DBMS Project Report

PES University

Database Management Systems

UE18CS252

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The database chosen was the pandemic database.

The database contains data about the patients. This includes name, address, gender, age, phone, testing details, the ward he/she belongs to and the hospital he/she is admitted in.

The country relation contains the name of the countries around the world.

The ward relation contains details about the ward in the city.

The hospital relation contains details about the hospitals in which the patients have been admitted in.

The patient contact relation has been included to keep a record of the people that the patient has come in contact with. This is a n:n relationship.

The contact relation holds details about the different people who have been contacted by the details. This includes the name, address, gender, age, phone, the date on which he/she has been contacted on, the ward he/she belongs to and the details of the test and the type of contact(1 for primary or 2 for secondary). Finally, the travel history relation, describes the travel history of the patient if any, including the arrival date and the country from which he/she has arrived from. This database can be used in times of pandemics, like the ongoing COVID-19 pandemic, to keep a systematic report of the spread of diseases. This pandemic database could be integrated with the hospital database to keep track of the ongoing medication on each of the patients.

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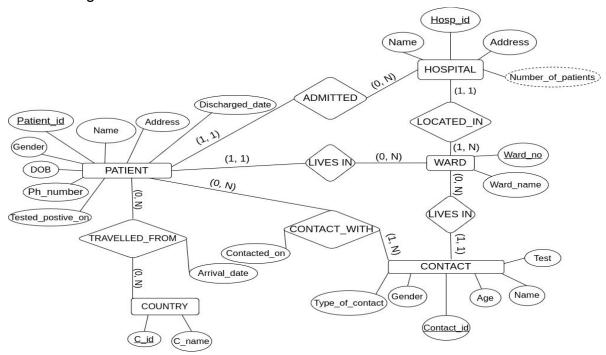
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Introduction

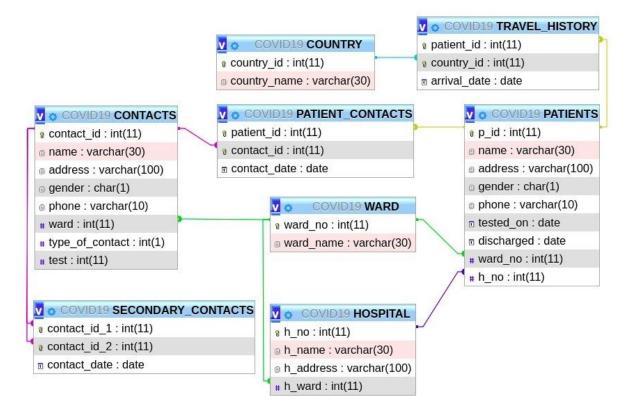
The database modelled in this project is the pandemic database. The database is composed of the patients, contacts, travel history and hospital details. Everytime a patient is tested positive for the disease, his/her details are entered into the patient table. The contacts of the patient are identified and are filled in the contact details table. To keep a record of the contacts of a particular patient, the patient_contact relation is updated. Everytime a contact is tested positive, his or her details are entered into the patients table. This way, the disease history of the contact-turned-patient can be preserved.

Data Model

The ER diagram is as follows:



The relational schema is as follows:



The keys for each relation are as follows:

PATIENTS: For this relation the p_id attribute was chosen as the primary key because each patient is given a unique patient identification number. No two patients can have the same number which gives the attribute the uniqueness.

The data types for this relation are as follows:

o p id:int

name : varchar

address : varchar

o gender: char

phone : varchar

o tested on : date

o discharged : date

o ward_no:int

○ h_no:int

CONTACTS: The contact_id attribute has been chosen as the primary key for this relation because it is easier to keep track of each contact by assigning them a unique identification number. No two contacts can have the same number.

The data types for this relation are as follows:

contact_id : int

o name: varchar

o address: varchar

gender : char

phone : varchar

 $\circ \quad ward: int$

o type of contact:int

o test : int

HOSPITAL: The h_no is chosen as the primary key for this relation because hospitals are given a unique identification number by the healthcare authorities which is never repeated.

The data types for this relation are as follows:

o h no:int

h_name : varcharh address : varchar

o h_ward : int

WARD: Each ward has a ward_no given by the city administration. This helps identify each of the ward by it's number even if they have the same name.

