Joshua T Anderson

List of Publications by Year in descending order

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40 615 14 24 papers citations h-index g-index

40 40 40 657 all docs docs citations times ranked citing authors

#	Article	IF	CITATIONS
1	A Multidisciplinary Transitional Pain Management Program Is Associated With Reduced Opioid Dependence After Primary Total Joint Arthroplasty. Journal of Arthroplasty, 2022, 37, 1048-1053.	3.1	11
2	Evaluation of Factors Affecting Return to Work Following Carpal Tunnel Release: A Statewide Cohort Study of Workers' Compensation Subjects. Journal of Hand Surgery, 2022, 47, 544-553.	1.6	2
3	Time to Surgery Affects Return to Work Rates for Workers' Compensation Patients With Single-Level Lumbar Disk Herniation. Orthopedics, 2021, 44, e43-e49.	1.1	2
4	The Impact of Smoking in Workers' Compensation Patients Receiving Spinal Cord Stimulation. Journal of Surgical Orthopaedic Advances, 2021, 30, 185-189.	0.1	0
5	The Role of Antiseptic Irrigation Solutions and Topical Antibiotics in Total Joint Arthroplasty Journal of Surgical Orthopaedic Advances, 2021, 30, 226-230.	0.1	O
6	Displaced Femoral Neck Fractures in Workers' Compensation Patients Aged 45-65 Years: Is It Best to Fix the Fracture or Replace the Joint?. Journal of Arthroplasty, 2020, 35, 3195-3203.	3.1	5
7	Shorter Time to Surgery Is Associated With Better Outcomes for Spondylolisthesis in the Workers' Compensation Population. Orthopedics, 2020, 43, 154-160.	1.1	5
8	NKAP Regulates Senescence and Cell Death Pathways in Hematopoietic Progenitors. Frontiers in Cell and Developmental Biology, 2019, 7, 214.	3.7	7
9	Preoperative Opioid Use is a Predictor of Poor Return to Work in Workers' Compensation Patients After Lumbar Diskectomy. Spine, 2018, 43, 594-602.	2.0	48
10	Preoperative Opioid Use. Clinical Spine Surgery, 2018, 31, E19-E24.	1.3	26
10		0.1	26
	Preoperative Opioid Use. Clinical Spine Surgery, 2018, 31, E19-E24. Lumbar Discography Is Associated With Poor Return to Work Status Following Lumbar Fusion		
11	Preoperative Opioid Use. Clinical Spine Surgery, 2018, 31, E19-E24. Lumbar Discography Is Associated With Poor Return to Work Status Following Lumbar Fusion Surgery in a Workers' Compensation Setting. Journal of Surgical Orthopaedic Advances, 2018, 27, 25-32. Multilevel Lumbar Fusion Is a Risk Factor for Lower Return to Work Rates Among Workers' Compensation Subjects With Degenerative Disc Disease. Journal of Surgical Orthopaedic Advances,	0.1	2
11 12	Preoperative Opioid Use. Clinical Spine Surgery, 2018, 31, E19-E24. Lumbar Discography Is Associated With Poor Return to Work Status Following Lumbar Fusion Surgery in a Workers' Compensation Setting. Journal of Surgical Orthopaedic Advances, 2018, 27, 25-32. Multilevel Lumbar Fusion Is a Risk Factor for Lower Return to Work Rates Among Workers' Compensation Subjects With Degenerative Disc Disease. Journal of Surgical Orthopaedic Advances, 2018, 27, 209-218. Return to Work and Multilevel Versus Single-Level Cervical Fusion for Radiculopathy in a Workers'	0.1	5
11 12 13	Preoperative Opioid Use. Clinical Spine Surgery, 2018, 31, E19-E24. Lumbar Discography Is Associated With Poor Return to Work Status Following Lumbar Fusion Surgery in a Workers' Compensation Setting. Journal of Surgical Orthopaedic Advances, 2018, 27, 25-32. Multilevel Lumbar Fusion Is a Risk Factor for Lower Return to Work Rates Among Workers' Compensation Subjects With Degenerative Disc Disease. Journal of Surgical Orthopaedic Advances, 2018, 27, 209-218. Return to Work and Multilevel Versus Single-Level Cervical Fusion for Radiculopathy in a Workers' Compensation Setting. Spine, 2017, 42, E111-E116. Prolonged Preoperative Opioid Therapy Associated With Poor Return to Work Rates After Single-Level Cervical Fusion for Radiculopathy for Patients Receiving Workers' Compensation Benefits. Spine, 2017,	0.1	2 5 9
11 12 13	Preoperative Opioid Use. Clinical Spine Surgery, 2018, 31, E19-E24. Lumbar Discography Is Associated With Poor Return to Work Status Following Lumbar Fusion Surgery in a Workers' Compensation Setting. Journal of Surgical Orthopaedic Advances, 2018, 27, 25-32. Multilevel Lumbar Fusion Is a Risk Factor for Lower Return to Work Rates Among Workers' Compensation Subjects With Degenerative Disc Disease. Journal of Surgical Orthopaedic Advances, 2018, 27, 209-218. Return to Work and Multilevel Versus Single-Level Cervical Fusion for Radiculopathy in a Workers' Compensation Setting. Spine, 2017, 42, E111-E116. Prolonged Preoperative Opioid Therapy Associated With Poor Return to Work Rates After Single-Level Cervical Fusion for Radiculopathy for Patients Receiving Workers' Compensation Benefits. Spine, 2017, 42, E104-E110. Surgical and Functional Outcomes After Multilevel Cervical Fusion for Degenerative Disc Disease	0.1 0.1 2.0 2.0	2 5 9 46
11 12 13 14	Preoperative Opioid Use. Clinical Spine Surgery, 2018, 31, E19-E24. Lumbar Discography Is Associated With Poor Return to Work Status Following Lumbar Fusion Surgery in a Workers' Compensation Setting. Journal of Surgical Orthopaedic Advances, 2018, 27, 25-32. Multilevel Lumbar Fusion Is a Risk Factor for Lower Return to Work Rates Among Workers' Compensation Subjects With Degenerative Disc Disease. Journal of Surgical Orthopaedic Advances, 2018, 27, 209-218. Return to Work and Multilevel Versus Single-Level Cervical Fusion for Radiculopathy in a Workers' Compensation Setting. Spine, 2017, 42, E111-E116. Prolonged Preoperative Opioid Therapy Associated With Poor Return to Work Rates After Single-Level Cervical Fusion for Radiculopathy for Patients Receiving Workers' Compensation Benefits. Spine, 2017, 42, E104-E110. Surgical and Functional Outcomes After Multilevel Cervical Fusion for Degenerative Disc Disease Compared With Fusion for Radiculopathy. Spine, 2017, 42, 700-706. Treatment of Recurrent Lumbar Disc Herniation With or Without Fusion in Workers' Compensation	0.1 0.1 2.0 2.0	2 5 9 46

