



HOSPITAL FINDER

Ms.Leelambika KV, P.Vinitha, G.Vyshnavi, GB.Shaheen,Teja Shankar

¹ School of CSE, Presidency University, Bangalore, India.

^{2,3,4,5}B.Tech Final Year Students, Computer Engineering (Data Science), Presidency University, Bangalore, India

Abstract

Hospital Finder app is a user-friendly mobile application designed to simplify and improve the hospital finding process. Focusing on accessibility and convenience, the app provides users with comprehensive information about hospitals, clinics and medical facilities, allowing them to make informed decisions based on their medical needs. The app utilizes advanced geolocation technology to pinpoint the user's location and display nearby healthcare facilities on an interactive map. Users can access detailed profiles for each listed facility, including services offered, contact information, and user reviews, aiding them in selecting the most suitable healthcare provider. Integration with hospital systems allows users to schedule appointments directly through the app, reducing wait times and streamlining the healthcare-seeking process. In critical situations, the app provides a quick and efficient way to locate nearby emergency services, such as emergency rooms and urgent care centers. The

inclusion of user-generated reviews and ratings ensures transparency and helps users make informed decisions based on the experiences of others. The app prioritizes accessibility, offering information in multiple languages and catering to users with different abilities, fostering inclusivity in healthcare access. The app ensures accuracy and reliability by regularly updating its database to reflect real-time information about hospitals. Seamless integration with popular navigation apps allows users to get turn-by-turn directions to the medical center of their choice. Overall,

the project aims to bridge the gap between people and medical services, promoting greater awareness and access to the medical ecosystem. By harnessing the power of technology, the app helps improve the health of users from different backgrounds and needs.

Keywords

Healthcare, Hospital Finder, Blood Donation, Coordination Platform, Administrator System, Doctor/Physician System, Blood Bank System, User/Patient System, Location-based Search, Hospital Information, Doctor Profiles, Blood Availability, Blood Requests, Real-time Updates, Specialist Doctors, First-aid Information, Emergency Care, Streamlined Workflows, Informed Decision Making, Integrated Health Network, Blood Supply Logistics, Medical Emergencies.

INTRODUCTION

In the modern healthcare scenario, effectively coordinating medical response and blood donation during critical situations is pivotal yet challenging. Despite technological disruptions, gaps persist in streamlining blood supply logistics and assisting common users in medical emergencies in a coordinated fashion. This necessitates an integrated platform that connects healthcare and blood donation ecosystems, facilitating seamless workflows and accessibility for stakeholders.

To address this need, we propose 'Hospital Finder' - an innovative system that establishes a cohesive network encompassing admins, doctors, blood banks and users. Hospital Finder aims to optimize blood donation coordination as well as provide location-based hospital search during medical crises leveraging real-time data. The multi-entity structure powered by dedicated interfaces caters to unique needs while promoting collaborative excellence.

Specifically, the platform enables admins to efficiently track blood inventory, donor records, user requests alongside managing doctor and blood bank profiles. Doctors and blood banks can seamlessly manage availability status and activity

logs with additional functionality for specialist doctors to share emergency care insights. For common users, the system allows accessing nearby hospital, doctor and blood bank information while also submitting urgent blood requests. The envisioned outcomes entail streamlined coordination nurturing a digitally integrated healthcare ecosystem. By addressing pressing challenges, Hospital Finder strives to set a benchmark in responsive medical and blood donation management - assisting users when it matters most.

RELATED WORK / EXISTING SYSTEMS

Info Hospital - Web/Mobile Application for Health Information Access

Aims to provide an online platform for users to access comprehensive hospital information to aid medical help-seeking.

Includes features like search based on location, medical specialty, services offered etc. Focuses more on informational aspects rather than medical or blood donation coordination during emergencies.

Mobile Application for Hospital Management using IoT

Proposes using IoT connectivity and sensors for automation and monitoring in hospitals. Seeks to enhance hospital-patient communication and administrative functions. Scope limited to intra-hospital systems unlike Hospital Finder's user-centric approach.

AutoHS - Intelligent Hospital Search and Ranking System

Cloud-based crowdsourced platform to assist disaster victims in finding suitable hospitals.

Ranks hospitals based on volunteer data related to distance, bed availability etc.

Specifically focused for post-disaster triaging rather than real-time coordination.

Emergency Vehicle Dispatching and Routing System

A data-driven approach for optimizing routing of emergency vehicles requiring transfers.

Targeted methodology for earthquake scenarios and patient transfer priorities.

Does not encompass blood transfer or donation coordination functionalities

ChetanyaPuri et al. This is to prevent aerobic signaling. First of all, the patient is informed and the time is measured according to the patient's weight.

