Christopher Kabrhel

List of Publications by Year
in descending order

114 papers	4,329 citations	101496 36 h-index	128225 60 g-index
120 all docs	120 docs citations	120 times ranked	5037 citing authors

#	Article	IF	Citations
1	Predicting factors for pulmonary embolism response team activation in a general pulmonary embolism population. Journal of Thrombosis and Thrombolysis, 2022, 53, 506-513.	1.0	4
2	Oral postmenopausal hormone therapy and genetic risk on venous thromboembolism: gene-hormone interaction results from a large prospective cohort study. Menopause, 2022, 29, 293-303.	0.8	4
3	Disease consequences of higher adiposity uncoupled from its adverse metabolic effects using Mendelian randomisation. ELife, 2022, 11, .	2.8	10
4	SARS-CoV-2 Positivity in Ambulatory Symptomatic Patients Is Not Associated With Increased Venous or Arterial Thrombotic Events in the Subsequent 30 Days. Journal of Emergency Medicine, 2022, 62, 716-724.	0.3	8
5	Interhospital Transfer for the Management of Acute Pulmonary Embolism. American Journal of Medicine, 2022, 135, 531-535.	0.6	7
6	Patient and operational factors that influence the decision to place an inferior vena cava filter in a pulmonary embolism response team. Journal of Vascular Surgery: Venous and Lymphatic Disorders, 2021, 9, 895-903.	0.9	2
7	The echocardiographic ratio tricuspid annular plane systolic excursion/pulmonary arterial systolic pressure predicts short-term adverse outcomes in acute pulmonary embolism. European Heart Journal Cardiovascular Imaging, 2021, 22, 285-294.	0.5	40
8	Left Ventricular Dysfunction Correlates With Mortality in Pulmonary Embolism. Journal of Emergency Medicine, 2021, 60, 135-143.	0.3	5
9	Clinical prediction rule for SARS-CoV-2 infection from 116 U.S. emergency departments 2-22-2021. PLoS ONE, 2021, 16, e0248438.	1.1	17
10	Sexâ€related differences in Dâ€dimer levels for venous thromboembolism screening. Academic Emergency Medicine, 2021, 28, 873-881.	0.8	6
11	Clinical factors associated with massive pulmonary embolism and PE-related adverse clinical events. International Journal of Cardiology, 2021, 330, 194-199.	0.8	3
12	Interhospital Transfer of Patients With Acute Pulmonary Embolism. Chest, 2021, 160, 1844-1852.	0.4	19
13	Association Between Baseline Use of Angiotensinâ€Converting Enzyme Inhibitors and AngiotensinÂReceptor Blockers and Death Among Patients Tested for COVIDâ€19. Journal of Clinical Pharmacology, 2021, , .	1.0	4
14	A clinical decision framework to guide the outpatient treatment of emergency department patients diagnosed with acute pulmonary embolism or deep vein thrombosis: Results from a multidisciplinary consensus panel. Journal of the American College of Emergency Physicians Open, 2021, 2, e12588.	0.4	3
15	Incidence and characteristics of arterial thromboemboli in patients with COVID-19. Thrombosis Journal, 2021, 19, 104.	0.9	9
16	Association Between Genetic Predictors for C-Reactive Protein and Venous Thromboembolism With Severe Adverse Coronavirus Disease 2019 Outcomes. , 2021, 3, e0602.		0
17	Analysis of Partial Thromboplastin Times in Patients With Pulmonary Embolism During the First 48 Hours of Anticoagulation With Unfractionated Heparin. Academic Emergency Medicine, 2020, 27, 117-127.	0.8	21
18	Concern for a Classic Sexually Transmitted Infection. Journal of Emergency Medicine, 2020, 58, 330-333.	0.3	0

