

Medical Appointment No-Show Analysis Using Hadoop/MapReduce

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Abstract—This project implements a comprehensive medical appointment behavior analysis system using Hadoop/MapReduce to identify patterns and risk factors associated with patient no-shows. The solution combines distributed data processing with interactive visualization to deliver actionable insights for healthcare optimization.

Dataset [1]: <https://www.kaggle.com/datasets/joniarroba/noshowappointments>

Source code: <https://github.com/zeli8888/COMP47780-CLOUD-COMPUTING-PROJECT.git>

Online dashboard: <https://zeli8888-cc-medical-dashboard.streamlit.app/>

Index Terms—Hadoop, MapReduce, Medical Analytics, Cloud Computing, Data Analysis



1 APPLICATION OVERVIEW

This project implements a comprehensive medical appointment behavior analysis system using Hadoop/MapReduce framework. The system is designed to process large-scale medical appointment data and identify critical patterns and risk factors associated with patient no-shows in healthcare systems. By leveraging cloud computing capabilities, the solution enables healthcare providers to optimize appointment scheduling, improve resource allocation, and enhance patient communication strategies through data-driven insights.

The architecture integrates Hadoop/MapReduce for batch processing with an interactive Streamlit dashboard for result visualization. The system successfully processes 110,527 medical appointment records, providing multi-dimensional analysis across six key factors that influence appointment adherence.

2 OBJECTIVES

2.1 Primary Objectives

- **Large-scale Data Processing:** *Completed* - Successfully implemented Hadoop/MapReduce to process 110,527 medical appointment records using efficient cloud processing with capability for processing even larger datasets
- **Multi-dimensional Analysis:** *Completed* - Analyzed no-show patterns across 6 key dimensions: gender, age, health conditions, neighborhood, SMS interventions, lead time
- **Risk Factor Identification:** *Completed* - Identified high-risk patient segments and environmental factors contributing to no-shows through comprehensive data analysis
- **Interactive Visualization:** *Completed* - Developed a comprehensive Streamlit dashboard for exploring analysis results and generating actionable insights

- **Cloud Deployment:** *Completed* - Deployed solution on AWS EMR demonstrating scalability and cloud-native implementation capabilities

2.2 Secondary Objectives

- **Data Quality Management:** *Completed* - Implemented robust data validation and data cleaning procedures in MapReduce jobs
- **Performance Optimization:** *Completed* - Utilized combiner classes and efficient data structures for optimal processing performance
- **Cross-platform Compatibility:** *Completed* - Ensured solution functionality across both local Hadoop clusters using Docker and cloud environments with AWS

3 PROBLEM DESCRIPTION AND DATASET COLLECTION

3.1 Problem Significance

Patient no-shows represent a significant challenge in healthcare systems worldwide, leading to substantial operational and financial impacts:

- **Resource Wastage:** Unused medical staff time and equipment capacity resulting in inefficient resource utilization
- **Financial Losses:** Estimated annual losses of \$150 billion in the US healthcare system due to missed appointments [2]
- **Reduced Access:** Missed appointments that could be allocated to other patients, decreasing overall healthcare accessibility
- **Health Inequality:** Disproportionate impact on underserved communities and vulnerable populations

3.2 Dataset Characteristics

The analysis utilizes the Kaggle Medical Appointment No-Shows dataset with the following characteristics:

- **Source:** Kaggle Medical Appointment No Shows Dataset [1]
- **Volume:** 110,527 medical appointments
- **Time Period:** Records collected between April 29 and June 8, 2016
- **Key Variables:**
 - Patient demographics (Gender, Age, Neighborhood)
 - Appointment details (ScheduledDay, AppointmentDay)
 - Health conditions (Hypertension, Diabetes, Alcoholism, Handicap)
 - Intervention data (SMS reminders)
 - Target variable (No-show status)

4 METHODOLOGY AND IMPLEMENTATION

4.1 Technical Architecture

The system employs a multi-layer architecture designed for scalability and performance:

- **Storage Layer:** HDFS for distributed data storage and management
- **Data Processing Layer:** Hadoop/MapReduce with Java-based implementation
- **Visualization Layer:** Streamlit dashboard with interactive Plotly visualizations

4.2 MapReduce Implementation

The core analysis is implemented through specialized MapReduce components:

