Jocelyn M Lockyer

List of Publications by Year in descending order

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167 5,908 38 papers citations h-index

168 168 168 4619 all docs docs citations times ranked citing authors

71

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#	Article	IF	CITATIONS
1	Family Physician Quality Improvement Plans: A Realist Inquiry Into What Works, for Whom, Under What Circumstances. Journal of Continuing Education in the Health Professions, 2023, 43, 155-163.	1.3	1
2	Social studying and learning among medical students: a scoping review. Perspectives on Medical Education, 2022, 6, 311-318.	3.5	23
3	Approaches to interpersonal conflict in simulation debriefings: A qualitative study. Medical Education, 2021, 55, 1284-1296.	2.1	3
4	Physician engagement in regularly scheduled rounds. Canadian Medical Education Journal, 2021, 12, e21-e30.	0.4	0
5	Physician engagement in regularly scheduled rounds. Canadian Medical Education Journal, 2021, 12, e21-e30.	0.4	1
6	An evaluation of Acute Care of at-Risk Newborns (ACoRN), a Canadian education program, in Chinese neonatal nurseries. Paediatrics and Child Health, 2020, 25, 351-357.	0.6	0
7	An Examination of Self-Reported Assessment Activities Documented by Specialist Physicians for Maintenance of Certification. Journal of Continuing Education in the Health Professions, 2020, 40, 19-26.	1.3	8
8	In Our Own Time: Medical Students' Informal Social Studying and Learning. Teaching and Learning in Medicine, 2020, 32, 353-361.	2.1	6
9	Exploring Well Water Testing Behaviour Through the Health Belief Model. Environmental Health Insights, 2020, 14, 117863022091014.	1.7	12
10	In-the-Moment Feedback and Coaching: Improving R2C2 for a New Context. Journal of Graduate Medical Education, 2020, 12, 27-35.	1.3	26
11	Categorising and enhancing the impacts of continuing professional development to improve performance and health outcomes. Medical Education, 2019, 53, 1066-1069.	2.1	6
12	Perceptions of drinking water quality from private wells in Alberta: A qualitative study. Canadian Water Resources Journal, 2019, 44, 291-306.	1.2	7
13	Identifying coaching skills to improve feedback use in postgraduate medical education. Medical Education, 2019, 53, 477-493.	2.1	61
14	Picking the Right Tool for the Job: A Reliability Study of 4 Assessment Tools for Central Venous Catheter Insertion. Journal of Graduate Medical Education, 2019, 11, 422-429.	1.3	5
15	Impact of Personalized Feedback: The Case of Coaching and Learning Change Plans. , 2019, , 189-204.		4
16	Exploring Faculty Approaches to Feedback in the Simulated Setting. Simulation in Healthcare, 2018, 13, 195-200.	1.2	10
17	The R2C2 Model in Residency Education: How Does It Foster Coaching and Promote Feedback Use?. Academic Medicine, 2018, 93, 1055-1063.	1.6	92
18	Adapting Feedback to Individual Residents: An Examination of Preceptor Challenges and Approaches. Journal of Graduate Medical Education, 2018, 10, 168-175.	1.3	11

