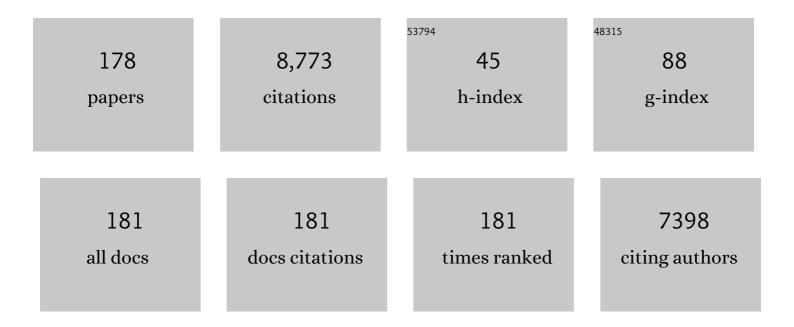
## Liane S Feldman

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/2607866/publications.pdf Version: 2024-02-01



#	Article	IF	CITATIONS
1	High incidence of potentially preventable emergency department visits after major elective colorectal surgery. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 2653-2660.	2.4	3
2	Considerations for designing and implementing a surgical peer coaching program: an international survey. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 4593-4601.	2.4	3
3	Trajectory of gastrointestinal function after laparoscopic colorectal surgery within an enhanced recovery pathway. Surgery, 2022, 171, 607-614.	1.9	2
4	Appendicoliths, Antibiotic Treatment Failure, and Appendectomy—Is the Glass Half Full or Half Empty?. JAMA Surgery, 2022, 157, e216901.	4.3	3
5	Impact of the Covid-19 pandemic on ratesÂof emergency department utilization and hospital admission due to general surgery conditions. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 6751-6759.	2.4	6
6	Development of a formative feedback tool for transanal total mesorectal excision. Surgical Endoscopy and Other Interventional Techniques, 2022, , 1.	2.4	0
7	The impact of the first wave of the COVID-19 pandemic on the exposure of general surgery trainees to operative procedures. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 6712-6718.	2.4	4
8	Development of a simulation curriculum to teach and assess advanced laparoscopic suturing skills using telesimulation: a feasibility study. Surgical Endoscopy and Other Interventional Techniques, 2022, , 1.	2.4	3
9	A framework for role allocation in education, research and leadership services in Canadian academic divisions of general surgery: a modified Delphi consensus. Canadian Journal of Surgery, 2022, 65, E73-E81.	1.2	1
10	Reciprocal peer coaching for practice improvement in surgery: a pilot study. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 7187-7203.	2.4	1
11	Construct validity and responsiveness of the Duke Activity Status Index (DASI) as a measure of recovery after colorectal surgery. Surgical Endoscopy and Other Interventional Techniques, 2022, , 1.	2.4	2
12	Tolerating clear fluids diet on postoperative day 0 predicts early recovery of gastrointestinal function after laparoscopic colectomy. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 9262-9272.	2.4	4
13	At least ninety days of follow-up are required to adequately detect wound outcomes after open incisional hernia repair. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 8463-8471.	2.4	2
14	North American multicentre evaluation of a same-day discharge protocol for minimally invasive colorectal surgery using mHealth or telephone remote post-discharge monitoring. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 9335-9344.	2.4	13
15	The association between video-based assessment of intraoperative technical performance and patient outcomes: a systematic review. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 7938-7948.	2.4	15
16	P338: summarizing measures of proficiency in transanal total mesorectal excision—a systematic review. Surgical Endoscopy and Other Interventional Techniques, 2021, 35, 4817-4824.	2.4	7
17	Impact of Facilitation of Early Mobilization on Postoperative Pulmonary Outcomes After Colorectal Surgery. Annals of Surgery, 2021, 273, 868-875.	4.2	26
18	Defining the key skills required to perform advanced laparoscopic procedures: a qualitative descriptive study. Surgical Endoscopy and Other Interventional Techniques, 2021, 35, 2645-2659.	2.4	3

