

**Supplementary Table S2.** Questionnaire used to assess the patient’s aesthetic appearance.

PATIENT AESTHETIC EVALUATION. Each question must be rated using a Likert-like scale ranging from 0 to 4	NO IMPROVEMENT (0)	25% IMPROVEMENT (1)	50% IMPROVEMENT (2)	75% IMPROVEMENT (3)	100% IMPROVEMENT (4)
1. LIP EVALUATION					
1.1. Lip symmetry					
1.2. Shape of the philtrum					
1.3. Visibility of the scar					
1.4. Symmetry of the dry/wet line					
1.5. Lip fullness					
2. NOSE EVALUATION					
2.1. Symmetry of the nose tip					
2.2. Symmetry of the nostrils					