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19	Assessment and Change: An Exploration of Documented Assessment Activities and Outcomes by Canadian Psychiatrists. Journal of Continuing Education in the Health Professions, 2018, 38, 235-243.	1.3	8
20	An Exploration of the Content and Usability of Web-Based Resources Used by Individuals to Find and Access Family Physicians. Healthcare Policy, 2018, 13, 35-49.	0.6	2
21	Multisource Feedback and Narrative Comments: Polarity, Specificity, Actionability, and CanMEDS Roles. Journal of Continuing Education in the Health Professions, 2018, 38, 32-40.	1.3	15
22	Competency-based medical education and continuing professional development: A conceptualization for change. Medical Teacher, 2017, 39, 617-622.	1.8	61
23	Toward a research agenda for competency-based medical education. Medical Teacher, 2017, 39, 623-630.	1.8	49
24	Core principles of assessment in competency-based medical education. Medical Teacher, 2017, 39, 609-616.	1.8	322
25	Mentorship in a Canadian residency program: faculty and resident needs and experiences. Canadian Journal of Anaesthesia, 2017, 64, 780-782.	1.6	1
26	Exploring anesthesiologists' understanding of situational awareness: a qualitative study. Canadian Journal of Anaesthesia, 2017, 64, 810-819.	1.6	9
27	Exploring the Teaching Motivations, Satisfaction, and Challenges of Veterinary Preceptors: A Qualitative Study. Journal of Veterinary Medical Education, 2016, 43, 95-103.	0.6	6
28	Supporting Veterinary Preceptors in a Distributed Model of Education: A Faculty Development Needs Assessment. Journal of Veterinary Medical Education, 2016, 43, 104-110.	0.6	10
29	Focused Critical Care Echocardiography: Development and Evaluation of an Image Acquisition Assessment Tool*. Critical Care Medicine, 2016, 44, e329-e335.	0.9	26
30	Advancing Competency-Based Medical Education: A Charter for Clinician–Educators. Academic Medicine, 2016, 91, 645-649.	1.6	248
31	Clinical teaching as part of continuing professional development: Does teaching enhance clinical performance?. Medical Teacher, 2016, 38, 815-822.	1.8	9
32	National programmes for validating physician competence and fitness for practice: a scoping review. BMJ Open, 2016, 6, e010368.	1.9	25
33	More Than Reducing Complexity: Canadian Specialists' Views of the Royal College's Maintenance of Certification Framework and Program. Journal of Continuing Education in the Health Professions, 2016, 36, 157-163.	1.3	8
34	An exploration of contextual dimensions impacting goals of care conversations in postgraduate medical education. BMC Palliative Care, 2016, 15, 34.	1.8	20
35	Exploring Perceptions of Early-Career Psychiatrists About Their Relationships With the Pharmaceutical Industry. Academic Psychiatry, 2016, 40, 249-254.	0.9	4
36	Palliative and end of life care communication as emerging priorities in postgraduate medical education. Canadian Medical Education Journal, 2016, 7, e4-e21.	0.4	3

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37	Facilitated Reflective Performance Feedback. Academic Medicine, 2015, 90, 1698-1706.	1.6	214
38	Society for Academic Continuing Medical Education Intervention Guideline Series. Journal of Continuing Education in the Health Professions, 2015, 35, S60-S64.	1.3	5
39	Society for Academic Continuing Medical Education Intervention Guideline Series. Journal of Continuing Education in the Health Professions, 2015, 35, S51-S54.	1.3	6
40	Society for Academic Continuing Medical Education Intervention Guideline Series. Journal of Continuing Education in the Health Professions, 2015, 35, S65-S69.	1.3	6
41	Role for Assessment in Maintenance of Certification: Physician Perceptions of Assessment. Journal of Continuing Education in the Health Professions, 2015, 35, 11-17.	1.3	9
42	Targeted needs assessment for a transitional "boot camp―curriculum for pediatric surgery residents. Journal of Pediatric Surgery, 2015, 50, 819-824.	1.6	5
43	Evaluation of an educational program for essential newborn care in resource-limited settings: Essential Care for Every Baby. BMC Pediatrics, 2015, 15, 71.	1.7	36
44	Toward a common understanding: supporting and promoting education scholarship for medical school faculty. Medical Education, 2014, 48, 1190-1200.	2.1	25
45	Family physician practice visits arising from the Alberta Physician Achievement Review. BMC Medical Education, 2013, 13, 121.	2.4	6
46	Multisource Feedback: Can It Meet Criteria for Good Assessment?. Journal of Continuing Education in the Health Professions, 2013, 33, 89-98.	1.3	29
47	Stillbirth and Newborn Mortality in India After Helping Babies Breathe Training. Pediatrics, 2013, 131, e344-e352.	2.1	183
48	Leading Educationally Effective Family-Centered Bedside Rounds. Journal of Graduate Medical Education, 2013, 5, 594-599.	1.3	21
49	A Study of Thrombophilia Testing and Counseling Practices of Family Physicians Using the Script Concordance Method in Calgary, Canada. Clinical and Applied Thrombosis/Hemostasis, 2012, 18, 403-408.	1.7	7
50	Should Efforts in Favor of Medical Student Diversity Be Focused During Admissions or Farther Upstream?. Academic Medicine, 2012, 87, 443-448.	1.6	48
51	Helping Babies Breathe: Global neonatal resuscitation program development and formative educational evaluation. Resuscitation, 2012, 83, 90-96.	3.0	181
52	The development and assessment of an evaluation tool for pediatric resident competence in leading simulated pediatric resuscitations. Resuscitation, 2012, 83, 887-893.	3.0	49
53	Acute Care of At-Risk Newborns (ACoRN): quantitative and qualitative educational evaluation of the program in a region of China. BMC Medical Education, 2012, 12, 44.	2.4	11
54	"What Do They Want Me To Say?" The hidden curriculum at work in the medical school selection process: a qualitative study. BMC Medical Education, 2012, 12, 17.	2.4	36

