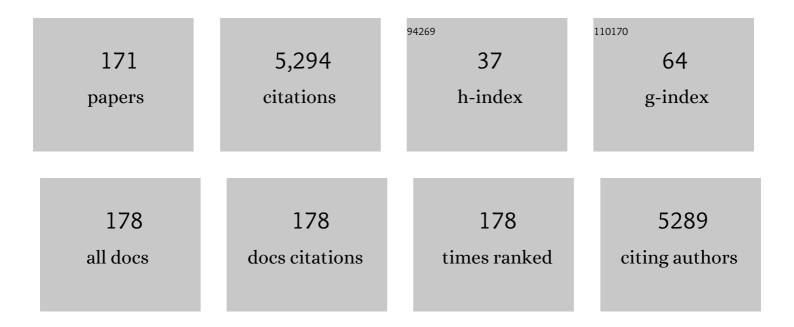
## Manish N Shah

List of Publications by Year in descending order

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ΜλΝΙςΗ Ν SΗΛΗ

#	Article	lF	CITATIONS
1	Mild traumatic brain injury in the United States, 1998–2000. Brain Injury, 2005, 19, 85-91.	0.6	410
2	Effects of Physician Experience on Costs and Outcomes on an Academic General Medicine Service: Results of a Trial of Hospitalists. Annals of Internal Medicine, 2002, 137, 866.	2.0	297
3	Association Between Stroke Center Hospitalization for Acute Ischemic Stroke and Mortality. JAMA - Journal of the American Medical Association, 2011, 305, 373.	3.8	280
4	The Epidemiology of Emergency Medical Services Use by Children: An Analysis of the National Hospital Ambulatory Medical Care Survey. Prehospital Emergency Care, 2008, 12, 269-276.	1.0	168
5	Recruitment and retention of underrepresented populations in Alzheimer's disease research: A systematic review. Alzheimer's and Dementia: Translational Research and Clinical Interventions, 2019, 5, 751-770.	1.8	161
6	Transforming Emergency Care For Older Adults. Health Affairs, 2013, 32, 2116-2121.	2.5	126
7	Emergency Department Visits by Nursing Home Residents in the <scp>U</scp> nited <scp>S</scp> tates. Journal of the American Geriatrics Society, 2011, 59, 1864-1872.	1.3	122
8	The Formation of the Emergency Medical Services System. American Journal of Public Health, 2006, 96, 414-423.	1.5	116
9	Geriatric Emergency Medicine and the 2006 Institute of Medicine Reports from the Committee on the Future of Emergency Care in the U.S. Health System. Academic Emergency Medicine, 2006, 13, 1345-1351.	0.8	98
10	Geriatric-Specific Triage Criteria Are More Sensitive Than Standard Adult Criteria in Identifying Need for Trauma Center Care in Injured Older Adults. Annals of Emergency Medicine, 2015, 65, 92-100.e3.	0.3	94
11	The Epidemiology of Emergency Medical Services Use by Older Adults: An Analysis of the National Hospital Ambulatory Medical Care Survey. Academic Emergency Medicine, 2007, 14, 441-447.	0.8	93
12	Our current approach to root cause analysis: is it contributing to our failure to improve patient safety?. BMJ Quality and Safety, 2017, 26, bmjqs-2016-005991.	1.8	90
13	High Yield Research Opportunities in Geriatric Emergency Medicine: Prehospital Care, Delirium, Adverse Drug Events, and Falls. Journals of Gerontology - Series A Biological Sciences and Medical Sciences, 2011, 66A, 775-783.	1.7	84
14	Epidemiology and outcomes of out-of-hospital cardiac arrest in Rochester, New York. Resuscitation, 2007, 72, 415-424.	1.3	82
15	The Epidemiology of Emergency Medical Services Use by Older Adults: An Analysis of the National Hospital Ambulatory Medical Care Survey. Academic Emergency Medicine, 2007, 14, 441-447.	0.8	77
16	Medical and nursing staff highly value clinical pharmacists in the emergency department. Emergency Medicine Journal, 2007, 24, 716-718.	0.4	75
17	Ambulance Personnel Perceptions of Near Misses and Adverse Events in Pediatric Patients. Prehospital Emergency Care, 2010, 14, 477-484.	1.0	73
18	Emergency Medical Services Provider Perceptions of the Nature of Adverse Events and Nearâ€misses in Outâ€ofâ€hospital Care: An Ethnographic View. Academic Emergency Medicine, 2008, 15, 633-640.	0.8	60

#	Article	IF	CITATIONS
19	Emergency Department Utilization by Noninstitutionalized Elders. Academic Emergency Medicine, 2001, 8, 267-273.	0.8	56
20	Prehospital Trauma Triage Decision-making: A Model of What Happens between the 9-1-1 Call and the Hospital. Prehospital Emergency Care, 2016, 20, 6-14.	1.0	56
