



## 6.10 Elective surgery

Elective surgery is planned surgery that can be booked in advance, as a result of a specialist clinical assessment, resulting in placement on an elective surgery waiting list. Prioritising and scheduling patients for elective surgery is an important consideration for Australian hospitals. Waiting time for elective surgery is calculated from the time a patient is placed on a waiting list until they are admitted for their surgery.

Private hospitals perform about two-thirds of elective surgery in Australia (1.4 million hospitalisations compared with about 695,000 for public hospitals in 2013–14). Waiting time information is available for patients having elective surgery in public hospitals.

### How much and what type of elective surgery was performed in public hospitals?

In 2014–15, Australia's public hospitals admitted almost 700,000 patients from elective surgery waiting lists. For these patients:

- around 23% were admitted for *General surgery* (surgery on organs of the abdomen) and about 15% were admitted for *Orthopaedic surgery* (surgery on bones, joints, ligaments and tendons, including knee and hip replacements)
- the most common surgical procedure was *Cataract extraction* (65,000 admissions).

Between 2011–12 and 2014–15:

- elective surgery admissions increased by an average of 1.8% each year, while admissions per 1,000 population remained stable at around 30
- there were relatively large increases in admissions for *Total hip replacement* (4.5% per year) and *Total knee replacement* (4.0% per year).

### How long did people wait for elective surgery in public hospitals?

In 2014–15:

- the median waiting time was 35 days, meaning that 50% of patients were admitted within 35 days of being placed on the waiting list. Overall, 90% were admitted within 253 days, while 1.8% waited more than 1 year
- the shortest median waiting time was in Queensland (27 days) and the longest was in Tasmania (55 days)
- the median waiting time for Indigenous Australians (42 days) was higher than for other Australians (35 days), and a higher proportion of Indigenous Australians waited more than a year for elective surgery than other Australians (2.3% and 1.8%, respectively).

Between 2010–11 and 2013–14, the median waiting time was stable at 36 days, although in 2014–15 the median waiting time decreased to 35 days. Between 2010–11 and 2014–15, the proportion of patients who waited more than a year to be admitted for their procedure decreased from 2.8% to 1.8%.



## How did waiting times vary by surgical specialty?

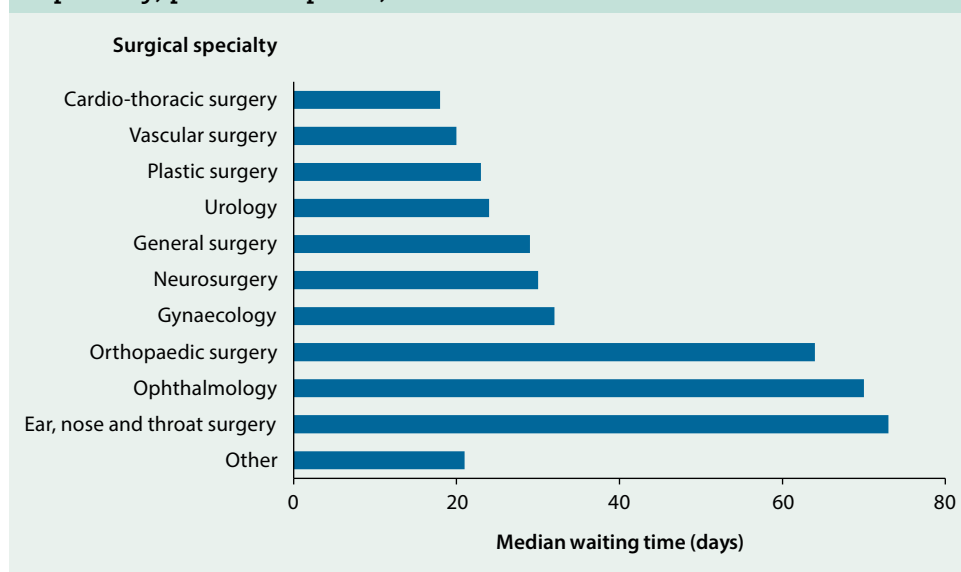
In 2014–15:

- the longest median waiting times were for the surgical specialties *Ear, nose and throat surgery*; *Ophthalmology*; and *Orthopaedic surgery* (73, 70, and 64 days, respectively). *Cardio-thoracic surgery* had the shortest median waiting time (18 days) (Figure 6.10.1)
- *Ear, nose and throat surgery* had the highest proportion of patients who waited more than a year to be admitted (4.8%).

Comparing 2010–11 and 2014–15:

- median waiting times decreased for *Urology*; *Neurosurgery*; *General surgery*; and *Plastic surgery* and increased for *Ear, nose and throat surgery*; *Cardio-thoracic surgery*; *Gynaecology*; and *Orthopaedic surgery*
- there was no change for *Vascular surgery* or *Ophthalmology*. The largest decrease was for *Urology*, from 28 days in 2010–11 to 24 days in 2014–15. The largest increase was for *Ear, nose and throat surgery*, from 64 days in 2010–11 to 73 days in 2014–15.

**Figure 6.10.1: Median elective surgery waiting times, by surgical specialty, public hospitals, 2014–15**



### What is missing from the picture?

Data on the urgency of the need for elective surgery has not been reported here. In 2011, an expert panel established by the Council of Australian Governments noted inconsistencies in clinical urgency categorisation for elective surgery among the states and territories. In response, the AIHW, in collaboration with the Royal Australasian College of Surgeons, developed revised definitions for urgency categories that were implemented from 1 July 2015, so it is expected that urgency category information will be more nationally comparable from the 2015–16 collection period.



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Private hospitals do not report to the National Elective Surgery Waiting Times Data Collection and therefore there is no information available about waiting times in this sector. Neither is there nationally consistent information available on the amount of time waited before the patient's first appointment with the surgeon (for example after referral from a general practitioner).

## Where do I go for more information?

The reports [Elective surgery waiting times 2014–15: Australian hospital statistics](#); [Admitted patient care 2013–14: Australian hospital statistics](#) and [National definitions for elective surgery urgency categories: proposal for the Standing Council on Health](#) are available for free download.

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