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Project Report: Pharmacy Management System

A Practical activity Report submitted for DATABASE MANAGEMENT SYSTEM (UCS310) by

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Introduction

Pharmacies are essential component of healthcare in our country and handle the function of selling medical drugs. These provide direct patient care services that optimize the use of medication and promotes health, wellness, and disease prevention. Even though the pharmacies do not seem different than any other shop, their functioning is very different due to various laws regarding drugs.

For example, most of the drugs available in a pharmacy cannot be purchased without a prescription. Even with a signed prescription, there is a limit on the quantity that can be purchased. Additionally, pharmacist can do a background check on customer's medical history to ensure that they are not involved in drug abuse.

Thus, preparing a Database Management System for a pharmacy not only requires study of how things are handled from a customer or employee point of view but also the relevant laws. With this project, our aim was to develop a comprehensive system that could deal with challenges faced in day to day operation of a modern pharmacy. We studied the relevant laws and prepared a system that complies with the required Federal and State laws.

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Requirements

During research phase, we arrived at following requirements based on the pharmacy flow:

Customer

When a customer arrives in the pharmacy, we identify them based on their SSN. If they are a new customer, they are asked for their name, date of birth, phone number, gender and address. The address and date of birth are required to be recorded for drug control purposes.

Insurance

Approximately 514 million people across India were covered under health insurance schemes in 2021, which merely covers 37% of the people in the country. The major part of the population has limited access to quality medical services and health care professionals like doctors, specialists, nurses, etc. Around 74% of India's medical professionals are serving a mere 28% of the population.

Low funding is another factor that results in a lack of medical infrastructure in rural areas. Privatisation is so prominent in the healthcare sector that only one-fifth of healthcare is financed publicly. Health insurance premium collections saw a growth of 40% in 2020, during the pandemic.

As per the General Industry Council, health insurance was the most important sector under general insurance in the first wave of COVID-19 from April-September 2020.

If a customer has health insurance, we store the insurance ID (unique for each customer), company name, start date, end date and Co-Insurance. Co-Insurance is a percentage amount that insurance company pays for a medicinal purchase (Managing your healthcare costs, n.d.).

Given the customer SSN and insurance ID, the system should be able to automatically calculate the amount paid by insurance company and customer.

Employee

An employee has same details as a customer but they are also given a company ID, that is unique for them. An employee has to have one of the following roles:

- 1. Pharmacy Technician
- 2. Pharmacy Assistant
- 3. Pharmacy Consultant
- 4. Cashier
- 5. Pharmacy Manager
- 6. Analyst

Apart from cashier, all other roles require a license from State Pharmacy Councils which oversee the registration and regulation of pharmacists at the state level.

Prescription

Most of the drugs in the pharmacy can only be sold with a prescription. A prescription contains customer's SSN, the prescribing Doctor's ID (required by law) and when the prescription was prescribed.

Each prescription contains a number of prescribed drugs with drug name, quantity and refill limit of each of them. By law, a pharmacy cannot sell more than prescribed quantity or anything that is not listed on prescription.

Order

An order is created from the prescription. This data has to be stored separately because customer may:

- 1. Buy less medicine than prescription specifies
- 2. Come back for refills based on same prescription

Each order has a unique Order ID that is automatically assigned by the system. Each order can have multiple drugs, each with their ordered quantity and price. We also record batch number of the drug.

Bill

Once an order has been completed, a bill is generated by the system. This bill is handed over to the customer and contains order information, insurance information as well as breakdown of amount paid.

The breakdown should be automatically calculated by the system based on insurance, customer and medicine data.

Medicine (Inventory)

Drugs are divided into "over the counter", "restricted" and "prescription only". While not needed by law everywhere, it is beneficial to store an up to date inventory for record keeping as well knowing when we run out of stock.