21	Delirium Prevention, Detection, and Treatment in Emergency Medicine Settings: A Geriatric Emergency Care Applied Research (GEAR) Network Scoping Review and Consensus Statement. Academic Emergency Medicine, 2021, 28, 19-35.	0.8	56
22	Racial Differences in Mortality Among Patients With Acute Ischemic Stroke. Annals of Internal Medicine, 2011, 154, 152.	2.0	53
23	Factors Associated With Emergency Department Use Among the Rural Elderly. Journal of Rural Health, 2011, 27, 39-49.	1.6	48
24	Barriers to and Enablers for Prehospital Analgesia for Pediatric Patients. Prehospital Emergency Care, 2012, 16, 519-526.	1.0	48
25	VALIDATION OF USING EMS DISPATCH CODES TO IDENTIFY LOW-ACUITY PATIENTS. Prehospital Emergency Care, 2005, 9, 24-31.	1.0	47
26	A Novel Emergency Medical Services–Based Program to Identify and Assist Older Adults in a Rural Community. Journal of the American Geriatrics Society, 2010, 58, 2205-2211.	1.3	47
27	Health Care Providers' Opinions onÂCommunication Between Nursing Homes and Emergency Departments. Journal of the American Medical Directors Association, 2010, 11, 204-210.	1.2	45
28	Risk Stratification of Older Adults Who Present to the Emergency Department With Syncope: The FAINT Score. Annals of Emergency Medicine, 2020, 75, 147-158.	0.3	45
29	Does Mechanism of Injury Predict Trauma Center Need?. Prehospital Emergency Care, 2011, 15, 518-525.	1.0	44
30	A consensus-based criterion standard for trauma center need. Journal of Trauma and Acute Care Surgery, 2014, 76, 1157-1163.	1.1	44
31	D ERIVATION OF E MERGENCY M EDICAL S ERVICES D ISPATCH C ODES A SSOCIATED WITH L OW - ACUITY P ATIENTS. Prehospital Emergency Care, 2003, 7, 434-439.	1.0	43
32	Highâ€Intensity Telemedicineâ€Enhanced Acute Care for Older Adults: An Innovative Healthcare Delivery Model. Journal of the American Geriatrics Society, 2013, 61, 2000-2007.	1.3	43
33	Usability Study of Two Common Defibrillators Reveals Hazards. Annals of Emergency Medicine, 2007, 50, 424-432.	0.3	42
34	A Qualitative Evaluation of a Telemedicineâ€Enhanced Emergency Care Program for Older Adults. Journal of the American Geriatrics Society, 2013, 61, 571-576.	1.3	42
35	Effect of Geriatricâ€Specific Trauma Triage Criteria on Outcomes in Injured Older Adults: A Statewide Retrospective Cohort Study. Journal of the American Geriatrics Society, 2016, 64, 1944-1951.	1.3	41
36	Predictors of Emergency Medical Services Utilization by Elders. Academic Emergency Medicine, 2003, 10, 52-58.	0.8	41

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37	Identification of Out-of-hospital Cardiac Arrest Clusters Using a Geographic Information System. Academic Emergency Medicine, 2005, 12, 81-84.	0.8	40
38	A Consensus-Driven Agenda for Emergency Medicine Firearm Injury Prevention Research. Annals of Emergency Medicine, 2017, 69, 227-240.	0.3	40
39	Concussions Are Associated With Decreased Batting Performance Among Major League Baseball Players. American Journal of Sports Medicine, 2015, 43, 1127-1133.	1.9	39
40	Summary of NIH Medical-Surgical Emergency Research Roundtable Held on April 30 to May 1, 2009. Annals of Emergency Medicine, 2010, 56, 522-537.	0.3	36
41	A consensus-based criterion standard definition for pediatric patients who needed the highest-level trauma team activation. Journal of Trauma and Acute Care Surgery, 2015, 78, 634-638.	1.1	36
42	High-Intensity Telemedicine Decreases Emergency Department Use for Ambulatory Care Sensitive Conditions by Older Adult Senior Living Community Residents. Journal of the American Medical Directors Association, 2015, 16, 1077-1081.	1.2	36
