

# Ryan J Marek

## List of Publications by Year in descending order

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times ranked

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#	ARTICLE	IF	CITATIONS
1	Factor structure and validity of the Inventory of Depression and Anxiety Symptoms-II (IDAS-II) in a chronic back pain treatment-seeking sample.. Psychological Assessment, 2022, 34, 3-9.	1.5	1
2	Measurement of Eating Pathology Using the Minnesota Multiphasic Personality Inventory-3 (MMPI-3). Journal of Personality Assessment, 2022, 104, 674-679.	2.1	4
3	Reliability and validity of Minnesota Multiphasic Personality Inventory-3 (MMPI-3) scale scores among patients seeking spine surgery.. Psychological Assessment, 2022, 34, 379-389.	1.5	5
4	Somatoform's placement and validity in the hierarchical taxonomy of psychopathology (HiTOP). Psychiatry Research, 2022, 313, 114593.	3.3	3
5	Understanding factors associated with intent to receive the COVID-19 vaccine.. Families, Systems and Health, 2022, 40, 160-170.	0.6	3
6	Psychosocial Functioning of Bariatric Surgery Patients 6-Years Postoperative. Obesity Surgery, 2021, 31, 712-724.	2.1	9
7	An Investigation of the Eating Concerns Scale of the Minnesota Multiphasic Personality Inventoryâ€™3 (MMPI-3) in a Postoperative Bariatric Surgery Sample. Obesity Surgery, 2021, 31, 2335-2338.	2.1	14
8	Psychological Assessment in Medical and Healthcare Settings. , 2021, , .		1
9	Associations among psychopathology and eating disorder symptoms and behaviors in post-bariatric surgery patients. Eating and Weight Disorders, 2021, 26, 2545-2553.	2.5	8
10	Validity of the Somatic Complaints Scales of the MMPI-2-RF in an Outpatient Chronic Pain Clinic. Journal of Clinical Psychology in Medical Settings, 2021, 28, 789-797.	1.4	4
11	Six-year bariatric surgery outcomes: the predictive and incremental validity of presurgical psychological testing. Surgery for Obesity and Related Diseases, 2021, 17, 1008-1016.	1.2	17
12	Validity of a pre-surgical algorithm to predict pain, functional disability, and emotional functioning 1 year after spine surgery.. Psychological Assessment, 2021, 33, 541-551.	1.5	5
13	Factor Structure and Measurement Invariance of the Attitudes Toward Persons with Obesity (ATOP) Scale in a Preoperative and Postoperative Bariatric Surgery Sample. Obesity Surgery, 2021, 31, 5207-5212.	2.1	0
14	Reliability and Validity of the Minnesota Multiphasic Personality Inventory â€™2 â€™ Restructured Form (MMPI-2-RF) in Spine Surgery and Spinal Cord Stimulator Samples. Journal of Personality Assessment, 2020, 102, 22-35.	2.1	8
15	Presurgical Psychological Evaluation: Risk Factor Identification and Mitigation. Journal of Clinical Psychology in Medical Settings, 2020, 27, 396-405.	1.4	8
16	Psychological Assessment Instruments for Use in Liver and Kidney Transplant Evaluations: Scarcity of Evidence and Recommendations. Journal of Personality Assessment, 2020, 102, 183-195.	2.1	20
17	The Effectiveness of a Home-Based Delivery of Triple P in High-Risk Families in Rural Areas. Journal of Child and Family Studies, 2020, 29, 997-1007.	1.3	5
18	Impact of Alexithymia on Organ Transplant Candidatesâ€™ Quality of Life: The Mediating Role of Depressive Symptoms. Psychological Reports, 2020, 123, 1614-1634.	1.7	2

#	ARTICLE	IF	CITATIONS
19	Assessment of Personality and Psychopathology in Healthcare Settings: Introduction to the Special Section. <i>Journal of Personality Assessment</i> , 2020, 102, 149-152.	2.1	0
20	Elucidating somatization in a dimensional model of psychopathology across medical settings. <i>Journal of Abnormal Psychology</i> , 2020, 129, 162-176.	1.9	20
21	Patient Activation Mediates the Association Between Psychosocial Risk Factors and Spine Surgery Results. <i>Journal of Clinical Psychology in Medical Settings</i> , 2019, 26, 123-130.	1.4	13
22	Time savings and accuracy of a simulated flexible and conditional administration of the MMPI-2-RF in presurgical psychological evaluations of bariatric surgery candidates. <i>Surgery for Obesity and Related Diseases</i> , 2019, 15, 732-738.	1.2	1
23	Patients' reasons for weight loss and their relations to clinical weight loss outcomes in a comprehensive lifestyle intervention. <i>Obesity Science and Practice</i> , 2019, 5, 548-554.	1.9	2
24	Using the Minnesota Multiphasic Personality Inventory-2-Restructured Form Cutoffs to Predict Lack of Pre-surgical Exercise. <i>Journal of Clinical Psychology in Medical Settings</i> , 2019, 26, 302-312.	1.4	2
25	Validation of a Psychological Screening Algorithm for Predicting Spine Surgery Outcomes. <i>Assessment</i> , 2019, 26, 915-928.	3.1	16
26	Equivalence of Laptop and Tablet Administrations of the Minnesota Multiphasic Personality Inventory-2 Restructured Form. <i>Assessment</i> , 2019, 26, 661-669.	3.1	12
27	Psychosocial functioning and quality of life in patients with loose redundant skin 4 to 5 years after bariatric surgery. <i>Surgery for Obesity and Related Diseases</i> , 2018, 14, 1740-1747.	1.2	27
28	Associations Between Pre-Implant Psychosocial Factors and Spinal Cord Stimulation Outcome. <i>Assessment</i> , 2017, 24, 60-70.	3.1	47
29	Utility of the MMPI-2-RF Validity Scales in Detection of Simulated Underreporting: Implications of Incorporating a Manipulation Check. <i>Assessment</i> , 2017, 24, 853-864.	3.1	18
30	30-day readmission following weight loss surgery: can psychological factors predict nonspecific indications for readmission?. <i>Surgery for Obesity and Related Diseases</i> , 2017, 13, 1376-1381.	1.2	21
31	Using the presurgical psychological evaluation to predict 5-year weight loss outcomes in bariatric surgery patients. <i>Surgery for Obesity and Related Diseases</i> , 2017, 13, 514-521.	1.2	70
32	Surgery type and psychosocial factors contribute to poorer weight loss outcomes in persons with a body mass index greater than 60 kg/m <sup>2</sup> . <i>Surgery for Obesity and Related Diseases</i> , 2017, 13, 2021-2026.	1.2	12
33	Psychological Correlates of Body Image Dissatisfaction Before and After Bariatric Surgery. <i>Bariatric Surgical Patient Care</i> , 2017, 12, 184-189.	0.5	10
34	Characteristics of Weight Loss Trajectories in a Comprehensive Lifestyle Intervention. <i>Obesity</i> , 2017, 25, 2062-2067.	3.0	13
35	Associations between psychological test results and failure to proceed with bariatric surgery. <i>Surgery for Obesity and Related Diseases</i> , 2017, 13, 507-513.	1.2	13
36	Understanding the role of psychopathology in bariatric surgery outcomes. <i>Obesity Reviews</i> , 2016, 17, 126-141.	6.5	49

