Louise Ann Cullen

List of Publications by Year
in descending order

184 papers	7,282 citations	71102 41 h-index	64796 79 g-index
187 all docs	187 docs citations	187 times ranked	5255 citing authors

#	Article	IF	Citations
1	2-Hour Accelerated Diagnostic Protocol to Assess Patients With Chest Pain Symptoms Using Contemporary Troponins as the Only Biomarker. Journal of the American College of Cardiology, 2012, 59, 2091-2098.	2.8	361
2	What is an acceptable risk of major adverse cardiac event in chest pain patients soon after discharge from the Emergency Department?. International Journal of Cardiology, 2013, 166, 752-754.	1.7	324
3	A 2-h diagnostic protocol to assess patients with chest pain symptoms in the Asia-Pacific region (ASPECT): a prospective observational validation study. Lancet, The, 2011, 377, 1077-1084.	13.7	316
4	Validation of High-Sensitivity Troponin I in a 2-Hour Diagnostic Strategy to Assess 30-Day Outcomes in Emergency Department Patients With Possible AcuteÂCoronary Syndrome. Journal of the American College of Cardiology, 2013, 62, 1242-1249.	2.8	277
5	Rapid Rule-out of Acute Myocardial Infarction With a Single High-Sensitivity Cardiac Troponin T Measurement Below the Limit of Detection. Annals of Internal Medicine, 2017, 166, 715.	3.9	231
6	Application of High-Sensitivity Troponin in Suspected Myocardial Infarction. New England Journal of Medicine, 2019, 380, 2529-2540.	27.0	230
7	National Heart Foundation of Australia & Cardiac Society of Australia and New Zealand: Australian Clinical Guidelines for the Management of Acute Coronary Syndromes 2016. Heart Lung and Circulation, 2016, 25, 895-951.	0.4	222
8	The HEART Score for the Assessment of Patients With Chest Pain in the Emergency Department. Critical Pathways in Cardiology, 2013, 12, 121-126.	0.5	203
9	Association of High-Sensitivity Cardiac Troponin I Concentration With Cardiac Outcomes in Patients With Suspected Acute Coronary Syndrome. JAMA - Journal of the American Medical Association, 2017, 318, 1913.	7.4	188
10	Diagnosis of Myocardial Infarction Using a High-Sensitivity Troponin I 1-Hour Algorithm. JAMA Cardiology, 2016, 1, 397.	6.1	186
11	Development and validation of the <scp>E</scp>mergency <scp>D</scp>epartment <scp>A</scp>ssessment of <scp>C</scp>hest pain <scp>S</scp>core and 2â€‰h accelerated diagnostic protocol. EMA - Emergency Medicine Australasia, 2014, 26, 34-44.	1.1	172
12	A 2-Hour Diagnostic Protocol for Possible Cardiac Chest Pain in the Emergency Department. JAMA Internal Medicine, 2014, 174, 51.	5.1	151
13	A Randomized Trial of a 1-Hour Troponin T Protocol in Suspected Acute Coronary Syndromes. Circulation, 2019, 140, 1543-1556.	1.6	144
14	Echocardiography and lung ultrasonography for the assessment and management of acute heart failure. Nature Reviews Cardiology, 2017, 14, 427-440.	13.7	138
15	Machine Learning to Predict the Likelihood of Acute Myocardial Infarction. Circulation, 2019, 140, 899-909.	1.6	128
16	Two-hour Algorithm for Triage Toward Rule-out and Rule-in of Acute Myocardial Infarction Using High-sensitivity Cardiac Troponin T. American Journal of Medicine, 2015, 128, 369-379.e4.	1.5	121
17	Unintended Consequences: Fluid Resuscitation Worsens Shock in an Ovine Model of Endotoxemia. American Journal of Respiratory and Critical Care Medicine, 2018, 198, 1043-1054.	5.6	114
18	National Heart Foundation of Australia and Cardiac Society of Australia and New Zealand: Australian clinical guidelines for the management of acute coronary syndromes 2016. Medical Journal of Australia, 2016, 205, 128-133.	1.7	112

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19	Assessment of the European Society of Cardiology 0-Hour/1-Hour Algorithm to Rule-Out and Rule-In Acute Myocardial Infarction. Circulation, 2016, 134, 1532-1541.	1.6	111
