

Catherine M Clement

List of Publications by Year in descending order

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Version: 2024-02-01

38
papers

2,541
citations

346980

22
h-index

371746

37
g-index

38
all docs

38
docs citations

38
times ranked

2360
citing authors

#	ARTICLE	IF	CITATIONS
1	A randomized, controlled comparison of electrical versus pharmacological cardioversion for emergency department patients with acute atrial flutter. <i>Canadian Journal of Emergency Medicine</i> , 2021, 23, 314-324.	0.5	5
2	Interdepartmental program to improve outcomes for acute heart failure patients seen in the emergency department. <i>Canadian Journal of Emergency Medicine</i> , 2021, 23, 169-179.	0.5	0
3	Electrical versus pharmacological cardioversion for emergency department patients with acute atrial fibrillation (RAFF2): a partial factorial randomised trial. <i>Lancet</i> , The, 2020, 395, 339-349.	6.3	60
4	A Multicenter Program to Implement the Canadian C-Spine Rule by Emergency Department Triage Nurses. <i>Annals of Emergency Medicine</i> , 2018, 72, 333-341.	0.3	14
5	Factors influencing the intentions of nurses and respiratory therapists to use automated external defibrillators during in-hospital cardiac arrest: a qualitative interview study. <i>Canadian Journal of Emergency Medicine</i> , 2018, 20, 68-79.	0.5	7
6	Rates and predictive factors of return to the emergency department following an initial release by the emergency department for acute heart failure. <i>Canadian Journal of Emergency Medicine</i> , 2018, 20, 222-229.	0.5	4
7	Clinical validation of a risk scale for serious outcomes among patients with chronic obstructive pulmonary disease managed in the emergency department. <i>Cmaj</i> , 2018, 190, E1406-E1413.	0.9	15
8	Outcomes for Emergency Department Patients With Recent-Onset Atrial Fibrillation and Flutter Treated in Canadian Hospitals. <i>Annals of Emergency Medicine</i> , 2017, 69, 562-571.e2.	0.3	51
9	Impact of Expanding the Prehospital Stroke Bypass Time Window in a Large Geographic Region. <i>Stroke</i> , 2017, 48, 624-630.	1.0	7
10	Prospective and Explicit Clinical Validation of the Ottawa Heart Failure Risk Scale, With and Without Use of Quantitative n-Troponin-BNP. <i>Academic Emergency Medicine</i> , 2017, 24, 316-327.	0.8	40
11	Emergency Department Management of Heart Failure and COPD: A National Survey of Attitudes and Practice. <i>Canadian Journal of Emergency Medicine</i> , 2016, 18, 429-436.	0.5	6
12	Facilitators and barriers to application of the Canadian C-spine rule by emergency department triage nurses. <i>International Emergency Nursing</i> , 2016, 27, 24-30.	0.6	11
13	Characteristics and outcomes for acute heart failure in elderly patients presenting to the ED. <i>American Journal of Emergency Medicine</i> , 2016, 34, 2159-2166.	0.7	8
14	Hemodynamic, management, and outcomes of patients admitted to emergency department with heart failure. <i>Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine</i> , 2016, 24, 132.	1.1	2
15	Clinical characteristics associated with adverse events in patients with exacerbation of chronic obstructive pulmonary disease: a prospective cohort study. <i>Cmaj</i> , 2014, 186, E193-E204.	0.9	40
16	Theory of planned behaviour can help understand processes underlying the use of two emergency medicine diagnostic imaging rules. <i>Implementation Science</i> , 2014, 9, 88.	2.5	15
17	A Risk Scoring System to Identify Emergency Department Patients With Heart Failure at High Risk for Serious Adverse Events. <i>Academic Emergency Medicine</i> , 2013, 20, 17-26.	0.8	97
18	Emergency Physician Patterns Related to Anticoagulation of Patients with Recent-Onset Atrial Fibrillation and Flutter. <i>Journal of Atrial Fibrillation</i> , 2013, 5, 645.	0.5	4

