Effect of an In-Hospital Multifaceted Clinical Pharmacia Readmission

JAMA Internal Medicine 178, 375 DOI: 10.1001/jamainternmed.2017.8274

Citation Report

#	Article	IF	CITATIONS
1	Multifaceted Pharmacistâ€led Interventions in the Hospital Setting: A Systematic Review. Basic and Clinical Pharmacology and Toxicology, 2018, 123, 363-379.	1.2	30
2	Enough raisins in the sun and dreams deferred: transitional care needs hospital pharmacy leadership now!. Journal of Pharmacy Practice and Research, 2018, 48, 287-290.	0.5	2
3	Current perspectives on pharmacist home visits: do we keep reinventing the wheel?. Integrated Pharmacy Research & Practice, 2018, Volume 7, 141-159.	0.9	14
4	Medication review plus person-centred care: a feasibility study of a pharmacy-health psychology dual intervention to improve care for people living with dementia. BMC Psychiatry, 2018, 18, 340.	1.1	21
5	Medication reconciliation: ineffective or hard to implement?. BMJ Quality and Safety, 2018, 27, 947-949.	1.8	9
6	Enough Power to Build a Strong Case for Clinical Pharmacy Services?. JAMA Internal Medicine, 2018, 178, 864.	2.6	0
7	Effect of a Remotely Delivered Tailored Multicomponent Approach to Enhance Medication Taking for Patients With Hyperlipidemia, Hypertension, and Diabetes. JAMA Internal Medicine, 2018, 178, 1182.	2.6	71
8	Prevalence and Costs of Discharge Diagnoses in Inpatient General Internal Medicine: a Multi-center Cross-sectional Study. Journal of General Internal Medicine, 2018, 33, 1899-1904.	1.3	37
9	Enough Power to Build a Strong Case for Clinical Pharmacy Services?—Reply. JAMA Internal Medicine, 2018, 178, 864.	2.6	0
10	Medication Regimen Complexity and Hospital Readmission in Older Adults With Chronic Kidney Disease. Annals of Pharmacotherapy, 2019, 53, 28-34.	0.9	18
11	Evaluation of drugâ€related problems and subsequent clinical pharmacists' interventions at a Swiss university hospital. Journal of Clinical Pharmacy and Therapeutics, 2019, 44, 924-931.	0.7	23
12	Community-Based Pharmacy Practice Innovation and the Role of the Community-Based Pharmacist Practitioner in the United States. Pharmacy (Basel, Switzerland), 2019, 7, 106.	0.6	100
13	The Case Against. Journal of Pharmacy Practice and Research, 2019, 49, 285-288.	0.5	1
14	Pharmacist linkage in care transitions: From academic medical center to community. Journal of the American Pharmacists Association: JAPhA, 2019, 59, 896-904.	0.7	16
15	Multidrug use positively correlates with high-risk prescriptions in the Japanese elderly: a longitudinal study. Journal of Pharmaceutical Health Care and Sciences, 2019, 5, 20.	0.4	13
16	Effect of an Electronic Medication Reconciliation Intervention on Adverse Drug Events. JAMA Network Open, 2019, 2, e1910756.	2.8	36
17	The role of the clinical pharmacist in the prevention of potential drug interactions in geriatric heart failure patients. International Journal of Clinical Pharmacy, 2019, 41, 1555-1561.	1.0	12
18	Effect of a Pharmacist-Driven Medication Management Intervention Among Older Adults in an Inpatient Setting. Drugs and Aging, 2019, 36, 371-378.	1.3	10

#	Article	IF	CITATIONS
19	<p>Pharmacists and medication reconciliation: a review of recent literature</p> . Integrated Pharmacy Research & Practice, 2019, Volume 8, 39-45.	0.9	30
20	Effects of a clinical medication review focused on personal goals, quality of life, and health problems in older persons with polypharmacy: A randomised controlled trial (DREAMeR-study). PLoS Medicine, 2019, 16, e1002798.	3.9	72
21	External validation of a clinical pharmacy intervention in geriatric inpatients: a controlled study. International Journal of Clinical Pharmacy, 2019, 41, 853-858.	1.0	2
22	The effect of a pharmacy-led transitional care program on medication-related problems post-discharge: A before—After prospective study. PLoS ONE, 2019, 14, e0213593.	1.1	50
