Jeffrey A Kline

List of Publications by Year
in descending order

125 papers	12,209 citations	30070 54 h-index	24982 109 g-index
130 all docs	130 docs citations	130 times ranked	10960 citing authors

#	Article	IF	Citations
1	Management of Massive and Submassive Pulmonary Embolism, Iliofemoral Deep Vein Thrombosis, and Chronic Thromboembolic Pulmonary Hypertension. Circulation, 2011, 123, 1788-1830.	1.6	1,842
2	Lactate Clearance vs Central Venous Oxygen Saturation as Goals of Early Sepsis Therapy<subtitle>A Randomized Clinical Trial</subtitle>. JAMA - Journal of the American Medical Association, 2010, 303, 739.	7.4	867
3	The Sequential Organ Failure Assessment score for predicting outcome in patients with severe sepsis and evidence of hypoperfusion at the time of emergency department presentation*. Critical Care Medicine, 2009, 37, 1649-1654.	0.9	659
4	Clinical Characteristics, Management, and Outcomes of Patients Diagnosed With Acute Pulmonary Embolism in the Emergency Department. Journal of the American College of Cardiology, 2011, 57, 700-706.	2.8	438
5	Randomized, controlled trial of immediate versus delayed goal-directed ultrasound to identify the cause of nontraumatic hypotension in emergency department patients*. Critical Care Medicine, 2004, 32, 1703-1708.	0.9	405
6	2-Hour Accelerated Diagnostic Protocol to Assess Patients With Chest Pain Symptoms Using Contemporary Troponins as the Only Biomarker. Journal of the American College of Cardiology, 2012, 59, 2091-2098.	2.8	361
7	Association between timing of antibiotic administration and mortality from septic shock in patients treated with a quantitative resuscitation protocol*. Critical Care Medicine, 2011, 39, 2066-2071.	0.9	317
8	High discordance of chest x-ray and computed tomography for detection of pulmonary opacities in ED patients: implications for diagnosing pneumonia. American Journal of Emergency Medicine, 2013, 31, 401-405.	1.6	257
9	Prospective External Validation of the Clinical Effectiveness of an Emergency Department-Based Early Goal-Directed Therapy Protocol for Severe Sepsis and Septic Shock. Chest, 2007, 132, 425-432.	0.8	234
10	Incidence of Contrast-Induced Nephropathy after Contrast-Enhanced Computed Tomography in the Outpatient Setting. Clinical Journal of the American Society of Nephrology: CJASN, 2010, 5, 4-9.	4.5	230
11	Determination of Left Ventricular Function by Emergency Physician Echocardiography of Hypotensive Patients. Academic Emergency Medicine, 2002, 9, 186-193.	1.8	228
12	Prospective Evaluation of Right Ventricular Function and Functional Status 6 Months After Acute Submassive Pulmonary Embolism. Chest, 2009, 136, 1202-1210.	0.8	227
13	The Chest Pain Choice Decision Aid. Circulation: Cardiovascular Quality and Outcomes, 2012, 5, 251-259.	2.2	226
14	D-Dimer Concentrations in Normal Pregnancy: New Diagnostic Thresholds Are Needed. Clinical Chemistry, 2005, 51, 825-829.	3.2	205
15	Procalcitonin Test in the Diagnosis of Bacteremia: A Meta-analysis. Annals of Emergency Medicine, 2007, 50, 34-41.	0.6	189
16	Serial Procalcitonin Predicts Mortality in Severe Sepsis Patients: Results From the Multicenter Procalcitonin MOnitoring SEpsis (MOSES) Study. Critical Care Medicine, 2017, 45, 781-789.	0.9	187
17	Nontraumatic out-of-hospital hypotension predicts inhospital mortality. Annals of Emergency Medicine, 2004, 43, 106-113.	0.6	183
18	Insulin-Glucose as Adjunctive Therapy for Severe Calcium Channel Antagonist Poisoning. Journal of Toxicology: Clinical Toxicology, 1999, 37, 463-474.	1.5	179

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19	Emergency echocardiography to detect pericardial effusion in patients in PEA and near-PEA states. Resuscitation, 2003, 59, 315-318.	3.0	177
