

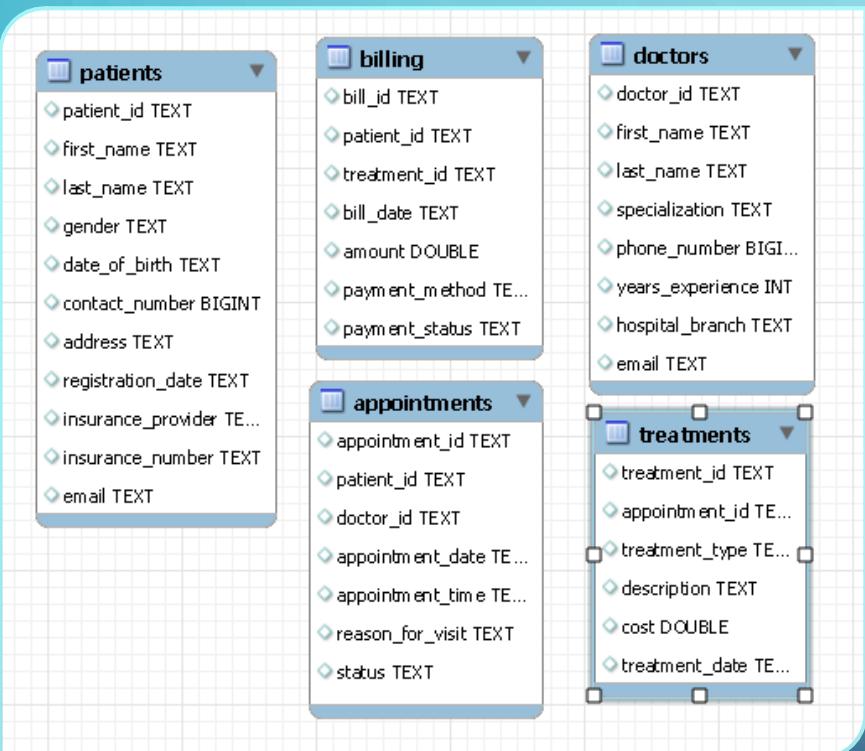


DESIGNING
DATABASES AND
ANALYSING
HOSPITAL DATA
EFFICIENTLY

HOSPITAL MANAGEMENT SQL PROJECT SCHEMA BUILD AND ANALYTICS

DATA DEFINITION & SCHEMA SETUP

INITIAL RAW SCHEMA



Baseline Raw Schema

The raw schema contains tables with TEXT columns limiting indexing and constraints.

Missing Keys and Constraints

No primary or foreign keys exist, preventing uniqueness and referential integrity enforcement.

Data Quality Risks

Lack of structure causes risks like duplicate records and orphaned rows affecting reliability.

Need for Schema Improvement

Applying enhancements is necessary to add constraints and standardise data types for consistency.

SQL SCRIPT: PRIMARY KEYS

Definition of Primary Keys

Primary keys uniquely identify each record and are essential for relational integrity in databases.

Role in Data Relationships

Primary keys enable foreign keys, allowing accurate joins and enforcing referential integrity.

