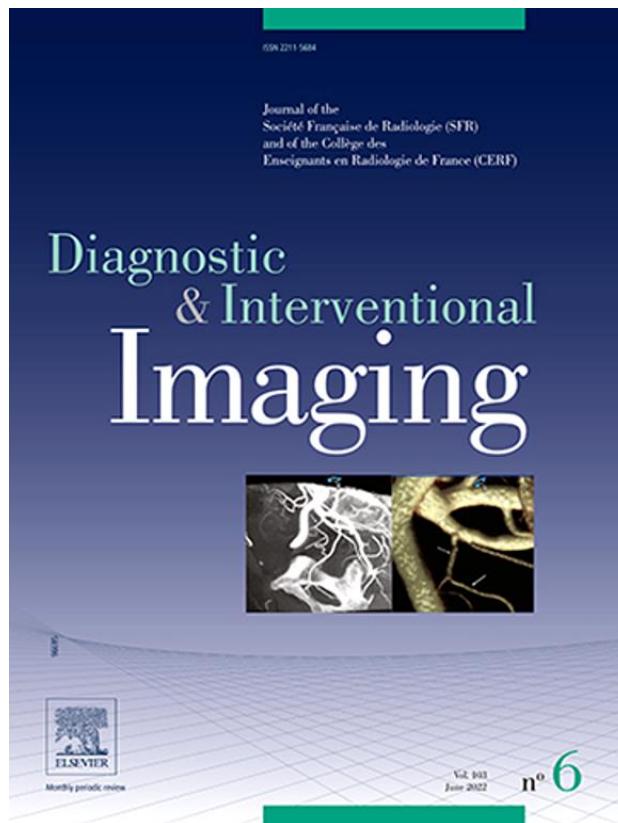
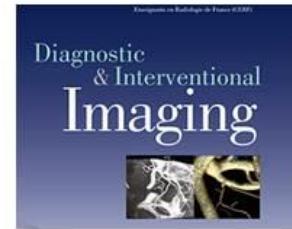


Comment citer *Diagnostic & Interventional Imaging*



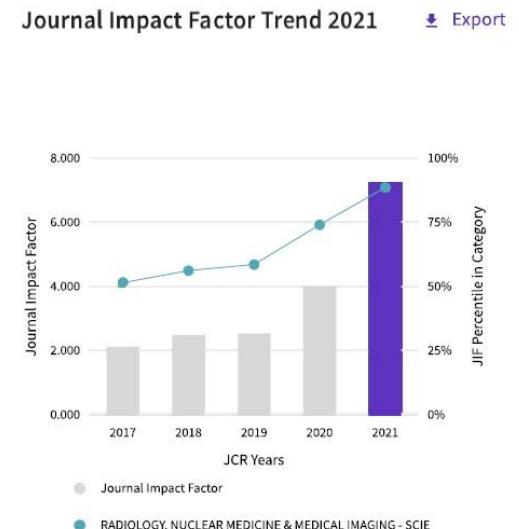
New Impact Factor for *Diagnostic & Interventional Imaging* for the year

2021



7.242, ranking 16/136 in the category “Radiology, Nuclear Medicine and Medical Imaging”

<https://www.sciencedirect.com/journal/diagnostic-and-interventional-imaging/articles-in-press>



Contexte

- Les citations sont un élément important pour la visibilité du journal.
- Il est donc important se savoir comment identifier au mieux les articles de DIII pouvant être cités.
- Toutes ne sont pas équivalentes (année de publication de la citation [doi]) et l'année de publication de l'article dans lequel elles se trouvent.

Objectif

- Optimiser les citations de DIII pour une meilleure visibilité du journal.

