Steven J Durning

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/106852/publications.pdf

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363 papers 13,475 citations

50 h-index 100 g-index

395 all docs 395 docs citations

times ranked

395

10607 citing authors

#	Article	IF	CITATIONS
1	Dual processing theory and experts $\hat{E}\frac{1}{4}$ reasoning: exploring thinking on national multiple-choice questions. Perspectives on Medical Education, 2022, 4, 168-175.	1.8	31
2	Beyond standard checklist assessment: Question sequence may impact student performance. Perspectives on Medical Education, 2022, 5, 95-102.	1.8	8
3	Context and clinical reasoning: Understanding the medical student perspective. Perspectives on Medical Education, 2022, 7, 256-263.	1.8	25
4	Use of an e‑portfolio mapping tool: connecting experiences, analysis and action by learners. Perspectives on Medical Education, 2022, 8, 197-200.	1.8	9
5	Early identification of struggling learners: using prematriculation and early academic performance data. Perspectives on Medical Education, 2022, 8, 298-304.	1.8	10
6	When will I get my paper back? A replication study of publication timelines for health professions education research. Perspectives on Medical Education, 2022, 9, 139-146.	1.8	14
7	Expanding Opportunities: An Evaluation of Uniformed Services University's Premedical Program for Enlisted Service Members. Military Medicine, 2022, 187, e1225-e1229.	0.4	4
8	Sharing the Bandwidth in Cognitively Overloaded Teams and Systems: Mechanistic Insights from a Walk on the Wild Side of Clinical Reasoning. Teaching and Learning in Medicine, 2022, 34, 215-222.	1.3	4
9	Distributed cognition: a framework for conceptualizing telediagnosis in teams. Diagnosis, 2022, 9, 143-145.	1.2	2
10	Advancing the science of health professions education through a shared understanding of terminology: a content analysis of terms for "facultyâ€. Perspectives on Medical Education, 2022, 11, 22-27.	1.8	9
11	Groupthink among health professional teams in patient care: A scoping review. Medical Teacher, 2022, 44, 309-318.	1.0	12
12	The Need for Listening Leaders. Academic Medicine, 2022, 97, 165-166.	0.8	1
13	The pursuit of fairness in assessment: Looking beyond the objective. Medical Teacher, 2022, 44, 353-359.	1.0	13
14	Advancing the assessment of clinical reasoning across the health professions: Definitional and methodologic recommendations. Perspectives on Medical Education, 2022, 11, 108-104.	1.8	6
15	Extending growth curves: a trajectory monitoring approach to identification and interventions in struggling medical student learners. Advances in Health Sciences Education, 2022, 27, 645-658.	1.7	2
16	Pre-clerkship EPA assessments: a thematic analysis of rater cognition. BMC Medical Education, 2022, 22, 347.	1.0	0
17	Harnessing Followership to Empower Graduate Medical Education Trainees. Journal of Medical Education and Curricular Development, 2022, 9, 238212052210963.	0.7	O
18	Management reasoning scripts: Qualitative exploration using simulated physician-patient encounters. Perspectives on Medical Education, 2022, 11 , $196-206$.	1.8	3

