CMPSC 431 Assignment 1

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Create at least 5 tables (must include DEPARTMENT, EMPLOYEE, SHIFT)

DEPARTMENT(DepartmentID, Name, OfficeAddress, DepartmentHead, OfficePhone)

EMPLOYEE(EmployeeID, Name, Phone, Email, Address, SSN, Position)

AFFILIATION(EmployeeID, DepartmentID)

ROOM(RoomNumber, Floor, RoomType, Available, RoomPhone)

SHIFT(**ShiftID**, Date, StartTime, EndTime, *EmployeeID*, *RoomNumber*)

PATIENT(PatientID, Name, Phone, Email, Address, SSN, InsuranceNumber)

APPOINTMENT(**AppointmentID**, Date, StartTime, EndTime, Description, *EmployeeID*, *PatientID*, *RoomNumber*)

| DEPARTMENT | | | | |
|----------------|--------------|-------------|----------|----------------|
| Column Name | Data Type | Key | Required | Remarks |
| DepartmentID | INT | Primary Key | Yes | Auto Increment |
| Name | VARCHAR(100) | | Yes | |
| OfficeAddress | VARCHAR(100) | | Yes | |
| DepartmentHead | VARCHAR(100) | | Yes | |
| OfficePhone | VARCHAR(20) | | Yes | |

| EMPLOYEE | | | | | |
|-------------|--------------|-------------|----------|----------------|--|
| Column Name | Data Type | Key | Required | Remarks | |
| EmployeeID | INT | Primary Key | Yes | Auto Increment | |
| Name | VARCHAR(100) | | Yes | | |
| Phone | VARCHAR(20) | | Yes | | |
| Email | VARCHAR(20) | | Yes | | |
| Address | VARCHAR(100) | | Yes | | |
| SSN | VARCHAR(20) | | Yes | | |
| Position | VARCHAR(20) | | Yes | | |

| AFFILIATION | | | | |
|--------------|-----------|-------------------------|----------|--------------------------------------|
| Column Name | Data Type | Key | Required | Remarks |
| EmployeeID | INT | Primary, Foreign | Yes | References |
| | | key | | EMPLOYEE |
| | | | | (EmployeeID) |
| DepartmentID | INT | Primary, Foreign key | Yes | References DEPARTMENT (DepartmentID) |
| | | | | (Departmentib) |

| ROOM | | | | | |
|-------------|-------------|-------------|----------|---------|--|
| Column Name | Data Type | Key | Required | Remarks | |
| RoomNumber | INT | Primary Key | Yes | | |
| Floor | INT | | Yes | | |
| RoomType | CHAR(20) | | Yes | | |
| Available | BOOLEAN | | Yes | | |
| RoomPhone | VARCHAR(20) | | Yes | | |

| SHIFT | | | | |
|-------------|-----------|-------------|----------|----------------|
| Column Name | Data Type | Key | Required | Remarks |
| ShiftID | INT | Primary Key | Yes | Auto Increment |
| Date | DATE | | Yes | |
| StartTime | TIME | | Yes | |
| EndTime | TIME | | Yes | |
| EmployeeID | INT | Foreign Key | Yes | References |
| | | | | EMPLOYEE |
| | | | | (EmployeeID) |
| | | | | |
| RoomNumber | INT | Foreign Key | Yes | References |
| | | | | ROOM |
| | | | | (RoomNumber) |

| PATIENT | | | | |
|-----------------|--------------|-------------|----------|----------------|
| Column Name | Data Type | Key | Required | Remarks |
| PatientID | INT | Primary Key | Yes | Auto Increment |
| Name | VARCHAR(100) | | Yes | |
| Phone | VARCHAR(20) | | Yes | |
| Email | VARCHAR(20) | | Yes | |
| Address | VARCHAR(100) | | Yes | |
| SSN | VARCHAR(20) | | Yes | |
| InsuranceNumber | VARCHAR(20) | | Yes | |

| APPOINTMENT | | | | |
|---------------|-----------|-------------|----------|------------------------------------|
| Column Name | Data Type | Key | Required | Remarks |
| AppointmentID | INT | Primary Key | Yes | Auto Increment |
| Date | DATE | | Yes | |
| StartTime | TIME | | Yes | |
| EndTime | TIME | | Yes | |
| Description | TEXT | | Yes | |
| EmployeeID | INT | Foreign Key | Yes | References |
| | | | | EMPLOYEE |
| | | | | (EmployeeID) |
| PatientID | INT | Foreign Key | Yes | References PATIENT (PatientID) |
| RoomNumber | INT | Foreign Key | Yes | References ROOM (RoomNumber) |