

# Carl R May

## List of Publications by Year in descending order

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Version: 2024-02-01

294  
papers

21,055  
citations

10389  
72  
h-index

12597  
132  
g-index

313  
all docs

313  
docs citations

313  
times ranked

19068  
citing authors

#	ARTICLE	IF	CITATIONS
1	Remote shared decision making through telemedicine: A systematic review of the literature. Patient Education and Counseling, 2022, 105, 356-365.	2.2	35
2	Patient preferences for use of virtual consultations in an orthopaedic rehabilitation setting: Results from a discrete choice experiment. Journal of Health Services Research and Policy, 2022, 27, 62-73.	1.7	10
3	Making sense of diabetes medication decisions: a mixed methods cluster randomized trial using a conversation aid intervention. Endocrine, 2022, 75, 377-391.	2.3	7
4	Patient, clinician and manager experience of the accelerated implementation of virtual consultations following COVID-19: A qualitative study of preferences in a tertiary orthopaedic rehabilitation setting. Health Expectations, 2022, 25, 775-790.	2.6	7
5	How do social and economic vulnerabilities shape the work of participating in care? Everyday experiences of people living with kidney failure in Argentina. Social Science and Medicine, 2022, 293, 114666.	3.8	3
6	Minimally Disruptive Medicine. Mayo Clinic Proceedings, 2022, 97, 210-220.	3.0	11
7	OUP accepted manuscript. Family Practice, 2022, , .	1.9	0
8	Translational framework for implementation evaluation and research: a normalisation process theory coding manual for qualitative research and instrument development. Implementation Science, 2022, 17, 19.	6.9	50
9	SYMptoms in chronic heart failure imPACT on burden of treatment (SYMPACT): a cross-sectional survey. ESC Heart Failure, 2022, 9, 2279-2290.	3.1	4
10	Process evaluations of mental health and psychosocial support interventions for populations affected by humanitarian crises. Social Science and Medicine, 2022, 303, 114994.	3.8	4
11	How do illness identity, patient workload and agentic capacity interact to shape patient and caregiver experience? Comparative analysis of lung cancer and chronic obstructive pulmonary disease. Health and Social Care in the Community, 2022, 30, .	1.6	3
12	Home and Online Management and Evaluation of Blood Pressure (HOME BP) using a digital intervention in poorly controlled hypertension: randomised controlled trial. BMJ, The, 2021, 372, m4858.	6.0	106
13	Factors that influence patient preferences for virtual consultations in an orthopaedic rehabilitation setting: a qualitative study. BMJ Open, 2021, 11, e041038.	1.9	18
14	“Snakes & Ladders”™: factors influencing access to appropriate care for children and young people with suspected juvenile idiopathic arthritis – a qualitative study. Pediatric Rheumatology, 2021, 19, 43.	2.1	6
15	Patient Work and Treatment Burden in Type 2 Diabetes: A Mixed-Methods Study. Mayo Clinic Proceedings Innovations, Quality & Outcomes, 2021, 5, 359-367.	2.4	11
16	The Early Youth Engagement in first episode psychosis (EYE-2) study: pragmatic cluster randomised controlled trial of implementation, effectiveness and cost-effectiveness of a team-based motivational engagement intervention to improve engagement. Trials, 2021, 22, 272.	1.6	5
17	Implementing a digital intervention for managing uncontrolled hypertension in Primary Care: a mixed methods process evaluation. Implementation Science, 2021, 16, 57.	6.9	6
18	A Digital Intervention for Primary Care Practitioners to Support Antidepressant Discontinuation (Advisor for Health Professionals): Development Study. Journal of Medical Internet Research, 2021, 23, e25537.	4.3	1

