Tom Sanders

List of Publications by Year in descending order

Source: https://exaly.com/author-pdf/6780418/publications.pdf

Version: 2024-02-01

18	467	11	17
papers	citations	h-index	g-index
18	18	18	828
all docs	docs citations	times ranked	citing authors

#	Article	IF	CITATIONS
1	Professional legitimacy claims in the multidisciplinary workplace: the case of heart failure care. Sociology of Health and Illness, 2008, 30, 289-308.	2.1	106
2	Perceptions of general practitioners towards the use of a new system for treating back pain: a qualitative interview study. BMC Medicine, 2011, 9, 49.	5 . 5	60
3	The Identity Crisis of Osteoarthritis in General Practice: A Qualitative Study Using Video-Stimulated Recall. Annals of Family Medicine, 2015, 13, 537-544.	1.9	42
4	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
5	The implications of living with heart failure; the impact on everyday life, family support, co-morbidities and access to healthcare: a secondary qualitative analysis. BMC Family Practice, 2016, 17, 139.	2.9	33
6	Unplanned admissions and the organisational management of heart failure: a multicentre ethnographic, qualitative study. BMJ Open, 2015, 5, e007522.	1.9	30
7	"Sometimes we can't fix things― a qualitative study of health care professionals' perceptions of end of life care for patients with heart failure. BMC Palliative Care, 2016, 15, 3.	1.8	30
8	Managing Patients With Heart Failure: A Qualitative Study of Multidisciplinary Teams With Specialist Heart Failure Nurses. Annals of Family Medicine, 2015, 13, 466-471.	1.9	29
9	Exploring the Added Value of Video-Stimulated Recall in Researching the Primary Care Doctor–Patient Consultation. International Journal of Qualitative Methods, The, 2017, 16, 160940691771962.	2.8	16
10	Limits of â€~patient-centredness': valuing contextually specific communication patterns. Medical Education, 2016, 50, 359-369.	2.1	14
11	Disruptive illness contexts and liminality in the accounts of young people with type 1 diabetes. Sociology of Health and Illness, 2019, 41, 1289-1304.	2.1	13
12	Experiences of selfâ€management among young adults with Type 1 diabetes in the context of a structured education programme: a qualitative study. Diabetic Medicine, 2018, 35, 1531-1537.	2.3	11
13	Changing healthcare professionals' non-reflective processes to improve the quality of care. Social Science and Medicine, 2022, 298, 114840.	3.8	11
14	Qualitative study investigating the perceptions of parents of children who failed vision screening at the age of 4–5 years. BMJ Paediatrics Open, 2018, 2, e000307.	1.4	9
15	Working with Insulin, Carbohydrates, Ketones and Exercise to Manage Diabetes (WICKED): evaluation of a selfâ€management course for young people with Type 1 diabetes. Diabetic Medicine, 2019, 36, 1460-1467.	2.3	9
16	Incorporation of a health economic modelling tool into public health commissioning: Evidence use in a politicised context. Social Science and Medicine, 2017, 186, 122-129.	3.8	7
17	Acceptability of a vocational advice service for patients consulting in primary care with musculoskeletal pain: A qualitative exploration of the experiences of general practitioners, vocational advisers and patients. Scandinavian Journal of Public Health, 2019, 47, 78-85.	2.3	7
18	Integrating mental health care into homeâ€based nursing services: A qualitative study utilising normalisation process theory. Journal of Clinical Nursing, 2021, , .	3.0	0