

Donna Manca

List of Publications by Year in descending order

Source: <https://exaly.com/author-pdf/513748/publications.pdf>

Version: 2024-02-01

74
papers

1,922
citations

279798

23
h-index

276875

41
g-index

77
all docs

77
docs citations

77
times ranked

2867
citing authors

| # | ARTICLE | IF | CITATIONS |
|----|--|-----|-----------|
| 1 | Bedtime versus morning use of antihypertensives for cardiovascular risk reduction (BedMed): protocol for a prospective, randomised, open-label, blinded end-point pragmatic trial. <i>BMJ Open</i> , 2022, 12, e059711. | 1.9 | 23 |
| 2 | Underuse of cardiorenal protective agents in high-risk diabetes patients in primary care: a cross-sectional study. , 2022, 23, . | | 17 |
| 3 | A data quality assessment to inform hypertension surveillance using primary care electronic medical record data from Alberta, Canada. <i>BMC Public Health</i> , 2021, 21, 264. | 2.9 | 4 |
| 4 | Attitudes Toward Human Papillomavirus Self-Sampling in Regularly Screened Women in Edmonton, Canada: A Cross-Sectional Study. <i>Journal of Lower Genital Tract Disease</i> , 2021, 25, 199-204. | 1.9 | 2 |
| 5 | Machine learning for identification of frailty in Canadian primary care practices. <i>International Journal of Population Data Science</i> , 2021, 6, 1650. | 0.1 | 15 |
| 6 | Use of healthy conversation skills to promote healthy diets, physical activity and gestational weight gain: Results from a pilot randomised controlled trial. <i>Patient Education and Counseling</i> , 2020, 103, 1134-1142. | 2.2 | 18 |
| 7 | Feasibility of identifying and describing the burden of early-onset metabolic syndrome in primary care electronic medical record data: a cross-sectional analysis. <i>CMAJ Open</i> , 2020, 8, E779-E787. | 2.4 | 7 |
| 8 | Primary care EMR and administrative data linkage in Alberta, Canada: describing the suitability for hypertension surveillance. <i>BMJ Health and Care Informatics</i> , 2020, 27, e100161. | 3.0 | 7 |
| 9 | Knowledge, Attitudes and Behaviours Related to Physician-Delivered Dietary Advice for Patients with Hypertension. <i>Journal of Community Health</i> , 2020, 45, 1067-1072. | 3.8 | 12 |
| 10 | Methods to improve the quality of smoking records in a primary care EMR database: exploring multiple imputation and pattern-matching algorithms. <i>BMC Medical Informatics and Decision Making</i> , 2020, 20, 56. | 3.0 | 8 |
| 11 | Epipericardial fat necrosis: an uncommon self-limiting cause of pleuritic chest pain. <i>Cmaj</i> , 2019, 191, E1378-E1381. | 2.0 | 3 |
| 12 | Achieving quality primary care data: a description of the Canadian Primary Care Sentinel Surveillance Network data capture, extraction, and processing in Alberta. <i>International Journal of Population Data Science</i> , 2019, 4, 1132. | 0.1 | 5 |
| 13 | The effectiveness of a proven chronic disease prevention and screening intervention in diverse and remote primary care settings: an implementation study on the BETTER 2 Program. <i>BJGP Open</i> , 2019, 3, bjgpopen19X101656. | 1.8 | 11 |
| 14 | Quality of warfarin management in primary care: Determining the stability of international normalized ratios using a nationally representative prospective cohort. <i>Canadian Family Physician</i> , 2019, 65, 416-425. | 0.4 | 11 |
| 15 | The BETTER WISE protocol: building on existing tools to improve cancer and chronic disease prevention and screening in primary care for wellness of cancer survivors and patients â€” a cluster randomized controlled trial embedded in a mixed methods design. <i>BMC Cancer</i> , 2018, 18, 927. | 2.6 | 9 |
| 16 | Developmental origins of infant emotion regulation: Mediation by temperamental negativity and moderation by maternal sensitivity.. <i>Developmental Psychology</i> , 2017, 53, 611-628. | 1.6 | 106 |
| 17 | Trends in antidepressant prescribing to children and adolescents in <sc>Canadian</sc> primary care: <sc>A</sc> timeâ€series analysis. <i>Pharmacoepidemiology and Drug Safety</i> , 2017, 26, 1093-1099. | 1.9 | 17 |
| 18 | Moderate mental illness as a predictor of chronic disease prevention and screening. <i>BMC Family Practice</i> , 2017, 18, 73. | 2.9 | 4 |

