# **ANALYTICS FOR HOSPITALS HEALTH -CARE DATA**

# NALAIYATHIRAN PROJECT REPORT

# TEAMID-PNT2022TMID30370

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# In partial fulfillment of the award of the degree of

**BACHELOR OF ENGINEERING** 

**COMPUTER SCIENCE AND ENGINEERING** 

MAHENDRA ENGINEERING FOR WOMEN

ANNA UNIVERSITY - CHENNAI 600 025

# INTRODUCTION

# 1.1 Projectoverview

Recent Covid-19 Pandemic has raised alarms over one of the mostoverlooked areas to focus: Healthcare Management. While healthcaremanagement has various use cases for using data science, patient length ofstayisonecriticalparametertoobserveandpredictifonewantstoi mprovethe efficiency of the healthcare management in a hospital. This parameterhelps hospitals to identify patients of high LOS-risk (patients who will staylonger) at the time of admission. Once identified, patients with high LOSriskcanhavetheirtreatmentplanoptimizedtominimizeLOSan dlowerthe chance of staff/visitor infection. Also, prior knowledge of LOS can aidin logistics such as room and bed allocation planning. Suppose you havebeen hired as Data Scientist of Health Man – a not for profit organization dedicated to manage the functioning of Hospitals in a professional andoptimal manner. While healthcare management has various use cases

forusingdatascience,patientlengthofstayisonecriticalparameterto observe and predict if one wants to improve the efficiency of the healthcaremanagement in a hospital. This parameter helps hospitals to identifypatients of high LOS-risk (patients who will stay longer) at the time ofadmission. Once identified, patients with high LOS risk can have theirtreatment plan optimized to

minimize LOS and lower the chance ofstaff/visitor infection. Also, prior knowledge of LOS can aid in logistics such as room and bed allocation planning. Suppose you have been hired asData Scientist of Health Man – a not for profit organization dedicated

tomanagethefunctioningofHospitalsinaprofessionalandoptimal manner.

# 1.2 Purpose

Data analytics in health care is vital. It helps health care organizations evaluate and develop practitioners, detect anomalies in scans and predictoutbreaks in illness, per the Harvard Business School. Data analytics canalso lower costs for health care organizations and boost business intelligence. Hospitaldataanalyticscanlookoverpatientdataandanyprescribed medication to alert doctors and patients of incorrect dosages orwrong prescriptions, which lessens human error and the cost to yourhospital.

# 2. LITERATURESURVEY

# 2.1 Existing Problem

- Thealreadyexistingmodelistrainedwithmini malparametersbyleavingthenecessary parameter
- ii. Lowaccuracyinprediction
- iii. Nofeatureextractiondone
- iv. Highcomplexity.

# 2.2 References

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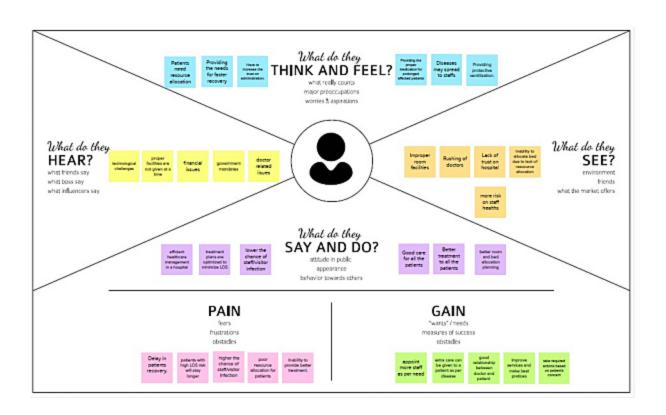
# 2.3 ProblemStatementDefinition

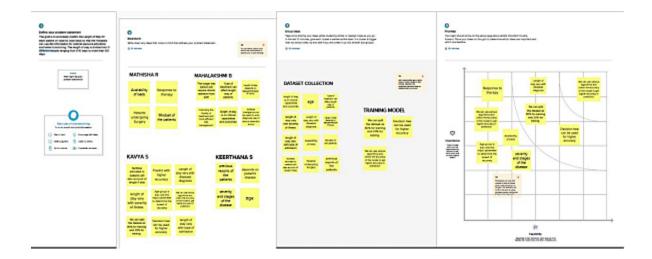
v. ThegoalistoaccuratelypredicttheLengthofStayfor

eachpatientoncaseby casebasissothattheHospitalscanusethisinformatio nforoptimalresourceallocationandbetterfunctioning.

vi. The length of stay is divided into 11 different classes ranging from 0-10daysto morethan 100 days.

