Since the early 1990s, hospitals have been utilizing diagnosis-specific, multidisciplinary critical pathways to meet the demands of managed care regarding decreased lengths of stay, decreased cost of hospitalization, quality outcomes, and patient satisfaction. A critical or clinical pathway is a resource utilization tool developed along a specified timeline. These pathways define the sequence of standard, multidisciplinary interventions required for a specific diagnosis or surgical procedure (Chen et al., 2000). Critical pathways allow for tracking of prescribed events, variances, and trends. They also serve as quality improvement indicators, highlighting differences between expected and actual outcomes (Cohen, Stock, Andersen, & Everts, 1997). If an outcome is not met at the expected time, that variance must be documented and addressed. Critical pathways for head and neck surgery typically are developed on the expectations and outcomes of specific surgical procedures, such as composite resection, glossectomy, or total laryngectomy.

**Patient Pathways**

A patient pathway is a written patient-education tool that maps or charts the expected course of treatment from the pretreatment phase through the recovery phase. Patient pathways are similar in format to critical pathways but differ in their purpose and goals. The overall purpose of patient pathways is to provide comprehensive, consistent information along with written accountability for patient education. Finally, pathways assist patients in navigating through the healthcare system by encouraging a better understanding of the surgical plan of care.

The primary goal of patient pathways is to facilitate patient education. Patient education is a process designed to effect changes in knowledge, attitudes, and behavior to promote appropriate coping. This process fosters positive outcomes, such as decreased anxiety and improved patient satisfaction. Patients with cancer often seek information to gain control of an overwhelming situation (Treacy & Mayer, 2000). Researchers have found that those who receive information experience a decrease in anxiety and improved tolerance for treatments compared with those who receive no information (Mayer, 1994).

Pathways are a component of the teaching process, serving as an adjunct to preoperative teaching. Pathways reinforce explanations, provide consistent information, and serve as a resource for future reference (Palmerini & Jasovsky, 1998).

A second goal is to promote patient participation in the treatment plan. Patient education influences patient behavior in terms of adherence with self-care routines and the ability to manage symptoms. One study suggested that a direct correlation exists between adequate comprehension of information and compliance with the treatment plan (Doak, Doak, Friedell, & Meade, 1998). Because knowledge is an essential component of living with cancer, preparing for survivorship, and achieving optimal quality of life, pathways help to optimize patient outcomes.

**Pathway Development**

In 1997, oncology services at the Greater Baltimore Medical Center (GBMC) underwent an in-depth redesign process resulting in what is known now as the Navigator Program. Navigator is a free program for patients with cancer, providing guidance through diagnosis, treatment, and recovery. When a cancer diagnosis is confirmed, patients are referred to a diagnosis-specific, multidisciplinary team including oncology nurses, oncology social workers, speech-language pathologists, and therapists. Central to the Navigator concept is the delivery of...