43	Comparison of the 1999 and 2006 Trauma Triage Guidelines: Where Do Patients Go??. Prehospital Emergency Care, 2011, 15, 12-17.	1.0	34
44	Identification of Out-of-hospital Cardiac Arrest Clusters Using a Geographic Information System. Academic Emergency Medicine, 2005, 12, 81-84.	0.8	34
45	Personality Traits Predict Emergency Department Utilization Over 3 Years in Older Patients. American Journal of Geriatric Psychiatry, 2009, 17, 526-535.	0.6	33
46	Psychiatric Emergency Services for the U.S. Elderly: 2008 and Beyond. American Journal of Geriatric Psychiatry, 2008, 16, 706-717.	0.6	32
47	The Outcomes of Emergency Pharmacist Participation during Acute Myocardial Infarction. Journal of Emergency Medicine, 2012, 42, 371-378.	0.3	32
48	Identification of a Neurologic Scale That Optimizes EMS Detection of Older Adult Traumatic Brain Injury Patients Who Require Transport to a Trauma Center. Prehospital Emergency Care, 2015, 19, 202-212.	1.0	32
49	Comparing appropriateness of antibiotics for nursing home residents by setting of prescription initiation: a cross-sectional analysis. Antimicrobial Resistance and Infection Control, 2018, 7, 74.	1.5	32
50	An Emergency Medical Services Program to Promote the Health of Older Adults. Journal of the American Geriatrics Society, 2006, 54, 956-962.	1.3	31
51	The Impact of Emergency Department Census on the Decision to Admit. Academic Emergency Medicine, 2017, 24, 13-21.	0.8	31
52	Improving the EDâ€ŧoâ€Home Transition: The Community Paramedic–Delivered Care Transitions Intervention—Preliminary Findings. Journal of the American Geriatrics Society, 2018, 66, 2213-2220.	1.3	31
53	Tort Claims and Adverse Events in Emergency Medical Services. Annals of Emergency Medicine, 2008, 52, 256-262.	0.3	30
54	Emergency Medical Dispatch Codes Association with Emergency Department Outcomes. Prehospital Emergency Care, 2013, 17, 29-37.	1.0	30

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55	Training and Interpreting Machine Learning Algorithms to Evaluate Fall Risk After Emergency Department Visits. Medical Care, 2019, 57, 560-566.	1.1	30
56	Predictors of Emergency Medical Services Utilization by Elders. Academic Emergency Medicine, 2003, 10, 52-58.	0.8	29
57	Prevalence of Depression and Cognitive Impairment in Older Adult Emergency Medical Services Patients. Prehospital Emergency Care, 2011, 15, 4-11.	1.0	27
58	A randomized controlled trial testing the effectiveness of a paramedic-delivered care transitions intervention to reduce emergency department revisits. BMC Geriatrics, 2018, 18, 104.	1.1	27
59	Introduction: Special Content Focus: Geriatric Emergency Medicine. Academic Emergency Medicine, 2010, 17, 231-231.	0.8	26
60	Association of Pain Score Documentation and Analgesic Use in a Pediatric Emergency Department. Pediatric Emergency Care, 2012, 28, 1287-1292.	0.5	26
61	Patient Perspectives on EMS Alternate Destination Models. Prehospital Emergency Care, 2016, 20, 705-711.	1.0	26
62	Reducing Emergency Department Utilization Through Engagement in Telemedicine by Senior Living Communities. Telemedicine Journal and E-Health, 2016, 22, 489-496.	1.6	26
63	High-Intensity Telemedicine Reduces Emergency Department Use by Older Adults With Dementia in Senior Living Communities. Journal of the American Medical Directors Association, 2019, 20, 942-946.	1.2	25
64	Effect of the 2011 Revisions to the Field Triage Guidelines on Under- and Over-Triage Rates for Pediatric Trauma Patients. Prehospital Emergency Care, 2017, 21, 456-460.	1.0	24
65	Factors Influencing Emergency Care by Persons With Dementia: Stakeholder Perceptions and Unmet Needs. Journal of the American Geriatrics Society, 2019, 67, 711-718.	1.3	24
