

Team 9 Medical Clinic

Our medical database can be used to manage medical records, patient information, appointments, prescriptions, and diagnostic tests. It can also be used for administrative tasks such as managing employee information, office addresses, and login credentials.

Mini-world DB Operation:

Lisa is a new patient who lives in Texas and has never visited our medical clinic before. To schedule her first appointment, she creates an account online by entering her personal information, such as name, age, contact details, and health insurance which will be stored in the "Patient" entity in the database. She then schedules an appointment by approving from a list of time frames with a primary care doctor working at the clinic's office located in Houston. Returning users are allowed the additional option of updating medical information by using their login.

On the day of her appointment, Lisa arrives at the clinic and is greeted by the receptionist. The receptionist gives Lisa a medical history sheet to fill out. Once Lisa finishes filling out the medical sheet the receptionist enters it into the database by using her employee login for the portal.

Lisa is then assigned to a primary care doctor who works at the clinic's Houston office. The doctor is given the medical history sheet from the receptionist and then performs a General Check Up to determine the cause of her symptoms. The doctor writes down the results of the tests, determines a diagnosis, and writes a prescription for medications with instructions for Lisa.

The doctor refers Lisa to a specialist at another location. The doctor's referral is also written down and Lisa is told to make an appointment with the receptionist or online at her convenience.

After Lisa completes her consultation, she goes to the receptionist to make a payment for the services provided. The receptionist enters the details of the transaction into the web portal and provides Lisa with a receipt. The receptionist also receives the papers with Lisa's medical information from the doctor and enters the information into the database, which gets stored in their respective entities.

When Lisa arrives home, she logs in online to schedule her appointment with her specialist, which allows her to view available appointments and select a time that works for her. If Lisa tries to schedule an appointment with a specialist without approval from her primary physician, it will alert her to the requirement and direct her to contact her primary care doctor.

Entities

- Employees
- Patient
- Doctor
- Appointment
- Referrals
- Invoice
- General_CheckUp
- Blood_CBC_test
- Medical_History
- Prescription
- Diagnosis
- Office
- Login
- Availability

Relationship

- Many *Employees* work in an *Office* (**M:1**)
 - Many *Employees* work under a *Doctor* (**M:1**)
 - *Employees* can access *LOGIN* (**1:1**)
 - *Employees(admin)* can create many *Invoices* (**1:M**)
- *Doctors* approve *Appointments* (**1:M**)
 - Many *Doctors* work in an *Office* (**M:1**)
 - *Doctors* can access *LOGIN* (**1:1**)
- *Patients* access *LOGIN* (**1:1**)
 - *Patients* can be referred many *Referrals* (**1:M**)
 - *Patients* can have many *Checkups* (**1:M**)
 - *Patients* can be assigned many *Invoices* (**1:M**)
 - Many *Patients* can have many *Doctors* (**M:M**)
- Many *Appointments* can belong to one *Patient* (**M:1**)
 - Many *Appointments* are handled by one *Doctor* (**M:1**)
 - Many *Appointments* belong to one *Office* (**M:1**)
 - One *Appointment* can have one *Referral* (**1:1**)
- Many *Referrals* refer to one *Office* (**M:1**),
 - Many *Referrals* refer to one *Doctor* (**M:1**)
 - Many *Prescriptions* will be written by a *Doctor* (**M:1**)
 - Many *Prescriptions* will be prescribed to one *Patient* (**M:1**)
- A *Diagnosis* refers to one *General Check Up* (**1:1**)
 - Multiple *Diagnoses* refer to one *Patient* (**M:1**)
 - Multiple *Diagnoses* refer to one *Doctor* (**M:1**)
- A *General Checkup* contains one *Medical History* (**1:1**)
 - *General Checkup* refers to at most one *Blood-CDC-Test* (**1:1**)
 - Multiple *General Checkups* are done by a *Doctor* (**M:1**)
- Multiple *Medical Histories* refer to one *Patient* (**M:1**)
- An *Office* has many *Available* options(**1:M**)

Constraints

Primary Keys

- Employees - Employee_ID
- Patient - Patient_ID
- Doctor - Doctor_ID
- General_CheckUp - Checkup_ID
- Availability - Availiabitliy_ID
- Appointment - app_ID
- Prescription - Prescription_ID
- Diagnosis - Diag_ID
- Office - Office_ID
- Blood_CBC_test - Blood_ID
- Login - Log_username
- Referrals - Ref_ID
- Medical History - Med_h_ID
- Invoice - Invoice_ID

