

Robert Silbergleit

List of Publications by Year in descending order

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Version: 2024-02-01

69
papers

4,221
citations

201385

27
h-index

114278

63
g-index

72
all docs

72
docs citations

72
times ranked

4763
citing authors

#	ARTICLE	IF	CITATIONS
1	Intensive Blood-Pressure Lowering in Patients with Acute Cerebral Hemorrhage. <i>New England Journal of Medicine</i> , 2016, 375, 1033-1043.	13.9	769
2	Intramuscular versus Intravenous Therapy for Prehospital Status Epilepticus. <i>New England Journal of Medicine</i> , 2012, 366, 591-600.	13.9	612
3	Very Early Administration of Progesterone for Acute Traumatic Brain Injury. <i>New England Journal of Medicine</i> , 2014, 371, 2457-2466.	13.9	463
4	Randomized Trial of Three Anticonvulsant Medications for Status Epilepticus. <i>New England Journal of Medicine</i> , 2019, 381, 2103-2113.	13.9	342
5	Early Convalescent Plasma for High-Risk Outpatients with Covid-19. <i>New England Journal of Medicine</i> , 2021, 385, 1951-1960.	13.9	177
6	Reframing Consent for Clinical Research: A Function-Based Approach. <i>American Journal of Bioethics</i> , 2017, 17, 3-11.	0.5	176
7	Midazolam Versus Diazepam for the Treatment of Status Epilepticus in Children and Young Adults: A Meta-analysis. <i>Academic Emergency Medicine</i> , 2010, 17, 575-582.	0.8	158
8	Efficacy of levetiracetam, fosphenytoin, and valproate for established status epilepticus by age group (ESETT): a double-blind, responsive-adaptive, randomised controlled trial. <i>Lancet</i> , 2020, 395, 1217-1224.	6.3	143
9	RAMPART (Rapid Anticonvulsant Medication Prior to Arrival Trial): A double-blind randomized clinical trial of the efficacy of intramuscular midazolam versus intravenous lorazepam in the prehospital treatment of status epilepticus by paramedics. <i>Epilepsia</i> , 2011, 52, 45-47.	2.6	102
10	The Established Status Epilepticus Trial 2013. <i>Epilepsia</i> , 2013, 54, 89-92.	2.6	91
11	Cost-Effectiveness of Helicopter Transport of Stroke Patients for Thrombolysis. <i>Academic Emergency Medicine</i> , 2003, 10, 966-972.	0.8	73
12	The influence of age and chronic medical conditions on neurological outcomes in out of hospital cardiac arrest. <i>Resuscitation</i> , 2015, 89, 169-176.	1.3	65
13	Intramuscular midazolam versus intravenous lorazepam for the prehospital treatment of status epilepticus in the pediatric population. <i>Epilepsia</i> , 2015, 56, 254-262.	2.6	63
14	Extracorporeal Cardiopulmonary Resuscitation for Refractory Out-of-Hospital Cardiac Arrest (EROCA): Results of a Randomized Feasibility Trial of Expedited Out-of-Hospital Transport. <i>Annals of Emergency Medicine</i> , 2021, 78, 92-101.	0.3	61
15	Lessons from the RAMPART study-and which is the best route of administration of benzodiazepines in status epilepticus. <i>Epilepsia</i> , 2013, 54, 74-77.	2.6	57
16	Prehospital Intubation is Associated with Favorable Outcomes and Lower Mortality in ProTECT III. <i>Prehospital Emergency Care</i> , 2017, 21, 539-544.	1.0	50
17	Outcomes of Intensive Systolic Blood Pressure Reduction in Patients With Intracerebral Hemorrhage and Excessively High Initial Systolic Blood Pressure. <i>JAMA Neurology</i> , 2020, 77, 1355.	4.5	48
18	Emergency Neurological Life Support: Status Epilepticus. <i>Neurocritical Care</i> , 2012, 17, 73-78.	1.2	44

