

Appendix 1: Literature search strategy for articles about delays in administration of reperfusion therapy for ST-segment elevation myocardial infarction (STEMI) in Canada

The PubMed and MEDLINE databases of clinical medical and nursing journals published in English and French were searched for relevant articles published from Jan. 1, 1990, to May 1, 2006. The following publication types were searched: journal articles, meta-analyses, practice guidelines, reviews and observational studies. We limited our searches to studies involving adults (aged ≥ 18 years).

All of the publications' fields (titles, authors, abstract, text, MeSH) were searched for the following key words:

- "myocardial infarction" or "acute myocardial infarction" or "acute coronary syndromes" *and*
- "reperfusion therapy" or "percutaneous coronary angioplasty" or "percutaneous coronary intervention" or "stent" or "fibrinolytic therapy" or "thrombolysis" or "thrombolytic therapy" or "tissue plasminogen activator" or streptokinase" or "reteplase" or "tenecteplase" *and*
- "registry," "cohort," "cohort study" and "observational study"

The search yielded 49 articles. We examined their titles and abstracts and retained 18 observational studies that provided times to administration of primary percutaneous coronary intervention or fibrinolytic therapy. Of these 18 studies, 4 provided data on delays to reperfusion therapy in Canada. None of these 4 studies examined the impact of increased use of primary PCI on delay to fibrinolytic therapy.