

The Fraser Institute

Hospital Report Card

Ontario 2008



by Nadeem Esmail and Maureen Hazel

10a Rankings by Municipality
Inpatient Quality Indicators



10a Rankings by Municipality

Inpatient Quality Indicators

Contents

- 1 Overview and Observations / 2
- 2 Introduction and Background / 13
- 3 Methodology Overview and Sample Data Table / 28
- 4 Data Tables / 32

Data Tables and Appendices of the Hospital Report Card

- Section 1 Overview and Observations
- Section 2 Hospital Mortality Index
- Section 3a Observed Rates by Hospital—*Inpatient Quality Indicators*
- 3b Observed Rates by Hospital—*Patient Safety Indicators*
- Section 4a Risk-adjusted Rates by Hospital—*Inpatient Quality Indicators*
- 4b Risk-adjusted Rates by Hospital—*Patient Safety Indicators*
- Section 5a Scores by Hospital—*Inpatient Quality Indicators*
- 5b Scores by Hospital—*Patient Safety Indicators*
- Section 6a Rankings by Hospital—*Inpatient Quality Indicators*
- 6b Rankings by Hospital—*Patient Safety Indicators*
- Section 7a Observed Rates by Municipality—*Inpatient Quality Indicators*
- 7b Observed Rates by Municipality—*Patient Safety Indicators*
- Section 8a Risk-adjusted Rates by Municipality—*Inpatient Quality Indicators*
- 8b Risk-adjusted Rates by Municipality—*Patient Safety Indicators*
- Section 9a Scores by Municipality—*Inpatient Quality Indicators*
- 9b Scores by Municipality—*Patient Safety Indicators*
- Section 10a Rankings by Municipality—*Inpatient Quality Indicators*
- 10b Rankings by Municipality—*Patient Safety Indicators*
- Section 11 Methodological Appendices
- Section 12 FAQs about the Hospital Report Card

The Fraser Institute

Our vision is a free and prosperous world where individuals benefit from greater choice, competitive markets, and personal responsibility. Our mission is to measure, study, and communicate the impact of competitive markets and government interventions on the welfare of individuals.

Founded in 1974, we are an independent research and educational organization with locations throughout North America and international partners in over 70 countries. Our work is financed by tax-deductible contributions from thousands of individuals, organizations, and foundations. In order to protect its independence, the Institute does not accept grants from government or contracts for research.

For media enquiries, please contact our Communications Department via 604.714.4582 or communications@fraserinstitute.ca.

Copyright© 2008 The Fraser Institute.
All rights reserved.

Editing and design: Kristin McCahon
and Lindsey Thomas Martin.

Cover: Bill Ray
Image for covers: © rafost, iStockphoto.

3M and APR are trademarks of 3M, used under license in Canada.

ISSN 1911-1142 The Fraser Institute Hospital Report Card. Ontario.

Date of issue: March 2008.
This version: update 1 (April 2008).

Acknowledgments

The authors would like to thank all those involved in the production and release of this study including Melissa Holoday, Kristin McCahon, Wendy Mills, and Dean Pelkey. Additionally, we want to thank Mark Mullins, Rena Menaker, and Ian Vaculik for developing and contributing to the base of knowledge that is incorporated into this publication; and Mark Mullins and Rena Menaker for their work in producing the first version of the Fraser Institute's *Hospital Report Card* for Ontario and indeed Canada. Lastly, we would like to thank all the hospitals that participated in validating their data and providing feedback.

The authors, of course, take full and complete responsibility for any remaining errors or omissions. As they have worked independently, the views expressed in this study do not necessarily represent those of the supporters, trustees, or staff of the Fraser Institute.

CIHI Acknowledgment and Disclaimer

Parts of this material are based on data and information provided by the Canadian Institute for Health Information. The Canadian Institute for Health Information does not endorse or support the methodology used by the Fraser Institute and, therefore, the analyses, conclusions, opinions, and statements expressed herein are those of the authors and not those of the Canadian Institute for Health Information.

Overview and Observations

Overview

The Fraser Institute's *Hospital Report Card: Ontario 2008* is constructed to help patients choose the best hospital for their inpatient care by providing them with information on the performance of Ontario acute-care hospitals. All of the information in this report, which is laid out in 12 documents, can be accessed in a convenient and interactive way through our websites, <www.fraserinstitute.org> and <www.hospitalreportcards.org>.

We set out to create a hospital report card that is easy to understand and accessible by the public, where individuals are able to look up a given condition or procedure and compare death rates, volumes of procedures, rates of adverse events, and utilization rates for their hospital to those of other hospitals in Ontario.

This is accomplished by using state-of-the-art indicators developed by the US Agency for Healthcare Research and Quality (AHRQ) in conjunction with Stanford University that have been shown to reflect quality of care inside hospitals. These indicators are presently in use in more than a dozen US states, including several of the more populous ones, New York, Texas, Florida and California.

We are using the Canadian Institute for Health Information's (CIHI) Discharge Abstract Database (DAD) as our primary information source. This information is derived from patient records provided to CIHI by all Ontario hospitals. Demographic, administrative, and clinical data are extracted from the Discharge Abstract Database for inpatient hospital stays from all acute care hospitals in Ontario, except for the Hospital for Sick Children in Toronto.

Since more specialized hospitals may treat more high-risk patients and some patients arrive at hospitals sicker than others, it is important to risk-adjust hospital death rates, adverse events rates, and utilization rates for patients with the same condition but a different health status. The international standard for risk adjustment, 3M™ APR™ DRG Classification System, [1] is employed to risk-adjust the data.

[1] 3M and APR are trademarks of 3M, used under license in Canada.

The Fraser Institute spent two years developing the methods, databases, and computer programs required to adapt the measures to Canadian circumstances. This work has been internally and externally peer-reviewed (Mullins, Menaker, and Esmail, 2006) and is supported by an extensive body of research based on the AHRQ approach.

Of Ontario's 136 acute-care hospitals, 30, representing 4.94% of inpatient records in Ontario in the latest year, granted us authorization to identify them by name in this report. This represents a significant drop from the previous report, in which we were authorized to identify 43 hospitals, representing 41% of inpatient records in Ontario in 2004/05. We applaud those hospitals who voluntarily agreed to be identified in this year's edition, the *Hospital Report Card: Ontario 2008*. These hospitals should be commended for their efforts to empower patients with information regarding the health care they receive and for their ongoing commitment to quality improvement through accountability and transparency.

The Fraser Institute's *Hospital Report Card: Ontario 2008* consists of 39 of AHRQ's indicators of quality (such as death due to a stroke) and patient safety (such as a foreign body left inside a patient during a procedure). The indicators are shown for all acute-care hospitals in Ontario from 1997 to 2006, comprising more than 9.5 million patient records. [2] We have also calculated the indicators for all municipalities in Ontario, based on patient location. This constitutes the most comprehensive and detailed publicly available measure of acute-care hospital performance and accountability in Canada at the present time.

The indicators are expressed as observed rates (such as death due to hip replacement surgery) and risk-adjusted rates (the same rate adjusted for patient health status). Each institution was given a score from 0 to 100 for each indicator based on its risk-adjusted rate, where 100 is the best. The institutions were then ranked based on their scores, where 1 is the best.

The indicators are classified into three groups: those related to medical conditions, hospital procedures, and child birth. The indicators are further classified by type: death rates, volumes of procedures, utilization rates, and adverse events.

A Hospital Mortality Index (HMI) has been constructed to examine the overall performance of a hospital or municipality across indicators that measure death rates. It consists of up to nine indicators including:

- deaths due to hip replacement surgery
- deaths due to heart attacks
- deaths due to heart failure
- deaths due to acute strokes
- deaths due to bleeding from the esophagus, stomach, small intestine or colon
- deaths due to hip fractures
- deaths due to pneumonia infection
- deaths among patients that are considered unlikely to die in the hospital
- deaths in patients that developed complications of care during hospitalization

The final HMI is an average of the scores of these indicators, where 100 is the best. All institutions and municipalities were ranked based on their HMI score, where 1 is the best. It is important to note that the 39 indicators and the Hospital Mortality Index are applicable only to acute-care conditions and procedures for inpatient care. The results cannot be generalized to assessing the overall performance of any given hospital.

Since this report is based on administrative data, the results have limitations related to coding variations and other factors. Hospital deaths or complications will occur even when all standards of care are followed. Deciding on treatment options and choosing a hospital are decisions that should be made in consultation with a physician. It is not recommended to choose a hospital based solely on statistics and descriptions such as those given in this report.

That said, the DAD is a major data source used to produce various CIHI reports including annual reports on the performance of the hospitals and health-care system and for seven of the health indicators adopted by the federal, provincial, and territorial governments. These data have been used extensively in previous reports on health care performance, and form the basis for many journal articles.

[2] There are a total of 50 indicators in this report. Due to changes in diagnostic and procedural classifications, the availability of indicators varies from year to year. Years 2002 to 2004 report 42 main indicators. Due to changes in AHRQ software, three indicators were dropped in 2005 for a total of 39 indicators.

A number of publications have addressed data-quality issues that are discussed in our report. Of note are CIHI's reabstraction studies that go back to the original patient charts and recode the information using a different set of expert coders. [3]

Overall, according to CIHI, [4] findings from their three-year DAD re-abstraction studies have confirmed the strengths of the database, while identifying limitations in certain areas resulting from inconsistencies in the coding of some data elements. In addition, the findings from the inter-rater data (that is, comparison between reabtractors) were generally similar to the findings from the main study data (that is, comparison between original coder and reabtractor). This suggests that the database is coded as well as can be expected using existing approaches in the hospital system.

In addition to the aforementioned reabstraction studies, the OECD published a report [5] that supports the AHRQ patient-safety indicator approach, noting that "this set of measures represents an exciting development and their use should be tested in a variety of countries" (p. 11). Further, a recently released report by the Manitoba Center for Health Policy that used the AHRQ Patient Safety Indicators [6] noted two important advantages to using the AHRQ approach. The first advantage is the breadth of coverage offered by the indicators in studying in-hospital patient safety. The second is that the AHRQ patient safety indicators were developed to measure complications of hospital-based care among a group of patients for whom the complications seemed preventable or highly unlikely.

Observations

A report based on more than 9.5 million patient records, shown across as many as 50 quality and safety indicators for 136 hospitals and 138 municipalities over nine years, is not something that can be summarized in a few words. In fact, the primary purpose of this research is to provide patients with access to information on specific medical procedures and conditions and understand the variation of hospital care across the entire system. It is for that reason that we have rates, scores, and ranks for each separate indicator and that information can be assessed by using this document and our associated interactive web-enabled database found through www.fraserinstitute.org or www.hospitalreportcards.org.

However, we have created one summary measure of mortality, based on the most important and reliable data in this study, the Hospital Mortality Index. The nine component indicators of the HMI were arrived at by a process of elimination. Starting with our complete group of indicators (39 in the latest year), we eliminated indicators that had no data for several years or relatively few hospitals with data. The resulting HMI has scores and rankings for 57 hospitals and 93 municipalities in the latest year.

Tables 1 (pages 6–7) and 2 (pages 9–11) show scores and rankings for the Hospital Mortality Index for 2005/06. [7] This is compared to the average score over the latest four years (2002/03–2005/06). The change column shows the improvement or deterioration in score between the two periods. Scores for fiscal years 2002, 2003 and 2004 are also presented. Comparisons of the Hospital Mortality Index for 2005/06 and previous years must be interpreted with caution.

[3] Reabtractors participating in the study were required to have several years of coding experience, experience coding in ICD-10-CA and CCI in particular, experience coding at a tertiary care centre, and attendance at specific CIHI educational workshops. They were also required to attend a one-week training session and to receive a passing score on the inter-rater test.

[4] Data Quality of the Discharge Abstract Database Following the First-year Implementation of ICD-10-CA/CCI. CIHI, 2004.

[5] Selecting Indicators for Patient Safety at the Health Systems Level in OECD Countries. John Millar, Soeren Mattke and the Members of the OECD Patient Safety Panel. Report available at <http://www.oecd.org/dataoecd/53/26/33878001.pdf>.

[6] Bruce S. et al., Application of Patient Safety Indicators in Manitoba: A First Look. Winnipeg, Manitoba Centre for Health Policy, June 2006.

[7] The use of 2002/03 and 2003/04 data possibly introduces a SARS effect to the HMI for some hospitals, as 44 patients died in Ontario from SARS between February and July 2003 and hospital operations were affected. However, we note that the median HMI score rose by 6.6 points in 2003 and dropped by 6.5 points in 2004, leaving the score virtually unchanged between 2002 and 2004 at 71.3.

Indeed, the number of hospitals and municipalities ranked fell from 66 to 57 and 106 to 93 respectively. Moreover, scores for 2005/06 may also be affected by changes in AHRQ's computation of risk-adjusted rates. [8]

[8] Prior to version 3, a linear regression model was used for risk-adjustment where the risk adjusted rate = observed rate - expected rate + population rate. With version 3, logistic regression was used, where the risk adjusted rate = observed rate / expected rate * population rate.

Hospital Mortality Index: Hospitals

Top-Ranked Hospitals

- The top hospital in Ontario is Anonymous Hospital 10, identity unknown, with a high HMI score of 91.2 out of 100. It has performed consistently well, ranking second in both the late 1990s and early 2000s.
- Anonymous hospitals 222 and 204 are ranked second and third respectively in 2005/06. These hospitals did not appear in previous report cards.
- Anonymous Hospital 50 was ranked first in 2002/05 and ranks 13th in 2005/06.
- The top identified hospital is Timmins and District Hospital in 15th place and a score of 88.3, followed closely by Stratford General Hospital (Stratford) in 19th place and a score of 88.2. Stratford ranked among the top five in previous years.
- Calculation of an HMI score was possible for only four of the identified hospitals, none of which are in the top ten. St. Thomas Elgin General Hospital and Orillia Soldiers' Memorial Hospital rank 39th and 49th, respectively. As noted above, Timmins and District ranked 15th and Stratford General, 19th.
- Anonymous Hospital 25, ranked 12th, has had the largest improvement in its HMI score of any hospital (up 20.7 points) since the early 2000s.[9]

[9] Comparisons of the Hospital Mortality Index for 2005/06 and previous years must be interpreted with caution. Indeed, the number of hospitals and municipalities ranked fell from 66 to 57 and 106 to 93, respectively. Moreover, scores for 2005/06 may also be affected by changes in AHRQ's computation of risk-adjusted rates and scores for 2002/03 and 2003/04 may be biased by a SARS effect.

Bottom-Ranked Hospitals

- Nine of the 10 bottom-ranked hospitals did not participate in the study. Of these, Anonymous Hospital 18, with a score of 72.8, is the lowest-ranked hospital. It also ranked in the bottom 10 in 2002/05.
- Anonymous Hospital 40 is the second lowest-ranked hospital, with a score of 73.8. Anonymous Hospital 55 is third lowest, with a score of 79.0; this hospital also experienced the smallest improvement in its HMI from the early 2000s among hospitals for whom an HMI could be calculated in 2005/06.
- Orillia Soldiers' Memorial Hospital is the lowest-ranked participating hospital and is ranked 49th. A score for previous years is unavailable.

Consistency

- There is some consistency of performance in the top and bottom hospitals.
- All of the bottom ten hospitals, except for Anonymous Hospitals 55 and 59, were either low ranked in the late 1990s and early 2000s or had inadequate data during that period to be ranked.

Table 1: Hospital Mortality Index—Hospitals

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Hospital 10	91.2	1	79.6	2	11.6	20	73.0	86.0	79.9
Hospital 222	91.0	2	—	—	—	—	—	—	—
Hospital 204	90.4	3	—	—	—	—	—	—	—
Hospital 67	90.4	4	74.3	30	16.1	5	77.6	80.3	64.9
Hospital 29	90.3	5	75.5	24	14.8	11	71.9	80.8	73.8
Hospital 230	90.1	6	—	—	—	—	—	—	—
Hospital 223	90.1	7	—	—	—	—	—	—	—
Hospital 202	90.0	8	—	—	—	—	—	—	—
Hospital 226	89.6	9	—	—	—	—	—	—	—
Hospital 238	89.5	10	—	—	—	—	—	—	—
Hospital 228	89.4	11	—	—	—	—	—	—	—
Hospital 25	89.4	12	68.7	54	20.7	1	65.2	71.9	69.0
Hospital 50	89.2	13	80.9	1	8.3	31	78.5	86.0	78.1
Hospital 79	89.2	14	74.8	28	14.4	13	75.9	76.5	72.0
Timmins and District Hospital	88.3	15	—	—	—	—	—	—	—
Hospital 97	88.3	16	77	6	11.3	22	77.6	79.8	73.6
Hospital 178	88.3	17	—	—	—	—	—	—	—
Hospital 7	88.3	18	72.9	37	15.4	8	70.0	76.5	72.1
Stratford General Hospital	88.2	19	77.3	5	10.9	24	80.2	72.4	79.2
Hospital 200	88.2	20	—	—	—	—	—	—	—
Hospital 236	88.1	21	—	—	—	—	—	—	—
Hospital 220	88.0	22	—	—	—	—	—	—	—
Hospital 179	88.0	23	—	—	—	—	—	—	—
Hospital 70	88.0	24	68.2	57	19.8	2	57.3	78.8	68.4
Hospital 214	88.0	25	—	—	—	—	—	—	—
Hospital 76	87.8	26	71.9	43	15.9	7	68.5	75.8	71.4
Hospital 212	87.4	27	—	—	—	—	—	—	—
Hospital 15	87.2	28	70.7	47	16.5	4	69.9	76.5	65.9
Hospital 77	87.2	29	75.8	19	11.4	21	74.5	79.1	73.8
Hospital 62	86.6	30	76.4	12	10.2	26	78.5	83.1	67.5
Hospital 71	86.5	31	74.2	31	12.3	16	73.4	77.9	71.4
Hospital 106	86.3	32	70.3	48	16.0	6	74.1	73.2	63.6
Hospital 36	86.2	33	71.1	46	15.1	9	69.4	79.3	64.5
Hospital 211	86.0	34	—	—	—	—	—	—	—
Hospital 104	85.3	35	74.1	32	11.2	23	71.2	79.0	72.1
Hospital 218	85.2	36	—	—	—	—	—	—	—
Hospital 16	85.1	37	70.1	50	15.0	10	62.8	74.6	72.8
Hospital 109	85.0	38	74.9	26	10.1	27	75.3	79.6	70.0
St. Thomas-Elgin General Hospital	84.9	39	75.9	18	9.0	30	72.3	79.9	75.4
Hospital 8	84.9	40	70.3	49	14.6	12	64.7	74.1	72.2

Table 1: Hospital Mortality Index—Hospitals (continued)

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Hospital 72	84.6	41	72.7	38	11.9	19	72.7	78.9	66.5
Hospital 108	84.4	42	72.3	42	12.1	17	69.8	75.8	71.2
Hospital 80	84.2	43	74.9	27	9.3	28	—	79.6	70.2
Hospital 180	83.7	44	—	—	—	—	—	—	—
Hospital 210	83.2	45	—	—	—	—	—	—	—
Hospital 38	83.1	46	72.3	41	10.8	25	70.4	75.1	71.3
Hospital 44	83.0	47	—	—	—	—	—	—	—
Hospital 59	82.9	48	75.6	23	7.3	32	—	80.0	71.1
Orillia Soldiers' Memorial Hospital	82.8	49	—	—	—	—	—	—	—
Hospital 22	82.4	50	69.3	53	13.1	15	70.0	71.0	67.0
Hospital 96	82.2	51	63	64	19.2	3	63.0	65.9	60.2
Hospital 31	82.2	52	68.2	56	14.0	14	73.1	74.9	56.7
Hospital 203	82.2	53	—	—	—	—	—	—	—
Hospital 43	79.3	54	67.3	59	12.0	18	63.2	71.9	66.8
Hospital 55	79.0	55	74.7	29	4.3	34	68.2	81.4	74.6
Hospital 40	73.8	56	64.6	62	9.2	29	59.8	69.5	—
Hospital 18	72.8	57	67.2	60	5.6	33	60.2	71.7	69.6

Hospital Mortality Index: Municipalities

Note: The Hospital Mortality Index (HMI) is calculated for municipalities using the residence of patients treated in Ontario's acute-care hospitals.

Top-Ranked Municipalities

- The top municipality is Maple with a high HMI score of 91.4 out of 100. This municipality ranked high at second place in 2002/05 but had inadequate data to show a score in the late 1990s.
- The second ranked municipality is Port Perry, with an HMI score of 90.9. Interestingly, Port Perry ranked a relatively low 61st over the period from 2002 to 2005. Data were not available to show a score in the late 1990s.
- The fourth-ranked municipality is Stratford, which also ranked consistently high at second place in the late 1990s and at third place in the early 2000s. Stratford General Hospital scored in the top 20 in 2005/06 and ranked consistently highly (fifth and first) over the previous two time periods, which is not surprising, given that more than 80% of Stratford inpatient stays occurred at that hospital.
- Larger population municipalities with high rankings are: Richmond Hill, ranked 14th; Brampton, ranked 15th; and Ottawa, ranked 20th.

Bottom-Ranked Municipalities

- The lowest-ranked municipality in Ontario is Fort Erie, with a low HMI score of 62.2 for the most recent period but inadequate data from the late 1990s.
- Most of the bottom-ranked municipalities are small and consistently low ranked over the two time periods. Examples are Brockville, Fort Erie, Collingwood, and Gananoque.
- Aylmer West, ranked 57th, sees almost 70% of its inpatients go to St. Thomas-Elgin General Hospital, which has an 39th-place ranking.
- Larger municipalities with low rankings are: Sault Ste. Marie, ranked 72nd; Markham, ranked 73rd; Brantford, ranked 74th; and Sudbury, ranked 80th.

Five Largest Municipalities

- The five largest municipalities in Ontario by number of inpatient stays are: Toronto, ranked 40th on the Hospital Mortality Index with a score of 83.7; Ottawa, ranked 20th with a score of 86.0; Scarborough, ranked 49th with a score of 81.2; Mississauga, ranked 42nd with a score of 83.7; and Hamilton, ranked 37th with a score of 84.3.

Table 2: Hospital Mortality Index—Municipalities

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Maple	91.4	1	79.2	2	12.2	32	83.7	76.2	77.7
Port Perry	90.9	2	69.4	61	21.5	3	—	74.0	64.8
Orangeville	90.6	3	77.6	6	13.0	26	85.1	68.9	78.9
Stratford	88.9	4	79.1	3	9.8	55	81.9	74.1	81.3
Amherstburg	88.0	5	73.1	29	14.9	13	78.8	77.1	63.6
Wasaga Beach	87.9	6	—	—	—	—	—	—	—
Ajax	87.8	7	76.5	8	11.3	41	80.9	76.5	72.1
Alliston	87.5	8	63.8	92	23.7	2	59.0	58.6	73.9
Leamington	87.3	9	77.9	5	9.4	61	71.0	79.8	82.8
Whitby	87.2	10	74.9	15	12.3	31	74.8	73.1	76.8
Cornwall	87.1	11	70.2	54	16.9	7	71.0	69.5	70.0
Port Hope	86.8	12	66.5	81	20.3	4	72.8	72.1	54.5
Lively	86.7	13	61.2	100	25.5	1	66.0	55.1	62.5
Richmond Hill	86.5	14	72.3	35	14.2	19	78.3	64.7	73.9
Brampton	86.4	15	75.9	11	10.5	49	80.9	72.4	74.3
Bowmanville	86.4	16	74.4	18	12.0	33	69.0	75.7	78.5
Kingsville	86.3	17	70.7	53	15.6	10	—	66.8	74.6
Thornhill	86.3	18	76.7	7	9.6	58	82.2	72.5	75.5
Wallaceburg	86.1	19	68	72	18.1	6	70.3	64.3	69.4
Ottawa	86.0	20	72.8	33	13.2	24	77.2	68.8	72.5
Newmarket	86.0	21	70.7	52	15.3	12	75.8	70.6	65.7
Fergus	85.9	22	72.1	38	13.8	22	—	76.5	67.7
Woodbridge	85.6	23	73	31	12.6	30	72.8	71.9	74.2
Oshawa	85.5	24	73.5	26	12.0	34	76.4	71.1	72.9
Welland	85.4	25	71.2	44	14.2	20	75.6	64.8	73.2
Burlington	85.3	26	70.9	50	14.4	18	74.1	67.6	70.9
Cambridge	85.3	27	73.7	24	11.6	38	75.3	68.3	77.5
Georgetown	84.9	28	70	55	14.9	14	77.5	65.7	66.8
Other	84.8	29	74.4	17	10.4	52	76.4	73.9	73.0
Timmins	84.7	30	73.9	21	10.8	45	75.6	72.2	73.9
Arnprior	84.6	31	79.8	1	4.8	80	79.9	—	79.8
Carleton Place	84.5	32	—	—	—	—	—	—	—
Penetanguishene	84.5	33	78.2	4	6.3	76	—	77.7	78.7
Kitchener	84.4	34	69.5	60	14.9	15	73.9	65.2	69.4
Hawkesbury	84.3	35	—	—	—	—	—	—	—
Sarnia	84.3	36	73.7	23	10.6	47	76.7	71.3	73.1
Hamilton	84.3	37	73.7	22	10.6	48	76.3	69.5	75.5
Oakville	84.3	38	75.6	12	8.7	65	77.0	72.7	77.1
Willowdale	83.9	39	72.3	36	11.6	37	76.3	68.0	72.4
Toronto	83.7	40	72.1	39	11.6	36	74.5	69.8	71.9

Table 2: Hospital Mortality Index—Municipalities (continued)

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Parry Sound	83.7	41	71	47	12.7	28	71.4	69.1	72.6
Mississauga	83.7	42	70.9	49	12.8	27	73.8	68.5	70.4
Etobicoke	83.5	43	68.8	69	14.7	16	71.2	67.7	67.4
Windsor	83.1	44	72.4	34	10.7	46	76.1	68.1	73.0
London	82.9	45	73	30	9.9	53	77.2	70.6	71.3
Barrie	82.2	46	75.1	14	7.1	73	78.7	75.7	71.0
Peterborough	81.8	47	65.4	86	16.4	8	75.4	57.8	62.9
Thunder Bay	81.4	48	73.9	20	7.5	69	77.9	70.3	73.6
Scarborough	81.2	49	69.7	57	11.5	39	75.1	64.3	69.6
Rural	81.1	50	71.3	43	9.8	56	74.9	68.4	70.8
Pickering	81.0	51	73.6	25	7.4	70	82.3	67.4	71.2
Weston	80.8	52	69.4	62	11.4	40	74.9	64.6	68.6
Downsview	80.7	53	65.2	88	15.5	11	71.4	62.3	62.0
Pembroke	80.3	54	64.1	90	16.2	9	64.1	63.8	64.6
Kingston	80.1	55	68.4	70	11.7	35	68.0	65.0	72.4
Aurora	79.7	56	72.2	37	7.5	68	75.2	69.7	71.7
Aylmer West	79.7	57	76.1	10	3.6	82	78.8	71.8	77.7
North York	79.6	58	67	78	12.6	29	73.5	54.5	73.0
Bolton	79.5	59	73.3	28	6.2	77	77.1	72.2	70.4
Bracebridge	79.4	60	69.6	59	9.8	54	77.5	67.8	63.5
Midland	79.3	61	66.3	84	13.0	25	78.7	59.8	60.5
Belleville	79.1	62	68	73	11.1	42	69.0	62.5	72.4
Cobourg	79.1	63	60.9	102	18.2	5	72.2	58.0	52.4
St. Catharine	79.0	64	67.9	74	11.1	43	73.9	63.3	66.4
Woodstock	78.8	65	69.1	64	9.7	57	72.1	70.2	64.8
Owen Sound	78.7	66	74.1	19	4.6	81	69.1	75.2	78.0
Milton	78.7	67	69.6	58	9.1	63	75.3	65.3	68.3
Stouffville	78.5	68	71.2	45	7.3	71	77.5	72.5	63.5
Chatham	78.4	69	69	66	9.4	60	72.7	63.9	70.3
Orillia	78.4	70	68.9	68	9.5	59	68.8	68.2	69.6
Grimsby	78.3	71	67.5	76	10.8	44	67.4	63.7	71.4
Sault Ste. Marie	78.3	72	74.9	16	3.4	83	81.3	72.2	71.1
Markham	78.0	73	64.2	89	13.8	21	69.9	60.4	62.2
Brantford	77.5	74	71.2	46	6.3	75	75.3	69.6	68.6
Bradford	77.5	75	72	40	5.5	78	67.8	76.3	—
Niagara Falls	77.4	76	66.9	79	10.5	50	73.1	63.1	64.6
Collingwood	77.1	77	62.5	96	14.6	17	72.8	59.3	55.3
Guelph	77.0	78	69.1	63	7.9	67	69.2	67.4	70.8
St. Thomas	76.9	79	66.4	83	10.5	51	69.1	60.7	69.4
Sudbury	76.2	80	70.7	51	5.5	79	71.2	70.5	70.5

Table 2: Hospital Mortality Index—Municipalities (continued)

	2005/06		2002/05		Change 02/05–05/06		2002/03	2003/04	2004/05
	Score	Rank	Score	Rank	Score	Rank	Score	Score	Score
Napanee	76.1	81	69	65	7.1	72	71.6	71.8	63.7
Gananoque	75.4	82	61.8	98	13.6	23	61.1	—	62.4
North Bay	75.4	83	66.1	85	9.3	62	68.6	59.3	70.5
Keswick	75.2	84	73	32	2.2	85	71.0	68.6	79.4
Innisfil	74.5	85	75.2	13	-0.7	86	83.7	67.3	74.6
Lindsay	73.9	86	71.5	41	2.4	84	70.6	73.3	70.6
Port Colborne	73.6	87	65.3	87	8.3	66	73.8	64.0	58.2
Tillsonburg	73.1	88	66.5	80	6.6	74	68.9	69.0	61.7
Brockville	71.7	89	62.6	95	9.1	64	—	63.8	61.4
Paris	71.3	90	—	—	—	—	—	65.1	—
Uxbridge	71.1	91	—	—	—	—	—	67.4	—
Huntsville	66.6	92	71.4	42	-4.8	88	—	62.6	80.2
Fort Erie	62.2	93	64	91	-1.8	87	71.0	58.2	62.8

Conclusion

The Fraser Institute's *Hospital Report Card: Ontario 2008* provides a comprehensive measure of inpatient acute-care conditions in Ontario hospitals. This is the second edition of an annual report card for patients in Ontario, and its publication follows the introduction of a similar report for patients in British Columbia (*Hospital Report Card: British Columbia 2008*). Future editions of The Fraser Institute's *Hospital Report Card* will include performance measurement of acute-care hospitals in other provinces. We welcome comments on the content and format of this report via <comments@hospitalreportcards.ca>.

Introduction and background

The goal of the Fraser Institute's *Hospital Report Card: Ontario 2008* is to contribute to the improvement of inpatient care in Ontario by providing hospital-specific information about quality of service directly to patients and to the general public. This series is the first in Canada to empower patients to make informed choices about their health-care delivery options by providing comparable, hospital-specific, performance measurements on clearly identified indicators. The Fraser Institute's *Hospital Report Card: Ontario 2008* has been published to promote accountability within hospitals, thereby stimulating improved performance through an independent and objective measurement of performance.

