

Article title: Measuring Accessibility to Healthcare Using Taxi Trajectories Data: A Case Study of Acute Myocardial Infarction Cases in Beijing

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Supplementary file 1

Table S1. A summary of the measures of individual-based health care accessibility

Measures	Measurement unit	Required data	Travel impedances considered	Capturing accessibility dynamics over years ^a
Euclidean (straight-line) distance to the nearest health care facility	Meters	Geographic data	Euclidean distance	No
Network distance to the nearest health care facility	Meters	Geographic data and road network data	Network distance	Yes, but partially
Network travel time to the nearest health care facility based on the speed limits across different road types	Minutes	Geographic data, road network data, and speed limit data	Network distance and speed limits	Yes, but partially

Note: ^a Suppose that the locations of residences and health care facilities remain unchanged.

Table S2. The distribution of patients per cell at each

Resolution	No. of grids	No. of grids with cases	No. of grids with 1 case	No. of cased in each grid	
				Mean	Median
100m × 100m	67,190	5,767	3,941	2	1
500m × 500m	1,575	1,553	325	6	4
1,000m × 1,000m	732	579	72	15	10

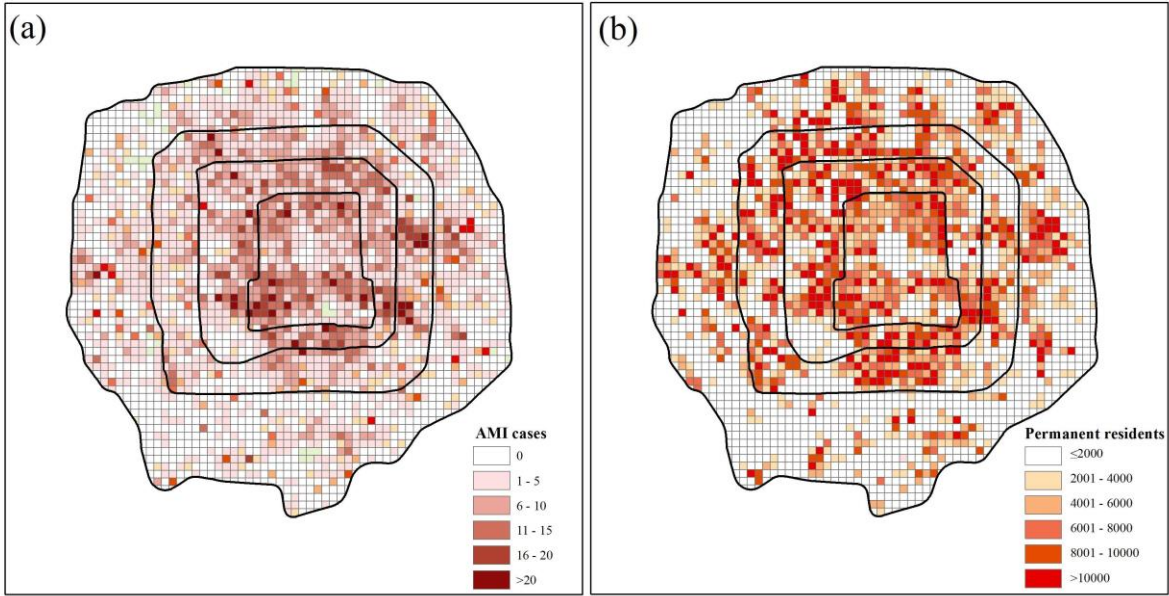


Figure S1. Spatial distributions of AMI cases and permanent residents

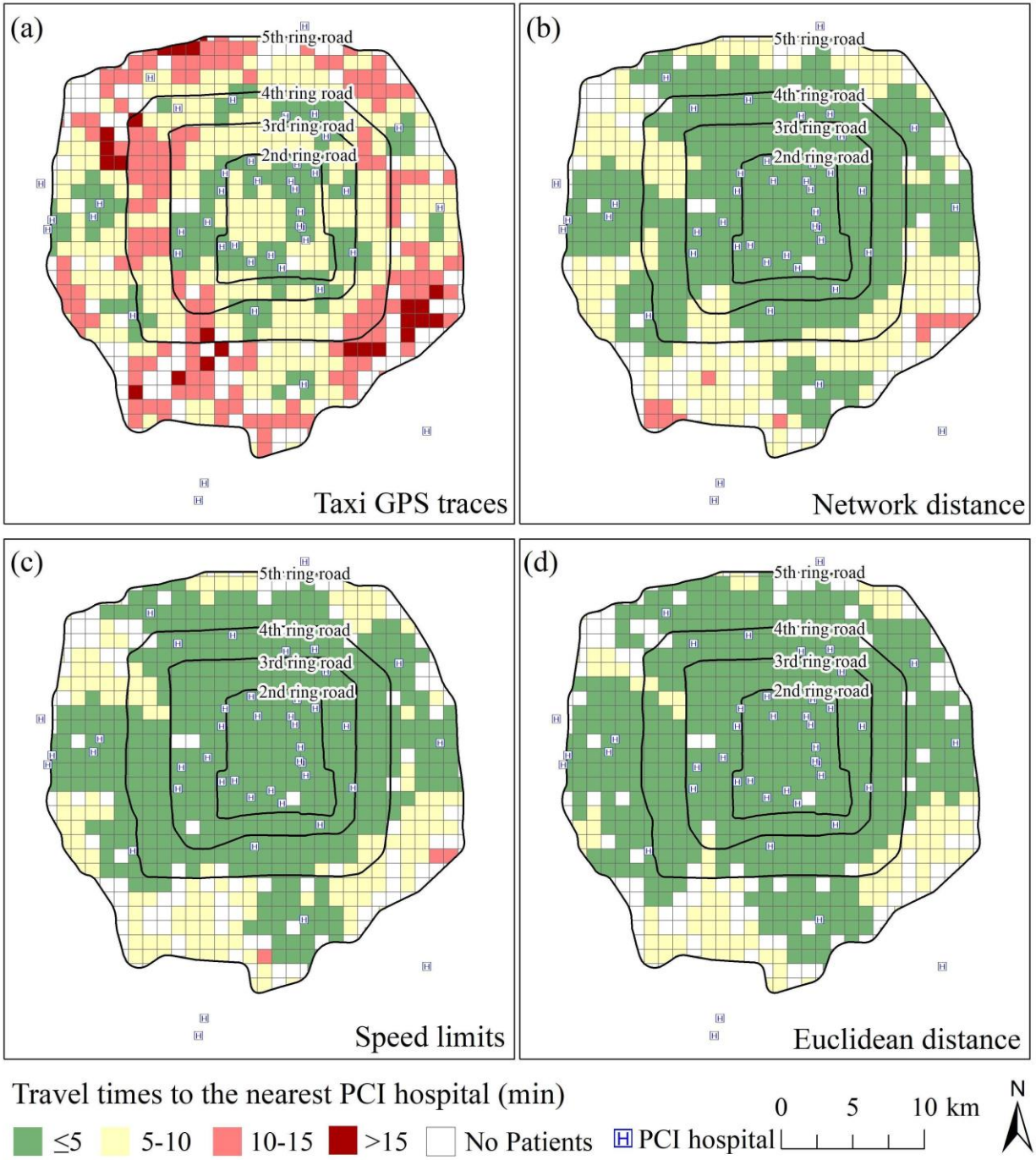


Figure S2. Spatial distributions of the estimated travel times to the nearest PCI-capable hospital for AMI patients in 2008 by different accessibility measures at the spatial resolution of 1,000 m × 1,000 m