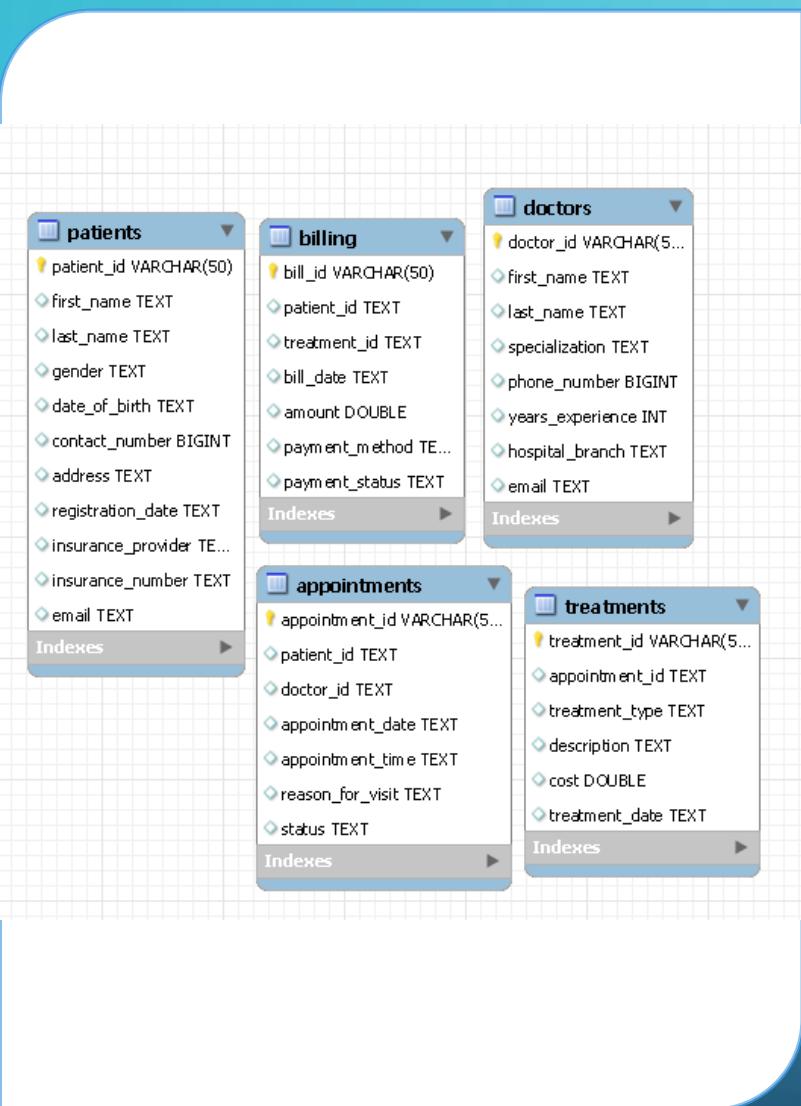
Performance Benefits

Indexed primary keys improve query performance and data retrieval efficiency in relational databases.

Foundation for Schema Design

Creating primary keys before foreign keys ensures a robust and well-structured relational schema.

```
1 • USE hospital_management;
2
3 -- 1. Patients: patient_id is the PK
4 • ALTER TABLE patients
5 MODIFY COLUMN patient_id VARCHAR(50) NOT NULL,
6 ADD PRIMARY KEY (patient_id);
7
8 -- 2. Doctors: doctor_id is the PK
9 • ALTER TABLE doctors
10 MODIFY COLUMN doctor_id VARCHAR(50) NOT NULL,
11 ADD PRIMARY KEY (doctor_id);
12
13 -- 3. Appointments: appointment_id is the PK
14 • ALTER TABLE appointments
15 MODIFY COLUMN appointment_id VARCHAR(50) NOT NULL
16 ADD PRIMARY KEY (appointment_id);
17
18 -- 4. Treatments: treatment_id is the PK
19 • ALTER TABLE treatments
20 MODIFY COLUMN treatment_id VARCHAR(50) NOT NULL,
21 ADD PRIMARY KEY (treatment_id);
22
23 -- 5. Billing: bill_id is the PK
24 • ALTER TABLE billing
25 MODIFY COLUMN bill_id VARCHAR(50) NOT NULL,
26 ADD PRIMARY KEY (bill_id);
27
```



SCHEMA PROGRESS AFTER PKS

Primary Key Assignment

Assigning primary keys structures the schema and reduces duplicate records, enhancing database reliability.

Logical Table Linking

Primary keys enable logical linking of tables reflecting real-world relationships like patients, doctors, and appointments.

Improved Data Integrity

Structural improvements from primary keys prepare the schema for referential constraints and stronger data integrity.

DATA STANDARDISATION & CLEANING

DATA TYPING & FOREIGN KEYS

Standardising Data Types

Converting ID columns from TEXT to VARCHAR(50) ensures type compatibility for relational integrity.

Establishing Foreign Keys

Foreign key constraints link related tables, such as appointments to patients and doctors, ensuring data consistency.

