

The Maharaja Sayajirao University

Faculty Of Technology & Engineering

Computer Science and Engineering

DMS PROJECT REPORT

Hospital management System - Care Foundation

Submitted By:

Class: SS-BE-II-CSE

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Abstraction

Care Foundation runs a bunch of healthcare centers, each looked after by a boss called the Medical Director. When people visit their regular doctors, those doctors might suggest they go to one of these centers for treatment, either staying overnight or just visiting during the day. Sometimes, people need help taking care of themselves at home, so they can stay at these centers instead. Everything that happens during a patient's time at the center, like appointments, treatments, and leaving, is carefully recorded.

When someone needs to stay at the center, they go through a process where the staff assesses how much help they need. Then, they're put on a list based on how much help they need, and when a spot opens up, they get in. Some of the costs might be paid by the government. When someone's ready to leave, the staff might help set them up with more help if they need it, like moving to a nursing home.

The people who work at the centers, like doctors, nurses, and office staff, all have their jobs carefully planned out to make sure everything runs smoothly. By keeping detailed records, the centers can make sure everyone gets the same good care and figure out how to make things even better.

Residential care at Care Foundation includes a formal admissions procedure, which frequently consists of facility visits and evaluations to assess the level of need. Applicants are assigned priority codes based on their care needs, which are used to manage waiting lists for beds that become available. Financial evaluations determine funding origins, with certain expenses being taken care of by municipal entities. Discharge plans may require working with outside organizations, especially when patients move to nursing homes. Staffing involves a combination of employees on salary and workers paid by the hour, carefully assigned according to patient requirements and operational needs to guarantee the best service provision.

Effective operations depend on strong staffing plans and careful record-keeping procedures. Care Foundation has a varied staff that includes doctors, nurses, administrative staff, and support personnel, all playing a role in the efficient operation of care centers. The organization's focus on thorough patient records supports consistency in treatment, allowing healthcare providers to monitor patient improvement from admission to discharge through various appointments. This method guarantees that patients get uniform, top-notch treatment, and allows Care Foundation to improve how resources are allocated and how operations are efficient.

LIST OF TABLE

- 1. WARD
- 2. COURSE_OF_DRUG_DETAIL
- 3. ADMIT_DETAIL
- 4. APPOINTMENT
- 5. RESIDENTAL_ROOM
- 6. PATIENT_MAIN
- **7. SHIFT**
- 8. CONTACT_DETAIL
- 9. TREATMENT
- 10. CARE_CENTER
- 11. PATIENT_DEPENDENT
- 12. BED
- 13. MEDICAL_DIRECTOR
- 14. DOCTOR
- **15. NURSE**
- 16. ADMINISTRATIVE_STAFF
- 17. ANCILLARY
- 18. CLEANER
- 19. PORTER
- 20. GENERAL_PRACTITIONER
- 21. INPATIENT
- 22. OUTPATIENT
- 23. TREATMENT_ACTIVITY
- 24. DOCTOR_SHIFT
- 25. NURSE_SHIFT
- 26. ASSIGN_DOCTOR
- 27.ASSIGN_NURSE
- 28.OUTSIDE_AGENCY
- 29.WAITING_LIST

SHORT DESCRIPTION

1. Treatment and Care Centres:

- Each care centre has a Medical Director overseeing operations.
- Patients are referred by their general practitioner and treated as in-patients or out-patients.
- Hospitals provide in-home care for patients unable to care for themselves.
- Treatment plans may include drug regimens, testing sessions, and therapy.
- There are waiting lists for appointments and beds, which need to be managed.

2. Residential Treatment:

- Long-term care beds have a priority system and waiting lists.
- Charges may be covered by local government depending on financial situation.
- The source of payment is verified before admitting a patient as a resident.

3. Discharge Plans:

- External organizations may need to be notified upon patient discharge.
- Some patients may become residents instead of returning home.

4. Staffing:

- Staff includes medical professionals, nurses, administrative staff, porters, and cleaners.
- Different holiday and pension rights for salaried and hourly employees.
- Most employees work shifts, with specific requirements for nursing and ancillary staff.
- The new system aims to simplify roster creation.

5. Medical Records and Fees:

- Patient information, treatment plans, and prescription history must be maintained.
- The patient's journey from admission to discharge should be tracked comprehensively.