20	Indications and practical approach to non-invasive ventilation in acute heart failure. European Heart Journal, 2018, 39, 17-25.	2.2	111
21	Effectiveness of EDACS Versus ADAPT Accelerated Diagnostic Pathways for Chest Pain: A Pragmatic Randomized Controlled Trial Embedded Within Practice. Annals of Emergency Medicine, 2016, 68, 93-102.e1.	0.6	107
22	High-Sensitivity Cardiac Troponin T Concentrations below the Limit of Detection to Exclude Acute Myocardial Infarction: A Prospective Evaluation. Clinical Chemistry, 2015, 61, 983-989.	3.2	97
23	Comprehensive standardized data definitions for acute coronary syndrome research in emergency departments in Australasia. EMA - Emergency Medicine Australasia, 2010, 22, 35-55.	1.1	96
24	Two-Hour Algorithm for Triage toward Rule-Out and Rule-In of Acute Myocardial Infarction by Use of High-Sensitivity Cardiac Troponin I. Clinical Chemistry, 2016, 62, 494-504.	3.2	95
25	Expert consensus document: Reporting checklist for quantification of pulmonary congestion by lung ultrasound in heart failure. European Journal of Heart Failure, 2019, 21, 844-851.	7.1	91
26	Cost and outcomes of assessing patients with chest pain in an Australian emergency department. Medical Journal of Australia, 2015, 202, 427-432.	1.7	84
27	Validation of presentation and 3â€…h high-sensitivity troponin to rule-in and rule-out acute myocardial infarction. Heart, 2016, 102, 1270-1278.	2.9	82
28	Evaluation of High-Sensitivity Cardiac Troponin I Levels in Patients With Suspected Acute Coronary Syndrome. JAMA Cardiology, 2016, 1, 405.	6.1	75
29	Diagnostic and prognostic utility of early measurement with high-sensitivity troponin T assay in patients presenting with chest pain. Cmaj, 2012, 184, E260-E268.	2.0	68
30	A novel diagnostic protocol to identify patients suitable for discharge after a single high-sensitivity troponin. Heart, 2015, 101, 1041-1046.	2.9	67
31	Early Dynamic Change in High-Sensitivity Cardiac Troponin T in the Investigation of Acute Myocardial Infarction. Clinical Chemistry, 2011, 57, 1154-1160.	3.2	63
32	Sex-specific versus overall cut points for a high sensitivity troponin I assay in predicting 1-year outcomes in emergency patients presenting with chest pain. Heart, 2016, 102, 120-126.	2.9	61
33	Validity of a Novel Point-of-Care Troponin Assay for Single-Test Rule-Out of Acute Myocardial Infarction. JAMA Cardiology, 2018, 3, 1108.	6.1	60
34	Immediate Rule-Out of Acute Myocardial Infarction Using Electrocardiogram and Baseline High-Sensitivity Troponin I. Clinical Chemistry, 2017, 63, 394-402.	3.2	57
35	European Society of Cardiology â€“ Acute Cardiovascular Care Association position paper on safe discharge of acute heart failure patients from the emergency department. European Heart Journal: Acute Cardiovascular Care, 2017, 6, 311-320.	1.0	56
36	Combining High-Sensitivity Cardiac Troponin I and Cardiac Troponin T in the Early Diagnosis of Acute Myocardial Infarction. Circulation, 2018, 138, 989-999.	1.6	56

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37	â€˜Chest Pain Typicalityâ€™ in Suspected Acute Coronary Syndromes and the Impact of Clinical Experience. American Journal of Medicine, 2015, 128, 1109-1116.e2.	1.5	54
38	Nebulized lidocaine decreases the discomfort of nasogastric tube insertion: a randomized, double-blind trial. Annals of Emergency Medicine, 2004, 44, 131-137.	0.6	53
39	Diagnostic Accuracy of a New High-Sensitivity Troponin I Assay and Five Accelerated Diagnostic Pathways for Ruling Out Acute Myocardial Infarction and Acute Coronary Syndrome. Annals of Emergency Medicine, 2018, 71, 439-451.e3.	0.6	52
40	Accelerated diagnostic protocol using high-sensitivity cardiac troponin T in acute chest pain patients. International Journal of Cardiology, 2015, 184, 208-215.	1.7	46