20	The effect of a quantitative resuscitation strategy on mortality in patients with sepsis: A meta-analysis*. Critical Care Medicine, 2008, 36, 2734-2739.	0.9	170
21	Assessment of Cardiac Stress From Massive Pulmonary Embolism With 12-Lead ECG. Chest, 2001, 120, 474-481.	0.8	161
22	Echocardiographic and functional cardiopulmonary problems 6 months after first-time pulmonary embolism in previously healthy patients. European Heart Journal, 2007, 28, 2517-2524.	2.2	144
23	Factors Associated With Positive Dâ€dimer Results in Patients Evaluated for Pulmonary Embolism. Academic Emergency Medicine, 2010, 17, 589-597.	1.8	141
24	Emergency Department Hypotension Predicts Sudden Unexpected In-hospital Mortality. Chest, 2006, 130, 941-946.	0.8	135
25	Whole Blood Lactate Kinetics in Patients Undergoing Quantitative Resuscitation for Severe Sepsis and Septic Shock. Chest, 2013, 143, 1548-1553.	0.8	125
26	DIAGNOSTIC ACCURACY OF LEFT VENTRICULAR FUNCTION FOR IDENTIFYING SEPSIS AMONG EMERGENCY DEPARTMENT PATIENTS WITH NONTRAUMATIC SYMPTOMATIC UNDIFFERENTIATED HYPOTENSION. Shock, 2005, 24, 513-517.	2.1	112
27	Outcomes of patients undergoing early sepsis resuscitation for cryptic shock compared with overt shock. Resuscitation, 2011, 82, 1289-1293.	3.0	112
28	Prospective Study of the Incidence of Contrastâ€induced Nephropathy Among Patients Evaluated for Pulmonary Embolism by Contrastâ€enhanced Computed Tomography. Academic Emergency Medicine, 2012, 19, 618-625.	1.8	112
29	Cardiac inflammation contributes to right ventricular dysfunction following experimental pulmonary embolism in rats. Journal of Molecular and Cellular Cardiology, 2006, 41, 296-307.	1.9	106
30	Shared decision making in patients with low risk chest pain: prospective randomized pragmatic trial. BMJ, The, 2016, 355, i6165.	6.0	106
31	Surrogate markers for adverse outcomes in normotensive patients with pulmonary embolism*. Critical Care Medicine, 2006, 34, 2773-2780.	0.9	104
32	Persistent right ventricular dysfunction, functional capacity limitation, exercise intolerance, and quality of life impairment following pulmonary embolism: Systematic review with meta-analysis. Vascular Medicine, 2017, 22, 37-43.	1.5	104
33	Systematic Review of Emergency Physicianâ€“performed Ultrasonography for Lowerâ€Extremity Deep Vein Thrombosis. Academic Emergency Medicine, 2008, 15, 493-498.	1.8	102
34	One year mortality of patients treated with an emergency department based early goal directed therapy protocol for severe sepsis and septic shock: a before and after study. Critical Care, 2009, 13, R167.	5.8	100
35	Use of Goal-Directed Therapy for Severe Sepsis and Septic Shock in Academic Emergency Departments. Critical Care Medicine, 2005, 33, 1888-1889.	0.9	96
36	Comprehensive standardized data definitions for acute coronary syndrome research in emergency departments in Australasia. EMA - Emergency Medicine Australasia, 2010, 22, 35-55.	1.1	96

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37	Pretest probability assessment derived from attribute matching. BMC Medical Informatics and Decision Making, 2005, 5, 26.	3.0	94
38	SEVERITY OF EMERGENCY DEPARTMENT HYPOTENSION PREDICTS ADVERSE HOSPITAL OUTCOME. Shock, 2004, 22, 410-414.	2.1	93
39	Findings From 12â€lead Electrocardiography That Predict Circulatory Shock From Pulmonary Embolism: Systematic Review and Metaâ€analysis. Academic Emergency Medicine, 2015, 22, 1127-1137.	1.8	92
40	The frequency and significance of postintubation hypotension during emergency airway management. Journal of Critical Care, 2012, 27, 417.e9-417.e13.	2.2	81
41	Prognostic Value and Agreement of Achieving Lactate Clearance or Central Venous Oxygen Saturation Goals During Early Sepsis Resuscitation. Academic Emergency Medicine, 2012, 19, 252-258.	1.8	80