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55	Factors influencing responsiveness to feedback: on the interplay between fear, confidence, and reasoning processes. Advances in Health Sciences Education, 2012, 17, 15-26.	3.3	289
56	Long-term outcomes for surgeons from 3- and 4-year medical school curricula. Canadian Journal of Surgery, 2012, 55, S163-S170.	1.2	10
57	Feedback data sources that inform physician self-assessment. Medical Teacher, 2011, 33, e113-e120.	1.8	42
58	"A Chance To Show Yourself―– how do applicants approach medical school admission essays?. Medical Teacher, 2011, 33, e541-e548.	1.8	16
59	Resident Training in the Psychiatric Emergency Service: Duty Hours Tell Only Part of the Story. Journal of Graduate Medical Education, 2011, 3, 26-30.	1.3	6
60	Tensions in Informed Self-Assessment: How the Desire for Feedback and Reticence to Collect and Use It Can Conflict. Academic Medicine, 2011, 86, 1120-1127.	1.6	159
61	Features of assessment learners use to make informed self-assessments of clinical performance. Medical Education, 2011, 45, 636-647.	2.1	119
62	Controlling Quality in CME/CPD by Measuring and Illuminating Bias. Journal of Continuing Education in the Health Professions, 2011, 31, 109-116.	1.3	8
63	Moving Into Medical Practice in a New Community: The Transition Experience. Journal of Continuing Education in the Health Professions, 2011, 31, 151-156.	1.3	9
64	Peer and Self-assessment of Professionalism in Undergraduate Medical Students at the University of Calgary. Canadian Medical Education Journal, 2011, 2, e65-e72.	0.4	4
65	Interpersonal perception in the context of doctor–patient relationships: A dyadic analysis of doctor–patient communication. Social Science and Medicine, 2010, 70, 763-768.	3.8	123
66	Learning to practice in Canada: The hidden curriculum of international medical graduates. Journal of Continuing Education in the Health Professions, 2010, 30, 37-43.	1.3	10
67	Musculoskeletal education: a curriculum evaluation at one university. BMC Medical Education, 2010, 10, 93.	2.4	17
68	Using a commitment-to-change strategy to assess faculty development. Medical Education, 2010, 44, 516-517.	2.1	4
69	The Processes and Dimensions of Informed Self-Assessment: A Conceptual Model. Academic Medicine, 2010, 85, 1212-1220.	1.6	257
70	Mentorship for the physician recruited from abroad to Canada for rural practice. Medical Teacher, 2010, 32, e322-e327.	1.8	7
71	The multiple mini-interview for selection of international medical graduates into family medicine residency education. Medical Education, 2009, 43, 573-579.	2.1	61
72	Assessing postgraduate trainees in Canada: Are we achieving diversity in methods?. Medical Teacher, 2009, 31, e58-e63.	1.8	23

