

# Alexandra Heerdt

## List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/4177992/publications.pdf>

Version: 2024-02-01

28  
papers

1,913  
citations

430442

18  
h-index

610482

24  
g-index

28  
all docs

28  
docs citations

28  
times ranked

1548  
citing authors

#	ARTICLE	IF	CITATIONS
1	Margin Width and Local Recurrence in Patients Undergoing Breast Conservation After Neoadjuvant Chemotherapy. <i>Annals of Surgical Oncology</i> , 2022, 29, 484-492.	0.7	2
2	Can We Successfully De-Escalate Axillary Surgery in Women Aged $\geq$ 70 Years with Ductal Carcinoma in Situ or Early-Stage Breast Cancer Undergoing Mastectomy?. <i>Annals of Surgical Oncology</i> , 2022, 29, 2263-2272.	0.7	3
3	ASO Visual Abstract: Can We Successfully Deescalate Axillary Surgery in Women Aged $\geq$ 70 Years with Ductal Carcinoma In Situ or Early-Stage Breast Cancer Undergoing Mastectomy?. <i>Annals of Surgical Oncology</i> , 2022, 29, 2273.	0.7	0
4	ASO Visual Abstract: Margin Width and Local Recurrence in Patients Undergoing Breast Conservation after Neoadjuvant Chemotherapy. <i>Annals of Surgical Oncology</i> , 2021, 28, 584.	0.7	0
5	Nodal Recurrence in Patients With Node-Positive Breast Cancer Treated With Sentinel Node Biopsy Alone After Neoadjuvant Chemotherapy—A Rare Event. <i>JAMA Oncology</i> , 2021, 7, 1851.	3.4	61
6	Reply to “Downs-Canner S, Zabor EC, Wind T, Cobovic A, McCormick B, Morrow M, Heerdt A. Radiation Therapy After Breast-Conserving Surgery for Women 70 Years of Age or Older: How Wisely Do We Choose? In Regard to Downs-Canner et al.” by Hannoun-Levi, Jean Michel et al. (ASO-2019-07-1622). <i>Annals of Surgical Oncology</i> , 2019, 26, 861-862.	0.7	0
7	Radiation Therapy After Breast-Conserving Surgery in Women 70 Years of Age and Older: How Wisely Do We Choose?. <i>Annals of Surgical Oncology</i> , 2019, 26, 969-975.	0.7	24
8	Differences Among a Modern Cohort of BRCA Mutation Carriers Choosing Bilateral Prophylactic Mastectomies Compared to Breast Surveillance. <i>Annals of Surgical Oncology</i> , 2017, 24, 3048-3054.	0.7	22
9	Late Axillary Recurrence After Negative Sentinel Lymph Node Biopsy is Uncommon. <i>Annals of Surgical Oncology</i> , 2016, 23, 2456-2461.	0.7	14
10	What Is the Optimum Timing of Postmastectomy Radiotherapy in Two-Stage Prosthetic Reconstruction. <i>Plastic and Reconstructive Surgery</i> , 2015, 135, 1509-1517.	0.7	170
11	Sources and types of online information that breast cancer patients read and discuss with their doctors. <i>Palliative and Supportive Care</i> , 2015, 13, 107-114.	0.6	37
12	Extent of Microinvasion in Ductal Carcinoma In Situ is not Associated with Sentinel Lymph Node Metastases. <i>Annals of Surgical Oncology</i> , 2014, 21, 3330-3335.	0.7	37
13	Impact of Margin Assessment Method on Positive Margin Rate and Total Volume Excised. <i>Annals of Surgical Oncology</i> , 2014, 21, 86-92.	0.7	31
14	Axillary Dissection Can Be Avoided in the Majority of Clinically Node-Negative Patients Undergoing Breast-Conserving Therapy. <i>Annals of Surgical Oncology</i> , 2014, 21, 22-27.	0.7	99
15	Exposure to and Intention to Discuss Cancer-Related Internet Information Among Patients With Breast Cancer. <i>Journal of Oncology Practice</i> , 2012, 8, 40-45.	2.5	7
16	Immediate Tissue Expander/Implant Breast Reconstruction after Salvage Mastectomy for Cancer Recurrence following Lumpectomy/Irradiation. <i>Plastic and Reconstructive Surgery</i> , 2012, 129, 341-350.	0.7	56
17	Toward a greater understanding of breast cancer patients’ decisions to discuss cancer-related internet information with their doctors: An exploratory study. <i>Patient Education and Counseling</i> , 2012, 89, 109-115.	1.0	18
18	Communication in surgical oncology. , 2010, , 473-478.		0

#	ARTICLE	IF	CITATIONS
19	A Prospective Analysis of the Effect of Blue-Dye Volume on Sentinel Lymph Node Mapping Success and Incidence of Allergic Reaction in Patients With Breast Cancer. <i>Annals of Surgical Oncology</i> , 2004, 11, 535-541.	0.7	67
20	The Risk of Axillary Relapse After Sentinel Lymph Node Biopsy for Breast Cancer Is Comparable With That of Axillary Lymph Node Dissection. <i>Annals of Surgery</i> , 2004, 240, 462-471.	2.1	370
21	Isosulfan Blue Dye Reactions During Sentinel Lymph Node Mapping for Breast Cancer. <i>Anesthesia and Analgesia</i> , 2002, 95, 385-388.	1.1	196
22	Reoperative sentinel lymph node biopsy. <i>Journal of the American College of Surgeons</i> , 2002, 195, 167-172.	0.2	120
23	Sentinel Lymph Node Drainage in Multicentric Breast Cancers. <i>Breast Journal</i> , 2002, 8, 356-361.	0.4	43
24	Insurance reimbursement for risk-reducing mastectomy and oophorectomy in women with BRCA1 or BRCA2 mutations. <i>Genetics in Medicine</i> , 2001, 3, 422-425.	1.1	17
25	Intradermal Isotope Injection: A Highly Accurate Method of Lymphatic Mapping in Breast Carcinoma. <i>Annals of Surgical Oncology</i> , 2001, 8, 20-24.	0.7	90
26	Sentinel lymphadenectomy accurately predicts nodal status in T2 breast cancer <sup>11</sup> No competing interests declared.. <i>Journal of the American College of Surgeons</i> , 2000, 191, 593-599.	0.2	72
27	Sentinel Lymph Node Biopsy: Is It Indicated in Patients With High-Risk Ductal Carcinoma-In-Situ and Ductal Carcinoma-In-Situ With Microinvasion?. <i>Annals of Surgical Oncology</i> , 2000, 7, 636-642.	0.7	304
28	Palpable Breast Masses. <i>American Journal of Roentgenology</i> , 2000, 175, 779-787.	1.0	53