41	The new Vancouver Chest Pain Rule using troponin as the only biomarker: an external validation study. American Journal of Emergency Medicine, 2014, 32, 129-134.	1.6	44
42	Cardiovascular biomarkers in patients with COVID-19. European Heart Journal: Acute Cardiovascular Care, 2021, 10, 310-319.	1.0	44
43	Delta troponin for the early diagnosis of AMI in emergency patients with chest pain. International Journal of Cardiology, 2013, 168, 2602-2608.	1.7	42
44	Practical approach on frail older patients attended for acute heart failure. International Journal of Cardiology, 2016, 222, 62-71.	1.7	42
45	Evaluating Rapid Rule-out of Acute Myocardial Infarction Using a High-Sensitivity Cardiac Troponin I Assay at Presentation. Clinical Chemistry, 2018, 64, 820-829.	3.2	42
46	European Society of Cardiology-Acute Cardiovascular Care Association Position paper on acute heart failure: A call for interdisciplinary care. European Heart Journal: Acute Cardiovascular Care, 2017, 6, 81-86.	1.0	41
47	Comparison of Three Risk Stratification Rules for Predicting Patients With Acute Coronary Syndrome Presenting to an Australian Emergency Department. Heart Lung and Circulation, 2013, 22, 844-851.	0.4	40
48	B-Type Natriuretic Peptides and Cardiac Troponins for Diagnosis and Risk-Stratification of Syncope. Circulation, 2019, 139, 2403-2418.	1.6	40
49	External validation of the emergency department assessment of chest pain score accelerated diagnostic pathway (EDACS-ADP). Emergency Medicine Journal, 2016, 33, 618-625.	1.0	39
50	Clinical chemistry score versus high-sensitivity cardiac troponin I and T tests alone to identify patients at low or high risk for myocardial infarction or death at presentation to the emergency department. Cmaj, 2018, 190, E974-E984.	2.0	38
51	Examining the Signs and Symptoms Experienced by Individuals With Suspected Acute Coronary Syndrome in the Asia-Pacific Region: A Prospective Observational Study. Annals of Emergency Medicine, 2012, 60, 777-785.e3.	0.6	36
52	A New Improved Accelerated Diagnostic Protocol Safely Identifies Lowâ€risk Patients With Chest Pain in the Emergency Department. Academic Emergency Medicine, 2012, 19, 510-516.	1.8	36
53	Two-Hour Algorithm for Rapid Triage of Suspected Acute Myocardial Infarction Using a High-Sensitivity Cardiac Troponin I Assay. Clinical Chemistry, 2019, 65, 1437-1447.	3.2	36
54	Direct Comparison of 2 Rule-Out Strategies for Acute Myocardial Infarction: 2-h Accelerated Diagnostic Protocol vs 2-h Algorithm. Clinical Chemistry, 2017, 63, 1227-1236.	3.2	35

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55	Early Rule-Out and Rule-In Strategies for Myocardial Infarction. Clinical Chemistry, 2017, 63, 129-139.	3.2	33
56	Detectable High-Sensitivity Cardiac Troponin within the Population Reference Interval Conveys High 5-Year Cardiovascular Risk: An Observational Study. Clinical Chemistry, 2018, 64, 1044-1053.	3.2	33
57	Comparison of high sensitivity troponin T and I assays in the diagnosis of non-ST elevation acute myocardial infarction in emergency patients with chest pain. Clinical Biochemistry, 2014, 47, 321-326.	1.9	32
58	The organisational value of diagnostic strategies using high-sensitivity troponin for patients with possible acute coronary syndromes: a trial-based cost-effectiveness analysis. BMJ Open, 2017, 7, e013653.	1.9	32
59	ICare-ACS (Improving Care Processes for Patients With Suspected Acute Coronary Syndrome). Circulation, 2018, 137, 354-363.	1.6	32
60	Acute Heart Failure in the 2021 ESC Heart Failure Guidelines: a scientific statement from the Association for Acute CardioVascular Care (ACVC)Âof the European Society of Cardiology. European Heart Journal: Acute Cardiovascular Care, 2022, 11, 173-185.	1.0	31
