
Tackling Excessive Waiting Times for Elective
Surgery: A Comparison of Policies in Twelve OECD
Countries

Annex 3: Detailed Country Reviews: Figures

Jeremy Hurst and Luigi Siciliani

6

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DELSA/ELSA/WD/HEA(2003)6/ANN2



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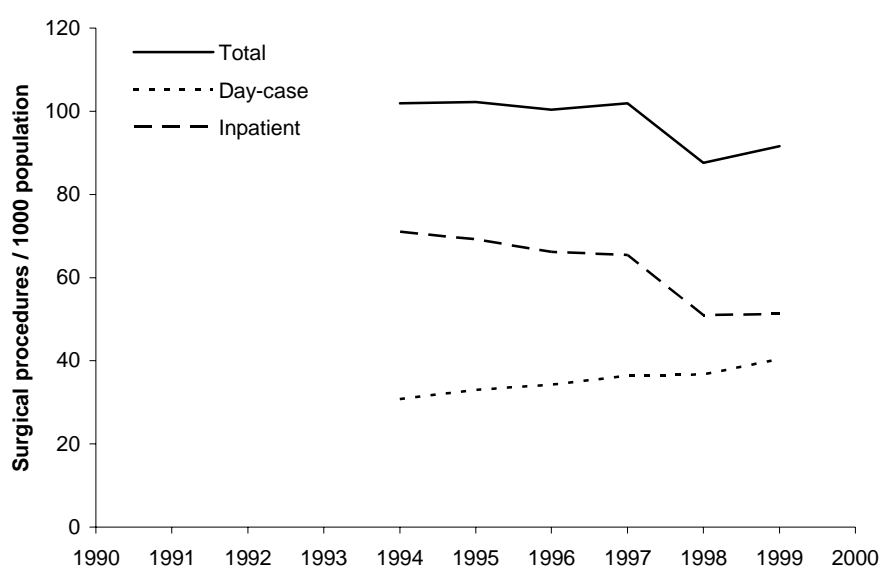
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1. AUSTRALIA

Figure A3.1.1. Inpatient and day-case surgery procedures

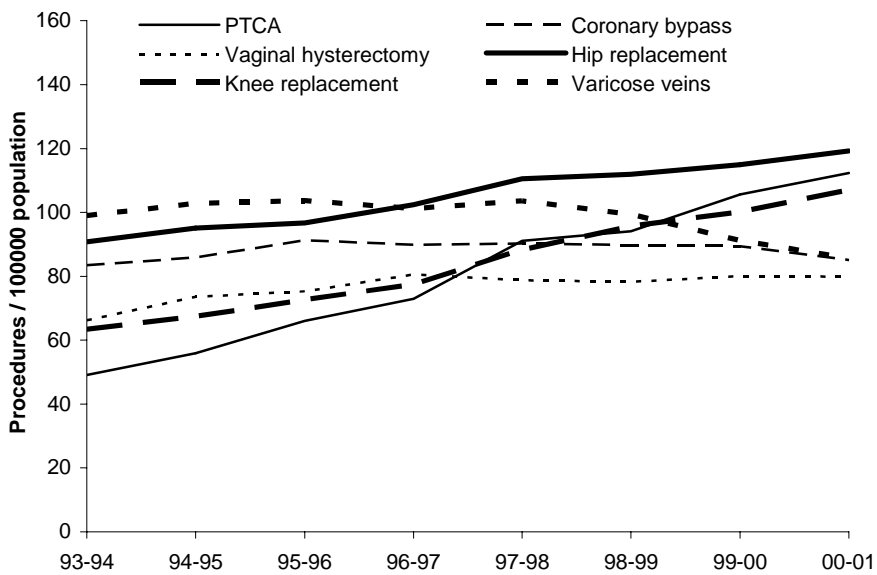
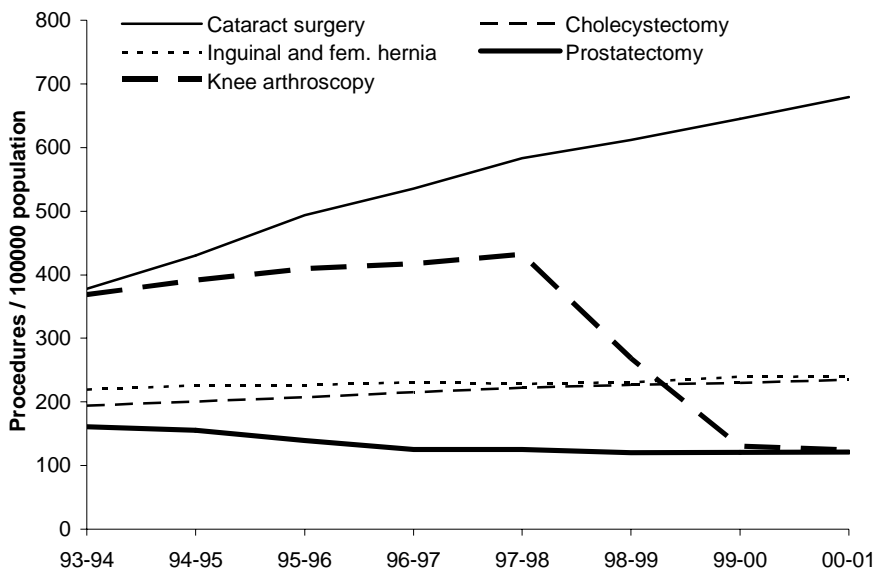


Note:

1. Total surgical procedures are calculated by the addition of total surgical day cases and total surgical in-patients where the data are available.

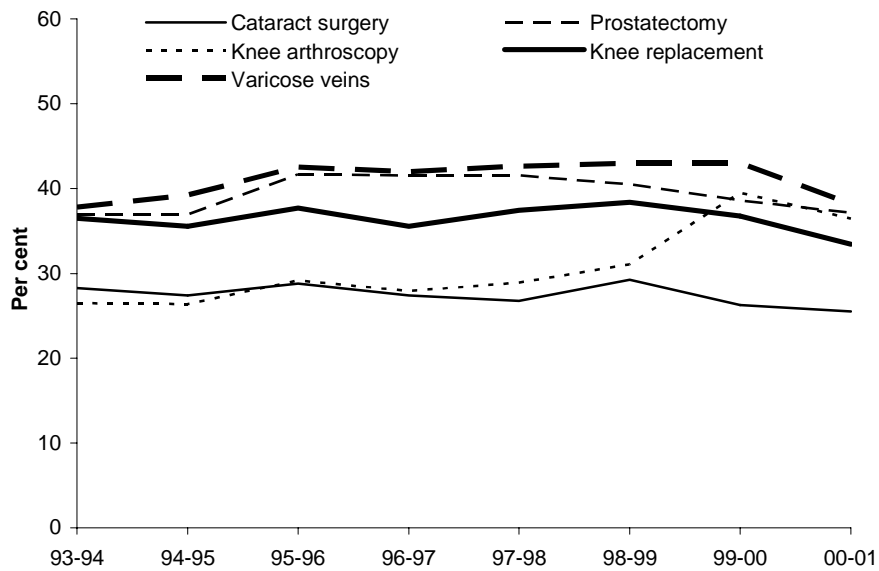
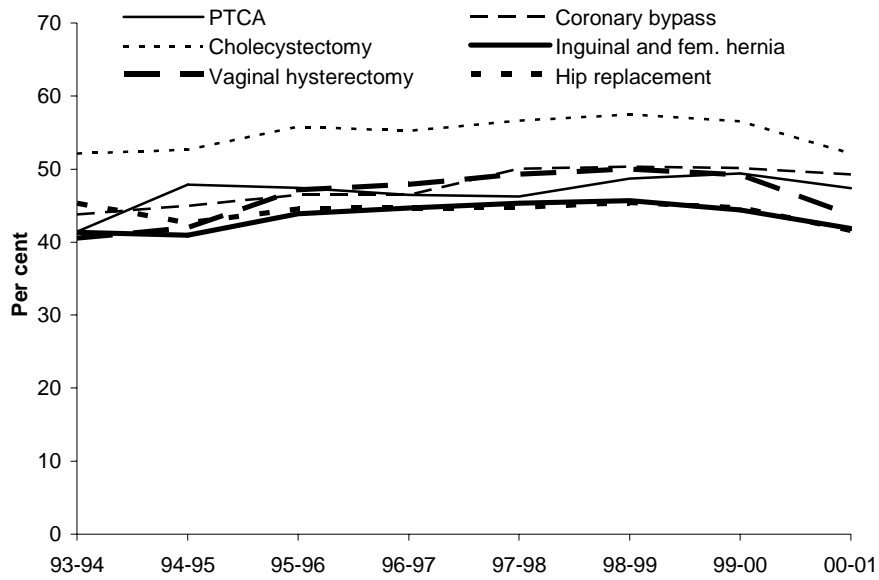
Source: OECD Health Data 2002.

Figure A3.1.2a. and A3.1.2b. Number of treatments (per 100 000 population) by surgical procedure (total)



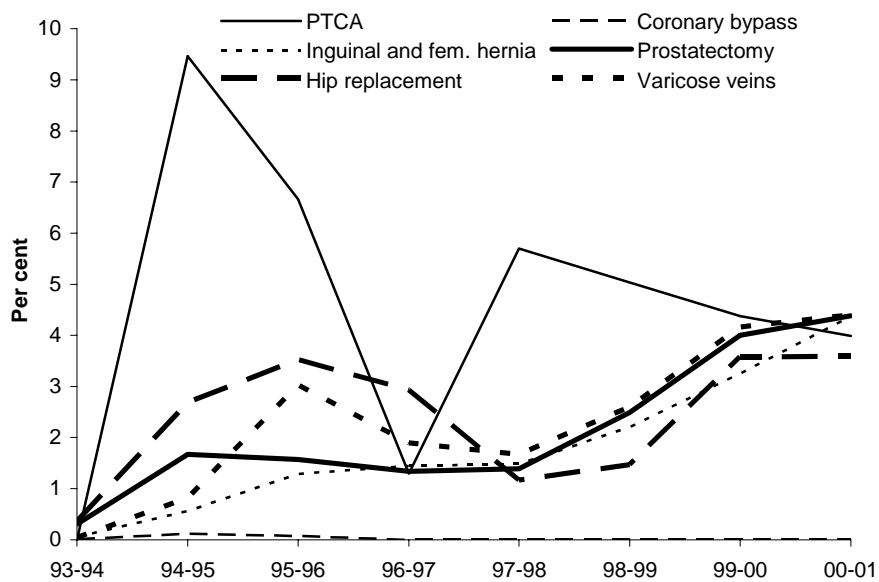
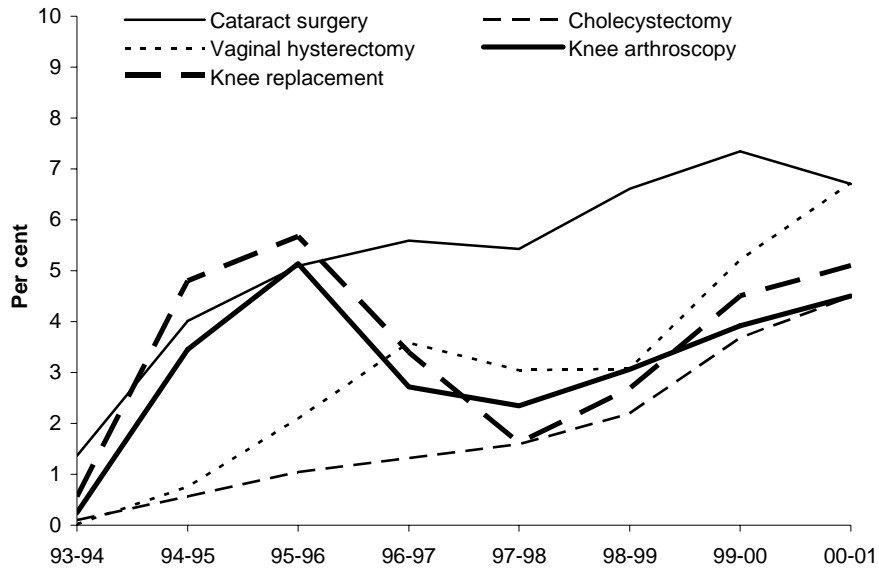
Source: National Hospital Morbidity Database, Australian Institute of Health and Welfare, Australia.

Figure A3.1.3a. and A3.1.3b. Percentage of publicly funded patients over total number of treatments performed (by surgical procedure)

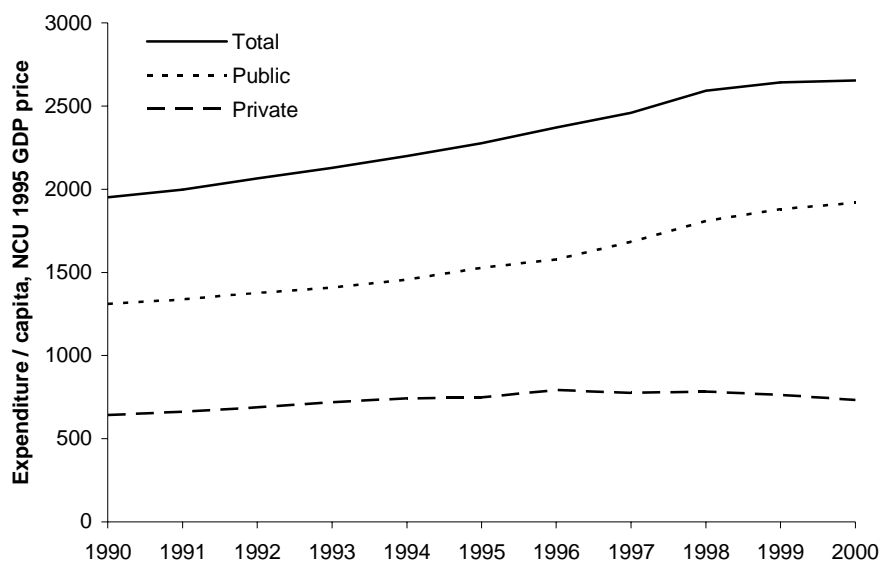


Source: National Hospital Morbidity Database, Australian Institute of Health and Welfare, Australia.

Figure A3.1.4a. and A3.1.4b. Percentage of publicly funded patients treated in privately owned hospitals



Source: National Hospital Morbidity Database, Australian Institute of Health and Welfare, Australia.

Figure A3.1.5. Expenditure on health, per capita, NCU 95 GDP price

Note:

1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

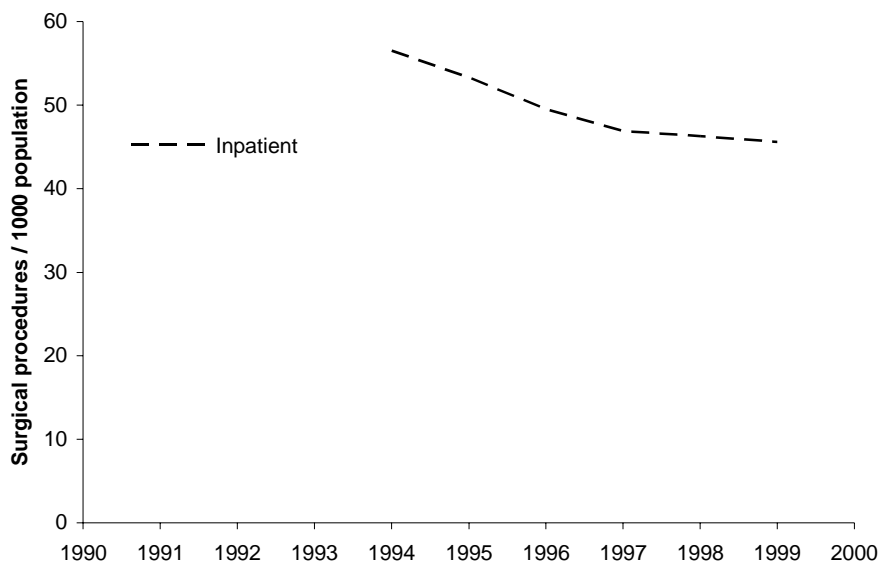
Source: OECD Health Data 2002.

Figure A3.1.6. Number of practising physicians, per 1000 population

Source: OECD Health Data 2002.

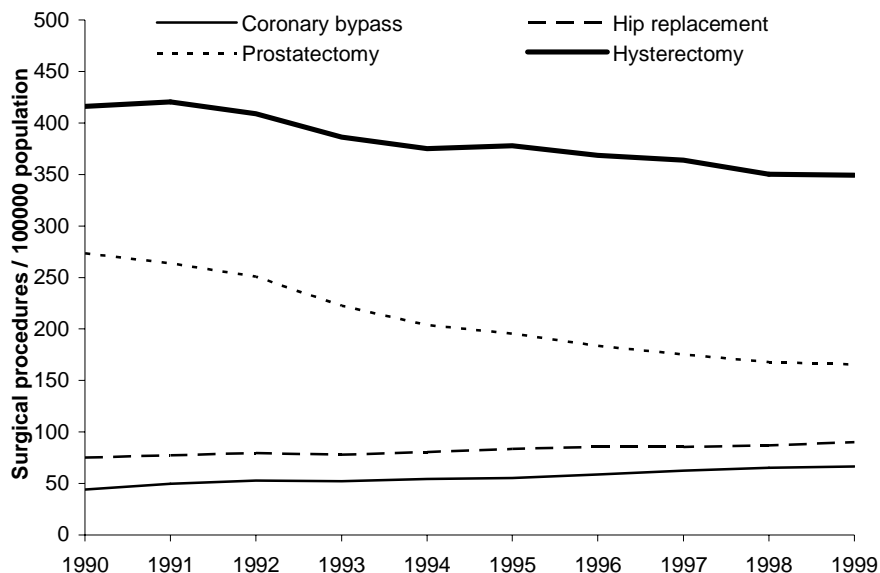
2. CANADA

Figure A3.2.1. Inpatient surgical procedures



Source: OECD Health Data 2002.

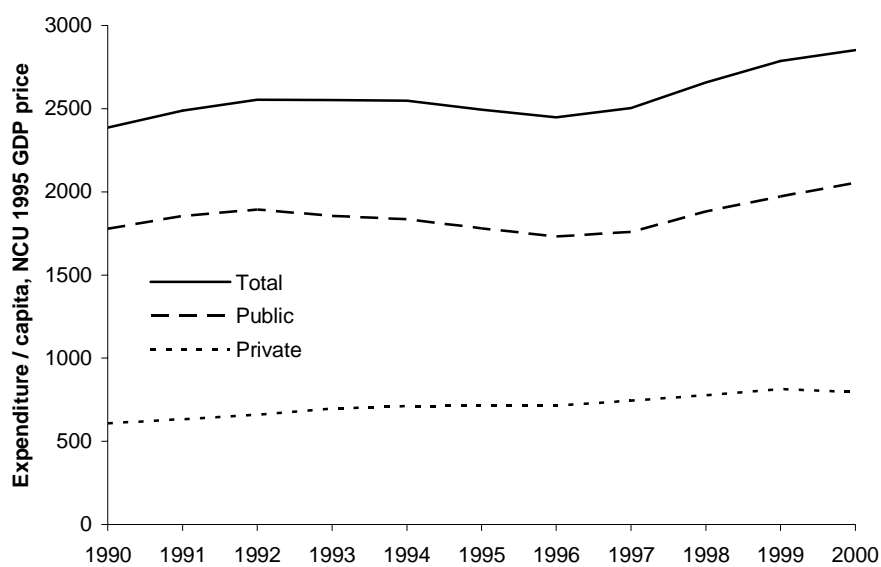
Figure A3.2.2. Number of treatments (per 100 000 population) by surgical procedure



Note:

1. Prostatectomy refers to surgical procedures per 100 000 males.
2. Hysterectomy refers to surgical procedures per 100 000 females.

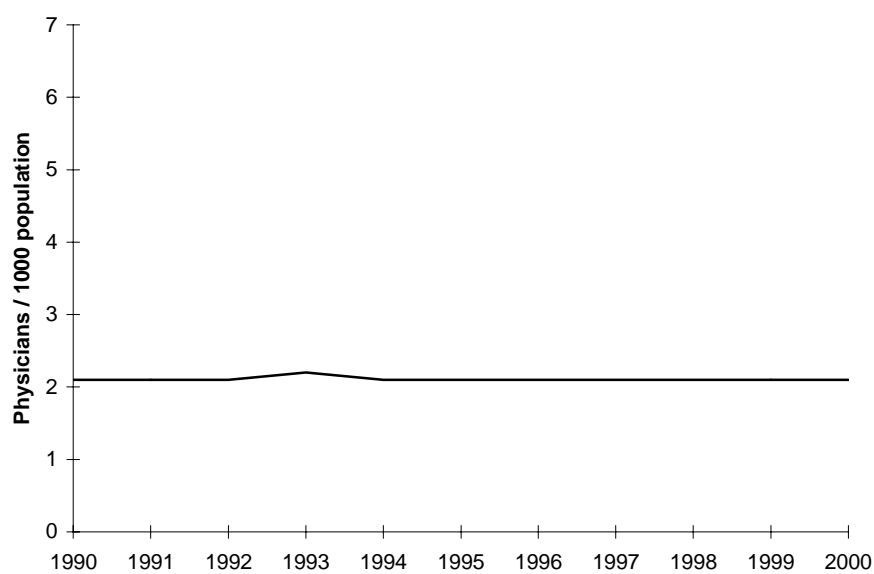
Source: OECD Health Data 2002.

