

Julie K Johnson

List of Publications by Year in descending order

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Version: 2024-02-01

98
papers

2,805
citations

147726

31
h-index

197736

49
g-index

98
all docs

98
docs citations

98
times ranked

3222
citing authors

#	ARTICLE	IF	CITATIONS
1	Age- and Sex-Specific Needs for Children Undergoing Inflammatory Bowel Disease Surgery: A Qualitative Study. <i>Journal of Surgical Research</i> , 2022, 274, 46-58.	0.8	4
2	Barriers and facilitators of CT scan reduction in the workup of pediatric appendicitis: A pediatric surgical quality collaborative qualitative study. <i>Journal of Pediatric Surgery</i> , 2022, 57, 582-588.	0.8	7
3	Pilot implementation of opioid stewardship measures using the national surgical quality improvement program-pediatric platform. <i>Journal of Pediatric Surgery</i> , 2022, 57, 130-136.	0.8	2
4	Development and Validation of a Brief Culture-of-Safety Survey. <i>Joint Commission Journal on Quality and Patient Safety</i> , 2022, , .	0.4	0
5	Intraoperative Assessment of Non-Technical Skills for Surgeons (NOTSS) and Qualitative Description of their Effects on Intraoperative Performance. <i>Journal of Surgical Education</i> , 2022, 79, 1237-1245.	1.2	4
6	A National Mixed-Methods Evaluation of General Surgery Residency Program Responsiveness and the Association with Resident Wellness. <i>Journal of Surgical Education</i> , 2022, 79, e1-e11.	1.2	6
7	Invisible Work: Advanced Practice Providers'™ Role in the Education of Surgeons. <i>Journal of Surgical Education</i> , 2022, 79, 1353-1362.	1.2	1
8	Formative Evaluation of a Peer Video-Based Coaching Initiative. <i>Journal of Surgical Research</i> , 2021, 257, 169-177.	0.8	20
9	“Are We Gonna Talk About It or Not?” Thoracic Oncology Provider Perspectives on Smoking Cessation. <i>Journal of Surgical Research</i> , 2021, 258, 422-429.	0.8	2
10	A Mixed-Methods Evaluation of Clinician Education Modules on Reducing Surgical Opioid Prescribing. <i>Journal of Surgical Research</i> , 2021, 257, 1-8.	0.8	7
11	Development of a conceptual model for understanding the learning environment and surgical resident well-being. <i>American Journal of Surgery</i> , 2021, 221, 323-330.	0.9	21
12	A starter's guide to learning and teaching how to coproduce healthcare services. <i>International Journal for Quality in Health Care</i> , 2021, 33, ii55-ii62.	0.9	4
13	Primary prevention of prescription opioid diversion: a systematic review of medication disposal interventions. <i>American Journal of Drug and Alcohol Abuse</i> , 2021, 47, 548-558.	1.1	16
14	Barriers to Post-Discharge Monitoring and Patient-Clinician Communication: A Qualitative Study. <i>Journal of Surgical Research</i> , 2021, 268, 1-8.	0.8	3
15	Identifying leadership for clinical governance in rural and remote primary health care services. <i>Australian Journal of Rural Health</i> , 2020, 28, 414-416.	0.7	1
16	Evaluation of Changes in Quality Improvement Knowledge Following a Formal Educational Curriculum Within a Statewide Learning Collaborative. <i>Journal of Surgical Education</i> , 2020, 77, 1534-1541.	1.2	8
17	Assessing effectiveness and implementation of a perioperative enhanced recovery protocol for children undergoing surgery: study protocol for a prospective, stepped-wedge, cluster, randomized, controlled clinical trial. <i>Trials</i> , 2020, 21, 926.	0.7	9
18	Association Between Implementing Comprehensive Learning Collaborative Strategies in a Statewide Collaborative and Changes in Hospital Safety Culture. <i>JAMA Surgery</i> , 2020, 155, 934.	2.2	11

