



Practitioner Orders for  
Life-Sustaining Treatment

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## Frequently Asked Questions

This document refers to the *Illinois Department of Public Health Uniform Practitioner Orders for Life-Sustaining Treatment (POLST) Form*.

To save space, these FAQs will use the shorter name POLST.

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*This general guidance from the POLST Taskforce does not constitute legal or medical advice.*

### **1. What should I call the new form?**

As of January, 2016 the form is to be called the **Department of Public Health Uniform Practitioner Orders For Life-Sustaining Treatment (POLST) form, or IDPH POLST form.**

### **2. What does POLST stand for?**

In Illinois, POLST stands for "Practitioner Orders for Life-Sustaining Treatment." While POLST is the most common term used across the United States, POLST orders in other states may also be known by similar names: MOLST (Medical Orders for Life Sustaining Treatment), MOST (Medical Orders on Scope of Treatment), POST (Physician Orders on Scope of Treatment), or by a state name such as LaPOST (Louisiana Physician Orders for Scope of Treatment).

### **3. What is the POLST Paradigm?**

POLST is a voluntary process that:

- Allows people at end of life to select the treatments they do, and do not, want
- Encourages informed discussion between the patient, loved ones and clinicians about patient's medical condition, complications, and the nature of emergency treatments for those complications
- Is designed to improve the quality of care people receive at the end of life by turning patient goals and preferences into medical orders
- Promotes care coordination by creating a single set of medical orders that follow the patient across care settings

### **4. How may the Illinois POLST form be obtained?**

Forms may be obtained from your healthcare provider, or downloaded from the IDPH's website: <http://www.idph.state.il.us/public/books/dnrform.pdf>, or at [www.polstil.org](http://www.polstil.org).

### **5. Who should have a POLST form?**

The POLST form is designed to ensure that seriously ill or frail patients can choose the treatments they want or do not want and that their wishes are documented and honored. To determine whether a POLST form should be considered, clinicians should ask themselves, "Would I be surprised if this person died in the next year?" If the answer is "No, I would not be surprised", then a POLST conversation and form are appropriate.

### **6. Is the POLST form available in other languages?**

At this time, the POLST form is available in Spanish. Because the form requires immediate reaction by first responders, it is encouraged to complete the form in English, even if the Spanish version is used for discussion. The Spanish version of the form can be downloaded from the IDPH website: [www.idph.state.il.us/public/books/dnrform\\_sp.pdf](http://www.idph.state.il.us/public/books/dnrform_sp.pdf) or at [www.polsti.org](http://www.polsti.org).

### **7. Are previous IDPH DNR forms still valid?**

Yes, properly executed prior versions of the form are still valid. Prior versions may be entitled "IDPH Uniform DNR Advance Directive", "IDPH Uniform DNR Advance Directive/POLST", or "IDPH DNR". However, the current version of the form provides individuals with the most

appropriate choices and is most in keeping with national POLST standards. Persons with a previous version of the form may want to consult with their healthcare practitioner to see if they should update the form to the new version.

#### **8. Does the POLST form replace a Power of Attorney or Living Will?**

No. The POLST form complements other Advance Directives and is not intended as a replacement. An Advance Directive is still necessary to appoint a legal healthcare decision maker and is recommended for all adults, regardless of their health status.

#### **9. Which practitioners are authorized to sign the POLST form?**

The following practitioners are authorized to sign the POLST medical orders: attending physician, advanced practice nurse, physician assistant, licensed resident after completion of one year in a program.

#### **10. Are healthcare providers required to honor a POLST form?**

Yes, the IDPH form is intended to be honored across all healthcare settings. Licensed hospitals, licensed long-term care facilities such as nursing homes, and licensed emergency medical services personnel must honor the IDPH Uniform POLST document, or a copy of that document.

