Louise Cullen

List of Publications by Year
in descending order

152 papers	6,446 citations	93792 39 h-index	84171 75 g-index
153 all docs	153 docs citations	153 times ranked	4939 citing authors

#	Article	IF	Citations
1	Acute Heart Failure in the 2021 ESC Heart Failure Guidelines: a scientific statement from the Association for Acute CardioVascular Care (ACVC)Âof the European Society of Cardiology. European Heart Journal: Acute Cardiovascular Care, 2022, 11, 173-185.	0.4	31
2	How to implement novel diagnostic algorithms for non-ST-segment elevation myocardial infarction in the emergency department. European Heart Journal: Acute Cardiovascular Care, 2022, 11, 75-76.	0.4	0
3	Point-of-care testing with high-sensitivity cardiac troponin assays: the challenges and opportunities. Emergency Medicine Journal, 2022, 39, 861-866.	0.4	18
4	Biomarker Development in Cardiology: Reviewing the Past to Inform the Future. Cells, 2022, 11, 588.	1.8	2
5	Emergency Department Assessment of Suspected Acute Coronary Syndrome Using the IMPACT Pathway in Aboriginal and Torres Strait Islander People. Heart Lung and Circulation, 2022, , .	0.2	2
6	Chest Pain Assessment: What Is Our Endgame?. Clinical Chemistry, 2022, 68, 261-263.	1.5	0
7	International Validation of the Canadian Syncope Risk Score. Annals of Internal Medicine, 2022, 175, 783-794.	2.0	8
8	The intra-individual variation of cardiac troponin I: the effects of sex, age, climatic season, and time between samples. Clinical Chemistry and Laboratory Medicine, 2022, 60, 1101-1109.	1.4	4
9	Development and validation of a comprehensive early risk prediction model for patients with undifferentiated acute chest pain. IJC Heart and Vasculature, 2022, 40, 101043.	0.6	2
10	From little things, big things grow: An exploratory analysis of the national cost of peripheral intravenous catheter insertion in Australian adult emergency care. EMA - Emergency Medicine Australasia, 2022, 34, 877-883.	0.5	3
11	The clinical approach to diagnosing peri-procedural myocardial infarction after percutaneous coronary interventions according to the fourth universal definition of myocardial infarction â€“ from the study group on biomarkers of the European Society of Cardiology (ESC) Association for Acute CardioVascular Care (ACVC). Biomarkers, 2022, 27, 407-417.	0.9	3
12	Performance of the American Heart Association/American College of Cardiology/Heart Rhythm Society versus European Society of Cardiology Guideline Criteria for Hospital Admission of Patients with Syncope. Heart Rhythm, 2022, , .	0.3	3
13	Care Models for Acute Chest Pain That Improve Outcomes and Efficiency. Journal of the American College of Cardiology, 2022, 79, 2333-2348.	1.2	14
14	Using Sexâ€specific Cutoffs for Highâ€sensitivity Cardiac Troponin T to Diagnose Acute Myocardial Infarction. Academic Emergency Medicine, 2021, 28, 463-466.	0.8	10
15	ESC Study Group on Cardiac Biomarkers of the Association for Acute CardioVascular Care: A fond farewell at the retirement of CKMB. European Heart Journal, 2021, 42, 2260-2264.	1.0	23
16	Effect of a waiting room communication strategy on imaging rates and awareness of public health messages for low back pain. International Journal for Quality in Health Care, 2021, 33, .	0.9	1
17	Applying a framework to assess the impact of cardiovascular outcomes improvement research. Health Research Policy and Systems, 2021, 19, 67.	1.1	3
18	Is a nudge all we need to promote deliberate clinical inertia and thoughtful clinical decision making?. EMA - Emergency Medicine Australasia, 2021, 33, 748-752.	0.5	0

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19	Utility of Echocardiography in Patients With Suspected Acute Myocardial Infarction and Left Bundleâ€Branch Block. Journal of the American Heart Association, 2021, 10, e021262.	1.6	1
20	Development of an electrocardiogram-based risk calculator for a cardiac cause of syncope. Heart, 2021, 107, 1796-1804.	1.2	7