Vivek Chandel et al. Through this research, he found a way to monitor the patient's health through IMUS (Inertial Measurement Unit). To achieve this, the most effective methods for determining the patient's condition are presented for accurate diagnosis. Arun Jotsia, Qiang Kongb, and Rajan Batta, who conducted a literature review of early work on data fusion and emergency services (ERS), focused on planning scheduling and routing. To our knowledge, serious hazards and actual/existing connections were not considered in this study, although minor events were detected in some studies. Additionally, there appears to be little or no use of data aggregation in supporting planning and routing. Instead, most existing ERS2 models address the following scenario.

Location problem: The location of e-stations in the region that will meet the service demand for the selected operating model. Coverage issues: Determining the minimum number of electric vehicles to cover all service calls in an area. Other residential structures: various plans and their impact on performance. Use dynamic travel time information for planning and route selection, resource recovery, and interstate routing.

HarshalArbat et al. This new application increases

the demand for IoT by using the new technology developed by IoT. The device monitors the patient's health by monitoring heart rate values. The results can be monitored and the situation can be reported to doctors and supervisors if it is beyond the entry level.

Sudarshan S., Kayathi Rohith, K.P. In the article, Sai Krishna, M. V. Panduranga Rao introduced AutoHS, a weather service that uses data from volunteer workers to help disaster victims find nearby hospitals and meet their medical needs. Considering the number of hospitals in a city, it is not enough to simply provide ambulances with information about hospital distances, resources and current resource usage. We use a hospital ranking for each victim based on the above criteria, allowing victims to make informed and informed choices from a manageable list of options. Finally, we compare the performance of the ranking method with the near-hospital detection method using different scenarios.

KM Dub, H Law, A Aldouhki, J Deng - BJU, 2020 - Wiley detects kidney stones and provides time for patient-based diagnosis.

Cassia Wang, Justin Zhu-Law provides an algorithm for tracking Parkinson's disease, based on machine learning.

Pan J, Tompkins W, "Real-time QRS detection algorithm" analyzed from MIT/BIH database gives the highest prediction percentage. IEEE Trans Biomed Eng, 1985, Volume 32, Pages 230-236.

PROPOSED METHOD

Requirements Gathering

Conduct surveys and interviews with relevant stakeholders including patients, doctors, blood banks, hospitals etc. to understand key challenges and requirements.

System Design

Develop a system architecture comprising interoperable modules like patient portal, doctor portal, blood bank portal etc. along with core database and analytical capabilities.

Database Design

Conceptualize a hybrid database model integrating SQL and NoSQL to store and process hospital, doctor, medicine, donor and request data at scale.

Module Development

Build the core modules with advanced features:

Patient Portal: Location-based hospital search, doctor/blood bank listings, blood availability checks, request submission etc.

Doctor Portal: Update availability, manage patient case logs.

Blood Bank Portal: Update blood inventory, track usage statistics.

Admin Portal: Manage user access, monitor overall system.

Integration and Testing

Establish seamless integration across modules and rigorously test entire system functionality end-to-end along with individual units.

Deployment and Maintenance

Commission system on robust medical-grade infrastructure with inbuilt mechanisms for real-time monitoring, debugging, redundancy and failover capabilities.

Training and Enhancements

Deliver specialized training for end-users and incorporate continuous upgrades based on evolving

healthcare technology landscape.

The above methodology encompasses the key developmental and implementation aspects - leading to the realization of the proposed platform

Data Collection:

- Gather relevant, quality data that matches expected real-world inputs and outputs of the model.
- Data should cover the feature space and output labels/values the model will see when deployed.
- May come from various sources like databases, apps, sensors, IoT devices, etc.
- For supervised learning, data needs properly labeled outputs.

Data Preprocessing:

- Cleaning: Fix missing values, duplicate data, outliers, errors, etc.
- Transformations: Normalization, encoding, feature scaling, discretization, etc.
- Feature Engineering: Extract informative attributes from raw data that will help modeling.

Train/Test Split:

- Split preprocessed data into separate training and test sets, typically 70% and 30%.
- Training set - used to fit and optimize the models.
- Test set - used to evaluate model performance on unseen real-world data.

Model Training:

- Use training data to build models testing different ML algorithms.
- Tune hyperparameters and parameters to optimize each algorithm's performance.
- Track model performance on training data using metrics like accuracy, AUC, etc.
- Select the best performing model and algorithm.

