

## Project Proposal Form

PROJECT NAME: Hospital Management System

JOB LOCATION: Gorakhpur Uttar Pradesh, India

EST. START DATE: 12-09-2024

EST. FINISH DATE: 25-10-2024

PROJECT LEADER: Satya Kumar

COMPANY: Hospital management

CONTACT NAME: Sauyash Kumar

ADDRESS: Uttarpradesh

PHONE: +91 9438239370

EMAIL: suyashchaubey8@gmail.com

## SUMMARY

Here, I make a hospital management project of state level where the people can take a service from this hospital. I can mention the appointment functionality that there is less problem for the serves or treatment.

## DESIRED OUTCOME

I can improve my frontend and backend skill by making this project. Also, I can take a knowledge about connecting database to store data.

## BENEFITS OF PROJECT

I can find the patient can easily find the related doctor their treatment. Also, they can do appointment with many days ago and they come according to that date and treatment with less time and spend little amount of money.

### **ACTION TO COMPLETION**

Gather and documentation feature like patient management, doctor scheduling and billing.

Create system architecture and finalize front-end and back-end and database technologies.

Build user interface and implementation back-end functionality like patient record and appointment.

### **PROJECTED SCHEDULE**

Week 1-2: Plan feature, consult stockholder, and define system requirement.

Week 2-3: Design database schema UI wireframes and system architecture.

Week 3-4: Develop core module (patient record appointment, billing" etc.

Week 4-5: Testing, bug fixing and deployment of the system

### **PROJECTED BUDGET**

The budget of this project is 5500

### **PROJECTED TEAM AND RESOURCE REQUIREMENTS**

The hospital management system is design to simplify hospital operation by managing patient records, appointment and billing .it allows real-time access to medical histories for doctor and staff ensuring better patient care.

PROPOSAL MAY BE WITHDRAWN IF NOT ACCEPTED BY DATE OF: \_\_\_\_05-11-2024\_\_\_\_\_

### **ACCEPTANCE OF PROPOSAL**

AUTHORIZED CLIENT SIGNATURE

DATE OF ACCEPTANCE 10-11-2024

sayush