23	Medicine optimization strategy in an acute geriatric unit: The pharmacist in the geriatric team. Geriatrics and Gerontology International, 2019, 19, 530-536.	0.7	11
24	Evaluation of a Novel Audit Tool for Medication Reconciliation at Hospital Discharge. Canadian Journal of Hospital Pharmacy, 2019, 72, .	0.1	0
25	Introduction to Bayesian statistics: a practical framework for clinical pharmacists. European Journal of Hospital Pharmacy, 2019, 28, ejhpharm-2019-002055.	0.5	0
26	Efficacy of pharmacists' assessment and intervention based on Screening Tool for Older Persons' Appropriate Prescriptions for Japanese compared with Screening Tool for Older Persons' Appropriate Prescriptions for Japanese criteria version 2 in older patients with cardiovascular disease. Geriatrics and Gerontology International. 2019. 19. 1101-1107.	0.7	9
27	Effectiveness of a pharmacist-led quality improvement program to reduce medication errors during hospital discharge. Pharmacy Practice, 2019, 17, 1501.	0.8	7
28	Pharmacy in the 21st century: Enhancing the impact of the profession of pharmacy on people's lives in the context of health care trends, evidence and policies. Canadian Pharmacists Journal, 2019, 152, 45-53.	0.4	39
29	Effect of pharmacist intervention on blood conservation therapy in total knee arthroplasty: A retrospective, observational study. Basic and Clinical Pharmacology and Toxicology, 2019, 124, 681-690.	1.2	5
30	Pharmacistâ€led medication education groups on an inpatient psychiatric unit—Impact on readmissions and emergency department visits. JACCP Journal of the American College of Clinical Pharmacy, 2019, 2, 228-235.	0.5	7
31	Reducing hospital admissions for adverse drug events through coordinated pharmacist care: learning from Hawai'i without a field trip. BMJ Quality and Safety, 2019, 28, 91-93.	1.8	2
32	Kidney function estimates using cystatin C versus creatinine: Impact on medication prescribing in acutely hospitalized elderly patients. Basic and Clinical Pharmacology and Toxicology, 2019, 124, 466-478.	1.2	19
33	Enhanced communication between inpatient and community pharmacists to optimize medication management during transitions of care. Journal of the American Pharmacists Association: JAPhA, 2019, 59, 79-86.e1.	0.7	10
34	Costâ€consequence analysis evaluating multifaceted clinical pharmacist intervention targeting patient transitions of care from hospital to primary care. JACCP Journal of the American College of Clinical Pharmacy, 2019, 2, 123-130.	0.5	8
36	Pharmacists' Perceptions on Their Role, Activities, Facilitators, and Barriers to Practicing in a Post-Intensive Care Recovery Clinic. Hospital Pharmacy, 2020, 55, 119-125.	0.4	9
37	Physician's feedback on a clinical pharmacy program on geriatric wards. Acta Clinica Belgica, 2020, 75, 321-328.	0.5	3

#	Article	IF	CITATIONS
38	Improving psoriasis patients' adherence to topical drugs: a systematic review. Journal of Dermatological Treatment, 2020, 31, 776-785.	1.1	14
39	Aiming Beyond: A Pharmacist Impact on 90-Day Readmissions and Clinical Outcomes Within a Family Medicine Service. Journal of Pharmacy Practice, 2020, 33, 738-744.	0.5	4
40	Pharmacists' and older adults' perspectives on the benefits and barriers of Home Medicines Reviews – a qualitative study. Journal of Health Services Research and Policy, 2020, 25, 77-85.	0.8	5
41	Clinical Pharmacy Services in Older Inpatients: An Evidence-Based Review. Drugs and Aging, 2020, 37, 161-174.	1.3	31
42	Impact of a transitions of care pilot service established by pharmacy residents within an academic medical center. Journal of the American Pharmacists Association: JAPhA, 2020, 60, 87-92.e2.	0.7	6
43	Community pharmacy medication review, death and re-admission after hospital discharge: a propensity score-matched cohort study. BMJ Quality and Safety, 2020, 29, 41-51.	1.8	20
44	Quantifying Clinical Pharmacist Activities in a Tertiary Care Hospital Using Key Performance Indicators. Hospital Pharmacy, 2021, 56, 321-327.	0.4	1