Introduction

In Canada, individuals have access to data identifying problem areas in an automobile from information willingly supplied by consumers, the vehicle's manufacturer, and industry experts. They can find which CD player is the best on the market for their needs. They can compare restaurants before heading out for an evening meal. Yet when it comes to health care, which many will consider more important for an individual's well being, consumers are left with remarkably little information about where the best services are available. They cannot even tell which hospitals offer the worst care or have the highest mortality rates (Esmail, 2003).

What Are Hospital Report Cards? [1]

Hospital report cards provide a set of consistent performance measurements to rank the products in question and help inform consumer choice. In some cases, these indicators may be subjective, or based on the opinions of survey respondents. In other cases, the indicators will be objective measures of performance or outcomes.

Hospital report cards are used to measure specific practices in hospitals such as the application of a specific drug or technology to certain events; or performance with respect to access to care or consumer friendliness; or to measure the likelihood of a positive outcome provided by health facilities in a specific jurisdiction.

[1] Daniel P. Kessler of Stanford University, Hoover Institution provides a helpful delineation of the field in a PowerPoint® slideshow entitled "Health Care Quality Report Cards."

The Four Primary Types of Hospital Report Cards

1 Process Report Cards This type of report card describes the inputs used by hospitals, health plans or individual physicians in the course of treating their patients. An example of these types of report cards can be found in those commissioned by The Leapfrog Group (Leapfrog Group, 2005). [2] The primary strength of a Process Report Card is that it can be developed from existing medi-

[2] Further information available at <<http://www.leapfroggroup.org/>>.

cal administrative databases with relative ease. The process report card, however, does not necessarily measure the appropriateness, the quality, or the importance of the inputs employed in ensuring good health, although these factors can be captured to some extent by the inclusion or exclusion of specific inputs.

2 Survey Report Cards These types of report cards are composed of patients' evaluations of their quality of care and/or customer service. An example of this type of report card is found in the Pacific Business Group on Health's (PBGH) *Healthscope* reports. Although survey-based report cards do provide valuable information on subjective areas of patient care, they cannot measure how treatment decisions by a doctor or hospital lead to objective improvements in patient care.

3 Outcomes Report Cards These report cards present average levels of adverse health outcomes based on mortality or complication rates experienced by patients as part of a health plan, as treated by a specific doctor, or in a specific hospital. An example of this type of report card can be found in the *Pennsylvania CABG* surgery reports (Pennsylvania Health Care Cost Containment Council, 2006). [3] These report cards provide objective measures of differences in the quality of care but are susceptible to being "gamed" by either doctors or hospitals. For example, the doctor or hospital may avoid exceptionally sick patients (that is, patients who are qualitatively more ill with a listed condition and who will consequently drag average results down) in favour of healthy patients (to skew results upward). This unintended effect can, however, be mitigated through the appropriate application of risk-adjustment in the measures. Outcomes report cards (including The Fraser Institute's *Hospital Report Card*) provide the most empirically sound basis for analyzing the quality of care.

[3] Further information available at
<<http://www.phc4.org/reports/cabg/>>.

4 Balanced Scorecards The balanced scorecard was developed in the early 1990s by Drs. Robert Kaplan and David Norton to examine a business above and beyond the financial bottom line. Translated into the healthcare field, this results in four quadrants. In the case of the *Ontario Hospital Reports* series, a prime example of the use of a "balanced scorecard," these are [a] financial performance and conditions; [b] patient/client satisfaction; [c] clinical utilization and outcomes; and, [d] system integration and change. While this variant of report card is useful in determining the broadest view of a hospital's operations and functions, specific and relevant indicators regarding hospital performance may be overlooked.

Why Are Hospital Report Cards Published?

The publication of hospital report cards is based on the concept that publishing outcomes data can both improve the quality of care in hospitals and inform patients' healthcare decision-making. Armed with more information based on a set of repeatable measurements about the relative performance of caregivers, both patients and physicians are able to make a more informed choice about which

facility or provider to select for a given condition. This allows for a rational discussion of relative levels of quality of service provision and eliminates measurement based on anecdotal information, which can be misleading and ultimately harmful.

Where Are Hospital Report Cards Published?

The United States of America

The United States was one of the first nations to begin measuring, comparing, and publishing measurements of hospital performance. Hospital report card initiatives were first undertaken by the federal government, with state governments following its lead. Private-sector information providers offering several competing reports on provider quality have refined the reporting of information.

In 1987, the first US hospital report cards were published by the Health Care Financing Administration (HCFA). These reports detailed annual mortality rates that were measured from the records of hospitalized Medicare patients. However, due to extensive criticism regarding the accuracy, usefulness, and interpretability of the HCFA's mortality data, this initiative was withdrawn in 1993 (Berwick and Wald, 1990).

In the late 1980s, the state of New York began the Cardiac Surgery Reporting System (CSRS), which collected data from patients' medical histories and recorded whether they died in hospital following surgery. From these data, New York was able to report detailed physician-specific statistics. While the information contained in the CSRS was not originally intended to provide the public with information about the performance of their provider, the news media understood the public's desire for such data and saw the benefit in publishing the information. In December of 1990, the *New York Times* used this information to publish a list of local hospitals, which ranked facilities according to their mortality rates for Coronary Artery Bypass Surgery (CABG). Invoking the *Freedom of Information Act*, the *New York Newsday* sued the New York State Department of Health to obtain access to its database on bypass surgery and on cardiac surgeons. The goal was to publish physician-specific death rates for patients. The Supreme Court of New York ruled that it was in the public's best interests to have access to these mortality data in order to make informed decisions about their health care (Zinman, 1991). As a result, *New York Newsday* was able to publish the information on physician performance for citizens to assess where the best care was available. Driven by this development, the New York State Department of Health began publishing annual editions of the *Coronary Artery Bypass Surgery Report* in 1996 (New York State, Department of Health, 2005). [4]

Following the precedent set by this pioneering case, a wide variety of hospital performance reports began to be produced in the 1990s by a disparate group of authors that ranged from the news media, coalitions of large employers, consumer advocacy organizations, and state governments (Marshall et al., 2003). Many different development paths have been taken so that there is currently no "standardized" hospital report card or agreement on the indicators to measure.

[4] Links to the entire series of reports can be found at <http://www.health.state.ny.us/nysdoh/heart/heart_disease.htm>.

Furthermore, these different reports range widely in terms of both quality and comprehensiveness. Indeed, as Marshall and colleagues cheekily note: “Public reporting in the United States is now much like healthcare delivery in that country: It is diverse, is primarily market-based, and lacks an overarching organizational structure or strategic plan. Public reporting systems vary in what they measure, how they measure it and how (and to whom) it is reported.” [5] Of course, for patients who are the beneficiaries of such competition between information providers, each of whom strives to deliver a product in some way superior to his competitors, this is no bad thing.

[5] Document available at <www.medscope.com/viewarticle/452953_3>.

Examples of American Private and Public Information Providers

- [1] America’s Best Hospitals—USNEWS & World Report <<http://www.usnews.com>>.
- [2] Healthgrades <<http://www.healthgrades.com>>
- [3] Leapfrog Group <<http://www.leapfroggroup.org>>
- [4] National Committee for Quality Assurance (NCQA) <<http://www.ncqa.org>>
- [5] National Quality Forum <<http://www.qualityforum.org>>
- [6] Quality Check <<http://www.jointcommission.org/PerformanceMeasurement/PerformanceMeasurement/>>
- [7] Cardiac Surgery in New Jersey <<http://www.state.nj.us/health/reportcards.htm>>
- [8] Cardiac Surgery Reports <<http://www.health.state.ny.us/nysdoh/healthinfo/index.htm>>
- [9] Pennsylvania Hospital Performance Reports <<http://www.phc4.org>>
- [10] Indicators of Inpatient Care in New York Hospitals <<http://www.myhealthfinder.com>>
- [11] Indicators of Inpatient Care in Texas Hospitals <<http://www.dshs.state.tx.us/THCIC/>>
- [12] Maryland Hospital Performance Evaluation Guide <<http://www.hospitalguide.mhcc.metro-data.com>>

The United Kingdom

The hospital reporting universe in the United Kingdom is a fraction of the US market’s size. League tables [6] of death rates for English hospitals were available from 1992 to 1996 (Leyland and Boddy, 1998) and mortality statistics for English hospitals were published by the Labour government in 1998. Although publicly released, these were intended for managerial use and had little discernible impact (Street, 2002). The first initiative designed for public consumption was the Patient’s Charter (National Health Service, 1991), [7] which focused on waiting times as opposed to clinical quality.

In 1998, the National Health Service (NHS, Britain’s tax-funded and universal medical insurance program) adopted a new Performance Assessment

[6] A league table ranks the performance of a range of institutions.

[7] Further information can be found at <<http://www.pfc.org.uk/medical/pchrt-e1.htm#foreword>>.

Framework (PAF) to report clinical outcomes at the hospital level (London: Department of Health, 1998). It focused on health gain, fair access, effective delivery of services, efficient delivery of services, health outcomes, and patient/career experience. This initiative received prominence in 2001 as the NHS Plan became the first government plan in the developed world to deal explicitly with report cards. Beginning in September 2001, the UK Department of Health began to publish a new rating system for all NHS non-specialist hospitals in England. The performance of hospitals included in this survey was classified into one of four categories, ranging from zero to three stars based on the hospital's performance on a range of indicators and the outcome of their clinical governance review by the Commission for Health Improvement (CHI). As an additional incentive for improvement, beyond that assumed to come with public reporting of performance, the Department of Health mandated that hospitals scoring at the high end of the scale would receive greater funding and autonomy, while those at the bottom of the scale would be subject to greater government oversight and intervention. For example, those receiving zero stars were subject to investigations and underwent changes in management where necessary.

Although the lion's share of reporting in Britain has been by and at the direction of government, an independent initiative entered the arena in the latter half of 2000 when Tim Kelsey and Jake Arnold-Forster, a pair of *Sunday Times* journalists, founded Dr. Foster to generate authoritative independent information about local health services on the web at <<http://www.drfooster.co.uk>>. The partnership is in the form of a 50:50 joint venture involving the new Health and Social Care Information Centre (a special health authority of the NHS) and Dr. Foster, a commercial provider of healthcare information. Numerous publications have emerged from this initiative including the *Good Birth Guide* and the annual *Good Hospital Guide*, which was first published in 2001 and continues to be published annually. These guides contain information about hospital-specific mortality rates; the total number of staff; wait times; numbers of complaints; as well as, uniquely, private hospital prices for services.

Canada

Hospital reporting initiatives, like those in both the United States and the United Kingdom, have emerged in Canada only recently. In 1998, the Ontario Hospital Association produced a report card comparing the hospitals covered by its organization. Undertaken by a research group at the University of Toronto, the publication focused upon inpatient acute care and reported results at both peer group and regional levels of aggregation, but not for individual facilities. *Hospital Report '99*, published the following year, saw the first reporting of hospital-specific acute-care hospital performance indicators in Canada. In 2000, the Government of Ontario joined as a partner in the enterprise and the scope of the report was expanded to include such areas as complex continuing care, mental health, rehabilitation, and emergency department care. In addition, specific reports dealing with women's health, the health of the population as a whole, and nursing care were also produced. These publications have since appeared annually. The

Hospital Report Series appears in a “balanced scorecard” format and assesses the performance of hospitals in four quadrants including: [a] financial performance and conditions; [b] patient/client satisfaction; [c] clinical utilization and outcomes; and [d] system integration and change.

Other notable reporting initiatives in Canada include Canadian Institute for Health Information’s *Hospital Standardized Mortality Ratio* (discussed below), *Healthcare Performance Measurement in Canada: Who’s Doing What?* (Baker et al., 1998), *Quality of Cardiac Care in Ontario* (ICES, 2004) [8] and *The State of Hospital Care in the GTA/905* (GTA/905 Healthcare Alliance, 2005). [9] Additionally, two publications that have reported on patient safety and adverse events are *The Ottawa Hospital Patient Safety Study* (Forster et al., 2004) [10] and *The Canadian Adverse Events Study* (Baker et al., 2004), though neither reported institution-specific measures. [11] Additionally, for the last 17 years, The Fraser Institute has published *Waiting Your Turn: Hospital Waiting lists in Canada*, a report that provides Canada’s only national, comparable, and comprehensive measurement of waiting times for medically necessary treatment (Esmail and Walker with Bank, 2007). [12] Another Fraser Institute initiative is *How Good is Canadian Health Care? An International Comparison of Health Care Systems* (Esmail and Walker, 2007) [13], which compares Canada’s health policies and healthcare performance with other nations that guarantee their citizens access to healthcare insurance.

Other avenues of hospital performance reporting and monitoring in Canada have largely been in the form of private hospital assessments of performance by a contracted third party using a proprietary performance indicator methodology. A prime example of this is the work done by the Hay Group in rating the performance of participating Ontario hospitals for a fixed fee per facility (Hay Group, 2005).

Canadian Institute for Health Information’s Hospital Standardized Mortality Ratio (HSMR)

The Canadian Institute for Health Information (CIHI) published its own measure of hospital and regional performances, the *Hospital Standardized Mortality Ratio* (HSMR), in 2007. While both CIHI’s measure and the *Hospital Report Card: Ontario 2008* use data from CIHI’s Discharge Abstract Database, there are several significant differences between the measure published by CIHI and those published by The Fraser Institute. These differences make comparisons between the two reports difficult and lead to the conclusion that CIHI and the *Hospital Report Card: Ontario 2008* are measuring mortality in two very different ways.

The most significant difference between the measures published by The Fraser Institute and those published by CIHI is the level of detail available. According to the CIHI report, the *Hospital Standardized Mortality Ratio* (HSMR) is a “big dot summary” measure (CIHI, 2007: 4), or a measure that “tracks progress on broad outcomes at a system level” (2007: vii). More specifically, the HSMR is a composite measure of mortality in diagnosis groups that comprise 80% of all deaths in acute-care facilities. These include:

[8] Report available at <http://www.ices.on.ca/WebBuild/site/ices-internet-upload/file_collection/Ccort%5FFull%5FReport%2Epdf>.

[9] Further details available at <<http://www.gta905health.com/mediaroom/2005-may3.html>>. Report available at <<http://www.gta905health.com/whatsnew/gta905-hospitalreport.pdf>>.

[10] Article available at <<http://www.pubmedcentral.gov/articlerender.fcgi?tool=pubmed&pubmedid=15078845>>. Also, the Manitoba Center for Health Policy recently released an in-hospital patient safety report using the AHRQ Patient Safety Indicators (Bruce et al., 2006).

[11] Article available at <<http://www.cmaj.ca/cgi/content/full/170/11/1678>>.

[12] Report available at <http://www.fraserinstitute.org/commerce.web/publication_details.aspx?pubID=4962>.

[13] Report available at <http://www.fraserinstitute.org/commerce.web/publication_details.aspx?pubID=5035>.

- Acute pancreatitis
- Acute renal failure
- Adult respiratory distress syndrome
- Alcoholic liver disease
- Alzheimer's disease
- Acute myocardial infarction
- Angina pectoris
- Aortic aneurism and dissection
- Atrial fibrillation and flutter
- Cardiac arrest
- Cerebral infarction
- Chronic ischemic heart disease
- Chronic obstructive pulmonary disease
- Chronic renal failure
- Complications of procedures, not elsewhere classified
- Convalescence
- Diabetes mellitus type 2
- Diffuse non-Hodgkin's lymphoma
- Diverticular disease of intestine
- Fibrosis and cirrhosis of liver
- Heart failure
- Hepatic failure
- Hip fracture
- Intracerebral hemorrhage
- Intracranial injury
- Lymphoid leukemia
- Malignant neoplasm of bladder
- Malignant neoplasm of brain
- Malignant neoplasm of breast
- Malignant neoplasm of bronchus and lung
- Malignant neoplasm of colon
- Malignant neoplasm of liver and intrahepatic bile ducts
- Malignant neoplasm of pancreas
- Malignant neoplasm of prostate
- Malignant neoplasm of stomach
- Malignant neoplasm without specification of site
- Multiple myeloma and malignant plasma cell neoplasms
- Myeloid leukemia
- Other and unspecified types of non-Hodgkin's lymphoma
- Other bacterial intestinal infections
- Other diseases of digestive system
- Other diseases of intestine
- Other disorders of brain
- Other disorders of fluid, electrolyte and acid-base balance
- Other disorders of urinary system
- Other interstitial pulmonary diseases
- Other non-traumatic intracranial hemorrhage
- Paralytic ileus and intestinal obstruction without hernia
- Peritonitis
- Pleural effusion, not elsewhere classified
- Pneumonia
- Pneumonitis due to solids and liquids
- Post-procedural respiratory disorders, not elsewhere classified
- Pulmonary embolism
- Respiratory failure
- Secondary malignant neoplasm of other sites
- Secondary malignant neoplasm of respiratory and digestive organs
- Septicemia
- Shock, not elsewhere classified
- Stroke, not specified as hemorrhage or infarction
- Subarachnoid hemorrhage
- Unspecified dementia
- Unspecified renal failure
- Vascular disorders of intestine
- Volume depletion

By comparison, the measures published in the *Hospital Report Card: Ontario 2008* allow for the examination of hospital performance in specific and detailed areas, thus providing patients with a greater level of information regarding their particular interest or diagnosis and allowing providers greater insight into the areas of care that are of particular concern in their facilities. In the latest year of data, 39 specific and well-defined indicators of quality of care are examined in The Fraser Institute's report. The composite measure published in the *Hospital Report Card: Ontario 2008*, the Hospital Mortality Index (HMI), is also a more specific measure of mortality in acute-care hospitals than CIHI's composite measure and includes only the following nine measures:

- Hip replacement mortality (IQI 14)
- Acute myocardial infarction mortality (IQI 15)
- Congestive heart failure mortality (IQI 16)
- Acute stroke mortality (IQI 17)
- Gastrointestinal hemorrhage mortality (IQI 18)
- Hip fracture mortality (IQI 19)
- Pneumonia mortality (IQI 20)
- Death in low mortality Diagnosis Related Groups (PSI 2)
- Failure to rescue rates (PSI 4)

Further, the *Hospital Standardized Mortality Ratio* (HSMR) is a relative measure, giving a measure of a hospital's or region's performance relative to Canada's performance as a whole in 2004. The indicator measures the ratio of the actual number of deaths for a hospital or region given its case mix (age, sex, length of stay, diagnosis group, etc. of its patients) to the number of deaths that would be expected according to national estimates in 2004. [14] Conversely, the 39 indicators published in the *Hospital Report Card* [15] and the Hospital Mortality Index (HMI) composite measure give an absolute measure of patient safety or in-patient quality of care.

These significant differences in the approaches used by CIHI and the *Hospital Report Card: Ontario 2008* lead to the conclusion that the two measures cannot be compared with one another directly. Further, the relative rankings of hospitals are not necessarily comparable because of differences in what is being measured in the HSMR and the various indicators of the *Hospital Report Card: Ontario 2008* or the HMI composite measure, and because of the differences between an absolute and relative measure (i.e. for a given indicator, a hospital or region performing better than the Canadian average will not necessarily score highly if the Canadian average is low). In addition to these significant differences in approach is a difference in risk-adjustment methodologies: the indicators in the *Hospital Report Card: Ontario 2008* are risk-adjusted using the publicly-available 3M/AHRQ methodology/software and are not risk adjusted in the manner developed and employed by CIHI for the HSMR.

However, while the two sets of measures cannot be directly compared, it is nevertheless true that the HSMR provides a measure of hospital mortality that can be used in conjunction with the HMI and the other measures produced in the *Hospital Report Card: Ontario 2008*. [16] Both sets of measures are based on an internationally validated and commonly applied methodology, and both sets of measures can provide patients and providers with insight into where mortality rates are unacceptably high or exceptionally low. [17] In this sense, the authors of this report welcome CIHI's measure and hope that greater reporting of, and attention to, provider performances on mortality leads to improved outcomes from care for Canadians.

What Are the Measurable Impacts of Patient Safety and Hospital Report Cards?

In the United States, hospital report cards have had a number of measurable impacts on performance and the quality of patient care. The first and most notable example came from the *New York State Cardiac Surgery Report*. Hannen et al. (1994)

[14] The number of deaths is computed for the 65 diagnosis groups listed above, accounting for 80% of in-patient mortality.

[15] In some years, more than 39 indicators are available (see Appendix G).

[16] Note that the regional results published by CIHI are based on where patients were treated, while municipal measures published in the *Hospital Report Card* are based on where patients lived.

[17] It is worth noting that CIHI began working with the HSMR measure for Canada in 2005 while The Fraser Institute's research program on the *Hospital Report Card* began in 2004. Further, The Fraser Institute's *Hospital Report Card* was the first publicly available report in Canada that allowed the comparison of mortality rates in Canadian hospitals based on a standardized measure. A significant advantage of the CIHI's report over the *Hospital Report Card: Ontario 2008* is that it names all hospitals for which data is published while many hospitals in Ontario elected to remain unnamed in the report produced by The Fraser Institute.

reported an associated 41% decline in the risk-adjusted mortality rate of Coronary Artery Bypass Graft patients with the publication of these outcomes statistics and data. A similar overall trend was experienced in Pennsylvania and New Jersey following the publication of their report cards. [18]

These findings have also created controversy about the Cardiac Surgery Reporting System, the database used to create the New York State Surgery Report. Critics have raised pertinent questions regarding “up-coding” [19] and the possibility that hospitals have decided not to operate on some complex and critically ill patients and have referred such complex cases to out-of-state jurisdictions (McKee and Healy, 2000). In contrast, using data from the *Cardiac Surgery Reporting System Report* (CSRS) for the period from 1991 to 1999, researchers at the National Bureau of Economic Research found that the reporting program had an impact on the volume of cases and the future quality at hospitals identified as poor performers. Those identified as weaker hospitals lost some relatively healthy patients to competing facilities with better records. Subsequently, these “weaker” hospitals experienced a decline of 10% in the number of patients during the first 12 months after an initial report, and this decrease remained in place for three years. Consequently, patients choosing these hospitals demonstrated a decrease in their risk-adjusted mortality rate by approximately 1.2 percentage points (Cutler et al., 2004). [20]

Though subject to a number of caveats regarding the design and structure, report cards have had a beneficial impact on the quality of healthcare delivery in those regions where they are published.

[18] For Pennsylvania data, see *Cardiac Care: Pennsylvania's Guide to Coronary Artery Bypass Graft Surgery 1994–1995*, <<http://www.phc4.org/reports/cabg/95/default.htm>> (April 2, 2002). For New Jersey, see *Report Shows Cardiac Surgery Death Rates Decline to Lowest Level in a Decade* (press release), <http://nj.gov/cgi-bin/dhss/njnewslne/view_article.pl?id=3046> (March 2008). For the northern New England initiative, see G.T. O'Connor et al., “A Regional Intervention to Improve the Hospital Mortality Associated with Coronary.”

[19] “Up-coding” is a term used to describe when financial incentives cause a physician or hospital to exaggerate or falsely represent patients’ medical conditions and services provided in order to increase payment received from the government.

[20] <<http://papers.nber.org/papers/w10489>>.

Hospital Report Card: Ontario 2008

The primary focus of this project was the construction of a patient-friendly hospital and patient-care report card focused on clinical outcomes. The report itself includes information about all health facilities treating patients through the Ontario Health Insurance Program, 30 of which (out of a total of 136) are identified in the report. [21] The report is built on a recognized hospital-report-card methodology from the Agency for Healthcare Research & Quality (AHRQ) in the United States that is also used in more than 12 US States including New York, Texas, Colorado, [22] California, Florida, Kentucky, Maryland, Massachusetts, Minnesota, New Jersey, Oregon, Utah, Vermont, and parts of Wisconsin.

[21] These facilities voluntarily participated in this project. Other facilities in Ontario either declined or offered no response to our requests for participation/identification. Readers should note that the participation rate declined from 43 facilities in FY 2004 to 30 facilities in FY 2005.

[22] New York <<http://www.myhealthfinder.com>>; Texas <<http://www.dshs.state.tx.us>>; Colorado <<http://www.hospitalquality.org>>.

1 What Are the AHRQ Inpatient Quality and Patient Safety Indicators?

The first stage of the research process in producing this report was to acquire or create a methodology that was reliable, easily understood by the public and participants, and that produced an accurate measurement of provider performance. An initial period of examining performance indicator frameworks from earlier literature on hospital report cards provided a number of different examples of

accepted and proven methodologies that were not otherwise proprietary information and thus could be employed by The Fraser Institute. [23] The search also turned up methodologies that, though available, would be less effective in providing a patient-friendly clinical outcomes-focused hospital report card.

Further examination of these available methodologies led to the selection of the performance indicator framework developed by AHRQ in the United States. [24] AHRQ's indicator modules were chosen because they represent a comprehensive set of indicators that are widely used, highly regarded, and applicable to any hospital inpatient administrative data. They are readily available and relatively inexpensive to use. Importantly, they comprise an ideal set of indicators to allow a patient-friendly, clinical outcomes-focused, hospital-specific patient care report card.

The AHRQ indicators date from the mid-1990s when AHRQ developed a set of quality measures, or indicators, that required only the information found in routine hospital administrative data: diagnoses and procedures codes, patient age, gender, other basic demographic and personal information, source of admission, and discharge status. These indicators, 33 in all, made up the Healthcare Cost and Utilization Project (HCUP) Quality Indicators, designed to be used by hospitals to assess their inpatient quality of care as well as by the State and community to assess access to primary care. [25] Although they could not be used to provide definitive measures of the quality of health care directly, they are used to provide indicators of healthcare quality. They serve as the basis for subsequent in-depth investigation of issues of quality and patient safety at the facility level.

In the years following the release of the HCUP, both the knowledge base regarding quality indicators increased and newer risk adjustment methods developed. Following input from then-current users, as well as advances in the specific indicators themselves, AHRQ underwrote a project to develop and further refine the original Quality Indicators. This project was undertaken by the University of California San Francisco-Stanford Evidence-based Practice Centre. The results of this research were the AHRQ Quality Indicators, which are currently used to measure hospital performance in more than 12 US States including New York, Texas, Colorado, California, Florida, Kentucky, Maryland, Minnesota, New Jersey, Oregon, Utah, Vermont and parts of Wisconsin.

AHRQ indicators Are Organized in Four Modules [26]

[1] Prevention Quality Indicators (PQIs) [27] Consisting of ambulatory care sensitive conditions, these indicators pertain to hospital admissions that could have been prevented via high-quality outpatient care.

[2] Inpatient Quality Indicators (IQIs) These indicators reflect the quality of care inside hospitals and include such items as inpatient mortality; the utilization of procedures where there are questions of misuse, overuse, or underuse; and volume of procedures from which evidence shows that a higher volume of procedures is associated with a lower rate of mortality.

[23] For a clear example of how individual report card methodologies are proprietary, please refer to Healthgrades user agreement at <<http://www.healthgrades.com/aboutus/index.cfm?function=modnw&modtype=content&modact=UserAgreement>>.

[24] An agency of the US federal government's Department of Health and Human Services.

[25] Further information regarding the HCUP Quality Indicators can be found at <http://www.qualityindicators.ahrq.gov/hcup_archive.htm>.

[26] The Fraser Institute's *Hospital Report Card* is composed of 50 indicators from the quality and safety modules of the AHRQ system (see Appendix E for a list of all indicators used in this report). Not all indicators are available for all years.

[27] The PQIs identify the quality of care for ambulatory care-sensitive conditions and are measures of the overall healthcare system. Since the *Hospital Report Card* was designed to analyze the care inside acute-care hospitals, the PQIs were omitted from this report.

[3] Patient Safety Indicators (PSIs) These indicators focus upon preventable instances of harm to patients such as complications arising from surgery and other iatrogenic [28] events.

[4] Pediatric Quality Indicators (PDIs) [29] These indicators examine the quality of pediatric inpatient care, as well as the quality of outpatient care that can be inferred from inpatient data, such as potentially preventable hospitalizations. [30]

The Fraser Institute's *Hospital Report Card* uses the Inpatient Quality Indicators and Patient Safety Indicators indicators; it is made up of 50 of the 63 available indicators in these categories [31]. These two modules were chosen because of their widespread use and high quality record.

The AHRQ indicator modules are designed to be used with data from administrative databases in the United States, which themselves are primarily used by hospitals for billing purposes. This type of record, referred to as “administrative data” consists of diagnoses and procedures codes along with information about a patient’s age, gender, and discharge status. The Canadian counterpart is the Canadian Institute for Health Information’s Discharge Abstract Database (DAD), which contains demographic, personal, administrative, and clinical data for hospital discharges (inpatient acute, chronic, rehabilitation) and day surgeries.

The indicators in The Fraser Institute's *Hospital Report Card* analyze over 9.5 million patient records extracted from the DAD for the period of fiscal years 1997/98 to 2005/06. The data are also risk-adjusted using the 3M™ All Patient Refined™ DRG (APR™-DRG) software, commonly recognized to be the gold-standard system for risk-adjusting hospital data [32]. The AHRQ IQIs were in fact designed to be used in conjunction with 3M™ All Patient Refined Diagnosis Related Groups™ (APR™-DRG) software, which risk adjusts the IQIs for patients’ clinical conditions and severity of illness or risk of mortality.

Participation in the report card project was not mandatory for hospitals in Ontario. Of Ontario’s 136 acute care facilities, 30 hospitals, representing 54,316 inpatient records or 4.94% of inpatient records in Ontario (in Fiscal 2005/06), agreed to have their institution identified (see Appendix D for a list of participating institutions).

Since this report is based on administrative data, the results have limitations. Coding variations exist among hospitals and codes do not always provide specific details about a patient’s condition at the time of admission or capture all that occurs during hospitalization. For these reasons, individual judgment often is required while reviewing the results from this report.

When reviewing mortality or other quality and patient safety measures, remember that medicine is not an exact science and death or complications will occur even when all standards of care are followed. Deciding on treatment options and choosing a hospital are decisions that should be made in consultation with a physician. It is not recommended to choose a hospital based solely on statistics and descriptions such as those given in this report.

[28] An iatrogenic event is one that is inadvertently caused by a physician, a medical/surgical treatment, or a diagnostic procedure.

[29] The PDI module became available in February 2006 and was therefore not used in the first edition of the *Hospital Report Card* for Ontario. The PDI module is being considered for future updates of the *Hospital Report Cards*.

[30] For details, please see <http://www.qualityindicators.ahrq.gov/pdi_download.htm>.

[31] Intrinsic differences between ICD9/CCP and ICD10CA/CCI resulted in several indicators being reported in either data coded in ICD9/CCP (DAD data from FY1997 to FY2001) or data coded in ICD10CA/CCI (DAD data from FY2002 to FY2005), but not both (see Appendix G for details). Moreover, three indicators were dropped in the last year due to changes in the AHRQ software.

[32] For further details, please refer to Appendix B and <http://www.3m.com/us/healthcare/his/products/coding/refined_drg.jhtml>.