Figure A3.2.3. Expenditure on health, per capita, NCU 95 GDP price

Note:

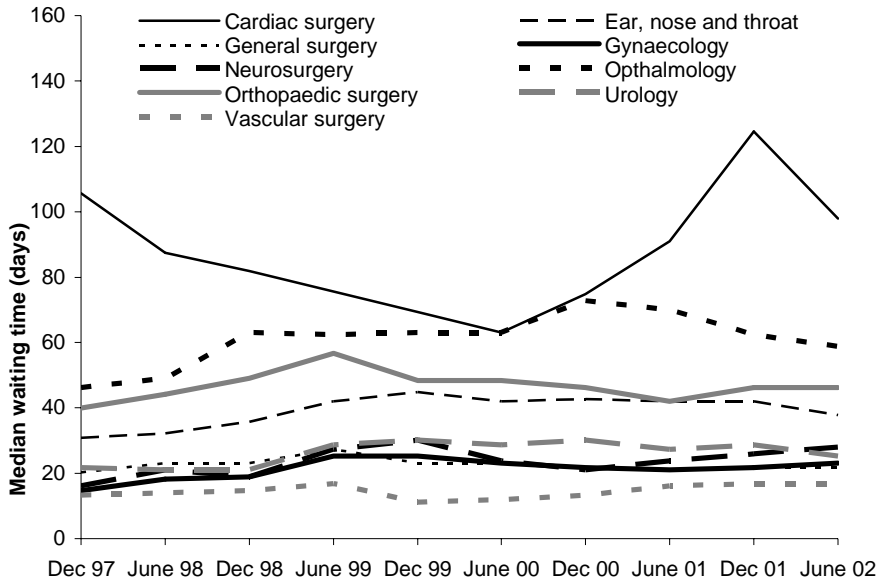
1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

Source: OECD Health Data 2002.

Figure A3.2.4. Number of practising physicians, per 1000 population

Source: OECD Health Data 2002.

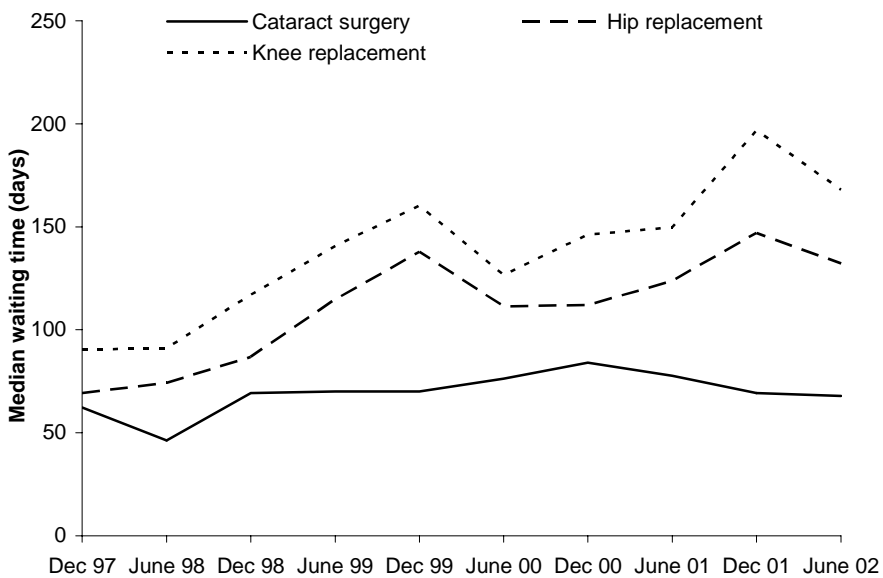
Figure A3.2.5. Median waiting time by speciality, British Columbia



Note: 1. Data refers only to British Columbia.

Source: Ministry of Health Services, Government of British Columbia web-site
<http://www.healthservices.gov.bc.ca/waitlist/provdata.html>.

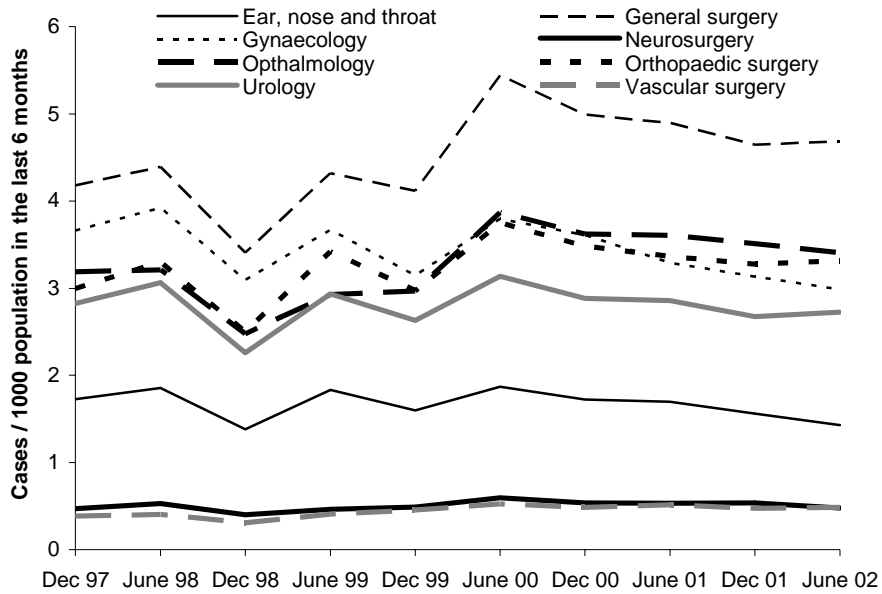
Figure A3.2.6. Median waiting time by surgical procedure, British Columbia



Note: 1. Data refers only to British Columbia.

Source: Ministry of Health Services, Government of British Columbia web-site
<http://www.healthservices.gov.bc.ca/waitlist/provdata.html>.

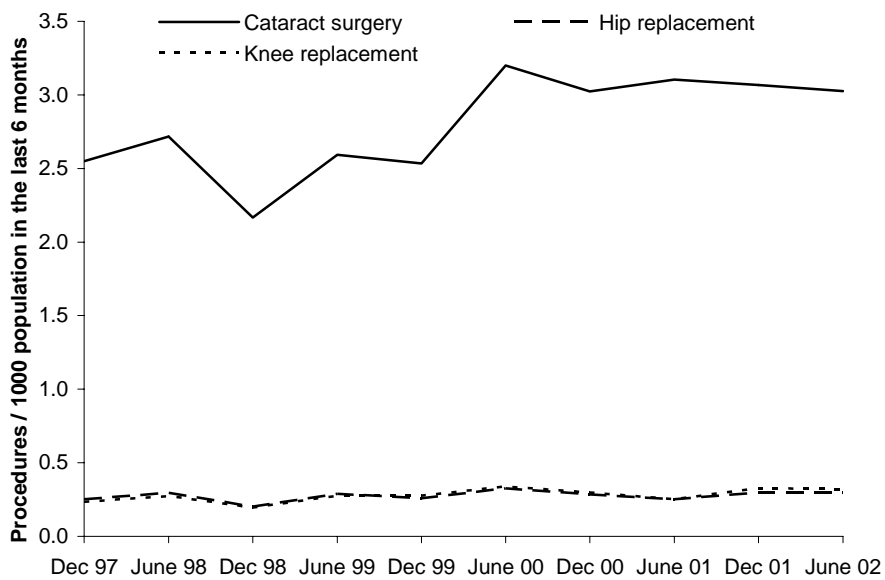
Figure A3.2.7. Number of completed cases by speciality, per 1000 population, British Columbia



Notes: 1. Data refers only to British Columbia.
2. Data refers to completed cases in the preceding 6 months.

Source: Ministry of Health Services, Government of British Columbia web-site
<http://www.healthservices.gov.bc.ca/waitlist/provdata.html>.

Figure A3.2.8. Number of completed cases by surgical procedure, per 1000 population, British Columbia

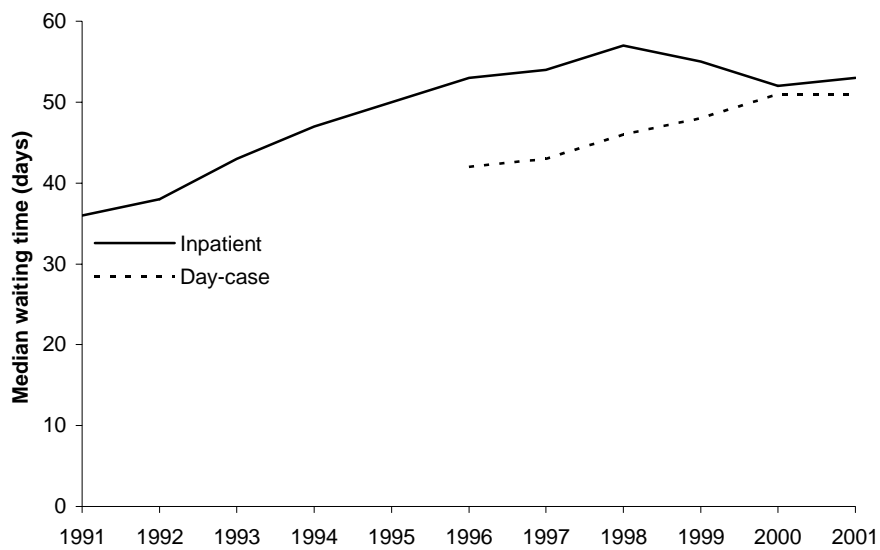


Notes: 1. Data refers only to British Columbia.
2. Data refers to completed cases in the preceding 6 months.

Source: Ministry of Health Services, Government of British Columbia web-site
<http://www.healthservices.gov.bc.ca/waitlist/provdata.html>.

3. DENMARK

Figure A3.3.1. Median waiting time from GP referral to treatment

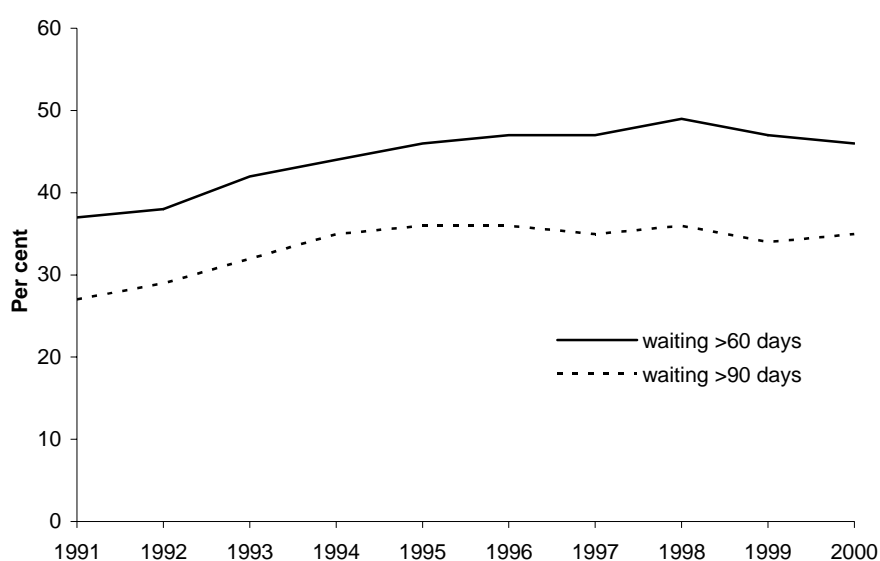


Notes:

1. Waiting times is calculated as the delay between the GP referral and the admission for treatment.
2. 'Inpatient' refers to patients with overnight stay, as opposed to 'day-cases'.
3. Data includes passive waiting time but excludes healthy companions, healthy newborn infants, potential donors and donors. Patients who were admitted as urgent cases but have in fact been waiting for treatment are included as waiting patients.
4. The waiting time data prior to 1999 is corrected to create a continuous time series.
5. Waiting times refers to the patients admitted for treatment (not the patients on the list at a point in time).

Source: Personal correspondence, Department of the Interior and Health, Denmark, 2003.

Figure A3.3.2. Percentage of the patients admitted for treatment waiting longer than 60 days and 90 days

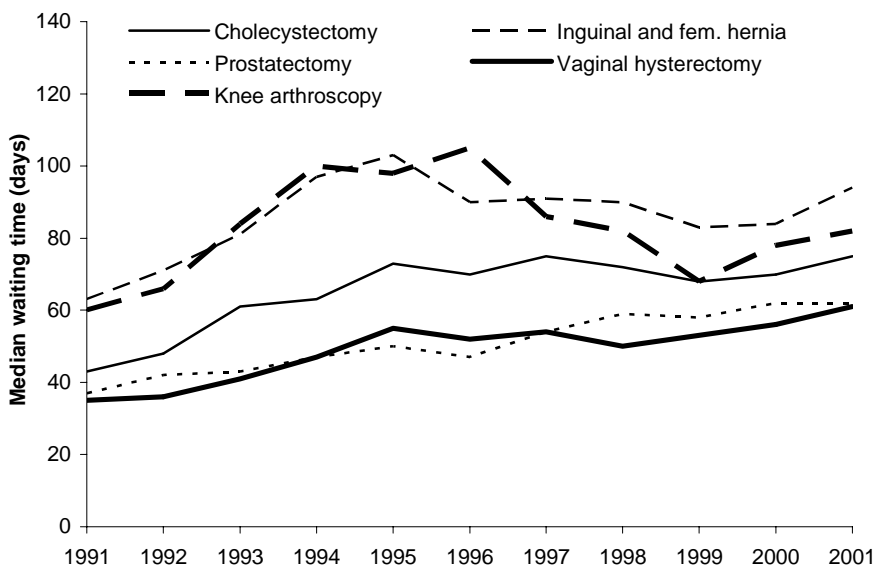
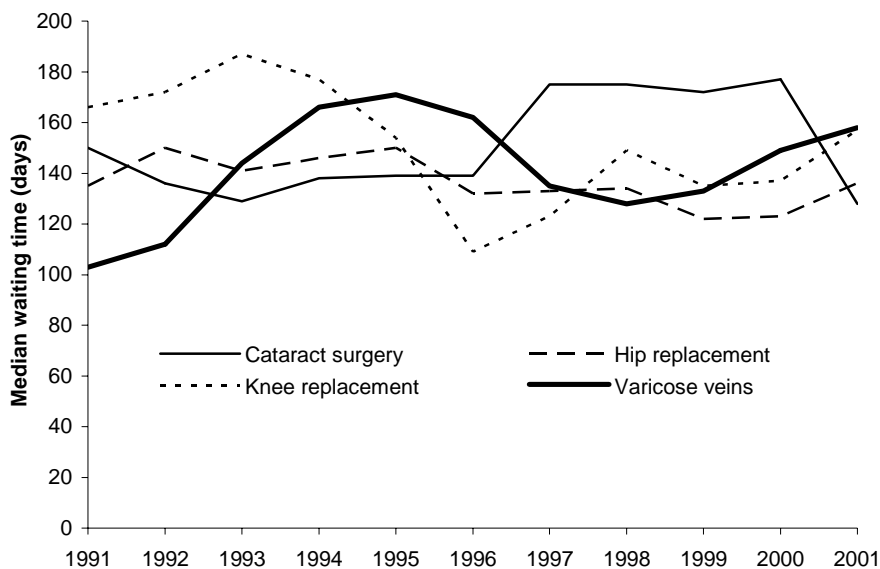


Notes:

1. Waiting time refers to the waiting time for elective surgical overnight stay patients. It includes passive waiting time but excludes healthy companions, healthy newborn infants, potential donors and donors. Patients who were admitted as urgent cases but have in fact been waiting for treatment are included as waiting patients.
2. The waiting time data prior to 1999 is corrected to create a continuous time series.

Sources: The Danish Healthcare Sector in Figures 2001/2002, Danish Ministry of the Interior and Health, 2002; The Danish Health Care Sector in Figures 2000/2001, Danish Ministry of Health, 2001.

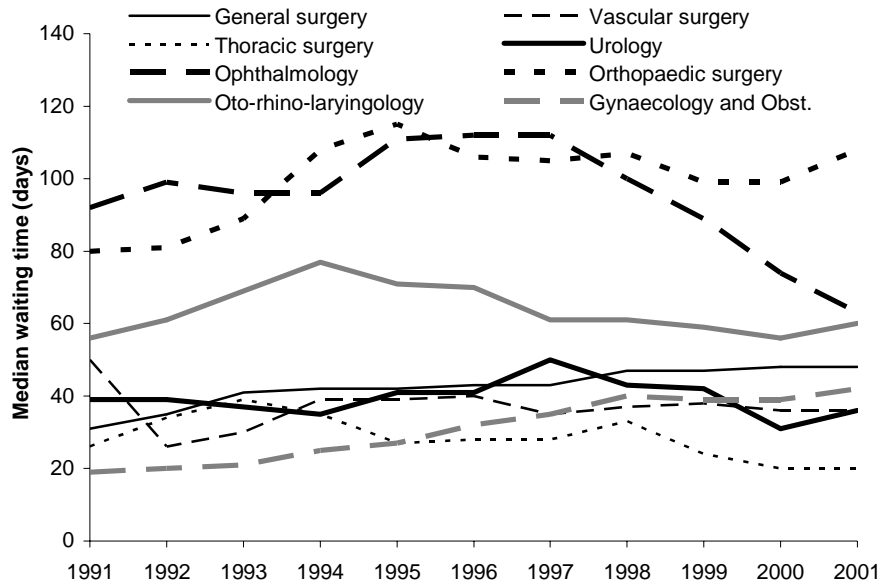
Figure A3.3.3a. and A3.3.3b. Median waiting time from GP referral to treatment by surgical procedure



Notes:

1. Data are for publicly funded patients only.
 2. The waiting time data prior to 1999 is corrected to create a continuous time series.
 3. Waiting times refer to the patients admitted for treatment (not the patients on the list at a point in time).
- Source: Response to OECD Waiting Times data questionnaire, Department of the Interior and Health, Denmark.

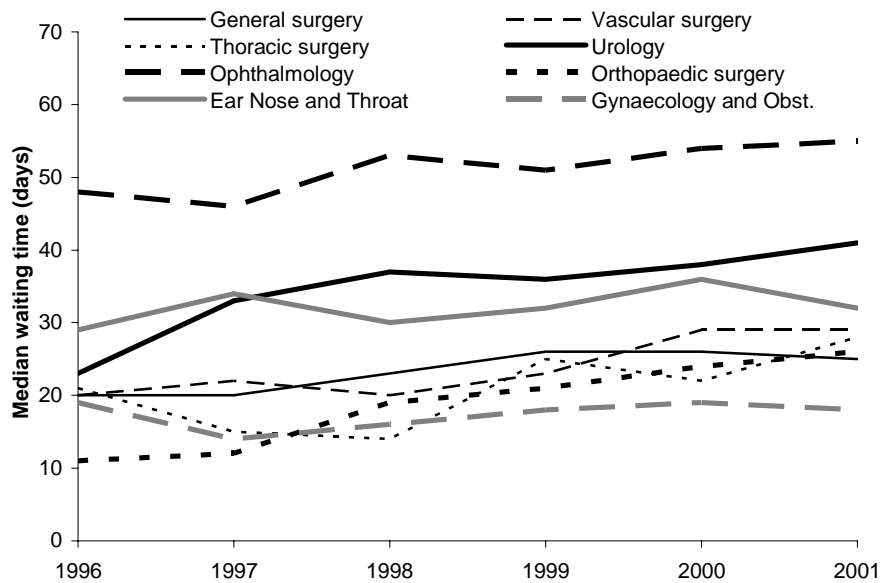
Figure A3.3.4. Median waiting time from GP referral to treatment by speciality



Notes:

1. Data are for publicly funded patients only.
 2. The waiting time data prior to 1999 is corrected to create a continuous time series
 3. Waiting times refers to the patients admitted for treatment (not the patients on the list at a point in time).
- Source: Response to OECD Waiting Times data questionnaire, Department of the Interior and Health, Denmark.

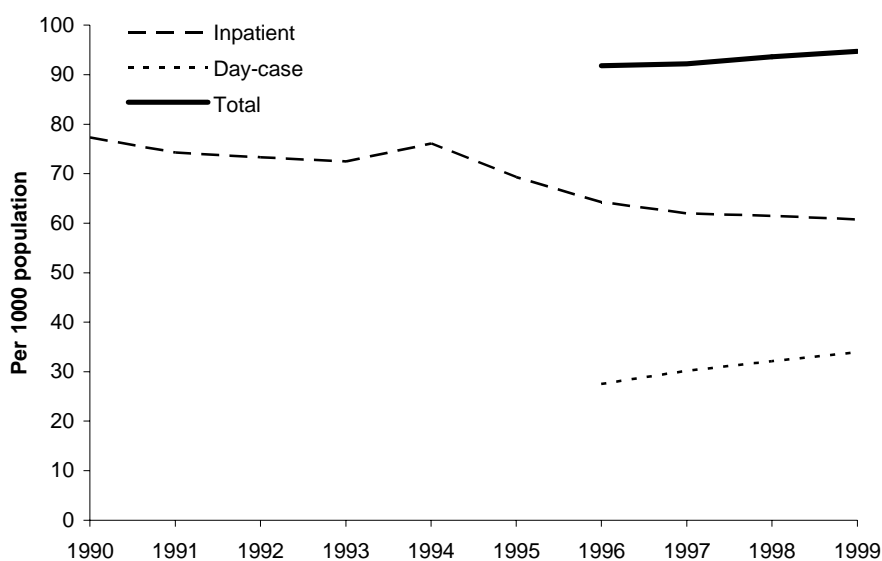
Figure A3.3.5. Median waiting time from GP referral to specialist visit by speciality



Notes:

1. Data are for publicly funded patients only.
 2. The waiting time data prior to 1999 is corrected to create a continuous time series.
 3. Waiting times refer to the patients admitted for treatment (not the patients on the list at a point in time).
- Source: Response to OECD Waiting Times data questionnaire, Department of the Interior and Health, Denmark.