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73	An Analysis of Long-Term Outcomes of the Impact of Curriculum: A Comparison of the Three- and Four-Year Medical School Curricula. Academic Medicine, 2009, 84, 1342-1347.	1.6	19
74	The Assessment of Pathologists/Laboratory Medicine Physicians Through a Multisource Feedback Tool. Archives of Pathology and Laboratory Medicine, 2009, 133, 1301-1308.	2.5	19
75	Block to succeed: the Canadian orthopedic resident research experience. Canadian Journal of Surgery, 2009, 52, 187-95.	1.2	20
76	Distance education for physicians: Adaptation of a Canadian experience to Uruguay. Journal of Continuing Education in the Health Professions, 2008, 28, 79-85.	1.3	15
77	Development of a mentorship strategy: A knowledge translation case study. Journal of Continuing Education in the Health Professions, 2008, 28, 117-122.	1.3	38
78	CanMEDS evaluation in Canadian postgraduate training programmes: tools used and programme director satisfaction. Medical Education, 2008, 42, 879-886.	2.1	105
79	Changes in performance: a 5-year longitudinal study of participants in a multi-source feedback programme. Medical Education, 2008, 42, 1007-1013.	2.1	70
80	So much to teach, so little time: a prospective cohort study evaluating a tool to select content for a critical care curriculum. Critical Care, 2008, 12, R127.	5.8	7
81	The impact of a hybrid online and classroom-based course on palliative care competencies of family medicine residents. Palliative Medicine, 2008, 22, 929-937.	3.1	27
82	Assessment of Radiology Physicians by a Regulatory Authority. Radiology, 2008, 247, 771-778.	7.3	14
83	Making Interprofessional Education Work: The Strategic Roles of the Academy. Academic Medicine, 2008, 83, 934-940.	1.6	123
84	Communication Skills Training in Orthopaedics. Journal of Bone and Joint Surgery - Series A, 2008, 90, 1393-1400.	3.0	20
85	Assessment of Psychiatrists in Practice through Multisource Feedback. Canadian Journal of Psychiatry, 2008, 53, 525-533.	1.9	36
86	The acceptability of the multiple mini interview for resident selection. Family Medicine, 2008, 40, 734-40.	0.5	40
87	What Multisource Feedback Factors Influence Physician Self-Assessments? A Five-Year Longitudinal Study. Academic Medicine, 2007, 82, S77-S80.	1.6	32
88	Introduction of the multiple mini interview into the admissions process at the University of Calgary: acceptability and feasibility. Medical Teacher, 2007, 29, 394-396.	1.8	61
89	Physician in the movies. Journal of Continuing Education in the Health Professions, 2007, 27, 133.	1.3	1
90	International medical graduates: Learning for practice in Alberta, Canada. Journal of Continuing Education in the Health Professions, 2007, 27, 157-163.	1.3	27