2 Data Quality

CIHI's Discharge Abstract Database (DAD) contains information on hospital stays in Canada. Various CIHI publications note that the DAD is used extensively by a variety of stakeholder groups to monitor the use of acute-care health services, conduct analyses of health conditions and injuries, and increasingly to track patient outcomes. [33] The DAD is a major data source used to produce various CIHI reports, including annual reports on the performance of the hospitals and health-care system and for seven of the health indicators adopted by the federal, provincial, and territorial governments. [34] These data have been used extensively in previous reports on health-care performance and form the basis for many journal articles. [35]

In order to produce good information about data quality, CIHI established a comprehensive and systematic data-quality program, whose framework involves 24 characteristics relating to five data quality dimensions of accuracy, timeliness, relevance, comparability, and usability. [36]

There have been reports on data quality that we have assessed, including up-coding allegations in Ontario but those applied to information earlier in our dataset. We also considered the effect that SARS could have on the results, as 44 patients died in Ontario from SARS between February and July 2003 and hospital operations were affected. However, we note that the median HMI score rose by 6.6 points in 2003 and dropped by 6.5 points in 2004, leaving the score virtually unchanged between 2002 and 2004 at 71.3. It is difficult to discern a SARS effect in these data, something supported by recent research at ICES in Toronto. [37]

There are a number of publications that have addressed data-quality issues, which are discussed in our report. Of note are CIHI's reabstraction studies that go back to the original patient charts and recode the information using a different set of expert coders. [38]

The reabstraction studies note the following rates of agreement between what was initially coded compared to what was coded on reabstraction:

- a) non-medical data: 96%–100%
- b) selection of intervention codes (procedure codes): 90%–95%
- c) selection of diagnosis codes: 83%–94%
- d) selection of most responsible diagnosis: 89%–92%
- e) typing of co-morbidities: pre-admit: 47%–69%; post-admit: 51%–69%
- f) diagnosis typing (which indicates the relationship of the diagnosis to the patient's stay in hospital) continues to present a problem; discrepancy rates have not diminished with adoption of ICD-10-CA.

The coding issues in points (e) and (f) do not affect our results since the most responsible diagnosis is coded with a high degree of agreement and the AHRQ indicators do not discriminate among diagnosis types. Overall, when the rates of agreement in the third year of this reabstraction study (performed on data

[33] DAD Data Quality Reabstraction study. Combined findings for FY 1999/2000 and 2000/2001. Dec 2002.

[34] DAD Data Quality Reabstraction study. Combined findings for FY 1999/2000 and 2000/2001. Dec 2002.

[35] A joint initiative of the Ontario Hospital Association and the Government of Ontario. *Hospital Report 2006: Acute care*. <[http://www.oha.com/Client/OHA/OHA_LP4W_LND_WebStation.nsf/resources/2007+Hospital+Reports/\\$file/OHA_Acute07_EN_final.pdf](http://www.oha.com/Client/OHA/OHA_LP4W_LND_WebStation.nsf/resources/2007+Hospital+Reports/$file/OHA_Acute07_EN_final.pdf)>..

[36] The CIHI Data Quality Framework. June 2005 Revision.

[37] *Research Utilization of Ontario's Health System during the 2003 SARS Outbreak*. ICES 2004. Report available at <http://www.ices.on.ca/file/SARS_report.pdf>.

[38] Reabstraction participants in the study were required to have several years of coding experience, experience coding in ICD-10-CA and CCI in particular, experience coding at a tertiary care centre, and attendance at specific CIHI educational workshops. They were also required to attend a one-week training session and to receive a passing score on the inter-rater test.

coded in ICD-10-CA) were compared to the rates of agreement of the previous years' data (coded in ICD-9-CCP), the rates were as well as, or better than, the rates previously.

However, with regard to the coding of pneumonia, a potential data quality issue exists because some reabstraction coders selected pneumonia instead of chronic obstructive pulmonary disease (COPD) as the most responsible diagnosis. [39] This could potentially create false positive results for Pneumonia mortality rate (IQI 20) since this indicator counts deaths due to pneumonia in situations where the primary diagnosis is a pneumonia diagnosis code. We have noted this proviso in our report.

With respect to specific conditions related to the health indicators examined, those that are procedure driven (i.e. cesarean section, coronary artery bypass graft, and total knee replacement) were coded well with low discrepancy rates. The following had less than a 5% rate of discrepancy: cesarean section, coronary artery bypass graft, hysterectomy, total knee replacement, vaginal birth after cesarean, and total hip replacement. The following had greater than a 5% discrepancy: acute myocardial infarction (AMI) (8.9%), hip fracture (6.0%), hospitalization due to pneumonia and influenza (6.9%), and injury hospitalization (5.3%). [40]

Discrepancy rates were noted in conditions that are diagnosis driven: AMI [41], stroke, pneumonia, and COPD [42] (as described above). Only the pneumonia codes are potentially affected in our report.

Overall, according to CIHI, findings from their three-year DAD reabstraction studies "have confirmed the strengths of the database, while identifying limitations in certain areas resulting from inconsistencies in the coding of some data elements." [43] In addition, the findings from the inter-rater data (that is, comparison between reabtractors) were generally similar to the findings from the main study data (that is, comparison between original coder and reabtractor). This suggests that the database is coded as well as can be expected using existing approaches in the hospital system.

In addition to the aforementioned reabstraction studies, the OECD published a report [44] in support of the AHRQ patient safety indicator modules noting that "this set of measures represents an exciting development and their use should be tested in a variety of countries" (p. 11). Further, a recently released report by the Manitoba Center for Health Policy that used the AHRQ Patient Safety Indicators [45] noted two important advantages to using the AHRQ module. The first advantage is the breadth of coverage offered by the indicators in studying in-hospital patient safety. The second is that the AHRQ patient-safety indicators were developed to measure complications of hospital-based care among a group of patients for whom the complications seemed preventable or highly unlikely.

[39] Canadian Coding Standards for ICD-10-CA and CCI 2004.

[40] DAD Data Quality Reabstraction study. Combined findings for FY 1999/2000 and 2000/2001. Dec 2002.

[41] DAD Data Quality, Reabstraction Study Combined finding for Fiscal Years 1999/2000 and 2000/2001. CIHI 2002: 8.

[42] Data Quality of the DAD following the First year implementation of ICD-10-CA/CCI. September 2004.

[43] Data Quality of the DAD following the First year implementation of ICD10CA/CCI. September 2004: 41.

[44] John Millar, Soeren Mattke, and the Members of the OECD Patient Safety Panel. *Selecting Indicators for Patient Safety at the Health Systems Level in OECD Countries*. <<http://www.oecd.org/dataoecd/53/26/33878001.pdf>>.

[45] Bruce et al., 2006.

References

Baker, G.R., et al. (1998-99). "Healthcare Performance Measurement in Canada: Who's Doing What?" *Hospital Quarterly* 2 (2): 22-26.

- Baker, G.R., et al. (2004). "The Canadian Adverse Events Study: The Incidence of Adverse Events among Hospital Patients in Canada." *Canadian Medical Association Journal* 170 (11) (May).
- Berwick, D.M., and D.L. Wald (1990). "Hospital Leaders' Opinions of the HCFA Mortality Data." *JAMA* 263 (2): 247–49.
- Bruce, S., et al. (2006). *Application of Patient Safety Indicators in Manitoba: A First Look*. Manitoba Centre for Health Policy.
- Canadian Institute for Health Information [CIHI] (2007). *HSMR: A New Approach for Measuring Hospital Mortality Trends in Canada*. CIHI.
- Cutler, D.M., et al. (2004). "The Role of Information in Medical Markets: An Analysis of Publicly Reported Outcomes in Cardiac Surgery." Working Paper No. 10489 (May). National Bureau of Economic Research.
- Esmail, Nadeem (2003). "Health Information in Hiding." *Fraser Forum* (May): 12–13.
- Esmail, Nadeem, and Michael Walker (2007). *How Good Is Canadian Health Care? 2007 Report. An International Comparison of Health Care Systems*. The Fraser Institute.
- Esmail, Nadeem, and Michael Walker with Margaret Bank (2007). *Waiting Your Turn: Hospital Waiting Lists in Canada, 17th Edition*. The Fraser Institute.
- Forster, A.J., et al. (2004). "Ottawa Hospital Patient Safety Study: Incidence and Timing of Adverse Events in Patients Admitted to a Canadian Teaching Hospital." *Canadian Medical Association Journal* 170 (8) (April).
- Hannan, E.L., et al. (1994). "Improving the Outcomes of Coronary Bypass Surgery in New York State." *JAMA* 271: 761–66.
- Hay Group (2005). *Annual Benchmarking Comparison of Canadian Hospitals*. The Hay Group and The Canadian Institute for Health Information. <<http://www.haygroup.ca/services/Benchmarking%20Health/2005/CIHI%202005%20C.pdf>>.
- Leyland, A.H., and F.A Boddy (1998). "League Tables and Acute Myocardial Infarction." *Lancet* 351 (9102): 555–58.
- London Department of Health (1998). "A First Class Service, Quality in the NHS."
- London Department of Health (1999). "The NHS Performance Assessment Framework."

Marshall, M.N., et al. (2003). "Public Reporting on Quality in the United States and the United Kingdom." *Health Affairs* (May/June): 136.

McKee, M., and J. Healy (2000). "Monitoring Hospital Performance." *Euro Observer* 2 (2): 2.

National Health Service (1991). "The Patient's Charter." <<http://www.pfc.org.uk/medical/pchrt-el.htm#foreword>>.

New York State Department of Health (2005). "Adult Cardiac Surgery in New State 2001–2003." October 2005. <http://www.nyhealth.gov/nysdoh/heart/pdf/2001-2003_cabg.pdf>.

Street, A. (2002). "The Resurrection of Hospital Mortality Statistics in England." *Journal of Health Services Research and Policy* 2: 104–10.

Woodward, Graham, Thérèse Stukel, Michael Schull, Nadia Gunraj, and Andreas Laupacis (2004). *Utilization of Ontario's Health System During the 2003 SARS Outbreak*. An ICES Investigative Report (May). Institute for Clinical Evaluative Sciences (ICES).

Zinman, D. (1991). "Heart Surgeons Rated. State Reveals Patient-mortality Records." *Newsday* (Dec): 34.

Methodology Overview

All hospital data used in The Fraser Institute's *Hospital Report Card: Ontario 2008* are from the Discharge Abstract Database (DAD) that was purchased from the Canadian Institute for Health Information (CIHI). The DAD is an administrative database containing demographic, administrative, and clinical data for hospital discharges (inpatient acute, chronic, rehabilitation) and day surgeries. Only inpatient acute records were used in this report (see Appendix A for details on which DAD data fields were used).

CIHI is unable to release the identity of specific institutions in DAD data releases unless those institutions have explicitly granted permission to the researchers requesting the data. For the years from 1997/98 to 2004/05, 43 of Ontario's 136 acute-care hospitals (representing 457,409 inpatient records or 41% of inpatient records in Ontario in 2004/05) voluntarily granted The Fraser Institute authorization to identify their institution-specific discharge data in the DAD. The total number of patient records for the province during these years was 8,588,784. For 2005/06, only 30 acute-care hospitals (representing 54,316 inpatient records or 4.94% of records in Ontario in 2005/06) granted their authorization (see Appendix D for a list of participating institutions).

These records were then grouped into diagnosis-related groups (DRGs) using The Centers for Medicare and Medicaid Services (CMS) Diagnosis Related Groups (DRG) Grouper software for fiscal years 1997 through 2004 and the CMS Grouper with Medicare Code Editor software for FY 2005. The program sorts patients' records into groups that are expected to have similar hospital resource use. The groupings are based on information extracted from diagnosis and procedure codes as well as the patients' age, sex, and the presence of complications or co-morbidities (see Appendix B for details). [1]

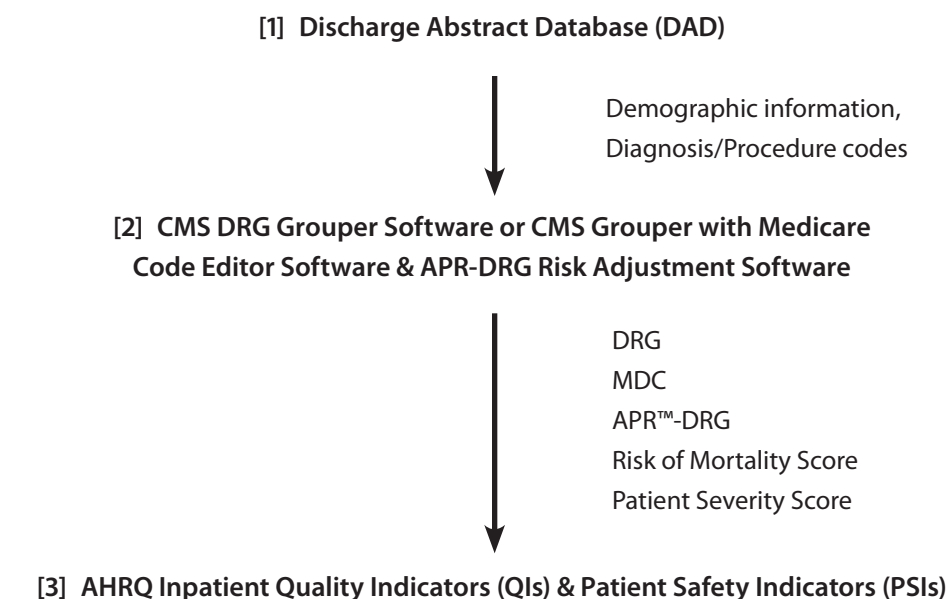
Since more specialized hospitals may treat more high-risk patients and some patients arrive at hospitals sicker than others, it is difficult to compare hospital mortality and utilization rates for patients with the same condition but a different health status. In order to compensate for this potential difference in hospital case mix, the international standard for risk adjustment, developed by 3M Corporation (for information, see <http://www.3m.com/us/healthcare/his/products/coding/refined_drg.jhtml>), was employed to risk-adjust the data. This was done to ensure that a hospital's final score reflected the performance grading that the hospital would have received if it had provided services to patients with the average mix of medical complications (see Appendix B for details).

The final step in the methodology was to produce separate indicators for hospital performance based on the methodology developed by the Agency for Healthcare Research and Quality's (AHRQ) Evidence-Based Practice Center (EPC) at the University of California San Francisco-Stanford [2] (for information, see <<http://www.qualityindicators.ahrq.gov/>>; see Appendix C for details). AHRQ's indicator modules use readily available discharge data and were chosen because they have been demonstrated to be a concise and effective tool by which to inform patients'

[1] In order to use the Centers for Medicare and Medicaid Services (CMS) - and All Patient Refined-Diagnosis Related Groups (APR™-DRG) Groupers as well as the Agency for Healthcare Research and Quality (AHRQ) Inpatient Quality Indicators (IQI) and Patient Safety Indicators (PSI) modules, the diagnosis and procedure codes had to be translated from ICD9/CCP (the *International Statistical Classification of Diseases, Injuries, and Causes of Death, Ninth Revision* [ICD-9] and the *Canadian Classification of Diagnostic, Therapeutic, and Surgical Procedures* [CCP]) (data from 1997/98 to 2001/02) or ICD10CA/CCI (ICD-10-CA is an enhanced version of ICD-10 developed by CIHI for morbidity classification in Canada; the companion classification to ICD-10-CA for coding procedures in Canada is CCI) (data from 2002/03 to 2005/06) to ICD-9-CM. Please see Appendix J for details.

[2] The AHRQ Quality Indicators were developed in response to the need for both multidimensional and accessible quality indicators. They include a family of measures that patients, providers, policymakers and researchers can use with easily accessible inpatient data to identify apparent variations in the quality of inpatient care.

Figure 1: Methodology Overview



Note: For FY 2005, the CMS Grouper with Medicare Code Editor Software was used rather than the CMS DRG Grouper Software. Also, for FY 2005, the AHRQ built-in limited APR-DRG Grouper provided by 3M was used.

decision-making about their health care. They are currently used to measure hospital performance in more than 12 US states including New York, Texas, Colorado, California, Florida, Kentucky, Maryland, Massachusetts, Minnesota, New Jersey, Oregon, Utah, Vermont and parts of Wisconsin. Figure 1 shows a graphical representation of the methodology. The Fraser Institute's *Hospital Report Card: Ontario 2008* comprises 39 indicators of the quality of inpatient care and patient safety (for a list of all indicators used in the report, see Appendix E). [3]

Inpatient Quality Indicators (IQIs) reflect the quality of care inside hospitals and include mortality rates, the utilization of procedures (where there are questions of misuse, overuse, or underuse), and volume of procedures (for which evidence shows that a higher volume of procedures is associated with a lower rate of mortality). Patient Safety Indicators (PSIs) focus on preventable complications acquired while in hospital, as well as adverse events following surgeries, procedures, and childbirth.

The indicators are expressed as observed rates (which are raw measures) and risk adjusted rates (incorporating patient severity and risk of mortality scores from the 3M™ software described above). IQI rates are expressed as rates per hundred patients while PSI rates are expressed per thousand. Each institution was also given a score from 0 to 100 for each indicator based on its risk-adjusted rate and was then ranked based on their scores (see Appendix F for details on calculating scores and ranks). [4]

A Hospital Mortality Index (HMI) was constructed to examine the overall performance of a hospital or municipality across mortality indicators. It consists of eight mortality indicators from 1997/98 to 2001/02 and nine mortality indicators from 2002/03 to 2005/06: [5] *hip replacement mortality* (IQI 14), *acute myocardial infarction mortality* (only included from 2002/03 to 2005/06) (IQI 15), *congestive heart failure mortality* (IQI 16), *acute stroke mortality* (IQI 17), *gastrointestinal hemorrhage mortality* (IQI 18), *hip fracture mortality* (IQI 19), *pneumonia*

[3] There are a total of 50 indicators in this report. Due to changes in diagnostic and procedural classifications, the availability of indicators varies across years. Years 2002 to 2004 report 42 main indicators. Due to changes in AHRQ software, 3 indicators were dropped in 2005 for a total of 39 indicators..

[4] Ranks are not used for comparisons of hospitals across indicators as they are based on a varying number of hospitals. It is advisable to rely on the scores (as in the HMI) to examine the overall performance of a hospital across indicators. The HMI also has a fairly large number of hospitals so any bias is insignificant.

[5] Intrinsic differences between the ICD9/CCP and ICD10CA/CCI resulted in several indicators being reported on in either data coded in ICD9/CCP (DAD data from FY1997 to FY2001) or data coded in ICD10CA/CCI (DAD data from FY2002 to FY2005), but not both (see Appendix G for details).

mortality (IQI 20), low mortality DRGs (PSI 2) and failure to rescue rates (PSI 4). The final HMI index score is based on an equal-weight construct of the separate indicators. For an indicator to be included in the HMI, hospitals representing at least 75% of the patient sample for that year had to have measured data in order to ensure an adequate number of hospitals for comparison. For example, in 2005/06 an indicator had to contain at least 824,770 records in order to be included in the HMI. [6] All institutions were ranked based on their HMI score, where the highest rank (1) corresponds to the highest score out of 100 (for details on calculating scores, ranks, the HMI, and rank of the HMI, please see Appendix F).

[6] The total number of patient records 2005/06 was 1,099,694.

Throughout the *Hospital Report Card*, several measures were taken in order to protect patient confidentiality. First, patient identifiers such as patients' names and addresses were removed prior to The Fraser Institute accessing the dataset. Also, postal codes were truncated to Forward Sortation Areas (FSAs) and grouped into municipalities in order to assess and compare care received by patients from those jurisdictions (please see Appendix H for details). Furthermore, results were omitted from publication if the patient population in any given indicator was less than, or equal to, 5 in any institution and/or municipality.

Legend for Sample Table

Use the sample table and the explanations below to help you understand how each indicator is displayed in the data tables of the *Hospital Report Card: Ontario 2008*.

[A] The name of the Agency for Healthcare Research and Quality's (AHRQ) In-patient Quality Indicator (IQI) or Patient Safety Indicator (PSI). [7]

[7] Please see Appendix E for a complete list of the indicators used in the *Hospital Report Card*.

[B] All indicators were expressed as:

- [a] an Observed Rate (which are raw measures)
- [b] a Risk Adjusted Rate (incorporating patient severity and risk of mortality scores from 3M™ All Patient Refined Diagnosis Related Groups [APR™-DRG] Software) [8]
- [c] a Score [9]
- [d] a Rank

[8] Please see Appendix B for details.

[9] Please see Appendix F for details on calculating scores, ranks, HMI, and rank of the HMI.

Two additional measures were calculated to examine the overall performance of a hospital or municipality across mortality indicators: a Hospital Mortality Index (HMI) and a Rank of the Hospital Mortality Index.

[10] Please see Appendix D for a list of participating institutions.

[C] Indicators are stratified by Institution [10] and by Municipality. [11]

[D] All IQIs are expressed as percent. PSIs are expressed per thousand.

[E] All data used in the *Hospital Report Card* were extracted from the Discharge Abstract Database (DAD), which was purchased from CIHI for the period from Fiscal 1997 (April 1, 1997 to March 31, 1998) to Fiscal 2005 (April 1, 2005 to March 31, 2006).

[11] Postal Codes were truncated to Forward Sortation Areas (FSAs) before The Fraser Institute accessed the dataset. All patient FSAs were grouped into corresponding municipalities as described by Canada Post. Please see Appendix H for details.

[F] These lines indicate that it is not possible to compare data from 1997/98–2001/02 and 2002/03–2004/05 because of the change in coding classification from ICD9/CCP

Esophageal Resection Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	—	—	—	—	—	—	—	—	—
Alliston	—	—	—	—	—	—	—	—	—
Amherstburg	—	—	—	—	—	—	—	—	—
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	—	—	—	—	—	—	—	—
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	—	—	—	—	—	—	—	—	—
Belleville	—	—	—	—	—	—	—	—	—
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	—	—	—	—	—	—	—	—	—
Bracebridge	—	—	—	—	—	—	—	—	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	—	—	3	—	—	—	—	5	—
Brantford	—	—	—	—	—	—	—	—	—
Brockville	—	—	—	—	—	—	—	—	—
Burlington	—	—	—	—	—	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	—	—	—	—	—	—	—	—	—
Carleton Place	—	—	—	—	—	—	—	—	—
Chatham	—	—	—	—	—	—	—	—	—
Cobourg	—	—	—	—	—	—	—	—	—
Collingwood	—	—	—	—	—	—	—	—	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	—	—	—	—	—	—	—	—	—
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	4	—	—	—	—	—	—	—	—
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	—	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	—	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	—	—	—	—	—
Guelph	—	—	—	—	—	—	—	—	—
Hamilton	—	—	1	—	—	—	2	—	—
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	—	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	—	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	—	—	—	—	—	—	—	—
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	—	—	—	—	—	—	—	—	—
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	—	—	2	—	—	4	—	—	—
Leamington	—	—	—	—	—	—	—	—	—
Lindsay	—	—	—	—	—	—	—	—	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	—	—	—	—	—	—	—	1	—
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	—	—	—	—	—	—	—	—	—
Meaford	—	—	—	—	—	—	—	—	—
Midland	—	—	—	—	—	—	—	—	—
Milton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	—	—	8	1
Napanee	—	—	—	—	—	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	—	—	—	—	—	—	—	—	—
Niagara Falls	—	—	—	—	—	—	—	—	—
North Bay	—	—	—	—	—	—	—	—	—
North York	—	—	—	—	—	—	—	—	—
Oakville	—	—	—	—	—	—	—	—	—
Orangeville	—	—	—	—	—	—	—	—	—
Orillia	—	—	—	—	—	—	—	—	—
Oshawa	—	—	—	—	—	—	—	—	—
Ottawa	—	—	5	1	1	1	1	2	59
Owen Sound	—	—	—	—	—	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	—	—	—	—	—	—	—	—	—
Pembroke	—	—	—	—	—	—	—	—	—
Penetanguishene	—	—	—	—	—	—	—	—	—
Perth	—	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	—	—	—	—	—	—	—	—	—
Pickering	—	—	—	—	—	—	—	—	—
Port Colborne	—	—	—	—	—	—	—	—	—
Port Hope	—	—	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	—	—	—	—	—	—	—	—	—
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	—	—	—	—	—	—	—	—	—
Sault Ste. Marie	—	—	—	2	—	—	—	—	—
Scarborough	—	2	4	—	—	5	5	7	1
Simcoe	—	—	—	—	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	—	—	—	—	—	—	—	—
St. Catharine	—	—	—	—	—	—	—	—	—
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	—	—	—	—	—	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	—	—	—	—	—	—	—	—	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	—	—	—	—	—	—	—	—	—
Thornhill	—	—	—	—	—	—	—	—	—
Thunder Bay	—	—	—	—	—	—	—	—	—
Tillsonburg	—	—	—	—	—	—	—	—	—
Timmins	—	—	—	—	—	—	—	—	—
Toronto	1	3	7	3	—	3	3	6	60
Trenton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Esophageal Resection Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	—	—	—	—	—	—	—	—	—
Weston	—	—	—	—	—	—	—	—	—
Whitby	—	—	—	—	—	—	—	—	—
Willowdale	2	—	—	—	—	—	—	3	—
Windsor	—	—	—	—	—	—	—	—	—
Woodbridge	—	—	—	—	—	—	—	—	—
Woodstock	—	—	—	—	—	—	—	—	—
Rural	3	1	6	4	2	2	4	4	56
Other	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	—	—	—	—	—	—	—	—	—
Alliston	—	—	—	—	—	—	—	—	—
Amherstburg	—	—	—	—	—	—	—	—	—
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	—	—	—	—	—	—	—	—
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	—	—	—	—	—	—	—	—	—
Belleville	—	—	—	—	—	—	—	—	—
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	—	—	—	—	—	—	—	—	—
Bracebridge	—	—	—	—	—	—	—	—	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	—	—	6	—	—	—	—	—	—
Brantford	—	—	—	—	—	—	—	—	—
Brockville	—	—	—	—	—	—	—	—	—
Burlington	—	—	—	—	—	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	—	—	—	—	—	—	—	—	—
Carleton Place	—	—	—	—	—	—	—	—	—
Chatham	—	—	—	—	—	—	—	—	—
Cobourg	—	—	—	—	—	—	—	—	—
Collingwood	—	—	—	—	—	—	—	—	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	—	—	—	—	—	—	—	—	—
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	—	—	—	8	10	—	—	—	61
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	—	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	—	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	—	—	—	—	—
Guelph	—	—	—	—	—	—	—	—	—
Hamilton	2	6	7	7	5	3	7	2	60
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	—	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	—	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	—	—	—	—	—	—	—	—
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	—	—	—	—	—	—	—	—	—
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	—	—	—	—	7	—	—	4	1
Leamington	—	—	—	—	—	—	—	—	—
Lindsay	—	—	—	—	—	—	—	—	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	—	—	—	6	3	5	—	—	1
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	—	—	—	—	—	1	—	—	—
Meaford	—	—	—	—	—	—	—	—	—
Midland	—	—	—	—	—	—	—	—	—
Milton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	3	4	4	2	4	—	4	9	1
Napanee	—	—	—	—	—	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	—	—	—	—	—	—	—	—	—
Niagara Falls	—	—	—	—	—	—	5	—	—
North Bay	—	—	—	—	—	—	—	—	—
North York	—	—	—	—	—	—	—	—	—
Oakville	—	—	—	—	6	—	—	—	—
Orangeville	—	—	—	—	—	—	—	—	—
Orillia	—	—	—	—	—	—	—	—	—
Oshawa	—	—	—	—	—	—	—	—	—
Ottawa	1	5	3	1	2	7	2	5	1
Owen Sound	—	—	—	—	—	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	—	—	—	—	—	—	—	—	—
Pembroke	—	—	—	—	—	—	—	—	—
Penetanguishene	—	—	—	—	—	—	—	—	—
Perth	—	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	—	—	—	—	—	—	—	—	—
Pickering	—	—	—	—	—	—	—	—	—
Port Colborne	—	—	—	—	—	—	—	—	—
Port Hope	—	—	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	—	—	—	—	—	—	—	—	—
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	—	—	—	—	—	—	—	—	—
Sault Ste. Marie	—	—	—	—	—	—	—	—	—
Scarborough	6	3	1	3	9	4	1	3	58
Simcoe	—	—	—	—	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	—	—	—	—	—	—	—	—
St. Catharine	—	—	—	—	—	—	—	—	—
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	—	—	—	—	—	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	—	—	—	—	—	—	—	—	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	—	—	—	—	—	—	—	—	—
Thornhill	—	—	—	—	—	—	—	—	—
Thunder Bay	—	—	—	—	—	—	—	—	—
Tillsonburg	—	—	—	—	—	—	—	—	—
Timmins	—	—	—	—	—	—	—	—	—
Toronto	7	1	5	4	1	2	6	6	57
Trenton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pancreatic Resection Surgery Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	—	—	—	—	—	—	—	—	—
Weston	—	—	—	—	—	—	—	—	—
Whitby	—	—	—	—	—	—	—	—	—
Willowdale	—	—	—	—	—	—	8	7	54
Windsor	5	—	—	—	—	—	—	1	55
Woodbridge	—	—	—	—	—	—	—	—	—
Woodstock	—	—	—	—	—	—	—	—	—
Rural	4	2	2	5	8	6	3	8	1
Other	—	—	—	—	11	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	49	8	7	45	24	—	—	—	—
Alliston	—	—	18	—	—	—	—	—	—
Amherstburg	33	—	—	—	—	—	—	—	—
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	—	—	—	—	—	—	—	—
Aylmer West	—	46	—	—	—	—	—	—	—
Barrie	4	3	38	27	2	—	—	—	—
Belleville	16	—	49	40	15	—	—	—	—
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	53	29	9	—	—	—	—	—	—
Bracebridge	—	49	—	—	—	—	—	—	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	31	6	44	14	38	—	—	—	—
Brantford	44	28	40	16	43	—	—	—	—
Brockville	—	—	—	12	—	—	—	—	—
Burlington	15	10	13	33	33	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	22	37	2	21	16	—	—	—	—
Carleton Place	—	—	—	—	—	—	—	—	—
Chatham	—	—	—	—	—	—	—	—	—
Cobourg	21	—	20	—	32	—	—	—	—
Collingwood	—	—	—	—	28	—	—	—	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	6	18	36	34	3	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	10	43	35	23	42	—	—	—	—
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	47	—	1	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	27	24	45	37	17	—	—	—	—
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	—	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	46	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	11	—	—	—	—
Guelph	34	22	16	35	7	—	—	—	—
Hamilton	40	16	24	9	39	—	—	—	—
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	46	—	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	14	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	—	—	—	—	—	—	—	—
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	45	12	15	30	35	—	—	—	—
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	54	34	32	20	40	—	—	—	—
Leamington	—	—	—	—	—	—	—	—	—
Lindsay	—	35	6	—	48	—	—	—	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	5	42	11	5	26	—	—	—	—
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	35	1	43	2	6	—	—	—	—
Meaford	—	—	—	—	—	—	—	—	—
Midland	—	—	—	—	—	—	—	—	—
Milton	—	—	4	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	43	20	11	6	12	—	—	—	—
Napanee	—	—	—	—	20	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	7	—	39	—	—	—	—	—	—
Niagara Falls	52	36	14	4	44	—	—	—	—
North Bay	9	31	48	39	36	—	—	—	—
North York	18	50	41	46	—	—	—	—	—
Oakville	41	7	33	19	19	—	—	—	—
Orangeville	—	—	—	38	—	—	—	—	—
Orillia	17	48	3	15	27	—	—	—	—
Oshawa	28	22	27	28	31	—	—	—	—
Ottawa	20	33	33	17	13	—	—	—	—
Owen Sound	8	2	17	36	22	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	—	—	—	—	—	—	—	—	—
Pembroke	23	38	—	—	—	—	—	—	—
Penetanguishene	—	—	—	—	—	—	—	—	—
Perth	39	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	12	25	30	10	5	—	—	—	—
Pickering	—	—	5	42	46	—	—	—	—
Port Colborne	13	30	—	—	—	—	—	—	—
Port Hope	—	39	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	50	44	47	—	—	—	—	—	—
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	11	4	23	31	9	—	—	—	—
Sault Ste. Marie	29	13	21	7	25	—	—	—	—
Scarborough	32	26	31	13	23	—	—	—	—
Simcoe	—	5	—	—	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	15	—	—	—	—	—	—	—
St. Catharine	30	32	19	11	37	—	—	—	—
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	1	—	—	—	—	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	—	—	—	—	—	—	—	—	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	3	9	22	43	34	—	—	—	—
Thornhill	2	21	28	3	20	—	—	—	—
Thunder Bay	26	40	37	18	41	—	—	—	—
Tillsonburg	—	—	—	—	—	—	—	—	—
Timmins	19	—	—	—	—	—	—	—	—
Toronto	41	27	29	22	29	—	—	—	—
Trenton	—	—	—	8	1	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Abdominal Aortic Artery (AAA) Repair Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	36	17	42	41	4	—	—	—	—
Weston	48	41	50	29	45	—	—	—	—
Whitby	14	—	10	44	17	—	—	—	—
Willowdale	37	14	8	25	47	—	—	—	—
Windsor	51	11	26	32	10	—	—	—	—
Woodbridge	25	—	—	—	—	—	—	—	—
Woodstock	38	—	—	—	—	—	—	—	—
Rural	24	19	25	24	30	—	—	—	—
Other	47	45	1	26	8	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	7	37	105	109	31	107	33	1
Ajax	75	93	9	93	27	93	39	41	1
Alliston	1	107	53	114	117	63	113	89	128
Amherstburg	29	104	11	1	52	72	26	14	106
Arnprior	43	35	50	99	14	19	19	106	1
Aurora	25	14	104	49	52	95	109	116	110
Aylmer West	50	113	52	62	33	1	66	94	1
Barrie	98	12	25	87	74	107	62	75	90
Belleville	96	28	111	29	104	83	102	80	86
Bolton	46	41	20	35	1	40	108	118	1
Bowmanville	39	13	14	34	93	1	24	19	82
Bracebridge	1	111	5	26	50	24	32	1	1
Bradford	116	51	53	37	101	13	33	55	96
Brampton	105	40	77	75	79	89	85	70	100
Brantford	77	25	19	73	31	59	33	91	122
Brockville	52	79	107	120	78	30	97	68	80
Burlington	76	64	90	33	86	46	93	58	89
Caledon	—	—	—	—	—	—	—	—	1
Caledonia	34	23	95	—	—	112	105	110	98
Cambridge	80	37	94	69	95	87	45	56	75
Carleton Place	117	116	4	11	1	19	1	10	1
Chatham	104	26	6	92	30	50	46	8	83
Cobourg	35	43	74	89	26	40	86	77	125
Collingwood	23	32	21	20	25	60	59	49	1
Concord	—	—	—	16	115	115	48	12	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	19	55	40	63	76	53	58	15	111
Cumberland	—	—	—	—	—	1	—	57	—
Delhi	20	109	8	13	—	16	69	—	1
Downsview	86	74	83	73	32	50	42	35	1
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	9	27	1	39	111	116	12	105	1
East Gwillimbury	26	—	12	54	23	18	—	117	—
Elliot Lake	112	24	117	55	37	104	35	78	119
Elmira	—	—	55	67	—	1	—	18	1
Espanola	57	—	—	25	116	—	71	—	—
Essex	113	9	50	49	—	52	14	—	95
Etobicoke	88	85	71	79	66	85	84	37	94
Fergus	55	47	16	—	17	—	1	30	1
Fort Erie	27	45	28	113	15	75	25	16	1
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	55	117	109	117	39	48	37	—	1
Garson	42	52	61	119	10	1	—	—	—
Georgetown	111	89	66	47	13	62	53	112	1
Goderich	1	8	13	23	42	54	104	48	1
Gravenhurst	—	1	26	40	41	44	29	92	1
Greely	—	49	—	—	54	120	—	—	—
Grimsby	33	3	115	98	29	101	57	95	1
Guelph	21	91	88	84	43	96	82	36	1
Hamilton	93	87	62	101	40	65	67	63	101
Hanmer	49	56	103	64	64	118	47	53	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	1	115	41	38	—	69	—	46	1
Hawkesbury	11	108	1	44	1	—	1	119	—
Huntsville	37	101	33	110	15	99	106	47	121
Ingersoll	38	114	116	10	6	58	51	24	1
Innisfil	—	—	—	52	107	64	27	90	1
Kapuskasing	60	59	60	24	60	22	10	29	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	8	21	24	41	61	25	36	22	1
Kincardine	13	31	110	1	56	26	20	109	1
King City	—	46	47	42	110	17	—	59	1
Kingston	71	77	92	102	82	71	96	84	70
Kingsville	107	1	7	9	68	119	40	113	1
Kirkland Lake	65	41	42	13	1	—	—	96	1
Kitchener	48	56	85	77	80	73	61	20	67
Leamington	101	105	59	1	57	22	73	115	76
Lindsay	14	103	70	71	38	97	98	87	113
Listowel	28	—	—	—	50	32	—	9	1
Lively	52	48	30	36	—	—	64	1	—
London	91	92	64	61	69	68	87	86	74
Manotick	—	62	10	17	—	15	—	—	—
Maple	1	22	47	51	7	67	28	43	1
Markham	74	38	77	90	87	56	100	40	1
Meaford	41	20	—	1	—	—	—	—	1
Midland	100	17	17	111	45	28	112	81	120
Milton	102	30	29	30	34	21	90	11	109