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19	Do chronic heart failure symptoms interact with burden of treatment? Qualitative literature systematic review. <i>BMJ Open</i> , 2021, 11, e047060.	1.9	11
20	A qualitative investigation into the results of a discrete choice experiment and the impact of COVID-19 on patient preferences for virtual consultations. <i>Archives of Physiotherapy</i> , 2021, 11, 20.	1.8	6
21	Kidney failure, status passage, and the transitional nature of living with the disease: A qualitative study in Argentina. <i>Health (United Kingdom)</i> , 2021, , 136345932110468.	1.5	3
22	Evaluation of the usability, accessibility and acceptability for a family support intervention (Family-Focused Support Conversation) for end of life care discharge planning from hospital: A participatory learning and action research study. <i>International Journal of Nursing Studies Advances</i> , 2021, 3, 100022.	2.1	2
23	Digital transformation could increase the burden of treatment on patients. <i>BMJ, The</i> , 2021, 375, n2909.	6.0	14
24	A Complex Intervention for Alcohol Misuse Among Conflict-Affected Populations in Uganda and Ukraine: Study Protocol for the Qualitative Components in the CHANGE Trial. <i>International Journal of Qualitative Methods, The</i> , 2021, 20, 160940692110630.	2.8	1
25	Use of virtual consultations in an orthopaedic rehabilitation setting: how do changes in the work of being a patient influence patient preferences? A systematic review and qualitative synthesis. <i>BMJ Open</i> , 2020, 10, e036197.	1.9	13
26	Managing patient preferences and clinical responses in acute pathophysiological deterioration: What do clinicians think treatment escalation plans do?. <i>Social Science and Medicine</i> , 2020, 258, 113143.	3.8	11
27	Creating pre-conditions for change in clinical practice: the influence of interactions between multiple contexts and human agency. <i>Journal of Health Organization and Management</i> , 2020, 35, 1-17.	1.3	6
28	Tailored implementation of internet-based cognitive behavioural therapy in the multinational context of the ImpleMentAll project: a study protocol for a stepped wedge cluster randomized trial. <i>Trials</i> , 2020, 21, 893.	1.6	25
29	How do SYMPtoms and management tasks in chronic heart failure imPACT a person's life (SYMPACT)? Protocol for a mixedâ€methods study. <i>ESC Heart Failure</i> , 2020, 7, 4472-4477.	3.1	5
30	Co-construction of the family-focused support conversation: a participatory learning and action research study to implement support for family members whose relatives are being discharged for end-of-life care at home or in a nursing home. <i>BMC Palliative Care</i> , 2020, 19, 146.	1.8	8
31	The Potential Added Value of Novel Hearing Therapeutics: An Early Health Economic Model for Hearing Loss. <i>Otology and Neurotology</i> , 2020, 41, 1033-1041.	1.3	6
32	Malnutrition in community-dwelling older people: lessons learnt using a new procedure. <i>British Journal of Community Nursing</i> , 2020, 25, 193-195.	0.4	2
33	Normalization of a conversation tool to promote shared decision making about anticoagulation in patients with atrial fibrillation within a practical randomized trial of its effectiveness: a cross-sectional study. <i>Trials</i> , 2020, 21, 395.	1.6	9
34	Patient-reported outcome measures for monitoring primary care patients with depression (PROMDEP): study protocol for a randomised controlled trial. <i>Trials</i> , 2020, 21, 441.	1.6	8
35	REDUCE (Reviewing long-term antidepressant use by careful monitoring in everyday practice) internet and telephone support to people coming off long-term antidepressants: protocol for a randomised controlled trial. <i>Trials</i> , 2020, 21, 419.	1.6	11
36	Effectiveness of nurseâ€led group <sc>CBT</sc> for hot flushes and night sweats in women with breast cancer: Results of the <sc>MENOS4</sc> randomised controlled trial. <i>Psycho-Oncology</i> , 2020, 29, 1514-1523.	2.3	19