Maintaining Data Integrity

Constraints prevent orphan records and enable automatic validation during data insert and update operations.

```
28  -- DATA STANDARDIZATION & CLEANING
29  -- CSV imports often default to 'TEXT'. We convert IDs to 'VARCHAR(50)'
30 • ALTER TABLE patients MODIFY patient_id VARCHAR(50);
31 • ALTER TABLE doctors MODIFY doctor_id VARCHAR(50);
32 • ALTER TABLE appointments MODIFY appointment_id VARCHAR(50), MODIFY patient_id VARCHAR(50), MODIFY doctor_id VARCHAR(50);
33 • ALTER TABLE treatments MODIFY treatment_id VARCHAR(50), MODIFY appointment_id VARCHAR(50);
34 • ALTER TABLE billing MODIFY bill_id VARCHAR(50), MODIFY patient_id VARCHAR(50), MODIFY treatment_id VARCHAR(50);
35
36  -- ESTABLISHING PRIMARY KEYS
37 • ALTER TABLE patients ADD PRIMARY KEY (patient_id);
38 • ALTER TABLE doctors ADD PRIMARY KEY (doctor_id);
39 • ALTER TABLE appointments ADD PRIMARY KEY (appointment_id);
40 • ALTER TABLE treatments ADD PRIMARY KEY (treatment_id);
41 • ALTER TABLE billing ADD PRIMARY KEY (bill_id);
42
43  -- CREATING REFERENTIAL INTEGRITY (FOREIGN KEYS)
44  -- This ensures that every appointment, treatment, and bill is tied to a valid patient and doctor record.
45
46  -- Linking Appointments to Patients and Doctors
47 • ALTER TABLE appointments
48 ADD CONSTRAINT fk_appt_patient FOREIGN KEY (patient_id) REFERENCES patients(patient_id),
49 ADD CONSTRAINT fk_appt_doctor FOREIGN KEY (doctor_id) REFERENCES doctors(doctor_id);
50
51  -- Linking Treatments to Appointments
52 • ALTER TABLE treatments
53 ADD CONSTRAINT fk_treat_appt FOREIGN KEY (appointment_id) REFERENCES appointments(appointment_id);
54
55  -- Linking Billing to Patients and Treatments
56 • ALTER TABLE billing
57 ADD CONSTRAINT fk_bill_patient FOREIGN KEY (patient_id) REFERENCES patients(patient_id),
58 ADD CONSTRAINT fk_bill_treatment FOREIGN KEY (treatment_id) REFERENCES treatments(treatment_id);
59
```

FINAL ERD DIAGRAM

Relational Schema Representation

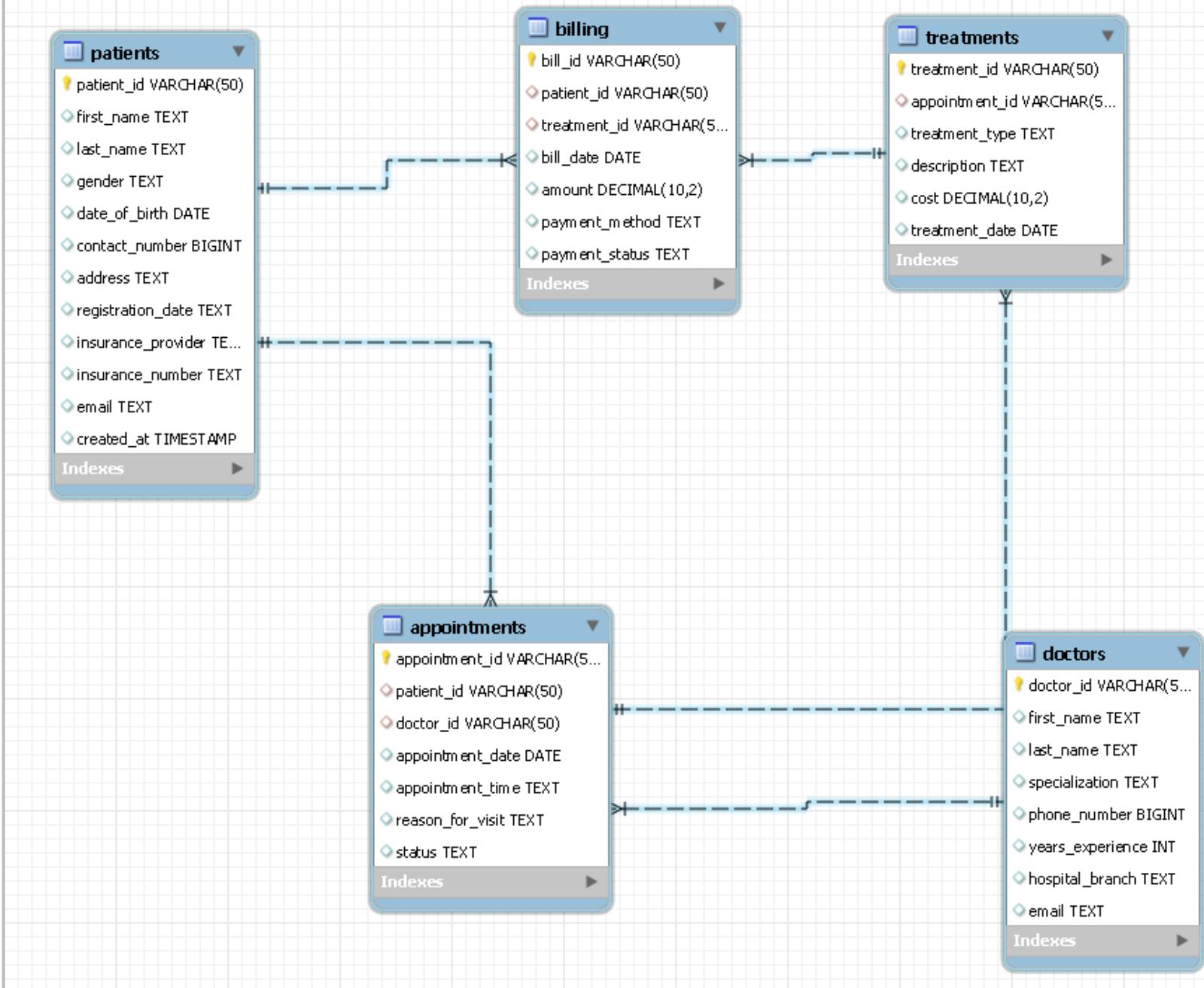
The Entity Relationship Diagram visually illustrates interconnected tables via primary and foreign keys modeling hospital workflows.

