

10 Elective surgery

This chapter presents information related to access elective surgery. The chapter first presents an overview elective surgery in public and private hospitals, based on information on approximately 1.8 million elective surgery separations, sourced from the National Hospital Morbidity Database (NHMD).

The chapter then presents information on 'elective surgery' as defined in the *National health data dictionary* (HDSC 2006) comprising:

- data for over 595,000 patients admitted from public acute hospital elective surgery waiting lists. These data are sourced from the National Elective Surgery Waiting Times Data Collection (NESWTDC). The records include information on waiting times, surgical specialty of the scheduled doctor and Indicator procedures.
- linked public hospital elective surgery waiting times and admitted patient data for nearly 577,000 records (Table 10.1 and figures 10.8 to 10.15 and 10.19). The linkage allowed demographic and diagnosis information to be analysed in conjunction with information on waiting times, surgical specialty and Indicator procedure from the NESWTDC.

What data are reported?

Box 10.1 How is elective surgery defined in this chapter?

The use of the term **Elective surgery** using the Admitted patient care data from the NHMD is not necessarily the same as elective surgery as defined for the National Elective Surgery Waiting Times Data Collection (NESWTDC).

For the NHMD elective surgery was defined as separations:

- with an Urgency of admission of *Elective* (admission could be delayed by at least 24 hours) and
- with a 'surgical procedure' reported, based on the procedures used to define 'surgical' DRGs in Australian Refined Diagnosis Related Groups, version 5.2 (DoHA 2006). Separations for cosmetic surgery or with childbirth-related AR-DRGs were excluded.

Elective surgery separations were also categorised as 'Public elective surgery' or 'Other elective surgery' as follows:

- *Public elective surgery* refers to separations for elective surgery in public hospitals and includes elective surgery separations for *Public patients* in private hospitals.
- *Other elective surgery* refers to separations for elective surgery for patients who were not *Public patients*, in private hospitals.

The procedures defined as surgical differ between those used to define the scope of the NESWTDC and those used to define elective surgery in the NHMD.

For the NESWTDC, elective surgery comprises elective care where the procedures required by patients are listed in the surgical operations section of the Medicare Benefits Schedule, with the exclusion of specific procedures frequently done by non-surgical clinicians (HDSC 2006).

Admitted patient care data for elective surgery

Information on admitted patient care for elective surgery is derived from the NHMD (see *Chapter 7*). The scope of the NHMD is episodes of care for admitted patients in all public and private acute and psychiatric hospitals, free-standing day hospital facilities, and alcohol and drug treatment centres.

As the NHMD includes information on admitted patient care for essentially all public and private hospitals, it can provide an overview of elective surgery that is beyond the scope of the NESWTDC, which is restricted to waiting lists managed by public hospitals only (see below). Rates are calculated for elective surgery for public and private hospitals and for various demographic groups.

The definition used to classify admitted patient care as elective surgery differs from the definition of elective surgery for the purposes of the NESWTDC (see Box 10.1).

Waiting times data for elective surgery

The scope of the NESWTDC is patients on waiting lists for elective surgery that are managed by public hospitals. This may include *Public patients* treated in private hospitals and *other patients* treated in public hospitals.

The waiting times data presented in this chapter are for patients who complete their wait and are admitted to their surgery on an elective basis. The data are generally used as the main summary measure of elective surgery waiting times. Most patients are admitted after waiting however, some patients are removed from waiting lists for other reasons. Other reasons for removal are that the patient was admitted as an emergency patient for the awaited procedure; was transferred to another hospital's waiting list; had been treated elsewhere; was not contactable; had died or had declined surgery. Information on time spent on waiting lists is also presented for those reasons for removal.

Linked admitted patient care and elective surgery waiting times data

For 2008–09, all states and territories provided the elective surgery waiting times either pre-linked or linkable to the admitted patient data, so that the information on waiting times could be linked to the information on the surgery that occurred at the end of the wait. Where necessary, the AIHW linked the data with permission of the relevant state or territory and with permission of the AIHW Ethics Committee.

The linked elective surgery and admitted patient data allowed analysis of waiting times for public elective surgery for different population groups (such as Indigenous and Non-Indigenous Australians, across remoteness areas, and across socioeconomic status (SES) groups. Included are estimates of the separation rates for Indicator procedure (see Box 10.2 and *Appendix 1*) and for neoplasm-related diagnoses.

An example: ear, nose and throat surgery

Figure 10.1 presents data on patients admitted to hospital from elective surgery waiting lists for surgery performed by a doctor whose surgical specialty was *Ear, nose & throat surgery*. The information presented by Indicator procedure and public hospital peer groups is

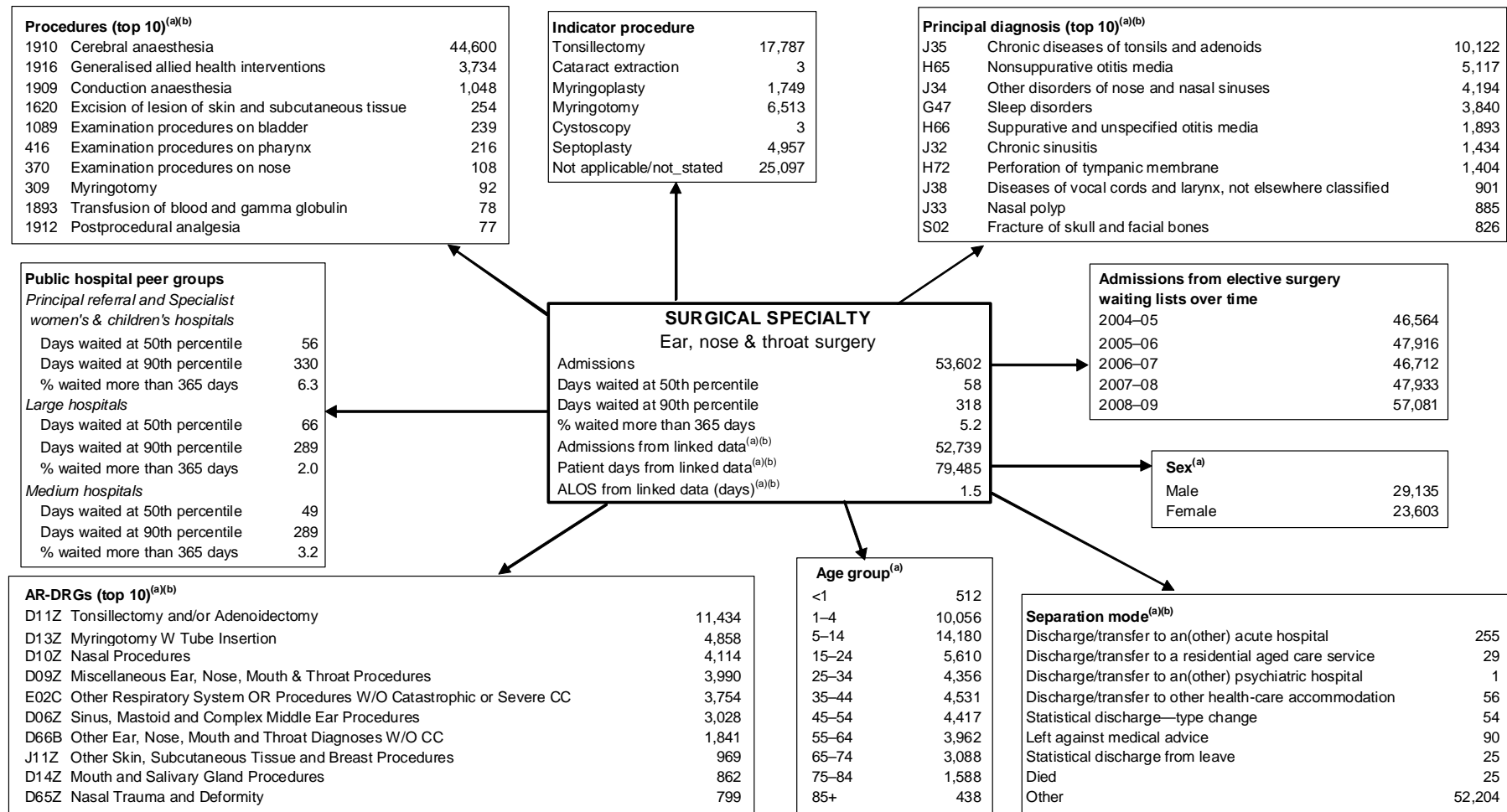
sourced from the NESWTDC. The other information was available for records where the data for elective surgery waiting times could be linked to the NHMD (92% of records with a surgical specialty of Ear, nose & throat surgery).

In 2008-09:

- there were 54,000 admissions from elective surgery waiting lists for surgery performed by a doctor whose surgical specialty was *Ear, nose & throat surgery*
- the median waiting time for these patients was 58 days
- 5.2% of these patients waited more than 365 days for admission
- the most common indicator procedure was tonsillectomy.

The linked NESWTDC and NHMD records show that:

- these separations accounted for more than 79,000 patient days
- the average length of stay was 1.5 days
- the most common procedure (other than *Cerebral anaesthesia, Generalised allied health interventions or Conduction anaesthesia*) was *Excision of lesion of skin and subcutaneous tissue* (Block 1620)
- the most common principal diagnosis reported was *Chronic diseases of tonsils and adenoids* (J35), followed by *Non-suppurative otitis media* (H65)
- the most common AR-DRG reported was *Tonsillectomy and/or Adenoidectomy* (D11Z)
- the age group with the highest proportion of separations was 5-14 years and there were more separations for males than females
- 99% of these episodes had a separation mode of *Other*, suggesting that these patients went home after separation from hospital.



(a) These data are supplied to the National Hospital Morbidity Database.

(b) Separations for which the care type was reported as *Newborn with no qualified days*, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.

Abbreviations: CC—complications and comorbidities; Cat—Catastrophic; Sev—severe; OR—operating room; W/O—without; ALOS—average length of stay.

Figure 10.1: Interrelationships of a specialty of surgeon (Ear, nose & throat surgery) with other data elements, elective surgery, all hospitals, 2008–09

Box 10.2 What are the limitations of the data?

Limitations of admitted patient care data

- Limitations of data on admitted patient care are discussed in detail in *Chapter 7* and *Appendix 1*.
- The quality of Indigenous status in the NHMD is variable and this data should be used with caution. For more information on the quality of indigenous status data see *Appendix 1*.

Limitations of the elective surgery waiting times data

Coverage

- The data collection covered most public hospitals that undertake elective surgery (see *Appendix 2*). In 2008–09, coverage of the collection was highest for the *Principal referral and Specialist women's and children's hospitals* peer group with 85 hospitals reported in this peer group. The collection covered 34 *Large hospitals*, and 52 *Medium hospitals*. Hospitals that were not included may not undertake elective surgery, may not have had waiting lists, or may have had different waiting list characteristics compared with reporting hospitals. Some smaller remote hospitals may have different patterns of service delivery compared with other hospitals because specialists providing elective surgery services visit these hospitals only periodically.
- Overall coverage of the NESWTDC was about 91% in 2008–09 and ranged from 100% for New South Wales, Tasmania, the Australian Capital Territory and the Northern Territory to 70% in South Australia (see Table S10.2).
- The elective surgery waiting times data collection covers public hospitals only, however some patients treated under contract in Victoria and Tasmania were included.
- Data for the Mersey Community Hospital in Tasmania are also included (see *Appendix 2*). Methods to calculate waiting times have varied across states and territories and over time (see *Appendix 1*).
- In some states and territories, for patients who were transferred from a waiting list managed by one hospital to that managed by another, the time waited on the first list is not included in the waiting time reported to the NESWTDC. There for the number of days waited in those jurisdictions reflected the waiting time on the list managed by the reporting hospital only (*Appendix 1*).
- In 2008–09, New South Wales, Queensland, Tasmania and the Northern Territory did not report removals from waiting lists for transfer to another hospital's waiting list. This could have an effect of increasing the waiting times reported for overall removals for those four jurisdictions relative to others.
- In 2008–09, Western Australia included rural hospitals in the *National Elective Surgery Waiting Times Data Collection* for the first time.

Limitations of the linked admitted patient care and elective surgery waiting times data

Coverage of the linked data by remoteness area ranged from 62% in *Very remote* areas to 100% in *Major cities* (see discussion of linked data below). Coverage by socioeconomic status (SES) group ranged from 85% for the middle group to 100% for the highest group. These variations in coverage should be considered when interpreting the age-standardised rates presented in the discussion of those data.

Box 10.3 What methods were used?

Analyses of the NHMD and linked NHMD and NESWTDC data

The reader should note the following:

- Elective surgery separations were defined as stated in Box 10.1.
- *Public* and *Other elective surgery* separations are defined as stated in Box 10.1.
- Separations for which the care type was reported as *Newborn* with no qualified days, and records for *Hospital boarders* and *Posthumous organ procurement* have been excluded.
- Separation rates are age standardised to the Estimated Resident Population 30 June 2001 (see *Appendix 1*).
- Separation rate ratios are calculated as outlined in *Appendix 1*.

Analyses of NESWTDC

Waiting times are calculated by comparing the date on which a patient is added to a waiting list with the date that the patient is removed from that list. Days on which a patient is 'not ready for care' are excluded.

Information on the number of days waited at the 50th and 90th percentiles by patients admitted from waiting lists for elective surgery, the proportion of patients waiting greater than 365 days, and the number of patients admitted is presented by public hospital peer group. Information is also included by the specialty of the surgeon who was to perform the elective surgery and by indicator procedure.

How has elective surgery activity changed over time?