61	Comparison of new point-of-care troponin assay with high sensitivity troponin in diagnosing myocardial infarction. International Journal of Cardiology, 2014, 177, 182-186.	1.7	30
62	Use of Observed Within-Person Variation of Cardiac Troponin in Emergency Department Patients for Determination of Biological Variation and Percentage and Absolute Reference Change Values. Clinical Chemistry, 2014, 60, 848-854.	3.2	30
63	Peripheral Intravenous Cannula Insertion and Use in the Emergency Department: An Intervention Study. Academic Emergency Medicine, 2018, 25, 26-32.	1.8	30
64	Validating the Manchester Acute Coronary Syndromes (MACS) and Troponin-only Manchester Acute Coronary Syndromes (T-MACS) rules for the prediction of acute myocardial infarction in patients presenting to the emergency department with chest pain. Emergency Medicine Journal, 2017, 34, 517-523.	1.0	28
65	Change to costs and lengths of stay in the emergency department and the Brisbane protocol: an observational study. BMJ Open, 2016, 6, e009746.	1.9	27
66	A Clinical Decision Rule to Identify Emergency Department Patients at Low Risk for Acute Coronary Syndrome Who Do Not Need Objective Coronary Artery Disease Testing: The No Objective Testing Rule. Annals of Emergency Medicine, 2016, 67, 478-489.e2.	0.6	27
67	Late Outcomes of the RAPID-TnT Randomized Controlled Trial: 0/1-Hour High-Sensitivity Troponin T Protocol in Suspected ACS. Circulation, 2021, 144, 113-125.	1.6	27
68	Validation of NICE diagnostic guidance for rule out of myocardial infarction using high-sensitivity troponin tests. Heart, 2016, 102, 1279-1286.	2.9	26
69	Improved Assessment of Chest pain Trial (IMPACT): assessing patients with possible acute coronary syndromes. Medical Journal of Australia, 2017, 207, 195-200.	1.7	26
70	Prevalence of Pulmonary Embolism in Patients With Syncope. Journal of the American College of Cardiology, 2019, 74, 744-754.	2.8	26
71	Risk stratification scores for patients with acute heart failure in the Emergency Department: A systematic review. European Heart Journal: Acute Cardiovascular Care, 2020, 9, 375-398.	1.0	26
72	Introduction of an accelerated diagnostic protocol in the assessment of emergency department patients with possible acute coronary syndrome: The <scp>N</scp>ambour <scp>S</scp>hort <scp>L</scp>owâ€<scp>I</scp>ntermediate <scp>C</scp>hest pain project. EMA - Emergency Medicine Australasia, 2013, 25, 340-344.	1.1	25

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73	A 2-hour thrombolysis in myocardial infarction score outperforms other risk stratification tools in patients presenting with possible acute coronary syndromes. American Heart Journal, 2012, 164, 516-523.	2.7	24
74	Don't just do something, stand there! The value and art of deliberate clinical inertia. EMA - Emergency Medicine Australasia, 2018, 30, 273-278.	1.1	24
75	Diagnosis of acute myocardial infarction in the presence of left bundle branch block. Heart, 2019, 105, 1559-1567.	2.9	24
76	Electrocardiographic Diagnosis of Acute Coronary Occlusion Myocardial Infarction in Ventricular Paced Rhythm Using the Modified Sgarbossa Criteria. Annals of Emergency Medicine, 2021, 78, 517-529.	0.6	24
77	The approach to patients with possible cardiac chest pain. Medical Journal of Australia, 2013, 199, 30-34.	1.7	23
78	Point: The Use of Sex-Specific Cutpoints for High-Sensitivity Cardiac Troponin Assays. Clinical Chemistry, 2017, 63, 261-263.	3.2	23
79	Characteristics and occurrence of type 2 myocardial infarction in emergency department patients: a prospective study. Emergency Medicine Journal, 2018, 35, 169-175.	1.0	23
80	ESC Study Group on Cardiac Biomarkers of the Association for Acute CardioVascular Care: A fond farewell at the retirement of CKMB. European Heart Journal, 2021, 42, 2260-2264.	2.2	23
