

Regional Anesthesia & Pain Medicine

Official Journal of ASRA - the American Society of Regional Anesthesia and Pain Medicine

2019 RATES & DATA

REACH ANESTHESIA AND
PAIN MEDICINE SPECIALISTS

PUBLISHING MONTHLY



For more information on advertising,
and to discuss your campaign
requirements, please contact:

RON GORDON

National Accounts Manager
American Medical Communications
(973) 214-4374
rgordon@americanmedicalcomm.com

LINSEY ROSENTHAL

Director of Sales
American Medical Communications
(215) 740-3174
lrosenthal@americanmedicalcomm.com

Frequency
discounts
available!
Ask your sales rep
for details.

rapm.org

BMJ

Regional Anesthesia & Pain Medicine

2019 RATES & DATA

Regional Anesthesia & Pain Medicine (RAPM) publishes peer-reviewed scientific and clinical studies to advance the understanding and clinical application of regional techniques for surgical anesthesia and postoperative analgesia. Coverage includes intraoperative regional techniques, perioperative pain, chronic pain, obstetric anesthesia, pediatric anesthesia, outcome studies, and complications.

RAPM is the official journal of ASRA - the American Society of Regional Anesthesia and Pain Medicine. Members of ASRA receive a complimentary 12 month subscription to the journal.

RAPM also serves as the official publication of the European Society of Regional Anaesthesia and Pain Therapy (ESRA), the Asian and Oceanic Society of Regional Anesthesia (AOSRA), the Latin American Society of Regional Anesthesia (LASRA), and the African Society of Regional Anesthesia (AFSRA).

At a glance

Year established: 1976

Impact factor: 4.382*

Rank 5/31 in Anesthesiology*

Editor-in-Chief: Marc A. Huntoon, MD

Online Frequency: Continuously published

* Source: Source: 2017 Journal Citation Reports®, Clarivate Analytics, 2018

Website traffic

Global visitors per month**	31k
Global page views per month**	62k
U.S. visitors per month**	13k
U.S. page views per month**	21k
Global eTOC recipients	14k

** Source: Google Analytics, 2018 monthly average

Contact a sales representative for the latest figures.

Print and online advertising options available as well as tailored packages including:

- Reprints and ePrints
- Themed supplements
- Web focus
- Cover tips
- eToc alert advertising
- e-Newsletter advertising
- Controlled print circulation
- Print cover wraps