42	Focused Training of Emergency Medicine Residents in Goal-directed Echocardiography: A Prospective Study. Academic Emergency Medicine, 2003, 10, 1054-1058.	1.8	79
43	Right Ventricular Heart Failure From Pulmonary Embolism: Key Distinctions From Chronic Pulmonary Hypertension. Journal of Cardiac Failure, 2010, 16, 250-259.	1.7	77
44	Impact of a rapid rule-out protocol for pulmonary embolism on the rate of screening, missed cases, and pulmonary vascular imaging in an urban US emergency department. Annals of Emergency Medicine, 2004, 44, 490-502.	0.6	76
45	THE INSPIRATORY-TO-TOTAL LUNG CAPACITY RATIO (IC/TLC) PREDICTS SURVIVAL AFTER LUNG TRANSPLANTATION FOR COPD. Chest, 2006, 130, 941-6.	0.8	74
46	Prospective Multicenter Study of Quantitative Pretest Probability Assessment to Exclude Acute Coronary Syndrome for Patients Evaluated in Emergency Department Chest Pain Units. Annals of Emergency Medicine, 2006, 47, 447.e1.	0.6	66
47	Use of pulse oximetry to predict in-hospital complications in normotensive patients with pulmonary embolism. American Journal of Medicine, 2003, 115, 203-208.	1.5	65
48	Major Adverse Events One Year After Acute Kidney Injury After Contrast-Enhanced Computed Tomography. Annals of Emergency Medicine, 2015, 66, 267-274.e4.	0.6	62
49	Prospective Study of the Diagnostic Accuracy of the Simplify D-dimer Assay for Pulmonary Embolism in Emergency Department Patients. Chest, 2006, 129, 1417-1423.	0.8	60
50	Therapy and outcomes in massive pulmonary embolism from the Emergency Medicine Pulmonary Embolism in the Real World Registry. American Journal of Emergency Medicine, 2012, 30, 1774-1781.	1.6	60
51	Over-Testing for Suspected Pulmonary Embolism in American Emergency Departments. Circulation: Cardiovascular Quality and Outcomes, 2020, 13, e005753.	2.2	60
52	Emergency Clinicianâ€“Performed Compression Ultrasonography for Deep Venous Thrombosis of the Lower Extremity. Annals of Emergency Medicine, 2008, 52, 437-445.	0.6	59
53	Operational performance of validated physiologic scoring systems for predicting in-hospital mortality among critically ill emergency department patients*. Critical Care Medicine, 2005, 33, 974-978.	0.9	57
54	Performance of the Mortality in emergency department Sepsis score for predicting hospital mortality among patients with severe sepsis and septic shock. American Journal of Emergency Medicine, 2008, 26, 689-692.	1.6	57

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55	Clinical Features From the History and Physical Examination That Predict the Presence or Absence of Pulmonary Embolism in Symptomatic Emergency Department Patients: Results of a Prospective, Multicenter Study. Annals of Emergency Medicine, 2010, 55, 307-315.e1.	0.6	57
56	Cost-effectiveness of an emergency department-based early sepsis resuscitation protocol*. Critical Care Medicine, 2011, 39, 1306-1312.	0.9	56
57	Derivation and validation of a multivariate model to predict mortality from pulmonary embolism with cancer: The POMPE-C tool. Thrombosis Research, 2012, 129, e194-e199.	1.7	55
58	Prospective Study of the Clinical Features and Outcomes of Emergency Department Patients with Delayed Diagnosis of Pulmonary Embolism. Academic Emergency Medicine, 2007, 14, 592-598.	1.8	55
59	Randomized Trial of Computerized Quantitative Pretest Probability in Low-Risk Chest Pain Patients: Effect on Safety and Resource Use. Annals of Emergency Medicine, 2009, 53, 727-735.e1.	0.6	52
60	Comparison of 8 biomarkers for prediction of right ventricular hypokinesis 6 months after submassive pulmonary embolism. American Heart Journal, 2008, 156, 308-314.	2.7	51
61	Clinician Gestalt Estimate of Pretest Probability for Acute Coronary Syndrome and Pulmonary Embolism in Patients With Chest Pain and Dyspnea. Annals of Emergency Medicine, 2014, 63, 275-280.	0.6	47