Between 2004–05 and 2008–09, total elective surgery separations increased from 1.6 million to 1.8 million (Table 10.1). Over that period, there was a 3.2% increase in overall elective surgery separations. While the number of separations per 1,000 population for *Public elective surgery* was relatively stable between 2004–05 and 2008–09, the rate for *Other elective surgery* rose by an average of 2.0% per year. The increase for public elective surgery separations between 2007–08 and 2008–09 was markedly higher than the average annual increase between 2004–05 and 2008–09 (1.7%).

In 2008–09, the separation rate for *Public elective surgery* varied from 22.2 per 1,000 population in Tasmania to 36.9 per 1,000 in South Australia (Table 10.2). The separation rate for *Other elective surgery* ranged from 27.1 per 1,000 in the Northern Territory to 57.1 per 1,000 in Queensland.

Table 10.1: Separations for public and other elective surgery, 2004–05 to 2008–09

	2004–05	2005–06	2006–07	2007–08	2008–09	Change (per cent)	
						Ave since 2004–05	Since 2007–08
Public elective surgery							
Separations	596,849	608,267	617,170	619,522	638,898	1.7	3.1
Separations per 1,000 population ^(a)	29.1	29.2	29.1	28.6	28.9	–0.2	1.1
Other elective surgery							
Separations	983,234	1,016,851	1,051,556	1,120,506	1,152,628	4.1	2.9
Separations per 1,000 population ^(a)	47.6	48.3	49.0	51.1	51.5	2.0	0.8
Total							
Separations	1,580,083	1,625,118	1,668,726	1,740,028	1,791,526	3.2	3.0
Separations per 1,000 population	76.8	77.5	78.1	79.7	80.5	1.2	0.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

(a) Separation rates were age-standardised to the estimated resident population as at 30 June 2001, as detailed in *Appendix 1*.

Source: National Hospital Morbidity Database

Table 10.2: Separation statistics for public and other elective surgery, states and territories, 2008–09

	NSW	Vic	Qld	WA	SA	TAS	ACT	NT	Australia
Public elective surgery									
Separations	182,392	195,123	107,314	64,195	62,605	11,641	9,993	5,635	638,898
Separations per 1,000 population ^(a)	25.0	35.5	24.6	29.4	36.9	22.2	30.7	29.7	28.9
Other elective surgery									
Separations	358,691	279,135	250,009	124,645	96,484	21,728	16,846	5,090	1,152,628
Separations per 1,000 population ^(a)	48.7	50.0	57.1	56.3	55.2	40.0	50.2	27.1	51.5
Total									
Separations	541,083	474,258	357,323	188,840	159,089	33,369	26,839	10,725	1,791,526
Separations per 1,000 population^(a)	73.7	85.5	81.7	85.6	92.1	62.2	80.9	56.8	80.5

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

(a) Separation rates were age-standardised to the estimated resident population as at 30 June 2001, as detailed in *Appendix 1*.

Source: National Hospital Morbidity Database

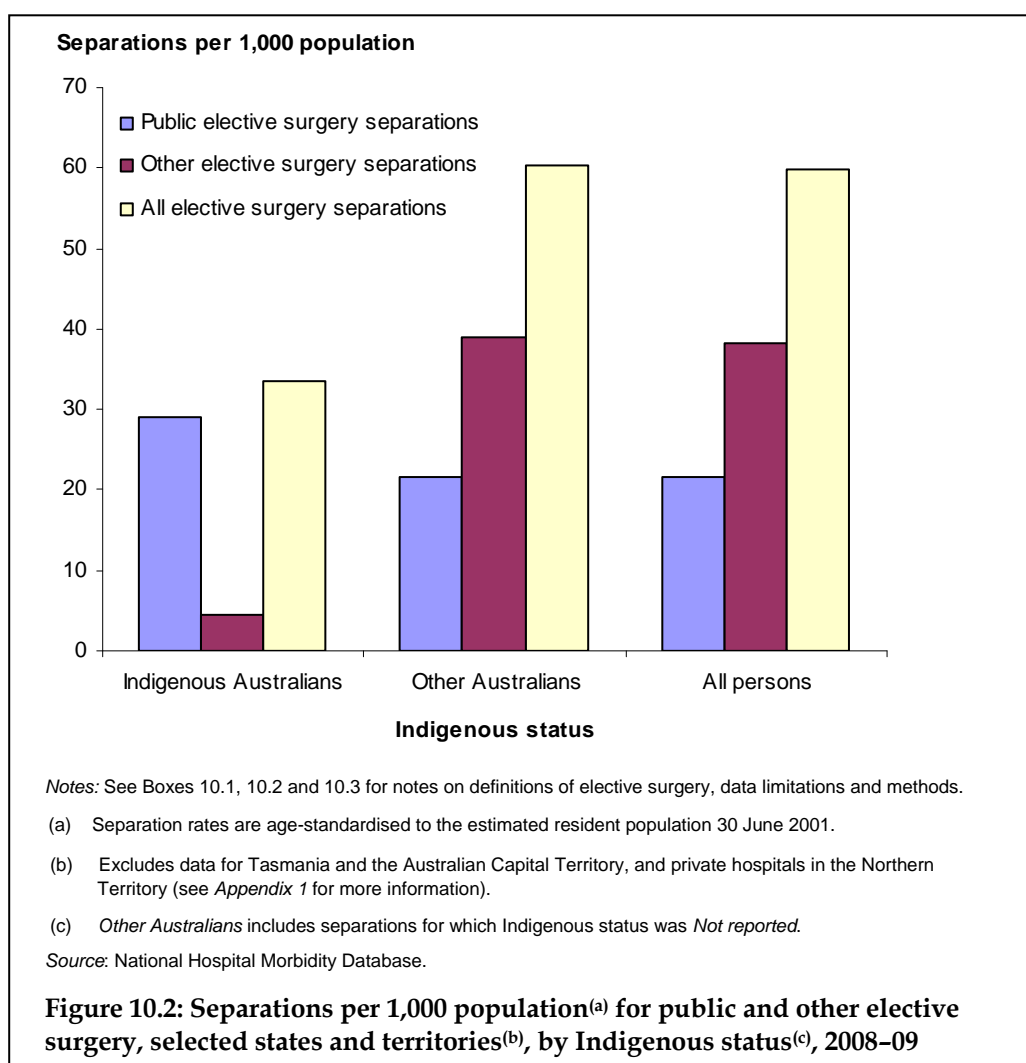
Who used these services?

Separation rates for elective surgery are one measure of access to elective surgery and can provide indications of whether access is equitable for different population sub-groups. In this section, the rates are presented by the remoteness area of usual residence, by socioeconomic status (SES) group and by Indigenous status.

Aboriginal and Torres Strait Islander people

Excluding data for Tasmania and the Australian Capital Territory, and for private hospitals in the Northern Territory, there were nearly 16,800 separations for elective surgery in 2008–09 for *Indigenous Australians*. Over 87% of these separations were for *Public elective surgery*. The overall rate of separations for elective surgery for *Indigenous Australians* was 34 per 1,000 population, about 56% of the rate for *Other Australians* (60 per 1,000).

The separation rate for *Public elective surgery* for *Indigenous Australians* (29 per 1,000 population) was about 35% higher than the rate for *Other Australians* (21 per 1,000). The separation rate for *Other elective surgery* for *Other Australians* (39 per 1,000) was markedly higher than the rate for *Indigenous Australians* (4 per 1,000) (Figure 10.2).

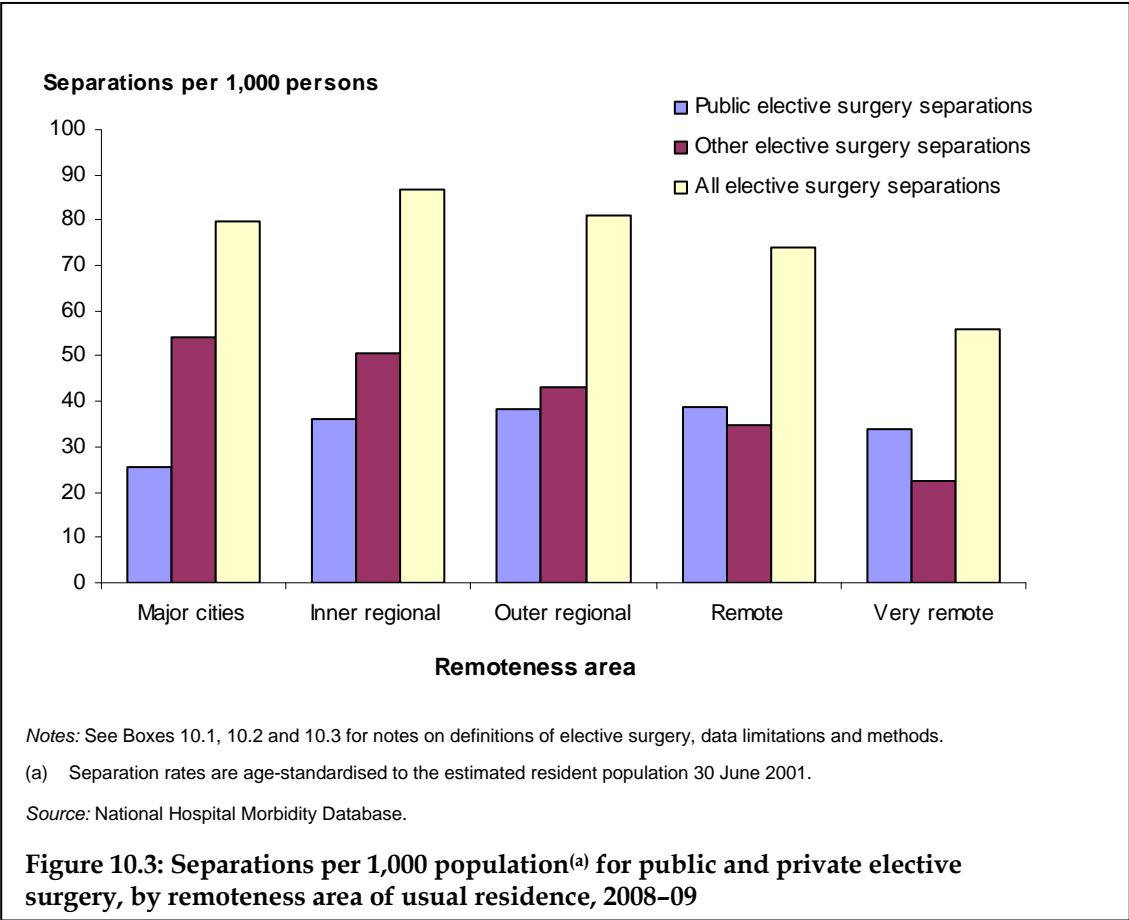


Remoteness area of usual residence

The overall separation rate for elective surgery was highest for those living in *Inner regional areas* (87 per 1,000 population) and decreased with increased remoteness to 56 per 1,000 in *Very remote areas* (Figure 10.3).

The rate of *Public elective surgery* separations was lowest for those living in *Major cities* (26 per 1,000) and highest for those living in *Remote areas* (39 per 1,000). The separation rate for *Other*

elective surgery was highest for those living in *Major cities* (54 per 1,000 population) and decreased with increasing remoteness to 22 per 1,000 for *Very remote* areas. This may reflect variations in the availability of private hospital services in the more remote areas of Australia.

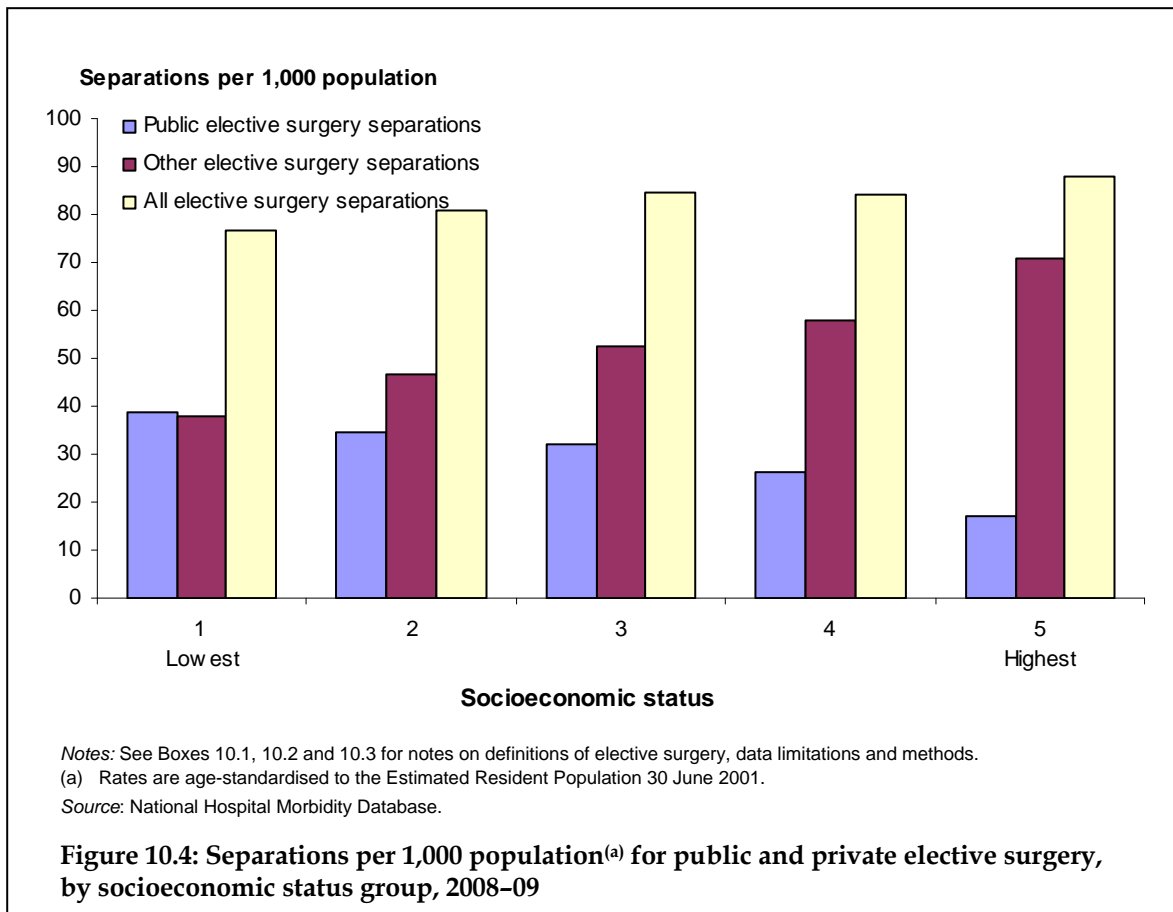


Socioeconomic status

Figure 10.4 presents separation rates per 1,000 population for elective surgery by SES group (see *Appendix 1*). There was some variation in both public and other elective surgery separations rates.

