
**Purpose:** This study was conducted to evaluate the effects of routine protocols in immediate mandibular reconstruction.

**Patients ans Methods:** A total of 242 patients who underwent immediate mandibular reconstruction were reviewed retrospectively. The therapeutic evaluation was performed according to outcomes of clinical and radiographic examination. The evaluated contents included facial symmetry analysis was also carried out to compare therapeutic differences between different methods for mandibular reconstruction. SPSS 10.0 for Windows was used for statistical analysis.

**Results:** The follow-up showed satisfactory long-term outcome in 203 patients. Statistical analysis revealed no significant difference in restoration of facial contour among several groups (x² 0.05(15)=21.93., P= 109 > 05). Ten cases involded serious postoperative complications, including local infection, exposure of rigid fixation plate, and serious pain.

**Conclusions:** Our findings indicate that autogenous bone graft is the best for reconstruction of small mandibular defects. Frozen autogenous lesional mandible plus autogenous iliac or rib graft is recommended for reconstruction of large defects in the mandibule. Strict patient selection, careful surgical procedure and appropriate preoperative nursing care are key factors in successful transplatation.