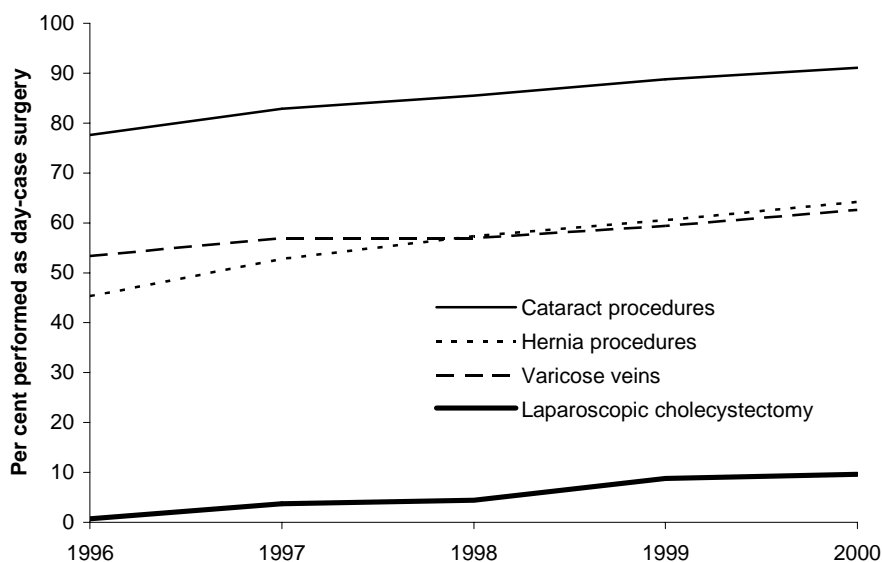
Figure A3.3.6. Inpatient and day-case surgery procedures



Note: 1. Total surgical procedures are calculated by the addition of total surgical day cases and total surgical inpatients where the data are available.

Source: OECD Health Data 2002.

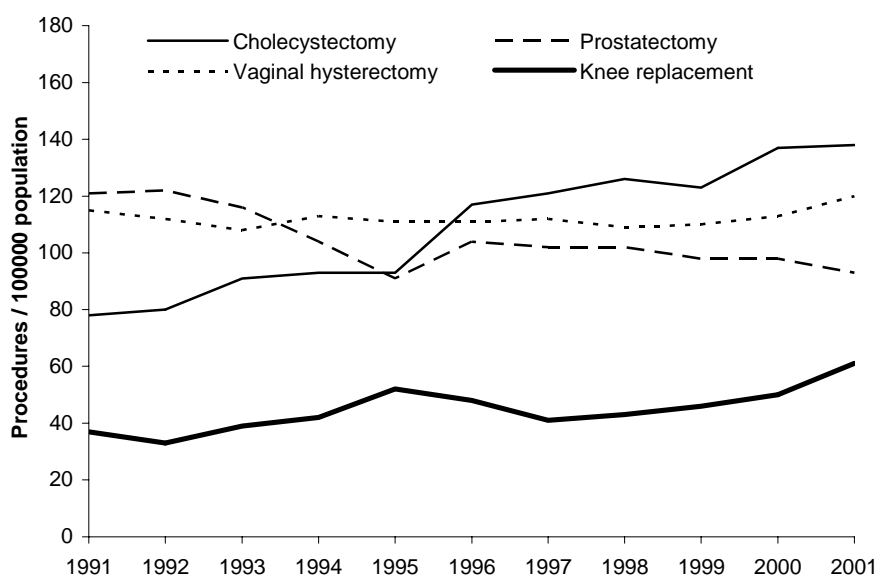
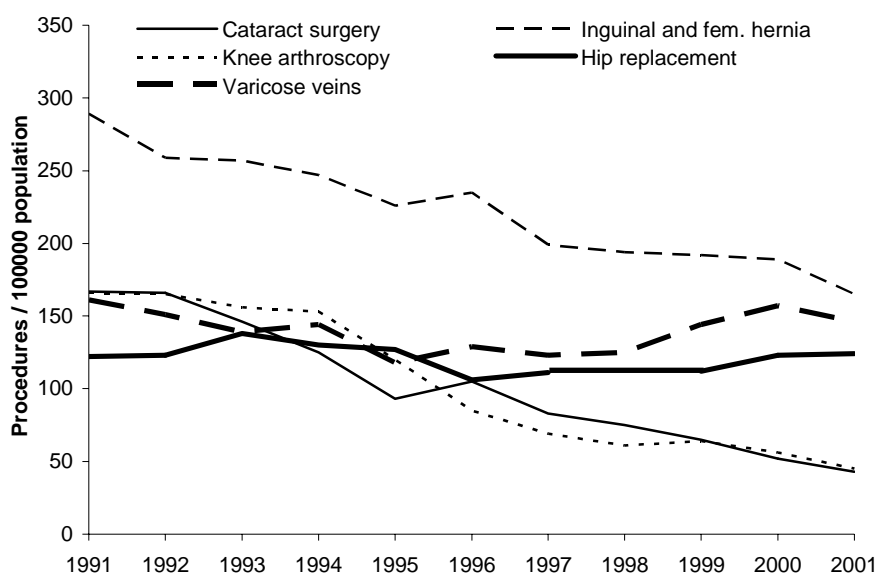
Figure A3.3.7. Percentage of the patients treated as day-cases for selected surgical procedures



- Notes:
1. Per cent day-case surgery refers to the number of elective operations performed on a day-case basis divided by the number of elective operations.
 2. Inpatients who are discharged the same day as they are admitted and are not transferred to another overnight-stay ward are counted as day-cases.
 3. Only elective operations are included. Only operations registered as primary or most important in a contact are examined.

Sources: *The Danish Healthcare Sector in Figures 2001/2002*, Danish Ministry of the Interior and Health, 2002; *The Danish Health Care Sector in Figures 2000/2001*, Danish Ministry of Health, 2001. OECD Health Data 2002.

Figure A3.3.8a. and A3.3.8b. Number of treatments (per 100 000 population) by surgical procedure

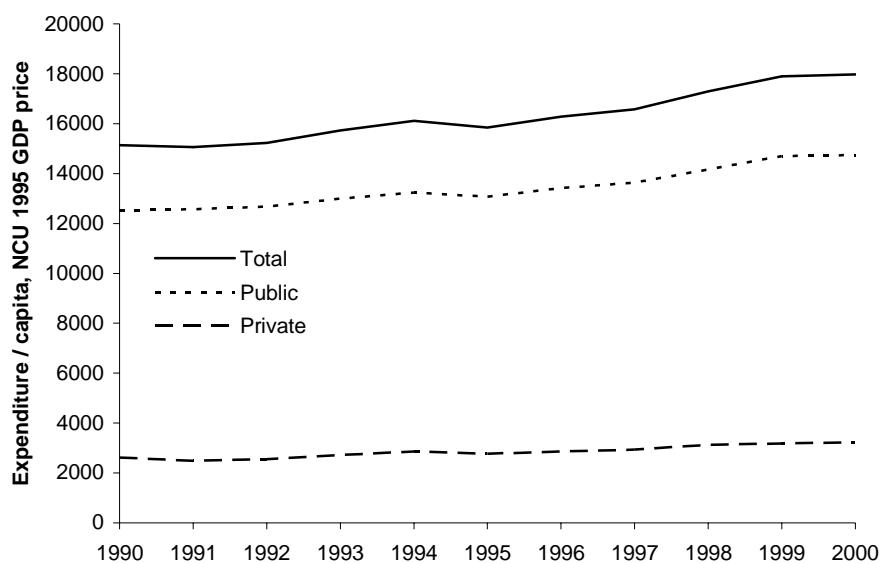


Note:

1. Data are for publicly funded inpatients only.

Source: Response to OECD Waiting Times data questionnaire, Department of the Interior and Health, Denmark.

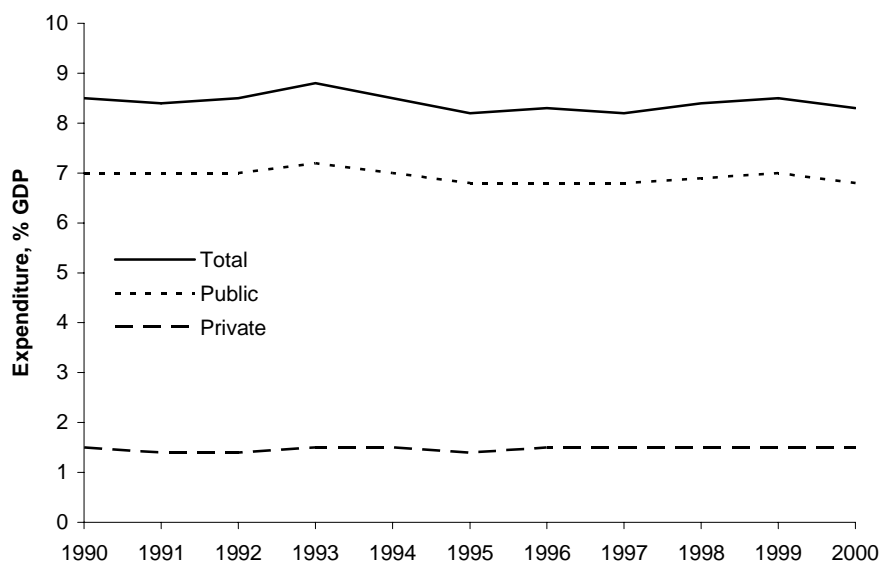
Figure A3.3.9. Expenditure on health, per capita, NCU 95 GDP price



Note: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

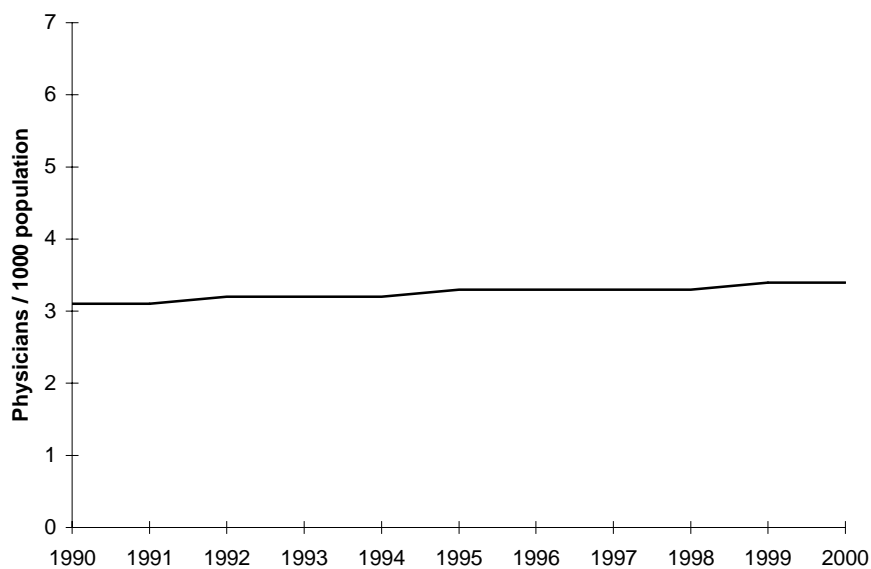
Source: OECD Health Data 2002.

Figure A3.3.10. Expenditure on health, as a percentage of GDP

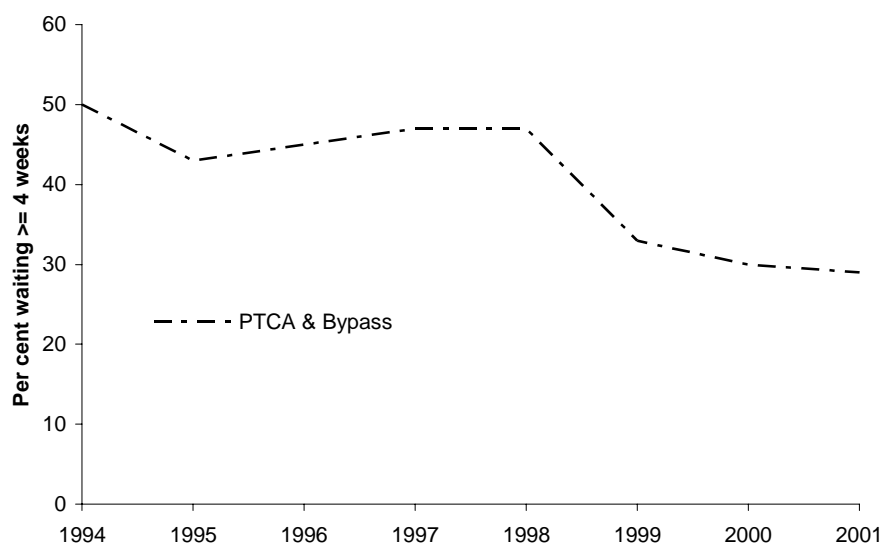


Note: 1. Expenditure is displayed as a percent of GDP.

Source: OECD Health Data 2002.

Figure A3.3.11. Number of practising physicians, per 1000 population

Source: OECD Health Data 2002.

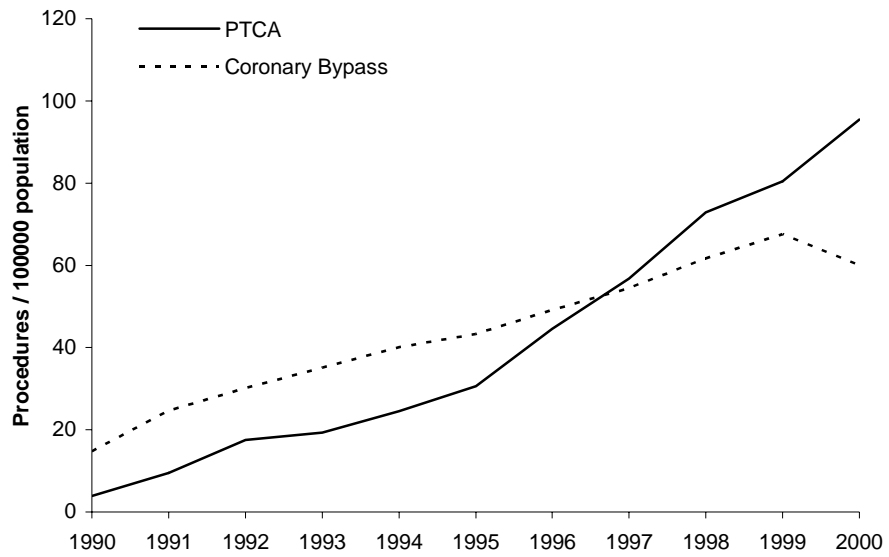
Figure A3.3.12. Waiting times for cardiac surgery

Notes:

1. The 2001 waiting times data cover the period up to 31.10.2001.
2. PTCA refers to Percutaneous Transluminal Coronary Angioplasty.

Sources: *The Danish Healthcare Sector in Figures 2001/2002*, Danish Ministry of the Interior and Health, 2002; *The Danish Health Care Sector in Figures 2000/2001*, Danish Ministry of Health, 2001.

Figure A3.3.13. Volume of procedures for cardiac surgery



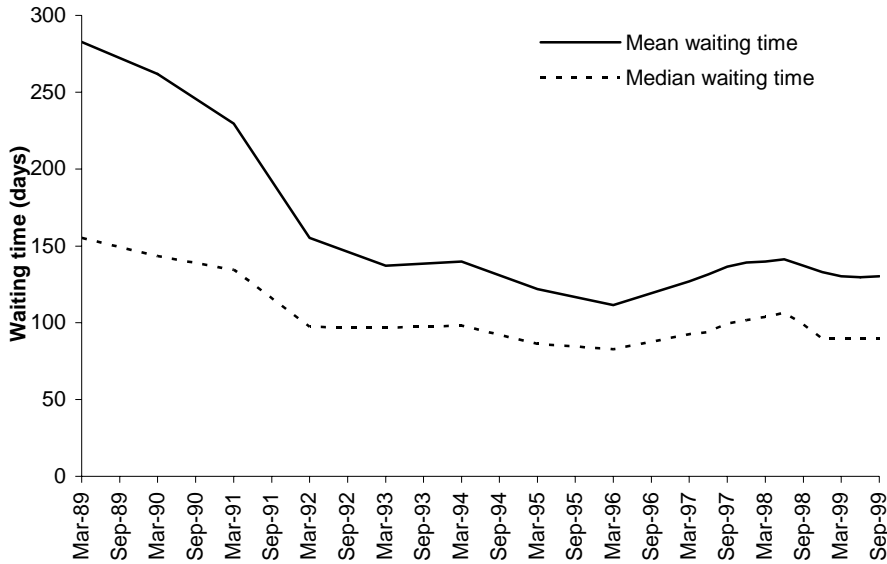
Notes:

1. PTCA refers to Percutaneous Transluminal Coronary Angioplasty with the ICD-9-CM category 36.0.
2. Coronary bypass refers to the ICD-9-CM category 36.1.

Source: OECD Health Data 2002.

4. ENGLAND

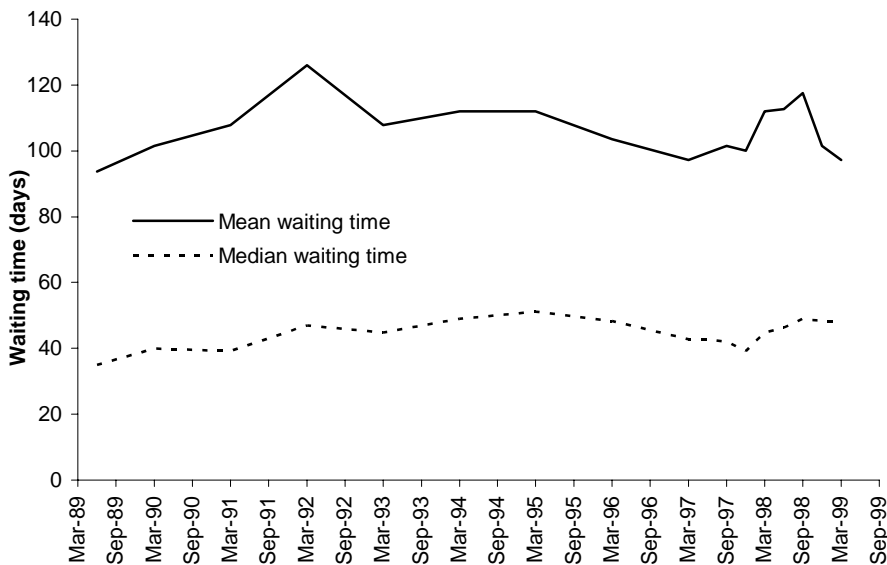
Figure A3.4.1. Mean and median inpatient waiting time of patients on the list



- Notes: 1. Waiting time takes into account periods of suspension or self-deferrals.
 2. Data for 1998/99 is provisional.

Source: Quarterly Körner waiting list returns.

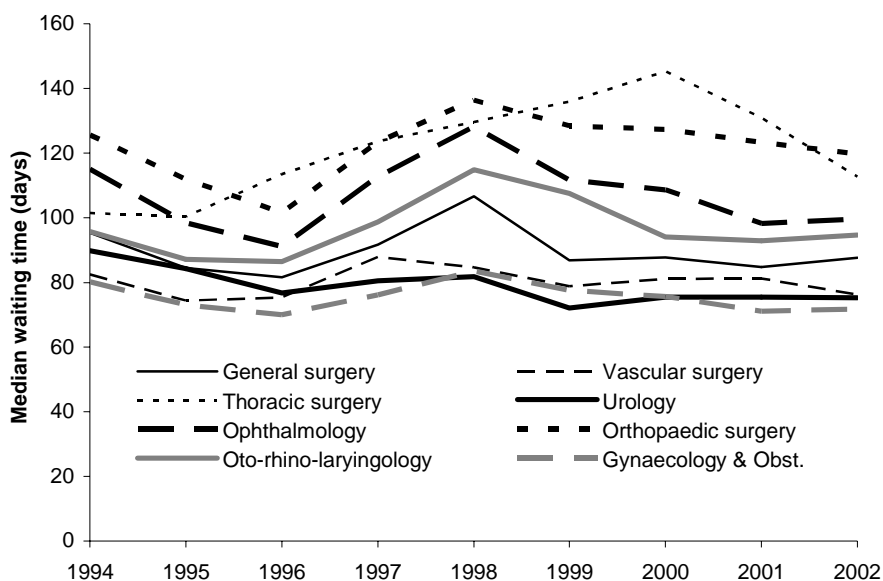
Figure A3.4.2. Mean and median inpatient waiting time of patients admitted



- Notes: 1. Waiting time refers to the period between the date of the decision to admit and the date of eventual admission in a NHS hospital.
 2. Waiting time does not take into account periods of suspension or self-deferrals.
 3. Data for 1998/99 is provisional.

