Initiation of a comprehensive CEA care pathway was associated with lower ICU admission rates and a significant reduction in hospital charges without compromising patient outcomes. Multidisciplinary care pathways can successfully improve value-based patient care.

**Destination Flow Diagram**

- **PACU**
  - Stable?
  - SBP ≥ 90 or ≤ 160
  - DBP ≥ 60 or ≤ 90
  - HR ≥ 60 or ≤ 110
  - RR ≥ 10 or ≤ 24
  - SaO2 ≥ 93% **
  - UOP ≥ 1mL/kg/hr
  - Neuro at baseline
  - *or at patient baseline
  - Yes
  - IMC
    - Q2h VS & neuro x4, then Q4h
    - I&O Q4h
  - No
    - High risk patient
    - Surgeon Assessment
    - ICU

- **IMC**
  - Q2h VS & neuro x4, then Q4h
  - I&O Q4h
  - Yes
  - Cost Savings per day ~ $1631
  - Increase in IMC admissions by 71%

**Multi-Disciplinary Team**

- Physician Assistants
- Clinician Nurse Specialists
- Surgeons
- Stroke Center
- Nurse Managers

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SBP, systolic blood pressure; DBP, diastolic blood pressure; HR, heart rate; RR, respiratory rate; SaO2, oxygen saturation; UOP, urine output; ICU, intensive care unit; IMC, intermediate care unit.