Venkatesh Thiruganasambandamoorthy

List of Publications by Year in descending order

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		331259	315357
86	1,636	21	38
papers	citations	h-index	g-index
01	0.1	0.1	1267
91	91	91	1367
all docs	docs citations	times ranked	citing authors

#	Article	IF	Citations
1	Development of a Clinical Prediction Rule for 30-Day Cardiac Events in Emergency Department Patients With Chest Pain and Possible Acute Coronary Syndrome. Annals of Emergency Medicine, 2012, 59, 115-125.e1.	0.3	140
2	Standardized Approaches to the Investigation of Syncope: Canadian Cardiovascular Society Position Paper. Canadian Journal of Cardiology, 2011, 27, 246-253.	0.8	111
3	Development of the Canadian Syncope Risk Score to predict serious adverse events after emergency department assessment of syncope. Cmaj, 2016, 188, E289-E298.	0.9	106
4	Syncope clinical management in the emergency department: a consensus from the first international workshop on syncope risk stratification in the emergency department. European Heart Journal, 2016, 37, 1493-1498.	1.0	96
5	Priorities for Emergency Department Syncope Research. Annals of Emergency Medicine, 2014, 64, 649-655.e2.	0.3	79
6	External Validation of the San Francisco Syncope Rule in the Canadian Setting. Annals of Emergency Medicine, 2010, 55, 464-472.	0.3	77
7	Standardized Reporting Guidelines for Emergency Department Syncope Riskâ€stratification Research. Academic Emergency Medicine, 2012, 19, 694-702.	0.8	74
8	Diagnostic accuracy of clinical prediction rules to exclude acute coronary syndrome in the emergency department setting: a systematic review. Canadian Journal of Emergency Medicine, 2008, 10, 373-382.	0.5	62
9	Electrical versus pharmacological cardioversion for emergency department patients with acute atrial fibrillation (RAFF2): a partial factorial randomised trial. Lancet, The, 2020, 395, 339-349.	6.3	60
10	Multicenter Emergency Department Validation of the Canadian Syncope Risk Score. JAMA Internal Medicine, 2020, 180, 737.	2.6	50
11	Prospective Validation of a Modified Thrombolysis In Myocardial Infarction Risk Score in Emergency Department Patients With Chest Pain and Possible Acute Coronary Syndrome. Academic Emergency Medicine, 2010, 17, 368-375.	0.8	49
12	Prognostic Accuracy of the <scp>HEART</scp> Score for Prediction of Major Adverse Cardiac Events in Patients Presenting With Chest Pain: A Systematic Review and Metaâ€analysis. Academic Emergency Medicine, 2019, 26, 140-151.	0.8	45
13	Outcomes in Canadian Emergency Department Syncope Patients – Are We Doing a Good Job?. Journal of Emergency Medicine, 2013, 44, 321-328.	0.3	44
14	The Predictive Value of Preendoscopic Risk Scores to Predict Adverse Outcomes in Emergency Department Patients With Upper Gastrointestinal Bleeding: A Systematic Review. Academic Emergency Medicine, 2016, 23, 1218-1227.	0.8	43
15	Risk Factors for Serious Underlying Pathology in Adult Emergency Department Nontraumatic Low Back Pain Patients. Journal of Emergency Medicine, 2014, 47, 1-11.	0.3	35
16	Duration of Electrocardiographic Monitoring of Emergency Department Patients With Syncope. Circulation, 2019, 139, 1396-1406.	1.6	35
17	Emergency department management of syncope: need for standardization and improved risk stratification. Internal and Emergency Medicine, 2015, 10, 619-627.	1.0	32
18	Prognostic value of cardiac biomarkers in the risk stratification of syncope: a systematic review. Internal and Emergency Medicine, 2015, 10, 1003-1014.	1.0	31