The data types for the following relation are as follows:

ward_no : intward name : int

PATIENT_CONTACTS: Since this relation hold details about the individuals who have come in contact with the infected patients, it has the set of patient_id and contact_id as it's primary key because each of the patients could have come in contact with more than one individual and vice-versa.

The data types for this relation are as follows:

patient_id : intcontact_id : intcontact_date : date

SECONDARY_CONTACTS: This relation hold details about the contacts who have come in contact with the primary contacts included in the previous relation. The set of contact id 1 and contact id 2 is the primary key for the relation.

The data types for this relation are as follows:

contact_id_1 : intcontact_id_2 : intcontact_date : date

COUNTRY: Each country has a number associated with it, the country_id which acts as the primary key even though two countries might have the same name. The data types for this relation as as follows:

country_id : intcountry_name : int

TRAVEL_HISTORY: For this relation, the set of patient_id and country_id is chosen as the primary key because a patient could have travelled in from many countries and vice-versa.

The data types for this relation are as follows:

patient_id : intcountry id: int

FD and Normalization

The functional dependencies of the relations are as follows:

PATIENTS:

p_id -> {name, address, gender, phone, tested_on, discharged, ward_no, h_no}

CONTACTS:

contact_id -> {name, address, gender, phone, ward, type_of_contact, contact_date, test}

COUNTRY:

country id -> country name

HOSPITAL:

h_no -> {h_no, h_name, h_address, h_ward}

WARD:

ward_no -> ward_name

PATIENT CONTACTS:

{patient id, contact id} -> contact date

SECONDARY_CONTACTS:

{contact_id_1, contact_id_2} -> contact_date

TRAVEL HISTORY:

{patient_id, country_id} -> arrival_date

All FDs are in BCNF

The candidate keys of the relations mentioned above, have been obtained by the attribute closure of the functional dependencies that have been listed above.

TEST FOR LOSSLESS JOIN

The lossless join property is violated if natural join of relations in the database results in spurious tuples, that is it results in additional tuples representing erroneous and invalid information or results in loss of tuples.

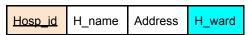
Consider the relation MASTER_PATIENT with the following relational schema and functional dependencies.

P_id Name Addr Gen Age Ph Tested Disch Ward H_r	D H_na	H_ad	H_w
	m	dr	ard

- p_id -> {name, address, gender, phone, tested_on, discharged, ward_no, h no}
- 2. h_no -> {h_no, h_name, h_address, h_ward}

Because of the above functional dependencies, the relation violates the 3NF. So, the relation has been decomposed into the following two sub-relations.

P_id Name Address Gender Age Ph Tested_o Discharged	Ward_no	Hosp_id	
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Let's call the two decompositions as R1 and R2 respectively. It is observed that $R1 \cap R2$ is Hosp_id and R1 - R2 is {H_name, Address, H_ward} Since the functional dependency, $R1 \cap R2 \rightarrow$ R1-R2 i.e h_no -> {h_no, h_name, h_address, h_ward}, it can be concluded that the decomposition is lossless or non-additive.

