Sarah Yardley

List of Publications by Year
in descending order

37 papers	1,476 citations	516710 16 h-index	395702 33 g-index
37 all docs	37 docs citations	37 times ranked	2037 citing authors

#	Article	IF	Citations
1	Experiential learning: AMEE Guide No. 63. Medical Teacher, 2012, 34, e102-e115.	1.8	365
2	Kirkpatrick's levels and education 'evidence'. Medical Education, 2012, 46, 97-106.	2.1	295
3	Experiential learning: Transforming theory into practice. Medical Teacher, 2012, 34, 161-164.	1.8	254
4	What has changed in the evidence for early experience? Update of a BEME systematic review. Medical Teacher, 2010, 32, 740-746.	1.8	80
5	The do's, don't and don't knows of supporting transition to more independent practice. Perspectives on Medical Education, 2022, 7, 8-22.	3.5	54
6	Death and dying during the pandemic. BMJ, The, 2020, 369, m1472.	6.0	43
7	Symptom perceptions and help-seeking behaviour prior to lung and colorectal cancer diagnoses: a qualitative study. Family Practice, 2015, 32, 568-577.	1.9	40
8	Patient safety in palliative care: A mixed-methods study of reports to a national database of serious incidents. Palliative Medicine, 2018, 32, 1353-1362.	3.1	40
9	The consequences of authentic early experience for medical students: creation of mĕtis. Medical Education, 2013, 47, 109-119.	2.1	31
10	Minding the gap between communication skills simulation and authentic experience. Medical Education, 2013, 47, 495-510.	2.1	29
11	Modelling successful primary care for multimorbidity: a realist synthesis of successes and failures in concurrent learning and healthcare delivery. BMC Family Practice, 2015, 16, 23.	2.9	29
12	Qualitative research using realist evaluation to explain preparedness for doctors' memorable 'firsts'. Medical Education, 2017, 51, 1037-1048.	2.1	29
13	Lived experiences of multimorbidity: An interpretative meta-synthesis of patients', general practitioners' and trainees' perceptions. Chronic Illness, 2015, 11, 279-303.	1.5	26
14	Authentic early experience in Medical Education: a socio-cultural analysis identifying important variables in learning interactions within workplaces. Advances in Health Sciences Education, 2013, 18, 873-891.	3.3	24
15	'What do we do, doctor?' Transitions of identity and responsibility: a narrative analysis. Advances in Health Sciences Education, 2020, 25, 825-843.	3.3	21
16	Palliative care training in undergraduate medical, nursing and allied health: a survey. BMJ Supportive and Palliative Care, 2022, 12, e489-e492.	1.6	20
17	Preparing to prescribe: How do clerkship students learn in the midst of complexity?. Advances in Health Sciences Education, 2015, 20, 1339-1354.	3.3	19
18	Lost in translation: why medical education research must embrace 'real-world' complexities. Medical Education, 2014, 48, 225-227.	2.1	12

#	ARTICLE	IF	CITATIONS
19	'The nice thing about doctors is that you can sometimes get a day off school': an action research study to bring lived experiences from children, parents and hospice staff into medical students' preparation for practice. BMJ Supportive and Palliative Care, 2016, 6, 459-464.	1.6	10
20	Learning from patient safety incidents involving acutely sick adults in hospital assessment units in England and Wales: a mixed methods analysis for quality improvement. Journal of the Royal Society of Medicine, 2021, 114, 563-574.	2.0	8
21	Patient safety incidents in advance care planning for serious illness: a mixed-methods analysis. BMJ Supportive and Palliative Care, 2019, , bmjspcare-2019-001824.	1.6	7
22	Sense made common: how to add value to early experience. Clinical Teacher, 2014, 11, 5-9.	0.8	6
23	Embracing complexity theory can clarify best practice frameworks for simulation education. Medical Education, 2015, 49, 344-346.	2.1	5
24	Designing whole-task learning opportunities for integrated end-of-life care: a practitioner-derived enquiry. Education for Primary Care, 2013, 24, 436-443.	0.6	4
25	Editorial. Palliative Medicine, 2018, 32, 1039-1041.	3.1	4
26	Multidisciplinary team meetings in palliative care: an ethnographic study. BMJ Supportive and Palliative Care, 2021, , bmjspcare-2021-003267.	1.6	4
27	Understanding success and failure in multimorbidity: protocol for using realist synthesis to identify how social learning and workplace practices can be optimised. Systematic Reviews, 2013, 2, 87.	5.3	3
28	Clinical assessors' working conceptualisations of undergraduate consultation skills: a framework analysis of how assessors make expert judgements in practice. Advances in Health Sciences Education, 2020, 25, 845-875.	3.3	3
29	Understanding the Potential for Pharmacy Expertise in Palliative Care: The Value of Stakeholder Engagement in a Theoretically Driven Mapping Process for Research. Pharmacy (Basel, Switzerland), 2021, 9, 192.	1.6	3
30	Sharing methodology: A worked example of theoretical integration with qualitative data to clarify practical understanding of learning and generate new theoretical development. Medical Teacher, 2013, 35, e1011-e1019.	1.8	2
31	Which human factors design issues are influencing system performance in out-of-hours community palliative care? Integration of realist approaches with an established systems analysis framework to develop mid-range programme theory. BMJ Open, 2022, 12, e048045.	1.9	2
32	How much information is 'reasonable'? A qualitative interview study of the prescribing practices of palliative care professionals. Palliative Medicine, 0, , 026921632211034.	3.1	2
33	Mixed-methods study protocol: do national reporting and learning system medication incidents in palliative care reflect patient and carer concerns about medication management and safety?. BMJ Open, 2021, 11, e048696.	1.9	1
34	Getting palliative medications right across the contexts of homes, hospitals and hospices: protocol to synthesise scoping review and ethnographic methods in an activity theory analysis. BMJ Open, 2022, 12, e061754.	1.9	1
35	Interpreting educational evidence for practice: are autopsies a missed educational opportunity to learn core palliative care principles?. BMJ Supportive and Palliative Care, 2013, 3, 106-113.	1.6	0
36	Milestones: a mixed methods study of an educational intervention to improve care of the dying. BMJ Supportive and Palliative Care, 2020, , bmjspcare-2020-002212.	1.6	0

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37	Good medicines management: From describing problems to a vision for change. Palliative Medicine, 2022, 36, NP7-NP8.	3.1	0