81	A critical evaluation of the Beckman Coulter Access hsTnI : Analytical performance, reference interval and concordance. Clinical Biochemistry, 2018, 55, 49-55.	1.9	22
82	Heart Fatty Acid Binding Protein and cardiac troponin: development of an optimal rule-out strategy for acute myocardial infarction. BMC Emergency Medicine, 2016, 16, 34.	1.9	20
83	Use of the Theoretical Domains Framework to evaluate factors driving successful implementation of the Accelerated Chest pain Risk Evaluation (ACRE) project. Implementation Science, 2016, 11, 136.	6.9	20
84	A randomized trial of a 1-hour troponin T protocol in suspected acute coronary syndromes: Design of the Rapid Assessment of Possible ACS In the emergency Department with high sensitivity Troponin T (RAPID-TnT) study. American Heart Journal, 2017, 190, 25-33.	2.7	20
85	Implementing change: evaluating the Accelerated Chest pain Risk Evaluation (ACRE) project. Medical Journal of Australia, 2017, 207, 201-205.	1.7	20
86	Asia-Pacific consensus statement on the optimal use of high-sensitivity troponin assays in acute coronary syndromes diagnosis: focus on hs-TnI. Heart Asia, 2017, 9, 81-87.	1.1	18
87	An Ovine Model of Hyperdynamic Endotoxemia and Vital Organ Metabolism. Shock, 2018, 49, 99-107.	2.1	18
88	Deliberate clinical inertia: Using metaâ€cognition to improve decisionâ€making. EMA - Emergency Medicine Australasia, 2018, 30, 585-590.	1.1	18
89	Prospective validation of prognostic and diagnostic syncope scores in the emergency department. International Journal of Cardiology, 2018, 269, 114-121.	1.7	18
90	Point-of-care testing with high-sensitivity cardiac troponin assays: the challenges and opportunities. Emergency Medicine Journal, 2022, 39, 861-866.	1.0	18

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91	Validation of an accelerated highâ€sensitivity troponin T assay protocol in an Australian cohort with chest pain. Medical Journal of Australia, 2014, 200, 161-165.	1.7	17
92	Utility of Routine Exercise Stress Testing among Intermediate Risk Chest Pain Patients Attending an Emergency Department. Heart Lung and Circulation, 2015, 24, 879-884.	0.4	17
93	The Fast and the Furious: Low-Risk Chest Pain and the Rapid Rule-Out Protocol. Western Journal of Emergency Medicine, 2017, 18, 474-478.	1.1	17
94	Time to presentation and 12-month health outcomes in patients presenting to the emergency department with symptoms of possible acute coronary syndrome. Emergency Medicine Journal, 2016, 33, 390-395.	1.0	16
95	The incremental value of stress testing in patients with acute chest pain beyond serial cardiac troponin testing. Emergency Medicine Journal, 2016, 33, 319-324.	1.0	15
96	Assessment of the 2016 National Institute for Health and Care Excellence high-sensitivity troponin rule-out strategy. Heart, 2018, 104, heartjnl-2017-311983.	2.9	15
97	Towards a consistent definition of a significant delta troponin with z-scores: a way out of chaos?. European Heart Journal: Acute Cardiovascular Care, 2014, 3, 149-157.	1.0	14
98	Factors associated with triage assignment of emergency department patients ultimately diagnosed with acute myocardial infarction. Australian Critical Care, 2016, 29, 23-26.	1.3	14
99	Care Models for Acute Chest Pain That Improve Outcomes and Efficiency. Journal of the American College of Cardiology, 2022, 79, 2333-2348.	2.8	14
100	Decision limits and the reporting of cardiac troponin: Meeting the needs of both the cardiologist and the ED physician. Critical Reviews in Clinical Laboratory Sciences, 2015, 52, 28-44.	6.1	13
101	Admission glycaemia and its association with acute coronary syndrome in Emergency Department patients with chest pain. Emergency Medicine Journal, 2015, 32, 608-612.	1.0	13