Laws Affecting Pharmacies

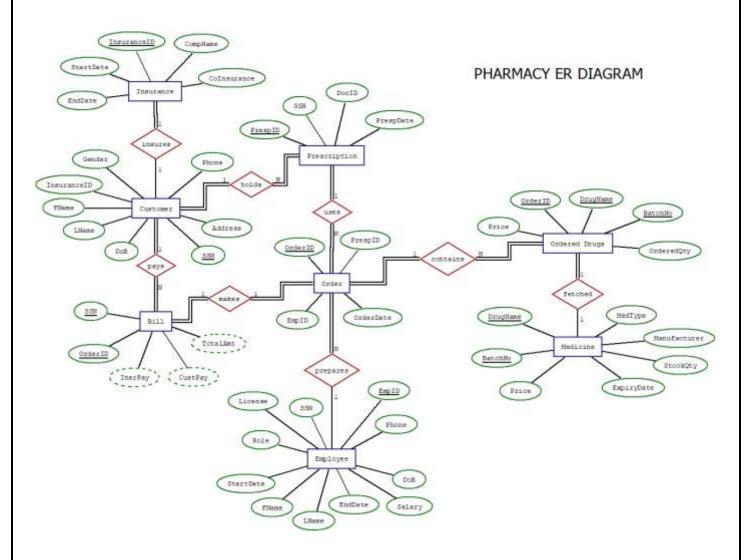
Since drugs are highly regulated, a system designed to manage a pharmacy has to follow all the required laws. The following are most important laws that we discovered during course of our research for the project:

- **1. Drugs and Cosmetics Act, 1940:** The Drugs and Cosmetics Act, 1940, is the primary legislation governing pharmaceuticals in India. It regulates the import, manufacture, distribution, and sale of drugs and cosmetics. The Act provides provisions related to licensing, labelling, and quality control of pharmaceutical products.
- **2. Pharmacy Council of India (PCI) and State Pharmacy Councils:** The Pharmacy Council of India (PCI) is a statutory body established under the Pharmacy Act, 1948. It regulates the education and practice of pharmacy in India. The PCI sets standards for pharmacy education and grants registration to qualified pharmacists. State Pharmacy Councils oversee the registration and regulation of pharmacists at the state level.
- **3. Schedule H and H1 Drugs:** The Central Drugs Standard Control Organization (CDSCO) has classified certain drugs as Schedule H and Schedule H1 drugs. These drugs require a prescription from a registered medical practitioner and cannot be sold over the counter without a prescription. This classification aims to ensure the rational use of drugs and prevent their misuse.
- **4. Good Pharmacy Practice (GPP) Guidelines:** The Pharmacy Practice Regulations, 2015, issued by the PCI, provide guidelines for Good Pharmacy Practice (GPP). These guidelines define the professional responsibilities of pharmacists, including dispensing prescriptions, patient counselling, record-keeping, and maintaining a pharmacy's physical infrastructure and facilities.

Pharmacy laws in India, including the recent regulations concerning epharmacies, are essential for ensuring the safe and ethical distribution of pharmaceutical products and services. The laws aim to protect patient health, maintain professional standards, and prevent the misuse of drugs. Compliance with these regulations by both traditional pharmacies and epharmacies is crucial to maintain public trust and ensure the availability of quality healthcare for all.

ER DIAGRAM

The final ER diagram is shown below with explanation:



- 1. A single customer can have multiple prescriptions. Thus, the relation between them is one to many.
- 2. A single customer can have only one insurance. Thus, the realationship between them is one to one.
- 3. A prescription consists of multiple drugs. In case of refills, a prescription can generate multiple orders. So, this relation is one to many as well.
- 4. A single order can contain multiple drugs, thus relationship is one to many.
- 5. One order, however, can generate only one bill. Thus, the relation between bill and order is one to one.
- 6. A customer can make multiple purchases and hence, the relation between customer and bill is one to many. This is due to the fact that every bill has only one customer.
- 7. In medicine table (stock), drug name and batch number can uniquely identify every drug we have in inventory. Batch number is assumed to be unique among manufacturers.
- 8. One employee can prepare multiple orders. However, a specific order can only be prepared by one employee. Thus, relationship is one to many.