# 3. IDEATIONANDPROPOSEDSOLUTION





# 3.3ProposedSolution

# Predictthelengthofstayofpatients.

The length of the stay can be predicted using either Random forest orDecision Tree for more accuracy. Certain parameters like age, stage of the diseases, disease diagnosis, severity of illness, type of admission, facilities allocated, etc., are used for prediction. IBM Cognos will be used for data analytic s. The model will be trained using colab. It predicts the length

ofstay(LOS)ofthepatientswithmoreaccuracy. As a result proper resources and the rapy can be provided. Patients can get proper treatment and bettermedical care than before which helps them for their faster recovery. So the prediction minimizes the overflow of patients and helps in resourcemanagement and optimize their resource utilization. Hence this leads to faster recovery and lower the expenses for treatment. It improves the trustin hospital management. It avoids the major risk of spreading

infectionamong the hospital staff. This leads tosafety of hospital staff and patients. Resource consumption is optimized. This model can be used by all government hospitals, private hospitals, and even in The model is trained with the real world hospital survey for better predictions mall clinics. Length of the stay will be predicted with more accuracy. This model predicts the length of the stay for all kinds of patients and predicts with more accuracy.

# 3.4 Problem Solution fit

a.

#### 6. CUSTOMER CONSTRAINTS 1. CUSTOMER SEGMENT(S) 5. AVAILABLE SOLUTIONS Customers needs to predict Hospital Management the length of stay of patients There are few LOS prediction patient with more accuracy during model but with very limited the time of admission. parameters excluding some of the parameters which definitely Maintenance, budget, Human lead to extension of length of errors in prediction, Unable to stay of patients predict LOS of patients, No Cost, not sure how to predict. RC 2. JOBS-TO-BE-DONE / MANAGE / 9. PROBLEM ROOT 7. BEHAVIOUR PROBLEMS. CAUSE Build a model to predict with LOS of patient with higher accuracy. The Unable to predict the length of Job is to predict the length of hospital management should stay of patients with high stay of patients. Unable to maintain the proper ledger of accuracy. Insufficient medical predict the LOS of patients patients with all the informations equipments and bed. Improper leads to improper resource about their health, progression and maintenance of patients allocation and improper those data can be shared with data medical history and data treatment to the patients due to analyst to analyse the data overflow of patients

# 4. REQUIREMENT ANALYSIS

# **4.1** Functionalrequirement

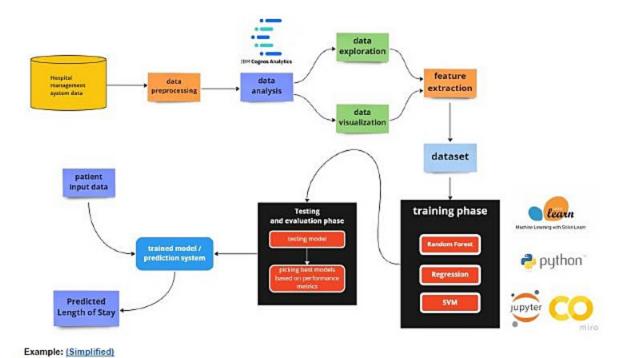
FunctionalRequirement(Epi	SubRequirement(Story/Sub-Task)
c)	
collectDataset	Datafromdifferentsourcesarecollectedinordertogetoptimized
	result
Datacleaning	When combining data from multiple sources
	thereareduplicateddata andhencewecleanthedata1st
Datamodelling	Identifytherelationshipbetweenvariousparameter
	S.
Predictionandanalysis	ThelengthofstayispredictedwiththeMachinelearningalgorithm

# 4.2 Non-Functional requirements

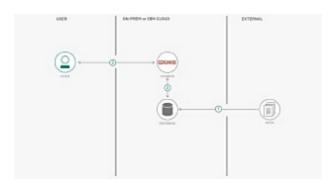
Non-	Description
FunctionalRequireme	
nt	
Usability	Usercanviewandvisualisethedatathroughthe
	interactive dashboard and predict the length
	ofstayofpatientswithmachinelearningalgorithm
Security	IBM Cognos provides better security. Thedataset uploaded to the
	dashboard cannot bedownloadedoraccessedbyexternalsources
Reliability	Thedashboardandthepredictionisveryreliableandprovide predictionwith
	moreaccuracy
Performance	Thelengthofstayofpatientsispredictedwithmoreaccuracy
Availability	The
	predictedlengthofstayandthevisualizationwillbeavailableincognosanalys
	is
Scalability	The software is scalable and
	extendable.Becauseitallowmultipleusertohandlethedataatthesame time