| # | ARTICLE | IF | CITATIONS |
|----|--|-----|-----------|
| 19 | BETTER HEALTH: Durham – protocol for a cluster randomized trial of BETTER in community and public health settings. BMC Public Health, 2017, 17, 754. | 2.9 | 6 |
| 20 | The Role of Family Physicians in Cancer Care: Perspectives of Primary and Specialty Care Providers. Current Oncology, 2017, 24, 75-80. | 2.2 | 55 |
| 21 | Patients' perspectives on BETTER 2 prevention and screening: qualitative findings from Newfoundland & Labrador. BJGP Open, 2017, 1, bjgpopen17X101037. | 1.8 | 7 |
| 22 | Assessing family history of chronic disease in primary care: Prevalence, documentation, and appropriate screening. Canadian Family Physician, 2017, 63, e58-e67. | 0.4 | 15 |
| 23 | Developmental origins of infant stress reactivity profiles: A multi-system approach. Developmental Psychobiology, 2016, 58, 578-599. | 1.6 | 36 |
| 24 | Implementation of the BETTER 2 program: a qualitative study exploring barriers and facilitators of a novel way to improve chronic disease prevention and screening in primary care. Implementation Science, 2016, 11, 158. | 6.9 | 60 |
| 25 | Perinatal nutrition in maternal mental health and child development: Birth of a pregnancy cohort. Early Human Development, 2016, 93, 1-7. | 1.8 | 18 |
| 26 | Can Facebook Be Used for Research? Experiences Using Facebook to Recruit Pregnant Women for a Randomized Controlled Trial. Journal of Medical Internet Research, 2016, 18, e250. | 4.3 | 66 |
| 27 | Primary Care Pathway for Childhood Asthma: Protocol for a Randomized Cluster-Controlled Trial. JMIR Research Protocols, 2016, 5, e37. | 1.0 | 9 |
| 28 | Patients' experiences with continuity of cancer care in Canada: Results from the CanIMPACT study. Canadian Family Physician, 2016, 62, 821-827. | 0.4 | 32 |
| 29 | Coordination of cancer care between family physicians and cancer specialists: Importance of communication. Canadian Family Physician, 2016, 62, e608-e615. | 0.4 | 34 |
| 30 | Primary care providers' experiences with and perceptions of personalized genomic medicine. Canadian Family Physician, 2016, 62, e626-e635. | 0.4 | 65 |
| 31 | Use of micronutrient supplements among pregnant women in Alberta: results from the Alberta pregnancy outcomes and nutrition (APrON) cohort. Maternal and Child Nutrition, 2015, 11, 497-510. | 3.0 | 49 |
| 32 | Assessment of Pre-Pregnancy Dietary Intake with a Food Frequency Questionnaire in Alberta Women. Nutrients, 2015, 7, 6155-6166. | 4.1 | 12 |
| 33 | Developing clinical decision tools to implement chronic disease prevention and screening in primary care: the BETTER 2 program (building on existing tools to improve chronic disease prevention and screening) Tj ETQq1 1 0.784314 rgBTz/Overlo | 1.4 | 14 |
| 34 | Intrapartum Corticosteroid use Significantly Increases the Risk of Gestational Diabetes in Women with Inflammatory Bowel Disease. Journal of Crohn's and Colitis, 2015, 9, 223-230. | 1.3 | 41 |
| 35 | Sexually dimorphic adaptations in basal maternal stress physiology during pregnancy and implications for fetal development. Psychoneuroendocrinology, 2015, 56, 168-178. | 2.7 | 36 |
| 36 | Depression, Diabetes and Multi-Morbidity: Results from the Northern Alberta Primary Care Research Network Data. Canadian Journal of Diabetes, 2015, 39, S27-S28. | 0.8 | 2 |