#	Article	IF	CITATIONS
19	S116: Impact of incisional negative pressure wound therapy on surgical site infection after complex incisional hernia repair: a retrospective matched cohort study. Surgical Endoscopy and Other Interventional Techniques, 2021, 35, 3949-3960.	2.4	9
20	Transition from open to minimally invasive en bloc esophagectomy can be achieved without compromising surgical quality. Surgical Endoscopy and Other Interventional Techniques, 2021, 35, 3067-3076.	2.4	4
21	Patients' preferences for sphincter preservation versus abdominoperineal resection for low rectal cancer. Surgery, 2021, 169, 623-628.	1.9	11
22	Redesigning the Preoperative Clinic. JAMA Surgery, 2021, 156, 191.	4.3	18
23	Impact of Perioperative Complications on Living Kidney Donor Health-Related Quality of Life and Mental Health: Results From a Prospective Cohort Study. Canadian Journal of Kidney Health and Disease, 2021, 8, 205435812110374.	1.1	1
24	Optimizing discharge decisionâ€making in colorectal surgery: a prospective cohort study of discharge practices in a recently implemented enhanced recovery pathway. Colorectal Disease, 2021, 23, 1507-1514.	1.4	1
25	The association of alvimopan treatment with postoperative outcomes after abdominal surgery: A systematic review across different surgical procedures and contexts of perioperative care. Surgery, 2021, 169, 934-944.	1.9	5
26	Implementation of Enhanced Recovery Pathways in the Real World. Annals of Surgery, 2021, 274, 206-208.	4.2	4
27	Understanding the Meaning of Recovery to Patients Undergoing Abdominal Surgery. JAMA Surgery, 2021, 156, 758-765.	4.3	31
28	Response to the Comment on "Impact of Facilitation of Early Mobilization on Postoperative Pulmonary Outcomes After Colorectal Surgery― Annals of Surgery, 2021, 274, e940.	4.2	0
29	Artificial Intelligence for Augmenting Perioperative Surgical Decision-Making—Are We There Yet?. JAMA Surgery, 2021, 156, 941.	4.3	3
30	Prognostic value of the Duke Activity Status Index (DASI) in patients undergoing colorectal surgery. World Journal of Surgery, 2021, 45, 3677-3685.	1.6	4
31	Association Between Patient Activation and Health Care Utilization After Thoracic and Abdominal Surgery. JAMA Surgery, 2021, 156, e205002.	4.3	12
32	International Delphi Expert Consensus on Safe Return to Surgical and Endoscopic Practice. Annals of Surgery, 2021, 274, 50-56.	4.2	9
33	Living Kidney Donors' Financial Expenses and Mental Health. Transplantation, 2021, 105, 1356-1364.	1.0	4
34	A mobile device application (app) to improve adherence to an enhanced recovery program for colorectal surgery: a randomized controlled trial. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 742-751.	2.4	33
35	Is there a gender bias in the advancement to SAGES leadership?. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 458-463.	2.4	9
36	Modern era surgical outcomes of elective and emergency giant paraesophageal hernia repair at a high-volume referral center. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 284-289.	2.4	21

#	Article	IF	CITATIONS
37	Validity of the I-FEED score for postoperative gastrointestinal function in patients undergoing colorectal surgery. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 2219-2226.	2.4	14
38	The Impact of Delays to Definitive Surgical Care on Survival in Colorectal Cancer Patients. Journal of Gastrointestinal Surgery, 2020, 24, 115-122.	1.7	13
39	Development of a conceptual framework of recovery after abdominal surgery. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 2665-2674.	2.4	18
40	Tracking Postoperative Recovery—Making a Case for Smartphone Technology. JAMA Surgery, 2020, 155, 130.	4.3	5
41	Intracorporeal versus extracorporeal anastomosis for right colectomy does not affect gastrointestinal recovery within an enhanced recovery after surgery program. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 4601-4608.	2.4	19