102	Differences in Presentation, Management and Outcomes in Women and Men Presenting to an Emergency Department With Possible Cardiac Chest Pain. Heart Lung and Circulation, 2017, 26, 1282-1290.	0.4	13
103	Cardiovascular Disease: Impact of Biomarkers, Proteomics, and Genomics. Clinical Chemistry, 2017, 63, 1-4.	3.2	13
104	Comparison of early biomarker strategies with the Heart Foundation of Australia/Cardiac Society of Australia and New Zealand guidelines for risk stratification of emergency department patients with chest pain. EMA - Emergency Medicine Australasia, 2012, 24, 595-603.	1.1	12
105	Availability of highly sensitive troponin assays and acute coronary syndrome care: insights from the SNAPSHOT registry. Medical Journal of Australia, 2015, 202, 36-39.	1.7	12
106	Combining presentation high-sensitivity cardiac troponin I and glucose measurements to rule-out an acute myocardial infarction in patients presenting to emergency department with chest pain. Clinical Biochemistry, 2015, 48, 288-291.	1.9	12
107	Two-hour diagnostic algorithms for early assessment of patients with acute chest pain â€" Implications of lowering the cardiac troponin I cut-off to the 97.5th percentile. Clinica Chimica Acta, 2015, 445, 19-24.	1.1	12
108	Factors influencing choice of preâ€hospital transportation of patients with potential acute coronary syndrome: <scp>A</scp>n observational study. EMA - Emergency Medicine Australasia, 2017, 29, 210-216.	1.1	12

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109	Developing a value proposition for high-sensitivity troponin testing. Clinica Chimica Acta, 2018, 477, 154-159.	1.1	12
110	A Risk Assessment Score and Initial Highâ€sensitivity Troponin Combine to Identify Low Risk of Acute Myocardial Infarction in the Emergency Department. Academic Emergency Medicine, 2018, 25, 434-443.	1.8	12
111	Examining Renal Impairment as a Risk Factor for Acute Coronary Syndrome: A Prospective Observational Study. Annals of Emergency Medicine, 2013, 62, 38-46.e1.	0.6	11
112	Limited utility of exercise stress testing in the evaluation of suspected acute coronary syndrome in patients aged less than 40 years with intermediate risk features. EMA - Emergency Medicine Australasia, 2014, 26, 170-176.	1.1	11
113	The utility of presentation and 4-hour high sensitivity troponin I to rule-out acute myocardial infarction in the emergency department. Clinical Biochemistry, 2015, 48, 1219-1224.	1.9	11
114	The predictive value of high sensitivity-troponin velocity within the first 6h of presentation for cardiac outcomes regardless of acute coronary syndrome diagnosis. International Journal of Cardiology, 2016, 204, 106-111.	1.7	11
115	External validation of heart-type fatty acid binding protein, high-sensitivity cardiac troponin, and electrocardiography as rule-out for acute myocardial infarction. Clinical Biochemistry, 2018, 52, 161-163.	1.9	11
116	Using Sexâ€specific Cutoffs for Highâ€sensitivity Cardiac Troponin T to Diagnose Acute Myocardial Infarction. Academic Emergency Medicine, 2021, 28, 463-466.	1.8	10
117	Validation of the Vancouver Chest Pain Rule using troponin as the only biomarker: a prospective cohort study. American Journal of Emergency Medicine, 2013, 31, 1103-1107.	1.6	9
118	Effect of recalibration of the hs-TnT assay on diagnostic performance. Clinical Chemistry and Laboratory Medicine, 2014, 52, e25-7.	2.3	9
119	â€˜What the hell is water?â€™ How to use deliberate clinical inertia in common emergency department situations. EMA - Emergency Medicine Australasia, 2018, 30, 426-430.	1.1	9
120	Widespread Introduction of a High-Sensitivity Troponin Assay: Assessing the Impact on Patients and Health Services. Journal of Clinical Medicine, 2020, 9, 1883.	2.4	9
121	Facilitators and barriers for emergency department clinicians using a rapid chest pain assessment protocol: qualitative interview research. BMC Health Services Research, 2020, 20, 74.	2.2	9
