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EDITORIAL

Introducing Academic Anesthesia (Acad. Anes.)

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In every operating theatre, critical-care unit, and pain clinic around the world, anesthesiologists make split-second decisions that save lives. Yet the knowledge behind those decisions often remains locked behind paywalls or siloed in regional meetings. *Academic Anesthesia* (shorthand—*Acad. Anes.*) launches to change that dynamic. As a fully open-access, peer-reviewed journal, *Academic Anesthesia* is designed to democratize the science and practice of anesthesiology, giving equal voice to students setting foot in the specialty, seasoned attendings refining best practice, and scientists decoding the molecular mechanisms that underlie perioperative physiology.

Aims & Scope

1. A Truly Free, Open Academic Platform

Academic Anesthesia operates under the Directory of Open Access Journals (DOAJ) open-access model: every article is immediately and permanently available online, with no subscription barriers for readers anywhere. Authors also publish free of charge—removing the article-processing fees that often keep early-career investigators or colleagues in resource-limited settings out of the scholarly conversation.

2. A Continuum of Contributors: Learners to Leaders

Academic Anesthesia actively seeks work from every point on the professional spectrum. Medical students, residents, anesthesiologist assistants (AAs), certified registered nurse anesthetists (CRNAs), and attending anesthesiologists are invited to share formative experiences—be it a distinctive case report, a simulation curriculum, a quality-improvement project, or a reflective narrative that captures lessons learned at the bedside. We heavily welcome mature scholarship such as prospective clinical trials, large retrospective series, perioperative guidelines, and implementation-science investigations that translate evidence into practice. Basic and translational scientists are equally welcome, bringing mechanistic insights into anesthetic neurobiology, novel drug-delivery platforms, and bench-to-bedside biomarker research that advance our understanding of perioperative physiology. By valuing methodological rigor over seniority or institutional pedigree, the journal ensures that innovative ideas and solid data—wherever they originate—reach a global readership.

Table 1. Article types accepted for submission to *Academic Anesthesia*.

Article Type	Scope & Typical Content
Original Research	Primary investigations—clinical, translational, basic-science, or computational—advancing knowledge in perioperative physiology, anesthetic pharmacology, pain medicine, or critical-care outcomes. Clinical-trial submissions should cite CONSORT and include registration details; authors are encouraged to share underlying datasets.
Practice Innovation	Short reports of real-world "hacks" that streamline care in the OR, pre-op clinic, PACU, or ICU (e.g., low-cost nerve-block kits, extubation safety checklists, decision-support alerts).
Technical Note	Step-by-step descriptions of procedures, devices, or historical techniques—such as ultrasound-guided blocks, video-assisted airway maneuvers, or equipment modifications that enhance patient safety.
Educational Advances in Anesthesia & Perioperative Medicine	Scholarship of teaching and learning: simulation curricula, flipped-classroom modules, gamified resident milestones, or faculty-development programs focused on airway management, regional anesthesia, or crisis leadership.
Review	Systematic, scoping, meta-analytic, or narrative syntheses clarifying evidence on topics like depth-of-anesthesia monitoring, opioid-sparing analgesia, goal-directed therapy, or postoperative cognitive dysfunction. (Specify review type in title and methods.)
Case Report	Detailed accounts of unusual anesthetic challenges, rare drug reactions, unique airway findings, or novel uses of regional techniques. Patient/guardian informed consent is mandatory.
Clinical Image or Video	1–2 high-resolution visuals that tell an anesthetic story—e.g., ultrasound evidence of pulmonary embolus, fiber-optic views of airway anomalies, or videos showing bronchospasm resolution.
Survey Report	Rigorous questionnaire-based studies on subjects such as trainee burnout, enhanced recovery after surgery (ERAS) adoption, drug availability in low-resource settings, or OR environmental sustainability (include methodology and consent process).
Data Note	Brief descriptions of openly shared datasets—physiologic waveforms, pharmacokinetic models, de-identified ICU sedation data—deposited in a public repository for secondary analysis.
Letter to the Editor	Concise commentaries or rebuttals addressing *Acad.Anes.* articles, emerging perioperative issues, or preliminary observations not yet suitable for full manuscripts.

What You Can Publish

Academic Anesthesia accepts articles according to the following types in **Table 1.**

Why Publish in *Academic Anesthesia*?

1. Universal Visibility
   Articles are indexed in major databases (applications under way for PubMed Central, DOAJ, Scopus) and released under a Creative Commons license, maximizing reach and citation potential.

2. Rapid, Fair Editorial Process
   Median time to first decision is targeted at 14 days, with rigorous, double-blind anonymous peer review.

3. Data & Code Transparency
   The journal encourages open data repositories and preregistered protocols, aligning with the highest standards of reproducible science.

4. Multimedia & Post-Publication Dialogue
   Graphical abstracts are also welcome to be published alongside original articles.

Join the Community

Academic Anesthesia is more than a journal; it is a meeting point for a global network of perioperative professionals and scientists. Whether you are:

- A resident eager to share your first quality-improvement project,
- A principal investigator translating ion-channel discoveries into novel anesthetics,
- Or an attending anesthesiologist in an LMIC documenting a low-cost airway workaround, there is space for your voice.

Visit https://academicanesthesia.scholasticahq.com/ for author guidelines, journal policies, and the manuscript submission portal.

Together, we can ensure that the next breakthrough in anesthesiology is freely accessible to the clinician who needs it most—regardless of geography or budget. Submit your work today and help build the open, equitable future of perioperative science with *Academic Anesthesia (Acad. Anes.)*.

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