Introduction
“We recommend that all of our patients with serious illness complete a POLST form so we can follow their wishes regarding the types of treatment they do and don’t want if they require emergency treatment. You may have a very clear idea about your wishes after watching the video or you may want to have further discussions with your doctor. Either is absolutely fine. Also, please stop me anytime you want to ask questions if there is anything that you don’t understand. OK?

“But it is very important that you understand that anyone that does not have a POLST will always receive all life sustaining treatments. That means that the Paramedics, EMTs, and Emergency Physicians – who are the first responders – have to provide all life sustaining treatment unless there is a physician or provider order to do otherwise.”

If You Don’t Have a POLST
“So let’s say that sometime in the future your heart stops and you have a natural death. If 911 is called the first responders will attempt CPR. If you survive and get to the hospital, you would very likely be placed on a mechanical breathing machine with a breathing tube in your throat.”

POLST vs. Advanced Directive
“You may think that if you have an advance directive, you don’t need a POLST, but an advance directive is not a signed provider order. So the first responders cannot obey it. The POLST is a signed provider order that tells the first responders what you do and don’t want. They will honor your POLST.”

Section A: CPR
“As you saw in the video, the first choice on the POLST concerns cardiac arrest. This means your heart has stopped beating and you have died a natural death. About one time out of twenty or 5% of the time we can reverse cardiac arrest with CPR. Looking at it the other way around: 19 out of 20 people will die even when CPR is attempted outside of the hospital. When someone is treated with CPR for cardiac arrest, they require emergency transfer to the hospital and use of a mechanical ventilator in the intensive care unit.

“Unfortunately, receiving CPR can cause fractured ribs and because of lack of blood supply to the brain a cardiac arrest often causes brain damage. However, the one out of twenty patients that do survive and are able to leave the hospital can usually care for themselves. But about half of them will have memory or mental health problems.

“Do you think you would want CPR attempted if your heart stopped or would you prefer to select the option to allow a natural death – meaning do not attempt resuscitation?”

Section B: Three Overall Treatment Options
“The second section of the POLST form deals with medical treatments. There are three levels of treatment: the first is Full Treatment. This choice means that you would like all medical treatments used to prolong your life. This would include treatments such as CPR, mechanical ventilation, kidney dialysis, intensive care, and major surgery. If you select CPR then you must select full treatment, because these treatments may be necessary after CPR.

“You can select DNR/Allow a Natural Death in the first section and Full Treatment in the second section. This would allow you to die a natural death if your heart stops – because there is a low chance of survival in this case. But it gives the option of having such treatments as Mechanical Ventilation in the Intensive Care Unit.

“Mechanical Ventilation is done when there is respiratory failure, which means that your body is not getting enough oxygen. This may happen with severe pneumonia or heart failure. People that are treated with mechanical ventilation in such circumstances have approximately a 50% chance or about one out of two chance of surviving.

“Some will make this choice but say that they don’t want to die on a ventilator. So they pick this choice but say: “I’ll try a ventilator for seven days, but after that if the doctors don’t think I’ll recover, I want to be taken off the ventilator so that I can have a more comfortable death.” This would mean they are using the ventilator as a bridge to recovery. But if it appears that they are not recovering from this critical illness, they want to be taken off the ventilator.

“The second option is Selective Treatment. This means that if you had a serious problem like pneumonia, you would like to go to the hospital and receive such treatments as intravenous fluids and antibiotics to cure the pneumonia. But you would prefer to avoid CPR or Intensive Care.”

“The third option is Comfort Care. This option is for people that really want their treatment focused on comfort and prefer to avoid the hospital. They would prefer to be treated at home and don’t want their life prolonged with medical treatment.

Section E: Nutrition/Hydration and Antibiotics
“On the next section of the POLST there are two sections. The first deals with artificially administered nutrition. This means nutrition – food and liquids – delivered by a tube into your stomach because...
you’ve lost the ability to swallow. This could be from a stroke and be temporary or it could be from diseases like dementia or Parkinson’s disease and be permanent. If you had a stroke you may choose to have a trial of a feeding tube to see if after a period of days or weeks your swallowing ability returned. We usually don’t recommend feeding tubes with dementia or Parkinson’s Disease because we don’t have evidence that it prolongs people’s lives or helps improve the quality of their lives. Would you be comfortable making a decision on tube feeding today?

“The next section of POLST deals with treatment of infection with antibiotics. We would always recommend treating an infection for comfort. The video gave a good example – the treatment of a bladder infection with antibiotics. Antibiotics also can be used to prolong life such as in the case of treating pneumonia. If someone had pneumonia and did not want antibiotics, we would use other treatments to keep them comfortable such as oxygen and medication to relieve shortness of breath. If someone wants antibiotics they may receive them by mouth or through an IV. IV antibiotics are usually given in the hospital. If you wanted to avoid going to the hospital you may want to receive antibiotics only by mouth. Would you like to make a decision about antibiotic treatment today?

“There are no right or wrong choices when you complete this form. The correct choices for you are the ones that are consistent with your wishes and your values.”

More Questions: Your Doctor

“I want to repeat that you do not have to make any choices today or ever for that matter. But the first responders are obligated to give you CPR and Full Treatment if we do not know what your wishes are. “You also can change your mind about your decisions, and we will complete a new POLST form. AND we absolutely want you to discuss any questions you have about your particular situation and health conditions with your doctor.

“Do you have any questions about the video or the POLST form?”