

Brian R Holroyd

List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/1543127/publications.pdf>

Version: 2024-02-01

78
papers

3,665
citations

172457
29
h-index

133252
59
g-index

78
all docs

78
docs citations

78
times ranked

3217
citing authors

#	ARTICLE	IF	CITATIONS
1	First Nations status and emergency department triage scores in Alberta: a retrospective cohort study. Cmaj, 2022, 194, E37-E45.	2.0	17
2	Subgroups of people who make frequent emergency department visits in Ontario and Alberta: a retrospective cohort study. CMAJ Open, 2022, 10, E232-E246.	2.4	3
3	People who make frequent emergency department visits based on persistence of frequent use in Ontario and Alberta: a retrospective cohort study. CMAJ Open, 2022, 10, E220-E231.	2.4	7
4	Impacts of racism on First Nations patients' emergency care: results of a thematic analysis of healthcare provider interviews in Alberta, Canada. BMC Health Services Research, 2022, 22, .	2.2	7
5	Identifying subgroups and risk among frequent emergency department users in British Columbia. Journal of the American College of Emergency Physicians Open, 2021, 2, e12346.	0.7	11
6	First Nations emergency care in Alberta: descriptive results of a retrospective cohort study. BMC Health Services Research, 2021, 21, 423.	2.2	15
7	Opioid use disorder treatment disruptions during the early COVID-19 pandemic and other emergent disasters: a scoping review addressing dual public health emergencies. BMC Public Health, 2021, 21, 1471.	2.9	14
8	Characteristics of frequent emergency department users in British Columbia, Canada: a retrospective analysis. CMAJ Open, 2021, 9, E134-E141.	2.4	16
9	The competency-based medical education evolution of Canadian emergency medicine specialist training. Canadian Journal of Emergency Medicine, 2020, 22, 95-102.	1.1	41
10	Despite Having Worse Risk Profiles, Northern Albertans Wait Longer for Specialist Follow-up After Emergency Department Visits for Atrial Fibrillation. CJC Open, 2020, 2, 610-618.	1.5	0
11	Multi-site intervention to improve emergency department care for patients who live with opioid use disorder: A quantitative evaluation. Canadian Journal of Emergency Medicine, 2020, 22, 784-792.	1.1	13
12	Updated framework on quality and safety in emergency medicine. Emergency Medicine Journal, 2020, 37, 437-442.	1.0	29
13	Patient race, ethnicity, and care in the emergency department: A scoping review. Canadian Journal of Emergency Medicine, 2020, 22, 245-253.	1.1	23
14	Emergency Strategic Clinical Network. Cmaj, 2019, 191, S24-S26.	2.0	3
15	Template for uniform reporting of emergency department measures, consensus according to the Utstein method. European Journal of Emergency Medicine, 2019, 26, 417-422.	1.1	4
16	Choosing Wisely Canada's emergency medicine recommendations: Time for a revision. Canadian Journal of Emergency Medicine, 2019, 21, 717-720.	1.1	5
17	Clinical Informatics Competencies in the Emergency Medicine Specialist Training Standards of Five International Jurisdictions. AEM Education and Training, 2018, 2, 293-300.	1.2	4
18	Predictors of Admission in Adult Unscheduled Return Visits to the Emergency Department. Western Journal of Emergency Medicine, 2018, 19, 912-918.	1.1	23