Calcul de l'impact Factor

$$2022 \text{ JIF} = \frac{\text{Citations in 2022 to items published in 2020 + 2021}}{\text{Number of articles & reviews published in 2020 & 2021}}$$

Journal Impact Factor 2022

Mais l'année de publication est l'année du doi

Calcul de l'impact Factor

L'année de publication prise en compte pour le numérateur est l'année du doi

Hani C, Trieu NH, Saab I, Dangeard S, Bennani S, Chassagnon G, Revel MP. [COVID-19 pneumonia: A review of typical CT findings and differential diagnosis.](#) Diagn Interv Imaging 2020;101:263-268. doi: 10.1016/j.diii.**2020**.03.014.

Doi 2020. Citation valable pour l'IF de 2021 (Juin 2022) et pour l'IF de 2022 (Juin 2023)

Guenoun D, Magalon J, de Torquemada I, Vandeville C, Sabatier F, Champsaur P, Jacquet C, Ollivier M. [Treatment of degenerative meniscal tear with intrameniscal injection of platelets rich plasma.](#) Diagn Interv Imaging 2020;101:169-176. doi: 10.1016/j.diii.**2019**.10.003.

Doi 2019. Citation valable pour l'IF de 2021 (Juin 2022) mais pas pour l'IF de 2022 (Juin 2023)

Comment identifier au mieux les articles de DIII pouvant être cités.

Identifier les mots clés de votre article à partir du titre ou du résumé (abstract)

Titre: Virtual Noncontrast Abdominal Imaging with Photon-counting Detector CT

Virtual Noncontrast Abdominal Imaging with Photon-counting Detector CT

Background

Accurate CT attenuation and diagnostic quality of virtual noncontrast (VNC) images acquired with photon-counting detector (PCD) CT are needed to replace true noncontrast (TNC) scans.

Purpose

To assess the attenuation errors and image quality of VNC images from abdominal PCD CT compared with TNC images.

Materials and Methods

In this retrospective study, consecutive adult patients who underwent a triphasic examination with PCD CT from July 2021 to October 2021 were included. VNC images were reconstructed from arterial and portal venous phase CT. The absolute attenuation error of VNC compared with TNC images was measured in multiple structures by two readers. Then, two readers blinded to image reconstruction assessed the overall image quality, image noise, noise texture, and delineation of small structures using five-point discrete visual scales (5 = excellent, 1 = nondiagnostic). Overall image quality greater than or equal to 3 was deemed diagnostic. In a phantom, noise texture, spatial resolution, and detectability index were assessed. A detectability index greater than or equal to 5 indicated high diagnostic accuracy. Interreader agreement was evaluated using the Krippendorff α coefficient. The paired *t* test and Friedman test were applied to compare objective and subjective results.

Results

Overall, 100 patients (mean age, 72 years \pm 10 [SD]; 81 men) were included. In patients, VNC image attenuation values were consistent between readers ($\alpha = .60$), with errors less than 5 HU in 76% and less than 10 HU in 95% of measurements. There was no evidence of a difference in error of VNC images from arterial or portal venous phase CT (3.3 HU vs 3.5 HU, $P = .16$). Subjective image quality was rated lower in VNC images for all categories (all, $P < .001$). Diagnostic quality of VNC images was reached in 99% and 100% of patients for readers 1 and 2, respectively. In the phantom, VNC images exhibited 33% higher noise, blotchier noise texture, similar spatial resolution, and inferior but overall good image quality (detectability index >20) compared with TNC images.

Conclusion

Abdominal virtual noncontrast images from the arterial and portal venous phase of photon-counting detector CT yielded accurate CT attenuation and good image quality compared with true noncontrast images.

