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Waiting your turn:

Wait times for health care in Canada, 2013 Report

by Bacchus Barua and Nadeem Esmail

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Précis

This edition of *Waiting Your Turn* indicates that waiting times for elective medical treatment have increased since last year. Specialist physicians surveyed across 12 specialties and 10 Canadian provinces report a total waiting time of 18.2 weeks between referral from a general practitioner and receipt of elective treatment.

Wait times between 2012 and 2013 increased in both the segment between referral by a general practitioner and consultation with a specialist (rising to 8.6 weeks from 8.5 weeks in 2012), and the segment between a consultation with a specialist and receipt of treatment (rising to 9.6 weeks from 9.3 weeks in 2012). Physicians also indicate that Canadians wait almost 3 weeks longer than what they consider is clinically “reasonable” for elective treatment after an appointment with a specialist.

There is also a great deal of variation in the total waiting time faced by patients across the provinces. While Ontario reports the shortest total wait in 2013 (13.7 weeks); Prince Edward Island reports the longest at 40.1 weeks. The same is true of variation among specialties. Patients wait longest between a GP referral and orthopaedic surgery (39.6 weeks), while those waiting for radiation oncology begin treatment in 3.5 weeks.

Data from this year’s survey indicate that in 2013, across all 10 provinces people are waiting for an estimated 928,120 procedures. This means that, assuming that each person waits for only one procedure, 2.7 percent of Canadians are waiting for treatment.

Importantly, physicians report that only about 11.1 percent of their patients are on a waiting list because they requested a delay or postponement.

The results of this year’s survey indicate that despite provincial wait times reduction strategies and high levels of health expenditure, it is clear that patients in Canada continue to wait too long to receive medically necessary treatment.

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We are also pleased to acknowledge the important contributions of **Steven Globerman, Maureen Hazel, Joanna Miyake, Cynthia Ramsay, Mark Rovere, Brett J. Skinner, Greg Wilson, and Martin Zelder** in completing earlier versions of the survey and in building the base of knowledge that is incorporated into this publication.

Data collection for this particular edition of *Waiting Your Turn* was completed with the assistance of Jane Loyer and Francis Pouliot.

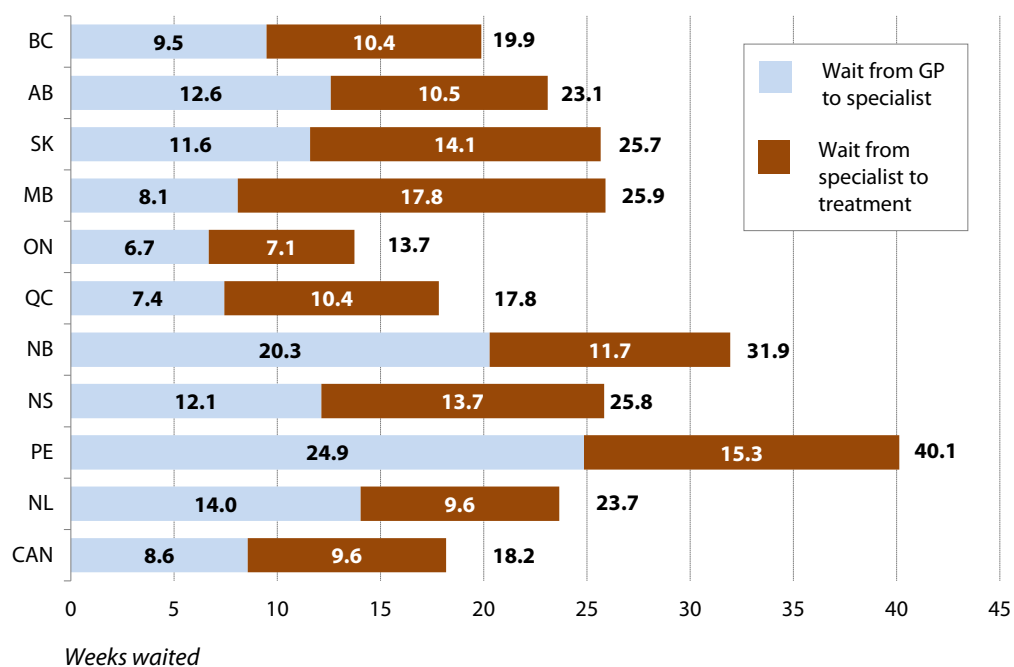
Findings

Total wait times

The Fraser Institute’s twenty-third annual waiting list survey finds that wait times¹ for surgical and other therapeutic treatments have increased in 2013. The total waiting time between referral from a general practitioner and delivery of elective treatment by a specialist, averaged across all 12 specialties and 10 provinces surveyed, has risen from 17.7 weeks in 2012 to 18.2 weeks in 2013. Compared to 1993, the total waiting time in 2013 is 95 percent longer.

This nationwide deterioration in access reflects waiting time increases in six provinces, while concealing decreases in Ontario, New Brunswick, Nova Scotia and Newfoundland & Labrador.

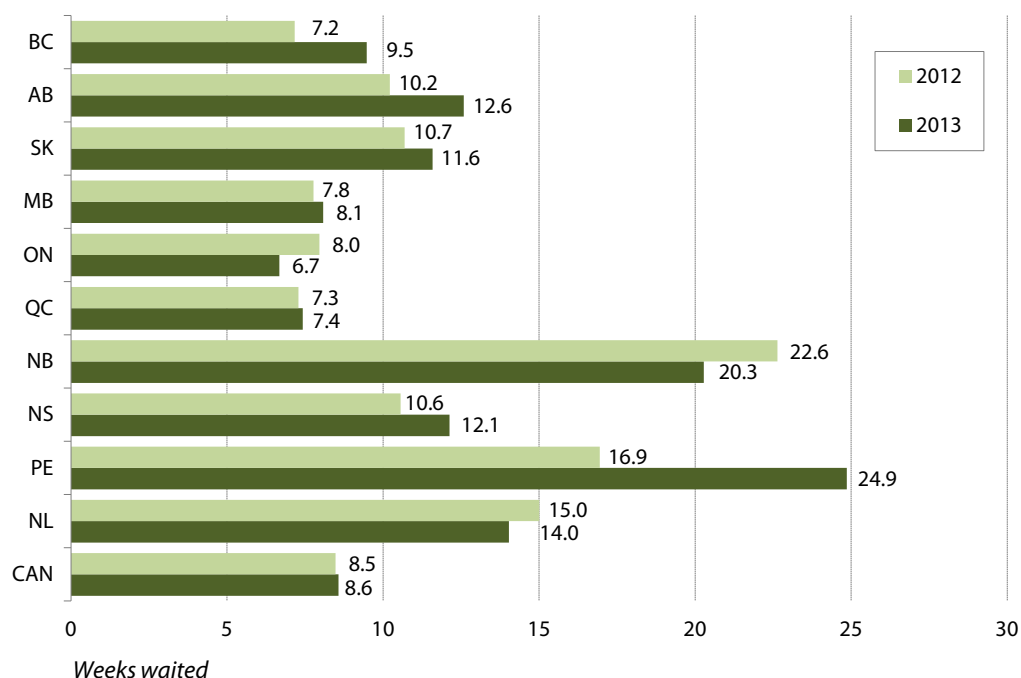
Chart 1: Median Wait by Province in 2013
Weeks Waited from Referral by GP to Treatment



Source: The Fraser Institute’s national waiting list survey, 2013.
 Totals may not equal the sum of subtotals due to rounding.

1 For a further explanation of how *Waiting Your Turn* measures wait times, see the “Method” section.

Chart 2: Waiting by Province in 2012 and 2013
Weeks Waited from Referral by GP to Appointment with Specialist



Source: The Fraser Institute's national waiting list survey, 2013.

Ontario reports the shortest total wait in 2013 (13.7 weeks), followed by Quebec (17.8 weeks), and British Columbia (19.9 weeks). Prince Edward Island² has the longest total wait at 40.1 weeks, followed by New Brunswick (31.9 weeks), and Manitoba (25.9 weeks) (see table 2 and chart 1)

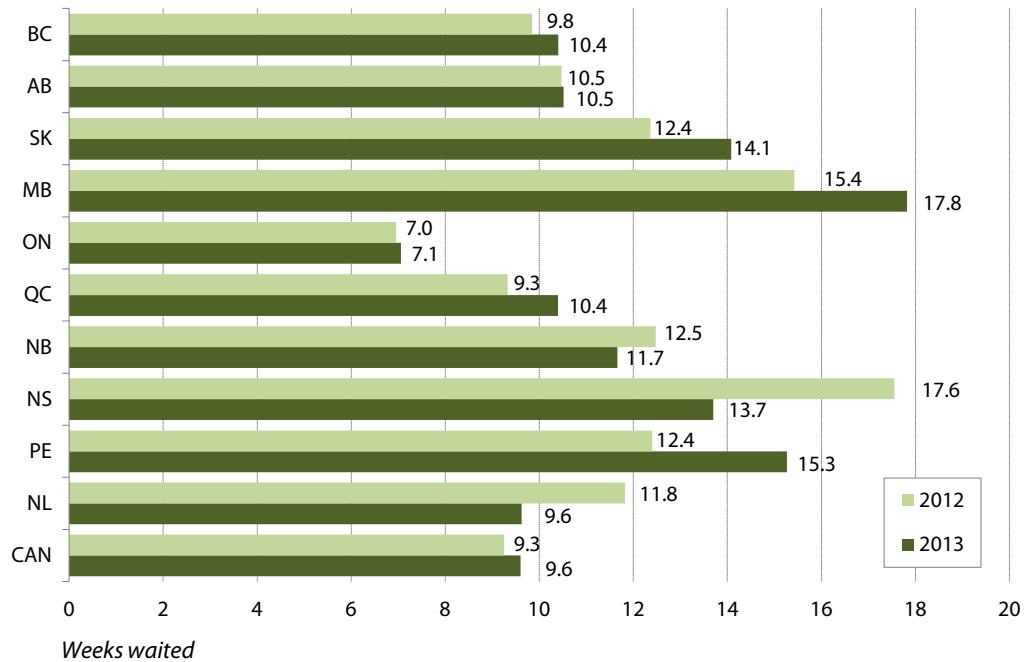
Wait time by segment

Total wait time can be examined in two segments:

1. The first segment occurs from referral by a general practitioner to consultation with a specialist.
2. The second segment occurs from the consultation with a specialist to the point at which the patient receives treatment.

2 Waiting time estimates for Prince Edward Island should be interpreted with caution due to the small number of survey respondents in the province.

Chart 3: Waiting by Province in 2012 and 2013
Weeks Waited from Appointment with Specialist to Treatment



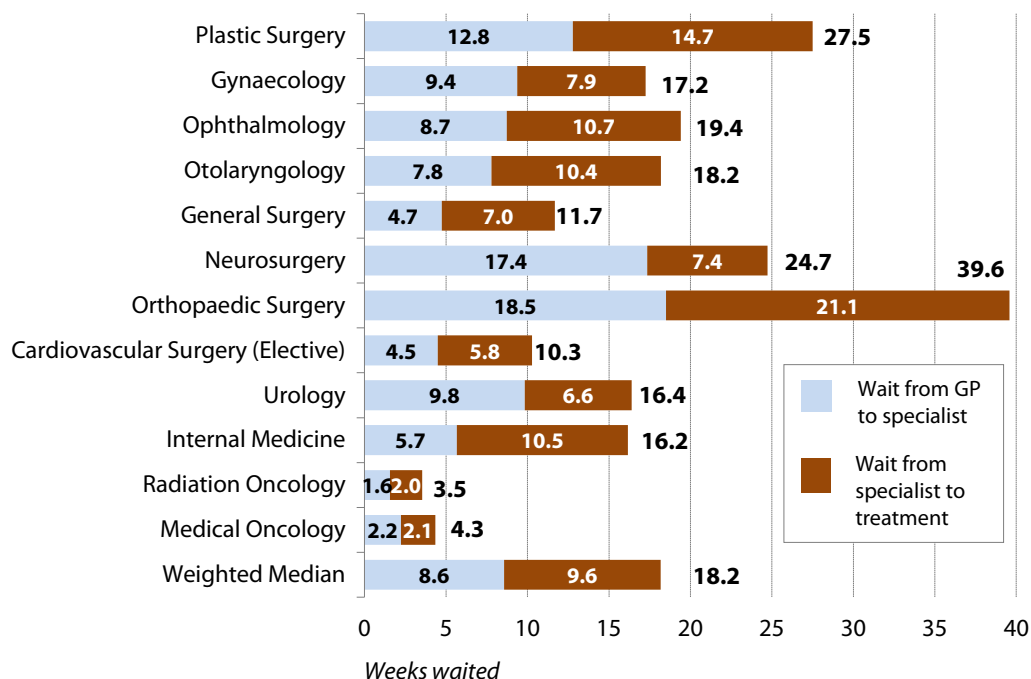
Source: The Fraser Institute's national waiting list survey, 2013.

The increase in the total waiting time between 2012 and 2013 results from an increase in both segments.

The waiting time in the first segment, from referral by a general practitioner to consultation with a specialist, has risen from 8.5 weeks in 2012 to 8.6 weeks in 2013. This wait time is 132 percent longer than in 1993, when it was 3.7 weeks (see graphs 1 and 2). The waiting time to see a specialist has increased in seven provinces since 2012, but has fallen in Ontario, New Brunswick, and Newfoundland & Labrador (see chart 2). The shortest waits for specialist consultations are in Ontario (6.7 weeks), Quebec (7.4 weeks), and Manitoba (8.1 weeks). The longest waits for specialist consultations occur in Prince Edward Island (24.9 weeks), New Brunswick (20.3 weeks), and Newfoundland & Labrador (14.0 weeks) (see table 3).

The waiting time in the second segment, from consultation with a specialist to the point at which the patient receives treatment, has risen from 9.3 weeks in 2012 to 9.6 weeks in 2013. This portion of waiting is 71 percent longer than in 1993 when it was 5.6 weeks (see graphs 3 and 4). Waiting times from specialist consultation to treat-

Chart 4: Median Wait by Specialty in 2013
Weeks Waited from Referral by GP to Treatment



Source: The Fraser Institute's national waiting list survey, 2013.
 Totals may not equal the sum of subtotals due to rounding.

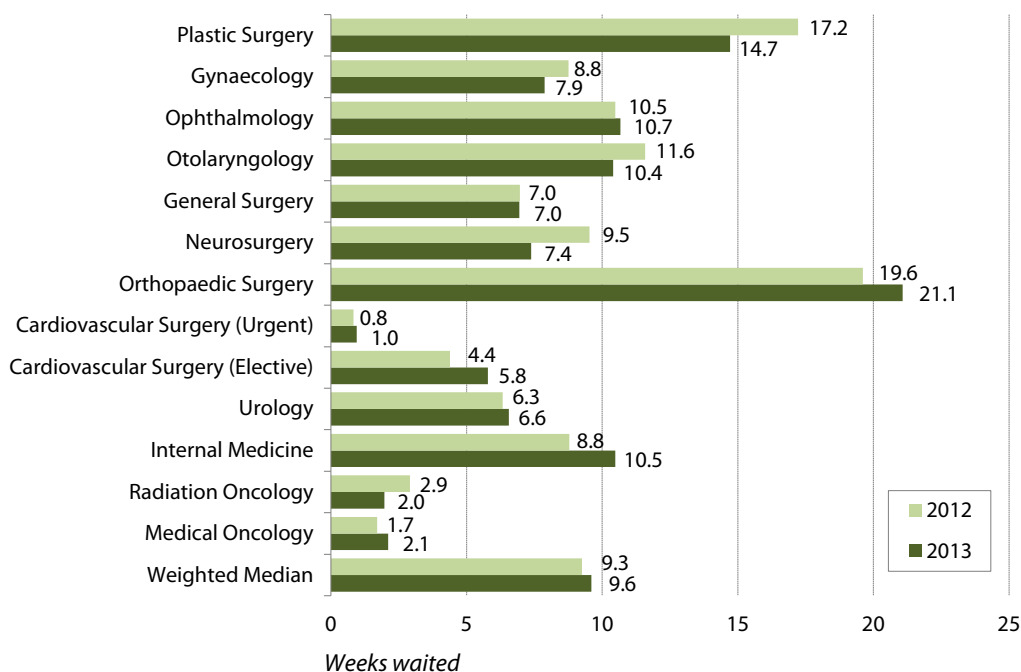
ment have increased in seven³ provinces, falling only in New Brunswick, Nova Scotia, and Newfoundland & Labrador. The shortest specialist-to-treatment waits are found in Ontario (7.1 weeks), Newfoundland & Labrador (9.6 weeks), Quebec and British Columbia (10.4 weeks each), while the longest such waits exist in Manitoba (17.8 weeks), Prince Edward Island (15.3 weeks), and Saskatchewan (14.1 weeks) (see table 4).

Waiting by specialty

Among the various specialties, the shortest total waits exist for radiation oncology (3.5 weeks), medical oncology (4.3 weeks), and elective cardiovascular surgery (10.3 weeks). Conversely, patients wait longest between a GP referral and orthopaedic surgery (39.6 weeks), plastic surgery (27.5 weeks), and neurosurgery (24.7 weeks) (see table 2 and chart 4). The largest increases in waits between 2012 and 2013 have been for elective cardiovascular surgery (2.7 weeks), internal medicine (2.5 weeks), and urology

3 The wait time from specialist consultation to treatment has remained relatively stable in Alberta at 10.5 weeks, increasing by only 0.04 weeks since 2012.

Chart 5: Waiting by Specialty in 2012 and 2013
Weeks Waited from Appointment with Specialist to Treatment



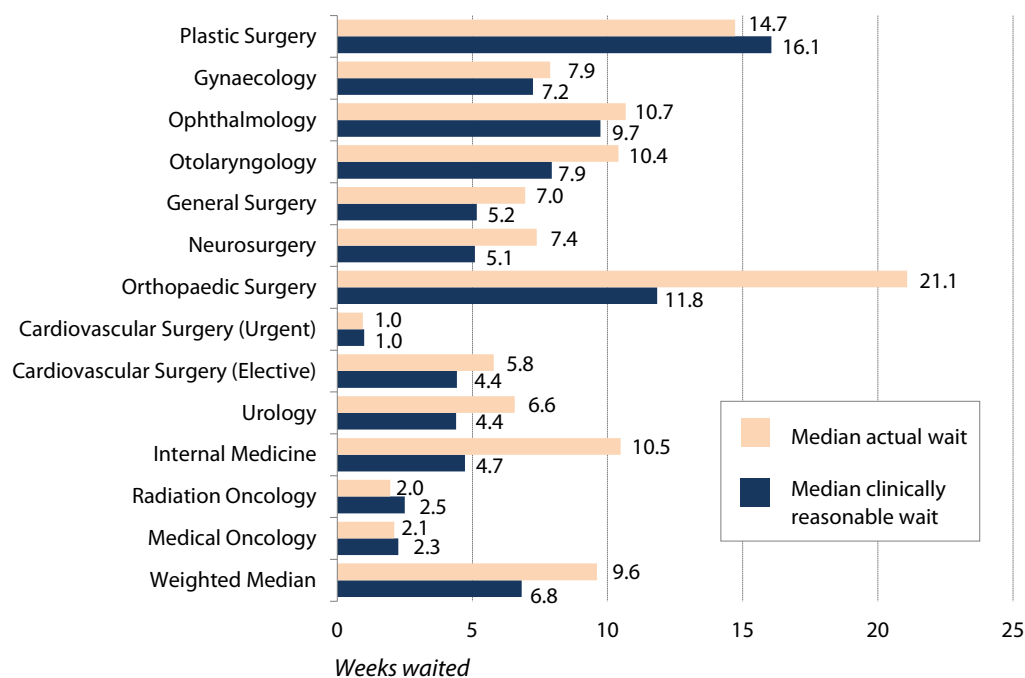
Source: The Fraser Institute's national waiting list survey, 2013.

(1.4 weeks). Such increases are offset by decreases in wait times for patients receiving treatment in fields like plastic surgery (-4.0 weeks), otolaryngology (-2.5 weeks) and neurosurgery (-1.9 weeks).

Breaking waiting time down into its two components, there is also variation among specialties. With regard to the first segment, the shortest waits are in radiation oncology (1.6 weeks), medical oncology (2.2 weeks), and cardiovascular surgery (4.5 weeks). Meanwhile, the longest waits are for orthopaedic surgery (18.5 weeks), neurosurgery (17.4 weeks), and plastic surgery (12.8 weeks) (see table 3).

For the second segment, patients wait the shortest intervals for urgent cardiovascular surgery (1.0 weeks), radiation oncology (2.0 weeks), and medical oncology (2.1 weeks). They wait longest for orthopaedic surgery (21.1 weeks), plastic surgery (14.7 weeks), and ophthalmology (10.7 weeks) (see table 4 and chart 5). Median wait times for specific procedures within a specialty, by province, are shown in tables 5a-5l.

Chart 6: Median Actual Wait Versus Median Clinically Reasonable Wait by Specialty for Canada: Weeks Waited from Appointment with Specialist to Treatment in 2013



Source: The Fraser Institute's national waiting list survey, 2013.

Comparison between clinically “reasonable” and actual waiting times

Specialists are also surveyed as to what they regard as clinically “reasonable” waiting times in the second segment covering the time spent from specialist consultation to delivery of treatment. Out of the 108 categories (some comparisons were precluded by missing data), actual waiting time (table 4) exceeds reasonable waiting time (table 8) in 69 percent of the comparisons. Averaged across all specialties, Ontario and Newfoundland & Labrador have come closest to meeting the standard of “reasonable” wait times. Their actual second segment waits only exceed the corresponding “reasonable” values by 20 and 21 percent, respectively, which are smaller gaps than in the other provinces (see table 10). These two provinces, however, achieve their performance by different means: the “reasonable” wait time in Newfoundland & Labrador is among the longest in Canada at 8.0 weeks (Nova Scotia, New Brunswick and Manitoba reported longer “reasonable” wait times), while the “reasonable” wait time in Ontario is Canada’s shortest at 5.9 weeks. Physicians in British Columbia and Quebec also hold relatively more stringent standards as to what is “reasonable.” The greatest difference between these two values across all provinces for a specialty is in orthopaedic surgery,

Chart 7: Waiting for Technology: Weeks Waited to Receive Selected Diagnostic Tests in 2013, 2012, and 2011

Province	CT-Scan			MRI			Ultrasound		
	2013	2012	2011	2013	2012	2011	2013	2012	2011
British Columbia	4.0	4.0	4.0	16.0	12.0	16.0	4.0	4.0	4.0
Alberta	4.0	4.0	4.0	8.0	8.0	10.0	2.0	2.0	2.5
Saskatchewan	3.0	4.0	6.0	8.0	10.0	12.0	3.0	3.0	4.0
Manitoba	4.0	4.0	5.0	8.0	8.0	8.0	5.0	4.8	6.0
Ontario	3.0	3.0	3.5	5.0	6.0	6.0	2.0	2.0	2.0
Quebec	4.0	4.0	5.0	9.0	9.5	10.0	6.5	6.0	8.0
New Brunswick	4.0	4.0	4.0	8.0	8.0	8.0	5.5	8.0	6.0
Nova Scotia	4.0	4.0	4.0	10.0	12.0	8.0	5.0	5.0	6.0
P.E.I.	3.5	8.0	4.0	13.0	16.0	10.0	6.0	6.5	12.0
Newfoundland	5.3	5.0	3.0	10.0	11.0	12.0	6.0	6.0	18.0
Canada	3.6	3.7	4.2	8.3	8.4	9.2	3.8	3.7	4.6

Note: Links to wait times data published by provincial government agencies can be found in Appendix A.

where the actual waiting time is about 9.2 weeks longer than what is considered to be “reasonable” by specialists (see chart 6).⁴ Median reasonable wait times for specific procedures within a specialty, by province, are shown in tables 9a-9l.

Waiting for diagnostic and therapeutic technology

Patients also experience significant waiting times for various diagnostic technologies across the provinces. The wait for a computed tomography (CT) scan has decreased to 3.6 weeks in 2013 from 3.7 weeks in 2012. Saskatchewan and Ontario have the shortest wait for a CT scan (3.0 weeks), while the longest wait occurs in Newfoundland & Labrador (5.3 weeks). The wait for a magnetic resonance imaging (MRI) scan has decreased to 8.3 weeks in 2013 from 8.4 weeks in 2012. Patients in Ontario experience the shortest wait for an MRI (5.0 weeks), while residents of British Columbia wait longest (16.0 weeks). Finally, the wait for an ultrasound has risen to 3.8 weeks from 3.7

4 The greatest proportional difference for a specialty is in Internal Medicine, where the actual waiting time exceeds the corresponding reasonable value by almost 122 percent.

weeks in 2012. Alberta and Ontario have the shortest wait for an ultrasound (2.0 weeks), while Quebec has the longest ultrasound waiting time: 6.5 weeks (see chart 7).

Numbers of procedures for which people are waiting

This study estimates that across the 10 provinces, the total number of procedures for which people are waiting in 2013 is 928,120 (see table 12; table 14 presents the numbers for the provinces on a population adjusted basis), an increase of 6.6 percent from the estimated 870,462 procedures in 2012. The estimated number of procedures for which people are waiting has increased in seven provinces, but has fallen in New Brunswick, Nova Scotia, and Newfoundland & Labrador. Assuming that each person waits for only one procedure, 2.7 percent of Canadians are waiting for treatment in 2013, which varies from a low of 2.0 percent in Ontario to a high of 4.5 percent in Manitoba.⁵ Tables 13a-13l show the number of procedures for which people are waiting within a specialty, by province.

5 These numbers should be interpreted with caution, especially for Saskatchewan. As a result of discussions with provincial authorities in 2002, counts of “the number of patients waiting for surgery” have been replaced with the “number of procedures for which patients are waiting.” There do not, however, appear to be significant systematic differences between the numbers of “procedures for which people are waiting” estimated in this edition of *Waiting Your Turn* and counts of “patients waiting” reported by provincial ministries.

Method

This study replicates methods used in previous editions. The data for this issue of *Waiting Your Turn* were collected between January 9th and April 30, 2013. Survey questionnaires⁶ were sent to practitioners in 12 different medical specialties: plastic surgery, gynaecology, ophthalmology, otolaryngology, general surgery, neurosurgery, orthopaedic surgery, cardiovascular surgery, urology, internal medicine, radiation oncology, and medical oncology. This year, the overall response rate was 21 percent (see table 1). The major findings from the survey responses are summarized in tables 2 through 15.