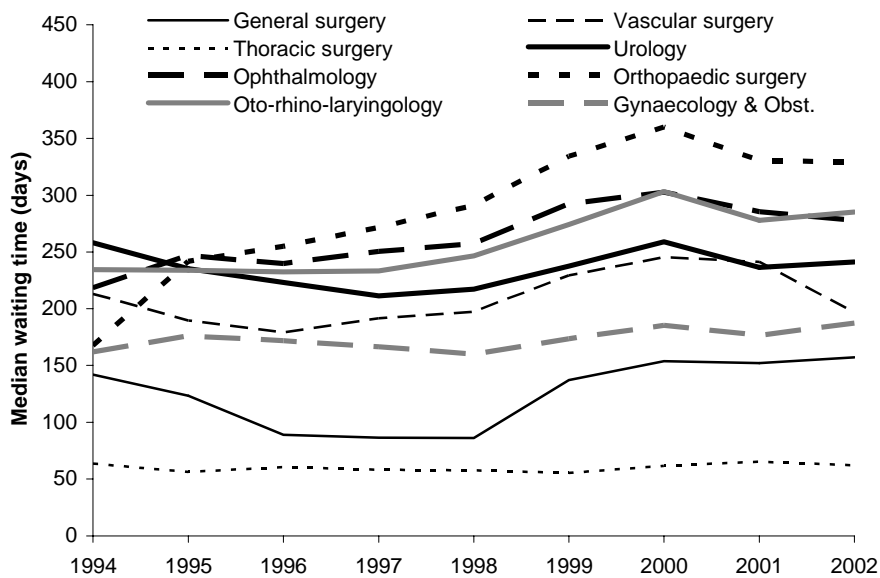
Source: Hospital Episode Statistics.

Figure A3.4.3. Median inpatient waiting time of patients admitted by speciality



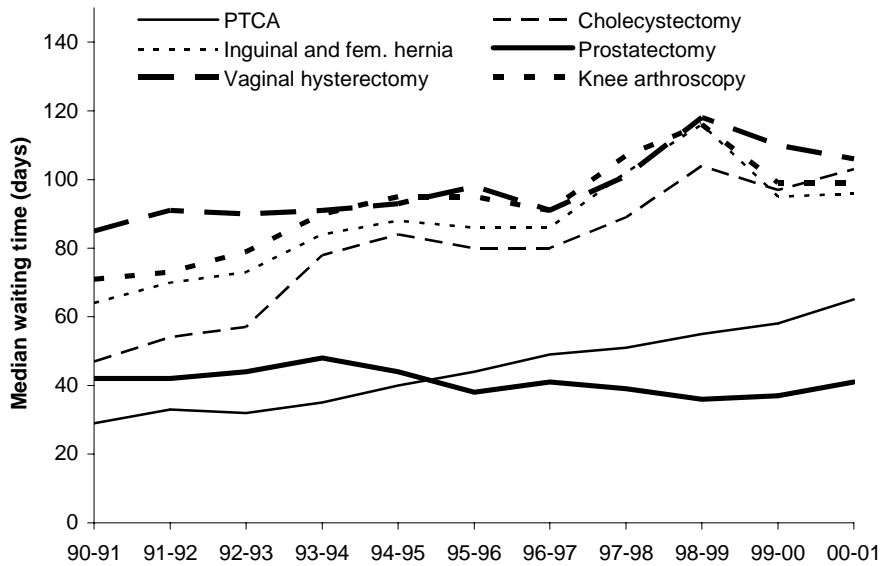
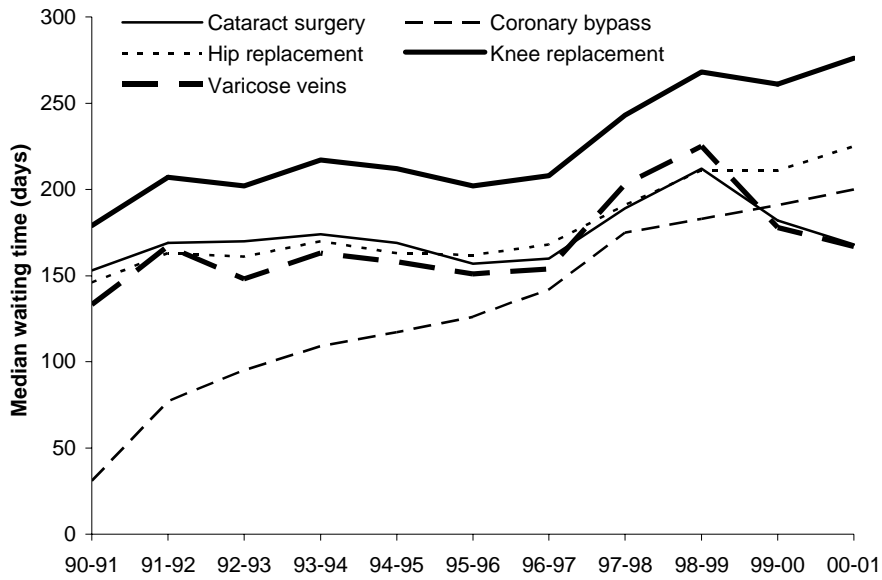
Note: 1. Data are for publicly funded patients only.
 Source: Response to OECD Waiting Times data questionnaire, Department of Health, England.

Figure A3.4.4. Median outpatient waiting time of patients admitted by speciality



Note: 1. Data are for publicly funded patients only.
 Source: Response to OECD Waiting Times data questionnaire, Department of Health, England.

Figure A3.4.5a. and A3.4.5b. Median inpatient waiting time of patients admitted by main surgical procedure

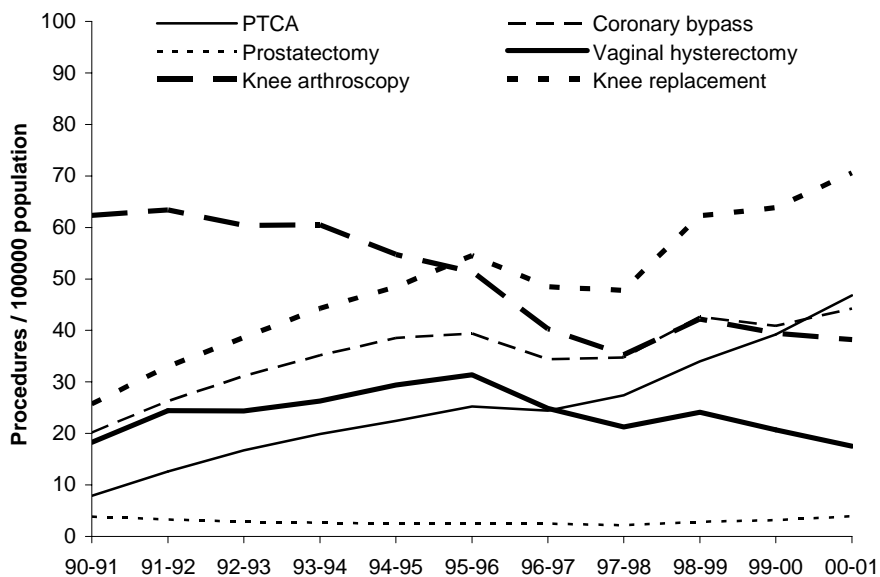
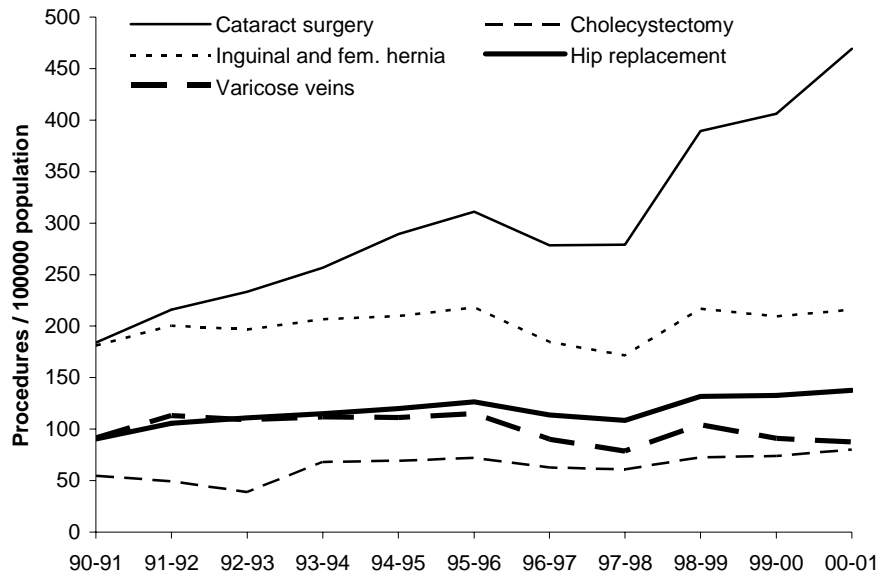


Note:

1. Data are for publicly funded patients only.

Source: Response to OECD Waiting Times data questionnaire, Department of Health, England.

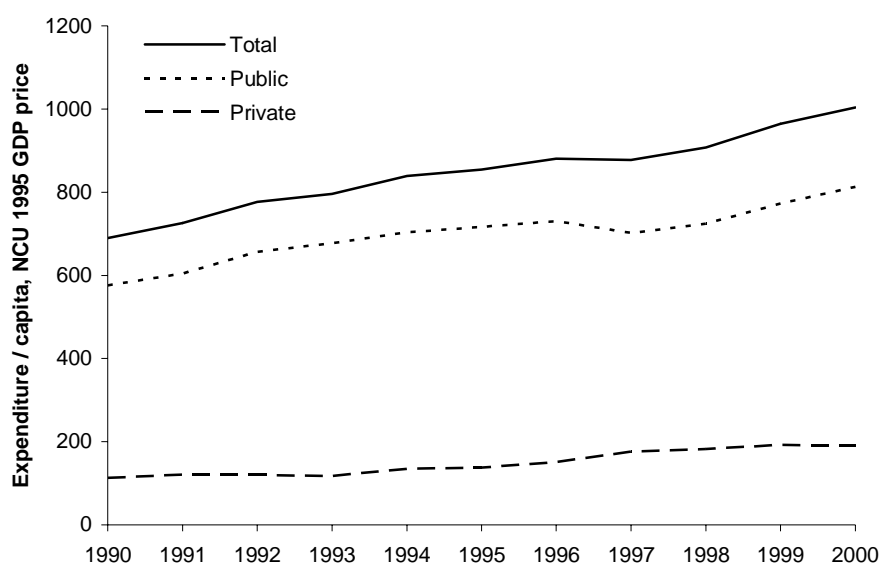
Figure A3.4.6a. and A3.4.6b. Number of treatments (per 100 000 population) by main surgical procedure



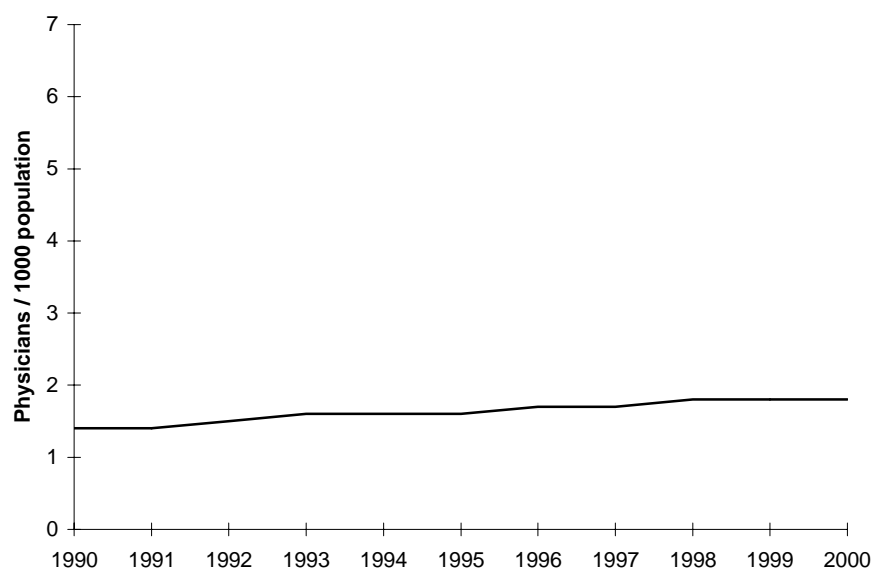
Note:

1. Data are for publicly funded patients only.

Source: Response to OECD Waiting Times data questionnaire, Department of Health, England.

Figure A3.4.7. Expenditure on health, per capita, NCU 95 GDP price

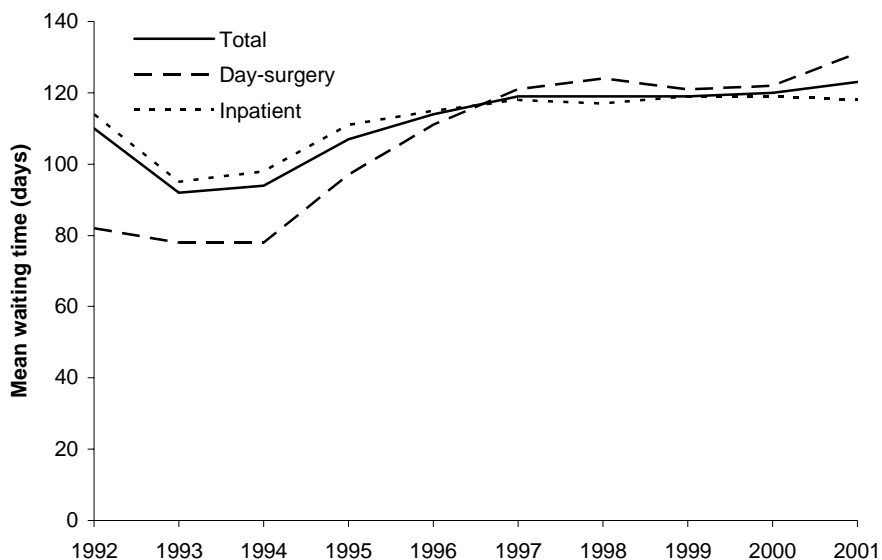
Notes: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.
 2. Data refers to the United Kingdom.
 Source: OECD Health Data 2002.

Figure A3.4.8. Number of practising physicians, per 1000 population

Note: 1. Data refers to the United Kingdom.
 Source: OECD Health Data 2002.

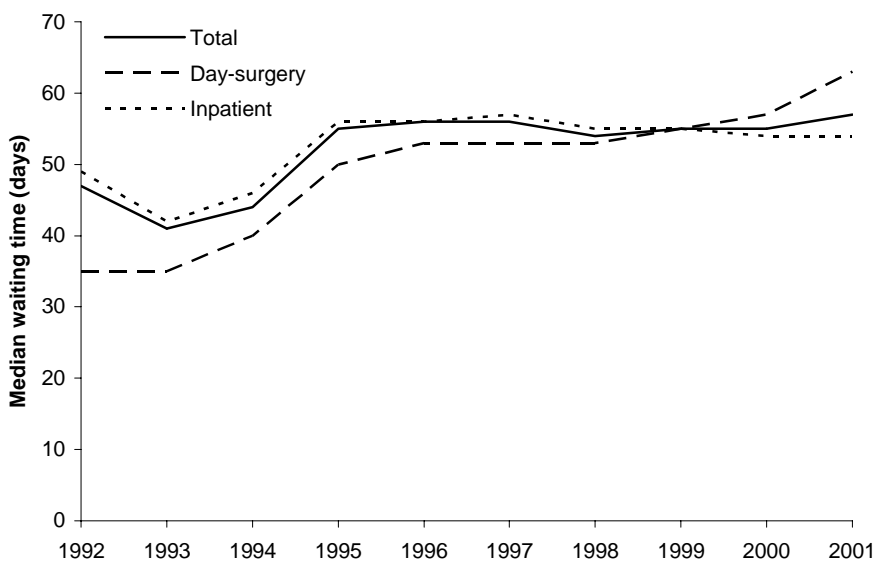
5. FINLAND

Figure A3.5.1. Mean waiting time for the patients admitted (total, inpatient, day-surgery).



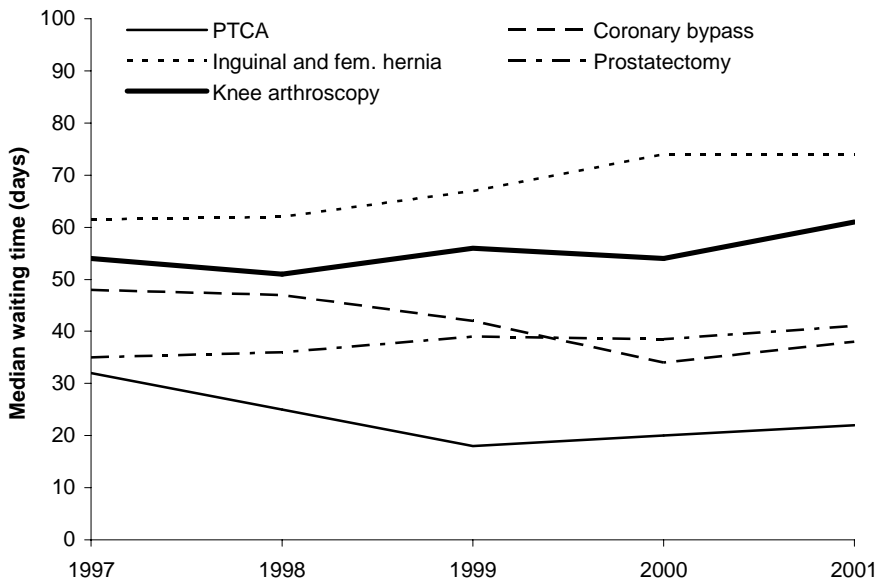
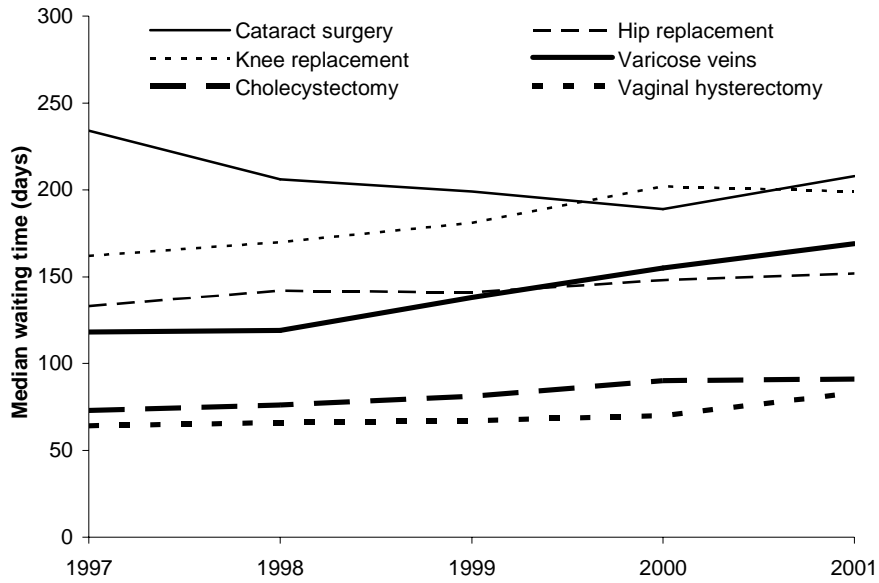
Source: Personal correspondence, Stakes, Finland.

Figure A3.5.2. Median waiting time for the patients admitted (total, inpatient, day-surgery).



Source: Personal correspondence, Stakes, Finland.

Figure A3.5.3a. and A3.5.3b. Median inpatient waiting time for the patients admitted by surgical procedure

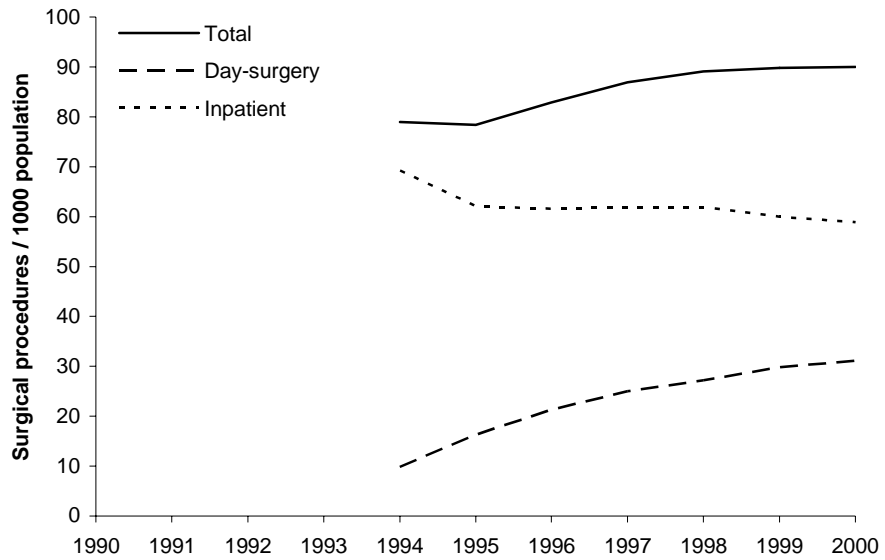


Notes:

1. Data refers only to patients admitted to public hospitals.
2. Patients who have been admitted as 'out-of-hours' (emergency) cases or have been transferred from an outpatient clinic or another department within the same hospital or from another hospital, have been excluded.

Source: Response to OECD Waiting Times questionnaire, Stakes, Finland.