66	The Effect of the Geriatrics Education for Emergency Medical Services Training Program in a Rural Community. Journal of the American Geriatrics Society, 2008, 56, 1134-1139.	1.3	23
67	Effect of Intensive Physician Oversight on A Prehospital Rapid-Sequence Intubation Program. Prehospital Emergency Care, 2010, 14, 310-316.	1.0	23
68	Acceptability of Alternatives to Traditional Emergency Care: Patient Characteristics, Alternate Transport Modes, and Alternate Destinations. Prehospital Emergency Care, 2015, 19, 516-523.	1.0	23
69	Description and Evaluation of a Pilot Physician-directed Emergency Medical Services Diversion Control Program. Academic Emergency Medicine, 2006, 13, 54-60.	0.8	22
70	Survey of physicians regarding clinical pharmacy services in academic emergency departments. American Journal of Health-System Pharmacy, 2009, 66, 576-579.	0.5	22
71	Emergency Medical Service Attitudes Toward Geriatric Prehospital Care and Continuing Medical Education in Geriatrics. Journal of the American Geriatrics Society, 2009, 57, 530-535.	1.3	22
72	Evaluation of a Consensus-Based Criterion Standard Definition of Trauma Center Need for Use in Field Triage Research. Prehospital Emergency Care, 2016, 20, 1-5.	1.0	22

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73	Ability of the Physiologic Criteria of the Field Triage Guidelines to Identify Children Who Need the Resources of a Trauma Center. Prehospital Emergency Care, 2017, 21, 180-184.	1.0	22
74	Preferences for EMS Transport andPediatric Emergency Department Care. Prehospital Emergency Care, 2008, 12, 169-175.	1.0	21
75	High-Intensity Telemedicine Decreases Emergency Department Use by Senior Living Community Residents. Telemedicine Journal and E-Health, 2016, 22, 251-258.	1.6	21
76	ECG Predictors of Cardiac Arrhythmias in Older Adults With Syncope. Annals of Emergency Medicine, 2018, 71, 452-461.e3.	0.3	21
77	Exploring SEIPS 2.0 as a model for analyzing care transitions across work systems. Applied Ergonomics, 2020, 88, 103141.	1.7	21
78	Shared Decision Making to Improve the Emergency Care of Older Adults: A Research Agenda. Academic Emergency Medicine, 2016, 23, 1386-1393.	0.8	20
79	Cherry Picking Patients: Examining the Interval Between Patient Rooming and Resident Self-assignment. Academic Emergency Medicine, 2016, 23, 679-684.	0.8	20
80	The Effect of Older Age on EMS Use for Transportation to an Emergency Department. Prehospital and Disaster Medicine, 2017, 32, 261-268.	0.7	19
81	Emergency Department Care Transitions for Patients With Cognitive Impairment: A Scoping Review. Journal of the American Medical Directors Association, 2022, 23, 1313.e1-1313.e13.	1.2	19
82	Using Chief Complaint in Addition to Diagnosis Codes to Identify Falls in the Emergency Department. Journal of the American Geriatrics Society, 2017, 65, E135-E140.	1.3	18
83	Clinical Benefit of Hospitalization for Older Adults With Unexplained Syncope: A Propensity-Matched Analysis. Annals of Emergency Medicine, 2019, 74, 260-269.	0.3	18
84	Prehospital time intervals and management of ischemic stroke patients. American Journal of Emergency Medicine, 2021, 42, 127-131.	0.7	18
85	Influenza Vaccination among Emergency Medical Services and Emergency Department Personnel. Prehospital Emergency Care, 2009, 13, 1-5.	1.0	17
86	Potential of Telemedicine to Provide Acute Medical Care for Adults in Senior Living Communities. Academic Emergency Medicine, 2013, 20, 162-168.	0.8	17
87	Estimating the Cost of Care for Emergency Department Syncope Patients: Comparison of Three Models. Western Journal of Emergency Medicine, 2017, 18, 253-257.	0.6	17