#	Article	IF	Citations
19	Cultivating a Better Understanding of COVIDâ€19 Amidst a Shifting Landscape. Academic Emergency Medicine, 2020, 27, 925-927.	0.8	0
20	Current Controversies in Caring for the Critically Ill Pulmonary Embolism Patient. Emergency Medicine Clinics of North America, 2020, 38, 931-944.	0.5	2
21	Comparison of 4 Acute Pulmonary Embolism Mortality Risk Scores in Patients Evaluated by Pulmonary Embolism Response Teams. JAMA Network Open, 2020, 3, e2010779.	2.8	26
22	Diagnosis and Treatment of Pulmonary Embolism During the Coronavirus Disease 2019 Pandemic. Chest, 2020, 158, 2590-2601.	0.4	59
23	Multicenter registry of United States emergency department patients tested for SARSâ€CoVâ€2. Journal of the American College of Emergency Physicians Open, 2020, 1, 1341-1348.	0.4	21
24	Special Considerations in Pulmonary Embolism. Critical Care Clinics, 2020, 36, 531-546.	1.0	12
25	Abdominal pain in a patient with COVID-19 infection: A case of multiple thromboemboli. American Journal of Emergency Medicine, 2020, 38, 2245.e3-2245.e5.	0.7	10
26	Pulmonary embolism with clot in transit: An analysis of risk factors and outcomes. Thrombosis Research, 2020, 187, 139-147.	0.8	14
27	Percutaneous Thrombectomy in Emergency Department Patients with Pulmonary Embolism: The FLARE ED Sub-study. Journal of Emergency Medicine, 2020, 58, 175-182.	0.3	8
28	Multicenter Implementation of a Novel Management Protocol Increases the Outpatient Treatment of Pulmonary Embolism and Deep Vein Thrombosis. Academic Emergency Medicine, 2019, 26, 657-669.	0.8	22
29	Extracorporeal membrane oxygenation in acute massive pulmonary embolism: a case series and review of the literature. Perfusion (United Kingdom), 2019, 34, 22-28.	0.5	61
30	Septal bowing and pulmonary artery diameter on computed tomography pulmonary angiography are associated with short-term outcomes in patients with acute pulmonary embolism. Emergency Radiology, 2019, 26, 623-630.	1.0	21
31	Genomic and transcriptomic association studies identify 16 novel susceptibility loci for venous thromboembolism. Blood, 2019, 134, 1645-1657.	0.6	162
32	Highly Elevated Quantitative D-Dimer Assay Values Increase the Likelihood of Venous Thromboembolism. TH Open, 2019, 03, e2-e9.	0.7	6
33	Genome-wide association analysis of venous thromboembolism identifies new risk loci and genetic overlap with arterial vascular disease. Nature Genetics, 2019, 51, 1574-1579.	9.4	152
34	Rare Genetic Variants Associated With Sudden Cardiac Death in Adults. Journal of the American College of Cardiology, 2019, 74, 2623-2634.	1.2	27
35	Interventional Therapies for Acute Pulmonary Embolism: Current Status and Principles for the Development of Novel Evidence: A Scientific Statement From the American Heart Association. Circulation, 2019, 140, e774-e801.	1.6	241
36	A largeâ€scale exome array analysis of venous thromboembolism. Genetic Epidemiology, 2019, 43, 449-457.	0.6	22

