

AI-Based Smart Healthcare System for Optimized Ambulance Routing and Predictive ICU Bed Availability

¹Kandula Dharani, ²Dammalapati Sravanthi, ³Bonthala Govinda Rajulu, ⁴Nidikonda Srinivasarao, ⁵Mrs. A Sai Pujitha

^{1,2,3,4}U.G. Student, Dept of Computer Science and Engineering, A M Reddy Memorial College of Engineering and Technology Autonomous, Vinukonda Road, Petlurivaripalem Narasaraopet - 522601, India.

⁵Assistant Professor, Dept of Computer Science and Engineering, A M Reddy Memorial College of Engineering and Technology Autonomous, Vinukonda Road, Petlurivaripalem Narasaraopet - 522601, India.

ABSTRACT

Healthcare systems face significant challenges in emergency response and resource management, especially during peak demand or mass casualty events. Delays in ambulance routing and ICU bed allocation can critically affect patient outcomes. This project proposes an AI-Based Smart Healthcare System that integrates optimized ambulance routing with predictive ICU bed availability. Traffic data, hospital capacity information, and real-time fleet status are processed together to determine the fastest and safest routes for emergency response vehicles. Machine learning models predict ICU bed availability using historical hospital data and current patient transitions. Geographic Information System (GIS) and shortest path algorithms (e.g., Dijkstra's, A) work in tandem with AI to provide dynamic routing. Predictive analytics forecast future demand for ICU resources based on patient inflow*

patterns. The system enhances decision-making for emergency dispatchers and hospital administrators. Alerts are generated when ICU capacity thresholds approach critical limits. Data privacy and patient confidentiality are maintained. The system can integrate with existing healthcare networks and smart city infrastructure. Evaluations show improvements in routing efficiency and bed utilization. Overall, the proposed solution improves emergency medical services (EMS) and optimizes resource allocation, reducing response time and ultimately saving lives.

KEYWORDS

AI-Based Healthcare Ambulance Routing Optimization Predictive ICU Bed Availability Machine Learning Emergency Response Analytics

INTRODUCTION

Healthcare delivery in emergency

scenarios relies on timely response and efficient resource allocation. Ambulance dispatch and routing are critical components of emergency medical services (EMS). Delays caused by traffic congestion or inefficient routing can compromise patient survival rates. Similarly, Intensive Care Unit (ICU) bed availability is a dynamic resource that must be managed proactively. Predicting bed availability enables hospitals to plan transfers and admissions without delays. Traditional EMS and hospital systems operate separately and often lack real-time integration. With urban populations growing, smart solutions are needed to improve emergency outcomes. Artificial Intelligence (AI) and Machine Learning (ML) provide powerful tools to analyze complex datasets and make predictive decisions. Optimized ambulance routing uses real-time traffic data and routing algorithms to minimize travel time. Predictive models forecast ICU bed availability based on historical data and current patient status. Integrating these capabilities creates a more responsive healthcare ecosystem. Smart healthcare systems leverage data from sensors, hospital information systems, and mobile networks. Visualization dashboards help dispatchers and administrators monitor operations in real time. Ethical handling of patient information is maintained to ensure

privacy. This project aims to enhance EMS with an intelligent, data-driven approach to emergency response and resource planning.

LITERATURE SURVEY

Early research on ambulance routing used static shortest-path algorithms without real-time data integration. Dynamic routing models later incorporated traffic prediction techniques using sensors and GPS data. Traditional methods often failed during peak traffic or unplanned events. Machine learning approaches, such as reinforcement learning and neural networks, have been applied to learn optimal routing decisions under varying conditions. Studies show that real-time traffic data can reduce ambulance travel times significantly. Research on ICU bed prediction has focused on logistic regression and time-series analysis. These models use historical hospital admissions, discharge patterns, and patient severity to forecast bed availability. Deep learning models, including LSTM and GRU networks, improve temporal prediction performance. Integrated healthcare systems have been proposed to optimize resource management, but they are often siloed in either routing or bed prediction. Some works use GIS for geographic context in routing but without predictive analytics for hospital resources. AI-based predictive systems show promise in proactive

healthcare planning. Real-time data streams pose challenges in scalability and reliability. Ethical and privacy concerns about patient data usage are also highlighted. Cloud-based solutions provide scalable infrastructure for real-time analytics. Few studies combine both ambulance routing and ICU bed prediction in a unified framework. This project addresses that integration gap with an intelligent, holistic approach.

