

Robert Ohle

List of Publications by Year in descending order

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Version: 2024-02-01

32
papers

747
citations

858243

12
h-index

591227

27
g-index

32
all docs

32
docs citations

32
times ranked

976
citing authors

#	ARTICLE	IF	CITATIONS
1	Barriers and facilitators to nursing delirium screening in older emergency patients: a qualitative study using the theoretical domains framework. <i>Age and Ageing</i> , 2022, 51, .	0.7	16
2	Diagnostic Accuracy of the HINTS Exam in an Emergency Department: A Retrospective Chart Review. <i>Academic Emergency Medicine</i> , 2021, 28, 387-393.	0.8	35
3	A homemade CPR trainer can enable real time practice during online hands only CPR training. <i>Resuscitation</i> , 2021, 158, 71-72.	1.3	3
4	The impact of an outpatient parenteral antibiotic therapy (OPAT) clinic for adults with cellulitis: an interrupted time series study. <i>Internal and Emergency Medicine</i> , 2021, 16, 1935-1944.	1.0	4
5	Kussmaul's sign for the diagnosis of right ventricular myocardial infarction: a systematic review and meta-analysis of diagnostic test accuracy studies. <i>Canadian Journal of Emergency Medicine</i> , 2021, 23, 185-194.	0.5	0
6	The use and misuse of the Dix-Hallpike test in the emergency department. <i>Canadian Journal of Emergency Medicine</i> , 2021, 23, 613-616.	0.5	9
7	Does implementation of a diagnostic pathway for acute aortic syndrome including D-dimer increase the usage of D-dimer and computed tomography?. <i>Canadian Journal of Emergency Medicine</i> , 2021, 23, 494-499.	0.5	0
8	CJEM Debate Series: contrast-enhanced imaging should not be withheld for emergency department patients as contrast-induced acute kidney injury is very uncommon. <i>Canadian Journal of Emergency Medicine</i> , 2021, 23, 432-436.	0.5	5
9	Is a homemade cardiopulmonary resuscitation (CPR) trainer non-inferior to a commercially available CPR mannequin in teaching high-quality CPR? A non-inferiority randomized control trial. <i>Resuscitation Plus</i> , 2021, 6, 100134.	0.6	1
10	Barriers and facilitators affecting implementation of the Canadian clinical practice guidelines for the diagnosis of acute aortic syndrome. <i>Implementation Science Communications</i> , 2021, 2, 60.	0.8	3
11	CCEDRRN COVID-19 Infection Score (CCIS): development and validation in a Canadian cohort of a clinical risk score to predict SARS-CoV-2 infection in patients presenting to the emergency department with suspected COVID-19. <i>BMJ Open</i> , 2021, 11, e055832.	0.8	13
12	Diagnosing acute aortic syndrome: a Canadian clinical practice guideline. <i>Cmaj</i> , 2020, 192, E832-E843.	0.9	18
13	National survey of emergency physicians on the risk stratification and acceptable miss rate of acute aortic syndrome. <i>Canadian Journal of Emergency Medicine</i> , 2020, 22, 309-312.	0.5	4
14	Traumatic pneumothorax mapping using computed tomography to assess optimal area to scan with POCUS. <i>Canadian Journal of Emergency Medicine</i> , 2020, 22, 708-711.	0.5	2
15	Can Emergency Physicians Accurately Rule Out a Central Cause of Vertigo Using the HINTS Examination? A Systematic Review and Meta-analysis. <i>Academic Emergency Medicine</i> , 2020, 27, 887-896.	0.8	63
16	Just the Facts: Protected code blue "Cardiopulmonary resuscitation in the emergency department during the coronavirus disease 2019 pandemic. <i>Canadian Journal of Emergency Medicine</i> , 2020, 22, 431-434.	0.5	5
17	Predicting Patient Admission From the Emergency Department Using Administrative and Diagnostic Data. <i>International Journal of Extreme Automation and Connectivity in Healthcare</i> , 2020, 2, 1-11.	0.1	0
18	What Is the Specificity of the Aortic Dissection Detection Risk Score in a Low-prevalence Population?. <i>Academic Emergency Medicine</i> , 2019, 26, 632-638.	0.8	14

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19	Triple-sequential defibrillation for refractory ventricular fibrillation in a 24-year-old male out of hospital cardiac arrest. Canadian Journal of Emergency Medicine, 2019, 21, 809-811.	0.5	0
20	How do I rule out aortic dissection?. Canadian Journal of Emergency Medicine, 2019, 21, 34-36.	0.5	0
21	A simple intervention to reduce your chance of missing an acute aortic dissection. Canadian Journal of Emergency Medicine, 2019, 21, 618-621.	0.5	2
22	Computed tomography for suspected pulmonary embolism results in a large number of non-significant incidental findings and follow-up investigations. Emergency Radiology, 2019, 26, 29-35.	1.0	28
23	Variation in emergency department use of computed tomography for investigation of acute aortic dissection. Emergency Radiology, 2018, 25, 293-298.	1.0	18
24	Clinical Examination for Acute Aortic Dissection: A Systematic Review and Meta-analysis. Academic Emergency Medicine, 2018, 25, 397-412.	0.8	41
25	The immigrant effect: factors impacting use of primary and emergency department care – a Canadian population cross-sectional study. Canadian Journal of Emergency Medicine, 2018, 20, 260-265.	0.5	4
26	High Risk Clinical Features for Acute Aortic Dissection: A Case-control Study. Academic Emergency Medicine, 2018, 25, 378-387.	0.8	20
27	Bilateral blood pressure differential as a clinical marker for acute aortic dissection in the emergency department. Emergency Medicine Journal, 2018, 35, 556-558.	0.4	12
28	Diagnosing Acute Aortic Dissection: Both an Art and a Science. Academic Emergency Medicine, 2018, 25, 1186-1186.	0.8	1
29	Factors associated with choosing the emergency department as the primary access point to health care: a Canadian population cross-sectional study. Canadian Journal of Emergency Medicine, 2017, 19, 271-276.	0.5	6
30	Clinical Decision Rules for Diagnostic Imaging in the Emergency Department: A Research Agenda. Academic Emergency Medicine, 2015, 22, 1406-1416.	0.8	36
31	Sonography of the Optic Nerve Sheath Diameter for Detection of Raised Intracranial Pressure Compared to Computed Tomography. Journal of Ultrasound in Medicine, 2015, 34, 1285-1294.	0.8	154
32	The effects of forced exercise on hippocampal plasticity in the rat: A comparison of LTP, spatial- and non-spatial learning. Behavioural Brain Research, 2007, 176, 362-366.	1.2	230