45	Effects of stratified medication review in high-risk patients at admission to hospital: a randomised controlled trial. Therapeutic Advances in Drug Safety, 2020, 11, 204209862095714.	1.0	9
46	Medication reviews in hospitalized patients: a qualitative study on perceptions of primary and secondary care providers on interprofessional collaboration. BMC Health Services Research, 2020, 20, 902.	0.9	5
47	Protocol of a randomised controlled trial on the efficacy of medication optimisation in elderly inpatients: medication optimisation protocol efficacy for geriatric inpatients (MPEG) trial. BMJ Open, 2020, 10, e041125.	0.8	4
48	Expanding Pharmacy Services With an Intern Program at an Academic Medical Center. Journal of Pharmacy Practice, 2020, , 089719002094942.	0.5	1
49	The Impact of a Primary Care, Pharmacist-Driven Intervention in Patients with Chronic Non-Cancer Pain—A Pilot Study. Pharmacy (Basel, Switzerland), 2020, 8, 113.	0.6	0
50	Impact of pharmacist interventions during transition of care in older adults to reduce the use of healthcare services: A scoping review. Research in Social and Administrative Pharmacy, 2021, 17, 1361-1372.	1.5	7
51	Effect of medication reconciliation on patient reported potential adverse events after hospital discharge. Research in Social and Administrative Pharmacy, 2021, 17, 1426-1432.	1.5	3
52	A stepped wedge trial of efficacy and scalability of a virtual clinical pharmacy service (VCPS) in rural and remote NSW health facilities. BMC Health Services Research, 2020, 20, 373.	0.9	7
53	Impact of collaborative clinician visits on postdischarge total cost of care in a polypharmacy population. American Journal of Health-System Pharmacy, 2020, 77, 1859-1865.	0.5	6
54	Postcritical illness vulnerability. Current Opinion in Critical Care, 2020, 26, 500-507.	1.6	5
55	Deprescribing in geriatric inpatients is associated with a lower readmission risk: a case control study. International Journal of Clinical Pharmacy, 2020, 42, 1374-1378.	1.0	3

#	Article	IF	Citations
56	Satisfaction and needs of pharmacists in prescription-checking training: a cross-sectional survey. Journal of International Medical Research, 2020, 48, 030006052096581.	0.4	2
57	Investigating the effect of clinical pharmacist intervention in transitions of care on drug-related hospital readmissions among the elderly: study protocol for a randomised controlled trial. BMJ Open, 2020, 10, e036650.	0.8	6
58	Interventions for improving medication-taking ability and adherence in older adults prescribed multiple medications. The Cochrane Library, 2020, 2020, CD012419.	1.5	69
59	Extended Venous Thromboembolism Prophylaxis in Medically Ill Patients: An NATF Anticoagulation Action Initiative. American Journal of Medicine, 2020, 133, 1-27.	0.6	18
60	Evaluation of a multidisciplinary approach to reduce internal medicine readmissions using a readmission prediction index. American Journal of Health-System Pharmacy, 2020, 77, 950-957.	0.5	4
61	Failure to follow medication changes made at hospital discharge is associated with adverse events in 30 days. Health Services Research, 2020, 55, 512-523.	1.0	15
62	A Collaborative Medication Review Including Deprescribing for Older Patients in an Emergency Department: A Longitudinal Feasibility Study. Journal of Clinical Medicine, 2020, 9, 348.	1.0	28
63	Medication Counselling in Older Patients Prior to Hospital Discharge: A Systematic Review. Drugs and Aging, 2020, 37, 635-655.	1.3	11
64	Translation and psychometric validation of a Danish version of the medication-related quality of life scale. International Journal of Clinical Pharmacy, 2020, 42, 667-676.	1.0	1
65	Thirtyâ€Ðay Hospital Readmissions in a Care Transitions Program for Highâ€Risk Older Adults. Journal of the American Geriatrics Society, 2020, 68, 1307-1312.	1.3	8
