Braden Te Ao

List of Publications by Year in Descending Order

Source: https://exaly.com/author-pdf/2897918/braden-te-ao-publications-by-year.pdf

Version: 2024-04-24

This document has been generated based on the publications and citations recorded by exaly.com. For the latest version of this publication list, visit the link given above.

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

44 3,335 14 48 g-index

48 4,286 6.7 3.05 ext. papers ext. citations avg, IF L-index

#	Paper	IF	Citations
44	Neurocognitive correlates of probable posttraumatic stress disorder following traumatic brain injury. <i>Brain and Spine</i> , 2022 , 2, 100854		O
43	Effect of frailty on 6-month outcome after traumatic brain injury: a multicentre cohort study with external validation <i>Lancet Neurology, The</i> , 2022 , 21, 153-162	24.1	2
42	Serum metabolome associated with severity of acute traumatic brain injury <i>Nature Communications</i> , 2022 , 13, 2545	17.4	2
41	Questionnaires vs Interviews for the Assessment of Global Functional Outcomes After Traumatic Brain Injury. <i>JAMA Network Open</i> , 2021 , 4, e2134121	10.4	О
40	Explaining Outcome Differences between Men and Women following Mild Traumatic Brain Injury. Journal of Neurotrauma, 2021 , 38, 3315-3331	5.4	6
39	Prediction of Global Functional Outcome and Post-Concussive Symptoms after Mild Traumatic Brain Injury: External Validation of Prognostic Models in the Collaborative European NeuroTrauma Effectiveness Research in Traumatic Brain Injury (CENTER-TBI) Study. <i>Journal of Neurotrauma</i> , 2021 ,	5.4	4
38	38, 196-209 Differences between Men and Women in Treatment and Outcome after Traumatic Brain Injury. Journal of Neurotrauma, 2021 , 38, 235-251	5.4	12
37	Persistent postconcussive symptoms in children and adolescents with mild traumatic brain injury receiving initial head computed tomography. <i>Journal of Neurosurgery: Pediatrics</i> , 2021 , 1-10	2.1	2
36	Missing Data in Prediction Research: A Five-Step Approach for Multiple Imputation, Illustrated in the CENTER-TBI Study. <i>Journal of Neurotrauma</i> , 2021 , 38, 1842-1857	5.4	4
35	Frequency of fatigue and its changes in the first 6[months after traumatic brain injury: results from the CENTER-TBI study. <i>Journal of Neurology</i> , 2021 , 268, 61-73	5.5	2
34	Outcome Prediction after Moderate and Severe Traumatic Brain Injury: External Validation of Two Established Prognostic Models in 1742 European Patients. <i>Journal of Neurotrauma</i> , 2021 , 38, 1377-1388	₃ 5·4	11
33	Global Characterisation of Coagulopathy in Isolated Traumatic Brain Injury (iTBI): A CENTER-TBI Analysis. <i>Neurocritical Care</i> , 2021 , 35, 184-196	3.3	8
32	Economic analysis of the Trake ChargeTintervention for people following stroke: Results from a randomised trial. <i>Clinical Rehabilitation</i> , 2021 , 2692155211040727	3.3	1
31	Occurrence and timing of withdrawal of life-sustaining measures in traumatic brain injury patients: a CENTER-TBI study. <i>Intensive Care Medicine</i> , 2021 , 47, 1115-1129	14.5	1
30	Primary versus early secondary referral to a specialized neurotrauma center in patients with moderate/severe traumatic brain injury: a CENTER TBI study. <i>Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine</i> , 2021 , 29, 113	3.6	2
29	Can We Cluster ICU Treatment Strategies for Traumatic Brain Injury by Hospital Treatment Preferences?. <i>Neurocritical Care</i> , 2021 , 1	3.3	0
28	Extended Coagulation Profiling in Isolated Traumatic Brain Injury: A CENTER-TBI Analysis Neurocritical Care, 2021 , 1	3.3	O

(2016-2020)

