

RESULTS: 375 women completed the pre-operative surveys (BCS=244, M=39, BR=92). Procedure choice, laterality, race, marital status, employment, prior breast cancer, neoadjuvant chemotherapy, or history of radiation or chemotherapy did not impact PROs. Breast satisfaction decreased with higher BMI (est=-0.367, p=0.045) and stage 2 disease (est=-11.011 (vs. stage 0), p=0.008). Lower psychosocial score was associated with younger age (est=0.271, p=0.002), higher BMI (est=-0.367, p=0.014), and income <35k (est=0.172 (vs. 35k+), p=0.016). Similarly, lower physical well-being of the chest was associated with younger age (est=0.207, p=0.011), higher BMI (est=-0.285, p=0.039), and income <35k (est=0.218 (vs. 35k+, p=0.039). Sexual well-being decreased with higher BMI (est=-0.545, p=0.004) and income <35k (est=0.135 (vs. 35k+), p=0.016).

CONCLUSION: While factors such as age, BMI, and stage of disease are difficult to change prior to surgery, patients with lower income may need special interventions to assist them through the treatment process.

P61. WITHDRAWN.

P62. VISUAL PERCEPTIONS OF HEMIFACIAL MICROSOMIA RECONSTRUCTION: A PROSPECTIVE STUDY WITH EYE TRACKING TECHNOLOGY AND LINEAR MIXED EFFECTS MODEL ANALYSIS

Dillan F. Villavisanis, BA¹, Clifford I. Workman, PhD², Zachary D. Zapatero, BS¹, Giap H. Vu, MD¹, Jessica D. Blum, MSc¹, Liana Cheung, MBBS¹, Daniel Y. Cho, MD, PhD¹, Jordan W. Swanson, MD, MSc¹, Scott P. Bartlett, MD¹, Anjan Chatterjee, MD², Jesse A. Taylor, MD¹

¹Children's Hospital of Philadelphia, Philadelphia, PA, USA, ²Perelman School of Medicine at the University of Pennsylvania, Philadelphia, PA, USA.

PURPOSE: Facial areas attracting visual attention in lateralizing craniofacial pathologies such as hemifacial microsomia (HFM) are poorly understood but are ideal for studying gaze patterns. This study aims to determine lay person visual attention of pre- and post- jaw reconstruction HFM patients using eye-tracking technology.

METHODS: Sixty-eight images of patients with pre- and post-jaw reconstruction were used in this study. Four discrete areas of interest (AOIs) were defined on the anomalous side as forehead/orbit (FO), cheek/ear (CE), nose/lip (NL), and mandible/chin (MC). The TobiiPro Nano eye-tracking system registered visual fixations, and linear mixed effect models (RStudio) compared visual fixations pre- and post-surgery.

RESULTS: 23,215 visual fixations were captured over 60 trials from 30 participants within defined AOIs. Analysis revealed significantly decreased postoperative visual fixations on MC [447 (55.4%) pre-reconstruction, 359 (44.6%) post reconstruction; $\beta=-0.220$, SE=0.071, $z=-3.084$, p=0.002] and CE [1380 (52.3%) pre-reconstruction, 1260 (47.7%) post-reconstruction; $\beta=-0.090$, SE=0.040, $z=-2.22$, p=0.026]. Analysis revealed significantly increased postoperative visual fixations in the FO [5855 (49.3%) pre-reconstruction, 6032 (50.7%) post-reconstruction; $\beta=0.066$, SE=0.021, $z=3.096$, p=0.002].

CONCLUSION: Following surgery to improve jaw form and function in HFM, laypersons demonstrated significantly less visual attention to CE and MC regions and increased visual attention to the FO region. These findings suggest postoperative improvement towards aesthetic normalcy may reduce visual attention to previously anomalous anatomy.

P63. IMPLEMENTATION OF AN AMBULATORY CLEFT LIP REPAIR PROTOCOL

Jenn J. Park, BS, Ricardo Rodriguez Colon, BS, Bachar F. Chaya, MD, Danielle H. Rochlin, MD, Pradip R. Shetye, DDS, MDS, David A. Staffenberg, MD, Roberto L. Flores, MD

NYU Langone Health, New York, NY, USA.

PURPOSE: Cleft lip is the most common congenital condition affecting the face. Consistent with recent focus on reducing healthcare costs, there is growing interest in ambulatory cleft lip repair. Retrospective reviews have reported comparable outcomes between inpatient and outpatient cleft lip repair, but only based on pooled data without protocol-driven care. We report surgical outcomes following implementation of an ambulatory cleft lip repair protocol.

METHODS: We performed a single-institution retrospective study of patients undergoing primary unilateral cleft