Grant Innes

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.

78 citations 1.2 3.86 ext. papers ext. citations avg, IF 21 34 g-index 2.1 g-i

#	Paper	IF	Citations
68	Sex-related differences in opioid administration in the emergency department: a population-based study. <i>Emergency Medicine Journal</i> , 2021 , 38, 467-473	1.5	O
67	Does pain severity predict stone characteristics or outcomes in emergency department patients with acute renal colic?. <i>American Journal of Emergency Medicine</i> , 2021 , 45, 37-41	2.9	0
66	Decision support for computed tomography in the emergency department: a multicenter cluster-randomized controlled trial. <i>Canadian Journal of Emergency Medicine</i> , 2021 , 23, 631-640	0.6	O
65	Prognostic long-term value of nonobstructive disease in emergency department chest pain patients who undergo CCTA <i>Journal of Cardiovascular Computed Tomography</i> , 2021 ,	2.8	
64	Prospective comparative evaluation of the European Society of Cardiology (ESC) 1-hour and a 2-hour rapid diagnostic algorithm for myocardial infarction using high-sensitivity troponin-T. <i>Canadian Journal of Emergency Medicine</i> , 2020 , 22, 712-720	0.6	3
63	Throughput interventions to reduce emergency department crowding: A systematic review. <i>Canadian Journal of Emergency Medicine</i> , 2020 , 22, 864-874	0.6	1
62	Decision aid for early identification of acute underlying illness in emergency department patients with atrial fibrillation or flutter. <i>Canadian Journal of Emergency Medicine</i> , 2020 , 22, 301-308	0.6	O
61	Lorazepam Versus Diazepam in the Management of Emergency Department Patients With Alcohol Withdrawal. <i>Annals of Emergency Medicine</i> , 2020 , 76, 774-781	2.1	1
60	Low High-Sensitivity Troponin Thresholds Identify Low-Risk Patients With Chest Pain Unlikely to Benefit From Further Risk Stratification. <i>CJC Open</i> , 2019 , 1, 289-296	2	4
59	Debate Series: #HallwayMedicine - Our responsibility to assess patients is not limited to those in beds; emergency physicians must assess patients in the hallway and the waiting room when traditional bed spaces are unavailable. <i>Canadian Journal of Emergency Medicine</i> , 2019 , 21, 580-586	0.6	2
58	Emergency Department Patients With a Prolonged Corrected QT Interval Do Not Have Increased Thirty-day Mortality. <i>Academic Emergency Medicine</i> , 2019 , 26, 818-822	3.4	
57	Are emergency medical services offload delay patients at increased risk of adverse outcomes?. <i>Canadian Journal of Emergency Medicine</i> , 2019 , 21, 505-512	0.6	1
56	Active management of atrial fibrillation or flutter in emergency department patients with renal impairment is associated with a higher risk of adverse events and treatment failure. <i>Canadian Journal of Emergency Medicine</i> , 2019 , 21, 352-360	0.6	1
55	Sex-specific, high-sensitivity cardiac troponin T cut-off concentrations for ruling out acute myocardial infarction with a single measurement. <i>Canadian Journal of Emergency Medicine</i> , 2019 , 21, 26-33	0.6	9
54	Safety of a Brief Emergency Department Observation Protocol for Patients With Presumed Fentanyl Overdose. <i>Annals of Emergency Medicine</i> , 2018 , 72, 1-8.e1	2.1	18
53	Variability of renal colic management and outcomes in two Canadian cities. <i>Canadian Journal of Emergency Medicine</i> , 2018 , 20, 702-712	0.6	8
52	Accountability: A magic bullet for emergency care delays and healthcare access blocks. <i>Healthcare Management Forum</i> , 2018 , 31, 172-177	1.7	2