#	Article	IF	Citations
37	Impact of chronic right ventricular pressure overload in short-term outcomes of acute pulmonary embolism: A retrospective analysis. Journal of Critical Care, 2019, 51, 1-5.	1.0	4
38	Pulmonary embolism response teams: Purpose, evidence for efficacy, and future research directions. Research and Practice in Thrombosis and Haemostasis, 2019, 3, 315-330.	1.0	57
39	Diagnosis, Treatment and Follow Up of Acute Pulmonary Embolism: Consensus Practice from the PERT Consortium. Clinical and Applied Thrombosis/Hemostasis, 2019, 25, 107602961985303.	0.7	174
40	Chronic right ventricular pressure overload in acute pulmonary embolism. Journal of Critical Care, 2019, 54, 276.	1.0	0
41	How the Results of a Randomized Trial of Catheter-Directed Thrombolysis Versus Anticoagulation alone for Submassive Pulmonary Embolism Would Affect Patient and Physician Decision Making: Report of an Online Survey. Journal of Clinical Medicine, 2019, 8, 215.	1.0	2
42	Cardiovascular Risk Factors Associated With Venous Thromboembolism. JAMA Cardiology, 2019, 4, 163.	3.0	187
43	A multidisciplinary pulmonary embolism response team (PERT)â€"experience from a national multicenter consortium. Pulmonary Circulation, 2019, 9, 1-10.	0.8	45
44	Changes in treatment and outcomes after creation of a pulmonary embolism response team (PERT), a 10-year analysis. Journal of Thrombosis and Thrombolysis, 2019, 47, 31-40.	1.0	94
45	D-dimer levels in VTE patients with distal and proximal clots. American Journal of Emergency Medicine, 2019, 37, 33-37.	0.7	11
46	Cardiopulmonary Exercise Testing in Patients Following Massive and Submassive Pulmonary Embolism. Journal of the American Heart Association, 2018, 7, .	1.6	48
47	Treatment of submassive and massive pulmonary embolism: a clinical practice survey from the second annual meeting of the Pulmonary Embolism Response Team Consortium. Journal of Thrombosis and Thrombolysis, 2018, 46, 39-49.	1.0	19
48	Multicenter Evaluation of the <scp>YEARS</scp> Criteria in Emergency Department Patients Evaluated for Pulmonary Embolism. Academic Emergency Medicine, 2018, 25, 987-994.	0.8	35
49	International, multicenter evaluation of a new D-dimer assay for the exclusion of venous thromboembolism using standard and age-adjusted cut-offs. Thrombosis Research, 2018, 166, 63-70.	0.8	18
50	Trends and Variation in the Utilization and Diagnostic Yield of Chest Imaging for Medicare Patients With Suspected Pulmonary Embolism in the Emergency Department. American Journal of Roentgenology, 2018, 210, 572-577.	1.0	42
51	Design and rationale of a randomized trial comparing standard versus ultrasound-assisted thrombolysis for submassive pulmonary embolism. Journal of Vascular Surgery: Venous and Lymphatic Disorders, 2018, 6, 126-132.	0.9	27
52	Interaction of a genetic risk score with physical activity, physical inactivity, and body mass index in relation to venous thromboembolism risk. Genetic Epidemiology, 2018, 42, 354-365.	0.6	16
53	Altered Mental Status in an Elderly Male. Journal of Emergency Medicine, 2018, 54, 232-237.	0.3	0
54	Validation of the STA-Liatest DDi assay for exclusion of proximal deep vein thrombosis according to the latest Clinical and Laboratory Standards Institute/Food and Drug Administration guideline. Blood Coagulation and Fibrinolysis, 2018, 29, 562-566.	0.5	5

#	Article	IF	Citations
55	Adiposity throughout the life course and risk of venous thromboembolism. Thrombosis Research, 2018, 172, 67-73.	0.8	9
56	Emergency Department Discharge of Pulmonary Embolus Patients. Academic Emergency Medicine, 2018, 25, 995-1003.	0.8	40
57	Discrepancy Between Clinician Gestalt and Subjective Component of the Wells Score in the Evaluation of Pulmonary Embolism. Annals of Emergency Medicine, 2018, 71, 796-798.	0.3	6
58	Ruling out Pulmonary Embolism in Patients with High Pretest Probability. Western Journal of Emergency Medicine, 2018, 19, 487-493.	0.6	6
59	Pulmonary Embolism Response Team. Clinics in Chest Medicine, 2018, 39, 621-630.	0.8	13
60	Contemporary Management and Outcomes of Patients with Massive and Submassive Pulmonary Embolism. American Journal of Medicine, 2018, 131, 1506-1514.e0.	0.6	79
61	Achieving Multidisciplinary Collaboration for the Creation of a Pulmonary Embolism Response Team: Creating a â€œTeam of Rivalsâ€• Seminars in Interventional Radiology, 2017, 34, 16-24.	0.3	11
62	The creation and implementation of an outpatient pulmonary embolism treatment protocol. Hospital Practice (1995), 2017, 45, 123-129.	0.5	12
63	Assessing the causal relationship between obesity and venous thromboembolism through a Mendelian Randomization study. Human Genetics, 2017, 136, 897-902.	1.8	46
64	A Pulmonary Embolism Response Team: initial experiences and future directions. Expert Review of Cardiovascular Therapy, 2017, 15, 481-489.	0.6	21
65	Nuts and bolts of running a pulmonary embolism response team: results from an organizational survey of the National PERTâ„¢ Consortium members. Hospital Practice (1995), 2017, 45, 76-80.	0.5	31
66	Impact of Pulmonary Arterial Clot Location on Pulmonary Embolism Treatment and Outcomes (90ÂDays). American Journal of Cardiology, 2017, 119, 802-807.	0.7	21
67	Epidemiology, Pathophysiology, Stratification, and Natural History of Pulmonary Embolism. Techniques in Vascular and Interventional Radiology, 2017, 20, 135-140.	0.4	88
68	Diagnosing pulmonary embolism: we are not so different after allâ€¦. Lancet Haematology,the, 2017, 4, e571-e572.	2.2	0
69	Systemic Thrombolysis, Catheterâ€Directed Thrombolysis, and Anticoagulation for Intermediateâ€risk Pulmonary Embolism: A Simulation Modeling Analysis. Academic Emergency Medicine, 2017, 24, 1235-1243.	0.8	5
70	Assessment of Right Ventricular Strain by Computed Tomography Versus Echocardiography in Acute Pulmonary Embolism. Academic Emergency Medicine, 2017, 24, 337-343.	0.8	50
71	Does the Time of Day a Pulmonary Embolism Response Team Is Activated Affect Time to Intervention or Outcome?. Chest, 2017, 152, 1353-1354.	0.4	6
72	Comparison of Emergency Department Patients to Inpatients Receiving a Pulmonary Embolism Response Team (<scp>PERT</scp>) Activation. Academic Emergency Medicine, 2017, 24, 814-821.	0.8	17