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37	Coordinating Compassionate Care Across Nursing Teams: The Implementation Journey of a Planned Intervention. <i>Organizational Behaviour in Health Care</i> , 2020, , 29-51.	0.4	2
38	Supporting antidepressant discontinuation: the development and optimisation of a digital intervention for patients in UK primary care using a theory, evidence and person-based approach. <i>BMJ Open</i> , 2020, 10, e032312.	1.9	18
39	Exploring maintenance of physical activity behaviour change among people living with and beyond gastrointestinal cancer: a cross-sectional qualitative study and typology. <i>BMJ Open</i> , 2020, 10, e037136.	1.9	11
40	Patients' and kidney care team's perspectives of treatment burden and capacity in older people with chronic kidney disease: a qualitative study. <i>BMJ Open</i> , 2020, 10, e042548.	1.9	13
41	Normalization Process Theory. , 2020, , .		17
42	Choosing to listen. , 2020, , 29-34.		0
43	Interdisciplinary team working in the Irish primary healthcare system: Analysis of "invisible" bottom up innovations using Normalisation Process Theory. <i>Health Policy</i> , 2019, 123, 1083-1092.	3.0	11
44	What factors promote or inhibit implementation of a new procedure for screening and treatment of malnutrition in community settings? A prospective process evaluation of the<i>Implementing Nutrition Screening in Community Care for Older People</i>(INSCCOPE) project (UK). <i>BMJ Open</i> , 2019, 9, e023362.	1.9	2
45	A digital self-management intervention for adults with type 2 diabetes: Combining theory, data and participatory design to develop HeLP-Diabetes. <i>Internet Interventions</i> , 2019, 17, 100241.	2.7	36
46	Systematic review and meta-analysis of maintenance of physical activity behaviour change in cancer survivors. <i>International Journal of Behavioral Nutrition and Physical Activity</i> , 2019, 16, 37.	4.6	127
47	Patients and informal caregivers' experiences of burden of treatment in lung cancer and chronic obstructive pulmonary disease (COPD): a systematic review and synthesis of qualitative research. <i>BMJ Open</i> , 2019, 9, e020515.	1.9	59
48	What is the acceptability of real time 1:1 videoconferencing between clinicians and patients for a follow-up consultation for multi-directional shoulder instability?. <i>Shoulder and Elbow</i> , 2019, 11, 53-59.	1.5	13
49	Burden of treatment in chronic heart failure: does symptom burden play a role?. <i>British Journal of Cardiac Nursing</i> , 2019, 14, 91-93.	0.1	5
50	HORIZONS protocol: a UK prospective cohort study to explore recovery of health and well-being in adults diagnosed with cancer. <i>BMJ Open</i> , 2019, 9, e029662.	1.9	6
51	Helping people discontinue long-term antidepressants: views of health professionals in UK primary care. <i>BMJ Open</i> , 2019, 9, e027837.	1.9	16
52	Ethnographic study using Normalization Process Theory to understand the implementation process of infection prevention and control guidelines in Ireland. <i>BMJ Open</i> , 2019, 9, e029514.	1.9	9
53	Protocol for the CONNECT project: a mixed methods study investigating patient preferences for communication technology use in orthopaedic rehabilitation consultations. <i>BMJ Open</i> , 2019, 9, e035210.	1.9	7
54	Implementing professional behaviour change in teams under pressure: results from phase one of a prospective process evaluation (the<i>Implementing Nutrition Screening in Community Care for Older</i> Tj ETQq0 01gBT /Overlock 10		

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55	Health care professionalsâ€™ views towards self-management and self-management education for people with type 2 diabetes. <i>BMJ Open</i> , 2019, 9, e029961.	1.9	19
56	Barriers and facilitators to discontinuing antidepressant use: A systematic review and thematic synthesis. <i>Journal of Affective Disorders</i> , 2019, 245, 38-62.	4.1	54
57	Implementation of self-management support in cancer care and normalization into routine practice: a systematic scoping literature review protocol. <i>Systematic Reviews</i> , 2019, 8, 37.	5.3	29
58	Implementing and Embedding Health Informatics Systems - Understanding Organizational Behaviour Change Using Normalization Process Theory (NPT). <i>Studies in Health Technology and Informatics</i> , 2019, 263, 171-190.	0.3	5
59	What is the patient acceptability of real time 1:1 videoconferencing in an orthopaedics setting? A systematic review. <i>Physiotherapy</i> , 2018, 104, 178-186.	0.4	47
60	Supporting carers to manage pain medication in cancer patients at the end of life: A feasibility trial. <i>Palliative Medicine</i> , 2018, 32, 246-256.	3.1	18
61	Escalation-related decision making in acute deterioration: a retrospective case note review. <i>BMJ Open</i> , 2018, 8, e022021.	1.9	13
62	Improving the normalization of complex interventions: part 1 - development of the NoMAD instrument for assessing implementation work based on normalization process theory (NPT). <i>BMC Medical Research Methodology</i> , 2018, 18, 133.	3.1	97
63	Improving the normalization of complex interventions: part 2 - validation of the NoMAD instrument for assessing implementation work based on normalization process theory (NPT). <i>BMC Medical Research Methodology</i> , 2018, 18, 135.	3.1	139
64	Developing an implementation strategy for a digital health intervention: an example in routine healthcare. <i>BMC Health Services Research</i> , 2018, 18, 794.	2.2	74
65	Work of being an adult patient with chronic kidney disease: a systematic review of qualitative studies. <i>BMJ Open</i> , 2018, 8, e023507.	1.9	83
66	Digitized patientâ€™provider interaction: How does it matter? A qualitative meta-synthesis. <i>Social Science and Medicine</i> , 2018, 215, 36-44.	3.8	22
67	Using Normalization Process Theory in feasibility studies and process evaluations of complex healthcare interventions: a systematic review. <i>Implementation Science</i> , 2018, 13, 80.	6.9	350
68	A conceptual model of treatment burden and patient capacity in stroke. <i>BMC Family Practice</i> , 2018, 19, 9.	2.9	77
69	Implementation of grip strength measurement in medicine for older people wards as part of routine admission assessment: identifying facilitators and barriers using a theory-led intervention. <i>BMC Geriatrics</i> , 2018, 18, 79.	2.7	31
70	MENOS4 trial: a multicentre randomised controlled trial (RCT) of a breast care nurse delivered cognitive behavioural therapy (CBT) intervention to reduce the impact of hot flushes in women with breast cancer: Study Protocol. <i>BMC Women's Health</i> , 2018, 18, 63.	2.0	9
71	Qualitative process study to explore the perceived burdens and benefits of a digital intervention for self-managing high blood pressure in Primary Care in the UK. <i>BMJ Open</i> , 2018, 8, e020843.	1.9	16
72	Digital Health Interventions for Adults With Type 2 Diabetes: Qualitative Study of Patient Perspectives on Diabetes Self-Management Education and Support. <i>Journal of Medical Internet Research</i> , 2018, 20, e40.	4.3	98

