

J Douglas Kirk

List of Publications by Year in Descending Order

Source: <https://exaly.com/author-pdf/11872867/j-douglas-kirk-publications-by-year.pdf>

Version: 2024-04-20

This document has been generated based on the publications and citations recorded by exaly.com. For the latest version of this publication list, visit the link given above.

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	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
43	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
42	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
41	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
40	Upstream treatment of acute coronary syndrome in the ED. <i>American Journal of Emergency Medicine</i> , 2011 , 29, 446-56	2.9	
39	Disparity of care in the acute care of patients with heart failure. <i>Academic Emergency Medicine</i> , 2011 , 18, 15-21	3.4	2
38	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
37	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
36	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
35	Emergency department and office-based evaluation of patients with chest pain. <i>Mayo Clinic Proceedings</i> , 2010 , 85, 284-99	6.4	83
34	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
33	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
32	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
31	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
30	Provocative Testing 2009 , 155-184		
29	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
28	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

27	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
26	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
25	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
24	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
23	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
22	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, 488-94	2.1	156
21	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
20	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
19	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
18	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
17	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
16	Exercise testing in chest pain units: rationale, implementation, and results. <i>Cardiology Clinics</i> , 2005 , 23, 503-16, vii	2.5	45
15	Chest pain units: management of special populations. <i>Cardiology Clinics</i> , 2005 , 23, 549-57, viii	2.5	3
14	Chest Pain Units. <i>Cardiology Clinics</i> , 2005 , 23, xiii-xiv	2.5	5
13	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
12	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
11	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
10	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

9	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	
8	The Impact of Race on the Acute Management of Chest Pain. <i>Academic Emergency Medicine</i> , 2003 , 10, 1199-1208	3.4	28
7	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	
6	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
5	The impact of race on the acute management of chest pain. <i>Academic Emergency Medicine</i> , 2003 , 10, 1199-208	3.4	39
4	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		
3	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
2	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
1	Acute ischemic syndromes. Chest pain center concept. <i>Cardiology Clinics</i> , 2002 , 20, 117-36	2.5	24