#### **11. What are the minimum requirements for a valid POLST form?**

In order to be recognized as a valid order, the POLST form at a minimum must include:

- Patient name
- Resuscitation orders (section A)
- Signatures of patient or legal representative, witness, and authorized practitioner
- Date that the practitioner signs the orders (effective date)

#### **12. Who can witness the POLST form?**

One individual, 18 years of age or older, must witness the signature of the patient or his/her legal representative's consent of the POLST form. A witness may include a family member, friend or healthcare worker. The witness cannot be the healthcare practitioner signing the medical order.

#### **13. What should be done with the form after it is completed and signed?**

The original POLST form **stays with the patient at all times**. If the patient is transferred to another setting, the original POLST form goes with the patient.

- *In the acute care or long term care settings*, the original form should be kept in the patient's medical record or other private but easily accessible location (some LTC facilities place it in an envelope affixed to the bathroom wall so it can be accessed in an emergency), and copies should be made or scanned into the medical record.
- *At home*, persons should be instructed to place the original form in a visible location so it can be found easily by emergency medical personnel – usually on a table near the person's

bed or in a brightly colored envelope on the refrigerator. Copies may be kept for record-keeping.

***14. Can a healthcare provider (hospital, nursing home, hospice, etc.) require completion of a POLST form for all patients?***

No. The POLST form is completely voluntary and should be completed only after a discussion of choices between a patient (or his/her legal decision-maker) and a healthcare practitioner. Some facilities have a policy requiring every patient document code status upon admission. While the POLST form – section A – may be used as a standard documentation tool to record the patient’s resuscitation wishes, the patient cannot be required to execute the form as a medical order.

***15. Can a copy of the POLST form, rather than the original accompany a transferring patient?***

The original document should remain with the patient at all times, even during transfers. However, copies of a valid form are acceptable.

***16. If a patient with a POLST and another advance directive is being transferred, does the advance directive also need to be sent along with the patient?***

Yes, it is important that the treating facility have all available information including the POLST and advance directive.

***17. Does a DNR order imply that a patient does not want treatment?***

No, a DNR order is only a decision about resuscitation for cardiac arrest and does not relate to any other treatment. An informed patient may feel the risks of CPR outweigh the possible benefits and may request a DNR order. However, based on the person’s goals for care, s/he may wish to receive further treatment in emergency situations *other than* cardiac arrest.

***18. Can a POLST form be completed following discussion with someone other than the patient?***

Ideally, providers want to capture the patient’s known wishes by speaking directly to the patient. When this is not possible, the POLST form can be completed by the individual entrusted to make the patient’s medical decisions such as the agent with Power of Attorney for Health Care or Surrogate Decision-Maker (which includes guardians, parents of a minor, and other decision-makers as defined by the Illinois Healthcare Surrogate Act hierarchy).

***19. How and when does one review and update a POLST Form?***

The POLST form should be reviewed with the patient’s healthcare practitioner and care team if (1) the patient is transferred from one care setting or care level to another, (2) there is a substantial change in patient health status, or (3) the patient's treatment preferences change.

***20. If a patient isn’t ready to complete all sections of the form, what do you do?***

For the form to be valid, section A is required. Cross out other sections and mark “No decisions made”. If left blank, boxes could be filled in later, effectively creating a medical order that the

practitioner is unaware of or may not agree with. This makes it clear that the patient did not address the subjects in the other sections – but decisions can be made at a later date by creating a new form.

**21. Can a patient revoke a POLST?**

Yes. Should a patient wish to revoke a POLST, "VOID" should be written on the front side of the form. A new form can then be completed which reflects the patient's current preferences and shared.

**22. Does the POLST form expire?**

No. However, it is recommended that a POLST form be reviewed frequently and especially when there is a change in medical condition, transfer to a different level of care setting, or a change in preferences of the patient.

**23. Is it an Advance Directive or a Medical Order?**

While the POLST form is on the official list of statutory advance directives in Illinois, it differs from other Illinois Advance Directives in that, in addition to being a statement of patient **wishes** for treatment, it is a set of **actionable medical orders** once signed by an authorized practitioner. When healthcare providers are presented with a valid signed form, the **orders must be followed**.

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