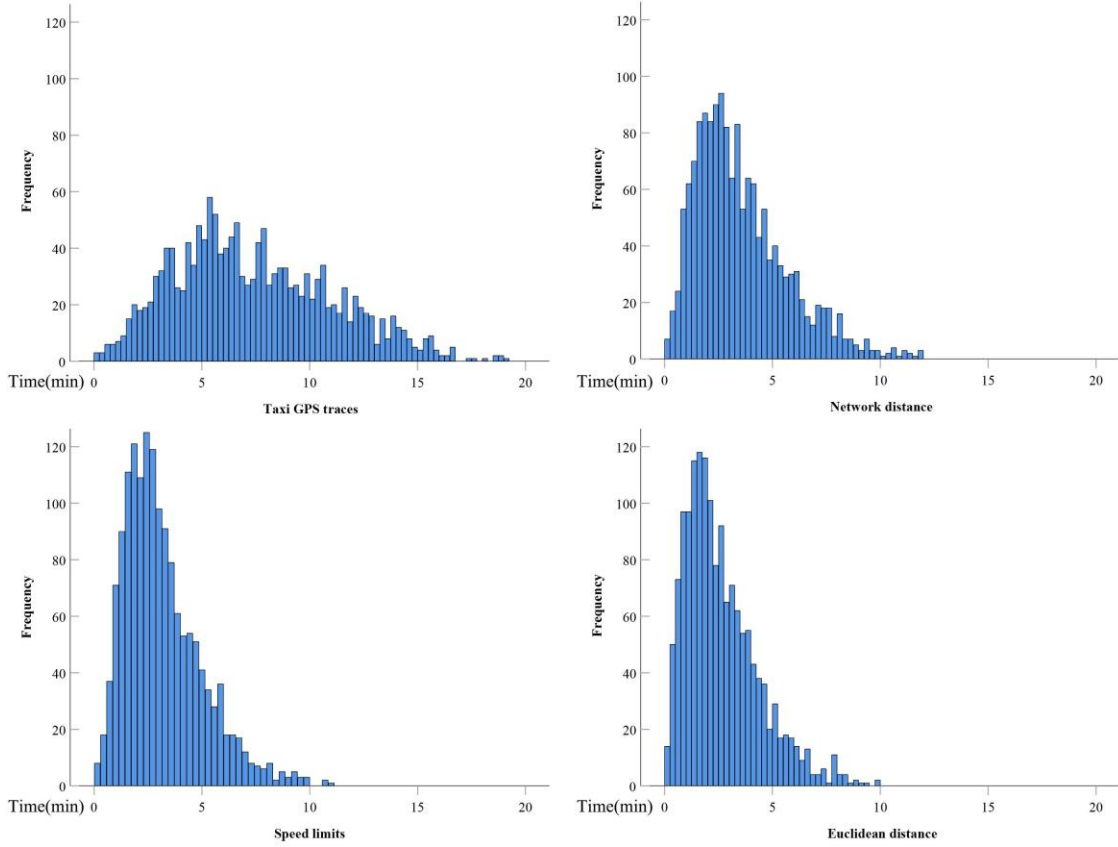


Figure S3. Distributions of estimated travel time by four accessibility measures

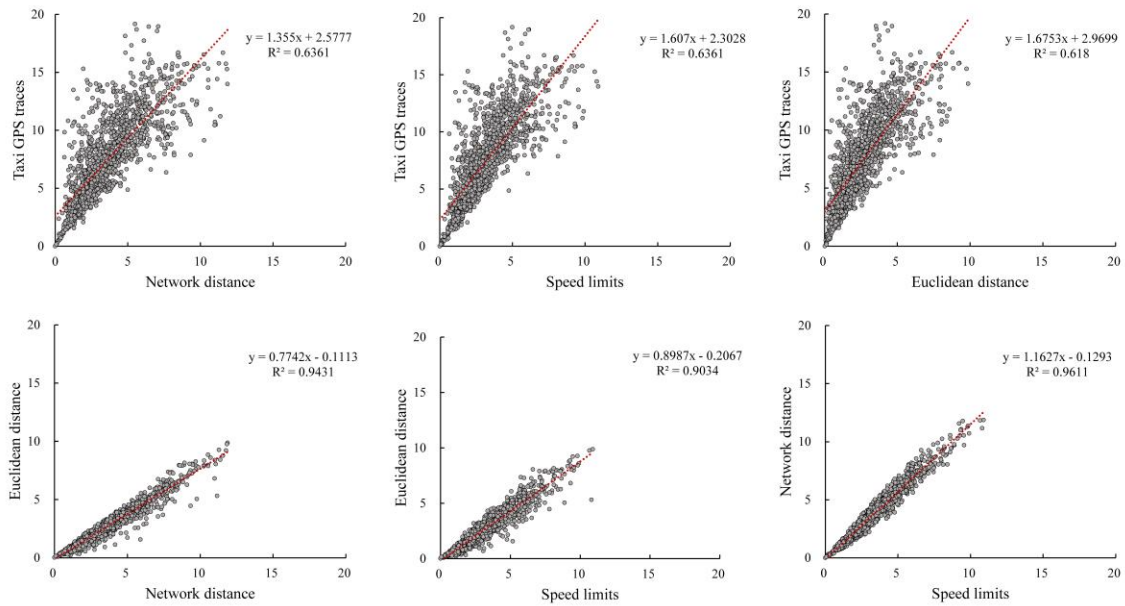


Figure S4: Scatter plot of any two accessibility measures