This study is designed to estimate the wait for elective treatment.⁷ Waiting time is calculated as the median of physician responses. The median is calculated by ranking specialists' responses in either ascending or descending order, and determining the middle value.⁸

The provincial weighted medians, for each specialty, reported in the last line of tables 5a through 5l, are calculated by multiplying the median wait for each procedure (e.g., mammoplasty, neurolysis, etc., for plastic surgery) by a weight—the fraction of all surgeries within that specialty constituted by that procedure. The sum of these multiplied terms forms the weighted median for that province and specialty (an analogous method is used for tables 9a through 9l).

To obtain the provincial medians (displayed in the last row of tables 2, 3, 4, and 8), the 12 specialty medians are each weighted by a ratio—the number of procedures done in that specialty in the province, divided by the total number of procedures done by specialists of all types in the province. To obtain the national medians (displayed in the last column of tables 2, 3, 4, and 8) we use a similar ratio—the number of procedures done in that specialty in the province, divided by the total number of procedures done by specialists in that specialty across all provinces.

To estimate the number of procedures for which people are waiting, the total annual number of procedures is divided by 52 (weeks per year) and then multiplied by the Fraser Institute's estimate of the actual provincial average number of weeks waited. This means that a waiting period of one month implies that, on average, patients are

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- 6 The Cornerstone Group of Companies provided mailing lists, drawn from the Canadian Medical Association's membership rolls. Specialists were offered a chance to win one of two iPads or one of two \$500 cash prizes (to be randomly awarded) as an inducement to respond. Physicians were contacted via letter-mail, facsimile, and telephone.
 - 7 Emergent, urgent, and elective wait times are measured for cardiovascular surgery.
 - 8 For an even-numbered group of respondents, the median is the average of the two middle values.

waiting one-twelfth of a year for surgery. Therefore, the next person added to the list would find one-twelfth of a year's patients ahead of him or her in the queue. The main assumption underlying this estimate is that the number of surgeries performed will neither increase nor decrease within the year in response to waiting lists.

The number of non-emergency procedures for which people are waiting that were not included in the survey is also calculated, and is listed in table 12 as the "residual" number of procedures for which people are waiting. To estimate this residual number, the number of non-emergency operations not contained in the survey that are done in each province annually must be used. This residual number of operations (compiled from the CIHI data discussed below) is then divided by 52 (weeks) and multiplied by each province's weighted median waiting time for all specialties.

This study's weighting of medians and the estimation of the number of procedures for which patients are waiting are based on data from the Canadian Institute for Health Information's (CIHI) Discharge Abstract Database (DAD) and National Ambulatory Care Reporting System (NACRS) for 2011-2012. Quebec does not provide the CIHI with discharge data for same-day surgeries. As a result, the authors have made a pro-rated estimate of same-day surgeries in Quebec using the number of acute surgeries performed in the province.

There are a number of minor problems in matching the CIHI's categories of operations to those reported in the Fraser Institute survey. In a few instances, an operation such as rhinoplasty is listed under more than one specialty in *Waiting Your Turn*. In these cases, we divide the number of patients annually undergoing this type of operation among specialties according to the proportion of specialists in each of the overlapping specialties; e.g., if plastic surgeons constitute 75 percent of the group of specialists performing rhinoplasties, then the number of rhinoplasties counted under plastic surgery is the total multiplied by 0.75. A second problem is that, in some cases, an operation listed in the *Waiting Your Turn* questionnaire has no direct match in the CIHI tabulation. An example is ophthalmologic surgery for glaucoma, which is not categorized separately in the CIHI discharge abstract data. In these cases, we make no estimate of the number of patients waiting for these operations.

Finally, the Fraser Institute's cardiovascular surgery questionnaire, following the traditional classification by which patients are prioritized, has distinguished among emergent, urgent, and elective patients. However, in discussing the situation with physicians and hospital administrators, it became clear that these classifications are not standardized across provinces. Decisions as to how to group patients were thus left to responding physicians and heart centres. Direct comparisons among provinces using these categories should, therefore, be made tentatively.

Verification of data

Verification of current data with governments

On July 31, 2013, we sent preliminary data to provincial ministries of health, and to provincial cancer and cardiac agencies. As of October 1, 2013, we have received replies from provincial health ministries in Alberta, Saskatchewan, Manitoba, Nova Scotia, and Newfoundland & Labrador. A list of links to wait times data published by provincial government agencies can be found in Appendix A.

Many provinces measure the waiting time as the time between the date on which a treatment was scheduled (or booked) and the date of the treatment. The Fraser Institute intends to assist those seeking treatment, and those evaluating waiting times, by providing comprehensive data on the entire wait a person seeking treatment can expect. Accordingly, the Institute measures the time between the decision of the specialist that treatment is required and treatment being received as well as the time between general practitioner referral and consultation with a specialist.

Alberta

The Alberta Wait Times Reporting web site defines a wait time as “the time between the decision date (when a patient and specialist decide that a service is required) and the date the procedure or test is performed” and is calculated using “data from people served in the three months prior to the report date” (Alberta Health and Wellness, 2013b). This calculation “excludes people who voluntarily delayed their procedure or test, had a scheduled follow-up, or those who received emergency care” (Alberta Health and Wellness, 2013b). The Fraser Institute reports prospective median waiting times for elective procedures from the specialist’s decision to treat the patient.

There is a substantial difference between the measurement of prospective waiting times (the expected waiting time for the next patient) and retrospective waiting times (the amount of time the patient actually waited for surgery). Notably, the latter measure includes any adjustments in waiting times that were the result of a deterioration in the patient’s condition (other than those that resulted in emergency care) or from adjustments that resulted from other factors (emergency cases using up operating room time, an earlier operating slot becoming available, etc.).

Despite these differences in methodology, it appears that the prospective elective wait times from the Fraser Institute’s waiting list survey are in many cases broadly similar to the retrospective elective waiting times presented on the Alberta Wait Times Reporting web site (see chart 8). While the Institute’s measurements are notably lon-

Chart 8: Comparison of Waiting Times in Alberta, Specialist to Treatment, 2013 (in weeks)

Specialty/Procedure (Alberta Health and Wellness)	AB Health Median Wait Time ¹	Fraser Institute Median Wait ²	Specialty/Procedure (Fraser Institute survey)
Cataract surgery, first eye only	12.0	14.0	Cataract Removal
Interventions on the Eyelid	9.0	3.0	Operations on Eyelids
Tonsillectomy	11.0	12.0	Tonsillectomy and/or Adenoidectomy
Mastectomy: Removal of the Breast	3.0	3.0	Mastectomy
Gall bladder removal	8.0	8.0	Cholecystectomy
Hernia repair	12.0	{ 8.0 10.5	Hernia/Hydrocele (General Surgery) Hernia/Hydrocele (Urology)
Interventions on the Large Intestine	9.0	} 6.0	Intestinal Operations
Interventions on the Small Intestine	8.0		
Varicose Vein (Leg) Surgery	9.0	3.5	Varicose Veins
Hysterectomy	12.0	9.5	Hysterectomy (Vaginal/Abdominal)
Tubal Ligation	10.0	8.0	Tubal Ligation
Interventions on the Brain and Spinal Cord	10.0	10.0	Neurosurgery
Head, Nasal Cavity and Sinuses	11.0	14.5	Operations on Nasal Sinuses
Implantation of pacemaker and other devices—Urgent	1.0	} 0.5	Pacemaker Operations (Urgent)
Implantation of pacemaker and other devices—Semi-Urgent	3.0		
Implantation of pacemaker and other devices—Non-Urgent	5.0	6.0	Pacemaker Operations (Elective)
Referral to First Consult (Radiation Oncologist)	1.9	2.0	Specialist after Referral from a GP
Ready-to-Treat to First Radiation Therapy (Radiation Oncologist)	0.9	3.2	Treatment after Appointment with Specialist
Referral to First Consult (Medical Oncologist)	2.3	2.0	Specialist after Referral from a GP

¹50th percentile wait time (weeks). Measured from time between when a patient and [specialist] decide that a procedure or diagnostic test is required and the date the procedure or test is performed. Wait times are for elective conditions, defined as Urgency III (Non Urgent) by Alberta Health and Wellness (unless specified otherwise). Data are presented for March 2013.

²Prospective Median Wait (weeks) for treatment after appointment with a specialist, the Fraser Institute's national waiting list survey, 2013.

Sources: Alberta Health and Wellness (2013a); and the Fraser Institute's national waiting list survey, 2013.

ger than those reported by Alberta Health and Wellness for “Ready-to-Treat to First Radiation Therapy” and interventions on the “Head, Nasal Cavity and Sinuses,” they are either similar, or shorter in most cases—indicating that the survey may actually be understating the true wait patients face to receive treatment in Alberta.

British Columbia

In British Columbia, the Ministry of Health Services defines waiting time in such a way that its estimates are shorter than those in this survey. Specifically, the ministry defines a wait for adult elective-surgery as the interval beginning “when the operating room booking information for a case is received by the hospital” and ending “ends when either the surgery is performed; or, the case is removed from the wait list for reasons determined by the surgeon and the patient” (British Columbia Ministry of Health, 2013b).⁹ Not only does this definition omit waiting time between GP and specialist (which the Institute’s survey includes in the total), but it also understates the patient’s actual waiting time between seeing a specialist and receiving treatment because it will not include any delays between the decision to treat the patient and the formal booking/recording for that patient.

These differences in methodology suggest that the wait times published on the BC Ministry of Health Services’ web site may be expected to be shorter than those measured by the Fraser Institute. However, in years past, the ministry’s wait times have also been found to be remarkably low when compared to the number of procedures actually completed and the number of patients reported to be waiting for treatment.

Charts 9 and 10 show that the wait times recently presented on the ministry’s website continue to be potentially inaccurate.

For example, the ministry reports a waiting time of 10.0 weeks for orthopaedic surgery for the three months ending March 31, 2013. The web site also shows 17,603 patients waiting for surgery at that time (see charts 9 and 10). In order for the waiting time for the next patient placed on the waiting list to be 10.0 weeks, the province would have to provide about 1,760 procedures per week, more than twice the number of surgeries delivered weekly during the 90 days prior to March 31 (see chart 9).

Either there are fewer people waiting, significantly more surgeries being completed, or the government’s number of a 10.0-week wait for orthopaedic surgery is incorrect. Specialty by specialty, month in and month out, the median wait figures reported by the ministry remain consistently, and surprisingly, lower than expected given the number of patients waiting and the number of procedures that can reason-

9 The Surgical Patient Registry in BC allows health authorities to collect information about the dates that patients have identified as periods of time during which they are unavailable for surgery. These time periods are deducted from the patient’s wait time for surgery (British Columbia Ministry of Health, 2013b).

Chart 9: Number of Patients Waiting for Care in British Columbia in 2013

Specialty/Procedure (BC Ministry of Health)	Patients Waiting ¹	Fraser Institute Estimate	Patients Served in Previous 90 days (proximate period) ²	Procedures per week	Specialty/Procedure (Fraser Institute survey)
Plastic Surgery	4,131	3,561	2,352	181	Plastic Surgery
Breast Reconstruction	581	2,137	254	20	} Mammoplasty
Breast Reduction	1,349		414	32	
Skin Surgery	109	339	72	6	Scar Revision
Skin Tumour Removal	647	—	617	47	Skin Cancers and other Tumors
Gynaecology	6,389	3,418	6,661	512	Gynaecology
D&C and Related Surgery	549	1080	687	53	Dilation & Curettage
Uterine Surgery	2,204	} 784 834	2,384	183	Hysterectomy (Vaginal/Abdominal)
Fallopian Tube/Ovarian Surgery	652				374
Vaginal Repair	556	140	330	25	Vaginal Repair
Laparoscopy	396	181	391	30	Laparoscopic Procedures
Ophthalmology	13,724	17,086	13,833	1,064	Ophthalmology
Cataract Surgery	12,206	14,893	12,113	932	Cataract Removal
Corneal Transplant	362	443	175	13	Cornea Transplant
Lens & Vitreous (non-cataract) Surgery	525	453	729	56	Retina, Choroid, Vitreous
Otolaryngology	5,761	5,342	2,834	218	Otolaryngology
Tympanoplasty	237	250	134	10	Tympanoplasty
Thyroidectomy	368	305	298	23	Thyroid, Parathyroid, and Other Endocrine Glands
Tonsillectomy	660	1,210	315	24	Tonsillectomy and/or Adenoidectomy
Nasal Surgery	1,937	920	835	64	Rhinoplasty and/or Septal Surgery
Sinus Surgery	1,555	2,266	446	34	Operations on Nasal Sinuses
General Surgery	11,404	12,256	10,180	783	General Surgery
Breast Biopsy	180	7	436	34	Breast Biopsy
Hernia Repair—Abdominal	3,938	1,188	2,912	224	} Hernia/Hydrocele
Hernia Repair—Hiatal	163		53	4	

continued on next page ...

Chart 9: Number of Patients Waiting for Care in British Columbia in 2013

Specialty/Procedure (BC Ministry of Health)	Patients Waiting ¹	Fraser Institute Estimate	Patients Served in Previous 90 days (proximate period) ²	Procedures per week	Specialty/Procedure (Fraser Institute survey)
Mastectomy	363	256	945	73	Mastectomy
Cholecystectomy	1,516	974	1,493	115	Cholecystectomy
Varicose Veins Ligation and Stripping	1,708	100	310	24	Varicose Veins
Neurosurgery	1,681	1,106	1,141	88	Neurosurgery
Orthopaedic Surgery	17,603	18,092	9,471	729	Orthopaedic Surgery
Knee Arthroscopy	3,420		2,169	167	Meniscectomy/ Arthroscopy
Foot/Ankle Surgery	294	1,260	111	9	
Knee—ACL Repair	839		449	35	
Hip Replacement	2,188	10,408	1,255	97	Arthroplasty (Hip, Knee, Ankle, Shoulder)
Knee Replacement	4,095		1,833	141	
Thoracic Surgery	379		636	49	} Cardiovascular Surgery
Vascular Surgery	2,087	446	930	72	
Coronary Artery Bypass Graft (Priority 2)	17 ^{3a}	95	148 ^{3b}	11	} Coronary Artery Bypass Graft
Coronary Artery Bypass Graft (Priority 3)	132 ^{3a}		293 ^{3b}	23	
Aortic Aneurysm Repair	61	3	96	7	Aneurysm Surgery ⁴
Endarterectomy	152	17	173	13	Carotid Endarterectomy ⁵
Urology	4,821	6,819	5,641	434	Urology
Prostate Surgery	1,294	} 890 133	1,330	102	Non-Radical Prostatectomy
					Radical Prostatectomy
Radiation Oncology	322 ^{3a}	34	3,091 ^{3c}	238	Radiation Oncology

¹Count as at March 31, 2013.

²Cases completed in 3 months prior to March 31, 2013.

^{3a}Count as at Feb 28, 2013;

^{3b}Cases completed in 3 months prior to Feb 28, 2013;

^{3c}Cases completed in 3 months prior to Dec 31, 2012.

⁴The Fraser Institute measures the number of Aneurysm procedures for which patients are waiting in three surgical areas: General Surgery, Neurosurgery, and Cardiovascular Surgery. The number of procedures for which patients are waiting in Cardiovascular Surgery are presented here. The number of procedures for which patients are waiting in Neurosurgery is 5.

⁵The Fraser Institute measure the number of Carotid Endarterectomy procedures for which people are waiting in two surgical areas: Neurosurgery and Cardiovascular Surgery. The number of procedures for which people are waiting in Cardiovascular Surgery are presented here. The number of procedures for which people are waiting in Neurosurgery is 22.

Sources: British Columbia Ministry of Health (2013a); the Fraser Institute's national waiting list survey, 2013; and calculations by authors.

Chart 10: Comparison of Reported Waiting Times in British Columbia, Specialist to Treatment in 2013 (weeks)

Specialty/Procedure (BC Ministry of Health)	BC Health Median Wait ¹	Implied 2013 Expected Wait ²	Fraser Institute Median Wait ³	Specialty/Procedure (Fraser Institute survey)
Plastic Surgery	5.6	22.8	22.3	Plastic Surgery
Breast Reconstruction	9.0	29.7	30.0	Mammoplasty
Breast Reduction	11.0	42.4		
Skin Surgery	2.4	19.7		
Skin Tumour Removal	3.9	13.6	5.0	Skin Cancers and other Tumors
Gynaecology	4.4	12.5	8.0	Gynaecology
D&C and Related Surgery	4.1	10.4	8.0	Dilation & Curettage
Uterine Surgery	4.3	12.0	8.0	Hysterectomy (Vaginal/Abdominal)
Fallopian Tube/Ovarian Surgery	4.9	14.4		8.0
Vaginal Repair	11.0	21.9	8.0	Tubal Ligation
Laparoscopy	5.0	13.2	8.0	Vaginal Repair
Ophthalmology	5.3	12.9	13.0	Laparoscopic Procedures
Cataract Surgery	5.6	13.1	15.0	Ophthalmology
Cornea Transplant	14.1	26.9	41.0	Cataract Removal
Lens & Vitreous (non-cataract) Surgery	3.0	9.4	2.5	Cornea Transplant
Otolaryngology	9.0	26.4	18.4	Retina, Choroid, Vitreous
Tympanoplasty	11.4	23.0	20.0	Otolaryngology
Thyroidectomy	6.4	16.1	7.5	Tympanoplasty
Tonsillectomy	8.4	27.2	16.0	Thyroid, Parathyroid, and Other Endocrine Glands
Nasal Surgery	12.4	30.2	29.0	Tonsillectomy and/or Adenoidectomy
Sinus Surgery	15.3	45.3	28.0	Rhinoplasty and/or Septal Surgery
General Surgery	4.9	14.6	6.6	Operations on Nasal Sinuses
Breast Biopsy	2.3	5.4	2.0	General Surgery
				Breast Biopsy

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Chart 10: Comparison of Reported Waiting Times in British Columbia, Specialist to Treatment in 2013 (weeks)

Specialty/Procedure (BC Ministry of Health)	BC Health Median Wait ¹	Implied 2013 Expected Wait ²	Fraser Institute Median Wait ³	Specialty/Procedure (Fraser Institute survey)	
Hernia Repair—Abdominal	8.6	17.6	}	Hernia/Hydrocele	
Hernia Repair—Hiatal	7.7	40.0			
Mastectomy	2.1	5.0	2.0	Mastectomy	
Cholecystectomy	5.7	13.2	6.0	Cholecystectomy	
Varicose Vein Ligation and Stripping	16.7	71.6	5.0	Varicose Veins	
Neurosurgery	4.6	19.2	8.3	Neurosurgery	
Orthopaedic Surgery	10.0	24.2	22.5	Orthopaedic Surgery	
Knee Arthroscopy	8.7	20.5	}	Meniscectomy/Arthroscopy	
Foot/Ankle Surgery	8.1	34.4			
Knee—ACL Repair	10.0	24.3			
Hip Replacement Surgery	12.3	22.7	24.0	Arthroplasty (Hip, Knee, Ankle, Shoulder)	
Knee Replacement Surgery	16.7	29.0	24.0		
Thoracic Surgery	2.0	7.7	}	Cardiovascular Surgery	
Vascular Surgery	3.9	29.2			2.0 (U)/ 6.0 (E)
Coronary Artery Bypass Graft (Priority 2)	0.7 ^{4a}	1.5	2.0	Coronary Artery Bypass (Urgent)	
Coronary Artery Bypass Graft (Priority 3)	2.0 ^{4a}	5.9	6.0	Coronary Artery Bypass (Elective)	
Aortic Aneurysm Repair	4.8	8.3	6.0	Aneurysm Surgery	
Endarterectomy	3.0	11.4	6.0	Carotid Endarterectomy	
Urology	3.9	11.1	6.9	Urology	
Prostate Surgery	4.7	12.6	}	10.0	Non-Radical Prostatectomy
				6.0	Radical Prostatectomy
Radiotherapy	1.0 ^{4b}	1.4	2.2	Radiation Oncology	

Note: U = urgent; E = elective.

¹Median wait for 3 months ending March 31, 2013.

²Number of weeks to exhaust the list of patients waiting.

³Prospective median wait, national hospital waiting list survey, 2013.

^{4a}Median wait for 3 months ending Feb 28, 2013.

^{4b}Median wait for 3 months ending Dec 31, 2012.

Sources: British Columbia Ministry of Health (2013a); the Fraser Institute's national waiting list survey, 2013; and calculations by authors.

ably be expected to be performed per week. Chart 9 provides information on the current number of patients waiting for surgery, the Fraser Institute's estimates of the number of procedures for which patients are waiting, and the number of procedures completed in the 90 days preceding March 31, 2013. Chart 10 shows the ministry's published waiting times, the "expected" waiting time for the next patient placed on the waiting list using the number of patients waiting and the number of procedures actually provided weekly, and the Fraser Institute's median waiting time measurements.

For the three months ending March 31, 2013, the government's reported median wait averaged about 37 percent of the "expected" wait, ranging from 12 percent (for skin surgery) to 74 percent (for radiotherapy).¹⁰ The Institute's median wait time data, meanwhile, averages about 68 percent of the "expected" wait.

It should be noted that the BC Ministry of Health Services has, in years past, found its counts of patients waiting for treatment to be highly problematic. For example, some patients had already been treated and not removed from waiting lists (*Waiting Your Turn*, 2010). This suggests that the "expected" wait may be overstating the wait times in British Columbia. However, the number of patients waiting for treatment would have to drop to about half of the current reported level, on average, in order for the ministry's measurements of waiting times to be consistent with the number of patients waiting and procedures being performed. In other words, the true patient experience in British Columbia likely lies somewhere between the "expected" wait estimated above and the wait time reported by the ministry, which is precisely where the wait times and estimates of procedures for which patients are waiting reported by the Fraser Institute generally lie.

Saskatchewan

The Saskatchewan Surgical Care Network (SSCN) wait list web site provides measures of waiting times from the provincial registry for surgeries in most areas of Saskatchewan. The measures presented by Saskatchewan are for non-emergent surgeries and measure the wait from "the date that the health region receives the booking form from the surgeon until the date that the surgery is performed" (SSCN, 2013b). As noted above, this methodology differs significantly from that used by the Fraser Institute.

One difference between the wait times presented here and those available on the SSCN website is that between measuring at the time a new patient is seen by the specialist, and when the booking for the procedure is actually made. A number of systemic delays can occur between the time the patient is seen by a specialist and the time a booking is made. The first is a delay to order, complete, and analyze test results (in particular, imaging scans). Another delay relates to the fact that there may be a wait list to

10 These percentages are calculated from exact calculated "expected" wait times. The "expected wait time" is rounded for inclusion in the table.

Chart 11: Comparison of Waiting Times in Saskatchewan, Specialist to Treatment, 2013 (in weeks)

Specialty/ Procedure	SSCN Median Wait ¹	SSCN Elective Wait ²	Fraser Institute Median
Plastic Surgery	5.6	27.4	85.7
Gynaecology	4.1	14.5	8.7
Ophthalmology	4.9	15.0	11.2
Otolaryngology	7.7	20.9	—
General Surgery	4.0	15.0	15.0
Neurosurgery	8.9	25.0	12.1
Orthopaedic Surgery	8.1	18.2	36.1
Cardiac Surgery	0.6	9.2	1.0 (Urgent) / 4.1 (Elective)
Vascular Surgery	0.9	15.4	
Urology	3.0	12.9	4.6
All Procedures/ Specialties	5.1 ³	16.9 ⁴	14.1

¹Saskatchewan Surgical Care Network (SSCN) non-emergent median wait times are retrospectively measured for procedures performed from May 2013 to July 2013.

²SSCN Elective wait is measured by eliminating the 0-3 weeks time frame in the weighted average measure. SSCN measures non-emergent surgeries, which includes both urgent and elective. In an attempt to eliminate the measure of urgent procedures, the shortest time frame is removed to allow better comparability with the waiting times presented in *Waiting Your Turn*.

Saskatchewan Surgical Care Network data is available as a proportion of patients who received their surgery within certain time frames. The weighted average measure here is based on a weighted measure of the mid-point of each time frame. For example, 22% of patients in Saskatchewan waited less than 3 weeks for Orthopaedic Surgery, 18% waited 4 to 6 weeks, 27% waited 7 weeks to 3 months, 19% waited 4 to 6 months, 11% waited 7 to 12 months, and 4% waited more than 12 months. Removing the percentage of patients treated in the 0-3 week time frame, and taking the midpoints of the remaining time frames to be 5.0, 10.0, 21.7, 41.2, and 56.0 weeks respectively gives an average elective waiting time of 18.2 weeks.

³Including Oral Maxillofacial/Dental and surgeries classified as "Other." The authors were unable to exclude these procedures for the purpose of comparison.

⁴Excluding Oral Maxillofacial/Dental and surgeries classified as "Other." When included, estimated elective wait is 17.1 weeks.

Sources: Saskatchewan Surgical Care Network (2013a) wait list website; the Fraser Institute's national waiting list survey, 2013; and calculations by authors.

make the actual booking. A telephone survey of Saskatchewan physicians conducted by the authors of *Waiting Your Turn* in 2002 revealed that at least some of the physicians did not place their elective patients on the government waiting list until the patients became urgent cases. Thus, waiting times that measure from booking time to actual procedure will not capture the waiting times for testing and any delays in booking that occur. The SSCN website acknowledges this itself by noting that their wait

Chart 12: Comparison of Procedures for which Patients are Waiting in Saskatchewan, 2013

Specialty	SSCN Count*	Fraser Institute Estimate
Plastic Surgery	783	1,804
Gynaecology	2,099	1,205
Ophthalmology	3,014	3,476
Otolaryngology	2,112	—
General Surgery	2,553	7,835
Neurosurgery	592	394
Orthopaedic Surgery	4,447	7,991
Cardiac Surgery	34	} 47
Vascular Surgery	211	
Urology	790	1,080
Total	14,523**	23,829

*Saskatchewan Surgical Care Network (SSCN) Patients waiting count at July 31, 2013.

**Otolaryngology is excluded from the total for the purposes of comparison.

Sources: Saskatchewan Surgical Care Network (2013a) wait list website and the Fraser Institute's national waiting list survey, 2013.

times "...do not include any delays that may occur between the date of the decision to have surgery and the date that the booking form from the surgeon is received by the health region" (SSCN, 2013b).

The crucial difference between the two measures, however, is the inclusion of urgent surgeries. The SSCN website measures waiting times for all non-emergent surgeries (i.e., urgent and elective surgery waits are measured), while *Waiting Your Turn* measures waiting times for only elective surgeries (with the exception of cardiovascular surgery where emergent, urgent, and elective wait times are measured). This means that urgent wait times (which can be significantly shorter than elective wait times) are included in the wait time measures available on the SSCN website, but not in those measured by the Fraser Institute.

