PREOPERATIVE DIAGNOSIS:, Left supraorbital deep complex facial laceration measuring 6x2 cm.,POSTOPERATIVE DIAGNOSIS: , Left supraorbital deep complex facial laceration measuring 6x2 cm.,PROCEDURE PERFORMED: , Plastic closure of deep complex facial laceration measuring 6x2 cm.,ANESTHESIA: , Local anesthesia with 1% lidocaine with 1:100,000 epinephrine, total of 2 cc were used.,SPECIMENS: , None.,FINDINGS: , Deep complex left forehead laceration.,HISTORY: , The patient is a 23-year-old male who was intoxicated and hit with an unknown object to his forehead. The patient subjectively had loss of consciousness on the scene and minimal bleeding from the left supraorbital laceration site. He was brought to the Emergency Room, where a CAT scan of the head and facial bumps was performed, which were negative.,Prior to performing surgery informed consent was obtained from the patient who was well aware of the risks, benefits, alternatives and complications of the surgery to include infection, bleeding, cosmetic deformity, significant scarring, need for possible scar revision. The patient was allowed to ask all questions he wanted, and they were answered in a language he could understand. He wished to pursue surgery and signed the informed consent.,PROCEDURE: , The patient was placed in the supine position. The wound was copiously irrigated with normal saline on irrigating tip. After one liter of irrigation, the wound was prepped and draped in the usual sterile fashion. The incision was then localized with a solution of 1% lidocaine with 1:100,000 epinephrine, a total of less

than 2 cc was used. We then reapproximated the wound in double-layered fashion with deep sutures of #5-0 Vicryl, two interrupted sutures were used, and then the skin was closed with interrupted sutures of #5-0 nylon. The wound came together very nicely. Tincture of Benzoin was placed. Steri-Strips were placed over the top and a small amount of bacitracin was placed over the Steri-Strips. The patient tolerated the procedure well with no complications.