

Deborah B Diercks

List of Publications by Year in Descending Order

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Version: 2024-04-18

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The third column is the impact factor (IF) of the journal, and the fourth column is the number of citations of the article.

61
papers

1,821
citations

20
h-index

42
g-index

67
ext. papers

2,195
ext. citations

4.3
avg, IF

4.26
L-index

#	Paper	IF	Citations
61	ACR Appropriateness Criteria [®] Dyspnea-Suspected Cardiac Origin (Ischemia Already Excluded): 2021 Update.. <i>Journal of the American College of Radiology</i> , 2022 , 19, S37-S52	3.5	
60	Impact of High-sensitivity Troponin Testing on Operational Characteristics of an Urban Emergency Department. <i>Academic Emergency Medicine</i> , 2021 , 28, 114-116	3.4	5
59	Derivation With Internal Validation of a Multivariable Predictive Model to Predict COVID-19 Test Results in Emergency Department Patients. <i>Academic Emergency Medicine</i> , 2021 , 28, 206-214	3.4	12
58	Monotherapy Anticoagulation to Expedite Home Treatment of Patients Diagnosed With Venous Thromboembolism in the Emergency Department: A Pragmatic Effectiveness Trial. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2021 , 14, e007600	5.8	3
57	Guidelines for reasonable and appropriate care in the emergency department (GRACE): Recurrent, low-risk chest pain in the emergency department. <i>Academic Emergency Medicine</i> , 2021 , 28, 718-744	3.4	6
56	Improvement in Kansas City Cardiomyopathy Questionnaire Scores After a Self-Care Intervention in Patients With Acute Heart Failure Discharged From the Emergency Department. <i>Circulation: Cardiovascular Quality and Outcomes</i> , 2021 , 14, e007956	5.8	2
55	Improving emergency department documentation with noninterruptive clinical decision support: An open-label, randomized clinical efficacy trial. <i>Academic Emergency Medicine</i> , 2021 ,	3.4	0
54	Closing Gaps in Essential Chest Pain Care Through Accreditation. <i>Journal of the American College of Cardiology</i> , 2020 , 75, 2478-2482	15.1	6
53	Diagnostic Performance of a Rapid Point-of-care Test for SARS-CoV-2 in an Urban Emergency Department Setting. <i>Academic Emergency Medicine</i> , 2020 , 27, 764-766	3.4	5
52	Myocardial Infarction Can Be Safely Excluded by High-sensitivity Troponin I Testing 3 Hours After Emergency Department Presentation. <i>Academic Emergency Medicine</i> , 2020 , 27, 671-680	3.4	3
51	Association of a Novel Protocol for Rapid Exclusion of Myocardial Infarction With Resource Use in a US Safety Net Hospital. <i>JAMA Network Open</i> , 2020 , 3, e203359	10.4	4
50	Clinical risk assessment of biotin interference with a high-sensitivity cardiac troponin T assay. <i>Clinical Chemistry and Laboratory Medicine</i> , 2020 , 58, 1931-1940	5.9	7
49	The AURORA Study: a longitudinal, multimodal library of brain biology and function after traumatic stress exposure. <i>Molecular Psychiatry</i> , 2020 , 25, 283-296	15.1	38
48	Study protocol for a multicentre implementation trial of monotherapy anticoagulation to expedite home treatment of patients diagnosed with venous thromboembolism in the emergency department. <i>BMJ Open</i> , 2020 , 10, e038078	3	4
47	ACR Appropriateness Criteria [®] Major Blunt Trauma. <i>Journal of the American College of Radiology</i> , 2020 , 17, S160-S174	3.5	8
46	Biomarkers Enhance Discrimination and Prognosis of Type 2 Myocardial Infarction. <i>Circulation</i> , 2020 , 142, 1532-1544	16.7	14
45	Validation and implementation of the fifth-generation high sensitivity Troponin T (hs-TnT) assay at a large teaching county hospital. A laboratory-driven multi-speciality effort. <i>Clinica Chimica Acta</i> , 2019 , 495, 85-87	6.2	2