The resulting conclusion is that the numbers available on the SSCN website are not directly comparable to those measured in *Waiting Your Turn*.

It is, however, possible to construct a measure from SSCN data that is more comparable with that measured by the Fraser Institute. In addition to the non-emergent median wait time measures published on its web site, SSCN also provides data on the proportion of patients (non-emergent) that were treated in several time frames: 0-3 weeks, 4-6 weeks, 7 weeks to 3 months, 4-6 months, 7-12 months, and more than 12 months. By eliminating the proportion of patients treated in the shortest time frame

(0-3 weeks), and by taking the mid-points of the remaining times to be 5, 10, 21.7, 41.2, and 56 weeks respectively, it is possible to construct a weighted average “elective” wait time measure for Saskatchewan that should be more comparable with the elective wait times measured by the Fraser Institute.¹¹ The calculated SSCN elective wait time measure is shown in chart 11. This comparison suggests that the Fraser Institute’s measures neither necessarily overstate nor necessarily understate the actual patient experience in Saskatchewan. Notably, only in the cases of plastic surgery and orthopaedic surgery are the Institute’s estimates longer than the SSCN elective wait time measure.

With respect to the estimates of procedures for which patients are waiting, the Fraser Institute’s estimates are notably higher than the SSCN’s counts of patients waiting for care for about half of the specialties compared and the overall count (see chart 12). However, much of this disparity may arise from differences in what is being measured: the SSCN’s counts include only patients waiting for procedures done in operating rooms (with the exception of most endoscopy procedures) and do not count patients who will be treated in other locations such as endoscopic rooms, cardiac catheter rooms, and procedure rooms in ambulatory care, while the Fraser Institute’s estimates include counts for all patients treated in hospitals.

Nova Scotia

Nova Scotia’s Department of Health and Wellness provided the Fraser Institute with their data on the median wait time to see a specialist after referral for the period January 1, 2013 to June 30, 2013. This calculation is based on “new consults received during time frame for patients who were deemed to require surgery” (Nova Scotia Department of Health and Wellness, personal communication, September 10, 2013). By comparison, the Fraser Institute reports prospective median waiting times for new patients seeking a “routine office consultation.” Chart 13 presents the data provided by the Nova Scotia Department of Health & Wellness, along with the Fraser Institute’s wait times measurements.

In addition, the department also provided the Fraser Institute with data for the median wait time for treatment after an appointment with a specialist for the period January 1, 2013 to June 30, 2013. This calculation is based on “completed surgeries during time frame, from date surgical request was received by hospital to date of surgery” and includes “only procedures performed in an Operating Room in publicly-funded hospitals” (Nova Scotia Department of Health and Wellness, personal communication, September 10, 2013). The Fraser Institute, meanwhile, reports pro-

11 The authors of this report acknowledge the possibility that some elective procedures may have been performed in the 0-3 week time frame, and that their elimination from the analysis may result in a calculated elective wait that may be larger than the true wait for elective procedures. At the same time, assigning a 56-week wait for patients waiting *any* amount of time more than 12 months may result in a calculated elective wait time that may be smaller than the true wait for elective procedures.

**Chart 13: Comparison of Waiting Times in Nova Scotia—
Wait to See a Specialist after Referral, 2013**

Specialty/Procedure	Median Wait to See a Specialist after Referral (NS Health) ¹	Median Wait to See a Specialist after Referral (Fraser Institute) ²
Plastic Surgery	8.6	12.0
Obstetrics/Gynaecology	5.7	5.0
Ophthalmology	10.4	12.0
Otolaryngology (ENT)	5.9	12.0
General Surgery	4.3	7.5
Neurosurgery	2.7	19.0
Orthopaedic	8.1	20.0
Urology	5.1	12.5
Internal Medicine ³	Urgent: 1.7 Semi-Urgent: 3.2 Non-Urgent: 5.5	} 17.0
Radiation Oncology ³	2.0	5.0
Medical Oncology ³	3.1	5.5

¹Median wait to see a specialist after referral (in weeks) is based on new consultations received during the timeframe for patients who were deemed to require surgery (January 1, 2013 - June 30, 2013).

²Prospective median waiting times for new patients seeking a routine office consultation, National Waiting List Survey, 2013.

³Timeframe: April 1, 2013 - June 30, 2013.

Sources: Nova Scotia Department of Health and Wellness, personal communication, September 10, 2013; and the Fraser Institute's waiting list survey.

spective median waiting times for elective procedures from the specialist's decision to treat the patient. As noted above, these differences in the starting point of measurement can lead to differences in the measured delay. Chart 14 presents the data provided by the Nova Scotia Department of Health & Wellness, along with the Fraser Institute's wait times measurements. Chart 15 compares estimates for the number of procedures for which patients are waiting, while chart 16 compares median wait times for diagnostic technology.

The methodology used to develop the wait time measures provided by the Nova Scotia Department of Health and Wellness differs significantly from that used by the Fraser Institute. Again, the key differences are the inclusion of urgent surgeries ("non-emergent" wait times as compared to the "elective" wait times measured by the Fraser Institute), the focus on surgical patients in the referral to consultation wait time measurement, the starting of the wait time clock for the specialist-to-treatment wait

when the booking request is received at the hospital, and the retrospective measurement of wait times compared to the Fraser Institute's prospective wait times measurement. As discussed above, these differences mean the numbers provided by the Nova Scotia Department of Health and Wellness are likely to be shorter than and not directly comparable to those measured in *Waiting Your Turn*.

Chart 14: Comparison of Waiting Times in Nova Scotia, Specialist to Treatment, 2013 (in weeks)

Specialty/ Procedure (NS Health)	Median Wait Time for Treatment after Appointment with Specialist (NS Health) ¹	Median Wait Time for Treatment after Appointment with Specialist (Fraser Institute) ²	Specialty/ Procedure (Fraser Institute)
Plastic Surgery	1.7	22.0	Plastic Surgery
Mammoplasty/Insertion breast implant	1.3	24.0	Mammoplasty
Blepharoplasty	3.3	25.0	Blepharoplasty
Revision Scar	6.1	25.0	Scar Revision
Obstetrics/Gynaecology	5.9	5.7	Gynaecology
Dilation & Curettage	4.6	5.0	Dilation & Curettage
Tubal Ligation	6.4	5.0	Tubal Ligation
Hysterectomy	6.9	7.0	Hysterectomy (Vaginal/Abdominal)
Vaginoplasty	14.1	7.0	Vaginal Repair
Tuboplasty		12.0	Tuboplasty
Ophthalmology	8.7	23.8	Ophthalmology
Cataract Extraction	9.4	24.0	Cataract Removal
Nasal Lacrimal Duct Probe/ Balloon Dilation	6.4	—	Lacrimal Duct
Repair Strabismus	27.9	48.0	Strabismus
Trabeculectomy/Glaucoma Surgery	1.0	8.0	Glaucoma
Otolaryngology (ENT)	5.1	12.5	Otolaryngology
Myringotomy with tubes	3.6	5.0	Myringotomy
Tympanoplasty (w/wo grafting, canalplasty, ossiculoplasty)	8.1	22.0	Tympanoplasty
Tonsillectomy and Adenoidectomy	6.0	15.5	Tonsillectomy and/or Adenoidectomy

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Chart 14: Comparison of Waiting Times in Nova Scotia, Specialist to Treatment, 2013 (in weeks)

Specialty/ Procedure (NS Health)	Median Wait Time for Treatment after Appointment with Specialist (NS Health) ¹	Median Wait Time for Treatment after Appointment with Specialist (Fraser Institute) ²	Specialty/ Procedure (Fraser Institute)
General Surgery	4.3	6.7	General Surgery
Cholecystectomy-open, Laparoscopic cholecystectomy	4.3	8.0	Cholecystectomy
Mastectomy	2.0	3.3	Mastectomy
Vein ligation/ stripping	13.3	3.5	Varicose Veins
Neurosurgery	1.3	3.1	Neurosurgery
Orthopaedic	13.7	44.3	Orthopaedic Surgery
Arthroplasty Hip, Knee, Ankle, Shoulder	33.0	50	Arthroplasty Hip, Knee, Ankle, Shoulder
Coronary Artery Bypass Graft Without Valves	0.9	{ 4.5 28	Coronary Artery Bypass Graft (Urgent) Coronary Artery Bypass Graft (Elective)
Endarterectomy Carotid	1.9	{ 2.8 17.0	Carotid Endarterectomy (Cardiovascular Urgent) Carotid Endarterectomy (Cardiovascular Elective)
Pacemaker Insertion/ Explor/Removal/W/WO Replacement Lead or Battery	1.4	{ 4.0 — —	Carotid Endarterectomy (Neurosurgery) Pacemaker Operations (Urgent) Pacemaker Operations (Elective)
Urology	2.7	4.2	Urology
Prostatectomy	3.9	— 4.0	Non-radical Prostatectomy Radical Prostatectomy
Cystectomy	4.4	—	Radical Cystectomy
Cystoscopy	1.7	4.0	Cystoscopy

¹Median wait time for treatment after appointment with specialist (in weeks) is based on completed surgeries during the time frame, from the date of the surgical request received by the hospital to the date of surgery. Includes only procedures performed in an operating room in publicly funded hospitals (January 1, 2013 - June 30, 2013.)

²Prospective median wait (in weeks) for treatment after appointment with a specialist, National Waiting List Survey, 2013. Sources: Nova Scotia Department of Health and Wellness, personal communication, September 10, 2013; and the Fraser Institute's waiting list survey.

Chart 15: Comparison of Patients Waiting/Procedures for which Patients are Waiting in Nova Scotia, 2013

Specialty/Procedure (NS Health)	Number Waiting as of June 30, 2013 ¹	Number of Procedures for which Patients are Waiting (Fraser Institute) ²	Specialty/ Procedure (Fraser Institute)
Plastic Surgery	462	556	Plastic Surgery
Mammoplasty/Insertion breast implant	<6	146	Mammoplasty
Blepharoplasty	<6	6	Blepharoplasty
Revision Scar	<6	222	Scar Revision
Obstetrics/Gynaecology	1,427	685	Gynaecology
Dilation & Curettage	27	143	Dilation & Curettage
Tubal Ligation	160	104	Tubal Ligation
Hysterectomy	339	209	Hysterectomy (Vaginal/Abdominal)
Vaginoplasty	20	78	Vaginal Repair
Tuboplasty	<6	3	Tuboplasty
Ophthalmology	4,587	8,223	Ophthalmology
Cataract Extraction	3,722	5,800	Cataract Removal
Nasal Lacrimal Druct Probe/ Balloon Dilation	15	—	Lacrimal Duct
Repair Strabismus	231	373	Strabismus
Trabeculectomy/ Glaucoma Surgery	51	—	Glaucoma
Otolaryngology (ENT)	1,381	1,091	Otolaryngology
Myringotomy with tubes	179	145	Myringotomy
Tympanoplasty (w/wo grafting, canalplasty, ossiculoplasty)	67	167	Tympanoplasty
Tonsillectomy and Adenoidectomy	89	354	Tonsillectomy and/or Adenoidectomy
General Surgery	3,782	3,242	General Surgery
Cholecystectomy-open, Laparoscopic cholecystectomy	<6	455	Cholecystectomy
Mastectomy	30	77	Mastectomy
Vein ligation/ stripping	28	15	Varicose Veins
Neurosurgery	74	68	Neurosurgery

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Chart 15: Comparison of Patients Waiting/Procedures for which Patients are Waiting in Nova Scotia, 2013

Specialty/Procedure (NS Health)	Number Waiting as of June 30, 2013 ¹	Number of Procedures for which Patients are Waiting (Fraser Institute) ²	Specialty/Procedure (Fraser Institute)
Orthopaedic	7,203	7,639	Orthopaedic Surgery
Arthroplasty Hip, Knee, Ankle, Shoulder	3,198	4,648	Arthroplasty Hip, Knee, Ankle, Shoulder
Coronary Artery Bypass Graft Without Valves	14	55	Coronary Artery Bypass Graft
Endarterectomy Carotid	19	4	Carotid Endarterectomy (Cardiovascular Surgery)
		3	Carotid Endarterectomy (Neurosurgery)
Pacemaker Insertion/ Explor/Removal/w/wo Replacement Lead or Battery	35	—	Pacemaker Operations
Urology	1,277	946	Urology
Prostatectomy	21	—	Non-radical Prostatectomy
		21	Radical Prostatectomy
Cystectomy	<6	—	Radical Cystectomy
Cystoscopy	488	644	Cystoscopy

¹Includes only procedures performed in an operating room in publicly funded hospitals. Number waiting includes only cases that have been assigned a surgical priority (January 1, 2013 - June 30, 2013).

Sources: Nova Scotia Department of Health and Wellness, personal communication, September 10, 2013; and the Fraser Institute's waiting list survey.

Chart 16: Comparison of Waiting Times in Nova Scotia, Diagnostic Technology, 2013 (in weeks)

Diagnostic Technology	Median Wait Time (NS Health) ¹	Median Wait Time (Fraser Institute) ²
CT-Scan	2.6	4.0
MRI	7.0	10.0
Ultrasound	4.1	5.0

¹Based on completed tests during time frame, from request received by hospital to date of exam (April 1, 2013 - June 30, 2013).

²Prospective median waiting times for new patients, National Waiting List Survey, 2013.

Sources: Nova Scotia Department of Health and Wellness, personal communication, September 10, 2013; and the Fraser Institute's waiting list survey.

Verification and comparison of earlier data with independent sources

The waiting list data can also be verified by comparison with independently computed estimates, primarily found in academic journals. There exist 95 independent waiting time estimates that can be compared with recent Fraser Institute figures. In 59 of the 95 cases, the Institute figures lie below the comparison values. In only 31 instances does the Institute value exceed the comparison value, and in five cases they are identical. This evidence strongly suggests that the Institute's measurements are not biased upward, but, if anything, may be biased downward, understating actual waiting times. (For further explanation, see *Waiting Your Turn* 2009).

Pan-Canadian benchmarks

Canada's provincial, territorial, and federal governments agreed to a set of common benchmarks for medically necessary treatment on December 12, 2005 (Ontario Ministry of Health and Long Term Care, 2005). Chart 17 compares those benchmarks for which a similar comparator exists in *Waiting Your Turn*. Two observations arise from this comparison. First, Canada's physicians tend to have a lower threshold for reason-

Chart 17: Pan-Canadian Benchmark Wait Times and Waiting Your Turn 2013

Procedure	Pan-Canadian Benchmark Wait Time	National Median Wait Time ¹ (Range of Provincial Median Wait Times) in weeks	National Median Reasonable Wait Time ¹ (Range of Provincial Reasonable Median Wait Times) in weeks
Radiation Therapy	within 4 weeks of patients being ready to treat	2.0 (0.5-5.2)	2.5 (2.0-4.6)
Hip Replacements	within 26 weeks	23.3 (14.0-52.0)	12.9 (12.0-21.0)
Knee Replacements	within 26 weeks	23.3 (14.0-52.0)	12.9 (12.0-21.0)
Cataract Surgery	within 16 weeks for patients who are at high risk	11.3 (7.5-58.0)	10.8 (8.0-16.0)
Cardiac Bypass Surgery	Level I within 2 weeks/Level II within 6 weeks/Level III within 26 weeks	Emergent: 0.3 (0.0-0.5)/Urgent: 1.1 (0.0-4.5)/Elective: 5.0 (3.0-28.0)	Emergent: 0.3 (0.0-0.5)/Urgent: 0.9 (0.0-2.0)/Elective: 4.7 (3.0-6.0)

¹These wait times were produced for individual procedures using the same methodology used to produce national median wait times for medical specialties described above under "Methodology."

Sources: Ontario Ministry of Health and Long Term Care, 2005 and the Fraser Institute's National Waiting List Survey.

able wait times than do Canada's provincial, territorial, and federal governments. Second, median wait times in many provinces are already within the benchmarks set by governments in Canada, which means that according to these benchmarks, more than 50 percent of patients in these provinces are already being treated in a time frame that provincial governments consider "reasonable."¹²

12 Note that although the median wait time is less than the benchmark wait time, this does not mean that provinces have already met their targets. The pan-Canadian benchmark wait times apply to all patient cases, while the median wait time is the time by which 50 percent of patients have been treated and 50 percent of patients are still waiting for treatment.

Conclusion

The 2013 *Waiting Your Turn* survey indicates that waiting times for elective medical treatment across the provinces have risen from those in 2012, and that they remain at a very high level historically. Even if one debates the reliability of waiting-list data, this survey reveals that wait times in Canada are longer than what physicians consider to be clinically reasonable.

From an economic standpoint, a study by Stokes and Somerville (2008) found that the cumulative total lost economic output that represents the cost of waiting longer than medically recommended for treatment for total joint replacement surgery, cataract surgery, coronary artery bypass graft surgery, and MRI scans in 2007 was an estimated \$14.8 billion. More recently, Esmail (2013) estimated the cost of waiting per patient in Canada to be approximately \$1,129 in 2012 if only hours during the normal working week were considered “lost,” and as much as \$3,447 if all hours of the week (excluding 8 hours of sleep per night) were considered “lost.”

Further, there is a significant body of medical literature identifying adverse consequences from prolonged waiting (see *Waiting Your Turn 2009*; Day, 2013).

This year’s survey of specialists also found that an estimated 0.9 percent of patients received elective treatment in another country during 2012/13. Physicians also report that only about 11.1 percent of their patients are on a waiting list because they requested a delay or postponement, and that 48.2 percent would agree to have their procedure performed within a week¹³ if an opening arose.

Thus, despite provincial wait time strategies and high levels of health expenditure, it is clear that patients in Canada are waiting too long to receive treatment.

13 The survey asks physicians what percentage of their patients currently waiting for treatment would agree to begin treatment tomorrow if an opening were to arise. However, comments by respondents of previous surveys indicate that at least some respondents answer the question as if it were “a few days.”

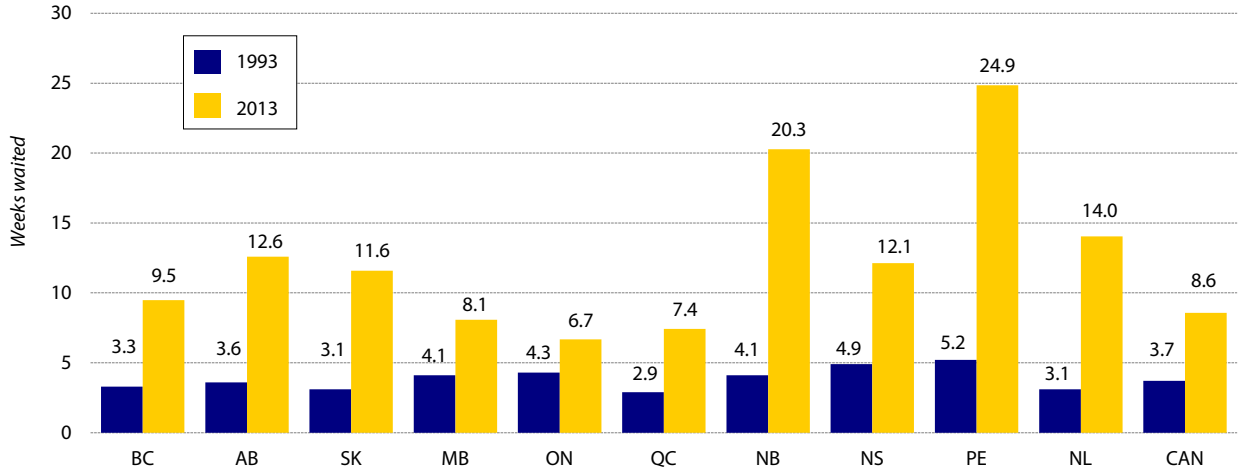
Selected graphs

Graphs 1–6: Median Actual Waiting Times, 1993 and 2013

Graphs 7–8: Median Reasonable Waiting Times, 1994 and 2013

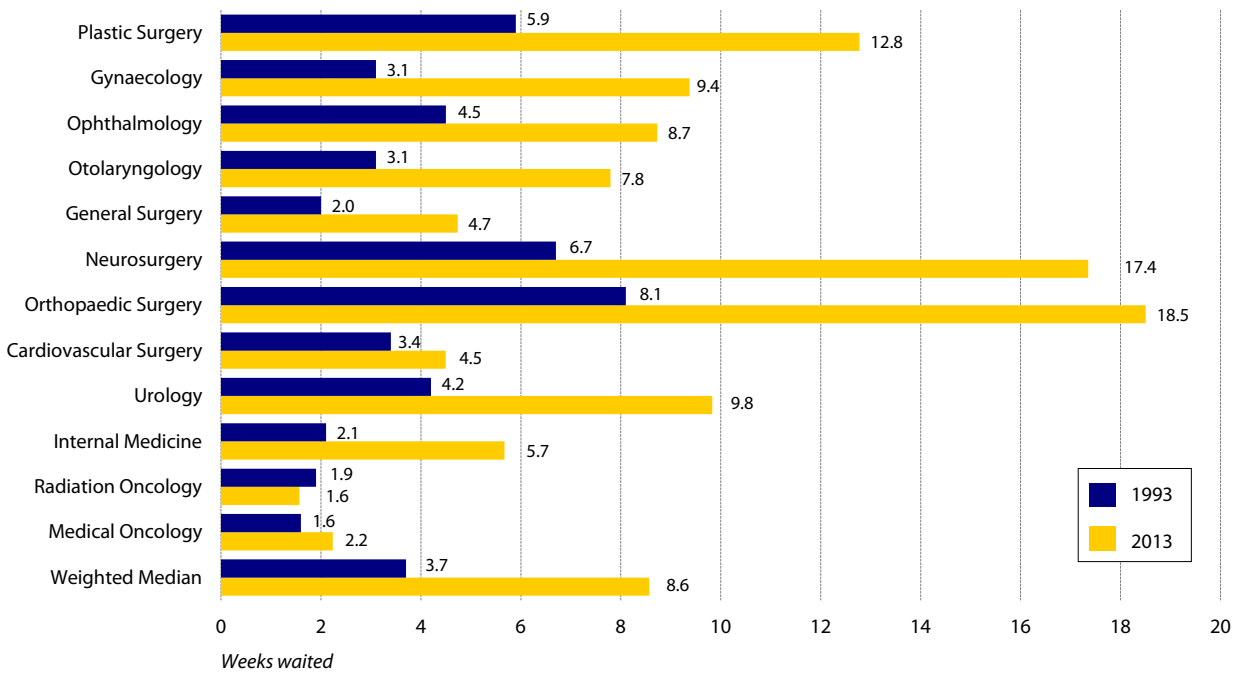
Graphs 9–19: Actual versus Reasonable Waiting Times, 1994
through 2013, by Province

Graph 1: Median Wait Between Referral by GP and Appointment with Specialist, by Province, 1993 and 2013



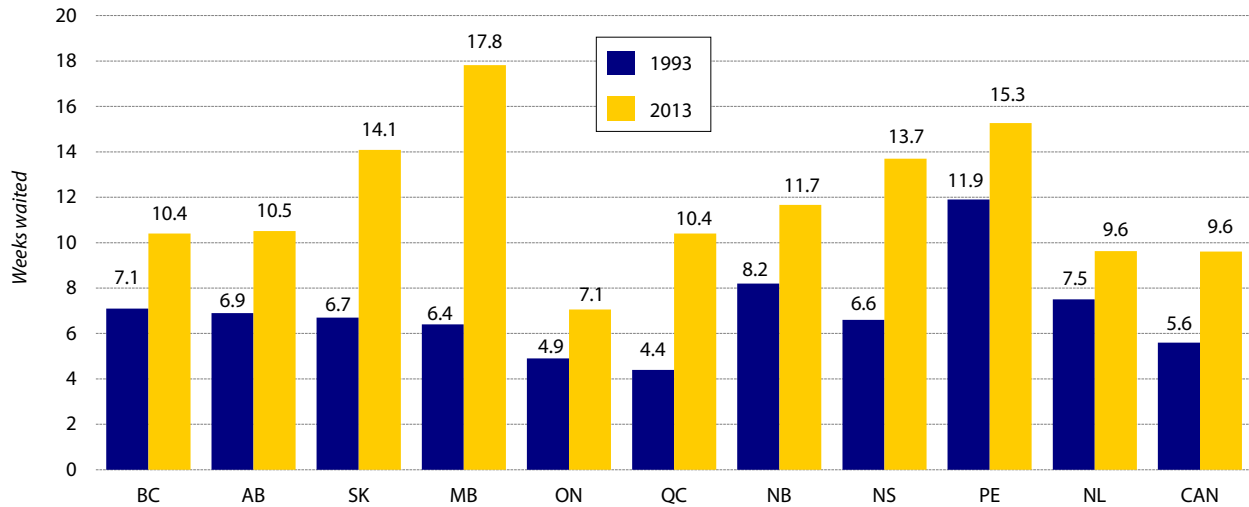
Source: The Fraser Institute's national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 2: Median Wait between Referral by GP and Appointment with Specialist, by Specialty, 1993 and 2013



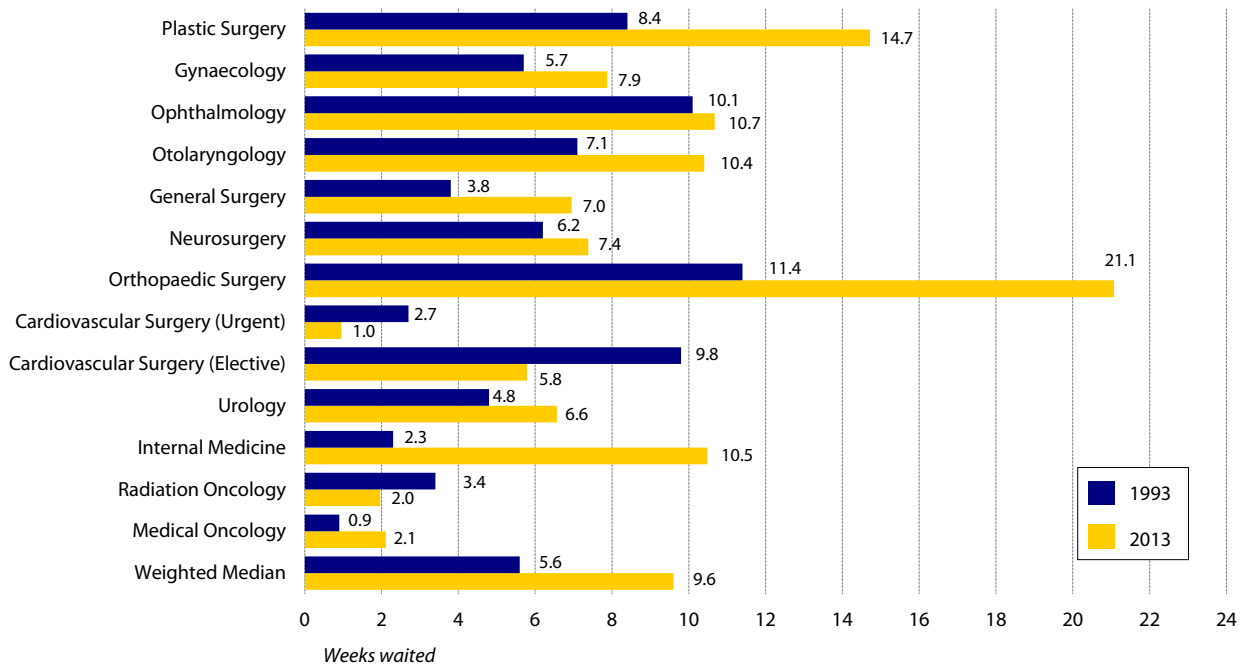
Source: The Fraser Institute's national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 3: Median Wait between Appointment with Specialist and Treatment, by Province, 1993 and 2013



