



Moroccan National Health Services (MNHS)

Data Management Course

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Session: Fall 2025





Part I: Conceptual Design

Preparatory Exercises

Before starting the MNHS project, students should review and solve the following textbook exercises.

Textbook Exercises

Reference: Ramakrishnan, Raghu, and Johannes Gehrke, *Database Management Systems*, 3rd Ed. [1].

• Chapter 2 (Introduction to Database Design): Exercises 2.1, 2.3, 2.5

Objectives

- Understand the MNHS project domain and define core requirements.
- Identify entities, attributes, relationships, and participation/cardinality constraints.
- Build a first-pass ER diagram.

MNHS Scenario

The Moroccan National Health Services (MNHS) aims to manage patients, staff, hospitals, departments, appointments, prescriptions, medications, insurance, billing, and emergencies. The design must support operational queries and future analytics.

Requirements

Patients

- Each patient has an internal identifier and a national identifier (CIN).
- Attributes: full name, date of birth, sex, blood group, phone.
- A patient may use several contact locations (e.g., home, work). Each includes street, city, province, postal code, and optional phone.

Staff

- Staff work in departments and interact with patients via clinical activities.
- For practitioners, capture license number and specialty when applicable.
- For caregiving staff, record grade and ward when relevant.
- For technical staff, record modality/equipment and certifications when relevant.





Hospitals and Departments

- Keep hospitals with name, city, region.
- Departments belong to one hospital.
- Staff are assigned to departments.

Appointments

- Track date, time, reason, and status (Scheduled, Completed, Cancelled).
- An appointment links exactly one patient and one staff member and occurs in one department.

Prescriptions and Medications

- A prescription is issued for a patient by a staff member on a given date.
- A prescription may include several medications; for each, record dosage and duration.
- Medications include: DrugID, name, form, strength, manufacturer, therapeutic class, and active ingredient .

Insurance and Billing

- Supported coverage types: CNOPS, CNSS, RAMED, private, or none.
- Bills must be attached to a clinical activity; some generated after consultations, others after prescriptions.
- A patient can have more than one insurance, and a bill is only linked to one insurance.

Emergencies

• Record patient, admission timestamp, triage level¹, outcome; optionally the staff member who handled triage/attending.

Pharmacy inventory

• Track for each hospital the on-hand quantity, reorder level, last restock timestamp, and unit price per medication.

Deliverable

• ER diagram with a one-page rationale explaining modeling choices, due on September 24th at 23:59.

¹The triage level is the priority category assigned to a patient upon arrival at the Emergency, used to determine how quickly the patient requires medical attention. Typical categories range from *Immediate* (Level 1) to Non-Urgent (Level 5).





References

[1] Raghu Ramakrishnan, Johannes Gehrke, and Johannes Gehrke. Database management systems, volume 3. McGraw-Hill New York, 2003.