In 2008-09, the elective surgery separation rate was highest for people living in areas classified as being in the highest SES group (88 per 1,000 population) and tended to decrease with increasing disadvantage to 76 per 1,000 population for people living in areas classified in the lowest SES group.

The separation rate for *Public elective surgery* separations was lowest for people living in areas classified as being in the highest SES group (17 per 1,000 population) and highest for those classified to the lowest SES group (39 per 1,000). The separation rate of *Other elective surgery* was highest for the highest SES group (71 per 1,000) and decreased to 38 per 1,000 for the lowest SES group.



How has activity changed over time?

Between 2004–05 and 2008–09, the number of admissions for elective surgery from waiting lists increased by an annual average of 2.0% (Table 10.3). However, there was also a rise in the coverage of the NESWTDC over that period, from 87% to 91%, that should be taken into account in interpreting the change.

Over the same period, the proportion of admissions for hospitals in the *Principal referral and Specialist womens' and children's hospitals* peer group increased from 67.7% to 72.5% of admissions from elective surgery waiting lists.

The period from 2007–08 to 2008–09 includes the period in which the Elective Surgery Waiting List Reduction Plan was implemented by the Australian Government and states and territories.

Table 10.3: Waiting list statistics for patients admitted from waiting lists for elective surgery, by public hospital peer group, states and territories, 2008–09

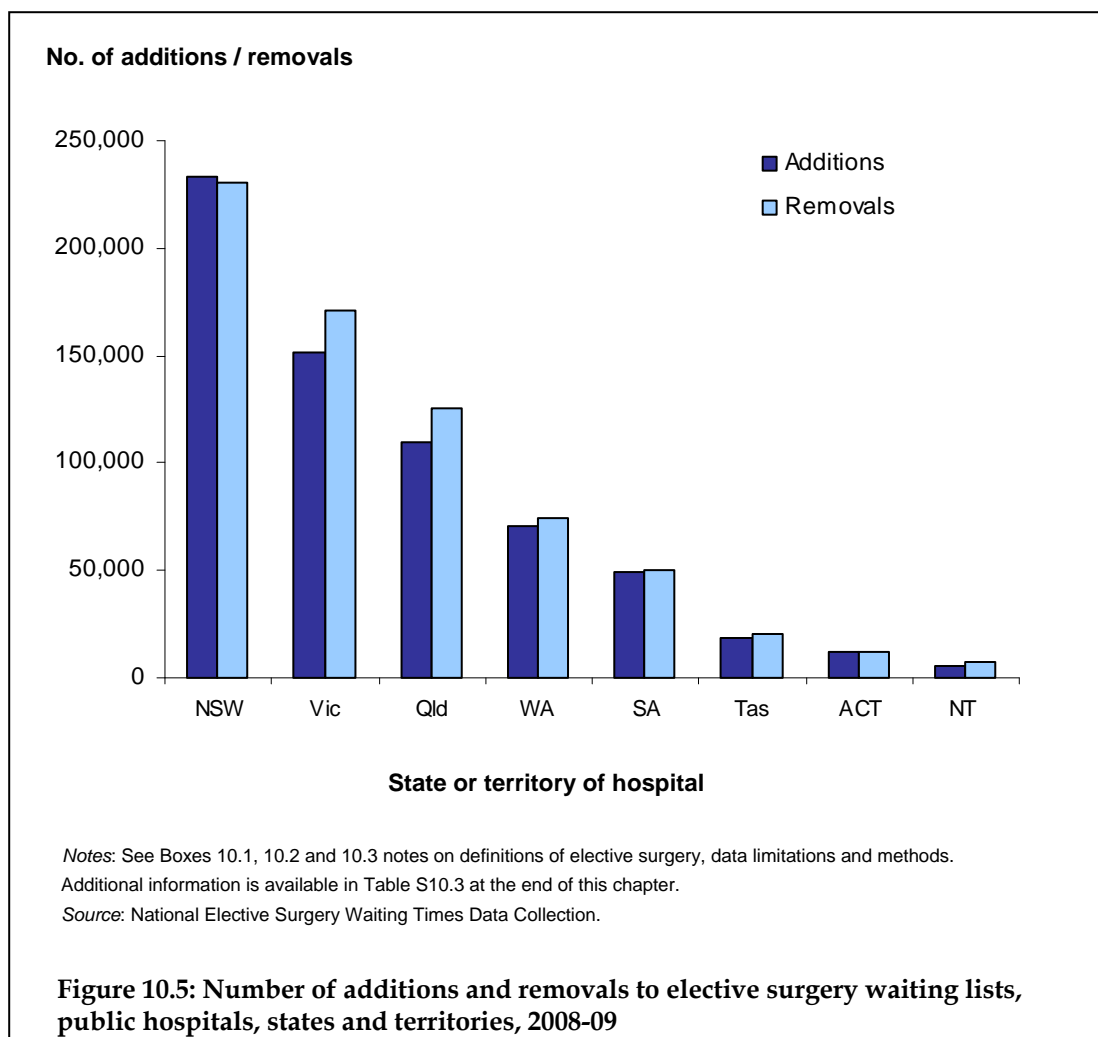
	2004–05	2005–06	2006–07	2007–08	2008–09
Principal referral and Specialist women's & children's hospitals					
Number of reporting hospitals	75	78	82	83	85
Estimated coverage of surgical separations (%)	99	99	98	100	100
Number of admissions	372,085	386,203	394,831	401,518	431,675
Large hospitals					
Number of reporting hospitals	36	34	30	35	34
Estimated coverage of surgical separations (%)	82	81	77	80	84
Number of admissions	100,916	97,816	88,433	97,475	91,766
Medium hospitals					
Number of reporting hospitals	59	51	52	51	52
Estimated coverage of surgical separations (%)	62	62	63	64	60
Number of admissions	69,830	63,643	63,658	58,076	62,815
Total					
Number of reporting hospitals	195	191	192	192	195
Estimated coverage of surgical separations (%)	87	87	87	91	91
Number of admissions	549,746	556,951	556,770	565,501	595,009
Admissions per 1,000 population	27.2	27.2	26.7	26.6	27.5

Notes: See Boxes 10.1, 10.2 and 10.3 notes on definitions of elective surgery, data limitations and methods.

Source: National Elective Surgery Waiting Times Data Collection.

How much activity was there in 2008–09?

Figure 10.5 shows the movement of patients on and off waiting lists in 2008–09. In 2008–09, there were over 651,000 additions to elective surgery waiting lists and 692,000 removals from elective surgery waiting lists. Removals included patient who were admitted for the procedure they were waiting for, or were removed for other reasons.



Who used these services?

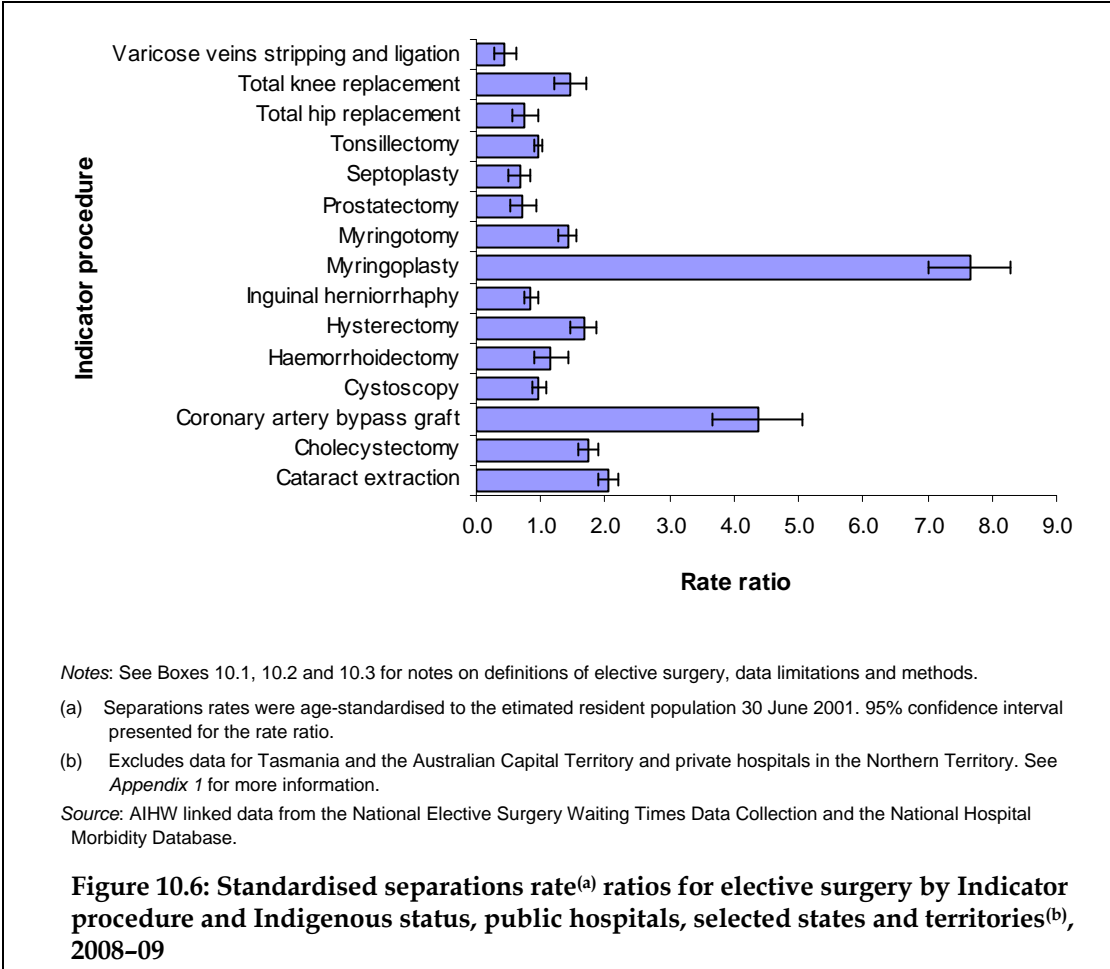
Analysis of the linked NHMD and ESWTDC data provides an opportunity to understand how elective surgery activity for people admitted from waiting lists varied across population groups. The data in this section is presented by Indicator procedure.

Aboriginal and Torres Strait Islander people

The SRRs presented in Figure 10.6 compare the standardised separation rates for *Indigenous Australians* to the rates for *Other Australians*, and include confidence intervals. An SRR greater than 1.0 indicates that *Indigenous Australians* had a higher separation rate for the Indicator procedure than *Other Australians* admitted for elective surgery from elective surgery waiting lists.

