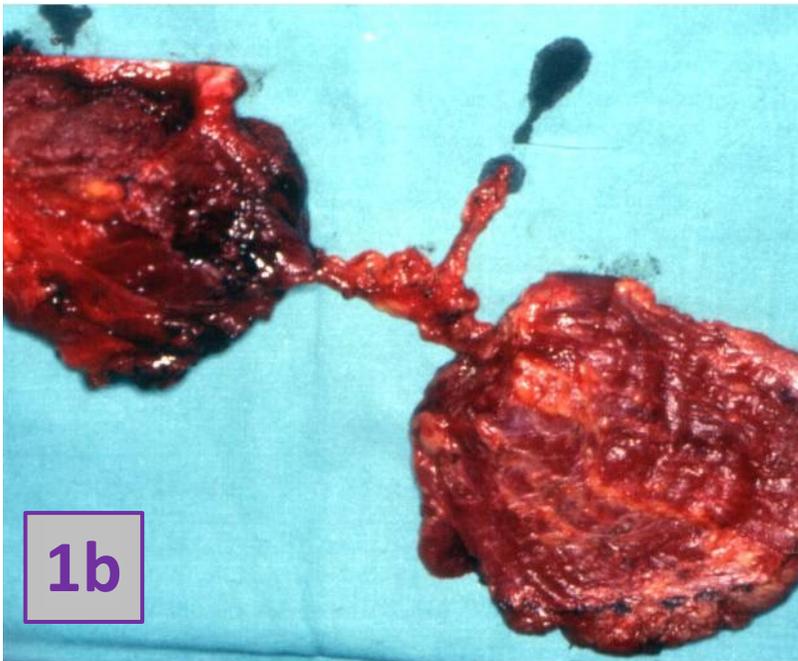
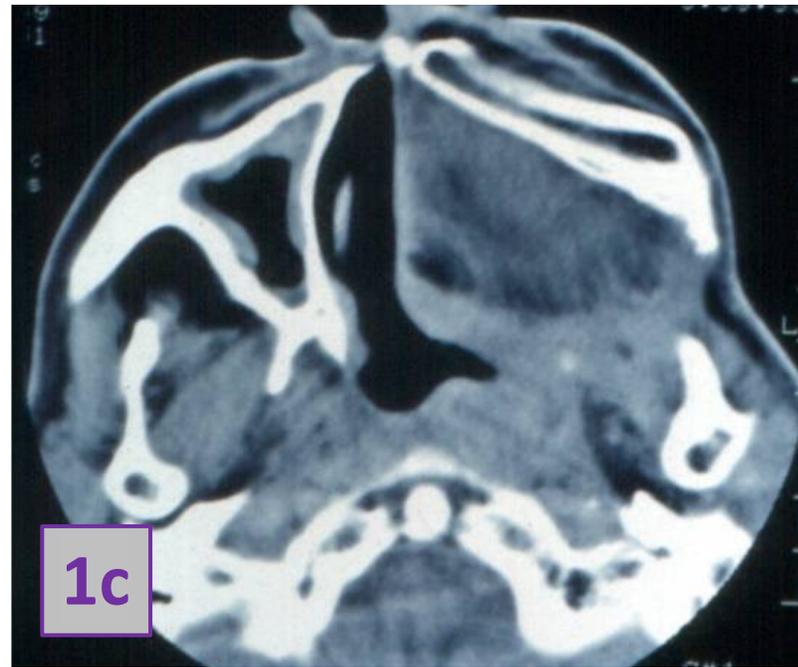
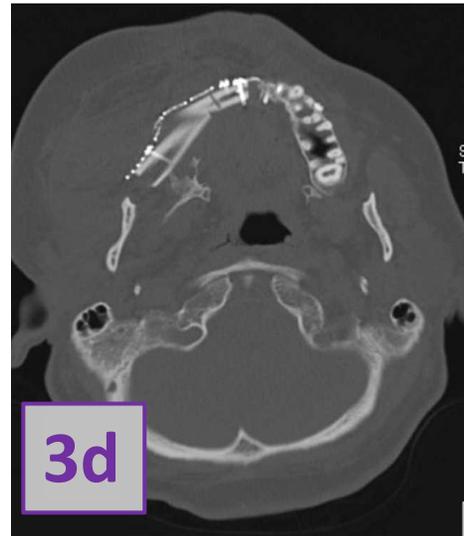
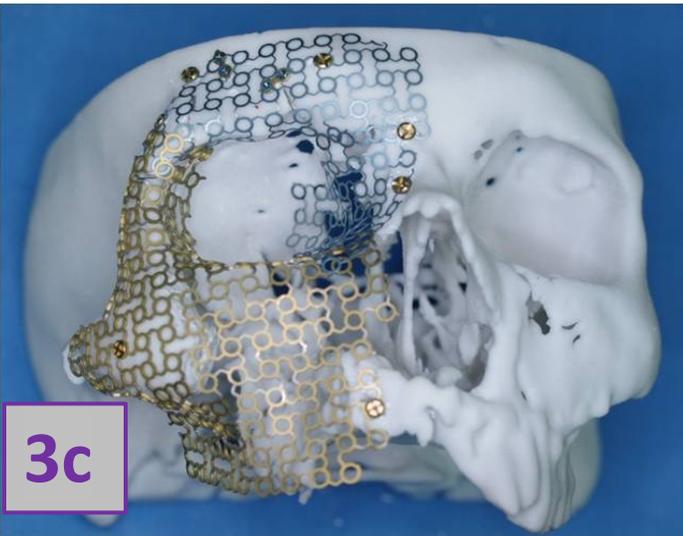


These would go under each figure and not be used as a table

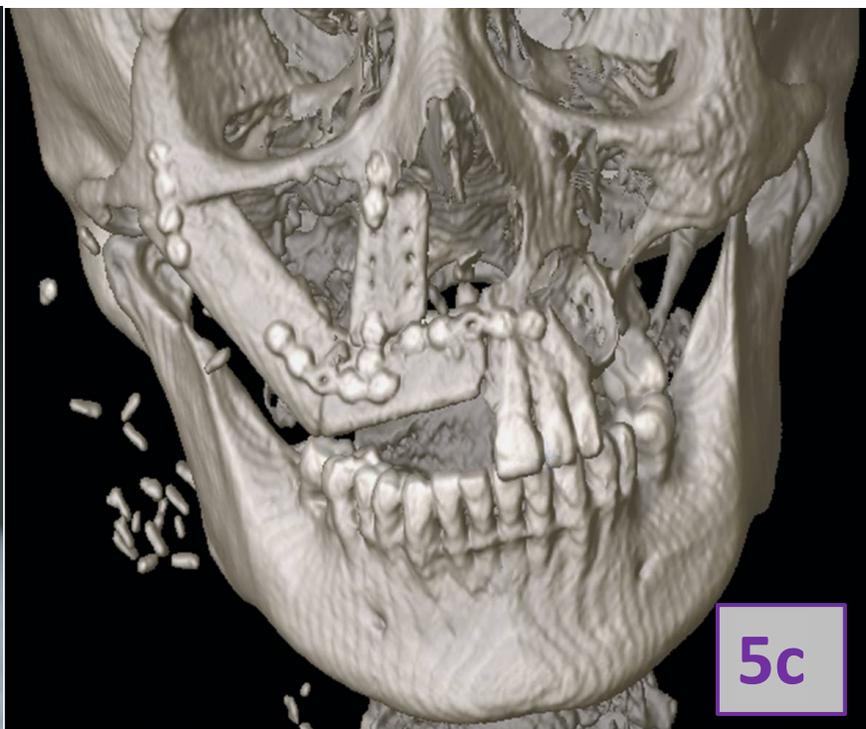