| # | ARTICLE | IF | CITATIONS |
|----|---|-----|-----------|
| 37 | Horses and buggies have some advantages over cars, but no one is turning back. Canadian Family Physician, 2015, 61, 416-9. | 0.4 | 5 |
| 38 | Do electronic medical records improve quality of care? Yes. Canadian Family Physician, 2015, 61, 846-7, 850-1. | 0.4 | 45 |
| 39 | Rebuttal: Do electronic medical records improve quality of care? Yes. Canadian Family Physician, 2015, 61, e435, e437. | 0.4 | 3 |
| 40 | You are how you recruit: a cohort and randomized controlled trial of recruitment strategies. BMC Medical Research Methodology, 2014, 14, 111. | 3.1 | 20 |
| 41 | Guideline harmonization and implementation plan for the BETTER trial: Building on Existing Tools to Improve Chronic Disease Prevention and Screening in Family Practice. CMAJ Open, 2014, 2, E1-E10. | 2.4 | 16 |
| 42 | The diagnosis of depression and its treatment in Canadian primary care practices: an epidemiological study. CMAJ Open, 2014, 2, E337-E342. | 2.4 | 35 |
| 43 | Implementing and evaluating a program to facilitate chronic disease prevention and screening in primary care: a mixed methods program evaluation. Implementation Science, 2014, 9, 135. | 6.9 | 21 |
| 44 | Implementation and evaluation of the 5As framework of obesity management in primary care: design of the 5As Team (5AsT) randomized control trial. Implementation Science, 2014, 9, 78. | 6.9 | 34 |
| 45 | Validating the 8 CPCSSN Case Definitions for Chronic Disease Surveillance in a Primary Care Database of Electronic Health Records. Annals of Family Medicine, 2014, 12, 367-372. | 1.9 | 207 |
| 46 | The Alberta Pregnancy Outcomes and Nutrition (APrON) cohort study: rationale and methods. Maternal and Child Nutrition, 2014, 10, 44-60. | 3.0 | 146 |
| 47 | The effects of "does not apply"™ on measurement of temperament with the Infant Behavior Questionnaire™ Revised: A cautionary tale for very young infants. Early Human Development, 2014, 90, 627-634. | 1.8 | 2 |
| 48 | Finding a BETTER way: A qualitative study exploring the prevention practitioner intervention to improve chronic disease prevention and screening in family practice. BMC Family Practice, 2014, 15, 66. | 2.9 | 22 |
| 49 | Diagnosis and treatment of paroxysmal kinesigenic dyskinesia in a 15-year-old boy. Canadian Family Physician, 2014, 60, 445-7. | 0.4 | 1 |
| 50 | The most effective strategy for recruiting a pregnancy cohort: a tale of two cities. BMC Pregnancy and Childbirth, 2013, 13, 75. | 2.4 | 23 |
| 51 | Prenatal micronutrient supplementation and postpartum depressive symptoms in a pregnancy cohort. BMC Pregnancy and Childbirth, 2013, 13, 2. | 2.4 | 40 |
| 52 | Improving chronic disease prevention and screening in primary care: results of the BETTER pragmatic cluster randomized controlled trial. BMC Family Practice, 2013, 14, 175. | 2.9 | 70 |
| 53 | Finding common ground to achieve a "good death": family physicians working with substitute decision-makers of dying patients. A qualitative grounded theory study. BMC Family Practice, 2013, 14, 14. | 2.9 | 24 |
| 54 | Scrotal involvement in an adult with Henoch-Schönlein purpura. Clinical Rheumatology, 2013, 32, 93-95. | 2.2 | 5 |

