Jin Ho Han

List of Publications by Year in descending order

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ΙΝ ΗΟ ΗΛΝ

#	Article	IF	CITATIONS
1	Delirium in Older Emergency Department Patients: Recognition, Risk Factors, and Psychomotor Subtypes. Academic Emergency Medicine, 2009, 16, 193-200.	0.8	363
2	Diagnosing Delirium in Older Emergency Department Patients: Validity and Reliability of the Delirium Triage Screen and the Brief Confusion Assessment Method. Annals of Emergency Medicine, 2013, 62, 457-465.	0.3	247
3	Delirium in the Emergency Department: An Independent Predictor of Death Within 6 Months. Annals of Emergency Medicine, 2010, 56, 244-252.e1.	0.3	199
4	The Burden of Acute Heart Failure on U.S. Emergency Departments. JACC: Heart Failure, 2014, 2, 269-277.	1.9	176
5	The intensive care delirium research agenda: a multinational, interprofessional perspective. Intensive Care Medicine, 2017, 43, 1329-1339.	3.9	148
6	Transforming Emergency Care For Older Adults. Health Affairs, 2013, 32, 2116-2121.	2.5	126
7	Altered Mental Status in Older Patients in the Emergency Department. Clinics in Geriatric Medicine, 2013, 29, 101-136.	1.0	120
8	Delirium in Older Emergency Department Patients Is an Independent Predictor of Hospital Length of Stay. Academic Emergency Medicine, 2011, 18, 451-457.	0.8	103
9	The Role of Cardiac Risk Factor Burden in Diagnosing Acute Coronary Syndromes in the Emergency Department Setting. Annals of Emergency Medicine, 2007, 49, 145-152.e1.	0.3	99
10	Delirium in the Older Emergency Department Patient: A Quiet Epidemic. Emergency Medicine Clinics of North America, 2010, 28, 611-631.	0.5	96
11	The Effect of Physician Triage on Emergency Department Length of Stay. Journal of Emergency Medicine, 2010, 39, 227-233.	0.3	95
12	The Effect of Emergency Department Expansion on Emergency Department Overcrowding. Academic Emergency Medicine, 2007, 14, 338-343.	0.8	87
13	Validation of the Confusion Assessment Method for the Intensive Care Unit in Older Emergency Department Patients. Academic Emergency Medicine, 2014, 21, 180-187.	0.8	82
14	The Effect of Cognitive Impairment on the Accuracy of the Presenting Complaint and Discharge Instruction Comprehension in Older Emergency Department Patients. Annals of Emergency Medicine, 2011, 57, 662-671.e2.	0.3	81
15	The Diagnostic Performance of the Richmond Agitation Sedation Scale for Detecting Delirium in Older Emergency Department Patients. Academic Emergency Medicine, 2015, 22, 878-882.	0.8	81
16	Delirium in the Nursing Home Patients Seen in the Emergency Department. Journal of the American Geriatrics Society, 2009, 57, 889-894.	1.3	55
17	Delirium in the Emergency Department and Its Extension into Hospitalization (<scp>DELINEATE</scp>) Study: Effect on 6â€month Function and Cognition. Journal of the American Geriatrics Society, 2017, 65, 1333-1338.	1.3	52
18	Association of Hypoactive and Hyperactive Delirium With Cognitive Function After Critical Illness. Critical Care Medicine, 2020, 48, e480-e488.	0.4	47

