

TABLE NAME	ATTRIBUTE NAME	CONTENTS	TYPE	FORMAT	RANGE	REQUIRED	PK OR FK	FK REFERENCE
PATIENT	PA_ID	Patient ID number	INT	999999	100000-999999	Y	PK	
	PA_LNAME	Patient last name	VARCHAR(20)	Xxxxxxxxxx				
	PA_FNAME	Patient first name	VARCHAR(20)	Xxxxxxxxxx				
	PA_BLOODTYPE	Patient blood type	CHAR(3)	Xx				
	PA_DOB	Patient date of birth	DATE	yyyy-mm-dd				
	AD_ID	Patient address number	INT	999999	100000-999999			FK ADDRESS
	INS_ID	Patient insurance number	INT	999				FK INSURANCE
	SCRIPT_ID	Patient prescriptions	INT	999999	100000-999999			FK PRESCRIPTION
MEDICATION	MED_ID	Medication ID number	INT	999999	100000-999999	Y	PK	
	MED_GENERIC	Medication generic name	VARCHAR(20)	Xxxxxxxxxx		Y		
	MED_BRAND	Medication brand name	VARCHAR(20)	Xxxxxxxxxx		Y		
	MED_SHAPE	Medication shape	VARCHAR(10)	Xxxxxxxxxx		Y		
	MED_COLOR	Medication color	VARCHAR(10)	Xxxxxxxxxx		Y		
	MED_IMPRINT	Medication imprint	CHAR(7)	Xxxxxxx		Y		
	SCRIPT_ID	Prescription ID number	INT	999999	100000-999999	Y	PK	
PRESCRIPTION	MED_ID	Medication ID number	INT	999999	100000-999999	Y		FK MEDICATION
	PA_ID	Patient ID number	INT	999999	100000-999999	Y	PK	FK PATIENT
	SCRIPT_DOSE	Dosage	VARCHAR(20)	999999		Y		
	SCRIPT_DATE	Date written	DATE	yyyy-mm-dd		Y		
	SCRIPT_REFILL	Number of refills	INT	999		Y		
	SCRIPT_REASON	Reason for prescription	VARCHAR(180)	Xxxxxxxxxx		Y		
	EMP_ID	Prescriber	INT	999999	100000-999999	Y		FK EMPLOYEE
EMPLOYEE	EMP_ID	Employee ID number	INT	999999	100000-999999	Y	PK	
	EMP_LNAME	Employee last name	VARCHAR(20)	Xxxxxxxxxx		Y		
	EMP_FNAME	Employee first name	VARCHAR(20)	Xxxxxxxxxx		Y		
	EMP_JOBTYPE	Employee job type	VARCHAR(20)	Xxxxxxxxxx		Y		
	EMP_HIREDATE	Employee hire date	DATE	yyyy-mm-dd		Y		
	EMP_DOB	Employee date of birth	DATE	yyyy-mm-dd		Y		
	AD_ID	Employee address ID	INT	999999	100000-999999	Y		FK ADDRESS
DOCTOR	EMP_ID	Doctor employee ID	INT	999999	100000-199999	Y	PK	EMPLOYEE
	DOC_DEPT	Doctor department	VARCHAR(180)	Xxxxxxxxxx		Y		
	DOC_SALARY	Doctor salary	INT	999999	0-999999			
	DOC_OFFICE_NUM	Doctor office number	CHAR(4)	x999				
NURSE	DOC_AD_ID	Address ID of doctor office (if c	INT	999999	200000-299999		FK	ADDRESS
	EMP_ID	Nurse employee ID	INT	999999	100000-999999	Y	PK	EMPLOYEE
	UNIT_ID	Unit ID number	INT	999				FK UNIT
	NURSE_SHIFT	Nurse shift	VARCHAR(20)	Xxxxxxxxxx	Day/Night			
	NURSE_HOURLY	Nurse hourly rate	INT	99.99				

INSURANCE	NURSE_HRS	Number of work hours/ week	INT	99.99	0-80		
	INS_ID	Insurance ID number	INT	999		Y	PK
	INS_COMPANY	Insurance company name	VARCHAR(20)	XXXXXXXXXX		Y	
	INS_PLAN	Insurance plan name	VARCHAR(20)	XXXXXXXXXX		Y	
	INS_COPAY	Insurance copayment	INT	9999	0-9999	Y	
	INS_DEDUCTIBLE	Insurance deductible amount	INT	XXXXXXXXXX		Y	
LAB_WORK	LAB_ID	Labwork ID number	INT	999		Y	PK
	GLUCOSE	Glucose lab	VARCHAR(20)	XXXXXXXXXX			
	MONO	Mono lab	VARCHAR(20)	XXXXXXXXXX			
	PAP	Pap smear	VARCHAR(20)	XXXXXXXXXX			
	STOOL	Stool analysis	VARCHAR(20)	XXXXXXXXXX			
	URINALYSIS	Urinalysis	VARCHAR(20)	XXXXXXXXXX			
UNIT	UNIT_ID	Unit ID number	INT	999		Y	PK
	UNIT_TYPE	Unit type	VARCHAR(20)	XXXXXXXXXX		Y	
	UNIT_FLOOR	Unit floor	CHAR(3)	999		Y	
	UNIT_NOTES	Unit notes	VARCHAR(180)	XXXXXXXXXX		Y	
VISIT	VISIT_ID	Visit ID number	INT	999999	100000-999999	Y	PK
	LAB_ID	Lab ID number	INT	999			FK LAB_WORK
	EMP_ID	Employee ID number	INT	999999	100000-999999	Y	FK EMPLOYEE
	PA_ID	Patient ID number	INT	999999	100000-999999	Y	FK PATIENT
	UNIT_ID	Unit ID number	INT	999		Y	FK UNIT
	VISIT_DATE	Date of visit	DATE	yyyy-mm-dd		Y	
	VISIT_REASON	Reason of visit	VARCHAR(180)	XXXXXXXXXX			
	VISIT_DIAG	Diagnoses	VARCHAR(180)	XXXXXXXXXX		Y	
PHARMA_ORDER	ORDER_ID	Order ID number	INT	999999	100000-999999	Y	PK
	MED_ID	Medication ID number	INT	999999	100000-999999	Y	PK FK MEDICATION
	ORDER_DATE	Date order is placed	DATE	yyyy-mm-dd		Y	
	ORDER_RECEIVED	Date order is received	DATE	yyyy-mm-dd		Y	
	ORDER_SUPPLYBY	Name of fulfillment company	VARCHAR(20)	XXXXXXXXXX		Y	
	EMP_ID	Ordered by	INT	999999	100000-999999	Y	FK EMPLOYEE
ADDRESS	AD_ID	Address ID number	INT	999999	100000-999999	Y	PK
	AD_STREET	Address street name	VARCHAR(60)	XXXXXXXXXX			
	AD_CITY	Address City	VARCHAR(20)	XXXXXXXXXX			
	AD_STATE	Address State	CHAR(3)	Xx			
	AD_ZIP	Address ZIP code	CHAR(5)	99999		Y	