# 5. PROJECTDESIGN

# **5.1** DataFl



# 5.2 Solution&TechnicalArchitecture



# 5.3 UserStories

UserType	FunctionalRequireme	UserSto	UserStory/Task	Acceptancecriteria
	nt	ry		
	(Epic)	Number		
Customer	Dashboard	USN-1	As a user, I can uploadthedataset to	Icanaccessdashboa
			the	rd
			dashboard	
	View	USN-2	Asauser, I canview the patient details	I can visualizethedata
Admin	Analyse	USN-3	As a user, I will analysethegiven dataset	l can
				analysethedataset

	Predict	USN-4	Asauser, I will predict the length of stay	I can predictthelengthof stay
	Collectdata	USN-5	AsaanalystIneedtocollectthedataset	
	Preparedata	USN-6	AsananalystIneedtodofeatureextracti on	Icanextractthe parametersthat haveimpactthe lengthofstay
Visualizati on	Dashboard	USN-7	As a user I can preparedata by usingvisualizationtechnique	I can preparethe data withvisualization technique

# 6. PROJECTPLANNING

# 6.1 SprintPlanning & Estimation

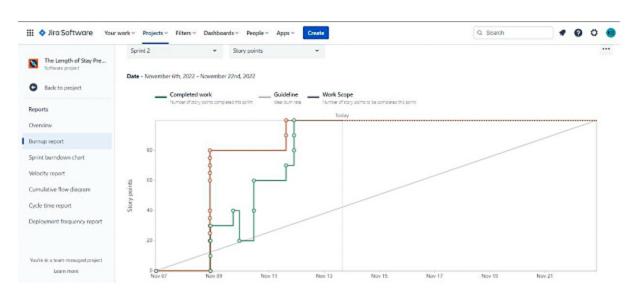
Sprint	FunctionalRequirement(Epi	User	UserStory/Task	StoryPoin	Prio
	c)	StoryNumb er		ts	ty
Sprint-1	Registration	USN-1	AsahealthcareproviderI	1	High
			cancreateanaccountin IBMcloudandthedata arecollected	0	
Sprint-1	Analyze	USN-2	As a health care provider	1	Medi
			allthedatathatarecollected	0	um
			is		
			learnedanduploadedinthe		
			databaseorIBMcloud.		
Sprint-1	Feature	USN-3	AsahealthcareproviderI can	1	Medi
1					um
	Extraction		visualizehowvariousparameters	0	
			affectthelengthofstayofpatients anddofeatureextractionforbetter prediction		

6.2 SprintDelivery Schedule

FunctionalRequirement(Epi	User	UserStory/Task	StoryPoin	Priori	TeamMembers
c)	StoryNumb		ts	ty	
	er				
Visualization	USN-4	Asahealthprovider Ican	2	Medi	Maha
				um	
		preparedataformy	0		LakshmiB,
		visualization.			Keerthana
					S,KavyaS,
					MathishaR
Dashboard	USN-5	AsahealthcareproviderIcanuse	2	High	MahaLakshmiB,
		my accountinmy	0		
		dashboardforuploading			Keerthana
		dataset.			S,KavyaS,Mathish
					aR
Prediction	USN-6	As a health care provider	2	Hlgh	MahaLakshmiB,
		Icanpredictthelengthof	0		
		stay			Keerthana
					S,KavyaS,
					MathishaR

# 6.3 ReportsfromJIRA

# **Burnt UpChart**

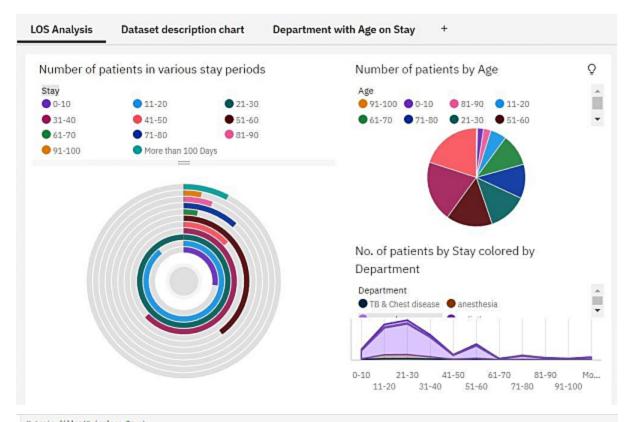


# BurntDownChart



# 7. CODING & SOLUTIONING (Explain the features added in the projectalong with code)

# 7.1 Feature1



X\_train.fillna(θ,inplace=True) Y\_train.fillna(θ,inplace=True) X\_test.fillna(θ,inplace=True)