21	Potential impact of a novel pathway for suspected myocardial infarction utilising a new high-sensitivity cardiac troponin I assay. Emergency Medicine Journal, 2021, , emermed-2020-210812.	0.4	1
22	Factors influencing physician risk estimates for acute cardiac events in emergency patients with suspected acute coronary syndrome. Emergency Medicine Journal, 2020, 37, 2-7.	0.4	3
23	Incidence, characteristics, determinants, and prognostic impact of recurrent syncope. Europace, 2020, 22, 1885-1895.	0.7	8
24	CSANZ Position Statement on the Evaluation of Patients Presenting With Suspected Acute Coronary Syndromes During the COVID-19 Pandemic. Heart Lung and Circulation, 2020, 29, e105-e110.	0.2	6
25	Risk stratification scores for patients with acute heart failure in the Emergency Department: A systematic review. European Heart Journal: Acute Cardiovascular Care, 2020, 9, 375-398.	0.4	26
26	Application of the fourth universal definition of myocardial infarction in clinical practice. Biomarkers, 2020, 25, 322-330.	0.9	2
27	Examining the translational success of an initiative to accelerate the assessment of chest pain for patients in an Australian emergency department: a pre-post study. BMC Health Services Research, 2020, 20, 419.	0.9	2
28	Widespread Introduction of a High-Sensitivity Troponin Assay: Assessing the Impact on Patients and Health Services. Journal of Clinical Medicine, 2020, 9, 1883.	1.0	9
29	Facilitators and barriers for emergency department clinicians using a rapid chest pain assessment protocol: qualitative interview research. BMC Health Services Research, 2020, 20, 74.	0.9	9
30	Circadian, weekly, seasonal, and temperature-dependent patterns of syncope aetiology in patients at increased risk of cardiac syncope. Europace, 2019, 21, 511-521.	0.7	7
31	Machine Learning to Predict the Likelihood of Acute Myocardial Infarction. Circulation, 2019, 140, 899-909.	1.6	128
32	Prevalence of Pulmonary Embolism in Patients With Syncope. Journal of the American College of Cardiology, 2019, 74, 744-754.	1.2	26
33	Two-Hour Algorithm for Rapid Triage of Suspected Acute Myocardial Infarction Using a High-Sensitivity Cardiac Troponin I Assay. Clinical Chemistry, 2019, 65, 1437-1447.	1.5	36
34	Diagnosis of acute myocardial infarction in the presence of left bundle branch block. Heart, 2019, 105, 1559-1567.	1.2	24
35	Pre-clinical study protocol: Blood transfusion in endotoxaemic shock. MethodsX, 2019, 6, 1124-1132.	0.7	1
36	B-Type Natriuretic Peptides and Cardiac Troponins for Diagnosis and Risk-Stratification of Syncope. Circulation, 2019, 139, 2403-2418.	1.6	40

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37	Assessment of the 2016 National Institute for Health and Care Excellence high-sensitivity troponin rule-out strategy. Heart, 2018, 104, heartjnl-2017-311983.	1.2	15
38	A critical evaluation of the Beckman Coulter Access hsTnI : Analytical performance, reference interval and concordance. Clinical Biochemistry, 2018, 55, 49-55.	0.8	22
39	Combining High-Sensitivity Cardiac Troponin I and Cardiac Troponin T in the Early Diagnosis of Acute Myocardial Infarction. Circulation, 2018, 138, 989-999.	1.6	56
40	Re: Medical student enquiries on the art of clinical inertia. EMA - Emergency Medicine Australasia, 2018, 30, 435-436.	0.5	1
41	Evaluating Rapid Rule-out of Acute Myocardial Infarction Using a High-Sensitivity Cardiac Troponin I Assay at Presentation. Clinical Chemistry, 2018, 64, 820-829.	1.5	42
42	Developing a value proposition for high-sensitivity troponin testing. Clinica Chimica Acta, 2018, 477, 154-159.	0.5	12
43	Don't just do something, stand there! The value and art of deliberate clinical inertia. EMA - Emergency Medicine Australasia, 2018, 30, 273-278.	0.5	24
44	Indications and practical approach to non-invasive ventilation in acute heart failure. European Heart Journal, 2018, 39, 17-25.	1.0	111
45	â€˜What the hell is water?â€™ How to use deliberate clinical inertia in common emergency department situations. EMA - Emergency Medicine Australasia, 2018, 30, 426-430.	0.5	9
