



236

FIG. 44.—Cranioplasty by transplant from tibia (Kling). (1) Site of defect, showing line of incision. (2) Scalp flaps dissected up, held with self-retaining retractor, and excess of scar tissue overlying dura excised. Incision is made through pericranium $\frac{1}{4}$ inch from margin of defect. (3) The dura is freed from the bony margin with elevator. (4) Bony margin is freshened and beveled with an osteotome, while the dura is protected with a hollowed brain retractor. (5) Pattern cut from muslin to fit the defect, the site of which is now ready to receive the transplant. (6) Removal of periosteal-bone transplant from tibia (should be internal surface). (7) Bony surface after removal of transplant. (8) Suture of transplant into position, periosteum to pericranium. (9) Suture line; the two small rubber drainage tubes, which are removed after 48 hours.