66	Successful care transitions for older people: a systematic review and meta-analysis of the effects of interventions that support medication continuity. Age and Ageing, 2020, 49, 558-569.	0.7	76
67	A developmental evaluation of an intraprofessional Pharmacy Communication Partnership (PROMPT) to improve transitions in care from hospital to community: A mixed-methods study. BMC Health Services Research, 2020, 20, 99.	0.9	9
68	Credentialing and privileging for clinical pharmacists. JACCP Journal of the American College of Clinical Pharmacy, 2020, 3, 133-144.	0.5	3
69	Impact of a Multifaceted Pharmacist-Led Intervention on Antimicrobial Stewardship in a Gastroenterology Ward: A Segmented Regression Analysis. Frontiers in Pharmacology, 2020, 11, 442.	1.6	12
70	Both New and Chronic Potentially Inappropriate Medications Continued at Hospital Discharge Are Associated With Increased Risk of Adverse Events. Journal of the American Geriatrics Society, 2020, 68, 1184-1192.	1.3	38
71	Protocol for a randomised controlled trial evaluating the impact of a community pharmacy discharge medication reconciliation service on unplanned hospital readmissions – The DCMedsRec trial. Research in Social and Administrative Pharmacy, 2021, 17, 460-465.	1.5	0
72	Medication-related interventions delivered both in hospital and following discharge: a systematic review and meta-analysis. BMJ Quality and Safety, 2021, 30, 146-156.	1.8	20
73	Cost of contact: redesigning healthcare in the age of COVID. BMJ Quality and Safety, 2021, 30, 236-239.	1.8	29

#	Article	IF	CITATIONS
74	The effect of an inpatient geriatric stewardship on drug-related problems reported by patients after discharge. International Journal of Clinical Pharmacy, 2021, 43, 191-202.	1.0	5
75	Factors associated with the number of clinical pharmacy recommendations: findings from an observational study in geriatric inpatients. Acta Clinica Belgica, 2021, 76, 119-126.	0.5	6
76	The Impact of Medication Reviews Conducted in Primary Care on Hospital Admissions and Mortality: An Observational Follow-Up of a Randomized Controlled Trial. Drug, Healthcare and Patient Safety, 2021, Volume 13, 1-9.	1.0	2
77	Guidance for appropriate use of psychotropic drugs in older people. European Geriatric Medicine, 2021, 12, 577-583.	1.2	6
78	Pharmaceutical Discharge Management: Implementation in Swiss Hospitals Compared to International Guidelines. Pharmacy (Basel, Switzerland), 2021, 9, 33.	0.6	3
79	Tools and tactics for postdischarge medication management interventions. American Journal of Health-System Pharmacy, 2021, 78, 619-632.	0.5	4
80	Medication review interventions to reduce hospital readmissions in older people. Journal of the American Geriatrics Society, 2021, 69, 1646-1658.	1.3	43
81	A Collaborative Deprescribing Intervention in a Subacute Medical Outpatient Clinic: A Pilot Randomized Controlled Trial. Metabolites, 2021, 11, 204.	1.3	10
82	Effects of Hospital-Based Comprehensive Medication Reviews Including Postdischarge Follow-up on Older Patients' Use of Health Care. JAMA Network Open, 2021, 4, e216303.	2.8	22
83	Medication-Related Hospital Readmissions Within 30â€,Days of Discharge: Prevalence, Preventability, Type of Medication Errors and Risk Factors. Frontiers in Pharmacology, 2021, 12, 567424.	1.6	26
84	Multidisciplinary telephone conferences about medication therapy after discharge of older inpatients: a feasibility study. International Journal of Clinical Pharmacy, 2021, 43, 1381-1393.	1.0	1
85	Optimization of Medication by Pharmacists in Older People With Multimorbidity for Improved Outcomes—Mirage or Reality?. JAMA Network Open, 2021, 4, e216392.	2.8	2
86	Development of an Emergency Revisit Score for Patients With Drug-Related Problems. Journal of Pharmacy Technology, 2021, 37, 875512252110117.	0.5	1