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	84	68	56	72	83	79	64	68	77
Napanee	30	54	46	22	99	111	17	44	84
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	1	—	1
Newmarket	99	95	72	109	108	109	38	103	102
Niagara Falls	87	112	98	97	88	34	55	61	79
North Bay	97	69	67	96	46	37	15	25	123
North York	69	90	68	68	65	55	23	98	116
Oakville	31	78	76	21	59	38	43	60	68
Orangeville	24	110	31	32	103	33	101	107	1
Orillia	66	63	88	85	97	35	103	104	1
Oshawa	70	60	32	76	48	90	80	51	104
Ottawa	83	84	87	83	96	43	22	31	81
Owen Sound	81	50	100	106	8	39	11	74	1
Paris	64	—	44	116	28	117	—	28	1
Parry Sound	10	36	113	31	57	1	68	21	1
Pembroke	114	33	82	104	81	86	1	1	107
Penetanguishene	45	44	114	107	44	57	18	108	1
Perth	32	10	15	1	100	1	111	17	1
Petawawa	1	4	—	—	11	1	9	1	130
Peterborough	44	66	91	64	47	66	49	42	72
Pickering	72	76	84	28	75	106	8	38	88
Port Colborne	109	102	43	95	21	108	7	85	126
Port Hope	22	100	106	7	63	100	62	100	124
Port Perry	36	16	36	17	—	1	114	99	112

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	58	—	—	—	1	—
Renfrew	18	106	23	1	19	1	1	1	1
Richmond Hill	79	71	64	56	55	105	99	65	97
Rockland	115	53	—	12	20	78	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	63	83	96	86	66	60	73	81	108
Sault Ste. Marie	67	39	35	81	91	102	30	32	99
Scarborough	59	73	63	87	62	42	72	66	73
Simcoe	12	97	105	94	18	1	60	52	1
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	108	88	27	19	12	110	13	1	1
St. Catharine	94	67	39	48	90	88	82	39	118
St. Mary's	1	—	—	43	1	81	—	62	1
St. Thomas	17	6	17	115	85	49	92	102	105
Stouffville	52	29	102	45	22	113	94	45	1
Stratford	89	18	101	100	36	92	21	26	1
Strathroy	16	—	108	118	114	1	70	23	1
Sturgeon	—	—	—	—	—	—	52	114	130
Sudbury	92	94	99	108	98	102	16	27	115
Thornhill	68	74	68	80	102	91	79	83	117
Thunder Bay	51	58	75	81	24	45	31	64	71
Tillsonburg	118	80	49	—	106	98	40	93	1
Timmins	103	34	86	91	92	114	50	101	129
Toronto	85	65	80	53	72	75	89	73	103
Trenton	110	96	1	27	105	27	75	111	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Coronary Artery Bypass Graft (CABG) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	58	5	38	112	113	29	55	50	1
Val Caron	61	15	56	56	71	—	—	—	1
Wallaceburg	62	19	112	121	8	74	110	12	92
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	82	81	97	8	84	94	80	88	91
Weston	95	98	34	60	89	77	91	76	87
Whitby	106	99	58	78	49	36	54	97	1
Willowdale	40	82	79	46	73	70	88	72	85
Windsor	78	70	93	59	70	82	76	79	66
Woodbridge	47	72	45	13	94	46	77	67	114
Woodstock	15	11	22	103	112	14	43	34	69
Rural	73	61	81	66	77	80	77	71	78
Other	90	86	72	70	34	84	94	53	93

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	68	36	1	66	—	—	1
Ajax	20	56	55	31	12	23	9	25	1
Alliston	—	—	—	70	—	—	34	—	1
Amherstburg	4	12	17	32	—	1	—	60	88
Arnprior	—	—	—	—	—	—	—	—	—
Aurora	—	18	60	53	1	52	55	27	1
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	56	36	31	22	19	38	70	23	1
Belleville	12	5	63	39	53	22	6	1	94
Bolton	—	—	—	—	62	—	—	1	1
Bowmanville	58	58	8	33	67	20	10	72	1
Bracebridge	—	—	—	—	—	—	18	28	—
Bradford	—	—	—	—	—	—	—	—	122
Brampton	18	4	13	42	49	56	12	58	77
Brantford	53	52	70	21	8	9	47	54	95
Brockville	6	—	44	—	66	41	16	20	—
Burlington	33	10	16	54	22	28	38	21	78
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	62	—	1	—	—	8	6	—
Cambridge	38	34	50	10	1	31	31	24	111
Carleton Place	—	—	—	—	—	—	—	29	1
Chatham	51	9	19	28	16	57	1	73	120
Cobourg	60	—	49	27	71	—	66	—	—
Collingwood	—	—	—	—	1	—	13	30	105
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	63	64	12	11	41	17	56	68	1
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	61	—	—
Downsview	25	37	28	44	39	36	64	52	102
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	10	—
East Gwillimbury	—	—	10	—	—	—	—	—	—
Elliot Lake	—	54	—	16	68	65	28	67	128
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	66	26	—	—	44	—	—	110
Etobicoke	39	28	52	15	37	53	5	47	115
Fergus	—	—	—	—	—	—	66	—	—
Fort Erie	19	53	—	—	—	—	—	62	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	14	61	9	17	58	10	25	63	1
Goderich	—	6	—	1	18	—	71	—	—
Gravenhurst	—	—	—	—	—	59	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	24	—	—	—	29	63	69	7	—
Guelph	28	42	21	64	47	58	62	37	121
Hamilton	48	40	54	60	54	27	63	55	118
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	14	—	—	—	—	—
Huntsville	—	—	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	—	—	—	—	16	—
Kapuskasing	—	—	—	—	—	18	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	15	64	—	69	—	—	—	1
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	59	23	66	55	65	61	17	65	125
Kingsville	—	—	—	—	—	60	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	27	27	23	47	48	42	48	38	79
Leamington	5	3	65	7	28	—	43	—	114
Lindsay	—	17	—	—	70	1	1	4	1
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	30	33	25	20	32	29	33	45	113
Manotick	—	—	18	—	—	—	—	—	—
Maple	—	—	1	1	—	1	35	48	1
Markham	42	19	37	38	6	26	1	35	82
Meaford	57	—	—	—	—	—	—	—	—
Midland	—	1	7	65	—	—	—	—	117
Milton	8	51	—	5	26	68	4	53	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	50	50	39	30	34	50	22	42	87
Napanee	2	—	—	—	9	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	16	26	20	19	35	1	40	26	84
Niagara Falls	55	46	62	69	59	34	44	32	104
North Bay	17	22	29	59	61	55	26	49	1
North York	21	63	46	45	64	54	36	9	98
Oakville	45	59	69	57	50	33	59	33	123
Orangeville	9	—	61	29	24	7	68	70	1
Orillia	65	55	51	8	45	15	60	19	1
Oshawa	32	48	45	58	38	19	57	57	85
Ottawa	36	29	36	43	15	37	50	44	99
Owen Sound	54	65	1	41	10	—	27	—	—
Paris	—	—	—	1	—	—	—	—	1
Parry Sound	—	11	—	—	—	—	—	—	—
Pembroke	41	39	5	62	—	45	46	17	1
Penetanguishene	1	—	—	—	—	—	—	—	—
Perth	—	—	—	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	44	30	53	52	56	11	19	8	101
Pickering	26	16	38	66	46	51	45	66	83
Port Colborne	—	—	—	18	—	—	—	71	—
Port Hope	—	—	24	—	55	—	—	—	1
Port Perry	—	—	—	24	—	—	—	—	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	61	14	58	35	30	1	49	56	80
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	52	8	56	9	14	14	20	46	103
Sault Ste. Marie	49	24	67	40	17	24	42	13	1
Scarborough	35	35	41	26	23	39	15	34	96
Simcoe	47	49	—	37	—	—	—	69	1
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	13	—	22	—	44	—	—	15	—
St. Catharine	22	25	30	25	25	46	54	18	106
St. Mary's	—	—	27	—	—	—	—	—	—
St. Thomas	3	44	6	46	13	16	7	41	1
Stouffville	—	—	—	—	—	25	—	—	1
Stratford	—	—	15	23	7	—	23	14	—
Strathroy	—	—	—	—	—	—	58	—	1
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	64	60	57	67	21	64	24	40	129
Thornhill	7	20	59	6	40	12	30	12	93
Thunder Bay	31	31	4	13	5	13	29	43	92
Tillsonburg	—	—	31	—	11	—	—	64	—
Timmins	—	41	14	50	27	1	—	—	1
Toronto	29	45	43	49	43	35	40	11	91
Trenton	10	—	—	—	57	62	53	3	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Craniotomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	—	—	—	8	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	62	47	11	61	36	67	65	61	1
Weston	43	43	35	63	42	49	20	5	81
Whitby	34	7	46	47	63	21	11	51	108
Willowdale	37	13	48	68	33	32	39	50	86
Windsor	23	57	42	56	52	30	51	39	97
Woodbridge	11	21	34	12	60	47	32	59	90
Woodstock	15	1	1	—	51	43	14	22	1
Rural	40	32	40	34	31	40	37	36	89
Other	46	38	33	51	20	48	52	31	107

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	68	111	62	13	1
Ajax	21	74	25	39	1	24	31	66	1
Alliston	—	83	8	75	68	64	95	10	1
Amherstburg	9	97	75	60	39	11	81	57	1
Arnprior	51	—	—	—	53	38	103	53	1
Aurora	36	40	66	88	1	21	1	82	1
Aylmer West	4	40	10	—	26	55	96	7	1
Barrie	59	1	1	55	47	99	1	115	1
Belleville	9	15	35	45	1	1	31	47	1
Bolton	44	83	—	—	82	73	60	72	1
Bowmanville	44	27	62	45	30	32	1	72	1
Bracebridge	34	83	75	28	34	30	75	72	1
Bradford	59	32	—	45	—	110	47	—	1
Brampton	17	32	49	75	47	10	70	53	1
Brantford	12	27	21	39	8	28	1	116	1
Brockville	—	—	—	17	—	42	38	72	134
Burlington	36	24	10	92	92	38	13	10	1
Caledon	—	—	—	—	—	—	—	—	1
Caledonia	70	68	66	12	1	—	60	66	1
Cambridge	36	68	1	83	61	32	47	23	1
Carleton Place	—	—	—	—	—	—	38	14	1
Chatham	36	22	28	55	30	46	35	42	1
Cobourg	79	10	18	13	34	27	16	62	1
Collingwood	59	—	85	55	23	18	26	91	1
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	59	27	19	67	47	64	26	47	1
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	44	40	—	28	21	—	81	82	1
Downsview	8	47	35	1	9	73	1	111	1
Dryden	—	—	66	—	—	8	—	82	—
Dunnville	—	32	42	83	34	108	81	82	1
East Gwillimbury	—	—	—	—	53	—	57	5	1
Elliot Lake	44	68	42	28	84	79	81	1	1
Elmira	13	—	85	45	—	73	62	120	1
Espanola	—	57	—	—	—	—	16	—	1
Essex	59	74	90	11	—	64	—	14	1
Etobicoke	83	24	92	9	91	95	15	18	127
Fergus	—	—	—	—	—	—	20	82	1
Fort Erie	59	47	62	10	82	79	70	91	1
Fort Frances	—	—	23	—	—	—	—	—	—
Gananoque	2	6	49	75	—	28	—	32	1
Garson	—	—	—	—	—	—	—	—	—
Georgetown	51	—	75	13	61	55	43	47	1
Goderich	13	47	75	70	11	64	13	72	1
Gravenhurst	29	—	10	—	61	106	81	18	1
Greely	—	—	—	—	—	—	—	—	—
Grimsby	25	4	75	28	39	79	20	37	1
Guelph	59	61	62	45	53	62	57	32	1
Hamilton	17	90	57	1	90	93	107	104	121
Hanmer	—	64	75	—	84	84	96	97	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	81	82	1
Hawkesbury	—	—	—	—	—	—	—	99	1
Huntsville	59	74	1	70	61	64	52	72	1
Ingersoll	74	12	66	1	39	1	62	32	138
Innisfil	—	—	—	—	26	73	81	29	136
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	22	—	—	—	—	—	—
Keswick	29	22	66	60	—	42	96	32	1
Kincardine	74	74	—	—	68	46	81	97	—
King City	—	—	—	67	—	—	103	57	—
Kingston	29	24	95	24	1	98	47	106	1
Kingsville	93	47	—	15	86	55	11	72	1
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	29	40	14	39	34	30	23	107	1
Leamington	94	47	8	39	100	1	1	5	1
Lindsay	91	94	57	20	97	22	75	18	1
Listowel	—	—	—	—	—	73	—	23	1
Lively	—	—	—	45	68	22	96	42	1
London	25	91	49	28	89	97	109	110	124
Manotick	—	—	1	—	68	55	1	23	1
Maple	51	27	—	18	61	64	103	57	1
Markham	89	32	23	39	44	16	26	112	1
Meaford	—	83	—	75	—	64	—	—	1
Midland	59	68	42	—	13	84	38	121	1
Milton	—	15	42	83	53	46	81	62	131

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	3	9	49	55	11	24	112	105	1
Napanee	4	64	35	95	68	1	12	72	135
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	52	37	1
Newmarket	17	57	42	70	23	1	52	37	1
Niagara Falls	88	74	49	94	95	94	62	57	1
North Bay	44	15	62	75	17	102	62	47	133
North York	16	40	97	24	26	32	116	14	132
Oakville	86	93	25	15	30	42	52	37	1
Orangeville	21	13	49	70	68	84	47	62	1
Orillia	21	96	31	34	68	42	81	42	1
Oshawa	29	32	57	24	93	46	1	1	1
Ottawa	25	1	91	24	88	90	106	103	1
Owen Sound	59	64	75	60	68	36	81	32	1
Paris	44	74	39	—	—	79	75	66	1
Parry Sound	74	8	66	70	99	64	29	4	1
Pembroke	25	32	—	83	47	79	47	72	1
Penetanguishene	—	74	66	75	53	46	35	66	1
Perth	—	—	—	—	—	84	25	37	1
Petawawa	—	—	—	—	—	84	57	—	1
Peterborough	36	47	28	20	23	16	114	109	1
Pickering	70	68	98	45	53	36	70	91	1
Port Colborne	1	74	85	67	68	55	43	12	1
Port Hope	95	5	34	96	44	64	70	53	1
Port Perry	9	15	1	60	53	11	35	99	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	79	—	14	18	—	107	81	1	1
Richmond Hill	7	20	85	60	44	101	115	113	1
Rockland	—	—	—	—	—	109	—	82	1
Russell	—	—	—	—	—	—	—	—	—
Sarnia	42	32	96	34	1	62	75	114	1
Sault Ste. Marie	87	61	42	39	68	38	62	29	1
Scarborough	21	92	28	90	10	92	111	9	129
Simcoe	51	68	85	1	15	24	29	23	1
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	70	47	75	—	68	38	81	91	1
St. Catharine	36	47	94	28	94	46	110	23	1
St. Mary's	51	—	—	—	—	—	96	66	1
St. Thomas	13	13	49	1	17	18	117	118	126
Stouffville	51	6	75	34	68	84	19	23	1
Stratford	90	10	35	55	61	14	52	14	1
Strathroy	—	40	66	1	39	46	23	91	137
Sturgeon	—	—	—	—	—	—	75	53	1
Sudbury	44	19	57	45	17	55	31	29	1
Thornhill	51	64	49	75	26	46	38	42	130
Thunder Bay	85	40	25	8	39	99	38	66	1
Tillsonburg	92	57	19	20	98	9	81	119	1
Timmins	51	87	31	45	53	13	10	7	1
Toronto	81	87	66	91	47	73	16	102	122
Trenton	74	61	57	60	47	46	1	72	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Replacement Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	14	—	13	18	96	82	1
Val Caron	—	—	—	—	—	—	96	91	—
Wallaceburg	—	74	39	83	61	14	75	18	1
Wasaga Beach	—	—	—	—	—	—	—	82	1
Welland	4	3	31	34	30	1	20	18	123
Weston	42	32	39	93	1	104	43	57	1
Whitby	34	47	17	34	96	103	62	47	1
Willowdale	82	27	1	20	17	96	43	108	128
Windsor	84	47	13	45	34	1	113	47	125
Woodbridge	70	20	1	75	68	55	62	62	1
Woodstock	17	94	84	1	21	105	70	117	1
Rural	74	89	93	89	87	91	107	101	120
Other	59	57	42	60	15	32	31	42	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	130	12	46	102
Ajax	—	—	—	—	—	35	30	89	46
Alliston	—	—	—	—	—	34	130	121	22
Amherstburg	—	—	—	—	—	52	19	110	76
Arnprior	—	—	—	—	—	126	126	47	65
Aurora	—	—	—	—	—	59	100	40	51
Aylmer West	—	—	—	—	—	23	36	57	74
Barrie	—	—	—	—	—	51	55	77	97
Belleville	—	—	—	—	—	74	95	24	38
Bolton	—	—	—	—	—	20	17	54	132
Bowmanville	—	—	—	—	—	79	13	75	73
Bracebridge	—	—	—	—	—	81	123	65	105
Bradford	—	—	—	—	—	39	5	8	128
Brampton	—	—	—	—	—	54	50	39	63
Brantford	—	—	—	—	—	45	93	82	92
Brockville	—	—	—	—	—	96	117	96	98
Burlington	—	—	—	—	—	48	49	32	40
Caledon	—	—	—	—	—	—	—	—	1
Caledonia	—	—	—	—	—	5	9	35	1
Cambridge	—	—	—	—	—	68	108	80	80
Carleton Place	—	—	—	—	—	92	76	131	71
Chatham	—	—	—	—	—	38	51	94	61
Cobourg	—	—	—	—	—	104	18	105	104
Collingwood	—	—	—	—	—	122	42	113	109
Concord	—	—	—	—	—	62	11	11	112

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	105	91	68	30
Cumberland	—	—	—	—	—	103	—	16	23
Delhi	—	—	—	—	—	17	41	114	113
Downsview	—	—	—	—	—	48	89	106	82
Dryden	—	—	—	—	—	98	127	45	87
Dunnville	—	—	—	—	—	128	111	49	131
East Gwillimbury	—	—	—	—	—	123	—	12	—
Elliot Lake	—	—	—	—	—	117	110	88	135
Elmira	—	—	—	—	—	134	44	3	—
Espanola	—	—	—	—	—	111	28	22	1
Essex	—	—	—	—	—	13	4	104	25
Etobicoke	—	—	—	—	—	30	73	85	41
Fergus	—	—	—	—	—	44	119	109	28
Fort Erie	—	—	—	—	—	16	120	125	129
Fort Frances	—	—	—	—	—	120	122	51	134
Gananoque	—	—	—	—	—	40	64	129	1
Garson	—	—	—	—	—	1	—	27	114
Georgetown	—	—	—	—	—	28	104	64	43
Goderich	—	—	—	—	—	119	132	92	31
Gravenhurst	—	—	—	—	—	92	116	70	136
Greely	—	—	—	—	—	19	1	122	—
Grimsby	—	—	—	—	—	132	39	119	137
Guelph	—	—	—	—	—	95	106	76	125
Hamilton	—	—	—	—	—	63	44	55	45
Hanmer	—	—	—	—	—	32	6	14	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	54	113	17	101
Hawkesbury	—	—	—	—	—	113	33	84	89
Huntsville	—	—	—	—	—	46	102	21	124
Ingersoll	—	—	—	—	—	2	96	20	119
Innisfil	—	—	—	—	—	18	22	28	95
Kapuskasing	—	—	—	—	—	110	67	115	1
Kenora	—	—	—	—	—	112	101	117	21
Keswick	—	—	—	—	—	102	32	42	27
Kincardine	—	—	—	—	—	14	70	6	1
King City	—	—	—	—	—	131	90	1	—
Kingston	—	—	—	—	—	36	52	62	33
Kingsville	—	—	—	—	—	115	83	9	17
Kirkland Lake	—	—	—	—	—	9	16	133	91
Kitchener	—	—	—	—	—	25	75	53	32
Leamington	—	—	—	—	—	24	103	4	26
Lindsay	—	—	—	—	—	85	10	51	48
Listowel	—	—	—	—	—	127	109	44	123
Lively	—	—	—	—	—	89	107	117	47
London	—	—	—	—	—	26	38	63	56
Manotick	—	—	—	—	—	10	7	2	127
Maple	—	—	—	—	—	47	84	60	1
Markham	—	—	—	—	—	76	72	97	86
Meaford	—	—	—	—	—	42	114	15	130
Midland	—	—	—	—	—	77	121	108	77
Milton	—	—	—	—	—	109	63	132	88

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	61	48	81	62
Napanee	—	—	—	—	—	69	15	87	122
Navan	—	—	—	—	—	—	8	—	1
New Hamburg	—	—	—	—	—	—	87	5	1
Newmarket	—	—	—	—	—	94	26	69	67
Niagara Falls	—	—	—	—	—	64	115	102	96
North Bay	—	—	—	—	—	91	97	72	60
North York	—	—	—	—	—	31	27	72	68
Oakville	—	—	—	—	—	86	81	48	44
Orangeville	—	—	—	—	—	37	118	34	20
Orillia	—	—	—	—	—	121	24	95	42
Oshawa	—	—	—	—	—	58	31	41	53
Ottawa	—	—	—	—	—	50	58	77	36
Owen Sound	—	—	—	—	—	77	37	28	93
Paris	—	—	—	—	—	12	47	10	29
Parry Sound	—	—	—	—	—	108	60	128	90
Pembroke	—	—	—	—	—	107	78	126	108
Penetanguishene	—	—	—	—	—	82	43	61	85
Perth	—	—	—	—	—	83	98	100	117
Petawawa	—	—	—	—	—	71	21	134	99
Peterborough	—	—	—	—	—	101	99	99	49
Pickering	—	—	—	—	—	15	80	74	103
Port Colborne	—	—	—	—	—	124	55	124	107
Port Hope	—	—	—	—	—	53	86	120	16
Port Perry	—	—	—	—	—	27	2	18	52

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	83	52	13	—
Renfrew	—	—	—	—	—	11	79	116	18
Richmond Hill	—	—	—	—	—	41	25	31	57
Rockland	—	—	—	—	—	4	35	59	116
Russell	—	—	—	—	—	118	128	23	—
Sarnia	—	—	—	—	—	22	20	36	78
Sault Ste. Marie	—	—	—	—	—	65	65	71	72
Scarborough	—	—	—	—	—	33	77	86	66
Simcoe	—	—	—	—	—	88	23	127	106
Sioux Lookout	—	—	—	—	—	125	3	—	—
Smiths Falls	—	—	—	—	—	3	124	93	54
St. Catharine	—	—	—	—	—	99	92	98	100
St. Mary's	—	—	—	—	—	116	54	79	126
St. Thomas	—	—	—	—	—	87	29	33	37
Stouffville	—	—	—	—	—	7	82	38	24
Stratford	—	—	—	—	—	6	71	19	39
Strathroy	—	—	—	—	—	8	131	111	118
Sturgeon	—	—	—	—	—	133	125	112	121
Sudbury	—	—	—	—	—	56	85	103	111
Thornhill	—	—	—	—	—	21	46	66	19
Thunder Bay	—	—	—	—	—	97	62	90	58
Tillsonburg	—	—	—	—	—	114	34	56	79
Timmins	—	—	—	—	—	90	66	25	81
Toronto	—	—	—	—	—	75	55	67	64
Trenton	—	—	—	—	—	129	88	50	120

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	70	129	123	133
Val Caron	—	—	—	—	—	106	133	130	84
Wallaceburg	—	—	—	—	—	43	105	7	59
Wasaga Beach	—	—	—	—	—	—	—	135	70
Welland	—	—	—	—	—	67	40	26	110
Weston	—	—	—	—	—	80	112	101	55
Whitby	—	—	—	—	—	29	61	36	34
Willowdale	—	—	—	—	—	100	58	43	50
Windsor	—	—	—	—	—	59	69	91	35
Woodbridge	—	—	—	—	—	57	94	107	69
Woodstock	—	—	—	—	—	72	14	30	94
Rural	—	—	—	—	—	73	74	83	83
Other	—	—	—	—	—	66	68	58	75

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	125	126	112	13	6	115	120	57	135
Ajax	105	112	13	43	49	94	58	99	28
Alliston	98	129	124	22	61	83	59	14	85
Amherstburg	109	31	5	26	38	27	87	117	18
Arnprior	16	68	34	12	98	111	69	79	111
Aurora	116	118	91	93	34	16	33	121	92
Aylmer West	56	111	8	16	107	17	107	13	96
Barrie	62	57	40	50	93	62	71	64	113
Belleville	23	75	98	84	58	79	79	19	86
Bolton	119	3	9	15	39	99	22	17	60
Bowmanville	92	80	114	86	118	122	49	110	67
Bracebridge	17	20	36	42	20	15	122	124	1
Bradford	6	84	1	5	122	59	3	118	1
Brampton	64	42	23	81	31	41	32	74	61
Brantford	58	56	25	21	55	57	45	108	68
Brockville	85	64	113	67	92	24	83	133	118
Burlington	34	83	57	30	48	65	93	53	54
Caledon	—	—	—	—	—	—	—	—	73
Caledonia	2	21	1	41	25	63	121	127	22
Cambridge	40	23	72	56	97	100	56	81	56
Carleton Place	11	26	73	71	15	43	42	3	50
Chatham	75	47	96	35	44	67	101	62	77
Cobourg	9	7	16	102	64	96	123	134	80
Collingwood	35	24	111	36	100	125	81	123	15
Concord	99	8	80	3	22	33	21	25	65