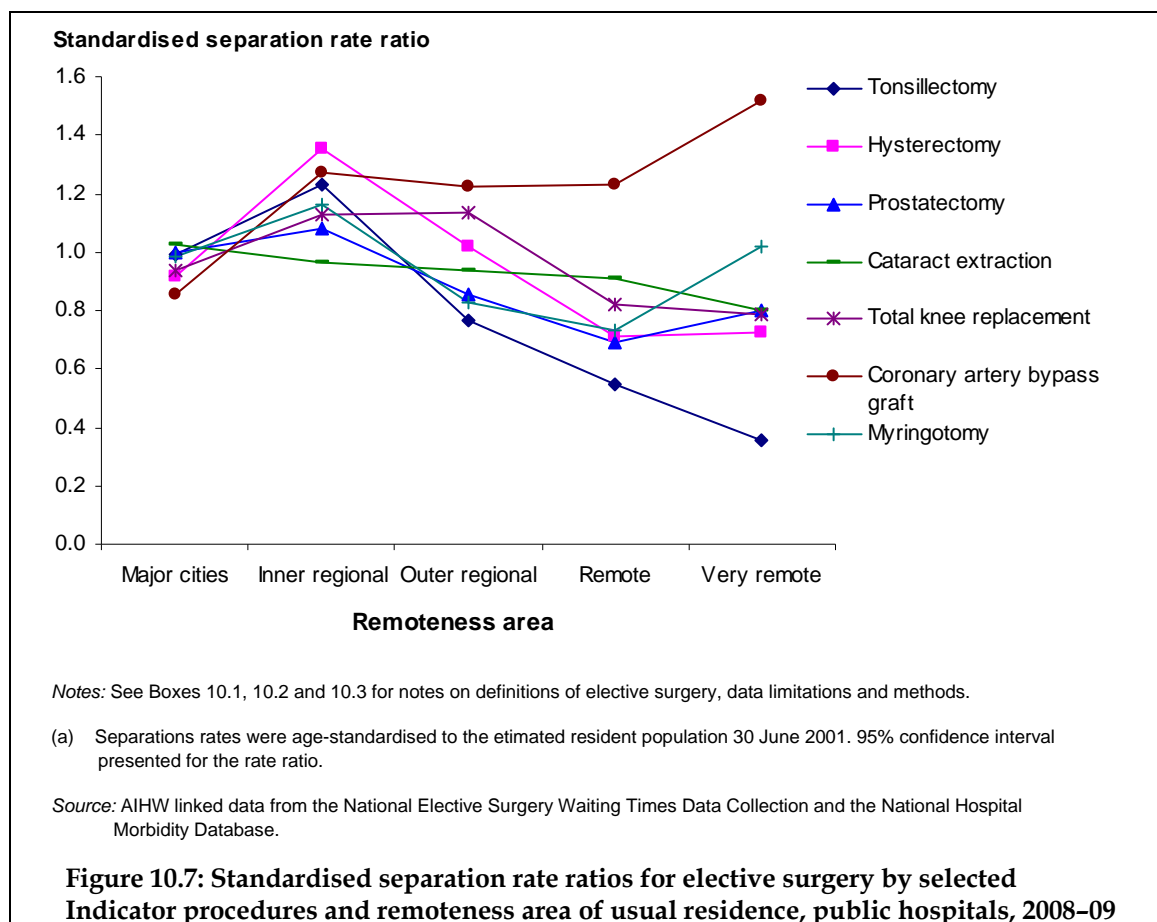
For 12 of the 15 Indicator procedures, the confidence intervals indicate that the rates for *Indigenous Australians* were significantly different from the rates for *Other Australians*. The rates were not significantly different for *Cystoscopy*, *Tonsillectomy* and *Haemorrhoidectomy*.

The highest SRRs were reported for *Myringoplasty* (7.7) and *Coronary artery bypass graft* (4.4). *Indigenous Australians* had lower SRRs for *Septoplasty*, *Total hip replacement*, *Prostatectomy*, *Varicose veins stripping and ligation* and *Inguinal herniorrhaphy*.



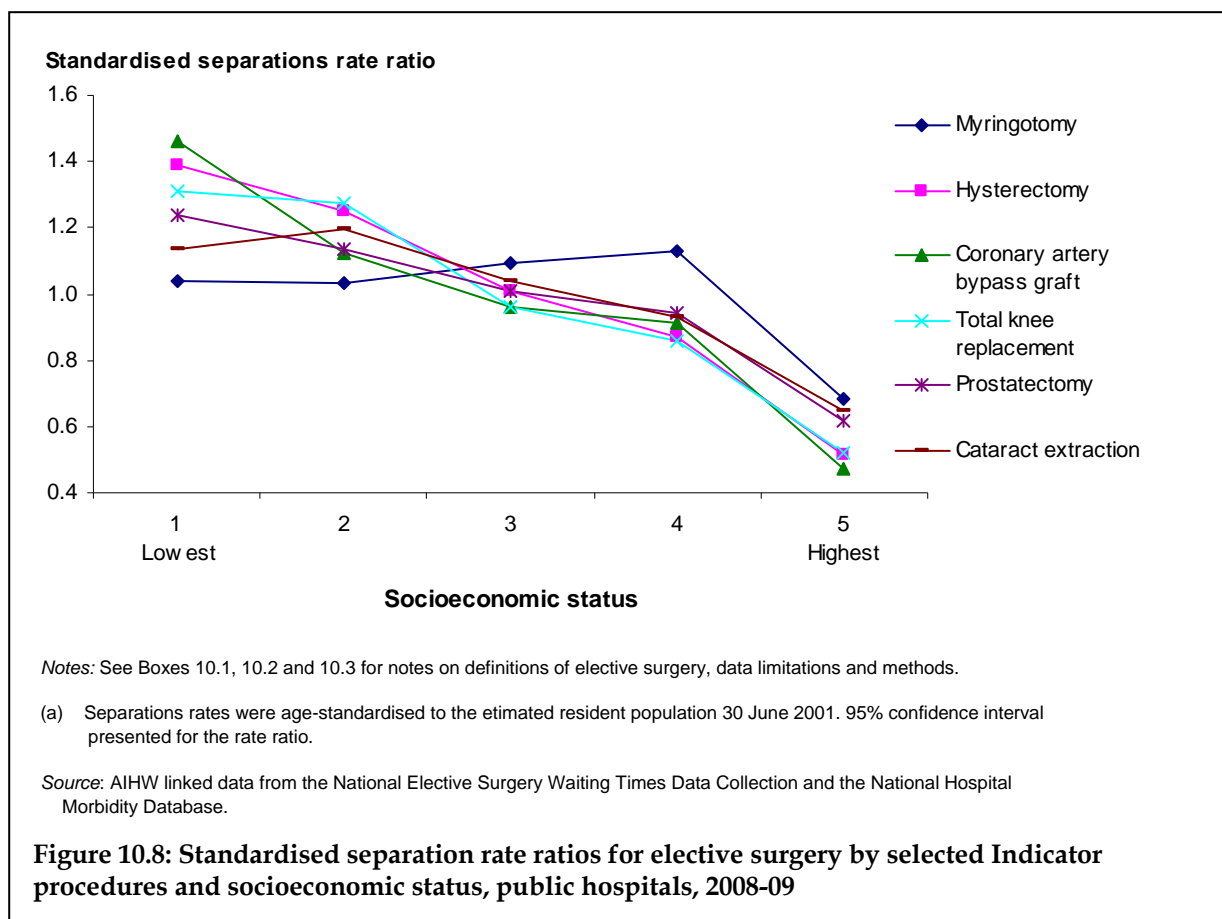
Remoteness area

Figure 10.7 presents standardised separation rate ratios by Indicator procedure and remoteness area. The SRR for *Coronary artery bypass graft* for people living in *Very remote* areas was about 1.5 times the national rate.



Socioeconomic status

The greatest variation in SRRs by socioeconomic status was for *Coronary artery bypass graft*, with the SRRs ranging from 1.5 for people living in areas classified as being in the lowest SES group (about 50% higher than the overall rate) to 0.5 for the highest SES group (about 50% lower than the overall rate). The SRRs for *Myringotomy* were more evenly distributed among socioeconomic groups, with people living in areas classified as being in the middle SES group having separation rates about 9% higher than the overall rate, and those in the highest SES group having separation rates about 32% lower than the overall rate (Figure 10.8).



How long did people wait for care?

Information on the number of days waited at the 50th and 90th percentiles by patients admitted from waiting lists for elective surgery, the proportion of patients waiting greater than 365 days, and the number of patients admitted is presented by public hospital peer group. Information is also included by the specialty of the surgeon who was to perform the elective surgery and by indicator procedure.

How did waiting times for care change over time?

Overall the median waiting times for elective surgery increased from 29 days in 2004–05 to 34 days in 2007–08 and 2008–09. The days waited at the 90th percentile increased from 217 days to 220 days during the same period. In contrast the proportion of patients waiting greater than 365 days decreased from 4.8% in 2004–05 to 2.9% in 2008–09 (Table 10.4).

Table 10.4: Waiting time statistics for patients admitted from waiting lists, by public hospital peer group, 2004–05 to 2008–09

	2004–05	2005–06	2006–07	2007–08	2008–09
Principal referral and Specialist women’s & children’s hospitals					
Number of admissions	372,085	386,203	394,831	401,518	431,675
Days waited at 50 th percentile	28	30	30	31	31
Days waited at 90 th percentile	203	228	225	233	216
% waited more than 365 days	4.6	4.7	3.4	3.4	3.2
Large hospitals					
Number of admissions	100,916	97,816	88,433	97,475	91,766
Days waited at 50 th percentile	29	35	33	39	40
Days waited at 90 th percentile	227	251	224	237	227
% waited more than 365 days	4.8	4.6	2.7	2.4	2.5
Medium hospitals					
Number of admissions	69,830	63,643	63,658	58,076	62,815
Days waited at 50 th percentile	37	38	39	42	42
Days waited at 90 th percentile	272	257	231	238	230
% waited more than 365 days	6.1	3.8	1.7	1.4	1.5
Total					
Number of admissions	549,746	556,951	556,770	565,501	595,009
Admissions per 1,000 population	27.2	27.2	26.7	26.6	27.5
Days waited at 50th percentile	29	32	32	34	34
Days waited at 90th percentile	217	237	226	235	220
% waited more than 365 days	4.8	4.6	3.1	3.0	2.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

Additional information by state and territory is available in Table S10.2 at the end of this chapter.

Source: National Elective Surgery Waiting Times Data Collection.

How did waiting times vary by reason for removal from waiting lists?

Table 10.5 shows the number of admissions from waiting lists, the distribution of days waited and the proportion of admissions where people waited more than 365 days in 2008–09. These data are presented by the Reason for removal from the waiting list.

Overall, the reason for removal with the shortest median waiting time in 2008–09 was *Emergency admission* (3 days), and the longest median waiting time was for *Not contactable/died* (143 days) (Table 10.5).

As was the case with median waiting times, the reason for removal with the shortest waiting time by which 90% of patients were removed was *Emergency admission* (75 days) and the reason for removal with the longest waiting time was *Not contactable/died* (449 days). The length of time by which 90% of patients were removed from waiting lists varied substantially between states and territories in most categories (see Table S10.3 at the end of this chapter).

In 2008–09, the reason for removal with the lowest proportion of patients waiting more than 365 days before removal was *Emergency admission* (0.9%) and the category with the highest proportion was *Not contactable/died* (15.9%).

Table 10.5: Waiting time statistics for patients removed from waiting lists for elective surgery, by reason for removal, 2008–09

Reason for removal	Removals	Days waited at 50th percentile	Days waited at 90th percentile	% waited more than 365 days
Elective admission	595,009	34	220	2.9
Emergency admission	6,028	3	75	0.9
Not contactable/died	8,284	143	449	15.9
Treated elsewhere	24,003	93	358	8.9
Surgery not required or declined	47,513	99	378	11.3
Transferred to another hospital's waiting list	6,018	64	307	5.8
Not reported	5,410	74	389	5.8
Total	692,265	37	259	3.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

Additional information by state and territory is available in Table S10.3 at the end of this chapter.

Source: National Elective Surgery Waiting Times Data Collection.

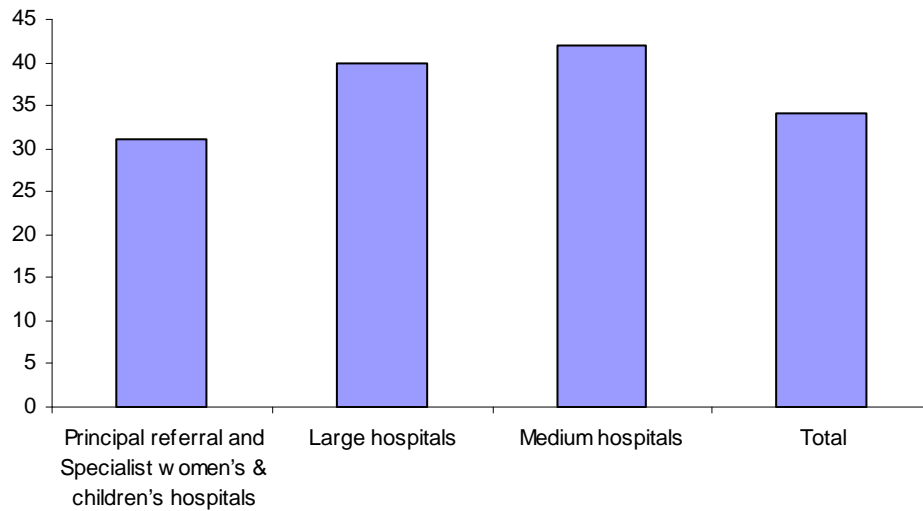
How did waiting times vary across public hospital peer groups?

Overall, the median waiting time for patients who were admitted from waiting lists was 34 days in 2008–09. In 2008–09, the median waiting time for patients admitted from waiting lists for hospitals in the *Principal referral and Specialist women's and children's hospitals* peer group (31 days) was shorter than for the *Large hospitals* and *Medium hospitals* peer groups (40 days and 42 days respectively) (Figure 10.9).

How did waiting times vary across states and territories?

In 2008–09, the median waiting time ranged from 27 days in Queensland to 75 days in the Australian Capital Territory (Figure 10.10). See Table S10.2 at the end of this chapter for more information on elective surgery waiting times by hospital peer group and state and territory.

Median waiting time (days)



Public hospital peer group

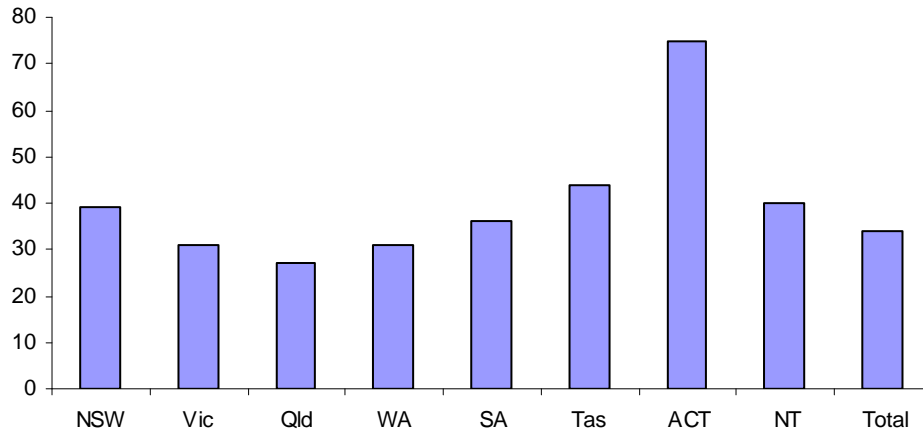
Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

Additional information by state and territory is available in Table S10.2 at the end of this chapter.

