Introduction to Database: Final Report Blood Bank Project

Course Number: CCCS215 (26303)

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In today's fast-paced medical landscape, the efficient management of blood resources stands as a critical pillar in ensuring timely and adequate healthcare services. Blood banks serve as life-saving repositories, and their operational effectiveness relies heavily on sophisticated database systems. This report delves into the design, implementation, and benefits of a state-of-the-art database program tailored specifically for blood banks. The intricate nature of blood management necessitates a robust, secure, and user-friendly database solution, which plays a pivotal role in streamlining processes, enhancing traceability, and ultimately saving lives. This report aims to explore the functionalities, advantages, and potential impact of this dedicated database program within the context of blood bank operations.

In this report, we'll show you our special database program made just for blood banks. First, we'll explain how everything fits together using diagrams called Entity-Relationship (E-R) diagrams. Then, we'll talk about the technical side using SQL (Structured Query Language), which helps us build the actual parts of the database. This detailed walkthrough will explain how our database is set up, specifically to suit the needs of managing a blood bank. We'll show you how our program goes from ideas to real-life use in the database, so you can understand how well it works and how it makes managing blood bank tasks easier and more efficient.

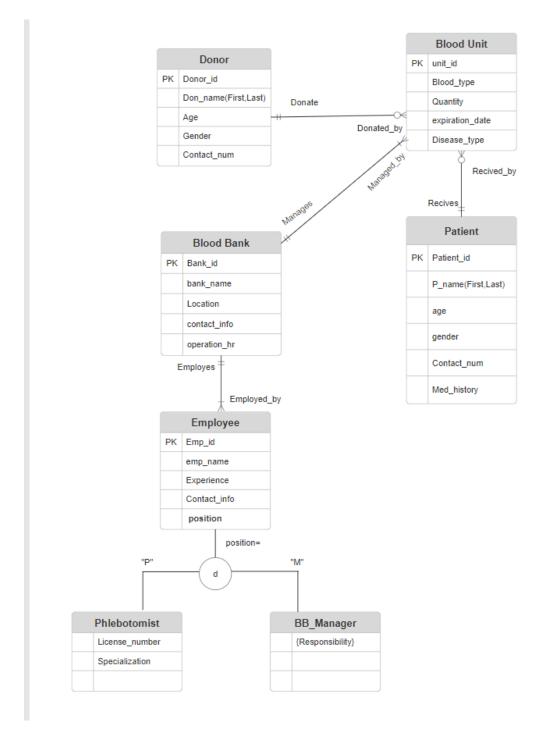


Figure 1: E-R Diagram demonstrating Blood Bank

1.1 Entities of E-R/EE-R

The diagram illustrates the interconnected entities crucial to the effective functioning of blood bank system:

- 1. **Donor:** This entity represents individuals who generously provide blood donations to the blood bank. Donors play a vital role in the process of maintaining a sufficient blood supply for patients in need.
- 2. **Blood Unit:** This entity refers to the individual units of blood collected from donors. Each blood unit undergoes testing and storage within the blood bank before being distributed for transfusions to patients.
- 3. **Patient:** Individuals in need of blood transfusions or related medical care, for whom suitable blood units are provided by the blood bank.
- 4. **Blood Bank:** The central entity governing the management, storage, and distribution of blood units to cater to patient needs.
- 5. **Employee:** A superclass entity encompassing the personnel engaged in various roles within the blood bank system.
 - 5.a. **Phlebotomist:** Specialized professionals trained to safely collect blood from donors. They ensure the hygienic extraction of blood units.
 - 5.b. **BB Manager** (Blood Bank Manager): A managerial role overseeing the blood bank's operations, responsible for resource management, regulatory compliance, and implementing effective strategies.

The diagram showcases the relationships between these entities, highlighting the flow and interaction within the blood bank system. The Employee entity serves as the superclass, encompassing broader roles within the blood bank structure, including both Phlebotomist and BB Manager. This hierarchical relationship signifies that both the Phlebotomist and BB Manager roles inherit attributes and responsibilities from the Employee superclass, demonstrating their specialized roles within the blood bank's workforce.

1.2 System Analysis:

One donor can donate multiple blood units, and each blood unit is donated by one donor. Each donor instance will be assigned a unique donor ID, donor name, age, gender, and contact number. And every blood unit has a unique ID, Blood type, Quantity, Expiration date, and Disease type.