87	Effectiveness of Clinical Pharmacist Service on Drug-Related Problems and Patient Outcomes for Hospitalized Patients with Chronic Kidney Disease: A Randomized Controlled Trial. Journal of Clinical Medicine, 2021, 10, 1788.	1.0	12
88	Collaborative Medication Reviews to Identify Inappropriate Prescribing in Pre-Admission Medications at Emergency Department Short-Term Ward. Integrated Pharmacy Research & Practice, 2021, Volume 10, 23-32.	0.9	2
89	A narrative review of evidence to guide deprescribing among older adults. Journal of General and Family Medicine, 2021, 22, 182-196.	0.3	5
90	Effects of hospital pharmacist interventions on health outcomes in older polymedicated inpatients: a scoping review. European Geriatric Medicine, 2021, 12, 509-544.	1.2	11
91	Association of pharmacist counseling with adherence, 30-day readmission, and mortality: A systematic review and meta-analysis of randomized trials. Journal of the American Pharmacists Association: JAPhA, 2021, 61, 340-350.e5.	0.7	7

#	Article	IF	CITATIONS
92	Clinical pharmacists' services, role and acceptance: a national Swedish survey. European Journal of Hospital Pharmacy, 2021, 28, ejhpharm-2020-002600.	0.5	1
93	Polypharmacy and Malnutrition Management of Elderly Perioperative Patients with Cancer: A Systematic Review. Nutrients, 2021, 13, 1961.	1.7	27
94	Team-based care: A clinical pharmacist and family physicians. Canadian Pharmacists Journal, 2021, 154, 242-247.	0.4	3
95	Impact of pharmacist and physician collaborations in primary care on reducing readmission to hospital: A systematic review and meta-analysis. Research in Social and Administrative Pharmacy, 2022, 18, 2922-2943.	1.5	11
96	The Pharmacist Discharge Care (PHARM-DC) study: A multicenter RCT of pharmacist-directed transitional care to reduce post-hospitalization utilization. Contemporary Clinical Trials, 2021, 106, 106419.	0.8	8
97	Optimizing Therapy to Prevent Avoidable Hospital Admissions in Multimorbid Older Adults (OPERAM): cluster randomised controlled trial. BMJ, The, 2021, 374, n1585.	3.0	84
98	Using soluble urokinase plasminogen activator receptor to stratify patients for medication review in the emergency department. British Journal of Clinical Pharmacology, 2021, , .	1.1	3
99	Supporting medicines management for older people at care transitions – a theory-based analysis of a systematic review of 24 interventions. BMC Health Services Research, 2021, 21, 890.	0.9	0
100	Effects of a transitional care program on medication adherence in an older cardiac population: a randomized clinical trial. British Journal of Clinical Pharmacology, 2021, , .	1.1	0
101	Maximizing acceptance of clinical pharmacy recommendations to reduce length of hospital stay in a private hospital from Amman, Jordan. BMC Health Services Research, 2021, 21, 937.	0.9	1
102	Effect of Medication Reconciliation at Hospital Admission on 30-Day Returns to Hospital. JAMA Network Open, 2021, 4, e2124672.	2.8	15
103	Optimization of Nutrition And Medication (OptiNAM) for acutely admitted older patients: protocol for a randomized single-blinded controlled trial. Trials, 2021, 22, 616.	0.7	11
104	Commentary: how person-centred is pharmaceutical care?. International Journal of Clinical Pharmacy, 2022, 44, 270-275.	1.0	7
105	Medication Reconciliation—Too Much or Not Enough?. JAMA Network Open, 2021, 4, e2125272.	2.8	2
106	Persistence of Effect of Medication Review on Potentially Inappropriate Prescriptions in Older Patients Following Hospital Discharge. Drugs and Aging, 2021, 38, 243-252.	1.3	5
107	Impact of Pharmacistâ€led Discharge Counseling on Hospital Readmission and Emergency Department Visits: A Systematic Review and Metaâ€analysis. Journal of Hospital Medicine, 2020, 15, 52-59.	0.7	10
108	<p>Drug Therapy Problems and the Role of Clinical Pharmacist in Surgery Ward: Prospective Observational and Interventional Study</p> . Drug, Healthcare and Patient Safety, 2020, Volume 12, 71-83.	1.0	22