Foreign Keys

- Employees.office_ID = Office.office_id
- Employees.Doctor_ID = Doctor.doctor_id
- Employees.log_username = Login.log_username
- General_Checkup.gc_medical_history = med_h_ID
- General_Checkup.gc_blood_test_ID = blood_ID
- General_Checkup.doctor_ID = Doctor.doctor_ID
- Patient.Checkup_ID = General_Checkup.checkup_id
- Patient.log_username = Login.log_username
- Patient.Patient_ref_ID = Referrals.ref_ID
- Patient.patient_doctor = Doctor.doctor_id
- Doctor.log_username = Login.log_username
- Medical_History.patient_ID = Patient.patient_ID
- Diagnosis.diag_checkup_ID = General_Checkup.checkup_ID
- Diagnosis. doctor_ID = Doctor.doctor_ID
- Diagnosis.patient_ID = Patient.patient_ID
- Prescription.doctor_id = Doctor.doctor_ID
- Prescription.patient_id = Patient.patient_id
- Appointment.appt_doctor_id = Doctor.doctor_id
- Appointment.appt_patient_id = Patient.patient_id
- Appointment.appt_office_id = Office.office_ID
- Appointment.ref_id = Referrals.ref_id
- Referrals.office_id = Office.office_id
- Referrals.doctor_specialization = Doctor.doctor_specialization
- Invoice.patient_ID = patient.patient_ID
- Availability.Office_ID = Doctor.Office_ID
- Office.Doctor_ID = Doctor.Doctor_ID

- All Primary Keys - NOT NULL, UNIQUE
- All attributes in the following except for primary keys and foreign keys = **NULL**:
 - **General_checkup, Medical_history, Blood_CBC_test, Diagnosis, Medication, Prescription**
- All attributes in **Patient** except for primary keys and foreign keys are **NOT NULL**
- All attributes in **Doctor** except for primary keys and foreign keys are **NOT NULL**
- All attributes in **Office** except for primary keys and foreign keys are **NULL**
- All attributes in **Employee** except for primary keys and foreign keys are **NOT NULL**
- All attributes in **Referrals** except for primary keys and foreign keys are **NULL**
- All attributes in **Appointment** except for primary keys and foreign keys are **NULL**
- **Log_pass** - check >=8 characters

Triggers

- Deny patient from requesting an appointment with a specialist type Doctor
- Deny doctors from updating or changing information of a patient that does not have themselves as the patient's primary doctor
- Deny Employees without Admin attribute status "TRUE" when updating, creating anything outside of personal information

Reports

- The administration can retrieve medical information about patients. Aggregate: Ratio of male to female patients, average age
- The administration can view complete invoice information. Aggregate: Amount owed and Amount paid for each clinic
- Patients can view their medical history: Aggregate: Total # of visits in the past 6 months and which doctor performance which diagnosis

Functional Dependencies

- **Employee_ID** -> Employee_title, Employee_name, Employee_email, Employee_DOB, Employee_phone, Employee_salary, log_username, employee_authorization, employee_address
- **Office_ID** -> office_address
- **Availability** -> day_of_week, start_time, end_time, is_available
- **Appointment_ID** -> appt_date, appt_time
- **Prescription_ID** -> pres_name, pres_refills, med_strength, med_units, med_NDC
- **Doctor_ID** -> doctor_first_name, doctor_last_name, doctor_email, doctor_phone_num, doctor_DOB, doctor_specialization, salary, doctor_address
- **Patient_ID** -> Patient_first_name, patient_last_name, patient_email, patient_phone_num, patient_gender, patient_DOB, insurance_provider, insurance_policy_number, patient_diagnosis, patient_address
- **Log_username** -> log_pass
- **Diag_ID** -> diag_description

- **Checkup_ID** -> gc_height, gc_weight
- **Blood_ID** -> blo_type, blo_RBC, blo_WBC, blo_hemoglobin, blood Hemtocrit_percent, blo_platelets
- **Med_h_ID** -> med_h_isAnswered, med_h_smoker, med_h_heart_disease, med_h_current_meds, med_h_cancer, med_h_pregnant, med_h_sexual_active
- **Invoice_ID** -> Cost, Date_created, isPaid, Payment_method, is_insured, insurance_discount

Semantic Constraints

- Only Patients with a Referral ID can create an appointment for a Doctor with a specialization
- Each Patient must have at least one Doctor before seeing the doctor
- Each Patient must have a unique patient ID
- Each Appointment must have a date & start time, and a Doctor ID associated with it
- Each Patient must have a medical history
- Blood results must be associated with a Patient
- Each invoice must have payment information associated with it, including amount charged and method of payment
- Each general checkup must be associated with a Patient and a Doctor
- Each referral must be associated with a patient and a referring Doctor, and must include information on the reason for referral and the Doctor being referred to
- Employee salary cannot be greater than the Doctor's salary that they are practicing under