A patient may receive multiple blood units if needed, and each blood unit is received by only one patient. Every patient instance must contain a unique patient ID, Name, Age, Gender, Contact information, and Medical history.

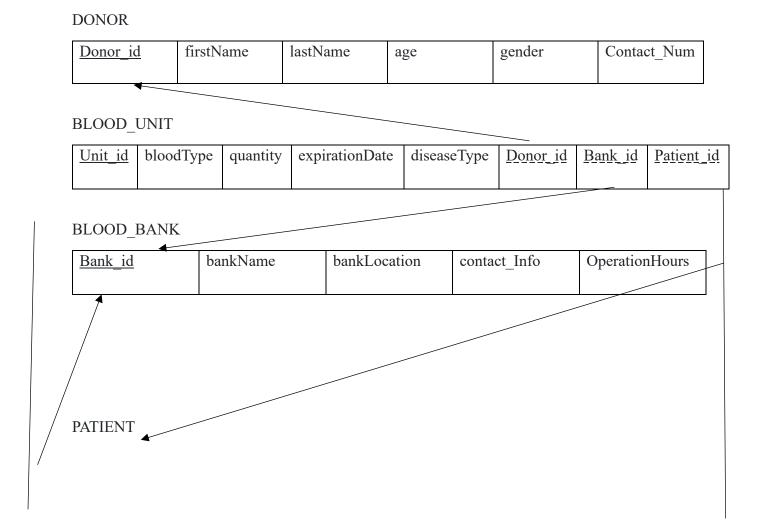
A blood bank can manage more than one blood unit, and every blood unit is managed by one bank. Each blood bank contains a unique bank ID, Name, Location, Contact information, and Operational hours.

A blood bank can employ many employees, yet each employee must be employed by only one blood bank. An Employee must have their own position, either BB Manager, a Phlebotomist, or Other. An employee must have their own unique ID number, Name, Experience, Contact information, and Position. Each employee must have their own position, and the positions can be a BB Manager or a Phlebotomist. a BB Manager instance must have all Employee attributes as well as responsibilities, and a Phlebotomist must also have all Employee attributes along with their License Number and Specialization.

2. Normalization

Normalizing the Entity-Relationship (ER) diagram stands as a fundamental step in refining the architecture of the blood bank's database system, poised to improve its overall functionality. At its core, the ER diagram serves as a visual map outlining the key entities—donors, blood units, patients, blood bank, and employee(including the phlebotomist and the BB manager)—interconnected through defined relationships. However, a robust database system demands more than just a graphical representation.

Normalization steps in as the intricate process of fine-tuning this representation to eliminate inefficiencies and enhance the database's performance. Within the blood bank context, where the management of diverse data—ranging from donor information to intricate inventory details—is paramount, normalization becomes imperative. Reducing redundancies, minimizing anomalies, and optimizing the arrangement of data not only heightens operational efficiency but also ensures accuracy and consistency in information retrieval and maintenance.



Patient_id	firstName	lastName	age	gender		Contact_Num	medhistory		
EMPLOYEE				'					
Emp_id	empName	experie	nce	contactInfo	p	osition	Bank_id		
PHLEBOTOMIST									
P Emp id licenseNu		seNumber	umber speci						
DD MANAG	ED								
 BB_MANAG M_Emp_id	EK								
M_RESPONSIBILITY M_Emp_id Responsibility									
			<i>-</i>/						

Here are all the logical schemas from our E-R/EE-R diagram before normalization, and here are all the steps we took to normalize it so it can be ready for usage in physical schema:

Normalization:

-1NF:

- There are no repeating groups
- A unique key has been identified for each relation
- All attributes are functionally dependent on all or part of the key

DONOR(Donor id, firstName, lastName, age, gender, contact Num)

BLOOD_UNIT(<u>Unit_id</u>, bloodType, quantity, expirationDate, diseaseType, Donor_id#, Bank_id#, Patient_id#)

BLOOD_BANK(Bank_id, bankName, bankLocation, contact_Info, operationHours)

PATIENT(<u>Patient id, firstName</u>, lastName, age, gender, contact_Num, medHistory)

EMPLOYEE(Emp id, empName, experience, contactInfo, position, Bank id#)

PHLEBOTOMIST (P Emp id, licenseNumber, specialization)

BB MANAGER(M Emp id)

M RESPONSIBILITY(M Emp id, Responsibility)

-2NF:

• Already in 2NF, as there's no partial dependencies.

