Ellen J Weber

List of Publications by Year in Descending Order

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The third column is the impact factor (IF) of the journal, and the fourth column is the number of citations of the article.

2,611 47 23 51 h-index g-index citations papers 91 3,029 4.72 3.4 avg, IF L-index ext. papers ext. citations

#	Paper	IF	Citations
47	Recognising acute coronary syndrome <i>BMJ, The</i> , 2022 , 377, e069591	5.9	1
46	Why test and trace will fail without support for self-isolation: lessons from San Francisco. <i>BMJ, The</i> , 2021 , 372, n652	5.9	
45	Feasibility and efficacy of text messaging to promote care among trauma patients screened for HIV at an urban emergency department in Tanzania <i>International Journal of Emergency Medicine</i> , 2021 , 14, 72	3.9	O
44	The burden of trauma in Tanzania: Analysis of prospective trauma registry data at regional hospitals in Tanzania. <i>Injury</i> , 2020 , 51, 2938-2945	2.5	3
43	Trauma care and capture rate of variables of World Health Organisation data set for injury at regional hospitals in Tanzania: first steps to a national trauma registry. <i>BMC Emergency Medicine</i> , 2020 , 20, 29	2.4	4
42	Development and pilot implementation of a standardised trauma documentation form to inform a national trauma registry in a low-resource setting: lessons from Tanzania. <i>BMJ Open</i> , 2020 , 10, e038022	3	1
41	Respiratory compromise in children presenting to an urban emergency department of a tertiary hospital in Tanzania: a descriptive cohort study. <i>BMC Emergency Medicine</i> , 2019 , 19, 21	2.4	1
40	Pre-referral stabilization and compliance with WHO guidelines for trauma care among adult patients referred to an urban emergency department of a tertiary referral hospital in Tanzania. <i>BMC Emergency Medicine</i> , 2019 , 19, 22	2.4	7
39	Performance characteristics of a local triage tool and internationally validated tools among under-fives presenting to an urban emergency department in Tanzania. <i>BMC Pediatrics</i> , 2019 , 19, 44	2.6	3
38	Non-traumatic chest pain in patients presenting to an urban emergency Department in sub Saharan Africa: a prospective cohort study in Tanzania. <i>BMC Cardiovascular Disorders</i> , 2019 , 19, 158	2.3	6
37	The utility of point of care serum lactate in predicting serious adverse outcomes among critically ill adult patients at urban emergency departments of tertiary hospitals in Tanzania. <i>Tropical Medicine and Health</i> , 2019 , 47, 61	3.4	4
36	Decreasing triage time: effects of implementing a step-wise ESI algorithm in an EHR. <i>International Journal for Quality in Health Care</i> , 2018 , 30, 375-381	1.9	4
35	Finding value in YnappropriateYvisits: A new study demonstrates how variation in ED use for preventable visits can be used to detect problems with access to healthcare in our communities. <i>Emergency Medicine Journal</i> , 2018 , 35, 133-134	1.5	4
34	Author's reply to Hill-Smith. <i>BMJ, The</i> , 2017 , 357, j3035	5.9	
33	The Impact of Clinical Decision Rules on Computed Tomography Use and Yield for Pulmonary Embolism: Al Systematic Review and Meta-analysis. <i>Annals of Emergency Medicine</i> , 2016 , 67, 693-701.e3	2.1	39
32	Clinical pathway improves pediatrics asthma management in the emergency department and reduces admissions. <i>Journal of Asthma</i> , 2015 , 52, 806-14	1.9	44
31	Innovations to reduce demand and crowding in emergency care; a review study. <i>Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine</i> , 2014 , 22, 55	3.6	26

(2006-2013)

