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- 주제분야

- 임상 의학

- 출판사 소개

- 선진 의학 지식의 가장 최신의 정보를 제공해 온 오랜 전통의 미국 의학 협회
- 의학실습과 연구를 위한 최상의 교육 표준을 유지하고 개발하며 임상 분야의 Peer-reviewed 된 논문만을 꾸준히 출판

- 제공 패키지(부산대 구독 저널 총 9종 - JAMA & 8 specialty journals)

JAMA : Journal of the American Medical Association

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- 원문정보 제공년도

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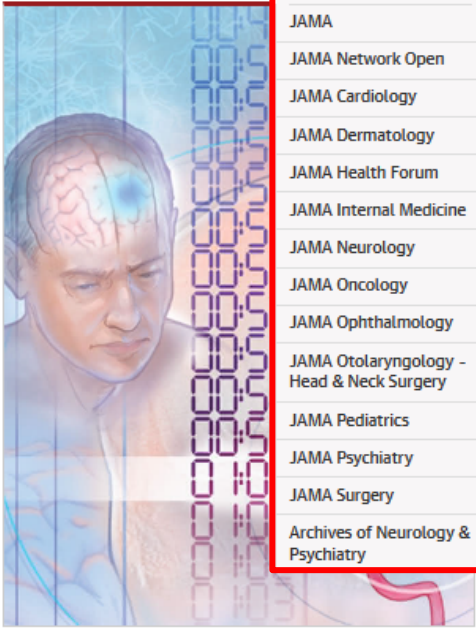
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Intra-Arterial Thrombolytics Following Thrombectomy for Ischemic Stroke

Original Investigation

Intra-Arterial Tenecteplase Following Endovascular Reperfusion for Large Vessel Occlusion Acute Ischemic Stroke: The POST-TNK Randomized Clinical Trial

Jiacheng Huang, MD; Jie Yang, MD; Chang Liu, MD; et al

Original Investigation

Intra-Arterial Urokinase After Endovascular Reperfusion for Acute Ischemic Stroke: The POST-UK Randomized Clinical Trial

Chang Liu, MD; Changwei Guo, MD; Fengli Li, MD; et al

Editorial

Intra-Arterial Thrombolytics During Thrombectomy for Ischemic Stroke—End of the Story or a New Beginning?

Diederik W. J. Dippel, MD, PhD; Ching F. Khan, MD; Bridget A. Schoon, MD

Audio

Intra-Arterial Thrombolytics Following Thrombectomy for Ischemic Stroke

Author Diederik Dippel with JAMA Deputy Editor Christopher C. Muth

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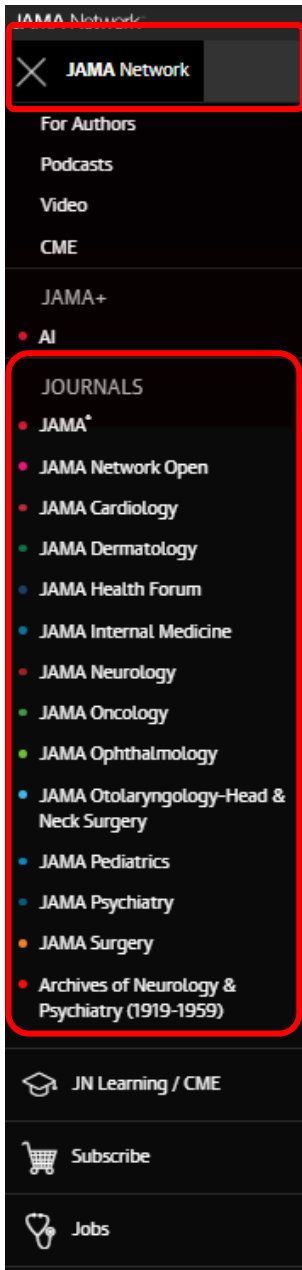
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← JAMA 및 각 Specialty 저널로 이동

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- * JAMA : 의학일반분야/2023 IF 63.1
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- * JAMA Oncology : 종양학, 2015년부터 발간된 신규 저널/2023 IF 22.5
- * JAMA Cardiology : 심장병학, 2016년부터 발간된 신규 저널/2023 IF 14.8



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Intra-Arterial Thrombolytics Following Thrombectomy for Ischemic Stroke

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January 13, 2025

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January 7, 2025, Vol 333, No. 1, Pages 5-96 | Ethics and Medical Research

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JAMA. 2025;333(1):e2318479. doi:10.1001/jama.2023.18479

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Intravenous Lidocaine for Gut Function Recovery in Colonic Surgery: A Randomized Clinical Trial

Hugh Paterson, MD; Thenmalar Vadiveloo, PhD; Karen Innes, MSc; et al.

Abstract | Full Text

JAMA. 2025;333(1):39-48. doi:10.1001/jama.2024.23898

This study compares the efficacy of 2% perioperative intravenous lidocaine infusion vs 0.9% saline placebo on return of gut function after elective minimally invasive colon resection.

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JAMA Surgery | January 12, 2022

Table 2: Adjusted Hazard Ratios for Discontinuation of Diabetes, **Hypertension**, and Hyperlipidemia Medications at 1, 3, ...

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Table 3: Adjusted Hazard Ratios for Restarting Diabetes, **Hypertension**, and Hyperlipidemia Medications at 1, 3, or 5 ...

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Table 2. Adjusted Hazard Ratios for Discontinuation of Diabetes, Hypertension, and Hyperlipidemia Medications at 1, 3, and 5 Years After Baseline (N = 1,000) (Mean Age, 65 Years)

	1 Year	3 Years	5 Years
Diabetes	1.00 (ref)	1.00 (ref)	1.00 (ref)
Hypertension	1.00 (ref)	1.00 (ref)	1.00 (ref)
Hyperlipidemia	1.00 (ref)	1.00 (ref)	1.00 (ref)

Table 3. Adjusted Hazard Ratios for Restarting Diabetes, Hypertension, and Hyperlipidemia Medications at 1, 3, or 5 Years After Baseline (N = 1,000) (Mean Age, 65 Years)

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