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73	A web-based self-management programme for people with type 2 diabetes: the HeLP-Diabetes research programme including RCT. Programme Grants for Applied Research, 2018, 6, 1-242.	1.0	13
74	A two phased study on health care professionals's perceptions of single or multi-use of intermittent catheters. International Journal of Nursing Studies, 2017, 72, 83-90.	5.6	6
75	Web-based self-management support for people with type 2 diabetes (HeLP-Diabetes): randomised controlled trial in English primary care. BMJ Open, 2017, 7, e016009.	1.9	75
76	Optimising impact and sustainability: a qualitative process evaluation of a complex intervention targeted at compassionate care. BMJ Quality and Safety, 2017, 26, 970-977.	3.7	48
77	Organizing Practice and Practicing Organization: An Outline of Translational Mobilization Theory. SAGE Open, 2017, 7, 215824401770799.	1.7	18
78	Implementing communication and decision-making interventions directed at goals of care: a theory-led scoping review. BMJ Open, 2017, 7, e017056.	1.9	16
79	Understanding how primary care practitioners perceive an online intervention for the management of hypertension. BMC Medical Informatics and Decision Making, 2017, 17, 5.	3.0	26
80	Intervention planning for a digital intervention for self-management of hypertension: a theory-, evidence- and person-based approach. Implementation Science, 2017, 12, 25.	6.9	107
81	Using digital interventions for self-management of chronic physical health conditions: A meta-ethnography review of published studies. Patient Education and Counseling, 2017, 100, 616-635.	2.2	147
82	Development and validation of the Patient Experience with Treatment and Self-management (PETS): a patient-reported measure of treatment burden. Quality of Life Research, 2017, 26, 489-503.	3.1	141
83	Successfully implementing and embedding guidelines to improve the nutrition and growth of preterm infants in neonatal intensive care: a prospective interventional study. BMJ Open, 2017, 7, e017727.	1.9	25
84	Supporting insulin initiation in type 2 diabetes in primary care: results of the Stepping Up pragmatic cluster randomised controlled clinical trial. BMJ: British Medical Journal, 2017, 356, j783.	2.3	46
85	Managing expectations: cognitive authority and experienced control in complex healthcare processes. BMC Health Services Research, 2017, 17, 459.	2.2	18
86	Integrating acute stroke telemedicine consultations into specialists's usual practice: a qualitative analysis comparing the experience of Australia and the United Kingdom. BMC Health Services Research, 2017, 17, 751.	2.2	18
87	Can routine clinical data identify older patients at risk of poor healthcare outcomes on admission to hospital?. BMC Research Notes, 2017, 10, 384.	1.4	3
88	Debt Counselling for Depression in Primary Care: an adaptive randomised controlled pilot trial (DeCoDer study). Health Technology Assessment, 2017, 21, 1-164.	2.8	15
89	Supporting family caregivers in the transition between hospital and their relative's preferred place for end of life care. BMJ Supportive and Palliative Care, 2016, 6, 404.3-405.	1.6	0
90	Recovering the self: a manifesto for primary care. British Journal of General Practice, 2016, 66, 582-583.	1.4	11

