



CANADIAN OPHTHALMOLOGICAL SOCIETY

SOCIÉTÉ CANADIENNE D'OPHTALMOLOGIE

Waiting Time for Sight Restoration

What is happening in
Canada right now?

Waiting Lists Initiatives

- BC
- Saskatchewan
- Manitoba
- Ontario

Surgical Wait Times

Ministry of Health Services

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Ophthalmological (Eye) Surgery at Vancouver General

The Surgical Wait Times web site covers about 1,100 doctors at 46 of B.C.'s hospitals. As more hospitals participate, the registry will be expanded. Information from some hospitals may not be current, as these hospitals are upgrading their computer and tracking systems.

Before you consider any changes to your treatment, it is important you discuss any information you get from this web site with your family doctor or your surgeon.

If you are scheduled for surgery or a special diagnostic test, and are interested in learning more about wait times, here are some [Questions You Should Ask Your Doctor](#).

Definitions

Priority 1 (Urgent) - in the opinion of the physician, the individual's health may be significantly compromised if the procedure is not performed within about two weeks of submitting the booking form to the hospital.

Priority 2 & 3 - in the opinion of the physician, the surgery can be appropriately scheduled two weeks or more after submitting the

	July 31, 2004	Type	1 (Urgent)	Priority 2 & 3
Berman, Michael	47	Day Patient	No Patients	18.1 wks
		Inpatient	0.1 wks	No Patients
Blicker, Jeffrey	100	Day Patient	No Patients	8.9 wks
		Inpatient	No Patients	No Patients
Buffam, Frank	82	Day Patient	No Patients	7.6 wks
		Inpatient	13.5 wks	No Patients
Cline, Roy	14	Day Patient	No Patients	7.6 wks
		Inpatient	13.5 wks	No Patients
Dolman, Peter	153	Day Patient	No Patients	12.3 wks
		Inpatient	No Patients	3.6 wks
Holland, Simon	250	Day Patient	No Patients	12.9 wks
		Inpatient	No Patients	No Patients
Kennedy, Ross	14	Day Patient	No Patients	13.0 wks
		Inpatient	No Patients	No Patients
Law, Francis	1377	Day Patient	No Patients	16.6 wks

Ophthalmology (Eye) Saskatoon

Actual Patient Waits For Procedures Performed July - December 2004

	Patients Completed	0-24 hrs	24 hrs-3 wks	3-6 wks	6 wks-3 months	4-6 months	7-12 months	13-18 months	more than 18 months
Ophthalmology (All)									
Saskatoon	2,899	5%	6%	5%	14%	29%	34%	5%	1%
Common Procedures									
Cataract Procedures	2,497	1%	3%	4%	14%	33%	38%	6%	2%
Operations on Eye (except for Cataract)	395	28%	29%	12%	17%	10%	4%	1%	0%

Ophthalmology (Eye) Regina Qu'Appelle

Actual Patient Waits For Procedures Performed July - December 2004

Ophthalmology (All)	Patients Completed	0-24 hrs	24 hrs -3 wks	3-6 wks	6 wks-3 months	4-6 months	7-12 months	13-18 months	more than 18 months	Patients Waiting (As of Dec 31)
Regina Qu'Appelle	1,452	7%	9%	5%	10%	9%	17%	36%	6%	3,573
Common Procedures	Patients Completed	0-24 hrs	24 hrs-3 wks	3-6 wks	6 wks-3 months	4-6 months	7-12 months	13-18 months	more than 18 months	Patients Waiting
Cataract Procedures	1,133	1%	5%	4%	10%	10%	21%	46%	3%	3,258
Operations on Eye (except for Cataract)	319	26%	23%	10%	10%	5%	5%	4%	17%	311

Data Source: Saskatchewan Surgical Patient Registry

Analysis of Variance of Questionnaire Responses to Time Spent Waiting for Cataract Surgery

(CMAJ 2001; 164:1177-1180)

	Jan-99		Nov-99	
	F score	P	F score	P
Risk Loss of Driver's License	0.229	0.637	7.57	0.006
Work Impairment	2.25	0.1	8.09	0.003
Driving for work impaired	1.49	0.225	4.1	0.016
VF-14	2.34	0.126	80.23	<.001

How serious is the problem

- Tremendous regional disparity
- Tremendous variation between surgeons in a community

What's wrong with waiting for cataract surgery?

