



Minnesota POLST and COVID 19

Our country and our state are in the midst of a health emergency created by the highly contagious and dangerous COVID-19 virus. This virus appears currently to be approximately 20 times as deadly as Influenza A. The patients that are most at risk are patients that are over 70 with chronic health problems. The patients who succumb to this virus die of respiratory failure. In an attempt to save the life of these patients, Intensivists and Emergency Physicians will intubate and employ mechanical ventilation for these patients unless the patient/family have previously decided they would not want this treatment used.

The POLST allows patients, through discussions with health professionals, to make informed decisions to say whether they do or not want aggressive medical interventions such as mechanical ventilation, ICU treatment, or CPR. Those patients that complete a POLST will have their wishes followed because the POLST is a signed provider order. The POLST is voluntary. However, if one does not have a POLST or a doctor's order to forgo aggressive medical treatment (DNR/DNI), then the patient will receive full aggressive treatment. If they are infected with COVID-19 and develop respiratory failure the doctors will intubate them and employ mechanical ventilation.

We encourage all patients who are appropriate for the POLST to have a discussion with their health care provider. These patients would include patients with serious chronic health problems and frail elderly, including nursing home residents. If the patient has cognitive decline/dementia and can no longer communicate their

wishes, then the discussion should take place with their health care agent or surrogate decision maker.

Given current social distancing that has been mandated by our Governor we would recommend that patients and families view the **POLST video** remotely. The POLST conversations can likewise be held remotely (health professionals, please see the “POLST how-to guide”). If a patient completes a POLST during the pandemic, and factors related to this health crisis may have influenced their decisions (e.g., ventilator shortages, reluctance to go to ER because of risk of exposure to the virus), then the POLST should be reviewed after the pandemic to verify that the decisions indicated on the POLST have not changed. If the decisions indicated on the POLST have changed, a new POLST should be completed.

For additional information on POLST and COVID 19 please go to our national POLST website: www.polst.org