

J Douglas Kirk

List of Publications by Citations

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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.

44
papers

1,865
citations

21
h-index

43
g-index

48
ext. papers

2,058
ext. citations

3.5
avg, IF

3.74
L-index

#	Paper	IF	Citations
44	Testing of low-risk patients presenting to the emergency department with chest pain: a scientific statement from the American Heart Association. <i>Circulation</i> , 2010 , 122, 1756-76	16.7	450
43	Immediate exercise testing to evaluate low-risk patients presenting to the emergency department with chest pain. <i>Journal of the American College of Cardiology</i> , 2002 , 40, 251-6	15.1	172
42	Prolonged emergency department stays of non-ST-segment-elevation myocardial infarction patients are associated with worse adherence to the American College of Cardiology/American Heart Association guidelines for management and increased adverse events. <i>Annals of Emergency Medicine</i> , 2007 , 50, 189-94	2.1	156
41	Frequency of acute coronary syndrome in patients presenting to the emergency department with chest pain after methamphetamine use. <i>Journal of Emergency Medicine</i> , 2003 , 24, 369-73	1.5	115
40	A proposal to standardize dyspnoea measurement in clinical trials of acute heart failure syndromes: the need for a uniform approach. <i>European Heart Journal</i> , 2008 , 29, 816-24	9.5	109
39	The Internet Tracking Registry of Acute Coronary Syndromes (i*trACS): a multicenter registry of patients with suspicion of acute coronary syndromes reported using the standardized reporting guidelines for emergency department chest pain studies. <i>Annals of Emergency Medicine</i> , 2006 , 48, 666-77, 677.e1-9	2.1	88
38	Emergency department and office-based evaluation of patients with chest pain. <i>Mayo Clinic Proceedings</i> , 2010 , 85, 284-99	6.4	83
37	Standardized reporting guidelines for studies evaluating risk stratification of ED patients with potential acute coronary syndromes. <i>Academic Emergency Medicine</i> , 2004 , 11, 1331-40	3.4	60
36	Illicit stimulant use in a United States heart failure population presenting to the emergency department (from the Acute Decompensated Heart Failure National Registry Emergency Module). <i>American Journal of Cardiology</i> , 2008 , 102, 1216-9	3	57
35	International variations in the clinical, diagnostic, and treatment characteristics of emergency department patients with acute heart failure syndromes. <i>European Journal of Heart Failure</i> , 2010 , 12, 1253-60	12.3	52
34	ED patients with heart failure: identification of an observational unit-appropriate cohort. <i>American Journal of Emergency Medicine</i> , 2006 , 24, 319-24	2.9	51
33	Bronchodilator therapy in acute decompensated heart failure patients without a history of chronic obstructive pulmonary disease. <i>Annals of Emergency Medicine</i> , 2008 , 51, 25-34	2.1	49
32	Exercise testing in chest pain units: rationale, implementation, and results. <i>Cardiology Clinics</i> , 2005 , 23, 503-16, vii	2.5	45
31	The impact of race on the acute management of chest pain. <i>Academic Emergency Medicine</i> , 2003 , 10, 1199-208	3.4	39
30	Society of Chest Pain Centers recommendations for the evaluation and management of the observation stay acute heart failure patient-parts 1-6. <i>Acute Cardiac Care</i> , 2009 , 11, 3-42		37
29	Society of Chest Pain Centers Recommendations for the evaluation and management of the observation stay acute heart failure patient: a report from the Society of Chest Pain Centers Acute Heart Failure Committee. <i>Critical Pathways in Cardiology</i> , 2008 , 7, 83-6	1.3	34
28	Changes in the numeric descriptive scale for pain after sublingual nitroglycerin do not predict cardiac etiology of chest pain. <i>Annals of Emergency Medicine</i> , 2005 , 45, 581-5	2.1	31

