

Appendix 1: MEDLINE Search Strategy

1 Waiting Lists/

2 Health Care Rationing/

3 "Appointments and Schedules"/

4 systems theory/

5 exp Triage/

(wait* list* or queu* or single-entry or central* intake or common intake or single
6 point-of-entr* or pooled or pooling or (generic adj3 list*) or (common adj3 list*) or
(one adj3 point adj access) or triag*).tw.

7 1 or 2 or 3 or 4 or 5 or 6

(elective service* or elective surg* or scheduled service* scheduled surg* or elective
8 procedure* or non-emergen* procedure* or day surger* or non-emergen* surger* or
routine surg* or routine procedure* or (outpatient adj3 (surger* or procedur*)) or
(out-patient adj3 (surger* or procedur*))).tw.

9 exp Surgical Procedures, Elective/

10 8 or 9

11 7 and 10

Appendix 2: Components of Single-Entry Models

Table 1: Forms of single-entry models and their characteristics

<i>Form of Single-Entry</i>	<i>Characteristics</i>
Common/Generic/Pooled Waiting List	<ul style="list-style-type: none"> - Waiting lists for multiple surgeons are consolidated into one - Providers are also pooled such that patient appointments are scheduled with the next-available physician - Patients are served in turn, no time lost moving between queues - Pooling of waiting lists and service providers is a necessary and sufficient condition for a model to be classified as a “single-entry model”
Centralized Intake / Single point-of-entry	<ul style="list-style-type: none"> - All requests for services are gathered and coordinated at a single point (usually by specialty and geographical area) - Improves distribution of demand/procedures across areas from where it is drawn
Triage	<ul style="list-style-type: none"> - Typically accompanies interventions or initiatives that involve centralized intake and pooling of waiting lists to manage assessment of all incoming requests for access to care - Needs, priority and/or urgency are assessed and patients directed to appropriate levels of care - Can involve a combination of administrative and clinical staff - Can significantly reduce delays, unnecessary appointments and work for specialists by assessing appropriateness of referrals (against pre-determined/agreed-upon criteria)