

Special Issue

Emergency and Critical Care in the Context of Personalized Medicine

Message from the Guest Editors

Critically ill patients are currently framed within very complex algorithms and protocols, the furthest thing from personalized medicine. This happens when critical medicine tries to use the results of large trials and available guidelines to obtain the best possible outcome. However, not all fit for all patients. Protective ventilation can differ depending on the initial quality of the lungs. The management of sepsis and temperature are closely linked to the individual metabolism of the patient. Beyond the macroscopic therapeutic differences between adult and pediatric patients, today it is increasingly essential to "measure" the intensity of care also on the wishes expressed for well-being by the patient, or to consider what degree of disability the patient and his caregivers can consider acceptable after extremely critical pathological conditions. This Special Issue is dedicated to all the literature, which focuses on the aspects of tailored critical care. Journal articles, reviews, and communications are welcomed.

Guest Editors

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About the Journal

Message from the Editor-in-Chief

Journal of Personalized Medicine (JPM), ISSN 2075-4426) is an international, open access journal aimed at bringing all aspects of personalized medicine to one platform. *JPM* publishes cutting edge, innovative preclinical and translational scientific research and technologies related to personalized medicine (e.g., precision medicine, pharmacogenomics/proteomics, systems biology, 'omics association analysis). *JPM* is covered in Scopus, the Science Citation Index Expanded (SCIE), PubMed, PMC, Embase, and other databases.

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manuscripts are peer-reviewed and a first decision is provided to authors approximately 21.5 days after submission; acceptance to publication is undertaken in 3.5 days (median values for papers published in this journal in the first half of 2025).