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	82	121	115	121	116	116	86	90	95
Cumberland	122	97	117	—	101	1	—	104	—
Delhi	118	13	4	117	124	113	74	88	129
Downsview	41	60	39	32	106	74	39	60	30
Dryden	124	128	32	4	123	109	60	30	1
Dunnville	111	95	120	82	125	123	109	98	137
East Gwillimbury	126	4	65	8	5	—	8	4	1
Elliot Lake	37	57	103	77	120	127	11	100	131
Elmira	25	28	122	119	2	1	103	54	81
Espanola	15	130	63	118	121	10	112	36	1
Essex	88	43	35	100	103	75	27	91	51
Etobicoke	50	55	76	59	60	72	65	77	39
Fergus	26	15	11	75	52	7	94	114	64
Fort Erie	30	48	97	106	76	118	106	51	127
Fort Frances	22	37	18	55	83	66	43	61	31
Gananoque	24	125	67	101	89	129	125	23	21
Garson	—	124	108	73	129	7	7	136	1
Georgetown	123	73	14	24	33	71	116	89	69
Goderich	69	22	10	37	66	25	99	103	24
Gravenhurst	4	84	20	97	19	19	44	47	16
Greely	—	12	—	—	—	—	—	135	1
Grimsby	47	122	56	126	113	70	119	9	110
Guelph	48	91	48	53	41	103	75	106	99
Hamilton	52	49	68	38	54	44	67	49	35
Hanmer	113	50	7	111	13	51	129	18	134

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	39	6	22	20	8	119	14	16	26
Hawkesbury	110	127	123	128	119	126	88	131	63
Huntsville	107	77	49	108	3	120	20	8	89
Ingersoll	13	61	100	105	21	28	19	20	102
Innisfil	—	—	—	23	99	45	63	68	78
Kapuskasing	3	93	90	115	7	110	105	80	114
Kenora	95	27	6	44	85	90	40	63	125
Keswick	7	25	27	57	12	30	1	34	88
Kincardine	120	114	127	45	23	1	127	29	132
King City	1	16	3	6	126	9	36	5	1
Kingston	103	117	71	79	88	91	57	87	44
Kingsville	97	52	85	72	83	56	80	97	48
Kirkland Lake	19	106	91	104	36	32	16	56	100
Kitchener	45	79	42	65	79	89	97	24	53
Leamington	52	17	31	46	117	6	15	85	116
Lindsay	67	108	109	34	28	86	28	120	97
Listowel	94	123	66	125	4	130	4	2	1
Lively	5	1	116	129	1	88	131	107	62
London	79	102	89	95	87	50	51	76	55
Manotick	—	—	—	127	—	—	47	130	1
Maple	27	35	21	113	47	14	5	10	17
Markham	66	44	78	96	111	64	96	46	83
Meaford	121	2	119	17	68	117	26	6	105
Midland	78	81	83	109	70	46	110	52	124
Milton	12	11	126	110	85	81	84	67	106

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	90	93	106	94	75	61	77	70	52
Napanee	31	86	15	85	105	114	126	122	109
Navan	111	—	—	90	—	—	—	41	79
New Hamburg	—	—	—	—	—	—	10	128	40
Newmarket	43	100	60	14	43	34	78	22	19
Niagara Falls	57	88	83	69	102	105	117	102	117
North Bay	61	110	107	99	78	95	124	94	123
North York	80	38	28	19	44	80	113	39	23
Oakville	60	98	76	33	52	77	12	55	32
Orangeville	17	51	59	52	10	13	68	31	33
Orillia	54	40	43	25	28	124	91	84	112
Oshawa	93	67	104	70	81	93	50	33	58
Ottawa	62	92	86	78	26	87	92	48	41
Owen Sound	89	69	118	40	80	20	18	75	93
Paris	21	70	101	112	42	73	62	116	75
Parry Sound	95	18	26	11	9	29	30	38	104
Pembroke	83	87	88	88	114	58	66	109	121
Penetanguishene	77	65	63	61	18	37	17	21	120
Perth	84	29	95	91	112	11	128	126	103
Petawawa	127	113	29	124	40	131	70	1	1
Peterborough	117	104	102	74	56	68	111	105	90
Pickering	51	74	52	83	46	60	13	82	59
Port Colborne	19	114	19	66	82	85	104	112	49
Port Hope	73	19	125	7	108	82	100	115	119
Port Perry	104	78	12	48	49	49	1	43	72

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	128	5	54	9	—	39	—	—	128
Renfrew	81	34	50	1	109	104	130	125	84
Richmond Hill	114	99	43	80	62	34	46	28	25
Rockland	86	41	128	1	16	101	132	26	20
Russell	—	—	—	—	—	1	9	11	—
Sarnia	49	90	45	87	69	78	102	71	107
Sault Ste. Marie	65	39	74	27	35	36	82	64	71
Scarborough	42	76	70	62	51	40	55	50	46
Simcoe	32	10	99	68	127	102	51	83	94
Sioux Lookout	100	120	81	—	11	1	85	72	133
Smiths Falls	108	30	47	122	95	97	114	58	66
St. Catharine	102	107	79	58	94	68	95	96	74
St. Mary's	14	88	30	123	59	21	89	40	70
St. Thomas	46	101	46	89	104	98	34	42	115
Stouffville	55	53	61	97	90	128	6	95	98
Stratford	10	14	38	10	24	92	108	15	37
Strathroy	28	116	87	107	128	18	76	113	126
Sturgeon	—	—	—	—	14	112	28	12	136
Sudbury	76	82	110	92	66	52	72	78	76
Thornhill	29	9	32	28	96	31	23	45	38
Thunder Bay	68	105	93	48	37	47	64	27	43
Tillsonburg	115	70	58	50	65	53	61	129	82
Timmins	43	32	24	18	63	53	37	69	1
Toronto	37	45	55	63	72	53	54	37	45
Trenton	8	59	37	47	115	22	115	132	101

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Congestive Heart Failure (CHF) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	70	119	94	114	57	121	38	93	91
Val Caron	—	72	—	—	—	12	35	7	138
Wallaceburg	101	96	105	120	110	107	41	111	108
Wasaga Beach	—	—	—	—	—	—	—	100	130
Welland	91	53	61	75	27	108	118	59	42
Weston	33	36	50	54	30	26	24	86	57
Whitby	87	102	121	103	17	23	90	32	47
Willowdale	106	65	75	64	32	38	31	35	29
Windsor	74	62	69	39	73	42	51	73	36
Woodbridge	71	46	17	31	74	48	48	44	27
Woodstock	35	109	53	116	91	106	98	119	122
Rural	59	63	82	60	70	84	73	66	87
Other	72	33	41	29	77	76	25	92	34

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	117	115	123	122	13	104	126	114	—
Ajax	88	59	99	66	40	43	17	45	31
Alliston	43	20	122	87	72	124	121	5	57
Amherstburg	108	22	48	96	51	30	36	90	111
Arnprior	3	69	63	72	21	64	6	55	123
Aurora	26	49	70	34	101	91	61	23	110
Aylmer West	104	126	39	66	26	55	26	47	120
Barrie	32	76	16	11	10	53	32	20	33
Belleville	36	66	17	107	73	99	112	8	66
Bolton	125	95	98	123	9	10	117	56	29
Bowmanville	35	26	94	111	70	95	54	17	23
Bracebridge	68	21	114	121	12	107	109	115	28
Bradford	48	44	31	85	66	25	116	2	20
Brampton	58	18	84	12	18	32	7	32	32
Brantford	33	62	81	23	44	49	60	57	105
Brockville	96	105	102	113	83	119	81	98	113
Burlington	113	80	27	55	53	77	86	66	55
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	12	61	92	85	5	8	96	100	109
Cambridge	47	90	85	89	105	82	59	64	83
Carleton Place	22	47	118	101	46	13	29	122	1
Chatham	25	63	69	26	67	100	67	74	106
Cobourg	103	103	108	112	80	112	122	68	119
Collingwood	121	101	30	116	117	29	106	118	86
Concord	116	19	—	33	41	14	92	123	74

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	102	99	100	105	87	113	95	108	97
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	119	8	12	95	119	98	125	13	—
Downsview	83	73	21	92	107	81	78	80	62
Dryden	16	123	83	65	106	120	130	105	—
Dunnville	27	118	116	99	68	50	84	82	—
East Gwillimbury	56	6	4	6	4	—	10	—	44
Elliot Lake	106	120	105	45	55	127	123	51	—
Elmira	97	—	19	4	—	126	129	99	—
Espanola	123	25	93	25	—	56	1	—	—
Essex	115	74	37	58	15	3	5	63	92
Etobicoke	94	67	56	53	31	66	58	65	63
Fergus	15	46	35	81	11	58	11	109	36
Fort Erie	11	74	119	98	24	16	114	41	135
Fort Frances	6	50	113	49	6	96	104	15	—
Gananoque	101	85	32	127	95	117	31	121	40
Garson	122	106	13	17	45	—	3	—	—
Georgetown	110	24	68	18	56	41	89	101	100
Goderich	19	37	10	40	3	51	14	78	—
Gravenhurst	7	78	14	114	123	92	119	92	—
Greely	—	—	103	—	—	7	46	—	—
Grimsby	112	58	121	41	37	118	94	19	77
Guelph	76	88	76	84	96	89	49	97	78
Hamilton	79	48	61	35	39	54	37	36	60
Hanmer	34	4	9	21	22	28	—	54	112

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	4	51	80	37	48	61	118	116	—
Hawkesbury	41	31	101	5	59	17	13	28	19
Huntsville	18	27	55	110	110	122	86	18	127
Ingersoll	85	94	88	74	36	33	71	124	—
Innisfil	—	—	—	1	16	19	38	6	128
Kapuskasing	30	11	81	120	97	4	120	95	—
Kenora	126	86	95	128	125	73	66	7	65
Keswick	111	12	90	76	19	35	34	12	37
Kincardine	84	5	117	103	91	97	80	86	108
King City	2	1	3	3	29	—	4	—	1
Kingston	75	29	90	62	76	101	100	53	126
Kingsville	13	97	15	13	42	12	12	70	88
Kirkland Lake	80	113	126	126	63	121	127	43	—
Kitchener	54	82	47	93	86	67	102	89	89
Leamington	28	16	29	30	20	62	8	1	26
Lindsay	45	38	41	64	8	109	101	85	84
Listowel	70	13	106	106	121	83	124	94	—
Lively	8	15	87	108	113	115	24	81	43
London	49	43	54	60	74	27	62	35	67
Manotick	1	2	11	9	—	—	105	88	99
Maple	39	39	40	10	1	2	29	26	27
Markham	77	70	97	71	81	36	77	73	38
Meaford	60	109	111	74	99	24	113	4	—
Midland	40	108	66	83	120	102	82	25	45
Milton	44	111	26	129	116	106	111	107	69

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	72	87	89	70	71	59	33	62	51
Napanee	5	17	115	119	78	123	19	44	96
Navan	—	—	—	43	—	—	2	—	—
New Hamburg	—	—	—	—	—	—	85	75	70
Newmarket	38	91	22	15	65	103	50	106	34
Niagara Falls	90	83	33	101	49	88	82	59	98
North Bay	37	100	104	97	103	114	110	24	50
North York	98	89	73	14	58	22	65	46	85
Oakville	87	95	74	88	84	71	23	42	103
Orangeville	20	110	42	42	77	38	35	33	56
Orillia	94	68	23	28	87	87	72	49	21
Oshawa	55	52	51	90	52	74	55	48	35
Ottawa	52	79	53	22	34	30	52	60	48
Owen Sound	14	122	24	63	27	84	16	21	129
Paris	86	3	106	52	32	11	41	71	1
Parry Sound	82	77	25	24	54	93	56	27	81
Pembroke	73	34	74	77	69	111	48	112	64
Penetanguishene	100	116	78	115	82	85	114	10	122
Perth	42	80	124	19	114	72	79	69	—
Petawawa	114	125	127	117	109	1	—	9	118
Peterborough	59	42	64	46	98	90	103	84	61
Pickering	50	40	60	51	102	94	44	30	94
Port Colborne	127	124	52	100	111	80	91	102	131
Port Hope	107	53	7	82	108	69	27	119	107
Port Perry	118	98	120	94	25	105	21	117	22

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	6	43	—	—	—
Renfrew	108	104	38	2	122	110	97	120	—
Richmond Hill	93	30	20	44	17	21	41	29	42
Rockland	17	10	1	8	35	23	92	104	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	64	92	57	56	92	26	90	34	91
Sault Ste. Marie	51	45	59	36	75	40	45	83	116
Scarborough	62	65	58	48	61	52	47	31	71
Simcoe	120	119	125	29	112	108	98	103	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	91	93	44	57	115	65	107	96	—
St. Catharine	74	40	72	69	93	79	73	58	68
St. Mary's	10	112	5	68	90	18	70	—	—
St. Thomas	66	72	86	59	38	70	41	91	58
Stouffville	81	114	109	118	126	15	22	39	49
Stratford	9	7	6	16	14	68	20	3	46
Strathroy	124	14	96	125	124	57	99	67	—
Sturgeon	—	—	—	—	2	5	128	93	—
Sudbury	46	56	112	73	93	86	75	38	130
Thornhill	21	32	49	38	27	9	39	50	59
Thunder Bay	65	36	43	50	47	47	69	72	82
Tillsonburg	92	33	27	124	127	42	57	113	47
Timmins	31	9	67	20	104	116	68	87	102
Toronto	66	54	62	54	50	43	40	22	53
Trenton	23	28	7	27	60	78	64	110	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Stroke Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	29	121	18	77	85	125	8	111	117
Val Caron	24	35	2	31	30	6	18	—	90
Wallaceburg	99	117	77	104	23	63	63	16	72
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	57	102	79	80	57	75	76	14	41
Weston	105	55	45	32	62	46	88	77	76
Whitby	53	23	70	109	118	39	15	40	24
Willowdale	78	60	36	79	43	60	51	61	52
Windsor	63	64	34	39	89	37	28	37	54
Woodbridge	69	71	65	7	79	34	25	11	39
Woodstock	61	84	46	47	33	20	108	78	115
Rural	71	57	50	60	63	76	73	52	80
Other	89	107	110	91	100	48	53	76	79

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	121	—	1	57	1	26	118	1	1
Ajax	43	34	50	98	59	11	15	79	50
Alliston	20	64	92	30	124	119	111	128	95
Amherstburg	112	1	102	28	105	20	92	133	1
Arnprior	17	110	51	121	1	19	37	37	1
Aurora	113	101	66	80	1	112	103	29	47
Aylmer West	39	94	89	1	95	23	60	23	52
Barrie	53	86	67	66	95	53	61	57	51
Belleville	38	112	108	85	93	122	90	106	85
Bolton	80	119	29	1	118	79	104	110	1
Bowmanville	63	74	49	112	40	60	54	8	45
Bracebridge	64	77	1	118	67	80	5	119	1
Bradford	11	27	117	91	1	82	30	75	113
Brampton	26	23	39	51	33	51	70	49	87
Brantford	56	40	75	62	62	72	75	74	117
Brockville	52	43	65	81	36	54	44	59	94
Burlington	32	69	1	48	52	106	68	80	62
Caledon	—	—	—	—	—	—	—	—	1
Caledonia	89	20	118	—	1	13	39	104	135
Cambridge	86	33	1	67	81	58	88	33	44
Carleton Place	29	31	54	1	1	12	1	103	133
Chatham	105	89	56	68	1	59	73	49	63
Cobourg	110	103	37	79	90	86	110	86	108
Collingwood	87	83	106	43	74	68	112	20	109
Concord	97	1	1	1	1	32	40	125	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	34	35	85	76	66	99	78	45	42
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	18	85	1	22	1	37	130	132	114
Downsview	76	65	43	61	56	73	108	120	76
Dryden	10	67	110	119	91	114	34	19	127
Dunnville	19	113	62	44	54	103	11	105	118
East Gwillimbury	55	—	—	—	—	1	32	131	1
Elliot Lake	24	1	1	57	103	120	82	102	123
Elmira	—	120	—	1	1	129	131	52	1
Espanola	120	23	122	123	—	1	123	40	1
Essex	21	121	76	27	99	1	124	107	1
Etobicoke	72	48	74	47	64	75	106	98	83
Fergus	104	115	72	32	1	65	9	68	92
Fort Erie	60	41	31	86	111	28	31	124	121
Fort Frances	30	108	93	70	26	84	33	1	86
Gananoque	—	106	112	1	125	27	42	21	134
Garson	—	—	—	1	35	126	1	13	129
Georgetown	51	38	1	116	117	104	1	112	93
Goderich	68	32	1	84	39	57	21	24	59
Gravenhurst	1	—	1	124	1	111	25	94	122
Greely	—	—	—	—	—	—	125	1	—
Grimsby	98	107	114	1	114	87	24	123	72
Guelph	93	42	64	41	75	92	113	62	98
Hamilton	76	52	82	45	57	78	89	54	78
Hanmer	1	1	124	31	1	1	10	1	88

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	114	93	42	60	48	75	18	116	111
Hawkesbury	1	1	1	1	122	43	128	1	96
Huntsville	58	1	1	95	1	88	96	28	125
Ingersoll	31	102	98	1	28	102	7	10	137
Innisfil	—	—	—	—	72	44	121	89	69
Kapuskasing	23	17	1	52	1	112	85	122	126
Kenora	15	97	99	107	1	117	83	25	1
Keswick	96	118	58	22	120	25	84	1	132
Kincardine	100	37	45	1	121	17	56	70	1
King City	54	1	—	120	—	29	127	83	1
Kingston	59	39	86	36	69	110	29	35	46
Kingsville	41	1	55	34	100	101	71	45	120
Kirkland Lake	36	63	30	59	55	95	13	91	107
Kitchener	61	84	103	45	71	39	59	82	73
Leamington	102	72	90	83	25	121	37	34	1
Lindsay	122	51	116	74	38	93	6	76	136
Listowel	108	117	113	104	104	128	35	88	119
Lively	1	100	1	1	1	1	115	114	1
London	75	70	78	77	29	50	97	64	71
Manotick	—	26	119	—	—	—	20	15	1
Maple	1	98	81	1	1	21	26	81	1
Markham	82	16	52	65	113	83	120	65	106
Meaford	33	103	44	108	123	40	43	17	128
Midland	115	109	94	73	107	97	119	31	56
Milton	35	22	38	1	110	14	98	12	97

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	46	29	32	34	44	61	52	49	67
Napanee	119	62	28	1	78	1	48	61	100
Navan	—	—	—	—	—	—	—	43	—
New Hamburg	—	—	—	—	—	—	—	126	80
Newmarket	107	90	34	117	84	35	22	117	75
Niagara Falls	106	57	73	56	97	63	91	109	90
North Bay	83	46	107	69	108	63	62	87	41
North York	88	96	1	63	48	108	100	41	104
Oakville	85	76	35	42	30	37	63	44	91
Orangeville	57	54	71	103	53	1	14	31	1
Orillia	91	60	120	75	119	48	53	84	57
Oshawa	101	66	97	90	45	46	72	115	40
Ottawa	94	82	96	99	76	45	66	73	58
Owen Sound	62	79	1	111	80	95	81	38	74
Paris	109	21	104	109	102	130	76	127	131
Parry Sound	1	71	121	38	1	54	114	29	1
Pembroke	70	58	33	64	98	123	101	108	43
Penetanguishene	1	1	69	92	61	118	8	72	1
Perth	116	114	69	28	37	80	23	96	68
Petawawa	44	—	59	—	42	1	45	134	1
Peterborough	14	81	67	24	109	91	87	100	77
Pickering	81	1	79	106	59	66	117	1	79
Port Colborne	45	72	84	25	94	74	102	118	110
Port Hope	28	1	1	105	115	115	16	113	1
Port Perry	1	1	1	115	116	1	19	70	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	27	—	46	122	1	124	—	—	—
Renfrew	123	91	87	101	92	36	79	53	130
Richmond Hill	16	55	1	1	70	90	54	48	60
Rockland	13	—	40	1	—	34	129	92	1
Russell	—	—	—	—	—	—	—	18	—
Sarnia	84	80	99	50	89	42	58	69	49
Sault Ste. Marie	67	45	57	54	27	16	49	66	102
Scarborough	69	49	88	53	85	62	86	97	64
Simcoe	90	75	1	1	1	116	73	42	66
Sioux Lookout	42	28	123	—	34	30	51	—	1
Smiths Falls	124	116	47	87	45	125	122	129	1
St. Catharine	49	59	77	94	82	71	105	101	103
St. Mary's	118	99	41	113	48	56	116	39	1
St. Thomas	65	61	1	40	63	89	67	27	54
Stouffville	111	77	1	1	73	31	17	121	1
Stratford	12	19	1	1	65	15	1	89	1
Strathroy	66	1	109	96	106	22	99	130	116
Sturgeon	—	—	—	—	—	24	126	22	1
Sudbury	72	53	1	102	101	97	26	77	115
Thornhill	48	88	53	37	24	66	46	47	61
Thunder Bay	25	50	1	1	41	70	57	58	105
Tillsonburg	99	103	111	109	88	108	107	95	138
Timmins	40	44	36	49	47	33	63	92	55
Toronto	78	68	63	87	79	69	80	85	70
Trenton	92	1	1	93	77	1	95	9	112

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Gastrointestinal Hemorrhage Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	37	1	95	114	112	105	26	11	101
Val Caron	—	—	—	26	1	127	36	13	1
Wallaceburg	117	111	115	33	67	18	12	111	1
Wasaga Beach	—	—	—	—	—	—	—	55	1
Welland	50	95	105	38	58	107	109	67	1
Weston	74	56	101	100	32	51	94	99	99
Whitby	79	30	1	55	51	85	47	26	48
Willowdale	95	87	91	78	42	47	93	56	82
Windsor	47	36	61	82	87	100	65	59	65
Woodbridge	1	18	60	97	1	41	77	36	81
Woodstock	22	25	83	71	31	94	41	16	89
Rural	71	47	80	72	83	77	69	77	84
Other	103	92	48	89	86	48	50	63	53

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	12	—	17	101	—	—	116	10	1
Ajax	26	17	97	78	25	69	42	36	95
Alliston	—	27	12	82	66	84	68	13	1
Amherstburg	14	95	20	32	29	113	22	73	88
Arnprior	—	—	22	—	—	28	—	3	1
Aurora	75	9	104	109	13	40	65	105	1
Aylmer West	100	22	91	114	112	58	38	49	72
Barrie	17	63	33	31	24	71	49	75	117
Belleville	44	88	69	51	31	64	64	50	55
Bolton	29	13	59	13	1	101	16	82	133
Bowmanville	40	21	25	76	80	83	84	43	123
Bracebridge	6	11	63	6	14	1	92	12	64
Bradford	89	109	106	98	108	80	93	90	130
Brampton	58	65	56	64	92	38	91	67	57
Brantford	39	66	50	30	37	81	72	30	114
Brockville	95	81	65	80	89	109	70	59	128
Burlington	74	77	66	40	45	65	88	102	100
Caledon	—	—	—	—	—	—	—	—	1
Caledonia	—	7	—	104	10	98	6	101	136
Cambridge	25	41	30	53	19	42	29	11	58
Carleton Place	—	—	—	34	9	8	17	8	1
Chatham	24	45	34	48	22	30	85	87	87
Cobourg	85	72	101	50	67	13	11	99	1
Collingwood	46	12	46	86	91	60	95	21	97
Concord	—	—	—	—	—	—	1	91	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	27	48	95	92	23	31	32	86	60
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	79	106	—	11	—	112	—	—	1
Downsview	34	59	42	77	98	73	103	81	118
Dryden	—	—	—	—	—	—	111	—	—
Dunnville	67	36	14	16	96	22	13	88	1
East Gwillimbury	—	—	—	—	79	18	—	—	—
Elliot Lake	108	89	109	44	17	23	97	94	1
Elmira	—	101	—	18	1	10	118	78	59
Espanola	—	—	—	—	103	—	—	—	—
Essex	15	—	94	1	115	108	110	112	1
Etobicoke	35	69	61	55	63	68	74	57	70
Fergus	53	60	52	8	110	—	14	26	1
Fort Erie	22	25	99	105	20	114	115	117	127
Fort Frances	42	50	102	21	94	52	52	71	1
Gananoque	33	10	105	90	107	115	117	111	1
Garson	19	—	98	—	—	—	—	—	—
Georgetown	2	5	84	107	27	57	36	93	63
Goderich	1	44	1	1	11	19	4	47	1
Gravenhurst	5	23	7	72	64	48	28	2	1
Greely	—	—	—	—	—	—	—	—	—
Grimsby	99	82	16	45	25	105	18	19	1
Guelph	28	40	61	27	41	85	30	36	111
Hamilton	48	73	83	70	73	44	65	39	90
Hanmer	104	—	—	—	—	—	—	—	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	66	15	9	68	51	92	23	113	1
Hawkesbury	87	4	86	—	—	1	19	—	1
Huntsville	96	34	79	37	18	36	109	107	71
Ingersoll	23	26	21	25	21	104	83	116	83
Innisfil	—	—	—	—	52	1	101	14	1
Kapuskasing	—	8	1	—	—	—	7	—	—
Kenora	103	96	57	112	84	11	102	115	82
Keswick	49	29	76	99	57	102	105	20	132
Kincardine	93	—	—	5	102	—	89	104	—
King City	—	—	—	26	35	27	107	—	1
Kingston	47	56	43	65	88	99	114	76	113
Kingsville	105	99	107	1	40	110	26	118	1
Kirkland Lake	86	20	90	7	31	111	35	1	—
Kitchener	63	39	35	39	72	86	96	95	96
Leamington	62	6	11	54	54	89	54	4	62
Lindsay	70	107	31	9	58	37	44	51	1
Listowel	—	108	1	10	93	51	19	7	1
Lively	—	—	—	22	36	103	120	14	124
London	52	61	67	47	50	47	59	56	98
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	104	1	115	114	20	78	42	102
Markham	51	74	78	33	101	107	79	60	122
Meaford	107	2	108	110	1	11	98	6	125
Midland	69	43	7	49	43	7	106	108	1
Milton	82	33	27	89	48	9	9	100	126

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	41	54	45	62	53	66	31	74	69
Napanee	20	93	110	24	90	56	90	83	1
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	5	135
Newmarket	90	38	37	57	68	33	41	28	92
Niagara Falls	102	66	72	73	74	39	37	62	104
North Bay	97	92	103	113	111	100	112	109	107
North York	72	94	68	38	104	67	108	72	109
Oakville	37	58	26	58	46	41	87	33	84
Orangeville	36	30	47	51	1	5	82	53	73
Orillia	76	79	29	17	12	95	81	27	103
Oshawa	80	83	41	45	82	35	58	32	81
Ottawa	57	70	89	84	60	74	53	46	86
Owen Sound	7	71	32	102	62	93	62	31	120
Paris	59	14	1	97	1	88	43	23	1
Parry Sound	77	35	44	41	99	87	119	68	116
Pembroke	56	100	87	67	30	43	8	24	1
Penetanguishene	8	17	13	29	15	77	15	17	1
Perth	4	57	92	94	113	58	10	98	1
Petawawa	—	—	—	—	—	—	—	9	—
Peterborough	88	85	49	75	78	17	46	40	67
Pickering	12	87	18	91	106	6	72	106	54
Port Colborne	106	75	112	96	105	24	104	84	94
Port Hope	10	19	93	20	39	16	46	77	1
Port Perry	—	—	82	106	34	—	113	110	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	91	105	10	23	15	75	5	96	—
Richmond Hill	3	55	77	42	77	49	33	70	68
Rockland	—	—	100	35	—	—	1	16	137
Russell	—	—	—	—	—	—	—	—	—
Sarnia	71	42	38	93	56	69	24	41	80
Sault Ste. Marie	42	28	70	66	41	45	71	63	121
Scarborough	55	52	73	56	71	54	77	69	99
Simcoe	92	1	28	111	1	76	100	35	106
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	83	98	111	74	85	90	56	97	1
St. Catharine	84	97	96	63	87	26	94	65	108
St. Mary's	9	80	15	19	86	14	62	52	119
St. Thomas	73	76	39	108	47	53	99	61	93
Stouffville	21	85	6	43	83	21	49	24	105
Stratford	11	24	36	15	59	61	34	45	66
Strathroy	101	91	19	59	109	106	24	17	1
Sturgeon	—	—	—	—	—	29	—	119	—
Sudbury	94	84	48	61	100	79	76	34	61
Thornhill	30	3	24	12	49	34	57	92	76
Thunder Bay	38	46	71	14	44	25	45	85	115
Tillsonburg	16	90	63	28	1	91	61	48	1
Timmins	50	37	75	85	1	4	75	44	78
Toronto	60	68	53	79	80	72	67	64	74
Trenton	31	102	58	68	75	96	1	103	112

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Hip Fracture Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	18	16	88	103	38	—	12	—	1
Val Caron	—	—	—	—	—	15	21	114	131
Wallaceburg	67	47	23	83	28	78	69	80	85
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	65	103	81	87	97	32	85	89	65
Weston	81	62	85	35	69	82	48	22	89
Whitby	45	31	80	95	33	62	39	29	101
Willowdale	61	64	74	81	69	55	40	58	75
Windsor	78	78	54	88	76	46	79	38	77
Woodbridge	98	51	40	4	95	94	55	54	79
Woodstock	32	32	60	100	65	97	27	79	110
Rural	54	53	55	60	61	50	60	65	91
Other	64	48	51	70	55	63	51	55	56

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	27	16	4	5	123	129	105	13	1
Ajax	79	43	98	25	43	13	29	76	60
Alliston	61	128	44	121	116	94	123	61	72
Amherstburg	20	42	5	125	128	2	8	65	22
Arnprior	21	10	115	56	14	18	39	11	124
Aurora	95	115	128	90	130	102	65	47	122
Aylmer West	105	7	125	89	33	125	75	78	106
Barrie	34	48	55	84	56	43	31	88	68
Belleville	82	90	112	116	99	41	78	74	116
Bolton	32	37	40	14	126	96	77	6	103
Bowmanville	87	58	94	68	63	76	52	23	25
Bracebridge	110	56	49	77	133	108	27	24	132
Bradford	114	24	14	6	120	22	35	80	53
Brampton	96	33	39	48	22	30	76	75	47
Brantford	36	65	22	16	80	72	69	62	117
Brockville	67	117	15	105	96	122	126	124	80
Burlington	39	69	19	32	85	81	85	70	62
Caledon	—	—	—	—	105	—	—	—	—
Caledonia	13	82	1	3	47	15	21	4	1
Cambridge	56	36	56	39	66	86	86	29	43
Carleton Place	40	60	11	52	11	66	12	85	38
Chatham	78	57	100	59	98	110	108	37	135
Cobourg	54	93	42	123	109	84	127	128	88
Collingwood	22	23	25	86	92	28	116	123	126
Concord	86	112	3	130	131	128	48	54	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	90	30	86	46	55	88	26	70	90
Cumberland	—	13	—	—	—	117	—	—	—
Delhi	33	19	28	95	119	20	59	93	1
Downsview	72	106	84	111	121	90	91	109	109
Dryden	53	99	63	52	15	124	15	9	34
Dunnville	102	124	53	28	115	89	44	100	129
East Gwillimbury	130	1	129	2	10	—	36	26	—
Elliot Lake	121	55	30	107	73	109	10	38	133
Elmira	5	110	124	4	2	27	72	126	24
Espanola	7	19	108	30	113	26	73	33	1
Essex	93	85	119	128	16	25	96	114	98
Etobicoke	89	72	85	117	107	112	87	122	96
Fergus	24	51	36	13	51	7	71	12	125
Fort Erie	120	125	32	75	35	21	92	116	121
Fort Frances	50	122	76	58	4	36	117	104	23
Gananoque	117	97	19	18	82	6	13	110	59
Garson	60	88	102	131	52	131	2	132	—
Georgetown	44	98	99	12	9	45	70	25	67
Goderich	6	9	10	57	70	47	14	17	52
Gravenhurst	18	61	79	87	95	33	129	107	76
Greely	—	—	—	—	117	1	—	22	—
Grimsby	97	123	31	82	12	40	83	83	108
Guelph	103	49	35	91	91	97	55	81	51
Hamilton	52	53	37	61	38	70	60	48	37
Hanmer	64	108	117	43	37	5	3	120	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	4	17	17	36	29	101	19	40	36
Hawkesbury	37	35	6	29	102	79	38	2	136
Huntsville	119	78	62	96	53	63	37	19	26
Ingersoll	100	54	110	91	58	11	106	36	66
Innisfil	—	—	—	7	5	19	7	44	82
Kapuskasing	71	63	16	100	31	34	16	30	75
Kenora	73	127	48	120	129	127	121	121	107
Keswick	123	73	116	70	46	115	107	49	45
Kincardine	25	66	61	21	71	38	22	45	27
King City	28	6	91	9	122	111	119	99	—
Kingston	115	71	66	44	39	85	90	41	35
Kingsville	69	51	65	30	114	65	74	7	79
Kirkland Lake	42	91	38	38	112	44	113	129	81
Kitchener	63	96	52	97	84	87	81	101	30
Leamington	67	5	33	24	54	75	6	77	65
Lindsay	58	38	13	83	21	51	51	58	97
Listowel	118	77	59	108	32	71	20	69	105
Lively	129	114	2	47	73	41	17	94	1
London	47	78	64	79	23	59	23	57	39
Manotick	—	—	89	1	1	3	88	1	1
Maple	126	113	123	15	19	73	33	63	54
Markham	41	21	45	119	87	113	115	127	115
Meaford	15	3	43	129	13	9	18	66	1
Midland	116	41	109	74	20	35	109	34	111
Milton	92	7	27	23	93	57	111	86	95