Fig. 1a Maxillary sinus PCC.
Fig. 1b Composite LD and angle of the scapula flap.
Fig. 1c Position of the scapula.
Fig. 1d Patient fitted with custom made eye prosthesis.
Fig. 2a Patient was referred to our department after sustaining a motorcycling accident. He had two previous operations to correct his lid and cheek deformity.
Fig. 2b 3D printing model of the actual defect on the right and mirror image on the left side.
Fig. 2c Four separate pieces of titanium mesh were prefabricated on mirror image model.
Fig. 2d CT scans of the postoperative result. Fibula flap was used for the alveolar ridge reconstruction.
Fig. 2e Preoperative and postoperative look after two years.
Fig. 3a Planned approach for the maxillectomy together with resection of the cheek skin and reconstruction with a local rotation flap.
Fig. 3b Cutting guide for the fibula flap.
Fig. 3c Postoperative CT 14 months after surgery.
Fig. 3d Patient appearance after 12 months post op.
S1. 3D simulation of the Brown class II defect for resection of osteosarcoma.
s2. 3D simulation of fibula flap reconstruction for the alveolar ridge and two free fibula grafts for reconstruction of the nasomaxillary buttresses
s3. Resection and cutting guides
S4. Maxillectomy type IV, composite LD and angle of scapula, final result with prosthesis
S5. Pre-fabricated titanium mesh, fibula inset for alveolar ridge reconstruction with 6 month post-operative result.