62	Systematic Review and Metaâ€analysis of Pregnant Patients Investigated for Suspected Pulmonary Embolism in the Emergency Department. Academic Emergency Medicine, 2014, 21, 949-959.	1.8	47
63	Diagnosis and Exclusion of Pulmonary Embolism. Thrombosis Research, 2018, 163, 207-220.	1.7	46
64	Outpatient treatment of low-risk venous thromboembolism with monotherapy oral anticoagulation: patient quality of life outcomes and clinician acceptance. Patient Preference and Adherence, 2016, 10, 561.	1.8	45
65	Preliminary Safety and Efficacy of Lâ€carnitine Infusion for the Treatment of Vasopressorâ€Dependent Septic Shock. Journal of Parenteral and Enteral Nutrition, 2014, 38, 736-743.	2.6	44
66	Risk of Thromboembolism Varies, Depending on Category of Immobility in Outpatients. Annals of Emergency Medicine, 2009, 54, 147-152.	0.6	43
67	Electronic Medical Record Review as a Surrogate to Telephone Follow-up to Establish Outcome for Diagnostic Research Studies in the Emergency Department. Academic Emergency Medicine, 2005, 12, 1127-1133.	1.8	40
68	Prospective Study of the Clinical Features and Outcomes of Emergency Department Patients with Delayed Diagnosis of Pulmonary Embolism. Academic Emergency Medicine, 2007, 14, 592-598.	1.8	39
69	Multicenter, Randomized Trial of Quantitative Pretest Probability to Reduce Unnecessary Medical Radiation Exposure in Emergency Department Patients With Chest Pain and Dyspnea. Circulation: Cardiovascular Imaging, 2014, 7, 66-73.	2.6	39
70	Bench to Bedside: The Role of Mitochondrial Medicine in the Pathogenesis and Treatment of Cellular Injury. Academic Emergency Medicine, 2003, 10, 985-997.	1.8	36
71	Prospective study of clinician-entered research data in the Emergency Department using an Internet-based system after the HIPAA Privacy Rule. BMC Medical Informatics and Decision Making, 2004, 4, 17.	3.0	35
72	Outcomes and Radiation Exposure of Emergency DepartmentÂPatients With Chest Pain and Shortness of BreathÂandÂUltralow Pretest Probability: A Multicenter Study. Annals of Emergency Medicine, 2014, 63, 281-288.	0.6	34

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73	Characteristics and Outcomes of Patients With Vasoplegic Versus Tissue Dysoxic Septic Shock. Shock, 2013, 40, 11-14.	2.1	30
74	Emergency Evaluation for Pulmonary Embolism, Part 1: Clinical Factors that Increase Risk. Journal of Emergency Medicine, 2015, 48, 771-780.	0.7	29
75	Emergency Evaluation for Pulmonary Embolism, Part 2: Diagnostic Approach. Journal of Emergency Medicine, 2015, 49, 104-117.	0.7	28
76	Prevalence and Significance of Nonthromboembolic Findings on Chest Computed Tomography Angiography Performed to Rule Out Pulmonary Embolism: A Multicenter Study of 1,025 Emergency Department Patients. Academic Emergency Medicine, 2004, 11, 642-647.	1.8	28
77	Immediate Complications of Intravenous Contrast for Computed Tomography Imaging in the Outpatient Setting Are Rare. Academic Emergency Medicine, 2011, 18, 1005-1009.	1.8	26
78	Research Priorities in Submassive Pulmonary Embolism: Proceedings from a Multidisciplinary Research Consensus Panel. Journal of Vascular and Interventional Radiology, 2016, 27, 787-794.	0.5	26
79	The Chest Pain Choice trial: a pilot randomized trial of a decision aid for patients with chest pain in the emergency department. Trials, 2010, 11, 57.	1.6	25
80	Pilot study of a protocol to administer inhaled nitric oxide to treat severe acute submassive pulmonary embolism. Emergency Medicine Journal, 2014, 31, 459-462.	1.0	24
81	Association of Body Mass Index With Increased Cost of Care and Length of Stay for Emergency Department Patients With Chest Pain and Dyspnea. Circulation: Cardiovascular Quality and Outcomes, 2014, 7, 292-298.	2.2	23
