

Robin L Urquhart

List of Publications by Year in descending order

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Version: 2024-02-01

121
papers

2,023
citations

361296

20
h-index

315616

38
g-index

122
all docs

122
docs citations

122
times ranked

3176
citing authors

| # | ARTICLE | IF | CITATIONS |
|----|--|-----|-----------|
| 1 | Long-term alterations in somatosensory functioning in survivors of childhood cancer. <i>Pain</i> , 2022, 163, 1193-1205. | 2.0 | 5 |
| 2 | Socioeconomic inequalities in colorectal cancer incidence in Canada: trends over two decades. <i>Cancer Causes and Control</i> , 2022, 33, 193-204. | 0.8 | 9 |
| 3 | The roles, activities and impacts of middle managers who function as knowledge brokers to improve care delivery and outcomes in healthcare organizations: a critical interpretive synthesis. <i>BMC Health Services Research</i> , 2022, 22, 11. | 0.9 | 6 |
| 4 | Knowledge translation strategies for policy and action focused on sexual, reproductive, maternal, newborn, child and adolescent health and well-being: a rapid scoping review. <i>BMJ Open</i> , 2022, 12, e053919. | 0.8 | 3 |
| 5 | Psychosocial Distress in Parents with Children Awaiting Surgery during the COVID-19 Pandemic. <i>Children</i> , 2022, 9, 87. | 0.6 | 7 |
| 6 | Prioritization of indicators of the quality of care provided to older adults with frailty by key stakeholders from five canadian provinces. <i>BMC Geriatrics</i> , 2022, 22, 149. | 1.1 | 0 |
| 7 | Mapping Canadian Data Assets to Generate Real-World Evidence: Lessons Learned from Canadian Real-World Evidence for Value of Cancer Drugs (CanREValue) Collaboration's RWE Data Working Group. <i>Current Oncology</i> , 2022, 29, 2046-2063. | 0.9 | 2 |
| 8 | Impacts of patient and family engagement in hospital planning and improvement: qualitative interviews with patient/family advisors and hospital staff. <i>BMC Health Services Research</i> , 2022, 22, 360. | 0.9 | 3 |
| 9 | Prospective study of breakfast frequency and timing and the risk of incident type 2 diabetes in community-dwelling older adults: the Cardiovascular Health Study. <i>American Journal of Clinical Nutrition</i> , 2022, 116, 325-334. | 2.2 | 7 |
| 10 | Understanding Cancer Survivors' Needs and Experiences Returning to Work Post-Treatment: A Longitudinal Qualitative Study. <i>Current Oncology</i> , 2022, 29, 3013-3025. | 0.9 | 2 |
| 11 | Risk Stratification and Cancer Follow-Up: Towards More Personalized Post-Treatment Care in Canada. <i>Current Oncology</i> , 2022, 29, 3215-3223. | 0.9 | 6 |
| 12 | Pain and Fear of Cancer Recurrence in Survivors of Childhood Cancer. <i>Clinical Journal of Pain</i> , 2022, 38, 484-491. | 0.8 | 5 |
| 13 | A qualitative descriptive study of the role of nurse, allied health and physician middle managers who function as knowledge brokers in hospitals. <i>Worldviews on Evidence-Based Nursing</i> , 2022, 19, 477-488. | 1.2 | 3 |
| 14 | Few guidelines offer recommendations on how to assess and manage anxiety and distress in children with cancer: a content analysis. <i>Supportive Care in Cancer</i> , 2021, 29, 2279-2288. | 1.0 | 4 |
| 15 | Prospective Study of Skipping Meals to Lose Weight as a Predictor of Incident Type 2 Diabetes With Potential Modification by Cardiometabolic Risk Factors: The Canadian 1995 Nova Scotia Health Survey. <i>Canadian Journal of Diabetes</i> , 2021, 45, 306-312. | 0.4 | 6 |
| 16 | Workforce Planning for Community-Based Palliative Care Specialist Teams Using Operations Research. <i>Journal of Pain and Symptom Management</i> , 2021, 61, 1012-1022.e4. | 0.6 | 6 |
| 17 | How do inner and outer settings affect implementation of a community-based innovation for older adults with a serious illness: a qualitative study. <i>BMC Health Services Research</i> , 2021, 21, 42. | 0.9 | 7 |
| 18 | Identifying factors influencing sustainability of innovations in cancer survivorship care: a qualitative study. <i>BMJ Open</i> , 2021, 11, e042503. | 0.8 | 7 |

