



## Online Medicine Donation System

**Parbhat Singh, Teerth Narula, Neha Prakash, Jagbeer Singh,**  
[parbhat.singh.cs.2019@miet.ac.in](mailto:parbhat.singh.cs.2019@miet.ac.in) , [teerth.narula.cs.2019@miet.ac.in](mailto:teerth.narula.cs.2019@miet.ac.in)

Department of Computer Science of Engineering and Technology.

Meerut Institute of Engineering and Technology, Meerut.

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### ABSTRACT:

This system seeks to give unneeded medications and treatments. Unused remedies may be given to a needy person for future use. This software enables users to donate unneeded medications to non-profit organisations. Admin, NGO, and User are the three individuals who make up this organisation. The administrator will log in and manage users, barring and deleting those who are using inappropriate or outdated medications. Admin also has a consultant who must approve of the appointment requested by the NGO. The administrator receives a monthly noise of provided cures. Using authorizations, NGOs can register and log in. They can advertise an appointment request that will be placed more appropriately and listed by the administrator. The stock is managed by an NGO, which aids in keeping track of the available treatments. All donation directly impacts our organization and help us further in our goals. Donations of medicines can take many different forms, including immediate assistance, long-term assistance, assistance to international health systems, or assistance to specific medical facilities. Donations may come from several pharmaceutical companies, they may take the form of government or non-profit help, or they may be made specifically for one or more healthcare facilities. Individual hospitals and entire health systems are among the recipients of medicine gifts.

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### 1.INTRODUCTION:

When it is properly planned and managed, a medicine donation can prevent death and lessen suffering. Budgets for development funding may be reduced as a result of actual contribution patterns, allowing these facilities to be put to better use. The "Online Medicine Donation System" connects a vast network of drug contributions with non-profit organizations and old age homes. A non-profit organization (NGO) is one that is independent of governments and other broad administrative bodies. Although they frequently receive blessings, some

fully forgo government money and are operated by volunteers. In the past year or two, there has been a significant growth in Internet users, and that number is continually rising. As a result, using a website has become relatively simple for users. We are aware that there are a number of current donation sites for pharmaceutical products, however many falls short of expectations and need additional human data processing. To solve this issue in the future, new and emerging image processing technologies can be developed. With the help of this

technology, we can overcome all the aforementioned issues and create a website that is incredibly user-friendly [1][2].

There must be proper guidelines for the medicine donation. Unfortunately, there are several instances of medical contributions that cause issues rather than providing relief. An objective evaluation of the demand for medical supplies is not always possible after a significant tragedy, and emotional requests for widespread medical assistance may be made without any indication of the most pressing requirements [3][4].

- Donated medications were irrelevant to the targeted level of treatment, the disease pattern, or the emergency scenario. Medicines have been given out that local medical experts and treatments were unaware of, or that did not follow locally established policies and accepted standard treatment protocols [5].

#### GUIDELINES FOR MEDICINE DONATIONS

- Unsorted donations of medications with labels in an unfamiliar language had been received. Some of the donated medications were packaged without an International Nonproprietary Name (INN) or generic name and were sold under trade names that were not authorized for use in the recipient country. Sometimes, drugs were given away without the necessary documentation.

- Free samples given out by medical practitioners or medications returned to donors by patients have both been gathered and donated [6][7].

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- We have received donated medications with a very low shelf life. They may have expired before they got to the victims in many circumstances [9].

- Donor organizations occasionally disregarded regional administrative requirements for obtaining and dispersing

medical supplies [10].

- Despite the fact that some donors have provided drugs, patients were unable to add them to their inventory management systems. Sometimes as a result, donations accumulated and eventually ran out of time.

In the human race, life is a crucial issue [11]. Many people experienced health issues. A vital aspect of life is health care. People in underdeveloped nations have restricted access to medical facilities due to a lack of physicians and other medical professionals. As a result, these nations have a high need for healthcare.

One of the emerging nations is India. India has created several NGO's, organizations, and public health initiatives [12][13].