46	An Ovine Model of Hyperdynamic Endotoxemia and Vital Organ Metabolism. Shock, 2018, 49, 99-107.	1.0	18
47	External validation of heart-type fatty acid binding protein, high-sensitivity cardiac troponin, and electrocardiography as rule-out for acute myocardial infarction. Clinical Biochemistry, 2018, 52, 161-163.	0.8	11
48	Peripheral Intravenous Cannula Insertion and Use in the Emergency Department: An Intervention Study. Academic Emergency Medicine, 2018, 25, 26-32.	0.8	30
49	Modification of the Thrombolysis in Myocardial Infarction risk score for patients presenting with chest pain to the emergency department. EMA - Emergency Medicine Australasia, 2018, 30, 47-54.	0.5	5
50	Diagnostic Accuracy of a New High-Sensitivity Troponin I Assay and Five Accelerated Diagnostic Pathways for Ruling Out Acute Myocardial Infarction and Acute Coronary Syndrome. Annals of Emergency Medicine, 2018, 71, 439-451.e3.	0.3	52
51	A Risk Assessment Score and Initial Highâ€sensitivity Troponin Combine to Identify Low Risk of Acute Myocardial Infarction in the Emergency Department. Academic Emergency Medicine, 2018, 25, 434-443.	0.8	12
52	ICare-ACS (Improving Care Processes for Patients With Suspected Acute Coronary Syndrome). Circulation, 2018, 137, 354-363.	1.6	32
53	Characteristics and occurrence of type 2 myocardial infarction in emergency department patients: a prospective study. Emergency Medicine Journal, 2018, 35, 169-175.	0.4	23
54	Detectable High-Sensitivity Cardiac Troponin within the Population Reference Interval Conveys High 5-Year Cardiovascular Risk: An Observational Study. Clinical Chemistry, 2018, 64, 1044-1053.	1.5	33

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55	Deliberate clinical inertia: Using metaâ€cognition to improve decisionâ€making. EMA - Emergency Medicine Australasia, 2018, 30, 585-590.	0.5	18
56	Prospective validation of prognostic and diagnostic syncope scores in the emergency department. International Journal of Cardiology, 2018, 269, 114-121.	0.8	18
57	Clinical chemistry score versus high-sensitivity cardiac troponin I and T tests alone to identify patients at low or high risk for myocardial infarction or death at presentation to the emergency department. Cmaj, 2018, 190, E974-E984.	0.9	38
58	Unintended Consequences: Fluid Resuscitation Worsens Shock in an Ovine Model of Endotoxemia. American Journal of Respiratory and Critical Care Medicine, 2018, 198, 1043-1054.	2.5	114
59	European Society of Cardiology-Acute Cardiovascular Care Association Position paper on acute heart failure: A call for interdisciplinary care. European Heart Journal: Acute Cardiovascular Care, 2017, 6, 81-86.	0.4	41
60	European Society of Cardiology â€“ Acute Cardiovascular Care Association position paper on safe discharge of acute heart failure patients from the emergency department. European Heart Journal: Acute Cardiovascular Care, 2017, 6, 311-320.	0.4	56
61	Differences in Presentation, Management and Outcomes in Women and Men Presenting to an Emergency Department With Possible Cardiac Chest Pain. Heart Lung and Circulation, 2017, 26, 1282-1290.	0.2	13
62	Rapid Rule-out of Acute Myocardial Infarction With a Single High-Sensitivity Cardiac Troponin T Measurement Below the Limit of Detection. Annals of Internal Medicine, 2017, 166, 715.	2.0	231
63	Response by Than et al to Letter Regarding Article, â€œAssessment of the European Society of Cardiology 0-Hour/1-Hour Algorithm to Rule-Out and Rule-In Acute Myocardial Infarctionâ€• Circulation, 2017, 135, e923-e924.	1.6	0
64	Echocardiography and lung ultrasonography for the assessment and management of acute heart failure. Nature Reviews Cardiology, 2017, 14, 427-440.	6.1	138
65	Direct Comparison of 2 Rule-Out Strategies for Acute Myocardial Infarction: 2-h Accelerated Diagnostic Protocol vs 2-h Algorithm. Clinical Chemistry, 2017, 63, 1227-1236.	1.5	35
66	The organisational value of diagnostic strategies using high-sensitivity troponin for patients with possible acute coronary syndromes: a trial-based cost-effectiveness analysis. BMJ Open, 2017, 7, e013653.	0.8	32