88	Collaborative design and implementation of a clinical decision support system for automated fall-risk identification and referrals in emergency departments. Healthcare, 2022, 10, 100598.	0.6	17
89	Enhancing reproducibility using interprofessional team best practices. Journal of Clinical and Translational Science, 2021, 5, e20.	0.3	16
90	Continuity of antibiotic therapy in patients admitted from the emergency department. Annals of Emergency Medicine, 2003, 42, 117-123.	0.3	15

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91	Cardiac Arrests in Skilled Nursing Facilities: Continuing Room for Improvement?. Journal of the American Medical Directors Association, 2006, 7, 350-354.	1.2	15
92	Cardiac Arrests in Skilled Nursing Facilities: Continuing Room for Improvement?. Journal of the American Medical Directors Association, 2007, 8, e27-e31.	1.2	15
93	Does EMS Perceived Anatomic Injury Predict Trauma Center Need?. Prehospital Emergency Care, 2013, 17, 312-316.	1.0	15
94	Do Highâ€sensitivity Troponin and Natriuretic Peptide Predict Death or Serious Cardiac Outcomes After Syncope?. Academic Emergency Medicine, 2019, 26, 528-538.	0.8	15
95	Major depression and emergency medical services utilization in communityâ€dwelling elderly persons with disabilities. International Journal of Geriatric Psychiatry, 2008, 23, 1276-1282.	1.3	14
96	Reliability and Validity of Prehospital Case Finding for Depression and Cognitive Impairment. Journal of the American Geriatrics Society, 2009, 57, 697-702.	1.3	14
97	Do Emergency Medical Services Professionals Think They Should Participate in Disease Prevention?. Prehospital Emergency Care, 2009, 13, 64-70.	1.0	13
98	Minimizing Attrition for Multisite Emergency Care Research. Academic Emergency Medicine, 2017, 24, 458-466.	0.8	13
99	Variation in diagnostic testing for older patients with syncope in the emergency department. American Journal of Emergency Medicine, 2019, 37, 810-816.	0.7	13
100	Using the Hendrich II Inpatient Fall Risk Screen to Predict Outpatient Falls After Emergency Department Visits. Journal of the American Geriatrics Society, 2018, 66, 760-765.	1.3	12
101	Qualitative Evaluation of the Coach Training within a Community Paramedicine Care Transitions Intervention. Prehospital Emergency Care, 2018, 22, 527-534.	1.0	12
102	Behavioral Health Needs of Older Adults in the Emergency Department. Clinics in Geriatric Medicine, 2018, 34, 469-489.	1.0	12
103	Reaction time and cognitive-linguistic performance in adults with mild traumatic brain injury. Brain Injury, 2019, 33, 1173-1183.	0.6	12
104	Effectiveness of a care transitions intervention for older adults discharged home from the emergency department: A randomized controlled trial. Academic Emergency Medicine, 2022, 29, 51-63.	0.8	12
105	Efficient Communication: Assessment-oriented Oral Case Presentation. Academic Emergency Medicine, 2003, 10, 842-847.	0.8	11
106	Emergency Medicine Management of the Geriatric Patient: An Educational Program for Medical Students. Journal of the American Geriatrics Society, 2005, 53, 141-145.	1.3	11
107	An Assessment of Newly Identified Barriers to and Enablers for Prehospital Pediatric Pain Management. Pediatric Emergency Care, 2017, 33, 381-387.	0.5	11
108	Impact of Jahnigen/ <scp>GEMSSTAR</scp> Scholarships on Careers of Recipients in Emergency Medicine and on Development of Geriatric Emergency Medicine. Academic Emergency Medicine, 2018, 25, 911-920.	0.8	11

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109	Barriers to Providing Prehospital Care to Ischemic Stroke Patients: Predictors and Impact on Care. Prehospital and Disaster Medicine, 2018, 33, 501-507.	0.7	11