82	Development, validation, and comparison of four methods to simultaneously quantify l-arginine, citrulline, and ornithine in human plasma using hydrophilic interaction liquid chromatography and electrospray tandem mass spectrometry. Journal of Chromatography B: Analytical Technologies in the Biomedical and Life Sciences, 2015, 1005, 47-55.	2.3	23
83	Effectiveness of the Chest Pain Choice decision aid in emergency department patients with low-risk chest pain: study protocol for a multicenter randomized trial. Trials, 2014, 15, 166.	1.6	22
84	Randomized trial of inhaled nitric oxide to treat acute pulmonary embolism: The iNOPE trial. American Heart Journal, 2017, 186, 100-110.	2.7	22
85	Contribution of fibrinolysis to the physical component summary of the SF-36 after acute submassive pulmonary embolism. Journal of Thrombosis and Thrombolysis, 2015, 40, 161-166.	2.1	21
86	Metabolic syndrome increases risk of venous thromboembolism recurrence after acute deep vein thrombosis. Blood Advances, 2020, 4, 127-135.	5.2	20
87	Elevated brain natriuretic peptide in septic patients without heart failure. Annals of Emergency Medicine, 2003, 42, 714-715.	0.6	19
88	Lactate Clearance in Septic Shock Is Not a Surrogate for Improved Microcirculatory Flow. Academic Emergency Medicine, 2016, 23, 690-693.	1.8	18
89	12-Lead ECG Findings of Pulmonary Hypertension Occur More Frequently in Emergency Department Patients With Pulmonary Embolism Than in Patients Without Pulmonary Embolism. Annals of Emergency Medicine, 2010, 55, 331-335.	0.6	17
90	Prognostic Value of Incremental Lactate Elevations in Emergency Department Patients With Suspected Infection. Academic Emergency Medicine, 2012, 19, 983-985.	1.8	17

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91	Systematic Bias Introduced by the Informed Consent Process in a Diagnostic Research Study. Academic Emergency Medicine, 2008, 15, 225-230.	1.8	16
92	Clinical Features of Patients With Pulmonary Embolism and a Negative PERC Rule Result. Annals of Emergency Medicine, 2013, 61, 122-124.	0.6	15
93	Detection of microRNAs in patients with sepsis. Journal of Acute Disease, 2015, 4, 101-106.	0.3	13
94	Comparison of isoflurane and Î±-chloralose in an anesthetized swine model of acute pulmonary embolism producing right ventricular dysfunction. Comparative Medicine, 2015, 65, 54-61.	1.0	13
95	Venous Thromboembolism During Pregnancy and the Postpartum Period: Risk Factors, Diagnostic Testing, and Treatment. Obstetrical and Gynecological Survey, 2022, 77, 433-444.	0.4	13
96	Frequency of Thrombophilia-Related Genetic Variations in Patients with Idiopathic Pulmonary Embolism in an Urban Emergency Department. Clinical Chemistry, 2006, 52, 1026-1032.	3.2	12
97	Comparison of acute and convalescent biomarkers of inflammation in patients with acute pulmonary embolism treated with systemic fibrinolysis vs. placebo. Blood Coagulation and Fibrinolysis, 2017, 28, 675-680.	1.0	12
98	Decreased facial expression variability in patients with serious cardiopulmonary disease in the emergency care setting. Emergency Medicine Journal, 2015, 32, 3-8.	1.0	11
99	Fibrinolytics for the treatment of pulmonary embolism. Translational Research, 2020, 225, 82-94.	5.0	11
100	Risk Stratification for Acute Pulmonary Embolism. Journal of the National Comprehensive Cancer Network: JNCCN, 2011, 9, 800-810.	4.9	10
101	Rationale and methodology for a multicentre randomised trial of fibrinolysis for pulmonary embolism that includes quality of life outcomes. EMA - Emergency Medicine Australasia, 2013, 25, 515-526.	1.1	10
102	Clinical Utility of an Age-Adjusted D-dimer in the Diagnosis of Venous Thromboembolism. Annals of Emergency Medicine, 2014, 64, 232-234.	0.6	10