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|----|--|-----|-----------|
| 19 | Developing a Canadian evaluation framework for patient and public engagement in research: study protocol. <i>Research Involvement and Engagement</i> , 2021, 7, 10. | 1.1 | 14 |
| 20 | Hospital capacity for patient engagement in planning and improving health services: a cross-sectional survey. <i>BMC Health Services Research</i> , 2021, 21, 179. | 0.9 | 13 |
| 21 | Approaches to optimize patient and family engagement in hospital planning and improvement: Qualitative interviews. <i>Health Expectations</i> , 2021, 24, 967-977. | 1.1 | 16 |
| 22 | Rationale and protocol for a randomized waitlist controlled trial of videoconference delivered cognitive behaviour therapy for insomnia (CBT-I) to improve perceived cognitive impairment (PCI) among cancer survivors. <i>Contemporary Clinical Trials</i> , 2021, 103, 106322. | 0.8 | 4 |
| 23 | Implementing Advance Care Planning Tools in Practice: A Modified World Caf  to Elicit Barriers and Recommendations from Potential Adopters. <i>Healthcare Quarterly (Toronto, Ont)</i> , 2021, 24, 60-68. | 0.3 | 2 |
| 24 | Psychosocial Distress in Adult Patients Awaiting Cancer Surgery during the COVID-19 Pandemic. <i>Current Oncology</i> , 2021, 28, 1867-1878. | 0.9 | 26 |
| 25 | Nurse Navigators  Views on Patient and System Factors Associated with Navigation Needs among Women with Breast Cancer. <i>Current Oncology</i> , 2021, 28, 2107-2114. | 0.9 | 4 |
| 26 | Engaging family caregivers and health system partners in exploring how multi-level contexts in primary care practices affect case management functions and outcomes of patients and family caregivers at end of life: a realist synthesis. <i>BMC Palliative Care</i> , 2021, 20, 114. | 0.8 | 7 |
| 27 | What Matters in Cancer Survivorship Research? A Suite of Stakeholder-Relevant Outcomes. <i>Current Oncology</i> , 2021, 28, 3188-3200. | 0.9 | 6 |
| 28 | Factors Affecting Access to Administrative Health Data for Research in Canada: A Study Protocol. <i>International Journal of Population Data Science</i> , 2021, 6, 1653. | 0.1 | 2 |
| 29 | Patient and family financial burden associated with cancer treatment in Canada: a national study. <i>Supportive Care in Cancer</i> , 2021, 29, 3377-3386. | 1.0 | 43 |
| 30 | A Program of Research to Evaluate the Impact of Deceased Organ Donation Legislative Reform in Nova Scotia: The LEADDR Program. <i>Transplantation Direct</i> , 2021, 7, e641. | 0.8 | 11 |
| 31 | Factors Associated with Meeting the Psychosocial Needs of Cancer Survivors in Nova Scotia, Canada. <i>Current Oncology</i> , 2021, 28, 13-25. | 0.9 | 10 |
| 32 | Organizational capacity for patient and family engagement in hospital planning and improvement: interviews with patient/family advisors, managers and clinicians. <i>International Journal for Quality in Health Care</i> , 2021, 33, . | 0.9 | 7 |
| 33 | 116: Advancing Radiation Oncology Practice in Atlantic Canada (AROPAC). <i>Radiotherapy and Oncology</i> , 2021, 163, S50. | 0.3 | 0 |
| 34 | Stakeholder-Identified Interventions to Address Cancer Survivors  Psychosocial Needs after Completing Treatment. <i>Current Oncology</i> , 2021, 28, 4961-4971. | 0.9 | 0 |
| 35 | Socioeconomic Gradients in Prostate Cancer Incidence Among Canadian Males: A Trend Analysis From 1992 to 2010. <i>Cancer Control</i> , 2021, 28, 107327482110552. | 0.7 | 6 |
| 36 | Physical Activity and Cancer Care in the Atlantic Canadian Provinces: an Examination of Provider Beliefs, Practices, Resources, Barriers, and Enablers. <i>Journal of Cancer Education</i> , 2020, 35, 946-953. | 0.6 | 6 |