Aller sur le site

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- <https://meshb.nlm.nih.gov/MeSHonDemand>

The screenshot shows the MeSH on Demand search interface. At the top, there is a header bar with the NIH logo and the National Library of Medicine. Below the header, there is a navigation menu with links to Search, Tree View, MeSH on Demand, MeSH 2021, MeSH Suggestions, About MeSH Browser, and Contact Us. On the left side, there is a logo for MeSH on Demand featuring a stylized tree icon. The main content area has a title "MeSH on Demand" with the same tree icon. Below the title, a subtitle reads: "MeSH on Demand identifies MeSH® terms in your submitted text (abstract or manuscript). MeSH on Demand also lists PubMed similar articles relevant to your submitted text." There is a horizontal button bar with four buttons: "Search", "Reset", "Help/FAQ", and "Features". Below the button bar is a large input field with placeholder text: "Enter text to be processed here - then click Search".

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Background

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MeSH Terms

- Humans
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- Adult
- Aged
- Retrospective Studies
- Tomography, X-Ray Computed

Additional Terms

- Radiography, Dual-Energy Scanned Projection

Résultats assez incomplets surtout pour les nouvelles technologies.
Photon-counting n'existe pas dans MeSH index

- Une fois les mots clés identifiés, aller sur le site PubMed (<https://pubmed.ncbi.nlm.nih.gov>).
- Rentrer «Diagn Interv Imaging» puis rajouter les mots clés.
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- Associated data

ARTICLE TYPE

- Books and Documents
- Clinical Trial
- Meta-Analysis
- Randomized Controlled Trial
- Review
- Systematic Review

PUBLICATION DATE

- 1 year
- 5 years

Spectral photon-counting CT system: Toward improved image quality performance in conventional and spectral CT imaging.

Cite Greffier J, Frandon J.

Share Diagn Interv Imaging. 2021 May;102(5):271-272. doi: 10.1016/j.diii.2021.02.003. Epub 2021 Feb 18.

PMID: 33610504 **Free article.** No abstract available.

Feasibility of human vascular imaging of the neck with a large field-of-view spectral photon-counting CT system.

Cite Boccalini S, Si-Mohamed S, Dessouky R, Sigovan M, Boussel L, Douek P.

Share Diagn Interv Imaging. 2021 May;102(5):329-332. doi: 10.1016/j.diii.2020.12.004. Epub 2021 Jan 11.

PMID: 33446464 **Free article.** No abstract available.

Feasibility of lung imaging with a large field-of-view spectral photon-counting CT system.

Cite Si-Mohamed S, Boccalini S, Rodesch PA, Dessouky R, Lahoud E, Broussaud T, Sigovan M, Gamondes D, Coulon P, Yagil Y, Boussel L, Douek P.

Share Diagn Interv Imaging. 2021 May;102(5):305-312. doi: 10.1016/j.diii.2021.01.001. Epub 2021 Feb 18.

PMID: 33610503 **Free article.**

PURPOSE: The purpose of this study was to characterize the technical capabilities and feasibility of a large field-of-view clinical spectral photon-counting computed tomography (SPCCT) prototype for high-resolution (HR) lung imaging. ...

- N'utiliser que les citations les plus récentes qui comptent pour l'Impact Factor (les deux années précédentes de l'année en cours)
- Mais l'année précédente, c'est l'année du doi.
- Il faut tenir compte aussi des délais de publication (faire passer à l'année suivante)

- Pour celle –ci, l'année de publication finale est 2021, mais l'année prise en compte pour l'Impact factor est 2020 (DOI: [10.1016/j.diii.2020.12.004](https://doi.org/10.1016/j.diii.2020.12.004)

› Diagn Interv Imaging. 2021 May;102(5):329-332. doi: 10.1016/j.diii.2020.12.004. Epub 2021 Jan 11.

