

Paula Tanabe

List of Publications by Year in descending order

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Version: 2024-02-01

83
papers

1,911
citations

279701

23
h-index

276775

41
g-index

84
all docs

84
docs citations

84
times ranked

1613
citing authors

| # | ARTICLE | IF | CITATIONS |
|----|---|-----|-----------|
| 1 | Stigma and quality of life in adults with sickle cell disease in Jamaica and the United States. <i>Psychology, Health and Medicine</i> , 2023, 28, 1133-1147. | 1.3 | 4 |
| 2 | Perspectives of individuals with sickle cell disease on barriers to care. <i>PLoS ONE</i> , 2022, 17, e0265342. | 1.1 | 13 |
| 3 | Effective Recruitment Strategies for a Sickle Cell Patient Registry Across Sites from the Sickle Cell Disease Implementation Consortium (SCDIC). <i>Journal of Immigrant and Minority Health</i> , 2021, 23, 725-732. | 0.8 | 10 |
| 4 | “Pain is Subjective” A Mixed-Methods Study of Provider Attitudes and Practices Regarding Pain Management in Sickle Cell Disease Across Three Countries. <i>Journal of Pain and Symptom Management</i> , 2021, 61, 474-487. | 0.6 | 13 |
| 5 | Trial design of comparing patient-specific versus weight-based protocols to treat vaso-occlusive episodes in sickle cell disease (COMPARE-VOE). <i>Contemporary Clinical Trials</i> , 2021, 101, 106252. | 0.8 | 1 |
| 6 | Pediatric Neurodevelopmental Delays in Children 0 to 5 Years of Age With Sickle Cell Disease: A Systematic Literature Review. <i>Journal of Pediatric Hematology/Oncology</i> , 2021, 43, 104-111. | 0.3 | 6 |
| 7 | Sickle cell disease is a global prototype for integrative research and healthcare. <i>Genetics & Genomics Next</i> , 2021, 2, e10037. | 0.8 | 10 |
| 8 | Patient Perspectives of Sickle Cell Management in the Emergency Department. <i>Critical Care Nursing Quarterly</i> , 2021, 44, 160-174. | 0.4 | 12 |
| 9 | Dissemination of Evidence-Based Recommendations for Sickle Cell Disease to Primary Care and Emergency Department Providers in North Carolina: A Cost Benefit Analysis. <i>Journal of Health Economics and Outcomes Research</i> , 2021, 8, 18-28. | 0.6 | 2 |
| 10 | Electronic Health Record–Embedded Individualized Pain Plans for Emergency Department Treatment of Vaso-occlusive Episodes in Adults With Sickle Cell Disease: Protocol for a Preimplementation and Postimplementation Study. <i>JMIR Research Protocols</i> , 2021, 10, e24818. | 0.5 | 6 |
| 11 | Veterans’ Interpretation of Diabetes Distress in Diabetes Self-Management: Findings From Cognitive Interviews. <i>Science of Diabetes Self-Management and Care</i> , 2021, 47, 391-403. | 0.9 | 4 |
| 12 | A Needs Assessment of Persons With Sickle Cell Disease in a Major Medical Center in North Carolina. <i>North Carolina Medical Journal</i> , 2021, 82, 312-320. | 0.1 | 0 |
| 13 | Awareness and Use of the Sickle Cell Disease Toolbox by Primary Care Providers in North Carolina. <i>Journal of Primary Care and Community Health</i> , 2021, 12, 215013272110490. | 1.0 | 1 |
| 14 | It’s Time to Provide Evidence-Based Care to Individuals with Sickle Cell Disease: A Call to Action. <i>Journal of Emergency Nursing</i> , 2021, 47, 684-688. | 0.5 | 0 |
| 15 | Sex-based differences in the manifestations and complications of sickle cell disease: Report from the Sickle Cell Disease Implementation Consortium. <i>PLoS ONE</i> , 2021, 16, e0258638. | 1.1 | 13 |
| 16 | Identifying barriers to evidence-based care for sickle cell disease: results from the Sickle Cell Disease Implementation Consortium cross-sectional survey of healthcare providers in the USA. <i>BMJ Open</i> , 2021, 11, e050880. | 0.8 | 18 |
| 17 | Prevalence of High BMI Status in Adults with Sickle Cell Disease. <i>Blood</i> , 2021, 138, 2039-2039. | 0.6 | 0 |
| 18 | Sickle-Cell Disease Co-Management, Health Care Utilization, and Hydroxyurea Use. <i>Journal of the American Board of Family Medicine</i> , 2020, 33, 91-105. | 0.8 | 23 |