4.2.1 PatientDemographicsMapper

Key features of the mapper implementation:

- **Multi-dimensional Analysis:** Analyzes patient attendance patterns across gender, age, neighborhood, and health conditions
- **Appointment Lead Time Analysis:** Calculates and categorizes scheduling lead time to study its impact on attendance rates
- **Health Status Assessment:** Examines attendance patterns for patients with single diseases and multiple comorbidities
- **SMS Reminder Effectiveness:** Evaluates the impact of SMS reminders on patient attendance rates
- **Data Quality Control:** Includes age validation, data completeness checks, and error record tracking

4.2.2 PatientDemographicsReducer

Key features of the reducer implementation:

- **Data Aggregation:** Performs count aggregation for key-value pairs across all analysis dimensions
- **Statistical Summary:** Computes total counts for attended and missed appointments in each analysis category
- **Result Output:** Generates final summarized datasets for further analysis and reporting

4.3 Analysis Dimensions

The system performs simultaneous analysis across six critical dimensions:

- 1) **Gender Analysis:** Comparative no-show rates between male and female patients
- 2) **Age Group Analysis:** Categorization into children/youth, young adults, middle-aged, and seniors
- 3) **Health Conditions:** Impact analysis of hypertension, diabetes, alcoholism, and handicaps
- 4) **Geographical Analysis:** Neighborhood-level pattern identification and risk mapping
- 5) **SMS Intervention:** Effectiveness assessment of reminder message systems
- 6) **Lead Time Analysis:** Relationship between scheduling delay and appointment adherence

5 SUITABILITY OF HADOOP/MAPREDUCE

Hadoop/MapReduce demonstrated exceptional suitability for medical data analysis requirements:

- **Scalability:** Efficiently processed 110K+ records with demonstrated potential for million-record datasets through linear scalability
- **Fault Tolerance:** Built-in data replication and recovery mechanisms ensured data reliability during processing
- **Cost Effectiveness:** Cloud deployment on AWS EMR provided pay-per-use economic model with optimal resource utilization
- **Parallel Processing:** Enabled simultaneous multi-dimensional analysis through cloud computing capabilities

6 SOFTWARE FEATURES

6.1 Core Analytical Features

6.1.1 Comprehensive Patient Profiling

- Demographic analysis across age groups and gender distributions
- Geographical distribution pattern identification and mapping
- Health condition correlation assessment with no-show probabilities

6.1.2 Operational Intelligence

- Neighborhood-level risk mapping and geographic hot-spot detection
- Appointment lead time impact quantification and optimization insights
- SMS reminder effectiveness evaluation and intervention assessment
- Resource allocation recommendations based on risk patterns

6.2 Technical Features

6.2.1 Data Quality Management

- Data completeness and consistency verification
- Automated data cleaning procedures
- Solid error handling and exception management

6.2.2 Visualization Capabilities

- Interactive dashboard with intuitive navigation and exploration
- Multiple chart types including bar, pie, line, and gauge visualizations
- Comparative analysis tools for multi-dimensional insights

6.2.3 Deployment Flexibility

- Local Hadoop cluster compatibility for on-premises deployment
- Docker containerization support for environment consistency
- AWS EMR cloud deployment for scalable cloud infrastructure

7 WORKED EXAMPLE

7.1 Data Processing Pipeline

The system processes individual patient records through a comprehensive analytical pipeline. Detailed demo example can be found at `readme.md`.

- 1) **Input Validation:** Raw appointment data undergoes validation and parsing

```
if (gender.isEmpty() ||
    ↳ ageStr.isEmpty() ||
    ↳ noShow.isEmpty()) {
    return;
}

int age;
try {
    age =
    ↳ Integer.parseInt(ageStr);
    if (age < 0 || age > 120)
        return; // Filter invalid
    ↳ ages
} catch (NumberFormatException e)
    ↳ {return;}

boolean valid = analyzeScheduling(
    ↳ LeadTime(context,
    ↳ scheduledDay, appointmentDay,
    ↳ attendanceStatus);
if (!valid) {return;}
```