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19	Commentary: A View From the Inside—A Perspective on How the American Board of Internal Medicine (ABIM) Is Innovating in Response to Feedback. Evaluation and the Health Professions, 2021, 44, 312-314.	0.9	0
20	In reply to Cox etÂal. (2020). Medical Teacher, 2021, 43, 1-1.	1.0	2
21	Gathering Validity Evidence on an Internal Medicine Clerkship Multistep Exam to Assess Medical Student Analytic Ability. Teaching and Learning in Medicine, 2021, 33, 28-35.	1.3	3
22	The Association With Physical Fitness and Academic Performance at America's Military Medical School. Military Medicine, 2021, 186, 112-118.	0.4	1
23	Once in the Door, Grit May Matter More: An Evaluation of Grit in Medical Students. Military Medicine, 2021, 186, 13-17.	0.4	5
24	Fairness in human judgement in assessment: a hermeneutic literature review and conceptual framework. Advances in Health Sciences Education, 2021, 26, 713-738.	1.7	20
25	Train for the Game: What Is the Learning Environment of Deployed Navy Emergency Medicine Physicians?. AEM Education and Training, 2021, 5, e10521.	0.6	1
26	Curricular Change and Resiliency in the Era of Coronavirus (COVID-19): The Uniformed Services University of the Health Sciences (USU) Experience. Military Medicine, 2021, 186, 212-218.	0.4	3
27	Do Interviews Influence Admission Decisions? An Empirical Analysis From an Institution. Military Medicine, 2021, 186, 426-436.	0.4	3
28	Piloting the FIRE: A Novel Error Management Training Simulation Curriculum for Fasciotomy Instruction. Journal of Surgical Education, 2021, 78, 655-664.	1.2	5
29	The importance of theory and method: A brief reflection on an innovative program of research examining how situational factors influence physicians' clinical reasoning. FASEB BioAdvances, 2021, 3, 490-496.	1.3	0
30	Delivering patient care during large-scale emergency situations: Lessons from military care providers. PLoS ONE, 2021, 16, e0248286.	1.1	2
31	In Reply to Brown. Academic Medicine, 2021, 96, 614-615.	0.8	0
32	Three learning concepts to improve diagnosis and enhance the practice of medicine. Diagnosis, 2021, .	1.2	2
33	Developing Academic Leadership From a Distance: A Health Professions Education Practicum Course. Academic Medicine, 2021, 96, 854-858.	0.8	1
34	Career Accomplishments of Public Health Service Alumni of the Uniformed Services University of the Health Sciences: Classes of 1980-2017. Military Medicine, 2021, 186, 593-598.	0.4	0
35	Effect of Continuing Professional Development on Health Professionals' Performance and Patient Outcomes: A Scoping Review of Knowledge Syntheses. Academic Medicine, 2021, 96, 913-923.	0.8	41
36	Design and Assessment of a Mobile Health Care Solution for the Military Pediatrician: The DHA Pediatrics App. Military Medicine, 2021, , .	0.4	0

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37	Making it fair: Learners' and assessors' perspectives of the attributes of fair judgement. Medical Education, 2021, 55, 1056-1066.	1.1	6
38	Preparing Adult Learners for Success in Blended Learning through Onboarding: A pilot study. ELearn, 2021, 2021, .	0.1	1
39	Clinical Reasoning Needs to Be Explicitly Addressed in Health Professions Curricula: Recommendations from a European Consortium. International Journal of Environmental Research and Public Health, 2021, 18, 11202.	1.2	14
40	New Insights About Military Interprofessional Healthcare Teams: Lessons Learned and New Directions From a Program of Research. Military Medicine, 2021, 186, 53-56.	0.4	0
41	Military Interprofessional Healthcare Teams: Identifying the Characteristics That Support Success. Military Medicine, 2021, 186, 1-6.	0.4	4
42	Leadership and Followership in Military Interprofessional Health Care Teams. Military Medicine, 2021, 186, 7-15.	0.4	12
43	Perseverance: An Essential Trait of Military Interprofessional Healthcare Teams. Military Medicine, 2021, 186, 29-34.	0.4	6
44	Even a little sleepiness influences neural activation and clinical reasoning in novices. Health Science Reports, 2021, 4, e406.	0.6	0
45	Why is it so difficult to implement a longitudinal clinical reasoning curriculum? A multicenter interview study on the barriers perceived by European health professions educators. BMC Medical Education, 2021, 21, 575.	1.0	13
46	Reimagining Physician Development and Lifelong Learning: An Ecological Framework. Journal of Continuing Education in the Health Professions, 2021, 41, 291-298.	0.4	5
47	Preparing Future Medical Educators: Development and Pilot Evaluation of a Student-Led Medical Education Elective. Military Medicine, 2020, 185, e131-e137.	0.4	12
48	A National Assessment on Patient Safety Curricula in Undergraduate Medical Education: Results From the 2012 Clerkship Directors in Internal Medicine Survey. Journal of Patient Safety, 2020, 16, 14-18.	0.7	8
49	Humans and machines: Moving towards a more symbiotic approach to learning clinical reasoning. Medical Teacher, 2020, 42, 246-251.	1.0	7
50	Five Principles for Using Educational Theory. Academic Medicine, 2020, 95, 518-522.	0.8	15
51	14 Years Later. Academic Medicine, 2020, 95, 629-636.	0.8	8
52	Clinical Reasoning and Diagnostic Error: A Call to Merge Two Worlds to Improve Patient Care. Academic Medicine, 2020, 95, 1159-1161.	0.8	13
53	Scoping reviews in health professions education: challenges, considerations and lessons learned about epistemology and methodology. Advances in Health Sciences Education, 2020, 25, 989-1002.	1.7	51
54	Clinical Reasoning as a Core Competency. Academic Medicine, 2020, 95, 1166-1171.	0.8	36