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|----|---|-----|-----------|
| 19 | Intentional and unintentional nonadherence to hydroxyurea among people with sickle cell disease: a qualitative study. <i>Blood Advances</i> , 2020, 4, 4463-4473. | 2.5 | 23 |
| 20 | A Survey-Based Needs Assessment of Barriers to Optimal Sickle Cell Disease Care in the Emergency Department. <i>Annals of Emergency Medicine</i> , 2020, 76, S64-S72. | 0.3 | 22 |
| 21 | Impact of Medicaid expansion on access and healthcare among individuals with sickle cell disease. <i>Pediatric Blood and Cancer</i> , 2020, 67, e28152. | 0.8 | 15 |
| 22 | Predictors of Maternal Morbidity Among Participants Enrolled in the Sickle Cell Disease Implementation Consortium Registry. <i>Blood</i> , 2020, 136, 3-3. | 0.6 | 0 |
| 23 | Sex Based Differences in Sickle Cell Disease. <i>Blood</i> , 2020, 136, 37-37. | 0.6 | 0 |
| 24 | A pilot test of the Adult Sickle Cell Quality of Life Measurement Information System (ASCQ-Me) and the Jenerette Self-Care Assessment (J-SAT) Tools in adults with sickle cell disease. <i>Pilot and Feasibility Studies</i> , 2019, 5, 85. | 0.5 | 5 |
| 25 | Acceptability and Feasibility of a Mindfulness-Based Intervention for Pain Catastrophizing among Persons with Sickle Cell Disease. <i>Pain Management Nursing</i> , 2019, 20, 261-269. | 0.4 | 20 |
| 26 | Barriers and facilitators to care for individuals with sickle cell disease in central North Carolina: The emergency department providersâ€™ perspective. <i>PLoS ONE</i> , 2019, 14, e0216414. | 1.1 | 27 |
| 27 | Improving the Care of Individuals With Sickle Cell Disease in the Emergency Department Using a Quality Improvement Framework. <i>Advanced Emergency Nursing Journal</i> , 2019, 41, 261-270. | 0.2 | 4 |
| 28 | CE: Understanding the Complications of Sickle Cell Disease. <i>American Journal of Nursing</i> , 2019, 119, 26-35. | 0.2 | 32 |
| 29 | Exploring Emergency Department Provider Experiences With and Perceptions of Weight-Based Versus Individualized Vaso-Occlusive Treatment Protocols in Sickle Cell Disease. <i>Advanced Emergency Nursing Journal</i> , 2019, 41, 86-97. | 0.2 | 2 |
| 30 | Implementation of an Emergency Department Screening and Care Management Referral Process for Patients With Sickle Cell Disease. <i>Professional Case Management</i> , 2019, 24, 240-248. | 0.2 | 5 |
| 31 | Transition to adult care in sickle cell disease: A longitudinal study of clinical characteristics and disease severity. <i>Pediatric Blood and Cancer</i> , 2019, 66, e27463. | 0.8 | 42 |
| 32 | Twelve tips for teaching a comprehensive disease-focused course with a global perspective: A sickle cell disease example. <i>Medical Teacher</i> , 2019, 41, 275-281. | 1.0 | 2 |
| 33 | Intravenous Fluid Boluses Are Commonly Administered to Adults with Sickle Cell Disease and Vaso-Occlusive Pain. <i>Blood</i> , 2019, 134, 4839-4839. | 0.6 | 2 |
| 34 | Emergency Department Encounters, Hospitalizations and ED Reliance Among Medicaid Eligible Patients with Sickle Cell Disease in North Carolina. <i>Blood</i> , 2019, 134, 2113-2113. | 0.6 | 2 |
| 35 | Hydroxyurea Prescription Fills and Adherence, Among Pediatric and Adult Medicaid Eligible Patients with Sickle Cell Disease in North Carolina. <i>Blood</i> , 2019, 134, 3391-3391. | 0.6 | 0 |
| 36 | Stigma of Sickle Cell Disease: A Systematic Review. <i>Issues in Mental Health Nursing</i> , 2018, 39, 675-686. | 0.6 | 97 |