#	ARTICLE	IF	CITATIONS
37	A review of psychological assessment instruments for use in bariatric surgery evaluations.. Psychological Assessment, 2016, 28, 1142-1157.	1.5	71
38	Graze eating among bariatric surgery candidates: prevalence and psychosocial correlates. Surgery for Obesity and Related Diseases, 2016, 12, 1091-1097.	1.2	30
39	Using presurgical psychological testing to predict 1-year appointment adherence and weight loss in bariatric surgery patients: predictive validity and methodological considerations. Surgery for Obesity and Related Diseases, 2015, 11, 1171-1181.	1.2	66
40	Premature termination from psychotherapy and internalizing psychopathology: The role of demoralization. Journal of Affective Disorders, 2015, 174, 549-555.	4.1	18
41	Replication and evaluation of a proposed two-factor Binge Eating Scale (BES) structure in a sample of bariatric surgery candidates. Surgery for Obesity and Related Diseases, 2015, 11, 659-665.	1.2	16
42	The Minnesota Multiphasic Personality Inventory-2 Restructured Form (MMPI-2-RF): Incremental validity in predicting early postoperative outcomes in spine surgery candidates.. Psychological Assessment, 2015, 27, 114-124.	1.5	36
43	Validity of Minnesota Multiphasic Personality Inventory - 2 Restructured Form (MMPI-2-RF) scores as a function of gender, ethnicity, and age of bariatric surgery candidates. Surgery for Obesity and Related Diseases, 2015, 11, 627-634.	1.2	19
44	Associations Between Minnesota Multiphasic Personality Inventory-2 Restructured Form (MMPI-2-RF) Scores, Workers' Compensation Status, and Spine Surgery Outcome. Journal of Applied Biobehavioral Research, 2014, 19, 248-267.	2.0	13
45	Impact of using DSM-5 criteria for diagnosing binge eating disorder in bariatric surgery candidates: Change in prevalence rate, demographic characteristics, and scores on the Minnesota Multiphasic Personality Inventory - 2 Restructured Form (MMPI-2-RF). International Journal of Eating Disorders, 2014, 47, 553-557.	4.0	33
46	Minnesota Multiphasic Personality Inventory-2 Restructured Form (MMPI-2-RF) scale score differences in bariatric surgery candidates diagnosed with binge eating disorder versus BMI-matched controls. International Journal of Eating Disorders, 2014, 47, 315-319.	4.0	33
47	Predicting One and Three Month Postoperative Somatic Concerns, Psychological Distress, and Maladaptive Eating Behaviors in Bariatric Surgery Candidates with the Minnesota Multiphasic Personality Inventory-2 Restructured Form (MMPI-2-RF). Obesity Surgery, 2014, 24, 631-639.	2.1	41
48	Assessing Psychosocial Functioning of Bariatric Surgery Candidates with the Minnesota Multiphasic Personality Inventory-2 Restructured Form (MMPI-2-RF). Obesity Surgery, 2013, 23, 1864-1873.	2.1	52
49	Targeting premeal anxiety in eating disordered clients and normal controls: A preliminary investigation into the use of mindful eating vs. distraction during food exposure. International Journal of Eating Disorders, 2013, 46, 582-585.	4.0	16
50	Psychological Risk Factors for Poor Outcome of Spine Surgery and Spinal Cord Stimulator Implant: A Review of the Literature and Their Assessment With the MMPI-2-RF. Clinical Neuropsychologist, 2013, 27, 81-107.	2.3	56
51	Use of the MMPI-2-RF Suicidal/Death Ideation and Substance Abuse scales in screening bariatric surgery candidates.. Psychological Assessment, 2013, 25, 1384-1389.	1.5	22
52	Minnesota Multiphasic Personality Inventory-2-Restructured Form (MMPI-2-RF) Normative Elevation Rates: Comparisons With Epidemiological Prevalence Rates. Clinical Neuropsychologist, 2013, 27, 1106-1120.	2.3	4
53	Psychosocial Factors and Expectancy Contribute Separately to Spine Surgery Outcome. Spine Journal, 2012, 12, S106-S107.	1.3	1