■ Falls and Fractures

- *J Am Geriatr Soc* 1998; 46: 58-64
- *J Am Geriatr Soc* 2003; 51: 356-363

■ Driving accidents

- *Arch Ophthalmol* 2001; 119: 881-887

Canadian Ophthalmological Society's Recommendation

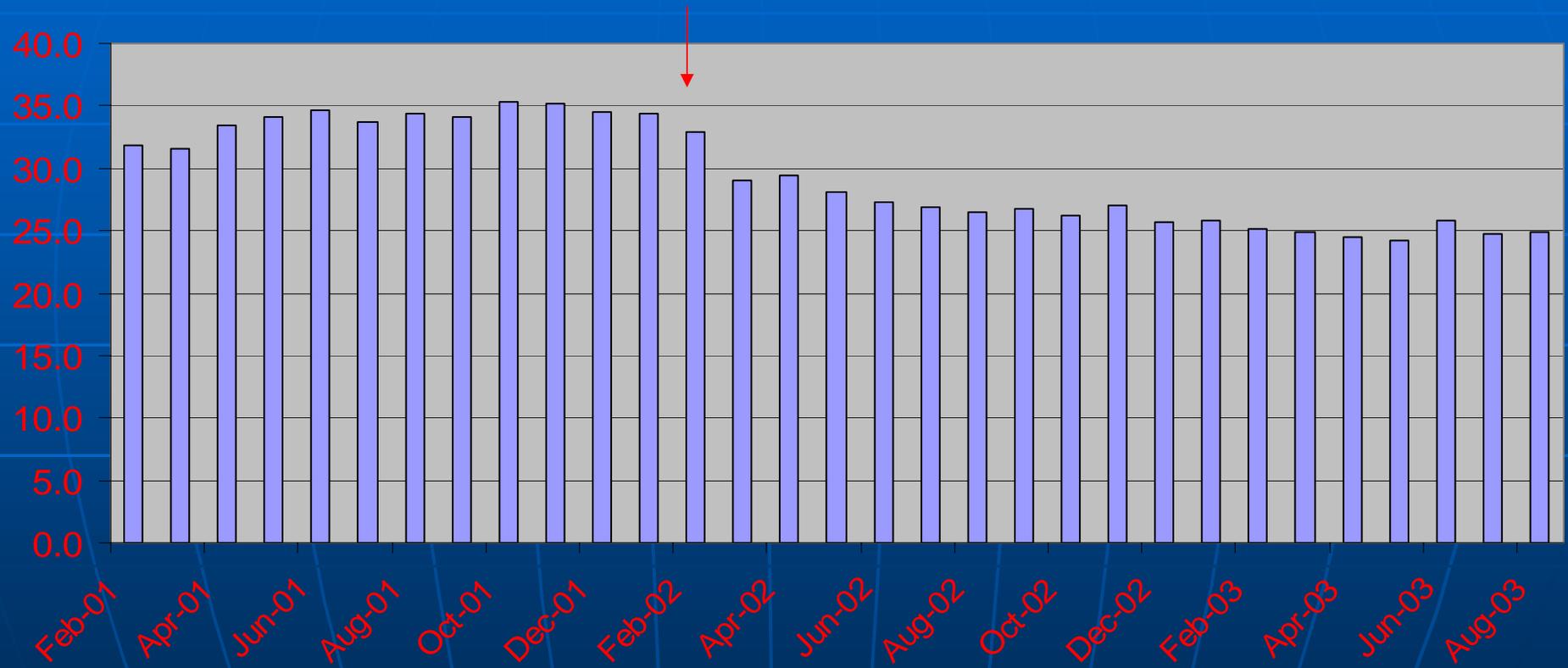
- Medically acceptable waiting time for cataract surgery = 4 months
- Patients should be prioritized and patients with higher relative priority should have their surgery expedited

What is the impact of
adding additional
resources?

Claims-based data in a
system mixing public and
private surgery found extra
public resources led to
longer waiting lists

CMAJ 162(9):1305-1310

Projected Wait (Weeks)



How should extra resources be allocated?

- 1st priority is to give start-up time to new ophthalmologists in the community
- Remaining time should be allocated by hospital ophthalmology department heads

How should the system be managed?

- Provincial centralized waiting lists
- Centralized prioritization tool
 - May vary from province to province

COS Romanow Presentation

- That to meet the continuing comprehensive eye care needs of an ageing population and expected ophthalmologist retirement/emigration, 35 to 40 ophthalmologists per year should be produced by our training programs, considerably more than the 20 per year produced at present