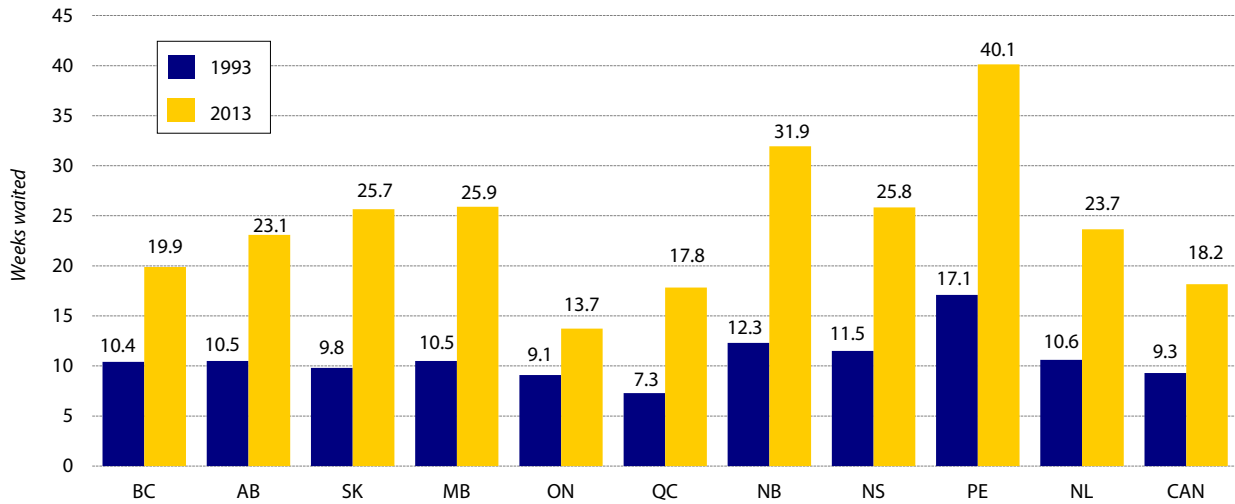
Source: The Fraser Institute’s national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 4: Median Wait between Appointment with Specialist and Treatment, by Specialty, 1993 and 2013



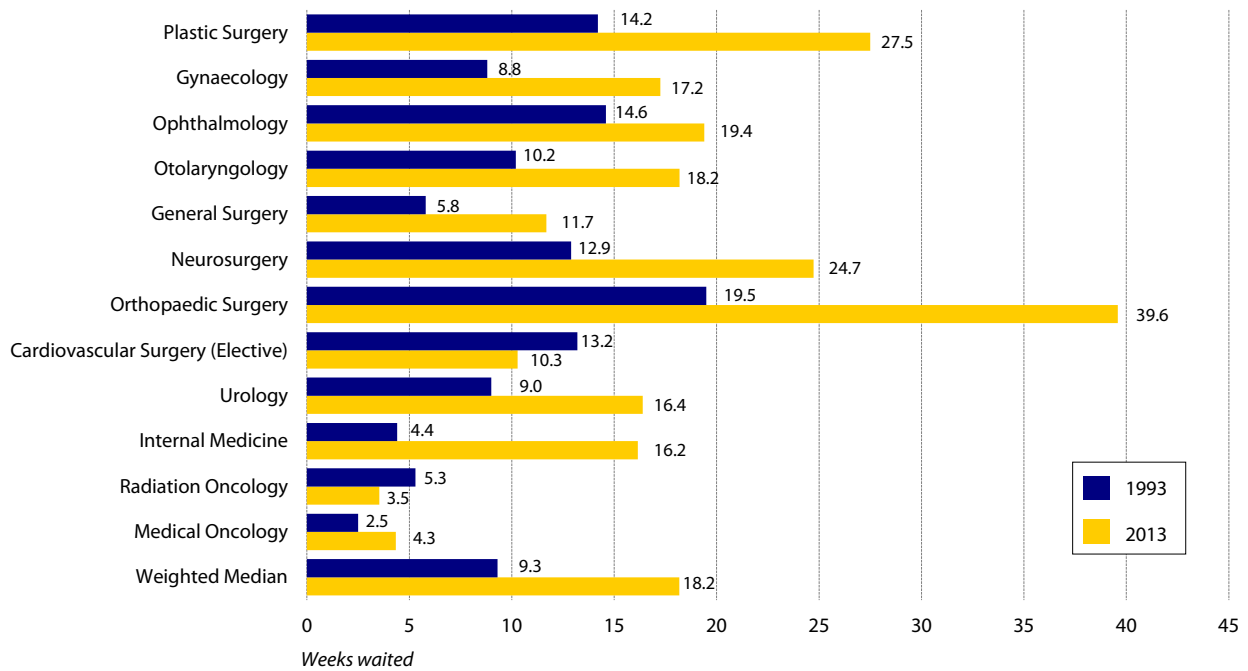
Source: The Fraser Institute’s national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 5: Median Wait between Referral by GP and Treatment, by Province, 1993 and 2013



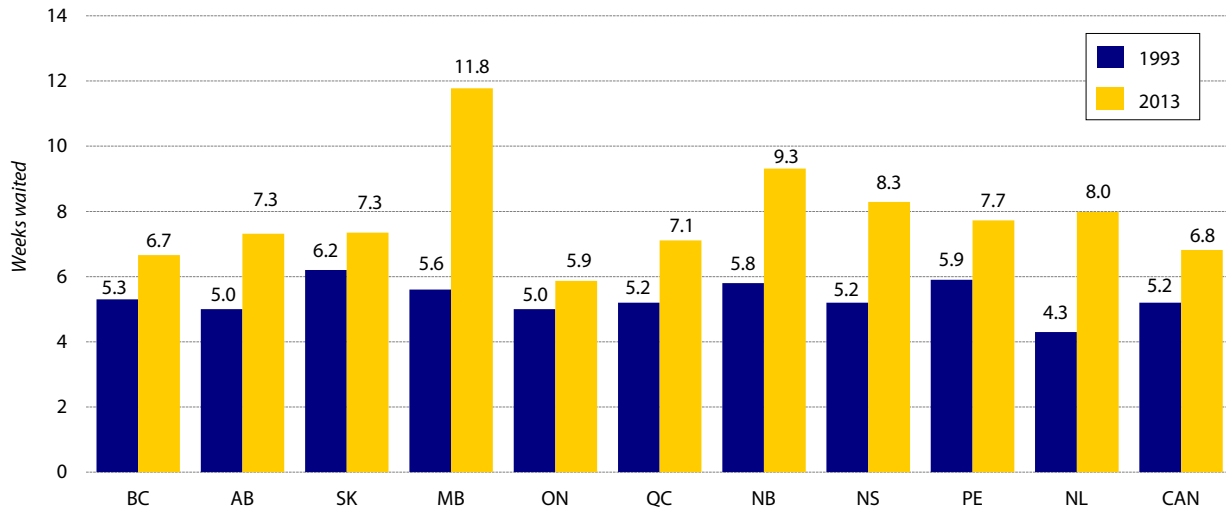
Source: The Fraser Institute’s national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 6: Median Wait between Referral by GP and Treatment, by Specialty, 1993 and 2013



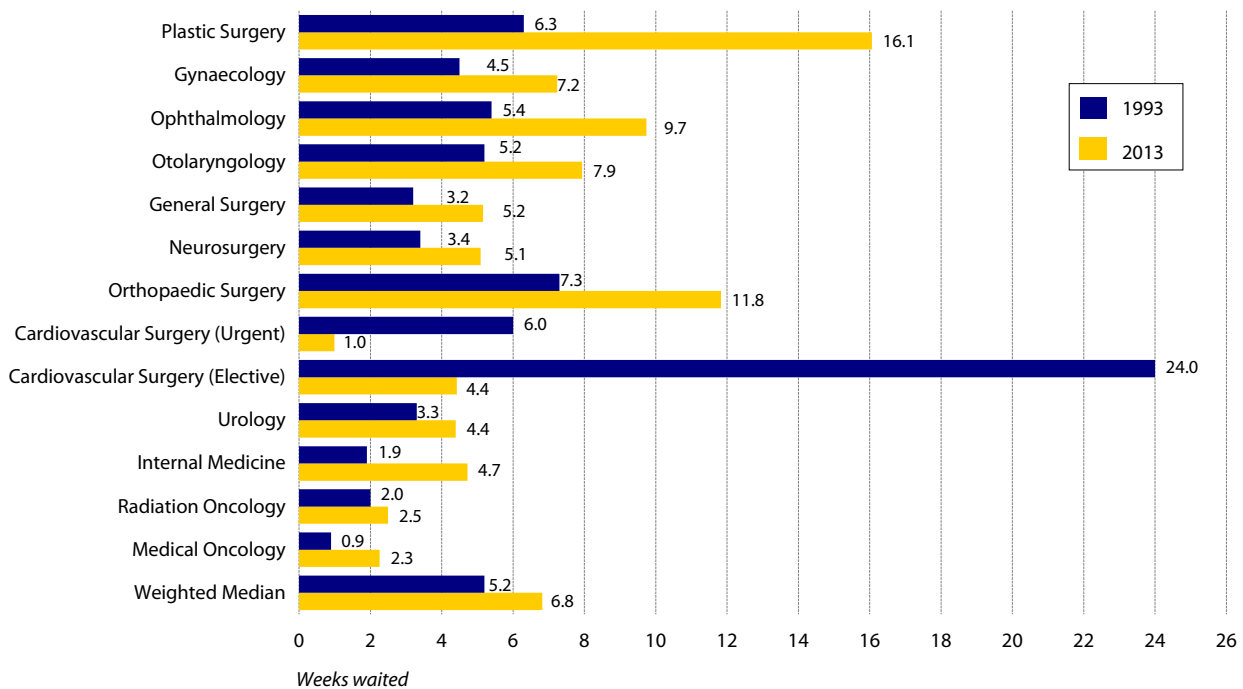
Source: The Fraser Institute’s national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 7: Median Reasonable Wait between Appointment with Specialist and Treatment, by Province, 1994 and 2013



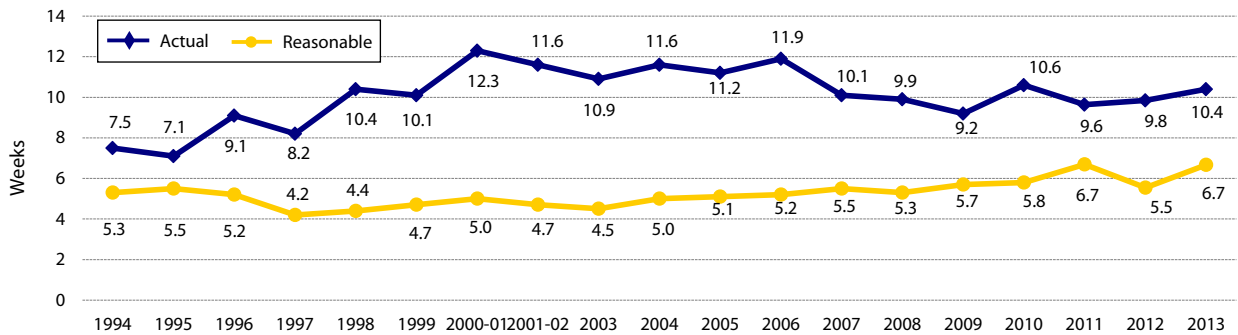
Source: The Fraser Institute’s national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 8: Median Reasonable Wait between Appointment with Specialist and Treatment, by Specialty, 1994 and 2013



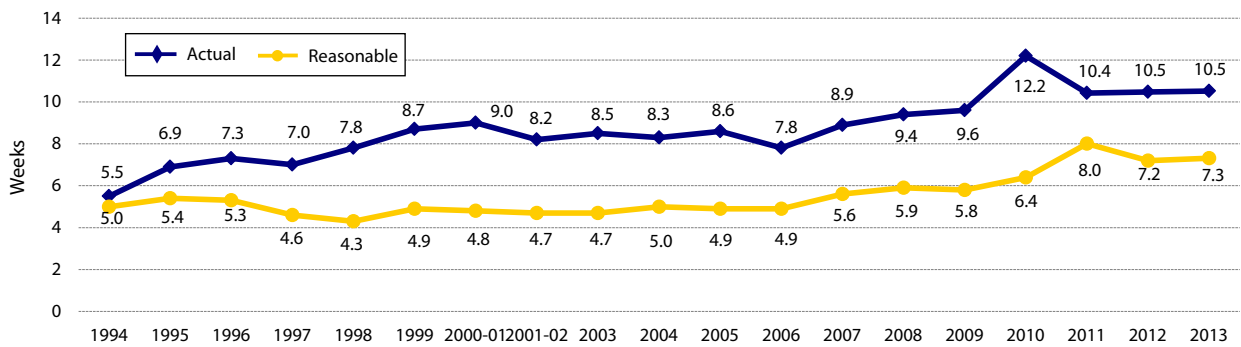
Source: The Fraser Institute’s national waiting list survey, 2013; and *Waiting Your Turn*, 1997.

Graph 9: British Columbia—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



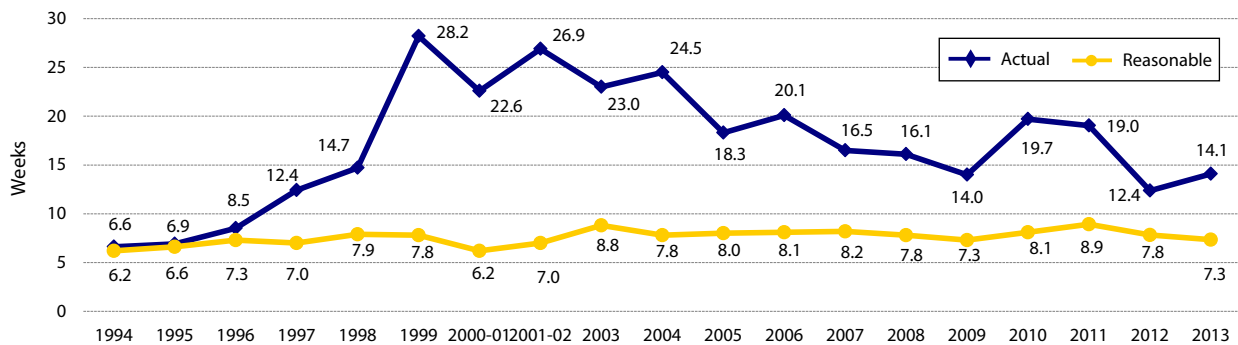
Source: The Fraser Institute’s national waiting list surveys, 1995-2013.

Graph 10: Alberta—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



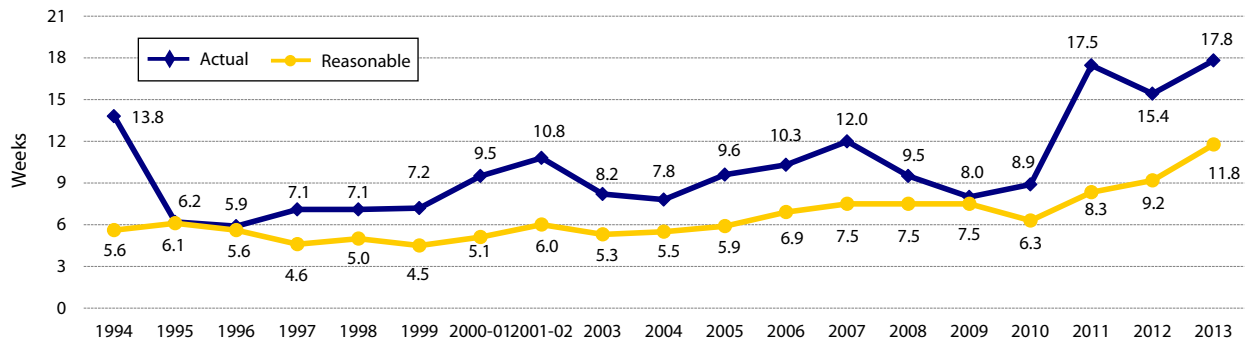
Source: The Fraser Institute’s national waiting list surveys, 1995-2013.

Graph 11: Saskatchewan—Actual Versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



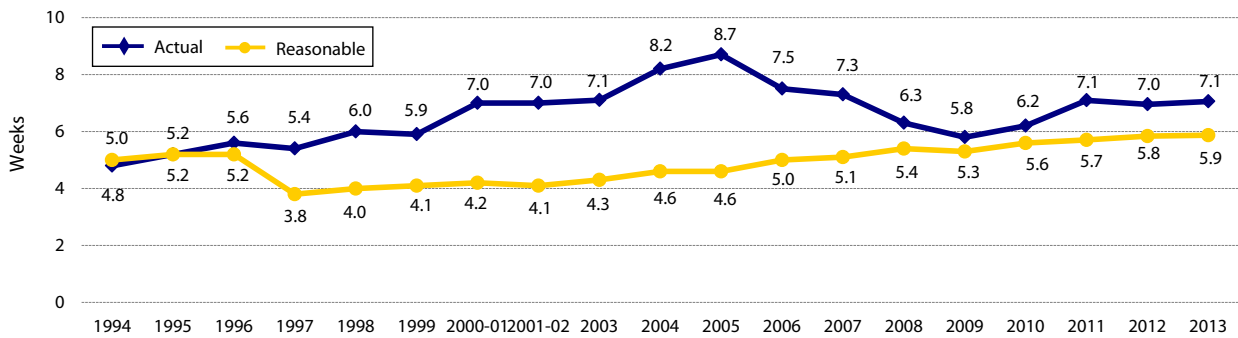
Source: The Fraser Institute’s national waiting list surveys, 1995-2013.

Graph 12: Manitoba—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



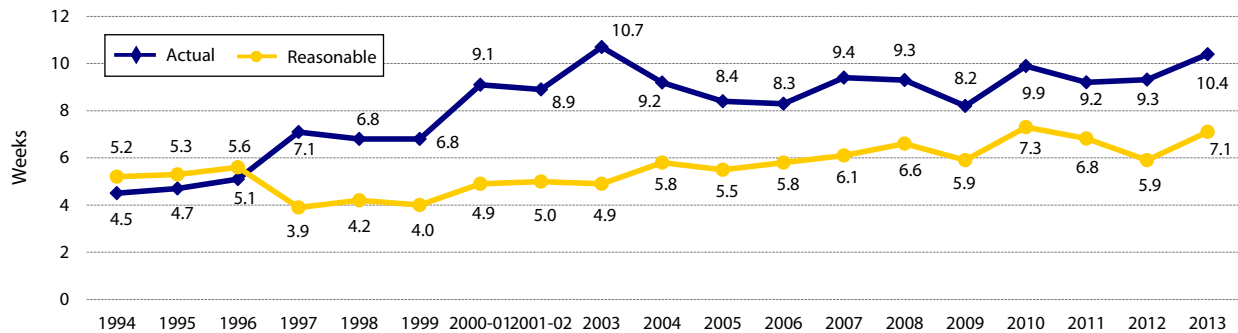
Source: The Fraser Institute's national waiting list surveys, 1995-2013.

Graph 13: Ontario—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



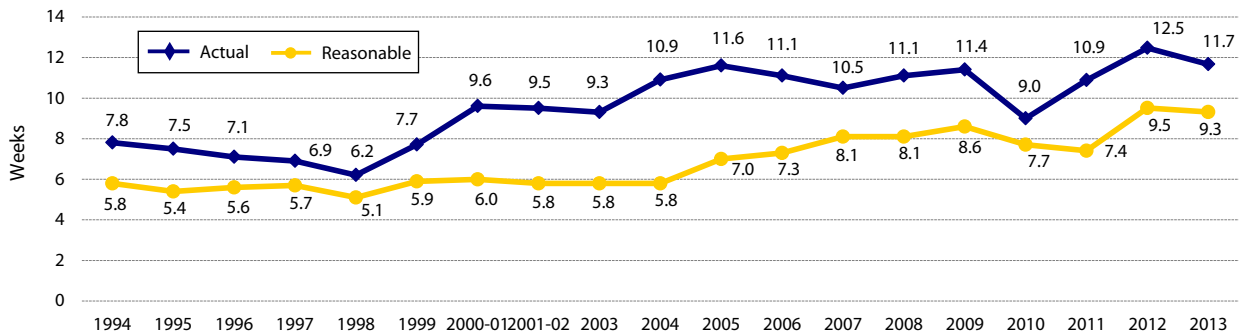
Source: The Fraser Institute's national waiting list surveys, 1995-2013.

Graph 14: Quebec—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



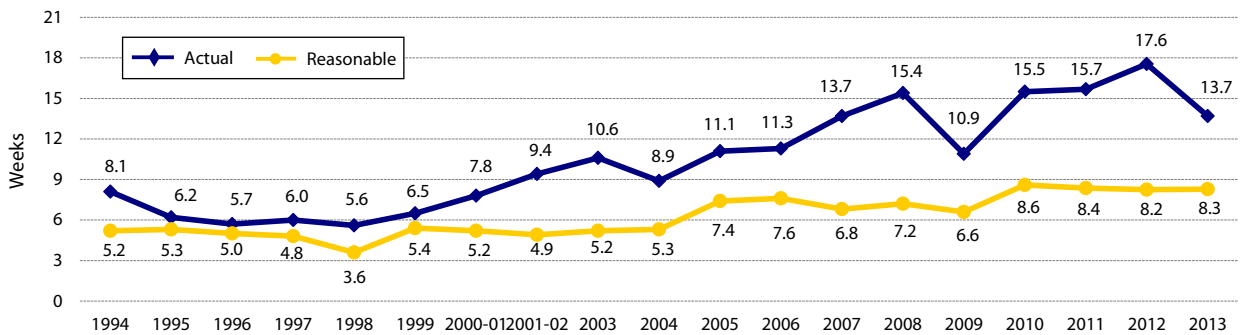
Source: The Fraser Institute's national waiting list surveys, 1995-2013.

Graph 15: New Brunswick—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



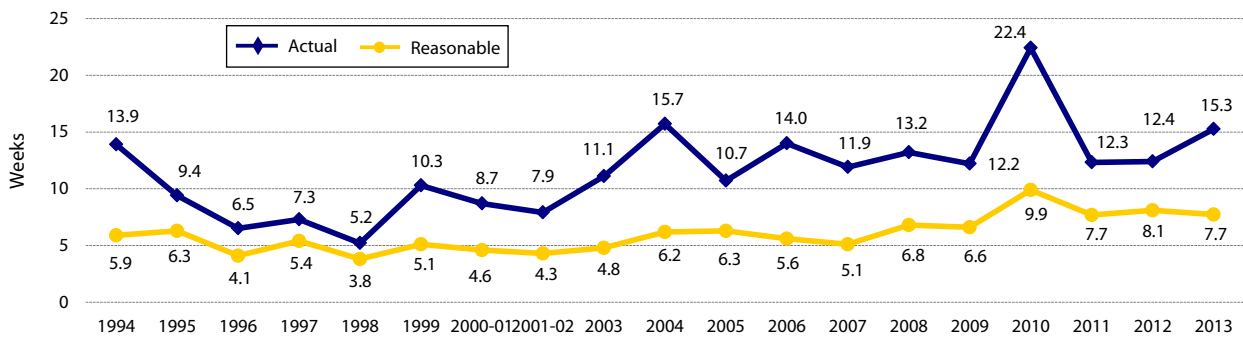
Source: The Fraser Institute's national waiting list surveys, 1995-2013.

Graph 16: Nova Scotia—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



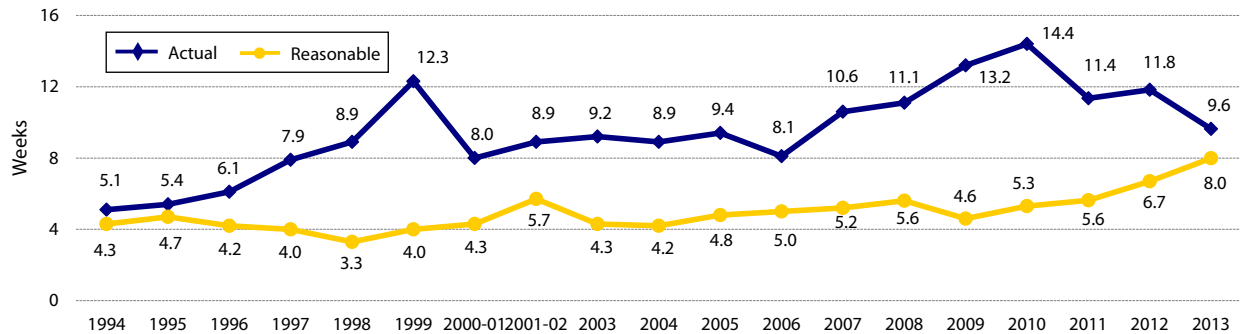
Source: The Fraser Institute's national waiting list surveys, 1995-2013.

Graph 17: Prince Edward Island—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



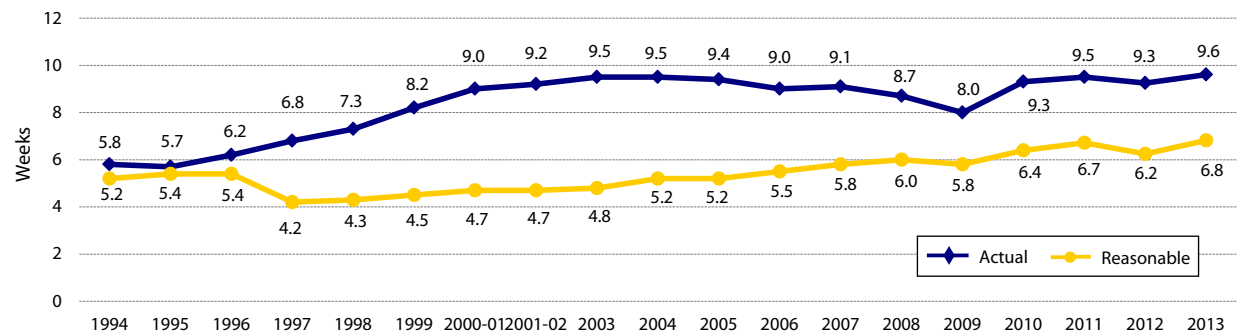
Source: The Fraser Institute's national waiting list surveys, 1995-2013.