42	Simple Versus Complex Preoperative Carbohydrate Drink to Preserve Perioperative Insulin Sensitivity in Laparoscopic Colectomy. Annals of Surgery, 2020, 271, 819-826.	4.2	12
43	The COVID-19 reset: lessons from the pandemic on Burnout and the Practice of Surgery. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 5201-5207.	2.4	22
44	Identifying optimal program structure, motivations for and barriers to peer coaching participation for surgeons in practice: a qualitative synthesis. Surgical Endoscopy and Other Interventional Techniques, 2020, 35, 4738-4749.	2.4	5
45	SAGES Video-Based Assessment (VBA) program: a vision for life-long learning for surgeons. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 3285-3288.	2.4	23
46	Implementation and Effectiveness of Coaching for Surgeons in Practice – A Mixed Studies Systematic Review. Journal of Surgical Education, 2020, 77, 837-853.	2.5	20
47	Practical Guide to Assessment of Patient-Reported Outcomes. JAMA Surgery, 2020, 155, 432.	4.3	20
48	Meta-analysis of the Diagnostic Accuracy of C-Reactive Protein for Infectious Complications in Laparoscopic Versus Open Colorectal Surgery. Journal of Gastrointestinal Surgery, 2020, 24, 1392-1401.	1.7	8
49	Function and Prehabilitation. , 2020, , 105-121.		1
50	Perioperative Complications During Living Donor Nephrectomy: Results From a Multicenter Cohort Study. Canadian Journal of Kidney Health and Disease, 2019, 6, 205435811985771.	1.1	17
51	Comparison of Dor and Nissen fundoplication after laparoscopic paraesophageal hernia repair. Surgery, 2019, 166, 540-546.	1.9	6
52	Preventing opioid prescription after major surgery: a scoping review of opioid-free analgesia. British Journal of Anaesthesia, 2019, 123, 627-636.	3.4	67
53	Does adherence to perioperative enhanced recovery pathway elements influence patient-reported recovery following colorectal resection?. Surgical Endoscopy and Other Interventional Techniques, 2019, 33, 3806-3815.	2.4	2
54	Assessment of surgical performance of laparoscopic benign hiatal surgery: a systematic review. Surgical Endoscopy and Other Interventional Techniques, 2019, 33, 3798-3805.	2.4	5

#	Article	IF	CITATIONS
55	The impact of improved functional capacity before surgery on postoperative complications: a study in colorectal cancer. Acta Oncológica, 2019, 58, 573-578.	1.8	40
56	Construct Validity and Responsiveness of the Abdominal Surgery Impact Scale in the Context of Recovery After Colorectal Surgery. Diseases of the Colon and Rectum, 2019, 62, 309-317.	1.3	2
57	Health Professional–Identified Barriers to Living Donor Kidney Transplantation: A Qualitative Study. Canadian Journal of Kidney Health and Disease, 2019, 6, 205435811982838.	1.1	22
58	The relationship of two postoperative complication grading schemas with postoperative quality of life after elective colorectal surgery. Surgery, 2019, 166, 663-669.	1.9	9
59	Cost-Effectiveness of Extended Thromboprophylaxis in Patients Undergoing Colorectal Surgery from a Canadian Health Care System Perspective. Diseases of the Colon and Rectum, 2019, 62, 1381-1389.	1.3	16
60	Improved Disease-free Survival After Prehabilitation for Colorectal Cancer Surgery. Annals of Surgery, 2019, 270, 493-501.	4.2	129
61	Is Mesh Prophylaxis the Answer to the Prevention of Incisional Hernia?. JAMA Surgery, 2019, 154, 116.	4.3	0
62	Incidence and predictors of prolonged postoperative ileus after colorectal surgery in the context of an enhanced recovery pathway. Surgical Endoscopy and Other Interventional Techniques, 2019, 33, 2313-2322.	2.4	35
63	Adherence to Enhanced Recovery Protocols in NSQIP and Association With Colectomy Outcomes. Annals of Surgery, 2019, 269, 486-493.	4.2	65