27	The Impact of Race on the Acute Management of Chest Pain. <i>Academic Emergency Medicine</i> , 2003 , 10, 1199-1208	3.4	28
26	Comparison of the HEART and TIMI Risk Scores for Suspected Acute Coronary Syndrome in the Emergency Department. <i>Critical Pathways in Cardiology</i> , 2016 , 15, 1-5	1.3	28
25	Acute ischemic syndromes. Chest pain center concept. <i>Cardiology Clinics</i> , 2002 , 20, 117-36	2.5	24
24	Risk stratification in women enrolled in the Acute Decompensated Heart Failure National Registry Emergency Module (ADHERE-EM). <i>Academic Emergency Medicine</i> , 2008 , 15, 151-8	3.4	22
23	Emergency physician high pretest probability for acute coronary syndrome correlates with adverse cardiovascular outcomes. <i>Academic Emergency Medicine</i> , 2009 , 16, 740-8	3.4	21
22	Frequency of acute coronary syndrome in patients with normal electrocardiogram performed during presence or absence of chest pain. <i>Academic Emergency Medicine</i> , 2009 , 16, 495-9	3.4	20
21	Early exercise testing in the management of low risk patients in chest pain centers. <i>Progress in Cardiovascular Diseases</i> , 2004 , 46, 438-52	8.5	16
20	Evaluation of patients with methamphetamine- and cocaine-related chest pain in a chest pain observation unit. <i>Critical Pathways in Cardiology</i> , 2007 , 6, 161-4	1.3	15
19	Design and rationale of the URGENT Dyspnea study: an international, multicenter, prospective study. <i>American Journal of Therapeutics</i> , 2008 , 15, 299-303	1	9
18	Utility of immediate exercise treadmill testing in patients taking beta blockers or calcium channel blockers. <i>American Journal of Cardiology</i> , 2002 , 90, 882-5	3	9
17	Interprofessional/interdisciplinary teamwork during the early COVID-19 pandemic: experience from a children's hospital within an academic health center. <i>Journal of Interprofessional Care</i> , 2020 , 34, 682-686	2.7	9
16	Value of high-sensitivity C-reactive protein in low risk chest pain observation unit patients. <i>International Journal of Emergency Medicine</i> , 2011 , 4, 37	3.9	5
15	Chest Pain Units. <i>Cardiology Clinics</i> , 2005 , 23, xiii-xiv	2.5	5
14	Association of Early Stress Testing with Outcomes for Emergency Department Evaluation of Suspected Acute Coronary Syndrome. <i>Critical Pathways in Cardiology</i> , 2016 , 15, 60-8	1.3	5
13	Pharmacologic stabilization and management of acute heart failure syndromes in the emergency department. <i>Heart Failure Clinics</i> , 2009 , 5, 43-54, vi	3.3	4
12	Standardized reporting criteria for studies evaluating suspected acute heart failure syndromes in the emergency department. <i>Journal of the American College of Cardiology</i> , 2012 , 60, 822-32	15.1	3
11	Can we identify those at risk for a nondiagnostic treadmill test in a chest pain observation unit?. <i>Critical Pathways in Cardiology</i> , 2008 , 7, 29-34	1.3	3
10	Chest pain units: management of special populations. <i>Cardiology Clinics</i> , 2005 , 23, 549-57, viii	2.5	3

9	Early exercise testing for risk stratification of low-risk patients in chest pain centers. <i>Critical Pathways in Cardiology</i> , 2004 , 3, 114-20	1.3	3
8	Disparity of care in the acute care of patients with heart failure. <i>Academic Emergency Medicine</i> , 2011 , 18, 15-21	3.4	2
7	Use of additional electrocardiograph leads in low-risk patients undergoing exercise treadmill testing. <i>Critical Pathways in Cardiology</i> , 2006 , 5, 123-6	1.3	2
6	Assessing the need for functional diagnostic testing in low-risk women with chest pain. <i>Critical Pathways in Cardiology</i> , 2006 , 5, 64-8	1.3	1
5	Upstream treatment of acute coronary syndrome in the ED. <i>American Journal of Emergency Medicine</i> , 2011 , 29, 446-56	2.9	
4	Use of benzodiazepines for chest pain: a new indication for an old drug?. <i>Journal of Emergency Medicine</i> , 2003 , 25, 459-61	1.5	
3	Challenges in the management of acutely decompensated congestive heart failure: disposition decisions in the emergency department. <i>The California Journal of Emergency Medicine</i> , 2003 , 4, 39-42		
2	The use of vasodilators in the treatment of acute decompensated heart failure: novel versus conventional therapy. <i>Critical Pathways in Cardiology</i> , 2004 , 3, 216-20	1.3	
1	Provocative Testing 2009 , 155-184		