

Special Issue

Personalized Medicine in Emergency and Intensive Care

Message from the Guest Editors

Despite valuable advances, the field of emergency and intensive care medicine is still burdened by a high rate of mortality and disabilities. This Special Issue of the *Journal of Personalized Medicine* will host valuable contributions aimed at understanding the mechanisms of emergency and critical diseases, explaining the variety of possible responses of the population to insults and current therapies, and hypothesizing risk stratification and tailored approaches to medical issues. We invite worldwide investigators to contribute with original research articles and reviews on clinical and preclinical experimental observations. Specific attention is dedicated to evidence from experimental and clinical trials, controversial topics, gold standards and experimental treatments and interventions, risk factors, and personalized approaches.

Guest Editors

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Deadline for manuscript submissions

closed (20 January 2022)



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About the Journal

Message from the Editor-in-Chief

Journal of Personalized Medicine is one of the few journals that covers the diverse areas involved in the field, including research at basic, translational, and clinical levels. It focuses on “omics”-level studies that seek to define the basis of interindividual variation in susceptibility for a disease, its prognosis or definition of clinical subsets, and response to therapy (pharmacogenomics). We are also interested in systems biology as it relates to interindividual variation, and research on new methodologies, informatics, and biostatistics, in the aforementioned areas.

Editor-in-Chief

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Author Benefits

High Visibility:

indexed within Scopus, PubMed, PMC, Embase, and other databases.

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CiteScore - Q1 (Medicine (miscellaneous))

Rapid Publication:

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).