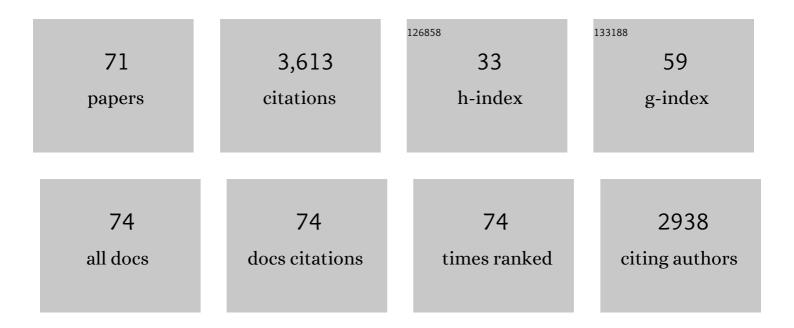
L Michael Brunt

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Challenges of virtual interviewing for surgical fellowships: a qualitative analysis of applicant experiences. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 3763-3771.	1.3	7
2	Artificial Intelligence for Intraoperative Guidance. Annals of Surgery, 2022, 276, 363-369.	2.1	113
3	Central Surgical Association presidential address: Learning curves. Surgery, 2022, 171, 565-571.	1.0	0
4	Survey of the 2020 Fellowship Council application and match process and the impact of COVID-19. Surgical Endoscopy and Other Interventional Techniques, 2022, 36, 6653-6660.	1.3	3
5	Assessment of postoperative opioid stewardship using a novel electronic-based automated text and phone messaging platform. Surgery, 2021, 169, 660-665.	1.0	3
6	Gender disparities in gastrointestinal surgery fellowship programs. Surgical Endoscopy and Other Interventional Techniques, 2021, , 1.	1.3	6
7	Early cholecystectomy (< 72Âh) is associated with lower rate of complications and bile duct injury: a study of 109,862 cholecystectomies in the state of New York. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 3051-3056.	1.3	11
8	Early cholecystectomy (â‰ ≇ €‰8Âweeks) following percutaneous cholecystostomy tube placement is associated with higher morbidity. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 3057-3063.	1.3	21
9	Reply. Clinical Gastroenterology and Hepatology, 2020, 18, 1646-1647.	2.4	0
10	Highâ€resolution manometry features of paraesophageal hernia. Neurogastroenterology and Motility, 2020, 32, e13947.	1.6	4
11	Video-based Learning in Surgery. Annals of Surgery, 2020, 272, 1012-1019.	2.1	20
12	Initial Experience with a Virtual Platform for Advanced Gastrointestinal Minimally Invasive Surgery Fellowship Interviews. Journal of the American College of Surgeons, 2020, 231, 670-678.	0.2	30
13	Safe Cholecystectomy Multi-society Practice Guideline and State of the Art Consensus Conference on Prevention of Bile Duct Injury During Cholecystectomy. Annals of Surgery, 2020, 272, 3-23.	2.1	123
14	Safe cholecystectomy multi-society practice guideline and state-of-the-art consensus conference on prevention of bile duct injury during cholecystectomy. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 2827-2855.	1.3	47
15	SAGES masters program: determining the seminal articles for each pathway. Surgical Endoscopy and Other Interventional Techniques, 2020, 34, 1465-1481.	1.3	5
16	Intraoperative Methadone in Same-Day Ambulatory Surgery: A Randomized, Double-Blinded, Dose-Finding Pilot Study. Anesthesia and Analgesia, 2019, 128, 802-810.	1.1	40
17	Elimination of Bile Duct Injury in Cholecystectomy. Advances in Surgery, 2019, 53, 145-160.	0.6	5
18	Controversies and Techniques in the Repair of Abdominal Wall Hernias. Journal of Gastrointestinal Surgery, 2019, 23, 837-845.	0.9	11

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19	Clinical Characteristics and Outcomes of Patients With Postfundoplication Dysphagia. Clinical Gastroenterology and Hepatology, 2019, 17, 1982-1990.	2.4	38
20	SAGES's advanced GI/MIS fellowship curriculum pilot project. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 2613-2619.	1.3	11
21	Comparison of precision and speed in laparoscopic and robot-assisted surgical task performance. Journal of Surgical Research, 2018, 223, 29-33.	0.8	22
22	Laparoscopic common bile duct exploration. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 2603-2612.	1.3	25
23	Outcome trends and safety measures after 30Âyears of laparoscopic cholecystectomy: a systematic review and pooled data analysis. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 2175-2183.	1.3	165
24	Bile duct injury and morbidity following cholecystectomy: a need for improvement. Surgical Endoscopy and Other Interventional Techniques, 2018, 32, 1683-1688.	1.3	104
25	The Critical View of Safety. Annals of Surgery, 2017, 265, 464-465.	2.1	62