ADVERTISING OPPORTUNITIES

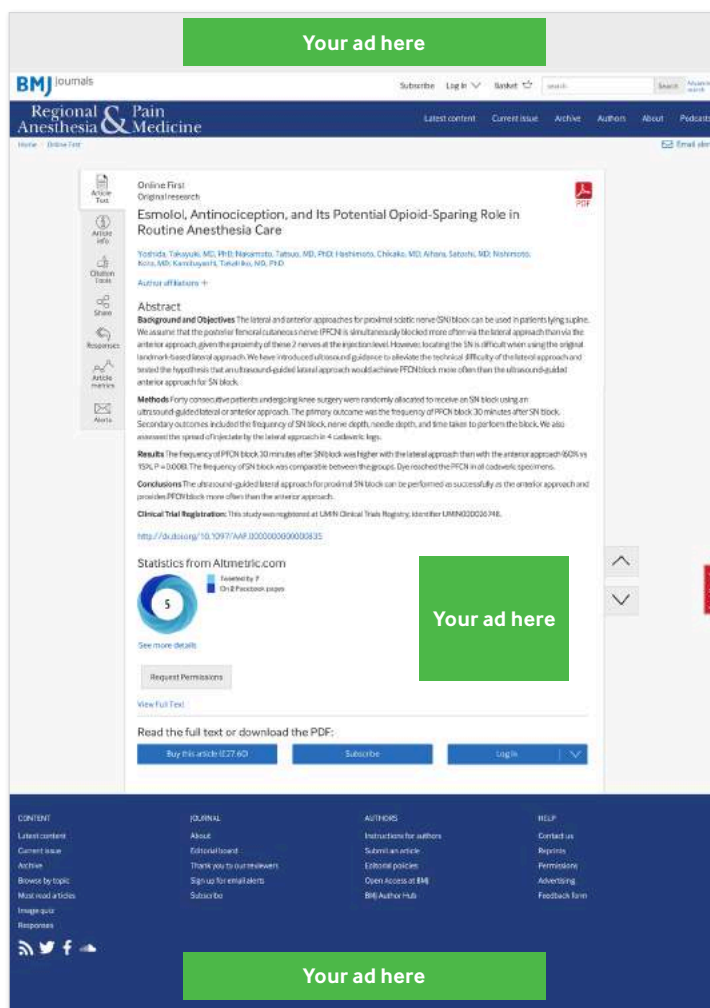
Regional Anesthesia & Pain Medicine

RAPM 2019 Rates & Data

Print and online advertising options available, as well as tailored packages including:

- Reprints and ePrints
- Email table of content (eToc) alerts
- e-Newsletter advertising
- Print advertising
- Print cover wraps and tips

RAPM online offers the opportunity to target your products through geo-targeted, online advertising. There are a full range of digital opportunities available.



ONLINE ADVERTISING RATES

	Pixels	Rate	Minimum charge	Specifications
Mobile banner	468 x 60	\$75 per 1,000 impressions	\$1,795 for 25,000 impressions	File type GIFs (animated preferred) and Rich Media accepted, subject to production clearance. File size up to 50k.
Leaderboard	728 x 90	\$75 per 1,000 impressions	\$3,585 for 50,000 impressions	Deadline to receive materials 5 working days prior to deployment.
MPU (Mid page unit)	300 x 250	\$80 per 1,000 impressions	\$1,935 for 25,000 impressions	Please note: Advertisements are accepted subject to availability and BMJ approval.

TARGETED SOLUTIONS

Regional Anesthesia & Pain Medicine

RAPM 2019 Rates & Data

Hurry! Limited opportunities available.

DIGITAL ROADBLOCK PACKAGE

Your ad here

BMJ Journals

Regional Anesthesia & Pain Medicine

Online First
Original research

Esmolol, Antinociception, and Its Potential Opioid-Sparing Role in Routine Anesthesia Care

Yoshida, Takayuki, MD, PhD; Nakamoto, Tatsuo, MD, PhD; Iwatsuki, Chikako, MD; Ariana, Satoshi, MD; Nishimura, Hiroe, MD; Kamigaito, Takashi, MD, PhD

Abstract

Background and Objectives The lateral and anterior approaches for proximal robotic nerve SN block can be used in patients lying supine. We assume that the posterior femoral subsartorial nerve (PFCSN) is simultaneously blocked more often via the lateral approach than via the anterior approach, given the proximity of these 2 nerves at the injection level. However, locating the SN is difficult when using the original landmark-based lateral approach. We have introduced ultrasound guidance to alleviate the technical difficulty of the lateral approach and tested the hypothesis that an ultrasound-guided lateral approach would achieve PFCSN block more often than the ultrasound-guided anterior approach for SN block.

Methods Forty consecutive patients undergoing knee surgery were randomly allocated to receive an SN block using an ultrasound-guided lateral or anterior approach. The primary outcome was the frequency of PFCSN block 30 minutes after SN block. Secondary outcomes included the frequency of SN block, nerve depth, needle depth, and time taken to perform the block. We also assessed the spread of ropivacaine by the lateral approach in cadaveric legs.

Results The frequency of PFCSN block 30 minutes after the SN block was higher with the lateral approach than with the anterior approach (60% vs 10%; $P = 0.008$). The frequency of SN block was comparable between the groups. We reached the PFCSN in all cadaveric specimens.

Conclusions The ultrasound-guided lateral approach for proximal SN block can be performed as successfully as the anterior approach and provides PFCSN block more often than the anterior approach.

Clinical Trial Registration: This study was registered at UMIN Clinical Trials Registry. Identifier: UMIN0000205796. <http://dx.doi.org/10.1097/AAJ.0000000000000335>

Statistics from Altmetric.com

5

See more details

Request Permissions

View Full Text

Read the full text or download the PDF:

Buy Full article (\$27.00) | Subscribe | Login

Your ad here

This exclusive opportunity gives your ads 100% share-of-voice on the website and within the email table of content (eToC) alerts for an entire month.