Relations

The final relations are listed below:

Customers

<u>SSN</u>	First_Name	Last_Name	Phone	Gender	Address	Date_of_Birth	Insurance_ID	
								l

Primary Key: SSN

Foreign Key: Customers(Insurance_ID) → Insurance(Insurance_ID)

Insurance

Insurance_ID	Company_Name			Co-
		Start_Date	End_Date	Insurance

Primary Key: Insurance ID

Employee

<u>ID</u>	SSN	License	First_Name	Last_Name	Start_Date	End_Date	Role
	Phone Number						
Salary	_	Date_of_Birth					

Primary Key: ID

Prescription

]	Prescription_ID			Prescription_Date
		SSN	Doctor_ID	

Primary Key: Prescription ID

Foreign Key: Prescription(SSN) → Customer(SSN)

Orders

	Prescription_ID		Order
Order_ID		EmployeeID	Date

Primary Key: Order ID

Foreign Key: Orders(Prescription_ID) \rightarrow Prescription(Prescription_ID), Orders(Employee_ID) \rightarrow

Employee(ID)

Ordered Drugs

		Batch_Number		
Order_ID	Drug_Name		Quantity	Price

Primary Key: Order ID, Drug Name, Batch Number

Foreign Key: Ordered Drugs(Order ID) → Orders(Order ID), Ordered Drugs(Drug Name, Batch

_Number) → Medicine(Drug_Name, Batch _Number)

Bill

Order		Total_Amount	Customer_Payme	nt Insurance_Payment
<u>ID</u>	CustomerSSN			

Primary Key: Order ID, CustomerSSN

Foreign Key: Bill(Order ID) → Orders(Order ID), Bill(CustomerSSN) → Customers(SSN)

Medicine

<u>Drug</u>	Batch	Medicine_Type			Expiry_Date		
<u>Name</u>	<u>Number</u>		Manufacturer	Stock_Quantity		Price	J

Primary Key: Drug_Name, Batch_Number → Medicine_Type, Manufacturer, Stock_Quantity,

Expiry Date, Price

Dependencies

The following dependencies exist in our schema:

- 1. Insurance(Insurance_ID, Company_Name, Start_Date, End_Date, Co-Insurance)
 Insurance ID → Company_Name, Start_Date, End_Date, Co-Insurance
- 2. Customers(SSN, First_Name, Last_Name, Phone, Gender, Address, Date_of_Birth, Insurance_ID) SSN → First_Name, Last_Name, Phone, Gender, Address, Date_of_Birth, Insurance_ID
- 3. Prescription(Prescription_ID, SSN, Doctor_ID, Prescribed_Date)
 Prescription ID → SSN, Doctor_ID, Prescribed Date
- 4. Orders(Order_ID, Prescription_ID, Employee_ID, Order_Date)
 Order_ID → Prescription_ID, Employee_ID, Order_Date
- 5. Ordered_Drugs(Order_ID, Drug_Name, Batch_Number, Ordered_Quantity, Price)
 Order ID, Drug Name, Batch Number→Ordered Quantity, Price
- 6. Bill(Order_ID, CustomerSSN, Total_Amount, Customer_Payment, Insurance_Payment)
 Order ID, CustomerSSN → Total Amount, Customer Payment, Insurance Payment
- 7. Employee(Employee_ID, SSN, First_Name, Last_Name, Start_Date, End_Date, Role, Salary, Phone_Number, Date_of_Birth)
 Employee_ID→SSN, First_Name, Last_Name, Start_Date, End_Date, Role, Salary, Phone_Number, Date_of_Birth
- 8. Medicine(Drug_Name, Batch_Number, Medicine_Type, Manufacturer, Stock_Quantity,
 Expiry_Date, Price)
 Drug Name, Batch Number → Medicine Type, Manufacturer, Stock Quantity, Expiry Date, Price

Normalization

None of the above dependencies, except of the Customers table, violate 3NF rules, so above relations are in 3NF. The Customers table has a multivalued attribute, 'Address'.

