

PATIENT WAIT-TIME ANALYSIS

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Abstract

The **Patient Wait-Time Analysis** system is designed to analyze and visualize the time patients spend waiting at different stages of a healthcare service process. The system focuses on understanding patient arrival patterns, registration time, consultation waiting time, service duration, and overall waiting time. Patient-related operational data such as arrival time, registration time, appointment time, consultation start time, and service completion time can be collected and organized for analysis. The system calculates important metrics such as average waiting time, maximum waiting time, minimum waiting time, and total patient volume. Waiting-time trends can be analyzed across different days, time periods, departments, doctors, or service areas. The dashboard uses charts, graphs, tables, and key performance indicators to present the analyzed information clearly. It can help identify peak hours and departments where patients experience longer waiting periods. Analysis of patient flow can also support better scheduling and resource allocation. Interactive filters allow users to examine waiting-time patterns based on specific dates, departments, or other relevant parameters. The system converts raw healthcare service data into meaningful operational insights without requiring manual calculations. Overall, the project demonstrates how data analytics and visualization can support efficient patient-flow monitoring and help healthcare facilities identify opportunities for reducing unnecessary waiting time.

I. Introduction

Patient waiting time is an important factor in evaluating the efficiency and quality of healthcare services. Long waiting periods can occur due to high patient volume, limited staff, appointment delays, registration procedures, or inefficient service processes. Monitoring waiting time helps healthcare facilities understand patient flow and identify areas where improvements may be required. The **Patient Wait-Time Analysis** system is developed to analyze and visualize patient waiting information in an organized manner. The system can collect data such as patient arrival time, registration time, appointment time, consultation start time, and service completion time. These records can be used to calculate average, minimum, and maximum waiting times at different stages of the healthcare process. Waiting-time patterns can be analyzed based on departments, doctors, dates, and different time periods. The system can also help identify peak hours when patient arrivals and waiting times are higher. Charts, graphs, tables, and key performance indicators can present the analyzed information in a simple and understandable format. Interactive filters allow users to examine specific departments, dates, or service stages. The analysis can help healthcare administrators understand patient flow and identify operational delays. It can also support better staff allocation, scheduling, and service planning. Overall, the project demonstrates how data analysis and visualization can be used to monitor patient waiting times and support more efficient healthcare service management.

II. Literature Survey

Previous studies on healthcare service efficiency have identified patient waiting time as an important indicator of hospital and clinic performance. Researchers have examined waiting time in areas such as registration, consultation, laboratory services, pharmacy services, and emergency departments. Long waiting periods can be associated with high patient demand, limited resources, scheduling problems, and inefficient workflow. Therefore, measuring and analyzing waiting time can help healthcare organizations understand operational performance and identify areas that require improvement.

Several studies have focused on patient flow and queue management to understand how patients move through different stages of healthcare delivery. Patient arrival patterns, service duration, appointment schedules, and the availability of healthcare staff can influence the time patients spend waiting. Time-based analysis can help identify peak periods when patient volumes are high and service capacity may be insufficient. Such analysis can provide useful information for improving appointment scheduling and allocating staff and other resources.

Research has also explored the use of data analytics and statistical methods for studying healthcare waiting times. Historical patient records can be analyzed to calculate average waiting time, maximum waiting time, service time, and patient volume. Comparing these measures across departments, doctors, weekdays, or time periods can help identify variations in service performance. Data-driven analysis can therefore provide a more objective approach to understanding operational delays than relying only on manual observations.

Data visualization and dashboard technologies have increasingly been applied to healthcare performance monitoring. Dashboards can combine patient volume, waiting time, service duration, and other operational indicators into a single visual interface. Charts, graphs, tables, and KPI cards make it easier for administrators to identify trends and compare performance between departments or periods. Interactive filters can further allow users to explore specific dates, departments, doctors, or service stages.

Based on these developments, the Patient Wait-Time Analysis system provides a practical approach for combining patient-flow analysis and visualization. The proposed system can analyze arrival patterns, waiting durations, consultation times, and service performance to identify areas with longer delays. Presenting these findings through an interactive dashboard can help healthcare administrators monitor operational performance and make informed decisions regarding scheduling and resource allocation. Overall, the project demonstrates how data analytics and visualization can support systematic monitoring of patient waiting time and contribute to more efficient healthcare service management.