110	Development and validation of a pragmatic natural language processing approach to identifying falls in older adults in the emergency department. BMC Medical Informatics and Decision Making, 2019, 19, 138.	1.5	11
111	Predictors of Older Adult Adherence With Emergency Department Discharge Instructions. Academic Emergency Medicine, 2021, 28, 215-225.	0.8	11
112	Consensusâ€based Criterion Standard for the Identification of Pediatric Patients Who Need Emergency Medical Services Transport to a Hospital with Higherâ€level Pediatric Resources. Academic Emergency Medicine, 2018, 25, 1409-1414.	0.8	10
113	Unstructured clinical documentation reflecting cognitive and behavioral dysfunction: toward an EHR-based phenotype for cognitive impairment. Journal of the American Medical Informatics Association: JAMIA, 2018, 25, 1206-1212.	2.2	10
114	Prevalence of Pulmonary Embolism Among Emergency Department Patients With Syncope: AÂMulticenter Prospective Cohort Study. Annals of Emergency Medicine, 2019, 73, 500-510.	0.3	10
115	A <scp>N</scp> E <scp>VALUATION OF</scp> P <scp>ARAMEDICS</scp> ' A <scp>BILITY TO</scp> S <scp>CREEN</scp> O <scp>LDER</scp> A <scp>DULTS</scp> D <scp>URING</scp> E <scp>MERGENCY Prehospital Emergency Care, 2004, 8, 298-303.</scp>	<td>cp ÆSPONSE</td>	cp ÆSPONSE
116	Depression and Cognitive Impairment in Older Adult Emergency Department Patients: Changes over 2 Weeks. Journal of the American Geriatrics Society, 2011, 59, 321-326.	1.3	9
117	Social Disconnection Among Older Adults Receiving Care in the Emergency Department. Western Journal of Emergency Medicine, 2018, 19, 919-925.	0.6	9
118	Implementation of an Emergency Medicine Research Associates Program: Sharing 20 Years of Experience. Western Journal of Emergency Medicine, 2018, 19, 600-612.	0.6	9
119	Association between social isolation and outpatient follow-up in older adults following emergency department discharge. Archives of Gerontology and Geriatrics, 2021, 93, 104298.	1.4	9
120	Inclusion of older adults in emergency department clinical research: Strategies to achieve a critical goal. Academic Emergency Medicine, 2022, 29, 376-383.	0.8	9
121	How Do Residents Learn? The Development of Practice Styles in a Residency Program. Academic Pediatrics, 2003, 3, 166-172.	1.7	8
122	An evaluation of paramedics' ability to screen older adults during emergency responses*1. Prehospital Emergency Care, 2004, 8, 298-303.	1.0	8
123	Machine learningâ€assisted screening for cognitive impairment in the emergency department. Journal of the American Geriatrics Society, 2022, 70, 831-837.	1.3	8
124	Language Comprehension After Mild Traumatic Brain Injury: The Role of Speed. American Journal of Speech-Language Pathology, 2019, 28, 1479-1490.	0.9	8
125	A C OMPARISON OF F IRST - RESPONDER A UTOMATED E XTERNAL D EFIBRILLATOR (AED) A PPLICATION R ATES AND C HARACTERISTICS OF AED T RAINING. Prehospital Emergency Care, 2003, 7, 453-457.	1.0	7
126	Patients with head injuries refusing emergency medical services transport. Brain Injury, 2004, 18, 765-773.	0.6	7

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127	Reliability of Clinical Assessments in Older Adults With Syncope or Near Syncope. Academic Emergency Medicine, 2016, 23, 1014-1021.	0.8	7
128	Priorities to Overcome Barriers Impacting Data Science Application in Emergency Care Research. Academic Emergency Medicine, 2019, 26, 97-105.	0.8	7
129	Comparison of 30-Day Serious Adverse Clinical Events for Elderly Patients Presenting to the Emergency Department With Near-Syncope Versus Syncope. Annals of Emergency Medicine, 2019, 73, 274-280.	0.3	7