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19	A National Mixed-Methods Evaluation of Preparedness for General Surgery Residency and the Association With Resident Burnout. <i>JAMA Surgery</i> , 2020, 155, 851.	2.2	27
20	National Evaluation of Patient Preferences in Selecting Hospitals and Health Care Providers. <i>Medical Care</i> , 2020, 58, 867-873.	1.1	8
21	Association Between Surgeon Technical Skills and Patient Outcomes. <i>JAMA Surgery</i> , 2020, 155, 960.	2.2	145
22	Preoperative patient education and patient preparedness are associated with less postoperative use of opioids. <i>Surgery</i> , 2020, 167, 852-858.	1.0	54
23	An international comparison of factors affecting quality of life among patients with congestive heart failure: A cross-sectional study. <i>PLoS ONE</i> , 2020, 15, e0231346.	1.1	6
24	Title is missing!. , 2020, 15, e0231346.		0
25	Title is missing!. , 2020, 15, e0231346.		0
26	Title is missing!. , 2020, 15, e0231346.		0
27	Title is missing!. , 2020, 15, e0231346.		0
28	Title is missing!. , 2020, 15, e0231346.		0
29	Title is missing!. , 2020, 15, e0231346.		0
30	<p>>Patients, health professionals, and the health system: influencers on patientsâ€™ participation in ward rounds</p>>. <i>Patient Preference and Adherence</i> , 2019, Volume 13, 1415-1429.	0.8	11
31	Redesigning systems to improve teamwork and quality for hospitalized patients (RESET): study protocol evaluating the effect of mentored implementation to redesign clinical microsystems. <i>BMC Health Services Research</i> , 2019, 19, 293.	0.9	14
32	Minimizing Opioid Prescribing in Surgery (MOPiS) Initiative: An Analysis of Implementation Barriers. <i>Journal of Surgical Research</i> , 2019, 239, 309-319.	0.8	24
33	Evaluating the implementation and effectiveness of a multi-component intervention to reduce post-surgical opioid prescribing: study protocol of a mixed-methods design. <i>BMJ Open</i> , 2019, 9, e030404.	0.8	18
34	An Empirical National Assessment of the Learning Environment and Factors Associated With Program Culture. <i>Annals of Surgery</i> , 2019, 270, 585-592.	2.1	23
35	<p>>How Do Interprofessional Healthcare Teams Perceive the Benefits and Challenges of Interdisciplinary Ward Rounds</p>>. <i>Journal of Multidisciplinary Healthcare</i> , 2019, Volume 12, 1023-1032.	1.1	22
36	Leveraging a Comprehensive Program to Implement a Colorectal Surgical Site Infection Reduction Bundle in a Statewide Quality Improvement Collaborative. <i>Annals of Surgery</i> , 2019, 270, 701-711.	2.1	20

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37	Barriers to Providing VTE Chemoprophylaxis to Hospitalized Patients: A Nursing-Focused Qualitative Evaluation. <i>Journal of Hospital Medicine</i> , 2019, 14, 668-672.	0.7	5
38	Gender Differences in Utilization of Duty-hour Regulations, Aspects of Burnout, and Psychological Well-being Among General Surgery Residents in the United States. <i>Annals of Surgery</i> , 2018, 268, 204-211.	2.1	97
39	Discharge prescription patterns of opioid and nonopioid analgesics after common surgical procedures. <i>Pain Reports</i> , 2018, 3, e637.	1.4	45
40	Variation in post-discharge opioid prescriptions among members of a surgical team. <i>American Journal of Surgery</i> , 2018, 216, 25-30.	0.9	39
41	What attributions do Australian high-performing general practices make for their success? Applying the clinical microsystems framework: a qualitative study. <i>BMJ Open</i> , 2018, 8, e020552.	0.8	6
42	Telemedicine consultation for patients with diabetes mellitus: a cluster randomised controlled trial. <i>Journal of Telemedicine and Telecare</i> , 2018, 24, 385-391.	1.4	60
43	Exploring Qualitative Perspectives on Surgical Resident Training, Well-Being, and Patient Care. <i>Journal of the American College of Surgeons</i> , 2017, 224, 149-159.	0.2	19
44	Improving communication with families of patients undergoing pediatric cardiac surgery. <i>Progress in Pediatric Cardiology</i> , 2017, 45, 83-90.	0.2	19
45	Evaluation of a novel mentor program to improve surgical care for US hospitals. <i>International Journal for Quality in Health Care</i> , 2017, 29, 234-242.	0.9	11
46	Use of Unit-Based Interventions to Improve the Quality of Care for Hospitalized Medical Patients: A National Survey. <i>Joint Commission Journal on Quality and Patient Safety</i> , 2017, 43, 573-579.	0.4	13
47	Perspectives of rural and remote primary healthcare services on the meaning and goals of clinical governance. <i>Australian Journal of Primary Health</i> , 2017, 23, 451.	0.4	5
48	Tools and Strategies for Continuous Quality Improvement and Patient Safety. , 2017, , 121-132.		1
49	Multi-institutional Learning and Collaboration to Improve Quality and Safety. , 2017, , 715-722.		0
50	How to do better health reform: a snapshot of change and improvement initiatives in the health systems of 30 countries. <i>International Journal for Quality in Health Care</i> , 2016, 28, 843-846.	0.9	15
51	Development of a Conceptual Model for Surgical Quality Improvement Collaboratives. <i>JAMA Surgery</i> , 2016, 151, 1181.	2.2	17
52	Do interdisciplinary rounds improve patient outcomes? only if they improve teamwork. <i>Journal of Hospital Medicine</i> , 2016, 11, 524-525.	0.7	18
53	Process improvement in surgery. <i>Current Problems in Surgery</i> , 2016, 53, 62-96.	0.6	21
54	Developing a primary care patient measure of safety (PC PMOS): a modified Delphi process and face validity testing. <i>BMJ Quality and Safety</i> , 2016, 25, 273-280.	1.8	23