EXISTING SYSTEM

Traditional ambulance dispatch systems use static routing, often based on shortest distance rather than travel time. Traffic updates are occasionally considered, but not integrated in a predictive manner. Dispatchers rely on manual decision-making and experience for routing choices. Hospital bed availability is often tracked manually or through standalone hospital information systems. ICU bed status updates are communicated via phone calls or internal dashboards, leading to potential delays. There is little integration between ambulance dispatch and hospital capacity data. Predictive capabilities for future ICU availability are minimal or nonexistent. EMS organizations lack real-time analytics to guide routing and allocation decisions. SIS (Standalone Information Systems) are siloed and do not share data between EMS and hospital networks. Delays in updates

can result in ambulances being rerouted at the last minute. False routing due to outdated traffic data increases response time. Hospital administrators often react to bed shortages rather than proactively plan. Manual bed management increases risk of bottlenecks during surge demand. Alerting is basic and not predictive. Large datasets are underutilized in decision-making. Overall, existing systems have limited intelligence and coordination between emergency services and resource management.

PROPOSED SYSTEM

The proposed system integrates AI-powered ambulance routing with predictive ICU bed availability modeling. Real-time traffic and fleet data are collected via GPS and sensor networks. Ambulance routing uses a hybrid of GIS, shortest-path algorithms, and machine learning models to predict travel times and adjust routes dynamically. Predictive ICU bed availability is generated using historical hospital data, admissions/discharges, and patient severity scores. Machine learning models such as LSTM networks forecast near-future bed occupancy levels. The system includes automated alerts when ICU capacity approaches critical levels. Data privacy and HIPAA-like compliance are enforced for patient information. A unified dashboard provides dispatchers with

routing options and predicted hospital readiness. Cloud deployment ensures scalability for multiple regions. Integration with hospital information systems (HIS) allows real-time updates of bed status. The framework adapts to traffic pattern changes, unexpected road closures, and seasonal demand variations. Predictive analytics help administrators allocate staff and resources proactively. Mobile apps provide real-time navigation to ambulance drivers. AI modules continuously learn from new data to improve predictions. Dynamic rerouting minimizes arrival time. The solution enhances coordination between EMS and hospitals for better patient outcomes.

SYSTEM ARCHITECTURE

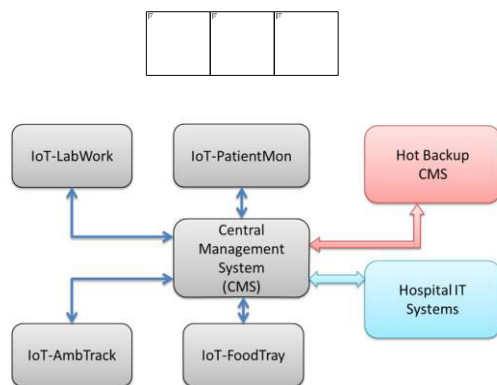


Fig.1 System Architecture

METHODOLOGY DESCRIPTION

1. Data Collection: Collect traffic data (GPS feeds), ambulance fleet status, historical hospital admissions/discharges, and ICU occupancy. 2. Preprocessing: Clean and

normalize datasets; address missing values and normalize time stamps. 3. Feature Engineering: Extract traffic patterns, peak times, ambulance speed, hospital admission rates, and patient severity indicators. 4. Real-Time Traffic Prediction: Use ML regression models (e.g., Random Forest Regressor) to estimate travel time based on current traffic conditions. 5. Routing Module: Implement GIS and dynamic shortest-path algorithm (A* or Dijkstra), enhanced with ML traffic predictions for optimal routing. 6. ICU Bed Modeling: Use LSTM neural networks for time-series forecasting of ICU bed availability. 7. Training and Validation: Train models using historical traffic and hospital data; validate with k-fold cross-validation. 8. Dashboard Design: Create unified dashboards for dispatchers showing routes, ETA, and ICU predictions. 9. Alert Engine: Set thresholds for ICU bed availability to trigger automatic alerts. 10. Cloud Deployment: Deploy services in cloud infrastructure (e.g., AWS, Azure) for scalability. 11. Mobile Application Integration: Provide real-time guidance to EMS drivers. 12. Adaptive Learning: Continuously update models with incoming data. 13. Security and Privacy: Implement encryption and access control for sensitive data. 14.

