

| ACCOUNT | | | |
|---------|-----------------|--------------|------------|
| | Field | Type | Extra |
| P | BANK_ACCOUNT_NO | VARCHAR2(50) | |
| | BANK_NAME | VARCHAR2(50) | Allow Null |
| P | PEOPLE_ID | NUMBER | |
| | BALANCE | NUMBER | Allow Null |

| APPOINTMENT | | | |
|-------------|----------------|---------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | APPOINTED_DATE | DATE | Allow Null |
| | PEOPLE_ID | NUMBER | |
| | DOCTOR_ID | NUMBER | |
| | ACCEPTED | CHAR(1) | Allow Null |
| | REASON | VARCHAR2(256) | Allow Null |

| BED_ROOM | | | |
|----------|---------|--------|-------|
| | Field | Type | Extra |
| P | ROOM_ID | NUMBER | |

| BOOK_ISSUE | | | |
|------------|-------------|--------|------------|
| | Field | Type | Extra |
| P | BOOK_ID | NUMBER | |
| P | PEOPLE_ID | NUMBER | |
| | ISSUE_DATE | DATE | Allow Null |
| | RETURN_DATE | DATE | Allow Null |
| | COST | NUMBER | Allow Null |

| BOOKS | | | |
|-------|----------|--------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | NAME | VARCHAR2(30) | |
| | GENRE | VARCHAR2(30) | Allow Null |
| | LANGUAGE | VARCHAR2(30) | Allow Null |

| COMMON_ROOM | | | |
|-------------|---------|--------|-------|
| | Field | Type | Extra |
| P | ROOM_ID | NUMBER | |

| CONNECTION | | | |
|------------|--------------|--------------|------------|
| | Field | Type | Extra |
| P | PEOPLE_ID | NUMBER | |
| P | CONTACT_ID | NUMBER | |
| | RELATIONSHIP | VARCHAR2(50) | Allow Null |

| CONTACT | | | |
|---------|----------|---------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | NAME | VARCHAR2(50) | |
| | PHONE_NO | VARCHAR2(15) | Allow Null |
| | ADDRESS | VARCHAR2(100) | Allow Null |

| CONTAINS_BOOKS | | | |
|----------------|---------|--------|-------|
| | Field | Type | Extra |
| P | ROOM_ID | NUMBER | |
| P | BOOK_ID | NUMBER | |

| CURES |
|-------|
|-------|

| | Field | Type | Extra |
|---|-------------|--------|-------|
| P | DISEASE_ID | NUMBER | |
| P | MEDICINE_ID | NUMBER | |

| DELETED_DOCTOR |
|----------------|
|----------------|

| | Field | Type | Extra |
|--|---------------|----------------|------------|
| | ID | NUMBER | Allow Null |
| | NAME | VARCHAR2 (50) | Allow Null |
| | QUALIFICATION | VARCHAR2 (150) | Allow Null |
| | HOSPITAL_NAME | VARCHAR2 (50) | Allow Null |
| | PHONE_NO | VARCHAR2 (15) | Allow Null |
| | EMAIL_ADDRESS | VARCHAR2 (30) | Allow Null |
| | FEE | NUMBER (8,2) | Allow Null |
| | DELETED_ON | DATE | Allow Null |

| DELETED_PEOPLE |
|----------------|
|----------------|

| | Field | Type | Extra |
|--|------------|---------------|------------|
| | ID | NUMBER | Allow Null |
| | NAME | VARCHAR2 (50) | Allow Null |
| | GENDER | VARCHAR2 (20) | Allow Null |
| | BIRTHDAY | DATE | Allow Null |
| | PHONE_NO | VARCHAR2 (15) | Allow Null |
| | DELETED_ON | DATE | Allow Null |

| DELETED_STAFF |
|---------------|
|---------------|

| | Field | Type | Extra |
|--|------------|---------------|------------|
| | ID | NUMBER | Allow Null |
| | NAME | VARCHAR2 (50) | Allow Null |
| | BIRTHDATE | DATE | Allow Null |
| | SALARY | NUMBER (8,2) | Allow Null |
| | DELETED_ON | DATE | Allow Null |