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91	A meta-analysis of continuing medical education effectiveness. Journal of Continuing Education in the Health Professions, 2007, 27, 6-15.	1.3	326
92	Innovations in programs and assessment. Journal of Continuing Education in the Health Professions, 2007, 27, 59.	1.3	0
93	Assessment of non-cognitive traits through the admissions multiple mini-interview. Medical Education, 2007, 41, 573-579.	2.1	124
94	Assessment of a matched-pair instrument to examine doctor?patient communication skills in practising doctors. Medical Education, 2007, 41, 123-129.	2.1	66
95	Roles and responsibilities of family physicians on geriatric health care teams: Health care team members' perspectives. Canadian Family Physician, 2007, 53, 1954-5.	0.4	15
96	The transition from face-to-face to online CME facilitation. Medical Teacher, 2006, 28, 625-630.	1.8	23
97	Evaluation of Learning Outcomes in Web-Based Continuing Medical Education. Academic Medicine, 2006, 81, S30-S34.	1.6	59
98	A study of a multi-source feedback system for international medical graduates holding defined licences. Medical Education, 2006, 40, 340-347.	2.1	18
99	The Assessment of Emergency Physicians by a Regulatory Authority. Academic Emergency Medicine, 2006, 13, 1296-1303.	1.8	34
100	Self and Peer Assessment of Pediatricians, Psychiatrists and Medicine Specialists: Implications for Self-Directed Learning. Advances in Health Sciences Education, 2006, 11, 235-244.	3.3	89
101	A multi source feedback program for anesthesiologists. Canadian Journal of Anaesthesia, 2006, 53, 33-39.	1.6	49
102	Assessment of Pediatricians by a Regulatory Authority. Pediatrics, 2006, 117, 796-802.	2.1	59
103	The Development and Testing of a Performance Checklist to Assess Neonatal Resuscitation Megacode Skill. Pediatrics, 2006, 118, e1739-e1744.	2.1	67
104	An analysis of the development of a successful medical collaboration to create and sustain family physician anaesthesiology capacity in rural Canada. Australian Journal of Rural Health, 2005, 13, 178-182.	1.5	1
105	Assessing outcomes through congruence of course objectives and reflective work. Journal of Continuing Education in the Health Professions, 2005, 25, 76-86.	1.3	12
106	Twelve tips for effective short course design. Medical Teacher, 2005, 27, 392-395.	1.8	21
107	The Nature of the Interaction Between Participants and Facilitators in Online Asynchronous Continuing Medical Education Learning Environments. Teaching and Learning in Medicine, 2005, 17, 240-245.	2.1	14
108	'PocketSnips': microvideos on medical procedures. Medical Education, 2004, 38, 572-573.	2.1	1

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109	Knowledge translation: The role and place of practice reflection. Journal of Continuing Education in the Health Professions, 2004, 24, 50-56.	1.3	73
110	Hidden curriculum in continuing medical education. Journal of Continuing Education in the Health Professions, 2004, 24, 145-152.	1.3	37
111	An Examination of the Appropriateness of Using a Common Peer Assessment Instrument to Assess Physician Skills across Specialties. Academic Medicine, 2004, 79, S5-S8.	1.6	39
112	Short report: satisfaction with on-line CME. Evaluation of the ruralMDcme website. Canadian Family Physician, 2004, 50, 271-4.	0.4	10
113	Multisource feedback in the assessment of physician competencies. Journal of Continuing Education in the Health Professions, 2003, 23, 4-12.	1.3	226
114	Discourse analysis of computer-mediated conferencing in World Wide Web-based continuing medical education. Journal of Continuing Education in the Health Professions, 2003, 23, 229-238.	1.3	22
115	The use of the opinion leader in continuing medical education. Medical Teacher, 2003, 25, 438-441.	1.8	21
116	Likelihood of Change: A Study Assessing Surgeon Use of Multisource Feedback Data. Teaching and Learning in Medicine, 2003, 15, 168-174.	2.1	62
117	Multisource feedback: a method of assessing surgical practice. BMJ: British Medical Journal, 2003, 326, 546-548.	2.3	143
118	Dual-track CME. Academic Medicine, 2002, 77, S61-S63.	1.6	7
118	Dual-track CME. Academic Medicine, 2002, 77, S61-S63. Permanent small groups: Group dynamics, learning, and change. Journal of Continuing Education in the Health Professions, 2002, 22, 205-213.	1.6	7
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119	Permanent small groups: Group dynamics, learning, and change. Journal of Continuing Education in the Health Professions, 2002, 22, 205-213. Physician Outcomes Following an Intensive Educational Program on Erectile Dysfunction. Journal of	1.3	38
119	Permanent small groups: Group dynamics, learning, and change. Journal of Continuing Education in the Health Professions, 2002, 22, 205-213. Physician Outcomes Following an Intensive Educational Program on Erectile Dysfunction. Journal of Sex Education and Therapy, 2001, 26, 358-362. Commitment to change statements: A way of understanding how participants use information and skills taught in an educational session. Journal of Continuing Education in the Health Professions,	0.3	38
119 120 121	Permanent small groups: Group dynamics, learning, and change. Journal of Continuing Education in the Health Professions, 2002, 22, 205-213. Physician Outcomes Following an Intensive Educational Program on Erectile Dysfunction. Journal of Sex Education and Therapy, 2001, 26, 358-362. Commitment to change statements: A way of understanding how participants use information and skills taught in an educational session. Journal of Continuing Education in the Health Professions, 2001, 21, 82-89. Medical education in substance-related disorders: components and outcome. Addiction, 2000, 95,	1.3 0.3 1.3	38 3 53
119 120 121 122	Permanent small groups: Group dynamics, learning, and change. Journal of Continuing Education in the Health Professions, 2002, 22, 205-213. Physician Outcomes Following an Intensive Educational Program on Erectile Dysfunction. Journal of Sex Education and Therapy, 2001, 26, 358-362. Commitment to change statements: A way of understanding how participants use information and skills taught in an educational session. Journal of Continuing Education in the Health Professions, 2001, 21, 82-89. Medical education in substance-related disorders: components and outcome. Addiction, 2000, 95, 949-957. Physician outcomes and implications for planning an intensive educational experience on	1.3 0.3 1.3 3.3	38 3 53 50
119 120 121 122	Permanent small groups: Group dynamics, learning, and change. Journal of Continuing Education in the Health Professions, 2002, 22, 205-213. Physician Outcomes Following an Intensive Educational Program on Erectile Dysfunction. Journal of Sex Education and Therapy, 2001, 26, 358-362. Commitment to change statements: A way of understanding how participants use information and skills taught in an educational session. Journal of Continuing Education in the Health Professions, 2001, 21, 82-89. Medical education in substance-related disorders: components and outcome. Addiction, 2000, 95, 949-957. Physician outcomes and implications for planning an intensive educational experience on attention-deficit hyperactivity disorder. Academic Medicine, 1999, 74, S31-3. Getting started with needs assessment: Part 1â€"the questionnaire. Journal of Continuing Education in	1.3 0.3 1.3 3.3	38 3 53 50 7

