

# Percentage of patients whose cardiac surgery or procedure was completed within target time

## Alternate Name\*

Percentage of patients who underwent a cardiac surgery or procedure within the provincial access target

## INDICATOR DESCRIPTION

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### Description\*

This indicator measures the percentage of patients that require a cardiac surgery or procedure and receive it within the provincial access target. Wait times were calculated from the day the patient and doctor decided to go ahead with the surgery or procedure, to the day it was performed. A higher percentage is better. The indicator is reported by priority level. Patients are assigned a priority level for the surgery based on their clinical assessment. The indicator is reported based on the institution where the surgery took place.

There are three cardiac surgeries or procedures reported Online:

- 1.A diagnostic cardiac catheterization (CATH), or angiography, is a catheter based diagnostic test that involves selectively injecting x-ray contrast dye into one or more coronary arteries in order to visualize blockages in the arteries and vessels that supply blood to the heart.
- 2.A percutaneous coronary intervention (PCI), or angioplasty, is a procedure that involves using a catheter to insert a stent that opens blocked blood vessels in the coronary arteries.
- 3.Coronary artery bypass graft (CABG) is a surgical procedure performed on patients with coronary artery disease to bypass areas of blockage. Blood vessels, most commonly from the legs or chest wall, are grafted onto the heart to allow blood to flow past diseased heart vessels.

### Indicator Status\*

Active

### HQO Reporting tool/product

Public reporting

### Dimension\*

Timely

### Type\*

Process

## DEFINITION AND SOURCE INFORMATION

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### Unit of Measurement\*

Percentage of patients whose cardiac surgery or procedure was completed within target time

<http://indicatorlibrary.hqontario.ca/Indicator/Detailed/Percentage-target-cardiac-wait-time-2/EN>

Percentage

#### Calculation Methods\*

Numerator divided by the denominator times 100

#### Numerator including inclusion/exclusion\*

Number of a cardiac surgery or procedures completed within the provincial access target

#### Denominator including inclusion/exclusion\*

Total number of patients who underwent a cardiac surgery or procedure that was done in the reporting period within Ontario's 19 advanced cardiac service hospitals and met the inclusion criteria below:

##### *Inclusions:*

1. Static (month-end) Data.
2. Must be onlisted and offlisted as that procedure: Onlisted and offlisted refers to being put on the waiting list. Once a patient sees a specialist (cardiologist, cardiac surgeon) and that physician accepts the patient for a procedure (CATH, PCI, CABG) they are "onlisted" to the wait list. Once the patient receives their treatment and the procedure is over the patient is "offlisted" from the wait list (because the treatment is done).
3. Wait time takes into account DART\* per patient.

\*DART stands for Dates Affecting Readiness to Treat. It means that a wait list clock is paused because the patient asked the physician to pause it. There is no limit to the number of DARTS that can be applied to a surgery. If a patient changes priority, the wait time clock is restarted against the target for the new priority.

##### *Exclusions:*

1. Patients who die before they receive their procedures

#### Adjustment (risk, age/sex standardization)- detailed

None

#### Data Source

CorHealth Ontario

#### Data provided to HQO by

CorHealth Ontario

#### Reported Levels of comparability /stratifications (defined)

Corporation

Province

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Priority level

Time

## RESULT UPDATES

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### Indicator Results

[Click here to view Health Quality Ontario results for this indicator](#)

## OTHER RELEVANT INFORMATION

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### Caveats and Limitations

1. This indicator is collected for patients who have undergone this procedure. That is, patients who are still waiting are not included in the calculation. 2. This indicator is reported not at the surgeon level but rather at the level of the facility where the procedure took place. 3. Cardiac service hospital with small volumes will be more severely impacted by extreme waits (particularly the average wait time). For example, an unusually long or short wait time for a single patient in a reporting period for hospitals will have a greater impact on the average. 4. Certain components of wait times may be difficult to capture. For example, the “decision to treat” date data element has a less standardized definition which may be open to some interpretation.

## TAGS

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### TAGS\*

Acute Care/Hospital

Process

Wait Times

Timely

CorHealth Ontario

## PUBLISH

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### PUBLISH DATETIME\*

09/08/2017 17:16:00