The guarantee

From 1 February 2015, patients will receive their elective (non-emergency) surgery within the medically recommended time or be offered the next available appointment in a public or private hospital at no cost*.

Medically recommended time

The medically recommended time is when a patient should have elective surgery based on their condition and symptoms, as assessed by a specialist. In Australia, the national definitions for elective surgery categories are:

1. **Urgent**
   - Surgery recommended within 30 days of being added to the wait list, as the condition could get worse and become an emergency.

2. **Semi-urgent**
   - Surgery recommended within 90 days of being added to the wait list, as the condition is causing pain or disability but unlikely to become an emergency.

3. **Non-urgent**
   - Surgery recommended within 365 days of being added to the wait list, as the condition is causing minimal pain or disability.

For more information about their category, patients should speak to their specialist or GP.

*See website for more details.

Further information


1300 332 807 (7 am to 9 pm, 7 days a week)
The Wait Time Guarantee is measured from the time the patient is added to the elective (non-emergency) surgery wait list until the time they receive surgery.

1. Patient makes an appointment to see their general practitioner (GP).
2. GP performs/organises tests, allied healthcare and other non-specialist treatments.
   If no solution is found, GP refers patient to a specialist for an opinion.
3. Patient seen by outpatient specialist and the best course of action is decided—this may require diagnosis testing.
   If specialist recommends surgery they will assign the patient a category—based on their health condition and symptoms.
4. Patient added to elective surgery wait list. This can take up to 5 days.
5. Patient receives a letter telling them what category they are in and what date they were added to the elective surgery wait list.
6. Patient contacted with an appointment/date for their surgery.
   For semi-urgent (Category 2) and non-urgent (Category 3) patients this will be at least 4 weeks prior to the proposed surgery date.
7. If the patient is ready for care, they follow the pre-surgery instructions and attend hospital to have the surgery performed.

Further information

1300 332 807 (7 am to 9 pm, 7 days a week)
**Surgery covered**

- Cardiothoracic (heart/lungs)
- Ear, nose and throat
- General surgery
- Gynaecology
- Neurosurgery
- Ophthalmology (eyes)
- Orthopaedics (bones)
- Plastic and reconstructive surgery
- Urology (bladder)
- Vascular (blood vessels)

**Medically recommended exceptions**

There are three reasons why elective (non-emergency) surgery will not be covered by the guarantee:

- The surgery is not covered by Medicare or publicly funded.
- There are not enough surgeons with the required highly specialised skills in Queensland.
- An organ or tissue donation is required before the surgery can be done.

**Further information**


1300 332 807 (7 am to 9 pm, 7 days a week)