



ISSUE

Ensure patient treatment preferences are followed and respected

MMA Position

Legislation is needed to develop and implement a statewide registry for Provider Orders for Life-Sustaining Treatment (POLST) forms.

Background

A POLST form is a physician's order for a patient's end-of-life treatments. Its use ensures that patient decisions are followed, especially at the end of life. However, if caregivers cannot access a patient's POLST form, the physician orders may not be followed, and a patient's treatment preferences may be ignored.

Unlike an advance directive, the POLST form converts a patient's preferences for care into medical orders that are immediately actionable as the patient moves across care settings. This is the preferred practice for end-of-life care recommended by the Institute of Medicine.

Immediate access to end-of-life treatment information is especially important during medical emergencies. However, emergency responders often do not have access to copies of a patient's POLST form, which currently a patient has in a paper copy. While the POLST form is meant to travel with the patient between care settings, the paper copy can become damaged or misplaced, therefore losing the patient's treatment preferences.

A statewide POLST registry would make this information available to any qualified provider, anywhere in the state, at any time. It would provide a reliable verification system if the paper POLST form or electronic health record were unavailable. With round-the-clock electronic access to POLST information, providers would be able to follow a physician's orders and a patient's preferences, even at the most stressful moments.

The MMA recommends the development and implementation of a statewide POLST registry to ensure physician orders captured in POLST forms are followed and patient end-of-life treatment decisions are respected.

Talking Points

- POLST forms are not for all patients; they are meant for severely ill patients receiving end-of-life treatment. They are medical orders, not an advance directive, which explicitly outline the treatments a patient wants and does not want.
- When a provider authorizes a POLST form, the patient is given a paper copy. If a patient misplaces the form, or doesn't have it with them in an emergency, it's likely their end-of-life preferences will not be followed. With today's technology, patients should have their POLST form accessible without having a physical copy present.
- When emergency care providers arrive on a scene they may not know of a patient's POLST form unless the form is readily available. This can lead to liability issues for emergency providers.
- The POLST Minnesota program was established in 2008 by an interdisciplinary steering committee that included physicians, nurses, ethicists, and others. A standardized POLST form was developed in 2010. It is widely used and recognized by hospital systems, long-term care facilities, medical professionals, and emergency medical services throughout Minnesota today.