

# Sarah C Oltmann

## List of Publications by Year in descending order

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47  
papers

1,541  
citations

331670

21  
h-index

302126

39  
g-index

47  
all docs

47  
docs citations

47  
times ranked

1699  
citing authors

#	ARTICLE	IF	CITATIONS
1	Commentary: Locoregional metastasis of adrenocortical carcinoma and lymphadenectomy â€“ Disease clearance or identification of high-risk features?. American Journal of Surgery, 2021, , .	1.8	1
2	Using telemedicine on an acute care surgery service: improving clinic efficiency and access to care. Surgical Endoscopy and Other Interventional Techniques, 2020, 35, 5760-5765.	2.4	10
3	Phosphoprotein-based biomarkers as predictors for cancer therapy. Proceedings of the National Academy of Sciences of the United States of America, 2020, 117, 18401-18411.	7.1	25
4	Trends in Radioactive Iodine Usage at a County Hospital: How Has Practice Changed in Response to the 2015 American Thyroid Association Guidelines?. Journal of the American College of Surgeons, 2019, 229, e105.	0.5	1
5	Are PROMs ideally suited for most common endocrine surgical patients and procedures?. Surgery, 2019, 165, 240-241.	1.9	2
6	Rapid Relief: Thyroidectomy is a Quicker Cure than Radioactive Iodine Ablation (RAI) in Patients with Hyperthyroidism. World Journal of Surgery, 2019, 43, 812-817.	1.6	3
7	Access to Paid Parental Leave for Academic Surgeons. Journal of Surgical Research, 2019, 233, 144-148.	1.6	28
8	The surgical management of primary hyperparathyroidism: an updated review. International Journal of Endocrine Oncology, 2018, 5, IJE07.	0.4	5
9	Preclinical characterization of tyrosine kinase inhibitor-based targeted therapies for neuroendocrine thyroid cancer. Oncotarget, 2018, 9, 37662-37675.	1.8	5
10	Is Outpatient Thyroid Surgery for Everyone?. Clinical Medicine Insights Ear, Nose and Throat, 2017, 10, 117955061772442.	1.5	13
11	Early endocrine attending surgeon presence increases operating room efficiency. Journal of Surgical Research, 2016, 205, 272-278.	1.6	13
12	Antiplatelet and Anticoagulant Medications Significantly Increase the Risk of Postoperative Hematoma: Review of over 4500 Thyroid and Parathyroid Procedures. Annals of Surgical Oncology, 2016, 23, 2874-2882.	1.5	39
13	Contralateral adrenal abnormalities in Conn's syndrome. Journal of Surgical Research, 2016, 200, 183-188.	1.6	4
14	The transabdominal minimally invasive approach to the isolated adrenal mass. International Journal of Endocrine Oncology, 2015, 2, 185-192.	0.4	0
15	Surgical management of the patient with primary hyperparathyroidism. International Journal of Endocrine Oncology, 2015, 2, 21-29.	0.4	0
16	PDZK1 Prevents Neointima Formation via Suppression of Breakpoint Cluster Region Kinase in Vascular Smooth Muscle. PLoS ONE, 2015, 10, e0124494.	2.5	2
17	Kidney Disease Improving Global Outcomes guidelines and parathyroidectomy for renal hyperparathyroidism. Journal of Surgical Research, 2015, 199, 115-120.	1.6	19
18	Preventing Postoperative Hypocalcemia in Patients with Graves Disease: A Prospective Study. Annals of Surgical Oncology, 2015, 22, 952-958.	1.5	48