Table Creation

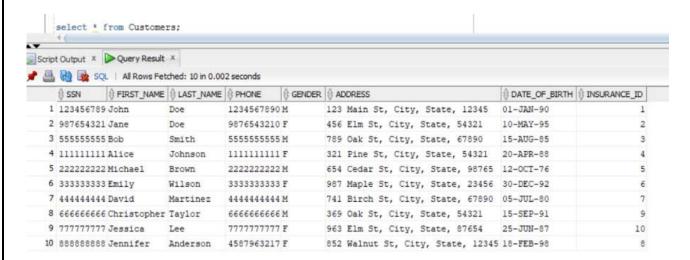
SQL commands for creating the tables in our database:

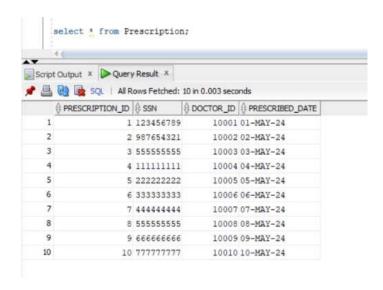
```
CREATE TABLE Customers (
     SSN NUMBER(10) NOT NULL,
     First_Name VARCHAR2 (255) NOT NULL,
Last_Name VARCHAR2 (255) NOT NULL,
                    NUMBER(10) NOT NULL UNIQUE,
CHAR(1) NOT NULL,
     Phone
     Gender
     Address VARCHAR2 (1000) NOT NULL,
     Date_of_Birth DATE NOT NULL,
Insurance_ID NUMBER(10) NOT NULL UNIQUE,
     PRIMARY KEY (SSN)
 );
CREATE TABLE Prescription (
      Prescription_ID number(10) NOT NULL,
                      number (10) NOT NULL,
      SSN
     Doctor_ID number(10) NOT NULL,
     Prescribed_Date date NOT NULL,
     PRIMARY KEY (Prescription_ID)
 );
CREATE TABLE Orders (
      Order ID number (10) NOT NULL,
      Prescription_ID number(10) NOT NULL,
      EmployeeID
                     number (5) NOT NULL,
      Order_Date
                      date NOT NULL,
      PRIMARY KEY (Order ID)
 );
CREATE TABLE Ordered_Drugs (
                 number(10) NOT NULL,
     Order_ID
     Drug Name
                        char (255) NOT NULL,
     Batch Number number (10) NOT NULL,
     Ordered_Quantity number(10) NOT NULL,
     Price
                        number (2) NOT NULL,
     PRIMARY KEY (Order_ID, Drug_Name, Batch_Number)
 );
```

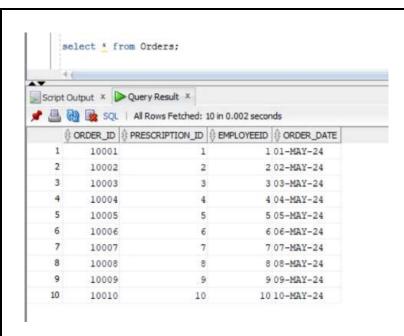
```
CREATE TABLE Insurance (
     Company Name char (255) NOT NULL,
     Start_Date
                 date NOT NULL,
    End_Date
                  date NOT NULL,
     Co_Insurance number(4) NOT NULL,
    PRIMARY KEY (Insurance ID)
 );
CREATE TABLE Employee (
     ID
                     number (5) NOT NULL,
     SSN
                    number (10) NOT NULL UNIQUE,
     License
                    number (10) UNIQUE,
     First_Name
Last_Name
                    char (255) NOT NULL,
                    char (255) NOT NULL,
     Start_Date
End_Date
                    date NOT NULL,
                    date,
                    char (255) NOT NULL,
     Role
     Salary number (4) NOT NULL,
Phone_Number number (10) NOT NULL,
                    number (4) NOT NULL,
     Date of Birth
                    date NOT NULL,
     PRIMARY KEY (ID)
 );
CREATE TABLE Medicine (
     Drug_Name char(255) NOT NULL,
     Batch_Number
                      number (10) NOT NULL,
     MedicineType
                       char (255) NOT NULL,
     Manufacturer
                       char (255) NOT NULL,
     Stock Quantity
                       number (10) NOT NULL,
     Expiry_Date
                       date NOT NULL,
     Price
                        number (4) NOT NULL,
     PRIMARY KEY (Drug_Name, Batch_Number)
 );
CREATE TABLE Bill (
                     number(10) NOT NULL,
number(10) NOT NULL,
     Order ID
     CustomerSSN
     Total Amount
                      number (4) NOT NULL,
     Customer_Payment number(4) NOT NULL,
     Insurance Payment number (4) NOT NULL,
    PRIMARY KEY (Order ID, CustomerSSN)
 );
```

