

An orbital block was done. An infraorbital block was also performed with a 25 gauge needle. A skin muscle flap was elevated by sharp dissection down to the orbital rim area. The herniated periorbital fat was removed by opening the orbital septum with sharp dissection using a 15 blade, teasing the periorbital fat out, cross clamping the fat and removing the fat with a scissor over the clamp. The clamp was cauterized with needle cautery and then the clamp was scaped with a 15 blade.,The remaining fat was left to fall back into the orbit. This was done in three compartments, the middle, medial and lateral compartments. Fat was removed from all three compartments. Then with the mouth open and the eyes in upward gaze, the lower skin muscle flap was redraped on the eyelids and tailored to fit exactly into place and then sutured into place with multiple 6-0 silk sutures.,Bleeding was minimal. The patient tolerated the procedure well.