API Integration: Connect HIS and EMS data streams via secure APIs. 15. Evaluation Metrics: Measure ETA accuracy, prediction errors, and reduction in response time. 16. User Training: Train dispatch and hospital staff on system usage. 17. Logging & Auditing: Maintain logs for system decisions and predictions. 18. Visualization Tools: Use heat maps for traffic, bed occupancy, and demand zones. 19. Model Optimization: Use hyperparameter tuning for improved performance. 20. Feedback Loop: Incorporate user feedback to refine system behavior.

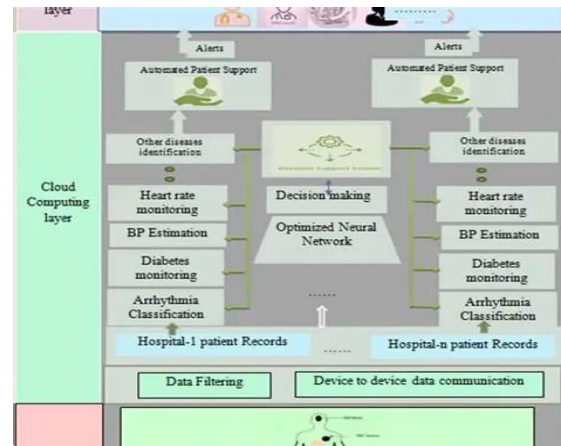


Fig.3 Cloud Computing Page

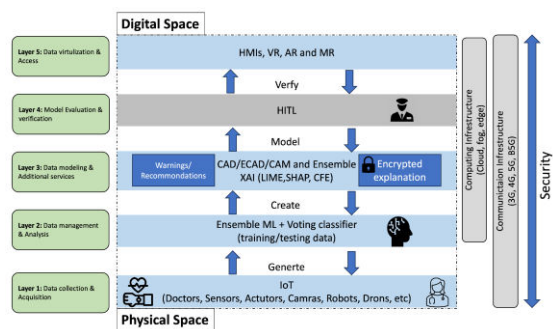


Fig.4 Result Page

RESULTS & DISCUSSION:

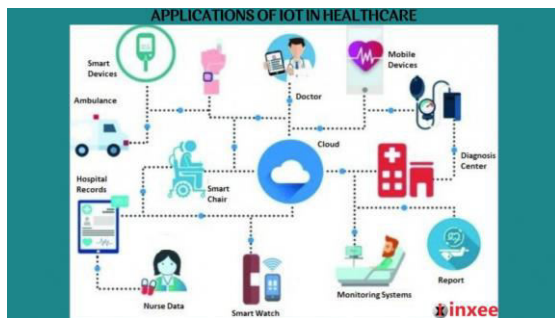


Fig.2 Home Page

CONCLUSION & FUTURE ENHANCEMENT

This project presents an AI-Based Smart Healthcare System that optimizes ambulance routing and predicts ICU bed availability, significantly improving emergency response and resource allocation. By integrating real-time traffic data with predictive analytics for hospital bed usage, the system enables proactive healthcare planning. Ambulance response times are reduced, and ICU bottlenecks are minimized through intelligent scheduling and forecasting. The unified dashboard

provides actionable insights for EMS dispatchers and hospital administrators. Cloud deployment ensures scalability and high availability. AI models continuously improve as more data become available. The system enhances coordination across EMS and hospital networks. False route choices due to outdated data are reduced. Data security and privacy compliance are maintained. Future enhancements include integration with wearable health sensors for patient condition monitoring during transport. Edge computing can improve real-time predictions in low-connectivity areas. Federated learning approaches can preserve privacy while improving models across institutions. Multi-city deployments allow comparative analytics and demand forecasting. Integration with smart city infrastructure enhances situational awareness. Further research could explore AI-driven resource allocation for other healthcare units like surgery suites. Predictive analytics can also extend to forecasting emergency call volumes.

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