44	Copeptin to rule out myocardial infarction in Blacks versus Caucasians. <i>European Heart Journal: Acute Cardiovascular Care</i> , 2019 , 8, 395-403	4.3	3
43	Gender Bias in the Management of Patients Still Exists. <i>Academic Emergency Medicine</i> , 2018 , 25, 467-469	3.4	3
42	Effectiveness of a Decision Aid in Potentially Vulnerable Patients: A Secondary Analysis of the Chest Pain Choice Multicenter Randomized Trial. <i>Medical Decision Making</i> , 2018 , 38, 69-78	2.5	6
41	Evaluation of a Novel Rule-Out Myocardial Infarction Protocol Incorporating High-Sensitivity Troponin T in a US Hospital. <i>Circulation</i> , 2018 , 138, 2061-2063	16.7	21
40	Impact of a Shared Decision Making Intervention on Health Care Utilization: A Secondary Analysis of the Chest Pain Choice Multicenter Randomized Trial. <i>Academic Emergency Medicine</i> , 2018 , 25, 293-300	3.4	7
39	Significant Lactic Acidosis from Albuterol. <i>Clinical Practice and Cases in Emergency Medicine</i> , 2018 , 2, 128-131	4.3	4
38	Emergency Department Discharge of Pulmonary Embolus Patients. <i>Academic Emergency Medicine</i> , 2018 , 25, 995-1003	3.4	29
37	Relative efficacy and safety of ticagrelor vs clopidogrel as a function of time to invasive management in non-ST-segment elevation acute coronary syndrome in the PLATO trial. <i>Clinical Cardiology</i> , 2017 , 40, 390-398	3.3	12
36	Contemporary risk model for in-hospital major bleeding for patients with acute myocardial infarction: The acute coronary treatment and intervention outcomes network (ACTION) registry - Get With The Guidelines (GWTG). <i>American Heart Journal</i> , 2017 , 194, 16-24	4.9	18
35	The obesity paradox, extreme obesity, and long-term outcomes in older adults with ST-segment elevation myocardial infarction: results from the NCDR. <i>European Heart Journal Quality of Care & Clinical Outcomes</i> , 2017 , 3, 183-191	4.6	31
34	Necessity of hospitalization and stress testing in low risk chest pain patients. <i>American Journal of Emergency Medicine</i> , 2017 , 35, 274-280	2.9	3
33	Serial sampling of copeptin levels improves diagnosis and risk stratification in patients presenting with chest pain: results from the CHOPIN trial. <i>Emergency Medicine Journal</i> , 2016 , 33, 23-9	1.5	8
32	Shared decision making in patients with low risk chest pain: prospective randomized pragmatic trial. <i>BMJ, The</i> , 2016 , 355, i6165	5.9	75
31	Diagnosing Acute Heart Failure in the Emergency Department: A Systematic Review and Meta-analysis. <i>Academic Emergency Medicine</i> , 2016 , 23, 223-42	3.4	142
30	Validation of the Denver Emergency Department Trauma Organ Failure Score to Predict Post-Injury Multiple Organ Failure. <i>Journal of the American College of Surgeons</i> , 2016 , 222, 73-82	4.4	14
29	Troponin assay use in the emergency department for management of patients with potential acute coronary syndrome: current use and future directions. <i>Clinical and Experimental Emergency Medicine</i> , 2016 , 3, 1-8	1.7	10
28	Urine metabolomic analysis to detect metabolites associated with the development of contrast induced nephropathy. <i>Clinical and Experimental Emergency Medicine</i> , 2016 , 3, 204-212	1.7	3
27	In Reply. <i>Academic Emergency Medicine</i> , 2016 , 23, 843	3.4	