FULL TEXT LINKS



Feasibility of human vascular imaging of the neck with a large field-of-view spectral photon-counting CT system

Sara Boccalini ¹, Salim Si-Mohamed ², Riham Dessouky ³, Monica Sigovan ⁴, Loïc Boussel ², Philippe Douek ²

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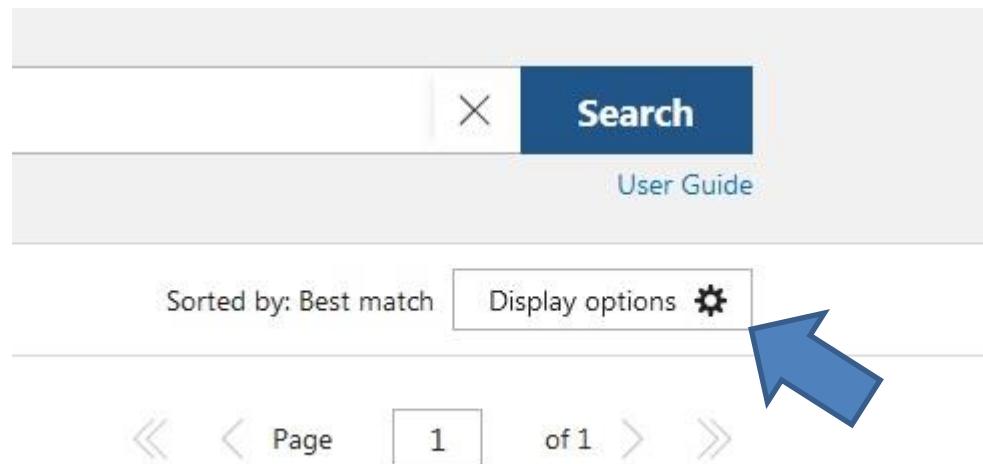
PMID: 33446464 DOI: [10.1016/j.diii.2020.12.004](https://doi.org/10.1016/j.diii.2020.12.004)

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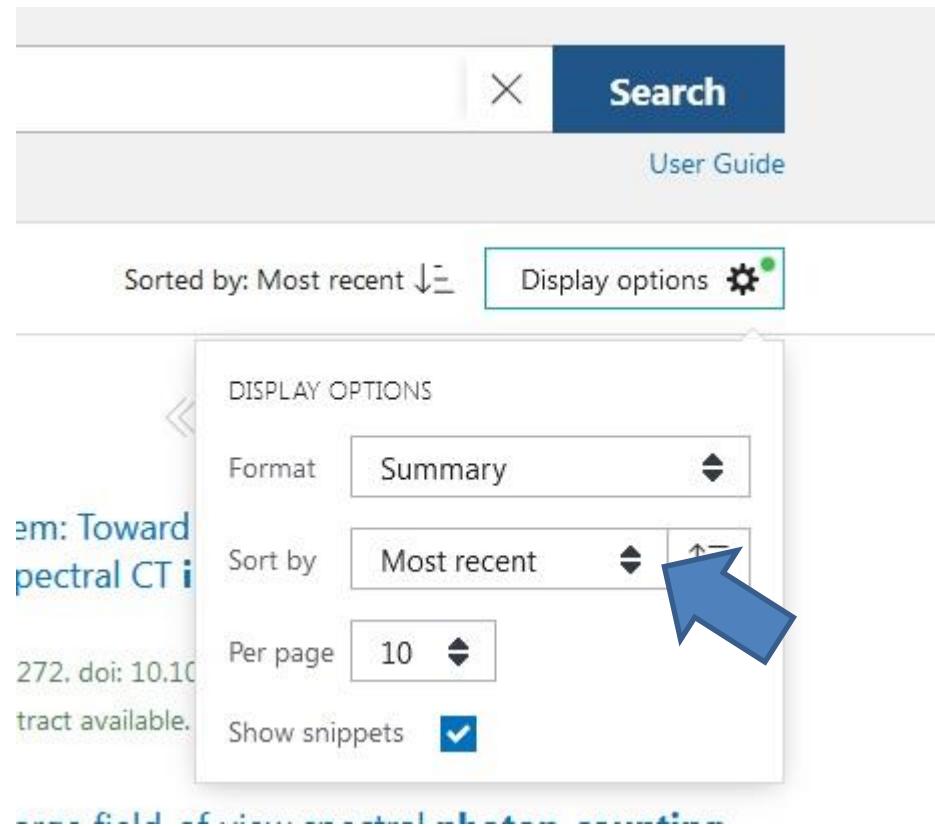
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□ Diagnosis of early biochemical recurrence after radical prostatectomy or radiation therapy in patients with **prostate** cancer: State of the art.

