

# Andrew D Mcrae

## List of Publications by Year in Descending Order

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**Version:** 2024-04-28

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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.

83  
papers

1,110  
citations

19  
h-index

30  
g-index

87  
ext. papers

1,417  
ext. citations

3.1  
avg. IF

4.22  
L-index

| #  | Paper   | IF  | Citations |
|----|---|-----|-----------|
| 83 | Age-varying effects of repeated emergency department presentations for children in Canada.. <i>Journal of Health Services Research and Policy</i> , <b>2022</b> , 13558196221094248   | 2.4 | 0         |
| 82 | A comparative evaluation of the strengths of association between different emergency department crowding metrics and repeat visits within 72 hours.. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 24, 27   | 0.6 | 0         |
| 81 | Personalised risk prediction following emergency department assessment for syncope. <i>Emergency Medicine Journal</i> , <b>2021</b> ,   | 1.5 | 2         |
| 80 | CCEDRRN COVID-19 Infection Score (CCIS): development and validation in a Canadian cohort of a clinical risk score to predict SARS-CoV-2 infection in patients presenting to the emergency department with suspected COVID-19. <i>BMJ Open</i> , <b>2021</b> , 11, e055832   | 3   | 3         |
| 79 | S100B protein level for the detection of clinically significant intracranial haemorrhage in patients with mild traumatic brain injury: a subanalysis of a prospective cohort study. <i>Emergency Medicine Journal</i> , <b>2021</b> , 38, 285-289                           | 1.5 | 1         |
| 78 | Transfusions in patients with iron deficiency anemia following release of Choosing Wisely Guidelines. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 475-479   | 0.6 | 1         |
| 77 | Changes in presentation, presenting severity and disposition among patients accessing emergency services during the first months of the COVID-19 pandemic in Calgary, Alberta: a descriptive study. <i>CMAJ Open</i> , <b>2021</b> , 9, E592-E601                           | 2.5 | 1         |
| 76 | Adverse Events Among Emergency Department Patients With Cardiovascular Conditions: A Multicenter Study. <i>Annals of Emergency Medicine</i> , <b>2021</b> , 77, 561-574   | 2.1 | 1         |
| 75 | The Perioperative Surgical Home, Enhanced Recovery After Surgery and how integration of these models may improve care for medically complex patients. <i>Canadian Journal of Surgery</i> , <b>2021</b> , 64, E381-E390  | 2.3 | 0         |
| 74 | Hydronephrosis severity clarifies prognosis and guides management for emergency department patients with acute ureteral colic. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 687-695  | 0.6 | 1         |
| 73 | Point-of-care ultrasound-guided regional anaesthesia in older ED patients with hip fractures: a study to test the feasibility of a training programme and time needed to complete nerve blocks by ED physicians after training. <i>BMJ Open</i> , <b>2021</b> , 11, e047113 | 3   | 0         |
| 72 | Ethical, legal and administrative implications of the use of video and audio recording in an emergency department in Ontario, Canada. <i>BMJ Innovations</i> , <b>2021</b> , 7, 224-230   | 1.8 | 0         |
| 71 | Which Patients Should Have Early Surgical Intervention for Acute Ureteral Colic?. <i>Journal of Urology</i> , <b>2021</b> , 205, 152-158  | 2.5 | 6         |
| 70 | Characteristics of frequent users of emergency departments in Alberta and Ontario, Canada: an administrative data study. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 206-213  | 0.6 | 2         |
| 69 | A randomized, controlled comparison of electrical versus pharmacological cardioversion for emergency department patients with acute atrial flutter. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 314-324   | 0.6 | 1         |
| 68 | Does early intervention improve outcomes for patients with acute ureteral colic?. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 679-686   | 0.6 | 0         |
| 67 | Recommendations for enhancing collaboration between the Canadian emergency department quality improvement and research communities. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 303-309   | 0.6 | 1         |