109	Hospital and Community Pharmacists' Views of and Perspectives on the Establishment of an Intraprofessional Collaboration in the Transition of Care for Newly Discharged Patients. Innovations in Pharmacy, 2020, 11, 4.	0.2	3

#	Article	IF	CITATIONS
110	Effect of clinical pharmacist encounters in the transitional care clinic on 30-day re-admissions: A retrospective study. AIMS Public Health, 2019, 6, 345-354.	1.1	2
111	Surviving Sepsis Campaign: International Guidelines for Management of Sepsis and Septic Shock 2021. Critical Care Medicine, 2021, 49, e1063-e1143.	0.4	927
112	Surviving sepsis campaign: international guidelines for management of sepsis and septic shock 2021. Intensive Care Medicine, 2021, 47, 1181-1247.	3.9	1,503
113	Polypharmacy Management Toward High Value Care. The Journal of the Japanese Society of Internal Medicine, 2020, 109, 1002-1008.	0.0	0
114	Assessment of requests for medication-related follow-up after hospital discharge, and the relation to unplanned hospital revisits, in older patients: a multicentre retrospective chart review. BMC Geriatrics, 2021, 21, 618.	1.1	1
115	Optimizing pharmacotherapy on geriatric hospital units in Belgium – a national survey. Acta Clinica Belgica, 2020, , 1-8.	0.5	3
116	Effect of medicines management versus standard care on readmissions in multimorbid patients: a randomised controlled trial. BMJ Open, 2020, 10, e041558.	0.8	12
117	Implementation of a multi-interventional approach to improve medication safety in older hospitalized patients: feasibility and impact on 30-day rehospitalization rate. Annales Pharmaceutiques Francaises, 2021, , .	0.4	0
118	Evaluation of changes in prescription among Japanese elderly patients before and after transition to home care. Journal of General and Family Medicine, 2022, 23, 94-100.	0.3	2
119	Prospective observational study of medication reviews in internal medicine wards: evaluation of drug-related problems. European Journal of Hospital Pharmacy, 2021, 28, e128-e133.	0.5	1
120	Evaluation of a Novel Audit Tool for Medication Reconciliation at Hospital Discharge. Canadian Journal of Hospital Pharmacy, 2019, 72, 421-427.	0.1	1
121	For which patient subgroups are there positive outcomes from a medication review? A systematic review. Pharmacy Practice, 2020, 18, 1976.	0.8	1
122	Potential drug interactions in adults living in Manaus: a real-world comparison of two databases, 2019. Turkish Journal of Pharmaceutical Sciences, 2021, .	0.6	0
123	Control in the Hospital by Extensive Clinical rules for Unplanned hospitalizations in older Patients (CHECkUP); study design of a multicentre randomized study. BMC Geriatrics, 2022, 22, 36.	1.1	6
124	For which patient subgroups does exist positive outcomes from a medication review? A systematic review. Pharmacy Practice, 2020, 18, 1976.	0.8	6
125	Effect and associated factors of a clinical pharmacy model in the incidence of medication errors in the hospital Pablo Tobón Uribe eacpharmodel study: stepped wedge randomized controlled Trial (NCT03338725). International Journal of Clinical Pharmacy, 2022, , 1.	1.0	0
126	Influence of Clinical Pharmacist's Interventions on Clinical Outcomes of Patients With Pneumonia in the Emergency Department of Tertiary Care Healthcare Setting. Infectious Diseases in Clinical Practice, 2022, 30, 1-6.	0.1	0
127	Intervention by a clinical pharmacist carried out at discharge of elderly patients admitted to the internal medicine department: influence on readmissions and costs. BMC Health Services Research, 2022, 22, 167.	0.9	3

#	Article	IF	CITATIONS
128	SGLT2 Inhibitors in Older Adults with Heart Failure with Preserved Ejection Fraction. Drugs and Aging, 2022, 39, 185-190.	1.3	4
129	A qualitative dual-site analysis of the pharmacist discharge care (PHARM-DC) intervention using the CFIR framework. BMC Health Services Research, 2022, 22, 186.	0.9	0
130	The role of pharmacists in geriatric teams: the time is now. European Geriatric Medicine, 2022, , 1.	1.2	0