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55	The Impact of Military Pediatrics: Assessing Clinical, Leadership, Academic, and Operational Experience Among Pediatric-trained Graduates From the Uniformed Services University of the Health Sciences (USU). Military Medicine, 2020, 185, e1584-e1589.	0.4	3
56	What Influences the Decision to Interview a Candidate for Medical School?. Military Medicine, 2020, 185, e1999-e2003.	0.4	5
57	The USMLE Step 1 Examination: Can Pass/Fail Make the Grade?. Academic Medicine, 2020, 95, 1287-1289.	0.8	9
58	Approaches to Clinical Reasoning Assessment. Academic Medicine, 2020, 95, 1285-1285.	0.8	5
59	Academics in Absentia: An Opportunity to Rethink Conferences in the Age of Coronavirus Cancellations. Academic Medicine, 2020, 95, 1834-1837.	0.8	22
60	Transition to online teaching with selfâ€compassion. Clinical Teacher, 2020, 17, 538-540.	0.4	3
61	Innovation Reports: Successes and Limitations for Promoting Innovation in Medical Education. Academic Medicine, 2020, 95, 1647-1651.	0.8	4
62	On the Use and Value of Reporting Guidelines in Health Professions Education Research. Academic Medicine, 2020, 95, 1619-1622.	0.8	4
63	Effects of live and video simulation on clinical reasoning performance and reflection. Advances in Simulation, 2020, 5, 17.	1.0	8
64	Assessing open-book examination in medical education: The time is now. Medical Teacher, 2020, 43, 1-2.	1.0	32
65	Faculty Assessments in a Military Medical Field Practicum: Rater Experience and Gender Do Not Appear to Influence Scoring. Military Medicine, 2020, 185, e358-e363.	0.4	0
66	Assessment of clinical reasoning: three evolutions of thought. Diagnosis, 2020, 7, 191-196.	1.2	10
67	Exploring the Predictors of Post-Clerkship USMLE Step 1 Scores. Teaching and Learning in Medicine, 2020, 32, 330-336.	1.3	11
68	Widening the lens on teaching and assessing clinical reasoning: from "in the head―to "out in the world― Diagnosis, 2020, 7, 181-190.	1.2	14
69	Could application of leader-member exchange theory have saved aÂresidency mentorship program?. Perspectives on Medical Education, 2020, 9, 264-267.	1.8	2
70	Clinical reasoning performance assessment: using situated cognition theory as a conceptual framework. Diagnosis, 2020, 7, 241-249.	1.2	15
71	It Totally Possibly Could Be: How a Group of Military Physicians Reflect on Their Clinical Reasoning in the Presence of Contextual Factors. Military Medicine, 2020, 185, 575-582.	0.4	11
72	It's a matter of trust: exploring the basis of program directors' decisions about whether to trust a resident to care for a loved one. Advances in Health Sciences Education, 2020, 25, 691-709.	1.7	1