#### K-Nearest Neighbor Algorithm

```
knn = KNeighborsClassifier(n_neighbors = 3)
knn.fir(X_train, Y_train)
Y_pred = knn.predict(X_test)
acc_knn = round(knn.score(X_train, Y_train) * 188, 2)
acc_knn
```

#### Descision Tree Algorithm

```
decision_tree = DecisionTreeClassifier()
decision_tree.fit(X_train, Y_train)
Y_pred = decision_tree.predict(X_test)
acc_decision_tree = round(decision_tree.score(X_train, Y_train) * 180, 2)
acc_decision_tree
```

99.76

53.99

#### Random Forest Algorithm

```
random_forest = RandomForestClassifier(n_estimators=100)
random_forest.fit(X_train, Y_train)
Y_pred = random_forest.predict(X_test)
random_forest.score(X_train, Y_train)
acc_random_forest = round(random_forest.score(X_train, Y_train) * 100, 2)
acc_random_forest
```

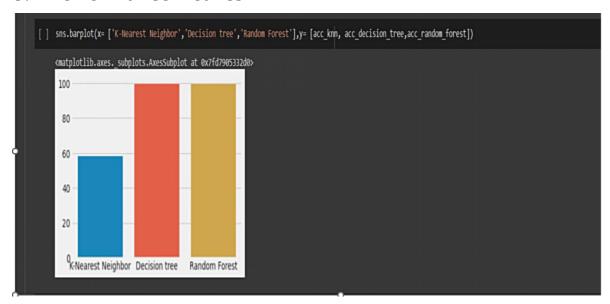
99.76

#### Prediction accuracy comparison

# 7.2 Feature2

### 8. RESULTS

# 8.1 PerformanceMetrics



# **9.ADVANTAGES**

- ${\tt 1.}\ Analysing clinical data to improve medical research$
- 2. Usingpatientdatatoimprove health outcomes
- 3. Gainingoperationalinsightsfromhealthcareproviderdata
- ${\bf 4.} \ \ Improved staffing through health business management analytics$
- 5. Researchandpredictionofdisease.
- 6. Automationofhospitaladministrative processes.
- 7. Earlydetectionofdisease.
- 8. Preventionofunnecessarydoctor's visits.
- 9. Discoveryofnew drugs.

10. Moreaccurate calculation of health insurance rates.

Disadvantages

# **Replacing Medical Personnel**

Application of technology in every sphere of human life is improving the way things are done. These technologies are are also posing some threattoworld ofworks. Robotics are replacing human labour.

# **DataSafety**

Data security is another challenge in applying big data in healthcare.Big data storage is usually targets of hackers. This endangers the safety

ofmedicaldata.Healthcareorganisationsareverymuchconcerneda boutthesafety of patients' sensitive personal data. For this, all healthcareapplications must meet the requirement for data security and be

HIPAA compliant before they can be deployed for health careservice

# **Privacy**

One of the major drawbacks in the application of big data inhealthcare industry is the issue of lack of privacy. Application of big datatechnologies involves monitoring of patient's data, tracking of

medicalinventoryandassets,organizingcollecteddata,andvisualiz ationofdataonthe dashboard and the reports. So visualization of sensitive medical dataespecially that of the patients creates negative impression of big data as itvioletsprivacy

### ManPower

`Applyingbigdatasolutionsinhealthcarerequiresspecialskill s,andsuch kills are scarce. Handling of big data requires the combination ofmedical, technological and statistical knowledge.