131	Quality measures of clinical pharmacy services during transitions of care. JACCP Journal of the American College of Clinical Pharmacy, 2021, 4, 883-907.	0.5	9
132	Discharge planning from hospital. The Cochrane Library, 2022, 2022, CD000313.	1.5	25
133	Improving care transitions: Is readmission reduction possible? Or even desirable?. Journal of Hospital Medicine, 2022, 17, 229-230.	0.7	0
134	Individualized Medication Review in Older People with Multimorbidity: A Comparative Analysis between Patients Living at Home and in a Nursing Home. International Journal of Environmental Research and Public Health, 2022, 19, 3423.	1.2	9
135	Implementation of a pharmacistâ€led transitional pharmaceutical care programme: Process evaluation of Medication Actions to Reduce hospital admissions through a collaboration between Community and Hospital pharmacists (MARCH). Journal of Clinical Pharmacy and Therapeutics, 2022, 47, 1049-1069.	0.7	2
136	Pharmacist-Physician Split-Shared Visits in a Federally Qualified Health Center: Lessons Learned from a Novel Reimbursement Model using Telehealth. Innovations in Pharmacy, 2022, 13, 12.	0.2	1
137	Acceptance Factors for In-Hospital Pharmacist Interventions in Daily Practice: A Retrospective Study. Frontiers in Pharmacology, 2022, 13, 811289.	1.6	10
138	Effects of a comprehensive medication review intervention on healthâ€related quality of life and other clinical outcomes in geriatric outpatients with polypharmacy: A pragmatic randomized clinical trial. British Journal of Clinical Pharmacology, 2022, 88, 3360-3369.	1.1	10
139	Effectiveness of pharmacist intervention for deprescribing potentially inappropriate medications: a prospective observational study. Journal of Pharmaceutical Health Care and Sciences, 2022, 8, 12.	0.4	5
140	Assessment of the potential impact of resolving drug-related problems by clinical pharmacists in Japan: a retrospective observational study. Journal of Pharmaceutical Health Care and Sciences, 2021, 7, 47.	0.4	2
141	Is a High Medication Risk Score Associated With Increased Risk of 30-Day Readmission? A Population-Based Cohort Study From CROSS-TRACKS. Journal of Patient Safety, 2021, Publish Ahead of Print, .	0.7	0
142	Intervention fidelity and process outcomes of the IMMENSE study, a pharmacistâ€led interdisciplinary intervention to improve medication safety in older hospitalized patients. Journal of Clinical Pharmacy and Therapeutics, 2022, 47, 619-627.	0.7	3
143	Importance of medication reconciliation, even in the absence of positive data. European Journal of Hospital Pharmacy, 2021, , ejhpharm-2021-003091.	0.5	1
144	Assessing the impact of adding pharmacist management services to an existing discharge planning program on 30-day readmissions. Journal of the American Pharmacists Association: JAPhA, 2022, 62, 734-739.	0.7	3
145	Evaluation of medication risk at the transition of care: a cross-sectional study of patients from the ICU to the non-ICU setting. BMJ Open, 2022, 12, e049695.	0.8	5

#	ARTICLE	IF	CITATIONS
146	La résolution du bilan comparatif des médicaments. Canadian Journal of Hospital Pharmacy, 2022, 75, 157-158.	0.1	0
147	Impact of pharmacist participation in the patient care team on value-based health measures. American Journal of Health-System Pharmacy, 2022, 79, 1645-1651.	0.5	2
148	Potentially Inappropriate Prescribing in Hospitalized Older Adult High-Cost Health Care Users: A Pilot Study. Canadian Journal of Hospital Pharmacy, 2022, 75, 219-224.	0.1	3
149	Resolving Medication Reconciliation. Canadian Journal of Hospital Pharmacy, 2022, 75, 155-156.	0.1	0
150	The effect of a trAnSitional Pharmacist Intervention in geRiatric inpatients on hospital visits after dischargE (ASPIRE): Protocol for a randomized controlled trial. Contemporary Clinical Trials, 2022, 119, 106853.	0.8	5
