Preface

Trauma of the Head and Neck

In the current age of dynamic and expedited innovations, we, as oral and maxillofacial surgeons, must always strive to be at the forefront of new evidence-based technologies and advances. Craniofacial trauma, although one of the oldest areas of our specialty, is an ever-evolving one where new techniques for diagnosis and treatment continually arise. Over the last 30 years, our specialty has witnessed the diagnostic transition from plain skull films to panoramic radiography, computed tomographic (CT) scans, and now, cone-beam CT, allowing for far greater diagnostic accuracy. We have also seen the evolution of change from traditional treatments, such as closed reduction for the management of most facial fractures, to the current techniques of rigid internal fixation as first described by initial pioneers of the field, such as Warnekros, Lambotte, and later by Champy and Luhr. Even the plates, implants, and screws we use undergo constant upgrading to improve their ease of use and biocompatibility. As technological advances accelerate and touch every aspect of our lives, our diagnostic and surgical techniques and standards need to continuously evolve as well. Our goal in this issue of the Atlas of the Oral and Maxillofacial Surgery Clinics of North America is to present different trauma topics and to expose new or updated diagnostic aids, treatment methods, and procedures. It is hoped that it will also serve as a useful resource tool for residents and clinicians in their treatment of oral and maxillofacial trauma patients. The articles were chosen to include a multitude of topics, including management and diagnosis of the myriad traumatic injuries of the head and neck that oral and maxillofacial surgeons encounter.

We would like to thank all the surgeons who contributed to this Atlas of the Oral and Maxillofacial Surgery Clinics of North America and continue to contribute to the advancement of our field. We would also like to thank our fellow faculty and residents, who constantly demand that we provide the most advanced and best care to our trauma patients. And, of course, thanks to our families, friends, and mentors. Without their continued unconditional support, we would not be where we are today.

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