- Banner ads
- eToC alerts

Frequency discounts available! Ask your sales rep for details.

ABOUT REGISTER FOR EMAIL ALERTS

Regional Anesthesia & Pain Medicine

Regional Anesthesia & Pain Medicine publishes peer-reviewed scientific and clinical studies to advance the understanding and clinical application of regional techniques for surgical anesthesia and postoperative analgesia. Coverage includes intraoperative regional techniques, perioperative pain, chronic pain, obstetric anesthesia, pediatric anesthesia, outcome studies, and complications.

Register for email alerts and be notified when new articles publish.

LEARN MORE

Your ad here

What are your colleagues reading?

Recommendation

READ MORE

TARGETED SOLUTIONS

Hurry! Limited opportunities available.

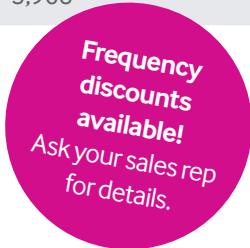
PRINT ADVERTISING

RAPM offers the opportunity to present your product in a journal targeting decision makers in Anesthesiology and Pain Medicine.

We guarantee your advertisement will stand out because of our high editorial to advertisement ratio.

We can offer a range of loose or bound inserts, which can be targeted to the market you need to reach.

At a glance
Print Circulation: 5,968



Display Advertising Rates

Volume	Full-page color	Full-page B/W	Half-page color	Half-page B/W
1x	\$4,340	\$2,692	\$3,432	\$1,785
3x	\$4,243	\$2,595	\$3,355	\$1,708
6x	\$4,085	\$2,437	\$3,284	\$1,637
12x	\$4,059	\$2,412	\$3,248	\$1,601
24x	\$4,057	\$2,320	\$3,192	\$1,545

Cover and preferred partner rates

Cover 2: 50% earned B/W rate
Cover 3: 25% earned B/W rate
Cover 4: 35% earned B/W rate
Other premium positions: 25% earned B/W rate

Insert rates

2-page: 2.5 times earned B/W rate
4-page: 4.5 times earned B/W rate
6-page: 6.5 times earned B/W rate

Prepay discount: 1%

Agency commission: 15% agency discount

TARGETED SOLUTIONS

Regional Anesthesia
& Pain Medicine

RAPM 2019 Rates & Data

Hurry! Limited opportunities available.

PRINT ADVERTISING

Specifications
3-1/2" (w) x 4-7/8" (h)
Horizontal - 7-3/8"(w) x 4-3/4"(h) Vertical = 3-1/2"(w) x 9-1/2"(h)
Bleed - 8-1/2"(w) x 11-1/4"(h) Trim - 8-1/2"(w) x 11"(h) Live area - 7-3/8"(w) x 9-1/2"(h)
Two single, full-page PDF files Left and right-hand page Allow 3/8" gutter bleed (3/16" on each side)

Publishing Deadlines for 2018

Issue	Final Selling Date	Artwork Due
January	November 28, 2018	November 30, 2018
February	January 2, 2019	January 10, 2019
March	February 1, 2019	February 8, 2019
April	March 1, 2019	March 8, 2019
May	April 1, 2019	April 8, 2019
June	May 1, 2019	May 9, 2019
July	June 3, 2019	June 10, 2019
August	July 3, 2019	July 10, 2019
September	July 31, 2019	August 7, 2019
October	September 3, 2019	September 10, 2019
November	October 1, 2019	October 9, 2019
December	November 1, 2019	November 8, 2019

