

# Introduction to the POLST (Physician's Order for Life Sustaining Treatment) in California

#### What is a POLST?

The Physician Orders for Life Sustaining Treatment, or POLST, is used in many states to try to help patients with serious illness communicate the kind of treatments they want and don't want. It is intended to help guide a conversation with the patient, their medical provider, and their family about medical treatment options towards the end of life. Since the POLST is a physician's order, and must be signed by a doctor, a copy of it should be kept in the person's medical record and it should follow the patient across care settings. The POLST does not replace an Advance Health Care Directive.

	Advance Health Care Directive	POLST
What does the form look like?	Standard premade forms exist or you can write your own.	Standard premade form printed on bright pink paper
Does it name someone else (a "health care agent") to make medical decisions on behalf of the patient?	Yes, if you can still make your own decisions, you can use this document to name someone to make medical decisions on your behalf when you can no longer do so.	No.
Does it provide instructions about the kind of care the patient would or would not want?	Sometimes. An Advance Health Care Directive can be used to appoint a health care agent or describe the patient's values and goals of care, or both.	Yes, the POLST has checkboxes that give you the option to choose full treatment, selective treatment, or comfort-focused treatment.
Who should complete this form?	Any adult who is at risk for losing the ability to make medical decisions for themselves.	Patients with a terminal illness who have a clear plan about the treatments they do and do not want as their condition worsens.

### How is a POLST Different From an Advance Health Care Directive?



Who must sign this form in order for it to be valid?	The patient as well as two witnesses or a notary public.	The patient (or legally authorized agent) and a doctor, nurse practitioner, or physician assistant.
Where to keep this form?	A copy of the Advance Health Care directive should be shared with the patient's doctor and the person they chose to be their health care agent as well as others involved in their care. A copy should be kept in the patient's medical record.	The pink form should be kept by the patient and should follow the patient across care settings (home, skilled nursing facility, hospital). A copy should be kept in the patient's medical record.
Who is required to follow the information in this form?	All healthcare providers, except for emergency medical technicians (EMTs) and paramedics, are required to follow this form.	All healthcare providers, <b>including</b> emergency medical technicians (EMTs) and paramedics, are required to follow this form.

### What are the Potential Benefits of a POLST?

The POLST is a way for seriously ill patients (and their health care agents) to document whether they would want any of the following treatments:

- Attempts at cardiopulmonary resuscitation or CPR
- Intravenous (IV) fluids or antibiotics
- Intubation or mechanical ventilation to assist with breathing
- Artificial nutrition through a feeding tube

This information could provide helpful guidance for treatment decisions as the patient's condition worsens. As a standard form that has been widely adopted, the POLST form is familiar to healthcare providers and may be more accessible to them than an Advance Health Care Directive. In some settings, providers may have more difficulty finding and interpreting treatment decisions documented in an Advance Health Care Directive. Families with a clear understanding of the patient's wishes may use the POLST as a tool to advocate for the patient.

#### What are Possible Challenges with the POLST?

• There is always a risk that patients and families may feel pressured to make treatment decisions that they do not feel prepared to make. It can be difficult to understand what the outcome of different treatments might be for the patient.



Sometimes doctors may not explain the patient's condition or the treatment options in a way that makes sense.

- It may not be appropriate to complete a POLST in the early stages of dementia since the course and progression of disease is unpredictable. By the time a person is in the advanced stages, they may not be able to communicate or make decisions about their treatment. Therefore, the POLST will most likely be completed by the person chosen to be the agent in the Advance Health Care Directive who will voice the wishes of the patient to the best of their ability.
- Although the POLST is intended to transfer easily across settings (emergency rooms, hospitals and long term care facilities) these settings might not automatically enforce the wishes expressed in the POLST. They may require a physician on their own staff to do an assessment and complete a new order. Even with a POLST, it is important for healthcare agents to understand the patient's goals of care and to be comfortable talking to doctors about them.

## Why You Should Talk to Your Doctor

We advise patients with dementia to have conversations with their health care team and their family about their goals of care and what makes life worth living for them. It is ideal to have these conversations early on so that everyone is comfortable knowing what the patient's wishes are. It may be helpful to think about the kinds of medical issues that may happen in the future and talk about how these issues could be managed. The treatment options described in the POLST can be used as part of these conversations.

For more information about common medical issues that occur in advanced dementia, please read, "Advanced Dementia: A Guide for Families."