Figure A3.5.4. Inpatient and day-case surgery procedures

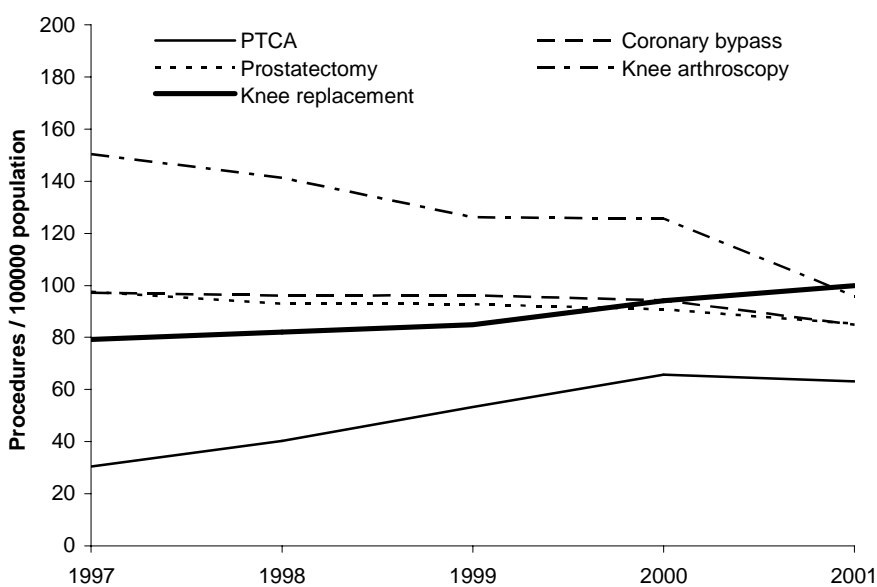
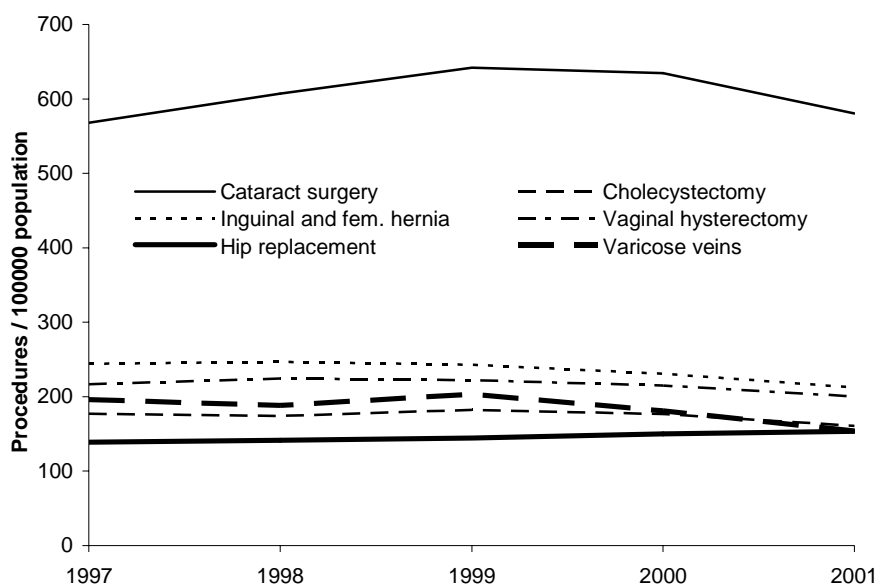


Note:

1. Total surgical procedures are calculated by the addition of total surgical day cases and total surgical in-patients where the data are available.

Source: OECD Health Data 2002.

Figure A3.5.5a. and A3.5.5b. Number of treatments (per 100 000 population) by surgical procedure

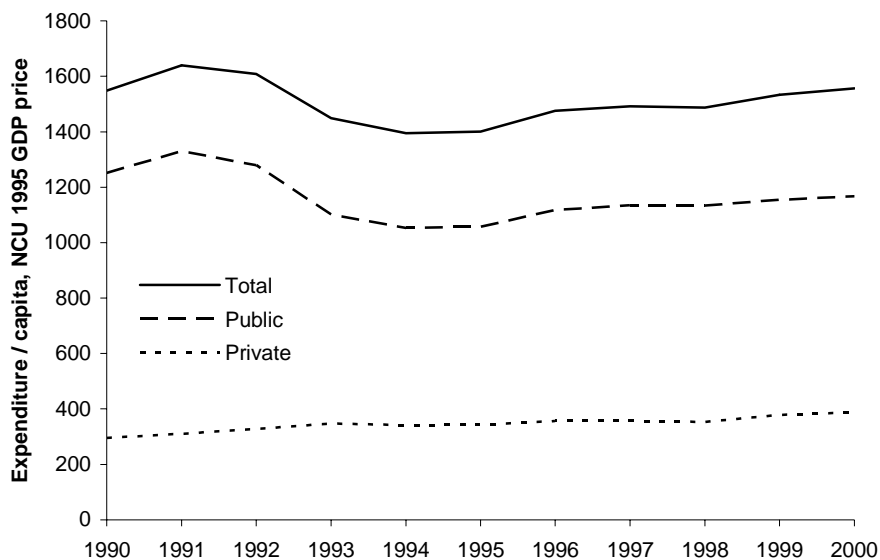


Note:

1. Data refers to all patients for both public and private providers.
2. All types of admissions including booked admissions, out-of-hours cases (emergency), transfers from other hospitals are included.

Source: Response to OECD Waiting Times questionnaire, Stakes, Finland.

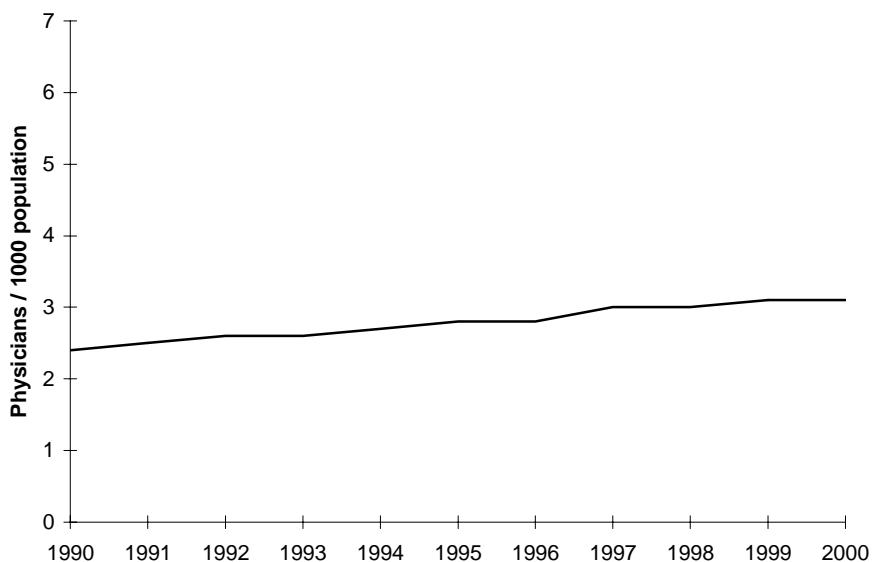
Figure A3.5.6. Expenditure on health, per capita, NCU 95 GDP price



Note: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

Source: OECD Health Data 2002.

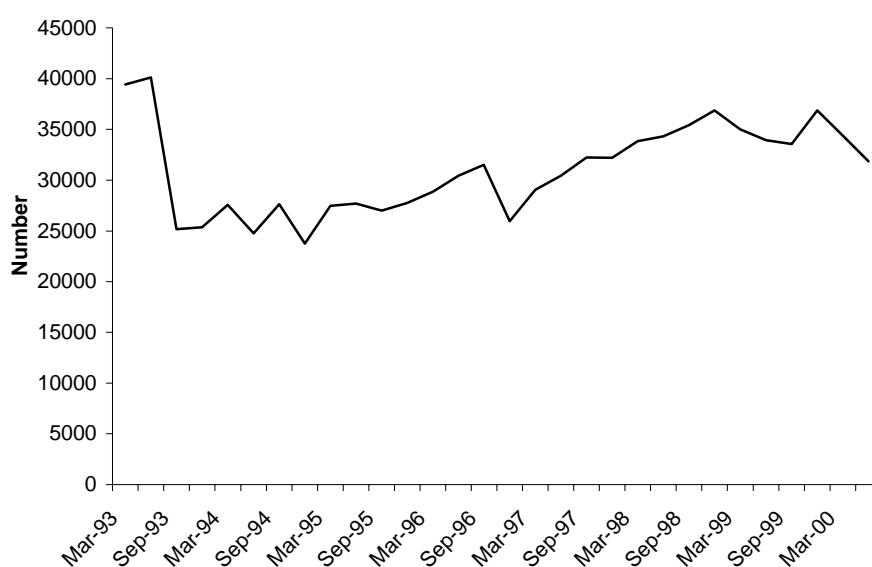
Figure A3.5.7. Number of practising physicians, per 1000 population



Source: OECD Health Data 2002.

6. IRELAND

Figure A3.6.1. Number of patients on the list waiting longer than three months

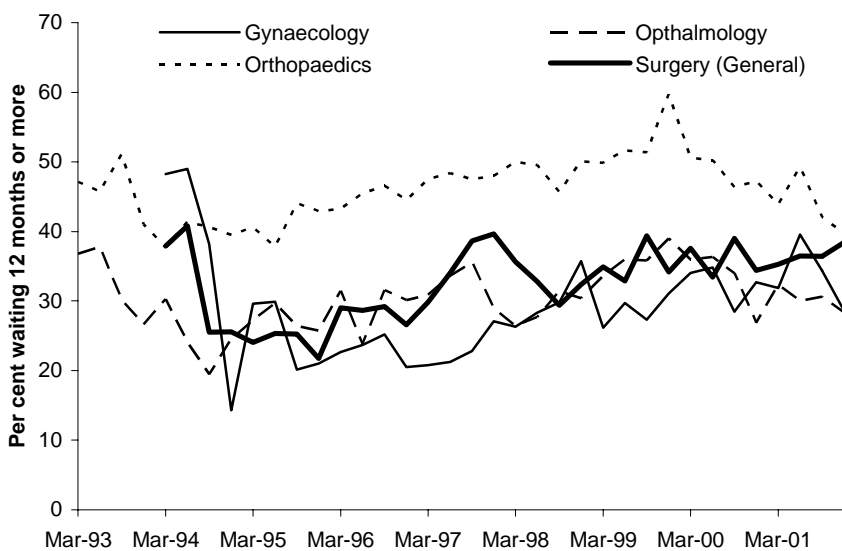
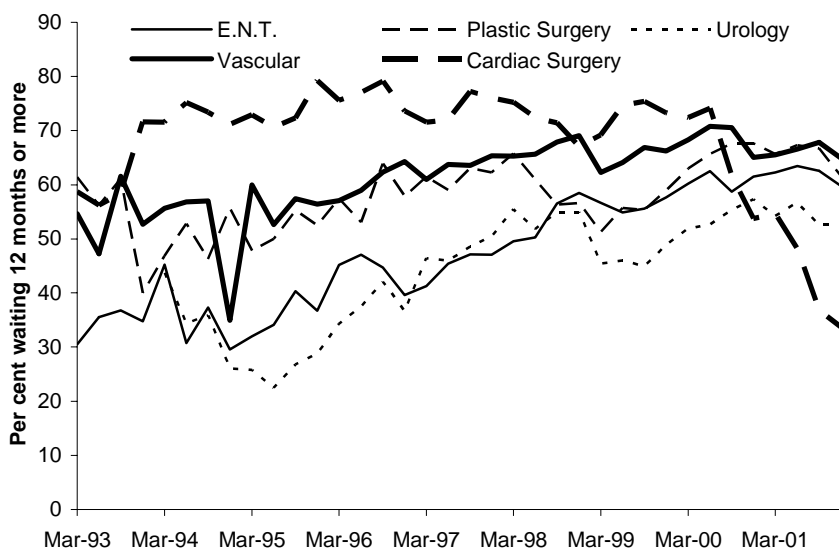


Notes:

1. Number refers to the number of patients on the waiting list who have been waiting longer than three months for treatment.
2. Day surgery is not included.

Sources: A comparative analysis of waiting lists for acute hospital treatment in EU countries, Department of Health and Children, Ireland; Report of the review group on the waiting list initiative Department of Health and Children, Ireland; Department of Health and Children, Ireland (personal correspondence).

Figure A3.6.2a and A3.6.2b. Waiting time by main speciality

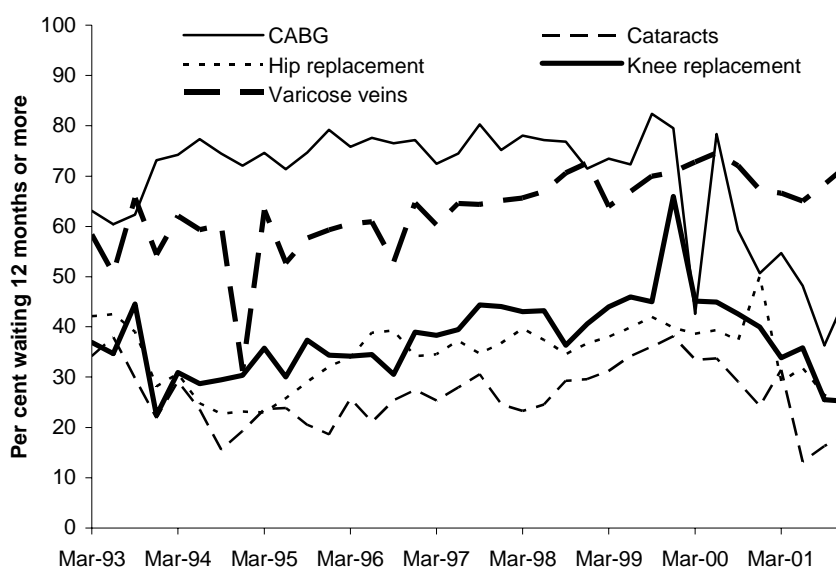


Notes:

1. Per cent refers to the number of patients who are on the list and have been waiting at least 12 months for treatment divided by the number of patients on the list.
2. Day surgery is not included.

Source: Response to OECD Waiting Times questionnaire, Department of Health and Children, Ireland.

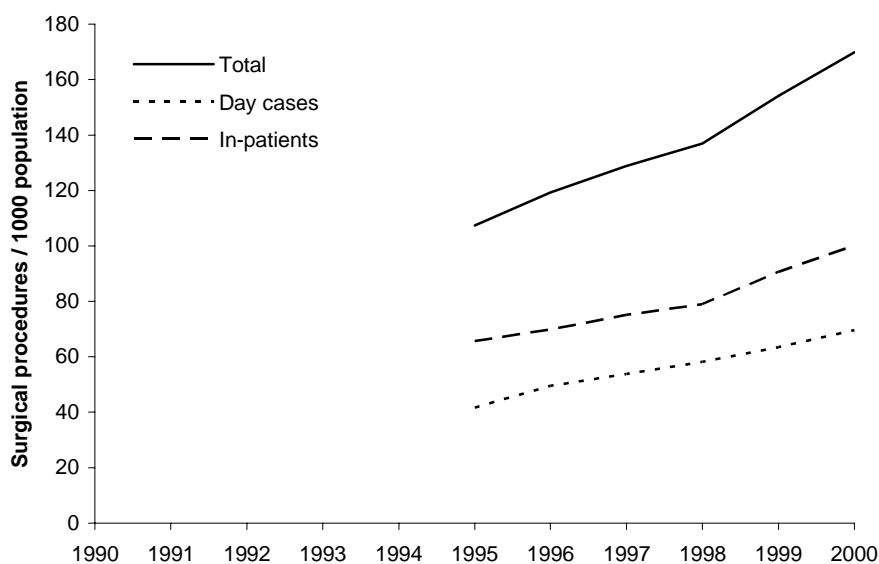
Figure A3.6.3. Waiting time by main surgical procedure



- Notes:
1. Per cent refers to the number of patients who have been waiting at least 12 months for treatment divided by the total number of patients on the list.
 2. Day surgery is not included.

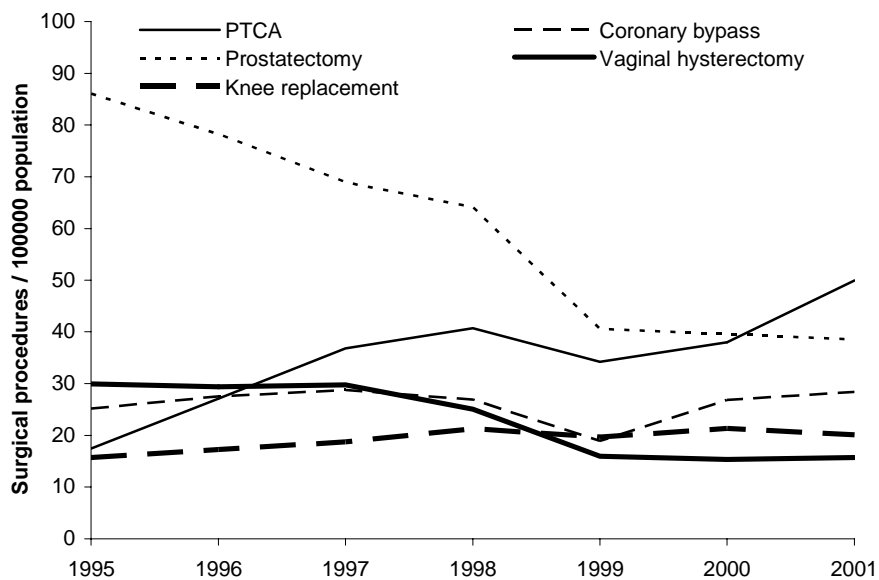
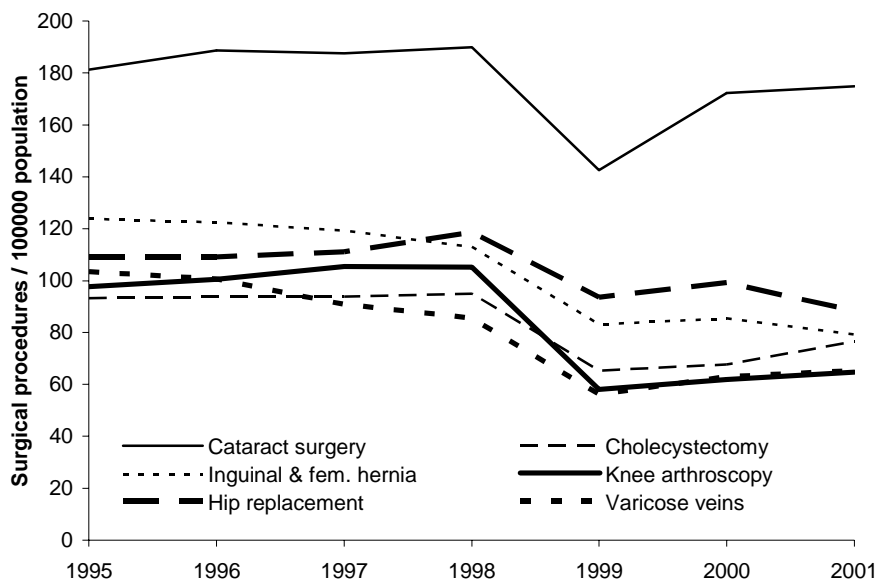
Source: Response to OECD Waiting Times questionnaire, Department of Health and Children, Ireland.

Figure A3.6.4. Number of surgical treatments (per 100 000 population)



- Notes:
1. Total surgical procedures are calculated by the adding surgical day cases and surgical in-patients.
 2. The data for day cases are based on all procedures and not just invasive surgical procedures.
- Source: OECD Health Data 2002.

Figure A3.6.5a and A3.6.5b. Number of treatments (per 100 000 population) by main surgical procedure

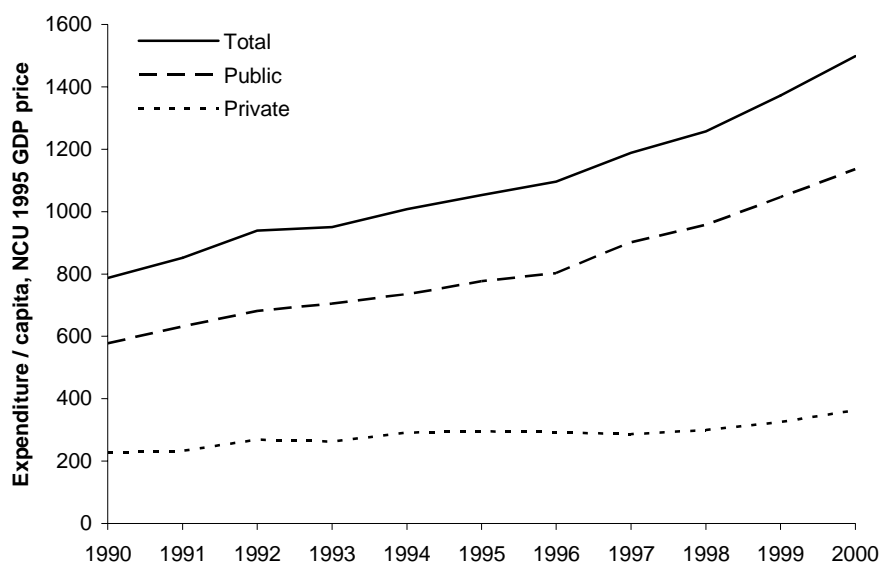


Note:

1. Data are for publicly funded patients only.

Source: Response to OECD Waiting Times questionnaire, Department of Health and Children, Ireland.