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91	A feasibility study of implementing grip strength measurement into routine hospital practice (GRIMP): study protocol. Pilot and Feasibility Studies, 2016, 2, 27.	1.2	83
92	Illness identity as an important component of candidacy: Contrasting experiences of help-seeking and access to care in cancer and heart disease. Social Science and Medicine, 2016, 168, 101-110.	3.8	28
93	Interventions for compassionate nursing care: A systematic review. International Journal of Nursing Studies, 2016, 62, 137-155.	5.6	74
94	“It was like he was in the room with us” patients’ and carers’ perspectives of telemedicine in acute stroke. Health Expectations, 2016, 19, 98-111.	2.6	17
95	Patient capacity and constraints in the experience of chronic disease: a qualitative systematic review and thematic synthesis. BMC Family Practice, 2016, 17, 127.	2.9	93
96	Experiences of long-term life-limiting conditions among patients and carers: what can we learn from a meta-review of systematic reviews of qualitative studies of chronic heart failure, chronic obstructive pulmonary disease and chronic kidney disease?. BMJ Open, 2016, 6, e011694.	1.9	68
97	Implementation, context and complexity. Implementation Science, 2016, 11, 141.	6.9	542
98	Assessing the feasibility of a web-based domestic violence intervention using chronic disease frameworks: reducing the burden of “treatment” and promoting capacity for action in women abused by a partner. BMC Women’s Health, 2016, 16, 73.	2.0	7
99	An open letter to The BMJ editors on qualitative research. BMJ, The, 2016, 352, i563.	6.0	234
100	A web-based intervention (RESTORE) to support self-management of cancer-related fatigue following primary cancer treatment: a multi-centre proof of concept randomised controlled trial. Supportive Care in Cancer, 2016, 24, 2445-2453.	2.2	75
101	The burden of comorbidity in people with chronic kidney disease stage 3: a cohort study. BMC Nephrology, 2015, 16, 193.	1.8	146
102	RESTORE: an exploratory trial of a web-based intervention to enhance self-management of cancer-related fatigue: findings from a qualitative process evaluation. BMC Medical Informatics and Decision Making, 2015, 15, 94.	3.0	30
103	Implementation of secondary fracture prevention services after hip fracture: a qualitative study using extended Normalization Process Theory. Implementation Science, 2015, 10, 57.	6.9	30
104	Finalizing a measurement framework for the burden of treatment in complex patients with chronic conditions. Patient Related Outcome Measures, 2015, 6, 117.	1.2	102
105	Barriers to Advance Care Planning at the End of Life: An Explanatory Systematic Review of Implementation Studies. PLoS ONE, 2015, 10, e0116629.	2.5	228
106	Making sense of technology adoption in healthcare: meso-level considerations. BMC Medicine, 2015, 13, 92.	5.5	18
107	Promoting professional behaviour change in healthcare: what interventions work, and why? A theory-led overview of systematic reviews. BMJ Open, 2015, 5, e008592.	1.9	342
108	EXPERTS 1—experiences of long-term life-limiting conditions among patients and carers: protocol for a qualitative meta-synthesis and conceptual modelling study. BMJ Open, 2015, 5, e007372-e007372.	1.9	9