#	ARTICLE	IF	CITATIONS
19	Predictors of Admission in Adult Unscheduled Return Visits to the Emergency Department. Western Journal of Emergency Medicine, 2018, 19, 912-918.	1.1	13
20	Choosing Wisely Canada [®] : Five tests, procedures and treatments to question in Emergency Medicine. Canadian Journal of Emergency Medicine, 2017, 19, S9-S17.	1.1	28
21	Sex Differences in Outcomes After Discharge from the Emergency Department for Atrial Fibrillation/Flutter. Canadian Journal of Cardiology, 2017, 33, 806-813.	1.7	6
22	Low-acuity presentations to the emergency department in Canada: exploring the alternative attempts to avoid presentation. Emergency Medicine Journal, 2017, 34, 249-255.	1.0	13
23	The future of emergency medicine in Canada: Reflections one year after the release of the Collaborative Working Group final report. Canadian Journal of Emergency Medicine, 2017, 19, S38-S39.	1.1	3
24	Emergency Medicine Training and Practice in Canada: Celebrating the Past & Evolving for the Future. Canadian Journal of Emergency Medicine, 2017, 19, S1-S8.	1.1	13
25	Volume Matters: Improved Outcomes for Patients Presenting to High-Volume Emergency Departments with Atrial Flutter and Fibrillation. PLoS ONE, 2016, 11, e0165894.	2.5	6
26	CAEP 2015 Academic Symposium: Leadership within the emergency medicine academic community and beyond. Canadian Journal of Emergency Medicine, 2016, 18, S1-S9.	1.1	9
27	Emergency department presentations for atrial fibrillation and flutter in Alberta: a large population-based study. BMC Emergency Medicine, 2016, 17, 2.	1.9	9
28	Geographic Clustering of Emergency Department Presentations for Atrial Fibrillation and Flutter in Alberta, Canada. Academic Emergency Medicine, 2015, 22, 965-975.	1.8	5
29	CAEP 2014 Academic Symposium: "How to make research succeed in your emergency department: How to develop and train career researchers in emergency medicine" Canadian Journal of Emergency Medicine, 2015, 17, 334-343.	1.1	16
30	Administration and leadership competencies: establishment of a national consensus for emergency medicine. Canadian Journal of Emergency Medicine, 2015, 17, 107-114.	1.1	12
31	The role of a rapid assessment zone/pod on reducing overcrowding in emergency departments: a systematic review. Emergency Medicine Journal, 2012, 29, 372-378.	1.0	59
32	The role of full capacity protocols on mitigating overcrowding in EDs. American Journal of Emergency Medicine, 2012, 30, 412-420.	1.6	29
33	The Role of Triage Liaison Physicians on Mitigating Overcrowding in Emergency Departments: A Systematic Review. Academic Emergency Medicine, 2011, 18, 111-120.	1.8	90
34	The Role of Triage Nurse Ordering on Mitigating Overcrowding in Emergency Departments: A Systematic Review. Academic Emergency Medicine, 2011, 18, 1349-1357.	1.8	75
35	Delphi Consensus on the Feasibility of Translating the ACEP Clinical Policies Into Computerized Clinical Decision Support. Annals of Emergency Medicine, 2010, 56, 317-320.	0.6	21
36	A prospective cluster-randomized trial to implement the Canadian CT Head Rule in emergency departments. Cmaj, 2010, 182, 1527-1532.	2.0	112

#	ARTICLE	IF	CITATIONS
37	Implementation of the Canadian C-Spine Rule: prospective 12 centre cluster randomised trial. BMJ: British Medical Journal, 2009, 339, b4146-b4146.	2.3	129
38	Tracking Emergency Department Overcrowding in a Tertiary Care Academic Institution. Healthcare Quarterly, 2009, 12, 99-106.	0.7	56
39	Assessing the Sensibility of Two Clinical Decision Support Systems. Journal of Medical Systems, 2008, 32, 361-368.	3.6	18
40	Consultations in the emergency department: a systematic review of the literature. Emergency Medicine Journal, 2008, 25, 4-9.	1.0	73
41	Increasing the Use of Anti-Inflammatory Agents for Acute Asthma in the Emergency Department: Experience with an Asthma Care Map. Canadian Respiratory Journal, 2008, 15, 20-26.	1.6	8
42	The effect of training on nurse agreement using an electronic triage system. Canadian Journal of Emergency Medicine, 2007, 9, 260-266.	1.1	35
43	Clinical risk scoring beyond initial troponin values: Results from a large, prospective, unselected acute chest pain population. Canadian Journal of Cardiology, 2007, 23, 287-292.	1.7	4
44	Decision Support Technology in Knowledge Translation. Academic Emergency Medicine, 2007, 14, 942-948.	1.8	17
45	Informatics and Knowledge Translation. Academic Emergency Medicine, 2007, 14, 996-1002.	1.8	11
46	Predictive Validity of a Computerized Emergency Triage Tool. Academic Emergency Medicine, 2007, 14, 16-21.	1.8	84
47	Impact of a Triage Liaison Physician on Emergency Department Overcrowding and Throughput: A Randomized Controlled Trial. Academic Emergency Medicine, 2007, 14, 702-708.	1.8	141
48	Persistence, reproducibility, and cost-effectiveness of an intervention to improve the quality of osteoporosis care after a fracture of the wrist: results of a controlled trial. Osteoporosis International, 2007, 18, 261-270.	3.1	84
49	Decision Support Technology in Knowledge Translation. Academic Emergency Medicine, 2007, 14, 942-948.	1.8	18
50	Informatics and Knowledge Translation. Academic Emergency Medicine, 2007, 14, 996-1002.	1.8	10
51	Frequency, Determinants and Impact of Overcrowding in Emergency Departments in Canada: A National Survey. Healthcare Quarterly, 2007, 10, 32-40.	0.7	142
52	Educational intervention to reduce falls and fear of falling in patients after fragility fracture: Results of a controlled pilot study. Preventive Medicine, 2006, 42, 316-319.	3.4	40
53	Reliability of Computerized Emergency Triage. Academic Emergency Medicine, 2006, 13, 269-275.	1.8	61
54	Characteristics of Patients Who Leave Emergency Departments without Being Seen. Academic Emergency Medicine, 2006, 13, 848-852.	1.8	142

