



## **POLST**

### **(Provider Orders for Life-Sustaining Treatment)**

### **Frequently Asked Questions for Providers**

#### **1. What is POLST (Provider Orders for Life-Sustaining Treatment)**

POLST is a clinical process designed to facilitate communication between health care professionals and patients with serious illness or frailty (or their authorized decision-maker) for whom their medical provider wouldn't be surprised if they died within the next year.

#### **2. Why is the POLST form so important?**

The POLST form is a yellow document that translates a person's wishes regarding the level of aggressive medical treatment or care into a set of actionable medical orders to ensure that the person receives medical care that is consistent with their wishes. POLST forms provide a mechanism to ensure that these wishes will be transferred from one medical or residential care setting to another.

#### **3. What information is included on the POLST form?**

**Information documented on the POLST includes decisions regarding:**

- Cardiopulmonary resuscitation
- Use of intubation and mechanical ventilation
- Medically administered Fluids & Nutrition
- Antibiotics
- Comfort Care

#### **4. Who is responsible for POLST discussions?**

Ideally, trained POLST facilitators including medical providers, nurses and medical social workers will initiate discussions. However, the actual completed POLST forms must be reviewed and signed by a physician/APRN and the patient or their legal representative (DPOAH, Guardian).

#### **5. Where should the POLST form be kept to ensure that it is accessible when needed?**

The original yellow POLST form should stay with the patient whenever they transition from one medical or residential setting to another. It should be available whether they are in a hospital, at home, or in a long-term care facility, and stored in a location that can be easily accessible when needed. When transitioning from one medical setting to another, the POLST form should transition with the discharge paperwork. (Use the same procedure you use when a patient has a pink Portable DNR form).

#### **6. How Often Should POLST Forms be reviewed?**

- When a patient is admitted to a new medical or residential care facility
- If there is a significant change in the patient's health status or there is a new diagnosis
- If the patient's treatment preferences change

**7. Who are the key professionals that should be involved in the implementation of a successful POLST program?**

It is important to obtain leadership support and designated champions to ensure organization support and commitment for a POLST program. A multidisciplinary implementation team should be established to develop a workflow that includes policies and procedures to ensure a process for facility-wide education, communication, portability and quality assurance. Other stakeholders to consider include clinical department Directors/Managers, , Ethics Committees, Medical Directors, Quality Assurance and Practice Committees.

**8. What are key components to consider in implementing a successful POLST program?**

- Identification of Leadership Champions
- Multidisciplinary Implementation Team
- Training & Informational Resources
- Storage & Retrieval
- Workflow & Portability
- QI- to monitor a process that ensures patients are invited to participate, forms are correctly completed, and forms move with the patient from one care setting to another. Embed workflow & monitoring in current systems (e.g., admission/intake, etc.)

**9. Who should be included in facility-based education?**

It is important to provide education to both medical providers and staff, although education will vary based on whether it is staff that encounter a patient POLST form and /or staff that assist a patient in the POLST conversation and completion of a form.

**10. How does the POLST form relate to the DNR document?**

The pink P-DNR form should be attached, if DNR is indicated, to the yellow POLST form if the patient is leaving the facility. This will ensure that the patient's DNR order will be recognized if needed by emergency medical service providers.

**11. What if a change is made to the POLST form?**

A change made to the POLST form requires a new form to be completed. An "X" should be made through the original form, with "revised" written through it. All efforts should be made to communicate the changes to the appropriate PCP's or Specialists involved in the person's care. A process should be established within the facilities to ensure that revised POLST forms will replace old forms in both electronic and paper medical records.

Visit [www.healthynh.com](http://www.healthynh.com) (POLST video, form, brochure, model organization policy for POLST, resources, power point slides, National POLST website)

Send Comments or Questions to:

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