Graph 18: Newfoundland & Labrador—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



Source: The Fraser Institute’s national waiting list surveys, 1995-2013.

Graph 19: Canada—Actual versus Reasonable Waits Between Appointment with Specialist and Treatment, 1994 through 2013



Source: The Fraser Institute’s national waiting list surveys, 1995-2013.

Selected data tables

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Table 2: Median Total Expected Waiting Time from Referral by GP to Treatment, by Province and Specialty

Table 3: Median Patient Wait to See a Specialist after Referral from a GP, by Province and Specialty

Table 4: Median Patient Wait for Treatment after Appointment with Specialist, by Province and Specialty (Summary)

Tables 5a–5l: Median Patient Wait for Treatment after Appointment with Specialist, by Specialty

Table 6: Comparison of Median Weeks Waited to Receive Treatment after Appointment with Specialist, by Selected Specialties, 2013 and 2012

Table 7: Frequency Distribution of Survey Waiting Times (Specialist to Treatment) by Province

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Tables 9a–9l: Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks), by Specialty

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Table 16a: Acute Inpatient Procedures, 2011-12

Table 16b: Same Day Procedures, 2011-12

**Table 1a: Summary of Responses, 2013
Response Rates (Percentages)**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	39%	43%	25%	44%	25%	8%	20%	27%	0%	17%	25%
Gynaecology	39%	36%	43%	23%	21%	14%	26%	21%	88%	33%	24%
Ophthalmology	29%	46%	45%	42%	31%	19%	47%	20%	33%	42%	29%
Otolaryngology	32%	51%	38%	18%	31%	12%	29%	22%	50%	10%	26%
General Surgery	30%	35%	29%	16%	16%	14%	34%	25%	13%	42%	20%
Neurosurgery	43%	23%	36%	0%	16%	34%	0%	13%	—	33%	26%
Orthopaedic Surgery	23%	22%	36%	25%	27%	18%	48%	24%	100%	25%	24%
Cardiovascular Surgery	29%	21%	36%	33%	26%	14%	38%	11%	0%	0%	23%
Urology	27%	29%	8%	19%	21%	18%	31%	20%	100%	50%	22%
Internal Medicine	23%	20%	33%	13%	12%	15%	18%	15%	25%	25%	16%
Radiation Oncology	5%	11%	13%	9%	15%	16%	50%	17%	0%	86%	15%
Medical Oncology	7%	10%	0%	0%	13%	9%	75%	23%	100%	29%	12%
Total	27%	29%	34%	20%	20%	15%	33%	20%	49%	33%	21%

**Table 1b: Summary of Responses, 2013
Number of Responses**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	20	15	2	4	39	8	3	3	0	1	95
Gynaecology	63	46	19	14	135	53	9	10	7	8	364
Ophthalmology	37	40	9	8	114	49	8	7	1	5	278
Otolaryngology	22	19	3	3	66	21	4	5	1	1	145
General Surgery	43	45	12	8	87	60	12	10	1	11	289
Neurosurgery	13	9	4	0	13	25	0	1	—	1	66
Orthopaedic Surgery	38	26	10	9	121	50	12	9	5	4	284
Cardiovascular Surgery	13	7	5	5	34	13	3	2	0	0	82
Urology	17	13	1	3	46	25	4	2	2	3	116
Internal Medicine	52	42	17	10	120	64	5	7	2	5	324
Radiation Oncology	3	5	1	1	26	17	3	2	0	6	64
Medical Oncology	5	4	0	0	22	13	3	3	1	2	53
Total	326	271	83	65	823	398	66	61	20	47	2,160

**Table 1c: Summary of Responses, 2013
Number of Questionnaires Mailed Out**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	51	35	8	9	154	96	15	11	1	6	386
Gynaecology	161	129	44	60	639	385	34	48	8	24	1,532
Ophthalmology	129	87	20	19	364	260	17	35	3	12	946
Otolaryngology	68	37	8	17	212	176	14	23	2	10	567
General Surgery	141	128	41	51	561	427	35	40	8	26	1,458
Neurosurgery	30	40	11	8	81	73	4	8	—	3	258
Orthopaedic Surgery	167	117	28	36	452	282	25	37	5	16	1,165
Cardiovascular Surgery	45	34	14	15	131	93	8	18	1	4	363
Urology	64	45	13	16	217	142	13	10	2	6	528
Internal Medicine	225	209	51	78	977	421	28	48	8	20	2,065
Radiation Oncology	61	46	8	11	177	105	6	12	2	7	435
Medical Oncology	71	41	1	8	166	140	4	13	1	7	452
Total	1,213	948	247	328	4,131	2,600	203	303	41	141	10,155

**Table 2: Median Total Expected Waiting Time from Referral by GP to Treatment, by Specialty, 2013
(in Weeks)**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	42.3	50.6	131.7	5.0	15.8	16.3	37.2	34.0	—	34.3	27.5
Gynaecology	18.0	27.2	13.2	15.5	13.7	15.7	31.7	10.7	—	21.3	17.2
Ophthalmology	25.0	20.8	21.2	52.6	14.4	15.7	38.6	35.8	62.0	42.9	19.4
Otolaryngology	24.9	18.4	—	14.3	17.9	16.5	12.3	24.5	49.9	12.0	18.2
General Surgery	11.6	13.8	17.5	27.8	8.8	11.7	17.6	14.2	19.0	9.1	11.7
Neurosurgery	28.3	24.0	19.3	—	29.7	13.1	—	22.1	—	54.9	24.7
Orthopaedic Surgery	46.5	56.3	44.1	31.6	34.9	26.6	75.5	64.3	40.6	54.5	39.6
Cardiovascular Surgery (Elective)	11.0	12.0	6.1	—	6.0	12.4	13.6	42.5	—	—	10.3
Urology	14.9	12.2	56.6	18.2	10.4	23.1	24.5	16.7	45.3	34.1	16.4
Internal Medicine	11.5	14.2	12.8	10.6	8.6	30.3	14.2	23.1	43.0	—	16.2
Radiation Oncology	3.7	5.2	3.6	2.8	2.3	4.6	2.0	10.2	—	4.0	3.5
Medical Oncology	5.8	5.3	—	—	3.8	4.0	3.5	10.6	6.0	5.5	4.3
Weighted Median	19.9	23.1	25.7	25.9	13.7	17.8	31.9	25.8	40.1	23.7	18.2

* Totals may not equal the sum of subtotals due to rounding

Table 3: Median Patient Wait to See a Specialist after Referral from a GP, by Specialty, 2013 (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	20	23	46	2	8	8	16	12	—	24	12.8
Gynaecology	10.0	19.0	4.5	8.0	6.0	8.0	22.0	5.0	52.0	12.0	9.4
Ophthalmology	12.0	7.5	10.0	8.0	6.0	8.0	30.5	12.0	28.0	36.0	8.7
Otolaryngology	6.5	8.0	5.0	6.0	8.0	8.0	5.0	12.0	40.0	6.0	7.8
General Surgery	5.0	6.0	2.5	12.5	4.0	4.0	10.0	7.5	12.0	2.0	4.7
Neurosurgery	20.0	14.0	7.3	—	22.0	8.0	—	19.0	—	52.0	17.4
Orthopaedic Surgery	24.0	40.0	8.0	8.5	16.0	8.0	47.0	20.0	18.0	23.0	18.5
Cardiovascular Surgery	5.0	6.0	2.0	4.0	2.8	4.5	7.5	16.0	—	—	4.5
Urology	8.0	7.0	52.0	9.0	6.0	12.0	12.0	12.5	28.5	24.0	9.8
Internal Medicine	3.0	4.0	4.5	2.0	4.0	9.0	5.5	17.0	32.0	8.0	5.7
Radiation Oncology	1.5	2.0	1.5	1.0	1.0	2.0	1.5	5.0	—	2.0	1.6
Medical Oncology	3.5	2.0	—	—	2.0	2.0	1.5	5.5	3.0	3.8	2.2
Weighted Median	9.5	12.6	11.6	8.1	6.7	7.4	20.3	12.1	24.9	14.0	8.6

Table 4: Median Patient Wait for Treatment after Appointment with Specialist, by Specialty, 2013 (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	22.3	27.6	85.7	3.0	7.8	8.3	21.2	22.0	—	10.3	14.7
Gynaecology	8.0	8.2	8.7	7.5	7.7	7.7	9.7	5.7	—	9.3	7.9
Ophthalmology	13.0	13.3	11.2	44.6	8.4	7.7	8.1	23.8	34.0	6.9	10.7
Otolaryngology	18.4	10.4		8.3	9.9	8.5	7.3	12.5	9.9	6.0	10.4
General Surgery	6.6	7.8	15.0	15.3	4.8	7.7	7.6	6.7	7.0	7.1	7.0
Neurosurgery	8.3	10.0	12.1	—	7.7	5.1	—	3.1	—	2.9	7.4
Orthopaedic Surgery	22.5	16.3	36.1	23.1	18.9	18.6	28.5	44.3	22.6	31.5	21.1
Cardiovascular Surgery (Urgent)	2.0	0.5	1.0	—	0.9	0.5	0.9	4.3	—	—	1.0
Cardiovascular Surgery (Elective)	6.0	6.0	4.1	—	3.3	7.9	6.1	26.5	—	—	5.8
Urology	6.9	5.2	4.6	9.2	4.4	11.1	12.5	4.2	16.8	10.1	6.6
Internal Medicine	8.5	10.2	8.3	8.6	4.6	21.3	8.7	6.1	11.0		10.5
Radiation Oncology	2.2	3.2	2.1	1.8	1.3	2.6	0.5	5.2	—	2.0	2.0
Medical Oncology	2.3	3.3	—	—	1.8	2.0	2.0	5.1	3.0	1.7	2.1
Weighted Median	10.4	10.5	14.1	17.8	7.1	10.4	11.7	13.7	15.3	9.6	9.6

Table 5a: Plastic Surgery, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Mammoplasty	30.0	40.0	104.0	3.0	9.0	8.0	24.0	24.0	—	—
Neurolysis	10.0	25.0	50.0	—	6.0	8.0	18.0	22.5	—	6.0
Blepharoplasty	20.0	10.0	50.0	3.0	7.5	4.0	20.0	25.0	—	6.0
Rhinoplasty	24.0	26.0	—	3.0	6.0	4.0	12.0	32.0	—	—
Scar Revision	14.0	18.0	104.0	3.0	8.0	10.0	28.0	25.0	—	24.0
Hand Surgery	12.0	13.8	50.0	—	9.0	12.0	20.0	6.0	—	5.0
Craniofacial Procedures	6.3	1.8	—	—	6.0	50.0	—	6.0	—	24.0
Skin Cancers and other Tumors	5.0	2.0	3.0	—	4.0	4.0	5.0	4.0	—	6.0
Weighted Median	22.3	27.6	85.7	3.0	7.8	8.3	21.2	22.0		10.3

Note: Weighted median does not include craniofacial procedures or skin cancers and other tumors.

Table 5b: Gynaecology, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Dilation & Curettage	8.0	6.0	5.0	6.0	4.8	2.0	8.0	5.0	—	7.0
Tubal Ligation	8.0	8.0	10.0	7.0	8.0	10.0	11.0	5.0	—	12.0
Hysterectomy (Vaginal/Abdominal)	8.0	9.5	12.0	8.0	10.0	12.0	9.0	7.0	—	12.0
Vaginal Repair	8.0	14.0	10.0	11.0	12.0	12.0	12.0	7.0	—	12.0
Tuboplasty	8.0	14.0	14.0	-	10.0	12.0	10.0	12.0	—	11.5
Laparoscopic Procedures	8.0	9.0	8.0	8.0	8.0	8.0	11.0	5.0	—	9.0
Hysteroscopic Procedures	8.0	8.0	6.5	8.0	8.0	8.0	10.0	5.0	—	9.0
Weighted Median	8.0	8.2	8.7	7.5	7.7	7.7	9.7	5.7		9.3

Table 5c: Ophthalmology, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cataract Removal	15.0	14.0	12.5	58.0	8.5	8.0	7.5	24.0	34.0	8.0
Cornea Transplant	41.0	128.0	64.0	—	39.0	26.0	—	24.0	—	—
Cornea—Pterygium	12.0	4.0	10.0	8.5	7.5	5.0	10.0	12.0	34.0	2.5
Iris, Ciliary Body, Sclera, Anterior Chamber	4.0	5.5	7.0	10.0	14.0	10.0	6.0	10.0	—	—
Retina, Choroid, Vitreous	2.5	—	2.5	1.0	2.5	2.3	2.0	27.0	—	2.5
Lacrimal Duct	8.0	2.0	14.0	—	12.0	1.3	7.0	—	—	2.5
Strabismus	14.0	10.0	24.0	—	20.0	8.0	24.5	48.0	—	10.0
Operations on Eyelids	12.0	3.0	8.0	—	8.0	8.0	16.0	8.5	—	2.5
Glaucoma	10.0	4.0	6.0	20.0	8.0	2.8	1.0	8.0	34.0	2.3
Weighted Median	13.0	13.3	11.2	44.6	8.4	7.7	8.1	23.8	34.0	6.9

Note: Weighted median does not include treatment for glaucoma.

Table 5d: Otolaryngology, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Myringotomy	8.0	4.0	—	2.0	6.0	6.0	5.0	5.0	6.0	2.0
Tympanoplasty	20.0	9.0	—	8.0	12.0	12.0	11.0	22.0	13.0	6.0
Thyroid, Parathyroid, and Other Endocrine Glands	7.5	8.0	—	12.0	9.0	8.0	6.0	10.0	—	—
Tonsillectomy and/or Adenoidectomy	16.0	12.0	—	10.0	12.0	9.0	7.0	15.5	13.0	12.0
Rhinoplasty and/or Septal Surgery	29.0	18.0	—	10.0	12.0	12.0	12.0	20.0	13.0	—
Operations on Nasal Sinuses	28.0	14.5	—	9.0	12.0	12.0	12.0	17.5	13.0	6.0
Weighted Median	18.4	10.4		8.3	9.9	8.5	7.3	12.5	9.9	6.0

Table 5e: General Surgery, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Hernia/Hydrocele	6.0	8.0	9.5	16.0	6.0	9.0	12.0	7.0	4.0	9.0
Cholecystectomy	6.0	8.0	6.5	16.0	6.0	6.0	8.0	8.0	4.0	9.0
Colonoscopy	12.0	10.5	32.0	27.0	5.0	12.0	8.0	9.0	12.0	9.0
Intestinal Operations	4.0	6.0	4.0	8.0	4.0	3.5	5.0	4.5	3.0	4.5
Haemorrhoidectomy	6.5	20.0	24.0	3.0	6.5	8.0	8.0	9.0	6.0	7.5
Breast Biopsy	2.0	2.0	2.0	1.0	3.0	2.5	3.0	3.0	3.0	2.0
Mastectomy	2.0	3.0	2.3	2.0	3.0	2.5	3.0	3.3	3.0	2.0
Bronchus and Lung	—	0.0	2.0	—	4.5	2.0	2.0	—	—	2.0
Aneurysm Surgery	—	—	1.0	—	3.0	5.0	5.0	—	—	2.0
Varicose Veins	5.0	3.5	8.0	33.5	12.0	38.8	12.0	3.5	—	39.0
Weighted Median	6.6	7.8	15.0	15.3	4.8	7.7	7.6	6.7	7.0	7.1

Table 5f: Neurosurgery, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Neurolysis	10.0	12.0	6.0	—	6.0	5.5	—	5.0	—	6.0
Disc Surgery/ Laminectomy	14.5	16.0	34.0	—	12.0	14.0	—	5.0	—	3.0
Elective Cranial Bone Flap	4.0	8.0	4.0	—	6.0	2.0	—	2.0	—	2.0
Aneurysm Surgery	6.0	4.0	1.3	—	7.0	5.0	—	3.0	—	4.0
Carotid endarterectomy	4.0	2.0	—	—	8.0	1.5	—	4.0	—	—
Weighted Median	8.3	10.0	12.1	—	7.7	5.1	—	3.1	—	2.9

Table 5g: Orthopaedic Surgery, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Meniscectomy/Arthroscopy	14.0	12.0	5.0	14.0	12.0	16.0	12.0	26.0	10.5	8.5
Removal of Pins	18.0	12.0	6.5	10.0	12.0	19.0	16.0	24.0	8.0	8.0
Arthroplasty (Hip, Knee, Ankle, Shoulder)	24.0	14.0	52.0	28.0	21.0	19.0	36.0	50.0	29.0	40.0
Arthroplasty (Interphalangeal, Metatarsophalangeal)	18.0	30.0	52.0	16.0	18.0	19.0	30.0	48.0	11.0	52.0
Hallux Valgus/Hammer Toe	28.0	17.0	9.5	12.0	24.0	19.0	25.0	33.0	16.0	35.0
Digit Neuroma	18.0	10.0	5.5	—	16.0	19.0	28.0	44.0	8.0	35.0
Rotator Cuff Repair	28.5	21.0	5.5	16.0	12.0	19.0	20.0	48.0	24.0	20.0
Ostectomy (All Types)	24.0	12.0	11.0	20.0	24.0	19.0	21.3	44.0	24.0	11.0
Routine Spinal Instability	46.0	67.5	52.0	—	24.0	19.0	29.0	42.0	0.0	—
Weighted Median	22.5	16.3	36.1	23.1	18.9	18.6	28.5	44.3	22.6	31.5

Table 5h: Cardiovascular Surgery, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	
Emergent	Coronary Artery Bypass	0.5	—	—	—	0.5	0.0	0.0	0.0	—	—
	Valves & Septa of the Heart	0.1	—	—	—	0.5	0.0	0.0	—	—	—
	Aneurysm Surgery	0.5	—	3.3	—	0.5	0.0	0.0	0.0	—	—
	Carotid Endarterectomy	0.5	—	6.0	—	0.5	0.5	0.5	0.0	—	—
	Pacemaker Operations	0.5	0.3	—	—	0.3	0.3	0.3	—	—	—
	Weighted Median	0.4	0.3	5.6	—	0.4	0.2	0.2	0.0	—	—
Urgent	Coronary Artery Bypass	2.0	—	1.0	—	1.0	0.5	0.0	4.5	—	—
	Valves & Septa of the Heart	2.0	—	1.0	—	0.8	0.5	0.0	—	—	—
	Aneurysm Surgery	2.0	—	1.0	—	0.5	0.5	0.0	2.8	—	—
	Carotid Endarterectomy	2.0	—	1.0	—	1.8	1.0	2.0	2.8	—	—
	Pacemaker Operations	2.0	0.5	1.0	—	0.8	0.5	1.5	—	—	—
	Weighted Median	2.0	0.5	1.0	—	0.9	0.5	0.9	4.3	—	—
Elective	Coronary Artery Bypass	6.0	—	3.0	—	3.0	5.0	6.0	28.0	—	—
	Valves & Septa of the Heart	12.0	—	3.0	—	3.0	5.5	6.0	—	—	—
	Aneurysm Surgery	6.0	—	3.0	—	4.5	6.0	5.5	17.0	—	—
	Carotid Endarterectomy	6.0	—	3.0	—	5.5	6.0	9.0	17.0	—	—
	Pacemaker Operations	4.0	6.0	5.0	—	3.5	10.0	6.0	—	—	—
	Weighted Median	6.0	6.0	4.1	—	3.3	7.9	6.1	26.5	—	—

Table 5i: Urology, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Non-radical Prostatectomy	10.0	6.0	4.0	24.0	6.0	13.0	10.0	—	8.0	60.0
Radical Prostatectomy	6.0	8.0	6.0	7.0	6.0	5.5	5.0	4.0	3.5	6.0
Transurethral Resection—Bladder	6.0	4.0	3.0	8.0	4.0	6.5	5.0	3.0	8.5	5.0
Radical Cystectomy	4.0	4.0	3.0	2.0	6.0	8.0	5.0	—	5.0	4.0
Cystoscopy	5.0	4.0	4.0	10.0	4.0	12.0	17.5	4.0	24.0	7.0
Hernia/Hydrocele	18.0	10.5	12.0	10.0	8.0	18.0	13.0	8.0	14.5	25.0
Bladder Fulguration	7.0	4.0	3.0	1.5	4.0	6.0	5.0	4.0	2.5	5.0
Ureteral Reimplantation for Reflux	14.0	8.0	20.0	10.0	8.0	5.5	12.0	—	6.0	26.0
Weighted Median	6.9	5.2	4.6	9.2	4.4	11.1	12.5	4.2	16.8	10.1

Table 5j: Internal Medicine, 2013
Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Colonoscopy	10.0	12.0	9.0	9.0	5.3	27.0	14.0	6.0	12.0	—
Angiography/ Angioplasty	4.5	4.0	7.0	8.0	2.0	5.0	4.0	8.0	4.0	—
Bronchoscopy	5.0	3.3	2.8	3.8	3.8	2.8	10.0	3.0	5.0	—
Gastroscopy	6.5	9.0	7.5	9.0	4.0	12.0	14.0	4.0	4.0	—
Weighted Median	8.5	10.2	8.3	8.6	4.6	21.3	8.7	6.1	11.0	—

Table 5k: Radiation Oncology, 2013**Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cancer of the Larynx	1.5	4.0	1.5	—	1.0	2.0	0.5	4.0	—	2.0
Cancer of the Cervix	1.5	4.0	1.5	—	1.0	2.0	0.5	4.0	—	2.0
Lung Cancer	1.5	2.0	1.5	0.5	1.0	2.0	0.5	4.0	—	2.0
Prostate Cancer	2.5	4.3	2.5	3.0	1.0	2.0	0.5	6.0	—	2.0
Breast Cancer	2.5	3.3	2.5	2.0	2.0	4.0	0.5	6.0	—	2.0
Early Side Effects from Treatment	1.0	2.0	0.5	2.0	0.5	1.0	—	1.0	—	1.0
Late Side Effects from Treatment	2.0	2.0	1.5	24.0	1.5	2.0	—	2.0	—	2.0
Weighted Median	2.2	3.2	2.1	1.8	1.3	2.6	0.5	5.2		2.0

Note: Weighted median does not include early or late side effects from treatment.

Table 5l: Medical Oncology, 2013**Median Patient Wait for Treatment after Appointment with Specialist (in Weeks)**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cancer of the Larynx	3.5	4.0	—	—	0.5	1.5	2.8	4.0	2.0	0.8
Cancer of the Cervix	2.5	3.0	—	—	1.5	3.0	1.8	-	4.0	1.0
Lung Cancer	3.0	3.0	—	—	1.8	1.8	2.0	4.0	3.0	1.0
Breast Cancer	1.5	3.5	—	—	2.0	2.3	2.0	6.5	3.0	2.8
Side Effects from Treatment	0.5	0.8	—	—	0.2	0.8	0.3	0.5	0.1	0.3
Weighted Median	2.3	3.3			1.8	2.0	2.0	5.1	3.0	1.7

Note: Weighted median does not include side effects from treatment.

Table 6(i): Comparison of Median Weeks Waited to Receive Treatment after Appointment with Specialist, by Selected Specialties, 2013 and 2012

	British Columbia			Alberta			Saskatchewan			Manitoba			Ontario		
	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg
Plastic Surgery	22.3	29.3	-24%	27.6	26.2	5%	85.7	56.2	53%	3.0	24.9	-88%	7.8	9.4	-16%
Gynaecology	8.0	7.2	10%	8.2	10.3	-21%	8.7	7.7	13%	7.5	10.3	-27%	7.7	8.0	-3%
Ophthalmology	13.0	13.6	-4%	13.3	11.3	18%	11.2	17.3	-35%	44.6	39.5	13%	8.4	8.0	5%
Otolaryngology	18.4	22.0	-16%	10.4	13.7	-24%		12.3	—	8.3	11.1	-26%	9.9	11.0	-10%
General Surgery	6.6	5.5	20%	7.8	9.9	-21%	15.0	6.8	120%	15.3	14.9	2%	4.8	4.7	2%
Neurosurgery	8.3	10.5	-21%	10.0	14.0	-29%	12.1	8.6	40%	—	—	—	7.7	9.7	-20%
Orthopaedic Surgery	22.5	21.7	4%	16.3	12.8	27%	36.1	18.6	94%	23.1	16.3	42%	18.9	17.9	5%
Cardiovascular Surgery (Urgent)	2.0	1.7	20%	0.5	1.0	-50%	1.0	1.5	-33%	—	0.3	—	0.9	0.9	-8%
Cardiovascular Surgery (Elective)	6.0	5.9	2%	6.0	5.1	18%	4.1	12.1	-66%	—	14.6	—	3.3	3.5	-6%
Urology	6.9	5.4	28%	5.2	4.9	6%	4.6	15.5	-70%	9.2	4.4	111%	4.4	4.3	2%
Internal Medicine	8.5	6.1	40%	10.2	10.6	-4%	8.3	8.8	-6%	8.6	9.4	-8%	4.6	4.4	6%
Radiation Oncology	2.2	3.0	-28%	3.2	2.3	43%	2.1	4.0	-47%	1.8	—	—	1.3	2.0	-33%
Medical Oncology	2.3	2.1	11%	3.3	2.2	47%	—	—	—	—	—	—	1.8	1.8	5%
Weighted Median	10.4	9.8	6%	10.5	10.5	0%	14.1	12.4	14%	17.8	15.4	16%	7.1	7.0	2%

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

Table 6(ii): Comparison of Median Weeks Waited to Receive Treatment after Appointment with Specialist, by Selected Specialties, 2013 and 2012

	Quebec			New Brunswick			Nova Scotia			Prince Edward Island			Newfoundland		
	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg
Plastic Surgery	8.3	10.8	-23%	21.2	22.9	-7%	22.0	27.0	-19%	6.5	—	—	10.3	7.6	37%
Gynaecology	7.7	10.3	-25%	9.7	10.8	-10%	5.7	6.2	-8%	—	4.7	—	9.3	8.5	10%
Ophthalmology	7.7	7.9	-2%	8.1	12.1	-33%	23.8	23.6	1%	34.0	17.8	91%	6.9	7.9	-12%
Otolaryngology	8.5	6.6	28%	7.3	8.4	-13%	12.5	7.4	69%	9.9	20.5	-52%	6.0	32.0	-81%
General Surgery	7.7	8.4	-9%	7.6	9.9	-23%	6.7	9.5	-30%	7.0	2.7	162%	7.1	6.1	16%
Neurosurgery	5.1	5.0	3%	—	21.2	—	3.1	9.5	-68%	—	—	—	2.9	2.2	32%
Orthopaedic Surgery	18.6	19.3	-4%	28.5	27.9	2%	44.3	52.7	-16%	22.6	42.7	-47%	31.5	16.2	95%
Cardiovascular Surgery (Urgent)	0.5	0.2	159%	0.9	0.4	122%	4.3	1.5	188%	—	—	—	—	1.0	—
Cardiovascular Surgery (Elective)	7.9	3.2	146%	6.1	2.6	136%	26.5	4.9	444%	—	—	—	—	3.6	—
Urology	11.1	6.2	80%	12.5	8.1	55%	4.2	25.7	-84%	16.8	6.4	165%	10.1	12.8	-21%
Internal Medicine	21.3	15.3	39%	8.7	5.2	66%	6.1	7.3	-17%	11.0	0.5	2093%	—	23.5	—
Radiation Oncology	2.6	4.1	-36%	0.5	4.8	-90%	5.2	—	—	—	2.4	—	2.0	2.1	-4%
Medical Oncology	2.0	1.2	61%	2.0	1.8	14%	5.1	3.0	67%	3.0	0.1	2057%	1.7	2.0	-12%
Weighted Median	10.4	9.3	12%	11.7	12.5	-7%	13.7	17.6	-22%	15.3	12.4	23%	9.6	11.8	-19%

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

Table 7: Frequency Distribution of Waiting Times (Specialist to Treatment) by Province, 2013
Proportion of Survey Waiting Times that Fall Within Given Ranges

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
0 - 3.99 weeks	18.9%	20.3%	33.1%	25.5%	27.7%	29.6%	19.9%	22.1%	20.3%	43.0%
4 - 7.99 weeks	26.6%	24.5%	24.0%	17.5%	26.7%	22.5%	20.6%	27.1%	18.8%	19.1%
8 - 12.99 weeks	23.3%	25.3%	17.8%	28.5%	23.8%	19.0%	29.0%	16.1%	20.3%	22.3%
13 - 25.99 weeks	15.3%	14.2%	11.2%	20.4%	12.5%	17.6%	17.4%	13.2%	26.1%	6.8%
26 - 51.99 weeks	9.8%	8.9%	6.6%	4.4%	6.1%	8.0%	9.7%	13.2%	13.0%	7.6%
1 year plus	6.1%	6.9%	7.4%	3.6%	3.2%	3.4%	3.4%	8.2%	1.4%	1.2%

Note: Columns do not necessarily sum to 100 due to rounding.

