Eric Goralnick

List of Publications by Year in Descending Order

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The third column is the impact factor (IF) of the journal, and the fourth column is the number of citations of the article.

62 692 14 24 g-index

67 1,009 6.3 4.31 ext. papers ext. citations avg, IF L-index

#	Paper	IF	Citations
62	Geospatial Analysis of Access to Emergency Cesarean Delivery for Military and Civilian Populations in the US <i>JAMA Network Open</i> , 2022 , 5, e2142835	10.4	1
61	Emergency Physician Involvement in Hospital Preparedness: A National Survey of Academic Medical Centers. <i>Disaster Medicine and Public Health Preparedness</i> , 2021 , 15, 427-430	2.8	3
60	Critical Concepts for COVID-19 Mass Vaccination Site Operations. <i>Disaster Medicine and Public Health Preparedness</i> , 2021 , 1-7	2.8	O
59	Cardiopulmonary resuscitation (CPR) training strategies in the times of COVID-19: a systematic literature review comparing different training methodologies. <i>Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine</i> , 2021 , 29, 53	3.6	6
58	Prehospital Trauma Care in Disasters and Other Mass Casualty Incidents - A Proposal for Hospital-Based Special Medical Response Teams. <i>Cureus</i> , 2021 , 13, e13657	1.2	1
57	Equity and Disasters: Reframing Incident Command Systems. <i>American Journal of Public Health</i> , 2021 , 111, 844-848	5.1	0
56	Emergency Department Utilization in the U.S. Military Health System. Military Medicine, 2021, 186, 606-	-61.3	1
55	Mass-Vaccination Sites - An Essential Innovation to Curb the Covid-19 Pandemic. <i>New England Journal of Medicine</i> , 2021 , 384, e67	59.2	26
54	Identifying Patterns and Predictors of Prescription Opioid Use After Total Joint Arthroplasty. <i>Military Medicine</i> , 2021 , 186, 587-592	1.3	6
53	Management of a parenteral opioid shortage using ASHP guidelines. <i>American Journal of Health-System Pharmacy</i> , 2021 , 78, 426-435	2.2	2
52	A SARS-CoV-2 Cluster in an Acute Care Hospital. <i>Annals of Internal Medicine</i> , 2021 , 174, 794-802	8	51
51	The Problem With ICD-Coded Firearm Injuries. JAMA Internal Medicine, 2021, 181, 1132-1133	11.5	4
50	Super-Utilization of the Emergency Department in a Universally Insured Population. <i>Military Medicine</i> , 2021 , 186, e819-e825	1.3	2
49	Performance of crisis standards of care guidelines in a cohort of critically ill COVID-19 patients in the United States. <i>Cell Reports Medicine</i> , 2021 , 2, 100376	18	1
48	An initiative to improve advanced notification of inter-hospital transfers. <i>Healthcare</i> , 2020 , 8, 100423	1.8	2
47	The Inpatient Discharge Lounge as a Potential Mechanism to Mitigate Emergency Department Boarding and Crowding. <i>Annals of Emergency Medicine</i> , 2020 , 75, 704-714	2.1	7
46	Impact of multidisciplinary team huddles on patient safety: a systematic review and proposed taxonomy. <i>BMJ Quality and Safety</i> , 2020 , 29, 1-2	5.4	14

(2019-2020)