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	94	74	87	104	94	105	99	97	83
Napanee	80	69	82	40	86	52	28	105	1
Navan	1	—	—	109	—	17	—	—	—
New Hamburg	—	—	—	—	—	—	1	131	—
Newmarket	107	59	97	51	72	98	43	118	94
Niagara Falls	29	27	69	44	75	74	47	98	120
North Bay	59	102	73	22	27	39	62	20	128
North York	101	95	106	122	97	106	95	79	64
Oakville	30	75	26	78	103	78	89	87	73
Orangeville	62	27	8	26	49	32	66	39	29
Orillia	12	14	68	80	81	53	101	72	102
Oshawa	66	89	75	59	78	55	82	42	48
Ottawa	51	86	51	64	34	54	58	67	57
Owen Sound	16	10	21	34	35	77	80	8	100
Paris	55	83	104	19	68	126	79	10	1
Parry Sound	11	40	34	99	41	107	5	51	28
Pembroke	99	87	105	118	57	93	120	82	110
Penetanguishene	106	81	83	54	66	46	49	43	33
Perth	122	118	122	66	125	95	57	125	56
Petawawa	127	119	71	35	28	14	4	3	1
Peterborough	81	116	88	94	118	104	110	115	101
Pickering	48	44	45	20	110	24	41	90	61
Port Colborne	65	105	118	62	6	8	92	111	118
Port Hope	104	62	101	88	132	80	53	130	127
Port Perry	8	126	113	8	8	120	130	113	40

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	2	129	12	126	3	—	—	—	—
Renfrew	112	103	74	98	44	99	11	35	74
Richmond Hill	108	30	47	65	88	23	103	73	63
Rockland	109	2	127	10	62	50	46	32	31
Russell	128	—	—	—	—	—	—	—	—
Sarnia	37	107	78	32	50	91	56	31	99
Sault Ste. Marie	57	83	72	17	40	16	61	83	104
Scarborough	88	104	107	113	110	103	118	112	113
Simcoe	23	29	96	110	59	100	114	59	55
Sioux Lookout	124	26	126	76	30	130	124	5	1
Smiths Falls	75	120	114	127	124	118	98	117	131
St. Catharine	74	68	70	41	106	61	67	106	87
St. Mary's	70	4	103	63	7	10	9	55	91
St. Thomas	98	64	29	50	18	116	68	60	119
Stouffville	31	111	7	124	64	119	122	46	130
Stratford	17	25	9	11	25	12	30	64	49
Strathroy	3	32	81	66	104	114	97	14	44
Sturgeon	—	—	—	—	127	132	100	102	138
Sudbury	85	92	92	115	100	62	49	53	92
Thornhill	45	12	60	103	76	49	63	27	32
Thunder Bay	34	76	67	68	64	37	45	15	41
Tillsonburg	82	39	41	42	45	31	42	18	134
Timmins	19	18	23	101	24	48	34	16	71
Toronto	76	94	95	102	101	83	84	88	70
Trenton	49	15	58	37	61	56	125	119	84

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Pneumonia Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	14	34	90	93	69	123	128	95	114
Val Caron	125	120	111	112	42	4	131	133	69
Wallaceburg	26	50	80	55	26	92	94	92	93
Wasaga Beach	—	—	—	—	—	—	—	28	1
Welland	9	47	18	27	89	29	24	56	86
Weston	43	46	49	72	77	58	104	51	85
Whitby	111	80	77	106	79	67	31	108	50
Willowdale	77	109	120	114	108	69	102	103	46
Windsor	91	99	93	85	83	68	64	68	78
Woodbridge	10	101	24	49	90	121	25	90	42
Woodstock	113	22	121	81	17	82	112	96	58
Rural	45	45	54	71	60	64	54	50	89
Other	84	67	57	73	48	60	40	21	77

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	20	14	83	121	—	—	—	—
Ajax	31	42	27	50	102	—	100	25	90
Alliston	56	104	70	9	18	—	69	1	1
Amherstburg	25	98	8	71	19	—	79	16	1
Arnprior	69	74	74	37	60	—	120	78	1
Aurora	67	40	64	71	75	—	22	14	125
Aylmer West	—	63	113	19	74	—	65	29	—
Barrie	25	40	21	88	97	—	117	41	119
Belleville	92	97	103	98	33	—	26	68	1
Bolton	33	—	83	120	119	—	60	56	1
Bowmanville	94	33	109	59	24	—	43	24	114
Bracebridge	1	100	38	37	20	—	31	1	1
Bradford	61	60	64	31	44	—	1	20	116
Brampton	80	44	32	46	37	—	78	98	105
Brantford	88	19	99	54	37	—	111	101	121
Brockville	23	60	58	99	106	—	24	80	107
Burlington	77	86	96	44	103	—	97	106	124
Caledon	—	—	—	—	—	—	—	—	1
Caledonia	62	—	74	1	117	—	1	46	—
Cambridge	46	55	52	57	73	—	106	19	89
Carleton Place	75	101	13	1	1	—	52	105	1
Chatham	43	99	46	42	105	—	110	30	1
Cobourg	—	96	67	19	68	—	73	103	1
Collingwood	—	22	50	121	29	—	1	111	132
Concord	—	—	78	79	68	—	16	—	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	17	24	91	89	92	—	105	27	1
Cumberland	—	—	—	—	86	—	—	79	1
Delhi	—	—	—	—	1	—	41	—	—
Downsview	95	91	81	84	113	—	36	113	86
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	1	55	77	—	1	77	—
East Gwillimbury	—	—	—	74	53	—	124	58	1
Elliot Lake	1	1	72	107	17	—	19	109	108
Elmira	—	—	—	—	—	—	—	47	—
Espanola	—	1	58	77	16	—	36	—	1
Essex	30	65	48	56	75	—	89	43	1
Etobicoke	85	83	64	66	84	—	89	74	99
Fergus	—	—	—	52	1	—	51	49	—
Fort Erie	32	105	—	111	119	—	14	48	134
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	50	107	108	118	—	118	124	1
Garson	—	1	1	118	88	—	54	71	1
Georgetown	38	54	11	46	116	—	34	1	1
Goderich	—	59	10	1	60	—	33	1	1
Gravenhurst	—	71	37	116	25	—	125	120	1
Greely	—	—	—	75	—	—	70	1	1
Grimsby	41	102	18	16	46	—	56	25	1
Guelph	39	25	20	26	28	—	70	17	1
Hamilton	90	81	98	101	107	—	102	90	113
Hanmer	1	1	55	112	71	—	22	69	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	1	—	—	24	—	—	77	—	—
Hawkesbury	28	53	111	119	62	—	85	115	1
Huntsville	1	1	52	28	57	—	14	123	1
Ingersoll	1	—	47	113	23	—	59	1	—
Innisfil	—	—	—	—	87	—	82	21	127
Kapuskasing	1	1	28	24	12	—	39	35	1
Kenora	—	—	—	—	—	—	—	—	—
Keswick	22	77	41	43	33	—	21	116	128
Kincardine	—	75	9	80	83	—	65	65	1
King City	—	—	69	46	1	—	28	13	130
Kingston	53	94	92	87	112	—	112	98	103
Kingsville	70	—	—	1	57	—	79	118	—
Kirkland Lake	1	1	16	30	42	—	1	114	1
Kitchener	78	30	23	70	70	—	83	63	106
Leamington	71	69	67	39	71	—	42	36	1
Lindsay	65	17	102	103	115	—	49	89	115
Listowel	—	—	—	—	—	—	—	61	1
Lively	1	—	79	77	—	—	1	122	122
London	93	92	105	82	101	—	114	102	120
Manotick	—	58	62	1	1	—	61	31	1
Maple	68	103	11	62	41	—	116	58	1
Markham	36	46	44	57	65	—	57	93	97
Meaford	—	—	—	52	13	—	—	126	1
Midland	20	1	77	64	46	—	84	1	1
Milton	63	71	1	15	80	—	123	1	133

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	73	78	51	86	91	—	103	92	91
Napanee	96	32	112	8	14	—	108	112	131
Navan	—	—	—	—	—	—	—	53	1
New Hamburg	—	—	—	—	—	—	74	1	—
Newmarket	42	38	101	66	39	—	45	23	118
Niagara Falls	87	93	93	104	79	—	104	104	1
North Bay	81	1	95	36	15	—	108	37	1
North York	82	80	85	81	114	—	25	100	100
Oakville	47	84	42	35	50	—	18	85	1
Orangeville	63	14	30	18	26	—	32	39	1
Orillia	25	45	58	22	35	—	57	96	1
Oshawa	84	46	45	28	21	—	34	83	110
Ottawa	86	88	84	85	99	—	88	88	109
Owen Sound	52	26	7	39	26	—	64	32	1
Paris	—	66	—	34	80	—	1	70	1
Parry Sound	—	1	—	71	64	—	85	63	126
Pembroke	34	39	23	31	36	—	52	32	104
Penetanguishene	15	—	34	110	49	—	40	54	1
Perth	74	64	104	106	42	—	70	54	1
Petawawa	—	66	70	—	9	—	122	82	129
Peterborough	21	87	88	17	63	—	95	73	1
Pickering	89	43	97	23	57	—	100	45	1
Port Colborne	44	66	15	109	45	—	20	108	—
Port Hope	1	49	1	75	85	—	74	61	1
Port Perry	16	27	76	13	22	—	26	121	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	18	31	54	61	56	—	1	110	1
Richmond Hill	58	35	90	91	94	—	115	95	117
Rockland	19	71	1	62	—	—	49	15	1
Russell	—	—	—	7	32	—	85	39	1
Sarnia	55	48	94	69	51	—	98	49	1
Sault Ste. Marie	1	1	25	93	97	—	47	28	1
Scarborough	83	60	72	92	88	—	91	93	98
Simcoe	23	76	62	41	31	—	67	22	1
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	91	15	32	117	10	—	1	12	1
St. Catharine	56	28	55	27	108	—	44	97	111
St. Mary's	—	—	42	49	—	—	1	57	—
St. Thomas	34	95	6	114	29	—	1	1	1
Stouffville	1	29	36	10	66	—	63	117	1
Stratford	28	36	29	14	1	—	54	119	1
Strathroy	—	21	19	50	78	—	1	125	—
Sturgeon	—	—	—	—	—	—	17	18	1
Sudbury	1	1	26	105	110	—	68	86	93
Thornhill	60	90	108	33	54	—	38	65	1
Thunder Bay	51	52	57	100	93	—	61	84	102
Tillsonburg	—	18	35	122	11	—	1	58	—
Timmins	1	1	21	60	1	—	113	52	101
Toronto	76	79	81	94	104	—	99	86	94
Trenton	66	70	106	12	109	—	107	32	123

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Percutaneous Transluminal Coronary Angioplasty (PTCA) Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	39	11	48	—	79	51	1
Val Caron	—	—	40	64	67	—	119	75	1
Wallaceburg	58	16	48	115	90	—	93	65	—
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	49	36	31	19	55	—	94	107	1
Weston	40	89	17	97	111	—	92	72	112
Whitby	48	22	100	1	100	—	46	91	1
Willowdale	79	82	87	95	80	—	48	75	92
Windsor	45	57	79	96	40	—	96	38	88
Woodbridge	54	51	61	44	52	—	28	44	96
Woodstock	72	34	110	66	1	—	121	1	1
Rural	37	55	86	90	96	—	76	81	95
Other	50	85	89	102	95	—	30	42	87

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	—	1	—	—	—	—	—	—	—
Alliston	—	—	—	—	—	—	—	24	—
Amherstburg	—	—	—	—	—	—	—	—	—
Arnprior	35	—	—	—	—	—	—	—	—
Aurora	—	42	—	—	—	—	—	—	1
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	57	1	1	16	11	20	20	44	114
Belleville	28	50	1	—	1	—	28	29	1
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	—	13	—	—	—	—	—	—	1
Bracebridge	15	—	—	—	—	—	—	1	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	48	1	17	21	24	18	1	1	1
Brantford	22	16	38	14	1	29	19	23	1
Brockville	—	39	42	—	—	—	—	—	—
Burlington	10	42	57	33	27	1	22	1	1
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	19	40	—	35	1	25	25	48	1
Carleton Place	—	—	—	—	—	—	—	25	—
Chatham	13	54	22	16	31	—	38	—	—
Cobourg	—	14	—	—	31	—	36	—	1
Collingwood	—	1	40	—	—	27	1	1	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	1	48	1	1	49	41	—	—	1
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	28	1	55	39	17	1	1	46	1
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	27	37	15	11	1	36	—	39	118
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	24	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	21	61	51	23	43	42	23	47	1
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	1	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	—	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	—	—	—	—	—
Guelph	37	27	1	35	31	40	42	22	—
Hamilton	49	23	53	23	16	38	14	40	117
Hanmer	42	—	45	—	—	37	39	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	—	—	—	—	—	—
Huntsville	—	36	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	39	1	1	24	26	1
Kapuskasing	32	—	30	—	42	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	9	—	—	—	—	—	—	1
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	1	40	45	19	19	20	35	28	1
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	56	—	—	—	—
Kitchener	55	17	32	13	55	17	36	31	1
Leamington	—	—	34	—	—	—	—	—	—
Lindsay	—	1	—	—	14	—	—	26	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	10	—	—	—	—	—	—	—
London	14	15	35	29	22	22	29	18	115
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	1	1	45	—	11	—	—	—	1
Meaford	—	—	—	—	—	—	—	—	—
Midland	37	50	1	38	29	—	—	—	—
Milton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	46	20	20	20	36	35	13	42	1
Napanee	—	—	—	—	—	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	6	54	36	41	—	—	34	1	—
Niagara Falls	32	45	58	1	40	26	1	31	1
North Bay	32	48	1	32	25	31	43	19	1
North York	15	45	1	14	1	1	18	1	1
Oakville	1	12	1	41	35	1	—	21	1
Orangeville	—	—	—	—	40	—	—	—	—
Orillia	24	31	16	33	1	28	32	37	1
Oshawa	25	50	1	1	49	1	17	1	1
Ottawa	50	57	1	45	53	1	1	41	1
Owen Sound	—	—	—	25	—	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	25	26	30	18	15	33	33	30	—
Pembroke	35	—	36	43	—	1	—	—	—
Penetanguishene	—	—	1	—	36	—	—	—	—
Perth	23	—	40	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	9	17	23	30	20	16	26	34	1
Pickering	40	—	1	—	1	—	—	—	—
Port Colborne	—	—	43	1	—	—	—	—	—
Port Hope	—	—	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	30	47	1	11	13	30	14	1	1
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	30	33	38	35	36	—	31	—	—
Sault Ste. Marie	51	24	24	31	46	24	46	16	1
Scarborough	45	58	14	46	1	39	45	14	1
Simcoe	—	—	—	28	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	17	—	26	—	—	—	—	—	1
St. Catharine	54	10	17	1	26	1	1	15	1
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	12	50	—	10	27	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	1	37	—	—	—	—	—	31	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	20	—
Sudbury	17	60	54	48	45	32	27	45	1
Thornhill	7	28	32	1	21	—	30	1	—
Thunder Bay	47	21	20	22	43	23	1	43	1
Tillsonburg	—	35	—	—	—	—	—	—	—
Timmins	52	1	17	8	22	—	41	—	1
Toronto	44	59	52	44	52	1	1	12	1
Trenton	39	56	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	26	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	19	42	49	26	36	15	12	38	—
Weston	56	30	56	9	18	1	16	34	1
Whitby	40	31	45	27	47	—	1	—	1
Willowdale	53	19	28	1	30	1	21	1	1
Windsor	8	34	25	49	54	1	1	1	1
Woodbridge	—	—	—	—	47	33	39	13	1
Woodstock	—	—	28	—	—	—	—	—	—
Rural	43	29	50	47	51	19	44	36	116
Other	10	22	43	50	34	1	1	17	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	—	—	—	—
Ajax	—	1	—	—	—	—	—	—	—
Alliston	—	—	—	—	—	—	—	24	—
Amherstburg	—	—	—	—	—	—	—	—	—
Arnprior	35	—	—	—	—	—	—	—	—
Aurora	—	42	—	—	—	—	—	—	1
Aylmer West	—	—	—	—	—	—	—	—	—
Barrie	57	1	1	16	11	20	20	44	114
Belleville	28	50	1	—	1	—	28	29	1
Bolton	—	—	—	—	—	—	—	—	—
Bowmanville	—	13	—	—	—	—	—	—	1
Bracebridge	15	—	—	—	—	—	—	1	—
Bradford	—	—	—	—	—	—	—	—	—
Brampton	48	1	17	21	24	18	1	1	1
Brantford	22	16	38	14	1	29	19	23	1
Brockville	—	39	42	—	—	—	—	—	—
Burlington	10	42	57	33	27	1	22	1	1
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	—
Cambridge	19	40	—	35	1	25	25	48	1
Carleton Place	—	—	—	—	—	—	—	25	—
Chatham	13	54	22	16	31	—	38	—	—
Cobourg	—	14	—	—	31	—	36	—	1
Collingwood	—	1	40	—	—	27	1	1	—
Concord	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	1	48	1	1	49	41	—	—	1
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	—	—	—	—	—	—	—	—	—
Downsview	28	1	55	39	17	1	1	46	1
Dryden	—	—	—	—	—	—	—	—	—
Dunnville	—	—	—	—	—	—	—	—	—
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	27	37	15	11	1	36	—	39	118
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	24	—	—	—	—	—	—	—
Essex	—	—	—	—	—	—	—	—	—
Etobicoke	21	61	51	23	43	42	23	47	1
Fergus	—	—	—	—	—	—	—	—	—
Fort Erie	—	—	—	—	1	—	—	—	—
Fort Frances	—	—	—	—	—	—	—	—	—
Gananoque	—	—	—	—	—	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	—	—	—	—	—	—	—	—	—
Goderich	—	—	—	—	—	—	—	—	—
Gravenhurst	—	—	—	—	—	—	—	—	—
Greely	—	—	—	—	—	—	—	—	—
Grimsby	—	—	—	—	—	—	—	—	—
Guelph	37	27	1	35	31	40	42	22	—
Hamilton	49	23	53	23	16	38	14	40	117
Hanmer	42	—	45	—	—	37	39	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	—	—	—
Hawkesbury	—	—	—	—	—	—	—	—	—
Huntsville	—	36	—	—	—	—	—	—	—
Ingersoll	—	—	—	—	—	—	—	—	—
Innisfil	—	—	—	39	1	1	24	26	1
Kapuskasing	32	—	30	—	42	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	—	9	—	—	—	—	—	—	1
Kincardine	—	—	—	—	—	—	—	—	—
King City	—	—	—	—	—	—	—	—	—
Kingston	1	40	45	19	19	20	35	28	1
Kingsville	—	—	—	—	—	—	—	—	—
Kirkland Lake	—	—	—	—	56	—	—	—	—
Kitchener	55	17	32	13	55	17	36	31	1
Leamington	—	—	34	—	—	—	—	—	—
Lindsay	—	1	—	—	14	—	—	26	—
Listowel	—	—	—	—	—	—	—	—	—
Lively	—	10	—	—	—	—	—	—	—
London	14	15	35	29	22	22	29	18	115
Manotick	—	—	—	—	—	—	—	—	—
Maple	—	—	—	—	—	—	—	—	—
Markham	1	1	45	—	11	—	—	—	1
Meaford	—	—	—	—	—	—	—	—	—
Midland	37	50	1	38	29	—	—	—	—
Milton	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	46	20	20	20	36	35	13	42	1
Napanee	—	—	—	—	—	—	—	—	—
Navan	—	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	6	54	36	41	—	—	34	1	—
Niagara Falls	32	45	58	1	40	26	1	31	1
North Bay	32	48	1	32	25	31	43	19	1
North York	15	45	1	14	1	1	18	1	1
Oakville	1	12	1	41	35	1	—	21	1
Orangeville	—	—	—	—	40	—	—	—	—
Orillia	24	31	16	33	1	28	32	37	1
Oshawa	25	50	1	1	49	1	17	1	1
Ottawa	50	57	1	45	53	1	1	41	1
Owen Sound	—	—	—	25	—	—	—	—	—
Paris	—	—	—	—	—	—	—	—	—
Parry Sound	25	26	30	18	15	33	33	30	—
Pembroke	35	—	36	43	—	1	—	—	—
Penetanguishene	—	—	1	—	36	—	—	—	—
Perth	23	—	40	—	—	—	—	—	—
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	9	17	23	30	20	16	26	34	1
Pickering	40	—	1	—	1	—	—	—	—
Port Colborne	—	—	43	1	—	—	—	—	—
Port Hope	—	—	—	—	—	—	—	—	—
Port Perry	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	—	—	—	—
Richmond Hill	30	47	1	11	13	30	14	1	1
Rockland	—	—	—	—	—	—	—	—	—
Russell	—	—	—	—	—	—	—	—	—
Sarnia	30	33	38	35	36	—	31	—	—
Sault Ste. Marie	51	24	24	31	46	24	46	16	1
Scarborough	45	58	14	46	1	39	45	14	1
Simcoe	—	—	—	28	—	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	17	—	26	—	—	—	—	—	1
St. Catharine	54	10	17	1	26	1	1	15	1
St. Mary's	—	—	—	—	—	—	—	—	—
St. Thomas	12	50	—	10	27	—	—	—	—
Stouffville	—	—	—	—	—	—	—	—	—
Stratford	1	37	—	—	—	—	—	31	—
Strathroy	—	—	—	—	—	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	20	—
Sudbury	17	60	54	48	45	32	27	45	1
Thornhill	7	28	32	1	21	—	30	1	—
Thunder Bay	47	21	20	22	43	23	1	43	1
Tillsonburg	—	35	—	—	—	—	—	—	—
Timmins	52	1	17	8	22	—	41	—	1
Toronto	44	59	52	44	52	1	1	12	1
Trenton	39	56	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Carotid Endarterectomy Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	—	—	26	—	—	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	19	42	49	26	36	15	12	38	—
Weston	56	30	56	9	18	1	16	34	1
Whitby	40	31	45	27	47	—	1	—	1
Willowdale	53	19	28	1	30	1	21	1	1
Windsor	8	34	25	49	54	1	1	1	1
Woodbridge	—	—	—	—	47	33	39	13	1
Woodstock	—	—	28	—	—	—	—	—	—
Rural	43	29	50	47	51	19	44	36	116
Other	10	22	43	50	34	1	1	17	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	—	—	—	83
Ajax	—	—	—	—	—	30	21	8	45
Alliston	—	—	—	—	—	—	60	13	—
Amherstburg	—	—	—	—	—	—	36	—	75
Arnprior	—	—	—	—	—	—	—	34	41
Aurora	—	—	—	—	—	1	—	—	44
Aylmer West	—	—	—	—	—	8	56	—	71
Barrie	—	—	—	—	—	29	7	22	105
Belleville	—	—	—	—	—	22	54	18	46
Bolton	—	—	—	—	—	32	—	—	101
Bowmanville	—	—	—	—	—	70	4	50	73
Bracebridge	—	—	—	—	—	—	—	—	61
Bradford	—	—	—	—	—	—	—	—	127
Brampton	—	—	—	—	—	12	41	49	72
Brantford	—	—	—	—	—	55	32	36	98
Brockville	—	—	—	—	—	34	46	38	82
Burlington	—	—	—	—	—	57	52	21	39
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	—	—	—	—	—	—	—	—	1
Cambridge	—	—	—	—	—	64	48	61	40
Carleton Place	—	—	—	—	—	—	—	—	85
Chatham	—	—	—	—	—	48	29	35	62
Cobourg	—	—	—	—	—	—	—	—	106
Collingwood	—	—	—	—	—	—	—	—	70
Concord	—	—	—	—	—	—	—	—	115

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	50	37	27	50
Cumberland	—	—	—	—	—	—	—	—	33
Delhi	—	—	—	—	—	—	—	—	118
Downsview	—	—	—	—	—	23	—	—	89
Dryden	—	—	—	—	—	—	—	—	84
Dunnville	—	—	—	—	—	—	—	—	94
East Gwillimbury	—	—	—	—	—	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	135
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	1
Essex	—	—	—	—	—	17	3	32	24
Etobicoke	—	—	—	—	—	33	45	45	37
Fergus	—	—	—	—	—	—	—	—	30
Fort Erie	—	—	—	—	—	—	—	—	133
Fort Frances	—	—	—	—	—	—	—	53	130
Gananoque	—	—	—	—	—	—	—	—	1
Garson	—	—	—	—	—	—	—	—	116
Georgetown	—	—	—	—	—	—	—	—	32
Goderich	—	—	—	—	—	—	—	63	29
Gravenhurst	—	—	—	—	—	—	—	56	125
Greely	—	—	—	—	—	—	2	26	—
Grimsby	—	—	—	—	—	60	—	64	137
Guelph	—	—	—	—	—	21	51	47	122
Hamilton	—	—	—	—	—	35	17	30	43
Hanmer	—	—	—	—	—	—	—	—	1

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	—	—	—	112
Hawkesbury	—	—	—	—	—	59	—	—	—
Huntsville	—	—	—	—	—	—	—	—	126
Ingersoll	—	—	—	—	—	1	9	—	124
Innisfil	—	—	—	—	—	—	—	—	119
Kapuskasing	—	—	—	—	—	—	—	—	1
Kenora	—	—	—	—	—	69	—	—	1
Keswick	—	—	—	—	—	—	—	—	25
Kincardine	—	—	—	—	—	—	—	—	1
King City	—	—	—	—	—	—	—	—	—
Kingston	—	—	—	—	—	44	33	44	31
Kingsville	—	—	—	—	—	47	18	9	20
Kirkland Lake	—	—	—	—	—	—	—	58	113
Kitchener	—	—	—	—	—	46	58	54	27
Leamington	—	—	—	—	—	14	34	7	35
Lindsay	—	—	—	—	—	58	25	28	57
Listowel	—	—	—	—	—	—	—	—	132
Lively	—	—	—	—	—	—	—	—	47
London	—	—	—	—	—	24	12	20	59
Manotick	—	—	—	—	—	—	5	2	123
Maple	—	—	—	—	—	—	—	—	1
Markham	—	—	—	—	—	38	—	23	100
Meaford	—	—	—	—	—	—	—	—	128
Midland	—	—	—	—	—	—	—	—	107
Milton	—	—	—	—	—	40	—	—	79

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	31	39	46	53
Napanee	—	—	—	—	—	41	—	42	108
Navan	—	—	—	—	—	—	—	—	1
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	—	—	—	—	—	—	49	—	87
Niagara Falls	—	—	—	—	—	7	59	57	92
North Bay	—	—	—	—	—	66	43	3	64
North York	—	—	—	—	—	62	24	5	60
Oakville	—	—	—	—	—	63	22	41	51
Orangeville	—	—	—	—	—	—	—	—	21
Orillia	—	—	—	—	—	56	15	60	96
Oshawa	—	—	—	—	—	19	35	52	56
Ottawa	—	—	—	—	—	18	13	24	34
Owen Sound	—	—	—	—	—	26	40	48	95
Paris	—	—	—	—	—	—	—	—	38
Parry Sound	—	—	—	—	—	—	—	—	102
Pembroke	—	—	—	—	—	67	—	66	109
Penetanguishene	—	—	—	—	—	—	—	—	91
Perth	—	—	—	—	—	37	—	—	121
Petawawa	—	—	—	—	—	—	—	—	—
Peterborough	—	—	—	—	—	51	—	6	69
Pickering	—	—	—	—	—	13	31	33	97
Port Colborne	—	—	—	—	—	27	8	29	55
Port Hope	—	—	—	—	—	—	—	25	1
Port Perry	—	—	—	—	—	—	—	—	111

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	1	10	59	1
Richmond Hill	—	—	—	—	—	20	11	17	77
Rockland	—	—	—	—	—	—	—	4	80
Russell	—	—	—	—	—	—	—	—	—
Sarnia	—	—	—	—	—	15	27	—	86
Sault Ste. Marie	—	—	—	—	—	52	19	1	68
Scarborough	—	—	—	—	—	49	42	40	65
Simcoe	—	—	—	—	—	—	47	15	114
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	—	—	—	—	—	25	—	—	78
St. Catharine	—	—	—	—	—	45	55	55	93
St. Mary's	—	—	—	—	—	68	—	43	134
St. Thomas	—	—	—	—	—	53	38	14	49
Stouffville	—	—	—	—	—	16	—	—	23
Stratford	—	—	—	—	—	1	—	51	36
Strathroy	—	—	—	—	—	—	—	—	99
Sturgeon	—	—	—	—	—	—	—	65	129
Sudbury	—	—	—	—	—	39	53	—	103
Thornhill	—	—	—	—	—	5	1	—	22
Thunder Bay	—	—	—	—	—	65	16	37	52
Tillsonburg	—	—	—	—	—	—	—	—	54
Timmins	—	—	—	—	—	—	50	10	67
Toronto	—	—	—	—	—	42	26	11	58
Trenton	—	—	—	—	—	9	—	—	131

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Acute Myocardial Infarction (AMI), without Transfer Cases Mortality: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	—	28	—	136
Val Caron	—	—	—	—	—	—	—	—	76
Wallaceburg	—	—	—	—	—	—	—	—	48
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	—	—	—	—	—	54	57	—	120
Weston	—	—	—	—	—	11	—	—	74
Whitby	—	—	—	—	—	10	44	16	26
Willowdale	—	—	—	—	—	61	6	12	66
Windsor	—	—	—	—	—	28	14	31	28
Woodbridge	—	—	—	—	—	—	—	62	90
Woodstock	—	—	—	—	—	6	20	—	81
Rural	—	—	—	—	—	43	23	39	88
Other	—	—	—	—	—	36	30	19	63