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19	Prolonged Preoperative Opioid Therapy in Patients with Degenerative Lumbar Stenosis in a Workers― Compensation Setting. Spine Journal, 2017, 17, S203.	1.3	3
20	Kyphoplasty vs Orthosis for Treatment of Thoracolumbar Vertebral Fractures in the Workers' Compensation Population. Spine Journal, 2017, 17, S217-S218.	1.3	1
21	Vertebroplasty and Return to Work for Thoracolumbar Fractures Within the Workers' Compensation Population. Spine, 2017, 42, 1024-1030.	2.0	6
22	Decompression Versus Decompression and Fusion for Degenerative Lumbar Stenosis in a Workers' Compensation Setting. Spine, 2017, 42, 1017-1023.	2.0	20
23	The Timing of Surgery Affects Return to Work Rates in Patients With Degenerative Lumbar Stenosis in a Workers' Compensation Setting. Clinical Spine Surgery, 2017, 30, E1444-E1449.	1.3	8
24	Neck Pain, Preoperative Opioids, and Functionality After Cervical Fusion. Orthopedics, 2017, 40, 25-32.	1.1	21
25	Return to Work Rates After Single-level Cervical Fusion for Degenerative Disc Disease Compared With Fusion for Radiculopathy in a Workers' Compensation Setting. Spine, 2016, 41, 1160-1166.	2.0	17
26	Predictors of Chronic Opioid Therapy after Lumbar Fusion Surgery for Degenerative Disc Disease in a Workers' Compensation Setting. Spine Journal, 2016, 16, S343.	1.3	0
27	Prognostic Factors for Return to Work Status following Lumbar Fusion among Workers' Compensation Subjects with Spondylolisthesis. Spine Journal, 2016, 16, S367.	1.3	1
28	Workers' Compensation, Return to Work, and Lumbar Fusion for Spondylolisthesis. Orthopedics, 2016, 39, e1-8.	1.1	24
29	Return to Work After Diskogenic Fusion in Workers' Compensation Subjects. Orthopedics, 2015, 38, e1065-72.	1.1	28
30	Chronic Opioid Therapy After Lumbar Fusion Surgery for Degenerative Disc Disease in a Workers' Compensation Setting. Spine, 2015, 40, 1775-1784.	2.0	92
31	Clinical Depression Is a Strong Predictor of Poor Lumbar Fusion Outcomes Among Workers' Compensation Subjects. Spine, 2015, 40, 748-756.	2.0	85
32	Single-Level Lumbar Fusion for Degenerative Disc Disease Is Associated With Worse Outcomes Compared With Fusion for Spondylolisthesis in a Workers $\hat{E}\frac{1}{4}$ Compensation Setting. Spine, 2015, 40, 323-331.	2.0	35
33	Return-to-Work Rates after Single Level Cervical Fusion Surgery for Degenerative Disc Disease (DDD) Compared to Fusion for Radiculopathy in Workers' Compensation (WC) Setting. Spine Journal, 2015, 15, S106.	1.3	1
34	Preoperative Duration of Opioid Use and Return to Work (RTW) Rates after Single-Level Cervical Fusion in Workers' Compensation (WC) Setting. Spine Journal, 2015, 15, S234-S235.	1.3	0
35	Lumbar Diskography and Failed Back Syndrome in Patients Receiving Workers' Compensation. Orthopedics, 2015, 38, e951-8.	1.1	5
36	Can Internet Information on Vertebroplasty be a Reliable Means of Patient Self-education?. Clinical Orthopaedics and Related Research, 2014, 472, 1597-1604.	1.5	38

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37	Presurgical Patient Evaluation with Lumbar Discography is Associated with Significantly More Days Absent from Work following Lumbar Fusion in a Workers' Compensation Setting. Spine Journal, 2014, 14, S102-S103.	1.3	0
38	Lumbar Fusion for Degenerative Disc Disease is Associated with Significantly Higher Rates of Failed Back Surgery Syndrome Compared to Fusion for Spondylolisthesis in a Workers' Compensation Setting. Spine Journal, 2014, 14, S71.	1.3	0
39	Clinical Depression is a Strong Risk Factor for Poor Return to Work Rates Following Lumbar Fusion Surgery in a Workers Compensation Setting. Spine Journal, 2014, 14, S68-S69.	1.3	0
40	Analysis of Internet information on the controversial X-Stop device. Spine Journal, 2014, 14, 2412-2419.	1.3	7