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127	Concordance in communication between surgeon and patient. Canadian Journal of Surgery, 1998, 41, 439-45.	1.2	18
128	An examination of the feasibility of developing and offering courses that meet MAINPRO-C requirements. Academic Medicine, 1997, 72, 458-9.	1.6	1
129	Effectiveness of commitment contracts in facilitating change in continuing medical education intervention. Journal of Continuing Education in the Health Professions, 1997, 17, 27-31.	1.3	28
130	Diffusion of innovations. Journal of Continuing Education in the Health Professions, 1997, 17, 62-64.	1.3	9
131	A model continuing medical education program on congestive heart failure: An analysis. Journal of Continuing Education in the Health Professions, 1997, 17, 106-113.	1.3	1
132	Patient education materials: Physician perception of their role and usefulness. Journal of Continuing Education in the Health Professions, 1997, 17, 159-162.	1.3	1
133	Resources for conducting evaluation studies. Journal of Continuing Education in the Health Professions, 1997, 17, 250-251.	1.3	0
134	Effectiveness of commitment contracts in continuing medical education. Academic Medicine, 1996, 71, 394.	1.6	10
135	Improving the Management of Patients with Schizophrenia in Primary Care: Assessing Learning Needs as a First Step. Canadian Journal of Psychiatry, 1996, 41, 617-622.	1.9	15
136	Continuing medical education handbook: A resource for CME practitioners. Stephen Biddle and Barbara B. Huffman. Journal of Continuing Education in the Health Professions, 1996, 16, 125-126.	1.3	0
137	Use of focus groups from different disciplines to identify clinical management and educational issues. Teaching and Learning in Medicine, 1996, 8, 223-226.	2.1	13
138	Audience response systems and touch pad technology: their role in CME. Journal of Continuing Education in the Health Professions, 1995, 15, 52-57.	1.3	5
139	Determining Priorities for Family Physician Education in Substance Abuse by the Use of a Survey. Journal of Addictive Diseases, 1995, 14, 23-31.	1.3	9
140	A comparison of two needs assessments methods: Clinical recall interviews and focus groups. Teaching and Learning in Medicine, 1994, 6, 264-268.	2.1	9
141	Clinical practice guidelines and the CME office. Journal of Continuing Education in the Health Professions, 1994, 14, 46-55.	1.3	4
142	The evolution and evaluation of a physician interest group in geriatric continuing medical education. Journal of Continuing Education in the Health Professions, 1994, 14, 101-109.	1.3	0
143	A patient survey to identify CME learning needs. Academic Medicine, 1994, 69, 651-2.	1.6	0
144	Ethics training for residents. Academic Medicine, 1994, 69, 432.	1.6	4

