

**PAPERLESS HOSPITAL SERVICE**

***Swati Ghosh-12bce0007***

***Musheed Khan-12bce0002***

***Krishna Nand Pandey-12bce0027***

**INDEX**

**1. Objective**

**2. Uniqueness**

**3. Work Distribution**

**4. Potential**

**5. Timeframe of Project**

**6. Technical feasibility**

**7. Operational Feasibility**

**8. Process Model**

**9. Why this Process model?**

**10. Deliverables**

**11. Platform(s) and/or Framework(s)**

**12. Project Scheduling**

**13. Gantt Chart**

**14. Pert Chart**

**PROJECT PLAN**

**Objective**

Objective of this project is to leverage paperless hospital service where patient need not do any paper-work while getting admitted to the hospital by providing seamless application that will handle the thousands of patient information and provide efficient healthcare service**.**

**Uniqueness**

Most of the software used in hospitals for administration purposes only like for recording just the patient information. Here we create a web portal where multiple users like doctors, nurses, department administrators etc all can store necessary information online itself without having to store physically any records.

**Work Distribution**

**MUSHEED KHAN**

* Front end handling
* Front end coding and back end coding
* Updating Database
* Database Handling
* Handling actors Department Admin and Doctors/Nurse

**SWATI GHOSH**

* Web page designing
* ID verifications
* Registration and Login
* Handling actors clerk and patient
* Updating Database
* Front end coding and back end coding

**KRISHNA NAND PANDEY**

* Performance Records
* Front end coding and back end coding
* Billing admin
* insurance admin
* security admin

**Potential of Project**

The potential of the proposed project Paperless Hospital Service is to reduce the unnecessary wastage of resources and manpower in hospital to maintain tons of data about so many patients which can rather be done effectively by using databases.

**Timeframe for the Project**

The project has clear, discrete goals that are divided among the members of the group. All the necessary users of this software have been identified. The technologies and platform on which it will be built is also pre decided.

**Technical Feasibility**

1) **HTML/CSS**

2) **JavaScript**

3) **MySQL**

4) **PHP**

5) **JQuery**

**Operational Feasibility (Operational Scope/Usability):**

The project will be of high operational scope for the following reasons:

1) The user interface due to which it is really convenient to use the software

2) Access to software is only after proper authentication.

3) A variety of information related to patient like personal information, medical history, ongoing treatments and expenses can be stored.

**Process Model**

**INCREMENTAL MODEL**

In incremental model the whole requirement is divided into various builds. Multiple development cycles take place here, making the life cycle a [“multi-waterfall” cycle](http://istqbexamcertification.com/what-is-waterfall-model-advantages-disadvantages-and-when-to-use-it/).

The incremental model, in each iteration, undergoes the following steps:

* **Requirements Analysis**
* **Design Analysis**
* **Implementation &Unit Testing**
* **Integration &System Testing**
* **Operation and Maintenance**

**Why Incremental Model?**

1) All the major requirements are well defined however some of them might evolve over the time hence incremental model provides the scope to do so. Waterfall Model has less flexibility as compare to incremental.

2) Testing and debugging can be done easily at every iteration hence making it easy to handle risks.

3) Also some new technology and tools are being used and hence it is more convenient to use incremental model as at every iteration we can review whether the tool used is giving the correct output as per the requirements and the platform on which it is being built.

**Deliverables**

1) Storing incoming patient’s data.

2) Edit, delete, view, modify patients record.

3) Providing access to various doctors, nurses after proper authentication.

4) All the expenditure data will be stored by the billing department.

5) Verification of whether the patient has insurance or not.

6) Doctors can get patient information, will conduct series of tests and will update their test report along with comments in the Application

**Platform(s) and/or Framework(s)**

1. Sublime Text-text editor for HTML/CSS, JavaScript
2. Komodo edit, Wamp server , Apache for MySQL

**Project Scheduling**

The incremental model requires the following steps:

**1) Requirements Analysis 1Feb - 10 Feb**

**2) Iteration-1**

**Design Analysis 11Feb - 13 Feb**

**Implementation &Unit Testing 14Feb - 24 Feb**

**3) Iteration-2**

**Design Analysis 27Feb - 28Feb**

**Implementation &Unit testing 1 March - 15 march**

**4) Iteration-3**

**Design Analysis 18 March – 20 march**

**Implementation &Unit Testing 21 March - 1April**

**5) Integration &System Testing 5 April - 15 April**

**6) Operation and Maintenance 18 April - 30 April**

**GANTT CHART**



**PERT CHART**