Table 8: Median Reasonable Patient Wait for Treatment after Appointment with Specialist, 2013 (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	16.0	26.0	12.0	—	16.0	8.0	20.0	24.0	—	30.0	16.1
Gynaecology	7.4	6.8	8.9	8.6	6.4	8.5	8.4	6.7	—	5.0	7.2
Ophthalmology	10.7	7.5	8.0	15.9	7.3	11.2	16.2	12.9	16.0	16.0	9.7
Otolaryngology	8.8	9.1	—	7.0	7.8	6.8	8.9	12.1	4.0	—	7.9
General Surgery	5.0	5.3	5.2	15.0	4.7	4.6	5.2	4.9	3.9	5.2	5.2
Neurosurgery	4.9	5.6	9.1	—	5.6	3.7	—	2.8	—	5.0	5.1
Orthopaedic Surgery	10.7	12.0	17.2	15.7	11.2	11.2	14.2	12.3	14.4	17.8	11.8
Cardiovascular Surgery (Urgent)	2.0	1.0	1.0	—	1.0	0.5	0.7	0.0	—	—	1.0
Cardiovascular Surgery (Elective)	4.6	6.0	4.1	—	3.7	4.9	5.7	2.2	—	—	4.4
Urology	4.6	5.5	4.7	9.0	4.4	3.6	5.2	—	—	3.9	4.4
Internal Medicine	3.5	4.6	5.6	5.4	3.6	6.9	5.2	4.7	3.8	—	4.7
Radiation Oncology	2.2	2.0	2.1	4.6	2.0	3.3	—	3.2	—	3.9	2.5
Medical Oncology	3.0	2.8	—	—	2.0	2.1	2.5	4.7	4.8	2.1	2.3
Weighted Median	6.7	7.3	7.3	11.8	5.9	7.1	9.3	8.3	7.7	8.0	6.8

Table 9a: Plastic Surgery, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Mammoplasty	16.0	26.0	12.0	—	16.0	8.0	20.0	24.0	—	30.0
Neurolysis	5.0	8.0	12.0	—	8.0	6.0	12.0	6.0	—	6.0
Blepharoplasty	18.0	12.0	12.0	—	9.0	8.0	20.0	52.0	—	30.0
Rhinoplasty	17.0	19.0	—	—	10.0	6.0	12.0	52.0	—	—
Scar Revision	14.0	16.0	12.0	—	15.0	8.0	20.0	52.0	—	36.0
Hand Surgery	9.0	12.0	12.0	—	6.0	10.0	12.0	6.0	—	5.0
Craniofacial Procedures	8.0	1.5	—	—	8.0	12.0	—	6.0	—	24.0
Skin Cancers and other Tumors	3.0	3.0	3.0	—	3.5	4.0	4.0	3.0	—	6.0
Weighted Median	14.1	19.4	12.0		12.1	7.6	16.7	31.8		20.9

Note: Weighted median does not include craniofacial procedures or skin cancers and other tumors.

Table 9b: Gynaecology, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Dilation & Curettage	6.0	4.0	4.0	6.5	4.0	2.0	8.0	6.0	—	2.5
Tubal Ligation	8.0	8.0	12.0	8.0	8.0	12.0	9.0	6.0	—	8.0
Hysterectomy (Vaginal/Abdominal)	8.0	8.0	12.0	10.0	8.0	12.0	8.0	8.0	—	9.0
Vaginal Repair	10.0	10.0	12.0	12.0	9.0	10.0	10.0	8.0	—	10.0
Tuboplasty	8.0	10.0	25.0	12.0	8.0	12.0	8.0	8.0	—	10.5
Laparoscopic Procedures	8.0	8.0	6.0	9.0	6.0	10.0	9.0	6.0	—	5.5
Hysteroscopic Procedures	8.0	7.0	6.0	9.0	6.0	10.0	8.0	6.0	—	3.5
Weighted Median	7.4	6.8	8.9	8.6	6.4	8.5	8.4	6.7		5.0

Table 9c: Ophthalmology, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cataract Removal	12.0	9.5	9.0	16.0	8.0	12.0	16.0	16.0	16.0	16.0
Cornea Transplant	12.0	12.0	13.5	—	12.0	12.0	—	9.0	—	—
Cornea—Pterygium	12.0	6.0	10.0	6.5	9.5	12.0	20.0	6.0	16.0	16.0
Iris, Ciliary Body, Sclera, Anterior Chamber	4.0	6.0	7.0	15.0	6.0	4.0	16.0	6.0	—	—
Retina, Choroid, Vitreous	4.0	1.0	1.8	—	1.8	2.0	—	4.0	—	—
Lacrimal Duct	14.0	2.0	10.0	—	12.0	12.0	24.0	—	—	—
Strabismus	12.0	10.0	12.0	—	9.0	12.0	20.0	16.0	—	—
Operations on Eyelids	11.0	3.0	8.0	—	8.0	12.0	16.0	4.5	—	16.0
Glaucoma	4.0	4.0	4.0	4.0	4.0	6.0	16.0	5.0	16.0	5.0
Weighted Median	10.7	7.5	8.0	15.9	7.3	11.2	16.2	12.9	16.0	16.0

Note: Weighted median does not include treatment for glaucoma.

Table 9d: Otolaryngology, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Myringotomy	7.0	4.0	—	3.5	6.0	4.0	6.0	6.5	4.0	—
Tympanoplasty	12.0	6.0	—	6.0	10.0	8.0	11.0	24.0	4.0	—
Thyroid, Parathyroid, and Other Endocrine Glands	4.5	6.0	—	8.0	8.0	8.0	12.0	10.0	—	—
Tonsillectomy and/or Adenoidectomy	8.0	12.0	—	8.0	8.0	8.0	8.0	14.5	4.0	—
Rhinoplasty and/or Septal Surgery	12.0	16.0	—	8.0	12.0	12.0	14.0	19.0	4.0	—
Operations on Nasal Sinuses	11.0	10.0	—	8.0	8.0	8.0	14.0	12.5	4.0	—
Weighted Median	8.8	9.1	—	7.0	7.8	6.8	8.9	12.1	4.0	—

Table 9e: General Surgery, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Hernia/Hydrocele	6.0	8.0	12.0	16.0	6.0	8.0	6.0	6.0	4.0	8.0
Cholecystectomy	6.0	6.0	6.0	16.0	6.0	4.5	6.0	4.5	4.0	5.0
Colonoscopy	6.0	5.0	3.8	27.0	4.5	4.0	4.0	6.0	4.0	5.0
Intestinal Operations	4.0	4.0	3.8	8.0	4.0	4.0	4.0	4.0	4.0	5.0
Haemorrhoidectomy	7.5	10.0	10.0	4.0	8.0	12.0	12.0	6.0	4.0	6.5
Breast Biopsy	2.0	2.0	2.0	1.0	2.3	4.0	2.0	3.0	2.0	4.0
Mastectomy	2.0	3.0	2.3	1.0	2.8	4.0	2.0	1.9	2.0	4.0
Bronchus and Lung	—	3.0	2.5	—	3.0	4.0	—	—	—	5.0
Aneurysm Surgery	—	3.0	1.5	—	3.0	8.0	—	—	—	5.0
Varicose Veins	8.0	12.0	10.0	2.0	13.0	16.0	24.0	4.8	—	5.0
Weighted Median	5.0	5.3	5.2	15.0	4.7	4.6	5.2	4.9	3.9	5.2

Table 9f: Neurosurgery, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Peripheral Nerve	7.0	8.0	2.0	—	4.0	2.0	—	5.0	—	10.0
Disc Surgery/ Laminectomy	6.0	7.0	24.0	—	10.0	5.0	—	4.0	—	3.0
Elective Cranial Bone Flap	4.0	5.0	4.0	—	4.0	4.0	—	2.0	—	5.0
Aneurysm Surgery	4.0	4.0	1.3	—	4.0	6.0	—	3.0	—	4.0
Carotid endarterectomy	4.0	2.0	—	—	1.5	2.0	—	4.0	—	—
Weighted Median	4.9	5.6	9.1	—	5.6	3.7	—	2.8	—	5.0

Table 9g: Orthopaedic Surgery, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Meniscectomy/Arthroscopy	8.0	12.0	5.5	10.0	8.0	7.0	10.0	8.0	8.0	6.5
Removal of Pins	8.0	12.0	6.5	5.0	11.0	12.0	12.0	12.0	7.5	13.0
Arthroplasty (Hip, Knee, Ankle, Shoulder)	12.0	12.0	21.0	19.0	12.0	12.0	16.0	12.5	18.0	21.0
Arthroplasty (Interphalangeal, Metatarsophalangeal)	9.0	12.0	16.0	16.0	10.5	12.0	12.0	22.0	10.0	25.0
Hallux Valgus/Hammer Toe	8.0	12.0	9.5	12.0	11.0	12.0	14.0	12.0	12.0	17.0
Digit Neuroma	8.0	12.0	6.0	—	9.0	12.0	14.0	12.0	9.0	17.0
Rotator Cuff Repair	10.0	12.0	8.5	12.0	10.0	11.0	12.0	13.0	12.0	11.0
Ostectomy (All Types)	8.0	12.0	5.0	12.0	12.0	12.0	12.0	12.0	12.0	13.0
Routine Spinal Instability	22.0	12.0	52.0	—	12.0	12.0	16.0	12.0	—	24.0
Weighted Median	10.7	12.0	17.2	15.7	11.2	11.2	14.2	12.3	14.4	17.8

Table 9h: Cardiovascular Surgery, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Emergent	Coronary Artery Bypass	0.5	—	—	—	0.5	0.0	0.0	—	—
	Valves & Septa of the Heart	0.3	—	—	—	0.5	0.0	0.0	—	—
	Aneurysm Surgery	0.5	—	1.8	—	0.5	0.0	0.0	—	—
	Carotid Endarterectomy	0.5	—	3.0	—	0.5	0.3	1.0	0.0	—
	Pacemaker Operations	0.5	0.5	—	—	0.5	0.3	0.3	—	—
	Weighted Median	0.5	0.5	2.8	—	0.5	0.2	0.2	0.0	—
Urgent	Coronary Artery Bypass	2.0	—	1.0	—	1.0	0.5	0.0	—	—
	Valves & Septa of the Heart	2.3	—	1.0	—	1.0	0.5	0.0	—	—
	Aneurysm Surgery	2.0	—	1.0	—	1.0	0.5	0.0	—	—
	Carotid Endarterectomy	2.0	—	1.0	—	1.3	0.8	3.0	0.0	—
	Pacemaker Operations	2.0	1.0	1.0	—	1.0	0.5	1.0	—	—
	Weighted Median	2.0	1.0	1.0	—	1.0	0.5	0.7	0.0	—
Elective	Coronary Artery Bypass	6.0	—	3.0	—	3.5	6.0	6.0	—	—
	Valves & Septa of the Heart	4.5	—	3.0	—	3.3	6.0	6.0	—	—
	Aneurysm Surgery	6.0	—	3.0	—	4.0	8.0	6.3	3.0	—
	Carotid Endarterectomy	6.0	—	3.0	—	5.5	4.0	8.0	2.0	—
	Pacemaker Operations	4.0	6.0	5.0	—	4.0	4.0	5.3	—	—
	Weighted Median	4.6	6.0	4.1	—	3.7	4.9	5.7	2.2	—

Table 9i: Urology, 2013**Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Non-radical Prostatectomy	4.0	4.0	4.0	6.0	5.0	6.0	5.0	—	—	5.0
Radical Prostatectomy	4.0	8.0	8.0	6.0	5.0	6.0	5.0	—	—	3.0
Transurethral Resection—Bladder	4.0	3.3	3.0	6.0	4.0	3.3	4.5	—	—	2.0
Radical Cystectomy	4.0	2.0	3.0	2.0	4.0	4.0	6.0	—	—	1.0
Cystoscopy	4.0	4.0	4.0	11.8	4.0	3.0	5.0	—	—	4.0
Hernia/Hydrocele	10.0	9.0	12.0	12.0	8.0	9.0	8.0	—	—	7.0
Bladder Fulguration	4.0	12.0	4.0	4.0	4.0	2.0	4.0	—	—	3.0
Ureteral Reimplantation for Reflux	7.5	7.0	26.0	12.0	8.0	4.0	5.0	—	—	6.0
Weighted Median	4.6	5.5	4.7	9.0	4.4	3.6	5.2			3.9

Table 9j: Internal Medicine, 2013**Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Colonoscopy	4.0	5.0	7.3	6.0	4.0	8.0	9.0	5.0	4.0	—
Angiography/ Angioplasty	2.0	4.0	1.3	4.0	2.0	4.0	2.5	4.0	2.0	—
Bronchoscopy	2.0	2.0	1.5	3.3	2.0	3.0	6.0	3.0	3.0	—
Gastroscopy	3.5	4.0	4.8	5.0	4.0	4.0	6.0	4.0	4.0	—
Weighted Median	3.5	4.6	5.6	5.4	3.6	6.9	5.2	4.7	3.8	

Table 9k: Radiation Oncology, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cancer of the Larynx	1.5	1.0	1.5	—	2.0	2.8	—	2.0	—	2.5
Cancer of the Cervix	1.5	1.0	1.5	—	2.0	2.5	—	2.0	—	2.5
Lung Cancer	2.0	2.0	1.5	1.5	2.0	2.5	-	2.0	-	2.0
Prostate Cancer	3.0	2.0	2.5	8.0	2.0	4.0	-	4.0	—	5.0
Breast Cancer	1.5	2.0	2.5	5.0	2.0	4.0	-	4.0	—	5.0
Early Side Effects from Treatment	1.0	2.0	0.5	—	1.0	1.0	—	1.0	—	1.0
Late Side Effects from Treatment	2.0	2.0	1.5	—	2.0	2.8	—	2.0	—	3.0
Weighted Median	2.2	2.0	2.1	4.6	2.0	3.3		3.2		3.9

Note: Weighted median does not include early or late side effects from treatment.

Table 9l: Medical Oncology, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist (in Weeks)

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cancer of the Larynx	2.5	4.0	—	—	2.0	2.0	3.3	3.0	4.0	1.5
Cancer of the Cervix	2.5	3.0	—	—	2.0	2.3	4.0	3.0	4.0	1.0
Lung Cancer	3.0	2.0	—	—	2.0	2.0	2.0	3.0	4.0	1.0
Breast Cancer	3.0	3.5	—	—	2.0	2.3	3.0	7.0	6.0	3.8
Side Effects from Treatment	1.5	0.6	—	—	0.2	0.5	0.3	0.5	0.1	0.3
Weighted Median	3.0	2.8			2.0	2.1	2.5	4.7	4.8	2.1

Note: Weighted median does not include side effects from treatment.

Table 10(i): Comparison between the Median Actual Weeks Waited and the Median Reasonable Number of Weeks to Wait for Treatment after Appointment with Specialist, by Selected Specialties, 2013

	British Columbia			Alberta			Saskatchewan			Manitoba			Ontario		
	A	R	D	A	R	D	A	R	D	A	R	D	A	R	D
Plastic Surgery	22.3	16.0	39%	27.6	26.0	6%	85.7	12.0	615%	3.0	—	—	7.8	16.0	-51%
Gynaecology	8.0	7.4	7%	8.2	6.8	20%	8.7	8.9	-3%	7.5	8.6	-13%	7.7	6.4	21%
Ophthalmology	13.0	10.7	21%	13.3	7.5	78%	11.2	8.0	40%	44.6	15.9	180%	8.4	7.3	16%
Otolaryngology	18.4	8.8	109%	10.4	9.1	14%	—	—	—	8.3	7.0	19%	9.9	7.8	27%
General Surgery	6.6	5.0	33%	7.8	5.3	46%	15.0	5.2	188%	15.3	15.0	2%	4.8	4.7	2%
Neurosurgery	8.3	4.9	68%	10.0	5.6	77%	12.1	9.1	33%	—	—	—	7.7	5.6	38%
Orthopaedic Surgery	22.5	10.7	111%	16.3	12.0	35%	36.1	17.2	110%	23.1	15.7	47%	18.9	11.2	69%
Cardiovascular Surgery (Urgent)	2.0	2.0	-2%	0.5	1.0	-50%	1.0	1.0	0%	—	—	—	0.9	1.0	-15%
Cardiovascular Surgery (Elective)	6.0	4.6	30%	6.0	6.0	0%	4.1	4.1	0%	—	—	—	3.3	3.7	-11%
Urology	6.9	4.6	52%	5.2	5.5	-6%	4.6	4.7	-3%	9.2	9.0	2%	4.4	4.4	2%
Internal Medicine	8.5	3.5	145%	10.2	4.6	123%	8.3	5.6	49%	8.6	5.4	60%	4.6	3.6	30%
Radiation Oncology	2.2	2.2	-1%	3.2	2.0	64%	2.1	2.1	0%	1.8	4.6	-62%	1.3	2.0	-34%
Medical Oncology	2.3	3.0	-24%	3.3	2.8	17%	—	—	—	—	—	—	1.8	2.0	-8%
Weighted Median	10.4	6.7	56%	10.5	7.3	44%	14.1	7.3	92%	17.8	11.8	51%	7.1	5.9	20%

A = Median Actual Wait; R = Median Clinically Reasonable Wait; D = Percentage Difference

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

Table 10(ii): Comparison between the Median Actual Weeks Waited and the Median Reasonable Number of Weeks to Wait for Treatment after Appointment with Specialist, by Selected Specialties, 2013

	Quebec			New Brunswick			Nova Scotia			Prince Edward Island			Newfoundland & Labrador		
	A	R	D	A	R	D	A	R	D	A	R	D	A	R	D
Plastic Surgery	8.3	8.0	3%	21.2	20.0	6%	22.0	24.0	-9%	—	—	—	10.3	30.0	-66%
Gynaecology	7.7	8.5	-9%	9.7	8.4	16%	5.7	6.7	-15%	—	—	—	9.3	5.0	88%
Ophthalmology	7.7	11.2	-31%	8.1	16.2	-50%	23.8	12.9	85%	34.0	16.0	113%	6.9	16.0	-57%
Otolaryngology	8.5	6.8	25%	7.3	8.9	-18%	12.5	12.1	3%	9.9	4.0	148%	6.0	—	—
General Surgery	7.7	4.6	68%	7.6	5.2	45%	6.7	4.9	37%	7.0	3.9	81%	7.1	5.2	36%
Neurosurgery	5.1	3.7	38%	—	—	—	3.1	2.8	8%	—	—	—	2.9	5.0	-42%
Orthopaedic Surgery	18.6	11.2	65%	28.5	14.2	100%	44.3	12.3	260%	22.6	14.4	57%	31.5	17.8	77%
Cardiovascular Surgery (Urgent)	0.5	0.5	1%	0.9	0.7	33%	4.3	0.0	—	—	—	—	—	—	—
Cardiovascular Surgery (Elective)	7.9	4.9	62%	6.1	5.7	8%	26.5	2.2	1086%	—	—	—	—	—	—
Urology	11.1	3.6	212%	12.5	5.2	140%	4.2	—	—	16.8	—	—	10.1	3.9	158%
Internal Medicine	21.3	6.9	209%	8.7	5.2	66%	6.1	4.7	30%	11.0	3.8	186%	—	—	—
Radiation Oncology	2.6	3.3	-22%	0.5	—	—	5.2	3.2	63%	—	—	—	2.0	3.9	-49%
Medical Oncology	2.0	2.1	-6%	2.0	2.5	-18%	5.1	4.7	8%	3.0	4.8	-37%	1.7	2.1	-20%
Weighted Median	10.4	7.1	46%	11.7	9.3	25%	13.7	8.3	65%	15.3	7.7	98%	9.6	8.0	21%

A = Median Actual Wait; R = Median Clinically Reasonable Wait; D = Percentage Difference

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

Table 11: Average Percentage of Patients Receiving Treatment Outside of Canada, 2013

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Plastic Surgery	0.4%	1.9%	1.0%	0.0%	1.0%	1.0%	0.0%	0.0%	—	0.0%	0.9%
Gynaecology	3.0%	0.3%	1.3%	0.1%	1.3%	0.8%	0.0%	0.0%	—	3.3%	1.3%
Ophthalmology	0.5%	0.8%	0.1%	5.0%	0.6%	0.2%	0.4%	0.8%	—	0.0%	0.6%
Otolaryngology	0.5%	1.6%	0.0%	0.5%	0.9%	0.4%	0.1%	0.4%	0.0%	0.0%	0.7%
General Surgery	1.1%	1.8%	0.5%	0.0%	0.7%	0.4%	0.0%	1.0%	0.0%	0.3%	0.8%
Neurosurgery	1.0%	0.0%	0.0%	—	3.3%	0.0%	—	0.0%	—	0.0%	0.9%
Orthopaedic Surgery	1.0%	1.5%	0.0%	0.6%	0.7%	0.2%	0.9%	1.1%	0.0%	0.0%	0.7%
Cardiovascular Surgery	0.3%	—	1.0%	—	0.2%	0.0%	0.5%	0.0%	—	—	0.2%
Urology	3.8%	1.1%	0.0%	0.3%	2.3%	0.2%	1.3%	—	0.0%	0.0%	1.7%
Internal Medicine	0.6%	1.0%	0.2%	0.7%	0.7%	0.6%	0.0%	0.0%	0.3%	0.0%	0.6%
Radiation Oncology	0.5%	1.6%	3.0%	0.0%	1.4%	0.8%	—	0.0%	—	0.0%	1.2%
Medical Oncology	1.5%	3.3%	—	—	0.0%	1.2%	0.5%	0.3%	0.0%	0.0%	0.9%
All Specialties	1.2%	1.3%	0.5%	0.9%	0.9%	0.5%	0.4%	0.6%	0.1%	0.5%	0.9%

Table 12: Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist, by Specialty, 2013

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	
Plastic Surgery	3,561	3,840	1,804	84	3,412	1,955	775	556	—	130	
Gynaecology	3,418	3,477	1,205	926	9,426	5,508	822	685	—	977	
Ophthalmology	17,086	11,315	3,476	12,257	28,460	30,184	1,280	8,223	902	895	
Otolaryngology	5,342	2,660	—	815	10,949	5,465	726	1,091	129	304	
General Surgery	12,256	8,733	7,835	8,324	25,978	29,867	1,489	3,242	461	2,565	
Neurosurgery	1,106	1,013	394	—	2,881	1,112	—	68	—	48	
Orthopaedic Surgery	18,092	9,982	7,991	5,128	43,676	21,979	4,577	7,639	711	2,366	
Cardiovascular Surgery	446	29	47	—	431	239	34	60	—	—	
Urology	6,819	2,525	1,080	1,202	15,776	17,145	1,545	946	400	1,655	
Internal Medicine	10,141	6,823	2,576	3,099	13,890	44,503	538	1,540	348	—	
Radiation Oncology	34	55	10	8	140	156	8	46	—	3	
Medical Oncology	124	176	—	—	606	353	35	80	4	28	
Residual	52,214	39,757	19,942	25,422	113,992	89,714	8,725	17,943	1,998	9,072	
Total	130,638	90,386	46,357	57,265	269,617	248,182	20,556	42,122	4,953	18,044	
Proportion of Population	2.83%	2.33%	4.29%	4.52%	2.00%	3.08%	2.72%	4.44%	3.39%	3.52%	
Canada: Total number of procedures for which patients are waiting in 2013									928,120		
Percentage of Population									2.66%		

Note: Totals may not match sums of numbers for individual procedures or specialties due to rounding. All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

Table 13a: Plastic Surgery, 2013
Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Mammoplasty	2,137	2,238	962	44	1,592	505	412	146	—	—
Neurolysis	155	220	106	—	539	484	106	71	—	28
Blepharoplasty	141	86	51	1	152	43	23	6	—	3
Rhinoplasty	571	497	—	15	336	113	53	85	—	—
Scar Revision	339	667	486	24	366	374	83	222	—	78
Hand Surgery	218	132	199	—	425	435	99	26	—	21
Total	3,561	3,840	1,804	84	3,412	1,955	775	556	—	130

Note: Totals may not match sums of individual procedures due to rounding.