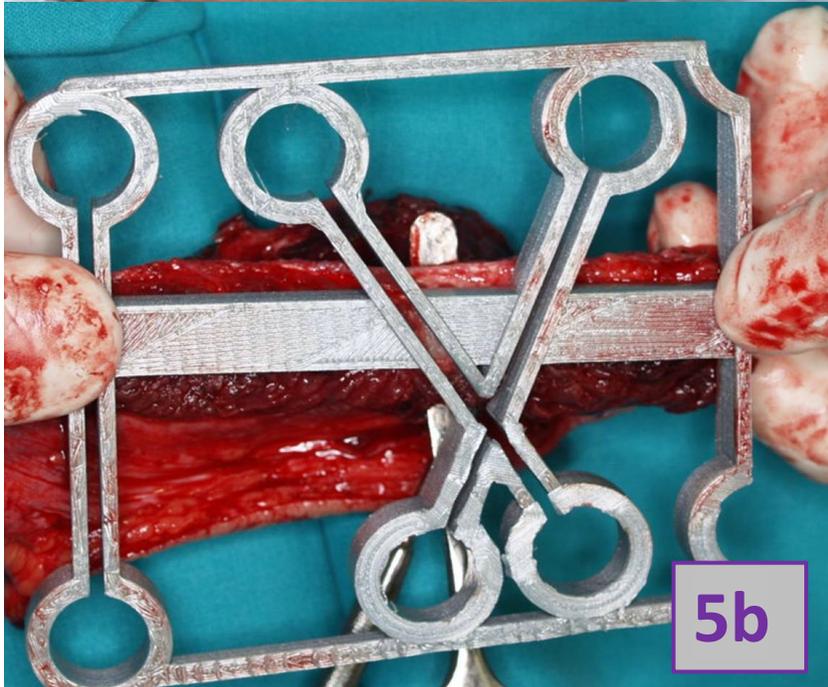




5a



5c

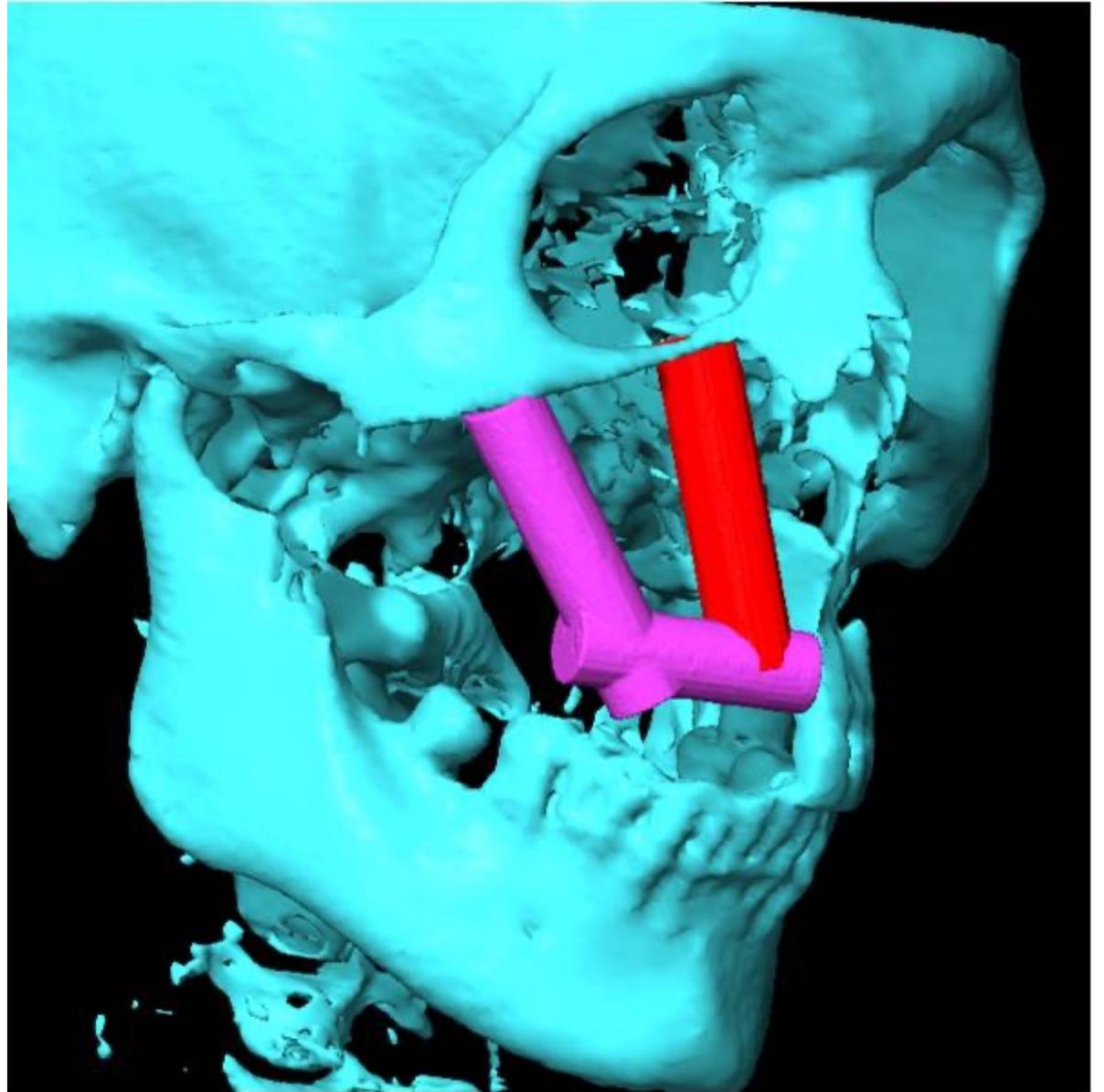
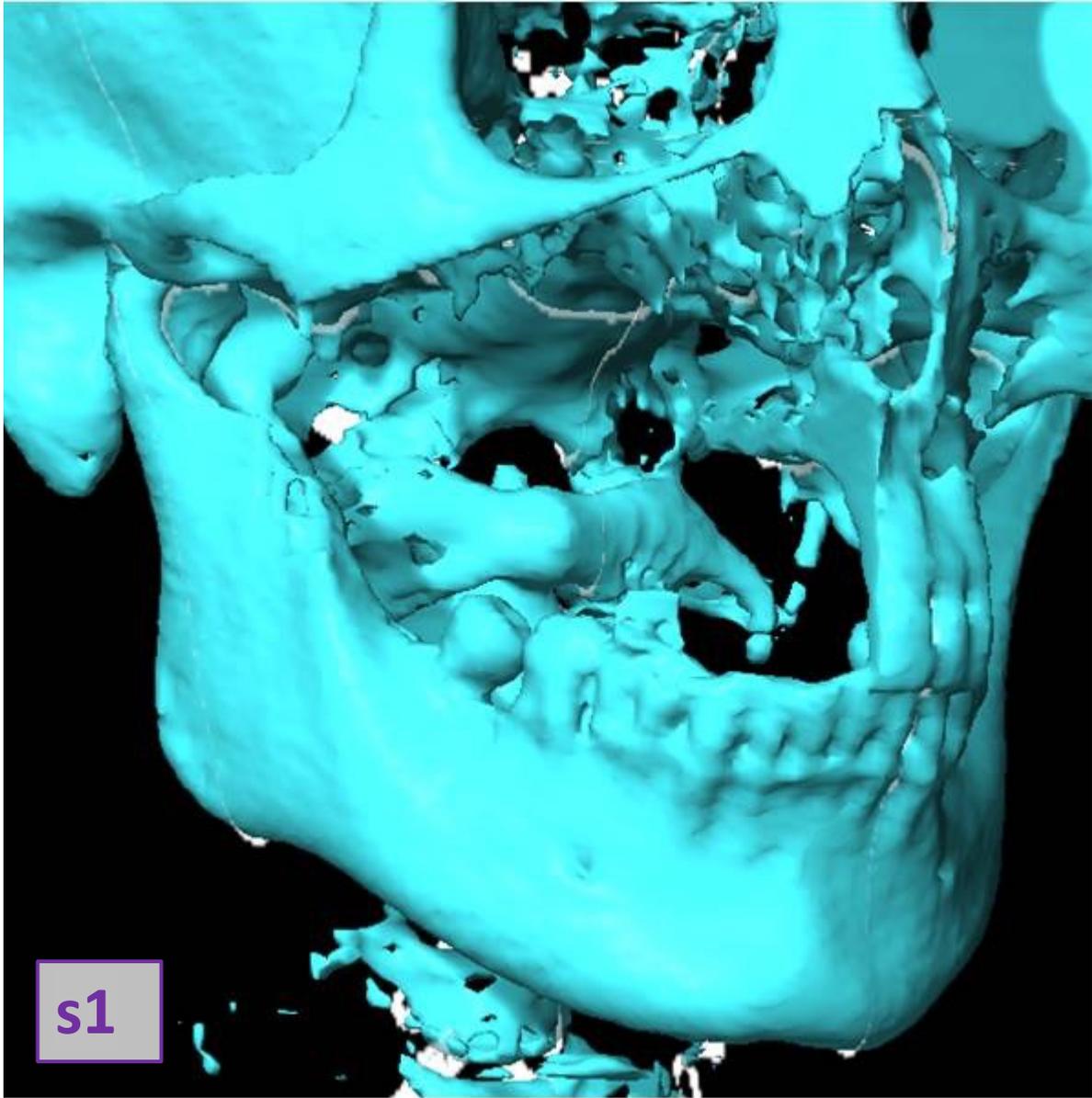


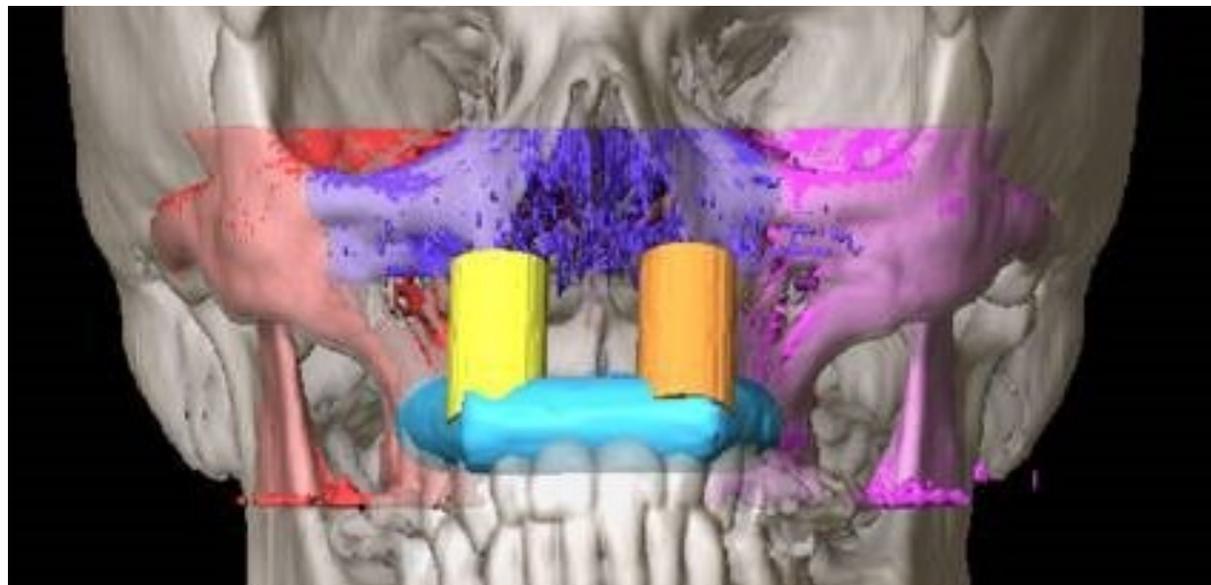
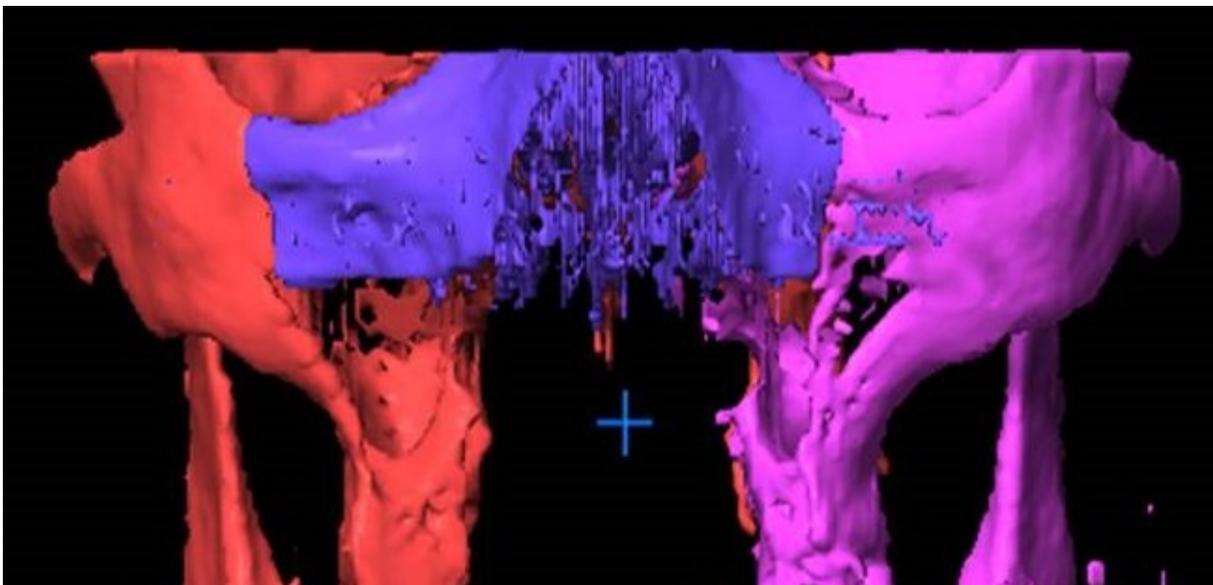
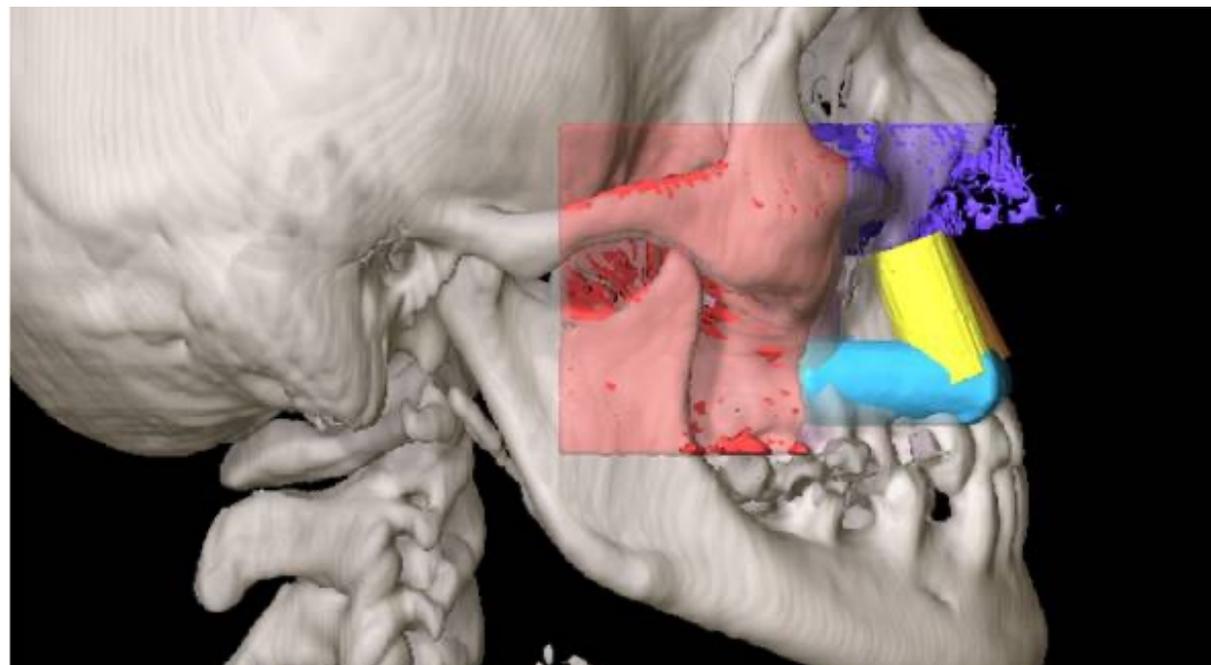