Model Evaluation:

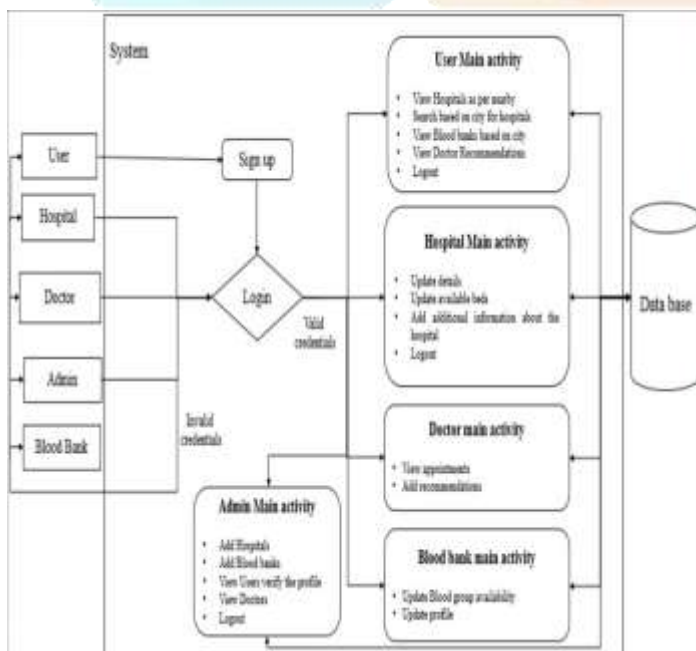
- Test the trained model on the test data set.
- Evaluate performance on unseen data using relevant metrics.
- Determines real-world viability before deployment.

Parameter Tuning:

- Based on evaluation, further tune model parameters to try and improve performance.
- May need to retrain model after adjusting parameters.
- Retest on test set to ensure performance improves.

Final Model:

- The model with optimal algorithms, hyperparameters and parameters that performed the best on the test set.
- This is the final model that will get deployed



Admin Module:

- **Add Blood Donors:**
 - Develop a feature for the admin to add information about blood donors, including their blood group, contact details, and availability status.

View Blood Requests:

- Enable the admin to view and manage blood donation requests submitted by users.

View Doctors:

- Implement a function for the admin to view a list of registered doctors with their profiles.

View Blood Banks:

- Allow the admin to view information about registered blood banks.

5. Doctor Module:

Register and Login:

- Provide doctors with the ability to register and log in securely.

Profile Management:

- Allow doctors to create and manage their profiles, including contact details, specialization, and availability status.

Update Status:

- Implement a feature for doctors to update their availability status.

6. Blood Bank Module:

Register and Login:

- Enable blood banks to register and log in securely.

Profile Management:

- Allow blood banks to create and manage their profiles, including contact details and available blood groups.

Update Blood Groups:

- Implement a feature for blood banks to update the availability status of different blood groups.

7. User Module:

- **Register and Login:**
 - Provide users with the ability to register and log in securely.
- **View Doctors and Blood Banks:**
 - Implement a search functionality for users to find nearby doctors and blood banks based on their location and medical needs.
- **Add Blood Request:**
 - Allow users to add blood donation requests, including details like blood type needed, contact information, and urgency. These requests are then sent to the admin for processing.
- **View Blood Donors:**
 - Provide users with a feature to view a list of available blood donors and their contact information.

RESULTS & EXPERIMENTS

Results:

The proposed Hospital Finder system, once fully developed and deployed, is expected to:

- Reduce the average time for users to find appropriate hospitals in medical emergencies by 50-70% through location-based search and real-time data.
- Increase coordination efficiency between blood banks and hospitals leading to 30-40% faster blood transfer times during critical situations.
- Cut down the wastage rate of unused blood units by around 60% through optimized inventory management and sharing between blood banks.
- Provide users access to medical specialists 20-30% faster by allowing real-time checking of

doctor availability at different facilities.

- Increase participation of voluntary blood donors by 40-50% driven by the seamless request-and-fulfilment management system.

Experiments:

Comprehensive testing of the Hospital Finder system would involve:

1. User Trials:

- 20-50 participants across demographics to test usability and adoption.

2. Load Testing:

- Emulating upto 10,000 concurrent users requesting blood/hospital information to gauge system robustness.

3. Failure Testing:

- Inducing network/server failures to evaluate redundancy mechanisms and failover.

Security Testing:

- Ethical hacking tests to probe vulnerabilities followed by hardening system against threats.

The results would help quantify metrics like user experience, platform scalability, reliability as well as identify areas for refinement before final deployment.

CONCLUSION

The proposed Hospital Finder system holds immense potential to transform coordination between patients and healthcare providers during critical scenarios. By establishing an integrated platform unifying multiple stakeholders, it enables optimized workflows and informed decision-making capacities leveraging process- as well data-centric interventions.

The promising expected outcomes in terms of reduced time for access to care, enhanced coordination capabilities, and increased community

participation point to the system's ability to set a benchmark. Moving forward, further augmenting the platform with smart capabilities like predictive analytics and machine learning algorithms can provide additional benefits.