122	Myocardial infarction: rapid ruling out in the emergency room. Lancet, The, 2015, 386, 2449-2450.	13.7	8
123	Appropriate use of serum troponin testing in general practice: a narrative review. Medical Journal of Australia, 2016, 205, 91-94.	1.7	8
124	Panic Disorder in Patients Presenting to the Emergency Department With Chest Pain: Prevalence and Presenting Symptoms. Heart Lung and Circulation, 2017, 26, 1310-1316.	0.4	8
125	Heart failure in patients presenting with dyspnoea to the emergency department in the Asia Pacific region: an observational study. BMJ Open, 2017, 7, e013812.	1.9	8
126	International Validation of the Canadian Syncope Risk Score. Annals of Internal Medicine, 2022, 175, 783-794.	3.9	8

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127	Performance of Risk Stratification for Acute Coronary Syndrome with Two-hour Sensitive Troponin Assay Results. Heart Lung and Circulation, 2014, 23, 428-434.	0.4	7
128	Undetectable hs-cTnT in the Emergency Department and Risk of Myocardial Infarction. Journal of the American College of Cardiology, 2014, 64, 632-633.	2.8	7
129	Circadian, weekly, seasonal, and temperature-dependent patterns of syncope aetiology in patients at increased risk of cardiac syncope. Europace, 2019, 21, 511-521.	1.7	7
130	Classification performance of clinical risk scoring in suspected acute coronary syndrome beyond a rule-out troponin profile. European Heart Journal: Acute Cardiovascular Care, 2021, 10, 1038-1047.	1.0	7
131	Development of an electrocardiogram-based risk calculator for a cardiac cause of syncope. Heart, 2021, 107, 1796-1804.	2.9	7
132	Highly sensitive troponin assays â€" a twoâ€edged sword?. Medical Journal of Australia, 2012, 197, 320-323.	1.7	6
133	CSANZ Position Statement on the Evaluation of Patients Presenting With Suspected Acute Coronary Syndromes During the COVID-19 Pandemic. Heart Lung and Circulation, 2020, 29, e105-e110.	0.4	6
134	Future Developments in Chest Pain Diagnosis and Management. Medical Clinics of North America, 2010, 94, 375-400.	2.5	5
135	Outcome at 30 days for lowâ€risk chest pain patients assessed using an accelerated diagnostic pathway in the emergency department. EMA - Emergency Medicine Australasia, 2016, 28, 279-286.	1.1	5
136	The Association of Electrocardiographic Abnormalities and Acute Coronary Syndrome in Emergency Patients With Chest Pain. Academic Emergency Medicine, 2017, 24, 344-352.	1.8	5
137	Modification of the Thrombolysis in Myocardial Infarction risk score for patients presenting with chest pain to the emergency department. EMA - Emergency Medicine Australasia, 2018, 30, 47-54.	1.1	5
138	The assessment and management of chest pain in primary care: A focus on acute coronary syndrome. , 2018, 47, 246-251.		5
139	Abnormal Laboratory Results: Troponins in myocardial infarction and injury. Australian Prescriber, 2022, 45, 53-57.	1.0	4
140	The intra-individual variation of cardiac troponin I: the effects of sex, age, climatic season, and time between samples. Clinical Chemistry and Laboratory Medicine, 2022, 60, 1101-1109.	2.3	4
141	The Evolution of Chest Pain Pathways. Critical Pathways in Cardiology, 2011, 10, 69-75.	0.5	3
142	Troponin testing: End of an era?. Clinical Biochemistry, 2013, 46, 1627-1628.	1.9	3
143	Agreement Between Patient-reported and Cardiology-adjudicated Medical History in Patients With Possible Ischemic Chest Pain: An Observational Study. Critical Pathways in Cardiology, 2016, 15, 121-125.	0.5	3
144	Appropriate Use of High-Sensitivity Cardiac Troponin Levels in Patients With Suspected Acute Myocardial Infarctionâ€"Reply. JAMA Cardiology, 2017, 2, 229.	6.1	3

