

Oregon POLST Coalition Recommendation for Hospital Transfer Forms

POLST Challenges

1. The POLST form is being used as a code status document for many patients being transferred to SNF, ICF, AFC and ALF including those for short term rehabilitation.
2. Completing POLST orders is always voluntary; a facility requirement violates this imperative.
3. POLST orders need to be done in the context of a thoughtful goals of care conversation.
4. These conversations can be superficial and over interpreted as meaningful years later.
5. POLST may be appropriate for those who are seriously ill and continue to want full treatment.

The Oregon POLST Coalition recommends integrating a standard code status section on hospital transfer forms instead of using POLST orders routinely. This is particularly an issue for patients going for short term rehab. These transfer forms would replace the POLST forms for patients who are not POLST appropriate and/or have not had a thoughtful goals of care conversation.

In order to meet the needs across the continuum of care, we focused on two issues:

- Facilities need to record code status
- Healthy patients should not be required to complete POLST forms to address the facility's need for code status documentation; instead, obtain the patient's medical orders indicating code status

The Coalition recommends the following language be included on hospital transfer forms:

Code Status in the event of Cardio Pulmonary Arrest

- Full Code (No POLST needed)
- Do Not Attempt Resuscitation (Complete POLST form as applicable, **NOT** required)