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55	Can we talk? The art (and science) of handoff conversation. <i>BMJ Quality and Safety</i> , 2016, 25, 63-65.	1.8	10
56	Patient and carer identified factors which contribute to safety incidents in primary care: a qualitative study. <i>BMJ Quality and Safety</i> , 2015, 24, 583-593.	1.8	58
57	Improving Pediatric Cardiac Care with Continuous Quality Improvement Methods and Tools. , 2015, , 39-50.		4
58	Surveyors' perceptions of the impact of accreditation on patient safety in general practice. <i>Medical Journal of Australia</i> , 2014, 201, S56-9.	0.8	10
59	Patients' and carers' perceptions of safety in rural general practice. <i>Medical Journal of Australia</i> , 2014, 201, S60-3.	0.8	20
60	A practical example of Contribution Analysis to a public health intervention. <i>Evaluation</i> , 2014, 20, 214-229.	0.7	19
61	Applying Process Mapping and Analysis as a Quality Improvement Strategy to Increase the Adoption of Fruit, Vegetable, and Water Breaks in Australian Primary Schools. <i>Health Promotion Practice</i> , 2014, 15, 199-207.	0.9	7
62	How do supervising physicians decide to entrust residents with unsupervised tasks? A qualitative analysis. <i>Journal of Hospital Medicine</i> , 2014, 9, 169-175.	0.7	82
63	Validation of a handoff assessment tool: the Handoff CEX. <i>Journal of Clinical Nursing</i> , 2013, 22, 1477-1486.	1.4	40
64	â€œURM Candidates Are Encouraged to Applyâ€•. <i>Academic Medicine</i> , 2013, 88, 405-412.	0.8	82
65	What can artefact analysis tell us about patient transitions between the hospital and primary care? Lessons from the HANDOVER project. <i>European Journal of General Practice</i> , 2013, 19, 185-193.	0.9	9
66	Organizational Culture. <i>Medical Care</i> , 2013, 51, 90-98.	1.1	63
67	Are patients discharged with care? A qualitative study of perceptions and experiences of patients, family members and care providers. <i>BMJ Quality and Safety</i> , 2012, 21, i39-i49.	1.8	136
68	The key actor: a qualitative study of patient participation in the handover process in Europe. <i>BMJ Quality and Safety</i> , 2012, 21, i89-i96.	1.8	52
69	Conducting a multicentre and multinational qualitative study on patient transitions. <i>BMJ Quality and Safety</i> , 2012, 21, i22-i28.	1.8	39
70	Stakeholder perspectives on handovers between hospital staff and general practitioners: an evaluation through the microsystems lens. <i>BMJ Quality and Safety</i> , 2012, 21, i106-i113.	1.8	35
71	Searching for the missing pieces between the hospital and primary care: mapping the patient process during care transitions. <i>BMJ Quality and Safety</i> , 2012, 21, i97-i105.	1.8	55
72	Improving communication and reliability of patient handovers in pediatric cardiac care. <i>Progress in Pediatric Cardiology</i> , 2011, 32, 135-139.	0.2	3