26	Evaluation of crowd-sourced assessment of the critical view of safety in laparoscopic cholecystectomy. Surgical Endoscopy and Other Interventional Techniques, 2017, 31, 5094-5100.	1.3	33
27	The Difficult Gallbladder: A Safe Approach to a Dangerous Problem. Journal of Laparoendoscopic and Advanced Surgical Techniques - Part A, 2017, 27, 571-578.	0.5	24
28	Hernia Management in the Athlete. Advances in Surgery, 2016, 50, 187-202.	0.6	5
29	Commentary on Hand Laterality and Acquired Ambidexterity in Surgical Training. Annals of Surgery, 2016, 264, e20.	2.1	6
30	Subtotal Cholecystectomy–"Fenestrating―vs "Reconstituting―Subtypes and the Prevention of Bile Duct Injury: Definition of the Optimal Procedure in Difficult Operative Conditions. Journal of the American College of Surgeons, 2016, 222, 89-96.	0.2	201
31	Patient comorbidities increase postoperative resource utilization after laparoscopic and open cholecystectomy. Surgical Endoscopy and Other Interventional Techniques, 2016, 30, 2217-2230.	1.3	12
32	SAGES presidential address: a SAGES Magical Mystery Tour. Surgical Endoscopy and Other Interventional Techniques, 2015, 29, 3423-3431.	1.3	2
33	Cost variation in a laparoscopic cholecystectomy and the association with outcomes across a single health system: implications for standardization and improved resource utilization. Hpb, 2015, 17, 1113-1118.	0.1	21
34	SAGES expert Delphi consensus: critical factors for safe surgical practice in laparoscopic cholecystectomy. Surgical Endoscopy and Other Interventional Techniques, 2015, 29, 3074-3085.	1.3	130
35	Identifying Opportunities for Virtual Reality Simulation in Surgical Education. Surgical Innovation, 2015, 22, 514-521.	0.4	35
36	Outcomes of a proficiency-based skillsÂcurriculum at the beginning ofÂtheÂfourth year for senior medical students entering surgery. Surgery, 2015, 158, 962-971.	1.0	11

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37	Adrenal Myelolipoma: Operative Indications and Outcomes. Journal of Laparoendoscopic and Advanced Surgical Techniques - Part A, 2014, 24, 8-12.	0.5	21
38	Incidence, mechanisms, and outcomes of esophageal and gastric perforation during laparoscopic foregut surgery: a retrospective review of 1,223 foregut cases. Surgical Endoscopy and Other Interventional Techniques, 2014, 28, 85-90.	1.3	34
39	Threefold increased bile duct injury rate is associated with less surgeon experience in an insurance claims database. Surgical Endoscopy and Other Interventional Techniques, 2014, 28, 3068-3073.	1.3	53
40	Celebrating a decade of innovation in surgical education. Bulletin of the American College of Surgeons, 2014, 99, 10-5.	0.3	16
41	SAGES Guidelines for minimally invasive treatment of adrenal pathology. Surgical Endoscopy and Other Interventional Techniques, 2013, 27, 3957-3959.	1.3	9
42	Retention of suturing and knot-tying skills in senior medical students after proficiency-based training: Results of aAprospective, randomized trial. Surgery, 2013, 154, 823-830.	1.0	41
43	Video Self-Assessment of Basic Suturing and Knot Tying Skills by Novice Trainees. Journal of Surgical Education, 2013, 70, 279-283.	1.2	52
44	Outcomes of resection of extra-adrenal pheochromocytomas/paragangliomas in the laparoscopic era: a comparison with adrenal pheochromocytoma. Surgical Endoscopy and Other Interventional Techniques, 2013, 27, 428-433.	1.3	42
45	Risk factors affecting operative approach, conversion, and morbidity for adrenalectomy: a single-institution series of 402 patients. Surgical Endoscopy and Other Interventional Techniques, 2013, 27, 2342-2350.	1.3	66
46	SAGES video classics. Surgical Endoscopy and Other Interventional Techniques, 2013, 27, 4581-4588.	1.3	3
47	Commentary on "Incisional Hernia Rate May Increase After Single-Port Cholecystectomy― Journal of Laparoendoscopic and Advanced Surgical Techniques - Part A, 2012, 22, 738-739.	0.5	1