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|----|--|-----|-----------|
| 37 | A randomized controlled trial comparing two vaso-occlusive episode (VOE) protocols in sickle cell disease (SCD). American Journal of Hematology, 2018, 93, 159-168. | 2.0 | 37 |
| 38 | Bereaved Parents'™ Health Status During the First 6 Months After Their Child's™ Death. American Journal of Hospice and Palliative Medicine, 2018, 35, 829-839. | 0.8 | 22 |
| 39 | Social and Behavioral Factors in Sickle Cell Disease: Employment Predicts Decreased Health Care Utilization. Journal of Health Care for the Poor and Underserved, 2018, 29, 814-829. | 0.4 | 29 |
| 40 | Emergency Department (ED), ED Observation, Day Hospital, and Hospital Admissions for Adults with Sickle Cell Disease. Western Journal of Emergency Medicine, 2018, 19, 311-318. | 0.6 | 13 |
| 41 | Barriers to Care for Persons With Sickle Cell Disease. Professional Case Management, 2018, 23, 213-219. | 0.2 | 28 |
| 42 | Health Related Stigma and Quality of Life in Adults with Sickle Cell Disease in Jamaica. Blood, 2018, 132, 2285-2285. | 0.6 | 1 |
| 43 | Trajectories of Sickle Cell Disease Severity during Transition to Adult Care. Blood, 2018, 132, 318-318. | 0.6 | 0 |
| 44 | Outpatient Healthcare Utilization and Rates of Co-Management Among Medicaid Patients with Sickle Cell Disease in North Carolina. Blood, 2018, 132, 4725-4725. | 0.6 | 0 |
| 45 | A Prospective Emergency Department Quality Improvement Project to Improve the Treatment of Vaso-Occlusive Crisis in Sickle Cell Disease: Lessons Learned. Joint Commission Journal on Quality and Patient Safety, 2017, 43, 116-126. | 0.4 | 7 |
| 46 | Identifying Social-Behavioral Health Needs of Adults with Sickle Cell Disease in the Emergency Department. Journal of Emergency Nursing, 2017, 43, 444-450. | 0.5 | 14 |
| 47 | Implementation of a Schedule II patient agreement for opioids and stimulants in an adult primary care practice. Journal of Family Medicine and Primary Care, 2017, 6, 52. | 0.3 | 3 |
| 48 | Evaluation of a Sickle Cell Disease Educational Website for Emergency Providers. Advanced Emergency Nursing Journal, 2016, 38, 123-132. | 0.2 | 4 |
| 49 | Challenges in Shifting Management Responsibility From Parents to Adolescents With Sickle Cell Disease. Journal of Pediatric Nursing, 2016, 31, 678-690. | 0.7 | 18 |
| 50 | Does Attendance at a Sickle Cell Educational Conference Improve Clinician Knowledge and Attitude Toward Patients with Sickle Cell Disease?. Pain Management Nursing, 2016, 17, 226-234. | 0.4 | 14 |
| 51 | Sickle Cell Disease: A Review of Nonpharmacological Approaches for Pain. Journal of Pain and Symptom Management, 2016, 51, 163-177. | 0.6 | 45 |
| 52 | Safety of an ED High-Dose Opioid Protocol for Sickle Cell Disease Pain. Journal of Emergency Nursing, 2015, 41, 227-235. | 0.5 | 13 |
| 53 | Application of a Proactive Risk Analysis to Emergency Department Sickle Cell Care. Western Journal of Emergency Medicine, 2014, 15, 446-458. | 0.6 | 6 |
| 54 | The impact of race and disease on sickle cell patient wait times in the emergency department. American Journal of Emergency Medicine, 2013, 31, 651-656. | 0.7 | 98 |