64	Enhanced Recovery Pathways: Is It Laparoscopy or Is It Everything Else?. , 2018, , 21-29.		0
65	Clinical and Economic Impact of an Enhanced Recovery Pathway for Open and Laparoscopic Rectal Surgery. Journal of Laparoendoscopic and Advanced Surgical Techniques - Part A, 2018, 28, 811-818.	1.0	6
66	Development of a Model for the Acquisition and Assessment of Advanced Laparoscopic Suturing Skills Using an Automated Device. Surgical Innovation, 2018, 25, 286-290.	0.9	5
67	Association of an Enhanced Recovery Pilot With Length of Stay in the National Surgical Quality Improvement Program. JAMA Surgery, 2018, 153, 358.	4.3	25
68	American Society for Enhanced Recovery and Perioperative Quality Initiative Joint Consensus Statement on Patient-Reported Outcomes in an Enhanced Recovery Pathway. Anesthesia and Analgesia, 2018, 126, 1874-1882.	2.2	73
69	A scoping review of assessment tools for laparoscopic suturing. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 3009-3023.	2.4	14
70	From Preoperative Assessment to Preoperative Optimization of Frailty. JAMA Surgery, 2018, 153, e180213.	4.3	13
71	Association of Elevated Preâ€operative Hemoglobin A1c and Postâ€operative Complications in Nonâ€diabetic Patients: A Systematic Review. World Journal of Surgery, 2018, 42, 61-72.	1.6	30
72	Determinants of variability in management of acute calculous cholecystitis. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 1858-1866.	2.4	5

#	Article	IF	CITATIONS
73	Predictors of adherence to enhanced recovery pathway elements after laparoscopic colorectal surgery. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 1812-1819.	2.4	12
74	Incisional Hernia After Midline Versus Transverse Specimen Extraction Incision. Annals of Surgery, 2018, 268, 41-47.	4.2	53
75	An app for patient education and self-audit within an enhanced recovery program for bowel surgery: a pilot study assessing validity and usability. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 2263-2273.	2.4	57
76	How Do We Value Postoperative Recovery?. Annals of Surgery, 2018, 267, 656-669.	4.2	53
77	Enhanced recovery after pulmonary surgery. Journal of Thoracic Disease, 2018, 10, S3755-S3755.	1.4	9
78	Enhanced Recovery After Surgery. Surgical Clinics of North America, 2018, 98, 1137-1148.	1.5	13
79	Measuring In-Hospital Recovery After Colorectal Surgery Within a Well-Established Enhanced Recovery Pathway: A Comparison Between Hospital Length of Stay and Time to Readiness for Discharge. Diseases of the Colon and Rectum, 2018, 61, 854-860.	1.3	24
80	Development of a patient-reported outcome measure of recovery after abdominal surgery: a hypothesized conceptual framework. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 4874-4885.	2.4	13
81	Ureteral Obstruction Secondary to an Appendiceal Mucocele: A Case Report and Literature Review. Journal of Endourology Case Reports, 2018, 4, 78-81.	0.3	1
82	Effect of Diagnosis on Outcomes in the Setting of Enhanced Recovery Protocols. Diseases of the Colon and Rectum, 2018, 61, 847-853.	1.3	17
83	Function and Prehabilitation. , 2018, , 1-17.		Ο
84	Perioperative feedback in surgical training: A systematic review. American Journal of Surgery, 2017, 214, 117-126.	1.8	47
85	Improving Surgical Value and Culture Through Enhanced Recovery Programs. JAMA Surgery, 2017, 152, 299.	4.3	21
86	Effectiveness of Telementoring in Surgery Compared With On-site Mentoring: A Systematic Review. Surgical Innovation, 2017, 24, 379-385.	0.9	55
87	Goal-directed Fluid Therapy Does Not Reduce Primary Postoperative Ileus after Elective Laparoscopic Colorectal Surgery. Anesthesiology, 2017, 127, 36-49.	2.5	80
