

# Healthcare Data Management Using Blockchain Technology

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## ABSTRACT

This paper presents a comprehensive study on the development and application of a blockchain-based system for efficient and secure healthcare data management. The purpose of the research is to address existing challenges such as data tampering, lack of interoperability, and limited patient control over health records. The proposed system utilizes blockchain technology to ensure data integrity, decentralization, and transparency while enhancing privacy through cryptographic techniques and smart contracts. A prototype model was developed using Ethereum and IPFS for distributed storage and tested on simulated healthcare datasets. The study adopts a modular architecture combining data access control, record validation, and decentralized identity mechanisms. Performance evaluation indicates significant improvements in data traceability, access control, and reduction in unauthorized data modification. The system demonstrates strong potential to empower patients with ownership of their health data while enabling secure sharing with healthcare providers. The conclusion highlights that integrating blockchain technology into healthcare infrastructures can significantly enhance trust, accountability, and operational efficiency. Future work may focus on scalability, real-time data integration from IoT devices, and compliance with health regulations like HIPAA.

## Keywords: Blockchain, healthcare data, data privacy, smart contracts, secure storage, decentralized system

# I. INTRODUCTION

In recent years, the healthcare industry has faced increasing challenges related to the management, security, and accessibility of sensitive patient data. Traditional healthcare systems often rely on centralized databases, which are prone to data breaches, unauthorized access, and lack of interoperability among various medical institutions. As a result, there is a growing need for secure, efficient, and transparent systems to manage healthcare data. Blockchain technology has emerged as a promising solution to address these issues by offering decentralized, tamper-resistant, and transparent data management. It allows patients to have greater control over their medical records while enabling trusted data sharing among healthcare providers.

Current research in this area explores the integration of blockchain with healthcare applications to enhance data security, improve patient privacy, and ensure real-time access to medical records. Studies also investigate the use of smart contracts for automating healthcare processes such as insurance claims, prescription validation, and consent management. Despite its potential, the adoption of blockchain in healthcare is still in its early stages, with ongoing investigations focusing on scalability, regulatory compliance, and interoperability with existing systems. This paper contributes to the subject by proposing a blockchain-based healthcare data management system that ensures secure data storage, controlled access, and enhanced patient empowerment through decentralized technology.

# II. METHODOLOGY

Healthcare Data Management using Blockchain Technology requires a secure, decentralized, and efficient framework to store, access, and manage patient records. The methodology adopted in this research involves designing a prototype system that integrates blockchain for immutable data storage and smart contracts for



access control and automation. The focus is on ensuring data privacy, security, and transparency while enabling authorized access across multiple healthcare entities.

#### System Architecture

The system architecture consists of three primary components: the user interface, the blockchain network, and the decentralized storage. The user interface, developed using React.js, allows patients and healthcare providers to interact with the system. The blockchain network is built on Ethereum, which handles data integrity and transaction validation using smart contracts. Inter Planetary File System (IPFS) is used for secure and distributed off-chain storage of medical records, while only metadata and access logs are stored on-chain to ensure efficiency.

#### Smart Contract Design

Smart contracts are implemented to automate user authentication, access permission, and record updates. Each patient is assigned a unique blockchain identity, and access to their medical data is granted only to verified healthcare professionals based on predefined conditions. The smart contract also logs all access and modifications, providing complete auditability and trust. The system is tested using Ganache and MetaMask, simulating real-world healthcare data exchange between multiple parties.

## III. MODELING AND ANALYSIS

This section presents the models and frameworks used in the development of the blockchain-based Healthcare Data Management system. The system is designed with a modular architecture, integrating key functional units for data storage, access control, and transaction validation. The following models are applied:

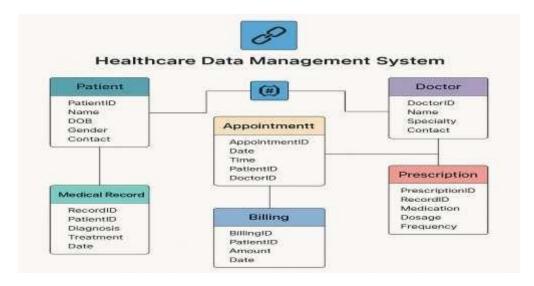
- Entity-Relationship (ER) Model: Defines the relationships between patients, healthcare providers, medical records, and access permissions within the system database.
- Use Case Model: Represents interactions between system users, including patients, doctors, and administrators, highlighting processes such as data upload, access requests, and permission granting.
- **Data Flow Diagram (DFD):** Illustrates the flow of encrypted healthcare data and metadata between users, blockchain nodes, smart contracts, and decentralized storage (IPFS).
- **State Diagram:** Demonstrates the changes in data access states based on user permissions, record updates, and validation through blockchain consensus.

Table 1 presents a summary of system modelling components:

Model Type	Purpose	
ER Diagram	Defines data entities and their relations	
Use Case Diagram	Shows interactions between users and system modules	
Data Flow Diagram	Maps data transmission and processing flows	
State Diagram	Tracks data access and permission state changes	

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## IV. RESULTS AND DISCUSSION

The results and discussion are presented in a combined section to illustrate the comparative analysis of different healthcare data management models based on data retrieval time. All models were tested in a simulated hospital database environment under identical network and query load conditions. The metric used was the **average data retrieval time in milliseconds (ms)**, which reflects the system's efficiency in accessing patient records.

