

David Mountain

List of Publications by Year in descending order

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Version: 2024-02-01

60
papers

1,370
citations

471371

17
h-index

345118

36
g-index

64
all docs

64
docs citations

64
times ranked

2017
citing authors

#	ARTICLE	IF	CITATIONS
1	A systematic review of adverse events arising from the use of synthetic cannabinoids and their associated treatment. <i>Clinical Toxicology</i> , 2016, 54, 1-13.	0.8	307
2	Myths versus facts in emergency department overcrowding and hospital access block. <i>Medical Journal of Australia</i> , 2009, 190, 369-374.	0.8	208
3	Systematic review of predictive performance of injury severity scoring tools. <i>Scandinavian Journal of Trauma, Resuscitation and Emergency Medicine</i> , 2012, 20, 63.	1.1	108
4	Quantifying the proportion of general practice and low-acuity patients in the emergency department. <i>Medical Journal of Australia</i> , 2013, 198, 612-615.	0.8	71
5	Organophosphate poisoning in perth, western australia, 1987-1996. <i>Journal of Emergency Medicine</i> , 1999, 17, 273-277.	0.3	47
6	Blood cultures ordered in the adult emergency department are rarely useful. <i>European Journal of Emergency Medicine</i> , 2006, 13, 76-79.	0.5	47
7	Is it Appropriate for Patients to be Discharged at the Scene by Paramedics?. <i>Prehospital Emergency Care</i> , 2016, 20, 539-549.	1.0	40
8	RESPECT-ED: Rates of Pulmonary Emboli (PE) and Sub-Segmental PE with Modern Computed Tomographic Pulmonary Angiograms in Emergency Departments: A Multi-Center Observational Study Finds Significant Yield Variation, Uncorrelated with Use or Small PE Rates. <i>PLoS ONE</i> , 2016, 11, e0166483.	1.1	37
9	Comparisons of the Outcome Prediction Performance of Injury Severity Scoring Tools Using the Abbreviated Injury Scale 90 Update 98 (AIS 98) and 2005 Update 2008 (AIS 2008). <i>Annals of Advances in Automotive Medicine</i> , 2011, 55, 255-65.	0.6	32
10	International comparison of regional trauma registries. <i>Injury</i> , 2012, 43, 1924-1930.	0.7	31
11	The VIDAS D-dimer test for venous thromboembolism: a prospective surveillance study shows maintenance of sensitivity and specificity when used in normal clinical practice. <i>American Journal of Emergency Medicine</i> , 2007, 25, 464-471.	0.7	27
12	Introduction of a 4-hour rule in Western Australian Emergency Departments. <i>EMA - Emergency Medicine Australasia</i> , 2010, 22, 374-378.	0.5	27
13	Impact of the four-hour National Emergency Access Target on 30 day mortality, access block and chronic emergency department overcrowding in Australian emergency departments. <i>EMA - Emergency Medicine Australasia</i> , 2019, 31, 58-66.	0.5	25
14	Characteristics, management and outcomes of adults with major trauma taking pre-injury warfarin in a Western Australian population from 2000 to 2005: a population-based cohort study. <i>Medical Journal of Australia</i> , 2010, 193, 202-206.	0.8	23
15	Implementation of the Western Australian Osteoporosis Model of Care: a fracture liaison service utilising emergency department information systems to identify patients with fragility fracture to improve current practice and reduce re-fracture rates: a 12-month analysis. <i>Osteoporosis International</i> . 2018. 29. 1759-1770.	1.3	21
16	Door-to-balloon times are reduced in ST-elevation myocardial infarction by emergency physician activation of the cardiac catheterisation laboratory and immediate patient transfer. <i>Medical Journal of Australia</i> , 2010, 193, 207-212.	0.8	18
17	Evidence-based paramedic models of care to reduce unnecessary emergency department attendance - feasibility and safety. <i>BMC Emergency Medicine</i> , 2013, 13, 13.	0.7	18
18	Review article: Emergency department crowding measures associations with quality of care: A systematic review. <i>EMA - Emergency Medicine Australasia</i> , 2021, 33, 592-600.	0.5	18