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|----|---|-----|-----------|
| 37 | Recommendations to improve patient-centred care for ductal carcinoma in situ: Qualitative focus groups with women. <i>Health Expectations</i> , 2020, 23, 106-114. | 1.1 | 8 |
| 38 | Assessing the Quality of Care Provided to Older Persons with Frailty in Five Canadian Provinces, Using Administrative Data. <i>Canadian Journal on Aging</i> , 2020, 39, 52-68. | 0.6 | 2 |
| 39 | Views of advanced cancer patients, families, and oncologists on initiating and engaging in advance care planning: a qualitative study. <i>BMC Palliative Care</i> , 2020, 19, 150. | 0.8 | 14 |
| 40 | Patient and caregiver perspectives on early identification for advance care planning in primary healthcare settings. <i>BMC Family Practice</i> , 2020, 21, 136. | 2.9 | 6 |
| 41 | How do guideline developers identify, incorporate and report patient preferences? An international cross-sectional survey. <i>BMC Health Services Research</i> , 2020, 20, 458. | 0.9 | 16 |
| 42 | The Experiences of Young Adults Living with Metastatic/Advanced Cancer: A Scoping Review. <i>Journal of Adolescent and Young Adult Oncology</i> , 2020, 9, 145-156. | 0.7 | 7 |
| 43 | Defining sustainability in practice: views from implementing real-world innovations in health care. <i>BMC Health Services Research</i> , 2020, 20, 87. | 0.9 | 19 |
| 44 | Identifying opportunities to support patient-centred care for ductal carcinoma in situ: qualitative interviews with clinicians. <i>BMC Cancer</i> , 2020, 20, 364. | 1.1 | 3 |
| 45 | “It Could Have Been Me” An Interpretive Phenomenological Analysis of Health Care Providers' Experiences Caring for Adolescents and Young Adults with Terminal Cancer. <i>Journal of Adolescent and Young Adult Oncology</i> , 2019, 8, 587-592. | 0.7 | 11 |
| 46 | When “a headache is not just a headache” A qualitative examination of parent and child experiences of pain after childhood cancer. <i>Psycho-Oncology</i> , 2019, 28, 1901-1909. | 1.0 | 26 |
| 47 | National consensus recommendations on patient-centered care for ductal carcinoma in situ. <i>Breast Cancer Research and Treatment</i> , 2019, 174, 561-570. | 1.1 | 8 |
| 48 | Examining the implementation of clinical practice guidelines for the management of adult cancers: A mixed methods study. <i>Journal of Evaluation in Clinical Practice</i> , 2019, 25, 656-663. | 0.9 | 0 |
| 49 | A cross-sectional population-based survey looking at the impact of cancer survivorship care plans on meeting the needs of cancer survivors in the posttreatment stage. <i>Supportive Care in Cancer</i> , 2019, 27, 3785-3792. | 1.0 | 13 |
| 50 | Adopting Patient-Centred Tools in Cancer Care: Role of Evidence and Other Factors. <i>Current Oncology</i> , 2019, 26, 19-27. | 0.9 | 4 |
| 51 | The role of scientific evidence in decisions to adopt complex innovations in cancer care settings: a multiple case study in Nova Scotia, Canada. <i>Implementation Science</i> , 2019, 14, 14. | 2.5 | 17 |
| 52 | “Figure Out What It Is You Love to Do and Live the Life You Love” The Experiences of Young Adults Returning to Work After Primary Cancer Treatment. <i>Journal of Adolescent and Young Adult Oncology</i> , 2019, 8, 368-372. | 0.7 | 5 |
| 53 | Factors influencing middle managers'™ commitment to the implementation of innovations in cancer care. <i>Journal of Health Services Research and Policy</i> , 2019, 24, 91-99. | 0.8 | 6 |
| 54 | Population surveillance of navigation frequency and palliative care contact before death among cancer patients. <i>Canadian Oncology Nursing Journal = Revue Canadienne De Nursing Oncologique</i> , 2019, 29, 17-24. | 0.1 | 0 |