DDL

```
CREATE DATABASE COVID19;
USE COVID19;
CREATE TABLE COUNTRY(
  country_id int NOT NULL,
 country name varchar(30) NOT NULL,
  PRIMARY KEY(country_id)
);
CREATE TABLE WARD(
 ward_no int NOT NULL PRIMARY KEY,
 ward name VARCHAR(30) NOT NULL
);
CREATE TABLE HOSPITAL(
  h no int PRIMARY KEY,
  h_name varchar(30) NOT NULL,
  h address varchar(100),
  h_ward int NOT NULL,
  FOREIGN KEY(h ward) REFERENCES WARD(ward no)
    ON DELETE RESTRICT ON UPDATE CASCADE
);
CREATE TABLE PATIENTS(
  p_id int PRIMARY KEY AUTO_INCREMENT,
  name varchar(30) NOT NULL,
  address varchar(100),
  gender char,
  phone VARCHAR(10) NOT NULL,
  tested on date NOT NULL,
  discharged date,
 ward no int NOT NULL,
  h no int NOT NULL DEFAULT 1,
  FOREIGN KEY(ward_no) REFERENCES WARD(ward_no)
    ON DELETE RESTRICT
                           ON UPDATE CASCADE.
```

```
FOREIGN KEY(h no) REFERENCES HOSPITAL(h no)
    ON DELETE RESTRICT ON UPDATE CASCADE
);
CREATE TABLE TRAVEL HISTORY(
  patient id int NOT NULL,
  country id int NOT NULL,
 arrival date date,
  PRIMARY KEY(patient id, country id),
  FOREIGN KEY(patient id) REFERENCES PATIENTS(p id)
    ON DELETE RESTRICT ON UPDATE CASCADE,
  FOREIGN KEY(country_id) REFERENCES COUNTRY(country_id)
    ON DELETE RESTRICT ON UPDATE CASCADE
);
CREATE TABLE CONTACTS(
  contact id int PRIMARY KEY,
  name varchar(30) NOT NULL,
 address varchar(100) NOT NULL,
 gender char,
  phone VARCHAR(10) NOT NULL,
 ward int,
 type of contact int(1) NOT NULL,
 test int NOT NULL,
  FOREIGN KEY(ward) REFERENCES WARD(ward no)
    ON DELETE RESTRICT ON UPDATE CASCADE,
  CONSTRAINT chk phone
     CHECK (phone NOT LIKE '%[^0-9]%'),
     CONSTRAINT chk type
     CHECK (type of contact=1 or type of contact=2 or type of contact=3),
 CONSTRAINT chk test
     CHECK (test=0 or test=1)
);
CREATE TABLE PATIENT CONTACTS(
  patient id int NOT NULL,
  contact id int NOT NULL,
  contact date date NOT NULL,
  PRIMARY KEY(patient id, contact id),
  FOREIGN KEY(patient id) REFERENCES PATIENTS(p id)
    ON DELETE RESTRICT ON UPDATE CASCADE,
 FOREIGN KEY(contact id) REFERENCES CONTACTS(contact id)
    ON DELETE CASCADE ON UPDATE CASCADE
);
CREATE TABLE SECONDARY CONTACTS(
  contact id 1 int NOT NULL,
```

```
contact_id_2 int NOT NULL,
contact_date date NOT NULL,
PRIMARY KEY(contact_id_1, contact_id_2),
FOREIGN KEY(contact_id_1) REFERENCES CONTACTS(contact_id)
ON DELETE CASCADE ON UPDATE CASCADE,
FOREIGN KEY(contact_id_2) REFERENCES CONTACTS(contact_id)
ON DELETE CASCADE ON UPDATE CASCADE
);
```

Triggers

The trigger in the database updates the PATIENTS relation with the patient details when any of the already existing contacts or if a newly added contact is tested positive.

Trigger for new entry into CONTACTS:

```
DELIMITER $$
CREATE TRIGGER CONTACT_INSERT
AFTER INSERT
ON CONTACTS FOR EACH ROW
BEGIN

IF NEW.test=1 THEN
INSERT INTO PATIENTS(name, address, gender, phone, tested_on, discharged, ward_no)
VALUES(new.name, new.address, new.gender, new.phone, CURDATE(), NULL, new.ward);
END IF;
END $$
```

Trigger for update of an existing tuple in CONTACTS:

```
DELIMITER $$
CREATE TRIGGER CONTACT_UPDATE
AFTER INSERT
ON CONTACTS FOR EACH ROW
BEGIN

IF NEW.test=1 THEN

INSERT INTO PATIENTS(name, address, gender, phone, tested_on, discharged, ward_no)

VALUES(new.name, new.address, new.gender, new.phone, CURDATE(), NULL, new.ward);

END IF;
END $$
```