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109	Patient, Carer and Professional Perspectives on Barriers and Facilitators to Quality Care in Advanced Heart Failure. PLoS ONE, 2014, 9, e93288.	2.5	72
110	CANCER CARERS MEDICINES MANAGEMENT: A FEASIBILITY TRIAL OF AN EDUCATIONAL INTERVENTION FOR MANAGING END OF LIFE PAIN MEDICATION. BMJ Supportive and Palliative Care, 2014, 4, A7.2-A7.	1.6	2
111	Thinking about the burden of treatment. BMJ, The, 2014, 349, g6680-g6680.	6.0	192
112	â€œYour whole life is lived through your teethâ€™: biographical disruption and experiences of tooth loss and replacement. Sociology of Health and Illness, 2014, 36, 462-476.	2.1	48
113	Stroke, multimorbidity and polypharmacy in a nationally representative sample of 1,424,378 patients in Scotland: implications for treatment burden. BMC Medicine, 2014, 12, 151.	5.5	124
114	The nursing work of hospital-based clinical practice guideline implementation: An explanatory systematic review using Normalisation Process Theory. International Journal of Nursing Studies, 2014, 51, 289-299.	5.6	70
115	Can primary care team-based transition to insulin improve outcomes in adults with type 2 diabetes: the stepping up to insulin cluster randomized controlled trial protocol. Implementation Science, 2014, 9, 20.	6.9	14
116	Evaluating the implementation of HeLP-Diabetes within NHS services: study protocol. BMC Health Services Research, 2014, 14, 51.	2.2	11
117	Collaborative deliberation: A model for patient care. Patient Education and Counseling, 2014, 97, 158-164.	2.2	181
118	Chronic diseases and multi-morbidity - a conceptual modification to the WHO ICCM model for countries in health transition. BMC Public Health, 2014, 14, 575.	2.9	116
119	Rethinking the patient: using Burden of Treatment Theory to understand the changing dynamics of illness. BMC Health Services Research, 2014, 14, 281.	2.2	435
120	Implementing evidence-based practice with normalisation process theory to improve nutritional care in the neonatal intensive care unit. Lancet, The, 2014, 383, S62.	13.7	1
121	The work, workforce, technology and organisational implications of the â€œ111â€™ single point of access telephone number for urgent (non-emergency) care: a mixed-methods case study. Health Services and Delivery Research, 2014, 2, 1-140.	1.4	13
122	Improving the normalization of complex interventions: measure development based on normalization process theory (NoMAD): study protocol. Implementation Science, 2013, 8, 43.	6.9	115
123	Towards a general theory of implementation. Implementation Science, 2013, 8, 18.	6.9	463
124	RESTORE: an exploratory trial of an online intervention to enhance self-efficacy to manage problems associated with cancer-related fatigue following primary cancer treatment: study protocol for a randomized controlled trial. Trials, 2013, 14, 184.	1.6	23
125	Qualitative systematic reviews of treatment burden in stroke, heart failure and diabetes - Methodological challenges and solutions. BMC Medical Research Methodology, 2013, 13, 10.	3.1	60
126	Using computer decision support systems in NHS emergency and urgent care: ethnographic study using normalisation process theory. BMC Health Services Research, 2013, 13, 111.	2.2	79



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127	The challenges of implementing a telestroke network: a systematic review and case study. BMC Medical Informatics and Decision Making, 2013, 13, 125.	3.0	26
128	Food work and feeding assistance on hospital wards. Sociology of Health and Illness, 2013, 35, 628-642.	2.1	30
129	Agency and implementation: Understanding the embedding of healthcare innovations in practice. Social Science and Medicine, 2013, 78, 26-33.	3.8	131
130	“They leave at least believing they had a part in the discussion”: Understanding decision aid use and patient “clinician decision-making through qualitative research. Patient Education and Counseling, 2013, 93, 86-94.	2.2	42
131	Examining health promotion interventions for patients with chronic conditions using a novel patient-centered complexity model: protocol for a systematic review and meta-analysis. Systematic Reviews, 2013, 2, 29.	5.3	5
132	Preventing Type 2 diabetes after gestational diabetes: women’s experiences and implications for diabetes prevention interventions. Diabetic Medicine, 2013, 30, 986-993.	2.3	88
133	Uncovering Treatment Burden as a Key Concept for Stroke Care: A Systematic Review of Qualitative Research. PLoS Medicine, 2013, 10, e1001473.	8.4	150
134	Identifying treatment burden as an important concept for end of life care in those with advanced heart failure. Current Opinion in Supportive and Palliative Care, 2013, 7, 3-7.	1.3	41
135	Factors that promote or inhibit the implementation of e-health systems: an explanatory systematic review. Bulletin of the World Health Organization, 2012, 90, 357-364.	3.3	441
136	Overwhelmed Patients. Diabetes Care, 2012, 35, 47-49.	8.6	75
137	The place of information and communication technology-mediated consultations in primary care: GPs’ perspectives. Family Practice, 2012, 29, 361-366.	1.9	51
138	ICDs in end-stage heart failure. BMJ Supportive and Palliative Care, 2012, 2, 94-97.	1.6	16
139	Reading outside the task fraternity. Nursing Inquiry, 2012, 19, 189-189.	2.1	6
140	The impact of decision aids to enhance shared decision making for diabetes (the DAD study): protocol of a cluster randomized trial. BMC Health Services Research, 2012, 12, 130.	2.2	25
141	Implementing nutrition guidelines for older people in residential care homes: a qualitative study using Normalization Process Theory. Implementation Science, 2012, 7, 106.	6.9	54
142	Cumulative complexity: a functional, patient-centered model of patient complexity can improve research and practice. Journal of Clinical Epidemiology, 2012, 65, 1041-1051.	5.0	479
143	From theory to ‘measurement’ in complex interventions: Methodological lessons from the development of an e-health normalisation instrument. BMC Medical Research Methodology, 2012, 12, 69.	3.1	93
144	Building a measurement framework of burden of treatment in complex patients with chronic conditions: a qualitative study. Patient Related Outcome Measures, 2012, 3, 39.	1.2	239