Source: National Elective Surgery Waiting Times Data Collection.

Figure 10.9: Median waiting time for elective surgery by public hospital peer group, 2008-09

Median waiting time (days)



State or territory of hospital

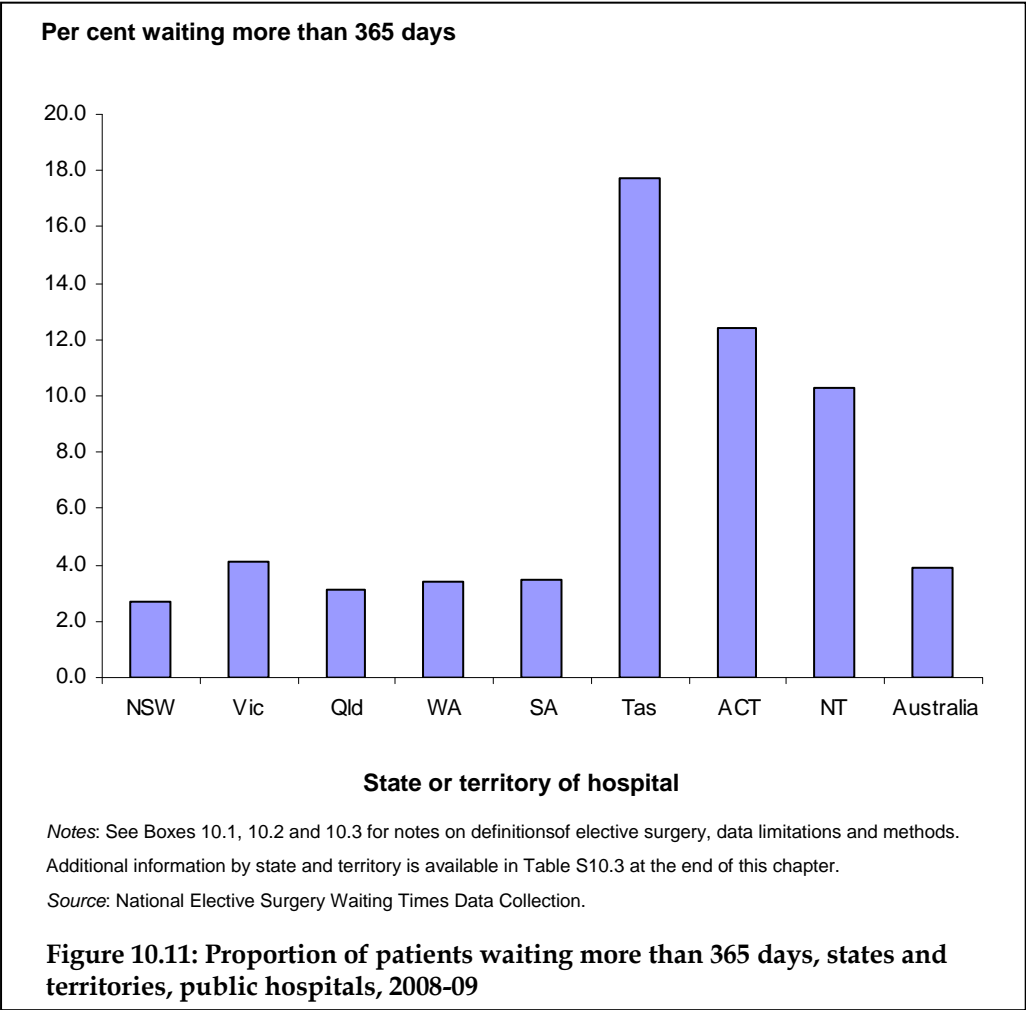
Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

Additional information by state and territory is available in Table S10.2 at the end of this chapter.

Source: National Elective Surgery Waiting Times Data Collection.

Figure 10.10: Median waiting time for elective surgery, states or territories, public hospitals, 2008-09

The proportion of patients waiting more than 365 days differed substantially between states and territories in 2008–09. Overall, it ranged from 2.7% in New South Wales to 17.7% in Tasmania (Figure 10.11).



How did waiting times vary by specialty of surgeon?

The specialty of the surgeon describes the area of clinical expertise held by the doctor who was to perform the elective surgery. Table 10.6 shows the number of admissions from waiting lists, the distribution of days waited and the proportion of admissions where people waited more than 365 days in 2008–09. These data are presented by the specialty of the surgeon who was to perform the surgery.

Ophthalmology, Ear, nose and throat surgery and *Orthopaedic surgery* were the surgical specialties with the longest median waiting times in 2008–09 (65 days, 58 days and 53 days respectively). *Cardio-thoracic surgery* had the shortest median waiting time (12 days) (Table 10.7).

Orthopaedic surgery and *Ear, nose and throat surgery* and were the specialties with the highest proportion of patients who waited more than 365 days to be admitted (5.6% and 5.2% respectively). *Cardio-thoracic surgery* had the lowest proportion of patients who waited more than 365 days (0.3%).

There was marked variation among the states and territories in the proportion of patients who waited more than 365 days to be admitted for some surgical specialties.

Table 10.6: Waiting time statistics for patients admitted from waiting lists for elective surgery, by specialty of surgeon, public hospitals, 2008–09

Surgical Specialty	Admissions	Days waited at 50th percentile	Days waited at 90th percentile	% waited more than 365 days
Cardio-thoracic surgery	11,835	12	76	0.3
Ear, nose & throat surgery	53,602	58	318	5.2
General surgery	143,550	30	165	2.4
Gynaecology	76,324	28	126	0.9
Neurosurgery	9,916	24	157	1.5
Ophthalmology	68,779	65	306	3.0
Orthopaedic surgery	86,990	53	323	5.6
Plastic surgery	44,329	22	168	3.0
Urology	68,040	27	137	1.8
Vascular surgery	13,215	20	175	3.5
Other	18,429	21	105	1.5
Total	595,009	34	220	2.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

Additional information by state and territory is available in Table S10.4 at the end of this chapter.

Source: National Elective Surgery Waiting Times Data Collection.

How did waiting times vary by Indicator procedure?

Indicator procedures are procedures which are of high volume and are often associated with long waits. Overall, 34.1% of patients admitted for elective surgery had been waiting for one of the 15 Indicator procedures (Table 10.7). There was some variation among the states and territories: the Australian Capital Territory had the highest proportion of admissions for the Indicator procedures (39.3%) and Queensland had the lowest proportion (28.9%). *Cataract extraction* was the highest volume indicator procedure in all jurisdictions.

Nationally, the indicator procedure with the lowest median waiting time in 2008–09 was *Coronary artery bypass graft* (14 days) and the one with the highest median waiting time was *Total knee replacement* (147 days) (Table 10.7).

The length of time by which 90% of patients had been admitted also varied by indicator procedure, from 100 days for *Coronary artery bypass graft* to 373 days for *Varicose veins stripping and ligation*.

The proportions of admissions where patients waited more than 365 days also varied by Indicator procedure.

Median waiting times varied markedly across the states and territories. For more information on the variation between states and territories, please see table S10.5 at the end of this chapter.

Table 10.7: Waiting time statistics for patients admitted from waiting lists for elective surgery, by Indicator procedure, public hospitals, 2008–09

Indicator Procedure	Admissions	Days waited at 50th percentile	Days waited at 90th percentile	% waited more than 365 days
Cataract extraction	51,436	84	320	3.6
Cholecystectomy	17,153	47	170	1.8
Coronary artery bypass graft	4,253	14	93	0.4
Cystoscopy	39,422	25	133	1.5
Haemorrhoidectomy	3,974	51	216	3.3
Hysterectomy	9,879	48	171	1.2
Inguinal herniorrhaphy	14,745	52	218	3.0
Myringoplasty	2,000	92	370	10.8
Myringotomy	6,813	44	141	1.2
Prostatectomy	8,108	41	172	2.8
Septoplasty	4,582	128	378	12.6
Tonsillectomy	16,943	85	335	5.7
Total hip replacement	7,939	100	364	9.6
Total knee replacement	11,493	147	393	14.9
Varicose veins stripping & ligation	4,226	87	373	10.6
Not applicable/not stated	392,043	26	168	2.3
Total	595,009	34	220	2.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

Additional information by state and territory is available in Table S10.5 at the end of this chapter.

Source: National Elective Surgery Waiting Times Data Collection.

How did waiting times vary for Indigenous and Non-Indigenous Australians?

For 2008–09, there were over 14,600 admissions from waiting lists for elective surgery for patients identified as Aboriginal and/or Torres Strait Islander persons in New South Wales, Victoria, Queensland, Western Australia, South Australia and the Northern Territory.

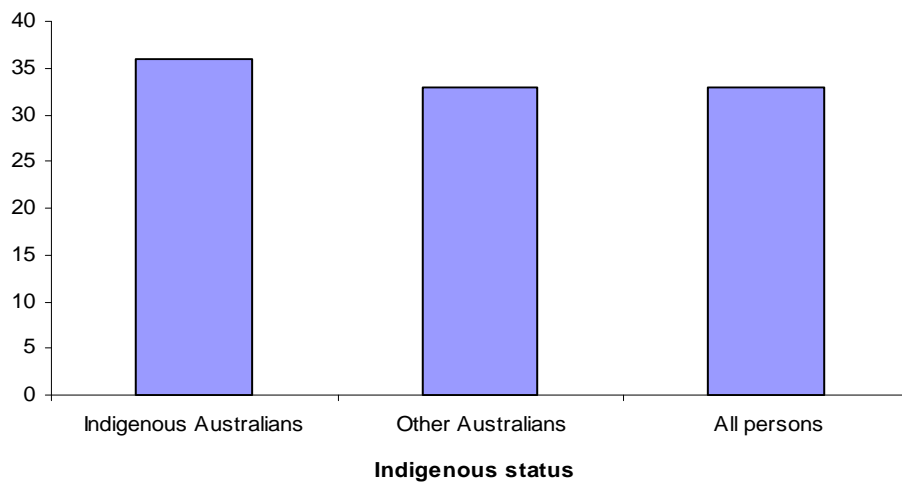
Overall, the median waiting time for *Indigenous Australians* was greater than the median waiting time for *Other Australians* (36 days and 33 days respectively, Figure 10.12).

Indicator procedures

Indigenous Australians had higher median waiting times for all ten of the procedures for which there were at least 100 separations for *Indigenous Australians*. The greatest difference in median waiting times was for *Varicose veins stripping and ligation*, for which *Indigenous Australians* waited longer than *Other Australians* (499 and 342 days, respectively).

Hysterectomy, *Coronary artery bypass graft* and *Cholecystectomy* had the least variation by Indigenous status (Figure 10.13).

Median waiting time (days)



Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

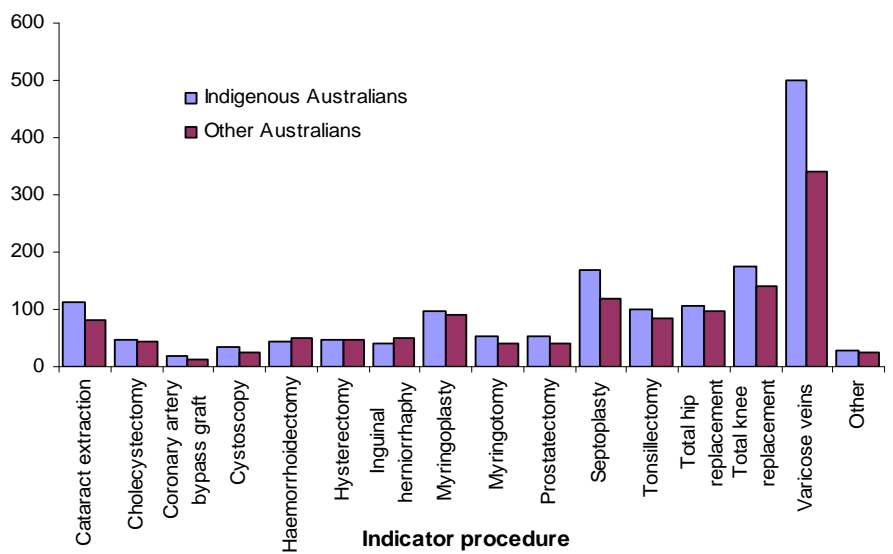
(a) *Other Australians* includes separations for which Indigenous status was *Not reported*.

(b) Excludes data for Tasmania and the Australian Capital Territory, and private hospitals in the Northern Territory.

Source: AIHW linked data from the National Elective Surgery Waiting Times Data Collection and the National Hospital Morbidity Database.

Figure 10.12: Median waiting times for elective surgery by Indigenous status^(a), selected states and territories^(b), public hospitals, 2008-09

Median waiting time (days)



Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

(a) *Other Australians* includes separations for which Indigenous status was *Not reported*.