SQL Queries

1. Finding the number of cases

```
SELECT a.active_cases, d.discharged_cases, t.total_cases
FROM
  SELECT
    count(*) as active_cases
  FROM
    PATIENTS
  WHERE
    discharged IS NULL
)AS a,
  SELECT
    count(*) as discharged_cases
  FROM
    PATIENTS
  WHERE
    discharged IS NOT NULL
) AS d,
  SELECT
    count(*) as total_cases
  FROM
    PATIENTS
) AS t;
2. Selecting patients who have travelled in from China
SELECT
  P.p_id, P.name, A.arrival_date
FROM
  PATIENTS P,
    SELECT
      patient_id, arrival_date
    FROM
      TRAVEL_HISTORY NATURAL JOIN COUNTRY
    )
  WHERE
    country_name='China'
  ) AS A
```

```
WHERE
     P.p_id=A.patient_id;
3. Select the contacts who have come in contact with more than one patients
SELECT*
FROM
  CONTACTS
WHERE
  contact id
IN
  SELECT contact_id
     FROM
    PATIENT_CONTACTS
     GROUP BY
    contact id
     HAVING
    count(*)>1
);
4. Select the patient details of the patient who has travelled the most
SELECT * FROM
PATIENTS
NATURAL JOIN
(
  SELECT
    r.p_id
  FROM
    SELECT
      p_id, count(*) as travel_count
    FROM
    (
      SELECT *
      FROM
        PATIENTS as P LEFT OUTER JOIN TRAVEL HISTORY AS T ON
P.p id=T.patient id
      )
    ) AS j
    WHERE
      j.country_id IS NOT NULL
    GROUP BY
      p_id
  ) AS r
```

```
WHERE
  r.travel_count=
  (
    SELECT
      MAX(x.travel_count)
    FROM
    (
    SELECT
      count(*) as travel_count
    FROM
    (
      SELECT *
      FROM
      (
        PATIENTS as P LEFT OUTER JOIN TRAVEL_HISTORY AS T ON
P.p_id=T.patient_id
      )
    ) AS j
    WHERE
      j.country_id IS NOT NULL
    GROUP BY
      p_id
    )AS x
  )
) AS Y
WHERE
  p_id=Y.p_id;
5. Ward details of ward having most number of patients
SELECT * FROM
  WARD NATURAL JOIN
(
  SELECT
    b.ward_no
  FROM
    SELECT
      ward no, count(*) as count ward
    FROM
      PATIENTS
    GROUP BY
      ward no
  ) AS b
  WHERE
    b.count_ward=
    (
```

```
SELECT
        max(a.count_ward)
      FROM
      (
        SELECT
          count(*) as count_ward
        FROM
          PATIENTS
        GROUP BY
          ward_no
      ) AS a
) AS j
WHERE
  ward_no=j.ward_no;
6. Finding hospitals with number of patients greater than average
SELECT * FROM
  HOSPITAL NATURAL JOIN
(
  SELECT
    b.h_no
  FROM
    SELECT
      h_no, count(*) as count_hosp
    FROM
      PATIENTS
    GROUP BY
      h_no
  )AS b
  WHERE
    b.count_hosp >
    (
      SELECT
        avg(a.pat_count)
      FROM
        SELECT
          COUNT(*) as pat count
        FROM
          PATIENTS
        GROUP BY
          h_no
      ) AS a
    )
```

7. Find ward with most number of people who haven't travelled abroad

```
SELECT * FROM
WARD
NATURAL JOIN
 SELECT
    b.ward_no
 FROM
    SELECT
      a.ward_no, count(*) as pat_count
    FROM
      SELECT
       ward_no
      FROM
        PATIENTS
      WHERE
        p_id
      NOT IN
        SELECT DISTINCT
          patient_id
        FROM
          TRAVEL_HISTORY
      )
    ) as a
    GROUP BY
      a.ward_no
  ) as b
 WHERE
       b.pat_count=
    (
      SELECT
       max(c.pat_count)
      FROM
        SELECT
             COUNT(*) as pat_count
        FROM
             PATIENTS
        WHERE
             p_id
        NOT IN
```

```
(
SELECT DISTINCT
patient_id
FROM
TRAVEL_HISTORY
) group by ward_no
) as c
)
) as j
WHERE ward_no=j.ward_no;
```

Conclusion

This database can be used in times of pandemics, like the ongoing COVID-19 pandemic, to keep a systematic report of the spread of diseases. This pandemic database could be integrated with the hospital database to keep track of the ongoing medication on each of the patients.

The limitations of this model is the lower level of automation. The link between patients and contacts can be identified only after the contact data has been updated in the CONTACTS relation. Moreover, there are certain drawbacks while scaling up this particular schema to include patients from different cities as the wards in those cities will have to be identified correctly.