-3NF:

• There's transitive dependencies in BLOOD UNIT as diseaseType depends on bloodType

DONOR(Donor id, firstName, lastName, age, gender, contact Num)

BLOOD_UNIT(<u>Unit_id</u>, bloodType, quantity, expirationDate, Donor_id#, Bank_id#, Patient_id#)

BLOOD DISEASE(bloodType, diseaseType)

BLOOD_BANK(Bank id, bankName, bankLocation, contact_tInfo, operation_hr)

PATIENT(Patient_id, firstName, lastName, age, gender, contact_Num, medHistory)

EMPLOYEE(Emp id, empName, experience, contact tInfo, position,Bank id#)

PHLEBOTOMIST (P Emp id, licenseNumber, specialization)

BB_MANAGER(M_Emp_id)

M_RESPONSIBILITY(M_Emp_id, Responsibility).

After normalizing our schemas, here are the Functional Dependencies:

Donor_id First Name,last Name ,Age,Gender, contact_num

Unit id Blood type, Quantity, expiration date

BloodType ____ diseaseType

Patient id First Name, Last Name, age, gender, contact num, Med history

Bank id bank name, Location, contact info, operation hr

Emp id emp name, Experience, contact info, position

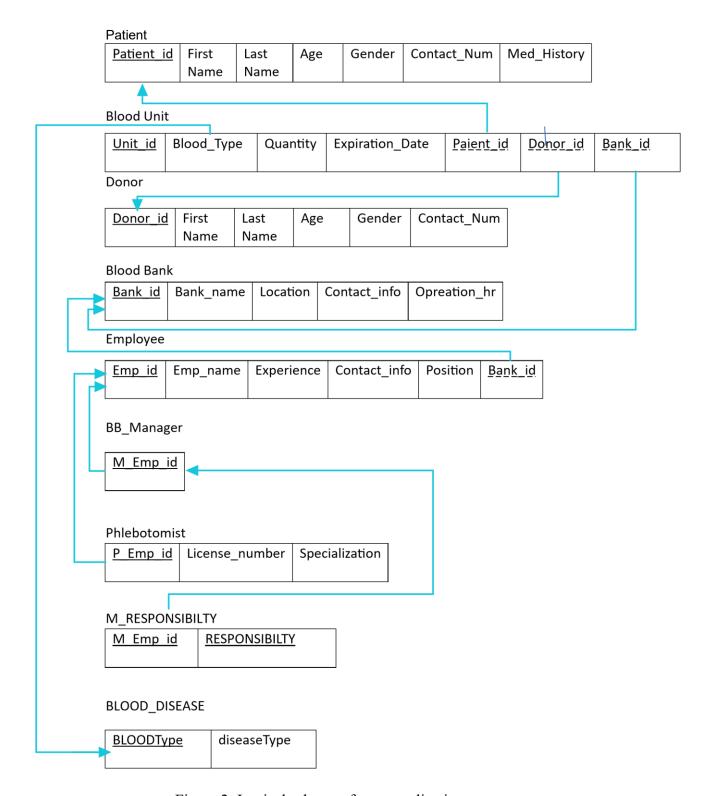


Figure 2: Logical schema after normalization

3. Physical Implementation: SQL

Designing and implementing a Blood Bank Database involves translating the logical schema into a physical implementation using SQL (Structured Query Language). This process includes creating tables, defining relationships, and establishing constraints to ensure data integrity and efficient query handling.

The SQL-based physical implementation for a Blood Bank Database transforms the conceptual design into tangible tables and relationships within a relational database management system (RDBMS). SQL provides a standardized language to interact with the database and execute commands for creating, manipulating, and querying data.

The implementation begins with the creation of tables, defining their structure, including columns, data types, constraints, and relationships. Foreign keys are employed to establish links between tables, ensuring referential integrity across different entities. Indexes may also be utilized to optimize query performance by facilitating faster data retrieval.

