

OPD Token Allocation System – Backend Design Report

1. Introduction

The OPD Token Allocation System is a backend service designed to manage patient tokens in a hospital OPD based on time slots, doctor availability, and patient priority. The aim of this system is to simulate real-world OPD behavior such as limited slot capacity, emergency handling, cancellations, and no-shows while keeping the design simple and efficient.

This project focuses on backend logic and algorithmic correctness rather than UI or database complexity.

2. System Overview

The system consists of:

- Doctors with predefined time slots
- Each slot having a fixed maximum capacity
- Tokens generated for patients based on their source and priority
- Priority-based replacement if a slot is already full
- APIs for token creation, cancellation, emergency insertion, and slot status
- A simulation module to demonstrate a full OPD day

All data is stored in-memory for simplicity.

3. Token Priority Strategy

Each token is assigned a priority based on the patient source:

Source	Priority
Emergency	1 (Highest)
Paid	2
Follow-up	3
Online	4
Walk-in	5 (Lowest)

Lower number means higher priority.

This ensures that:

- Emergency patients are always treated first
- Paid and follow-up patients are given preference

- Walk-in patients are considered only if capacity is available
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4. Slot Allocation Logic

When a new token request comes:

1. The system checks if the doctor exists
2. It checks if the slot exists
3. It checks the slot capacity
4. If the slot has space:
 - o Token is directly added
5. If the slot is full:
 - o The system finds the lowest priority token in the slot
 - o If the new token has higher priority:
 - The lower priority token is removed
 - The new token is inserted
 - o Otherwise:
 - The request is rejected

This simulates real OPD behavior where critical patients replace less urgent ones.

5. Emergency Handling

Emergency tokens:

- Always use the highest priority (1)
- Can replace any existing token in a full slot
- Are inserted immediately into the system

This guarantees emergency patients are never blocked by normal bookings.

6. Cancellation and No-Show Handling

Two special cases are handled:

1. Cancellation

- o Token status is marked as CANCELLED
- o Token is removed from the slot

2. No-Show

- Token status is marked as NO_SHOW
- Token is removed from the slot

Both cases free up space in the slot for future patients.

7. Simulation

A simulation module was created to represent a full OPD day:

- Normal tokens are booked until slots are full
- Emergency token is added
- One token is cancelled
- One token is marked as no-show
- Final slot status is printed

The simulation is shown in the browser at: <http://localhost:3000/simulate>

The following is the screenshot as proof of execution :

```
===== OPD DAY SIMULATION =====
1. Booking normal tokens...
Doctor Dr. Sharma, Slot 09:00-10:00 filled.
Doctor Dr. Sharma, Slot 10:00-11:00 filled.
Doctor Dr. Mehta, Slot 09:00-10:00 filled.
Doctor Dr. Mehta, Slot 10:00-11:00 filled.
Doctor Dr. Khan, Slot 11:00-12:00 filled.

2. Adding Emergency Token...
Emergency Token Status: Inserted Successfully

3. Cancelling One Token...
Token Tr8xmjfdef cancelled.

4. Marking One No-Show...
Token Ti8simptzy marked as NO-SHOW.

5. Final Slot Status:

Doctor: Dr. Sharma
Slot 09:00-10:00 -> 4/5 patients
- Sneha (PAID)
- Neha (FOLLOWUP)
- Rahul (FOLLOWUP)
- Critical Patient (EMERGENCY)

Slot 10:00-11:00 -> 5/5 patients
- Riya (WALKIN)
- Rahul (WALKIN)
- Riya (FOLLOWUP)
- Sneha (WALKIN)

Doctor: Dr. Mehta
Slot 09:00-10:00 -> 4/4 patients
- Neha (FOLLOWUP)
- Vikas (PAID)
- Sneha (WALKIN)
- Pooja (FOLLOWUP)

Slot 10:00-11:00 -> 4/4 patients
- Pooja (WALKIN)
- Pooja (WALKIN)
- Kunal (FOLLOWUP)
- Rahul (WALKIN)

Doctor: Dr. Khan
Slot 11:00-12:00 -> 6/6 patients
- Kunal (WALKIN)
- Kunal (FOLLOWUP)
- Pooja (ONLINE)
- Vikas (PAID)
- Vikas (WALKIN)
- Rahul (FOLLOWUP)

===== SIMULATION COMPLETED =====
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8. Design Decisions

Decision	Reason
In-memory storage	Keeps system simple and focused on logic
No database	Assignment is logic-focused, not infrastructure-focused
Express.js	Lightweight and suitable for backend APIs
Priority replacement	Closest to real hospital OPD behavior
No authentication	Outside scope of the assignment

9. Limitations

- Data resets when the server restarts
- No persistent storage
- Not optimized for concurrent users
- No frontend interface

These limitations are acceptable since the goal is algorithm and backend logic demonstration.

10. Conclusion

This project successfully demonstrates:

- Slot capacity enforcement
- Priority-based allocation
- Emergency handling
- Token cancellation and no-show handling
- API design and modular backend architecture
- Realistic OPD workflow simulation

It reflects practical backend problem-solving and aligns well with real-world hospital OPD token systems.

Github link : <https://github.com/ShashankKan0jia/opd-token-engine-Medoc-Health>

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