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DESCRIPTION

For 66 years, Surgery has published practical, authoritative information about procedures, clinical advances, and major trends shaping general surgery. Each issue features original scientific contributions and clinical reports. Peer-reviewed articles cover topics in oncology, trauma, gastrointestinal, vascular, and transplantation surgery. The journal also publishes papers from the meetings of its sponsoring societies, the Society of University Surgeons, the Central Surgical Association, and the American Association of Endocrine Surgeons.

Surgery ranks among the most cited journals in the field and is recommended for initial purchase in the Brandon-Hill study, Selected List of Books and Journals for the Small Medical Library.

Surgery is indexed or abstracted in Index Medicus, Science Citation Index, Current Contents/Clinical Medicine, Current Contents/Life Sciences, and MEDLINE.

IMPACT FACTOR

2019: 3.356 © Clarivate Analytics Journal Citation Reports 2020

ABSTRACTING AND INDEXING

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Current Contents - Clinical Medicine
Current Contents - Life Sciences
PubMed/Medline

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Kevin E. Behrns, M.D.
Professor of Surgery
St. Louis University
St. Louis, MO 63104

Steven D. Wexner, M.D., Ph.D. (Hon), FACS, FRCS (Eng), FRCS (Ed), FRCSI (Hon), Hon FRCS (Glasg)
Director, Digestive Disease Center
Professor and Chair, Department of Colorectal Surgery
Cleveland Clinic Florida
Weston, FL 33331

Managing Editor
Donna Schena
20 North Street
Plymouth, MA 02360
Tel: 508-732-6767
Fax: 508-732-6766
e-mail: surgery@stellarmed.com

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All authors must observe most strictly the rules against dual publication.
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Manuscripts describing research involving human subjects must document both IRB approval/exemption and that informed consent was obtained from patients who served as subjects of the investigation. A statement about HIPAA compliance is also necessary for human studies from the United States and other countries in which the protection of patient information by obtaining patient consent is required by law. In the event that either the Editors or referees question the propriety of the human investigation with respect to the risk to the subjects or to the means of obtaining informed consent, *Surgery* may request more detailed information about the safeguards employed and the procedures used to obtain consent. Minutes of the local human experimentation committees that reviewed and approved the research may also be requested.

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For Images in Surgery submissions, a maximum of two images is allowed, the text should be less than 500 words with a maximum of three (3) references. Manuscripts must strictly adhere to these criteria and will only be considered if the criteria are met. Images in Surgery will be published online only. The text of manuscript should present the case as an unknown with the corresponding images crucial to attaining the correct diagnosis or management. The author should present four (4) potential options for the correct answer to the unknown diagnosis or management and clearly indicate the one best answer. The options for answers will be posted on the website where readers can enter their answer and see the correct response.

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*Surgery* welcomes discussion of controversial topics or subject matter that warrants conversation. The Editors and Editors-In-Chief will solicit such topics, but we invited the readership to submit ideas by contacting our managing editor at surgery@stellarmed.com. Topics must be pre-approved by the Editors-In-Chief as unsolicited submissions will not be considered. Debates and Dilemmas manuscripts should be 750 words or less and have a maximum of seven (7) references and no tables or figures.

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Letters to the editor must be in response to previously published articles in Surgery. Letters not pertaining to previously published Surgery articles will not be considered. Each letter must not exceed 500 words, should be typed with double-spacing, and may include five (5) references and no figures or tables. The Editors-In-Chief reserve the rights to accept, reject, or revise letters without changing the views expressed by the writer. No anonymous correspondence will be published. The letters must be written in publication quality language as only one (1) minor revision is permitted.

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