- 2) **Multi-dimensional Mapper Analysis:** Simultaneous evaluation across all analytical dimensions

```
analyzeSchedulingLeadTime(context,
    ↳ , scheduledDay,
    ↳ appointmentDay,
    ↳ attendanceStatus);

analyzeByGender(context, gender,
    ↳ attendanceStatus);

analyzeByAge(context, age,
    ↳ attendanceStatus);
```

```
analyzeByHealthCondition(context,
    ↳ hypertension, diabetes,
    ↳ alcoholism, handicap,
    ↳ attendanceStatus);

analyzeByNeighbourhood(context,
    ↳ neighbourhood,
    ↳ attendanceStatus);

analyzeSMSReminder(context,
    ↳ smsReceived,
    ↳ attendanceStatus);
```

- 3) **Simple Reducer Aggregation:** Simple aggregation for structured output

```
public void reduce(Text key,
    ↳ Iterable<IntWritable> values,
    ↳ Context context)
    throws IOException,
    ↳ InterruptedException {
    int sum = 0;
    for (IntWritable val :
    ↳ values) {
        sum += val.get();
    }
    result.set(sum);
    context.write(key, result);
}
```

- 4) **Result Generation:** Structured output for dashboard visualization

GENDER_F_Attended	57245
GENDER_F_NoShow	14591
GENDER_M_Attended	30962
GENDER_M_NoShow	7723
...	

7.2 Key Analytical Findings

7.2.1 Demographic Patterns

- **Young adults (19-35 years):** Highest no-show rate at 23.8%, indicating need for targeted engagement strategies
- **Senior patients (55+ years):** Lowest no-show rate at 15.6%, demonstrating better appointment adherence
- **Gender analysis:** Comparable rates between male (20.0%) and female (20.3%) patients

7.2.2 Scheduling Impact Analysis

- **Same-day appointments:** Achieved lowest no-show rate at 4.6%, supporting urgent care scheduling models
- **Extended lead times:** Appointments between 30 and 90 days showed 33.2% no-show rate
- **Progressive impact:** Strong inverse relationship between scheduling delay and appointment adherence

7.2.3 Intervention Effectiveness

- **SMS recipients:** Unexpectedly higher no-show rates (27.6%) suggesting potential issues with message

content or timing. Higher rates may also be due to the fact that patients with longer lead times tend to receive SMS.

- **Non-recipients:** Lower no-show rates (16.7%) indicating the need for communication strategy optimization
- **Key insight:** SMS intervention requires content personalization and timing optimization

7.3 Dashboard Interaction Example

Healthcare administrators can interact with the system through multiple workflows:

- **Dimension Selection:** Choose specific analytical dimensions through sidebar navigation
- **Data Analysis:** Gain insights from visualized charts and detailed aggregated data through interactive tables

8 CONCLUSION

8.1 Project Achievements

This project successfully demonstrates the practical application of Hadoop/MapReduce for medical data analysis through several key achievements:

- **Technical Implementation:** Developed robust MapReduce jobs capable of processing real healthcare data with comprehensive validation and error handling
- **Analytical Depth:** Identified significant patterns and correlations across multiple clinical and operational dimensions
- **Operational Relevance:** Generated actionable insights for healthcare service optimization and resource allocation decisions
- **Architectural Scalability:** Created cloud-ready solution with proven deployment methodology and linear scaling characteristics

8.2 Healthcare Implications

The analysis revealed several critical insights for healthcare operations:

- SMS communication strategies require optimization in content, timing, and personalization
- Young adult populations need focused engagement approaches and tailored communication
- Reduced scheduling lead times significantly improve appointment adherence rates
- Geographical variations indicate need for localized strategies and community-specific interventions

8.3 Future Enhancements

Several opportunities for extension and improvement were identified:

- **Real-time Processing:** Integration with streaming data for immediate insights and interventions
- **Predictive Modeling:** Machine learning integration for individual no-show risk prediction

- **Expanded Data Sources:** Incorporation of socioeconomic, environmental, and behavioral factors
- **Advanced Visualization:** Geospatial mapping and temporal trend forecasting capabilities

The project establishes a solid foundation for data-driven healthcare optimization using cloud computing technologies, demonstrating significant potential for improving operational efficiency and patient care delivery through scalable analytical capabilities.

REFERENCES

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- [4] Streamlit, "Streamlit Documentation," 2025. [Online]. Available: <https://docs.streamlit.io/>