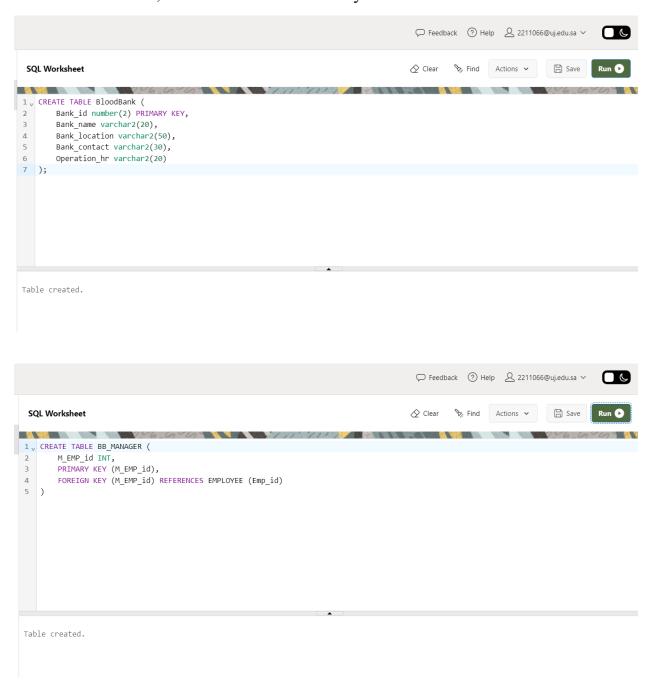
Constraints such as primary keys, foreign keys, unique constraints, and check constraints play a crucial role in maintaining data accuracy and consistency. They enforce rules on the data to prevent invalid entries and maintain the relationships defined in the logical schema.

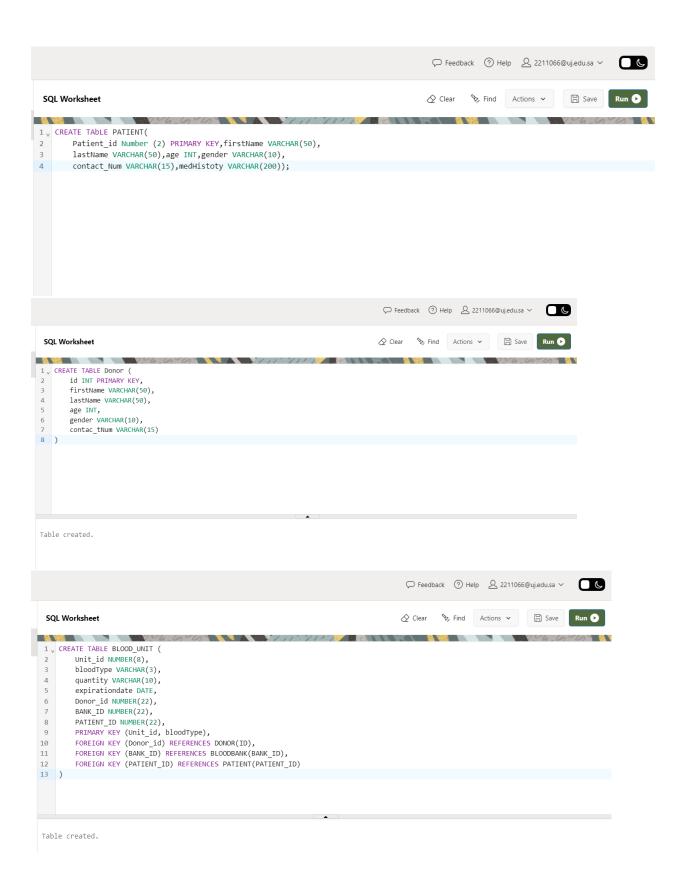
As well as stored procedures that might be incorporated to enhance functionality and automate certain database operations. Stored procedures in a Blood Bank Database play a pivotal role in streamlining database operations and improving efficiency. They encapsulate a set of SQL statements that can be executed as a single unit, enhancing functionality, security, and maintenance within the database.

Next, we'll demonstrate the practical application of these schemas in the physical database environment:

3.1 Creating Tables

In this section, we will demonstrate every table created in our database.