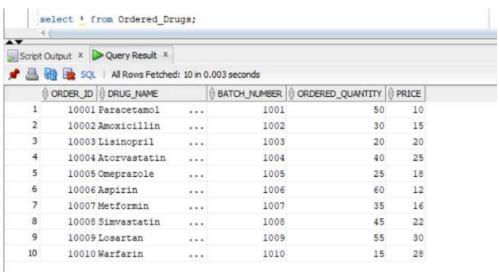
```
ALTER TABLE Customers ADD CONSTRAINT insures FOREIGN KEY (Insurance ID)
    REFERENCES Insurance (Insurance ID) ON DELETE Set null;
ALTER TABLE Prescription ADD CONSTRAINT holds FOREIGN KEY (SSN)
   REFERENCES Customers (SSN);
ALTER TABLE Orders ADD CONSTRAINT prepares FOREIGN KEY (EmployeeID)
   REFERENCES Employee (ID);
ALTER TABLE Orders ADD CONSTRAINT uses FOREIGN KEY (Prescription_ID)
   REFERENCES Prescription (Prescription ID);
ALTER TABLE Bill ADD CONSTRAINT makes FOREIGN KEY (Order_ID)
   REFERENCES Orders (Order ID);
ALTER TABLE Bill ADD CONSTRAINT pays FOREIGN KEY (CustomerSSN)
    REFERENCES Customers (SSN);
ALTER TABLE Ordered Drugs ADD CONSTRAINT contains FOREIGN KEY (Order ID)
   REFERENCES Orders (Order_ID) ON DELETE Cascade;
ALTER TABLE Ordered Drugs ADD CONSTRAINT Fulfilled FOREIGN KEY (Drug Name, Batch Number)
    REFERENCES Medicine (Drug Name, Batch Number);
```

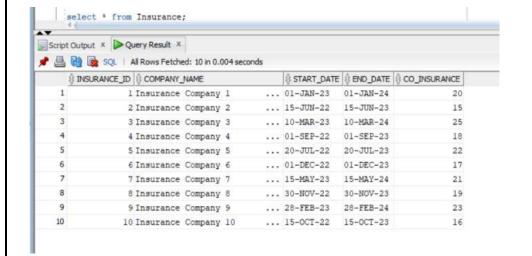
Adding data to the tables:

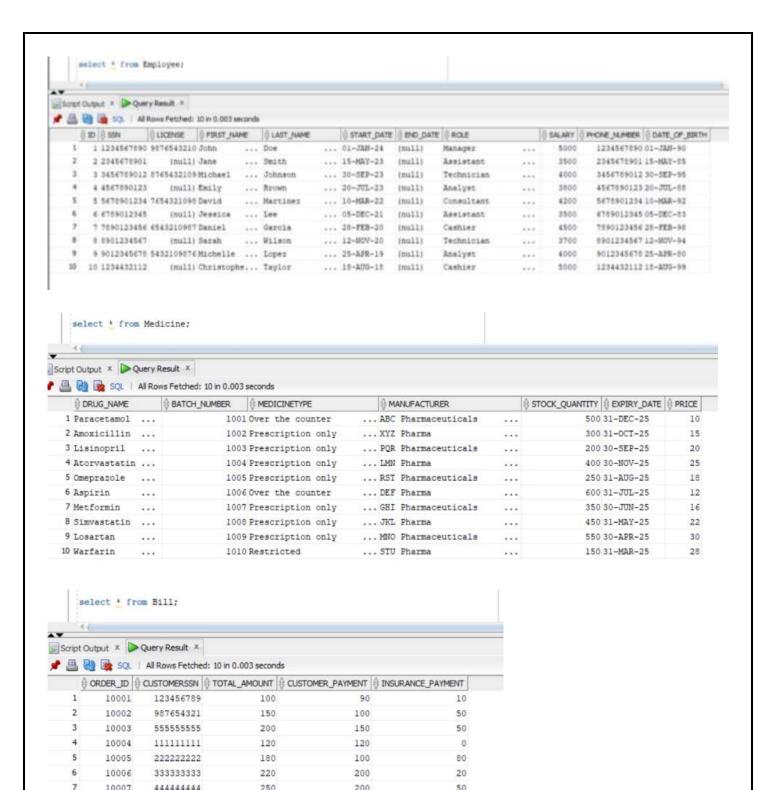












Procedures and cursors:

Report Expiring Drugs

Any drugs that are going to expire within 60 days are displayed on screen along with their quantity and batch number.

```
Worksheet Query Builder
    HI CHEATE OR REPLACE PROCEDURE REPORT_EXPIRING_DROSS
         DEMI_OUTPUT.PUT_LINE("ALL DROUG EXPERIENT OF HEAT OF DRIFT!;
             SELECT
                drug_name,
                beach number,
                manufacturer,
                stock_quentity,
                 empiry_date
             FROM HEDDCINE
             WHERE espiry_date < SYSDATE + 60
             DESCRIPTION OF LINE
                 item.drug.name () 7, Batth: * )) item.batth_number () *, Herufacturer: * () item.manufacturer ()
                 ", PLICE QUARTITY " || Item. stock_quartity || ", Employ Date: " || Item. employ date
         KND LCKOPY
     ESD;
Sout Output 1 | Query Result 1
🖈 🥓 🛅 🚵 📓 | Task completed in 0.063 seconds
Procedure REPORT_EXPIRING_INCOS compiled
```

Retrieving customer's insurance details

Since a percentage of the bills are paid by the customer's insurance company, hence it is important to retrieve their insurance details.

```
HORSET OR REPLACE PROCESSES CONTONES INCOMENCE DETAILS

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AS CONCESS OF SERVICES INCOMENCE IN COMENCE DETAILS OF SERVICES IN CONTONES IN
```

Getting customer info

Customer info is to be stored in logs as per the law by the pharmacist.

```
DENTE ON METACE PROCESSE DET_CUSTORES_DIFO (
p_em. IN MENCES

CORNOR Quetomer_out IN
SELECT (
PROM Customers
WHERE SIN = p_max;

V_customer CustomersAbortive;

MEGIN

OPEN customer_out INTO v_customer;

CLOUS customer_out INTO v_customer;

CLOUS customer_out;

DENC_OUTPUT.FUT_LINE(*Customer Same: * )) = customer.firet_Name () * * () * v_customer_lines_processer_lines_processer_output.Fut_Line(*Customer Same: * )) * v_customer_firet_Name () * * () * v_customer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processer_lines_processe
```

Conclusion The pharmacy project was a good learning experience for implementing a real world DBMS and helped us understand the nuances of a full implementation. The most interesting part was the experience of starting from real world and then translating the concepts into the terms of a DBMS. The final implementation is robust and can handle various edge cases and scenarios. Paired with a capable application front end, it can handle day to day operations for a pharmacy.

Citations and References

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