| DIAGNOSED_BY |
|--------------|
|--------------|

| | Field | Type | Extra |
|---|-----------|--------|-------|
| P | PEOPLE_ID | NUMBER | |
| P | DOCTOR_ID | NUMBER | |

| DINING_ROOM |
|-------------|
|-------------|

| | Field | Type | Extra |
|---|---------|--------|-------|
| P | ROOM_ID | NUMBER | |

| DISEASE |
|---------|
|---------|

| | Field | Type | Extra |
|---|-------|---------------|-------|
| P | ID | NUMBER | |
| | NAME | VARCHAR2 (30) | |

| DOCTOR |
|--------|
|--------|

| | Field | Type | Extra |
|---|---------------|----------------|------------|
| P | ID | NUMBER | |
| | NAME | VARCHAR2 (50) | |
| | QUALIFICATION | VARCHAR2 (150) | |
| | HOSPITAL_NAME | VARCHAR2 (50) | |
| | PHONE_NO | VARCHAR2 (15) | Allow Null |
| | EMAIL_ADDRESS | VARCHAR2 (30) | Allow Null |
| | FEE | NUMBER (8,2) | Allow Null |

| DONATION | | |
|---------------|----------------|------------|
| Field | Type | Extra |
| NAME | VARCHAR2(50) | Allow Null |
| PHONE_NO | VARCHAR2(15) | Allow Null |
| SOURCE | VARCHAR2(50) | Allow Null |
| SUGGESTIONS | VARCHAR2(1000) | Allow Null |
| AMOUNT | NUMBER | Allow Null |
| TRX_ID | VARCHAR2(50) | Allow Null |
| DONATING_DATE | DATE | Allow Null |

| EMERGENCY_DOCTORS | | |
|-------------------|--------|-------|
| Field | Type | Extra |
| P ROOM_ID | NUMBER | |
| P DOCTOR_ID | NUMBER | |
| P PEOPLE_ID | NUMBER | |

| EMERGENCY_ROOM | | |
|----------------|--------|-------|
| Field | Type | Extra |
| P ROOM_ID | NUMBER | |

| FOOD | | |
|-----------|--------------|------------|
| Field | Type | Extra |
| P ID | NUMBER | |
| NAME | VARCHAR2(30) | |
| FOOD_TYPE | VARCHAR2(30) | |
| COST | NUMBER(8,2) | Allow Null |

| GAME | | |
|-------|--------------|-------|
| Field | Type | Extra |
| P ID | NUMBER | |
| TITLE | VARCHAR2(20) | |

| GAME_FACILITIES | | |
|-----------------|--------|-------|
| Field | Type | Extra |
| P ROOM_ID | NUMBER | |
| P GAME_ID | NUMBER | |

| GAME_FAVORITES | | |
|----------------|--------|-------|
| Field | Type | Extra |
| P PEOPLE_ID | NUMBER | |
| P GAME_ID | NUMBER | |

| HEALTH_RECORD | | |
|------------------|---------------|------------|
| Field | Type | Extra |
| P ID | NUMBER | |
| PEOPLE_ID | NUMBER | |
| HEIGHT | VARCHAR2(10) | Allow Null |
| WEIGHT | VARCHAR2(10) | Allow Null |
| BLOOD_GROUP | VARCHAR2(10) | |
| VACCINE | VARCHAR2(150) | Allow Null |
| DISABILITY | VARCHAR2(150) | Allow Null |
| HEALTH_CONDITION | VARCHAR2(200) | Allow Null |
| ALLERGY | VARCHAR2(150) | Allow Null |

| LIBRARY_ROOM | | |
|--------------|--------|-------|
| Field | Type | Extra |
| P ROOM_ID | NUMBER | |

| MEDICINE | | | |
|----------|-------|--------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | NAME | VARCHAR2(20) | |
| | COST | NUMBER(8,2) | Allow Null |

| MEMBERSHIP | | | |
|------------|-----------------|--------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | MEMBERSHIP_TYPE | VARCHAR2(20) | Allow Null |
| | YEARLY_CHARGE | NUMBER(8,2) | Allow Null |

| MENU | | | |
|------|---------|--------|-------|
| | Field | Type | Extra |
| P | ROOM_ID | NUMBER | |
| P | FOOD_ID | NUMBER | |

| MOVIE | | | |
|-------|-------|--------------|-------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | TITLE | VARCHAR2(20) | |