III. System Analysis

System analysis is an important stage in developing the Patient Wait-Time Analysis system for monitoring healthcare service efficiency. The system focuses on analyzing patient arrival, registration, consultation, and service completion times. Patient

records are collected and organized into a structured dataset for further processing and analysis. Waiting time is calculated by determining the difference between patient arrival and service start times. Average, minimum, and maximum waiting times are calculated to understand overall service performance. Patient volume is analyzed across different days, departments, doctors, and time periods. Peak hours are identified by examining periods with high patient arrivals and longer waiting times. Department-wise analysis helps identify healthcare areas experiencing higher delays. Charts, graphs, tables, and KPI cards are used to present the analyzed information clearly. Interactive filters allow users to examine waiting-time patterns based on dates, departments, doctors, or service stages. The system helps healthcare administrators understand patient flow and identify operational bottlenecks. Overall, the system provides a centralized approach for analyzing patient waiting time and supporting better healthcare service management.

Existing System

The existing system for monitoring patient waiting time commonly depends on manual records, appointment registers, spreadsheets, or basic hospital management reports. Patient arrival and service information may be recorded separately at different stages of the healthcare process. Staff members may manually note registration, consultation, and service timings for individual patients. Calculating the waiting time for each patient can require additional manual effort. Healthcare administrators generally review records or basic reports to understand service delays. Identifying peak hours with high patient volume may be difficult when data is stored as raw records. Comparing waiting times across different departments or doctors can also require repeated calculations. Traditional systems may provide limited graphical representation of patient-flow information. Long waiting periods may therefore not be identified quickly or consistently. Manual data entry can result in missing information, incorrect timings, or calculation errors. Preparing daily, weekly, or monthly waiting-time reports requires additional time and effort. Limited integration between patient-flow data and analytical reports can make operational monitoring difficult. Therefore, a centralized dashboard-based system can provide a more efficient approach for analyzing patient waiting times.

Disadvantages Of Existing System

- Heavy dependence on manual patient records.
- Time-consuming calculation of waiting times.
- Limited visualization of patient-flow trends.
- Difficult to identify peak waiting periods quickly.
- Difficult to compare department-wise waiting times.
- Manual recording may result in missing or incorrect data.
- Higher possibility of calculation and data-entry errors.
- Difficult to identify operational bottlenecks.
- Limited analysis of doctor-wise service performance.
- Difficult to analyze historical waiting-time trends.
- Manual preparation of reports requires additional effort.
- Limited interactive filtering and data exploration.

Proposed System

The proposed system provides an interactive Patient Wait-Time Analysis platform for monitoring and analyzing healthcare service performance. The system collects patient arrival, registration, appointment, consultation, and service completion information. The collected data is cleaned and organized into a structured format before analysis. Waiting time is calculated for individual patients and different stages of the healthcare process. Average, minimum, maximum, and overall waiting times are calculated to measure service efficiency. Patient volume is analyzed across different dates, departments, doctors, and time periods. Peak hours are identified by examining patient arrival and waiting-time patterns. Department-wise analysis helps identify areas where patients experience longer delays. Key performance indicators such as total patients, average waiting time, maximum waiting time, and service duration are displayed on the dashboard. Charts, graphs, tables, and KPI cards provide a clear visual representation of patient-flow information. Interactive filters allow users to explore waiting times based on dates, departments, doctors, and service stages. The system helps administrators identify delays and understand the factors affecting patient flow. Overall, the proposed system provides a centralized and visual approach for improving patient wait-time monitoring and healthcare service planning.

Advantages of Proposed System

- Provides centralized patient wait-time analysis.
- Calculates average, minimum, and maximum waiting times.
- Helps identify peak patient-flow periods.
- Supports department-wise waiting-time analysis.
- Enables doctor-wise service performance analysis.
- Provides clear charts and visualizations.
- Displays important healthcare performance KPIs.
- Helps identify operational delays and bottlenecks.
- Supports analysis of historical waiting-time trends.
- Provides interactive filtering and data exploration.
- Reduces manual calculation and report preparation.
- Supports better scheduling and resource allocation.