27	Comparison of Care System and Treatment Approaches for Patients with Traumatic Brain Injury in China versus Europe: A CENTER-TBI Survey Study. <i>Journal of Neurotrauma</i> , 2020 , 37, 1806-1817	5.4	7	
26	Machine learning algorithms performed no better than regression models for prognostication in traumatic brain injury. <i>Journal of Clinical Epidemiology</i> , 2020 , 122, 95-107	5.7	47	
25	Informed consent procedures in patients with an acute inability to provide informed consent: Policy and practice in the CENTER-TBI study. <i>Journal of Critical Care</i> , 2020 , 59, 6-15	4	4	
24	Measuring stroke and transient ischemic attack burden in New Zealand: Protocol for the fifth Auckland Regional Community Stroke Study (ARCOS V). <i>International Journal of Stroke</i> , 2020 , 15, 573-58	8 ^{§.3}		
23	Toward a New Multi-Dimensional Classification of Traumatic Brain Injury: A Collaborative European NeuroTrauma Effectiveness Research for Traumatic Brain Injury Study. <i>Journal of Neurotrauma</i> , 2020 , 37, 1002-1010	5.4	9	
22	Indigenous voices on measuring and valuing health states. <i>AlterNative</i> , 2020 , 16, 3-9	1	4	
21	Predictors of Access to Rehabilitation in the Year Following Traumatic Brain Injury: A European Prospective and Multicenter Study. <i>Neurorehabilitation and Neural Repair</i> , 2020 , 34, 814-830	4.7	5	
20	Tracheal intubation in traumatic brain injury: a multicentre prospective observational study. <i>British Journal of Anaesthesia</i> , 2020 , 125, 505-517	5.4	9	
19	Health-related quality of life after traumatic brain injury: deriving value sets for the QOLIBRI-OS for Italy, The Netherlands and The United Kingdom. <i>Quality of Life Research</i> , 2020 , 29, 3095-3107	3.7	1	
18	Case-mix, care pathways, and outcomes in patients with traumatic brain injury in CENTER-TBI: a European prospective, multicentre, longitudinal, cohort study. <i>Lancet Neurology, The</i> , 2019 , 18, 923-934	1 ^{24.1}	139	
17	A Nationwide, Population-Based Prevalence Study of Genetic Muscle Disorders. <i>Neuroepidemiology</i> , 2019 , 52, 128-135	5.4	16	
16	Status epilepticus in Auckland, New Zealand: Incidence, etiology, and outcomes. <i>Epilepsia</i> , 2019 , 60, 155	526.1456	411	
15	Estimating the economic costs of ethnic health inequities: protocol for a prevalence-based cost-of-illness study in New Zealand (2003-2014). <i>BMJ Open</i> , 2018 , 8, e020763	3	1	
14	EpiNet study of incidence of status epilepticus in Auckland, New Zealand: Methods and preliminary results. <i>Epilepsia</i> , 2018 , 59 Suppl 2, 144-149	6.4	1	
13	Work Limitations 4 Years After Mild Traumatic Brain Injury: A Cohort Study. <i>Archives of Physical Medicine and Rehabilitation</i> , 2017 , 98, 1560-1566	2.8	40	
12	Meta-analysis and cost effective analysis of portal-superior mesenteric vein resection during pancreatoduodenectomy: Impact on margin status and survival. <i>Surgical Oncology</i> , 2017 , 26, 53-62	2.5	28	
11	Traumatic brain injury: integrated approaches to improve prevention, clinical care, and research. <i>Lancet Neurology, The</i> , 2017 , 16, 987-1048	24.1	851	
10	Incidence of Transient Ischemic Attack in Auckland, New Zealand, in 2011 to 2012. <i>Stroke</i> , 2016 , 47, 218	3687	14	

9	Neuropsychological outcome and its correlates in the first year after adult mild traumatic brain injury: A population-based New Zealand study. <i>Brain Injury</i> , 2015 , 29, 1604-16	2.1	46
8	Potential gains and costs from increasing access to thrombolysis for acute ischemic stroke patients in New Zealand hospitals. <i>International Journal of Stroke</i> , 2015 , 10, 903-10	6.3	4
7	30-Year Trends in Stroke Rates and Outcome in Auckland, New Zealand (1981-2012): A Multi-Ethnic Population-Based Series of Studies. <i>PLoS ONE</i> , 2015 , 10, e0134609	3.7	52
6	The Global Burden of Cancer 2013. <i>JAMA Oncology</i> , 2015 , 1, 505-27	13.4	1870
5	Use of the EpiNet database for observational study of status epilepticus in Auckland, New Zealand. <i>Epilepsy and Behavior</i> , 2015 , 49, 164-9	3.2	3
4	Burden of Traumatic Brain Injury in New Zealand: Incidence, Prevalence and Disability-Adjusted Life Years. <i>Neuroepidemiology</i> , 2015 , 44, 255-61	5.4	15
3	Cost of traumatic brain injury in New Zealand: evidence from a population-based study. <i>Neurology</i> , 2014 , 83, 1645-52	6.5	55
2	Reducing recurrent stroke: methodology of the motivational interviewing in stroke (MIST) randomized clinical trial. <i>International Journal of Stroke</i> , 2014 , 9, 133-9	6.3	17
1	The cost effectiveness of genetic testing for CYP2C19 variants to guide thienopyridine treatment in patients with acute coronary syndromes: a New Zealand evaluation. <i>Pharmacoeconomics</i> , 2012 , 30, 1067-84	4.4	27