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|----|--|-----|-----------|
| 55 | Emergency Provider Analgesic Practices and Attitudes Toward Patients With Sickle Cell Disease. <i>Annals of Emergency Medicine</i> , 2013, 62, 293-302.e10. | 0.3 | 71 |
| 56 | Evaluation of a Train-the-Trainer Workshop on Sickle Cell Disease for ED Providers. <i>Journal of Emergency Nursing</i> , 2013, 39, 539-546. | 0.5 | 10 |
| 57 | The Emergency Department Sickle Cell Assessment of Needs and Strengths (ED-SCANS). <i>Advanced Emergency Nursing Journal</i> , 2013, 35, 143-153. | 0.2 | 6 |
| 58 | Sickle Cell Crisis: Safety Of a High-Dose Opioid Protocol In The Emergency Department. <i>Blood</i> , 2013, 122, 5579-5579. | 0.6 | 0 |
| 59 | Promoting Equity. <i>American Journal of Medical Quality</i> , 2012, 27, 80-82. | 0.2 | 2 |
| 60 | Adult Emergency Department Patients With Sickle Cell Pain Crisis: Results From a Quality Improvement Learning Collaborative Model to Improve Analgesic Management. <i>Academic Emergency Medicine</i> , 2012, 19, 430-438. | 0.8 | 47 |
| 61 | How Do Emergency Department Patients Store and Dispose of Opioids After Discharge? A Pilot Study. <i>Journal of Emergency Nursing</i> , 2012, 38, 273-279. | 0.5 | 39 |
| 62 | Barriers to Screening and Intervention for ED Patients at Risk For Undiagnosed or Uncontrolled Hypertension. <i>Journal of Emergency Nursing</i> , 2011, 37, 17-23. | 0.5 | 14 |
| 63 | A Qualitative Analysis of Best Self-management Practices: Sickle Cell Disease. <i>Journal of the National Medical Association</i> , 2010, 102, 1033-1041. | 0.6 | 39 |
| 64 | A Comparison of Analgesic Management for Emergency Department Patients With Sickle Cell Disease and Renal Colic. <i>Clinical Journal of Pain</i> , 2010, 26, 199-205. | 0.8 | 55 |
| 65 | Adult Emergency Department Patients with Sickle Cell Pain Crisis: A Learning Collaborative Model to Improve Analgesic Management. <i>Academic Emergency Medicine</i> , 2010, 17, 399-407. | 0.8 | 36 |
| 66 | Emergency Department Sickle Cell Assessment of Needs and Strengths (ED-SCANS), a Focus Group and Decision Support Tool Development Project. <i>Academic Emergency Medicine</i> , 2010, 17, 848-858. | 0.8 | 15 |
| 67 | Can Education and Staff-based Participatory Research Change Nursing Practice in an Era of ED Overcrowding? A Focus Group Study. <i>Journal of Emergency Nursing</i> , 2009, 35, 290-298. | 0.5 | 2 |
| 68 | Development of a Decision Support Tool to Guide Management of Adults with Sickle Cell Disease: The Emergency Department Sickle Cell Assessment of Strengths and Needs (ED-SCANS).. <i>Blood</i> , 2009, 114, 1413-1413. | 0.6 | 0 |
| 69 | Emergency Department Follow-up for Adults with Sickle Cell Disease.. <i>Blood</i> , 2009, 114, 241-241. | 0.6 | 0 |
| 70 | Increased Blood Pressure in the Emergency Department: Pain, Anxiety, or Undiagnosed Hypertension?. <i>Annals of Emergency Medicine</i> , 2008, 51, 221-229. | 0.3 | 66 |
| 71 | Pathways and Protocols for the Triage Patient with Acute Pain. , 2008, , 67-74. | | 0 |
| 72 | Emergency Department Management of Acute Pain Episodes in Sickle Cell Disease. <i>Academic Emergency Medicine</i> , 2007, 14, 419-425. | 0.8 | 92 |

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|----|--|-----|-----------|
| 73 | Knowledge Translation of the American College of Emergency Physicians Clinical Policy on Hypertension. <i>Academic Emergency Medicine</i> , 2007, 14, 1090-1096. | 0.8 | 30 |
| 74 | Emergency Severity Index Version 4: Clarifying Common Questions. <i>Journal of Emergency Nursing</i> , 2007, 33, 182-185. | 0.5 | 23 |
| 75 | Emergency Department Management of Acute Pain Episodes in Sickle Cell Disease. <i>Academic Emergency Medicine</i> , 2007, 14, 419-425. | 0.8 | 56 |
| 76 | Refining Emergency Severity Index Triage Criteria. <i>Academic Emergency Medicine</i> , 2005, 12, 497-501. | 0.8 | 51 |
| 77 | The Emergency Severity Index (version 3) 5-Level Triage System Scores Predict ED Resource Consumption. <i>Journal of Emergency Nursing</i> , 2004, 30, 22-29. | 0.5 | 149 |
| 78 | Undiagnosed Hypertension in the ED Setting—An Unrecognized Opportunity by Emergency Nurses. <i>Journal of Emergency Nursing</i> , 2004, 30, 225-229. | 0.5 | 28 |
| 79 | Reliability and Validity of Scores on the Emergency Severity Index Version 3. <i>Academic Emergency Medicine</i> , 2004, 11, 59-65. | 0.8 | 247 |
| 80 | Factors Affecting Pain Scores during Female Urethral Catheterization. <i>Academic Emergency Medicine</i> , 2004, 11, 699-702. | 0.8 | 14 |
| 81 | Factors affecting pain scores during female urethral catheterization. <i>Academic Emergency Medicine</i> , 2004, 11, 699-702. | 0.8 | 4 |
| 82 | Factors Affecting the Risk of Blood Bank Specimen Hemolysis. <i>Academic Emergency Medicine</i> , 2003, 10, 897-900. | 0.8 | 12 |
| 83 | Factors Affecting the Risk of Blood Bank Specimen Hemolysis. <i>Academic Emergency Medicine</i> , 2003, 10, 897-900. | 0.8 | 15 |