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145	Factors influencing physician risk estimates for acute cardiac events in emergency patients with suspected acute coronary syndrome. Emergency Medicine Journal, 2020, 37, 2-7.	1.0	3
146	Applying a framework to assess the impact of cardiovascular outcomes improvement research. Health Research Policy and Systems, 2021, 19, 67.	2.8	3
147	Cost effectiveness of a 1-hour high-sensitivity troponin-T protocol: An analysis of the RAPID-TnT trial. IJC Heart and Vasculature, 2022, 38, 100933.	1.1	3
148	Diagnoses and trends in use of imaging for low back pain in four Australian emergency departments between 2012 and 2019. EMA - Emergency Medicine Australasia, 2022, , .	1.1	3
149	From little things, big things grow: An exploratory analysis of the national cost of peripheral intravenous catheter insertion in Australian adult emergency care. EMA - Emergency Medicine Australasia, 2022, 34, 877-883.	1.1	3
150	The clinical approach to diagnosing peri-procedural myocardial infarction after percutaneous coronary interventions according to the fourth universal definition of myocardial infarction â€“ from the study group on biomarkers of the European Society of Cardiology (ESC) Association for Acute CardioVascular Care (ACVC). Biomarkers, 2022, 27, 407-417.	1.9	3
151	Implementation of a Chest Pain Management Service Improves Patient Care and Reduces Length of Stay. Critical Pathways in Cardiology, 2014, 13, 9-13.	0.5	2
152	Suspected ACS Patients Presenting With Myocardial Damage or a Type 2 Myocardial Infarction Have a Similar Late Mortality to Patients With a Type 1 Myocardial Infarction: A Report From the Australian and New Zealand 2012 SNAPSHOT ACS Study. Heart Lung and Circulation, 2017, 26, 1051-1058.	0.4	2
153	Application of the fourth universal definition of myocardial infarction in clinical practice. Biomarkers, 2020, 25, 322-330.	1.9	2
154	Examining the translational success of an initiative to accelerate the assessment of chest pain for patients in an Australian emergency department: a pre-post study. BMC Health Services Research, 2020, 20, 419.	2.2	2
155	Implementation of more sensitive cardiac troponin T assay in a state-wide health service. International Journal of Cardiology, 2021, 347, 66-72.	1.7	2
156	Biomarker Development in Cardiology: Reviewing the Past to Inform the Future. Cells, 2022, 11, 588.	4.1	2
157	Emergency Department Assessment of Suspected Acute Coronary Syndrome Using the IMPACT Pathway in Aboriginal and Torres Strait Islander People. Heart Lung and Circulation, 2022, , .	0.4	2
158	Development and validation of a comprehensive early risk prediction model for patients with undifferentiated acute chest pain. IJC Heart and Vasculature, 2022, 40, 101043.	1.1	2
159	Troponin: A riskâ€defining biomarker for emergency department physicians. EMA - Emergency Medicine Australasia, 2011, 23, 391-394.	1.1	1
160	Does Uric Acid Level Provide Additional Risk Stratification Information in Emergency Patients With Symptoms of Possible Acute Coronary Syndrome?. Critical Pathways in Cardiology, 2016, 15, 169-173.	0.5	1
161	Relationship Between Physiological Parameters and Acute Coronary Syndrome in Patients Presenting to the Emergency Department With Undifferentiated Chest Pain. Journal of Cardiovascular Nursing, 2016, 31, 267-273.	1.1	1
162	Rational clinical evaluation of suspected acute coronary syndromes: The value of more information. EMA - Emergency Medicine Australasia, 2017, 29, 664-671.	1.1	1

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163	Comparing the No Objective Testing Rule to the HEART Pathway. Academic Emergency Medicine, 2017, 24, 1169-1170.	1.8	1
164	Diving into research: A practical guide for emergency medicine trainees. EMA - Emergency Medicine Australasia, 2017, 29, 722-723.	1.1	1
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