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19	Plasma biomarkers of inflammation, coagulation, and brain injury as predictors of delirium duration in older hospitalized patients. PLoS ONE, 2019, 14, e0226412.	1.1	46
20	Delirium and Dementia. Clinics in Geriatric Medicine, 2018, 34, 327-354.	1.0	32
21	Risk Factors for Delirium in Older Adults in the Emergency Department: A Systematic Review and Meta-Analysis. Annals of Emergency Medicine, 2021, 78, 549-565.	0.3	32
22	Associations between persistent symptoms after mild COVIDâ€19 and longâ€ŧerm health status, quality of life, and psychological distress. Influenza and Other Respiratory Viruses, 2022, 16, 680-689.	1.5	30
23	A quick and easy delirium assessment for nonphysician research personnel. American Journal of Emergency Medicine, 2016, 34, 1031-1036.	0.7	28
24	Subsyndromal Delirium and Institutionalization Among Patients With Critical Illness. American Journal of Critical Care, 2017, 26, 447-455.	0.8	28
25	The Relationship Between a Chief Complaint of "Altered Mental Status―and Delirium in Older Emergency Department Patients. Academic Emergency Medicine, 2014, 21, 937-940.	0.8	27
26	Early urine electrolyte patterns in patients with acute heart failure. ESC Heart Failure, 2019, 6, 80-88.	1.4	27
27	Exploring Delirium's Heterogeneity: Association Between Arousal Subtypes at Initial Presentation and 6-Month Mortality in Older Emergency Department Patients. American Journal of Geriatric Psychiatry, 2017, 25, 233-242.	0.6	26
28	The Elder Patient with Suspected Acute Coronary Syndromes in the Emergency Department. Academic Emergency Medicine, 2007, 14, 732-739.	0.8	23
29	Impaired arousal at initial presentation predicts 6â€month mortality: An analysis of 1084 acutely ill older patients. Journal of Hospital Medicine, 2014, 9, 772-778.	0.7	23
30	Altered Mental Status in the Emergency Department. Seminars in Neurology, 2019, 39, 005-019.	0.5	21
31	Can we improve delirium prevention and treatment in the emergency department? A systematic review. Journal of the American Geriatrics Society, 2022, 70, 1838-1849.	1.3	19
32	Delirium in the Emergency Department: Moving From Toolâ€Based Research to Systemâ€Wide Change. Journal of the American Geriatrics Society, 2020, 68, 956-958.	1.3	18
33	Effect of a Self-care Intervention on 90-Day Outcomes in Patients With Acute Heart Failure Discharged From the Emergency Department. JAMA Cardiology, 2021, 6, 200.	3.0	18
34	Delirium etiology subtypes and their effect on six-month function and cognition in older emergency department patients. International Psychogeriatrics, 2019, 31, 267-276.	0.6	16
35	An evaluation of single question delirium screening tools in older emergency department patients. American Journal of Emergency Medicine, 2018, 36, 1249-1252.	0.7	13
36	Evaluation of emergency department derived delirium prediction models using a hospital-wide cohort. Journal of Psychosomatic Research, 2019, 127, 109850.	1.2	12

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37	Focusing on Inattention: The Diagnostic Accuracy of Brief Measures of Inattention for Detecting Delirium. Journal of Hospital Medicine, 2018, 13, 551-557.	0.7	12
38	Delirium's Arousal Subtypes and Their Relationship with 6-Month Functional Status and Cognition. Psychosomatics, 2019, 60, 27-36.	2.5	11
39	Factors Affecting Cardiac Catheterization Rates in Elders with Acute Coronary Syndromes. Academic Emergency Medicine, 2007, 14, 228-233.	0.8	10
40	Cricothyrotomy in Helicopter Emergency Medical Service Transport. Air Medical Journal, 2018, 37, 51-53.	0.3	9
41	Effect of Early High-Dose Vitamin D3 Repletion on Cognitive Outcomes in Critically Ill Adults. Chest, 2021, 160, 909-918.	0.4	8
42	Ultrabrief delirium assessments—are they ready for primetime?. Journal of Hospital Medicine, 2015, 10, 694-695.	0.7	5
43	Succinct Approach to Delirium in the Emergency Department. Current Emergency and Hospital Medicine Reports, 2021, 9, 11-18.	0.6	5
44	Improvement in Kansas City Cardiomyopathy Questionnaire Scores After a Self-Care Intervention in Patients With Acute Heart Failure Discharged From the Emergency Department. Circulation: Cardiovascular Quality and Outcomes, 2021, 14, e007956.	0.9	5
45	Feasibility of Videophone-Assisted Neuropsychological Testing For Intensive Care Unit Survivors. American Journal of Critical Care, 2020, 29, 398-402.	0.8	4
46	Vitamin D Deficiency and Long-Term Cognitive Impairment Among Older Adult Emergency Department Patients. Western Journal of Emergency Medicine, 2019, 20, 926-930.	0.6	3
47	932. Universal Hepatitis C Virus Screening in a Tennessee Tertiary Care Emergency Department. Open Forum Infectious Diseases, 2018, 5, S31-S32.	0.4	1
48	Supratherapeutic Psychotropic Drug Levels in the Emergency Department and Their Association with Delirium Duration: A Preliminary Study. Journal of the American Geriatrics Society, 2019, 67, 2387-2392.	1.3	1
49	Emergency Department Interventions and Their Effect on Delirium's Natural Course: The Folly May be in the Foley. Journal of Emergencies, Trauma and Shock, 2019, 12, 280-285.	0.3	1
50	DELIRIUM SEVERITY AND COGNITIVE OUTCOMES. Innovation in Aging, 2019, 3, S921-S921.	0.0	0