# 10. CONCLUSION

Data analytics is the science of analysing raw datasets in order toderive a conclusion regarding the information they hold. It enables us todiscover patterns in the raw data and draw valuable information from them. To some, the domain of health care data analytics may look new, but it has alot of potential, especially if you wish to engage inchallenging 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 health care data analytics, its applications, scope, and benefits, etc. We hope it helps you inyour decision-making as a health care data analytics professional

# 11. FUTURESCOPE

The Future of Healthcare, Intel provides a foundation for big dataplatforms and AI to advance health analytics. Predictive data analytics ishelping health organizations enhance patient care, improve outcomes, andreducecostsbyanticipatingwhen,where,andhowcareshouldbe provided. The future of bigdata inhealth care will be determined by te chnological breakthroughs from 2022 to 2030. Complete patient care and cost-effective prescription procedures are required for population healthmanagement. To assess clinical and claims data, they must be combined on the same platform.

Countries around the world have started to invest more capital inmedical infrastructure, pharmaceuticals, and healthcare smart analytics solutions. The market is growing and will continue to expand, given

thebenefitsofhealthcaredataanalytics.Ithasalsorisenasagoo dcareeroption for fresh data science and data analytics graduates or

 $profession also who wish to build their career in the health care sector. D\\ue to the sensitivity of the profession,$ 

thesalaryoffersforhealthcaredataanalystsare lucrative around the world. Apart from the remuneration, theopportunities to work with some of the biggest names in the healthcaresector is also worth mentioning. Hence, healthcare data analytics is growingto be one of the most rewarding branches of data analytics in the comingfuture.

# 12. APPENDIX

# **Source Code**

# Importing required Packages

In [72]: import numpy as np
 import pandas as pd
 import matplotlib.pyplot as plt
 import seaborn as ns
 Mmatplotlib infilms
 xxx.set\_xtyle("darkgrid")
 plt.style.use("dark\_background")

# Importing the dataset

In [73]: train = pd.read\_csv('/content/input/training\_data.csv')
test = pd.read\_csv('/content/input/testing\_data.csv')
Paramters\_bescription = pd.read\_csv('/content/input/parameter\_description.csv')
sample = pd.read\_csv('/content/input/testing\_target.csv')

### Viewing dataset

In [74]:	train.head(5)									
Out[74]:	case	d Hospital_co	de Hospital_type_co	de City_Code_Hospita	Hospital_region_code	Available_Extra_Rooms_in_Hospital	Department	Ward_Type	Ward_Facility_Code	Bed_Grade
	0	1	8	c I	Z	3	radiotherapy	R	,	2.0
	1	2	2	c :	ž	2	radiotherapy	5		2.0
	2	3	10		х	2	anesthesia	5	E	2.0
	3	4	26	b :	Y	2	radiotherapy	R	D	2.0
	4	5	26	ь :	Y	2	radiotherapy	2	D	2.0

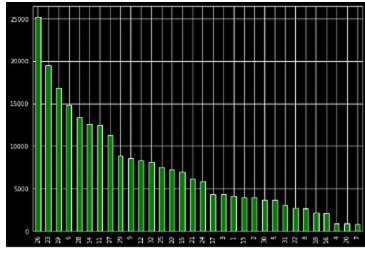
# **Dataset Column Description**

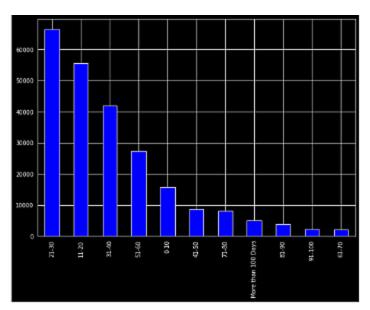
Paramters\_Description

	Column	Description
0	case_id	It is identity number given by hospital admini
1	Hospital_code	It is the code (identity number) given to the $\boldsymbol{\bot}$
2	Hospital_type_code	It is the unique code given to the type of hos
3	City_Code_Hospital	It is the code given to the city where the hos
4	Hospital_region_code	It is the code given to the region where the $h_{\ast \ast}$
5	Available_Extra_Rooms_in_Hospital	It will display the number of rooms that are s
6	Department	The department that is overlooking the patient
7	Ward_Type	The unique code given to the type of ward to $w_{\ast\ast}$
8	Ward_Facility_Code	The unique code given to the facility in the w
9	Bed_Grade	It is the quality or condition of the bed in t
10	patientid	It is the unique identity value given to the p
11	City_Code_Patient	It is the unique identity code given to the ci
12	Type_of_Admission	It is the admission type registered in the hos
13	Severity_of_Illness	It is the severity level of the patients' illn
14	Visitors_with_Patient	Number of the visitors with the patients to ta
15	Age	It is the age of patients. It is given in perl
16	Admission_Deposit	It is the deposit amount that the patient paid
17	Stay	It is the Length Of Stay (LOS) of patients. I