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| 66 | Starting, building and sustaining a program of research in emergency medicine in Canada. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 297-302   | 0.6  |    |
| 65 | External validation of a low HEAR score to identify emergency department chest pain patients at very low risk of major adverse cardiac events without troponin testing. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 1                              | 0.6  | 2  |
| 64 | 2021 CAEP Acute Atrial Fibrillation/Flutter Best Practices Checklist. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 604-610  | 0.6  | 7  |
| 63 | Adverse Events Associated With Electrical Cardioversion in Patients With Acute Atrial Fibrillation and Atrial Flutter. <i>Canadian Journal of Cardiology</i> , <b>2021</b> , 37, 1775-1782   | 3.8  | 0  |
| 62 | Decision support for computed tomography in the emergency department: a multicenter cluster-randomized controlled trial. <i>Canadian Journal of Emergency Medicine</i> , <b>2021</b> , 23, 631-640   | 0.6  | 0  |
| 61 | Development of the Canadian COVID-19 Emergency Department Rapid Response Network population-based registry: a methodology study. <i>CMAJ Open</i> , <b>2021</b> , 9, E261-E270   | 2.5  | 9  |
| 60 | Multicenter Emergency Department Validation of the Canadian Syncope Risk Score. <i>JAMA Internal Medicine</i> , <b>2020</b> , 180, 737-744   | 11.5 | 19 |
| 59 | Prospective comparative evaluation of the European Society of Cardiology (ESC) 1-hour and a 2-hour rapid diagnostic algorithm for myocardial infarction using high-sensitivity troponin-T. <i>Canadian Journal of Emergency Medicine</i> , <b>2020</b> , 22, 712-720 | 0.6  | 3  |
| 58 | Debate Series: #TropandGo - Negative high sensitivity troponin testing is safe as a final test for most emergency department patients with chest pain. <i>Canadian Journal of Emergency Medicine</i> , <b>2020</b> , 22, 14-18                                       | 0.6  | 1  |
| 57 | Electrical versus pharmacological cardioversion for emergency department patients with acute atrial fibrillation (RAFF2): a partial factorial randomised trial. <i>Lancet, The</i> , <b>2020</b> , 395, 339-349  | 4.0  | 23 |
| 56 | Temporal trends in emergency department volumes and crowding metrics in a western Canadian province: a population-based, administrative data study. <i>BMC Health Services Research</i> , <b>2020</b> , 20, 356  | 2.9  | 6  |
| 55 | Derivation and Internal Validation of a Clinical Risk Prediction Tool for Hyperkalemia-Related Emergency Department Encounters Among Hemodialysis Patients. <i>Canadian Journal of Kidney Health and Disease</i> , <b>2020</b> , 7, 2054358120953287                 | 2.3  | 4  |
| 54 | Benefit of hospital admission for detecting serious adverse events among emergency department patients with syncope: a propensity-score-matched analysis of a multicentre prospective cohort. <i>Cmaj</i> , <b>2020</b> , 192, E1198-E1205                           | 3.5  | 2  |
| 53 | Chest ultrasonography versus supine chest radiography for diagnosis of pneumothorax in trauma patients in the emergency department. <i>The Cochrane Library</i> , <b>2020</b> , 7, CD013031  | 5.2  | 7  |
| 52 | Is conservative management noninferior to interventional treatment for moderate to large primary spontaneous pneumothoraces?. <i>Canadian Journal of Emergency Medicine</i> , <b>2020</b> , 22, 772-773  | 0.6  |    |
| 51 | Frequent users of emergency departments and patient flow in Alberta and Ontario, Canada: an administrative data study. <i>BMC Health Services Research</i> , <b>2020</b> , 20, 938   | 2.9  | 3  |
| 50 | Patient classification based on volume and case-mix in the emergency department and their association with performance. <i>Health Care Management Science</i> , <b>2020</b> , 23, 387-400  | 4    | 1  |
| 49 | Low High-Sensitivity Troponin Thresholds Identify Low-Risk Patients With Chest Pain Unlikely to Benefit From Further Risk Stratification. <i>CJC Open</i> , <b>2019</b> , 1, 289-296   | 2    | 4  |