#	ARTICLE	IF	CITATIONS
55	Emergency Triage: Comparing a Novel Computer Triage Program with Standard Triage. Academic Emergency Medicine, 2005, 12, 502-507.	1.8	59
56	Comparison of the Canadian CT Head Rule and the New Orleans Criteria in Patients With Minor Head Injury. JAMA - Journal of the American Medical Association, 2005, 294, 1511.	7.4	414
57	Current political issues facing emergency medicine in Canada. EMA - Emergency Medicine Australasia, 2004, 16, 190-194.	1.1	9
58	Supporting Clinical Practice at the Bedside Using Wireless Technology. Academic Emergency Medicine, 2004, 11, 1186-1192.	1.8	19
59	Standardized Reporting Guidelines for Studies Evaluating Risk Stratification of ED Patients with Potential Acute Coronary Syndromes. Academic Emergency Medicine, 2004, 11, 1331-1340.	1.8	65
60	Uptake of validated clinical practice guidelines: experience with implementing the Ottawa Ankle Rules. American Journal of Emergency Medicine, 2004, 22, 149-155.	1.6	29
61	The Canadian C-Spine Rule versus the NEXUS Low-Risk Criteria in Patients with Trauma. New England Journal of Medicine, 2003, 349, 2510-2518.	27.0	582
62	Canadian C-Spine Rule study for alert and stable trauma patients: I. Background and rationale. Canadian Journal of Emergency Medicine, 2002, 4, 84-90.	1.1	48
63	Adherence to Practice Guidelines for Transient Ischemic Attacks in an Emergency Department. Canadian Journal of Neurological Sciences, 2002, 29, 358-363.	0.5	20
64	Evaluation of patient satisfaction and outcomes after assessment for acute ankle injuries. American Journal of Emergency Medicine, 2002, 20, 18-22.	1.6	18
65	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.	1.1	34
66	Cardiology and emergency medicine: United We Stand, divided we fall. Annals of Emergency Medicine, 2002, 39, 164-167.	0.6	6
67	ED management of cellulitis: A review of five urban centers. American Journal of Emergency Medicine, 2001, 19, 535-540.	1.6	77
68	Osteoporosis Follow-up After Wrist Fractures Following Minor Trauma. Archives of Internal Medicine, 2001, 161, 1309.	3.8	114
69	Canadian CT head rule study for patients with minor head injury: Methodology for phase II (validation) Tj ETQq1 1 0,784314 rgBT /Overl	0.6	74
70	The canadian CT head rule study for patients with minor head injury: Rationale, objectives, and methodology for phase I (derivation). Annals of Emergency Medicine, 2001, 38, 160-169.	0.6	110
71	Manpower crisis in emergency medicine: Can residency programs make an impact?. Canadian Journal of Emergency Medicine, 2000, 2, 103-105.	1.1	4
72	Residency Training Via Videoconference - Satisfaction Survey. Telemedicine Journal and E-Health, 2000, 6, 425-428.	2.8	11

#	ARTICLE	IF	CITATIONS
73	Nebulized Ipratropium Bromide in Acute Pediatric Asthma: Does It Reduce Hospital Admissions Among Children Presenting to the Emergency Department?. Annals of Emergency Medicine, 1999, 34, 75-85.	0.6	11
74	Guidelines for the use of imaging techniques for the investigation of venous thromboembolic disease. Journal of Emergency Medicine, 1998, 16, 663-668.	0.7	3
75	New Models for Emergency and Ambulatory Care at Academic Health Centersâ€”Part III: Boston and Alberta, Canada. Academic Emergency Medicine, 1995, 2, 1001-1006.	1.8	1
76	Cocaine-associated dissection of the thoracic aorta. Journal of Emergency Medicine, 1992, 10, 723-727.	0.7	38
77	Prehospital patients refusing care. Annals of Emergency Medicine, 1988, 17, 957-963.	0.6	38
78	Medical Control. JAMA - Journal of the American Medical Association, 1986, 256, 1027.	7.4	54