

Diagnosis, Evaluation and Follow-Up of Asymptomatic AUA Guideline

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Citation Report

#	ARTICLE	IF	CITATIONS
1	Do patients with stage 2-4 pelvic organ prolapse have to undergo costly and burdensome diagnostic procedures for asymptomatic microhematuria. Pakistan Journal of Medical Sciences, 1969, 31, 654-7.	0.3	1
2	Accurate risk assessment of patients with asymptomatic hematuria for the presence of bladder cancer. World Journal of Urology, 2012, 30, 847-852.	1.2	23
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4	Urology Patients in the Nephrology Practice. Advances in Chronic Kidney Disease, 2013, 20, 441-448.	0.6	3
5	Optimal Risk-Adapted Surveillance Strategies for NMIBC, Including Upper Tract Imaging. Urologic Clinics of North America, 2013, 40, 305-315.	0.8	3
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7	Asymptomatic microscopic hematuria in women requires separate guidelines. International Urogynecology Journal, 2013, 24, 203-206.	0.7	11
8	Editorial Comment. Journal of Urology, 2013, 189, 1258-1259.	0.2	0
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134	Re: Who Should be Investigated for Hematuria? Results of a Contemporary Prospective Observational Study of 3556 Patients. European Urology, 2018, 74, 15-16.	0.9	2

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135	Who Should Be Investigated for Haematuria? Results of a Contemporary Prospective Observational Study of 3556 Patients. <i>European Urology</i> , 2018, 74, 10-14.	0.9	78
136	When words matter: A suspicious urinary tract cytology diagnosis improves patient follow-up among nonurologists. <i>Cancer Cytopathology</i> , 2018, 126, 282-288.	1.4	14
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174	Performance of diffusion-weighted MRI post-CT urography for the diagnosis of upper tract urothelial carcinoma: Comparison with selective urine cytology sampling. <i>Clinical Imaging</i> , 2018, 52, 208-215.	0.8	9

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