



PERSPECTIVE

Surgical Incision and its Classification in Surgery

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Overview

A surgical incision is a cut made through the skin and soft tissue to aid an operation or treatment in surgery. Multiple incisions are frequently possible during an operation. To promote safe and timely operating conditions, surgical incisions are created as small and unobtrusive as feasible. Surgical incisions are chosen based on the estimated level of exposure required for the procedure. Several incisions are frequent in each part of the body.

Size of the incision

A large incision is used to do surgery in a classic “open” incision. An open incision is usually at least three inches long, but it can be considerably longer depending on the procedure and the severity of the condition. This gives the surgeon adequate room to work and see the region being worked on, as well as introduce the surgical instruments needed to complete the surgery. During surgery, an incision may be widened to allow the surgeon greater room to work. When a patient has gallbladder surgery, for example, a minor incision may be done at first. If the surgeon detects that the gallbladder is very large and full of gallstones, the incision may be lengthened to allow for the removal of the gallbladder.

Classification of incision

Surgical incisions are planned based on the expected extent of exposure needed for the specific operation planned. Within each region of the body, several incisions are common.

Neck and head: Wilde’s incision is post-aural incision was called after Sir William Wilde, an ENT surgeon in Dublin who originally described it at the turn of the nineteenth century. Oscar Wilde’s death was attributed to meningitis caused by an ear infection, according to his doctors. He’d lately undergone a surgery that some thought

was a mastoidectomy.

Chest: The primary incision utilised for cardiac operations is the median sternotomy. It starts at the sternal notch and finishes at the xiphoid process. The sternum is separated, and the incision is kept open with a Finochietto retractor. A division of the ribs from the side of the chest is known as a thoracotomy.

The midline incision: This also known as a midline laparotomy, is the most frequent laparotomy incision. It is a vertical incision that follows the linea alba. In diagnostic laparotomy, midline incisions are preferred because they offer access to the majority of the abdominal cavity. From the xiphoid process to the umbilicus, the upper midline incision is frequently made. The pubic symphysis limits a conventional lower midline incision superiorly and the umbilicus limits it inferiorly.

In some cases, especially in trauma surgery, a single incision reaching from the xiphoid process to the pubic symphysis is used. A smooth curvature is usually formed around the umbilicus. The lower transverse incision made in the lower section of the uterus below the umbilicus and just above the pubic symphysis is known as the Pfannenstiel incision, Kerr incision, or Pfannenstiel-Kerr incision. It’s often utilised in Caesarean sections and for benign illness abdominal hysterectomy. The skin and subcutaneous tissue are incised transversally in the typical Pfannenstiel incision, but the linea alba is opened vertically.

Chevron incision: This incision is performed below the rib cage on the abdomen. The cut begins below the mid-axillary line on the right side of the abdomen, below the ribs, and runs all the way across the abdomen to the opposite mid-axillary line, allowing access to the liver across the entire width of the belly. The incision usually measures between 24 and 30 inches in length.