Figure A3.6.6. Expenditure on health, per capita, NCU 95 GDP price

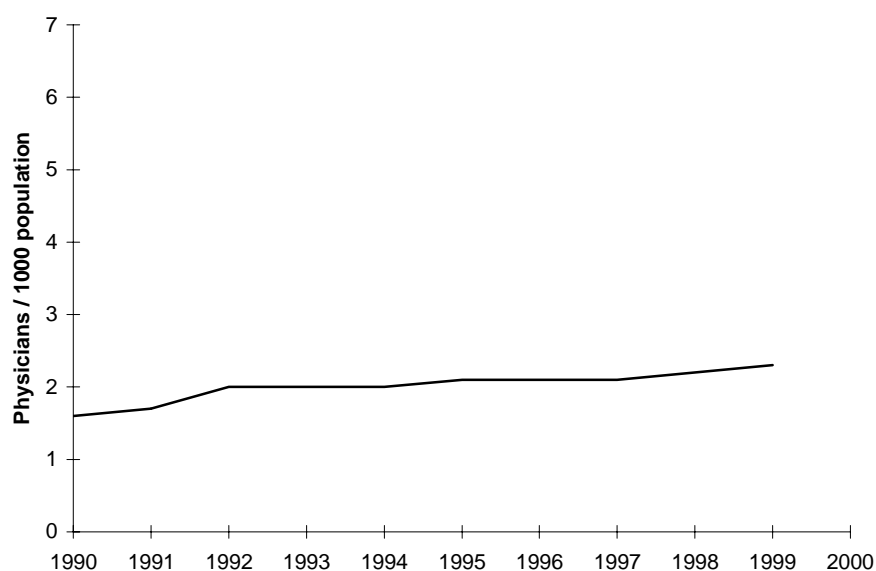


Note:

1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

Source: OECD Health Data 2002.

Figure A3.6.7. Number of practising physicians, per 1000 population



Source: OECD Health Data 2002.

Figure A3.6.8. Funding for the Waiting List Initiative



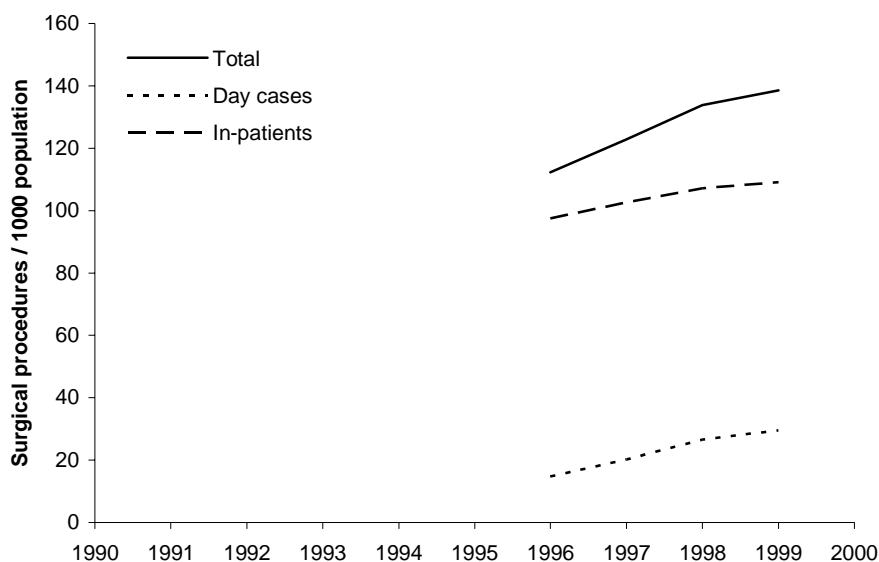
Notes:

1. Expenditure relates to investment in the Waiting List Initiative per calendar year.

Sources: *A comparative analysis of waiting lists for acute hospital treatment in EU countries*, Department of Health and Children, Ireland; Report of the review group on the waiting list initiative Department of Health and Children, Ireland; Department of Health and Children, Ireland (personal correspondence).

7. ITALY

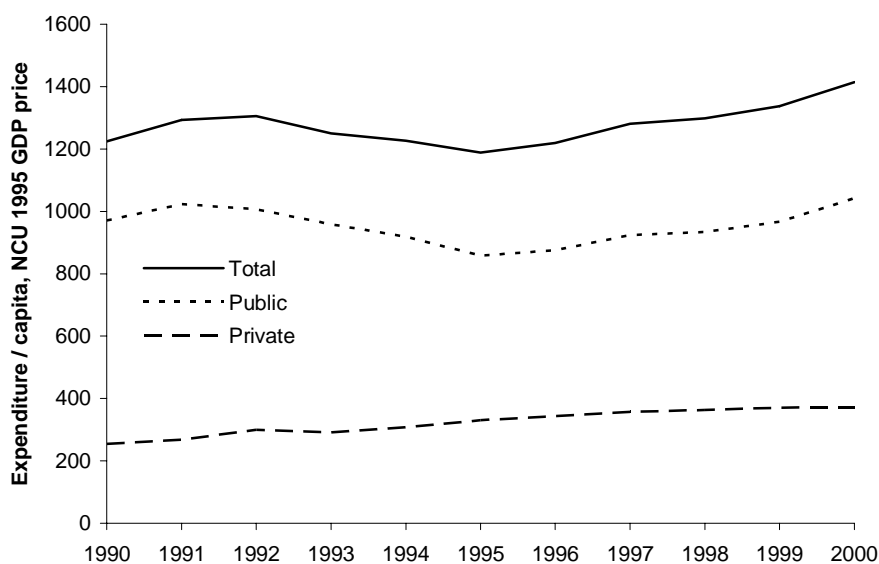
Figure A3.7.1. Inpatient and day-case surgery procedures



Note: 1. Total surgical procedures are calculated by the addition of total surgical day cases and total surgical in-patients where the data are available.

Source: OECD Health Data 2002.

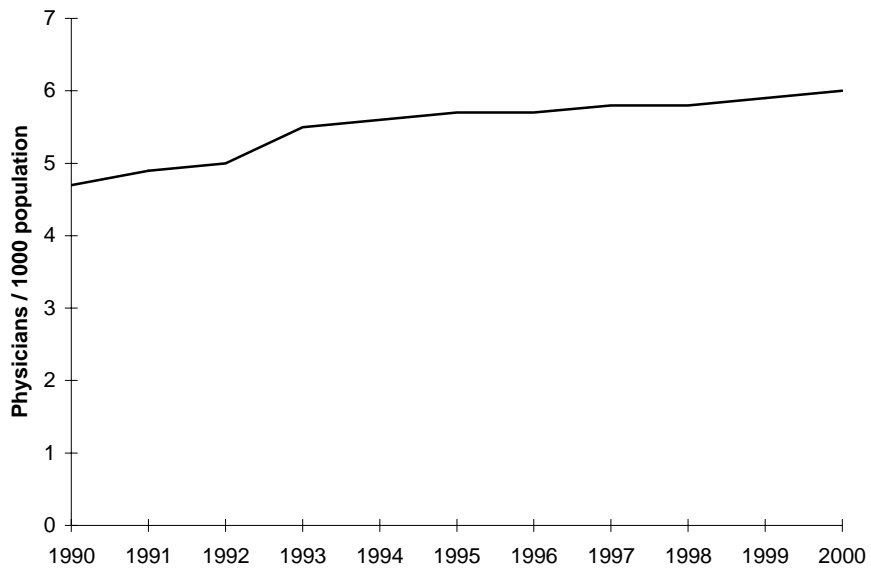
Figure A3.7.2. Expenditure on health, per capita, NCU 95 GDP price



Note: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

Source: OECD Health Data 2002.

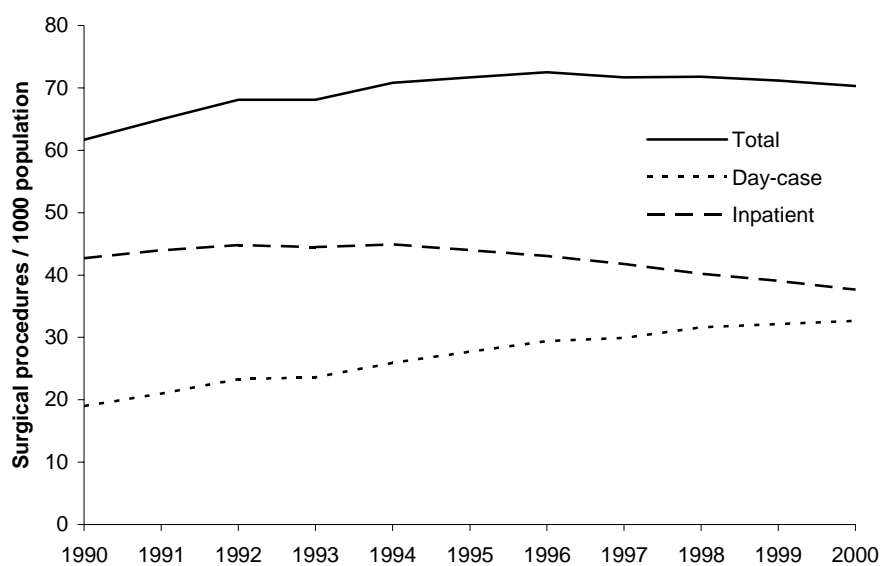
Figure A3.7.3. Number of physicians entitled to practice, per 1000 population



Source: OECD Health Data 2002.

8. THE NETHERLANDS

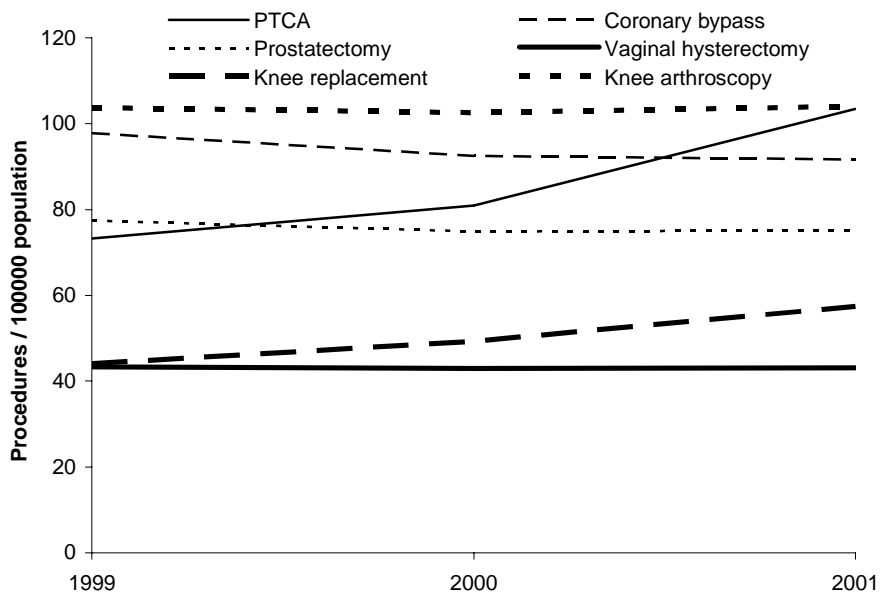
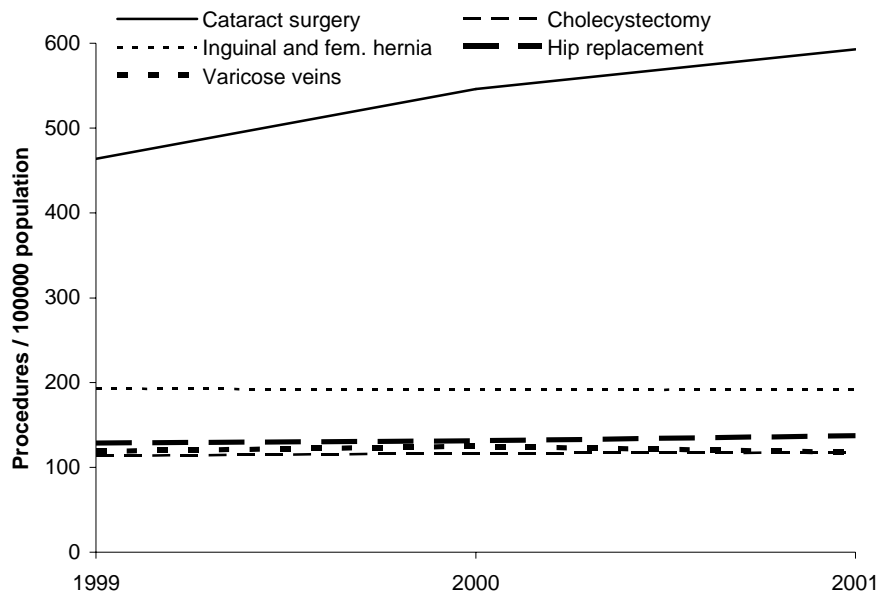
Figure A3.8.1. Inpatient and day-case surgery procedures



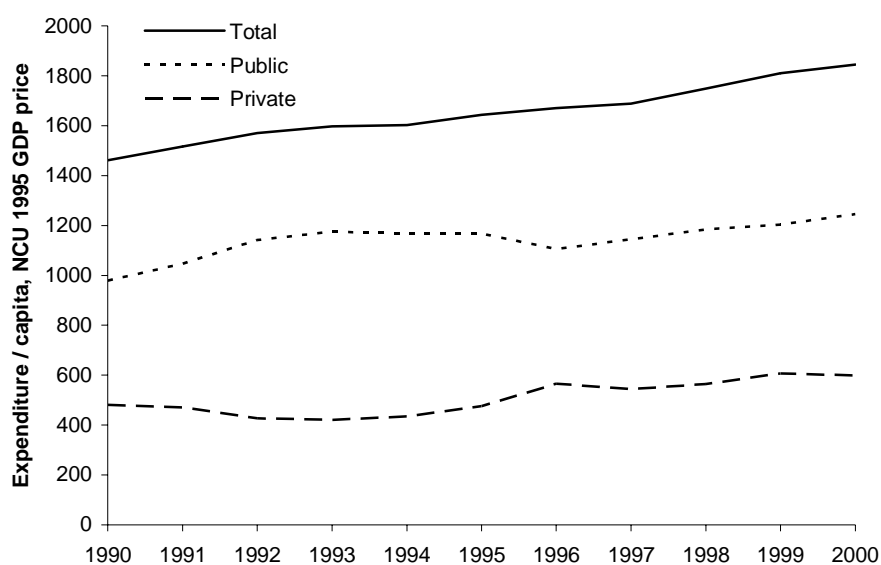
Note: 1. Total surgical procedures are calculated by the addition of total surgical day cases and total surgical in-patients where the data are available.

Source: OECD Health Data 2002.

Figure A3.8.2a.and A3.8.2b. Number of treatments (per 100 000 population) by surgical procedure



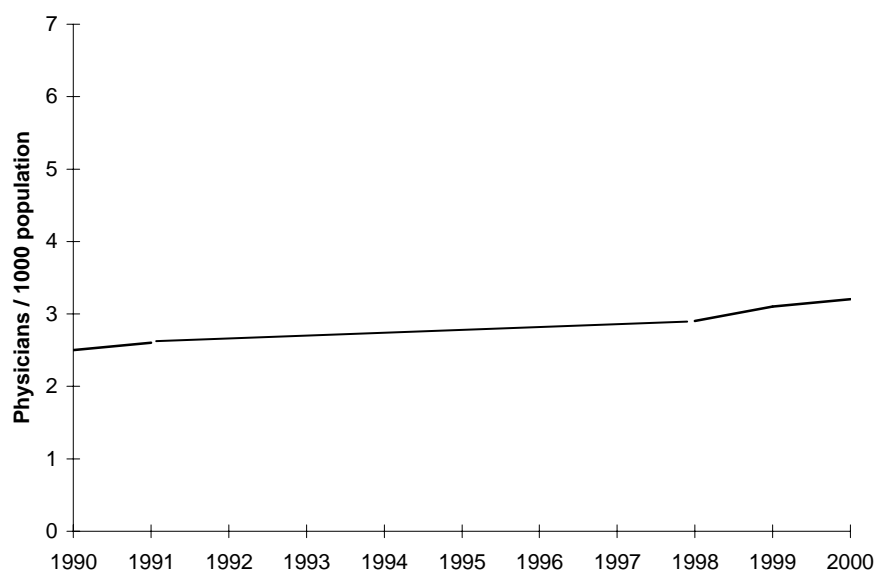
Source: Response to OECD Waiting Times project data questionnaire, Netherlands.

Figure A3.8.3. Expenditure on health, per capita, NCU 95 GDP price

Note:

1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

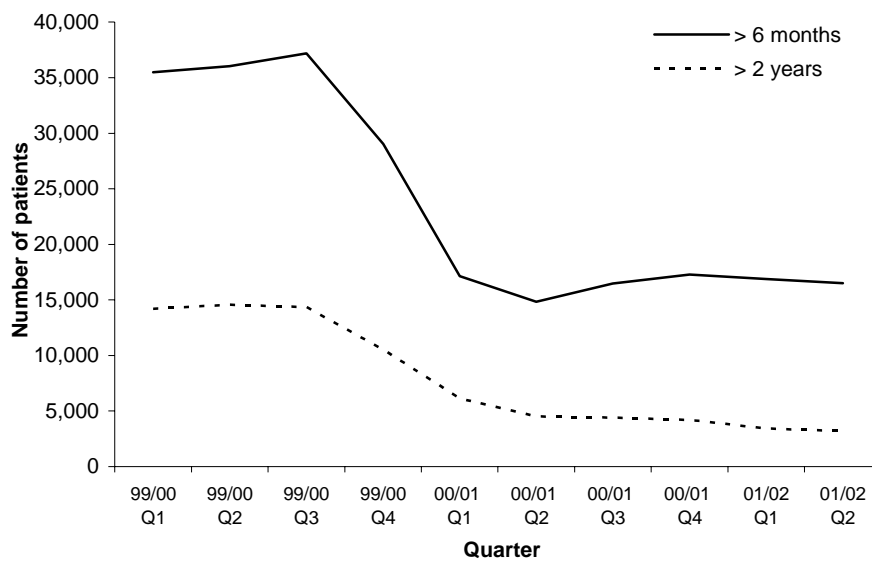
Source: OECD Health Data 2002.

Figure A3.8.4. Number of practising physicians, per 1000 population

Source: OECD Health Data 2002.

9. NEW ZEALAND

Figure A3.9.1. Number of the patients on the list waiting more than six months and two years

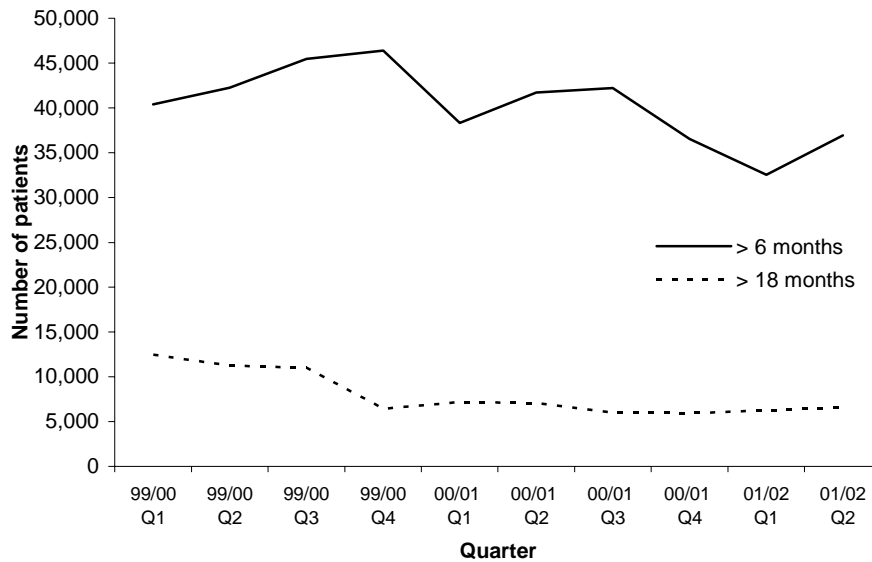


Notes:

1. Number refers to the number of elective services discharges in the relevant quarter who were on the waiting list for the relevant time.
2. Day surgery is included in the elective services discharge numbers.

Sources: *Elective Services First Quarterly Report 2001/2002; Elective Services Fourth Quarterly Report 2000/2001; Elective Services Third Quarterly Report 2000/2001; Elective Services Second Quarterly Report 2000/2001; Elective Services First Quarterly Report 2000/2001*, New Zealand Ministry of Health.

Figure A3.9.2. Number of the patients waiting for specialist assessment more than six months and 18 months

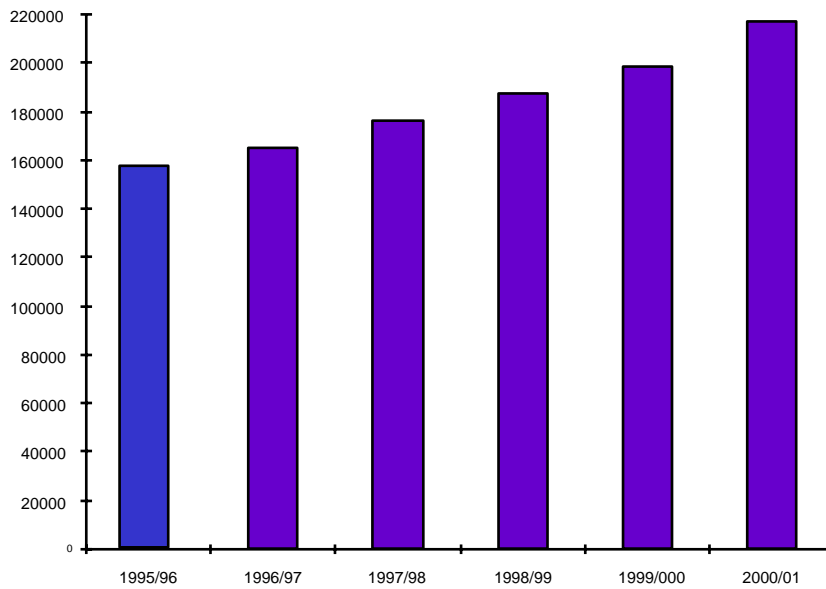


Notes:

1. Number refers to the number of patients waiting longer than the relevant time in the relevant quarter for their first specialist assessment after their first referral.
2. Dental data is excluded from Quarter 3 1999/00 onwards and some providers did not report data in 1999/00.

