Extracranial cervical dissections are now believed to be responsible for most ischemic strokes in patients younger than 45 years of age (Beletsky et al, 2003). The R Adams Cowley Shock Trauma Center (STC) is a level 1 trauma center which routinely screens for and treats blunt cerebrovascular arterial injuries (BCVIs), in collaboration with the University Of Maryland Medical Center. A retrospective chart review of grade 1-3 BCVIs during the interval July 2004- December 2007, at this level 1 trauma center was conducted; the overall lost to follow-up rate was 39%. After IRB approval, a 3 month convenience sample of all post-BCVI patients, was evaluated by an existing multidisciplinary team of Interventional Neuroradiologists, Vascular Neurologists and a Vascular Neurology Nurse Practitioner, who met weekly. An evidenced-based algorithm (Sacco et al., 2006) for the prevention of strokes related to arterial dissections was designed and reviewed by the multidisciplinary team for use in medical decision-making. Pilot outcomes of interest included: A documented, single plan of follow-up care for each patient, patient education on follow-up related to recognition of early warning signs of stroke and rates of patients lost to follow-up. The pilot concluded with 6 enrolled patients (one expired before discharge from respiratory failure). Each patient (5 total) was reviewed by the multidisciplinary team and had a documented plan for follow-up care, one patient was lost to follow up. The collaborative, multidisciplinary team review of patients is a feasible, reliable, informed, venue for the individual review of patients diagnosed with BCVIs at this level 1, urban medical center. Additional recommendations for adaptation and improvement are provided.