Special Issue

State of the Art of Anesthesia and Perioperative Medicine

Message from the Guest Editor

The core of perioperative medicine is an integrated, planned, and personalized approach to patient care before, during, and after any surgical procedure involving general and regional anesthesia. The goal of modern anesthesia is to improve the patient experience and outcomes, lower the occurrence of postoperative issues, decrease the number of days spent in the hospital, and minimize readmissions after surgery, working in synergy with the enhanced recovery after surgery (ERAS). The aim of this Special Issue is to invite original research articles, notable clinical findings, and review articles that present and discuss the advancement of research and innovative approaches involving anesthesia and perioperative care, covering different aspects of translational research and personalized treatments. We especially encourage the submission of interdisciplinary works and multi-country collaborative research. We welcome submissions of original research papers using different study designs and critical and relevant reviews, including systematic reviews.

Guest Editor

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Deadline for manuscript submissions

closed (31 March 2025)



Journal of Personalized Medicine

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CiteScore 6.0
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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).