| MOVIE_FACILITIES | | | |
|------------------|----------|--------|-------|
| | Field | Type | Extra |
| P | ROOM_ID | NUMBER | |
| P | MOVIE_ID | NUMBER | |

| MOVIE_FAVORITES | | | |
|-----------------|-----------|--------|-------|
| | Field | Type | Extra |
| P | PEOPLE_ID | NUMBER | |
| P | MOVIE_ID | NUMBER | |

| PEOPLE | | | |
|--------|----------|--------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | NAME | VARCHAR2(50) | |
| | GENDER | VARCHAR2(20) | |
| | BIRTHDAY | DATE | Allow Null |
| | PHONE_NO | VARCHAR2(15) | Allow Null |

| PRESCRIPTION | | | |
|--------------|------------------|--------|-------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| P | PRESCRIBING_DATE | DATE | |
| P | PEOPLE_ID | NUMBER | |
| | DOCTOR_ID | NUMBER | |
| P | MEDICINE_ID | NUMBER | |

| ROOM | | | |
|------|----------|--------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | CAPACITY | VARCHAR2(30) | Allow Null |

| ROOM_ALLOTMENT | | | |
|----------------|-----------|--------|-------|
| | Field | Type | Extra |
| P | ROOM_ID | NUMBER | |
| P | PEOPLE_ID | NUMBER | |

| SONG | | | |
|------|-------|---------------|-------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | TITLE | VARCHAR2 (20) | |

| SONG_FACILITIES | | | |
|-----------------|---------|--------|-------|
| | Field | Type | Extra |
| P | ROOM_ID | NUMBER | |
| P | SONG_ID | NUMBER | |

| SONG_FAVORITES | | | |
|----------------|-----------|--------|-------|
| | Field | Type | Extra |
| P | PEOPLE_ID | NUMBER | |
| P | SONG_ID | NUMBER | |

| STAFF | | | |
|-------|-----------|---------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | NAME | VARCHAR2 (50) | |
| | BIRTHDATE | DATE | Allow Null |
| | SALARY | NUMBER (8,2) | Allow Null |

| STAFF_SCHEDULE | | | |
|----------------|----------------|---------------|------------|
| | Field | Type | Extra |
| P | DAY | VARCHAR2 (20) | |
| P | STAFF_ID | NUMBER | |
| | REPORTING_TIME | VARCHAR2 (20) | Allow Null |
| | LEAVING_TIME | VARCHAR2 (20) | Allow Null |
| P | ROOM_ID | NUMBER | |

| SUBSCRIPTION | | | |
|--------------|---------------|--------|------------|
| | Field | Type | Extra |
| P | PEOPLE_ID | NUMBER | |
| P | MEMBERSHIP_ID | NUMBER | |
| | STARTING_DATE | DATE | Allow Null |

| SUFFER_FROM | | | |
|-------------|------------|--------|-------|
| | Field | Type | Extra |
| P | PEOPLE_ID | NUMBER | |
| P | DISEASE_ID | NUMBER | |

| TAKES_MEDICINE | | | |
|----------------|-------------|---------------|-------|
| | Field | Type | Extra |
| P | PEOPLE_ID | NUMBER | |
| P | MEDICINE_ID | NUMBER | |
| P | TIME | VARCHAR2 (30) | |

| TRANSACTIONS | | | |
|--------------|-----------------|-----------------|------------|
| | Field | Type | Extra |
| P | ID | NUMBER | |
| | BANK_ACCOUNT_NO | VARCHAR2 (50) | |
| | PEOPLE_ID | NUMBER | |
| | TRX_TYPE | VARCHAR2 (50) | Allow Null |
| | DETAILS | VARCHAR2 (1000) | Allow Null |
| | TRX_DATE | DATE | Allow Null |
| | AMOUNT | NUMBER | Allow Null |
| | IN_OUT | VARCHAR2 (10) | Allow Null |

| USERS | | |
|-----------------|----------------|------------|
| Field | Type | Extra |
| ID | NUMBER | Allow Null |
| USERNAME | VARCHAR2 (50) | |
| HASHED_PASSWORD | VARCHAR2 (256) | |
| ROLE | VARCHAR2 (10) | Allow Null |