Workflow Integration

Patients, doctors, appointments, treatments, and billing entities are logically connected representing real hospital processes.

Database Robustness and Analytics

The structured schema supports reliable joins, accurate reports, and advanced analytics for clinical and financial insights.



DATA TRANSFORMATION

SQL SCRIPT: TYPE CONVERSION

```
62  -- DATA TRANSFORMATION
63  -- Converting text-based date columns into proper SQL DATE types.
64
65 • UPDATE patients SET date_of_birth = STR_TO_DATE(date_of_birth, "%Y-%m-%d");
66 • ALTER TABLE patients MODIFY COLUMN date_of_birth DATE;
67
68 • UPDATE appointments SET appointment_date = STR_TO_DATE(appointment_date, "%Y-%m-%d");
69 • ALTER TABLE appointments MODIFY COLUMN appointment_date DATE;
70
71 • UPDATE billing SET bill_date = STR_TO_DATE(bill_date, "%Y-%m-%d");
72 • ALTER TABLE billing MODIFY COLUMN bill_date DATE;
73
74 • UPDATE treatments SET treatment_date = STR_TO_DATE(treatment_date, "%Y-%m-%d");
75 • ALTER TABLE treatments MODIFY COLUMN treatment_date DATE;
76
77  -- Converting currency columns from generic types to DECIMAL(10,2).
78
79  -- Update Billing table
80 • ALTER TABLE billing
81    MODIFY COLUMN amount DECIMAL(10,2);
82
83  -- Update Treatments table
84 • ALTER TABLE treatments
85    MODIFY COLUMN cost DECIMAL(10,2);
86
87  -- Adding a timestamp to the patients table that automatically records when a new record is created.
88
89 • ALTER TABLE patients
90   ADD COLUMN created_at TIMESTAMP DEFAULT CURRENT_TIMESTAMP;
91
```

- Date Type Conversion

Converting string dates to DATE type enables accurate filtering and time-based analysis.

- Currency Precision

Currency fields use DECIMAL(10,2) to avoid rounding errors and ensure financial accuracy.

- Audit Timestamps

Added timestamps like created_at support traceability and enable trend analysis in data.

OPERATIONAL EFFICIENCY & HOSPITAL PERFORMANCE

ANALYSIS PEAK BUSY DAYS

- **Identifying Peak Days**
 - Analyse appointment data to pinpoint the busiest days of the week for patient visits and service demand.
- **Optimising Staffing and Rooms**
 - Use peak day insights to allocate staff and rooms efficiently, reducing patient wait times and improving care quality.
- **Supporting Forecasting and Planning**
 - Leverage analysis for seasonal planning and forecasting to ensure operational capacity meets patient demand effectively.

```
92    -- OPERATIONAL EFFICIENCY & HOSPITAL PERFORMANCE
93
94    -- 1. PEAK BUSY DAYS
95
96 • SELECT DAYNAME(appointment_date) AS day_of_week,
97     COUNT(*) AS total_appointments
98   FROM appointments
99   GROUP BY day_of_week
100  ORDER BY FIELD(day_of_week, 'Monday', 'Tuesday', 'Wednesday', 'Thursday', 'Friday', 'Saturday', 'Sunday');
101
```

Result Grid		Filter Rows:	Export:	Wrap Cell Content:
day_of_week	total_appointments			
Monday	26			
Tuesday	37			
Wednesday	37			
Thursday	28			
Friday	23			
Saturday	23			
Sunday	26			

ANALYSIS DOCTOR WORKLOAD

Workload Distribution

Analysing appointment distribution helps balance workloads and prevent physician burnout for better healthcare delivery.