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19	Canadian Cardiovascular Society Clinical Practice Update on the Assessment and Management of Syncope. Canadian Journal of Cardiology, 2020, 36, 1167-1177.	0.8	25
20	Pacing as a Treatment for Reflex-Mediated (Vasovagal, Situational, or Carotid Sinus Hypersensitivity) Syncope: A Systematic Review for the 2017 ACC/AHA/HRS Guideline for the Evaluation and Management of Patients With Syncope: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines and the Heart Rhythm Society. Circulation, 2017, 136, e123-e135.	1.6	24
21	Predicting Shortâ€term Risk of Arrhythmia among Patients With Syncope: The Canadian Syncope Arrhythmia Risk Score. Academic Emergency Medicine, 2017, 24, 1315-1326.	0.8	23
22	Syncope Prognosis Based on Emergency Department Diagnosis: A Prospective Cohort Study. Academic Emergency Medicine, 2018, 25, 388-396.	0.8	21
23	Pacing as a Treatment for Reflex-Mediated (Vasovagal, Situational, or Carotid Sinus Hypersensitivity) Syncope: A Systematic Review for the 2017 ACC/AHA/HRS Guideline for the Evaluation and Management of Patients With Syncope. Journal of the American College of Cardiology, 2017, 70, 664-679.	1.2	20
24	Defining abnormal electrocardiography in adult emergency department syncope patients: the Ottawa Electrocardiographic Criteria. Canadian Journal of Emergency Medicine, 2012, 14, 248-58.	0.5	20
25	Outcomes in Presyncope Patients: A Prospective Cohort Study. Annals of Emergency Medicine, 2015, 65, 268-276.e6.	0.3	19
26	Risk stratification of adult emergency department syncope patients to predict short-term serious outcomes after discharge (RiSEDS) study. BMC Emergency Medicine, 2014, 14, 8.	0.7	17
27	Lung-Protective Ventilation and Associated Outcomes and Costs Among Patients Receiving Invasive Mechanical Ventilation in the ED. Chest, 2021, 159, 606-618.	0.4	17
28	Outcomes in syncope research: a systematic review and critical appraisal. Internal and Emergency Medicine, 2018, 13, 593-601.	1.0	16
29	The Yield of Computed Tomography of the Head Among Patients Presenting With Syncope: A Systematic Review. Academic Emergency Medicine, 2019, 26, 479-490.	0.8	16
30	Test characteristics of point-of-care ultrasonography for the diagnosis of acute posterior ocular pathology. Canadian Journal of Ophthalmology, 2016, 51, 336-341.	0.4	13
31	Shared Decision Making for Syncope in the Emergency Department: A Randomized Controlled Feasibility Trial. Academic Emergency Medicine, 2020, 27, 853-865.	0.8	13
32	Reasons for Hospitalization Among Emergency Department Patients With Syncope. Academic Emergency Medicine, 2016, 23, 1210-1217.	0.8	11
33	CAEP 2014 Academic symposium: "How to make research succeed in your department: How to fund your research program― Canadian Journal of Emergency Medicine, 2015, 17, 453-461.	0.5	10
34	Predictors of Oral Antibiotic Treatment Failure for Nonpurulent Skin and Soft Tissue Infections in the Emergency Department. Academic Emergency Medicine, 2019, 26, 51-59.	0.8	10
35	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
36	Accuracy of presenting symptoms, physical examination, and imaging for diagnosis of ruptured abdominal aortic aneurysm: Systematic review and metaâ€analysis. Academic Emergency Medicine, 2022, 29, 486-496.	0.8	10