88	Establishing meaningful benchmarks: the development of a formative feedback tool for advanced laparoscopic suturing. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 5057-5065.	2.4	13
89	Incidence of incisional hernia in the specimen extraction site for laparoscopic colorectal surgery: systematic review and meta-analysis. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 5083-5093.	2.4	96
90	What Are the Principles That Guide Behaviors in the Operating Room?. Annals of Surgery, 2017, 265, 255-267.	4.2	75

#	Article	IF	CITATIONS
91	Ensuring Early Mobilization Within an Enhanced Recovery Program for Colorectal Surgery. Annals of Surgery, 2017, 266, 223-231.	4.2	75
92	What are the Training Gaps for Acquiring Laparoscopic Suturing Skills?. Journal of Surgical Education, 2017, 74, 656-662.	2.5	21
93	Surgical Prehabilitation in Patients with Cancer. Physical Medicine and Rehabilitation Clinics of North America, 2017, 28, 49-64.	1.3	162
94	Uptake of enhanced recovery practices by SAGES members: a survey. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 3519-3526.	2.4	18
95	Clinical practice guideline for enhanced recovery after colon and rectal surgery from the American Society of Colon and Rectal Surgeons (ASCRS) and Society of American Gastrointestinal and Endoscopic Surgeons (SAGES). Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 3412-3436.	2.4	55
96	Economic Impact of an Enhanced Recovery Pathway for Lung Resection. Annals of Thoracic Surgery, 2017, 104, 950-957.	1.3	41
97	ls "Move, Breathe, Eat and Relax―Training for Major Surgery Effective?. Annals of Surgery, 2017, 266, e82-e83.	4.2	2
98	Clinical Practice Guidelines for Enhanced Recovery After Colon and Rectal Surgery From the American Society of Colon and Rectal Surgeons and Society of American Gastrointestinal and Endoscopic Surgeons. Diseases of the Colon and Rectum, 2017, 60, 761-784.	1.3	309
99	Psychometric properties of the Global Operative Assessment of Laparoscopic Skills (GOALS) using item response theory. American Journal of Surgery, 2017, 213, 273-276.	1.8	9
100	Impact of adherence to care pathway interventions on recovery following bowel resection within an established enhanced recovery program. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 1760-1771.	2.4	77
101	Impact of miniport laparoscopic cholecystectomy versus standard port laparoscopic cholecystectomy on recovery of physical activity: a randomized trial. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 2299-2309.	2.4	18
102	Don't fix it if it isn't broken: a survey of preparedness for practice among graduates of Fellowship Council-accredited fellowships. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 2287-2298.	2.4	10
103	Biologic mesh for repair of ventral hernias in contaminated fields: long-term clinical and patient-reported outcomes. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 861-871.	2.4	28
104	Measuring intra-operative decision-making during laparoscopic cholecystectomy: validity evidence for a novel interactive Web-based assessment tool. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 1203-1212.	2.4	23
105	Fundamental Use of Surgical Energy (FUSE): An Essential Educational Program for Operating Room Safety. , 2017, 21, 16-050.		12
106	Patients with poor baseline walking capacity are most likely to improve their functional status with multimodal prehabilitation. Surgery, 2016, 160, 1070-1079.	1.9	138
107	Reply to: Early mobilization in abdominal and thoracic surgery. Surgery, 2016, 160, 1711-1712.	1.9	0
108	Application of an individualized operative strategy for wedge resection of gastric gastrointestinal stromal tumors: Effectiveness for tumors in difficult locations. Surgery, 2016, 160, 1038-1048.	1.9	8

