## **Special Issue**

## Acute Medical Threats: Evidence-Driven Strategies in Emergency Medicine

### Message from the Guest Editor

This Special Issue explores the latest approaches and strategies in managing acute medical threats encountered in emergency medicine. It emphasizes event-driven protocols designed to rapidly assess, triage, and treat critical conditions such as acute cardiovascular, respiratory, neurological, gastroenterological, and pregnancy-related events; traumatic and non-traumatic injuries; infectious outbreaks: chemical or biological incidents: and natural disasters. The issue reviews evidence-based practices, innovative technologies, and multidisciplinary coordination efforts aimed at improving patient outcomes during sudden, large-scale emergencies. This issue aims to provide clinicians, researchers, and policymakers with a comprehensive overview of current best practices, innovative approaches, and future directions in managing acute medical threats. By emphasizing event-driven strategies, we seek to enhance preparedness, optimize response efforts, and ultimately improve patient outcomes in the face of unpredictable and formidable emergencies.

### **Guest Editor**

Dr. Alexandra Arvanitaki

- Second Department of Cardiology, Ippokrateio General Hospital, School of Medicine, Aristotle University of Thessaloniki, St. Kiriakidi 1, 54642 Thessaloniki, Greece
- 2. Department of Emergency Medicine, AHEPA University Hospital, School of Medicine, Aristotle University of Thessaloniki, St. Kiriakidi 1, 54642 Thessaloniki, Greece
- 3. Adult Congenital Heart Disease Unit, Royal Brompton Hospital, Guy's and St Thomas' Foundation Trust, Sydney Street, London SW3 5NP, UK

### Deadline for manuscript submissions

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Journal of Clinical Medicine Editorial Office MDPI, Grosspeteranlage 5 4052 Basel, Switzerland Tel: +41 61 683 77 34 icm@mdpi.com

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There has been an explosion of gene and target based research and therapeutics in the multitude of fields that compose clinical medicine. The *Journal of Clinical Medicine*'s (*JCM*) staff and editorial board are dedicated to providing cutting edge, timely, and peer-reviewed articles covering the diverse subspecialties of clinical medicine. The journal publishes concise, innovative, and exciting research articles as well as clinically significant articles and reviews that are pertinent to the myriad of disciplines within medicine. The articles published are relevant to both primary care physicians and specialists. The journal's full-texts are archived in PubMed Central and indexed in PubMed. Please consider submitting your manuscripts for publication to our journal and check us out on-line!

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Prof. Dr. Kent Doi

Department of Emergency and Critical Care Medicine, University of Tokyo, Tokyo, Japan

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