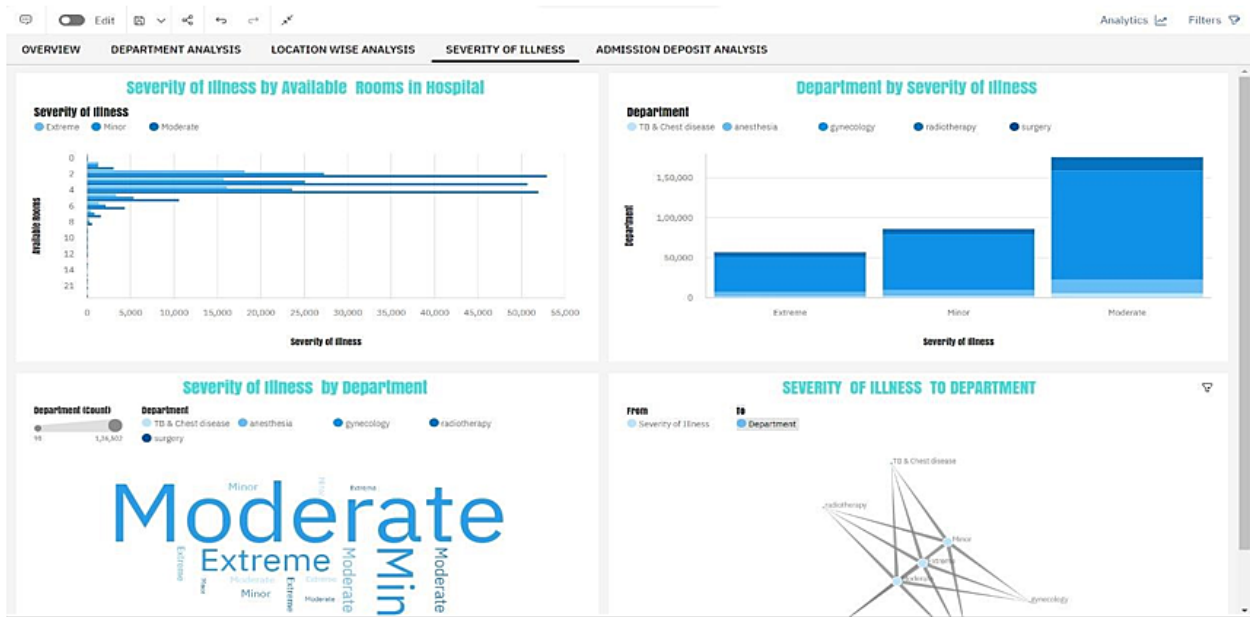
OVERVIEW



LOCATION WISE ANALYSIS



SEVERITY OF ILLNESS



ADMISSION DEPOSIT ANALYSIS

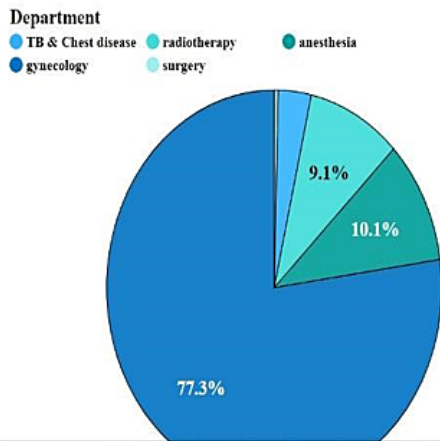


CHAPTER 8

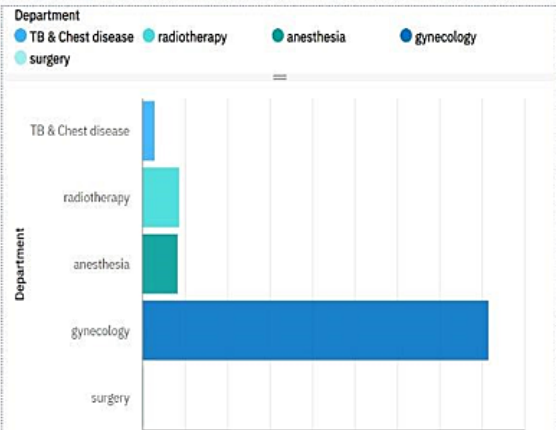
RESULTS

HOSPITAL HEALTH CARE DATA ANALYTICS REPORT

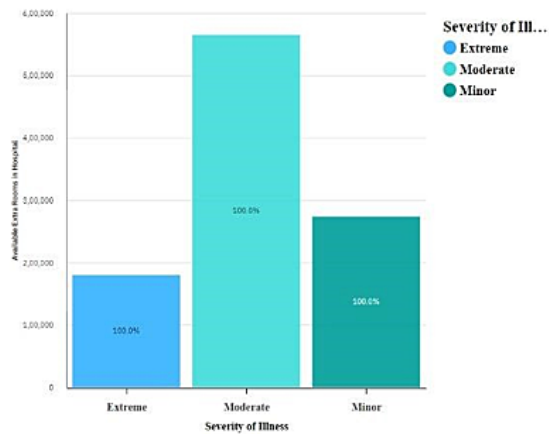
TOTAL ADMISSION DEPOSIT BY DEPARTMENT



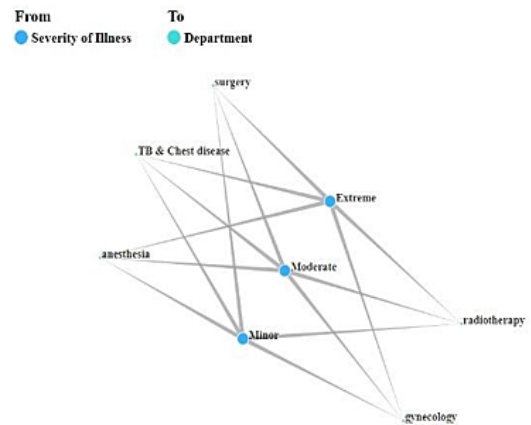
TOTAL AVAILABLE ROOMS BY DEPARTMENT



AVAILABLE EXTRA ROOMS FOR ILLNESS



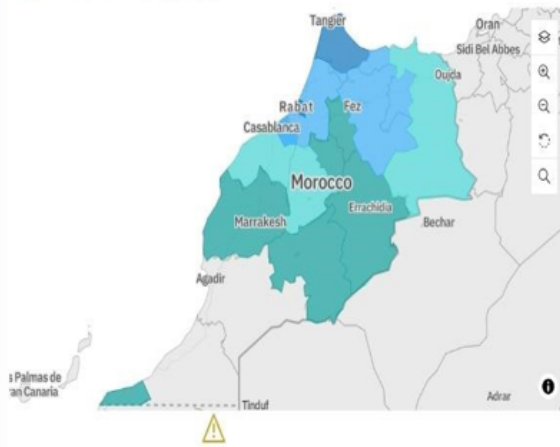
SEVERITY OF ILLNESS TO DEPARTMENT



CITY CODE HOSPITAL BY DEPARTMENT

Department

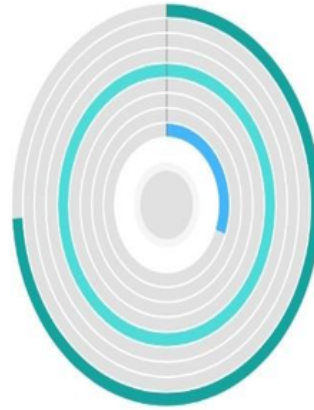
- radiotherapy
- anesthesia
- gynecology
- TB & Chest disease
- surgery



TYPE OF ADMISSION BY ADMISSION DEPOSIT

Type of Admission

- Urgent
- Trauma
- Emergency



CHAPTER 9

ADVANTAGES AND DISADVANTAGES

a. ADVANTAGES

- i. As the internet reaches the far ends of our world, so does digital health. With a simple internet connection, anyone can access **patient health records** online without visiting the medical center.
- ii. Gone are those days of securely storing all the handwritten prescriptions and test reports. With **electronic health record** apps, you can store all the relevant health data in one place without worrying about losing one.
- iii. Personal digital health tools like fitness bands let you know your health-related data on a real-time basis.
- iv. Those technological marvels constantly track your vitals and auto-dial emergency numbers in case anything wrong happens to you.

b. DISADVANTAGES

- i. Adapting to new technologies has always been a challenge for senior citizens.
- ii. Adapting to new technologies has always been a challenge for senior citizens. Some of them prefer the old-school treatment methods instead of getting used

to digital health facilitators.

- iii. If not done properly, these apps can often crash, resulting in an inconvenience.

CHAPTER 10

CONCLUSION