Assumptions

- 1. Patient Residential Room (One-to-One): Each patient may be assigned to one residential room, and each residential room is assigned to one patient at a time.
- 2. Patient Care Center (Many-to-Many): Patients receive care at care centers, and each care center serves multiple patients. Conversely, each patient may receive care from multiple care centers over time.
- 3. Treatment Course of Drug Detail (One-to-Many): A treatment may consist of multiple courses of drugs, but each course of drug detail belongs to only one treatment.
- 4. Patient Appointment (One-to-Many): Patients may have multiple appointments for treatments, but each appointment is associated with only one patient.
- 5. Patient Admit Detail (One-to-Many): Patients may have multiple admission details (e.g., multiple admissions to the hospital), but each admission detail corresponds to one patient.
- 6. Doctor & Nurse Shift (Many-to-Many): Each Doctor & Nurse member may work multiple shifts, and each shift may be worked by multiple Doctor & Nurse members.
- 7. Ward Bed (One-to-Many): Each ward may contain multiple beds, but each bed belongs to only one ward.
- 8. Care Center Medical Director (One-to-One): Each care center has exactly one medical director, and each medical director is responsible for only one care center.
- 9. Doctor Patient (Many-to-Many): Doctors may treat multiple patients, and each patient may be treated by multiple doctors.
- 10. Nurse Patient (Many-to-Many): Nurses may care for multiple patients, and each patient may be cared for by multiple nurses.
- 11. Patient Outside Agency (Many-to-Many): Patients may interact with multiple outside agencies, and each outside agency may be involved with multiple patients.
- 12. Patient Waiting List (One-to-Many): Each patient may be on multiple waiting lists, but each waiting list contains only one patient.

Functions & Procedures

Function check todays appointment:

- > Takes a patient name as input.
- > Retrieves the patient's number based on the provided name.
- > Searches for appointments scheduled for the current day for the identified patient.
- ➤ Returns appointment information if found, or appropriate messages if no appointments are found or if an error occurs.

Function generate patient id:

- > Generates a unique patient ID based on the current date and existing patient records.
- ➤ It constructs the ID by concatenating the current date (in MMDDYYYY format) with a sequence number.
- ➤ Handles exceptions if any errors occur during the process.

Function get next contact id:

- Retrieves the next available contact ID from the contact detail table.
- ➤ If the table is empty, it starts with ID 1.
- ➤ Handles exceptions if any errors occur during the process.

Function get next patient dependent id:

- Retrieves the next available patient dependent ID from the patient dependent table.
- ➤ If the table is empty, it starts with ID 1.
- ➤ Handles exceptions if any errors occur during the process.

Procedure insert patient details:

- Inserts patient details, contact details, and dependent details into their respective tables.
- ➤ Utilizes the previously defined functions to generate IDs.
- ➤ Commits the transaction if successful, or rolls back and displays an error message if an exception occurs.

Procedure display patient details:

- ➤ Displays comprehensive patient details including patient information, contact details, and dependent details.
- Retrieves the details by joining multiple tables (patient_main, contact_detail, and patient dependent) based on the provided patient name.
- ➤ Utilizes exception handling to manage cases where no data is found or if an error occurs during the process.
- ➤ Overall, this package body provides functionality for managing patient appointments, generating patient IDs, retrieving contact IDs, managing patient-dependent IDs, inserting patient details, and displaying comprehensive patient information.

Packages & Specifications

Package Specification:

This is a package body in PL/SQL named hospital_management, which likely forms part of a hospital management system.

Function check todays appointment:

Takes a patient name as input.

Retrieves the patient's number based on the provided name.

Searches for appointments scheduled for the current day for the identified patient.

Returns appointment information if found, or appropriate messages if no appointments are found or if an error occurs.

Function generate patient id:

Generates a unique patient ID based on the current date and existing patient records.

It constructs the ID by concatenating the current date (in MMDDYYYY format) with a sequence number.

Handles exceptions if any errors occur during the process.

Function get next contact id:

Retrieves the next available contact ID from the contact detail table.

If the table is empty, it starts with ID 1.

Handles exceptions if any errors occur during the process.

Function get next patient dependent id:

Retrieves the next available patient dependent ID from the patient dependent table.

If the table is empty, it starts with ID 1.

Handles exceptions if any errors occur during the process.

Procedure insert patient details:

Inserts patient details, contact details, and dependent details into their respective tables.

Utilizes the previously defined functions to generate IDs.

Commits the transaction if successful, or rolls back and displays an error message if an exception occurs.

Procedure display patient details:

Displays comprehensive patient details including patient information, contact details, and dependent details.

Retrieves the details by joining multiple tables (patient_main, contact_detail, and patient_dependent) based on the provided patient name.

Utilizes exception handling to manage cases where no data is found or if an error occurs during the process.

Overall, this package body provides functionality for managing patient appointments, generating patient IDs, retrieving contact IDs, managing patient-dependent IDs, inserting patient details, and displaying comprehensive patient information.