67	Rational clinical evaluation of suspected acute coronary syndromes: The value of more information. EMA - Emergency Medicine Australasia, 2017, 29, 664-671.	0.5	1
68	A randomized trial of a 1-hour troponin T protocol in suspected acute coronary syndromes: Design of the Rapid Assessment of Possible ACS In the emergency Department with high sensitivity Troponin T (RAPID-TnT) study. American Heart Journal, 2017, 190, 25-33.	1.2	20
69	Comparing the No Objective Testing Rule to the HEART Pathway. Academic Emergency Medicine, 2017, 24, 1169-1170.	0.8	1
70	Validating the Manchester Acute Coronary Syndromes (MACS) and Troponin-only Manchester Acute Coronary Syndromes (T-MACS) rules for the prediction of acute myocardial infarction in patients presenting to the emergency department with chest pain. Emergency Medicine Journal, 2017, 34, 517-523.	0.4	28
71	Immediate Rule-Out of Acute Myocardial Infarction Using Electrocardiogram and Baseline High-Sensitivity Troponin I. Clinical Chemistry, 2017, 63, 394-402.	1.5	57
72	Association of High-Sensitivity Cardiac Troponin I Concentration With Cardiac Outcomes in Patients With Suspected Acute Coronary Syndrome. JAMA - Journal of the American Medical Association, 2017, 318, 1913.	3.8	188

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73	The Association of Electrocardiographic Abnormalities and Acute Coronary Syndrome in Emergency Patients With Chest Pain. Academic Emergency Medicine, 2017, 24, 344-352.	0.8	5
74	Prohormones in the Early Diagnosis of Cardiac Syncope. Journal of the American Heart Association, 2017, 6, .	1.6	16
75	The Fast and the Furious: Low-Risk Chest Pain and the Rapid Rule-Out Protocol. Western Journal of Emergency Medicine, 2017, 18, 474-478.	0.6	17
76	Improved Assessment of Chest pain Trial (IMPACT): assessing patients with possible acute coronary syndromes. Medical Journal of Australia, 2017, 207, 195-200.	0.8	26
77	Implementing change: evaluating the Accelerated Chest pain Risk Evaluation (ACRE) project. Medical Journal of Australia, 2017, 207, 201-205.	0.8	20
78	National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand: Australian clinical guidelines for the management of acute coronary syndromes 2016. Medical Journal of Australia, 2016, 205, 128-133.	0.8	112
79	Appropriate use of serum troponin testing in general practice: a narrative review. Medical Journal of Australia, 2016, 205, 91-94.	0.8	8
80	Outcome at 30 days for lowâ€risk chest pain patients assessed using an accelerated diagnostic pathway in the emergency department. EMA - Emergency Medicine Australasia, 2016, 28, 279-286.	0.5	5
81	External validation of the emergency department assessment of chest pain score accelerated diagnostic pathway (EDACS-ADP). Emergency Medicine Journal, 2016, 33, 618-625.	0.4	39
82	Does Uric Acid Level Provide Additional Risk Stratification Information in Emergency Patients With Symptoms of Possible Acute Coronary Syndrome?. Critical Pathways in Cardiology, 2016, 15, 169-173.	0.2	1
83	Effectiveness of EDACS Versus ADAPT Accelerated Diagnostic Pathways for Chest Pain: A Pragmatic Randomized Controlled Trial Embedded Within Practice. Annals of Emergency Medicine, 2016, 68, 93-102.e1.	0.3	107
84	Validation of presentation and 3â€…h high-sensitivity troponin to rule-in and rule-out acute myocardial infarction. Heart, 2016, 102, 1270-1278.	1.2	82
85	National Heart Foundation of Australia & Cardiac Society of Australia and New Zealand: Australian Clinical Guidelines for the Management of Acute Coronary Syndromes 2016. Heart Lung and Circulation, 2016, 25, 895-951.	0.2	222
86	Practical approach on frail older patients attended for acute heart failure. International Journal of Cardiology, 2016, 222, 62-71.	0.8	42
87	Assessment of the European Society of Cardiology 0-Hour/1-Hour Algorithm to Rule-Out and Rule-In Acute Myocardial Infarction. Circulation, 2016, 134, 1532-1541.	1.6	111