Table 13b: Gynaecology, 2013
Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Dilation & Curettage	1,080	686	143	194	1,695	404	128	143	—	249
Tubal Ligation	374	628	345	169	1,767	975	205	104	—	173
Hysterectomy (Vaginal/Abdominal)	784	931	414	236	3,065	2,052	217	209	—	198
Vaginal Repair	140	330	62	83	618	339	67	78	—	52
Tuboplasty	25	16	9	—	32	24	2	3	—	1
Laparoscopic Procedures	181	134	54	63	599	513	31	17	—	18
Hysteroscopic Procedures	834	753	177	182	1,651	1,201	174	130	—	286
Total	3,418	3,477	1,205	926	9,426	5,508	822	685	—	977

Note: Totals may not match sums of individual procedures due to rounding.

Table 13c: Ophthalmology, 2013
Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cataract Removal	14,893	9,839	2,976	12,105	21,964	26,444	1,080	5,800	892	819
Cornea Transplant	443	805	68	—	869	943	—	93	—	—
Cornea—Pterygium	141	42	27	5	249	297	10	19	10	2
Iris, Ciliary Body, Sclera, Anterior Chamber	98	199	57	91	1,496	906	4	251	—	—
Retina, Choroid, Vitreous	453	—	107	57	1,077	545	2	1,648	—	43
Lacrimal Duct	131	34	51	—	457	45	16	—	—	5
Strabismus	373	241	111	—	1,616	441	56	373	—	10
Operations on Eyelids	554	157	80	—	732	563	111	40	—	15
Total	17,086	11,315	3,476	12,257	28,460	30,184	1,280	8,223	902	895

Note: Totals may not match sums of individual procedures due to rounding.

The procedure data reported generally include only those procedures performed in public facilities. A large number of ophthalmological surgeries are performed in private facilities. The distribution of surgeries between public and private facilities varies significantly between provinces. There are also differences between provinces regarding payment or reimbursement for ophthalmological surgery at private facilities.

Table 13d: Otolaryngology, 2013
Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Myringotomy	390	217	—	40	1,740	1,489	172	145	35	46
Tympanoplasty	250	110	—	39	477	401	78	167	9	26
Thyroid, Parathyroid, and Other Endocrine Glands	305	319	—	125	1,576	761	59	107	—	—
Tonsillectomy and/or Adenoidectomy	1,210	1,126	—	337	4,300	1,219	229	354	61	186
Rhinoplasty and/or Septal Surgery	920	364	—	94	925	622	49	111	7	—
Operations on Nasal Sinuses	2,266	525	—	182	1,931	974	139	208	17	47
Total	5,342	2,660	—	815	10,949	5,465	726	1,091	129	304

Note: Totals may not match sums of individual procedures due to rounding.

Table 13e: General Surgery, 2013**Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Hernia/Hydrocele	1,188	1,472	574	1,062	3,924	2,530	552	402	26	260
Cholecystectomy	974	1,278	326	951	3,170	2,260	362	455	28	302
Colonoscopy	6,380	3,283	5,530	4,415	6,457	18,688	203	1,417	331	1,318
Intestinal Operations	2,987	2,026	711	1,640	9,436	4,571	217	780	59	545
Haemorrhoidectomy	365	414	574	58	1,038	765	36	85	4	72
Breast Biopsy	7	7	1	1	36	31	2	11	0	4
Mastectomy	256	212	52	53	951	454	65	77	13	34
Bronchus and Lung	—	0	11	—	333	130	13	—	—	4
Aneurysm Surgery	—	—	1	—	35	40	5	—	—	0
Varicose Veins	100	43	56	144	597	397	34	15	—	25
Total	12,256	8,733	7,835	8,324	25,978	29,867	1,489	3,242	461	2,565

Note: Totals may not match sums of individual procedures due to rounding.

Table 13f: Neurosurgery, 2013**Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Peripheral Nerve	91	121	18	—	284	253	—	11	—	14
Disc Surgery/ Laminectomy	713	367	292	—	1,235	603	—	26	—	17
Elective Cranial Bone Flap	275	516	84	—	1,281	237	—	28	—	17
Aneurysm Surgery	5	3	0	—	12	7	—	1	—	0
Carotid endarterectomy	22	6	—	—	70	13	—	3	—	—
Total	1,106	1,013	394	—	2,881	1,112	—	68	—	48

Note: Totals may not match sums of individual procedures due to rounding.

Table 13g: Orthopaedic Surgery, 2013
Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Meniscectomy/ Arthroscopy	1,260	868	140	488	3,120	2,831	271	348	47	60
Removal of Pins	1,392	704	108	149	1,887	1,902	187	349	16	41
Arthroplasty (Hip, Knee, Ankle, Shoulder)	10,408	4,603	6,583	3,937	29,114	11,350	3,075	4,648	530	1,602
Arthroplasty (Interphalangeal, Metatarsophalangeal)	525	591	376	74	1,004	404	135	228	8	107
Hallux Valgus/ Hammer Toe	218	131	17	31	599	214	53	74	6	20
Digit Neuroma	1,072	321	76	-	2,220	2,022	231	636	15	390
Rotator Cuff Repair	1,080	651	42	158	1,174	918	105	599	36	104
Ostectomy (All Types)	1,078	472	95	291	3,000	1,511	231	527	53	42
Routine Spinal Instability	1,058	1,641	553	—	1,559	828	289	230	0	—
Total	18,092	9,982	7,991	5,128	43,676	21,979	4,577	7,639	711	2,366

Note: Totals may not match sums of individual procedures due to rounding.

Table 13h: Cardiovascular Surgery, 2013
Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Coronary Artery Bypass	95	0	12	0	159	54	0	55	0	0
Valves & Septa of the Heart	84	0	8	0	94	45	0	0	0	0
Aneurysm Surgery	3	0	0	0	1	1	0	1	0	0
Carotid Endarterectomy	17	0	1	0	25	11	3	4	0	0
Pacemaker Operations	248	29	25	0	151	128	31	0	0	0
Total	446	29	47	0	431	239	34	60	0	0

Note: Totals may not match sums of individual procedures due to rounding.

Table 13i: Urology, 2013**Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Non-radical Prostatectomy	890	253	55	264	1,047	1,267	128	—	24	494
Radical Prostatectomy	133	118	22	26	379	230	15	21	2	18
Transurethral Resection—Bladder	496	167	43	108	917	912	67	50	17	53
Radical Cystectomy	16	12	3	1	63	49	2	—	0	2
Cystoscopy	3,032	1,059	641	550	9,735	12,009	1,016	644	325	834
Hernia/Hydrocele	1,617	679	230	208	2,024	1,683	222	115	23	167
Bladder Fulguration	610	193	70	38	1,575	971	94	115	7	74
Ureteral Reimplantation for Reflux	25	42	17	6	36	24	2	—	0	16
Total	6,819	2,525	1,080	1,202	15,776	17,145	1,545	946	400	1,655

Note: Totals may not match sums of individual procedures due to rounding.

Table 13j: Internal Medicine, 2013**Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Colonoscopy	8,484	6,126	1,935	2,251	11,808	41,457	285	1,134	331	—
Angiography /Angioplasty	1,272	301	516	737	830	1,895	124	325	9	—
Bronchoscopy	163	212	20	29	767	265	49	43	4	—
Gastroscopy	222	184	104	82	486	886	80	39	5	—
Total	10,141	6,823	2,576	3,099	13,890	44,503	538	1,540	348	—

Note: Totals may not match sums of individual procedures due to rounding.

Table 13k: Radiation Oncology, 2013**Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Radiotherapy	34	55	10	8	140	156	8	46	—	3

All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

Table 13l: Medical Oncology, 2013**Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Chemotherapy	124	176	—	—	606	353	35	80	4	28

All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

**Table 14: Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist in 2013
Procedures per 100,000 Population**

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Plastic Surgery	77	99	167	7	25	24	103	59	—	25
Gynaecology	74	90	112	73	70	68	109	72	—	191
Ophthalmology	370	292	322	967	211	375	169	867	618	175
Otolaryngology	116	69	—	64	81	68	96	115	88	59
General Surgery	265	225	725	657	192	371	197	342	315	500
Neurosurgery	24	26	36	—	21	14	—	7	—	9
Orthopaedic Surgery	391	258	740	405	323	273	606	805	487	461
Cardiovascular Surgery	10	1	4	—	3	3	5	6	—	—
Urology	148	65	100	95	117	213	204	100	274	323
Internal Medicine	219	176	238	245	103	553	71	162	238	—
Radiation Oncology	1	1	1	1	1	2	1	5	—	1
Medical Oncology	3	5	—	—	4	4	5	8	3	5

All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

Table 15(i): Comparison of Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist, by Selected Specialties, 2013 and 2012

	British Columbia			Alberta			Saskatchewan			Manitoba			Ontario		
	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg
Plastic Surgery	3,561	4,925	-28%	3,840	3,470	11%	1,804	1,823	-1%	84	1,035	-92%	3,412	4,180	-18%
Gynaecology	3,418	3,367	2%	3,477	4,453	-22%	1,205	1,036	16%	926	1,324	-30%	9,426	9,836	-4%
Ophthalmology	17,086	17,229	-1%	11,315	10,434	8%	3,476	5,242	-34%	12,257	7,658	60%	28,460	27,309	4%
Otolaryngology	5,342	6,211	-14%	2,660	3,456	-23%	-	1,212	-	815	1,088	-25%	10,949	11,220	-2%
General Surgery	12,256	9,813	25%	8,733	10,407	-16%	7,835	3,222	143%	8,324	7,685	8%	25,978	24,134	8%
Neurosurgery	1,106	1,243	-11%	1,013	1,391	-27%	394	269	46%	—	—	—	2,881	3,407	-15%
Orthopaedic Surgery	18,092	16,701	8%	9,982	7,412	35%	7,991	3,725	115%	5,128	3,294	56%	43,676	39,845	10%
Cardiovascular Surgery	446	369	21%	29	115	-75%	47	67	-30%	—	7	—	431	470	-8%
Urology	6,819	5,415	26%	2,525	2,177	16%	1,080	3,708	-71%	1,202	559	115%	15,776	15,388	3%
Internal Medicine	10,141	6,792	49%	6,823	6,742	1%	2,576	2,563	0%	3,099	3,222	-4%	13,890	13,050	6%
Radiation Oncology	34	52	-34%	55	42	33%	10	15	-36%	8	—	—	140	191	-27%
Medical Oncology	124	100	23%	176	122	45%	—	—	—	—	—	—	606	537	13%
Residual	52,214	46,041	13%	39,757	37,938	5%	19,942	16,188	23%	25,422	21,430	19%	113,992	106,983	7%
Total	130,638	118,258	10%	90,386	88,159	3%	46,357	39,070	19%	57,265	47,302	21%	269,617	256,550	5%

Note: Percentage changes are calculated from exact weighted medians which have been rounded for inclusion in the table.

All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

Table 15(ii): Comparison of Estimated Number of Procedures for which Patients are Waiting after Appointment with Specialist, by Selected Specialties, 2013 and 2012

	Quebec			New Brunswick			Nova Scotia			Prince Edward Island			Newfoundland & Labrador		
	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg	2013	2012	% chg
Plastic Surgery	1,955	2,517	-22%	775	795	-2%	556	668	-17%	—	24	—	130	148	-12%
Gynaecology	5,508	7,742	-29%	822	1,002	-18%	685	805	-15%	—	95	—	977	856	14%
Ophthalmology	30,184	24,887	21%	1,280	1,841	-30%	8,223	7,269	13%	902	474	90%	895	963	-7%
Otolaryngology	5,465	3,933	39%	726	764	-5%	1,091	660	65%	129	162	-21%	304	1,060	-71%
General Surgery	29,867	33,612	-11%	1,489	1,875	-21%	3,242	4,837	-33%	461	187	147%	2,565	1,903	35%
Neurosurgery	1,112	752	48%	—	393	—	68	249	-73%	—	—	—	48	34	39%
Orthopaedic Surgery	21,979	22,180	-1%	4,577	4,246	8%	7,639	9,017	-15%	711	1,150	-38%	2,366	1,113	113%
Cardiovascular Surgery	239	88	171%	34	9	278%	60	61	-1%	—	—	—	—	11	—
Urology	17,145	9,920	73%	1,545	1,065	45%	946	7,655	-88%	400	127	216%	1,655	1,954	-15%
Internal Medicine	44,503	29,424	51%	538	278	93%	1,540	1,745	-12%	348	0	—	—	4,203	—
Radiation Oncology	156	238	-34%	8	72	-88%	46	—	—	—	4	—	3	3	11%
Medical Oncology	353	217	63%	35	33	5%	80	42	90%	4	0	—	28	32	-14%
Residual	89,714	78,936	14%	8,725	9,454	-8%	17,943	24,816	-28%	1,998	1,518	32%	9,072	11,006	-18%
Total	248,182	214,444	16%	20,556	21,828	-6%	42,122	57,824	-27%	4,953	3,741	32%	18,044	23,286	-23%

Note: Percentage changes are calculated from exact estimated values which have been rounded for inclusion in the table.

All data regarding oncology refer only to procedures done in hospitals. Most cancer patients are treated in cancer agencies. Therefore, the oncology data must be regarded as incomplete.

Table 16a(i): Acute Inpatient Procedures, 2011-2012

Procedure	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Arthroplasty (Hip, Knee, Ankle, Shoulder)	14,873	12,152	3,958	4,320	44,454	19,908	2,882	3,547	514	1,711
Arthroplasty (Interphalangeal/Metatarsophalangeal)	525	545	128	85	891	393	88	51	13	49
Hallux Valgus/Hammer Toe	99	110	20	21	177	102	17	3	0	7
Menisectomy/Arthroscopy	178	282	61	78	463	395	47	46	8	26
Ostectomy	1,308	1,351	258	365	3,493	2,293	300	311	35	114
Removal of Pins	1,038	1,081	255	264	2,628	1,629	204	229	25	103
Rotator Cuff Repair	765	832	148	182	1,972	998	65	261	18	70
Routine Spinal Instability	1,191	1,263	551	379	3,349	2,254	518	285	0	204
Bladder Fulguration	1,399	1,217	363	291	5,491	2,528	422	446	74	329
Cystoscopy	2,490	2,003	522	241	8,038	4,068	546	1,008	53	838
Non-radical Prostatectomy	3,577	1,971	458	276	7,173	4,035	570	612	153	419
Radical Cystectomy	207	160	46	36	548	319	24	68	2	22
Radical Prostatectomy	1,152	766	191	190	3,282	2,170	157	277	35	155
Transurethral Resection—Bladder	1,102	1,213	238	225	4,792	2,839	297	230	76	408
Ureteral Reimplantation for Reflux	53	79	23	22	206	130	7	32	2	10
Cataract Removal	92	296	47	95	138	468	13	46	6	9
Cornea Transplant	35	138	53	14	33	229	0	18	0	0
Cornea—Pterygium	2	8	7	0	1	20	0	3	0	0
Iris, Ciliary Body, Sclera, Anterior Chamber	82	309	96	65	159	330	1	57	0	3
Lacrimal Duct Surgery	42	54	14	10	55	89	18	13	0	12
Operations on Eyelids	111	200	46	62	435	304	31	62	3	11
Retina, Choroid, Vitreous	435	3,240	385	1,045	1,231	1,676	3	310	2	19
Strabismus Surgery	16	28	2	6	50	38	0	2	1	1
Myringotomy	264	308	65	151	896	964	164	122	24	97
Operations on Nasal Sinuses	452	527	20	319	1,063	654	92	139	0	147
Thyroid, Parathyroid, and Other Endocrine Glands	1,778	2,029	430	486	7,644	4,333	499	543	28	439
Tonsillectomy and/or Adenoidectomy	1,063	1,439	567	691	2,792	1,615	510	397	134	426
Tympanoplasty	93	98	1	11	307	257	27	173	5	13
Radiotherapy	401	858	239	53	5,293	2,682	505	451	80	79
Chemotherapy	2,632	2,525	958	800	11,868	7,226	875	782	50	789
Breast Biopsy	87	52	8	24	222	205	16	16	6	16
Bronchus and Lung	1,114	1,000	268	464	3,750	3,282	324	379	0	112

Source: Canadian Institute for Health Information, “All Procedures Performed, by Province and CCI code, 2011-12” and Fiscal 2009/10 CCI to CCP Conversion Tables

Table 16a(ii): Acute Inpatient Procedures, 2011-2012

Procedure	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL
Cholecystectomy	3,451	4,116	1,381	1,487	7,333	7,228	1,107	1,340	236	707
Haemorrhoidectomy	114	65	61	93	200	189	24	17	3	24
Intestinal Operations	8,727	6,474	2,373	2,617	25,337	16,117	1,838	2,594	247	1,418
Mastectomy	2,428	2,149	598	430	3,515	2,967	287	413	92	397
Varicose Veins	52	72	49	62	41	32	4	28	0	9
Disk Surgery/ Laminectomy	1,530	1,093	339	173	4,574	1,793	279	241	0	288
Elective Cranial Bone Flap	3,533	3,319	1,075	863	10,940	6,076	553	717	0	445
Blepharoplasty	8	10	3	2	49	20	0	1	0	0
Mammoplasty	533	1,118	110	347	1,717	807	336	113	32	314
Scar Revision	847	1,499	179	292	1,608	1,365	97	285	10	128
Coronary Artery Bypass	2,477	1,346	649	812	8,268	5,660	551	635	0	387
Pacemaker Operations	2,962	1,969	786	922	7,156	8,054	925	623	103	268
Valves & Septa of the Heart	2,137	1,803	395	475	6,541	4,643	316	565	0	139
Angiography/Angioplasty	6,531	3,428	2,763	1,359	21,316	14,360	1,277	1,851	29	697
Bronchoscopy	880	1,580	263	204	6,681	2,908	166	468	17	216
Gastroscopy	509	541	223	106	2,113	1,336	209	168	13	127
Dilation and Curettage	388	265	50	93	587	403	26	34	6	53
Hysterectomy	5,054	5,093	1,626	1,500	15,505	8,708	1,253	1,544	199	856
Hysteroscopic Procedures	202	164	37	28	219	212	20	39	4	41
Laparoscopic Procedures	370	238	137	57	1,209	1,022	48	58	7	45
Tubal Ligation	1,095	1,810	745	619	4,879	2,158	360	373	67	282
Tuboplasty	45	41	17	5	74	44	3	5	3	1
Vaginal Repair	603	1,000	229	342	1,710	1,068	227	522	17	189
Rhinoplasty and/or Septal Surgery	340	359	20	281	728	567	74	84	1	87
Hernia/Hydrocele	4,113	4,105	1,711	1,732	20,058	7,340	1,074	1,432	157	661
Carotid Endarterectomy	731	309	89	178	1,191	990	136	114	24	62
Hand Surgery/ Digit Neuroma	285	347	54	122	647	580	51	61	7	48
Neurolysis/Peripheral Nerve	332	365	76	124	3,301	2,237	112	80	1	43
Colonoscopy	3,558	2,610	1,372	1,069	9,389	8,713	817	834	95	685
Aneurysm Surgery	312	206	42	110	832	572	68	87	0	14
Residual	110,906	106,105	28,912	32,207	314,988	184,812	21,062	28,485	2,507	15,662
Total	203,709	191,733	56,790	59,982	605,600	361,414	42,522	54,730	5,224	30,931

Source: Canadian Institute for Health Information, "All Procedures Performed, by Province and CCI code, 2011-12" and Fiscal 2009/10 CCI to CCP Conversion Tables

Table 16b(i): Same Day Procedures, 2011-2012

Procedure	BC	AB	SK	MB	ON	NB	NS	PE	NL
Arthroplasty (Hip, Knee, Ankle, Shoulder)	7,678	4,946	2,625	2,992	27,639	1,560	1,287	437	372
Arthroplasty (Interphalangeal/Metatarsophalangeal)	991	479	248	156	2,009	146	196	27	58
Hallux Valgus/Hammer Toe	306	290	75	113	1,120	93	113	20	23
Meniscectomy/Arthroscopy	4,502	3,479	1,395	1,736	13,055	1,127	650	226	339
Ostectomy	1,028	695	190	391	3,007	266	312	80	83
Removal of Pins	2,983	1,971	607	510	5,549	403	528	77	165
Rotator Cuff Repair	1,206	780	252	331	3,115	208	388	59	200
Routine Spinal Instability	5	1	2	1	28	1	0	0	0
Bladder Fulguration	3,132	1,295	844	1,009	14,982	553	1,049	75	437
Cystoscopy	29,038	11,767	7,809	2,618	118,522	2,473	7,368	652	5,354
Non-radical Prostatectomy	1,052	222	262	297	1,905	93	48	1	9
Radical Prostatectomy	0	0	0	1	1	0	0	0	0
Transurethral Resection—Bladder	3,195	964	499	478	7,128	400	644	29	138
Ureteral Reimplantation for Reflux	40	197	21	11	26	0	18	0	21
Cataract Removal	51,536	36,247	12,333	10,758	134,229	7,475	12,521	1,358	5,317
Cornea Transplant	527	189	2	75	1,126	0	183	0	4
Cornea—Pterygium	607	534	133	29	1,726	54	78	16	46
Iris, Ciliary Body, Sclera, Anterior Chamber	1,195	1,568	327	406	5,398	36	1,249	15	56
Lacrimal Duct Surgery	808	828	175	155	1,924	104	222	2	99
Operations on Eyelids	2,289	2,523	473	137	4,325	330	184	39	311
Retina, Choroid, Vitreous	8,997	5,761	1,833	1,905	21,169	45	2,863	8	870
Strabismus Surgery	1,370	1,224	239	326	4,151	119	402	17	51
Myringotomy	2,273	2,511	1,670	882	14,181	1,627	1,384	275	1,099
Operations on Nasal Sinuses	3,757	1,354	572	730	7,306	509	480	69	263
Thyroid, Parathyroid, and Other Endocrine Glands	334	44	46	54	1,464	12	12	1	0
Tonsillectomy and/or Adenoidectomy	2,871	3,442	1,282	1,059	15,842	1,191	790	111	378
Tympanoplasty	557	535	293	242	1,760	342	221	30	209
Radiotherapy	414	34	1	177	206	375	12	0	3
Chemotherapy	200	284	135	19	5,281	33	37	13	63
Breast Biopsy	92	117	14	28	406	20	172	2	98
Bronchus and Lung	66	46	7	4	100	2	18	0	3
Cholecystectomy	4,988	4,190	1,230	1,605	20,142	1,244	1,616	130	1,038
Haemorrhoidectomy	2,804	1,011	1,182	918	8,105	210	476	29	474
Intestinal Operations	30,109	11,082	6,864	8,040	97,337	422	6,422	769	4,884

Source: Canadian Institute for Health Information, “All Procedures Performed, by Province and CCI code, 2011-12” and Fiscal 2009/10 CCI to CCP Conversion Tables.

Note: Information is not available in this format for Quebec.

Table 16b(ii): Same Day Procedures, 2011-2012

Procedure	BC	AB	SK	MB	ON	NB	NS	PE	NL
Mastectomy	4,219	1,521	597	951	12,964	840	815	140	477
Varicose Veins	993	574	315	161	2,548	142	194	13	24
Disk Surgery/Laminectomy	1,027	99	108	30	776	53	29	0	0
Elective Cranial Bone Flap	36	35	12	11	158	4	6	1	4
Blepharoplasty	359	438	50	19	1,008	61	12	4	24
Mammoplasty	3,171	1,792	371	419	7,483	556	204	27	151
Scar Revision	412	428	64	124	772	57	177	34	41
Pacemaker Operations	3,493	1,015	535	541	3,323	144	821	43	340
Valves & Septa of the Heart	36	1	2	0	1	0	0	0	0
Angiography/Angioplasty	8,167	484	1,070	3,431	253	338	259	85	517
Bronchoscopy	819	1,819	124	195	3,953	91	279	25	297
Gastroscopy	1,264	523	501	368	4,205	87	334	50	183
Dilation and Curettage	6,634	5,679	1,438	1,590	17,964	804	1,453	268	1,797
Hysterectomy	42	2	167	31	434	2	12	0	2
Hysteroscopic Procedures	5,219	4,730	1,380	1,156	10,510	883	1,316	207	1,613
Laparoscopic Procedures	804	537	217	350	2,683	97	117	38	58
Tubal Ligation	1,336	2,270	1,051	636	6,607	607	710	109	467
Tuboplasty	116	18	16	4	93	6	9	7	3
Vaginal Repair	306	225	93	48	967	63	61	17	38
Rhinoplasty and/or Septal Surgery	2,547	1,685	726	464	6,190	366	343	42	155
Hernia/Hydrocele	10,854	8,823	2,426	2,803	27,101	2,207	2,303	264	1,189
Hand Surgery/Digit Neuroma	3,759	1,819	875	1,241	9,027	635	914	108	748
Neurolysis/Peripheral Nerve	948	616	186	152	3,832	275	202	21	320
Colonoscopy	68,202	40,193	18,794	20,440	174,720	1,561	17,178	2,770	12,792
Residual	146,841	89,507	43,423	41,974	514,503	17,133	40,132	4,298	33,345
Total	442,554	265,443	118,181	115,332	1,356,339	48,485	109,823	13,138	77,050

Source: Canadian Institute for Health Information, "All Procedures Performed, by Province and CCI code, 2011-12" and Fiscal 2009/10 CCI to CCP Conversion Tables.

Note: Information is not available in this format for Quebec.

