

Nasal septum		
Middle nasal meatus	Pathological findings?	<div>Not specified</div> <div>No</div> <div>Yes</div>
Ethmoidal infundibulum		
Maxillary sinus	Keros classification?	<div>Not specified</div> <div>Type I</div> <div>Type II</div> <div>Type III</div>
Ethmoid sinus	Risk of anterior skull base injury?	<div>Not specified</div> <div>No</div> <div>Yes</div>
Sphenoid sinus		
Frontal sinus	Dissection of anterior skull base indicated?	<div>Not specified</div> <div>No</div> <div>Yes</div>
Mass	Dehiscence of anterior skull base?	<div>Not specified</div> <div>No</div> <div>Yes</div>
	Dehiscence of lamina papyracea?	<div>Not specified</div> <div>No</div> <div>Yes</div>

**Structured Operation Planning:**  
Nasal septum: No relevant obstacle. No septoplasty needed.  
Middle nasal meatus: No relevant obstacle. No concha bullosa.  
Ethmoidal infundibulum: Bilateral infundibulotomy indicated.  
Maxillary sinus: Signs of bilateral chronic sinusitis. Bilateral maxillary sinusotomy type I with removal of polypoid mucosa indicated.  
Ethmoidal sinus: Signs of bilateral chronic sinusitis. Bilateral ethmoidectomy with dissection of the anterior skull base indicated. Keros Type III with high risk of perforation. No dehiscence of the anterior skull base or the lamina papyracea.  
Sphenoid sinus: Signs of bilateral chronic sinusitis. Bilateral sphenoidal sinusotomy type I indicated.  
Frontal sinus: Bilaterally existent. Signs of bilateral chronic sinusitis. Bilateral frontal sinusotomy type I indicated.  
Masses: No masses apparent