

Figure 4.10. A) Frontal scalp flap elevated. The plane of dissection between the cutaneous flap and galea (containing the terminal branches of the STA) can be seen in a fresh cadaver dissection. B) Surgical plane to individualize the galea from the scalp. If great attention is paid, small black tips can be seen on the scalp surface which are in fact the roots of the individual hair bulbs. This is the proper plane-seeing the bulbs but never incising them.



Figure 4.11. Proximal dissection over the common trunk of the STA should be carried out carefully to avoid injury and to search for each of the main branches.



Figure 4.12. Each branch is dissected free from its cutaneous attachments and traced up to midline.

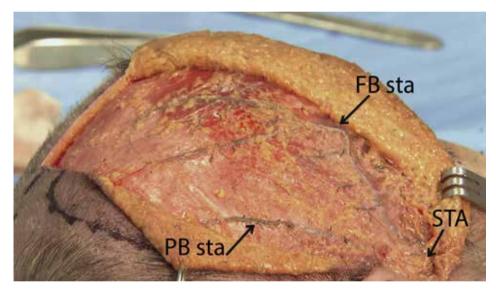


Figure 4.13. Anterior and posterior cutaneous scalp flaps have been elevated and folded anteriorly and posteriorly to expose both the frontal and parietal branches. Contrary to classical descriptions, in this specimen the frontal branch is larger than the parietal branch.



Figure 4.14. Galea flap outlined including both branches of the STA. It is incised deep to the periostium and the superficial temporal fascia without including them in the flap.

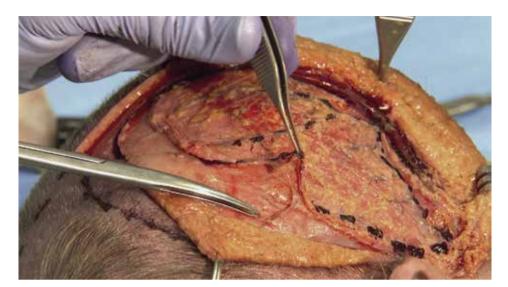


Figure 4.15. Once the flap has been completely incised it is then detached from the periostium distally and the temporalis fascia proximally. Elevation is easy and quick compared with dissection from the scalp. However, temporal vessels included into the galea should not be injured. Small perforator branches vascularizing the cranial vault are divided, while major branches are divided and ligated.

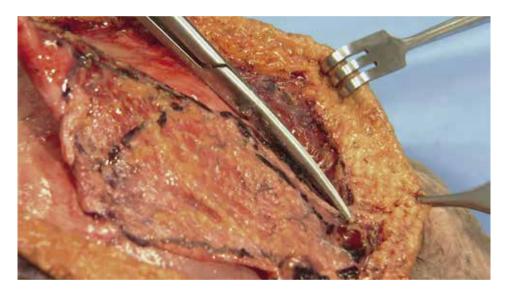


Figure 4.16. Once the flap has been completely incised it is then detached from the periostium distally and the temporalis fascia proximally. Elevation is easy and quick compared with dissection from the scalp. However, temporal vessels included into the galea should not be injured. Small perforator branches vascularizing the cranial vault are divided, while major branches are divided and ligated.

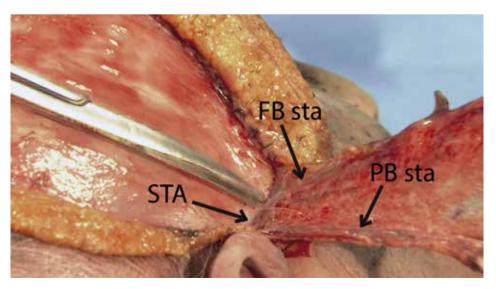


Figure 4.17. Galea flap already elevated showing from its deep surface the STA and its two main branches, the Frontal branch (FB sta) and Parietal branch (PB sta). In case a longer pedicle is needed, STA and galea can be traced over the zygomatic arch.