# Analysisofdataset

#### Hospitalcode



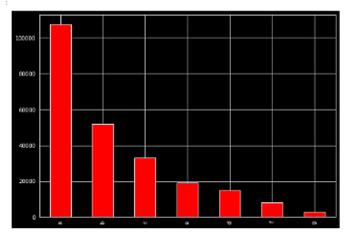


#### Age

train.A	ge.value_counts()		
41-50	48272		
31-48	48105		
51-68	36969		
21-38	28555		
71-88	28552		
61-78	26139		
11-28	18141		

```
c 32995
e 19185
d 14833
f 8166
g 2748
Name: Hospital_type_code, dtype: int64

#Hospital_type_code distribution
plt.figure(figsize=(10,7))
train.Hospital_type_code.value_counts().plot(kind="bar", color = ['Red'])
```



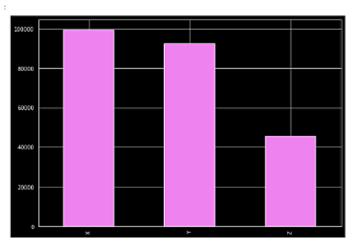
#### Hospital\_region\_code

```
: train.Hospital_region_code.value_counts()
```

X 99568 Y 92214 Z 45527

Name: Hospital\_region\_code, dtype: int64

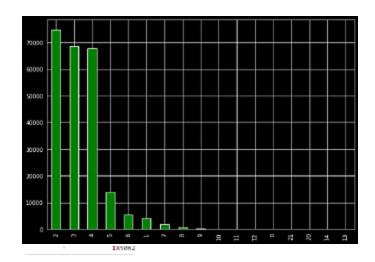
```
#Mospital_region_code distribution
plt.figure(figsize=(10,7))
train.Hospital_region_code.value_counts().plot(kind="bar", color = ['Violet'])
```



#### Available\_Extra\_Rooms\_in\_Hospital

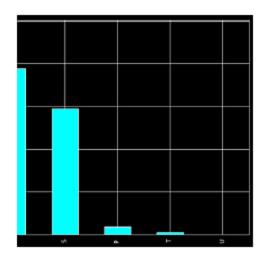
```
train.Available_Extra_Rooms_in_Hospital.walue_counts()
```

```
2 74877
3 68517
4 67756
5 13879
6 5344
1 4208
7 1376
8 622
9 144
10 46
```



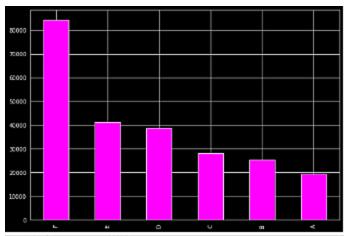
9.----77i\_7 3

#Ward\_Type distribution plt.figure(figsize=(10,7)) train.Ward\_Type.value\_count



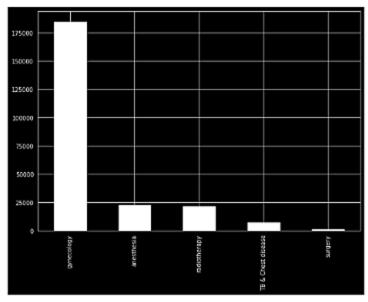
Ward\_Facility\_Code 19411 ame: Ward\_Facility\_Code, dtype: int64

#Ward\_Facility\_Code distribution
plt.figure(figsize=(10,7))
train.Ward\_Facility\_Code.value\_counts().plot(kind="bar", color = ['magenta'])



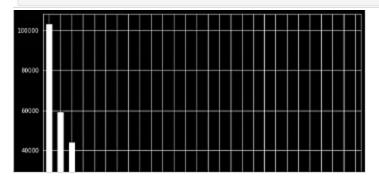
anesthesia 22557
radiotherapy 21725
TB & Chest disease 7017
surgery 948
Name: Department, dtype: int64

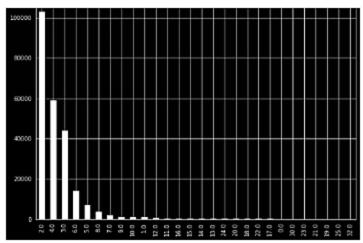
```
#Department distribution
plt.figure(figsize=(10,7))
train.Department.value_counts().plot(kind="bar", color = ['white'])
```