Capacity and Recruitment

Identifying high-demand doctors supports addressing capacity issues and guides recruitment planning effectively.

Optimising Resource Use

Monitoring workload patterns allows hospitals to optimise resources and maintain high-quality patient care.

```
102    -- 2. DOCTOR WORKLOAD
103    -- Measures total appointments per doctor to prevent burnout.
104 •   SELECT CONCAT('Dr. ', d.last_name) AS doctor_name, d.specialization,
105        COUNT(a.appointment_id) AS total_patients_seen
106    FROM doctors d
107    JOIN appointments a ON d.doctor_id = a.doctor_id
108    GROUP BY d.doctor_id
109    ORDER BY total_patients_seen DESC;
```

doctor_name	specialization	total_patients_seen
Dr. Taylor	Dermatology	29
Dr. Taylor	Dermatology	25
Dr. Davis	Pediatrics	24
Dr. Smith	Pediatrics	22
Dr. Davis	Pediatrics	21
Dr. Wilson	Oncology	19
Dr. Smith	Pediatrics	17
Dr. Brown	Dermatology	16
Dr. Jones	Pediatrics	14
Dr. Davis	Oncology	13

ANALYSIS NO-SHOW IMPACT



Operational Efficiency Impact

No-shows and cancellations disrupt hospital operations and reduce efficiency in patient scheduling and resource allocation.



Quantifying Missed Appointments

Analyzing missed appointments per physician helps identify problem areas for targeted intervention and improvement.



Improving Financial Performance

Reducing no-shows through reminders or overbooking optimizes resource use and boosts hospital revenue.

```
111  -- 3. NO-SHOW IMPACT ANALYSIS
112  -- Calculates missed appointment percentages and potential revenue loss.
113 • SELECT CONCAT('Dr. ', d.last_name) AS doctor_name,
114  COUNT(a.appointment_id) AS total_scheduled,
115  SUM(CASE WHEN a.status = 'No-show' THEN 1 ELSE 0 END) AS total_no_shows,
116  ROUND((SUM(CASE WHEN a.status = 'No-show' THEN 1 ELSE 0 END) / COUNT(a.appointment_id)) * 100, 2) AS no_show_rate_percent
117  FROM doctors d
118  JOIN appointments a ON d.doctor_id = a.doctor_id
119  GROUP BY d.doctor_id
120  ORDER BY no_show_rate_percent DESC;
121
```

Result Grid				
	doctor_name	total_scheduled	total_no_shows	no_show_rate_percent
▶	Dr. Jones	14	5	35.71
	Dr. Smith	17	6	35.29
	Dr. Smith	22	7	31.82
	Dr. Taylor	29	9	31.03
	Dr. Taylor	25	7	28.00
	Dr. Wilson	19	5	26.32
	Dr. Davis	24	6	25.00
	Dr. Brown	16	4	25.00
	Dr. Davis	13	2	15.38
	Dr. Davis	21	1	4.76

ANALYSIS DEPARTMENTAL SUCCESS

```
122  -- 4. DEPARTMENTAL SUCCESS RATES
123  -- Compares completed visits versus cancellations by specialization.
124 • SELECT d.specialization,
125    SUM(CASE WHEN a.status = 'Completed' THEN 1 ELSE 0 END) AS completed_visits,
126    SUM(CASE WHEN a.status = 'Cancelled' THEN 1 ELSE 0 END) AS cancellations,
127    COUNT(a.appointment_id) AS total_volume
128  FROM doctors d
129  JOIN appointments a ON d.doctor_id = a.doctor_id
130  GROUP BY d.specialization
131  ORDER BY completed_visits DESC;
132
133
```

Result Grid | Filter Rows: | Export: | Wrap Cell Content:

specialization	completed_visits	cancellations	total_volume
Pediatrics	22	25	98
Dermatology	14	18	70
Oncology	10	8	32

Visit Completion Comparison

Comparing completed versus cancelled visits by specialisation highlights departmental performance variations.