51	Comparative Evaluation of 2-Hour Rapid Diagnostic Algorithms for Acute Myocardial Infarction Using High-Sensitivity Cardiac Troponin T. <i>Canadian Journal of Cardiology</i> , 2017 , 33, 1006-1012	3.8	21	
50	Undetectable Concentrations of a Food and Drug Administration-approved High-sensitivity Cardiac Troponin T Assay to Rule Out Acute Myocardial Infarction at Emergency Department Arrival. <i>Academic Emergency Medicine</i> , 2017 , 24, 1267-1277	3.4	27	
49	Limitations of pulmonary embolism ICD-10 codes in emergency department administrative data: let the buyer beware. <i>BMC Medical Research Methodology</i> , 2017 , 17, 89	4.7	42	
48	Slow or swift, your patients' experience won't drift: absence of correlation between physician productivity and the patient experience. <i>Canadian Journal of Emergency Medicine</i> , 2017 , 19, 372-380	0.6	1	
47	Sorrywe're full! Access block and accountability failure in the health care system. <i>Canadian Journal of Emergency Medicine</i> , 2015 , 17, 171-9	0.6	9	
46	Safety and efficiency of outpatient versus emergency department-based coronary CT angiography for evaluation of patients with potential ischemic chest pain. <i>Journal of Cardiovascular Computed Tomography</i> , 2015 , 9, 534-7	2.8	6	
45	CAEP 2014 Academic symposium: "How to make research succeed in your department: How to fund your research program". <i>Canadian Journal of Emergency Medicine</i> , 2015 , 17, 453-61	0.6	9	
44	Assessment of consultation impact on emergency department operations through novel metrics of responsiveness and decision-making efficiency. <i>Canadian Journal of Emergency Medicine</i> , 2014 , 16, 185-	92 ^{.6}	9	
43	Development and validation of a prediction rule for early discharge of low-risk emergency department patients with potential ischemic chest pain. <i>Canadian Journal of Emergency Medicine</i> , 2014 , 16, 106-19	0.6	30	
42	Safety and efficiency of calcium channel blockers versus beta-blockers for rate control in patients with atrial fibrillation and no acute underlying medical illness. <i>Academic Emergency Medicine</i> , 2013 , 20, 222-30	3.4	35	
41	The role of full capacity protocols on mitigating overcrowding in EDs. <i>American Journal of Emergency Medicine</i> , 2012 , 30, 412-20	2.9	24	
40	The role of a rapid assessment zone/pod on reducing overcrowding in emergency departments: a systematic review. <i>Emergency Medicine Journal</i> , 2012 , 29, 372-8	1.5	44	
39	The role of triage liaison physicians on mitigating overcrowding in emergency departments: a systematic review. <i>Academic Emergency Medicine</i> , 2011 , 18, 111-20	3.4	78	
38	The role of triage nurse ordering on mitigating overcrowding in emergency departments: a systematic review. <i>Academic Emergency Medicine</i> , 2011 , 18, 1349-57	3.4	60	
37	Thirty-day outcomes of emergency department patients undergoing electrical cardioversion for atrial fibrillation or flutter. <i>Academic Emergency Medicine</i> , 2010 , 17, 408-15	3.4	51	
36	A prospective randomized controlled trial comparing circumferential casting and splinting in displaced Colles fractures. <i>Canadian Journal of Emergency Medicine</i> , 2010 , 12, 192-200	0.6	29	
35	Safety of assessment of patients with potential ischemic chest pain in an emergency department waiting room: a prospective comparative cohort study. <i>Annals of Emergency Medicine</i> , 2010 , 56, 455-62	2.1	18	
34	Prevalence of and risk factors for methicillin-resistant Staphylococcus aureus skin and soft tissue infection in a Canadian emergency department. <i>Canadian Journal of Emergency Medicine</i> , 2009 , 11, 430-	8 ^{0.6}	36	