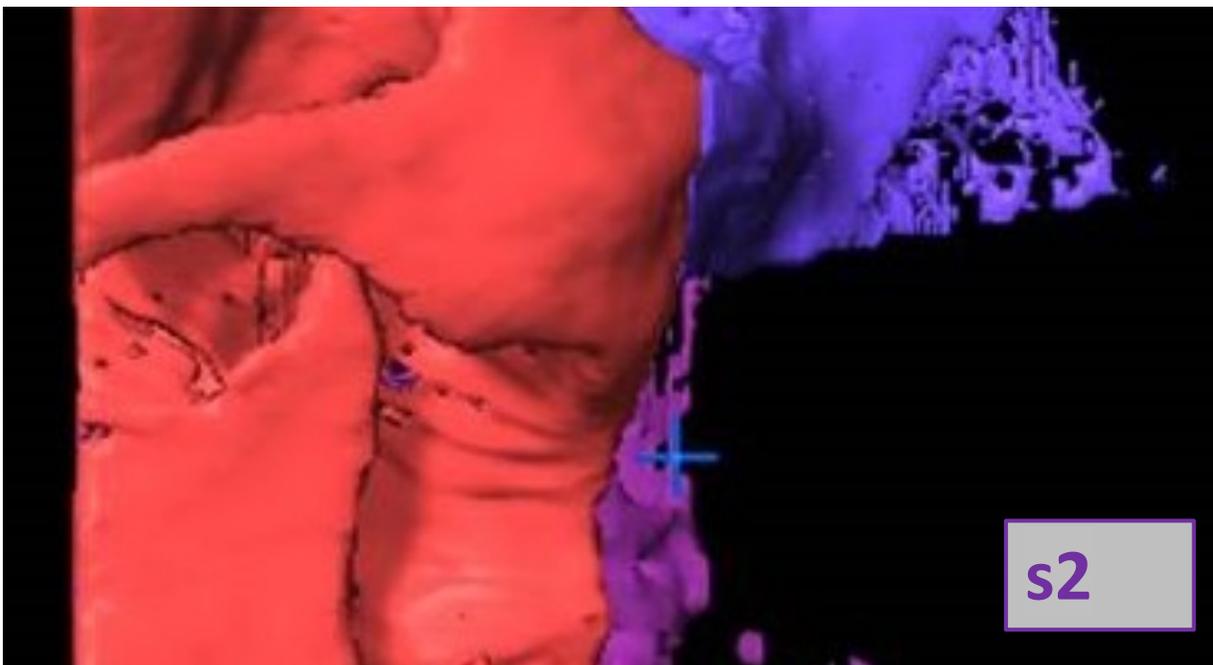
5b

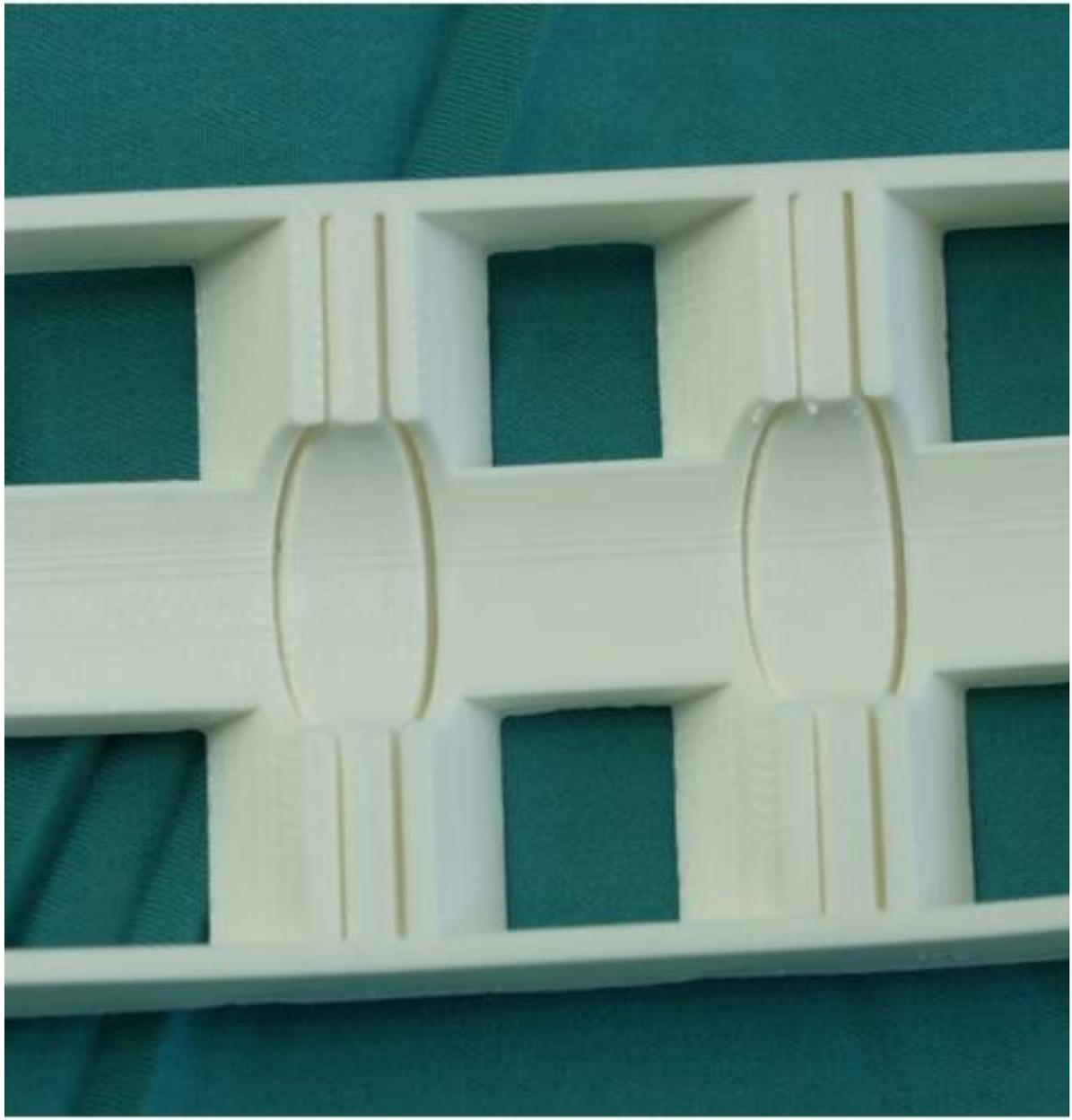
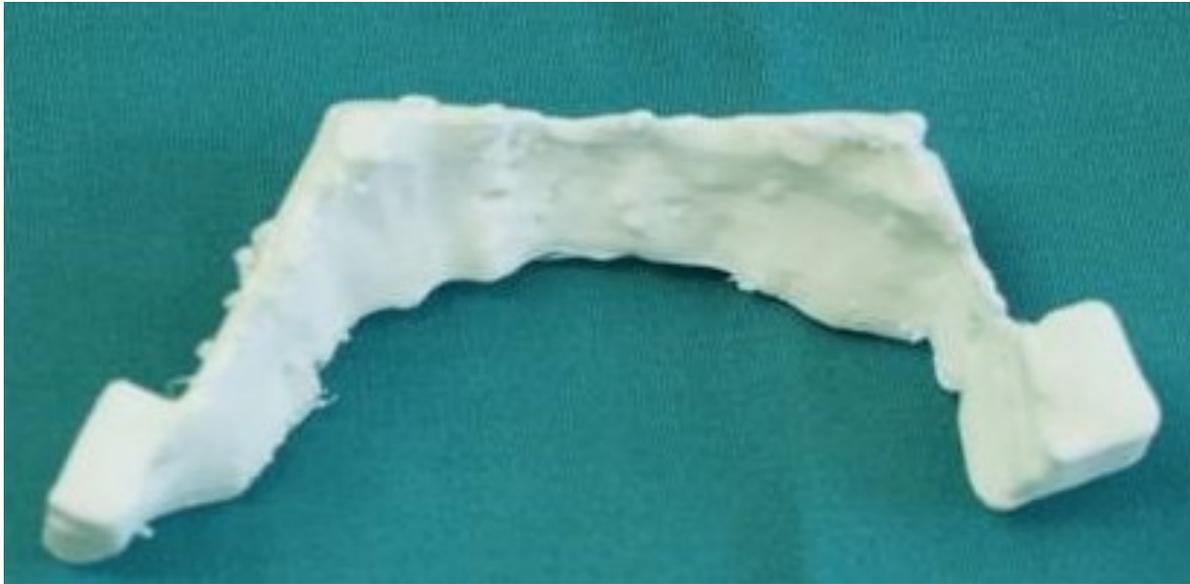


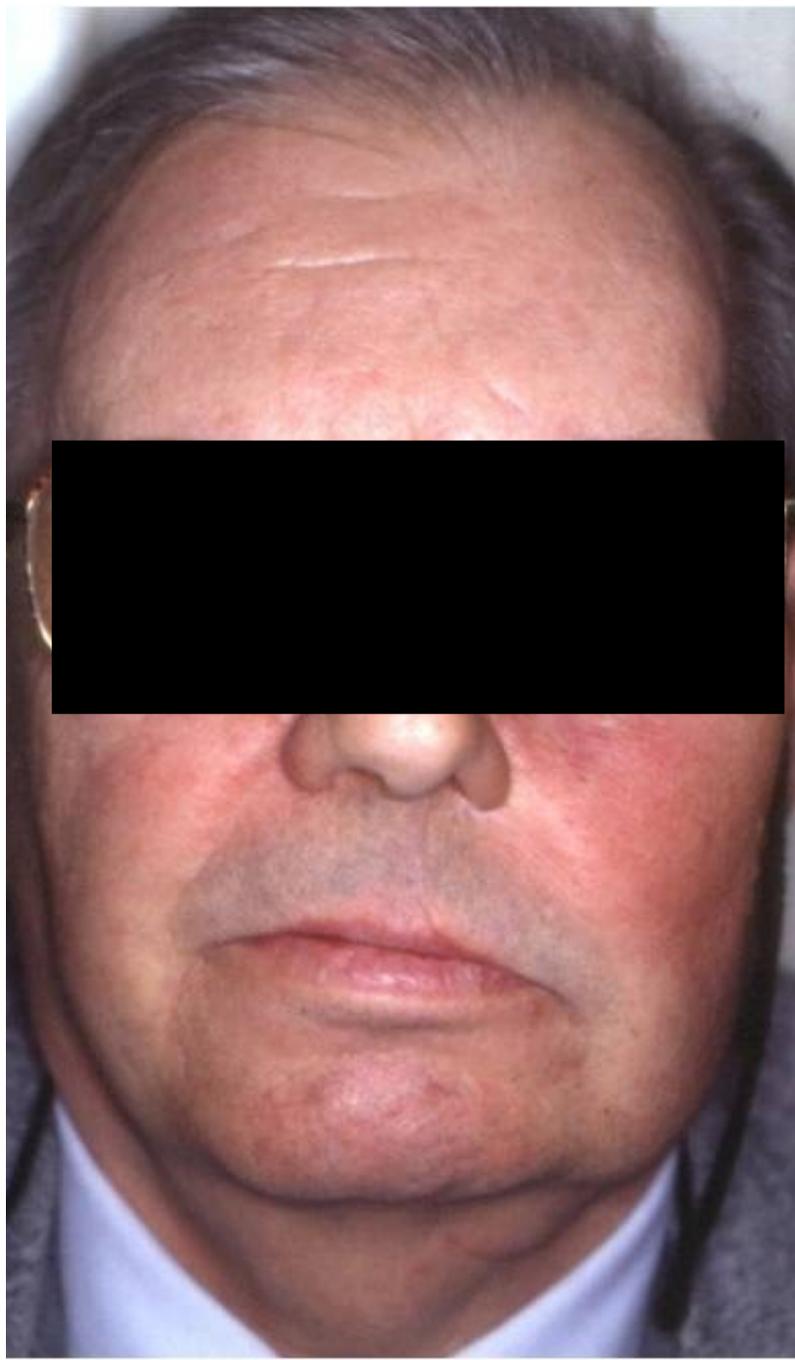
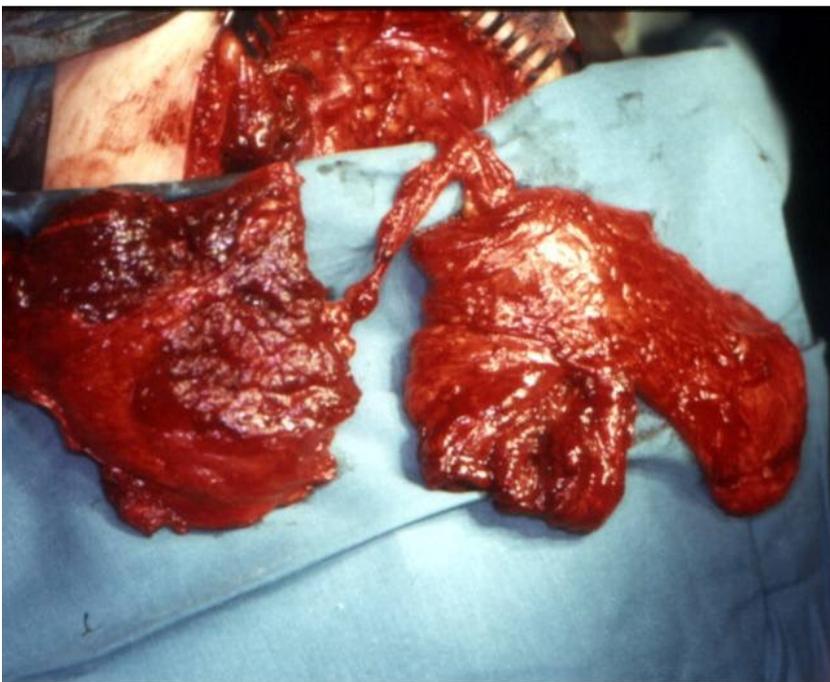
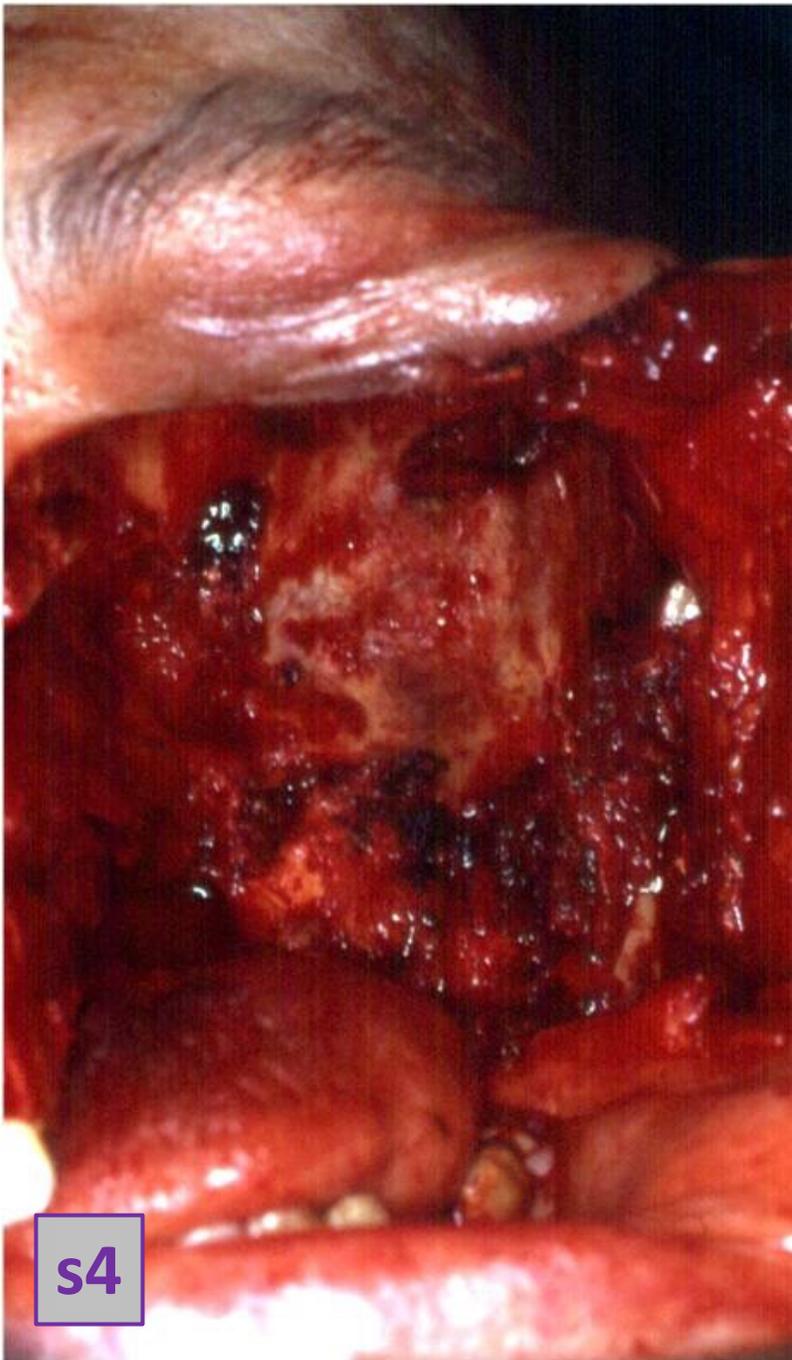
5d

Supplementary Images









s4