Access to healthcare services in India following the merger is also crucial.:

1. India is a very populated nation. By 2021, India will have a population of about 1.38 billion people. 382 people live in India per square kilometer [14][15].

2. The World Health Organization (W.H.O.) estimates that for every 1,000 Indian inhabitants, there are 1.34 doctors.

3. People's well-being and the nation's poverty are removed by poverty, which also raises issues with public health. India has a total population of over 1.2 billion people, with 6.7% of them earning less than \$2 per day (the national poverty threshold).

Here, our goal was to create a website that might help collect unused medications and medical supplies from donors like NGOs, such as wheelchairs, crutches, and canes [16] [17].

## 2.LITERATURE SURVEY:

### (I)KHUSHI

The cricketing legend Kapil Dev founded KHUSHII in 2003 to support young people in making positive changes in their life via education. For this reason, KHUSHII coordinates nationwide efforts to make sure that students finish their

education. We also assist them in maintaining their health and giving their family financial stability so that kids may concentrate on their studies [18][19].

Cons

Khushi charges a 10 percent donation fee, whereas we don't, therefore it is one of the disadvantages of their website. and it doesn't interact with NGOs and patients directly.

### (II) Uday Foundation

A reputable NGO in Delhi named Uday Foundation is dedicated to improving the lives of poor families in India. They have a number of programs available, including those that help children's education by collecting food donations, discarded clothing, unused medications, and even educational kit donations. They food donation program provides children from faraway regions and the families of hospital patients with free, wholesome meals. They also provide people the chance to contribute food in honor of a loved one or in celebration of a milestone. Our program for collecting worn clothing recycles them and gives them to people in need [20].

Cons

This foundation solely serves Delhi; however, our website offers assistance to all of India.

### (III) CMMB (catholic medicine mission board)

They are a worldwide, faith-based NGO that offers communities suffering from poverty and uneven access to healthcare long-term, cooperative medical and development help [21].

Through healthcare program and initiatives, the delivery of medications and medical supplies, and the placement of volunteers, they have worked for over a century to build and assist communities [22][23].

They emphasize women's and children's health as a component of our worldwide strategy platform. They are supplying

selected populations in Africa, Latin America, and the Caribbean with sustainable health services in collaboration.

Cons

It is only available in the Caribbean, Latin America, and Africa. These websites encourage us to build similar websites and assist Indian citizens.

### 3.PROPOSED SYSTEM:

In this system, we talk about the building and designing of the system.

#### Theory design

This part focuses on our program's conceptualization, which is an example of a programme that establishes fundamental ideas that may be utilised to know, comprehend, and replicate our programme. The online service will act as a conduit between users and approved sources (NGOs) that will provide drugs to the underprivileged. With this web platform, sponsors can give their prescription drugs. and registered doctors can recommend drugs to recipients for their patients who can't afford these pricey drugs. This completes the scheme. Participants in our programme include pharmacists who provide their services. people who will receive free medicine, and people who link resources so that any NGO can respond by keeping track of the drugs available. collecting drugs from donors, and prescribing medicines to people who need them to finish the programme. The system will be able to validate the account and any information provided by the provider and NGOs when NGO representatives and a pharmacist or other provider register an account on our software side. Registration of the user's name, address, email address,

and password are required for this process [24][25].

By presenting the certified prescription issued by the doctors for the treatment, the beneficiary can also pick up the drug directly from the NGOs. Alternately, the patient can call a doctor who is affiliated with the programme, and if the patient is unable to pay for the prescription, the doctor may propose going to the NGO on this order and requesting the medication through the programme. to purse medicine. As a result, receivers do not require direct access to the portal that addresses their power and technological problems associated with using smart phones and the internet. The concerned administrator made sure the recommended medication was still available before giving it to beneficiaries. As a result, the programme will satisfy participants' needs.