88	Heart Fatty Acid Binding Protein and cardiac troponin: development of an optimal rule-out strategy for acute myocardial infarction. BMC Emergency Medicine, 2016, 16, 34.	0.7	20
89	Change to costs and lengths of stay in the emergency department and the Brisbane protocol: an observational study. BMJ Open, 2016, 6, e009746.	0.8	27
90	Use of the Theoretical Domains Framework to evaluate factors driving successful implementation of the Accelerated Chest pain Risk Evaluation (ACRE) project. Implementation Science, 2016, 11, 136.	2.5	20

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91	Agreement Between Patient-reported and Cardiology-adjudicated Medical History in Patients With Possible Ischemic Chest Pain: An Observational Study. Critical Pathways in Cardiology, 2016, 15, 121-125.	0.2	3
92	Evaluation of High-Sensitivity Cardiac Troponin I Levels in Patients With Suspected Acute Coronary Syndrome. JAMA Cardiology, 2016, 1, 405.	3.0	75
93	Diagnosis of Myocardial Infarction Using a High-Sensitivity Troponin I 1-Hour Algorithm. JAMA Cardiology, 2016, 1, 397.	3.0	186
94	Two-Hour Algorithm for Triage toward Rule-Out and Rule-In of Acute Myocardial Infarction by Use of High-Sensitivity Cardiac Troponin I. Clinical Chemistry, 2016, 62, 494-504.	1.5	95
95	Relationship Between Physiological Parameters and Acute Coronary Syndrome in Patients Presenting to the Emergency Department With Undifferentiated Chest Pain. Journal of Cardiovascular Nursing, 2016, 31, 267-273.	0.6	1
96	Time to presentation and 12-month health outcomes in patients presenting to the emergency department with symptoms of possible acute coronary syndrome. Emergency Medicine Journal, 2016, 33, 390-395.	0.4	16
97	Sex-specific versus overall cut points for a high sensitivity troponin I assay in predicting 1-year outcomes in emergency patients presenting with chest pain. Heart, 2016, 102, 120-126.	1.2	61
98	The predictive value of high sensitivity-troponin velocity within the first 6h of presentation for cardiac outcomes regardless of acute coronary syndrome diagnosis. International Journal of Cardiology, 2016, 204, 106-111.	0.8	11
99	Factors associated with triage assignment of emergency department patients ultimately diagnosed with acute myocardial infarction. Australian Critical Care, 2016, 29, 23-26.	0.6	14
100	The incremental value of stress testing in patients with acute chest pain beyond serial cardiac troponin testing. Emergency Medicine Journal, 2016, 33, 319-324.	0.4	15
101	A Clinical Decision Rule to Identify Emergency Department Patients at Low Risk for Acute Coronary Syndrome Who Do Not Need Objective Coronary Artery Disease Testing: The No Objective Testing Rule. Annals of Emergency Medicine, 2016, 67, 478-489.e2.	0.3	27
102	Evaluation of Patients Presenting with Chest Pain in the Emergency Department: Where Do Troponins Fit In?. , 2016, , 41-55.		0
103	Availability of highly sensitive troponin assays and acute coronary syndrome care: insights from the SNAPSHOT registry. Medical Journal of Australia, 2015, 202, 36-39.	0.8	12
104	Cost and outcomes of assessing patients with chest pain in an Australian emergency department. Medical Journal of Australia, 2015, 202, 427-432.	0.8	84
105	Accelerated diagnostic protocol using high-sensitivity cardiac troponin T in acute chest pain patients. International Journal of Cardiology, 2015, 184, 208-215.	0.8	46
106	â€˜Chest Pain Typicalityâ€™ in Suspected Acute Coronary Syndromes and the Impact of Clinical Experience. American Journal of Medicine, 2015, 128, 1109-1116.e2.	0.6	54
107	High-Sensitivity Cardiac Troponin T Concentrations below the Limit of Detection to Exclude Acute Myocardial Infarction: A Prospective Evaluation. Clinical Chemistry, 2015, 61, 983-989.	1.5	97
108	Decision limits and the reporting of cardiac troponin: Meeting the needs of both the cardiologist and the ED physician. Critical Reviews in Clinical Laboratory Sciences, 2015, 52, 28-44.	2.7	13