Appendix A:

Links to wait times data published by provincial government agencies

Alberta

Alberta Wait Times Reporting web site: <http://waittimes.alberta.ca/>

Alberta Health Services Q4 performance report 2012/13:
<http://www.albertahealthservices.ca/Publications/ahs-pub-pr-2013-06-performance-report.pdf>

British Columbia

British Columbia Ministry of Health: <http://www.health.gov.bc.ca/swt>

Saskatchewan

Saskatchewan Surgical Care Network: www.sasksurgery.ca

Saskatchewan Specialist Directory: <http://specialists.health.gov.sk.ca/>

Saskatchewan Ministry of Health (diagnostic imaging):
<http://www.health.gov.sk.ca/diagnostic-imaging-wait-times>

Saskatchewan Cancer Agency: www.saskcancer.ca

Manitoba

Manitoba Ministry of Health: <http://www.gov.mb.ca/health/waittime/>

Ontario

Ontario Ministry of Health and Long-Term Care:
<http://www.health.gov.on.ca/en/public/programs/waittimes/>

Cardiac Care Network of Ontario: <http://www.ccn.on.ca/>

Cancer Care Ontario: <http://www.cancercare.on.ca/ocs/wait-times/>

Quebec

Quebec Ministry of Health and Social Services:
<http://wpp01.msss.gouv.qc.ca/appl/g74web/default.asp>

New Brunswick

New Brunswick Department of Health:
<http://www1.gnb.ca/0217/surgicalwaittimes/index-e.aspx>

Nova Scotia

Nova Scotia Department of Health: <http://gov.ns.ca/health/waittimes/>

Prince Edward Island

Prince Edward Island Department of Health:
<http://www.healthpei.ca/waittimes>

Newfoundland & Labrador

Newfoundland & Labrador Department of Health and Community Services:
http://www.health.gov.nl.ca/health/wait_times/data.html

Appendix B:

Psychiatry waiting list survey, 2013 report

The psychiatry waiting list survey was conducted between January 9 and April 30, 2013. Surveys were sent to all specialists in the psychiatry category of the Canadian Medical Association’s membership rolls who have allowed their names to be provided by Cornerstone List Fulfillment. This year, the overall response rate to the psychiatry survey was 6 percent (see table B1).

The treatments identified in the following tables represent a cross-section of common treatments carried out by psychiatrists. The list of treatments was developed in consultation with the Canadian Psychiatric Association, who also assisted in making adjustments to the standard survey form to reflect differences between psychiatric practices and practices in the other specialties presented in this document.

Unlike other specialties in *Waiting Your Turn* in which the waiting times are weighted by the total number of such procedures that have been done by all physicians, the overall median for psychiatry is presented as an unweighted measure (see the section on *Methodology* in the main document text for a clear description of the Fraser Institute’s weighting procedures). All of the median measures that make up the final specialty median are given equal weight. This alteration to the standard methodology results from a lack of data counting the number of patients treated by psychiatrists, separated by treatment. We hope, in the coming years, to develop a weighting system for psychiatric treatments to allow a weighted average for this specialty to be calculated. In the current estimates, national medians are developed through a weighting system that bases the weight of each provincial median on the number of specialists contacted in that province.

Table B1: Summary of Responses, 2013

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Mailed	522	323	54	132	1,676	1,023	44	114	8	46	3,942
Number of Responses	34	27	8	5	91	45	5	10	0	1	226
Response Rates	7%	8%	15%	4%	5%	4%	11%	9%	0%	2%	6%

Findings

Total wait times

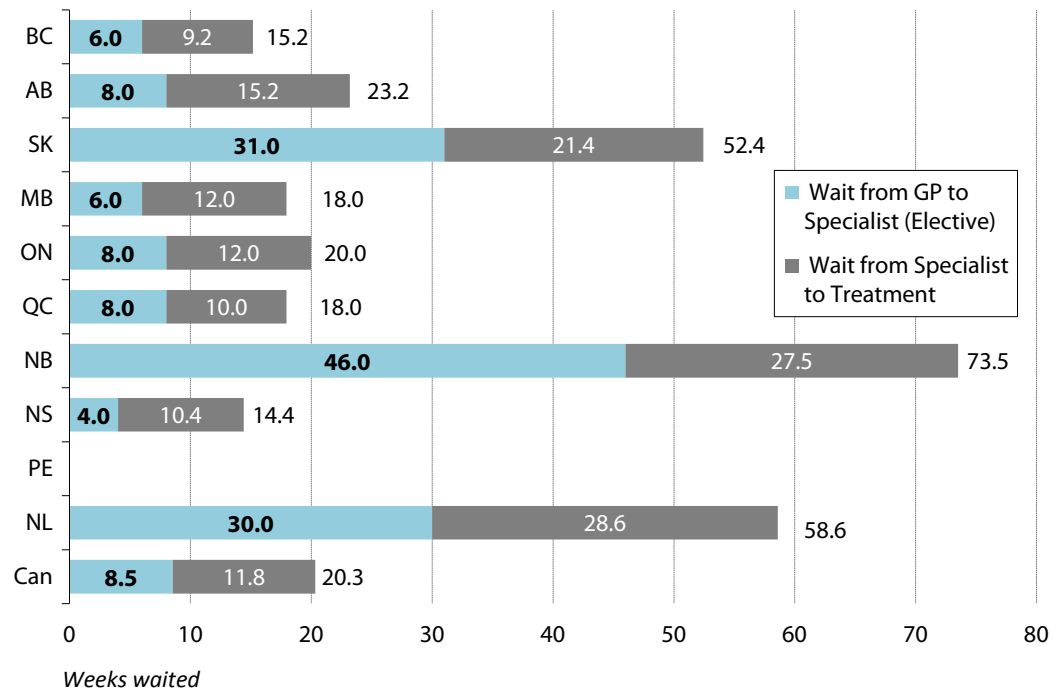
Across the provinces, the total wait time (between referral by a general practitioner and the time that the required elective treatment begins) for psychiatry has risen from 17.8 weeks in 2012 to 20.3 weeks in 2013 (see graph B1). The shortest waiting times are in Nova Scotia (14.4 weeks), British Columbia (15.2 weeks), Quebec and Manitoba (18.0 weeks, each). The longest total waits are in New Brunswick (73.5 weeks), Newfoundland & Labrador (58.6), and Saskatchewan (52.4 weeks).

Wait time by segment and specialty

The total wait time for psychiatric treatment can be examined in two segments:

1. The first segment occurs from referral by a general practitioner or other physician to consultation with a psychiatrist.
2. The second segment occurs from the consultation with a psychiatrist to the point at which treatment begins.

Graph B1: Weeks Waited from Referral by GP to Treatment, by Province, 2013



Totals may not equal the sum of subtotals due to rounding.

Table B2: Psychiatry, 2013
Median Patient Wait to See a Specialist after Referral from a GP

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Urgent	1.0	2.0	5.0	2.0	2.0	2.0	3.5	1.0	—	3.0	1.9
Elective	6.0	8.0	31.0	6.0	8.0	8.0	46.0	4.0	—	30.0	8.5

Table B2 indicates the number of weeks that patients wait for initial appointments with psychiatrists after referral from their general practitioners or from other specialists. The waiting time to see a psychiatrist on an urgent basis across the provinces is 1.9 weeks, ranging from 1.0 week in Nova Scotia and British Columbia, to 5.0 weeks in Saskatchewan. The waiting time for referrals on an elective basis across the provinces is 8.5 weeks. The provinces with the longest wait times for elective referrals are New Brunswick (46.0 weeks), Saskatchewan (31.0 weeks) and Newfoundland & Labrador (30.0 weeks). On the other hand, Nova Scotia (4.0 weeks), British Columbia (6.0 weeks) and Manitoba (6.0 weeks) are the provinces with the shortest wait times for elective referrals.

Table B3: Psychiatry, 2013
Median Patient Wait for Treatment after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Initiate a course of brief psychotherapy	6.0	8.0	24.0	6.5	10.0	6.0	36.0	6.0	—	30.0	8.7
Initiate a course of long-term psychotherapy	10.0	12.0	28.0	26.0	12.0	12.0	36.0	6.0	—	30.0	12.7
Initiate a course of pharmacotherapy	3.0	4.0	19.8	2.0	4.0	2.0	30.0	2.0	—	30.0	4.0
Initiate a course of couple/marital therapy	7.0	8.5	24.0	14.0	8.0	9.0	19.8	9.0	—	30.0	9.0
Initiate cognitive behaviour therapy	6.0	9.0	23.0	4.0	12.0	12.0	28.0	9.0	—	30.0	11.1
Access a day program	8.0	6.5	12.0	8.0	5.5	6.0	36.0	18.0	—	20.0	7.1
Access an eating disorders program	12.0	16.0	8.0	16.0	12.0	11.0	30.0	4.0	—	—	12.1
Access a housing program	22.0	30.0	29.0	32.0	30.0	12.0	10.0	9.5	—	26.0	23.4
Access an evening program	10.0	11.0	8.0	10.0	12.0	9.0	10.0	12.5	—	12.0	10.7
Access a sleep disorders program	12.0	52.0	44.0	8.0	4.3	21.0	24.0	26.0	—	52.0	15.6
Access assertive community treatment or similar program	5.0	10.0	16.0	5.0	22.0	9.5	43.0	12.5	—	26.0	14.9
Unweighted Median	9.2	15.2	21.4	12.0	12.0	10.0	27.5	10.4	—	28.6	11.8

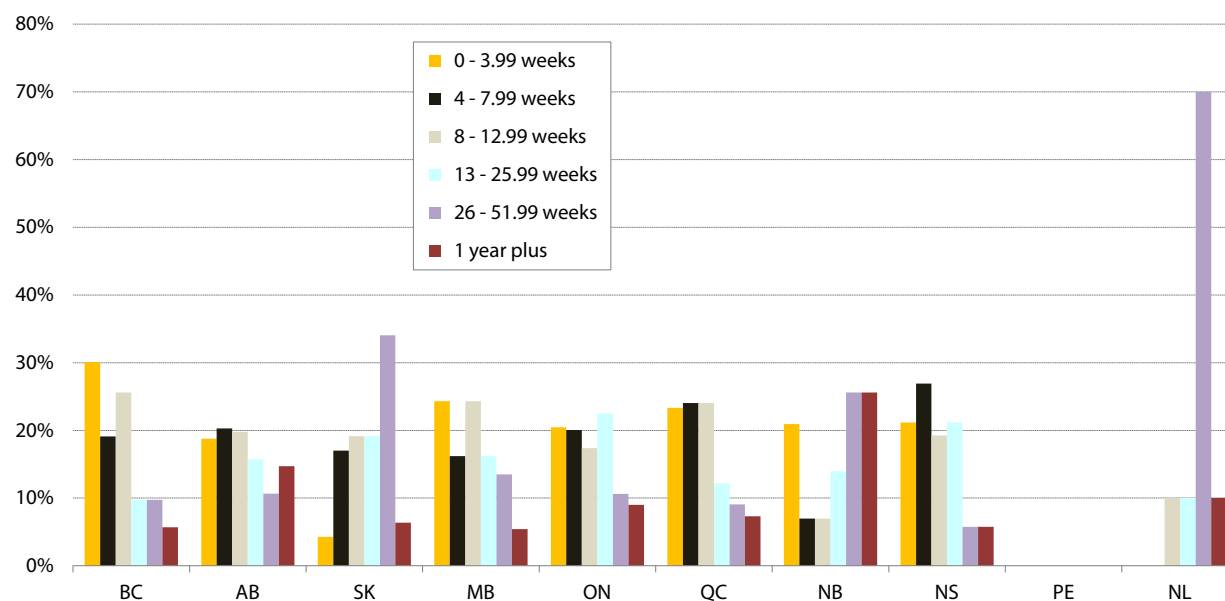
Graph B2: Frequency Distribution of Survey Waiting Times (Specialist to Treatment) by Province, 2013

Table B3 summarizes the waiting time for certain elective psychiatric treatments after an appointment with a specialist. The longest waiting times for this second segment of the total waiting time are in Newfoundland & Labrador (28.6 weeks), New Brunswick (27.5 weeks) and Saskatchewan (21.4 weeks). The shortest waits are in British Columbia (9.2 weeks), Quebec (10.0 weeks), and Nova Scotia (10.4 weeks). Among the treatments, patients wait longest to access a housing program (23.4 weeks) or a sleep disorders program (15.6 weeks), while wait times are shortest for pharmacotherapy (4.0 weeks), and admission to a day program (7.1 weeks).

Graph B2 presents a frequency distribution of the survey responses by province. The wait for the majority of treatments is less than 13 weeks in all provinces except Saskatchewan, New Brunswick, and Newfoundland & Labrador. British Columbia performs the highest proportion of treatments within 13 weeks (74.8 percent) and within 8 weeks (49.2%). Waits of 26 weeks or more are least frequent in Nova Scotia (11.5%), and most frequent in Newfoundland & Labrador (80.0%).

Table B4 compares the 2012 and 2013 waiting times for treatment. This year's study indicates an overall increase in the waiting time between consultation with a specialist and elective treatment in 6 provinces. Only three provinces experienced a decrease: British Columbia (-29%), Quebec (-1%), and Nova Scotia (-11%).

Table B4: Comparison of Median Weeks Waited to Receive Psychiatric Treatment after Appointment with Specialist, by Province, 2013 and 2012

Province	2013	2012	% chg
British Columbia	9.2	13.0	-29%
Alberta	15.2	12.4	22%
Saskatchewan	21.4	14.6	46%
Manitoba	12.0	7.8	52%
Ontario	12.0	8.7	37%
Quebec	10.0	10.0	-1%
New Brunswick	27.5	16.8	64%
Nova Scotia	10.4	11.7	-11%
Prince Edward Island	—	17.8	—
Newfoundland	28.6	17.1	67%

Note: Percentage changes are calculated from exact weighted medians. The exact weighted medians have been rounded to one decimal place for inclusion in the table.

Comparison between clinically reasonable and actual wait times

Physicians responding to the survey are also asked to provide a clinically reasonable waiting time for the various treatments. Specialists generally indicate a period of time substantially shorter than the median number of weeks patients actually wait for treatment (see tables B5 and B6). Table B5 summarizes the reasonable waiting times for psychiatric treatments and is based on the same methodology used to create table B3. Table B6 summarizes the differences between the median reasonable and actual waiting times across the provinces for treatment after an appointment with a specialist, and shows that in 95 percent of cases, the actual waiting time for treatment (in table B3) is greater than the clinically reasonable median waiting time (in table B5). Manitoba and Quebec come closest to meeting the standard of “reasonable,” in that the actual overall median specialist-to-treatment waits only exceed the corresponding “reasonable” values by 114 and 128 percent respectively, a smaller gap than in the other provinces.

Finally, patients also prefer earlier treatment. On average, only 4.5 percent of patients are on waiting lists because they have requested a delay or postponement of their treatment. Conversely, the proportion of patients who would have begun their

Table B5: Psychiatry, 2013
Median Reasonable Wait for Treatment after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Initiate a course of brief psychotherapy	4.0	3.0	8.0	6.0	4.0	4.0	5.0	4.0	—	4.0	4.1
Initiate a course of long-term psychotherapy	4.0	4.0	15.0	12.0	6.5	8.0	7.0	8.0	—	8.0	6.7
Initiate a course of pharmacotherapy	2.0	1.5	2.0	1.5	2.0	2.0	1.5	2.0	—	4.0	2.0
Initiate a course of couple/marital therapy	4.0	4.0	6.0	10.0	4.0	4.5	6.0	3.8	—	8.0	4.4
Initiate cognitive behaviour therapy	4.0	4.0	6.0	9.0	4.0	4.0	3.5	4.5	—	8.0	4.3
Access a day program	3.5	4.0	6.0	4.0	3.0	3.0	3.0	4.5	—	8.0	3.3
Access an eating disorders program	4.0	4.0	5.0	4.0	4.0	3.0	6.0	4.0	—	8.0	3.8
Access a housing program	5.5	4.0	4.0	4.0	5.5	4.0	5.0	3.5	—	4.0	4.8
Access an evening program	4.0	4.0	4.0	4.0	4.0	5.0	5.0	4.0	—	6.0	4.3
Access a sleep disorders program	4.0	4.0	12.0	4.0	4.0	6.5	6.5	4.0	—	8.0	4.8
Access assertive community treatment or similar program	2.0	3.0	4.0	3.0	4.3	4.0	6.5	5.0	—	8.0	3.8
Unweighted Median	3.7	3.6	6.5	5.6	4.1	4.4	5.0	4.3	—	6.7	4.2

treatment within the week,¹⁴ if it were available, is 75.8 percent (*Waiting Your Turn* 2013).

Waiting for diagnostic and therapeutic technology

Table B7 displays the median number of weeks patients must wait for access to a computed tomography (CT) or magnetic resonance imaging (MRI) scanner, or an electroencephalogram (EEG). Compared to 2012, the national waiting times for CT, and MR scans have risen in 2013. The median wait for a CT scan across the provinces is 4.7 weeks, ranging from a high of 14.0 weeks (Saskatchewan), to a low of 2.0 weeks (Manitoba). The median wait for an MRI across the provinces is 9.3 weeks. Patients in Saskatchewan and Newfoundland & Labrador wait the longest (20.0 weeks), while patients in Ontario wait the least amount of time (6.5 weeks). Finally, the median wait

14 The survey asks psychiatrists what percentage of their patients currently waiting for treatment would agree to begin treatment tomorrow if an opening were to arise. However, comments by respondents of previous surveys indicate that at least some respondents answer the question as if it were “a few days.”

Table B6: Psychiatry, 2013
Difference Between Actual and Reasonable Patient Waits for Treatment after Appointment with Specialist

	BC	AB	SK	MB	ON	QC	NB	NS	PE	NL	CAN
Initiate a course of brief psychotherapy	50%	167%	200%	8%	150%	50%	620%	50%	—	650%	116%
Initiate a course of long-term psychotherapy	150%	200%	87%	117%	85%	50%	414%	-25%	—	275%	89%
Initiate a course of pharmacotherapy	50%	167%	888%	33%	100%	0%	1900%	0%	—	650%	106%
Initiate a course of couple/marital therapy	75%	113%	300%	40%	100%	100%	229%	140%	—	275%	104%
Initiate cognitive behaviour therapy	50%	125%	283%	-56%	200%	200%	700%	100%	—	275%	162%
Access a day program	129%	63%	100%	100%	83%	100%	1100%	300%	—	150%	113%
Access an eating disorders program	200%	300%	60%	300%	200%	267%	400%	0%	—	—	217%
Access a housing program	300%	650%	625%	700%	445%	200%	100%	171%	—	550%	385%
Access an evening program	150%	175%	100%	150%	200%	80%	100%	213%	—	100%	150%
Access a sleep disorders program	200%	1200%	267%	100%	6%	223%	269%	550%	—	550%	223%
Access assertive community treatment or similar program	150%	233%	300%	67%	418%	138%	562%	150%	—	225%	288%
Weighted Median	146%	323%	227%	114%	191%	128%	450%	142%	—	325%	180%

Table B7: Waiting for Technology: Weeks Waited to Receive Selected Diagnostic Tests in 2013, 2012, and 2011

Province	CT-Scan			MRI			EEG		
	2013	2012	2011	2013	2012	2011	2013	2012	2011
British Columbia	6.0	4.0	6.0	16.0	11.0	19.0	4.0	4.0	4.0
Alberta	4.6	4.0	3.0	12.0	8.0	8.0	3.7	4.0	4.0
Saskatchewan	14.0	3.0	3.0	20.0	6.0	15.0	8.0	6.0	6.0
Manitoba	2.0	3.5	4.0	7.0	5.0	11.0	4.0	3.5	4.0
Ontario	3.5	4.0	4.0	6.5	8.0	8.0	3.0	4.0	4.0
Quebec	6.0	4.0	4.0	9.0	8.0	7.0	4.0	2.5	4.0
New Brunswick	6.0	7.0	5.0	10.0	10.0	15.5	6.0	5.0	4.0
Nova Scotia	3.5	3.0	4.0	8.5	4.5	4.0	3.5	3.5	4.0
P.E.I.	—	2.5	—	—	—	—	—	—	—
Newfoundland	6.0	3.5	4.0	20.0	25.8	52.0	4.0	2.8	2.0
Canada	4.7	4.0	4.2	9.3	8.4	10.0	3.6	3.6	4.0

for an EEG across the provinces is 3.6 weeks, the same as last year. Residents of Ontario face the shortest waits for an EEG (3.0 weeks), while residents of Saskatchewan wait longest (8.0 weeks).¹⁵

Conclusion

The information documented here suggests that patients seeking mental health treatment are likely to be disappointed with their access. With a waiting time of 20.3 weeks from general practitioner referral to elective treatment, and with wait times from meeting with a specialist to elective treatment that are 180 percent longer than specialists feel is appropriate, it is clear that many patients in need of psychiatric attention are facing the effects of rationing in our health care system.

15 For comparison, the overall Canadian median waiting time for CT scans was 3.6 weeks in the traditional 12 specialties and 4.7 weeks in the psychiatry survey, with a mean absolute difference (the average of absolute differences between the two measures in each province) of 2.4 weeks across nine provinces. The overall Canadian median waiting time for MRIs in the psychiatry survey was 9.3 weeks, compared to 8.3 weeks for the other 12 specialties. The mean absolute difference in this case, again for nine provinces, was 3.6 weeks.

Appendix C: The Fraser Institute National Waiting List Survey questionnaire

General Surgery

Please circle the province in which your office is located:

AB BC MB NB NL NS NT NU ON PE QC SK YT

1. From today, how long (in weeks) would a new patient have to wait for a routine office consultation with you? _____ week(s)

2. Do you restrict the number of patients waiting to see **you** in any manner? (i.e. Do you accept referrals only at certain times of the year?)

Yes No

3. Over the past 12 months, what percentage of the surgical procedures you performed were done on a day surgery basis? _____ %

4. From today, how long (in weeks) would a new patient have to wait for the following types of elective surgery or diagnostic procedures? What would you consider to be a clinically reasonable waiting time for these types of surgery and procedures?

Surgery or Procedure	Number of Weeks to Wait	Reasonable Number of Weeks to Wait
Hernia repair (all types)/hydrocele		
Cholecystectomy		
Colonoscopy (diagnostic)		
Incision, excision, anastomosis of intestine and other operations on intestine		
Hemorrhoidectomy/other anal surgery		
Breast biopsy		
Mastectomy/segmental resection		
Operations on bronchus and lung		
Incidentally discovered and unruptured aneurysms		
Varicose vein surgery		

5. Has the length of your waiting lists changed since last year at this time?

- Increased Decreased Remained the Same

6. If the length of your waiting lists has changed, what are the major reasons for the change? (Check all which may be applicable.)

- _____ Availability of O/R nurses
 _____ Availability of other technical staff
 _____ Availability of beds
 _____ Availability of O/R time
 _____ Change in patient load
 _____ Availability of ancillary investigations or consultations (i.e. MRI, CT scans)
 _____ Other

7. What percentage of your patients currently waiting for surgery are on a waiting list primarily because **they** requested a delay or postponement? _____ %

8. What percentage of your patients currently waiting for surgery do you think would agree to having their procedure performed tomorrow if an opening arose?
 _____ %

9. To the best of your knowledge, what percentage of your patients that are listed on hospital waiting lists might also be listed by other physicians for the same procedure? _____ %

10. Do you use the following types of diagnostic tests? If so, how long (in weeks) would a new patient have to wait for these tests?

Do you use this diagnostic test?	Yes	No	Infrequently	Number of weeks patients wait
CT Scan				
MRI				
Ultrasound				

11. Approximately what percentage of your patients **inquired** in the past 12 months about the availability of medical services:

In another province? _____ % Outside of Canada? _____ %

12. Approximately what percentage of your patients **received** non-emergency medical treatment in the past 12 months:

In another province? _____ % Outside of Canada? _____ %

Thank you very much for your assistance.

References

Alberta Health and Wellness (2013a). Alberta Wait Times Reporting web site. Web page. <<http://waittimes.alberta.ca/>>, as of October 1, 2013.

Alberta Health and Wellness (2013b). Frequently Asked Questions. Web page. Alberta Wait Times Reporting web site: <<http://waittimes.alberta.ca/AWTRInfoPage.jsp?pageID=9>>, as of October 1, 2013.

British Columbia Ministry of Health (2013a). *Surgical Wait Times*. Web page <<http://www.health.gov.bc.ca/swt>>, as of May 10, 2012.

British Columbia Ministry of Health (2013b). Surgical Wait Times: How is the data collected? Web page. <<http://www.health.gov.bc.ca/swt/overview/methodology.html>>, as of October 1, 2013.

Canadian Cancer Society's Steering Committee on Cancer Statistics (2013). *Canadian Cancer Statistics 2013*. Canadian Cancer Society. <<http://www.cancer.ca/~media/cancer.ca/CW/publications/Canadian%20Cancer%20Statistics/canadian-cancer-tatistics-2013-EN.pdf>>, as of October 1, 2013.

Canadian Institute for Health Information [CIHI] (2012a). *Discharge Abstract Database, 2011-2012*. Canadian Institute for Health Information.

Canadian Institute for Health Information [CIHI] (2012b). *National Ambulatory Care Reporting System, 2011-2012*. Canadian Institute for Health Information.

Canadian Institute for Health Information [CIHI] (2010). *2009/2010 Conversion Tables: ICD-10-CA/CCI to ICD-9/CCP*. Canadian Institute for Health Information.

Day, Brian (2013). The Consequences of Waiting. In Globerman, Steven (ed.). *Reducing Wait Times for Health Care: What Canada Can learn from Theory and International Experience* (Fraser Institute): 45-75.

Esmail, Nadeem (2013). *The Private Cost of Public Queues, 2013 edition*. Fraser Alert. Fraser Institute. <<http://www.fraserinstitute.org/uploadedFiles/fraser-ca/Content/research-news/research/publications/private-cost-of-public-queues-for-medically-necessary-care-2013.pdf>>, as of October 1, 2013.

Ontario Ministry of Health and Long Term Care (2005). First ever common benchmarks will allow Canadians to measure progress in reducing wait times. News

release (December 12). Ontario Ministry of Health and Long Term Care. <<http://news.ontario.ca/archive/en/2005/12/12/First-ever-common-benchmarks-will-allow-Canadians-to-measure-progress-in-reducin.html>>, as of October 1, 2013.

Ramsay, Cynthia (1998). How to ruin a good idea—lessons from the British Columbia Ministry of Health. *Fraser Forum* (February).

Saskatchewan Surgical Care Network [SSCN] (2013a). *Wait Time Information*. Web page. Saskatchewan Surgical Care Network. <<http://www.sasksurgery.ca/provider/waittimes.html>>, as of September 28, 2013.

Saskatchewan Surgical Care Network [SSCN] (2013b). *Data Sources*. Web page. Saskatchewan Surgical Care Network. <<http://www.sasksurgery.ca/datasource.html>>, as of October 1, 2013.

Statistics Canada (2012). Estimates of population, by age group and sex for July 1, Canada, provinces and territories annual (persons unless otherwise noted). Table 051-0001. Web page. <<http://www5.statcan.gc.ca/cansim/a05?lang=eng&id=0510001>>, as of November 27, 2012.

Stokes, Ernie, and Robin Somerville (2008). *The Economic Costs of Wait Times in Canada*. A study commissioned by the British Columbia Medical Association (BCMA) and the Canadian Median Association. Centre for Spatial Economics.

Waiting Your Turn: Hospital Waiting Lists in Canada. (1993-2012, various authors; various editions). Fraser Institute.

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