33	Value of information of a clinical prediction rule: informing the efficient use of healthcare and health research resources. <i>International Journal of Technology Assessment in Health Care</i> , 2008 , 24, 112	<u>2</u> -9 ^{1.8}	8
32	Key indicators of overcrowding in Canadian emergency departments: a Delphi study. <i>Canadian Journal of Emergency Medicine</i> , 2007 , 9, 339-46	0.6	58
31	Clinical utility of novel cardiac markers: let the buyer beware. <i>Canadian Journal of Emergency Medicine</i> , 2006 , 8, 32-6	0.6	O
30	A clinical prediction rule for early discharge of patients with chest pain. <i>Annals of Emergency Medicine</i> , 2006 , 47, 1-10	2.1	132
29	Canadian Emergency Department Information System (CEDIS) Presenting Complaint List (Version 1.0). <i>Canadian Journal of Emergency Medicine</i> , 2003 , 5, 27-34	0.6	56
28	Inter-rater reliability of a computerized presenting-complaint-linked triage system in an urban emergency department. <i>Canadian Journal of Emergency Medicine</i> , 2003 , 5, 323-9	0.6	38
27	Implications of the SARS outbreak for Canadian emergency departments. <i>Canadian Journal of Emergency Medicine</i> , 2003 , 5, 343-7	0.6	6
26	Quality of care in walk-in clinics, family practices and emergency departments: the Ontario Walk-In Clinic Study. <i>Canadian Journal of Emergency Medicine</i> , 2003 , 5, 350-2	0.6	1
25	Diagnostic testing: an emergency medicine perspective. <i>Canadian Journal of Emergency Medicine</i> , 2002 , 4, 348-54	0.6	16
24	Thinking outside the box. Canadian Journal of Emergency Medicine, 2002, 4, 316-317	0.6	2
23	Diagnostic parameters of CK-MB and myoglobin related to chest pain duration. <i>Canadian Journal of Emergency Medicine</i> , 2002 , 4, 322-30	0.6	3
22	Prediction rule in opioid overdose. <i>Academic Emergency Medicine</i> , 2001 , 8, 403-4	3.4	1
21	Patients are waiting. Canadian Journal of Emergency Medicine, 2001, 3, 263	0.6	
20	A consensus-based process to define standard national data elements for a Canadian emergency department information system. <i>Canadian Journal of Emergency Medicine</i> , 2001 , 3, 277-84	0.6	28
19	Early discharge of patients with presumed opioid overdose: development of a clinical prediction rule. <i>Academic Emergency Medicine</i> , 2000 , 7, 1110-8	3.4	55
18			T 2
	Is early discharge safe after naloxone reversal of presumed opioid overdose?. <i>Canadian Journal of Emergency Medicine</i> , 2000 , 2, 156-62	0.6	13
17		0.6	6

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15	Health Angels?. Canadian Journal of Emergency Medicine, 2000 , 2, 53	0.6	
14	Eat what you kill. Canadian Journal of Emergency Medicine, 2000, 2, 228-229	0.6	3
13	A randomized trial of the effects of early cardiac serum marker availability on reperfusion therapy in patients with acute myocardial infarction: the serial markers, acute myocardial infarction and rapid treatment trial (SMARTT). <i>Journal of the American College of Cardiology</i> , 2000 , 36, 1500-6	15.1	29
12	Successful hospitalization of patients with no discernible pathology. <i>Canadian Journal of Emergency Medicine</i> , 2000 , 2, 47-51	0.6	Ο
11	Do emergency physicians know the costs of medical care?. <i>Canadian Journal of Emergency Medicine</i> , 2000 , 2, 95-102	0.6	27
10	Emergency department sedation guidelines: a tale of two specialties. <i>Canadian Journal of Emergency Medicine</i> , 1999 , 1, 88-139	0.6	4
9	Pharmaceutical advertising in magazines. Canadian Journal of Emergency Medicine, 1999, 1, 134	0.6	
8	Field of dreams. Canadian Journal of Emergency Medicine, 1999 , 1, 159-160	0.6	
7	Procedural sedation and analgesia in the emergency department. Canadian Consensus Guidelines. <i>Journal of Emergency Medicine</i> , 1999 , 17, 145-56	1.5	96
6	The health transition fund and the future of Canadian health care delivery. <i>Journal of Emergency Medicine</i> , 1999 , 17, 157-8	1.5	
5	Sudden death of a young hockey player: case report of commotio cordis. <i>Journal of Emergency Medicine</i> , 1999 , 17, 459-62	1.5	19
4	Bolus thrombolytic infusions during CPR. TPA in PEA Study Steering Committee. <i>Annals of Emergency Medicine</i> , 1998 , 32, 392	2.1	3
3	Guidelines for red blood cell and plasma transfusion for adults and children: an emergency physician's overview of the 1997 Canadian Blood Transfusion Guidelines. Part 2: Plasma transfusion and infectious risk. <i>Journal of Emergency Medicine</i> , 1998 , 16, 239-41	1.5	7
2	Guidelines for red blood cells and plasma transfusion for adults and children: an emergency physician's overview of the 1997 Canadian blood transfusion guidelines. Part 1: red blood cell transfusion. Canadian Medical Association Expert Working Group. <i>Journal of Emergency Medicine</i> ,	1.5	20
1	An unusual cause of abdominal pain and shock in pregnancy: case report and review of the literature. <i>Journal of Emergency Medicine</i> , 1985 , 2, 361-6	1.5	9