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37	Derivation of a risk scale and quantification of risk factors for serious adverse events in adult emergency department syncope patients. Canadian Journal of Emergency Medicine, 2014, 16, 120-130.	0.5	9
38	A Systematic Review of the Risk of Motor Vehicle Collision in Patients With Syncope. Canadian Journal of Cardiology, 2021, 37, 151-161.	0.8	9
39	Adverse Events Associated With Electrical Cardioversion in Patients With Acute Atrial Fibrillation and Atrial Flutter. Canadian Journal of Cardiology, 2021, 37, 1775-1782.	0.8	9
40	Does <i>N</i> -Terminal Pro–B-Type Natriuretic Peptide Improve the Risk Stratification of Emergency Department Patients With Syncope?. Annals of Internal Medicine, 2020, 172, 648-655.	2.0	8
41	International Validation of the Canadian Syncope Risk Score. Annals of Internal Medicine, 2022, 175, 783-794.	2.0	8
42	Can severe aortic stenosis be identified by emergency physicians when interpreting a simplified two-view echocardiogram obtained by trained echocardiographers?. The Ultrasound Journal, 2015, 7, 5.	2.0	7
43	Diagnostic Accuracy and Financial Implications of Age-Adjusted D-Dimer Strategies for the Diagnosis of Deep Venous Thrombosis in the Emergency Department. Journal of Emergency Medicine, 2019, 56, 469-477.	0.3	7
44	Evaluation of an emergency department to outpatient parenteral antibiotic therapy program for cellulitis. American Journal of Emergency Medicine, 2019, 37, 2008-2014.	0.7	6
45	Evaluation of the Ottawa 3DY as a screening tool for cognitive impairment in older emergency department patients. American Journal of Emergency Medicine, 2020, 38, 2545-2551.	0.7	6
46	Comparison of intravenous ketorolac at three doses for treating renal colic in the emergency department: A noninferiority randomized controlled trial. Academic Emergency Medicine, 2021, 28, 768-775.	0.8	6
47	Machine learning versus traditional methods for the development of risk stratification scores: a case study using original Canadian Syncope Risk Score data. Internal and Emergency Medicine, 2022, 17, 1145-1153.	1.0	6
48	Implementation of the Abbott ID Now COVID-19 assay at a tertiary care center: a prospective pragmatic implementation study during the third wave of SARS-CoV-2 in Ontario. Diagnostic Microbiology and Infectious Disease, 2022, 102, 115609.	0.8	6
49	Support of supervised injection facilities by emergency physicians in Canada. International Journal of Drug Policy, 2017, 49, 26-31.	1.6	5
50	Choosing Wisely Canada's emergency medicine recommendations: Time for a revision. Canadian Journal of Emergency Medicine, 2019, 21, 717-720.	0.5	5
51	The BEACON study: protocol for a cohort study as part of an evaluation of the effectiveness of smartphone-assisted problem-solving therapy in men who present with intentional self-harm to emergency departments in Ontario. Trials, 2020, 21, 925.	0.7	5
52	A randomized, controlled comparison of electrical versus pharmacological cardioversion for emergency department patients with acute atrial flutter. Canadian Journal of Emergency Medicine, 2021, 23, 314-324.	0.5	5
53	RAFF-3 Trial: A Stepped-Wedge Cluster Randomised Trial to Improve Care of Acute Atrial Fibrillation and Flutter in the Emergency Department. Canadian Journal of Cardiology, 2021, 37, 1569-1577.	0.8	5
54	Personalised risk prediction following emergency department assessment for syncope. Emergency Medicine Journal, 2021, , emermed-2020-211095.	0.4	5

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55	Short-term risk of arrhythmias among emergency department syncope patients with non-sinus rhythm. International Journal of Cardiology, 2015, 189, 12-14.	0.8	4
56	Prospective validation of a clinical decision rule to identify patients presenting to the emergency department with chest pain who can safely be removed from cardiac monitoring. Cmaj, 2017, 189, E139-E145.	0.9	4
57	The safety and efficacy of on-site paramedic and allied health treatment interventions targeting the reduction of emergency department visits by long-term care patients: systematic review protocol. Systematic Reviews, 2018, 7, 206.	2.5	4
58	Use of conventional cardiac troponin assay for diagnosis of non-ST-elevation myocardial infarction: †The Ottawa Troponin Pathway'. PLoS ONE, 2020, 15, e0226892.	1.1	4
59	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. Cmaj, 2020, 192, E1198-E1205.	0.9	4
60	The performance of HEAR score for identification of low-risk chest pain: a systematic review and meta-analysis. European Journal of Emergency Medicine, 2022, 29, 173-187.	0.5	4
61	Choosing Wisely Canada: scratching the 7-year itch. Canadian Journal of Emergency Medicine, 2022, 24, 569-573.	0.5	4
62	A Systematic Review of Noninvasive Electrocardiogram Monitoring Devices for the Evaluation of Suspected Cardiovascular Syncope. Journal of Medical Devices, Transactions of the ASME, 2019, 13, .	0.4	3
63	A Health Records Review of Outpatient Referrals from the Emergency Department. Emergency Medicine International, 2019, 2019, 1-7.	0.3	3
64	Application of outpatient cardiac testing among emergency department patients with syncope. Emergency Medicine Journal, 2018, 35, 486-491.	0.4	2
65	Long-term outcomes in syncope patients presenting to the emergency department: A systematic review. Canadian Journal of Emergency Medicine, 2020, 22, 45-55.	0.5	2
66	Adverse Events Among Emergency Department Patients With Cardiovascular Conditions: A Multicenter Study. Annals of Emergency Medicine, 2021, 77, 561-574.	0.3	2
67	Role of Creatine Kinase in the Troponin Era: A Systematic Review. Western Journal of Emergency Medicine, 2021, 22, 1291-1294.	0.6	2
68	Development of a Novel Emergency Department Quality Measure to Reduce Very Low-Risk Syncope Hospitalizations. Annals of Emergency Medicine, 2022, 79, 509-517.	0.3	2
69	Syncope confusion. Cmaj, 2015, 187, 521.1-521.	0.9	1
70	Use of the emergency department by refugees under the Interim Federal Health Program: A health records review. PLoS ONE, 2018, 13, e0197282.	1.1	1
71	Response by Thiruganasambandamoorthy et al to Letters Regarding Article, "Duration of Electrocardiographic Monitoring of Emergency Department Patients With Syncope― Circulation, 2019, 140, e655-e656.	1.6	1
72	Using single sex-specific high-sensitivity cardiac troponin cut-off values for ruling out myocardial infarction – Are we there yet?. Canadian Journal of Emergency Medicine, 2019, 21, 7-8.	0.5	1