130	Care transitions intervention reduces ED revisits in cognitively impaired patients. Alzheimer's and Dementia: Translational Research and Clinical Interventions, 2022, 8, e12261.	1.8	7
131	A Novel Internetâ€Based Geriatric Education Program for Emergency Medical Services Providers. Journal of the American Geriatrics Society, 2012, 60, 1749-1754.	1.3	6
132	Older Adults with Mental Disorders: What Factors Distinguish Those Who Present to Emergency Departments for Mental Health Reasons from Those Who Do Not?. American Journal of Geriatric Psychiatry, 2015, 23, 1162-1171.	0.6	6
133	Recurrent syncope is not an independent risk predictor for future syncopal events or adverse outcomes. American Journal of Emergency Medicine, 2019, 37, 869-872.	0.7	6
134	Defibrillator Usability Study Among Paramedics. Proceedings of the Human Factors and Ergonomics Society, 2004, 48, 1768-1772.	0.2	5
135	Interface Design Characteristics of a Popular Emergency Department Information System. Proceedings of the Human Factors and Ergonomics Society, 2008, 52, 778-782.	0.2	5
136	Repeat Emergency Medical Services Use by Older Adults in a Rural Community: Impact on Research Methods andStudy Length. Prehospital Emergency Care, 2009, 13, 173-178.	1.0	5
137	EMS Provider Assessment of Vehicle Damage Compared with Assessment by a Professional Crash Reconstructionist. Prehospital Emergency Care, 2011, 15, 483-489.	1.0	5
138	Characteristics and Acute Care Use Patterns of Patients in a Senior Living Community Medical Practice. Journal of the American Medical Directors Association, 2012, 13, 260-263.	1.2	5
139	Survey of Emergency Medicine Pharmacy Education Opportunities for Students and Residents. Hospital Pharmacy, 2015, 50, 690-699.	0.4	5
140	Creating ED point-of-care testing protocols: an expert panel and Delphi process. American Journal of Emergency Medicine, 2015, 33, 463-465.	0.7	5
141	What We Talk About When We Talk About <scp>SDM</scp> . Academic Emergency Medicine, 2016, 23, 493-494.	0.8	5
142	Methodological Challenges in Studies Comparing Prehospital Advanced Life Support with Basic Life Support. Prehospital and Disaster Medicine, 2017, 32, 444-450.	0.7	5
143	QTc prolongation as a marker of 30-day serious outcomes in older patients with syncope presenting to the Emergency Department. American Journal of Emergency Medicine, 2019, 37, 685-689.	0.7	5
144	Orthostatic vital signs do not predict 30†day serious outcomes in older emergency department patients with syncope: A multicenter observational study. American Journal of Emergency Medicine, 2019, 37, 2215-2223.	0.7	5

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145	RESEARCHComparing Strategies for Identifying Falls in Older Adult Emergency Department Visits Using <scp>EHR</scp> Data. Journal of the American Geriatrics Society, 2020, 68, 2965-2967.	1.3	5
146	Does Mechanism of Injury Predict Trauma Center Need for Children?. Prehospital Emergency Care, 2021, 25, 95-102.	1.0	5
147	Predictors of Clinically Significant Echocardiography Findings in Older Adults with Syncope: A Secondary Analysis. Journal of Hospital Medicine, 2018, 13, E1-E7.	0.7	5
148	Discourse Performance in Adults With Mild Traumatic Brain Injury, Orthopedic Injuries, and Moderate to Severe Traumatic Brain Injury, and Healthy Controls. American Journal of Speech-Language Pathology, 2022, 31, 67-83.	0.9	5
149	Frequency of Abnormal and Critical Laboratory Results in Older Patients Presenting to the Emergency Department With Syncope. Academic Emergency Medicine, 2020, 27, 161-164.	0.8	4