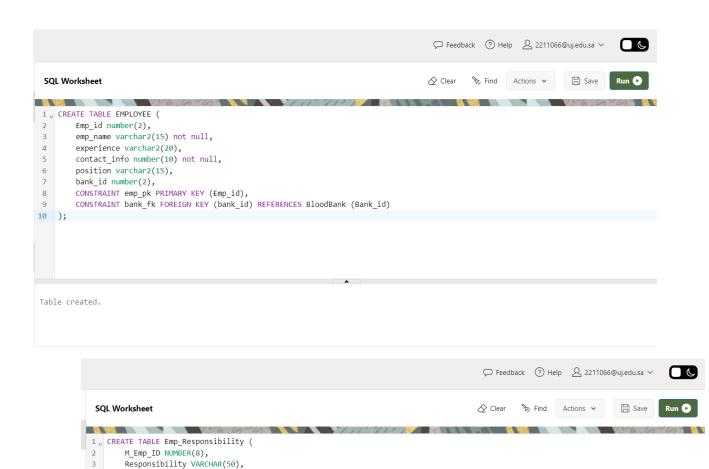
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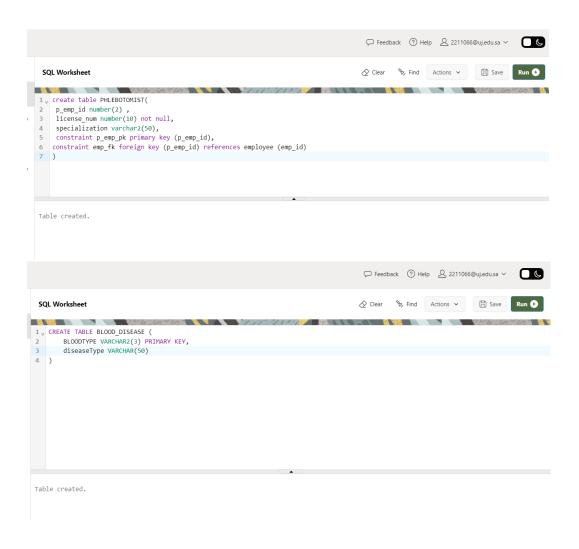
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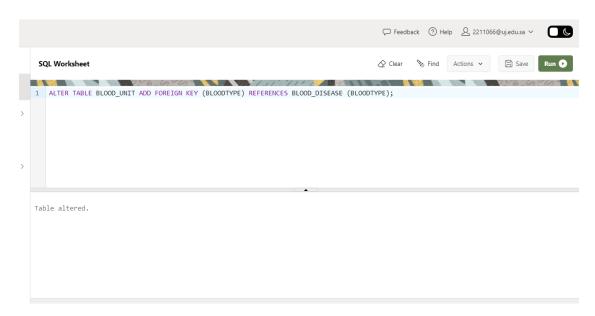
Table created.

PRIMARY KEY (M_Emp_ID, Responsibility),

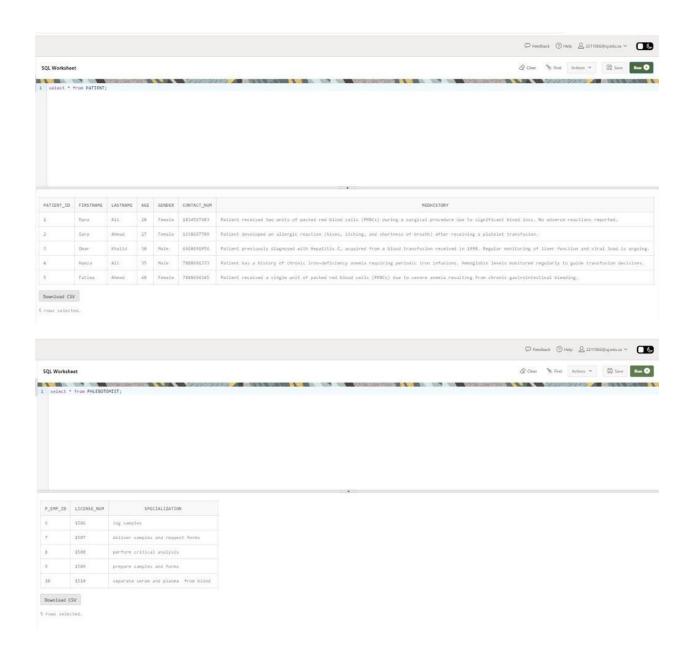
FOREIGN KEY (M_Emp_ID) REFERENCES BB_Manager (M_Emp_ID)