### Ward\_Type

train.Ward\_Type.value\_counts()



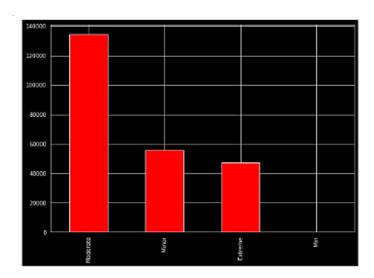


train.Severity\_of\_Illness.value\_counts()

oderate inor xtreme 55665 47319

: Severity\_of\_Illness, dtype: int64

#Severity\_of\_Illness distribution
plt.figure(figsize=(10,7))
train.Severity\_of\_Illness.value\_counts().plot(kind="bar", color = ['red

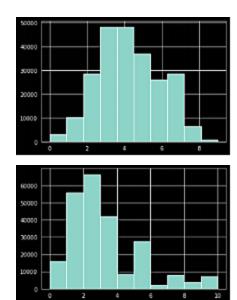


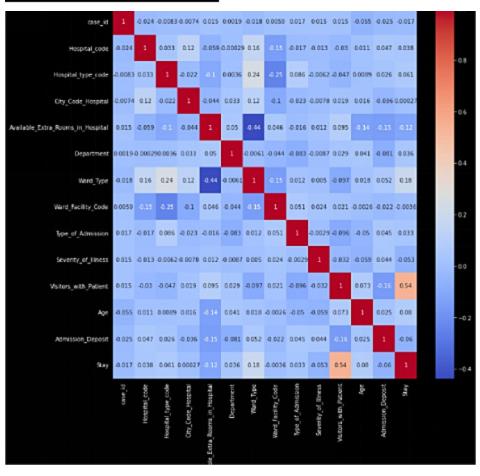
# Unique values of columns

```
print('*----
     print()
  *------
  Unique Values for case_id
[ 1 2 3 ... 237307 237308 237309]
 25 15 11 30 18 4 7 20]
 Unique Values for Hospital_type_code
['c' 'e' 'b' 'a' 'f' 'd' 'g']
 Unique Values for City_Code_Hospital
 [35126910411713]
 Unique Values for Hospital_region_code
['Z' 'X' 'Y']
 Unique Values for Available_Extra_Rooms_in_Hospital
[ 3 2 1 4 6 5 7 8 9 10 12 0 11 20 14 21 13]
 Unique Values for Ward_Type
['R' 'S' 'Q' 'P' 'T' "U']
 Unique Values for Ward_Facility_Code
['F' 'E' 'D' 'B' 'A' 'C']
 Unique Values for Bed_Grade
[ 2. 3. 4. 1. nam]
 Unique Values for patientid
[31397 63418 8888 ... 37582 73756 21763]
```