1 Cite Share

Zhang-Yin J, Montravers F, Montagne S, Hennequin C, Renard-Penna R.

Diagn Interv Imaging. 2022 Apr;103(4):191-199. doi: 10.1016/j.diii.2022.02.005. Epub 2022 Feb 25.

PMID: 35227633 [Free article.](#)

Biochemical recurrence after primary treatment in **prostate** cancer is not uncommon. A rising serum **prostate**-specific antigen level represents a first sign of disease relapse. ...Current evidence suggests that multiparametric magnetic resonance **imaging**, PET/CT ...

TEXT AVAILABILITY

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ARTICLE ATTRIBUTE

□ Associated data

ARTICLE TYPE

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□ Ejaculatory dysfunction following **prostate** artery embolization: A retrospective study utilizing the male sexual health questionnaire-ejaculation dysfunction questionnaire.

2 Cite Share

Young S, Moran P, Golzarian J.

Diagn Interv Imaging. 2022 Jun;103(6):310-315. doi: 10.1016/j.diii.2022.01.003. Epub 2022 Jan 24.

PMID: 35086788

PURPOSE: The purpose of this study was to determine the rate of ejaculatory dysfunction that develops following **prostate** artery embolization (PAE) and identify predictive factors. ...

□ **Prostate** artery chemoembolization in **prostate** cancer: A proof of concept study in spontaneous **prostate** cancer in a canine model.

3 Cite Share

Pellerin O, Déan C, Reb P, Chaix C, Floch F, Tierny D, Sapoval M.

Diagn Interv Imaging. 2021 Dec;102(12):709-715. doi: 10.1016/j.diii.2021.07.003. Epub 2021 Aug 12.

PMID: 34391716

- Tous les mots clé sont envisageables
- «Low dose»
- «Diffusion»
- «Emergency»
- «Cardiac»
- «Covid»

- Il a aussi des références sur les produits gadolinés et sur l'agrément inter observateur (Kappa, ICC) que l'on peut presque mettre partout (c'est fait exprès)
- de Laforcade L, Bobot M, Bellin MF, Clément O, Grangé S, Grenier N, Wynckel A, Guerrot D. [Kidney and contrast media: Common viewpoint of the French Nephrology societies \(SFNDT, FIRN, CJN\) and the French Radiological Society \(SFR\) following ESUR guidelines.](#) Diagn Interv Imaging 2021;102(3):131-139. doi: 10.1016/j.diii.2021.01.007.
- Benchoufi M, Matzner-Lober E, Molinari N, Jannot AS, Soyer P. [Interobserver agreement issues in radiology.](#) Diagn Interv Imaging 2020;101(10):639-641. doi: 10.1016/j.diii.2020.09.001.

C'est très simple

Mais c'est important

Rank by Journal Impact Factor

Journals within a category are sorted in descending order by Journal Impact Factor (JIF) resulting in the Category Ranking below. A separate rank is shown for each category in which the journal is listed in JCR. Data for the most recent year is presented at the top of the list, with other years shown in reverse chronological order. [Learn more](#)

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Science Citation Index Expanded (SCIE)

CATEGORY

RADIOLOGY, NUCLEAR MEDICINE &
MEDICAL IMAGING

16/136

JCR YEAR	JIF RANK	JIF QUARTILE	JIF PERCENTILE
2021	16/136	Q1	88.60
2020	35/133	Q2	74.06
2019	56/134	Q2	58.58
2018	57/129	Q2	56.20

2021 le rang A raté à 2 places (7.422)

2020 le rang B raté à 2 places

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