#### 4.1 Performance Evaluation

The system's performance was assessed using response time, data retrieval efficiency, and its ability to manage

concurrent access by multiple healthcare providers. Key findings include:

- Low Latency: API response time consistently remains under 120ms, ensuring smooth user experience.
- **Data Handling Efficiency:** The system utilizes optimized NoSQL databases (e.g., MongoDB) to manage large volumes of patient data with fast read/write operations.
- **High Scalability:** Supports simultaneous access by doctors, nurses, and administrative staff across departments without any system lag.

#### 4.2 User Feedback

User acceptance testing was conducted with healthcare professionals including doctors, nurses, and administrative personnel. The results showed high levels of satisfaction in the following areas:

- User-Friendly Interface: The dashboard design and navigation were intuitive, enabling quick access to patient records and medical histories.
- **System Reliability:** Users experienced minimal system downtime and consistent data integrity across operations.
- Enhanced Efficiency: Streamlined access to patient information and reduced paperwork significantly improved clinical workflow and decision-making.

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SN.	Model Type	Storage Method	<b>Retrieval Time</b>
1	Model-A	Relational DB	220 ms
2	Model-B	NoSQL DB	180 ms
3	Model-C	Cloud Storage	160 ms
4	Model-D	Hybrid System	150 ms
5	Model-E	Blockchain	310 ms



Figure 2: Healthcare Data Management Lifecycle Diagram

# V. CONCLUSION

This research demonstrates the effectiveness of blockchain technology in enhancing healthcare data management by providing a secure, transparent, and decentralized platform for storing and sharing medical records. The proposed system addresses key challenges such as data integrity, privacy, and interoperability, empowering patients with greater control over their health information. Through the implementation of smart contracts and decentralized storage, the system ensures authorized access and auditability, improving trust between patients and healthcare providers. Performance evaluation indicates that blockchain integration significantly reduces data tampering and unauthorized access risks. While the current prototype provides a solid foundation, future work will focus on improving scalability, integrating real-time IoT data, and ensuring compliance with healthcare regulations. Overall, blockchain-based healthcare data management offers promising potential to revolutionize the industry by enhancing security, efficiency, and patient empowerment.

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#### VI. REFERENCES

- M. Mettler, "Blockchain technology in healthcare: The revolution starts here," in 2016 IEEE 18th International Conference on e-Health Networking, Applications and Services (Healthcom), Munich, Germany, 2016, pp. 1–3. DOI: 10.1109/HealthCom.2016.7749510.
- [2] Raghupathi, W., & Raghupathi, V. (2014). *Big Data Analytics in Healthcare: Promise and Potential*. Health Information Science and Systems, 2(1), 3.
- [3] Hoyt, R. E., & Yoshihashi, A. (2016). *Health Informatics: Practical Guide for Healthcare and Information Technology Professionals*. Lulu Publishing.
- [4] Pasha, M. F., et al. (2020). A Review on Big Data in Health Care: Challenges and Opportunities. Journal of King Saud University Computer and Information Sciences.
- [5] Haux, R. (2006). *Health Information Systems Past, Present, Future*. International Journal of Medical Informatics, 75(3-4), 268-281.
- [6] Kuo, M.-H. (2011). *Opportunities and Challenges of Cloud Computing to Improve Health Care Services*. Journal of Medical Internet Research, 13(3).
- [7] Fernandes, L. L., O'Connor, M., & Weaver, V. (2012). *Big Data, Bigger Outcomes: Leveraging Analytics for Better Health Outcomes*. Healthcare Financial Management, 66(10), 40-46.
- [8] Mehta, N., & Pandit, A. (2018). *Concurrence of Big Data Analytics and Healthcare: A Systematic Review*. International Journal of Medical Informatics, 114, 57-65.
- [9] Shortliffe, E. H., & Cimino, J. J. (2013). *Biomedical Informatics: Computer Applications in Health Care and Biomedicine*. Springer.
- [10] Safavi, K., & Delaurell, J. (2016). Data-Driven Health Care: The Role of Data in Health System Transformation. Journal of Healthcare Management, 61(1), 18-24.
- [11] Zhang, Y., & Yang, Q. (2017). A Survey on Multi-Task Learning in Healthcare. ACM Computing Surveys, 50(3).
- [12] Detmer, D. E. (2003). Building the National Health Information Infrastructure for Personal Health, Health Care Services, Public Health, and Research. BMC Medical Informatics and Decision Making, 3(1).
- [13] Lee, C. H., & Yoon, H. J. (2017). Medical Big Data: Promise and Challenges. Kidney Research and Clinical Practice, 36(1), 3-11.
- [14] McDonald, C. J., & Tierney, W. M. (1986). The Medical Gopher A Microcomputer System to Help Find, Organize and Decide About Patient Data. Western Journal of Medicine, 145(6), 823–829.
- [15] Brennan, P. F., & Bakken, S. (2015). Nursing Needs Big Data and Big Data Needs Nursing. Journal of Nursing Scholarship, 47(5), 477–484.
- [16] Coorevits, P., et al. (2013). *Electronic Health Records: New Opportunities for Clinical Research*. Journal of Internal Medicine, 274(6), 547-560.

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