#	Article	IF	CITATIONS
109	The effect of early mobilization protocols on postoperative outcomes following abdominal and thoracic surgery: A systematic review. Surgery, 2016, 159, 991-1003.	1.9	145
110	Fundamental Use of Surgical Energy (FUSE) certification: validation and predictors of success. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 916-924.	2.4	9
111	Screening for thrombophilia does not identify patients at risk of portal or splenic vein thrombosis following laparoscopic splenectomy. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 2119-2126.	2.4	16
112	Selective strategy for intensive monitoring after pheochromocytoma resection. Surgery, 2016, 159, 275-283.	1.9	19
113	Reliable assessment of operative performance. American Journal of Surgery, 2016, 211, 426-430.	1.8	16
114	New models for advanced laparoscopic suturing: taking it to the next level. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 581-587.	2.4	21
115	Surgeons have knowledge gaps in the safe use of energy devices: a multicenter cross-sectional study. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 588-592.	2.4	31
116	A systematic review of performance assessment tools for laparoscopic cholecystectomy. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 832-844.	2.4	27
117	Systematic review of the influence of enhanced recovery pathways in elective lung resection. Journal of Thoracic and Cardiovascular Surgery, 2016, 151, 708-715.e6.	0.8	101
118	Structured simulation improves learning of the Fundamental Use of Surgical Energyâ"¢ curriculum: a multicenter randomized controlled trial. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 684-691.	2.4	13
119	The six-minute walk test as a measure of postoperative recovery after colorectal resection: further examination of its measurement properties. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 2199-2206.	2.4	71
120	Defining competencies for safe thyroidectomy: An international Delphi consensus. Surgery, 2016, 159, 86-101.	1.9	15
121	Long-term knowledge retention following simulation-based training for electrosurgical safety: 1-year follow-up of a randomized controlled trial. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 1156-1163.	2.4	35
122	The impact of postoperative complications on the recovery of elderly surgical patients. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 1762-1770.	2.4	44
123	Reply to Letter. Annals of Surgery, 2015, 261, e138-e139.	4.2	4
124	Cost-effectiveness of Enhanced Recovery Versus Conventional Perioperative Management for Colorectal Surgery. Annals of Surgery, 2015, 262, 1026-1033.	4.2	130
125	Cout After Living Kidney Donation: A Matched Cohort Study. American Journal of Kidney Diseases, 2015, 65, 925-932.	1.9	45
126	Fundamental Use of Surgical Energy (FUSE). Annals of Surgery, 2015, 262, 20-22.	4.2	13

#	Article	IF	CITATIONS
127	Safe energy use in the operating room. Current Problems in Surgery, 2015, 52, 447-468.	1.1	26
128	How well are we measuring postoperative "recovery―after abdominal surgery?. Quality of Life Research, 2015, 24, 2583-2590.	3.1	36
129	What outcomes are important in the assessment of Enhanced Recovery After Surgery (ERAS) pathways?. Canadian Journal of Anaesthesia, 2015, 62, 120-130.	1.6	96
130	Camera navigation and cannulation: validity evidence for new educational tasks to complement the Fundamentals of Laparoscopic Surgery Program. Surgical Endoscopy and Other Interventional Techniques, 2015, 29, 552-557.	2.4	13
131	Expert Intraoperative Judgment and Decision-Making: Defining the Cognitive Competencies for Safe Laparoscopic Cholecystectomy. Journal of the American College of Surgeons, 2015, 221, 931-940e8.	0.5	35