103	Impact of a Shared Decision Making Intervention on Health Care Utilization: A Secondary Analysis of the Chest Pain Choice Multicenter Randomized Trial. Academic Emergency Medicine, 2018, 25, 293-300.	1.8	10
104	Role of the Peripheral Intravenous Catheter in False-positive D-dimer Testing. Academic Emergency Medicine, 2001, 8, 103-106.	1.8	9
105	Further Illumination of the Test Threshold Approach in the Care of Emergency Department Patients With Symptoms of Pulmonary Embolism. Annals of Emergency Medicine, 2010, 55, 327-330.	0.6	9
106	Research Priorities for the Influence of Gender on Diagnostic Imaging Choices in the Emergency Department Setting. Academic Emergency Medicine, 2014, 21, 1431-1437.	1.8	9
107	Effectiveness of a Decision Aid in Potentially Vulnerable Patients: A Secondary Analysis of the Chest Pain Choice Multicenter Randomized Trial. Medical Decision Making, 2018, 38, 69-78.	2.4	8
108	Contrastâ€induced Nephropathy: Doubts and Certainties. Academic Emergency Medicine, 2012, 19, 1294-1296.	1.8	7

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109	Costâ€effectiveness of Quantitative Pretest Probability Intended to Reduce Unnecessary Medical Radiation Exposure in Emergency Department Patients With Chest Pain and Dyspnea. Academic Emergency Medicine, 2015, 22, 525-535.	1.8	7
110	Emergency Physicians Are Able to Detect Right Ventricular Dilation With Good Agreement Compared to Cardiology. Academic Emergency Medicine, 2017, 24, 867-874.	1.8	7
111	Leukocyte expression of heme oxygenase-1 [hmox1] varies inversely with severity of tricuspid regurgitation in acute pulmonary embolism. Thrombosis Research, 2015, 136, 769-774.	1.7	6
112	Modulation of soluble guanylate cyclase ameliorates pulmonary hypertension in a rat model of chronic thromboembolic pulmonary hypertension by stimulating angiogenesis. Physiological Reports, 2022, 10, e15156.	1.7	4
113	EINSTEIN transforms anticoagulant therapy in acute PE. Nature Reviews Cardiology, 2012, 9, 378-380.	13.7	3
114	Urinary Metabolomic Analysis to Detect Changes After Intravenous, Non-ionic, Low Osmolar Iodinated Radiocontrast for Computerized Tomographic Imaging. Western Journal of Emergency Medicine, 2014, 15, 152-157.	1.1	3
115	Effect of an Educational Intervention on Medical Student Scripting and Patient Satisfaction: A Randomized Trial. Western Journal of Emergency Medicine, 2018, 19, 585-592.	1.1	3
116	Acute Right Ventricular Failure. Respiratory Medicine, 2015, , 161-205.	0.1	3
117	Impact of Patient Affect on Physician Estimate of Probability of Serious Illness and Test Ordering. Academic Medicine, 2017, 92, 1607-1616.	1.6	2
118	Quality of Life 3 and 12 Months After Acute Pulmonary Embolism. Chest, 2021, 159, 2153-2155.	0.8	2
119	Pulmonary Embolism and Deep Vein Thrombosis. , 2010, , 1124-1136.		2
120	Acceptability of Contraceptive Services in the Emergency Department: A Cross-sectional Survey. Western Journal of Emergency Medicine, 2021, 22, 769-774.	1.1	1
121	Risk Stratification of Community-Acquired Pneumonia: What Does All of This Mean?. Annals of Emergency Medicine, 2008, 52, 61-62.	0.6	0
122	Resource Utilization in Patients Undergoing Early Goal-Directed Therapy for Severe Sepsis and Septic Shock: Response. Chest, 2008, 133, 316.	0.8	0
123	Clinical Effectiveness and Early Goal-Directed Therapy for Severe Sepsis and Septic Shock. Chest, 2008, 133, 584-585.	0.8	0
124	Indications for Systemic Thrombolysis Over Anticoagulation. Respiratory Medicine, 2020, , 85-102.	0.1	0
125	Acceptability of Exercise in Urban Emergency Department Patients With Metabolic Syndrome, Including a Subset With Venous Thromboembolism. Journal of Patient Experience, 2022, 9, 237437352210831.	0.9	0