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19	Justified Follow-Up: A Final Intraoperative Parathyroid Hormone (ioPTH) Over 40Âpg/mL is Associated with an Increased Risk of Persistence and Recurrence in Primary Hyperparathyroidism. <i>Annals of Surgical Oncology</i> , 2015, 22, 454-459.	1.5	32
20	All Thyroid Ultrasound Evaluations are Not Equal: Sonographers Specialized in Thyroid Cancer Correctly Label Clinical NO Disease in Well Differentiated Thyroid Cancer. <i>Annals of Surgical Oncology</i> , 2015, 22, 422-428.	1.5	34
21	Preoperative impairment is associated with a higher postdischarge level of care. <i>Journal of Surgical Research</i> , 2015, 193, 1-6.	1.6	11
22	Is intraoperative parathyroid hormone testing inÂpatients with renal insufficiency undergoing parathyroidectomy for primary hyperparathyroidism accurate?. <i>American Journal of Surgery</i> , 2015, 209, 483-487.	1.8	21
23	Outcomes After Subtotal Parathyroidectomy for Primary Hyperparathyroidism due to Hyperplasia: Significance of Whole vs. Partial Gland Remnant. <i>Annals of Surgical Oncology</i> , 2015, 22, 966-971.	1.5	11
24	Postoperative surveillance of small appendiceal carcinoid tumors. <i>American Journal of Surgery</i> , 2014, 207, 342-345.	1.8	35
25	Markedly elevated thyroglobulin levels in the preoperative thyroidectomy patient correlates with metastatic burden. <i>Journal of Surgical Research</i> , 2014, 187, 1-5.	1.6	24
26	Primary hyperparathyroidism across the ages: presentation and outcomes. <i>Journal of Surgical Research</i> , 2014, 190, 185-190.	1.6	19
27	How do we improve patient access to high-volume thyroid surgeons?. <i>Surgery</i> , 2014, 156, 1450-1452.	1.9	3
28	Novel Thyroidectomy Difficulty Scale Correlates with Operative Times. <i>World Journal of Surgery</i> , 2014, 38, 1984-1989.	1.6	33
29	Radioactive Iodine Remnant Uptake After Completion Thyroidectomy: Not Such a Complete Cancer Operation. <i>Annals of Surgical Oncology</i> , 2014, 21, 1379-1383.	1.5	31
30	Surgeon and Staff Radiation Exposure During Radioguided Parathyroidectomy at a High-Volume Institution. <i>Annals of Surgical Oncology</i> , 2014, 21, 3853-3858.	1.5	17
31	Is intraoperative parathyroid hormone monitoring necessary with ipsilateral parathyroid gland visualization during anticipated unilateral exploration forÂprimary hyperparathyroidism: AÂtwo-institution analysis of more thanÂ2,000 patients. <i>Surgery</i> , 2014, 156, 760-768.	1.9	24
32	Identifying predictors of a difficult thyroidectomy. <i>Journal of Surgical Research</i> , 2014, 190, 157-163.	1.6	35
33	Minimally Invasive Radioguided Parathyroidectomy. <i>Current Surgery Reports</i> , 2013, 1, 1-6.	0.9	4
34	A multi-institutional international study of risk factors for hematoma after thyroidectomy. <i>Surgery</i> , 2013, 154, 1283-1291.	1.9	86
35	Doing Away with the Rule of 10Â%. <i>Annals of Surgical Oncology</i> , 2013, 20, 1403-1404.	1.5	1
36	Significance of rebounding parathyroid hormone levels during parathyroidectomy. <i>Journal of Surgical Research</i> , 2013, 184, 265-268.	1.6	8

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37	A short-stay unit for thyroidectomy patients increases discharge efficiency. <i>Journal of Surgical Research</i> , 2013, 184, 204-208.	1.6	12
38	Presentation, Management, and Outcomes of Hyperparathyroidism in Octogenarians and Nonagenarians. <i>Annals of Surgical Oncology</i> , 2013, 20, 4195-4199.	1.5	8
39	Ovarian torsion: diagnosis of inclusion mandates earlier intervention. <i>Journal of Pediatric Surgery</i> , 2012, 47, 2071-2076.	1.6	50
40	Significance Of Elevated Parathyroid Hormone After Parathyroidectomy For Primary Hyperparathyroidism. <i>Endocrine Practice</i> , 2011, 17, 57-62.	2.1	29
41	Pediatric ovarian malignancy presenting as ovarian torsion: incidence and relevance. <i>Journal of Pediatric Surgery</i> , 2010, 45, 135-139.	1.6	129
42	Can we preoperatively risk stratify ovarian masses for malignancy?. <i>Journal of Pediatric Surgery</i> , 2010, 45, 130-134.	1.6	136
43	Pediatric ovarian malignancies: how efficacious are current staging practices?. <i>Journal of Pediatric Surgery</i> , 2010, 45, 1096-1102.	1.6	34
44	Single-incision laparoscopic surgery: feasibility for pediatric appendectomies. <i>Journal of Pediatric Surgery</i> , 2010, 45, 1208-1212.	1.6	52
45	Non-nuclear estrogen receptor $\beta$ signaling promotes cardiovascular protection but not uterine or breast cancer growth in mice. <i>Journal of Clinical Investigation</i> , 2010, 120, 2319-2330.	8.2	217
46	Cannot exclude torsion—a 15-year review. <i>Journal of Pediatric Surgery</i> , 2009, 44, 1212-1217.	1.6	194
47	Single-incision laparoscopic surgery: case report of SILS adjustable gastric banding. <i>Surgery for Obesity and Related Diseases</i> , 2009, 5, 362-364.	1.2	33