151	Cost-effectiveness analysis of implementing a secondary prevention programme in those patients who visited an emergency department for drug-related problems. International Journal of Pharmacy Practice, 2022, 30, 434-440.	0.3	5
152	Interventions to Reduce Hospital Readmissions in Older African Americans: A Systematic Review of Studies Including African American Patients. Journal of Racial and Ethnic Health Disparities, 0, , .	1.8	0
154	Medication Review and Enhanced Information Transfer at Discharge of Older Patients with Polypharmacy: a Cluster-Randomized Controlled Trial in Swiss Hospitals. Journal of General Internal Medicine, 2023, 38, 610-618.	1.3	3
155	Developing a pharmacist-led intervention to provide transitional pharmaceutical care for hospital discharged patients: A collaboration between hospital and community pharmacists. Exploratory Research in Clinical and Social Pharmacy, 2022, 7, 100177.	0.6	1
156	Effect of pharmacist intervention on antibiotic prophylaxis in orthopedic internal fixation: A retrospective study. Research in Social and Administrative Pharmacy, 2023, 19, 301-307.	1.5	3
157	Consensus validation of a screening tool for cardiovascular pharmacotherapy in geriatric patients: the RASP_CARDIO list (Rationalization of Home Medication by an Adjusted STOPP list in Older) Tj ETQq0 0 0 rgf	3T / D zverloo	ck 20 Tf 50 33
158	Interdisciplinary collaboration across secondary and primary care to improve medication safety in the elderly (The IMMENSE study) – a randomized controlled trial. BMC Health Services Research, 2022, 22, .	0.9	3
160	The Effect of the Drug-Related Problems Prevention Bundle on Early Readmissions in Patients From the Emergency Department: A Randomized Clinical Trial. Annals of Pharmacotherapy, 2023, 57, 1025-1035.	0.9	4
162	Characterization of Medication Discrepancies and Interventions Resulting From Pharmacy-Led Medication Reconciliation in the Critical Care Setting. Journal of Pharmacy Practice, 0, , 089719002211497.	0.5	1
163	Medication review in hospitalised patients to reduce morbidity and mortality. The Cochrane Library, 2023, 2023, .	1.5	5
164	Use of complete medication history to identify and correct transitions-of-care medication errors at psychiatric hospital admission. PLoS ONE, 2023, 18, e0279903.	1.1	2
166	Evaluation of a multifaceted medication review in older patients in the outpatient setting: a before-and-after study. International Journal of Clinical Pharmacy, 0, , .	1.0	0
167	Perspectives on medication safety from vulnerable older migrants and their relatives—A qualitative explorative study. Basic and Clinical Pharmacology and Toxicology, 2023, 132, 392-402.	1.2	0

#	ARTICLE Impact of Clinical Pharmacist Consultations on Postoperative Pain in Ambulatory Surgery.	IF	CITATIONS
168	International Journal of Environmental Research and Public Health, 2023, 20, 3967.	1.2	2
170	Long-Term Sequelae of Sepsis. , 2023, , 301-312.		0
172	Readmission outcomes following infectious hospitalization: same-care unit performed better than different-care unit. BMC Health Services Research, 2023, 23, .	0.9	0
173	Uptake of pharmacist recommendations by patients after discharge: Implementation study of a patient-centered medicines review service. BMC Geriatrics, 2023, 23, .	1.1	1
174	Assessment of drug-related problems at the emergency department in older patients living with frailty: pharmacist-led medication reviews within a geriatric care team. BMC Geriatrics, 2023, 23, .	1.1	1
177	[Translated article] Usefulness of ICD-10 diagnostic triggers to identify adverse drug events in emergency care. Farmacia Hospitalaria, 2023, 47, T75-T79.	0.6	Ο
180	Inappropriate Prescription of Medicines. Practical Issues in Geriatrics, 2023, , 47-58.	0.3	0
183	Optimizing Medication Safety for Patients at Transitions of Care. , 2023, , 1-28.		0
192	Optimizing Medication Safety for Patients at Transitions of Care. , 2023, , 977-1004.		0