Causes of High Cancellation

High cancellation rates suggest inefficiencies or communication gaps impacting patient scheduling.

Improvement Opportunities

Analysis enables targeted improvements, resource prioritization, and service redesign to optimize operations.

FINANCIAL & INSURANCE PERFORMANCE

```

140  -- FINANCIAL & INSURANCE PERFORMANCE
141  -- These queries analyze the hospital's cash flow, insurance pa
142
143  -- INSURANCE REVENUE STREAMS
144
145  SELECT p.insurance_provider,
146    COUNT(b.bill_id) AS total_invoices,
147    SUM(b.amount) AS total_paid_revenue
148  FROM patients p
149  JOIN billing b ON p.patient_id = b.patient_id
150  WHERE b.payment_status = 'Paid'
151  GROUP BY p.insurance_provider
152  ORDER BY total_paid_revenue DESC;

```

Result Grid | Filter Rows: Export: Wrap Cell Content:

insurance_provider	total_invoices	total_paid_revenue
MedCare Plus	29	81109.48
WellnessCorp	19	45882.28
PulseSecure	13	38486.63
HealthIndia	3	7946.51

INSURANCE REVENUE STREAMS

Ranking Insurance Providers

The analysis ranks insurers by total payments and claim counts to identify major revenue sources.

Revenue Contribution Insights

Understanding payer mix helps hospitals manage contracts and reimbursement strategies effectively.

Financial Planning Support

Insights from insurer data assist in financial planning and risk management for hospitals.

AGING ACCOUNTS RECEIVABLE



Importance of Tracking Overdue Bills

Monitoring bills older than 30 days helps manage outstanding debt effectively and improve collection rates.



Prioritising Follow-Up Actions

The report helps prioritise accounts for follow-up to reduce aging receivables and enhance cash flow.



Mitigating Financial Risk

Hospitals can mitigate financial risks by closely monitoring overdue accounts and maintaining strong revenue cycles.

```
154    -- AGING ACCOUNTS RECEIVABLE
155
156 •  SELECT p.first_name, p.last_name, p.contact_number, b.amount AS pending_amount,
157     DATE_FORMAT(b.bill_date, '%d-%m-%Y') AS bill_date
158   FROM billing b
159   JOIN patients p ON b.patient_id = p.patient_id
160 WHERE b.payment_status = 'Pending'
161     AND b.bill_date < DATE_SUB(CURDATE(), INTERVAL 30 DAY)
162 ORDER BY b.bill_date ASC;
163
164    -- 3. TREATMENT PROFITABILITY
```

first_name	last_name	contact_number	pending_amount	bill_date
Alex	Moore	7028910482	894.39	05-01-2023
Michael	Taylor	8019925828	3729.19	06-01-2023
Michael	Wilson	7923214041	4833.17	08-01-2023
Emily	Miller	8720989381	2593.43	11-01-2023
John	Taylor	9900972256	956.39	15-01-2023
Jane	Jones	6158428240	4652.41	17-01-2023
Emily	Smith	8228188767	3615.96	20-01-2023
Michael	Wilson	7765390555	3428.95	24-01-2023
Michael	Taylor	7223380592	2512.41	28-01-2023
Emily	Williams	7587653815	2761.55	03-02-2023
Laura	Davis	8135666049	4019.13	05-02-2023
David	Smith	8923607677	1882.80	06-02-2023
Sarah	Brown	7196777444	1565.92	12-02-2023
Linda	Moore	8724518272	806.78	13-02-2023
David	Smith	8923607677	857.39	14-02-2023
Jane	Smith	7040069008	2293.98	26-02-2023
Linda	Moore	8724518272	929.91	09-03-2023
Laura	Johnson	9059178882	3492.10	16-03-2023
Michael	Wilson	8545613046	4781.32	21-03-2023
Laura	Davis	7060324619	1158.68	21-03-2023
David	Williams	6939585183	975.49	01-04-2023

TREATMENT PROFITABILITY

```
164  -- TREATMENT PROFITABILITY
165
166 • SELECT t.treatment_type,
167     COUNT(t.treatment_id) AS frequency,
168     SUM(b.amount) AS total_revenue,
169     ROUND(AVG(b.amount), 2) AS avg_revenue_per_treatment
170   FROM treatments t
171   JOIN billing b ON t.treatment_id = b.treatment_id
172   WHERE b.payment_status = 'Paid'
173   GROUP BY t.treatment_type
174   ORDER BY total_revenue DESC;
175
```

Result Grid				
	treatment_type	frequency	total_revenue	avg_revenue_per_treatment
▶	X-Ray	17	47978.78	2822.28
	MRI	14	43064.42	3076.03
	Chemotherapy	13	32607.26	2508.25
	Physiotherapy	11	32251.38	2931.94
	ECG	9	17523.06	1947.01

Revenue Analysis by Treatment

Reviewing income streams from different treatments highlights the most profitable medical services offered.

