Principles and Practice of Clinical Research





The use of simulation with non-living model to enhance medical students' learning in a surgical training course

CP. Camargo^{1*}, EF. Barbosa², FC. Maluf³, Morais-Besteiro¹, R. Gemperli¹

Received June 14, 2020; accepted August 28, 2020; published September 21, 2020.

APPENDICES

Appendix A

CUTANEOUS FLAP QUIZ

- 1. Cutaneous flaps are routinely used in plastic surgery. Considering the transfer method, choose the alternative that englobes flap transfer classification:
 - a) free flap, island flap, transposition
 - b) rotation, advancement, interpolation
 - c) transposition, w-flap, island flap
 - d) V-Y, advancement, rotation

Correct answer- b

Starkman SJ, Williams CT, Sherris DA. Flap Basics I: Rotation and Transposition Flaps. Facial Plast Surg Clin North Am. 2017;25(3):313-321. doi:10.1016/j.fsc.2017.03.004

- 2. Considering the bilobed flap. All the alternatives are correct except:
 - a) it is a rotation and transposition flap
 - b) it is used to minimize tension area
 - c) it is indicated for lesion > 3cm
 - d) it was originally described to reconstruct nasal defects

¹Division of Plastic Surgery, Hospital das Clínicas, Laboratory of Microsurgery and Plastic Surgery (LIM-04), Medical School, Universidade de São Paulo (USP), Brazil.

²Laboratory of Microsurgery and Plastic Surgery (LIM-04), Medical School, USP, Sao Paulo-SP, Brazil.

³School of medicine Centro Universitário de Saúde ABC, Brazil.

^{*}Corresponding author: Cristina Pires Camargo, MD PhD. Email: consultoriodracristina@gmail.com

Correct answer c- bilobed flap was designed to reconstruct small lesions (1.5 to 2cm)
Starkman SJ, Williams CT, Sherris DA. Flap Basics I: Rotation and Transposition Flaps. Facial Plast Surg Clin North Am. 2017;25(3):313-321. doi:10.1016/j.fsc.2017.03.004

- 3. Interpolated flaps are designed to:
 - a) paramedian forehead, melolabial flap are examples of interpolated flaps
 - b) to reconstruct skin defects with continuous donor tissue
 - c) requires a second surgery to pedicle division around 3-4 weeks
 - d) interpolated flap offers an excellent skin color match

Correct answer- b interpolated flaps are designed to reconstruct defects with a skin bridge between the donor and recipient site

Reckley LK, Peck JJ, Roofe SB. Flap Basics III: Interpolated Flaps. Facial Plast Surg Clin North Am. 2017;25(3):337-346. doi:10.1016/j.fsc.2017.03.006

- 4. Flap elevation will decrease blood flow. To minimize this effect there are several delay strategies. Choose the best surgical delay alternative
 - a) vasodilator injection before the surgery
 - b) bipedicle flap, elevating only a portion of a planned single pedicle flap
 - c) flap elevation and no suture
 - d) negative pressure dressing over the flap

Correct answer - b

Lucas JB. The Physiology and Biomechanics of Skin Flaps. Facial Plastic Surgery Clinics of North America. 2017 Aug;25(3):303-311. DOI: 10.1016/j.fsc.2017.03.003.

- 5. Borrow-s triangle can be done in the following situations
 - a) to improve the incision quality
 - b) in a rotation flap to minimize tension
 - c) advancement flap
 - d) A and C are correct
 - e) B and C are correct

Correct answer- e

Shew M, Kriet JD, Humphrey CD. Flap Basics II: Advancement Flaps. Facial Plast Surg Clin North Am. 2017;25(3):323-335. doi:10.1016/j.fsc.2017.03.005

Krishnan R, Garman M, Nunez-Gussman J, Orengo I. Advancement flaps: a basic theme with many variations. Dermatol Surg. 2005;31(8 Pt 2):986-994. doi:10.1111/j.1524-4725.2005.31823

6. Cite two examples of skin flap based on blood supply random-

axial-

Krishnan R, Garman M, Nunez-Gussman J, Orengo I. Advancement flaps: a basic theme with many variations. Dermatol Surg. 2005;31(8 Pt 2):986-994. doi:10.1111/j.1524-4725.2005.31823

- 7. Skin flap planning demands the following factors
 - a) vector of tension wound
 - b) anatomical subunits
 - c) relaxed skin tension lines
 - d) All the above
 - e) B and C

Correct answer- d

Shew M, Kriet JD, Humphrey CD. Flap Basics II: Advancement Flaps. Facial Plast Surg Clin North Am. 2017;25(3):323-335. doi:10.1016/j.fsc.2017.03.005

- 8. The "Plastic reconstruction ladder" is characterized by the following order
 - a) primary suture, partial thickness skin graft, total skin graft, local flaps
 - b) primary suture, second intention, skin graft, tissue expansion
 - c) second intention, skin graft, local flap, free flap
 - d) primary suture, second intention closure, skin graft, local flap, distant flaps, free flaps
 - e) second intention, skin graft, local flap, free flaps

Correct answer- d

Janis JE, Kwon RK, Attinger CE. The new reconstructive ladder: modifications to the traditional model. Plast Reconstr Surg. 2011;127 Suppl 1:205S-212S. doi:10.1097/PRS.0b013e318201271c

Hallock GG, Morris SF. Skin grafts and local flaps. Plast Reconstr Surg. 2011;127(1):5e-22e. doi:10.1097/PRS.0b013e3181fad46c

- 9. Connect the most appropriate skin flap to the facial unit
 - a- bilobed flap
 - b paramedian forehead flap
 - c- advancement flap
 - I nasal tip
 - II lateral nasal structure

III- malar facial subunit

Correct answer a-II, b - I, c -III

10. Rhomboid flap requires

- a) short axis- secondary axis with 60º
- b) Limberg design
- c) Two-axis with 60° pivotal angle
- d) A and B are correct
- e) B and C are correct

Correct answer - c

Starkman SJ, Williams CT, Sherris DA. Flap Basics I: Rotation and Transposition Flaps. Facial Plast Surg Clin North Am. 2017;25(3):313-321. doi:10.1016/j.fsc.2017.03.004