

## Appropriate Use of the Oregon POLST Form

The Portable Orders for Life-Sustaining Treatment (POLST) Program was initiated in Oregon nearly 30 years ago to ensure patients’ preferences for end-of-life care are honored in a variety of settings, including care provided by emergency medical services personnel.<sup>1</sup> The program also supports patients, their families, and health care professionals in their efforts to discuss goals for the purpose of documenting and honoring these treatment preferences.<sup>2</sup>

POLST is widely used in Oregon; nearly half of all patients with advanced illness have their preferences recorded in the Oregon Registry at the time of their death.<sup>3</sup> While the state has done well in fulfilling patients’ wishes, the rising rate of POLST order submissions for “CPR/Full Treatment” has sparked concern.

According to national leaders in end-of-life care, including Dr. Susan Tolle, Chair of the Oregon POLST Coalition, overuse of the program in patients who are considered “too healthy” can potentially cause significant harm. This includes:

- Situations in which a patient later loses decision-making capacity and clinically deteriorates to a condition in which they would have desired only a comfort-oriented approach. In this instance, the prematurely-completed POLST may increase the decision-making burden on the patient’s family.
- Situations in which an insurance company incorrectly believes a patient has a limited life expectancy and denies life insurance due to the presence of a POLST order in the patient’s medical record.

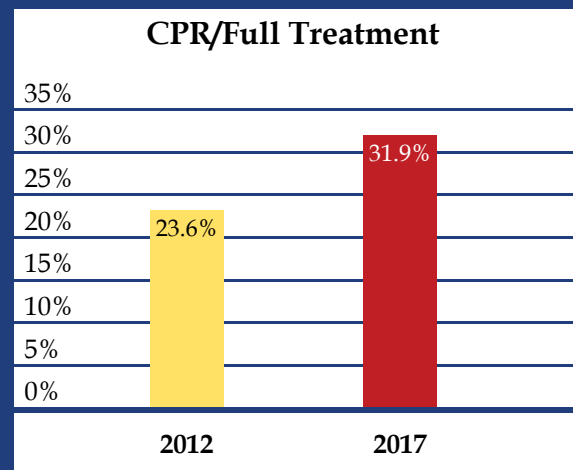
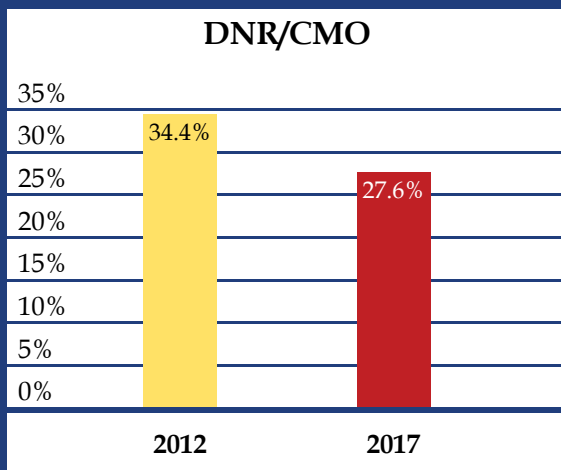
POLST forms should only be offered to patients with advanced illness or frailty who wish to turn their preferences into actionable medical orders.<sup>4</sup> For example, a 65-year-old patient does not need to complete a POLST form as part of a routine Medicare Wellness Exam. Instead, that patient should fill out an advanced directive, which is appropriate for every adult. Additionally, not every patient in a nursing home or other residential care facility is there due to advanced illness or frailty.<sup>5</sup> Many otherwise healthy patients require short term skilled nursing care for rehabilitation after injury or illness; while facilities may require a code status order upon admission, these patients should not be required to have a POLST form.

Oregon is recognized across the country as a leader in end-of-life care. Continuing efforts to improve the responsible use of POLST will help promote and innovate care approaches nationwide and ensure that a patient’s desired level of medical intervention is provided.

For more information about the use of POLST in Oregon, visit [oregonpolst.org](http://oregonpolst.org). +

1. Oregon POLST Program website: Oregon POLST History
2. An Oregon licensed MD, DO, ND, PA or NP may sign POLST orders
3. Changes Over Time in the Oregon Physician Orders for Life-Sustaining Treatment Registry: A Study of Two Decedent Cohorts
4. POLST Guidebook for Health Care Professionals
5. 2019 Oregon DHS Alerts to: Nursing Facility Providers, Assisted Living, Residential Care Facilities, Memory Care Facilities, APD Adult Foster Home Providers

### Rising rates of CPR/Full Treatment orders submitted to Registry 2012 vs. 2017



Schmidt Resuscitation 85 (2014) 480-485  
Tolle JAGS January 2019

[www.oregonpolst.org](http://www.oregonpolst.org)