Strategic Resource Allocation

Data-driven insights support better pricing, staff deployment, and equipment investment decisions.

Optimising Service Mix

Identifying high-margin procedures helps hospitals refine services to maximize overall profitability.

PATIENT & CLINICAL INSIGHTS

PATIENT RETENTION (LOYALTY)

Targeted Care Management

Frequent-visit patients with chronic conditions provide opportunities for personalized, targeted care management.

Resource Allocation

Identifying frequent patients helps hospitals allocate resources more effectively to improve care quality.

Proactive Engagement

Proactive patient engagement and continuity of care enhance long-term health outcomes for loyal patients.

```
188  -- PATIENT & CLINICAL INSIGHTS
189  -- Focuses on patient demographics and long-term care needs to improve clinical outcomes and marketing.
190
191  -- PATIENT RETENTION
192
193 • SELECT p.patient_id,
194    CONCAT(p.first_name, ' ', p.last_name) AS patient_name,
195    COUNT(a.appointment_id) AS visit_count, p.email
196    FROM patients p
197    JOIN appointments a ON p.patient_id = a.patient_id
198    GROUP BY p.patient_id
199    HAVING visit_count > 3
200    ORDER BY visit_count DESC;
201
```

Result Grid			
patient_id	patient_name	visit_count	email
P012	Laura Davis	10	laura.davis@mail.com
P005	David Wilson	8	david.wilson@mail.com
P016	Michael Taylor	7	michael.taylor@mail.com
P029	David Smith	7	david.smith@mail.com
P035	David Wilson	7	david.wilson@mail.com
P036	Michael Wilson	7	michael.wilson@mail.com
P049	David Moore	7	david.moore@mail.com
P010	Michael Taylor	6	michael.taylor@mail.com
P023	Linda Johnson	6	linda.johnson@mail.com
P026	John Taylor	6	john.taylor@mail.com
P037	Robert Williams	6	robert.williams@mail.com
P019	Sarah Miller	5	sarah.miller@mail.com
P025	Robert Wilson	5	robert.wilson@mail.com
P032	Alex Moore	5	alex.moore@mail.com
P030	Jane Wilson	5	jane.wilson@mail.com

AGE GROUP DEMOGRAPHICS

Patient Age Segmentation

Patients are categorised into Pediatric, Adult, and Senior groups to better understand demographic needs and trends.

Resource and Staff Allocation

Segmented demographics guide effective allocation of staff and resources tailored to each age group's needs.

Strategic Clinical Planning

Age demographics analysis supports forecasting future healthcare demand and informs strategic clinical decisions.

```
202 -- AGE GROUP DEMOGRAPHICS
203
204 • SELECT CASE
205   WHEN (YEAR(CURDATE()) - YEAR(date_of_birth)) < 18 THEN 'Pediatric'
206   WHEN (YEAR(CURDATE()) - YEAR(date_of_birth)) BETWEEN 18 AND 60 THEN 'Adult (18-60)'
207   ELSE 'Senior (60+)' END AS age_category,
208   COUNT(*) AS patient_count
209   FROM patients
210   GROUP BY age_category;
211
```

Result Grid		Filter Rows:	Export:	Wrap Cell Content:
	age_category	patient_count		
▶	Senior (60+)	10		
	Adult (18-60)	40		

GENDER DISTRIBUTION



Equitable Care and Staffing

Analysing gender distribution ensures fair staffing and equitable care in various medical specializations.



Aligning Services with Demographics

Gender insights help hospitals tailor services to meet diverse patient needs effectively.