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73	Interprofessional Musculoskeletal Education. Rheumatic Disease Clinics of North America, 2020, 46, 135-153.	0.8	2
74	The need for longitudinal clinical reasoning teaching and assessment: Results of an international survey. Medical Teacher, 2020, 42, 457-462.	1.0	28
75	Fundamentals of Anorectal Technical Skills: A Concise Surgical Skills Course. Military Medicine, 2020, 185, e1794-e1802.	0.4	1
76	Mapping clinical reasoning literature across the health professions: a scoping review. BMC Medical Education, 2020, 20, 107.	1.0	58
77	EQual Rubric Evaluation of the Association of American Medical Colleges' Core Entrustable Professional Activities for Entering Residency. Academic Medicine, 2020, 95, 1755-1762.	0.8	20
78	Situativity: a family of social cognitive theories for understanding clinical reasoning and diagnostic error. Diagnosis, 2020, 7, 169-176.	1.2	33
79	The Linguistic Effects of Context Specificity: Exploring Affect, Cognitive Processing, and Agency in Physicians' Think-Aloud Reflections. Diagnosis, 2020, 7, 273-280.	1.2	15
80	A situated cognition model for clinical reasoning performance assessment: a narrative review. Diagnosis, 2020, 7, 227-240.	1.2	10
81	Situated cognition: clinical reasoning and error are context dependent. Diagnosis, 2020, 7, 341-342.	1.2	7
82	Distributed cognition: interactions between individuals and artifacts. Diagnosis, 2020, 7, 343-344.	1.2	5
83	Understanding context specificity: the effect of contextual factors on clinical reasoning. Diagnosis, 2020, 7, 257-264.	1.2	27
84	Examining the patterns of uncertainty across clinical reasoning tasks: effects of contextual factors on the clinical reasoning process. Diagnosis, 2020, 7, 299-305.	1.2	9
85	Teamwork in clinical reasoning – cooperative or parallel play?. Diagnosis, 2020, 7, 307-312.	1.2	25
86	Clinical reasoning in the wild: premature closure during the COVID-19 pandemic. Diagnosis, 2020, 7, 177-179.	1.2	5
87	Understanding the social in diagnosis and error: a family of theories known as situativity to better inform diagnosis and error. Diagnosis, 2020, 7, 161-164.	1.2	7
88	Embodied cognition: knowing in the head is not enough. Diagnosis, 2020, 7, 337-338.	1.2	2
89	Expanding boundaries: a transtheoretical model of clinical reasoning and diagnostic error. Diagnosis, 2020, 7, 333-335.	1.2	4
90	Ecological psychology: diagnosing and treating patients in complex environments. Diagnosis, 2020, 7, 339-340.	1.2	1

