

# Josef Holzki

## List of Publications by Year in descending order

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Version: 2024-02-01

14  
papers

219  
citations

1683934

5  
h-index

1281743

11  
g-index

14  
all docs

14  
docs citations

14  
times ranked

213  
citing authors

#	ARTICLE	IF	CITATIONS
1	Anatomical In Vitro Investigations of the Pediatric Larynx: A Call for Manufacturer Redesign of Tracheal Tube Cuff Location and Perhaps a Call to Reconsider the Use of Uncuffed Tracheal Tubes. <i>Anesthesia and Analgesia</i> , 2021, 133, 894-902.	1.1	5
2	The anatomy of the pediatric airway: Has our knowledge changed in 120 years? A review of historic and recent investigations of the anatomy of the pediatric larynx. <i>Paediatric Anaesthesia</i> , 2018, 28, 13-22.	0.6	67
3	History of anatomical studies of the pediatric larynx. <i>Paediatric Anaesthesia</i> , 2016, 26, 223-225.	0.6	2
4	Considerable tracheal mucosal damage by high volume, low pressure cuffs in piglets. <i>Paediatric Anaesthesia</i> , 2014, 24, 883-885.	0.6	2
5	Intubation of the Pediatric Patient. , 2014, , 93-107.		0
6	Recent advances in pediatric anesthesia. <i>Korean Journal of Anesthesiology</i> , 2011, 60, 313.	0.9	3
7	Iatrogenic damage to the pediatric airway Mechanisms and scar development. <i>Paediatric Anaesthesia</i> , 2009, 19, 131-146.	0.6	42
8	Stridor is not a scientifically valid outcome measure for assessing airway injury. <i>Paediatric Anaesthesia</i> , 2009, 19, 180-197.	0.6	35
9	Role of the Tâ€piece. <i>Paediatric Anaesthesia</i> , 2008, 18, 92-93.	0.6	0
10	Laryngospasm. <i>Paediatric Anaesthesia</i> , 2008, 18, 976-978.	0.6	5
11	Laryngospasm. <i>Paediatric Anaesthesia</i> , 2008, 18, 1144-1146.	0.6	4
12	Congress impressions of a European participant of 9th Annual Meeting of the Japanese Society of Pediatric Anesthesiology, September 12-14, 2003 in Fukuoka, Kyushu, Japan. <i>Paediatric Anaesthesia</i> , 2004, 14, 370-371.	0.6	0
13	Death after re-exposure to propofol in a 3-year-old child: a case report. <i>Paediatric Anaesthesia</i> , 2004, 14, 265-270.	0.6	43
14	Life threatening unilateral pulmonary overinflation might be more successfully treated by contralateral selective intubation than by emergency pneumonectomy. <i>Paediatric Anaesthesia</i> , 2003, 13, 432-437.	0.6	11