#	ARTICLE	IF	CITATIONS
19	Staff perceptions of palliative care in a public Australian, metropolitan emergency department. EMA - Emergency Medicine Australasia, 2015, 27, 287-294.	0.5	17
20	Using clinical indicators in emergency medicine: documenting performance improvements to justify increased resource allocation.. Emergency Medicine Journal, 1999, 16, 319-321.	0.4	16
21	Emergency department diagnosis of pulmonary embolism is associated with significantly reduced mortality: A linked data population study. EMA - Emergency Medicine Australasia, 2009, 21, 269-276.	0.5	16
22	Burden of primary care-type emergency department presentations using clinical assessment by general practitioners: A cross-sectional study. EMA - Emergency Medicine Australasia, 2019, 31, 780-786.	0.5	16
23	Impact of the Four-Hour Rule in Western Australian hospitals: Trend analysis of a large record linkage study 2002-2013. PLoS ONE, 2018, 13, e0193902.	1.1	16
24	Telephone triage is not the answer to ED overcrowding. EMA - Emergency Medicine Australasia, 2012, 24, 123-126.	0.5	15
25	Determining the true burden of general practice patients in the emergency department: Getting closer. EMA - Emergency Medicine Australasia, 2013, 25, 487-490.	0.5	14
26	Perceptions and experiences of emergency department staff during the implementation of the four-hour rule/national emergency access target policy in Australia: a qualitative social dynamic perspective. BMC Health Services Research, 2019, 19, 82.	0.9	14
27	Determining the true burden of general practice patients in the emergency department: The need for robust methodology. EMA - Emergency Medicine Australasia, 2011, 23, 116-119.	0.5	12
28	Which patients should be transported to the emergency department? A perpetual prehospital dilemma. EMA - Emergency Medicine Australasia, 2016, 28, 647-653.	0.5	12
29	Lessons from the 4-hour standard in England for Australia. Medical Journal of Australia, 2011, 194, 268-268.	0.8	10
30	Impact of the National Emergency Access Target policy on emergency departments' performance: A time-trend analysis for New South Wales, Australian Capital Territory and Queensland. EMA - Emergency Medicine Australasia, 2019, 31, 253-261.	0.5	10
31	Qualitative analysis of perceptions and experiences of emergency department staff in relation to implementation and outcomes of the Four-Hour Rule/National Emergency Access Target in Australia. EMA - Emergency Medicine Australasia, 2019, 31, 378-386.	0.5	9
32	An emergency department optimized protocol for qualitative research to investigate care seeking by patients with non-urgent conditions. Nursing Open, 2021, 8, 628-635.	1.1	8
33	Paramedic Checklists do not Accurately Identify Post-ictal or Hypoglycaemic Patients Suitable for Discharge at the Scene. Prehospital and Disaster Medicine, 2016, 31, 282-293.	0.7	7
34	When a health policy cuts both ways: Impact of the National Emergency Access Target policy on staff and emergency department performance. EMA - Emergency Medicine Australasia, 2020, 32, 228-239.	0.5	7
35	Emergency department based intervention with adolescent substance users: 10year economic and health outcomes. Drug and Alcohol Dependence, 2016, 165, 168-174.	1.6	6
36	Diagnosing pulmonary embolism: A question of too much choice?. EMA - Emergency Medicine Australasia, 2003, 15, 250-262.	0.5	5

