**Myopic:**

* Schedules patients as soon as possible, until all days in planning horizon are filled.
* Starts by scheduling surgeries requiring the least number of resources.
* Schedules lowest priority first.
* Never uses rescheduling

**MDP:**

* Schedules patients as soon as possible, until the first 3 periods in planning are filled.
* Starts by scheduling surgeries requiring the greatest number of resources.
* Schedules higher priority first.
* Uses rescheduling when the capacity is overscheduled in the first 3 days.

**1st Paper (Medical/Clinical):**

1 page description of MDP

Half a page description of what the model actually does, including maybe parts of the formulas to represent some real – world constraints

Explain the logic of the model itself

Explain if it performs better or not

This needs to have “clinical flavor”

- Page limit

- Specific Structure

- Find out if the journal ever published something similar

There are a few spine journals, but also maybe orthopedic journal

* Spine may be more unique with changing in complexities
* Let’s use spine, because they would have a more understandable characteristics
* One is “Spine” and other is “The Spine Journal” – North America Spine Society “The Spine Journal” – second one is probably better
* Journal of bone and joint surgery (JBJS) – it is more widely read

We need to cast it as something that would be beneficial for the patients rather than minimizing costs

* How to manage waitlist

Review literature to see if there is anything with scheduling / optimization / or waitlist management

Start with model/assumptions/policies in plain terms

I will do some literature search

* To put something about scheduling as references (lit review)

Draft conclusions in point form so that Stephen can spin it to medical journal

Frame the paper to help surgeons manage the paper

**2nd Paper (Technical):**

It is a technical paper, and would have minimal medical stuff