150	Features of primary care practice influence emergency care-seeking behaviors by caregivers of persons with dementia: A multiple-perspective qualitative study. Dementia, 2021, 20, 613-632.	1.0	4
151	Disparate perspectives: Exploring healthcare professionals' misaligned mental models of older adults' transitions of care between the emergency department and skilled nursing facility. Applied Ergonomics, 2021, 96, 103509.	1.7	4
152	Outcomes of Patients With Syncope and Suspected Dementia. Academic Emergency Medicine, 2018, 25, 880-890.	0.8	3
153	Effectiveness of Outpatient Antibiotics After Surgical Drainage of Abscesses in Reducing Treatment Failure. Journal of Emergency Medicine, 2018, 55, 512-521.	0.3	3
154	Performance of the American Heart Association/American College of Cardiology/Heart Rhythm Society versus European Society of Cardiology Guideline Criteria for Hospital Admission of Patients with Syncope. Heart Rhythm, 2022, , .	0.3	3
155	The Utility of Point-of-Care Testing at Emergency Department Triage by Nurses in Simulated Scenarios. Advanced Emergency Nursing Journal, 2017, 39, 152-158.	0.2	2
156	Patient Perspectives on Accessing Acute Illness Care. Western Journal of Emergency Medicine, 2017, 18, 569-576.	0.6	2
157	The Accuracy of Interqual Criteria in Determining the Observation versus Inpatient Status in Older Adults with Syncope. Journal of Emergency Medicine, 2020, 59, 193-200.	0.3	2
158	Physician Perceptions of Disposition Decision-making for Older Adults in the Emergency Department: A Preliminary Analysis. Proceedings of the Human Factors and Ergonomics Society, 2020, 64, 648-652.	0.2	2
159	Community Paramedicine. , 2017, , 186-194.		1
160	Process Variances in Older Adults' Care Transitions from Emergency Department to Home: Process Breakdown Versus Process Resiliency. Proceedings of the Human Factors and Ergonomics Society, 2017, 61, 565-566.	0.2	1
161	Downstream Imaging Utilization After MR Angiography Versus CT Angiography for the InitialÂEvaluation of Pulmonary Embolism. Journal of the American College of Radiology, 2018, 15, 1692-1697.	0.9	1
162	Community paramedicâ€delivered care transitions intervention reduces emergency department revisits among cognitively impaired patients. Alzheimer's and Dementia, 2021, 17, .	0.4	1

#	Article	IF	CITATIONS
163	Multimethod Process Evaluation of a Community Paramedic Delivered Care Transitions Intervention for Older ED Patients. Prehospital Emergency Care, 0, , 1-19.	1.0	1
164	Research andQuality Improvement: Drawing Lines in the Grey Zone. Prehospital Emergency Care, 2007, 11, 350-351.	1.0	0
165	Inappropriate prescribing in elderly ED patients. American Journal of Emergency Medicine, 2008, 26, 372-373.	0.7	0
166	All <scp>HANDDS</scp> on Deck to Translate Research Findings Into Improved Outcomes. Academic Emergency Medicine, 2014, 21, 1039-1041.	0.8	0
167	<scp>SAEM</scp> Training Grants: Hoping Prior Performance Indicates Future Results. Academic Emergency Medicine, 2015, 22, 219-220.	0.8	0
168	Dementia Diagnosis Documentation in Patients Presenting to the Emergency Department with Chest Pain. Journal of the American Geriatrics Society, 2020, 68, 2409-2411.	1.3	0
169	Identifying roles in older adults' emergency department transitions. Proceedings of the Human Factors and Ergonomics Society, 2020, 64, 685-689.	0.2	0
170	Patient Preferences for Diagnostic Imaging: CTA vs MRA When Diagnosing Pulmonary Embolism Wisconsin Medical Journal, 2021, 120, 286-292.	0.3	0
171	Comparing emergency department use among individuals with varying levels of cognitive impairment. BMC Geriatrics, 2022, 22, 382.	1.1	0