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37	Multislice computed tomographic pulmonary angiography for diagnosing pulmonary embolism in the emergency department: Has the 'one-stop shop' arrived?. EMA - Emergency Medicine Australasia, 2006, 18, 444-450.	0.5	5
38	Review article: Has the implementation of time-based targets for emergency department length of stay influenced the quality of care for patients? A systematic review of quantitative literature. EMA - Emergency Medicine Australasia, 2021, 33, 398-408.	0.5	5
39	Establishing an indicator rate for computed tomography pulmonary angiography positivity (yield) in emergency department pulmonary embolism investigation. EMA - Emergency Medicine Australasia, 2018, 30, 134-135.	0.5	4
40	Impact of the Four-Hour Rule/National Emergency Access Target policy implementation on emergency department staff: A qualitative perspective of emergency department management changes. EMA - Emergency Medicine Australasia, 2019, 31, 362-371.	0.5	4
41	Response to Re: Impact of the four-hour National Emergency Access Target on 30 day mortality, access block and chronic emergency department overcrowding in Australian emergency departments. EMA - Emergency Medicine Australasia, 2019, 31, 147-148.	0.5	4
42	Review article: Have emergency department time-based targets influenced patient care? A systematic review of qualitative literature. EMA - Emergency Medicine Australasia, 2021, 33, 202-213.	0.5	4
43	Whole-of-hospital response to admission access block: the need for a clinical revolution. Medical Journal of Australia, 2010, 192, 354-356.	0.8	3
44	Validation of a Modified Table to Map the 1998 Abbreviated Injury Scale to the 2008 Scale and the Use of Adjusted Severities. Journal of Trauma, 2011, 71, 1829-1834.	2.3	3
45	General practice patients form an insignificant part of the emergency department workload. Medical Journal of Australia, 2012, 197, 619-619.	0.8	3
46	Australian and New Zealand 1997 thrombolysis audit. EMA - Emergency Medicine Australasia, 2000, 12, 116-122.	0.5	2
47	Myths of ideal hospital occupancy. Medical Journal of Australia, 2010, 193, 61-62.	0.8	2
48	REACTED – Reducing Acute Chest pain Time in the ED: A prospective pre/post-interventional cohort study, stratifying risk using early cardiac multi-markers, probably increases discharges safely. EMA - Emergency Medicine Australasia, 2016, 28, 383-390.	0.5	2
49	Patient information sheets in emergency care. BMJ: British Medical Journal, 2009, 338, b35-b35.	2.4	2
50	Thrombolysis for acute myocardial infarction in Australasia 1999. EMA - Emergency Medicine Australasia, 2002, 14, 267-274.	0.5	1
51	Perspectives on the evolution of time-based targets and their impact on emergency medicine training. EMA - Emergency Medicine Australasia, 2015, 27, 351-354.	0.5	1
52	Impact of the Four-Hour Rule policy on emergency medical services delays in Australian EDs: a longitudinal cohort study. Emergency Medicine Journal, 2020, 37, emermed-2019-208958.	0.4	1
53	Should the Australasian College for Emergency Medicine advocate for time-based targets as a quality indicator? A Quality Indicator Critical Appraisal evaluation. EMA - Emergency Medicine Australasia, 2021, 33, 767-768.	0.5	1
54	The use of computed tomography in the management of injury in tertiary emergency departments in Western Australia: Evidence of over-testing?. Academic Emergency Medicine, 2021, , .	0.8	1

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55	Thrombolysis for acute myocardial infarction in Australasia 1999. EMA - Emergency Medicine Australasia, 2002, 14, 267-274.	0.5	1
56	Chest pain research in Australasian emergency medicine: Putting our mark on the world stage. EMA - Emergency Medicine Australasia, 2011, 23, 395-397.	0.5	0
57	The VHOT (Vindaloo Hastens Outpouring of Troponins) Study. EMA - Emergency Medicine Australasia, 2016, 28, 654-657.	0.5	0
58	Changing trends in venous thromboembolism-related imaging in Western Australian teaching hospitals, 2002-2010. Medical Journal of Australia, 2014, 200, 26-27.	0.8	0
59	Alcohol related work place injuries: More Questions than Answers!. Journal of Emergencies, Trauma and Shock, 2015, 8, 3.	0.3	0
60	Thrombolysis for acute myocardial infarction in Australasia 1999. Emergency Medicine (Fremantle, W) Tj ETQq0 0 0 rgBT /Overlock 10 T	0.8	0