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145	Detecting deterioration in patients with chronic disease using telemonitoring: navigating the “trough of disillusionment”. <i>Journal of Evaluation in Clinical Practice</i> , 2012, 18, 896-903.	1.8	21
146	“Let the computer choose”: the experience of participants in a randomised preference trial of medical versus surgical termination of pregnancy. <i>Sociology of Health and Illness</i> , 2012, 34, 746-760.	2.1	4
147	Barriers to provision of high quality care for patients with end stage heart failure. <i>BMJ Supportive and Palliative Care</i> , 2012, 2, A17.3-A18.	1.6	1
148	Models of transitional care for young people with complex health needs: a scoping review. <i>Child: Care, Health and Development</i> , 2011, 37, 780-791.	1.7	115
149	Established users and the making of telecare work in long term condition management: Implications for health policy. <i>Social Science and Medicine</i> , 2011, 72, 1077-1084.	3.8	59
150	Integrating telecare for chronic disease management in the community: What needs to be done?. <i>BMC Health Services Research</i> , 2011, 11, 131.	2.2	166
151	Evaluating complex interventions and health technologies using normalization process theory: development of a simplified approach and web-enabled toolkit. <i>BMC Health Services Research</i> , 2011, 11, 245.	2.2	173
152	Why is it difficult to implement e-health initiatives? A qualitative study. <i>Implementation Science</i> , 2011, 6, 6.	6.9	204
153	Pediatric regional examination of the musculoskeletal system: A practice- and consensus-based approach. <i>Arthritis Care and Research</i> , 2011, 63, 1503-1510.	3.4	27
154	Understanding Patients' Experiences of Treatment Burden in Chronic Heart Failure Using Normalization Process Theory. <i>Annals of Family Medicine</i> , 2011, 9, 235-243.	1.9	279
155	Mundane Medicine, Therapeutic Relationships, and the Clinical Encounter: Current and Future Agendas for Sociology. <i>Handbooks of Sociology and Social Research</i> , 2011, , 309-322.	0.1	6
156	Non-face-to-face consultations and communications in primary care: the role and perspective of general practice managers in Scotland. <i>Journal of Innovation in Health Informatics</i> , 2011, 19, 17-24.	0.9	22
157	Development and formative evaluation of the e-Health Implementation Toolkit (e-HIT). <i>BMC Medical Informatics and Decision Making</i> , 2010, 10, 61.	3.0	58
158	Normalisation process theory: a framework for developing, evaluating and implementing complex interventions. <i>BMC Medicine</i> , 2010, 8, 63.	5.5	858
159	Embedding effective depression care: using theory for primary care organisational and systems change. <i>Implementation Science</i> , 2010, 5, 62.	6.9	65
160	Juvenile idiopathic arthritis: improved outcome requires improved access to care. <i>Rheumatology</i> , 2010, 49, 401-403.	1.9	47
161	Managing Depression Among Ethnic Communities: A Qualitative Study. <i>Annals of Family Medicine</i> , 2010, 8, 231-236.	1.9	18
162	Negotiations of distress between East Timorese and Vietnamese refugees and their family doctors in Melbourne. <i>Sociology of Health and Illness</i> , 2010, 32, 511-527.	2.1	30

#	ARTICLE	IF	CITATIONS
163	Retheorizing the Clinical Encounter: Normalization Processes and the Corporate Ecologies of Care. , 2010, , 129-145.		7
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