#	Article	IF	Citations
73	A comprehensive survey of genetic variation in 20,691 subjects from four large cohorts. PLoS ONE, 2017, 12, e0173997.	1.1	52
74	Pulmonary embolism: the diagnosis, risk-stratification, treatment and disposition of emergency department patients. Clinical and Experimental Emergency Medicine, 2016, 3, 117-125.	0.5	53
75	What is the effect of venous thromboembolism and related complications on patient reported health-related quality of life?. Thrombosis and Haemostasis, 2016, 116, 417-431.	1.8	51
76	Interactions of established risk factors and a GWAS-based genetic risk score on the risk of venous thromboembolism. Thrombosis and Haemostasis, 2016, 116, 705-713.	1.8	15
77	Diversity in the Pulmonary Embolism Response Team Model. Chest, 2016, 150, 1414-1417.	0.4	72
78	Multicenter Trial of Rivaroxaban for Early Discharge of Pulmonary Embolism From the Emergency Department (MERCURY PE): Rationale and Design. Academic Emergency Medicine, 2016, 23, 1280-1286.	0.8	18
79	Relation Among Clot Burden, Right-Sided Heart Strain, and Adverse Events After Acute Pulmonary Embolism. American Journal of Cardiology, 2016, 118, 1568-1573.	0.7	32
80	Pulmonary Embolism Response Teams. Seminars in Thrombosis and Hemostasis, 2016, 42, 857-864.	1.5	15
81	Environmental and Genetic Risk Factors Associated with Venous Thromboembolism. Seminars in Thrombosis and Hemostasis, 2016, 42, 808-820.	1.5	129
82	The Outpatient Treatment of Venous Thromboembolism: Operational Impact and the Role of Novel Anticoagulants. Seminars in Thrombosis and Hemostasis, 2016, 42, 846-856.	1.5	5
83	Research Priorities in Submassive Pulmonary Embolism: Proceedings from a Multidisciplinary Research Consensus Panel. Journal of Vascular and Interventional Radiology, 2016, 27, 787-794.	0.2	26
84	A Multidisciplinary Pulmonary Embolism Response Team. Chest, 2016, 150, 384-393.	0.4	195
85	Association Between Electrocardiographic Findings, Right Heart Strain, and Shortâ€Term Adverse Clinical Events in Patients With Acute Pulmonary Embolism. Clinical Cardiology, 2015, 38, 236-242.	0.7	18
86	Prospective Study of Ambient Particulate Matter Exposure and Risk of Pulmonary Embolism in the Nursesâ€™ Health Study Cohort. Environmental Health Perspectives, 2015, 123, 1265-1270.	2.8	27
87	Emergency Evaluation for Pulmonary Embolism, Part 2: Diagnostic Approach. Journal of Emergency Medicine, 2015, 49, 104-117.	0.3	28
88	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.	1.0	21
89	A Comparison of Patients Diagnosed With Pulmonary Embolism Who Are â‰¥65ÂYears With Patients <65ÂYears. American Journal of Cardiology, 2015, 115, 681-686.	0.7	15
90	Emergency Evaluation for Pulmonary Embolism, Part 1: Clinical Factors that Increase Risk. Journal of Emergency Medicine, 2015, 48, 771-780.	0.3	29