Code:

```
CREATE OR REPLACE PACKAGE BODY hospital management AS
     function check todays appointment (p patient name IN VARCHAR2)
    RETURN VARCHAR2
   v patient no INTEGER;
   v appointment info VARCHAR2 (255);
    -- Get the patient's number based on the given name
    SELECT patient no INTO v patient no
    FROM patient main
   WHERE first name || ' ' || middle name || ' ' || last name = p patient name;
    -- Check for appointments scheduled for today
    SELECT appointment_no || ', ' || degree_of_care || ', ' ||
TO CHAR (appointment date, 'DD-MON-YYYY') || ', ' || TO_CHAR (appointment_time,
'HH24:MI:SS')
    INTO v appointment info
   FROM appointment
   WHERE fk1 outpatient id = v patient no
   AND TRUNC(appointment date) = TRUNC(SYSDATE);
   RETURN v appointment info;
EXCEPTION
   WHEN NO DATA FOUND THEN
       RETURN 'No appointments found for today.';
    WHEN OTHERS THEN
       RETURN 'Error occurred while checking appointments.';
END check todays appointment;
    FUNCTION generate patient id
    RETURN NUMBER
    v date part VARCHAR2(8);
   v seq number NUMBER;
   v_patient_id NUMBER;
    -- Get the current date in the format MMDDYYYY
    v date part := TO CHAR(SYSDATE, 'MMDDYYYY');
    -- Get the count of existing patient records for the current date
```

```
SELECT COUNT(*) INTO v_seq_number
    FROM patient main
    WHERE TO CHAR (date of birth, 'MMDDYYYY') = v date part;
    -- Increment the count by 1 to get the next patient ID
    v_seq_number := v_seq_number + 1;
    -- Concatenate date part and sequence number to form the patient ID
    v patient id := TO NUMBER(v date part || LPAD(v seq number, 1, '0'));
   RETURN v patient id;
END generate patient id;
    FUNCTION get next_contact_id
    RETURN NUMBER
TS
    v last id NUMBER;
   v_next_id NUMBER;
BEGIN
    -- Get the last ID from the contact detail table
    SELECT MAX(contact id) INTO v last id FROM contact detail;
    -- Increment by 1 to get the next ID
   v next id := v last id + 1;
   RETURN v_next_id;
EXCEPTION
   WHEN NO DATA FOUND THEN
       -- If the table is empty, start with ID 1
       RETURN 1;
    WHEN OTHERS THEN
       RETURN -1; -- Return -1 for any errors
END get next contact id;
    FUNCTION get next patient dependent id RETURN NUMBER IS
       v dependent id NUMBER;
    BEGIN
       -- Your implementation for get next patient dependent id function goes
here
       RETURN v dependent id;
    END get next patient dependent id;
    PROCEDURE display patient details (
   p patient name IN VARCHAR2
)
TS
   v patient id INTEGER;
BEGIN
    -- Get the patient's ID based on the given name
    SELECT patient_no INTO v_patient_id
   FROM patient main
   WHERE first name || ' ' || middle_name || ' ' || last_name = p_patient_name;
    -- Display patient details using inner join
    DBMS_OUTPUT.PUT_LINE('Patient Details:');
    FOR patient rec IN (
       SELECT pm.patient no, pm.first name, pm.middle name, pm.last name,
pm.date of birth, pm.gender, pm.blood group,
```

```
pm.source payment, cd.contact id, cd.telephone, cd.address line1,
cd.address line2,
               pd.patient dependent id, pd.first name AS dependent first name,
pd.middle name AS dependent middle name,
               pd.last name AS dependent last name, pd.address line1 AS
dependent address line1,
               pd.address line2 AS dependent address line2, pd.area name AS
dependent area name, pd.telephone AS dependent telephone
        FROM patient main pm
        INNER JOIN contact detail cd ON pm.patient no = cd.fk1 patient no
        INNER JOIN patient dependent pd ON pm.patient no = pd.fk1 patient no
       WHERE pm.patient no = v patient id
    ) LOOP
        DBMS_OUTPUT.PUT_LINE('Patient ID: ' || patient_rec.patient_no);
        DBMS_OUTPUT.PUT_LINE('First Name: ' || patient_rec.first_name);
        DBMS OUTPUT.PUT LINE('Middle Name: ' || patient rec.middle name);
        DBMS_OUTPUT_LINE('Last Name: ' || patient_rec.last_name);
        DBMS OUTPUT.PUT LINE('Date of Birth: ' ||
TO CHAR (patient rec.date of birth, 'DD-MON-YYYY'));
        DBMS OUTPUT.PUT LINE('Gender: ' || patient rec.gender);
        DBMS OUTPUT LINE ('Blood Group: ' || patient rec.blood group);
        DBMS OUTPUT.PUT LINE('Source of Payment: ' ||
patient rec.source payment);
        DBMS OUTPUT.PUT LINE('Contact ID: ' || patient rec.contact id);
        DBMS OUTPUT.PUT LINE('Telephone: ' || patient rec.telephone);
        DBMS OUTPUT.PUT LINE('Address Line 1: ' || patient_rec.address_line1);
        DBMS OUTPUT.PUT LINE('Address Line 2: ' || patient rec.address line2);
       DBMS OUTPUT.PUT LINE ('Dependent ID: ' ||
patient rec.patient dependent id);
       DBMS OUTPUT.PUT LINE('Dependent First Name: ' ||
patient rec.dependent first name);
       DBMS OUTPUT.PUT LINE('Dependent Middle Name: ' ||
patient rec.dependent middle name);
       DBMS OUTPUT.PUT LINE('Dependent Last Name: ' ||
patient rec.dependent last name);
       DBMS OUTPUT.PUT LINE('Dependent Address Line 1: ' ||
patient rec.dependent address line1);
       DBMS OUTPUT.PUT LINE ('Dependent Address Line 2: ' ||
patient rec.dependent address line2);
       DBMS OUTPUT.PUT LINE('Dependent Telephone: ' ||
patient rec.dependent telephone);
    END LOOP;
EXCEPTION
    WHEN NO DATA FOUND THEN
       DBMS OUTPUT.PUT LINE ('Patient details not found.');
    WHEN OTHERS THEN
        DBMS OUTPUT.PUT LINE ('Error occurred while displaying patient details.');
END display patient details;
END hospital management;
```