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109	The utility of presentation and 4-hour high sensitivity troponin I to rule-out acute myocardial infarction in the emergency department. Clinical Biochemistry, 2015, 48, 1219-1224.	0.8	11
110	Two-hour diagnostic algorithms for early assessment of patients with acute chest pain â€" Implications of lowering the cardiac troponin I cut-off to the 97.5th percentile. Clinica Chimica Acta, 2015, 445, 19-24.	0.5	12
111	A novel diagnostic protocol to identify patients suitable for discharge after a single high-sensitivity troponin. Heart, 2015, 101, 1041-1046.	1.2	67
112	Utility of Routine Exercise Stress Testing among Intermediate Risk Chest Pain Patients Attending an Emergency Department. Heart Lung and Circulation, 2015, 24, 879-884.	0.2	17
113	Myocardial infarction: rapid ruling out in the emergency room. Lancet, The, 2015, 386, 2449-2450.	6.3	8
114	Two-hour Algorithm for Triage Toward Rule-out and Rule-in of Acute Myocardial Infarction Using High-sensitivity Cardiac Troponin T. American Journal of Medicine, 2015, 128, 369-379.e4.	0.6	121
115	Admission glycaemia and its association with acute coronary syndrome in Emergency Department patients with chest pain. Emergency Medicine Journal, 2015, 32, 608-612.	0.4	13
116	Validation of an accelerated highâ€sensitivity troponin T assay protocol in an Australian cohort with chest pain. Medical Journal of Australia, 2014, 200, 161-165.	0.8	17
117	The promise of highâ€sensitivity troponin testing. Medical Journal of Australia, 2014, 201, 125-126.	0.8	0
118	Development and validation of the <scp>E</scp>mergency <scp>D</scp>epartment <scp>A</scp>ssessment of <scp>C</scp>hest pain <scp>S</scp>core and 2â€‰h accelerated diagnostic protocol. EMA - Emergency Medicine Australasia, 2014, 26, 34-44.	0.5	172
119	Comparison of new point-of-care troponin assay with high sensitivity troponin in diagnosing myocardial infarction. International Journal of Cardiology, 2014, 177, 182-186.	0.8	30
120	Implementation of a Chest Pain Management Service Improves Patient Care and Reduces Length of Stay. Critical Pathways in Cardiology, 2014, 13, 9-13.	0.2	2
121	Effect of recalibration of the hs-TnT assay on diagnostic performance. Clinical Chemistry and Laboratory Medicine, 2014, 52, e25-7.	1.4	9
122	The new Vancouver Chest Pain Rule using troponin as the only biomarker: an external validation study. American Journal of Emergency Medicine, 2014, 32, 129-134.	0.7	44
123	Limited utility of exercise stress testing in the evaluation of suspected acute coronary syndrome in patients aged less than 40 years with intermediate risk features. EMA - Emergency Medicine Australasia, 2014, 26, 170-176.	0.5	11
124	Comparison of high sensitivity troponin T and I assays in the diagnosis of non-ST elevation acute myocardial infarction in emergency patients with chest pain. Clinical Biochemistry, 2014, 47, 321-326.	0.8	32
125	Performance of Risk Stratification for Acute Coronary Syndrome with Two-hour Sensitive Troponin Assay Results. Heart Lung and Circulation, 2014, 23, 428-434.	0.2	7
126	A 2-Hour Diagnostic Protocol for Possible Cardiac Chest Pain in the Emergency Department. JAMA Internal Medicine, 2014, 174, 51.	2.6	151

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127	Undetectable hs-cTnT in the Emergency Department and Risk of Myocardial Infarction. Journal of the American College of Cardiology, 2014, 64, 632-633.	1.2	7
128	Towards a consistent definition of a significant delta troponin with z-scores: a way out of chaos?. European Heart Journal: Acute Cardiovascular Care, 2014, 3, 149-157.	0.4	14
129	Use of Observed Within-Person Variation of Cardiac Troponin in Emergency Department Patients for Determination of Biological Variation and Percentage and Absolute Reference Change Values. Clinical Chemistry, 2014, 60, 848-854.	1.5	30
130	Comparison of Three Risk Stratification Rules for Predicting Patients With Acute Coronary Syndrome Presenting to an Australian Emergency Department. Heart Lung and Circulation, 2013, 22, 844-851.	0.2	40
131	Troponin testing: End of an era?. Clinical Biochemistry, 2013, 46, 1627-1628.	0.8	3