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|----|--|-----|-----------|
| 55 | Patient engagement in hospital health service planning and improvement: a scoping review. <i>BMJ Open</i> , 2018, 8, e018263. | 0.8 | 66 |
| 56 | Survivorship care plans: are randomized controlled trials assessing outcomes that are relevant to stakeholders?. <i>Journal of Cancer Survivorship</i> , 2018, 12, 495-508. | 1.5 | 25 |
| 57 | Interventions are needed to support patientâ€™ provider decision-making for DCIS: a scoping review. <i>Breast Cancer Research and Treatment</i> , 2018, 168, 579-592. | 1.1 | 16 |
| 58 | Key stakeholdersâ€™ views on the quality of care and services available to frail seniors in Canada. <i>BMC Geriatrics</i> , 2018, 18, 290. | 1.1 | 15 |
| 59 | Making It Happen: Middle Managers' Roles in Innovation Implementation in Health Care. <i>Worldviews on Evidence-Based Nursing</i> , 2018, 15, 414-423. | 1.2 | 20 |
| 60 | Stakeholdersâ€™ views on identifying patients in primary care at risk of dying: a qualitative descriptive study using focus groups and interviews. <i>British Journal of General Practice</i> , 2018, 68, e612-e620. | 0.7 | 18 |
| 61 | The novel role of paramedics in collaborative emergency centres aligns with their professional identity: A qualitative analysis. <i>Canadian Journal of Emergency Medicine</i> , 2018, 20, 518-522. | 0.5 | 12 |
| 62 | Patient and provider experiences with active surveillance: A scoping review. <i>PLoS ONE</i> , 2018, 13, e0192097. | 1.1 | 16 |
| 63 | The application of implementation science theories for population health: A critical interpretive synthesis. <i>AIMS Public Health</i> , 2018, 5, 13-30. | 1.1 | 18 |
| 64 | Rules to Identify Persons with Frailty in Administrative Health Databases. <i>Canadian Journal on Aging</i> , 2017, 36, 514-521. | 0.6 | 14 |
| 65 | Use of Physician Services during the Survivorship Phase: A Multi-Province Study of Women Diagnosed with Breast Cancer. <i>Current Oncology</i> , 2017, 24, 81-89. | 0.9 | 19 |
| 66 | Neoadjuvant therapy for resectable pancreatic cancer. <i>World Journal of Gastrointestinal Oncology</i> , 2017, 9, 457-465. | 0.8 | 21 |
| 67 | Challenges and Insights in Implementing Coordinated Care between Oncology and Primary Care Providers: A Canadian Perspective. <i>Current Oncology</i> , 2017, 24, 120-123. | 0.9 | 16 |
| 68 | Patterns of Cancer Centre Follow-Up Care for Survivors of Breast, Colorectal, Gynecologic, and Prostate Cancer. <i>Current Oncology</i> , 2017, 24, 360-366. | 0.9 | 15 |
| 69 | Multigene Expression Profile Testing in Breast Cancer: Is There a Role for Family Physicians?. <i>Current Oncology</i> , 2017, 24, 95-102. | 0.9 | 5 |
| 70 | Decision-making by surgeons about referral for adjuvant therapy for patients with non-small-cell lung, breast or colorectal cancer: a qualitative study. <i>CMAJ Open</i> , 2016, 4, E7-E12. | 1.1 | 5 |
| 71 | Interventions to improve care coordination between primary healthcare and oncology care providers: a systematic review. <i>ESMO Open</i> , 2016, 1, e000077. | 2.0 | 41 |
| 72 | Knowledge brokering for healthy aging: a scoping review of potential approaches. <i>Implementation Science</i> , 2016, 11, 140. | 2.5 | 28 |