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73	Quality improvement methods to study and improve the process and outcomes of pediatric cardiac care. <i>Progress in Pediatric Cardiology</i> , 2011, 32, 147-153.	0.2	24
74	Teaching Internal Medicine Residents to Sustain Their Improvement Through the Quality Assessment and Improvement Curriculum. <i>Journal of General Internal Medicine</i> , 2011, 26, 221-225.	1.3	37
75	Hand-off Education and Evaluation: Piloting the Observed Simulated Hand-off Experience (OSHE). <i>Journal of General Internal Medicine</i> , 2010, 25, 129-134.	1.3	97
76	Developing Measures of Educational Change for Academic Health Care Teams Implementing the Chronic Care Model in Teaching Practices. <i>Journal of General Internal Medicine</i> , 2010, 25, 586-592.	1.3	20
77	Assessing Chronic Illness Care Education (ACIC-E): A Tool for Tracking Educational Re-design for Improving Chronic Care Education. <i>Journal of General Internal Medicine</i> , 2010, 25, 593-609.	1.3	44
78	A Multi-Institutional Quality Improvement Initiative to Transform Education for Chronic Illness Care in Resident Continuity Practices. <i>Journal of General Internal Medicine</i> , 2010, 25, 574-580.	1.3	41
79	Joy and Challenges in Improving Chronic Illness Care: Capturing Daily Experiences of Academic Primary Care Teams. <i>Journal of General Internal Medicine</i> , 2010, 25, 581-585.	1.3	24
80	Problems after discharge and understanding of communication with their primary care physicians among hospitalized seniors: A mixed methods study. <i>Journal of Hospital Medicine</i> , 2010, 5, 385-391.	0.7	109
81	Strategies for Effective On-Call Supervision for Internal Medicine Residents: The Superb/Safety Model. <i>Journal of Graduate Medical Education</i> , 2010, 2, 46-52.	0.6	34
82	The state of science surrounding the clinical microsystem: a hedgehog or a fox?. <i>BMJ Quality and Safety</i> , 2010, 19, 473-474.	1.8	0
83	Effect of a quality improvement curriculum on resident knowledge and skills in improvement. <i>Quality and Safety in Health Care</i> , 2010, 19, 351-354.	2.5	56
84	Patient care handovers: what will it take to ensure quality and safety during times of transition?. <i>Medical Journal of Australia</i> , 2009, 190, S110-2.	0.8	16
85	Improving clinical handovers: creating local solutions for a global problem. <i>Quality and Safety in Health Care</i> , 2009, 18, 244-245.	2.5	38
86	Reducing variation in adverse events during the academic year. <i>BMJ: British Medical Journal</i> , 2009, 339, b3949-b3949.	2.4	5
87	On-Call Supervision and Resident Autonomy: From Micromanager to Absentee Attending. <i>American Journal of Medicine</i> , 2009, 122, 784-788.	0.6	62
88	Teaching Internal Medicine Residents Quality Improvement Techniques using the ABIM's Practice Improvement Modules. <i>Journal of General Internal Medicine</i> , 2008, 23, 927-930.	1.3	94
89	A prospective observational study of human factors, adverse events, and patient outcomes in surgery for pediatric cardiac disease. <i>Journal of Thoracic and Cardiovascular Surgery</i> , 2008, 136, 1422-1428.	0.4	133
90	Errors and the Burden of Errors: Attitudes, Perceptions, and the Culture of Safety in Pediatric Cardiac Surgical Teams. <i>Annals of Thoracic Surgery</i> , 2008, 85, 1374-1381.	0.7	139

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91	The Role of Qualitative Methods in Designing Health Care Organizations. <i>Environment and Behavior</i> , 2008, 40, 191-204.	2.1	12
92	Using a Malcolm Baldrige framework to understand high-performing clinical microsystems. <i>Quality and Safety in Health Care</i> , 2007, 16, 334-341.	2.5	32
93	Effectiveness of a Practice-Based, Multimodal Quality Improvement Intervention for Gastroenteritis Within a Medicaid Managed Care Network. <i>Pediatrics</i> , 2007, 120, e644-e650.	1.0	24
94	What Do Pediatric Primary Care Providers Think Are Important Research Questions? A Perspective From PROS Providers. <i>Academic Pediatrics</i> , 2006, 6, 352-355.	1.7	42
95	The Incorporation of Patient Safety into Board Certification Examinations. <i>Academic Medicine</i> , 2006, 81, 317-325.	0.8	21
96	Improving Midwifery Practice: The American College of Nurse-Midwives' Benchmarking Project. <i>Journal of Midwifery and Women's Health</i> , 2005, 50, 461-471.	0.7	15
97	A human factors approach to understanding patient safety during pediatric cardiac surgery. <i>Progress in Pediatric Cardiology</i> , 2005, 20, 13-20.	0.2	47
98	Assessing health needs of children with intellectual disabilities: a formative evaluation of a pilot service. <i>Research and Practice in Intellectual and Developmental Disabilities</i> , 0, , 1-11.	0.5	3