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73	Outcomes and emergency medical services resource utilization among patients with syncope arriving to the emergency department by ambulance. Canadian Journal of Emergency Medicine, 2019, 21, 499-504.	0.5	1
74	Prediction Model for 30-day Outcomes Among Emergency Department Patients with Lower Gastrointestinal Bleeding. Western Journal of Emergency Medicine, 2020, 21, 343-347.	0.6	1
75	Optimizing collaborative relationships in emergency medicine research. Canadian Journal of Emergency Medicine, 2021, 23, 291-296.	0.5	1
76	Annals for Hospitalists Inpatient Notes - Identifying High-Risk Patients With Syncope—What Hospitalists Need to Know. Annals of Internal Medicine, 2021, 174, HO2-HO3.	2.0	1
77	Remember that patient you saw last week: characteristics and frequency of patients experiencing anticipated and unanticipated death following ED discharge. Canadian Journal of Emergency Medicine, 2021, 23, 767-771.	0.5	1
78	Syncope Time Frames for Adverse Events after Emergency Department Presentation: An Individual Patient Data Meta-Analysis. Medicina (Lithuania), 2021, 57, 1235.	0.8	1
79	Letter to the editor: Multicentre external validation of the Canadian Syncope Risk Score to predict adverse events and comparison with clinical judgement. Emergency Medicine Journal, 2022, , emermed-2021-212268.	0.4	1
80	High-sensitivity cardiac troponin T in isolation has limited diagnostic utility in identifying cardiac causes of syncope. Evidence-Based Medicine, 2015, 20, 146-146.	0.6	0
81	In Reply:. Academic Emergency Medicine, 2019, 26, 704-706.	0.8	0
82	Multi-centre implementation of an Educational program to improve the Cardiac Arrest diagnostic accuracy of ambulance Telecommunicators and survival outcomes for sudden cardiac arrest victims: the EduCATe study design and methodology. BMC Emergency Medicine, 2021, 21, 26.	0.7	0
83	Just the facts:Âhow to assess a patient presenting to the emergency department with syncope. Canadian Journal of Emergency Medicine, 2021, 23, 286-290.	0.5	0
84	Annals On Call - Syncope: Who Is at Risk for Poor Outcomes?. Annals of Internal Medicine, 2021, 174, OC2.	2.0	0
85	Validation of the Ottawa Troponin Pathway. Australasian Emergency Care, 2021, , .	0.7	0
86	The INITIATE trial protocol: a randomized controlled trial testing the effectiveness of a "quit card― intervention on long-term abstinence among tobacco smokers presenting to the emergency department. Trials, 2021, 22, 733.	0.7	0