Supporting Diversity and Inclusion

Gender-based analysis supports compliance with diversity and inclusion goals in healthcare.

```
223      -- GENDER DISTRIBUTION BY SPECIALISATION
224      -- Helps determine if certain departments (like OBGYN or Urology) if need more gender-specific medical staff.
225
226 •   SELECT d.specialization, p.gender,
227     COUNT(*) AS patient_count
228   FROM patients p
229   JOIN appointments a ON p.patient_id = a.patient_id
230   JOIN doctors d ON a.doctor_id = d.doctor_id
231   GROUP BY d.specialization, p.gender
232   ORDER BY d.specialization;
```

Result Grid | Filter Rows: Export: Wrap Cell Content:

	specialization	gender	patient_count
▶	Dermatology	F	23
	Dermatology	M	47
	Oncology	F	12
	Oncology	M	20
	Pediatrics	F	35
	Pediatrics	M	63

STRATEGIC PLANNING & QUALITY CONTROL

```
234    -- STRATEGIC PLANNING & QUALITY CONTROL
235    -- These queries focus on hospital growth, doctor-to-patient ratios, and potential revenue leakages.
236
237    -- DOCTOR-PATIENT RATIO BY SPECIALIZATION
238    -- Helps determine if you need to hire more doctors for a specific wing.
239 •   SELECT d.specialization,
240        COUNT(DISTINCT a.patient_id) AS unique_patients,
241        COUNT(DISTINCT d.doctor_id) AS total_doctors,
242        ROUND(COUNT(DISTINCT a.patient_id) / COUNT(DISTINCT d.doctor_id), 1) AS patients_per_doctor
243        FROM doctors d
244        JOIN appointments a ON d.doctor_id = a.doctor_id
245        GROUP BY d.specialization
246        ORDER BY patients_per_doctor DESC;
247
```

Result Grid			
specialization	unique_patients	total_doctors	patients_per_doctor
Dermatology	37	3	12.3
Oncology	22	2	11.0
Pediatrics	47	5	9.4

DOCTOR–PATIENT RATIO

Measuring Patient Load

Tracking unique patients per doctor by specialisation reveals workload and capacity pressures in healthcare settings.

Staffing Implications

High doctor–patient ratios may require additional hires or schedule adjustments to maintain care quality.

Quality Care and Burnout Prevention

Managing doctor–patient ratios helps prevent physician burnout and ensures consistent quality care.

UNBILLED TREATMENTS (REVENUE LEAKAGE)

Identifying Unbilled Treatments

Detecting treatments not billed is crucial for protecting hospital revenue and closing financial gaps.

Process Gaps in Billing Workflow

The audit query helps uncover inefficiencies in the treatment-to-billing workflow to prevent revenue loss.

Improving Profitability and Compliance

Addressing revenue leakage enhances hospital profitability and ensures regulatory compliance.

```
248  -- UNBILLED TREATMENTS
249  -- Finds treatments that were performed but do not have a corresponding bill.
250  -- This is critical for preventing revenue loss.
251 • SELECT t.treatment_id, t.treatment_type, t.treatment_date, p.first_name, p.last_name
252  FROM treatments t
253  LEFT JOIN billing b ON t.treatment_id = b.treatment_id
254  JOIN appointments a ON t.appointment_id = a.appointment_id
255  JOIN patients p ON a.patient_id = p.patient_id
256  WHERE b.bill_id IS NULL;
```

Result Grid				
treatment_id	treatment_type	treatment_date	first_name	last_name

```
212      -- TREATMENT RECURRENCE
213      -- Tracks the average number of visits per patient for specific treatments.
214 •   SELECT t.treatment_type,
215          COUNT(t.treatment_id) AS total_procedures,
216          COUNT(DISTINCT a.patient_id) AS unique_patients,
217          ROUND(COUNT(t.treatment_id) / COUNT(DISTINCT a.patient_id), 1) AS visits_per_patient
218      FROM treatments t
219      JOIN appointments a ON t.appointment_id = a.appointment_id
220      GROUP BY t.treatment_type
221      ORDER BY visits_per_patient DESC;
222
```

Result Grid | Filter Rows: | Export: | Wrap Cell Content:

treatment_type	total_procedures	unique_patients	visits_per_patient
MRI	36	22	1.6
Physiotherapy	36	23	1.6
Chemotherapy	49	32	1.5
X-Ray	41	28	1.5
ECG	38	31	1.2

TREATMENT RECURRENCE

Measuring Treatment Recurrence

Tracking repeated treatments per patient reveals patterns in clinical effectiveness and helps identify overuse or inefficiencies.

Implications of High Recurrence

High recurrence rates may indicate the need to review treatment protocols or consider alternative therapies for better outcomes.

Supporting Quality Improvement

Analyzing treatment recurrence data aids in quality improvement initiatives and supports long-term healthcare planning.