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19	Endotracheal Intubation in Patients Treated for Prehospital Status Epilepticus. <i>Neurocritical Care</i> , 2015, 23, 33-43.	1.2	41
20	Enrollment in research under exception from informed consent: The Patients'™ Experiences in Emergency Research (PEER) study. <i>Resuscitation</i> , 2013, 84, 1416-1421.	1.3	39
21	Underdosing of Benzodiazepines in Patients With Status Epilepticus Enrolled in Established Status Epilepticus Treatment Trial. <i>Academic Emergency Medicine</i> , 2019, 26, 940-943.	0.8	39
22	Patterns of benzodiazepine underdosing in the Established Status Epilepticus Treatment Trial. <i>Epilepsia</i> , 2021, 62, 795-806.	2.6	39
23	Implementation of the Exception From Informed Consent Regulations in a Large Multicenter Emergency Clinical Trials Network: The RAMPART Experience. <i>Academic Emergency Medicine</i> , 2012, 19, 448-454.	0.8	38
24	Emergency Treatment of Status Epilepticus: Current Thinking. <i>Emergency Medicine Clinics of North America</i> , 2009, 27, 101-113.	0.5	37
25	Association of Very Early Serum Levels of S100B, Glial Fibrillary Acidic Protein, Ubiquitin C-Terminal Hydrolase-L1, and Spectrin Breakdown Product with Outcome in ProTECT III. <i>Journal of Neurotrauma</i> , 2019, 36, 2863-2871.	1.7	34
26	Confronting Ethical and Regulatory Challenges of Emergency Care Research With Conscious Patients. <i>Annals of Emergency Medicine</i> , 2016, 67, 538-545.	0.3	33
27	Consulting Communities When Patients Cannot Consent. <i>Critical Care Medicine</i> , 2014, 42, 272-280.	0.4	30
28	The 60-Day Temperature-Dependent Degradation of Midazolam and Lorazepam in the Prehospital Environment. <i>Prehospital Emergency Care</i> , 2013, 17, 1-7.	1.0	28
29	Emergency Neurological Life Support: Status Epilepticus. <i>Neurocritical Care</i> , 2015, 23, 136-142.	1.2	26
30	Very Early Administration of Progesterone Does Not Improve Neuropsychological Outcomes in Subjects with Moderate to Severe Traumatic Brain Injury. <i>Journal of Neurotrauma</i> , 2017, 34, 115-120.	1.7	26
31	Screen failure data in clinical trials: Are screening logs worth it?. <i>Clinical Trials</i> , 2014, 11, 467-472.	0.7	24
32	Blood Pressure-Attained Analysis of ATACH 2 Trial. <i>Stroke</i> , 2018, 49, 1412-1418.	1.0	20
33	Degradation of Benzodiazepines after 120 Days of EMS Deployment. <i>Prehospital Emergency Care</i> , 2014, 18, 368-374.	1.0	19
34	The Effect of Goal-Directed Therapy on Patient Morbidity and Mortality After Traumatic Brain Injury: Results From the Progesterone for the Treatment of Traumatic Brain Injury III Clinical Trial*. <i>Critical Care Medicine</i> , 2019, 47, 623-631.	0.4	17
35	Sliding Scoring of the Glasgow Outcome Scale-Extended as Primary Outcome in Traumatic Brain Injury Trials. <i>Journal of Neurotrauma</i> , 2020, 37, 2674-2679.	1.7	17
36	Pre-hospital midazolam for benzodiazepine-treated seizures before and after the Rapid Anticonvulsant Medication Prior to Arrival Trial: A national observational cohort study. <i>PLoS ONE</i> , 2017, 12, e0173539.	1.1	17

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37	Emergency Consent: Patients'™ and Surrogates'™ Perspectives on Consent for Clinical Trials in Acute Stroke and Myocardial Infarction. <i>Journal of the American Heart Association</i> , 2019, 8, e010905.	1.6	16
38	Quality of Emergency Care on the Night Shift. <i>Academic Emergency Medicine</i> , 2006, 13, 325-330.	0.8	14
39	Hyperbaric oxygen brain injury treatment (HOBIT) trial: a multifactor design with response adaptive randomization and longitudinal modeling. <i>Pharmaceutical Statistics</i> , 2016, 15, 396-404.	0.7	14
40	Balancing Ethical Goals in Challenging Individual Participant Scenarios Occurring in a Trial Conducted with Exception from Informed Consent. <i>Academic Emergency Medicine</i> , 2015, 22, 340-346.	0.8	13
41	Community Consultation for Prehospital Research: Experiences of Study Coordinators and Principal Investigators. <i>Prehospital Emergency Care</i> , 2014, 18, 274-281.	1.0	12
42	Patient Engagement in Neurological Clinical Trials Design: A Conference Summary. <i>Clinical and Translational Science</i> , 2015, 8, 776-778.	1.5	12
43	The Experiences and Needs of Families of Comatose Patients After Cardiac Arrest and Severe Neurotrauma: The Perspectives of National Key Stakeholders During a National Institutes of Health'€Funded Workshop. , 2022, 4, e0648.		11
44	Outcome of Patients After Air Medical Transport for Management of Nontraumatic Acute Intracranial Bleeding. <i>Prehospital and Disaster Medicine</i> , 1994, 9, 252-256.	0.7	10
45	Progesterone Treatment Does Not Decrease Serum Levels of Biomarkers of Glial and Neuronal Cell Injury in Moderate and Severe Traumatic Brain Injury Subjects: A Secondary Analysis of the Progesterone for Traumatic Brain Injury, Experimental Clinical Treatment (ProTECT) III Trial. <i>Journal of Neurotrauma</i> , 2021, 38, 1953-1960.	1.7	9
46	Challenges in the design and analysis of non-inferiority trials: a case study. <i>Clinical Trials</i> , 2011, 8, 601-608.	0.7	8
47	Lessons from the Established Status Epilepticus Treatment Trial. <i>Epilepsy and Behavior</i> , 2019, 101, 106296.	0.9	8
48	The association of patient weight and dose of fosphenytoin, levetiracetam, and valproic acid with treatment success in status epilepticus. <i>Epilepsia</i> , 2020, 61, e66-e70.	2.6	8
49	Meeting unique requirements: Community consultation and public disclosure for research in emergency setting using exception from informed consent. <i>Academic Emergency Medicine</i> , 2021, 28, 1183-1194.	0.8	8
50	Electroencephalographic Seizures in Emergency Department Patients After Treatment for Convulsive Status Epilepticus. <i>Journal of Clinical Neurophysiology</i> , 2022, 39, 441-445.	0.9	8
51	A systematic review of Federal Drug Administration Docket for community consultation and public disclosure in exception from informed consent trials. <i>Clinical Trials</i> , 2018, 15, 29-35.	0.7	7
52	Priorities to Overcome Barriers Impacting Data Science Application in Emergency Care Research. <i>Academic Emergency Medicine</i> , 2019, 26, 97-105.	0.8	7
53	Accounting for Repeat Enrollments During an Emergency Clinical Trial: The Rapid Anticonvulsant Medications Prior to Arrival Trial (RAMPART). <i>Academic Emergency Medicine</i> , 2015, 22, 373-377.	0.8	6
54	Early Neurologic Recovery, Practice Pattern Variation, and the Risk of Endotracheal Intubation Following Established Status Epilepticus. <i>Neurology</i> , 2021, 96, e2372-e2386.	1.5	6