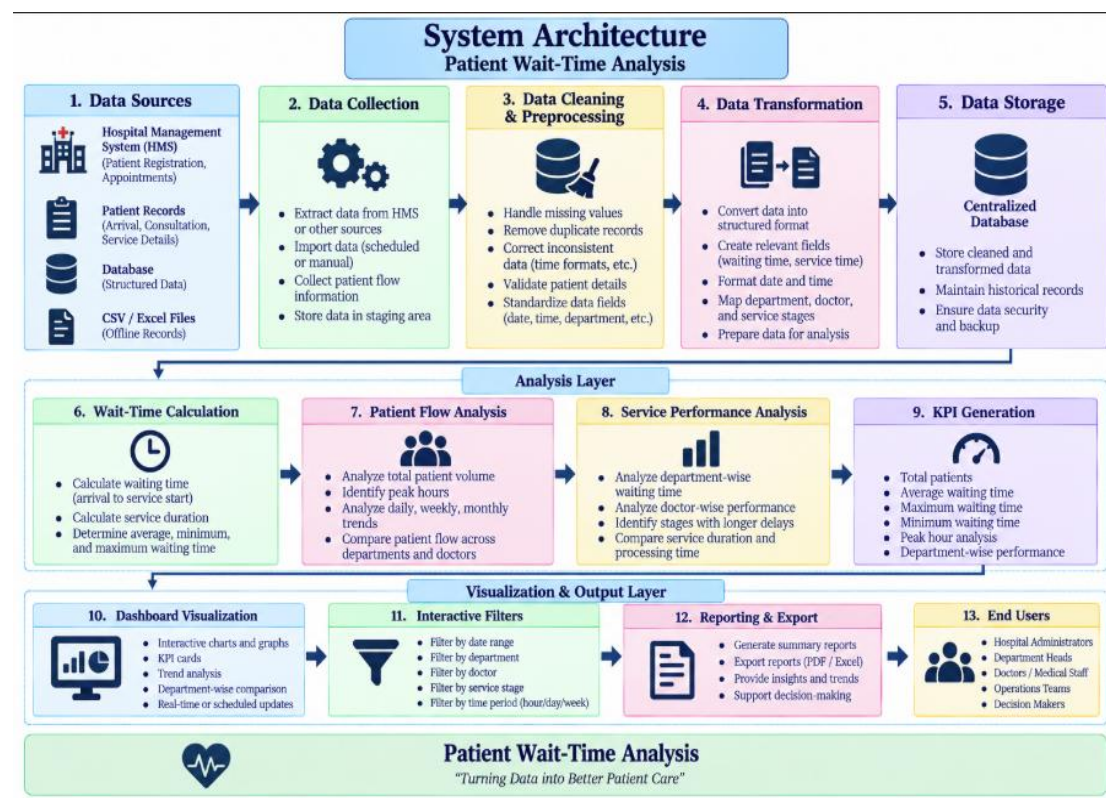
IV. Methodology

The methodology begins with collecting patient service data from available healthcare records or datasets. The collected information includes patient arrival time, registration time, appointment time, consultation start time, service completion time, department, and doctor details. The dataset is examined to identify missing, duplicate, or inconsistent records. The data is cleaned and transformed into a structured format suitable for analysis. Waiting time is calculated by comparing patient arrival or registration time with the corresponding service start time. Service duration and total patient-processing time are also calculated where the required information is available. The processed data is grouped according to dates, departments, doctors, and different time periods. Average, minimum, maximum, and other relevant waiting-time measures are calculated. Peak hours are identified by analyzing patient volume and waiting-time patterns throughout the day. Suitable charts, graphs, tables, and KPI cards are selected to present the analyzed information. An interactive dashboard is developed to provide a clear view of patient waiting-time performance. Filters are added to allow users to analyze specific dates, departments, doctors, and service