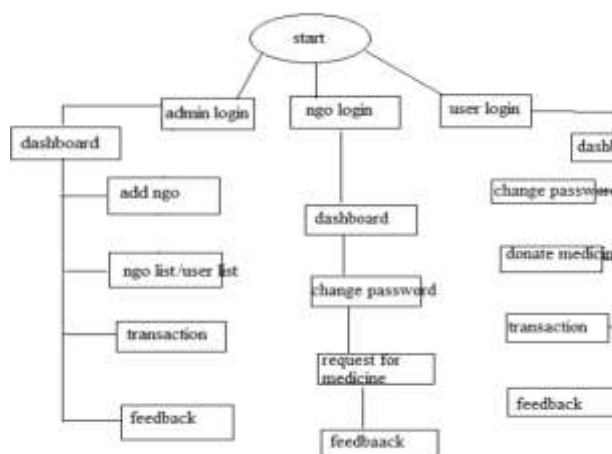


Fig 1: Workflow of overall proposed methodology

This section illustrates the process of creating a website. The development phase is divided into three sections:

### 1. Initial Database and Server End

### 2. Security Elements

### 3. User Interface

Database and Server End In order to prevent unauthorised access. we first set up the ER (Entity Relationship) database recipients in accordance with the specifications of our website and used the database on the MYSQL server. On this website, we've employed two distinct logins (administrator and user) for security reasons to ensure that nobody can easily access or finish the high-quality control panel information. The control panel updates the entire system and confirms that the software was successfully delivered from the user database.

### Security Features

Users must first register in order to access web portal services, and once all necessary information has been verified-doctor registration numbers are used to verify doctors-registration will terminate. We employed fundamental HTTP authentication, which authorises a strong user-encrypted password validated by the current email address with encrypted message (using the password hash () PHP function). A session-based login will be active until the user logs out or the system has to be uninstalled unavoidably after the precise time the session ends. We have therefore worked to make the web-portal more dependable and safer for users in order to enable these kinds of security features.

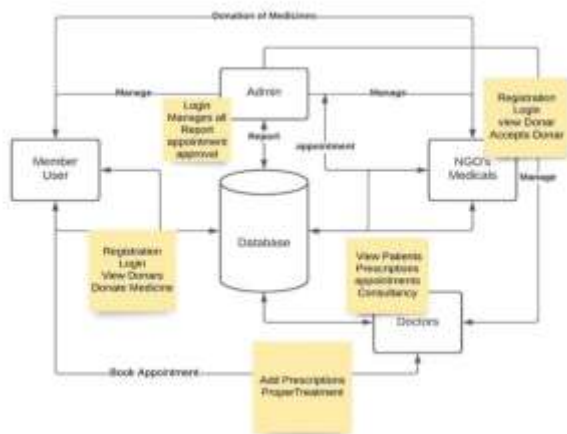


Fig 2: Overall Workflow of Backend.

User Interface:

Secure access is made available through the portal so that users can personalise their information, and the web portal's content can be customised to meet the needs of different users (donors, NGOs, and recipients). It has simultaneous device and browser compatibility set up in a user-friendly manner to make it simpler to access the actual user HTML, CSS, JavaScript, jQuery, PHP, and other technologies have all been employed in the creation of portal technology. What improves the site's user experience? The

productivity management module continuously searches the information table to decide when files should be examined. When testing is necessary, the module sends the data to the visible cloud machine, sends it back to the information table, and then does the necessary tasks before sending the information file back to the production management module. The production management module starts creating new input when production is lost.

Fig 3: Index Page

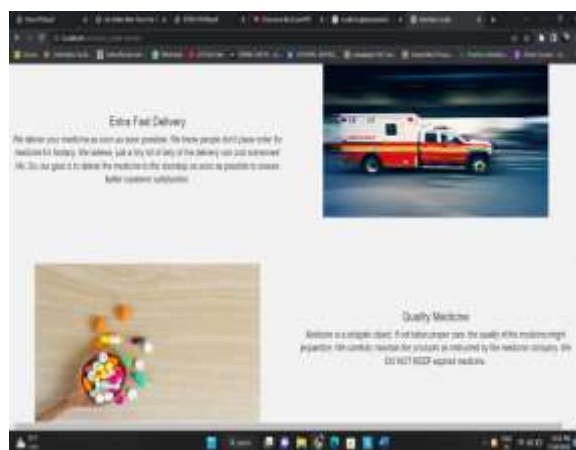


Fig 4: Dashboard Page



scanning cycle, which will be more difficult and rapid. is known as checking everything while rotating the scanner inside the information table. The