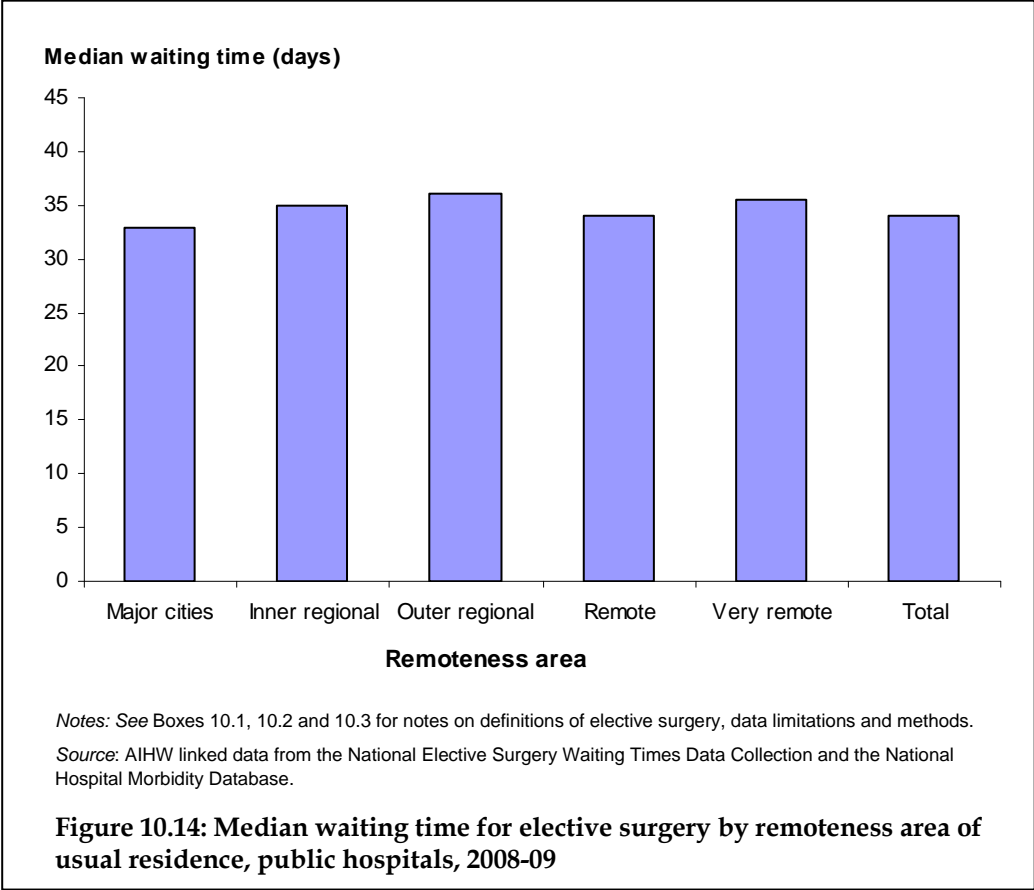
(b) Excludes data for Tasmania and the Australian Capital Territory, and private hospitals in the Northern Territory.

Source: AIHW linked data from the National Elective Surgery Waiting Times Data Collection and the National Hospital Morbidity Database.

Figure 10.13 Median waiting time for elective surgery by Indicator procedure and Indigenous status, selected states and territories, public hospitals, 2008-09

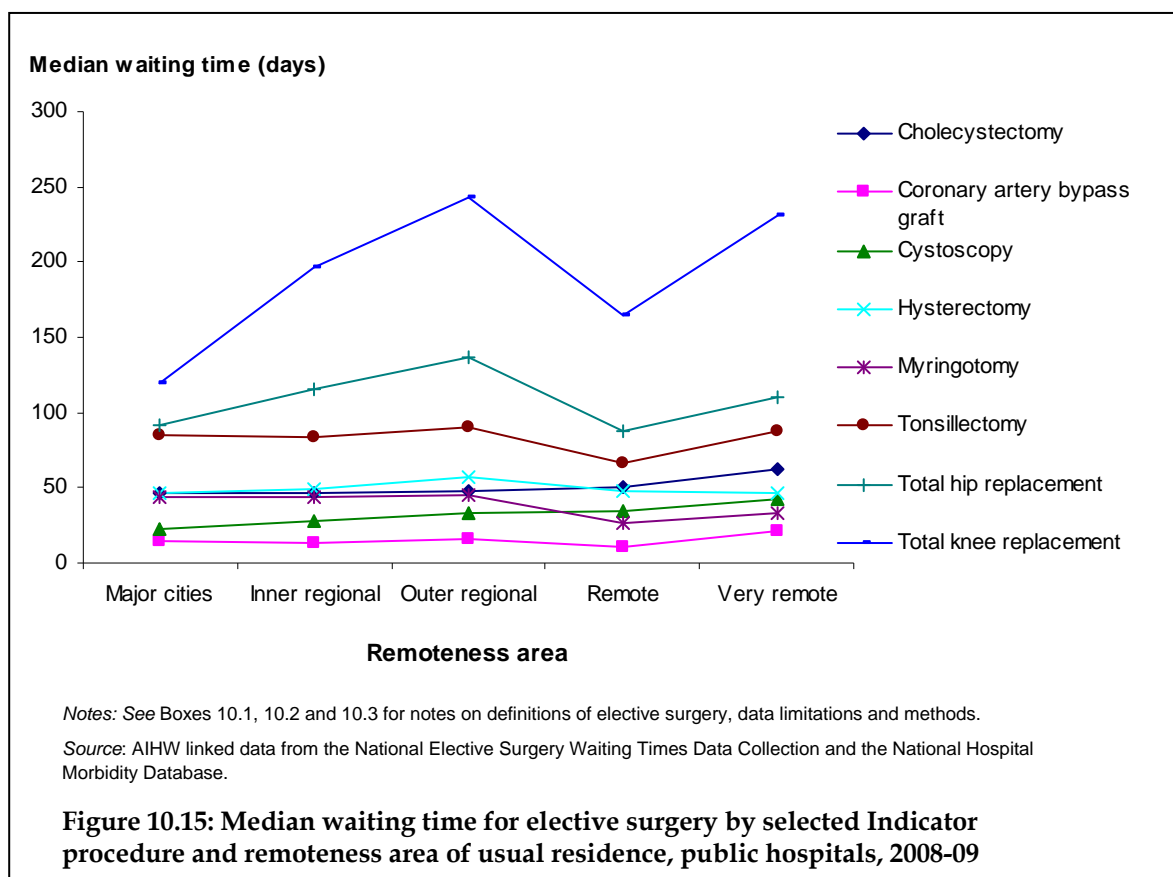
How did waiting times vary by remoteness area?

Overall, approximately 66% of admissions from waiting lists for elective surgery were for patients residing in *Major cities*, 23% in *Inner regional areas* and 9% in *Outer regional areas*. The median waiting time varied somewhat by remoteness, ranging from 33 days for people living in *Major cities* to 36 days for people living in *Outer regional areas* (Figure 10.14).



Indicator procedures

There was some variation in the median waiting time for remoteness areas by Indicator procedure. For Indicator procedures (having at least 50 admissions as shown in Figure 10.15 below) in *Remote* and *Very remote* areas, *Total knee replacement* had the greatest variation in waiting times by remoteness area with people from *Outer regional areas* having the highest median waiting time of 243 days, and the lowest in *Major cities* (119 days), followed by *Remote areas* (164 days). *Coronary artery bypass graft* had the least variation by remoteness area (Figure 10.15).



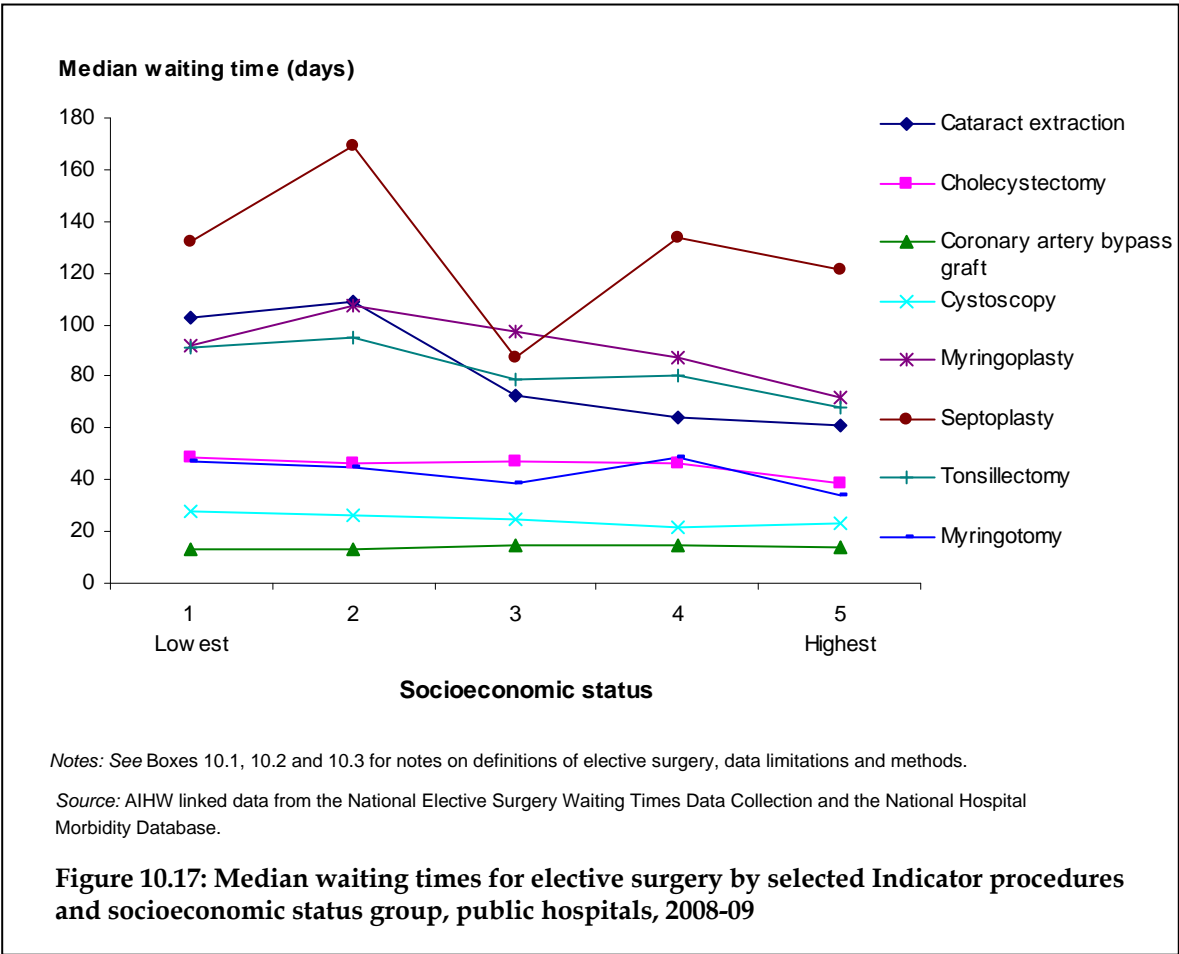
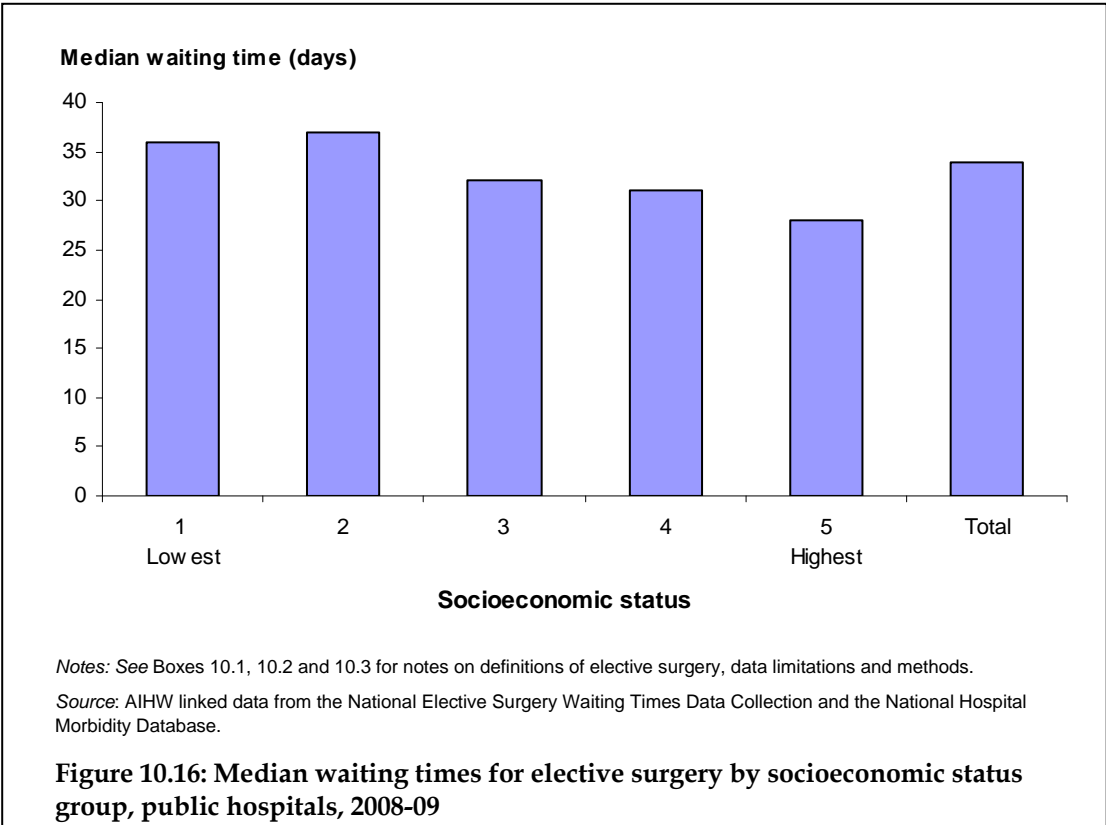
How did waiting vary by socioeconomic status?

