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List of Publications by Year in descending order

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Version: 2024-02-01

34
papers

2,134
citations

706676

14
h-index

488211

31
g-index

34
all docs

34
docs citations

34
times ranked

1851
citing authors

#	ARTICLE	IF	CITATIONS
1	Patient aggression in intensive care: A qualitative study of staff experiences. Australian Critical Care, 2023, 36, 77-83.	0.6	4
2	A protocol for tracking outcomes post intensive care. Nursing in Critical Care, 2022, 27, 341-347.	1.1	3
3	Doing time in an Australian ICU; the experience and environment from the perspective of patients and family members. Australian Critical Care, 2021, 34, 254-262.	0.6	12
4	The intensive care unit environment from the perspective of medical, allied health and nursing clinicians: A qualitative study to inform design of the "ideal"™ bedside. Australian Critical Care, 2021, 34, 15-22.	0.6	13
5	Reconceptualizing post-intensive care syndrome: Do we need to unpick our PICS?. Nursing in Critical Care, 2021, 26, 67-69.	1.1	7
6	Victors, Victims, and Vectors. Perspectives in Biology and Medicine, 2021, 64, 408-419.	0.3	0
7	Post intensive care syndrome across the life course: Looking to the future of paediatric and adult critical care survivorship. Nursing in Critical Care, 2021, 26, 64-66.	1.1	5
8	Screening for delirium in the intensive care unit using eDIS-ICU " A purpose-designed app: A pilot study. Australian Critical Care, 2021, 34, 547-551.	0.6	6
9	CoMET: a randomised controlled trial of co-commencement of metformin versus placebo as an adjunctive treatment to attenuate weight gain in patients with schizophrenia newly commenced on clozapine. Therapeutic Advances in Psychopharmacology, 2021, 11, 204512532110452.	1.2	5
10	Mealtime care and dietary intake in older psychiatric hospital inpatient: A multiple case study. Journal of Advanced Nursing, 2021, 77, 1490-1500.	1.5	3
11	When a flower doesn't bloom, you fix the environment where it grows, not the flower - designing the ideal ICU. Australian Critical Care, 2020, 33, S31-S32.	0.6	0
12	How does the ICU environment impact staff experience and patient care: implications for environmental development?. Australian Critical Care, 2020, 33, S46-S47.	0.6	0
13	Delirium risk in non-surgical patients: systematic review of predictive tools. Archives of Gerontology and Geriatrics, 2019, 83, 292-302.	1.4	11
14	CoMET: a protocol for a randomised controlled trial of co-commencement of METformin as an adjunctive treatment to attenuate weight gain and metabolic syndrome in patients with schizophrenia newly commenced on clozapine. BMJ Open, 2018, 8, e021000.	0.8	14
15	"Screening revolution: A novel approach to developing a delirium screening tool in the intensive care unit. Australasian Journal on Ageing, 2018, 37, 147-150.	0.4	9
16	A Risk Assessment Score and Initial High-sensitivity Troponin Combine to Identify Low Risk of Acute Myocardial Infarction in the Emergency Department. Academic Emergency Medicine, 2018, 25, 434-443.	0.8	12
17	External validation of the emergency department assessment of chest pain score accelerated diagnostic pathway (EDACS-ADP). Emergency Medicine Journal, 2016, 33, 618-625.	0.4	39
18	Validation of presentation and high-sensitivity troponin to rule-in and rule-out acute myocardial infarction. Heart, 2016, 102, 1270-1278.	1.2	82

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19	Assessment of the European Society of Cardiology 0-Hour/1-Hour Algorithm to Rule-Out and Rule-In Acute Myocardial Infarction. <i>Circulation</i> , 2016, 134, 1532-1541.	1.6	111
20	Simplification of a scoring system maintained overall accuracy but decreased the proportion classified as low risk. <i>Journal of Clinical Epidemiology</i> , 2016, 69, 32-39.	2.4	12
21	Development and validation of the <sc>E</sc>mergency <sc>D</sc>epartment <sc>A</sc>ssessment of <sc>C</sc>hest pain <sc>S</sc>core and 2â€™h accelerated diagnostic protocol. <i>EMA - Emergency Medicine Australasia</i> , 2014, 26, 34-44.	0.5	172
22	Comparison of new point-of-care troponin assay with high sensitivity troponin in diagnosing myocardial infarction. <i>International Journal of Cardiology</i> , 2014, 177, 182-186.	0.8	30
23	The new Vancouver Chest Pain Rule using troponin as the only biomarker: an external validation study. <i>American Journal of Emergency Medicine</i> , 2014, 32, 129-134.	0.7	44
24	Comparison of high sensitivity troponin T and I assays in the diagnosis of non-ST elevation acute myocardial infarction in emergency patients with chest pain. <i>Clinical Biochemistry</i> , 2014, 47, 321-326.	0.8	32
25	Cardiac Risk Stratification Scoring Systems for Suspected Acute Coronary Syndromes in the Emergency Department. <i>Current Emergency and Hospital Medicine Reports</i> , 2013, 1, 53-63.	0.6	5
26	What is an acceptable risk of major adverse cardiac event in chest pain patients soon after discharge from the Emergency Department?. <i>International Journal of Cardiology</i> , 2013, 166, 752-754.	0.8	324
27	Validation of High-Sensitivity Troponin I in a 2-Hour Diagnostic Strategy to Assess 30-Day Outcomes in Emergency Department Patients With Possible Acute Coronary Syndrome. <i>Journal of the American College of Cardiology</i> , 2013, 62, 1242-1249.	1.2	277
28	2-Hour Accelerated Diagnostic Protocol to Assess Patients With Chest Pain Symptoms Using Contemporary Troponins as the Only Biomarker. <i>Journal of the American College of Cardiology</i> , 2012, 59, 2091-2098.	1.2	361
29	A cross-sectional analysis of patterns of obesity in a cohort of working nurses and midwives in Australia, New Zealand, and the United Kingdom. <i>International Journal of Nursing Studies</i> , 2012, 49, 727-738.	2.5	75
30	High sensitivity troponin outperforms contemporary assays in predicting major adverse cardiac events up to two years in patients with chest pain. <i>Annals of Clinical Biochemistry</i> , 2011, 48, 249-255.	0.8	29
31	A 2-h diagnostic protocol to assess patients with chest pain symptoms in the Asia-Pacific region (ASPECT): a prospective observational validation study. <i>Lancet, The</i> , 2011, 377, 1077-1084.	6.3	316
32	Comprehensive standardized data definitions for acute coronary syndrome research in emergency departments in Australasia. <i>EMA - Emergency Medicine Australasia</i> , 2010, 22, 35-55.	0.5	96
33	Communicating diagnostic uncertainties to patients: The problems of explaining unclear diagnosis and risk. <i>Evidence-Based Medicine</i> , 2009, 14, 66-67.	0.6	14
34	Comparison of high specificity with standard versions of a quantitative latex D-dimer test in the assessment of community pulmonary embolism. <i>Thrombosis Research</i> , 2009, 124, 230-235.	0.8	11