Sources: *Elective Services First Quarterly Report 2001/2002; Elective Services Fourth Quarterly Report 2000/2001; Elective Services Third Quarterly Report 2000/2001; Elective Services Second Quarterly Report 2000/2001; Elective Services First Quarterly Report 2000/2001*, New Zealand Ministry of Health.

Figure A3.9.3. Surgical discharges for elective services

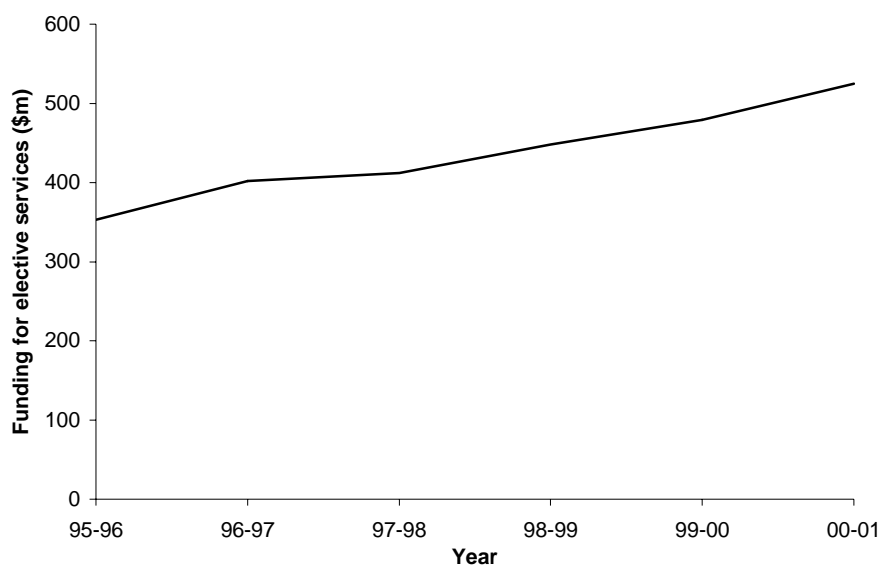


Note:

1. Surgical discharges for elective services refers to publicly funded elective surgical discharges.

Source: A Guide to Elective Services.

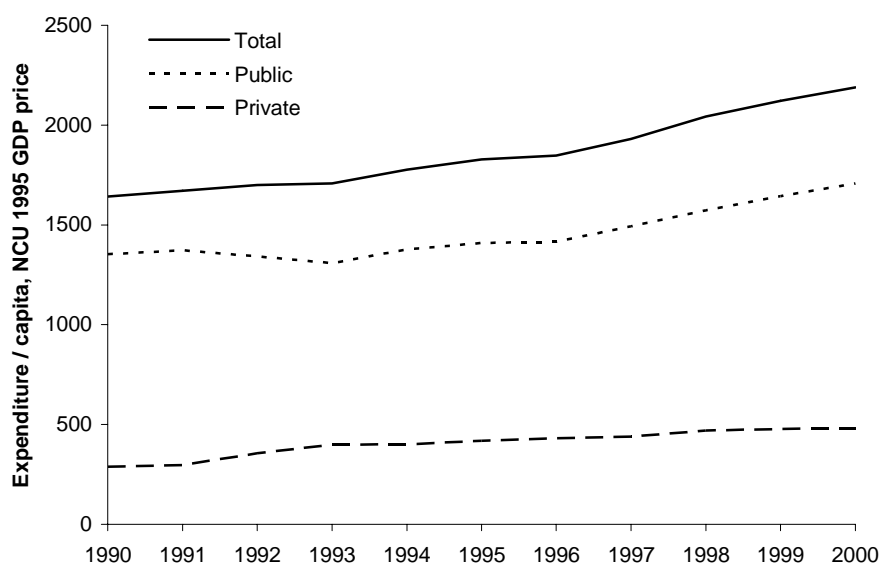
Figure A3.9.4. Funding for elective services



Notes: 1. Funding for elective services refers to public funding for elective services.
 2. GST is included in the public funding for elective services.

Source: A Guide to Elective Services.

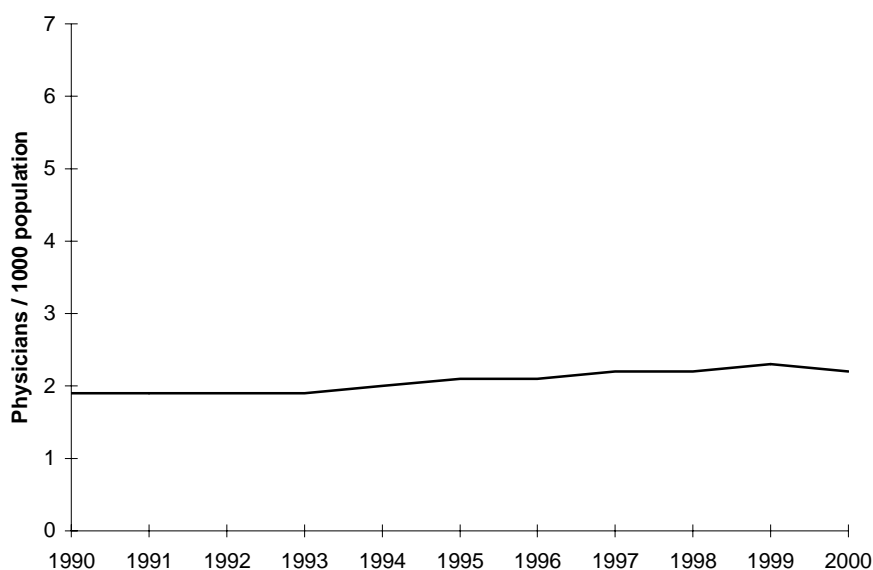
Figure A3.9.5. Expenditure on health, per capita, NCU 95 GDP price



Note: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

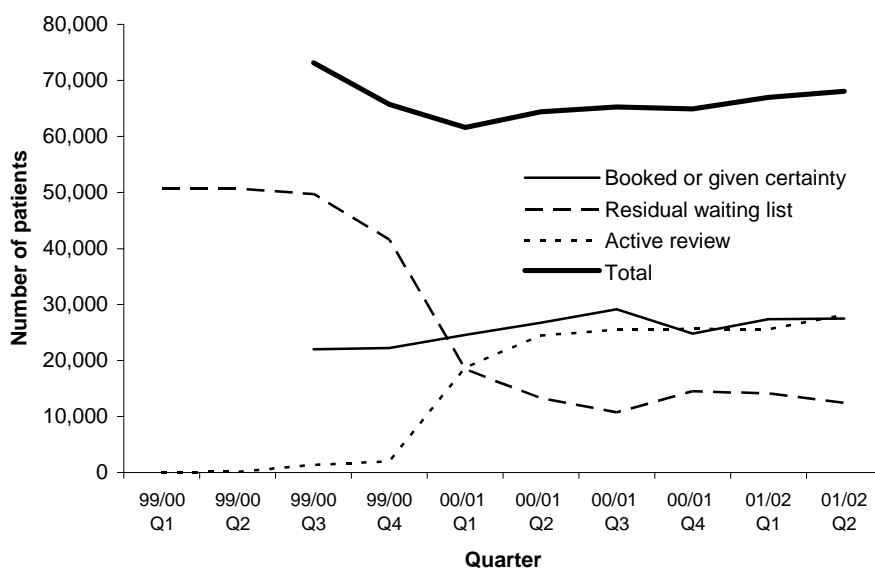
Source: OECD Health Data 2002.

Figure A3.9.6. Number of practising physicians, per 1000 population



Source: OECD Health Data 2002.

Figure A3.9.7. Status of the patients on the list

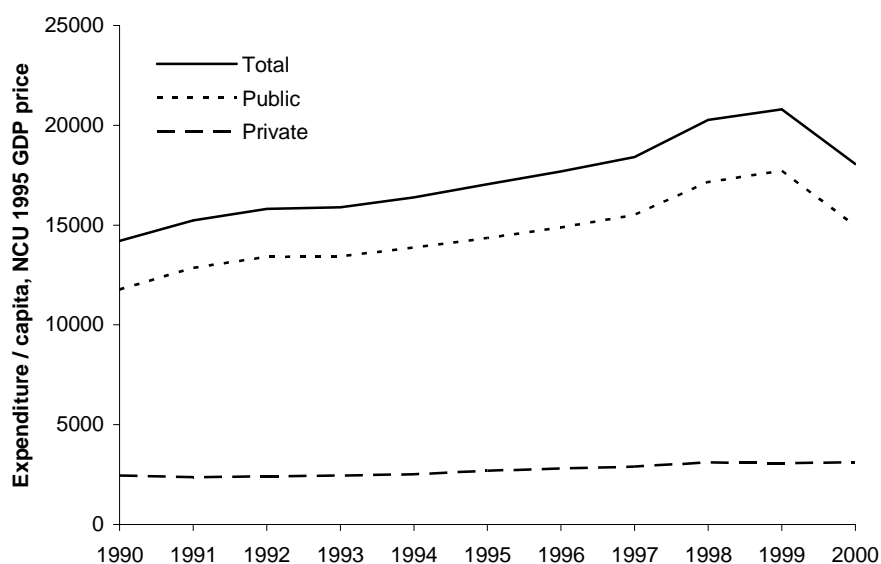


- Notes:
1. Number refers to the number of persons on the waiting lists for elective services in the relevant quarter.
 2. 'Booked or given certainty' refers to those patients who have been advised that they have a firm treatment date within the next six months or that they will receive treatment within the next six months with the date provided later. 'Active review' refers to patients who are to have their plan of care reviewed at intervals of not more than six months. Residual waiting list refers to those patients who have waited substantial periods of time and often the current status of their condition is unknown.

Sources: *Elective Services First Quarterly Report 2001/2002*; *Elective Services Fourth Quarterly Report 2000/2001*; *Elective Services Third Quarterly Report 2000/2001*; *Elective Services Second Quarterly Report 2000/2001*; *Elective Services First Quarterly Report 2000/2001*, New Zealand Ministry of Health.

10. NORWAY

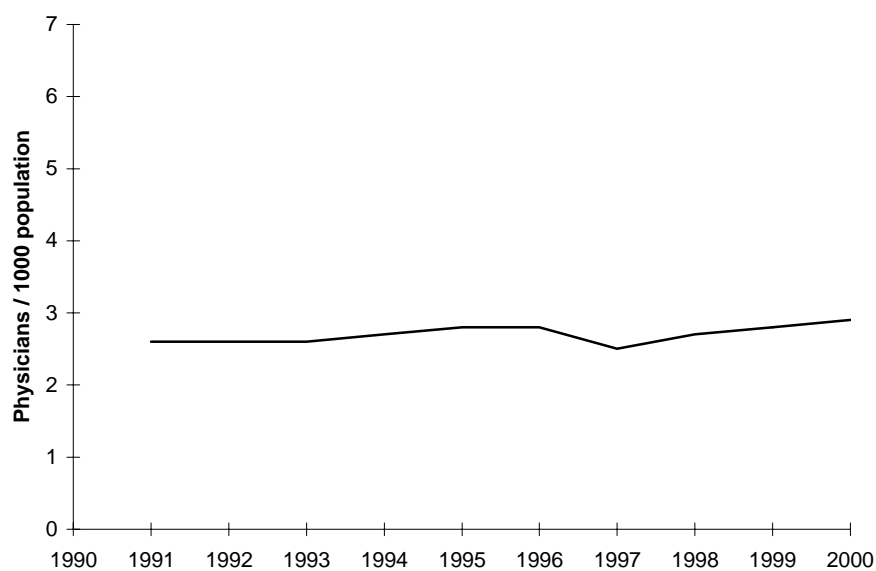
Figure A3.10.1. Expenditure on health, per capita, NCU 95 GDP price



Note: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

Source: OECD Health Data 2002.

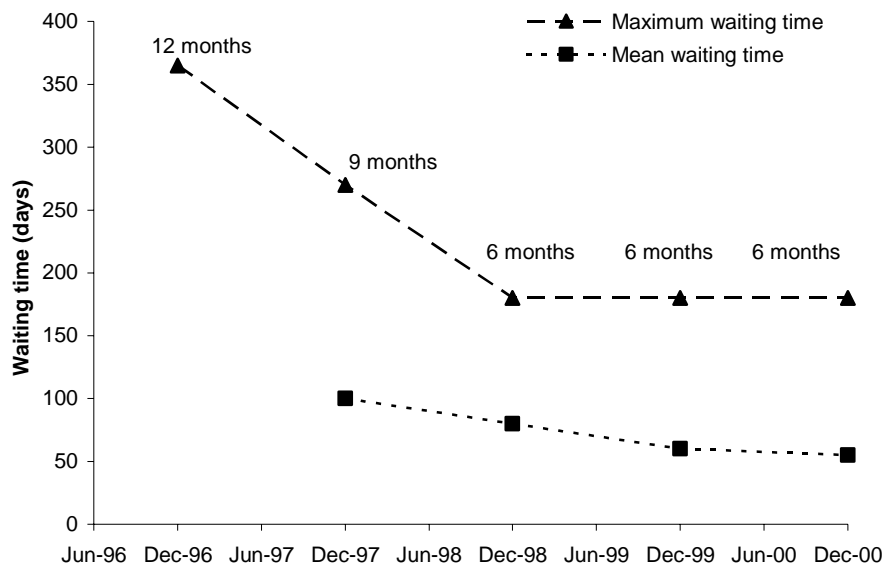
Figure A3.10.2. Number of practising physicians, per 1000 population



Source: OECD Health Data 2002.

11. SPAIN

Figure A3.11.1. Targets: mean and maximum waiting time of the patients on the list

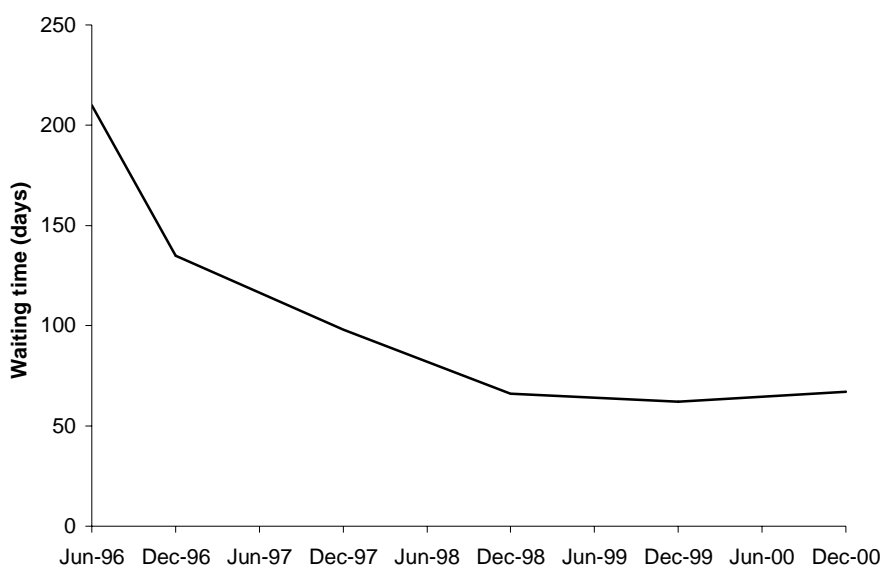


Note:

1. The data refers to the INSALUD network.

Source: *Surgical waiting list reduction programmes. Management and financing strategies. The Spanish experience.* INSALUD, National Institute of Health, Spain.

Figure A3.11.2. Mean waiting time of the patients on the list. Insalud.

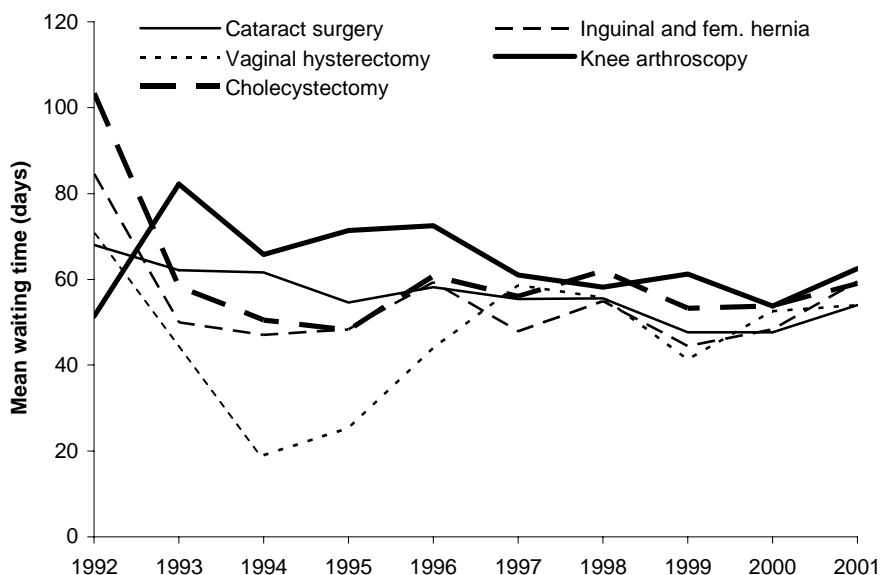
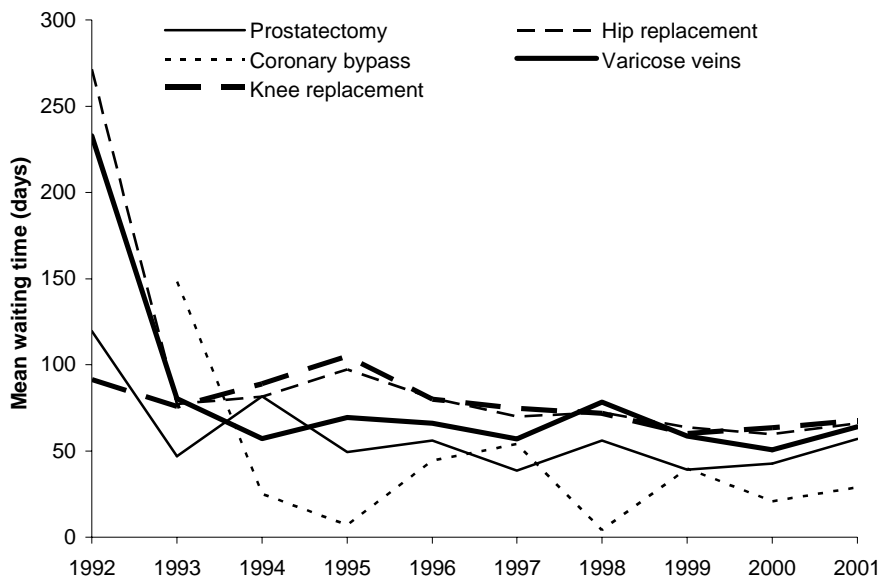


Notes:

1. The data refers to the INSALUD network.

Source: *Surgical waiting list reduction programmes. Management and financing strategies. The Spanish experience.* INSALUD, National Institute of Health, Spain.

Figure A3.11.3a. and A3.11.3b. Mean waiting time of the patients on the list by surgical procedure. Insalud.

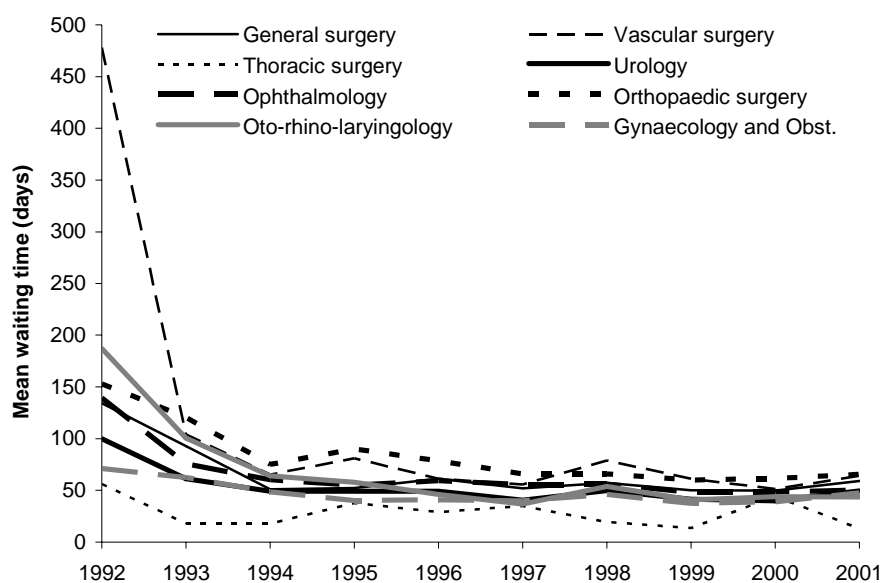


Notes:

1. Mean waiting time refers to the time elapsed for a patient on the non-emergency (elective) surgery waiting list from the date they were added to the waiting list for the procedure (after specialist assessment) to the date of data collection (31 December of the relevant year).
2. Data refers to the INSALUD network.