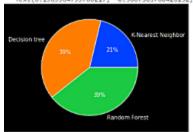
```
Unique Values for City_Code_Patient
[ 7. 8. 2. 5. 6. 3. 4. 1. 9. 14. nan 25. 15. 12. 19. 28. 24. 23. 20. 11. 13. 21. 18. 16. 26. 27. 22. 19. 31. 34. 32. 39. 29. 37. 33. 35.
36.]
         Unique Values for Admission_Deposit
[4911. 5954, 4745, ... 2710. 2236, nan]
Unique Values for Stay
["0-10" '41-50" '31-40" '11-20" '51-60" '21-30" '71-80"
"More than 100 Days" '81-90" '61-70" '91-100" nan]
DataPreprocessing&FeatureEngineering
"The following features may have relevance with the Length of Stay of a patient"
Department:ItRelatestothetypeofd-sease.Hence"t\\fillhavefrrpaclartheengthofstayofthepatients
Type of Admission: It Re ates to patients'reBsorofadm-ssionto the Wasp-talard definitely ft 'wi I
have impact ouength of stay opftbe patientsSmm1tyoflllr«zss:ltRelatetothecurab-l"tyofdisease
AgeRelatetothecurabfl"tyofdiseaseThefola'fiiingfeaturesmayPa\erelevance'with
theLengthofStayofapat"entDepartment:ItRelatestothetypeofd-
sease.Hence"t\\fillhavefrrpaclartheengthofstayofthepatients
Type of Admission: It Re ates to patients'reasorofadm"ssionto the bosp"talard definitelyft'xi I
haveimpact ouengthof stay opftbe patients Severity afhlrless: It Relate to the curab" I "tyofdisease
AgeRelatetothecurabfl-tyofdisease
U¥ârd_Type:Reatestothedurabilityofdisease
befollowing features doesn1 have relevancewfth It+e
Length Of 5tayQo5}of Patients'Hospitalreqirxieerie:It-
scadegiventothehaspitalreg-onvA-chis-
rreleventtotheLerpthofStay.
Bed Grade: Itisthegradegiventothequality of the ked ir\Yardftis also Irrelevant to the length of stay.
patierrbd:It -s the identity numberor code gi\xrfor the -dentification of the
patient\Yhich Is irrel evartto theeqgthof
stay.City_Ccde_Fatient:Itisthecitycodeand"rrelevanttothelenpthofstayofp
atierts.
 as'Hosp1taZ_re:lcn_czde','ded_firade','patientid','c:lty_czde_patient'ar'elnreJevanttctheheaLthor Ja'ngtho+stayo+patbentsso2etsdropthezepararetersi-rantrainingan3ta'stEngdatasetto:tmprovetheper+'smaca'o+mdeL(highaczurract')
```

```
tratn=tratn.drap, ['HospitaJ_ra\g1on_zade",'bed_urade",'patigntid,'
'E::tty_C:o3e_l'atbent",]
axes=2)
```





```
[Text(0.8628423642631272, 0.682277842548633, 'K-Nearest Neighbor'),
Text(-0.9277499083745313, 0.590999244932723, 'Decision tree'),
Text(0.36116021327837337, -1.0990203560781281, 'Random Forest')],
[Text(0.476641289598093, 0.3721515504816725, '23x'),
[ext(-0.5060454045679261, 0.322363224508758, '39%'),
Text(0.1969964799700217, -0.5667383760426152,
```



```
Text(0.5253239465867245, -1.5113023361136406, '39%')])
Decision tree
                                                   K-Nearest Neighb
 output = pd.DataFrame({
          "case_id": test["case_id"],
"Stay": Y_pred
 ))
 output['Stay'] = output['Stay'].replace(stay_labels.values(), stay_labels.keys())
 output.to_csv("LOS_Prediction.csv", index = False)
 output
        case_id Stay
     0 318439 0-10
      2 318441 21-30
3 318442 11-20
     4 318443 31-40
137052 455491 0-10
137053 455492 0-10
137054 455493 21-30
137055 455494 21-30
137056 455495 51-60
137057 rows × 2 columns
 data=np.array([[29,0,4,2,2,3,5,1,2,4,7,4018]])
 p=random_forest.predict(data)
/usr/local/lib/python3.7/dist-packages/sklearn/base.py:451: UserWarning: X does not have valid feature names, but RandomForestClassifier was fitted wi
th feature name:
"X does not have valid feature names, but"
annay([5.])
 def prediction(p):
  if(p[θ]==θ);
      print("The predicted LOS of patient is : 0-10")
    elif(p[θ]==1):
   elif(p[\theta]=1):

print("The predicted LOS of patient is : 11-20")

elif(p[\theta]=2):

print("The predicted LOS of patient is : 21-30")

elif(p[\theta]=3):

print("The predicted LOS of patient is : 31-40")

elif(p[\theta]=4):
    print("The predicted LOS of patient is : 41-50")
elif(p[0]==5):
    print("The predicted LOS of patient is : 51-60")
elif(p[0]==5):
   print("The predicted LOS of patient is : 61-70")
ellf(p[0]==7):
print("The predicted LOS of patient is : 71-80")
ellf(p[0]==8):
```

```
elif(p[0]==0):
    print("The predicted LOS of patient is : 81-90")
elif(p[0]==9):
    print("The predicted LOS of patient is : 91-100")
elif(p[0]==10):
    print("The predicted LOS of patient is : More than 100 Days")

data-np.array([[29,0,4,2,2,3,5,1,2,4,7,4018]])
p=random_forest.predict(data)
print(p)

prediction(p)

The predicted LOS of patient is : 51-60
```

# GitHub&Project DemoLinks

GitHub link: IBM-EPBL invited you to IBM-EPBL/IBM-Project-41108-1660639510

Projectdemolink:

<u>https://colab.research.google.com/drive/1DpGcjD6aJZENhHU-iDWnwIjFAbk0I3ux?usp=sharing</u>