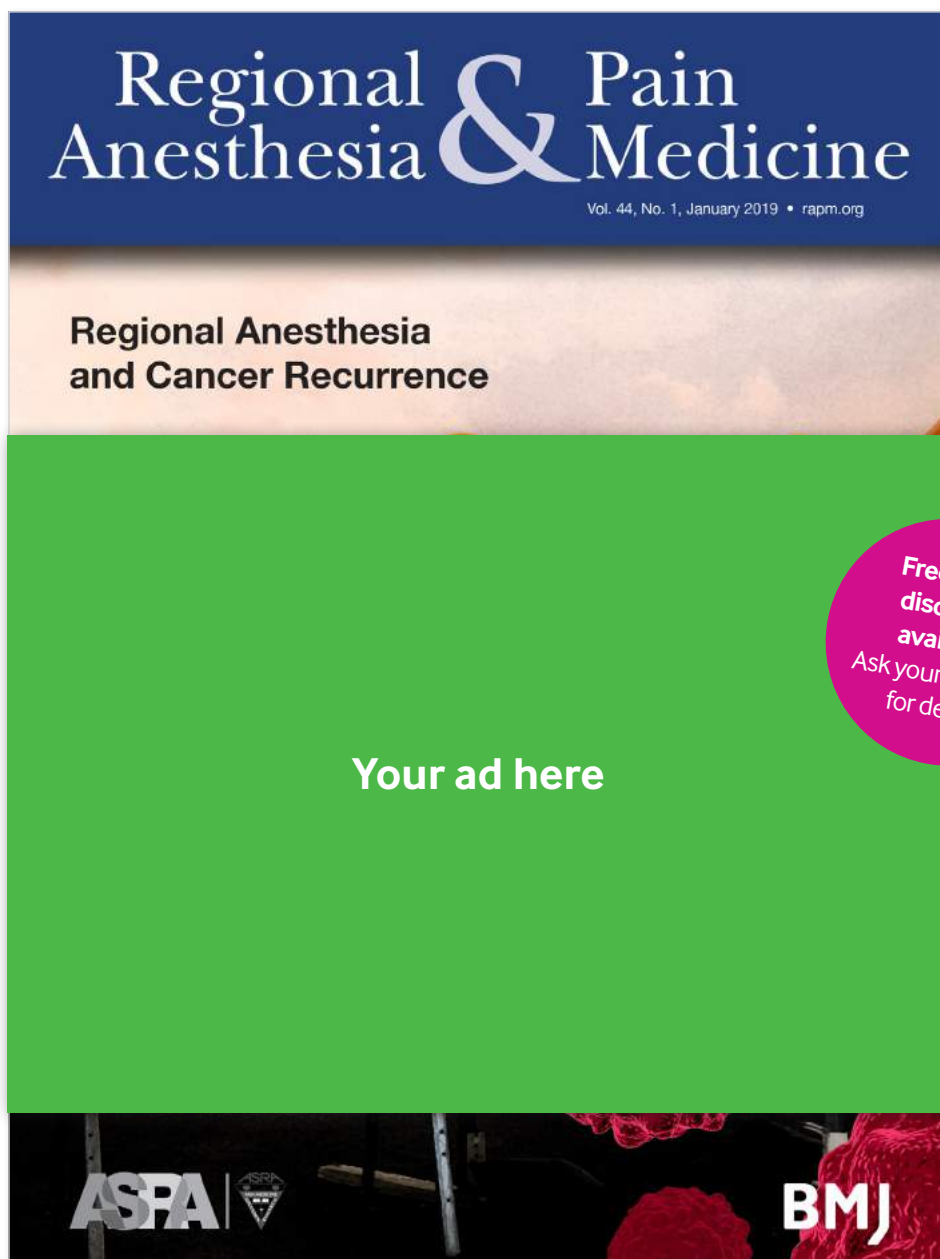
TARGETED SOLUTIONS

Regional Anesthesia & Pain Medicine

RAPM 2019 Rates & Data

Hurry! Limited opportunities available.

COVER WRAP SPONSORSHIP



Boost your brand's recognition with a sponsored print subscription. Each sponsored issue includes a four to six-page ad that wraps around the front and back of *RAPM* and is mailed to your targeted physician list.

Cover wraps are permanently bound to the journal and garner premium exposure to your audience.

For more information on advertising, and to discuss your campaign requirements, please contact:

RON GORDON
National Accounts Manager
American Medical Communications
(973) 214-4374
rgordon@americanmedicalcomm.com

LINSEY ROSENTHAL
Director of Sales
American Medical Communications
(215) 740-3174
lrosenthal@americanmedicalcomm.com