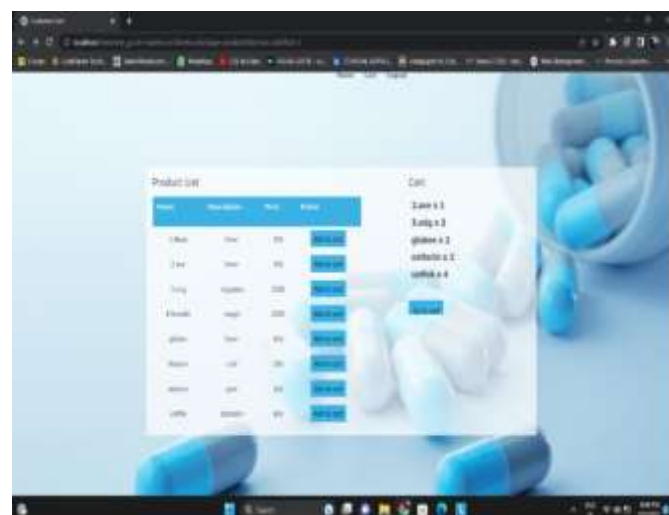


Fig 5: Ambulance List



Fig 6: Pharmacy List

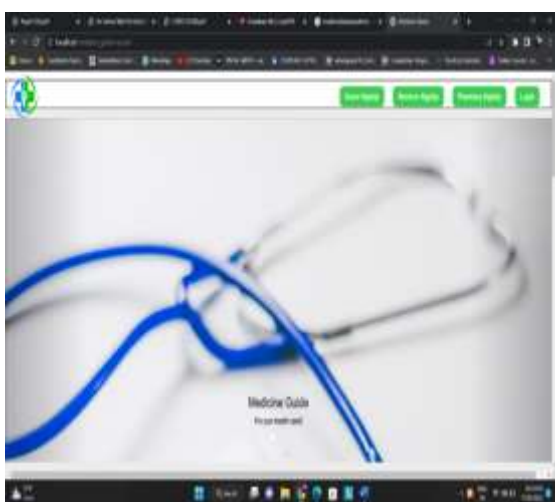


Fig 7: Product List

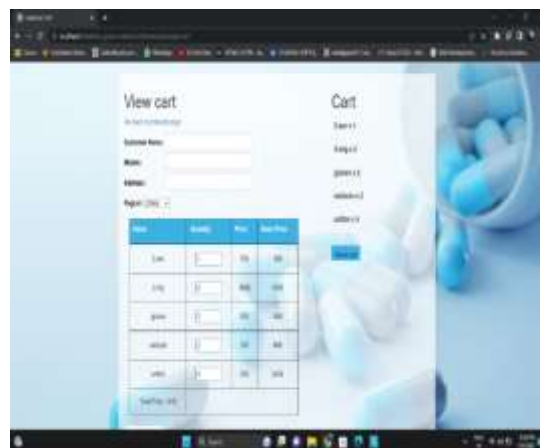


Fig 8: Cart Interface

## 5.CONCLUSION

India needs a thorough national human resources policy if it is to achieve universal health care. While implementing other cutting-edge tactics to increase the number of people working in the health sector, a policy may also encourage mainstreaming and task-shifting of medical professionals who practise traditional Indian medicine (ayurveda, yoga, naturopathy, unai, and siddha), as well as homoeopathy, to work in these fields.

It is important to make sure that a contribution has as beneficial of an effect as possible on the recipient. According to this concept, all gifts should be provided in response to a recipient's proclaimed need; they shouldn't be made until the recipient specifically requests them. The second guideline is that gifts must be provided with the utmost respect for the recipient's authority and in support of any existing administrative and regulatory structures. The third criterion is that there shouldn't be



any double standards; if an object is of bad quality in its place of origin, it should similarly be of poor quality when given. The recipient and giver must keep open channels of communication as the fourth rule.

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