

# FREQUENTLY ASKED QUESTIONS FOR PROVIDERS

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## **What does 'POLST' stand for?**

POLST stands for Physician Orders for Life-Sustaining Treatment.

## **What is the POLST form?**

POLST is a medical order that helps give patients with chronic or serious illness more control over their care during serious illness. Produced on a distinctive bright pink form and signed by the doctor, nurse practitioner or physician assistant AND the patient or their decision-maker, POLST specifies the types of medical treatment that a patient wishes to receive towards the end of life. As a result, POLST can prevent unwanted or medically ineffective treatment, reduce patient and family suffering, and help ensure that patients' wishes are honored.

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

The decisions documented on the POLST form include whether to:

- Attempt cardiopulmonary resuscitation,
- Use high intensity treatments,
- Use intubation and mechanical ventilation, and
- Provide artificial nutrition.

## **Why was POLST developed?**

POLST was developed in response to seriously ill patients receiving medical treatments that were not consistent with their wishes. The goal of POLST is to provide a framework for healthcare professionals so they can provide the treatments patients DO want, and avoid those treatments that they DO NOT want.

## **Is POLST mandated by law?**

Filling out a POLST form is entirely voluntary. However, California law requires that the medical orders in a POLST be followed by healthcare professionals, and provides immunity from civil or criminal liability to those who comply in good faith with a patient's POLST requests. [Reference: AB 3000, Part 4, Section 7, Probate Code Section 4782.]

## **Who should have a POLST form?**

POLST is designed for seriously ill patients, those with chronic, progressive illness, or those who are medically frail, regardless of their age. A helpful tool for determining who would benefit from POLST is the question, "Would you be surprised if this patient died within the next year."

## **Does the POLST form replace traditional Advance Directives?**

The POLST form complements an Advance Directive and is not intended to replace that document. An Advance Directive is still necessary to appoint a legal healthcare decision-maker, and is recommended for all adults, regardless of their health status.

## **If someone has a POLST form and an Advance Directive that conflict, which takes precedence?**

If there is a conflict between the documents, the more recent document would be followed.

## **Who should discuss and complete the POLST form with patients?**

Having a conversation with a patient about care during serious illness and end-of-life issues is an important and necessary part of good medical care. The law allows anyone who is a healthcare provider\* to assist with the completion of a POLST form. In many cases, physicians, nurse practitioners or physician assistants will initiate conversations with their patients to understand their wishes and goals of care. Depending on the situation and setting, other trained staff members – such as nurses, social workers, or chaplains – may also play a role in starting the POLST conversation. However, physicians, NPs and PAs are responsible for confirming POLST choices are consistent with the patient's medical condition and preferences, and signing the POLST form.

\*The term "healthcare provider" is defined by law as "an individual licensed, certified, or otherwise authorized or permitted by the law of this state to provide health care in the ordinary course of business or practice of a profession." [Reference: Probate Code Section 4621.]

## **Can Nurse Practitioners and Physician Assistants sign the POLST form to create the medical order?**

As of January 1, 2016, the POLST form can be signed by a physician or a nurse practitioner or physician assistant, acting under the supervision of a physician and within their scope of practice. [Assembly Bill 637, Chaptered 2015]. Verbal orders are acceptable with follow-up signature by the physician, NP or PA in accordance with facility/community policy.

## **Can a POLST form be completed for patients who can no longer communicate their treatment wishes?**

Yes. A healthcare professional can complete the POLST form based on family members' understanding of their loved one's wishes. The appointed decision-maker can then sign the POLST form on behalf of their loved one.

## **What should be done with the form after it is completed and signed?**

The original POLST form, on bright pink paper, stays with the patient at all times. If the patient is transferred to another setting, the POLST form goes with them.

- In the acute care or long-term care setting, the form should be kept in the patient's medical record or file.
- At home, patients should be instructed to place the form in a visible location so it can be found easily by emergency medical personnel – usually on a table near the patient's bed, or on the refrigerator.

## **Can a patient's POLST form be changed?**

Yes, the POLST can be modified or revoked by a patient, verbally or in writing, at any time. Changes may also be made by a physician, or requested by a patient's decision-maker, based on new information or changes in the patient's condition. Any changes should comply with the patient's known wishes, unless the patient's wishes reflect medically ineffective health care or care contrary to generally accepted health care standards.

## **When should a patient's POLST form be reviewed?**

It is good clinical practice to review a patient's POLST form when any of the following occur:

- The patient is transferred from one medical or residential setting to another;
- There is a significant change in the person's health status, or there is a new diagnosis;
- The patient's treatment preferences change.

It is recommended to complete a 2016 POLST when a 1/1/2009 or 4/1/2011 POLST form is reviewed or modified.

## **What should happen to a voided POLST?**

A voided POLST should be documented by drawing a line through Sections A through D, writing "VOID" in large letters, and signing and dating the line. The voided document should be maintained in the patient's file.

## **How can I obtain copies of the POLST form to use with patients/clients?**

Healthcare providers may download the California POLST form at [www.caPOLST.org](http://www.caPOLST.org). In order to maintain continuity throughout California, the form should be copied or printed on 65# Ultra Pink card stock, available at most office supply stores. POLST forms may be purchased in bulk from Med-Pass at <http://med-pass.com>.

## **Are faxed copies and/or photocopies valid? Must pink paper be used?**

Faxed copies and photocopies are valid. Ultra Pink paper is preferred and used to distinguish the form from other forms in the patient's medical record; however, the form will be honored on any color paper.

## **Is the POLST form available in other languages?**

Many translations of the form are available to assist healthcare providers in explaining the form, including Armenian, Chinese, Farsi, Hmong, Japanese, Korean, Pashto, Russian, Spanish, Tagalog, Vietnamese and Braille. However, the English version of the POLST form must be completed and signed so that emergency medical personnel and healthcare providers can follow the orders. All translations, with instructions, are available at [www.caPOLST.org](http://www.caPOLST.org).

## **Where is POLST being used now?**

POLST was originally developed in Oregon. There are a number of states which have established POLST programs or are currently developing programs. For more information on the national POLST effort, including published research and a complete listing of states using POLST, visit [www.POLST.org](http://www.POLST.org).

## **When was POLST authorized in California?**

California State POLST Legislation (AB 3000 (Statutes 2008, Chapter 266)) went into effect on January 1, 2009.

## **Will a patient's POLST form be valid when traveling to another state?**

The California POLST form is valid in California. If patients are traveling outside California, it is a good idea for them to take both their Advance Directive and POLST form with them. Both documents, even if not legally binding, will help healthcare providers know and honor their wishes.

## **Which organizations support the use of the POLST form?**

California POLST is part of a national effort. For a complete listing of California organizations that support the use of POLST visit [www.POLST.org](http://www.POLST.org).

### **Who is leading the POLST initiative in California?**

The Coalition for Compassionate Care of California (CCCC) provides leadership and oversight for POLST outreach activities in California, with support from the California HealthCare Foundation.

### **Where can I get more training on POLST and how to talk to my patients about advance care planning?**

The Coalition for Compassionate Care offers webinars and training programs on POLST, advance care planning, ACP conversations and cultural diversity. Learn more at [www.CoalitionCCC.org](http://www.CoalitionCCC.org).

### **Is there additional clinical information about POLST?**

Yes, Frequently Asked Clinical Questions for Providers is available at [www.caPOLST.org](http://www.caPOLST.org).

### **How can I find out more about POLST?**

Visit the California POLST website at [www.caPOLST.org](http://www.caPOLST.org) for additional information and resources.