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	118	51	69	50
Ajax	—	—	—	—	—	70	94	96	83
Alliston	—	—	—	—	—	101	19	80	122
Amherstburg	—	—	—	—	—	123	29	111	60
Arnprior	—	—	—	—	—	88	92	126	14
Aurora	—	—	—	—	—	18	27	38	13
Aylmer West	—	—	—	—	—	31	12	68	28
Barrie	—	—	—	—	—	30	89	61	80
Belleville	—	—	—	—	—	66	98	78	91
Bolton	—	—	—	—	—	55	62	102	43
Bowmanville	—	—	—	—	—	93	99	120	111
Bracebridge	—	—	—	—	—	137	138	137	136
Bradford	—	—	—	—	—	15	78	93	25
Brampton	—	—	—	—	—	82	84	77	67
Brantford	—	—	—	—	—	31	22	43	10
Brockville	—	—	—	—	—	129	81	100	118
Burlington	—	—	—	—	—	71	47	33	63
Caledon	—	—	—	—	—	11	1	133	8
Caledonia	—	—	—	—	—	25	52	34	54
Cambridge	—	—	—	—	—	33	54	22	48
Carleton Place	—	—	—	—	—	85	100	57	100
Chatham	—	—	—	—	—	4	31	40	59
Cobourg	—	—	—	—	—	42	124	87	106
Collingwood	—	—	—	—	—	27	40	95	29
Concord	—	—	—	—	—	97	48	59	41

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	111	101	104	104
Cumberland	—	—	—	—	—	110	32	60	75
Delhi	—	—	—	—	—	102	118	62	21
Downsview	—	—	—	—	—	81	91	64	92
Dryden	—	—	—	—	—	122	86	99	101
Dunnville	—	—	—	—	—	113	122	134	98
East Gwillimbury	—	—	—	—	—	40	15	6	1
Elliot Lake	—	—	—	—	—	132	132	132	138
Elmira	—	—	—	—	—	9	82	65	76
Espanola	—	—	—	—	—	119	59	72	20
Essex	—	—	—	—	—	75	64	9	6
Etobicoke	—	—	—	—	—	41	57	40	47
Fergus	—	—	—	—	—	53	43	81	64
Fort Erie	—	—	—	—	—	37	16	48	129
Fort Frances	—	—	—	—	—	126	135	135	133
Gananoque	—	—	—	—	—	29	68	25	125
Garson	—	—	—	—	—	125	133	129	123
Georgetown	—	—	—	—	—	54	37	23	26
Goderich	—	—	—	—	—	92	9	18	62
Gravenhurst	—	—	—	—	—	109	137	136	132
Greely	—	—	—	—	—	95	4	90	113
Grimsby	—	—	—	—	—	96	128	94	53
Guelph	—	—	—	—	—	34	33	55	38
Hamilton	—	—	—	—	—	48	30	49	61
Hanmer	—	—	—	—	—	65	44	108	71

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	126	7	44	103
Hawkesbury	—	—	—	—	—	12	13	7	19
Huntsville	—	—	—	—	—	114	131	128	137
Ingersoll	—	—	—	—	—	62	5	12	68
Innisfil	—	—	—	—	—	71	96	51	65
Kapuskasing	—	—	—	—	—	135	134	131	135
Kenora	—	—	—	—	—	19	67	105	77
Keswick	—	—	—	—	—	36	28	32	7
Kincardine	—	—	—	—	—	112	42	107	51
King City	—	—	—	—	—	63	6	4	95
Kingston	—	—	—	—	—	57	50	26	52
Kingsville	—	—	—	—	—	107	109	75	109
Kirkland Lake	—	—	—	—	—	134	123	138	116
Kitchener	—	—	—	—	—	58	77	76	89
Leamington	—	—	—	—	—	117	104	113	119
Lindsay	—	—	—	—	—	98	87	117	108
Listowel	—	—	—	—	—	44	107	58	49
Lively	—	—	—	—	—	84	11	73	34
London	—	—	—	—	—	10	14	13	5
Manotick	—	—	—	—	—	3	26	5	84
Maple	—	—	—	—	—	43	46	36	94
Markham	—	—	—	—	—	26	34	24	30
Meaford	—	—	—	—	—	61	18	1	55
Midland	—	—	—	—	—	124	125	127	130
Milton	—	—	—	—	—	79	23	16	18

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	17	20	14	9
Napanee	—	—	—	—	—	103	103	119	86
Navan	—	—	—	—	—	76	3	98	16
New Hamburg	—	—	—	—	—	94	102	50	96
Newmarket	—	—	—	—	—	5	25	27	23
Niagara Falls	—	—	—	—	—	22	56	28	40
North Bay	—	—	—	—	—	115	113	116	117
North York	—	—	—	—	—	77	58	42	58
Oakville	—	—	—	—	—	16	41	17	22
Orangeville	—	—	—	—	—	90	114	114	105
Orillia	—	—	—	—	—	99	116	115	127
Oshawa	—	—	—	—	—	116	115	112	110
Ottawa	—	—	—	—	—	24	35	39	37
Owen Sound	—	—	—	—	—	39	119	118	87
Paris	—	—	—	—	—	2	10	21	78
Parry Sound	—	—	—	—	—	106	130	124	131
Pembroke	—	—	—	—	—	48	93	85	39
Penetanguishene	—	—	—	—	—	120	126	123	128
Perth	—	—	—	—	—	89	49	109	82
Petawawa	—	—	—	—	—	78	106	20	11
Peterborough	—	—	—	—	—	21	97	83	120
Pickering	—	—	—	—	—	38	72	74	90
Port Colborne	—	—	—	—	—	104	110	122	124
Port Hope	—	—	—	—	—	131	121	97	33
Port Perry	—	—	—	—	—	100	117	88	114

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	133	2	130	121
Renfrew	—	—	—	—	—	64	120	101	97
Richmond Hill	—	—	—	—	—	60	53	35	44
Rockland	—	—	—	—	—	13	83	30	93
Russell	—	—	—	—	—	1	71	2	15
Sarnia	—	—	—	—	—	14	63	29	24
Sault Ste. Marie	—	—	—	—	—	87	112	67	88
Scarborough	—	—	—	—	—	52	60	56	45
Simcoe	—	—	—	—	—	130	80	89	99
Sioux Lookout	—	—	—	—	—	86	129	125	79
Smiths Falls	—	—	—	—	—	108	111	79	126
St. Catharine	—	—	—	—	—	35	65	66	69
St. Mary's	—	—	—	—	—	90	39	92	74
St. Thomas	—	—	—	—	—	20	38	8	17
Stouffville	—	—	—	—	—	7	8	19	3
Stratford	—	—	—	—	—	128	136	91	81
Strathroy	—	—	—	—	—	51	74	103	107
Sturgeon	—	—	—	—	—	136	127	106	134
Sudbury	—	—	—	—	—	80	45	47	42
Thornhill	—	—	—	—	—	46	79	36	35
Thunder Bay	—	—	—	—	—	28	21	11	4
Tillsonburg	—	—	—	—	—	8	76	15	2
Timmins	—	—	—	—	—	105	108	110	112
Toronto	—	—	—	—	—	56	61	45	57
Trenton	—	—	—	—	—	47	105	84	85

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	74	73	10	27
Val Caron	—	—	—	—	—	73	24	82	31
Wallaceburg	—	—	—	—	—	6	17	63	46
Wasaga Beach	—	—	—	—	—	—	88	3	12
Welland	—	—	—	—	—	121	90	121	115
Weston	—	—	—	—	—	68	55	71	73
Whitby	—	—	—	—	—	83	95	86	102
Willowdale	—	—	—	—	—	69	85	53	56
Windsor	—	—	—	—	—	50	75	54	66
Woodbridge	—	—	—	—	—	45	66	51	72
Woodstock	—	—	—	—	—	59	68	46	32
Rural	—	—	—	—	—	67	70	70	70
Other	—	—	—	—	—	23	36	30	36

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	118	51	69	50
Ajax	—	—	—	—	—	70	94	96	83
Alliston	—	—	—	—	—	101	19	80	122
Amherstburg	—	—	—	—	—	123	29	111	60
Arnprior	—	—	—	—	—	88	92	126	14
Aurora	—	—	—	—	—	18	27	38	13
Aylmer West	—	—	—	—	—	31	12	68	28
Barrie	—	—	—	—	—	30	89	61	80
Belleville	—	—	—	—	—	66	98	78	91
Bolton	—	—	—	—	—	55	62	102	43
Bowmanville	—	—	—	—	—	93	99	120	111
Bracebridge	—	—	—	—	—	137	138	137	136
Bradford	—	—	—	—	—	15	78	93	25
Brampton	—	—	—	—	—	82	84	77	67
Brantford	—	—	—	—	—	31	22	43	10
Brockville	—	—	—	—	—	129	81	100	118
Burlington	—	—	—	—	—	71	47	33	63
Caledon	—	—	—	—	—	11	1	133	8
Caledonia	—	—	—	—	—	25	52	34	54
Cambridge	—	—	—	—	—	33	54	22	48
Carleton Place	—	—	—	—	—	85	100	57	100
Chatham	—	—	—	—	—	4	31	40	59
Cobourg	—	—	—	—	—	42	124	87	106
Collingwood	—	—	—	—	—	27	40	95	29
Concord	—	—	—	—	—	97	48	59	41

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	111	101	104	104
Cumberland	—	—	—	—	—	110	32	60	75
Delhi	—	—	—	—	—	102	118	62	21
Downsview	—	—	—	—	—	81	91	64	92
Dryden	—	—	—	—	—	122	86	99	101
Dunnville	—	—	—	—	—	113	122	134	98
East Gwillimbury	—	—	—	—	—	40	15	6	1
Elliot Lake	—	—	—	—	—	132	132	132	138
Elmira	—	—	—	—	—	9	82	65	76
Espanola	—	—	—	—	—	119	59	72	20
Essex	—	—	—	—	—	75	64	9	6
Etobicoke	—	—	—	—	—	41	57	40	47
Fergus	—	—	—	—	—	53	43	81	64
Fort Erie	—	—	—	—	—	37	16	48	129
Fort Frances	—	—	—	—	—	126	135	135	133
Gananoque	—	—	—	—	—	29	68	25	125
Garson	—	—	—	—	—	125	133	129	123
Georgetown	—	—	—	—	—	54	37	23	26
Goderich	—	—	—	—	—	92	9	18	62
Gravenhurst	—	—	—	—	—	109	137	136	132
Greely	—	—	—	—	—	95	4	90	113
Grimsby	—	—	—	—	—	96	128	94	53
Guelph	—	—	—	—	—	34	33	55	38
Hamilton	—	—	—	—	—	48	30	49	61
Hanmer	—	—	—	—	—	65	44	108	71

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	126	7	44	103
Hawkesbury	—	—	—	—	—	12	13	7	19
Huntsville	—	—	—	—	—	114	131	128	137
Ingersoll	—	—	—	—	—	62	5	12	68
Innisfil	—	—	—	—	—	71	96	51	65
Kapuskasing	—	—	—	—	—	135	134	131	135
Kenora	—	—	—	—	—	19	67	105	77
Keswick	—	—	—	—	—	36	28	32	7
Kincardine	—	—	—	—	—	112	42	107	51
King City	—	—	—	—	—	63	6	4	95
Kingston	—	—	—	—	—	57	50	26	52
Kingsville	—	—	—	—	—	107	109	75	109
Kirkland Lake	—	—	—	—	—	134	123	138	116
Kitchener	—	—	—	—	—	58	77	76	89
Leamington	—	—	—	—	—	117	104	113	119
Lindsay	—	—	—	—	—	98	87	117	108
Listowel	—	—	—	—	—	44	107	58	49
Lively	—	—	—	—	—	84	11	73	34
London	—	—	—	—	—	10	14	13	5
Manotick	—	—	—	—	—	3	26	5	84
Maple	—	—	—	—	—	43	46	36	94
Markham	—	—	—	—	—	26	34	24	30
Meaford	—	—	—	—	—	61	18	1	55
Midland	—	—	—	—	—	124	125	127	130
Milton	—	—	—	—	—	79	23	16	18

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	17	20	14	9
Napanee	—	—	—	—	—	103	103	119	86
Navan	—	—	—	—	—	76	3	98	16
New Hamburg	—	—	—	—	—	94	102	50	96
Newmarket	—	—	—	—	—	5	25	27	23
Niagara Falls	—	—	—	—	—	22	56	28	40
North Bay	—	—	—	—	—	115	113	116	117
North York	—	—	—	—	—	77	58	42	58
Oakville	—	—	—	—	—	16	41	17	22
Orangeville	—	—	—	—	—	90	114	114	105
Orillia	—	—	—	—	—	99	116	115	127
Oshawa	—	—	—	—	—	116	115	112	110
Ottawa	—	—	—	—	—	24	35	39	37
Owen Sound	—	—	—	—	—	39	119	118	87
Paris	—	—	—	—	—	2	10	21	78
Parry Sound	—	—	—	—	—	106	130	124	131
Pembroke	—	—	—	—	—	48	93	85	39
Penetanguishene	—	—	—	—	—	120	126	123	128
Perth	—	—	—	—	—	89	49	109	82
Petawawa	—	—	—	—	—	78	106	20	11
Peterborough	—	—	—	—	—	21	97	83	120
Pickering	—	—	—	—	—	38	72	74	90
Port Colborne	—	—	—	—	—	104	110	122	124
Port Hope	—	—	—	—	—	131	121	97	33
Port Perry	—	—	—	—	—	100	117	88	114

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	133	2	130	121
Renfrew	—	—	—	—	—	64	120	101	97
Richmond Hill	—	—	—	—	—	60	53	35	44
Rockland	—	—	—	—	—	13	83	30	93
Russell	—	—	—	—	—	1	71	2	15
Sarnia	—	—	—	—	—	14	63	29	24
Sault Ste. Marie	—	—	—	—	—	87	112	67	88
Scarborough	—	—	—	—	—	52	60	56	45
Simcoe	—	—	—	—	—	130	80	89	99
Sioux Lookout	—	—	—	—	—	86	129	125	79
Smiths Falls	—	—	—	—	—	108	111	79	126
St. Catharine	—	—	—	—	—	35	65	66	69
St. Mary's	—	—	—	—	—	90	39	92	74
St. Thomas	—	—	—	—	—	20	38	8	17
Stouffville	—	—	—	—	—	7	8	19	3
Stratford	—	—	—	—	—	128	136	91	81
Strathroy	—	—	—	—	—	51	74	103	107
Sturgeon	—	—	—	—	—	136	127	106	134
Sudbury	—	—	—	—	—	80	45	47	42
Thornhill	—	—	—	—	—	46	79	36	35
Thunder Bay	—	—	—	—	—	28	21	11	4
Tillsonburg	—	—	—	—	—	8	76	15	2
Timmins	—	—	—	—	—	105	108	110	112
Toronto	—	—	—	—	—	56	61	45	57
Trenton	—	—	—	—	—	47	105	84	85

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Cesarean Section Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	74	73	10	27
Val Caron	—	—	—	—	—	73	24	82	31
Wallaceburg	—	—	—	—	—	6	17	63	46
Wasaga Beach	—	—	—	—	—	—	88	3	12
Welland	—	—	—	—	—	121	90	121	115
Weston	—	—	—	—	—	68	55	71	73
Whitby	—	—	—	—	—	83	95	86	102
Willowdale	—	—	—	—	—	69	85	53	56
Windsor	—	—	—	—	—	50	75	54	66
Woodbridge	—	—	—	—	—	45	66	51	72
Woodstock	—	—	—	—	—	59	68	46	32
Rural	—	—	—	—	—	67	70	70	70
Other	—	—	—	—	—	23	36	30	36

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	116	83	21	114
Ajax	—	—	—	—	—	41	80	71	101
Alliston	—	—	—	—	—	111	68	9	112
Amherstburg	—	—	—	—	—	69	5	22	104
Arnprior	—	—	—	—	—	112	105	123	89
Aurora	—	—	—	—	—	106	31	72	46
Aylmer West	—	—	—	—	—	98	1	39	21
Barrie	—	—	—	—	—	78	100	88	92
Belleville	—	—	—	—	—	89	93	105	74
Bolton	—	—	—	—	—	68	55	26	88
Bowmanville	—	—	—	—	—	64	33	78	75
Bracebridge	—	—	—	—	—	96	119	120	116
Bradford	—	—	—	—	—	53	115	47	28
Brampton	—	—	—	—	—	91	89	65	80
Brantford	—	—	—	—	—	26	25	19	23
Brockville	—	—	—	—	—	79	52	109	105
Burlington	—	—	—	—	—	56	30	60	53
Caledon	—	—	—	—	—	12	—	—	122
Caledonia	—	—	—	—	—	10	17	5	82
Cambridge	—	—	—	—	—	16	53	20	29
Carleton Place	—	—	—	—	—	33	82	61	73
Chatham	—	—	—	—	—	29	23	24	35
Cobourg	—	—	—	—	—	22	44	90	96
Collingwood	—	—	—	—	—	86	47	50	15
Concord	—	—	—	—	—	92	43	27	120

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	99	112	84	94
Cumberland	—	—	—	—	—	45	14	—	66
Delhi	—	—	—	—	—	—	11	29	122
Downsview	—	—	—	—	—	90	62	56	85
Dryden	—	—	—	—	—	97	81	11	122
Dunnville	—	—	—	—	—	113	121	98	108
East Gwillimbury	—	—	—	—	—	102	124	117	47
Elliot Lake	—	—	—	—	—	38	—	—	98
Elmira	—	—	—	—	—	24	84	99	16
Espanola	—	—	—	—	—	—	58	3	—
Essex	—	—	—	—	—	44	50	123	70
Etobicoke	—	—	—	—	—	61	67	37	55
Fergus	—	—	—	—	—	19	78	14	19
Fort Erie	—	—	—	—	—	84	116	100	4
Fort Frances	—	—	—	—	—	120	64	106	34
Gananoque	—	—	—	—	—	93	21	—	51
Garson	—	—	—	—	—	124	46	93	100
Georgetown	—	—	—	—	—	62	120	95	83
Goderich	—	—	—	—	—	107	16	16	122
Gravenhurst	—	—	—	—	—	105	127	123	122
Greely	—	—	—	—	—	101	2	85	69
Grimsby	—	—	—	—	—	66	110	94	33
Guelph	—	—	—	—	—	39	18	23	65
Hamilton	—	—	—	—	—	36	36	31	40
Hanmer	—	—	—	—	—	124	19	111	17

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	49	7	—	7
Hawkesbury	—	—	—	—	—	1	127	1	6
Huntsville	—	—	—	—	—	60	127	73	122
Ingersoll	—	—	—	—	—	74	6	4	14
Innisfil	—	—	—	—	—	123	76	28	107
Kapuskasing	—	—	—	—	—	119	127	123	122
Kenora	—	—	—	—	—	15	75	38	3
Keswick	—	—	—	—	—	20	57	104	64
Kincardine	—	—	—	—	—	48	4	7	48
King City	—	—	—	—	—	—	—	—	86
Kingston	—	—	—	—	—	17	38	10	59
Kingsville	—	—	—	—	—	81	70	92	97
Kirkland Lake	—	—	—	—	—	124	8	34	122
Kitchener	—	—	—	—	—	25	60	34	60
Leamington	—	—	—	—	—	95	94	52	49
Lindsay	—	—	—	—	—	103	97	115	71
Listowel	—	—	—	—	—	11	59	96	10
Lively	—	—	—	—	—	124	102	58	—
London	—	—	—	—	—	5	9	8	8
Manotick	—	—	—	—	—	—	24	77	61
Maple	—	—	—	—	—	72	92	66	115
Markham	—	—	—	—	—	34	51	76	38
Meaford	—	—	—	—	—	80	—	—	122
Midland	—	—	—	—	—	52	107	113	68
Milton	—	—	—	—	—	94	66	62	84

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	43	54	45	62
Napanee	—	—	—	—	—	118	35	91	57
Navan	—	—	—	—	—	13	14	64	—
New Hamburg	—	—	—	—	—	—	84	12	18
Newmarket	—	—	—	—	—	9	48	68	50
Niagara Falls	—	—	—	—	—	110	29	17	39
North Bay	—	—	—	—	—	82	117	47	78
North York	—	—	—	—	—	70	37	75	36
Oakville	—	—	—	—	—	59	101	80	106
Orangeville	—	—	—	—	—	117	113	112	111
Orillia	—	—	—	—	—	114	122	116	119
Oshawa	—	—	—	—	—	85	111	81	81
Ottawa	—	—	—	—	—	40	49	49	54
Owen Sound	—	—	—	—	—	108	39	44	11
Paris	—	—	—	—	—	3	22	2	90
Parry Sound	—	—	—	—	—	77	125	119	122
Pembroke	—	—	—	—	—	58	32	97	99
Penetanguishene	—	—	—	—	—	124	126	108	122
Perth	—	—	—	—	—	100	77	118	56
Petawawa	—	—	—	—	—	109	99	57	30
Peterborough	—	—	—	—	—	54	87	102	110
Pickering	—	—	—	—	—	55	69	51	43
Port Colborne	—	—	—	—	—	124	118	30	122
Port Hope	—	—	—	—	—	65	65	123	32
Port Perry	—	—	—	—	—	104	91	121	122

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	76	104	122	117
Richmond Hill	—	—	—	—	—	71	88	67	76
Rockland	—	—	—	—	—	31	45	110	109
Russell	—	—	—	—	—	2	20	—	45
Sarnia	—	—	—	—	—	4	63	15	12
Sault Ste. Marie	—	—	—	—	—	37	108	33	63
Scarborough	—	—	—	—	—	35	41	42	31
Simcoe	—	—	—	—	—	50	26	79	13
Sioux Lookout	—	—	—	—	—	—	86	6	44
Smiths Falls	—	—	—	—	—	121	127	86	118
St. Catharine	—	—	—	—	—	32	71	54	79
St. Mary's	—	—	—	—	—	75	3	83	5
St. Thomas	—	—	—	—	—	8	28	18	25
Stouffville	—	—	—	—	—	47	79	70	77
Stratford	—	—	—	—	—	51	109	107	52
Strathroy	—	—	—	—	—	6	13	82	121
Sturgeon	—	—	—	—	—	88	34	123	103
Sudbury	—	—	—	—	—	57	42	36	41
Thornhill	—	—	—	—	—	87	74	62	72
Thunder Bay	—	—	—	—	—	23	12	13	9
Tillsonburg	—	—	—	—	—	28	73	59	2
Timmins	—	—	—	—	—	122	127	114	95
Toronto	—	—	—	—	—	42	72	53	58
Trenton	—	—	—	—	—	14	94	103	102

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC) Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	21	106	101	113
Val Caron	—	—	—	—	—	124	123	69	22
Wallaceburg	—	—	—	—	—	7	10	46	27
Wasaga Beach	—	—	—	—	—	—	—	—	1
Welland	—	—	—	—	—	115	98	87	26
Weston	—	—	—	—	—	73	61	41	67
Whitby	—	—	—	—	—	63	114	74	93
Willowdale	—	—	—	—	—	67	90	43	87
Windsor	—	—	—	—	—	30	27	40	24
Woodbridge	—	—	—	—	—	83	103	89	91
Woodstock	—	—	—	—	—	27	96	32	20
Rural	—	—	—	—	—	46	56	55	42
Other	—	—	—	—	—	18	40	25	37

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	112	114	32	12	8	42	109	—	101
Ajax	100	88	88	113	101	91	24	67	87
Alliston	—	57	4	1	—	3	—	—	—
Amherstburg	123	120	113	106	122	114	90	100	128
Arnprior	81	39	45	59	108	34	4	26	1
Aurora	12	103	58	19	90	44	16	25	28
Aylmer West	45	55	55	27	24	29	13	49	37
Barrie	48	11	26	77	56	17	9	19	25
Belleville	47	72	104	83	69	83	97	24	17
Bolton	39	95	95	55	3	15	74	80	84
Bowmanville	50	46	76	29	48	77	83	72	119
Bracebridge	56	1	52	6	80	39	28	83	96
Bradford	35	19	17	80	76	—	6	6	23
Brampton	43	12	36	60	37	46	22	40	53
Brantford	97	89	59	47	58	80	62	57	95
Brockville	121	126	99	122	102	109	76	101	70
Burlington	25	25	12	10	21	28	47	61	55
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	37	61	109	5	88	63	108	76	66
Cambridge	90	96	86	94	83	93	80	50	57
Carleton Place	42	101	78	96	113	97	—	20	—
Chatham	89	92	96	85	105	96	88	71	111
Cobourg	117	124	118	109	68	103	123	90	—
Collingwood	44	71	67	120	86	108	101	73	105
Concord	—	41	1	—	100	24	43	3	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	64	30	51	51	65	89	39	93	90
Cumberland	—	—	—	—	—	—	—	34	—
Delhi	103	113	123	93	106	38	26	88	102
Downsview	49	63	23	45	49	18	11	37	46
Dryden	11	10	8	21	73	20	14	7	—
Dunnville	69	81	19	37	17	52	99	97	44
East Gwillimbury	57	—	2	20	84	57	102	—	—
Elliot Lake	4	32	41	4	7	32	72	—	112
Elmira	14	47	34	1	—	—	87	—	—
Espanola	108	99	31	—	—	—	92	—	—
Essex	106	59	16	105	109	110	3	—	38
Etobicoke	91	100	90	75	70	69	60	52	47
Fergus	87	48	60	44	115	100	—	98	135
Fort Erie	16	18	7	103	77	8	51	28	72
Fort Frances	7	9	11	23	45	19	32	43	50
Gananoque	1	1	—	1	5	—	71	—	—
Garson	40	36	107	—	—	—	—	—	—
Georgetown	72	52	106	16	39	6	75	44	1
Goderich	6	5	20	7	119	—	106	—	63
Gravenhurst	110	27	91	50	60	—	35	—	—
Greely	—	—	30	—	—	—	27	—	—
Grimsby	20	28	15	67	91	79	111	78	40
Guelph	51	44	40	35	46	48	68	69	59
Hamilton	59	74	64	65	38	49	48	59	77
Hanmer	10	22	92	40	—	31	117	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	34	24	21	9	79	11	85	65	80
Hawkesbury	32	34	49	34	13	23	70	4	14
Huntsville	51	105	44	63	66	16	69	18	39
Ingersoll	58	4	97	8	14	70	46	21	60
Innisfil	—	—	—	—	50	30	96	1	—
Kapuskasing	111	35	9	25	28	13	115	—	64
Kenora	113	54	54	90	32	71	64	60	73
Keswick	84	94	10	46	15	43	42	81	49
Kincardine	9	6	6	15	25	85	8	5	—
King City	—	15	—	—	120	—	114	—	—
Kingston	63	49	25	24	41	41	23	35	58
Kingsville	29	17	5	32	61	107	93	31	31
Kirkland Lake	8	14	98	64	64	95	53	12	18
Kitchener	31	82	85	86	40	78	98	86	103
Leamington	28	7	37	42	10	40	34	17	12
Lindsay	71	51	22	11	9	22	50	68	32
Listowel	33	84	119	123	111	113	122	—	—
Lively	102	53	—	38	93	1	—	—	—
London	105	112	108	107	97	101	112	85	110
Manotick	2	—	—	84	1	—	—	—	—
Maple	70	3	69	13	33	51	65	45	26
Markham	92	87	75	68	72	68	59	74	54
Meaford	109	110	94	62	92	—	1	—	—
Midland	74	21	24	53	98	76	55	91	16
Milton	41	93	50	54	99	21	58	14	11

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	67	83	70	94	63	54	40	23	33
Napanee	98	106	46	74	2	74	110	62	1
Navan	—	—	—	97	—	105	—	—	—
New Hamburg	—	—	—	—	—	—	1	27	—
Newmarket	38	13	39	26	27	12	37	54	30
Niagara Falls	79	76	80	82	96	102	79	47	78
North Bay	65	56	13	30	26	9	38	29	36
North York	18	20	35	40	53	37	10	13	51
Oakville	54	77	60	57	34	45	21	53	20
Orangeville	13	50	105	102	104	7	18	92	109
Orillia	116	122	115	111	31	50	89	79	69
Oshawa	86	97	79	100	81	59	61	82	68
Ottawa	55	42	74	56	47	81	63	46	65
Owen Sound	120	115	122	112	94	98	125	—	126
Paris	104	121	62	43	54	75	5	—	—
Parry Sound	107	79	42	117	35	60	105	87	106
Pembroke	96	65	82	108	30	14	95	22	56
Penetanguishene	15	8	65	81	116	104	104	102	107
Perth	88	70	120	—	114	—	116	—	—
Petawawa	82	109	—	—	—	—	36	84	—
Peterborough	65	85	92	76	71	47	33	38	34
Pickering	73	104	77	101	51	73	41	89	98
Port Colborne	115	45	102	89	67	90	94	—	13
Port Hope	94	73	66	66	62	88	—	—	92
Port Perry	5	107	114	71	4	94	—	1	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	91	3	22	87	—	7	—	85
Renfrew	124	125	110	121	123	115	124	103	131
Richmond Hill	75	98	57	72	57	62	55	64	88
Rockland	61	23	47	61	103	5	118	—	121
Russell	23	—	—	17	—	—	103	—	—
Sarnia	68	68	87	87	75	84	76	75	113
Sault Ste. Marie	46	78	101	91	107	106	86	30	104
Scarborough	76	90	63	72	52	65	54	58	67
Simcoe	83	111	116	79	16	35	91	77	45
Sioux Lookout	93	33	14	47	43	4	15	16	21
Smiths Falls	27	67	68	36	42	—	49	—	—
St. Catharine	114	116	112	116	89	87	84	42	100
St. Mary's	—	—	—	119	121	—	121	—	—
St. Thomas	24	26	18	14	20	61	17	32	71
Stouffville	35	58	43	110	85	1	78	—	—
Stratford	118	118	117	115	112	92	120	99	133
Strathroy	17	31	27	39	11	53	57	9	—
Sturgeon	—	—	—	—	12	27	12	36	—
Sudbury	60	66	100	104	95	99	100	95	116
Thornhill	19	38	33	49	59	24	81	55	35
Thunder Bay	122	117	121	118	118	112	119	96	129
Tillsonburg	119	108	82	92	82	64	45	8	62
Timmins	125	123	124	114	117	86	82	41	79
Toronto	53	62	48	52	23	58	29	39	42
Trenton	21	37	29	58	74	26	19	51	29

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Laparoscopic Cholecystectomy: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	95	119	84	—	—	—	107	—	—
Val Caron	85	43	111	—	—	—	—	—	—
Wallaceburg	3	16	71	70	6	55	31	15	81
Wasaga Beach	—	—	—	—	—	—	—	—	99
Welland	99	86	28	31	36	33	30	10	43
Weston	78	80	89	88	22	82	44	48	41
Whitby	77	69	81	98	78	56	66	56	76
Willowdale	26	40	38	28	18	36	52	33	48
Windsor	101	102	103	99	109	111	113	94	115
Woodbridge	22	60	53	18	29	10	20	63	24
Woodstock	30	29	72	33	19	66	25	11	22
Rural	80	75	72	78	55	72	67	66	82
Other	62	64	56	69	44	67	73	70	61