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| 48 | Response by Thiruganasambandamoorthy et al to Letters Regarding Article, "Duration of Electrocardiographic Monitoring of Emergency Department Patients With Syncope". <i>Circulation</i> , <b>2019</b> , 140, e655-e656                                    | 16.7 | 1  |
| 47 | The Canadian Cardiovascular Society 2018 guideline update for atrial fibrillation - A different perspective. <i>Canadian Journal of Emergency Medicine</i> , <b>2019</b> , 21, 572-575   | 0.6  | 7  |
| 46 | Prevalence of Pulmonary Embolism Among Emergency Department Patients With Syncope: A Multicenter Prospective Cohort Study. <i>Annals of Emergency Medicine</i> , <b>2019</b> , 73, 500-510   | 2.1  | 7  |
| 45 | Duration of Electrocardiographic Monitoring of Emergency Department Patients With Syncope. <i>Circulation</i> , <b>2019</b> , 139, 1396-1406   | 16.7 | 20 |
| 44 | A Multicenter Assessment of the Sensitivity and Specificity for a Single High-Sensitivity Cardiac Troponin Test at Emergency Department Presentation for Hospital Admission. <i>Journal of Applied Laboratory Medicine</i> , <b>2019</b> , 4, 170-179      | 2    | 6  |
| 43 | Safe Cardioversion for Patients With Acute-Onset Atrial Fibrillation and Flutter: Practical Concerns and Considerations. <i>Canadian Journal of Cardiology</i> , <b>2019</b> , 35, 1296-1300   | 3.8  | 9  |
| 42 | Sex-specific, high-sensitivity cardiac troponin T cut-off concentrations for ruling out acute myocardial infarction with a single measurement. <i>Canadian Journal of Emergency Medicine</i> , <b>2019</b> , 21, 26-33                                     | 0.6  | 9  |
| 41 | CAEP Acute Atrial Fibrillation/Flutter Best Practices Checklist. <i>Canadian Journal of Emergency Medicine</i> , <b>2018</b> , 20, 334-342   | 0.6  | 22 |
| 40 | Engaging emergency clinicians in emergency department clinical research. <i>Canadian Journal of Emergency Medicine</i> , <b>2018</b> , 20, 443-447   | 0.6  | 4  |
| 39 | Performance of high-sensitivity cardiac troponin in the emergency department for myocardial infarction and a composite cardiac outcome across different estimated glomerular filtration rates. <i>Clinica Chimica Acta</i> , <b>2018</b> , 479, 166-170    | 6.2  | 14 |
| 38 | Prediction of Early Adverse Events in Emergency Department Patients With Acute Heart Failure: A Systematic Review. <i>Canadian Journal of Cardiology</i> , <b>2018</b> , 34, 168-179   | 3.8  | 10 |
| 37 | Variability of renal colic management and outcomes in two Canadian cities. <i>Canadian Journal of Emergency Medicine</i> , <b>2018</b> , 20, 702-712   | 0.6  | 8  |
| 36 | Age-adjusted D-dimer thresholds in the investigation of suspected pulmonary embolism: A retrospective evaluation in patients ages 50 and older using administrative data. <i>Canadian Journal of Emergency Medicine</i> , <b>2018</b> , 20, 725-731        | 0.6  | 8  |
| 35 | Contemporary Emergency Department Management of Patients with Chest Pain: A Concise Review and Guide for the High-Sensitivity Troponin Era. <i>Canadian Journal of Cardiology</i> , <b>2018</b> , 34, 98-108   | 3.8  | 25 |
| 34 | Profile of Roche's Elecsys Troponin T Gen 5 STAT blood test (a high-sensitivity cardiac troponin assay) for diagnosing myocardial infarction in the emergency department. <i>Expert Review of Molecular Diagnostics</i> , <b>2018</b> , 18, 481-489        | 3.8  | 11 |
| 33 | Comparative Evaluation of 2-Hour Rapid Diagnostic Algorithms for Acute Myocardial Infarction Using High-Sensitivity Cardiac Troponin T. <i>Canadian Journal of Cardiology</i> , <b>2017</b> , 33, 1006-1012  | 3.8  | 21 |
| 32 | Undetectable Concentrations of a Food and Drug Administration-approved High-sensitivity Cardiac Troponin T Assay to Rule Out Acute Myocardial Infarction at Emergency Department Arrival. <i>Academic Emergency Medicine</i> , <b>2017</b> , 24, 1267-1277 | 3.4  | 27 |
| 31 | Prospective and Explicit Clinical Validation of the Ottawa Heart Failure Risk Scale, With and Without Use of Quantitative NT-proBNP. <i>Academic Emergency Medicine</i> , <b>2017</b> , 24, 316-327  | 3.4  | 22 |

