

MEARS. A.A. Pte. 433 12 A.I.F.

Age 30

Wounded 20/9/17 (3 weeks in Boulogne Hospital) Admitted 12/10/17

G.S.W. Large extensive wound causing loss of whole of chin:

lower lip and lower jaw from molar region to molar region.

Upper jaw fractured.

OPERATION. 19/10/17 (Lieut Birt) freeing tongue. Sequestrotomy, and extractions.

OPERATION 9/11/17 Further freeing tongue.

OPERATION. 23/2/18 (Lieut- Colonel Newland) preparatory to reconstruction of soft parts of chin and lip.

Musculo- cutaneous flap, attached above and below, was made from right sterno- mastoid muscle and its over-lying skin. The skin edges were sutured behind the flap which was then ~~sutured~~ skin- grafted on its deep surface from the arm. Small tube drain from the neck. 18/4/18 Result quite satisfactory.

OPERATION. 18/4/18 (Lieut- Colonel Newland) 2nd Stage to restore lower lip and chin.

Curved incision made $1\frac{1}{2}$ below the junction of tongue with skin of the neck. The cutaneous flap thus marked out was raised in order to form lining for new lip. The mucous membrane of the cheek was divided on each side and the ends of the curved flap were sutured to the lower margin of the incision in the mucous membrane.

The central portion of the cutaneous flap was pushed backwards and the upper edges sutured. The incision were now carried from the angle of the mouth on each side backwards to the ear and downwards, just in front of the ascending ramus of mandible. These flaps were raised and slid inwards. The red margin of the lip

was formed from mucous membrane of the cheek which was sutured to the upper borders of the aforesaid flaps.

MEARS (Cont.)

A large gap still remained. This was closed in the following way. A large semi- circular incision was made at the lower end of the right sterno- mastoid, which had been epithelialised at first operation. This flap and the lower end of the sterno- mastoid were detached and raised to fill the gap in the lip and chin. Wounds sutured and 3 drainage tubes inserted. Note: The cheek flap on right side threatened to slough as the original wound had divided the facial artery.

OPERATION. 13/3/18 (Lieut- Colonel Newland) Skin graft to granulating area inner end of right clavicle. Surface scraped and skin graft from right arm applied.