26	Predicting In-Hospital Mortality in Patients With Acute Myocardial Infarction. <i>Journal of the American College of Cardiology</i> , 2016 , 68, 626-635	15.1	117
25	Cardiac arrest and clinical characteristics, treatments and outcomes among patients hospitalized with ST-elevation myocardial infarction in contemporary practice: A report from the National Cardiovascular Data Registry. <i>American Heart Journal</i> , 2015 , 169, 515-22.e1	4.9	28
24	Midregional proadrenomedullin predicts mortality and major adverse cardiac events in patients presenting with chest pain: results from the CHOPIN trial. <i>Academic Emergency Medicine</i> , 2015 , 22, 554-63	3.4	10
23	Copeptin helps in the early detection of patients with acute myocardial infarction: primary results of the CHOPIN trial (Copeptin Helps in the early detection Of Patients with acute myocardial INfarction). <i>Journal of the American College of Cardiology</i> , 2013 , 62, 150-160	15.1	127
22	Urinary metabolomic analysis for the identification of renal injury in patients with acute heart failure. <i>Academic Emergency Medicine</i> , 2012 , 19, 18-23	3.4	11
21	Value of high-sensitivity C-reactive protein in low risk chest pain observation unit patients. <i>International Journal of Emergency Medicine</i> , 2011 , 4, 37	3.9	5
20	The time dependence of antithrombin initiation in patients with non-ST-segment elevation acute coronary syndromes: subgroup analysis from the AQUIITY trial. <i>Annals of Emergency Medicine</i> , 2011 , 57, 204-212.e1-6	2.1	1
19	Evaluation of the chest pain patient: survey of current practice patterns. <i>Journal of Emergency Medicine</i> , 2010 , 39, 282-90	1.5	3
18	Gender differences in time to presentation for myocardial infarction before and after a national women's cardiovascular awareness campaign: a temporal analysis from the Can Rapid Risk Stratification of Unstable Angina Patients Suppress ADverse Outcomes with Early Implementation (CRUEL) and the National Cardiovascular Data Registry Acute Coronary Treatment and Intervention Outcomes Network (with the Canadian Cardiovascular Registry) American Heart Journal, 2010, 160, 87-93	4.9	86
17	Utilization and impact of pre-hospital electrocardiograms for patients with acute ST-segment elevation myocardial infarction: data from the NCDR (National Cardiovascular Data Registry) ACTION (Acute Coronary Treatment and Intervention Outcomes Network) Registry. <i>Journal of the American College of Cardiology</i> , 2009 , 53, 161-6	15.1	187
16	Illicit stimulant use in a United States heart failure population presenting to the emergency department (from the Acute Decompensated Heart Failure National Registry Emergency Module). <i>American Journal of Cardiology</i> , 2008 , 102, 1216-9	3	57
15	Management of ST-segment elevation myocardial infarction in EDs. <i>American Journal of Emergency Medicine</i> , 2008 , 26, 91-100	2.9	9
14	Disparities in the care of chest pain. <i>Cmaj</i> , 2008 , 179, 631-3	3.5	1
13	Can we identify those at risk for a nondiagnostic treadmill test in a chest pain observation unit?. <i>Critical Pathways in Cardiology</i> , 2008 , 7, 29-34	1.3	3
12	Risk stratification in women enrolled in the Acute Decompensated Heart Failure National Registry Emergency Module (ADHERE-EM). <i>Academic Emergency Medicine</i> , 2008 , 15, 151-8	3.4	22
11	Prolonged emergency department stays of non-ST-segment-elevation myocardial infarction patients are associated with worse adherence to the American College of Cardiology/American Heart Association guidelines for management and increased adverse events. <i>Annals of Emergency Medicine</i> , 2007 , 50, 489-96	2.1	156
10	Door-to-ECG time in patients with chest pain presenting to the ED. <i>American Journal of Emergency Medicine</i> , 2006 , 24, 1-7	2.9	58
9	ED patients with heart failure: identification of an observational unit-appropriate cohort. <i>American Journal of Emergency Medicine</i> , 2006 , 24, 319-24	2.9	51

8	The obesity paradox in non-ST-segment elevation acute coronary syndromes: results from the Can Rapid risk stratification of Unstable angina patients Suppress ADverse outcomes with Early implementation of the American College of Cardiology/American Heart Association Guidelines Quality Improvement Initiative. <i>American Heart Journal</i> , 2006 , 152, 140-8	4.9	127
7	Assessing the need for functional diagnostic testing in low-risk women with chest pain. <i>Critical Pathways in Cardiology</i> , 2006 , 5, 64-8	1.3	1
6	Changes in the numeric descriptive scale for pain after sublingual nitroglycerin do not predict cardiac etiology of chest pain. <i>Annals of Emergency Medicine</i> , 2005 , 45, 581-5	2.1	31
5	Electrocardiographic manifestations: electrolyte abnormalities. <i>Journal of Emergency Medicine</i> , 2004 , 27, 153-60	1.5	156
4	Derivation and validation of a risk stratification model to identify coronary artery disease in women who present to the emergency department with potential acute coronary syndromes. <i>Academic Emergency Medicine</i> , 2004 , 11, 630-4	3.4	3
3	The Impact of Race on the Acute Management of Chest Pain. <i>Academic Emergency Medicine</i> , 2003 , 10, 1199-1208	3.4	28
2	Utility of immediate exercise treadmill testing in patients taking beta blockers or calcium channel blockers. <i>American Journal of Cardiology</i> , 2002 , 90, 882-5	3	9
1	Cholesterol screening in an ED-based chest pain unit. <i>American Journal of Emergency Medicine</i> , 2002 , 20, 510-2	2.9	4