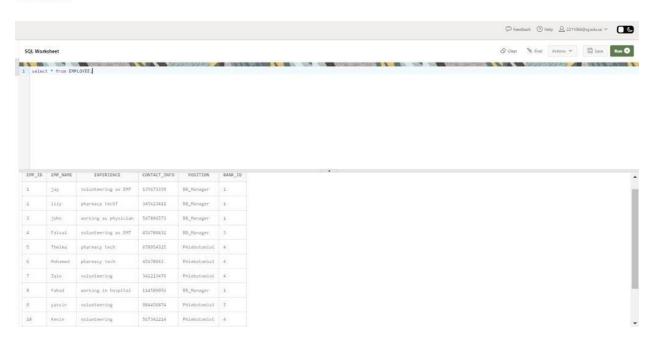
3.2 Data Inserted into Schemas

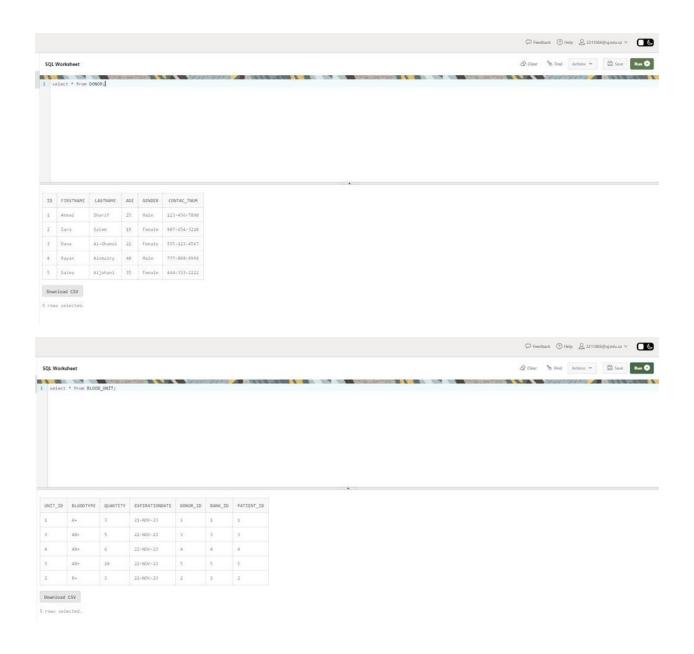


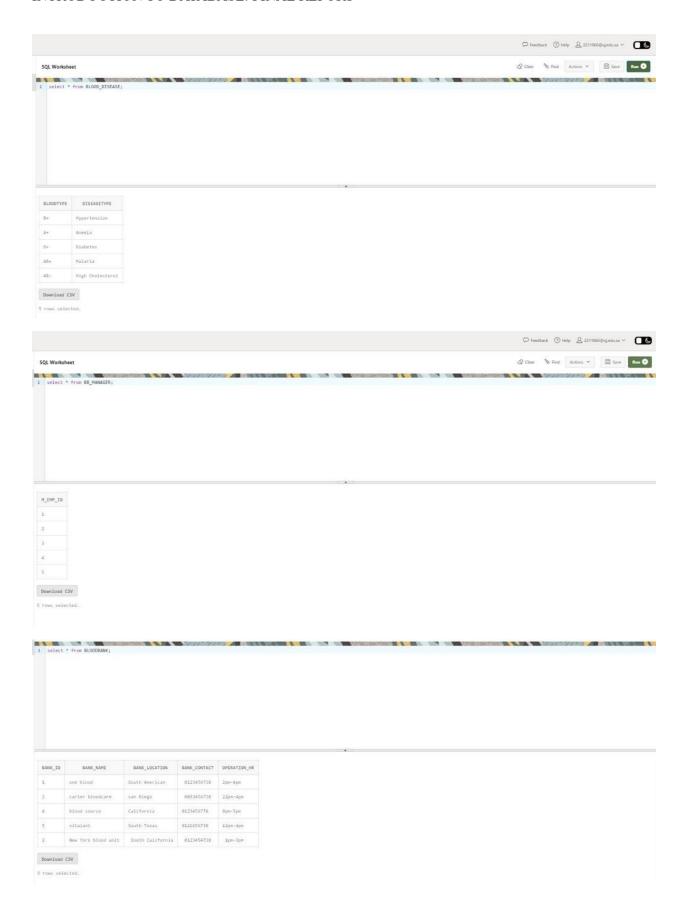


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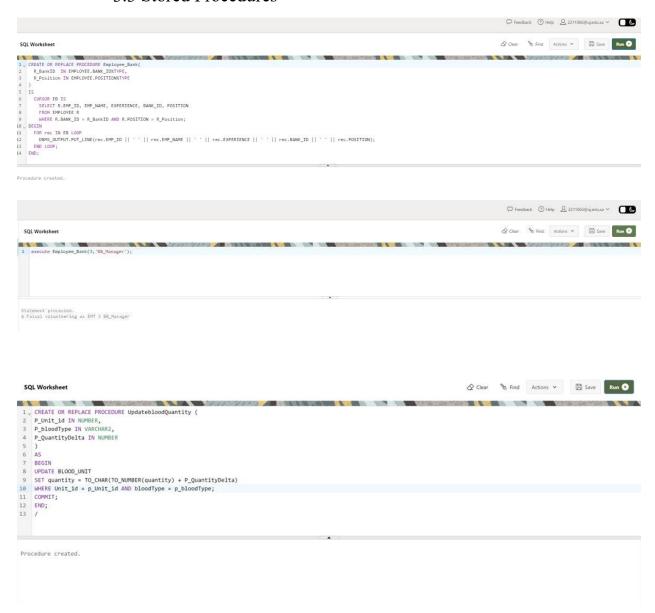
5 rows selected.



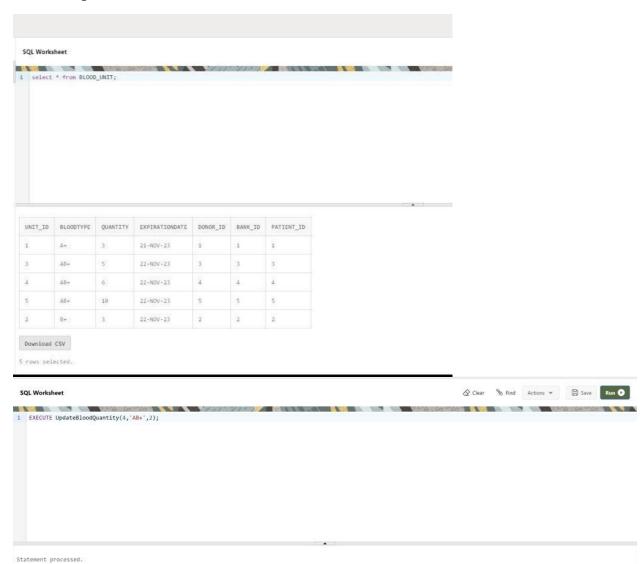




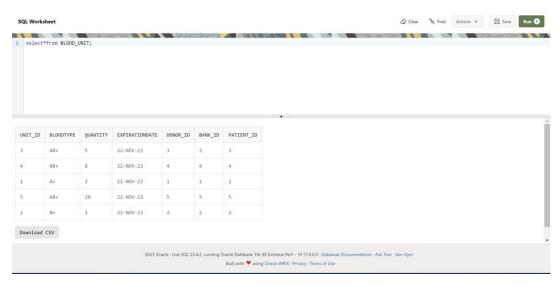
3.3 Stored Procedures



Before Update:

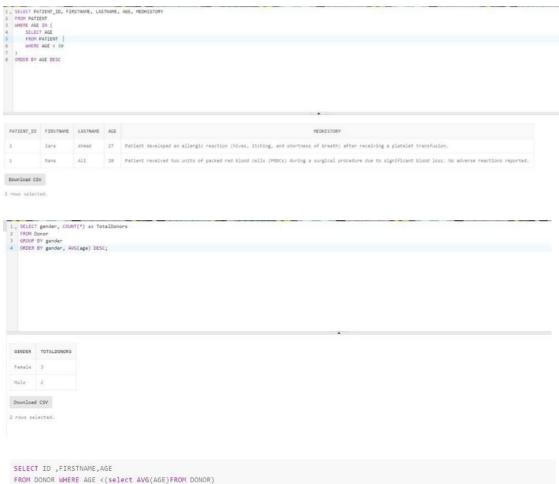


After Update:



3.4 Screenshots of All Tables After Population And Results





FROM DONOR WHERE AGE <(select AVG(AGE)FROM DONOR)

ID	FIRSTNAME	AGE
1	Ahmad	25
2	Sara	19
3	Dana	22

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3 rows selected.

SELECT	ECT AVG(QUANTITY) As q FROM BLOOD_UNIT where BLOODTYPE='AB+'	
Q		
7		
Down1	wnload CSV	