48	Commentary on "Cystic Duct Leaks After Laparoendoscopic Single-Site Cholecystectomy― A Word of Caution. Journal of Laparoendoscopic and Advanced Surgical Techniques - Part A, 2012, 22, 538-538.	0.5	0
49	Evaluation and management of adrenal incidentaloma. Journal of Surgical Oncology, 2012, 106, 557-564.	0.8	37
50	Laparoscopic Dor versus Toupet fundoplication following Heller myotomy for achalasia: results of a multicenter, prospective, randomized-controlled trial. Surgical Endoscopy and Other Interventional Techniques, 2012, 26, 18-26.	1.3	274
51	Comparison of laparoscopic skills performance between single-site access (SSA) devices and an independent-port SSA approach. Surgical Endoscopy and Other Interventional Techniques, 2012, 26, 714-721.	1.3	12
52	Year One Outcomes Assessment of a Masters Suturing and Knot-Tying Program for Surgical Interns. Journal of Surgical Education, 2011, 68, 526-533.	1.2	17
53	Analysis of standard multiport versus single-site access for laparoscopic skills training. Surgical Endoscopy and Other Interventional Techniques, 2011, 25, 1238-1244.	1.3	18
54	Clinical predictors of operative complexity in laparoscopic ventral hernia repair: a prospective study. Surgical Endoscopy and Other Interventional Techniques, 2010, 24, 1872-1877.	1.3	29

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55	Prospective evaluation of adhesion characteristics to intraperitoneal mesh and adhesiolysis-related complications during laparoscopic re-exploration after prior ventral hernia repair. Surgical Endoscopy and Other Interventional Techniques, 2010, 24, 3002-3007.	1.3	65
56	Do preclinical background and clerkship experiences impact skills performance in an accelerated internship preparation course for senior medical students?. Surgery, 2010, 148, 768-777.	1.0	38
57	Single-Incision Laparoscopic Cholecystectomy: Initial Experience with Critical View of Safety Dissection and Routine Intraoperative Cholangiography. Journal of the American College of Surgeons, 2010, 211, 1-7.	0.2	116
58	Focused Surgical Skills Training for Senior Medical Students and Interns. Surgical Clinics of North America, 2010, 90, 505-518.	0.5	42
59	Evaluation of Acute Fixation Strength for Mechanical Tacking Devices and Fibrin Sealant Versus Polypropylene Suture for Laparoscopic Ventral Hernia Repair. Surgical Innovation, 2010, 17, 285-290.	0.4	34
60	Previously unreported high-grade complications of adrenalectomy. Surgical Endoscopy and Other Interventional Techniques, 2009, 23, 97-102.	1.3	38
61	Accelerated Skills Preparation and Assessment for Senior Medical Students Entering Surgical Internship. Journal of the American College of Surgeons, 2008, 206, 897-904.	0.2	105
62	Needle biopsy of incidentally discovered adrenal masses is rarely informative and potentially hazardous. Surgery, 2007, 142, 497-504.	1.0	106
63	Pooled data analysis of laparoscopic vs. open ventral hernia repair: 14 years of patient data accrual. Surgical Endoscopy and Other Interventional Techniques, 2007, 21, 378-386.	1.3	209
64	Evaluation of acellular human dermis reinforcement of the crural closure in patients with difficult hiatal hernias. Surgical Endoscopy and Other Interventional Techniques, 2007, 21, 641-645.	1.3	43
65	Perioperative outcomes and complications of laparoscopic ventral hernia repair. Surgery, 2005, 138, 708-716.	1.0	154
66	Laparoscopic Paraesophageal Hernia Repair, a Challenging Operation, , Medium-Term Outcome of 116 Patients. Journal of Gastrointestinal Surgery, 2003, 7, 59-67.	0.9	160
67	Adrenalectomy for Familial Pheochromocytoma in the Laparoscopic Era. Annals of Surgery, 2002, 235, 713-721.	2.1	77
68	Adrenal locidentaloma. World Journal of Surgery, 2001, 25, 905-913.	0.8	140
69	The Case for Routine Operative Cholangiography During Laparoscopic Cholecystectomy. Surgical Clinics of North America, 1994, 74, 953-959.	0.5	53
70	Laparoscopic Ureterolysis. Journal of Urology, 1992, 147, 426-429.	0.2	128
71	Current status of parathyroid autotransplantation. Journal of Surgical Oncology, 1990, 6, 115-121.	1.4	8