This research demonstrates Analytics for hospital and health care data with data visualization and analytics. This information is gathered from a series of health information systems (HIS) and other technological tools utilized by health care professionals, insurance companies and government organizations. Consider the impact this has had on the COVID-19 pandemic. The data being collected is analyzed in real time to understand the effects of the virus better and predict future trends so we may slow the spread and prevent future outbreaks. Health care data management has the potential to lead to better care if used properly.

Healthcare analytics can be understood as the gathering and analysis of healthcare sector data with the purpose of deriving insights and prompting decision-making. Ranging from main areas like medical expenses, clinical data, patient behavior, or pharmaceuticals, healthcare data analytics can be employed at both the macro and micro level to sufficiently boost operations, enhance patient care, and curtail overall expenses.

Nevertheless this data, while being highly advantageous is also pretty complicated. Be it the data from electronic health records (EHR) or the data

gained by assessing real-time vital signs, the data is not only derived from a number of varying sources, but it is also required to follow government regulations, making it a complex and precarious process.

CHAPTER 11

FUTURE SCOPE

The data analytics market in the healthcare space has only increased over the last few years. Considering the rising costs of medical treatments globally, a proper body of knowledge was needed to reduce the costs at the business-level as well as the professional-level. McKinsey, in one of its reports, states that healthcare expenses constitute 17.6 percent of the GDP in the USA, which is approximately US\$600 billion, more than what is the set benchmark for the ideal size of population in the country. This is a serious indicator of bigger trouble. Hence, the usage of healthcare data analytics is being promoted these days.

To some, the domain of healthcare data analytics may look new, but it has a lot of potential, especially if you wish to engage in challenging job roles and build a strong data analytics profile in the upcoming years. In this blog, we have covered some of the major topics such as what is healthcare data analytics, its applications, scope, and benefits, etc. We hope it helps you in your decision-making as a healthcare data analytics professional.