132	Validity of the EuroQol-5 dimensions as a measure of recovery after pulmonary resection. Journal of Surgical Research, 2015, 194, 281-288.	1.6	8
133	You Have a Message! Social Networking as a Motivator for FLS Training. Journal of Surgical Education, 2015, 72, 542-548.	2.5	14
134	Introduction to Enhanced Recovery Programs: A Paradigm Shift in Perioperative Care. , 2015, , 1-10.		1
135	An enhanced recovery pathway reduces duration of stay and complications after open pulmonaryÂlobectomy. Surgery, 2015, 158, 899-910.	1.9	135
136	Predictors of mortality and morbidity for acute care surgery patients. Journal of Surgical Research, 2015, 193, 868-873.	1.6	18
137	In Reply. Anesthesiology, 2015, 122, 1438-1439.	2.5	8
138	A Systematic Review of Economic Evaluations of Enhanced Recovery Pathways for Colorectal Surgery. Annals of Surgery, 2014, 259, 670-676.	4.2	97
139	Enhanced recovery pathway for radical prostatectomy: Implementation and evaluation in a universal healthcare system. Canadian Urological Association Journal, 2014, 8, 418.	0.6	27
140	Formal research training during surgical residency: scaffolding for academic success. American Journal of Surgery, 2014, 207, 141-145.	1.8	29
141	Measuring postoperative recovery: What are clinically meaningful differences?. Surgery, 2014, 156, 319-327.	1.9	56
142	A comparison of the validity of two indirect utility instruments as measures of postoperative recovery. Journal of Surgical Research, 2014, 190, 79-86.	1.6	19
143	Impact of a hands-on component on learning in the Fundamental Use of Surgical Energyâ"¢ (FUSE) curriculum: a randomized-controlled trial in surgical trainees. Surgical Endoscopy and Other Interventional Techniques, 2014, 28, 2772-2782.	2.4	32
144	Cost Effectiveness of Mesh Prophylaxis to Prevent Parastomal Hernia in Patients Undergoing Permanent Colostomy for Rectal Cancer. Journal of the American College of Surgeons, 2014, 218, 82-91.	0.5	52

#	Article	IF	CITATIONS
145	Laparoscopy Plus Enhanced Recovery: Optimizing the Benefits of MIS Through SAGES â€~SMART' Program. Surgical Endoscopy and Other Interventional Techniques, 2014, 28, 1403-1406.	2.4	15
146	A systematic review of synthetic and biologic materials for abdominal wall reinforcement in contaminated fields. Surgical Endoscopy and Other Interventional Techniques, 2014, 28, 2531-2546.	2.4	62
147	Validation of the SF-36 as a measure of postoperative recovery after colorectal surgery. Surgical Endoscopy and Other Interventional Techniques, 2014, 28, 3168-3178.	2.4	46
148	Fundamental Use of Surgical Energyâ,,¢ (FUSE): a curriculum on surgical energy-based devices. Surgical Endoscopy and Other Interventional Techniques, 2014, 28, 2509-2512.	2.4	31
149	Short-stay surgery: What really happens after discharge?. Surgery, 2014, 156, 20-27.	1.9	41
150	What does it really mean to "recover―from an operation?. Surgery, 2014, 155, 211-216.	1.9	164
151	Prehabilitation <i>versus</i> Rehabilitation. Anesthesiology, 2014, 121, 937-947.	2.5	640
152	Rationale for the Fundamental Use of Surgical Energyâ,,¢ (FUSE) curriculum assessment: focus on safety. Surgical Endoscopy and Other Interventional Techniques, 2013, 27, 4054-4059.	2.4	36
153	Impact of an enhanced recovery program on short-term outcomes after scheduled laparoscopic colon resection. Surgical Endoscopy and Other Interventional Techniques, 2013, 27, 133-138.	2.4	21
154	Impact of a trimodal prehabilitation program on functional recovery after colorectal cancer surgery: a pilot study. Surgical Endoscopy and Other Interventional Techniques, 2013, 27, 1072-1082.	2.4	436
155	Valuing postoperative recovery: validation of the SF-6D health-state utility. Journal of Surgical Research, 2013, 184, 108-114.	1.6	22
156	Ensuring Safety in the Operating Room. International Anesthesiology Clinics, 2013, 51, 65-80.	0.8	6
