## CITATION REPORT List of articles citing

Identification of risk categories for in pancreaticoduodenectomy based on diagnosis

DOI: 10.1111/hpb.12369 Hpb, 2015, 17, 428-37.

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#	Paper	IF	Citations
21	ERCP-directed radiofrequency ablation of ampullary adenomas: a knife-sparing alternative in patients unfit for surgery. <i>Endoscopy</i> , <b>2015</b> , 47 Suppl 1 UCTN, E515-6	3.4	16
20	Laparoscopic pancreatoduodenectomy does not completely mitigate increased perioperative risks in elderly patients. <i>Hpb</i> , <b>2015</b> , 17, 909-18	3.8	29
19	Clinical Risk Score to Predict Pancreatic Fistula after Pancreatoduodenectomy: Independent External Validation for Open and Laparoscopic Approaches. <i>Journal of the American College of Surgeons</i> , <b>2015</b> , 221, 689-98	4.4	74
18	Laparoscopic distal pancreatectomy: many meta-analyses, few certainties. <i>Updates in Surgery</i> , <b>2016</b> , 68, 225-234	2.9	14
17	Risk by indication for pancreaticoduodenectomy in patients 80 years and older: a study from the American College of Surgeons National Surgical Quality Improvement Program. <i>Hpb</i> , <b>2016</b> , 18, 900-907	3.8	16
16	A Multi-institutional Comparison of Perioperative Outcomes of Robotic and Open Pancreaticoduodenectomy. <i>Annals of Surgery</i> , <b>2016</b> , 264, 640-9	7.8	135
15	Metabolic Syndrome is Associated with Increased Postoperative Morbidity and Hospital Resource Utilization in Patients Undergoing Elective Pancreatectomy. <i>Journal of Gastrointestinal Surgery</i> , <b>2016</b> , 20, 189-98; discussion 198	3.3	22
14	Comparison of observed to predicted outcomes using the ACS NSQIP risk calculator in patients undergoing pancreaticoduodenectomy. <i>Journal of Surgical Oncology</i> , <b>2016</b> , 114, 157-62	2.8	25
13	Outcomes of Pancreaticoduodenectomy for Pancreatic Neuroendocrine Tumors: Are Combined Procedures Justified?. <i>Journal of Gastrointestinal Surgery</i> , <b>2016</b> , 20, 891-8	3.3	10
12	Duodenal Crohn\s Disease. Inflammatory Bowel Diseases, 2018, 24, 546-551	4.5	13
11	Implementation of prospective, surgeon-driven, risk-based pathway for pancreatoduodenectomy results in improved clinical outcomes and first year cost savings of \$1 million. <i>Surgery</i> , <b>2018</b> , 163, 495-50	o <b>₹</b> .6	11
10	Impact of Operative Time on Outcomes after Pancreatic Resection: A Risk-Adjusted Analysis Using the American College of Surgeons NSQIP Database. <i>Journal of the American College of Surgeons</i> , <b>2018</b> , 226, 844-857.e3	4.4	25
9	Novel use of REDCap to develop an advanced platform to display predictive analytics and track compliance with Enhanced Recovery After Surgery for pancreaticoduodenectomy. <i>International Journal of Medical Informatics</i> , <b>2018</b> , 119, 54-60	5.3	8
8	Indications and Perioperative Outcomes for Pancreatectomy with Arterial Resection. <i>Journal of the American College of Surgeons</i> , <b>2018</b> , 227, 255-269	4.4	60
7	Minimally Invasive Surgical Site Infection in Procedure-Targeted ACS NSQIP Pancreaticoduodenectomies. <i>Journal of Surgical Research</i> , <b>2019</b> , 233, 183-191	2.5	6
6	Gastric cancer following pancreaticoduodenectomy: Experience from a high-volume center and review of existing literature. <i>Surgery Open Science</i> , <b>2020</b> , 2, 32-40	1.2	0
5	Laparoscopic Pancreaticoduodenectomy: Outcomes and Experience of 550 Patients in a Single Institution. <i>Annals of Surgical Oncology</i> , <b>2020</b> , 27, 4562-4573	3.1	12

## CITATION REPORT

- 4 Cystic Lesions of the Pancreas. **2021**, 1917-1931
- 3 Cystic Lesions of the Pancreas. **2021**, 1-15
- Contemporary outcomes of pancreaticoduodenectomy for benign and precancerous cystic lesions.. *Hpb*, **2022**,

3.8 1

Pancreatoduodenectomy for suspected malignancy: nonmalignant histology confers increased risk of serious morbidity.