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|----|---|-----|-----------|
| 73 | Increasing our understanding of dying of breast cancer: Comorbidities and care. <i>Progress in Palliative Care</i> , 2016, 24, 147-152. | 0.7 | 3 |
| 74 | Primary care physician use across the breast cancer care continuum: CanIMPACT study using Canadian administrative data. <i>Canadian Family Physician</i> , 2016, 62, e589-e598. | 0.1 | 16 |
| 75 | Documenting coordination of cancer care between primary care providers and oncology specialists in Canada. <i>Canadian Family Physician</i> , 2016, 62, e616-e625. | 0.1 | 12 |
| 76 | Primary care providers' experiences with and perceptions of personalized genomic medicine. <i>Canadian Family Physician</i> , 2016, 62, e626-e635. | 0.1 | 65 |
| 77 | Identifying priorities in knowledge translation from the perspective of trainees: results from an online survey. <i>Implementation Science</i> , 2015, 10, 92. | 2.5 | 20 |
| 78 | Integrated knowledge translation (IKT) in health care: a scoping review. <i>Implementation Science</i> , 2015, 11, 38. | 2.5 | 359 |
| 79 | Trainees' Self-Reported Challenges in Knowledge Translation, Research and Practice. <i>Worldviews on Evidence-Based Nursing</i> , 2015, 12, 348-354. | 1.2 | 12 |
| 80 | Health System-Level Factors Influence the Implementation of Complex Innovations in Cancer Care. <i>Healthcare Policy</i> , 2015, 11, 102-118. | 0.3 | 2 |
| 81 | Patterns of health care utilization preceding a colorectal cancer diagnosis are strong predictors of dying quickly following diagnosis. <i>BMC Palliative Care</i> , 2015, 14, 2. | 0.8 | 5 |
| 82 | Health System-Level Factors Influence the Implementation of Complex Innovations in Cancer Care. <i>Healthcare Policy</i> , 2015, 11, 102-18. | 0.3 | 4 |
| 83 | What is the data-defined length for short time from diagnosis to death that is associated with a low rate of palliative care enrolment for persons with colorectal cancer?: Table A1. <i>BMJ Supportive and Palliative Care</i> , 2014, 4, 377-380. | 0.8 | 4 |
| 84 | Multi-level factors influence the implementation and use of complex innovations in cancer care: a multiple case study of synoptic reporting. <i>Implementation Science</i> , 2014, 9, 121. | 2.5 | 44 |
| 85 | Expanding the PARIHS framework: thinking more broadly about context and facilitation. <i>BMC Health Services Research</i> , 2014, 14, . | 0.9 | 3 |
| 86 | Screening for new primary cancers in cancer survivors compared to non-cancer controls: a systematic review and meta-analysis. <i>Journal of Cancer Survivorship</i> , 2013, 7, 455-463. | 1.5 | 59 |
| 87 | Timely access and quality of care in colorectal cancer: a population-based cohort study using administrative data. <i>BMC Research Notes</i> , 2013, 6, 355. | 0.6 | 10 |
| 88 | Use of Opioid Analgesics Among Older Persons With Colorectal Cancer in Two Health Districts With Palliative Care Programs. <i>Journal of Pain and Symptom Management</i> , 2013, 46, 20-29. | 0.6 | 8 |
| 89 | A Community of Practice for Knowledge Translation Trainees: An Innovative Approach for Learning and Collaboration. <i>Journal of Continuing Education in the Health Professions</i> , 2013, 33, 274-281. | 0.4 | 26 |
| 90 | Exploring the Usefulness of Two Conceptual Frameworks for Understanding How Organizational Factors Influence Innovation Implementation in Cancer Care. <i>Journal of Continuing Education in the Health Professions</i> , 2013, 33, 48-58. | 0.4 | 14 |

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|-----|--|-----|-----------|
| 91 | Clinical Information Available to Oncologists in Surgically Treated Rectal Cancer: Room to Improve. <i>Current Oncology</i> , 2013, 20, 166-172. | 0.9 | 7 |
| 92 | Population-Based Longitudinal Study of Follow-Up Care for Patients With Colorectal Cancer in Nova Scotia. <i>Journal of Oncology Practice</i> , 2012, 8, 246-252. | 2.5 | 18 |
| 93 | Adherence to Clinical Practice Guidelines for Adjuvant Chemotherapy for Colorectal Cancer in a Canadian Province: A Population-Based Analysis. <i>Journal of Oncology Practice</i> , 2012, 8, 253-259. | 2.5 | 37 |
| 94 | How do surgeons decide to refer patients for adjuvant cancer treatment? Protocol for a qualitative study. <i>Implementation Science</i> , 2012, 7, 102. | 2.5 | 2 |
| 95 | Views of Breast and Colorectal Cancer Survivors on Their Routine Follow-Up Care. <i>Current Oncology</i> , 2012, 19, 294-301. | 0.9 | 32 |
| 96 | Inequalities in End-Of-Life Care for Colorectal Cancer Patients in Nova Scotia, Canada. <i>Journal of Palliative Care</i> , 2012, 28, 90-96. | 0.4 | 23 |
| 97 | A team approach to improving colorectal cancer services using administrative health data. <i>Health Research Policy and Systems</i> , 2012, 10, 4. | 1.1 | 11 |
| 98 | Examining stage IIB survival in a population-based cohort of patients with colorectal cancer. <i>Cancer</i> , 2012, 118, 5973-5981. | 2.0 | 0 |
| 99 | Exploring the interpersonal-, organization-, and system-level factors that influence the implementation and use of an innovation-synoptic reporting-in cancer care. <i>Implementation Science</i> , 2012, 7, 12. | 2.5 | 18 |
| 100 | Improving Nodal Harvest in Colorectal Cancer: So What?. <i>Annals of Surgical Oncology</i> , 2012, 19, 1066-1073. | 0.7 | 23 |
| 101 | Impact of comorbidity and healthcare utilization on colorectal cancer stage at diagnosis: literature review. <i>Cancer Causes and Control</i> , 2012, 23, 213-220. | 0.8 | 25 |
| 102 | Inequity in Access to Guideline-Recommended Colorectal Cancer Treatment in Nova Scotia, Canada. <i>Healthcare Policy</i> , 2012, 8, 71-87. | 0.3 | 6 |
| 103 | Inequity in access to guideline-recommended colorectal cancer treatment in Nova Scotia, Canada. <i>Healthcare Policy</i> , 2012, 8, 71-87. | 0.3 | 8 |
| 104 | Inequalities in end-of-life care for colorectal cancer patients in Nova Scotia, Canada. <i>Journal of Palliative Care</i> , 2012, 28, 90-6. | 0.4 | 11 |
| 105 | Factors Related to the Implementation and Use of an Innovation in Cancer Surgery. <i>Current Oncology</i> , 2011, 18, 271-279. | 0.9 | 13 |
| 106 | Inequity in access to cancer care: a review of the Canadian literature. <i>Cancer Causes and Control</i> , 2011, 22, 359-366. | 0.8 | 94 |
| 107 | The impact of audit and feedback on nodal harvest in colorectal cancer. <i>BMC Cancer</i> , 2011, 11, 2. | 1.1 | 22 |
| 108 | Creating a knowledge translation trainee collaborative: from conceptualization to lessons learned in the first year. <i>Implementation Science</i> , 2011, 6, 98. | 2.5 | 8 |