30	Pneumonia quality measures not associated with antibiotics for congestive heart failure patients. Journal of Emergency Medicine, 2013 , 44, 577-84	1.5	1
29	Emergency department crowding and younger age are associated with delayed corticosteroid administration to children with acute asthma. <i>Pediatric Emergency Care</i> , 2013 , 29, 1075-81	1.4	15
28	Implications of England's four-hour target for quality of care and resource use in the emergency department. <i>Annals of Emergency Medicine</i> , 2012 , 60, 699-706	2.1	42
27	Time patients spend in the emergency department: England's 4-hour rule-a case of hitting the target but missing the point?. <i>Annals of Emergency Medicine</i> , 2012 , 59, 341-9	2.1	96
26	Solutions to emergency department 'boarding' Yand crowding are underused and may need to be legislated. <i>Health Affairs</i> , 2012 , 31, 1757-66	7	90
25	Half of older Americans seen in emergency department in last month of life; most admitted to hospital, and many die there. <i>Health Affairs</i> , 2012 , 31, 1277-85	7	131
24	Frequent users of emergency department services: gaps in knowledge and a proposed research agenda. <i>Academic Emergency Medicine</i> , 2011 , 18, e64-9	3.4	149
23	A research agenda to assure equity during periods of emergency department crowding. <i>Academic Emergency Medicine</i> , 2011 , 18, 1318-23	3.4	13
22	International perspectives on emergency department crowding. <i>Academic Emergency Medicine</i> , 2011 , 18, 1358-70	3.4	342
21	Emptying the corridors of shame: organizational lessons from England & 4-hour emergency throughput target. <i>Annals of Emergency Medicine</i> , 2011 , 57, 79-88.e1	2.1	67
20	Emergency department management of patients on warfarin therapy. <i>Annals of Emergency Medicine</i> , 2011 , 58, 192-9	2.1	4
19	Mandatory triage does not identify high-acuity patients within recommended time frames. <i>Annals of Emergency Medicine</i> , 2011 , 58, 137-42	2.1	15
18	The role of the Society for Academic Emergency Medicine in the development of guidelines and performance measures. <i>Academic Emergency Medicine</i> , 2010 , 17, e130-40	3.4	6
17	Are the uninsured responsible for the increase in emergency department visits in the United States?. <i>Annals of Emergency Medicine</i> , 2008 , 52, 108-15	2.1	64
16	Identification of 90% of patients ultimately diagnosed with community-acquired pneumonia within four hours of emergency department arrival may not be feasible. <i>Annals of Emergency Medicine</i> , 2007 , 49, 553-9	2.1	38
15	When is a scarlet letter really a red badge of courage?: the paradox of percentage of pneumonia patients receiving antibiotics within 4 hours in accordance with JCAHO and CMS core measures. Annals of Emergency Medicine, 2007, 50, 205-6	2.1	4
14	Effect of emergency department crowding on time to antibiotics in patients admitted with community-acquired pneumonia. <i>Annals of Emergency Medicine</i> , 2007 , 50, 501-9, 509.e1	2.1	201
13	JCAHO/CMS core measures for community-acquired pneumonia. <i>Annals of Emergency Medicine</i> , 2006 , 47, 505; author reply 506	2.1	12

12	Characteristics of frequent users of emergency departments. <i>Annals of Emergency Medicine</i> , 2006 , 48, 1-8	2.1	343
11	Does lack of a usual source of care or health insurance increase the likelihood of an emergency department visit? Results of a national population-based study. <i>Annals of Emergency Medicine</i> , 2005 , 45, 4-12	2.1	118
10	SARS decision rule: who's a suspect?. Annals of Emergency Medicine, 2004, 44, 180; author reply 180-1	2.1	1
9	Early predictors of severe lower gastrointestinal bleeding and adverse outcomes: a prospective study. <i>Clinical Gastroenterology and Hepatology</i> , 2004 , 2, 485-90	6.9	100
8	Who Runs This Meeting, Anyway?. Academic Emergency Medicine, 2003, 10, 415-416	3.4	
7	Author perception of peer review: impact of review quality and acceptance on satisfaction. <i>JAMA - Journal of the American Medical Association</i> , 2002 , 287, 2790-3	27.4	51
6	A prospective multicenter study of factors associated with hospital admission among adults with acute asthma. <i>American Journal of Medicine</i> , 2002 , 113, 371-8	2.4	68
5	Citation characteristics of research published in Emergency Medicine versus other scientific journals. <i>Annals of Emergency Medicine</i> , 2001 , 38, 513-7	2.1	26
4	Effect of continuously nebulized ipratropium bromide plus albuterol on emergency department length of stay and hospital admission rates in patients with acute bronchospasm. A randomized, controlled trial. <i>Chest</i> , 1999 , 115, 937-44	5.3	31
3	Positive-outcome bias and other limitations in the outcome of research abstracts submitted to a scientific meeting. <i>JAMA - Journal of the American Medical Association</i> , 1998 , 280, 254-7	27.4	177
2	Unpublished research from a medical specialty meeting: why investigators fail to publish. <i>JAMA - Journal of the American Medical Association</i> , 1998 , 280, 257-9	27.4	190
1	Pharmacokinetics of nicotinic acid-salicylic acid interaction. <i>Clinical Pharmacology and Therapeutics</i> , 1989 , 46, 642-7	6.1	23