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91	Sequence matters: patterns in task-based clinical reasoning. Diagnosis, 2020, 7, 281-289.	1.2	8
92	Challenges in mitigating context specificity in clinical reasoning: a report and reflection. Diagnosis, 2020, 7, 291-297.	1.2	1
93	Innovation Reports: Guidance From the Editors. Academic Medicine, 2020, 95, 1623-1625.	0.8	4
94	Specialty Choices, Practice Characteristics, and Long-term Outcomes of Two Cohorts of USUHS Medical School Graduates Compared with National Data. Military Medicine, 2019, 184, e65-e70.	0.4	1
95	Trust in Group Decisions: a scoping review. BMC Medical Education, 2019, 19, 309.	1.0	7
96	Post-Carnegie II curricular reform: a north American survey of emerging trends & amp; challenges. BMC Medical Education, 2019, 19, 260.	1.0	23
97	The terminology of clinical reasoning in health professions education: Implications and considerations. Medical Teacher, 2019, 41, 1277-1284.	1.0	43
98	Heart Rate and Heart Rate Variability Correlate with Clinical Reasoning Performance and Self-Reported Measures of Cognitive Load. Scientific Reports, 2019, 9, 14668.	1.6	43
99	In Response to RE: Uniformed Services University Women's Enrollment and Career Choices in Military Medicine: A Retrospective Descriptive Analysis. Military Medicine, 2019, 184, 195-195.	0.4	0
100	Ethics approval for health professions education research: are we going too far down the barrel?. Medical Education, 2019, 53, 956-958.	1.1	7
101	Medical Student Leader Performance in an Applied Medical Field Practicum. Military Medicine, 2019, 184, 653-660.	0.4	14
102	Why health professions education needs functional linguistics: the power of â€~stealth words'. Medical Education, 2019, 53, 1187-1195.	1.1	11
103	The Clinical Reasoning Mapping Exercise (CResME): aÂnew tool for exploring clinical reasoning. Perspectives on Medical Education, 2019, 8, 47-51.	1.8	12
104	Uniformed Services University Women's Enrollment and Career Choices in Military Medicine: A Retrospective Descriptive Analysis. Military Medicine, 2019, 184, e158-e163.	0.4	4
105	Decoding Readiness: Towards a Ready Military Healthcare Force. Military Medicine, 2019, 184, 122-126.	0.4	6
106	Perception of the usability and implementation of a metacognitive mnemonic to check cognitive errors in clinical setting. BMC Medical Education, 2019, 19, 18.	1.0	7
107	First-year medical students' calibration bias and accuracy across clinical reasoning activities. Advances in Health Sciences Education, 2019, 24, 767-781.	1.7	13
108	Use of clinical reasoning tasks by medical students. Diagnosis, 2019, 6, 127-135.	1.2	4

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109	Conceptualizing Learning Environments in the Health Professions. Academic Medicine, 2019, 94, 969-974.	0.8	101
110	Management Reasoning: Implications for Health Professions Educators and a Research Agenda. Academic Medicine, 2019, 94, 1310-1316.	0.8	45
111	In Reply to Abu-Zaid and Alamri. Academic Medicine, 2019, 94, 151-152.	0.8	0
112	Boyer and Beyond. Academic Medicine, 2019, 94, 893-901.	0.8	8
113	An Interdisciplinary, Multi-Institution Telehealth Course for Third-Year Medical Students. Academic Medicine, 2019, 94, 833-837.	0.8	53
114	Dynamic Measurement in Health Professions Education. Academic Medicine, 2019, 94, 1323-1328.	0.8	8
115	Clinical Process Modeling. Academic Medicine, 2019, 94, 1317-1322.	0.8	3
116	"This Manuscript Was a Complete Waste of Time― Academic Medicine, 2019, 94, 744-745.	0.8	7
117	Scoping Review of Entrustable Professional Activities in Undergraduate Medical Education. Academic Medicine, 2019, 94, 1040-1049.	0.8	86
118	Clinical Reasoning Assessment Methods: A Scoping Review and Practical Guidance. Academic Medicine, 2019, 94, 902-912.	0.8	135
119	What we measure $\hat{a} \in \ \mid$ and what we should measure in medical education. Medical Education, 2019, 53, 86-94.	1.1	51
120	Authorship Order in Medical Education Publications: In Search of Practical Guidance for the Community. Teaching and Learning in Medicine, 2019, 31, 288-297.	1.3	11
121	Education and service: how theories can help in understanding tensions. Medical Education, 2019, 53, 42-55.	1.1	32
122	Clinical Reasoning in the Ward Setting: A Rapid Response Scenario for Residents and Attendings. MedEdPORTAL: the Journal of Teaching and Learning Resources, 2019, 15, 10834.	0.5	4
123	Making the Transition: Clinical Practitioner to Health Professions Educator. New Directions for Adult and Continuing Education, 2018, 2018, 87-95.	0.5	1
124	Staying Power: Does the Uniformed Services University Continue to Meet Its Obligation to the Nation's Health Care Needs?. Military Medicine, 2018, 183, e277-e280.	0.4	4
125	Whose Paper Is It Anyway? Authorship Criteria According to Established Scholars in Health Professions Education. Academic Medicine, 2018, 93, 1171-1175.	0.8	39
126	Drawing Boundaries: The Difficulty in Defining Clinical Reasoning. Academic Medicine, 2018, 93, 990-995.	0.8	80