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|-----|---|-----|-----------|
| 109 | Reflections on Knowledge Brokering Within a Multidisciplinary Research Team. <i>Journal of Continuing Education in the Health Professions</i> , 2011, 31, 283-290. | 0.4 | 29 |
| 110 | Quantifying Limitations in Chemotherapy Data in Administrative Health Databases: Implications for Measuring the Quality of Colorectal Cancer Care. <i>Healthcare Policy</i> , 2011, 7, 32-40. | 0.3 | 0 |
| 111 | Quantifying limitations in chemotherapy data in administrative health databases: implications for measuring the quality of colorectal cancer care. <i>Healthcare Policy</i> , 2011, 7, 32-40. | 0.3 | 3 |
| 112 | Perspectives of an Interdisciplinary Research Team to Engage Practice: Lessons from a Knowledge Exchange Trainee Experience. <i>Healthcare Policy</i> , 2010, 5, 47-57. | 0.3 | 1 |
| 113 | Perspectives of an interdisciplinary research team to engage practice: lessons from a knowledge exchange trainee experience. <i>Healthcare Policy</i> , 2010, 5, 47-57. | 0.3 | 1 |
| 114 | A prospective study of peri-diagnostic and surgical wait times for patients with presumptive colorectal, lung, or prostate cancer. <i>British Journal of Cancer</i> , 2009, 100, 56-62. | 2.9 | 13 |
| 115 | Effects of local and core body temperature on grip force modulation during movement-induced load force fluctuations. <i>European Journal of Applied Physiology</i> , 2008, 103, 59-69. | 1.2 | 20 |
| 116 | Toward population-based indicators of quality end-of-life care. <i>Cancer</i> , 2008, 112, 2301-2308. | 2.0 | 97 |
| 117 | Are leading medical journals following their own policies on CONSORT reporting?. <i>Contemporary Clinical Trials</i> , 2008, 29, 843-846. | 0.8 | 16 |
| 118 | Breast Cancer Guidelines in Canada: A Review of Development and Implementation. <i>Breast Care</i> , 2008, 3, 108-113. | 0.8 | 3 |
| 119 | Do Available Questionnaires Measure the Communication Factors That Patients and Families Consider Important at End of Life?. <i>Journal of Clinical Oncology</i> , 2008, 26, 3874-3878. | 0.8 | 13 |
| 120 | Quality of surgical care of pancreatic cancer in a single payer North American health care system. <i>F1000Research</i> , 0, 5, 1989. | 0.8 | 1 |
| 121 | Troutville: Where People Discuss Fairness Issues. <i>Canadian Journal of Bioethics</i> , 0, 3, 70-82. | 0.0 | 1 |