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55	Patient and Surrogate Postenrollment Perspectives on Research Using the Exception From Informed Consent: An Integrated Survey. <i>Annals of Emergency Medicine</i> , 2020, 76, 343-349.	0.3	5
56	Levetiracetam no better than phenytoin in children with convulsive status epilepticus. <i>Lancet, The</i> , 2019, 393, 2101-2102.	6.3	4
57	Early Exposure of Fosphenytoin, Levetiracetam, and Valproic Acid After High-Dose Intravenous Administration in Young Children With Benzodiazepine-Refractory Status Epilepticus. <i>Journal of Clinical Pharmacology</i> , 2021, 61, 763-768.	1.0	3
58	Response to Food and Drug Administration Draft Guidance Statement on Research into the Treatment of Life-threatening Emergency Conditions Using Exception from Informed Consent: Testimony of the Neurological Emergencies Treatment Trials. <i>Academic Emergency Medicine</i> , 2007, 14, e63-e68.	0.8	3
59	Treatment of Toxin-Related Status Epilepticus With Levetiracetam, Fosphenytoin, or Valproate in Patients Enrolled in the Established Status Epilepticus Treatment Trial. <i>Annals of Emergency Medicine</i> , 2022, 80, 194-202.	0.3	3
60	Clinical Practice Variability in Temperature Correction of Arterial Blood Gas Measurements and Outcomes in Hypothermia-Treated Patients After Cardiac Arrest. <i>Therapeutic Hypothermia and Temperature Management</i> , 2015, 5, 135-142.	0.3	2
61	Efficacy of Home Anticonvulsant Administration for Second-Line Status Epilepticus Treatment. <i>Neurology</i> , 2021, 97, e720-e727.	1.5	2
62	Context and principles must drive alternatives to consent in emergency research. <i>Lancet Neurology, The</i> , 2020, 19, 968-969.	4.9	1
63	Missed Opportunities in New-Onset Seizures in the Emergency Department. <i>Academic Emergency Medicine</i> , 2021, 28, 477-479.	0.8	1
64	A pharmacokinetic simulation study to assess the performance of a sparse blood sampling approach to quantify early drug exposure. <i>Clinical and Translational Science</i> , 2021, 14, 1444-1451.	1.5	1
65	An adaptive clinical trial design to identify the target dose of tenecteplase for treatment of acute pulmonary embolism. <i>Clinical Trials</i> , 0, , 174077452211058.	0.7	1
66	Preface. <i>Emergency Medicine Clinics of North America</i> , 2009, 27, xvii-xviii.	0.5	0
67	Managing Hypothermia in Cardiac Arrest and Rewarming. <i>Therapeutic Hypothermia and Temperature Management</i> , 2013, 3, 166-170.	0.3	0
68	Better meta-analytic methods, but best initial treatment for status epilepticus remains obscure. <i>Neurology</i> , 2015, 85, 1830-1831.	1.5	0
69	Studies Utilizing Therapeutic Hypothermia and Targeted Temperature Management. <i>Therapeutic Hypothermia and Temperature Management</i> , 2021, 11, 71-75.	0.3	0