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	116	122	43	1	128	—	—	—	—
Ajax	118	89	104	47	105	—	—	—	—
Alliston	31	47	1	52	1	—	—	—	—
Amherstburg	1	31	33	59	112	—	—	—	—
Arnprior	42	117	31	59	1	—	—	—	—
Aurora	111	55	37	53	111	—	—	—	—
Aylmer West	30	1	105	50	58	—	—	—	—
Barrie	98	104	115	94	103	—	—	—	—
Belleville	110	115	125	126	114	—	—	—	—
Bolton	1	69	119	33	38	—	—	—	—
Bowmanville	1	102	1	107	87	—	—	—	—
Bracebridge	46	113	75	125	127	—	—	—	—
Bradford	1	1	1	73	41	—	—	—	—
Brampton	96	93	91	89	79	—	—	—	—
Brantford	88	75	43	67	34	—	—	—	—
Brockville	54	64	51	57	99	—	—	—	—
Burlington	94	38	89	104	110	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	1	1	77	43	37	—	—	—	—
Cambridge	35	68	79	75	72	—	—	—	—
Carleton Place	65	1	1	1	1	—	—	—	—
Chatham	1	80	88	118	80	—	—	—	—
Cobourg	101	98	28	102	38	—	—	—	—
Collingwood	108	43	1	35	57	—	—	—	—
Concord	1	—	—	1	1	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	102	118	78	90	120	—	—	—	—
Cumberland	—	—	—	—	—	—	—	—	—
Delhi	113	123	67	130	129	—	—	—	—
Downsview	63	64	70	77	77	—	—	—	—
Dryden	1	62	1	71	47	—	—	—	—
Dunnville	37	64	111	116	1	—	—	—	—
East Gwillimbury	—	—	—	61	—	—	—	—	—
Elliot Lake	1	1	1	1	1	—	—	—	—
Elmira	124	34	1	1	45	—	—	—	—
Espanola	—	54	45	1	1	—	—	—	—
Essex	52	45	45	124	1	—	—	—	—
Etobicoke	91	85	69	76	97	—	—	—	—
Fergus	49	1	39	63	53	—	—	—	—
Fort Erie	71	1	48	1	116	—	—	—	—
Fort Frances	64	112	120	1	1	—	—	—	—
Gananoque	117	116	121	1	1	—	—	—	—
Garson	—	1	59	1	68	—	—	—	—
Georgetown	105	1	58	42	109	—	—	—	—
Goderich	100	1	33	122	51	—	—	—	—
Gravenhurst	56	106	109	119	119	—	—	—	—
Greely	1	—	—	—	—	—	—	—	—
Grimsby	49	119	51	111	124	—	—	—	—
Guelph	89	95	94	101	107	—	—	—	—
Hamilton	82	60	73	86	47	—	—	—	—
Hanmer	1	59	30	68	1	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	39	1	56	1	38	—	—	—	—
Hawkesbury	58	111	28	1	1	—	—	—	—
Huntsville	44	1	53	105	106	—	—	—	—
Ingersoll	1	1	61	44	86	—	—	—	—
Innisfil	—	—	—	33	54	—	—	—	—
Kapuskasing	1	114	37	44	41	—	—	—	—
Kenora	72	31	1	51	118	—	—	—	—
Keswick	1	1	1	82	1	—	—	—	—
Kincardine	29	1	107	54	65	—	—	—	—
King City	125	125	—	129	70	—	—	—	—
Kingston	77	77	113	62	100	—	—	—	—
Kingsville	1	110	49	1	1	—	—	—	—
Kirkland Lake	65	1	64	121	1	—	—	—	—
Kitchener	73	72	72	84	74	—	—	—	—
Leamington	114	99	99	113	113	—	—	—	—
Lindsay	120	92	100	1	88	—	—	—	—
Listowel	118	1	1	1	66	—	—	—	—
Lively	1	35	62	1	76	—	—	—	—
London	70	82	71	57	93	—	—	—	—
Manotick	1	67	1	56	74	—	—	—	—
Maple	123	121	117	37	36	—	—	—	—
Markham	112	1	101	1	78	—	—	—	—
Meaford	40	1	33	1	45	—	—	—	—
Midland	1	30	124	120	1	—	—	—	—
Milton	1	99	60	96	108	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	79	52	85	87	85	—	—	—	—
Napanee	45	51	1	109	1	—	—	—	—
Navan	46	—	—	—	—	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	38	37	33	40	92	—	—	—	—
Niagara Falls	68	55	54	1	69	—	—	—	—
North Bay	103	78	1	77	54	—	—	—	—
North York	80	86	93	110	90	—	—	—	—
Oakville	58	96	1	112	95	—	—	—	—
Orangeville	106	1	114	44	1	—	—	—	—
Orillia	55	47	92	115	90	—	—	—	—
Oshawa	61	76	31	81	102	—	—	—	—
Ottawa	74	73	68	74	67	—	—	—	—
Owen Sound	1	36	50	1	49	—	—	—	—
Paris	1	40	1	1	1	—	—	—	—
Parry Sound	40	103	76	1	60	—	—	—	—
Pembroke	99	50	96	98	1	—	—	—	—
Penetanguishene	48	1	116	114	1	—	—	—	—
Perth	1	1	40	66	58	—	—	—	—
Petawawa	—	1	—	48	—	—	—	—	—
Peterborough	93	107	82	90	117	—	—	—	—
Pickering	122	108	118	106	89	—	—	—	—
Port Colborne	92	49	55	55	1	—	—	—	—
Port Hope	109	101	112	1	115	—	—	—	—
Port Perry	115	58	1	117	126	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	57	37	82	—	—	—	—
Renfrew	1	61	45	128	1	—	—	—	—
Richmond Hill	121	120	79	108	122	—	—	—	—
Rockland	52	63	1	1	1	—	—	—	—
Russell	—	31	—	65	—	—	—	—	—
Sarnia	62	1	90	97	101	—	—	—	—
Sault Ste. Marie	69	1	66	1	1	—	—	—	—
Scarborough	83	91	95	85	63	—	—	—	—
Simcoe	97	124	123	127	121	—	—	—	—
Sioux Lookout	—	—	1	—	1	—	—	—	—
Smiths Falls	32	46	1	41	51	—	—	—	—
St. Catharine	78	90	81	71	104	—	—	—	—
St. Mary's	1	79	1	1	1	—	—	—	—
St. Thomas	80	84	97	103	84	—	—	—	—
Stouffville	58	40	110	36	1	—	—	—	—
Stratford	1	1	1	100	41	—	—	—	—
Strathroy	42	1	108	70	49	—	—	—	—
Sturgeon	—	—	—	—	1	—	—	—	—
Sudbury	76	55	83	37	62	—	—	—	—
Thornhill	107	97	98	94	71	—	—	—	—
Thunder Bay	84	74	62	83	1	—	—	—	—
Tillsonburg	32	43	122	1	35	—	—	—	—
Timmins	35	40	106	123	41	—	—	—	—
Toronto	90	81	86	79	72	—	—	—	—
Trenton	1	105	1	1	125	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Incidental Appendectomy among the Elderly: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	51	1	1	1	123	—	—	—	—
Val Caron	1	—	1	1	1	—	—	—	—
Wallaceburg	57	1	102	63	1	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	32	70	40	1	1	—	—	—	—
Weston	67	71	42	1	80	—	—	—	—
Whitby	86	38	1	88	95	—	—	—	—
Willowdale	74	94	84	80	63	—	—	—	—
Windsor	95	83	73	99	98	—	—	—	—
Woodbridge	1	88	1	90	83	—	—	—	—
Woodstock	87	109	103	49	56	—	—	—	—
Rural	85	87	87	93	94	—	—	—	—
Other	104	52	65	68	61	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	115	—	—	23	64	—	—	—	—
Ajax	75	52	27	1	91	—	—	—	—
Alliston	104	34	84	77	80	—	—	—	—
Amherstburg	32	1	81	97	1	—	—	—	—
Arnprior	80	53	57	41	30	—	—	—	—
Aurora	94	99	35	27	66	—	—	—	—
Aylmer West	101	81	1	1	110	—	—	—	—
Barrie	109	66	91	98	97	—	—	—	—
Belleville	36	63	45	96	55	—	—	—	—
Bolton	91	89	—	21	1	—	—	—	—
Bowmanville	85	71	95	101	48	—	—	—	—
Bracebridge	44	80	108	20	92	—	—	—	—
Bradford	11	106	20	37	1	—	—	—	—
Brampton	54	45	82	61	88	—	—	—	—
Brantford	56	93	72	67	72	—	—	—	—
Brockville	53	76	58	52	77	—	—	—	—
Burlington	67	46	55	69	45	—	—	—	—
Caledon	—	—	—	—	—	—	—	—	—
Caledonia	70	96	77	87	47	—	—	—	—
Cambridge	35	70	48	75	70	—	—	—	—
Carleton Place	49	1	32	24	1	—	—	—	—
Chatham	18	94	62	81	56	—	—	—	—
Cobourg	52	51	34	92	105	—	—	—	—
Collingwood	93	38	107	118	41	—	—	—	—
Concord	21	111	—	30	117	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	38	56	30	48	37	—	—	—	—
Cumberland	27	—	109	—	59	—	—	—	—
Delhi	112	1	1	115	1	—	—	—	—
Downsview	73	77	70	93	109	—	—	—	—
Dryden	107	—	—	—	—	—	—	—	—
Dunnville	1	97	17	53	95	—	—	—	—
East Gwillimbury	20	55	1	74	1	—	—	—	—
Elliot Lake	—	—	—	—	—	—	—	—	—
Elmira	—	—	—	—	—	—	—	—	—
Espanola	—	—	—	—	—	—	—	—	—
Essex	—	1	1	1	1	—	—	—	—
Etobicoke	68	61	51	59	65	—	—	—	—
Fergus	99	95	—	58	1	—	—	—	—
Fort Erie	92	109	39	35	61	—	—	—	—
Fort Frances	10	—	—	—	—	—	—	—	—
Gananoque	56	49	1	1	52	—	—	—	—
Garson	—	—	—	—	—	—	—	—	—
Georgetown	22	69	80	57	46	—	—	—	—
Goderich	89	75	31	1	1	—	—	—	—
Gravenhurst	111	101	19	50	1	—	—	—	—
Greely	28	40	—	63	76	—	—	—	—
Grimsby	59	17	23	47	60	—	—	—	—
Guelph	50	62	54	65	83	—	—	—	—
Hamilton	34	42	46	46	40	—	—	—	—
Hanmer	—	—	—	—	—	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	6	1	37	36	107	—	—	—	—
Hawkesbury	47	33	59	84	44	—	—	—	—
Huntsville	103	20	105	64	112	—	—	—	—
Ingersoll	1	1	1	79	111	—	—	—	—
Innisfil	—	—	—	1	—	—	—	—	—
Kapuskasing	—	—	—	—	—	—	—	—	—
Kenora	—	—	—	—	—	—	—	—	—
Keswick	11	28	104	1	99	—	—	—	—
Kincardine	116	—	99	26	104	—	—	—	—
King City	102	107	—	117	118	—	—	—	—
Kingston	51	41	47	89	63	—	—	—	—
Kingsville	88	—	—	107	1	—	—	—	—
Kirkland Lake	—	—	—	—	—	—	—	—	—
Kitchener	61	100	66	76	85	—	—	—	—
Leamington	117	110	24	1	79	—	—	—	—
Lindsay	63	64	79	111	102	—	—	—	—
Listowel	13	1	86	39	1	—	—	—	—
Lively	—	—	—	—	—	—	—	—	—
London	26	1	43	31	33	—	—	—	—
Manotick	40	23	29	86	37	—	—	—	—
Maple	24	113	92	109	116	—	—	—	—
Markham	64	68	42	83	87	—	—	—	—
Meaford	8	1	—	102	1	—	—	—	—
Midland	84	50	103	43	1	—	—	—	—
Milton	113	88	1	38	101	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	55	57	40	40	43	—	—	—	—
Napanee	114	27	28	90	93	—	—	—	—
Navan	—	—	67	—	73	—	—	—	—
New Hamburg	—	—	—	—	—	—	—	—	—
Newmarket	110	103	1	1	54	—	—	—	—
Niagara Falls	71	86	78	91	96	—	—	—	—
North Bay	23	39	1	1	36	—	—	—	—
North York	65	44	44	73	74	—	—	—	—
Oakville	87	91	38	72	84	—	—	—	—
Orangeville	14	98	98	105	77	—	—	—	—
Orillia	96	87	85	62	98	—	—	—	—
Oshawa	74	82	97	100	103	—	—	—	—
Ottawa	31	48	41	55	49	—	—	—	—
Owen Sound	106	21	25	29	108	—	—	—	—
Paris	7	1	1	68	1	—	—	—	—
Parry Sound	—	—	—	107	—	—	—	—	—
Pembroke	16	74	75	44	81	—	—	—	—
Penetanguishene	97	104	106	113	51	—	—	—	—
Perth	30	24	76	70	71	—	—	—	—
Petawawa	72	32	36	45	50	—	—	—	—
Peterborough	48	54	64	94	69	—	—	—	—
Pickering	77	65	21	1	1	—	—	—	—
Port Colborne	15	25	26	28	42	—	—	—	—
Port Hope	37	112	56	110	34	—	—	—	—
Port Perry	100	29	90	1	1	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	19	43	63	32	32	—	—	—	—
Richmond Hill	95	105	89	104	114	—	—	—	—
Rockland	29	36	100	51	74	—	—	—	—
Russell	—	59	—	54	68	—	—	—	—
Sarnia	42	19	61	25	57	—	—	—	—
Sault Ste. Marie	1	1	1	1	1	—	—	—	—
Scarborough	33	35	1	1	1	—	—	—	—
Simcoe	62	26	50	56	31	—	—	—	—
Sioux Lookout	—	—	—	—	—	—	—	—	—
Smiths Falls	45	83	68	1	1	—	—	—	—
St. Catharine	83	78	74	80	90	—	—	—	—
St. Mary's	1	1	101	34	1	—	—	—	—
St. Thomas	46	31	82	71	89	—	—	—	—
Stouffville	9	30	18	22	39	—	—	—	—
Stratford	108	83	1	85	115	—	—	—	—
Strathroy	79	21	73	114	35	—	—	—	—
Sturgeon	—	—	—	—	—	—	—	—	—
Sudbury	105	1	71	1	1	—	—	—	—
Thornhill	69	90	96	116	113	—	—	—	—
Thunder Bay	24	1	1	1	1	—	—	—	—
Tillsonburg	43	1	1	1	1	—	—	—	—
Timmins	39	47	102	33	1	—	—	—	—
Toronto	60	58	69	99	94	—	—	—	—
Trenton	98	67	52	103	58	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Bilateral Cardiac Catheterization: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	17	108	93	95	1	—	—	—	—
Val Caron	—	—	—	—	—	—	—	—	—
Wallaceburg	1	1	49	106	29	—	—	—	—
Wasaga Beach	—	—	—	—	—	—	—	—	—
Welland	41	79	65	66	61	—	—	—	—
Weston	89	60	22	112	86	—	—	—	—
Whitby	81	92	88	88	106	—	—	—	—
Willowdale	78	85	87	78	82	—	—	—	—
Windsor	86	102	33	48	1	—	—	—	—
Woodbridge	82	73	94	42	100	—	—	—	—
Woodstock	76	18	1	1	1	—	—	—	—
Rural	56	72	60	82	66	—	—	—	—
Other	66	36	53	60	53	—	—	—	—

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	93	33	100	54
Ajax	—	—	—	—	—	75	106	99	96
Alliston	—	—	—	—	—	115	16	83	130
Amherstburg	—	—	—	—	—	123	80	117	49
Arnprior	—	—	—	—	—	73	107	116	17
Aurora	—	—	—	—	—	12	42	46	23
Aylmer West	—	—	—	—	—	14	15	14	7
Barrie	—	—	—	—	—	25	86	66	66
Belleville	—	—	—	—	—	61	94	71	77
Bolton	—	—	—	—	—	69	73	112	32
Bowmanville	—	—	—	—	—	109	111	123	120
Bracebridge	—	—	—	—	—	137	132	132	132
Bradford	—	—	—	—	—	15	72	90	67
Brampton	—	—	—	—	—	78	88	75	61
Brantford	—	—	—	—	—	36	24	62	24
Brockville	—	—	—	—	—	124	102	79	116
Burlington	—	—	—	—	—	80	61	42	65
Caledon	—	—	—	—	—	2	1	137	11
Caledonia	—	—	—	—	—	42	37	20	70
Cambridge	—	—	—	—	—	58	58	37	60
Carleton Place	—	—	—	—	—	98	101	47	104
Chatham	—	—	—	—	—	10	31	42	48
Cobourg	—	—	—	—	—	51	125	84	106
Collingwood	—	—	—	—	—	7	84	106	8
Concord	—	—	—	—	—	106	78	49	56

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	88	85	97	87
Cumberland	—	—	—	—	—	19	60	127	1
Delhi	—	—	—	—	—	122	124	16	9
Downsview	—	—	—	—	—	79	92	61	89
Dryden	—	—	—	—	—	104	18	115	86
Dunnville	—	—	—	—	—	119	40	119	71
East Gwillimbury	—	—	—	—	—	45	6	2	2
Elliot Lake	—	—	—	—	—	134	137	136	138
Elmira	—	—	—	—	—	13	51	59	25
Espanola	—	—	—	—	—	132	32	6	92
Essex	—	—	—	—	—	62	46	8	3
Etobicoke	—	—	—	—	—	40	55	48	47
Fergus	—	—	—	—	—	27	57	102	91
Fort Erie	—	—	—	—	—	26	8	44	136
Fort Frances	—	—	—	—	—	102	134	133	134
Gananoque	—	—	—	—	—	23	71	26	123
Garson	—	—	—	—	—	128	138	125	118
Georgetown	—	—	—	—	—	40	26	24	21
Goderich	—	—	—	—	—	97	20	22	16
Gravenhurst	—	—	—	—	—	64	133	131	133
Greely	—	—	—	—	—	114	10	108	117
Grimsby	—	—	—	—	—	76	126	81	75
Guelph	—	—	—	—	—	57	76	76	41
Hamilton	—	—	—	—	—	59	29	63	72
Hanmer	—	—	—	—	—	53	35	85	97

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	130	3	74	119
Hawkesbury	—	—	—	—	—	34	12	12	26
Huntsville	—	—	—	—	—	127	122	129	137
Ingersoll	—	—	—	—	—	49	7	50	85
Innisfil	—	—	—	—	—	91	90	77	73
Kapuskasing	—	—	—	—	—	131	135	126	124
Kenora	—	—	—	—	—	8	59	107	84
Keswick	—	—	—	—	—	48	36	40	6
Kincardine	—	—	—	—	—	94	87	120	20
King City	—	—	—	—	—	105	14	11	99
Kingston	—	—	—	—	—	81	52	52	45
Kingsville	—	—	—	—	—	103	95	15	90
Kirkland Lake	—	—	—	—	—	126	131	138	100
Kitchener	—	—	—	—	—	72	89	88	94
Leamington	—	—	—	—	—	111	47	101	101
Lindsay	—	—	—	—	—	112	75	109	114
Listowel	—	—	—	—	—	55	112	59	83
Lively	—	—	—	—	—	44	2	70	39
London	—	—	—	—	—	30	25	34	33
Manotick	—	—	—	—	—	5	63	3	36
Maple	—	—	—	—	—	28	38	54	81
Markham	—	—	—	—	—	47	34	19	43
Meaford	—	—	—	—	—	56	20	1	19
Midland	—	—	—	—	—	133	117	114	127
Milton	—	—	—	—	—	88	30	29	40

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	21	19	18	15
Napanee	—	—	—	—	—	83	108	105	103
Navan	—	—	—	—	—	96	9	95	35
New Hamburg	—	—	—	—	—	84	97	36	102
Newmarket	—	—	—	—	—	11	22	27	37
Niagara Falls	—	—	—	—	—	6	74	57	51
North Bay	—	—	—	—	—	117	105	121	109
North York	—	—	—	—	—	95	47	50	63
Oakville	—	—	—	—	—	16	41	21	22
Orangeville	—	—	—	—	—	99	118	124	93
Orillia	—	—	—	—	—	90	104	104	112
Oshawa	—	—	—	—	—	117	115	110	113
Ottawa	—	—	—	—	—	50	45	58	52
Owen Sound	—	—	—	—	—	20	121	122	82
Paris	—	—	—	—	—	4	13	78	38
Parry Sound	—	—	—	—	—	100	120	130	131
Pembroke	—	—	—	—	—	70	100	80	30
Penetanguishene	—	—	—	—	—	116	93	103	129
Perth	—	—	—	—	—	45	23	98	62
Petawawa	—	—	—	—	—	54	116	32	27
Peterborough	—	—	—	—	—	17	82	86	115
Pickering	—	—	—	—	—	39	83	96	110
Port Colborne	—	—	—	—	—	108	114	128	128
Port Hope	—	—	—	—	—	129	128	17	50
Port Perry	—	—	—	—	—	37	119	72	64

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	136	4	135	121
Renfrew	—	—	—	—	—	43	123	111	10
Richmond Hill	—	—	—	—	—	67	49	45	29
Rockland	—	—	—	—	—	29	110	9	107
Russell	—	—	—	—	—	1	56	4	46
Sarnia	—	—	—	—	—	24	69	38	28
Sault Ste. Marie	—	—	—	—	—	110	96	82	88
Scarborough	—	—	—	—	—	68	65	69	53
Simcoe	—	—	—	—	—	125	67	39	95
Sioux Lookout	—	—	—	—	—	121	129	134	105
Smiths Falls	—	—	—	—	—	76	64	73	126
St. Catharine	—	—	—	—	—	33	67	64	55
St. Mary's	—	—	—	—	—	107	43	89	108
St. Thomas	—	—	—	—	—	31	43	10	14
Stouffville	—	—	—	—	—	3	5	30	5
Stratford	—	—	—	—	—	113	136	93	79
Strathroy	—	—	—	—	—	87	99	94	98
Sturgeon	—	—	—	—	—	135	130	113	135
Sudbury	—	—	—	—	—	85	50	35	31
Thornhill	—	—	—	—	—	52	77	31	42
Thunder Bay	—	—	—	—	—	22	27	13	12
Tillsonburg	—	—	—	—	—	9	61	25	4
Timmins	—	—	—	—	—	101	113	87	122
Toronto	—	—	—	—	—	86	79	68	76
Trenton	—	—	—	—	—	35	98	28	78

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Primary Cesarean Delivery: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	66	28	7	18
Val Caron	—	—	—	—	—	60	11	54	34
Wallaceburg	—	—	—	—	—	18	17	23	13
Wasaga Beach	—	—	—	—	—	—	127	5	80
Welland	—	—	—	—	—	120	91	118	125
Weston	—	—	—	—	—	65	39	65	69
Whitby	—	—	—	—	—	91	109	91	111
Willowdale	—	—	—	—	—	82	103	92	59
Windsor	—	—	—	—	—	70	81	56	68
Woodbridge	—	—	—	—	—	38	65	41	74
Woodstock	—	—	—	—	—	74	53	52	44
Rural	—	—	—	—	—	63	69	66	58
Other	—	—	—	—	—	32	54	33	57

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Acton	—	—	—	—	—	121	91	15	116
Ajax	—	—	—	—	—	51	92	86	102
Alliston	—	—	—	—	—	86	49	14	81
Amherstburg	—	—	—	—	—	53	9	32	106
Arnprior	—	—	—	—	—	119	107	125	104
Aurora	—	—	—	—	—	109	32	77	53
Aylmer West	—	—	—	—	—	106	5	49	14
Barrie	—	—	—	—	—	82	97	94	88
Belleville	—	—	—	—	—	78	98	112	83
Bolton	—	—	—	—	—	50	40	39	95
Bowmanville	—	—	—	—	—	77	31	84	73
Bracebridge	—	—	—	—	—	99	120	123	117
Bradford	—	—	—	—	—	54	111	57	19
Brampton	—	—	—	—	—	89	85	75	84
Brantford	—	—	—	—	—	33	23	26	30
Brockville	—	—	—	—	—	88	67	113	108
Burlington	—	—	—	—	—	65	29	61	56
Caledon	—	—	—	—	—	12	—	—	76
Caledonia	—	—	—	—	—	10	17	6	97
Cambridge	—	—	—	—	—	21	55	28	27
Carleton Place	—	—	—	—	—	47	86	73	79
Chatham	—	—	—	—	—	29	16	31	35
Cobourg	—	—	—	—	—	30	50	87	100
Collingwood	—	—	—	—	—	91	56	34	17
Concord	—	—	—	—	—	101	48	27	121

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Cornwall	—	—	—	—	—	98	115	85	99
Cumberland	—	—	—	—	—	45	14	—	66
Delhi	—	—	—	—	—	15	7	17	123
Downsview	—	—	—	—	—	97	60	60	82
Dryden	—	—	—	—	—	100	71	9	123
Dunnville	—	—	—	—	—	117	120	102	107
East Gwillimbury	—	—	—	—	—	106	125	120	65
Elliot Lake	—	—	—	—	—	57	—	—	50
Elmira	—	—	—	—	—	48	64	107	20
Espanola	—	—	—	—	—	18	57	4	—
Essex	—	—	—	—	—	56	51	125	70
Etobicoke	—	—	—	—	—	67	63	46	51
Fergus	—	—	—	—	—	31	94	18	26
Fort Erie	—	—	—	—	—	96	117	101	4
Fort Frances	—	—	—	—	—	125	46	110	37
Gananoque	—	—	—	—	—	17	20	—	61
Garson	—	—	—	—	—	128	45	29	39
Georgetown	—	—	—	—	—	73	119	95	92
Goderich	—	—	—	—	—	114	15	19	123
Gravenhurst	—	—	—	—	—	110	129	125	123
Greely	—	—	—	—	—	60	11	37	77
Grimsby	—	—	—	—	—	70	112	73	29
Guelph	—	—	—	—	—	37	21	33	62
Hamilton	—	—	—	—	—	45	37	36	42
Hanmer	—	—	—	—	—	128	18	115	9

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Hanover	—	—	—	—	—	79	8	124	6
Hawkesbury	—	—	—	—	—	3	127	2	5
Huntsville	—	—	—	—	—	80	129	80	123
Ingersoll	—	—	—	—	—	22	10	13	16
Innisfil	—	—	—	—	—	122	74	38	111
Kapuskasing	—	—	—	—	—	124	129	125	123
Kenora	—	—	—	—	—	20	78	44	3
Keswick	—	—	—	—	—	24	60	108	44
Kincardine	—	—	—	—	—	51	2	7	47
King City	—	—	—	—	—	82	—	—	91
Kingston	—	—	—	—	—	19	36	11	58
Kingsville	—	—	—	—	—	92	73	98	98
Kirkland Lake	—	—	—	—	—	128	4	41	123
Kitchener	—	—	—	—	—	28	62	40	68
Leamington	—	—	—	—	—	103	79	66	48
Lindsay	—	—	—	—	—	113	96	118	49
Listowel	—	—	—	—	—	11	65	106	11
Lively	—	—	—	—	—	128	101	78	—
London	—	—	—	—	—	5	6	8	8
Manotick	—	—	—	—	—	—	24	90	63
Maple	—	—	—	—	—	75	80	72	115
Markham	—	—	—	—	—	38	52	67	40
Meaford	—	—	—	—	—	39	—	—	123
Midland	—	—	—	—	—	68	109	117	80
Milton	—	—	—	—	—	102	68	71	96

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Mississauga	—	—	—	—	—	44	54	55	57
Napanee	—	—	—	—	—	123	47	97	67
Navan	—	—	—	—	—	16	30	69	—
New Hamburg	—	—	—	—	—	—	93	10	18
Newmarket	—	—	—	—	—	9	42	68	54
Niagara Falls	—	—	—	—	—	105	33	21	22
North Bay	—	—	—	—	—	84	114	51	85
North York	—	—	—	—	—	74	38	65	45
Oakville	—	—	—	—	—	59	100	82	109
Orangeville	—	—	—	—	—	118	116	103	113
Orillia	—	—	—	—	—	111	122	119	120
Oshawa	—	—	—	—	—	90	105	89	87
Ottawa	—	—	—	—	—	43	53	63	55
Owen Sound	—	—	—	—	—	115	41	52	15
Paris	—	—	—	—	—	2	27	3	93
Parry Sound	—	—	—	—	—	95	126	121	123
Pembroke	—	—	—	—	—	81	28	104	103
Penetanguishene	—	—	—	—	—	128	128	114	123
Perth	—	—	—	—	—	108	81	122	71
Petawawa	—	—	—	—	—	116	99	22	34
Peterborough	—	—	—	—	—	61	90	105	112
Pickering	—	—	—	—	—	64	66	46	52
Port Colborne	—	—	—	—	—	128	118	42	123
Port Hope	—	—	—	—	—	55	70	125	38
Port Perry	—	—	—	—	—	112	95	111	123

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Port Stanley	—	—	—	—	—	—	—	—	—
Renfrew	—	—	—	—	—	104	76	125	119
Richmond Hill	—	—	—	—	—	72	82	76	89
Rockland	—	—	—	—	—	62	22	96	110
Russell	—	—	—	—	—	1	19	5	46
Sarnia	—	—	—	—	—	4	69	23	12
Sault Ste. Marie	—	—	—	—	—	40	106	48	75
Scarborough	—	—	—	—	—	35	43	50	31
Simcoe	—	—	—	—	—	42	25	88	13
Sioux Lookout	—	—	—	—	—	14	104	20	64
Smiths Falls	—	—	—	—	—	126	129	99	118
St. Catharine	—	—	—	—	—	36	75	56	78
St. Mary's	—	—	—	—	—	85	1	16	7
St. Thomas	—	—	—	—	—	8	35	30	23
Stouffville	—	—	—	—	—	63	89	24	21
Stratford	—	—	—	—	—	58	110	109	60
Strathroy	—	—	—	—	—	6	12	81	122
Sturgeon	—	—	—	—	—	93	34	125	69
Sudbury	—	—	—	—	—	71	44	59	41
Thornhill	—	—	—	—	—	94	77	70	72
Thunder Bay	—	—	—	—	—	25	3	12	10
Tillsonburg	—	—	—	—	—	32	83	43	2
Timmins	—	—	—	—	—	127	123	116	101
Toronto	—	—	—	—	—	41	72	64	59
Trenton	—	—	—	—	—	13	84	92	105

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)

Vaginal Birth after Cesarean Section (VBAC), All: Rank by Institution

Municipality	1997– 1998	1998– 1999	1999– 2000	2000– 2001	2001– 2002	2002– 2003	2003– 2004	2004– 2005	2005– 2006
Uxbridge	—	—	—	—	—	26	108	100	114
Val Caron	—	—	—	—	—	128	124	78	24
Wallaceburg	—	—	—	—	—	7	13	54	32
Wasaga Beach	—	—	—	—	—	—	—	1	1
Welland	—	—	—	—	—	120	102	91	33
Weston	—	—	—	—	—	76	59	53	74
Whitby	—	—	—	—	—	66	113	83	90
Willowdale	—	—	—	—	—	69	88	58	86
Windsor	—	—	—	—	—	34	26	45	28
Woodbridge	—	—	—	—	—	87	103	93	94
Woodstock	—	—	—	—	—	23	87	25	25
Rural	—	—	—	—	—	49	58	62	43
Other	—	—	—	—	—	27	39	35	36

Note: It is not possible to compare data from 1997-2001 with data from 2002-2004 because of the change in coding classification from ICD9CCP to ICD10CA in FY2002

“—” indicates either no data were available for that facility for that year, that the institution did not exist in that year, or that the data were censored to protect patient confidentiality (when the denominator for a given indicator < 5)