Triggers on our System

trg ancillary working hour

Trigger Logic:

For each row being inserted or updated in the ancillary table, the trigger checks if the value of the ancillary working hour column in the new row is less than 4 or greater than 8.

If the working hours fall outside the range of 4 to 8, the trigger raises an application error and a corresponding message indicating that working hours for ancillary must be between 4 and 8.

Code:

```
CREATE OR REPLACE TRIGGER trg_ancillary_working_hour

BEFORE INSERT OR UPDATE ON ancillary

FOR EACH ROW

BEGIN

IF :NEW.ancillary_working_hour < 4 OR :NEW.ancillary_working_hour > 8 THEN

RAISE_APPLICATION_ERROR(-20001, 'Working hours for ancillary must be between 4 and 8.');

END IF;

END;
```

trg cleaner working hour

Trigger Logic:

For each row being inserted or updated in the cleaner table, the trigger checks if the value of the cleaner_working_hour column in the new row is less than 4 or greater than 8.

If the working hours fall outside the range of 4 to 8, the trigger raises an application error and a corresponding message indicating that working hours for cleaner must be between 4 and 8.

Code:

trg porter working hour

Trigger Logic:

For each row being inserted or updated in the porter table, the trigger checks if the value of the porter working hour column in the new row is less than 4 or greater than 8.

If the working hours fall outside the range of 4 to 8, the trigger raises an application error and a corresponding message indicating that working hours for a porter must be between 4 and 8.

Code:

prevent duplicate nurse assignment

Trigger Logic:

For each row being inserted or updated in the assign_nurse table, the trigger checks if there's already an assignment for the nurse (fk1 nurse id) on the same date (assign date).

It performs a query to count the number of rows in the assign_nurse table where the nurse ID and assignment date match the new values being inserted or updated.

If the count (v_count) is greater than 0, it means there's already an assignment for the nurse on the same date, and it raises an application error.

Code:

```
CREATE OR REPLACE TRIGGER prevent_duplicate_nurse_assignment
BEFORE INSERT OR UPDATE ON assign nurse
FOR EACH ROW
DECLARE
   v count NUMBER;
BEGIN
   SELECT COUNT (*)
   INTO v count
   FROM assign nurse
   WHERE fk1 nurse id = :NEW.fk1 nurse id
   AND assign date = :NEW.assign date;
    IF v count > 0 THEN
        RAISE APPLICATION ERROR (-20013, 'The same nurse cannot be assigned to
more than one ward at the same time');
   END IF;
END;
```

Conclusion

Ultimately, Care Foundation runs a system of care facilities overseen by Medical Directors who have the independence to run their centers. The company offers a wide range of healthcare services, such as inpatient and outpatient treatment, therapy sessions, and residential care, for those who require assistance. Care Foundation places a high priority on patient welfare, conducting detailed admission processes, overseeing residential care waiting lists, and working with outside organizations for discharge preparation.

The organization's dedication to efficient operations also includes staffing arrangements, where a varied team of healthcare professionals and support staff are strategically assigned to fulfill patient requirements. By maintaining detailed records, the Care Foundation ensures that care is continuous and allows healthcare providers to monitor patient improvement from the time of admission until discharge. This method improves both patient results and resource distribution while also increasing operational effectiveness in the organization. In general, Care Foundation's commitment to providing top-notch healthcare services reflects its goal of offering high-quality care to all patients.

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