| # | ARTICLE | IF | CITATIONS |
|----|---|-----|-----------|
| 55 | How the Medical Culture Contributes to Coworker-Perpetrated Harassment and Abuse of Family Physicians. <i>Annals of Family Medicine</i> , 2012, 10, 111-117. | 1.9 | 24 |
| 56 | Report on the Expert Forum on using Information Technology to Facilitate Uptake and Impact of Colorectal Cancer Screening Guidelines. <i>Canadian Journal of Gastroenterology & Hepatology</i> , 2012, 26, 902-904. | 1.7 | 2 |
| 57 | Residents' clinical questions: how are they answered and are the answers helpful?. <i>Canadian Family Physician</i> , 2012, 58, e344-51. | 0.4 | 8 |
| 58 | Current use of electronic medical records in primary care of chronic disease. <i>Clinical Governance</i> , 2011, 16, 353-363. | 0.3 | 3 |
| 59 | A tale of two cultures: specialists and generalists sharing the load. <i>Canadian Family Physician</i> , 2011, 57, 576-84. | 0.4 | 22 |
| 60 | Ethics and privacy issues of a practice-based surveillance system: need for a national-level institutional research ethics board and consent standards. <i>Canadian Family Physician</i> , 2011, 57, 1165-73. | 0.4 | 19 |
| 61 | Effect of colleague and coworker abuse on family physicians in Canada. <i>Canadian Family Physician</i> , 2011, 57, 1424-31. | 0.4 | 8 |
| 62 | Monthly Incidence Rates of Abusive Encounters for Canadian Family Physicians by Patients and Their Families. <i>International Journal of Family Medicine</i> , 2010, 2010, 1-6. | 1.2 | 11 |
| 63 | Do Randomized Controlled Trials Discuss Healthcare Costs?. <i>PLoS ONE</i> , 2010, 5, e12318. | 2.5 | 2 |
| 64 | Prevalence of abusive encounters in the workplace of family physicians: a minor, major, or severe problem?. <i>Canadian Family Physician</i> , 2010, 56, e101-8. | 0.4 | 30 |
| 65 | Building a Pan-Canadian Primary Care Sentinel Surveillance Network: Initial Development and Moving Forward. <i>Journal of the American Board of Family Medicine</i> , 2009, 22, 412-422. | 1.5 | 109 |
| 66 | Who is driving continuing medical education for family medicine?. <i>Journal of Continuing Education in the Health Professions</i> , 2009, 29, 63-67. | 1.3 | 6 |
| 67 | DEFINITIONS OF COMMON TERMS RELEVANT TO PRIMARY CARE RESEARCH. <i>Annals of Family Medicine</i> , 2008, 6, 570-571. | 1.9 | 14 |
| 68 | Developing an Integrated Evidence-Based Medicine Curriculum for Family Medicine Residency at the University of Alberta. <i>Academic Medicine</i> , 2008, 83, 581-587. | 1.6 | 21 |
| 69 | Respect from specialists: concerns of family physicians. <i>Canadian Family Physician</i> , 2008, 54, 1434-5, 1435.e1-5. | 0.4 | 33 |
| 70 | Rewards and challenges of family practice: Web-based survey using the Delphi method. <i>Canadian Family Physician</i> , 2007, 53, 278-86, 277. | 0.4 | 29 |
| 71 | Ethical concerns in community practice research. Common concerns encountered by the Alberta family practice research network. <i>Canadian Family Physician</i> , 2006, 52, 288-9, 296-8. | 0.4 | 2 |
| 72 | Case Report: infected ear cartilage piercing. <i>Canadian Family Physician</i> , 2006, 52, 974-5. | 0.4 | 6 |

| # | ARTICLE | IF | CITATIONS |
|----|---|-----|-----------|
| 73 | Woman physician stalked. Personal reflection and suggested approach. Canadian Family Physician, 2005, 51, 1640-5. | 0.4 | 2 |
| 74 | Funding support for primary care research. Canadian Family Physician, 2002, 48, 1435-6. | 0.4 | 1 |