Overall, approximately 25% of admissions from waiting lists were for people living in areas classified as being in the lowest SES group, decreasing to about 13% for people living in areas classified as being in the highest SES group.

Median waiting times varied by socioeconomic status, ranging from 28 days for people living in areas classified as the highest SES group to 37 days for the second lowest SES group (Figure 10.16).

Indicator procedures

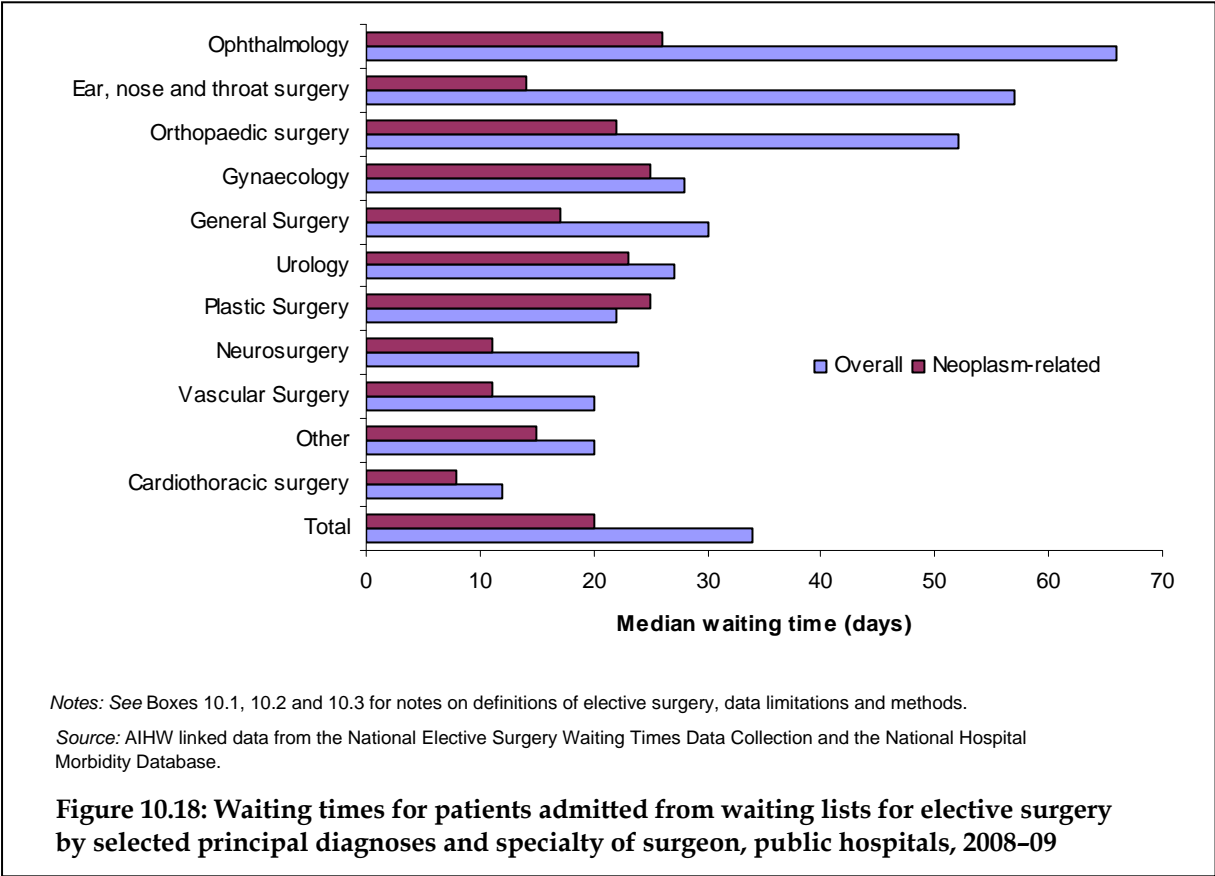
Septoplasty was the Indicator procedure with the greatest variation in waiting times by socioeconomic status, ranging from 170 days for people living in areas classified as being in the second lowest SES group to 88 days for people in the middle SES group. *Cholecystectomy*, *Coronary artery bypass graft* and *Cystoscopy* had the least variation by socioeconomic status group (Figure 10.17).



How did waiting times vary by diagnosis?

There is interest in how long patients for whom elective surgery is more urgent are waiting compared with other patients. The linked data allow diagnosis information to be considered alongside waiting times information. In this way, the waiting times for patients awaiting surgery with neoplasms, for example, can be compared to the waiting times for patients awaiting the same surgery for other conditions.

Figure 10.18 shows that there are shorter waiting times for admissions with a principal diagnosis of a neoplasm compared with other admissions, overall and for most surgical specialties. Neoplasm-related principal diagnoses were defined by ICD-10-AM diagnosis codes included in Chapter II Neoplasms (C00–D48).



Overall, the median waiting times for patients with neoplasm-related principal diagnoses (median 20 days) were 14 days shorter than the median waiting times for patients with other conditions (median 34 days). The largest variation in median waiting time by surgical specialty was for *Ear, nose and throat surgery* for which patients with a neoplasm waited 14 days, compared with 57 days overall. The only specialty with longer median waiting times for neoplasms than for other diagnoses was *Plastic surgery*.

There is also some variation in the waiting times for elective surgery for other principal diagnoses. For example, for *Orthopaedic surgery* waiting times were higher for patients with a principal diagnosis of *Gonarthrosis of the knee*, with a median waiting time of 121 days, compared with a median of 52 days overall.

Additional information

Further detailed information is provided in the following supplementary tables S10.1-S10.5, the accompanying CD and the Internet.

Supplementary tables

Box 10.4 Methods - Chapter 10 Supplementary tables

All supplementary tables include data for the Mersey Community Hospital.

Table S10.2:

- (a) The total number of admissions for Queensland includes 664 admissions that were removed from the waiting list for elective admission before 30 June 2008 and separated before 30 June 2009. It is expected that these admissions would be counterbalanced overall by the number of admissions occurring in a similar way in future reporting periods.
- (b) The number of separations with an Urgency of admission reported as *Elective* and a surgical procedure for public hospitals reporting to the National Elective Surgery Waiting Times Data Collection as a proportion of the number of separations with an Urgency of admission reported as of *Elective* and a surgical procedure for all public hospitals.
- (c) Includes data for hospitals not included in the specified hospital peer groups.
- (d) Crude rate based on the Australian estimated resident population as at 31 December 2008.

Table S10.3:

- (a) The total number of admissions for Queensland includes 664 admissions that were removed from the waiting list for elective admission before 30 June 2008 and separated before 30 June 2009. It is expected that these admissions would be counterbalanced overall by the number of admissions occurring in a similar way in future reporting periods.

Table S10.1: Waiting time statistics for patients admitted from waiting lists, by public hospital peer group, 2004–05 to 2008–09

	2004–05	2005–06	2006–07	2007–08	2008–09
Principal referral and Specialist women's & children's hospitals					
Number of reporting hospitals	75	78	82	83	85
Estimated coverage of surgical separations (%) ^(a)	99	99	98	100	100
Number of admissions	372,085	386,203	394,831	401,518	431,675
Days waited at 50th percentile	28	30	30	31	31
Days waited at 90th percentile	203	228	225	233	216
% waited more than 365 days	4.6	4.7	3.4	3.4	3.2
Large hospitals					
Number of reporting hospitals	36	34	30	35	34
Estimated coverage of surgical separations (%) ^(a)	82	81	77	80	84
Number of admissions	100,916	97,816	88,433	97,475	91,766
Days waited at 50th percentile	29	35	33	39	40
Days waited at 90th percentile	227	251	224	237	227
% waited more than 365 days	4.8	4.6	2.7	2.4	2.5
Medium hospitals					
Number of reporting hospitals	59	51	52	51	52
Estimated coverage of surgical separations (%) ^(a)	62	62	63	64	60
Number of admissions	69,830	63,643	63,658	58,076	62,815
Days waited at 50th percentile	37	38	39	42	42
Days waited at 90th percentile	272	257	231	238	230
% waited more than 365 days	6.1	3.8	1.7	1.4	1.5
Total^(b)					
Number of reporting hospitals	195	191	192	192	195
Estimated coverage of surgical separations (%)^(a)	87	87	87	91	91
Number of admissions	549,746	556,951	556,770	565,501	595,009
Admissions per 1,000 population^(c)	27.2	27.2	26.7	26.6	27.5
Days waited at 50th percentile	29	32	32	34	34
Days waited at 90th percentile	217	237	226	235	220
% waited more than 365 days	4.8	4.6	3.1	3.0	2.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods.

- (a) This is the number of separations with an Urgency of admission reported as Elective and a surgical procedure for public hospitals reporting to the National Elective Surgery Waiting Times Data Collection as a proportion of the number of separations with an Urgency of admission reported as Elective and a surgical procedure for all public hospitals.
- (b) Includes data for hospitals not included in the specified hospital peer groups and some private hospitals contracted to do elective surgery.
- (c) Crude rate based on the Australian estimated resident population as at 31 December of the period in question.

Table S10.2: Waiting time statistics for patients admitted from waiting lists for elective surgery, by hospital peer group, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA	Tas	ACT	NT	Total
Principal referral and Specialist women's & children's hospitals									
Number of reporting hospitals	29	20	19	6	5	2	2	2	85
Estimated coverage of elective surgical separations (%) ^(b)	100	100	100	100	100	100	100	100	100
Number of admissions	134,856	104,532	98,135	31,125	34,827	12,450	10,104	5,646	431,675
Days waited at 50th percentile	33	28	26	29	39	49	75	38	31
Days waited at 90th percentile	273	201	133	181	208	460	378	243	216
% waited more than 365 days	2.8	3.3	1.9	2.6	2.4	13.6	11	5.0	3.2
Large hospitals									
Number of reporting hospitals	15	8	4	4	2	1	..	..	34
Estimated coverage of elective surgical separations (%) ^(b)	100	70	100	87	100	100	..	..	84
Number of admissions	28,391	35,342	7,158	12,485	6,033	2,357	..	..	91,766
Days waited at 50th percentile	45	39	37	28	41	n.p.	..	..	40
Days waited at 90th percentile	293	188	146	178	263	n.p.	..	..	227
% waited more than 365 days	2.1	1.9	1.1	1.4	4.8	n.p.	..	..	2.5
Medium hospitals									
Number of reporting hospitals	35	3	8	4	1	1	..	..	52
Estimated coverage of elective surgical separations (%) ^(b)	100	26	89	78	21	100	..	..	60
Number of admissions	30,299	7,816	4,634	14,650	n.a.	2,124	..	..	62,815
Days waited at 50th percentile	59	42	29	32	n.a.	n.p.	..	..	42
Days waited at 90th percentile	300	132	123	152	n.a.	n.p.	..	..	230
% waited more than 365 days	1.6	1.5	0.9	1.4	n.a.	n.p.	..	..	1.5
Total^(c)									
Number of reporting hospitals	98	31	32	15	8	4	2	5	195
Estimated coverage of elective surgical separations (%)^(b)	100	78	98	85	70	100	100	100	91
Number of admissions	199,384	147,690	109,940	60,398	44,152	16,931	10,104	6,410	595,009
Admissions per 1,000 population^(d)	28.3	27.5	25.3	27.4	27.4	33.8	29.0	28.9	27.5
Days waited at 50th percentile	39	31	27	31	36	44	75	40	34
Days waited at 90th percentile	283	194	133	174	207	448	378	256	220
% waited more than 365 days	2.5	2.9	1.8	2.0	2.7	13.1	10.6	5.6	2.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods. See Box 10.4 for footnotes specific to this table.

Table S10.3: Additions to waiting lists and waiting time statistics for patients removed from waiting lists for elective surgery, by reason for removal, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA	Tas	ACT	NT	Total
Additions	233,440	151,810	109,319	70,660	49,162	18,850	12,290	5,620	651,151
Removals									
Elective admission	199,384	147,690	109,940	60,398	44,152	16,931	10,104	6,410	595,009
Days waited at 50th percentile	39	31	27	31	36	44	75	40	34
Days waited at 90th percentile	283	194	133	174	207	448	378	256	220
% waited more than 365 days	2.5	2.9	1.8	2.0	2.7	13.1	10.6	5.6	2.9
Emergency admission	1,391	826	2,936	303	302	159	56	55	6,028
Days waited at 50th percentile	17	9	0	14	18	37	15	31	3
Days waited at 90th percentile	116	100	14	76	102	524	113	179	75
% waited more than 365 days	1.1	1.1	0.1	0.7	0.3	15.7	0.0	0.0	0.9
Not contactable/died	2,705	2,522	884	498	427	795	176	277	8,284
Days waited at 50th percentile	120	148	83	126	96	314	222	243	143
Days waited at 90th percentile	348	453	524	402	337	1,253	652	1,087	449
% waited more than 365 days	4.3	18.3	16.9	14.1	7.3	43.9	29.5	33	15.9
Treated elsewhere	11,305	4,055	5,004	1,487	861	650	481	160	24,003
Days waited at 50th percentile	88	90	112	68	64	295	146	90	93
Days waited at 90th percentile	306	351	490	345	285	1,041	419	400	358
% waited more than 365 days	2.6	8.6	19.7	7.7	3.7	39.7	14.3	13	8.9
Surgery not required or declined	15,819	14,202	6,675	4,470	3,001	1,401	1,066	879	47,513
Days waited at 50th percentile	106	94	59	126	81	306	186	226	99
Days waited at 90th percentile	341	400	380	395	352	1,232	598	1,785	378
% waited more than 365 days	4.3	12.6	11.2	15.1	9.0	44.3	24.6	38	11.3
Transferred to another hospital's waiting list	n.a.	623	n.a.	4,984	n.a.	n.a.	403	8	6,018
Days waited at 50th percentile	n.a.	52	n.a.	61	n.a.	n.a.	179	293	64
Days waited at 90th percentile	n.a.	244	n.a.	284	n.a.	n.a.	458	414	307
% waited more than 365 days	n.a.	4.0	n.a.	5.0	n.a.	n.a.	18.6	13	5.8
Not reported	0	1,410	n.a.	2,063	1,704	233	0	0	5,410
Days waited at 50th percentile	..	63	n.a.	57	98	280	..	..	74
Days waited at 90th percentile	..	360	n.a.	361	420	1,688	..	..	389
% waited more than 365 days	..	9.4	n.a.	9.3	14.1	43	..	..	5.8
Total	230,604	171,328	125,439	74,203	50,447	20,169	12,286	7,789	692,265
Days waited at 50th percentile	44	36	28	35	40	57	85	50	37
Days waited at 90th percentile	296	232	163	220	238	547	408	375	259
% waited more than 365 days	2.7	4.1	3.1	3.4	3.5	17.7	12.4	10.3	3.9

Notes: See Boxes 10.1, 10.2 and 10.3 for notes on definitions of elective surgery, data limitations and methods. See Box 10.4 for footnotes specific to this table.

