

## Appendix 1 – Supplementary tables

### 1 - Outcomes by call type

Call Type	Number of included calls	Number of ED visits	Percent resulting in ED visit (95% CI)	Common diagnosis groups
<b>CDSS not used</b>	329	87	26.4 (21.9-31.3)	Injury (9), Malaise (8), Chest pain (7)
<b>General Adult</b>	102	27	26.5 (17.6-35.3)	Psychiatric (5), Abdominal pain/bleed (4), Substance abuse (3)
<b>General Elderly</b>	86	31	36 (25.6-46.5)	Infection (4), Injury (4), Urinary tract issue (2)
<b>Multiple</b>	60	12	20 (10-30)	Dizziness (2), Fainting (2), Malaise (1)
<b>Abdominal/flank pain</b>	57	14	24.6 (14-36.8)	Abdominal pain/bleed (9), Missing (2), Infection (1)
<b>Psychiatric problems</b>	54	14	25.9 (14.8-37)	Psychiatric (5), Substance abuse (2), Injury (2)
<b>Difficulty Breathing</b>	46	4	8.7 (2.2-17.4)	Breathing issue (2), Malaise (1), Missing (1)
<b>Dizziness</b>	31	8	25.8 (9.8-41.9)	Dizziness (3), Arrhythmia (1), Injury (1)
<b>Chest pain</b>	28	7	25 (10.7-42.9)	Chest pain (4), Infection (1), Inflammation (1)
<b>Fainting</b>	26	8	30.8 (15.4-46.2)	Fainting (5), Dizziness (1), Medical complications (1)
<b>Arm/leg sympoms (non-traumatic)</b>	24	5	20.8 (4.2-37.5)	Malaise (1), Injury (1), Pain (1)
<b>Trauma</b>	24	4	16.7 (4.2-33.3)	Injury (2), Urinary tract issue (1)

This table presents each of the call types documented at the dispatch center with more than 20 occurrences. The number of calls, the number of ED visits associated with the call type, and the proportion of patients with an ED visit (along with the bootstrapped 95% confidence interval) is presented. For each call type, the three most common diagnosis categories are provided (based on the authors grouping of free-text notes about the diagnosis)

## 2 - Outcomes by disposition

Disposition	Number of included calls	Number of ED visits	Percent resulting in ED visit (95% CI)
<b>Closed pending re-contact</b>	519	103	19.8 (16.6-23.2)
<b>Mobile geriatric team</b>	8	1	12.5 (0-37.5)
<b>Other referral</b>	155	40	25.8 (20-32.9)
<b>Referral to advice line</b>	334	97	29 (24.4-33.5)
<b>Referral to ambulette</b>	42	13	31 (16.7-47.6)
<b>Referral to other transport</b>	18	4	22.2 (5.6-44.4)
<b>Referral to poison control</b>	13	0	0

This table presents each of the disposition categories (i.e., either the healthcare service the patient was referred to, or no referral in the case of “Closed pending re-contact”), along with the number of calls and ED visits. The proportion of calls resulting in an ED visit is presented with bootstrapped 95% confidence interval.

## 3 - Disposition corrections

Original Disposition	Correct disposition	Number of records affected
<b>Closed pending re-contact</b>	Referral to other transport	12
<b>Other referral</b>	Referral to other transport	8
<b>Closed pending re-contact</b>	Referral to ambulette	6
<b>Other referral</b>	Referral to ambulette	3
<b>Closed pending re-contact</b>	Ambulance	1
<b>Other referral</b>	Ambulance	1
<b>Other referral</b>	Misdirected Call	1
<b>Other referral</b>	No medical problem	1
<b>Other referral</b>	Other transportation	1
<b>Referral to advice line</b>	Referral to ambulette	1
<b>Referral to other transport</b>	Closed pending re-contact	1

This table presents each of the disposition corrections made upon review of dispatch and hospital records. It may be seen that most commonly, dispatchers mistakenly documented a referral to an ED by alternate means as being “Closed pending re-contact” or an “Other referral”.