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127	The Association of Changing Practice Settings on Maintenance of Certification Exam Outcomes. Academic Medicine, 2018, 93, 756-762.	0.8	O
128	Using Relational Reasoning Strategies to Help Improve Clinical Reasoning Practice. Academic Medicine, 2018, 93, 709-714.	0.8	13
129	Guidelines for Reporting Survey-Based Research Submitted to Academic Medicine. Academic Medicine, 2018, 93, 337-340.	0.8	86
130	Factors Associated With Surgery Clerkship Performance and Subsequent USMLE Step Scores. Journal of Surgical Education, 2018, 75, 1200-1205.	1.2	14
131	Medical Education and Health Care Delivery. Academic Medicine, 2018, 93, 384-390.	0.8	21
132	"The Questions Shape the Answers†Assessing the Quality of Published Survey Instruments in Health Professions Education Research. Academic Medicine, 2018, 93, 456-463.	0.8	37
133	Making the First Cut: An Analysis of Academic Medicine Editors' Reasons for Not Sending Manuscripts Out for External Peer Review. Academic Medicine, 2018, 93, 464-470.	0.8	33
134	Expanding the Conversation on Burnout Through Conceptions of Role Strain and Role Conflict. Journal of Graduate Medical Education, 2018, 10, 620-623.	0.6	6
135	Using computerized virtual cases to explore diagnostic error in practicing physicians. Diagnosis, 2018, 5, 229-233.	1.2	1
136	Diagnostic vs Management Reasoningâ€"Reply. JAMA - Journal of the American Medical Association, 2018, 320, 1818.	3.8	2
137	Toward a National Conversation on Health: Disruptive Intervention and the Transformation from Health Care to Health. Military Medicine, 2018, 183, 193-197.	0.4	3
138	Developing the Next Generation of Physicians. Military Medicine, 2018, 183, 225-232.	0.4	5
139	A Longitudinal Study of Commonly Used Admissions Measures and Disenrollment from Medical School and Graduate Medical Education Probation or Termination from Training. Military Medicine, 2018, 183, e680-e684.	0.4	4
140	Untying the Gordian knot: remediation problems in medical schools that need remediation. BMC Medical Education, 2018, 18, 120.	1.0	21
141	Medical education research: aligning design and research goals. Medical Journal of Australia, 2018, 208, 473-475.	0.8	1
142	Graduate Programs in Health Professions Education: Preparing Academic Leaders for Future Challenges. Journal of Graduate Medical Education, 2018, 10, 119-122.	0.6	35
143	Educational research: current trends, evidence base and unanswered questions. Medical Journal of Australia, 2018, 208, 161-163.	0.8	5
144	Management Reasoning. JAMA - Journal of the American Medical Association, 2018, 319, 2267.	3.8	89