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19	Use of rate control medication before cardioversion of recent-onset atrial fibrillation or flutter in the emergency department is associated with reduced success rates. <i>Canadian Journal of Emergency Medicine</i> , 2012, 14, 169-177.	0.5	9
20	An International View of How Recent-Onset Atrial Fibrillation Is Treated in the Emergency Department. <i>Academic Emergency Medicine</i> , 2012, 19, 1255-1260.	0.8	66
21	Performance of the Canadian CT Head Rule and the New Orleans Criteria for Predicting Any Traumatic Intracranial Injury on Computed Tomography in a United States Level I Trauma Center. <i>Academic Emergency Medicine</i> , 2012, 19, 2-10.	0.8	109
22	Perceived facilitators and barriers to clinical clearance of the cervical spine by emergency department nurses: A major step towards changing practice in the emergency department. <i>International Emergency Nursing</i> , 2011, 19, 44-52.	0.6	11
23	Variation in Management of Recent-Onset Atrial Fibrillation and Flutter Among Academic Hospital Emergency Departments. <i>Annals of Emergency Medicine</i> , 2011, 57, 13-21.	0.3	111
24	Association of the Ottawa Aggressive Protocol with rapid discharge of emergency department patients with recent-onset atrial fibrillation or flutter. <i>Canadian Journal of Emergency Medicine</i> , 2010, 12, 181-191.	0.5	111
25	Vernakalant Hydrochloride: A Novel Atrial-Selective Agent for the Cardioversion of Recent-Onset Atrial Fibrillation in the Emergency Department. <i>Academic Emergency Medicine</i> , 2010, 17, 1175-1182.	0.8	18
26	A prospective cluster-randomized trial to implement the Canadian CT Head Rule in emergency departments. <i>Cmaj</i> , 2010, 182, 1527-1532.	0.9	112
27	Multicentre prospective validation of use of the Canadian C-Spine Rule by triage nurses in the emergency department. <i>Cmaj</i> , 2010, 182, 1173-1179.	0.9	47
28	Implementation of the Canadian C-Spine Rule: prospective 12 centre cluster randomised trial. <i>BMJ: British Medical Journal</i> , 2009, 339, b4146-b4146.	2.4	129
29	Association of injury mechanism with the risk of cervical spine fractures. <i>Canadian Journal of Emergency Medicine</i> , 2009, 11, 14-22.	0.5	57
30	International Survey of Emergency Physicians'™ Priorities for Clinical Decision Rules. <i>Academic Emergency Medicine</i> , 2008, 15, 177-182.	0.8	97
31	International Survey of Emergency Physicians'™ Awareness and Use of the Canadian Cervical Spine Rule and the Canadian Computed Tomography Head Rule. <i>Academic Emergency Medicine</i> , 2008, 15, 1256-1261.	0.8	58
32	A matched-pair cluster design study protocol to evaluate implementation of the Canadian C-spine rule in hospital emergency departments: Phase III. <i>Implementation Science</i> , 2007, 2, 4.	2.5	25
33	Emergency Department Use of Intravenous Procainamide for Patients with Acute Atrial Fibrillation or Flutter. <i>Academic Emergency Medicine</i> , 2007, 14, 1158-1164.	0.8	64
34	Clinical Features of Head Injury Patients Presenting With a Glasgow Coma Scale Score of 15 and Who Require Neurosurgical Intervention. <i>Annals of Emergency Medicine</i> , 2006, 48, 245-251.	0.3	29
35	Comparison of the Canadian CT Head Rule and the New Orleans Criteria in Patients With Minor Head Injury. <i>JAMA - Journal of the American Medical Association</i> , 2005, 294, 1511.	3.8	414
36	Retrospective application of the NEXUS low-risk criteria for cervical spine radiography in Canadian emergency departments. <i>Annals of Emergency Medicine</i> , 2004, 43, 507-514.	0.3	72

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37	The Canadian C-Spine Rule versus the NEXUS Low-Risk Criteria in Patients with Trauma. New England Journal of Medicine, 2003, 349, 2510-2518.	13.9	582
38	Canadian C-Spine Rule study for alert and stable trauma patients: II. Study objectives and methodology. Canadian Journal of Emergency Medicine, 2002, 4, 185-193.	0.5	34