45	The Association of State Firearm Legislation With the Burden of Firearm-Related Surgery. <i>Journal of Surgical Research</i> , 2020 , 255, 612-618	2.5	2	
44	Bleeding Control Training for the Lay Public: Keep it Simple-Reply. <i>JAMA Surgery</i> , 2020 , 155, 176	5.4		
43	Emergency General Surgery Volume and Its Impact on Outcomes in Military Treatment Facilities. Journal of Surgical Research, 2020 , 247, 287-293	2.5	1	
42	Five Decades of Global Chemical Terror Attacks: Data Analysis to Inform Training and Preparedness. <i>Disaster Medicine and Public Health Preparedness</i> , 2020 , 1-12	2.8	7	
41	Patterns and predictors of opioid prescribing and use after rib fractures. <i>Surgery</i> , 2020 , 168, 684-689	3.6	6	
40	Defining a Research Agenda for Layperson Prehospital Hemorrhage Control: A Consensus Statement. <i>JAMA Network Open</i> , 2020 , 3, e209393	10.4	8	
39	The Impact of Income on Emergency General Surgery Outcomes in Urban and Rural Areas. <i>Journal of Surgical Research</i> , 2020 , 245, 629-635	2.5	6	
38	Remote Highschool Hemorrhage Control (RHHECON) - Methods of a Randomized Control Trial. <i>Prehospital and Disaster Medicine</i> , 2019 , 34, s92-s92	0.8		
37	US Civilian Active Shooter Incidents Involving a Semiautomatic Rifle Are More Lethal Than Incidents Involving Other Firearms. <i>Journal of the American College of Surgeons</i> , 2019 , 229, 323	4.4	2	
36	Core Disaster Medicine Education (CDME) for Emergency Medicine Residents in the United States. <i>Prehospital and Disaster Medicine</i> , 2019 , 34, 473-480	0.8	4	
35	Disaster Medicine: A Comprehensive Review of the Literature From 2016. <i>Disaster Medicine and Public Health Preparedness</i> , 2019 , 13, 946-957	2.8	3	
34	The Optimal Length of Stay Associated With the Lowest Readmission Risk Following Surgery. Journal of Surgical Research, 2019 , 239, 292-299	2.5	5	
33	Just-in-Time Instructions for Layperson Tourniquet Application-Reply. JAMA Surgery, 2019, 154, 364	5.4		
32	Hemorrhage Control Training Promotes Resilience-Associated Traits in Medical Students. <i>Journal of Surgical Education</i> , 2019 , 76, 77-82	3.4	4	
31	Haemorrhage control in the prehospital setting: a scoping review protocol. <i>BMJ Open</i> , 2019 , 9, e02905	13	2	
30	No Racial Disparities In Surgical Care Quality Observed After Coronary Artery Bypass Grafting In TRICARE Patients. <i>Health Affairs</i> , 2019 , 38, 1307-1312	7	13	
29	Effectiveness of the American College of Surgeons Bleeding Control Basic Training Among Laypeople Applying Different Tourniquet Types: A Randomized Clinical Trial. <i>JAMA Surgery</i> , 2019 , 154, 923-929	5.4	11	
28	Equipping Public Spaces to Facilitate Rapid Point-of-Injury Hemorrhage Control After Mass Casualty. <i>American Journal of Public Health</i> , 2019 , 109, 236-241	5.1	8	