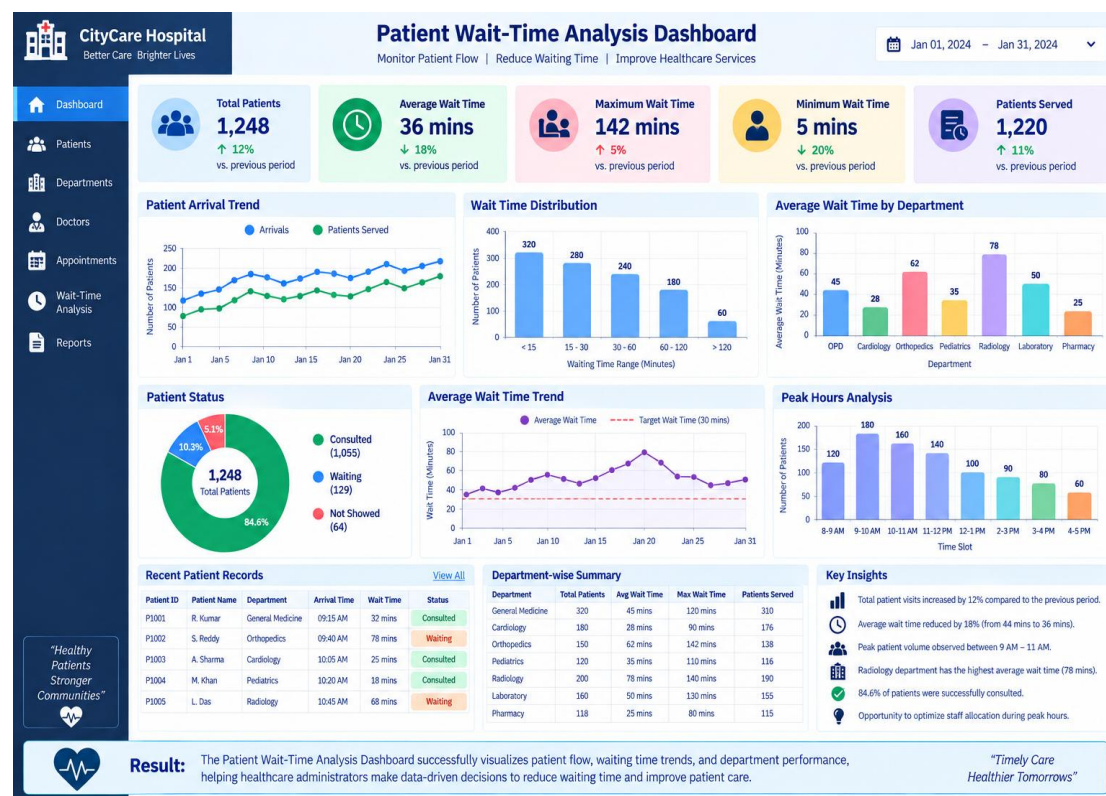
stages. Finally, the system is tested to verify the accuracy of waiting-time calculations, visualizations, filters, and displayed results.

System Architecture

The system architecture represents the complete workflow of the Patient Wait-Time Analysis system from healthcare data collection to final visualization. The process begins with the Patient Data Source, containing arrival, registration, appointment, consultation, department, doctor, and service information. The Data Collection Module gathers the required patient-flow records from the available data source. The Data Cleaning Module removes duplicate, incomplete, and inconsistent records to improve data quality. The Data Transformation Module organizes the cleaned information into suitable fields and time formats. The Wait-Time Calculation Module calculates individual and overall patient waiting durations. The Service Analysis Module evaluates consultation duration and service-processing times where applicable. The Patient Flow Analysis Module analyzes patient volume across dates, departments, doctors, and time periods. The Peak-Time Analysis Module identifies periods with high patient volume and longer waiting times. The processed information is provided to the Dashboard Visualization Module for graphical representation. The KPI Module displays total patients, average waiting time, maximum waiting time, and other service indicators. The Interactive Filter Module allows users to explore data by date, department, doctor, and service stage. Finally, the Reporting and Output Module presents charts, tables, trends, and summarized healthcare service insights. Overall, the architecture follows the workflow **Patient Data → Data Collection → Data Cleaning → Data Transformation → Wait-Time Calculation → Service Analysis → Patient Flow Analysis → Peak-Time Analysis → Visualization → KPIs & Filters → Reports → Final Dashboard**.



V. Result and Output



VI. Conclusion

The Patient Wait-Time Analysis system successfully provides a structured approach for monitoring and analyzing patient waiting times in healthcare facilities. The system organizes patient arrival, registration, consultation, and service-related information for effective analysis. Waiting times are calculated to understand the overall efficiency of different healthcare service stages. Average, minimum, and maximum waiting times provide useful indicators of service performance. Patient-flow analysis helps identify periods with high patient arrivals and increased waiting times. Department-wise and doctor-wise analysis can help identify areas experiencing longer delays. Charts, graphs, tables, and KPI cards present the analyzed information in a clear and understandable format. Interactive filters allow users to examine waiting-time patterns based on dates, departments, doctors, and service stages. The dashboard reduces the effort required to manually calculate and compare patient waiting information. The identified trends can support better scheduling, staff allocation, and healthcare service planning. Overall, the project demonstrates how data analytics and visualization can improve the monitoring of patient flow and waiting-time performance. The proposed system provides useful insights that can support healthcare administrators in making informed decisions to reduce unnecessary delays and improve the efficiency of patient services.

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