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| 30 | A cohort study on physician documentation and the accuracy of administrative data coding to improve passive surveillance of transient ischaemic attacks. <i>BMJ Open</i> , <b>2017</b> , 7, e015234  | 3   | 9  |
| 29 | Predicting Short-term Risk of Arrhythmia among Patients With Syncope: The Canadian Syncope Arrhythmia Risk Score. <i>Academic Emergency Medicine</i> , <b>2017</b> , 24, 1315-1326   | 3.4 | 13 |
| 28 | Limitations of pulmonary embolism ICD-10 codes in emergency department administrative data: let the buyer beware. <i>BMC Medical Research Methodology</i> , <b>2017</b> , 17, 89   | 4.7 | 42 |
| 27 | Slow or swift, your patients' experience won't drift: absence of correlation between physician productivity and the patient experience. <i>Canadian Journal of Emergency Medicine</i> , <b>2017</b> , 19, 372-380  | 0.6 | 1  |
| 26 | Moderate sensitivity and high specificity of emergency department administrative data for transient ischemic attacks. <i>BMC Health Services Research</i> , <b>2017</b> , 17, 666  | 2.9 | 9  |
| 25 | Sex-related Differences in Emergency Department Renal Colic Management: Females Have Fewer Computed Tomography Scans but Similar Outcomes. <i>Academic Emergency Medicine</i> , <b>2016</b> , 23, 1153-1160 <sup>3,4</sup>   | 3.4 | 12 |
| 24 | Clinical performance of a new blood control peripheral intravenous catheter: A prospective, randomized, controlled study. <i>International Emergency Nursing</i> , <b>2016</b> , 25, 59-64   | 2.4 | 6  |
| 23 | Intravenous and Oral Contrast vs Intravenous Contrast Alone Computed Tomography for the Visualization of Appendix and Diagnosis of Appendicitis in Adult Emergency Department Patients. <i>Canadian Association of Radiologists Journal</i> , <b>2016</b> , 67, 234-41 | 3.9 | 7  |
| 22 | Cluster-randomized trials: A closer look. <i>Clinical Trials</i> , <b>2016</b> , 13, 294-300   | 2.2 | 8  |
| 21 | Highly-sensitive troponin T algorithm facilitates early discharge of low-risk chest pain patients within 1 h of emergency department arrival. <i>Evidence-Based Medicine</i> , <b>2015</b> , 20, 144   |     |    |
| 20 | The impact of high-sensitivity troponin implementation on hospital operations and patient outcomes in 3 tertiary care centers. <i>American Journal of Emergency Medicine</i> , <b>2015</b> , 33, 1790-4  | 2.9 | 8  |
| 19 | A prehospital treat-and-release protocol for supraventricular tachycardia. <i>Canadian Journal of Emergency Medicine</i> , <b>2015</b> , 17, 395-402   | 0.6 | 7  |
| 18 | Emergency department management of syncope: need for standardization and improved risk stratification. <i>Internal and Emergency Medicine</i> , <b>2015</b> , 10, 619-27   | 3.7 | 24 |
| 17 | Canadian Institutes of Health Research dissemination grant on high-sensitivity cardiac troponin. <i>Clinical Biochemistry</i> , <b>2014</b> , 47, 155-7  | 3.5 | 4  |
| 16 | Computerized physician order entry and decision support improves ED analgesic ordering for renal colic. <i>American Journal of Emergency Medicine</i> , <b>2014</b> , 32, 958-61   | 2.9 | 11 |
| 15 | Researchers' perceptions of ethical challenges in cluster randomized trials: a qualitative analysis. <i>Trials</i> , <b>2013</b> , 14, 1   | 2.8 | 38 |
| 14 | Challenges in the research ethics review of cluster randomized trials: international survey of investigators. <i>Clinical Trials</i> , <b>2013</b> , 10, 257-68  | 2.2 | 16 |
| 13 | Reporting of patient consent in healthcare cluster randomised trials is associated with the type of study interventions and publication characteristics. <i>Journal of Medical Ethics</i> , <b>2013</b> , 39, 119-24   | 2.5 | 4  |

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| 12 | What is the role and authority of gatekeepers in cluster randomized trials in health research?. <i>Trials</i> , <b>2012</b> , 13, 116  | 2.8  | 31  |
| 11 | The Ottawa Statement on the Ethical Design and Conduct of Cluster Randomized Trials. <i>PLoS Medicine</i> , <b>2012</b> , 9, e1001346  | 11.6 | 175 |
| 10 | Influence of publicly available online wait time data on emergency department choice in patients with noncritical complaints. <i>Canadian Journal of Emergency Medicine</i> , <b>2012</b> , 14, 237-246          | 0.6  | 4   |
| 9  | Inadequate reporting of research ethics review and informed consent in cluster randomised trials: review of random sample of published trials. <i>BMJ, The</i> , <b>2011</b> , 342, d2496                        | 5.9  | 39  |
| 8  | Ethical issues posed by cluster randomized trials in health research. <i>Trials</i> , <b>2011</b> , 12, 100  | 2.8  | 84  |
| 7  | Does clinical equipoise apply to cluster randomized trials in health research?. <i>Trials</i> , <b>2011</b> , 12, 118  | 2.8  | 24  |
| 6  | Who is the research subject in cluster randomized trials in health research?. <i>Trials</i> , <b>2011</b> , 12, 183  | 2.8  | 32  |
| 5  | When is informed consent required in cluster randomized trials in health research?. <i>Trials</i> , <b>2011</b> , 12, 202  | 2.8  | 62  |
| 4  | Ethical and policy issues in cluster randomized trials: rationale and design of a mixed methods research study. <i>Trials</i> , <b>2009</b> , 10, 61   | 2.8  | 33  |
| 3  | U.S. Federal Regulations for emergency research: a practical guide and commentary. <i>Academic Emergency Medicine</i> , <b>2008</b> , 15, 88-97  | 3.4  | 10  |
| 2  | Risk in emergency research using a waiver of/exception from consent: implications of a structured approach for institutional review board review. <i>Academic Emergency Medicine</i> , <b>2005</b> , 12, 1104-12 | 3.4  | 7   |
| 1  | Lessons from everyday lives: a moral justification for acute care research. <i>Critical Care Medicine</i> , <b>2002</b> , 30, 1146-51  | 1.4  | 48  |