27	Building community resilience: A scalable model for hemorrhage-control training at a mass gathering site, using the RE-AIM framework. <i>Surgery</i> , 2019 , 165, 795-801	3.6	4
26	Access Delayed Is Access Denied: Relationship Between Access to Trauma Center Care and Pre-Hospital Death. <i>Journal of the American College of Surgeons</i> , 2019 , 228, 9-20	4.4	22
25	Can they stop the bleed? Evaluation of tourniquet application by individuals with varying levels of prior self-reported training. <i>Injury</i> , 2019 , 50, 10-15	2.5	21
24	The Gillette Stadium Experience: A Retrospective Review of Mass Gathering Events From 2010 to 2015. <i>Disaster Medicine and Public Health Preparedness</i> , 2018 , 12, 752-758	2.8	6
23	Effectiveness of Instructional Interventions for Hemorrhage Control Readiness for Laypersons in the Public Access and Tourniquet Training Study (PATTS): A Randomized Clinical Trial. <i>JAMA Surgery</i> , 2018 , 153, 791-799	5.4	51
22	Stop the Bleed Education Consortium: Education program content and delivery recommendations. <i>Journal of Trauma and Acute Care Surgery</i> , 2018 , 84, 205-210	3.3	40
21	Lethality of Civilian Active Shooter Incidents With and Without Semiautomatic Rifles in the United States. <i>JAMA - Journal of the American Medical Association</i> , 2018 , 320, 1034-1035	27.4	14
20	Post-Mortem Evaluation of Potentially Survivable Hemorrhagic Death in a Civilian Population. <i>Journal of the American College of Surgeons</i> , 2018 , 227, 502-506	4.4	15
19	Preparing for the Next Terrorism Attack: Lessons From Paris, Brussels, and Boston. <i>JAMA Surgery</i> , 2017 , 152, 419-420	5.4	16
18	Understanding the Emergency Preparedness Programs of Academic Health Systems. <i>Prehospital and Disaster Medicine</i> , 2017 , 32, S58-S59	0.8	
17	A Unique Program to Incorporate Volunteers Into a Nationwide Emergency Medical System-Reply. JAMA Surgery, 2017 , 152, 1089	5.4	7
16	Ebola Emergency Preparedness: Simulation Training for Frontline Health Care Professionals. MedEdPORTAL: the Journal of Teaching and Learning Resources, 2016, 12, 10433	1.2	14
15	A comparison of command center activations versus disaster drills at three institutions from 2013 to 2015. <i>American Journal of Disaster Medicine</i> , 2016 , 11, 33-42	0.6	1
15 14	A comparison of command center activations versus disaster drills at three institutions from 2013		3
	A comparison of command center activations versus disaster drills at three institutions from 2013 to 2015. <i>American Journal of Disaster Medicine</i> , 2016 , 11, 33-42	0.6	
14	A comparison of command center activations versus disaster drills at three institutions from 2013 to 2015. <i>American Journal of Disaster Medicine</i> , 2016 , 11, 33-42 A Death in the Family: Lessons From a Tragedy. <i>Annals of Surgery</i> , 2016 , 263, 230-1 The Boston Marathon Bombings Mass Casualty Incident: One Emergency Department's Information	o.6 7.8	3
14	A comparison of command center activations versus disaster drills at three institutions from 2013 to 2015. <i>American Journal of Disaster Medicine</i> , 2016 , 11, 33-42 A Death in the Family: Lessons From a Tragedy. <i>Annals of Surgery</i> , 2016 , 263, 230-1 The Boston Marathon Bombings Mass Casualty Incident: One Emergency Department Information Systems Challenges and Opportunities. <i>Annals of Emergency Medicine</i> , 2015 , 66, 51-9	0.67.82.1	3

LIST OF PUBLICATIONS

9	Leadership During the Boston Marathon Bombings: A Qualitative After-Action Review. <i>Disaster Medicine and Public Health Preparedness</i> , 2015 , 9, 489-95	2.8	14
8	Terrorist bombings: foreign bodies from the Boston Marathon bombing. <i>Seminars in Ultrasound, CT and MRI</i> , 2015 , 36, 68-72	1.7	13
7	Pharmacy Response to the Boston Marathon Bombings at a Tertiary Academic Medical Center. <i>Annals of Pharmacotherapy</i> , 2014 , 48, 1082-1085	2.9	2
6	The Boston Marathon bombing: after-action review of the Brigham and Women's Hospital emergency radiology response. <i>Radiology</i> , 2014 , 273, 78-87	20.5	33
5	Radiologic features of injuries from the Boston Marathon bombing at three hospitals. <i>American Journal of Roentgenology</i> , 2014 , 203, 235-9	5.4	25
4	The initial response to the Boston marathon bombing: lessons learned to prepare for the next disaster. <i>Annals of Surgery</i> , 2014 , 260, 960-6	7.8	106
3	We fight like we train. New England Journal of Medicine, 2013, 368, 1960-1	59.2	18
2	2013 Boston Marathon bombings: overview of an emergency department response to a mass casualty incident. <i>Disaster Medicine and Public Health Preparedness</i> , 2013 , 7, 118-21	2.8	7
1	Moses. Annals of Internal Medicine, 2011 , 154, 135-6	8	