Timothy A Miller

List of Publications by Year in descending order

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#	Article	IF	CITATIONS
1	Improving FDA postmarket adverse event reporting for medical devices. BMJ Evidence-Based Medicine, 2023, 28, 83-84.	1.7	0
2	A simple neural vector space model for medical concept normalization using concept embeddings. Journal of Biomedical Informatics, 2022, 130, 104080.	2.5	7
3	Pre-training phenotyping classifiers. Journal of Biomedical Informatics, 2021, 113, 103626.	2.5	1
4	Clinical Natural Language Processing for Radiation Oncology: A Review and Practical Primer. International Journal of Radiation Oncology Biology Physics, 2021, 110, 641-655.	0.4	30
5	A Review of Recent Work in Transfer Learning and Domain Adaptation for Natural Language Processing of Electronic Health Records. Yearbook of Medical Informatics, 2021, 30, 239-244.	0.8	16
6	Experiences implementing scalable, containerized, cloud-based NLP for extracting biobank participant phenotypes at scale. JAMIA Open, 2020, 3, 185-189.	1.0	4
7	Rethinking domain adaptation for machine learning over clinical language. JAMIA Open, 2020, 3, 146-150.	1.0	9
8	Does BERT need domain adaptation for clinical negation detection?. Journal of the American Medical Informatics Association: JAMIA, 2020, 27, 584-591.	2.2	29
9	Normalizing Clinical Document Titles to LOINC Document Ontology: an Initial Study. AMIA Annual Symposium proceedings, 2020, 2020, 1441-1450.	0.2	1
10	Use of Natural Language Processing to Extract Clinical Cancer Phenotypes from Electronic Medical Records. Cancer Research, 2019, 79, 5463-5470.	0.4	97
11	Toward a clinical text encoder: pretraining for clinical natural language processing with applications to substance misuse. Journal of the American Medical Informatics Association: JAMIA, 2019, 26, 1272-1278.	2.2	16
12	Supervised methods to extract clinical events from cardiology reports in Italian. Journal of Biomedical Informatics, 2019, 95, 103219.	2.5	12
13	Extracting Adverse Drug Event Information with Minimal Engineering. , 2019, 2019, 22-27.		7
14	Towards generalizable entity-centric clinical coreference resolution. Journal of Biomedical Informatics, 2017, 69, 251-258.	2.5	9
15	DeepPhe: A Natural Language Processing System for Extracting Cancer Phenotypes from Clinical Records. Cancer Research, 2017, 77, e115-e118.	0.4	64
16	Recurrent Neural Network Architectures for Event Extraction from Italian Medical Reports. Lecture Notes in Computer Science, 2017, , 198-202.	1.0	4
17	Unsupervised Domain Adaptation for Clinical Negation Detection. , 2017, , .		5
18	Multilayered temporal modeling for the clinical domain. Journal of the American Medical Informatics Association: JAMIA, 2016, 23, 387-395.	2.2	49

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#	Article	IF	CITATIONS
19	Automatic identification of methotrexate-induced liver toxicity in patients with rheumatoid arthritis from the electronic medical record. Journal of the American Medical Informatics Association: JAMIA, 2015, 22, e151-e161.	2.2	63
20	Extracting Time Expressions from Clinical Text. , 2015, , .		8
21	Semi-supervised Learning for Phenotyping Tasks. AMIA Annual Symposium proceedings, 2015, 2015, 502-11.	0.2	3
22	Temporal Annotation in the Clinical Domain. Transactions of the Association for Computational Linguistics, 2014, 2, 143-154.	3.2	131
23	Discovering body site and severity modifiers in clinical texts. Journal of the American Medical Informatics Association: JAMIA, 2014, 21, 448-454.	2.2	26
24	ClinicalTrials.gov as a Data Source for Semi-Automated Point-Of-Care Trial Eligibility Screening. PLoS ONE, 2014, 9, e111055.	1.1	11
25	Negation's Not Solved: Generalizability Versus Optimizability in Clinical Natural Language Processing. PLoS ONE, 2014, 9, e112774.	1.1	88
26	Temporal Annotation in the Clinical Domain. Transactions of the Association for Computational Linguistics, 2014, 2, 143-154.	3.2	35
27	A system for coreference resolution for the clinical narrative. Journal of the American Medical Informatics Association: JAMIA, 2012, 19, 660-667.	2.2	28
28	Classifying unstructured electronic consult messages to understand primary care physician specialty information needs. Journal of the American Medical Informatics Association: JAMIA, 0, , .	2.2	0