157	An enhanced recovery pathway decreases duration of stay after esophagectomy. Surgery, 2012, 152, 606-616.	1.9	98
158	High incidence of symptomatic incisional hernia after midline extraction in laparoscopic colon resection. Surgical Endoscopy and Other Interventional Techniques, 2012, 26, 3180-3185.	2.4	96
159	Surgeons don't know what they don't know about the safe use of energy in surgery. Surgical Endoscopy and Other Interventional Techniques, 2012, 26, 2735-2739.	2.4	76
160	New dog, new tricks: trends in performance on the Fundamentals of Laparoscopic Surgery simulator for incoming surgery residents. Surgical Endoscopy and Other Interventional Techniques, 2012, 26, 68-71.	2.4	10
161	Objective assessment, selection, and certification in surgery. Surgical Oncology, 2011, 20, 140-145.	1.6	25
162	Sex is not everything: the role of gender in early performance of a fundamental laparoscopic skill. Surgical Endoscopy and Other Interventional Techniques, 2011, 25, 1037-1042.	2.4	63

#	Article	IF	CITATIONS
163	Evaluation of surgical performance during laparoscopic incisional hernia repair: a multicenter study. Surgical Endoscopy and Other Interventional Techniques, 2011, 25, 2555-2563.	2.4	19
164	Mastery versus the standard proficiency target for basic laparoscopic skill training: effect on skill training transfer and retention. Surgical Endoscopy and Other Interventional Techniques, 2011, 25, 2063-2070.	2.4	39
165	Laparoscopic Splenectomy: Standardized Approach. World Journal of Surgery, 2011, 35, 1487-1495.	1.6	58
166	Recommended timing for surveillance ultrasonography to diagnose portal splenic vein thrombosis after laparoscopic splenectomy. Surgical Endoscopy and Other Interventional Techniques, 2010, 24, 1670-1678.	2.4	32
167	Fundamentals of Laparoscopic Surgery simulator training to proficiency improves laparoscopic performance in the operating room—a randomized controlled trial. American Journal of Surgery, 2010, 199, 115-120.	1.8	469
168	Validation of a physical activity questionnaire (CHAMPS) as an indicator of postoperative recovery after laparoscopic cholecystectomy. Surgery, 2009, 146, 31-39.	1.9	64
169	A method to characterize the learning curve for performance of a fundamental laparoscopic simulator task: Defining "learning plateau―and "learning rate― Surgery, 2009, 146, 381-386.	1.9	98
170	Refining the Selection Criteria for Laparoscopic Versus Open Splenectomy for Splenomegaly. Journal of Laparoendoscopic and Advanced Surgical Techniques - Part A, 2008, 18, 13-19.	1.0	39
171	Evaluating Intraoperative Laparoscopic Skill: Direct Observation Versus Blinded Videotaped Performances. Surgical Innovation, 2007, 14, 211-216.	0.9	56
172	Evaluating Surgical Outcomes. Surgical Clinics of North America, 2006, 86, 129-149.	1.5	44
173	Measuring Surgical Recovery: The Study of Laparoscopic Live Donor Nephrectomy. American Journal of Transplantation, 2005, 5, 2489-2495.	4.7	36
174	A global assessment tool for evaluation of intraoperative laparoscopic skills. American Journal of Surgery, 2005, 190, 107-113.	1.8	722
175	Proving the Value of Simulation in Laparoscopic Surgery. Annals of Surgery, 2004, 240, 518-528.	4.2	715
176	Using simulators to assess laparoscopic competence: ready for widespread use?. Surgery, 2004, 135, 28-42.	1.9	149
177	Relationship between objective assessment of technical skills and subjective in-training evaluations in surgical residents. Journal of the American College of Surgeons, 2004, 198, 105-110.	0.5	139
178	Causes of increased length of hospitalization on a general thoracic surgery service: a prospective observational study. Canadian Journal of Surgery, 2002, 45, 264-8.	1.2	60