Table S10.4: Waiting time statistics for patients admitted from waiting lists for elective surgery, by specialty of surgeon, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA	Tas ^(b)	ACT	NT	Total
Cardio-thoracic surgery									
Admissions	3,778	2,833	2,917	639	1,046	378	232	12	11,835
Days waited at 50th percentile	13	9	11	13	11	15	19	7	12
Days waited at 90th percentile	62	107	74	38	117	107	69	15	76
% waited more than 365 days	0.1	0.7	0.2	0.0	0.3	0.0	0.0	0.0	0.3
Ear, nose & throat surgery									
Admissions	15,660	13,713	10,415	5,606	5,207	1,234	1,014	753	53,602
Days waited at 50th percentile	84	56	31	73	51	56	204	36	58
Days waited at 90th percentile	353	267	158	294	252	268	627	385	318
% waited more than 365 days	6.3	3.2	3.3	5.7	3.4	7.3	33.6	10.8	5.2
General surgery^(b)									
Admissions	54,526	32,362	27,091	10,731	9,331	5,956	1,569	1,984	143,550
Days waited at 50th percentile	30	32	26	27	34	58	41	47	30
Days waited at 90th percentile	149	176	114	154	175	564	193	225	165
% waited more than 365 days	1.1	2.5	1.1	2.0	1.8	19.6	2.8	4.6	2.4
Gynaecology									
Admissions	27,820	16,096	15,824	3,607	7,814	2,342	1,146	1,675	76,324
Days waited at 50th percentile	30	35	25	29	22	30	56	13	28
Days waited at 90th percentile	139	137	96	117	112	175	211	99	126
% waited more than 365 days	0.7	1.0	0.4	0.7	0.7	4.5	3.6	1.0	0.9
Neurosurgery									
Admissions	3,693	2,884	1,421	690	690	227	311	0	9,916
Days waited at 50th percentile	26	22	18	40	26	35	43	..	24
Days waited at 90th percentile	168	165	107	167	84	265	217	..	157
% waited more than 365 days	1.5	1.5	0.8	2.5	0.1	6.2	1.6	..	1.5
Ophthalmology									
Admissions	23,701	17,888	9,550	9,069	4,537	1,759	1,245	1,030	68,779
Days waited at 50th percentile	135	48	35	49	49	109	115	118	65
Days waited at 90th percentile	344	181	205	200	252	571	318	350	306
% waited more than 365 days	3.5	1.1	1.9	1.2	2.0	26.9	8.1	8.7	3.0
Orthopaedic surgery^(b)									
Admissions	30,874	19,364	21,159	8,074	5,437	0	1,493	589	86,990
Days waited at 50th percentile	76	51	28	51	68	0	125	36	53
Days waited at 90th percentile	355	301	172	224	334	0	506	315	323
% waited more than 365 days	6.5	6.7	3.0	3.1	7.0	..	18.5	8.0	5.6

(continued)

Table S10.4 (continued): Waiting time statistics for patients admitted from waiting lists for elective surgery, by specialty of surgeon, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA	Tas	ACT	NT	Total
Plastic surgery									
Admissions	9,170	16,125	8,339	4,224	4,261	1,513	569	128	44,329
Days waited at 50th percentile	22	17	26	24	31	17	48	69	22
Days waited at 90th percentile	135	193	147	147	186	126	338	520	168
% waited more than 365 days	0.7	3.7	3.4	1.9	4.4	3.1	9.1	11.7	3.0
Urology									
Admissions	22,607	19,500	9,126	8,476	4,815	2,209	1,192	115	68,040
Days waited at 50th percentile	29	20	32	24	43	43	63	81	27
Days waited at 90th percentile	126	140	116	121	151	181	388	234	137
% waited more than 365 days	1.1	1.9	1.4	1.5	2.2	3.6	11.2	5.2	1.8
Vascular surgery									
Admissions	5,041	3,193	1,979	1,315	843	284	538	22	13,215
Days waited at 50th percentile	17	27	19	28	11	44	25	208	20
Days waited at 90th percentile	104	320	79	222	47	535	382	565	175
% waited more than 365 days	0.3	8.4	1.0	4.2	0.7	12.7	11.9	32	3.5
Other^(c)									
Admissions	2,514	3,732	2,119	7,967	171	1,029	795	102	18,429
Days waited at 50th percentile	10	26	14	19	26	156	42	30	21
Days waited at 90th percentile	104	82	96	79	75	475	159	137	105
% waited more than 365 days	0.1	0.2	0.6	0.5	0.0	20.0	1.3	2.9	1.5
Total									
Admissions	199,384	147,690	109,940	60,398	44,152	16,931	10,104	6,410	595,009
Days waited at 50th percentile	39	31	27	31	36	44	75	40	34
Days waited at 90th percentile	283	194	133	174	207	448	378	256	220
% waited more than 365 days	2.5	2.9	1.8	2.0	2.7	13.1	10.6	5.6	2.9

Notes: See Boxes 10.1, 10.2, 10.3 and 10.4 for notes on definitions of elective surgery, data limitations and methods.

- (a) The total number of admissions for Queensland includes 664 admissions that were removed from the waiting list for elective admission before 30 June 2008 and separated before 30 June 2009. It is expected that these admissions would be counterbalanced overall by the number of admissions occurring in a similar way in future reporting periods.
- (b) For Tasmania admissions for *Orthopaedic surgery* were included under the category *General surgery*.
- (c) Includes specialty of surgeon of *Not reported*.

Table S10.5: Waiting time statistics for patients admitted from waiting lists for elective surgery, by Indicator procedure, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA	Tas	ACT	NT	Total
Cataract extraction									
Admissions	18,612	12,561	6,501	7,043	2,834	2,095	1,057	733	51,436
Days waited at 50th percentile	168	56	42	49	59	197	121	146	84
Days waited at 90th percentile	348	190	224	190	259	570	339	372	320
% waited more than 365 days	3.8	1.0	2.2	0.8	1.3	30.4	8.8	10.2	3.6
Cholecystectomy									
Admissions	6,505	4,116	3,455	1,165	1,014	498	257	143	17,153
Days waited at 50th percentile	53	47	40	32	44	59	85	82	47
Days waited at 90th percentile	189	175	117	149	148	426	226	253	170
% waited more than 365 days	1.8	1.5	0.7	0.9	0.5	14.1	3.5	4.9	1.8
Coronary artery bypass graft									
Admissions	1,040	978	1,277	199	460	179	120	0	4,253
Days waited at 50th percentile	15	15	10	15	17	29	11	..	14
Days waited at 90th percentile	80	184	74	35	119	142	51	..	93
% waited more than 365 days	0.0	1.3	0.1	0.0	0.2	0.0	0.0	..	0.4
Cystoscopy									
Admissions	14,748	11,671	4,366	4,972	1,747	807	782	329	39,422
Days waited at 50th percentile	26	19	33	22	35	36	80	49	25
Days waited at 90th percentile	118	126	145	161	100	158	394	213	133
% waited more than 365 days	0.8	1.2	1.4	2.5	1.1	1.2	12.1	3.0	1.5
Haemorrhoidectomy									
Admissions	1,500	1,167	476	295	293	39	25	179	3,974
Days waited at 50th percentile	51	68	42	30	38	204	84	73	51
Days waited at 90th percentile	191	248	166	178	179	591	164	318	216
% waited more than 365 days	1.6	5.0	2.1	1.4	3.4	30.8	0.0	8	3.3
Hysterectomy									
Admissions	3,795	2,220	2,082	558	669	323	144	88	9,879
Days waited at 50th percentile	50	48	41	56	50	55	77	56	48
Days waited at 90th percentile	215	141	119	160	184	280	235	208	171
% waited more than 365 days	1.6	0.6	0.5	1.1	1.0	4.3	3.5	1.1	1.2
Inguinal herniorrhaphy									
Admissions	5,846	3,730	2,041	1,277	980	510	228	133	14,745
Days waited at 50th percentile	58	52	47	32	48	68	87	80	52
Days waited at 90th percentile	241	214	145	156	217	622	272	206	218
% waited more than 365 days	2.3	3.4	1.2	0.9	1.1	22.7	5.7	1.5	3.0

(continued)

Table S10.5 (continued): Waiting time statistics for patients admitted from waiting lists for elective surgery, by Indicator procedure, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA	Tas	ACT	NT	Total
Myringoplasty									
Admissions	412	434	472	271	80	40	25	266	2,000
Days waited at 50th percentile	190	82	70	101	153	71	273	82	92
Days waited at 90th percentile	366	316	328	381	451	450	689	593	370
% waited more than 365 days	10.9	6.9	8.1	11.4	16.3	15.0	40.0	16.2	10.8
Myringotomy									
Admissions	560	2,225	1,931	929	787	102	158	121	6,813
Days waited at 50th percentile	45	43	33	58	48	49	119	35	44
Days waited at 90th percentile	195	120	119	212	109	154	353	128	141
% waited more than 365 days	1.1	0.3	1.2	2.5	0.4	1.0	8.9	2.5	1.2
Prostatectomy									
Admissions	2,911	2,330	1,283	742	657	55	113	17	8,108
Days waited at 50th percentile	55	23	40	28	56	51	42	108	41
Days waited at 90th percentile	182	227	121	72	136	109	467	216	172
% waited more than 365 days	2.2	4.8	1.7	0.1	2.4	0.0	13.3	0.0	2.8
Septoplasty									
Admissions	1,385	1,548	676	370	325	69	176	33	4,582
Days waited at 50th percentile	237	86	69	110	106	136	420	105	128
Days waited at 90th percentile	369	353	413	336	337	909	728	1,203	378
% waited more than 365 days	12.3	8.5	12.6	8.6	7.7	29	58.5	30.3	12.6
Tonsillectomy									
Admissions	5,096	4,363	3,384	2,045	1,302	338	308	107	16,943
Days waited at 50th percentile	145	80	48	101	74	113	346	66	85
Days waited at 90th percentile	361	281	168	301	277	244	560	413	335
% waited more than 365 days	8.2	2.6	3.5	5.8	1.8	7.4	46.1	11.2	5.7
Total hip replacement									
Admissions	2,786	1,991	1,306	679	657	289	191	40	7,939
Days waited at 50th percentile	125	107	68	68	102	370	170	59	100
Days waited at 90th percentile	364	348	242	218	374	757	489	391	364
% waited more than 365 days	8.9	9.2	4.0	1.8	11.0	50.5	22.0	12.5	9.6
Total knee replacement									
Admissions	4,793	2,245	1,994	1,048	853	302	204	54	11,493
Days waited at 50th percentile	223	143	86	83	182	493	249	172	147
Days waited at 90th percentile	376	463	343	271	429	825	589	409	393
% waited more than 365 days	14.0	17.1	7.9	4.2	19.0	69.9	37.3	11.1	14.9

(continued)

Table S10.5 (continued): Waiting time statistics for patients admitted from waiting lists for elective surgery, by Indicator procedure, states and territories, 2008–09

	NSW	Vic	Qld ^(a)	WA	SA	Tas ^(b)	ACT	NT	Total
Varicose veins stripping & ligation									
Admissions	1,450	1,541	491	161	328	36	181	38	4,226
Days waited at 50th percentile	69	110	55	91	116	104	298	118	87
Days waited at 90th percentile	270	486	275	393	344	584	749	524	373
% waited more than 365 days	2.2	17.0	5.9	12.4	7.9	13.9	35.4	21.1	10.6
Not applicable/not stated									
Admissions	127,945	94,570	78,205	38,644	31,166	11,249	6,135	4,129	392,043
Days waited at 50th percentile	28	25	22	26	29	32	44	25	26
Days waited at 90th percentile	194	172	113	149	172	315	256	181	168
% waited more than 365 days	1.7	2.6	1.5	1.9	2.4	8.4	6.3	3.9	2.3
Total									
Admissions	199,384	147,690	109,940	60,398	44,152	16,931	10,104	6,410	595,009
Days waited at 50th percentile	39	31	27	31	36	44	75	40	34
Days waited at 90th percentile	283	194	133	174	207	448	378	256	220
% waited more than 365 days	2.5	2.9	1.8	2.0	2.7	13.1	10.6	5.6	2.9

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