

Method of providing anatomical access in the popliteal fossa for topographic and anatomical study of its contents. A three-sided cutaneous-subcutaneous flap is formed, which is dissected down to the aponeurotic layer. The aponeurotic layer is incised longitudinally in the middle, avoiding damage to the small saphenous vein, which flows into the popliteal vein, after which the edges of the dissected aponeurotic layer are retracted to the sides with atraumatic retractors, providing the necessary access to the main structures of the popliteal fossa.