Source: Response to OECD Waiting Times project data questionnaire, Spain.

Figure A3.11.4. Mean waiting time of the patients on the list by main speciality (inpatient and day surgery). Vasque country.

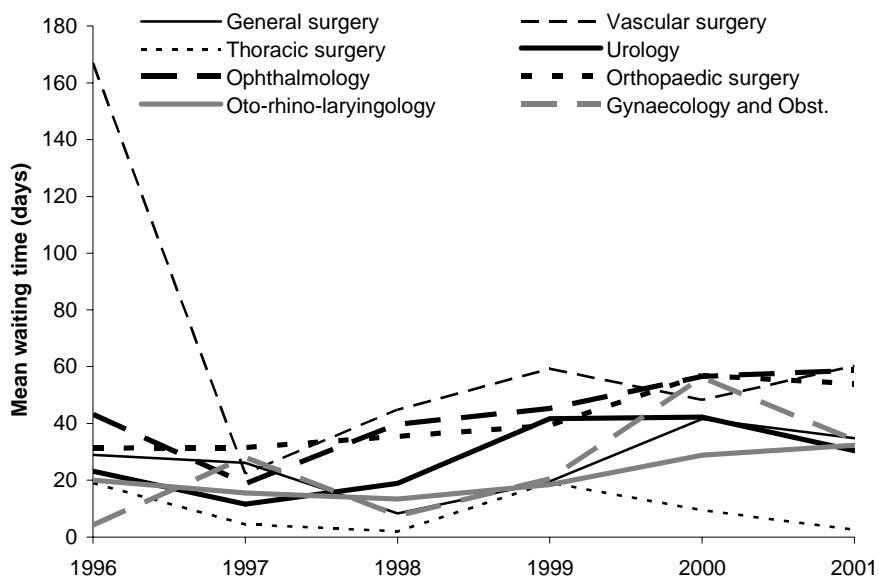


Notes:

1. Mean waiting time refers to the time elapsed for a patient on the non-emergency (elective) surgery waiting list from the date they were added to the waiting list for the procedure (after specialist assessment) to the date of data collection (31 December of the relevant year).
2. Data refers to the Health Service of Vasque Country.

Source: Response to OECD Waiting Times project data questionnaire, Spain.

Figure A3.11.5. Mean waiting time of the patients on the list by main speciality (outpatient). Vasque country

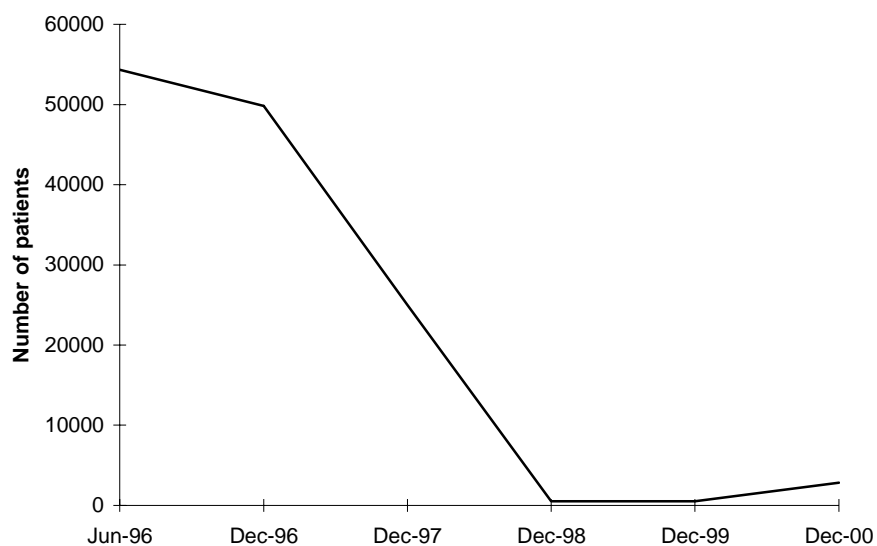


Notes:

1. Mean waiting time refers to the time elapsed for a patient on the non-emergency (elective) surgery waiting list from the date they were added to the waiting list for the procedure (after specialist assessment) to the date of data collection (31 December of the relevant year).
2. Data refers to the Health Service of Vasque Country.

Source: Response to OECD Waiting Times project data questionnaire, Spain.

Figure A3.11.6. Patients on the list waiting longer than 6 months

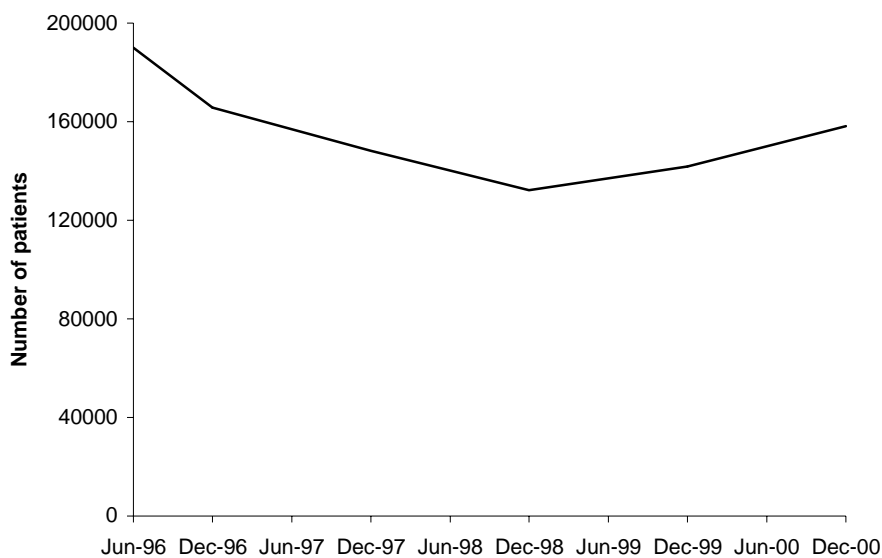


Notes:

1. The data refers to the INSALUD network.
2. Data include both day cases and patients with overnight stay.

Source: Surgical waiting list reduction programmes. Management and financing strategies. The Spanish experience. INSALUD, National Institute of Health, Spain.

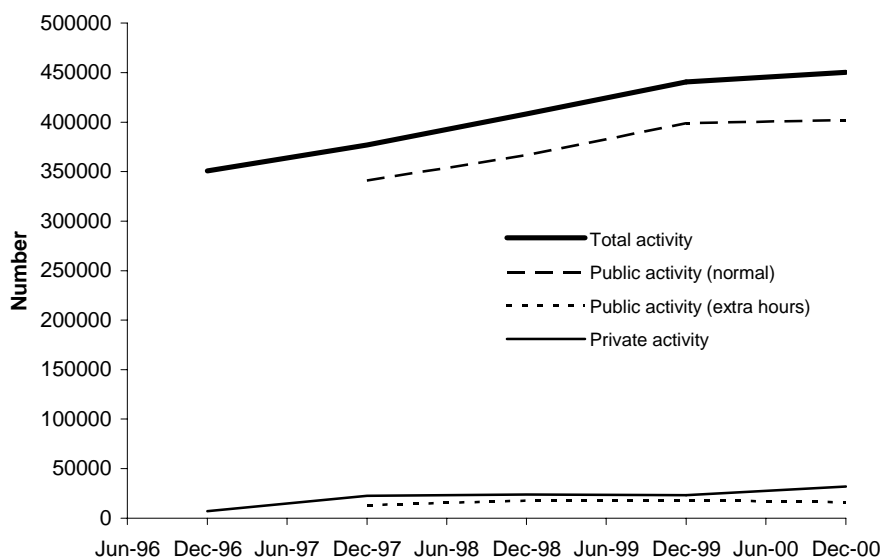
Figure A3.11.7. Patients on the waiting list



Note: 1. The data refers to the INSALUD network.

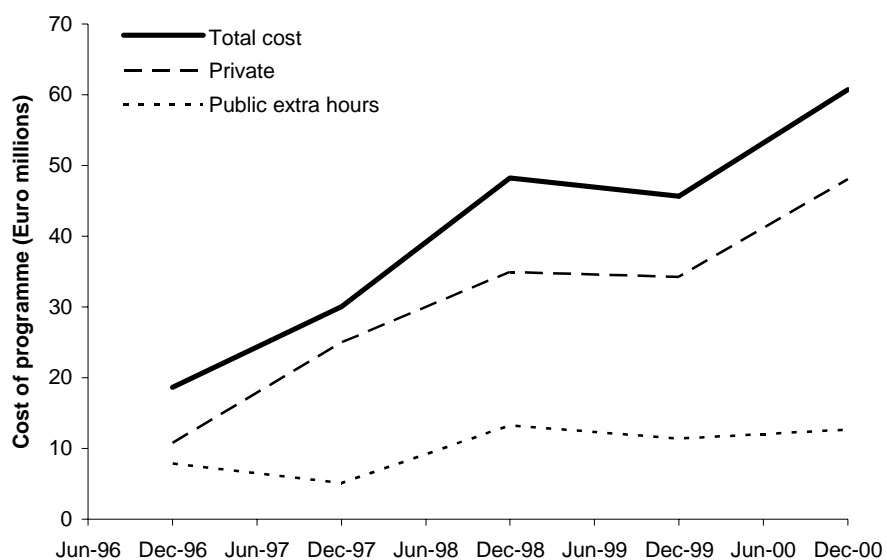
Source: *Surgical waiting list reduction programmes. Management and financing strategies. The Spanish experience.* INSALUD, National Institute of Health, Spain.

Figure A3.11.8. Surgical treatments



Note: 1. The data refers to the INSALUD network and publicly funded treatments.

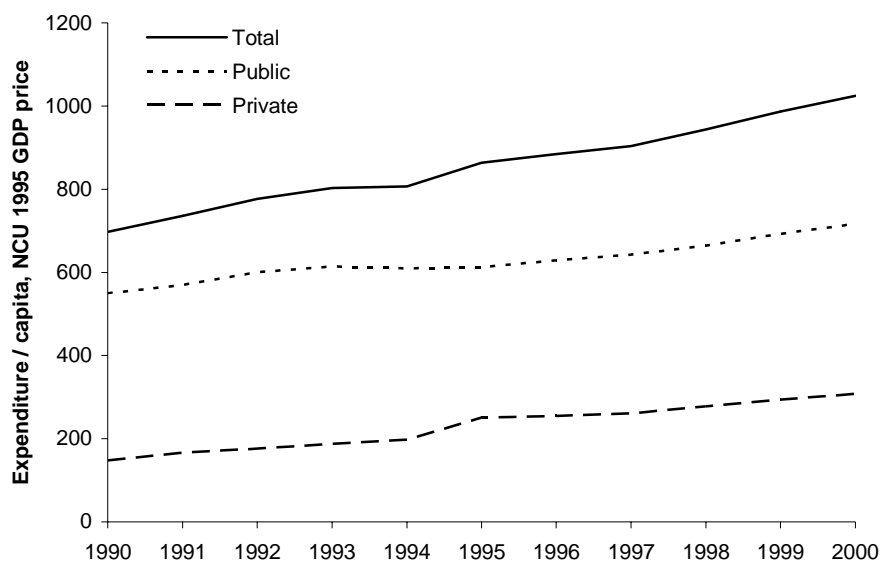
Source: *Surgical waiting list reduction programmes. Management and financing strategies. The Spanish experience.* INSALUD, National Institute of Health, Spain.

Figure A3.11.9. Cost of the initiatives**Note:**

1. The data refers to the INSALUD network and publicly funded programmes.

Source: *Surgical waiting list reduction programmes. Management and financing strategies. The Spanish experience.* INSALUD, National Institute of Health, Spain.

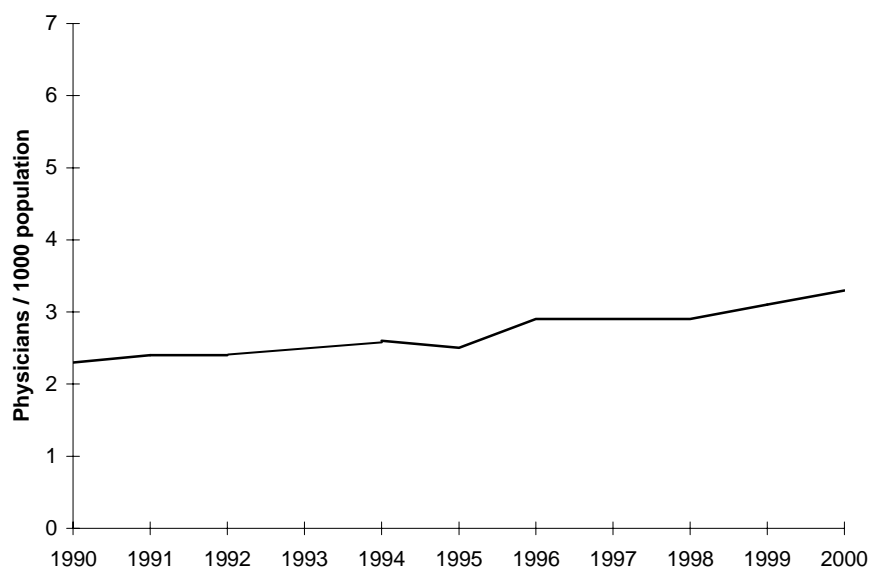
Figure A3.11.10. Expenditure on health, per capita, NCU 95 GDP price



Note: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

Source: OECD Health Data 2002.

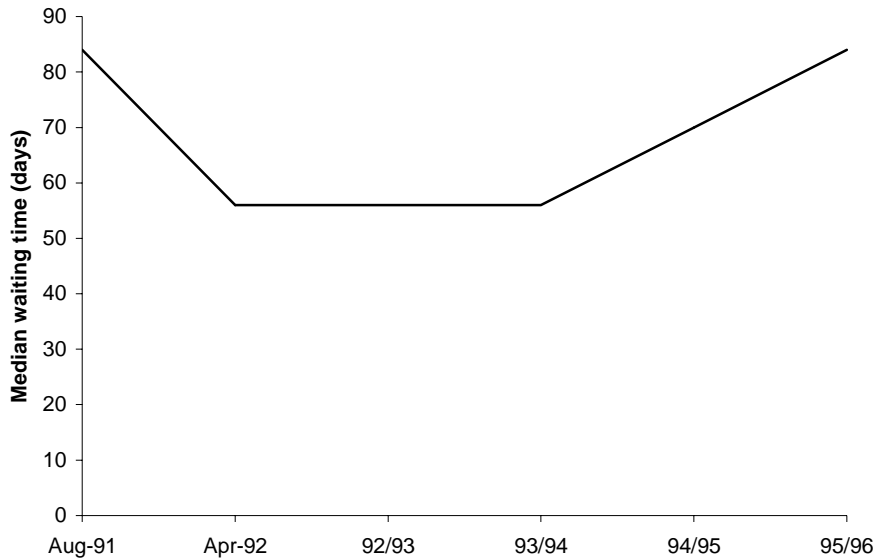
Figure A3.11.11. Number of practising physicians, per 1000 population



Source: OECD Health Data 2002.

12. SWEDEN

Figure A3.12.1. Median waiting time

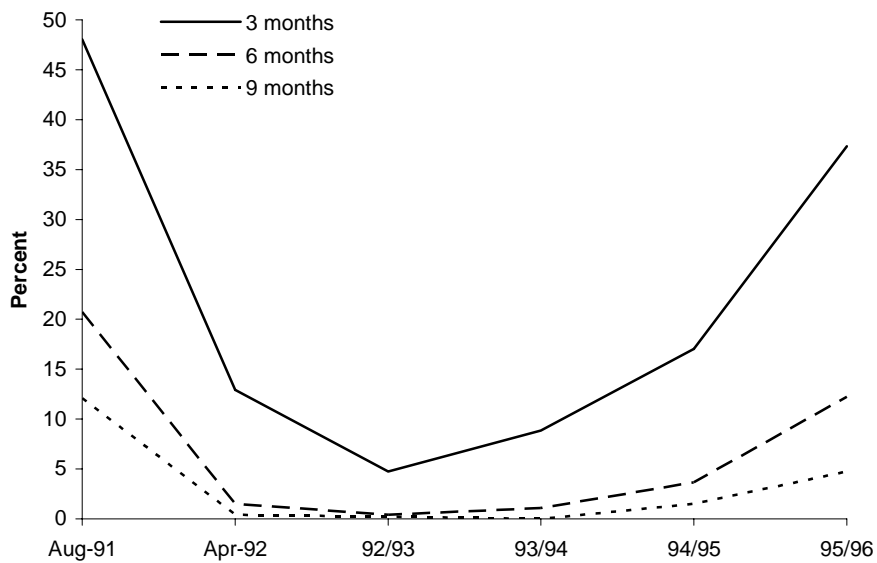


Note:

1. Waiting time refers to prospective waiting time for a non-urgent patient among the waiting lists included in the National Waiting time guarantee.

Source: Reply to Questionnaire on policy initiatives and institutional characteristics, Sweden, 2002.

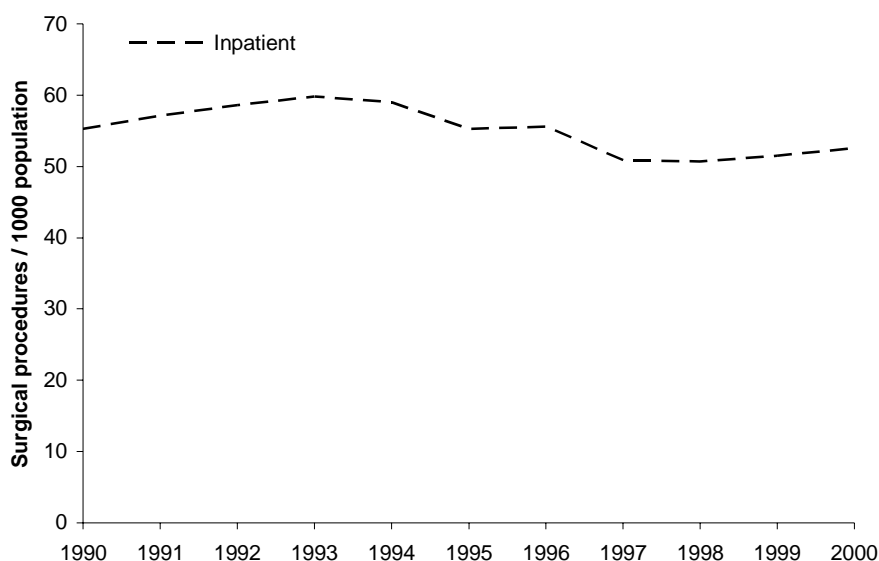
Figure A3.12.2. Percentage of the patients waiting longer than 4, 6 and 9 months



Note: 1. Waiting time refers to prospective waiting time for a non-urgent patient among the waiting lists included in the National Waiting time guarantee.

Source: Reply to Questionnaire on policy initiatives and institutional characteristics, Sweden, 2002.

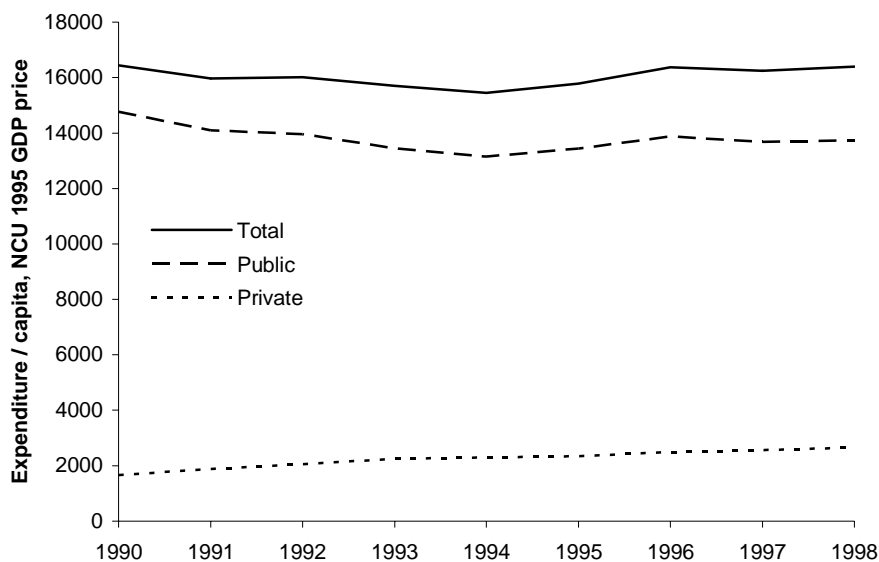
Figure A3.12.3. Number of surgical procedures performed



Note: 1. Total surgical procedures are calculated by the addition of total surgical day cases and total surgical in-patients where the data are available. As total surgical day cases are not available total surgical procedures are not displayed.

Source: OECD Health Data 2002.

Figure A3.12.4. Expenditure on health, per capita, NCU 95 GDP price



Note: 1. Expenditure is displayed as expenditure per capita in the national currency units at the 1995 GDP price level.

Source: OECD Health Data 2002.

Figure A3.12.5. Number of practising physicians, per 1000 population

Source: OECD Health Data 2002.