#	Article	IF	Citations
91	Life-threatening flecainide overdose treated with intralipid and extracorporeal membrane oxygenation. American Journal of Emergency Medicine, 2015, 33, 1840.e3-1840.e5.	0.7	25
92	Meta-analysis of 65,734 Individuals Identifies TSPAN15 and SLC44A2 as Two Susceptibility Loci for Venous Thromboembolism. American Journal of Human Genetics, 2015, 96, 532-542.	2.6	222
93	Independent evaluation of a simple clinical prediction rule to identify right ventricular dysfunction in patients with shortness of breath. American Journal of Emergency Medicine, 2015, 33, 542-547.	0.7	8
94	Pulmonary Hypertension and Right Ventricular Failure inÂEmergency Medicine. Annals of Emergency Medicine, 2015, 66, 619-628.	0.3	51
95	The Massachusetts General Hospital Pulmonary Embolism Response Team (MGH PERT): Creation of a Multidisciplinary Program to Improve Care of Patients With Massive and Submassive Pulmonary Embolism. Hospital Practice (1995), 2014, 42, 31-37.	0.5	123
96	Factors associated with clinical deterioration shortly after PE. Thorax, 2014, 69, 835-842.	2.7	62
97	Patient preferences for testing for pulmonary embolism in the ED using a shared decision-making model. American Journal of Emergency Medicine, 2014, 32, 233-236.	0.7	23
98	Pretest probability assessment combined with point-of-care D-dimer testing allows primary care physicians to rule out pulmonary embolism. Evidence-Based Medicine, 2013, 18, 187-188.	0.6	0
99	A Multidisciplinary Pulmonary Embolism Response Team. Chest, 2013, 144, 1738-1739.	0.4	84
100	Prospective Study of Diet and Venous Thromboembolism in US Women and Men. American Journal of Epidemiology, 2012, 175, 114-126.	1.6	48
101	Physical inactivity and idiopathic pulmonary embolism in women: prospective study. BMJ: British Medical Journal, 2011, 343, d3867-d3867.	2.4	66
102	Factors Associated With Positive Dâ€dimer Results in Patients Evaluated for Pulmonary Embolism. Academic Emergency Medicine, 2010, 17, 589-597.	0.8	141
103	Prospective study of ABO blood type and the risk of pulmonary embolism in two large cohort studies. Thrombosis and Haemostasis, 2010, 104, 962-971.	1.8	34
104	Prospective Study of BMI and the Risk of Pulmonary Embolism in Women. Obesity, 2009, 17, 2040-2046.	1.5	94
105	Potential Impact of Adjusting the Threshold of the Quantitative Dâ€dimer Based on Pretest Probability of Acute Pulmonary Embolism. Academic Emergency Medicine, 2009, 16, 325-332.	0.8	38
106	Outcomes of High Pretest Probability Patients Undergoing D-Dimer Testing for Pulmonary Embolism: A Pilot Study. Journal of Emergency Medicine, 2008, 35, 373-377.	0.3	14
107	Orotracheal Intubation. New England Journal of Medicine, 2007, 356, e15.	13.9	43
108	The Probability of Pulmonary Embolism Is a Function of the Diagnoses Considered Most Likely Before Testing. Academic Emergency Medicine, 2006, 13, 471-474.	0.8	12

#	Article	IF	Citations
109	A Highly Sensitive ELISA D-Dimer Increases Testing but Not Diagnosis of Pulmonary Embolism. Academic Emergency Medicine, 2006, 13, 519-524.	0.8	49
110	Clinical Gestalt and the Diagnosis of Pulmonary Embolism. Chest, 2005, 127, 1627-1630.	0.4	82
111	The Contribution of the Subjective Component of the Canadian Pulmonary Embolism Score to the Overall Score in Emergency Department Patients. Academic Emergency Medicine, 2005, 12, 915-920.	0.8	27
112	Creation of an Online Collection of Emergency Medicine Literature. Academic Emergency Medicine, 2005, 12, 173-175.	0.8	2
113	Creation of an Online Collection of Emergency Medicine Literature. Academic Emergency Medicine, 2005, 12, 173-175.	0.8	3
114	Clinical Pearls:A 37-year-old Man with a Rashâ€¦. Academic Emergency Medicine, 2003, 10, 776-779.	0.8	1