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145	Multicultural issues in medical curriculum: Implications for Canadian physicians. Medical Teacher, 1993, 15, 83-91.	1.8	22
146	Sports medicine electives. Are they available in Canadian family medicine programs?. Canadian Family Physician, 1993, 39, 1742-4.	0.4	1
147	Physician Performance: The Roles of Knowledge, Skill, and Environment. Teaching and Learning in Medicine, 1992, 4, 86-96.	2.1	11
148	A new "department―in JCEHP: The practice of continuing health education. Journal of Continuing Education in the Health Professions, 1992, 12, 9-10.	1.3	0
149	What do we know about adoption of innovation?. Journal of Continuing Education in the Health Professions, 1992, 12, 33-38.	1.3	8
150	Bridging the gap: Educational Theory, Research, and CME Practice HIV Infection Programming as a Case Report. Journal of Continuing Education in the Health Professions, 1992, 12, 83-88.	1.3	1
151	Sports Medicine: What family physicians see and what they need to learn. Canadian Family Physician, 1992, 38, 67-71.	0.4	2
152	Attitudinal and resource changes after a neonatal resuscitation training program. Neonatal Network: NN, 1992, 11, 37-40.	0.3	6
153	Responses to non-emergency questions in rural medicine: their usefulness to practice decisions. Medical Education, 1991, 25, 238-242.	2.1	5
154	Stimulated case recall interviews applied to a national protocol for hyperbilirubinemia. Journal of Continuing Education in the Health Professions, 1991, 11, 129-137.	1.3	8
155	A medical information networking system between practitioners and academia. Journal of Continuing Education in the Health Professions, 1990, 10, 237-243.	1.3	10
156	Providing relevant information to rural practitioners: A study of a medical information system. Teaching and Learning in Medicine, 1990, 2, 200-204.	2.1	9
157	Education in Sports Medicine: A resident perspective. Canadian Family Physician, 1990, 36, 1966-70.	0.4	1
158	Raising questions in clinical practice. Journal of Continuing Education in the Health Professions, 1988, 8, 21-26.	1.3	4
159	A pilot study of a medical information system for family physicians in practice. Academic Medicine, 1988, 63, 193-5.	1.6	4
160	A model of continuing education for conjoint practice. Journal of Continuing Education in Nursing, 1988, 19, 65-7.	0.6	3
161	CME teleconferences. Academic Medicine, 1987, 62, 785-6.	1.6	0
162	Nurses' Perceptions of Inter- and Intra-Professional Relationships: An Analysis of Support From Nursing and Physician Colleagues in Rural Hospitals. Journal of Rural Health, 1987, 3, 31-38.	2.9	0

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163	Teleconferencing cme programs to rural physicians: the university of calgary teleconference program. Canadian Family Physician, 1987, 33, 1705-8.	0.4	2
164	Two years of prelicensure training: observations from the alberta experience. Canadian Family Physician, 1983, 29, 1224-35.	0.4	2
165	Residency training in family practice: how many residents, faculty and rotations?. Canadian Family Physician, 1982, 28, 1648-51.	0.4	1
166	Review of residency programs. Academic Medicine, 1981, 56, 877-8.	1.6	0
167	Evidence-Informed Facilitated Feedback: The R2C2 Feedback Model. MedEdPORTAL: the Journal of Teaching and Learning Resources, 0, , .	1.2	19