



# A “Beret-Like” Giant Congenital Melanocytic Nevus of The Scalp with Nodal Nevus on a Girl: A Surgical Challenge

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A 7-year-old girl presented with a giant congenital melanocytic nevus measuring 11 × 13 cm on the scalp. The lesion was nodular, elevated, and exhibited a convoluted surface architecture, producing a characteristic beret-like appearance (Figures 1a, b). Mild scaling was observed within the surface folds, without evidence of ulceration or hemorrhage. Marked postauricular lymphadenopathy was also noted.

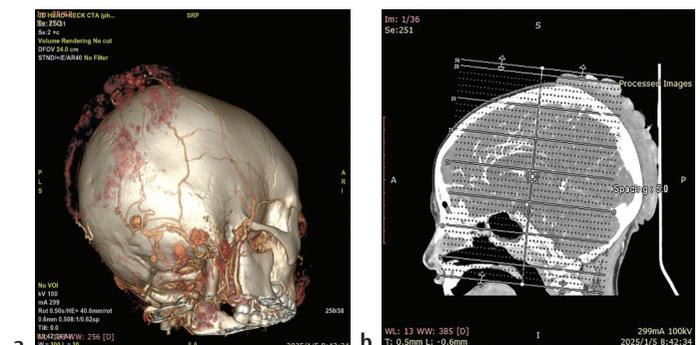
Preoperative computed tomography angiography was performed to delineate the vascular supply and exclude calvarial involvement, thereby facilitating surgical planning (Figures 2a, b). The lesion was completely excised, and the resulting defect was reconstructed using a full-thickness skin graft (Figure 3a). This approach enabled single-

stage reconstruction with reliable graft take and immediate wound coverage in this pediatric patient, while avoiding the prolonged treatment course and multiple procedures associated with tissue expansion or multistage flap reconstruction. The graft healed uneventfully, with no postoperative complications.

Histopathological examination confirmed the diagnosis of congenital melanocytic nevus and demonstrated a benign nodal nevus in the postauricular lymph node, a well-recognized diagnostic pitfall that may mimic metastatic melanoma. At 10-month follow-up, the graft remained fully viable, with an excellent cosmetic outcome and no evidence of local recurrence (Figure 3b).



**FIG. 1.** (a) A giant “beret-like” congenital melanocytic nevus involving the vertex and occipital scalp in a 7-year-old girl. (b) Clinical examination demonstrating postauricular lymphadenopathy.



**FIG. 2.** (a) Computed tomography angiography (CTA) showing the vascular supply of the giant nevus. (b) Sagittal computed tomography image demonstrating no involvement of the underlying calvarium.



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**FIG. 3.** (a) One-week postoperative view showing good perfusion of the full-thickness skin graft. (b) Postoperative follow-up demonstrating good graft survival and a satisfactory cosmetic outcome.

**Informed Consent:** Written informed consent was obtained from the patient's father.

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