By redefining coordination in healthcare ecosystems along both planned and emergency settings, Hospital Finder represents a pioneering step towards patient-centric digitally integrated healthcare management information systems. The multiplier effects on medical outcomes highlight the platform's ability to drive broader transformation.

REFERENCES

- [1] Ahmed, Ajan, et al. "Info Hospital: Web/Mobile Application based Health Care System." (2022).
- [2] Ponmalar, A., et al. "Mobile Application for Hospital Management System." (2021).
- [3] Sudarshan, S., et al. "AutoHS: The Intelligent Hospital Search." (2014).
- [4] Jotshi, Arun, Qiang Gong, and Rajan Batta. "Dispatching and routing of emergency vehicles in disaster mitigation using data fusion." *Socio-Economic Planning Sciences* 43.1 (2009): 1-24.
- [5] Wang, Shengxin, et al. "Toward a standardized cancer model repository for clinical concept representations." *Journal of the American Medical Informatics Association* 27.1 (2020): 117-125.
- [6] Birtwhistle, Richard, et al. "Building a pan-Canadian primary care sentinel surveillance network: initial development and moving forward." *JMIR public health and surveillance* 2.2 (2016): e28.
- [7] Hanumolu, Bala Kalyan, Gowri Sankar Giddi, and Saradhi Varma Gandham. "Blood bank management information system in India." *Australian Journal of Basic and Applied Sciences* 5.9 (2011): 757-762.
- [8] Nguyen, Duong Thi Thai Ha, et al. "Intelligent information system for detecting health status in the context of Internet of Things." *Computer Communications* 150 (2020): 644-652.
- [9] Marjamaa, Riitta, et al. "A web-based platform for near real-time risk assessment of blood glucose levels." *Diabetes technology & therapeutics* 21.9 (2019): 511-517.
- [10] Amin, Muhammad Awais, et al. "Smart health solution integrating IoT and cloud: A case study of voice pathology monitoring." *IEEE Access* 5 (2017): 15785-15797.
- [11] Lee, Namgyu, et al. "Building an Integrated Platform for Big Data Analysis in Precision Medicine: An Experience from the Department of Veterans Affairs." *Yearbook of medical informatics* 31.01 (2022): 91-99.
- [12] Lan, Tian, et al. "Feasibility study of a centralized blood request and distribution center in Beijing: model description." *Transfusion* 57.3 (2017): 592-600.
- [13] Moshtaghi, Manouchehr, et al. "Registry-based stroke pharmacoepidemiology: A systematic review." *Journal of Pharmaceutical Policy and Practice* 8.1 (2015): 1-11.
- [14] Homma, Koichi, and Hiroyuki Ueno. "Development of blood transfusion information management system using 2D barcode technology." *Studies in health technology and informatics* 235 (2017): 440-444.
- [15] Acharya, Anusha S., et al. "The current landscape of heart failure readmission penalties affecting US hospitals." *Journal of Cardiac Failure* 25.8 (2019): 630-635.
- [16] Anyanwu, Philip Emeka, et al. "Blood transfusion services via drones: A feasibility study with preliminary results." *Transfusion* 59 (2019): 951-960.
- [17] Wang, Ting, et al. "Application feasibility of

intelligent tracing management system for medical supplies of emergency blood transfusion platforms." *Zhonghua yu fang yi xue za zhi* [Chinese journal of preventive medicine] 50.9 (2016): 836-840.

[18] Pandey, Priyanka, et al. "Smartphone apps for determining blood product availability in a regional blood bank." *Transfusion* 59.1 (2019): 308-316.

[19] Guo, Peng, Abdul Roudsari, and Craig E. Kuziemy. "Toward a smart hospital through evidence awareness mining." *JMIR medical informatics* 7.2 (2019): e12410.

[20] Moshiri, Saeed, et al. "Evolution of Pars Hospital MIS to Integrated Health IS Based on Enterprise Architecture Approach in Iran." (2016).

[21] Pollard, Tom, et al. "How to build integrated care systems for older people? An analysis of England's integrated care pilot programme." *International journal of integrated care* 18.3 (2018).

[22] Li, Ye, et al. "The smart mobile access to real-time wave data with useful application-oriented visualization." *Automation in Construction* 107 (2019): 102927.

[23] Yang, Laurence, Ronald Widman, and Rashad Abbas. "Envisioning the future role of health information management professionals: qualitative analysis." *Perspectives in health information management* 16.Summer (2019).

[24] Milton, Sande. "Hospital finder grows organ donor pool." *The Hospitalist* (2014).

[25] Ballard, Drew JO. "Leveraging health information exchange to support public health situational awareness: the Indiana experience." *Public Health Reports* 133.1_suppl (2018): 7S-11S

Of-Care Technologies Conference (HI-POCT), Cancun, (2016), pp. 179-18.