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145	Preliminary Validity Evidence for a Milestones-Based Rating Scale for Chart-Stimulated Recall. Journal of Graduate Medical Education, 2018, 10, 269-275.	0.6	3
146	Interprofessional Healthcare Teams in the Military: A Scoping Literature Review. Military Medicine, 2018, 183, e448-e454.	0.4	23
147	Clinical Reasoning in the Primary Care Setting: Two Scenario-Based Simulations for Residents and Attendings. MedEdPORTAL: the Journal of Teaching and Learning Resources, 2018, 14, 10773.	0.5	10
148	Knowledge Syntheses in Medical Education: Demystifying Scoping Reviews. Academic Medicine, 2017, 92, 161-166.	0.8	124
149	Exploring the institutional logics of health professions education scholarship units. Medical Education, 2017, 51, 755-767.	1.1	30
150	Learning at large conferences: from the â€~sage on the stage' to contemporary models of learning. Perspectives on Medical Education, 2017, 6, 205-208.	1.8	7
151	Working Definitions of the Roles and an Organizational Structure in Health Professions Education Scholarship. Academic Medicine, 2017, 92, 205-208.	0.8	29
152	Surveys of Health Professions Trainees: Prevalence, Response Rates, and Predictive Factors to Guide Researchers. Academic Medicine, 2017, 92, 222-228.	0.8	68
153	Excellence in PhD dissertations in health professions education: Toward standards and expectations. Medical Teacher, 2017, 39, 1-8.	1.0	4
154	Concept Maps: Definition, Structure, and Scoring. Academic Medicine, 2017, 92, 1802-1802.	0.8	7
155	Clinical Reasoning Education at US Medical Schools: Results from a National Survey of Internal Medicine Clerkship Directors. Journal of General Internal Medicine, 2017, 32, 1242-1246.	1.3	88
156	Exploring examinee behaviours as validity evidence for multiple-choice question examinations. Medical Education, 2017, 51, 1075-1085.	1.1	26
157	The Associations Between Clerkship Objective Structured Clinical Examination (OSCE) Grades and Subsequent Performance. Teaching and Learning in Medicine, 2017, 29, 280-285.	1.3	14
158	How to Calculate a Survey Response Rate: Best Practices. Academic Medicine, 2017, 92, 269-269.	0.8	18
159	Improving Scholarly Communication in Our Community Through Peer Review. Academic Medicine, 2017, 92, 135-137.	0.8	1
160	Health Professions Education Scholarship Unit Leaders as Institutional Entrepreneurs. Academic Medicine, 2017, 92, 1189-1195.	0.8	16
161	In Reply to Ma et al. Academic Medicine, 2017, 92, 426-427.	0.8	1
162	Health Professions Education Graduate Programs Are a Pathway to Strengthening Continuing Professional Development. Journal of Continuing Education in the Health Professions, 2017, 37, 147-151.	0.4	11

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163	Effect of Access to an Electronic Medical Resource on Performance Characteristics of a Certification Examination. Annals of Internal Medicine, 2017, 167, 302.	2.0	9
164	Group concept mapping: An approach to explore group knowledge organization and collaborative learning in senior medical students. Medical Teacher, 2017, 39, 1051-1056.	1.0	11
165	Medication Safety Curricula in US Medical Schools—A Call for Action. Medical Science Educator, 2017, 27, 183-187.	0.7	2
166	Developing Programs That Will Change Health Professions Education and Practice. Academic Medicine, 2017, 92, 1503-1505.	0.8	6
167	Contextual factors and clinical reasoning: differences in diagnostic and therapeutic reasoning in board certified versus resident physicians. BMC Medical Education, 2017, 17, 211.	1.0	33
168	Authors' reply: Comment on: Teaching metacognition in clinical decision-making using a novel mnemonic checklist: an exploratory study. Singapore Medical Journal, 2017, 58, 343-344.	0.3	0
169	Military Interprofessional Health Care Teams: How USU is Working to Harness the Power of Collaboration. Military Medicine, 2016, 181, 1404-1406.	0.4	7
170	A portable mnemonic to facilitate checking for cognitive errors. BMC Research Notes, 2016, 9, 445.	0.6	6
171	The Role for Virtual Patients in the Future of Medical Education. Academic Medicine, 2016, 91, 1217-1222.	0.8	137
172	Response to: Functional neuroimaging and diagnostic reasoning. Medical Teacher, 2016, 38, 753-754.	1.0	4
173	Coaching early-career educators in the health professions. Clinical Teacher, 2016, 13, 251-256.	0.4	12
174	Pre-clerkship clinical skills and clinical reasoning course performance: Explaining the variance in clerkship performance. Perspectives on Medical Education, 2016, 5, 215-221.	1.8	3
175	Education and the island of misfit toys. Perspectives on Medical Education, 2016, 5, 317-319.	1.8	0
176	Common Evaluation Designs in Medical Education III. Academic Medicine, 2016, 91, 1707-1707.	0.8	1
177	Ten Tips to Move From "Revisions Needed―to Resubmission. Academic Medicine, 2016, 91, e15.	0.8	1
178	Microanalytic Assessment of Self-Regulated Learning During Clinical Reasoning Tasks: Recent Developments and Next Steps. Academic Medicine, 2016, 91, 1516-1521.	0.8	44
179	A Beacon of Emotional Resilience in a Storm of Mistreatment?. Otolaryngology - Head and Neck Surgery, 2016, 154, 397-398.	1.1	2
180	How to write an educational research grant: AMEE Guide No. 101. Medical Teacher, 2016, 38, 113-122.	1.0	7

