

Doctor (doctor ID, name, gender, speciality, year of Experience, address, phone, dep ID)

Treatment (disease, delivery Date, doctor ID, patient ID)

Medication (disease, medication)

Patient (patient ID, name, gender, birth day, address, email, phone, insurance number)

Department (dep ID, depName, foundation Date, name)

visit_hospital (ID, name, patient ID, from, to)

Inpatient (patient ID, room Number)

Outpatient (patient ID, visiting time)