132	What is an acceptable risk of major adverse cardiac event in chest pain patients soon after discharge from the Emergency Department?. International Journal of Cardiology, 2013, 166, 752-754.	0.8	324
133	Delta troponin for the early diagnosis of AMI in emergency patients with chest pain. International Journal of Cardiology, 2013, 168, 2602-2608.	0.8	42
134	Validation of High-Sensitivity Troponin I in a 2-Hour Diagnostic Strategy to Assess 30-Day Outcomes in Emergency Department Patients With Possible AcuteÂCoronary Syndrome. Journal of the American College of Cardiology, 2013, 62, 1242-1249.	1.2	277
135	Examining Renal Impairment as a Risk Factor for Acute Coronary Syndrome: A Prospective Observational Study. Annals of Emergency Medicine, 2013, 62, 38-46.e1.	0.3	11
136	Validation of the Vancouver Chest Pain Rule using troponin as the only biomarker: a prospective cohort study. American Journal of Emergency Medicine, 2013, 31, 1103-1107.	0.7	9
137	The HEART Score for the Assessment of Patients With Chest Pain in the Emergency Department. Critical Pathways in Cardiology, 2013, 12, 121-126.	0.2	203
138	The approach to patients with possible cardiac chest pain. Medical Journal of Australia, 2013, 199, 30-34.	0.8	23
139	Introduction of an accelerated diagnostic protocol in the assessment of emergency department patients with possible acute coronary syndrome: The <scp>N</scp>ambour <scp>S</scp>hort <scp>L</scp>owâ€<scp>I</scp>ntermediate <scp>C</scp>hest pain project. EMA - Emergency Medicine Australasia, 2013, 25, 340-344.	0.5	25
140	Diagnostic and prognostic utility of early measurement with high-sensitivity troponin T assay in patients presenting with chest pain. Cmaj, 2012, 184, E260-E268.	0.9	68
141	Comparison of early biomarker strategies with the Heart Foundation of Australia/Cardiac Society of Australia and New Zealand guidelines for risk stratification of emergency department patients with chest pain. EMA - Emergency Medicine Australasia, 2012, 24, 595-603.	0.5	12
142	A 2-hour thrombolysis in myocardial infarction score outperforms other risk stratification tools in patients presenting with possible acute coronary syndromes. American Heart Journal, 2012, 164, 516-523.	1.2	24
143	2-Hour Accelerated Diagnostic Protocol to Assess Patients With Chest Pain Symptoms Using Contemporary Troponins as the Only Biomarker. Journal of the American College of Cardiology, 2012, 59, 2091-2098.	1.2	361
144	Examining the Signs and Symptoms Experienced by Individuals With Suspected Acute Coronary Syndrome in the Asia-Pacific Region: A Prospective Observational Study. Annals of Emergency Medicine, 2012, 60, 777-785.e3.	0.3	36

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145	The role of cardiac computed tomography in assessment of acute chest pain. Heart Lung and Circulation, 2012, 21, 763.	0.2	0
146	Highly sensitive troponin assays â€" a twoâ€edged sword?. Medical Journal of Australia, 2012, 197, 320-323.	0.8	6
147	A New Improved Accelerated Diagnostic Protocol Safely Identifies Lowâ€risk Patients With Chest Pain in the Emergency Department. Academic Emergency Medicine, 2012, 19, 510-516.	0.8	36
148	A 2-h diagnostic protocol to assess patients with chest pain symptoms in the Asia-Pacific region (ASPECT): a prospective observational validation study. Lancet, The, 2011, 377, 1077-1084.	6.3	316
149	Troponin: A riskâ€defining biomarker for emergency department physicians. EMA - Emergency Medicine Australasia, 2011, 23, 391-394.	0.5	1
150	Early Dynamic Change in High-Sensitivity Cardiac Troponin T in the Investigation of Acute Myocardial Infarction. Clinical Chemistry, 2011, 57, 1154-1160.	1.5	63
151	Comprehensive standardized data definitions for acute coronary syndrome research in emergency departments in Australasia. EMA - Emergency Medicine Australasia, 2010, 22, 35-55.	0.5	96
152	Future Developments in Chest Pain Diagnosis and Management. Medical Clinics of North America, 2010, 94, 375-400.	1.1	5