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181	Improving response rates and evaluating nonresponse bias in surveys: AMEE Guide No. 102. Medical Teacher, 2016, 38, 217-228.	1.0	192
182	Is There a Consensus on Consensus Methodology? Descriptions and Recommendations for Future Consensus Research. Academic Medicine, 2016, 91, 663-668.	0.8	260
183	Needles and Haystacks. Academic Medicine, 2016, 91, 480-484.	0.8	35
184	Clinical Reasoning Tasks and Resident Physicians: What Do They Reason About?. Academic Medicine, 2016, 91, 1022-1028.	0.8	32
185	Comparing Open-Book and Closed-Book Examinations. Academic Medicine, 2016, 91, 583-599.	0.8	79
186	Functional neuroimaging correlates of thinking flexibility and knowledge structure in memory: Exploring the relationships between clinical reasoning and diagnostic thinking. Medical Teacher, 2016, 38, 570-577.	1.0	18
187	Teaching metacognition in clinical decision-making using a novel mnemonic checklist: an exploratory study. Singapore Medical Journal, 2016, 57, 694-700.	0.3	36
188	Neural basis of nonanalytical reasoning expertise during clinical evaluation. Brain and Behavior, 2015, 5, e00309.	1.0	20
189	Considering "Nonlinearity―Across the Continuum in Medical Education Assessment: Supporting Theory, Practice, and Future Research Directions. Journal of Continuing Education in the Health Professions, 2015, 35, 232-243.	0.4	22
190	The Impact of Stigma and Personal Experiences on the Help-Seeking Behaviors of Medical Students With Burnout. Academic Medicine, 2015, 90, 961-969.	0.8	204
191	A Measured Approach to Enhancing the Nonclinical Skills of US MDs. Journal of Graduate Medical Education, 2015, 7, 133-133.	0.6	0
192	The Effect of Resident Duty-Hours Restrictions on Internal Medicine Clerkship Experiences: Surveys of Medical Students and Clerkship Directors. Teaching and Learning in Medicine, 2015, 27, 37-50.	1.3	5
193	The Clinical Integrative Puzzle for Teaching and Assessing Clinical Reasoning: Preliminary Feasibility, Reliability, and Validity Evidence. Military Medicine, 2015, 180, 54-60.	0.4	13
194	Dual Process Theory and Intermediate Effect: Are Faculty and Residents' Performance on Multiple-Choice, Licensing Exam Questions Different?. Military Medicine, 2015, 180, 92-96.	0.4	2
195	Predicting Medical School and Internship Success: Does the Quality of the Research and Clinical Experience Matter?. Military Medicine, 2015, 180, 12-17.	0.4	12
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