

---

---

## Frequently Asked Questions

This document refers to the *Illinois Department of Public Health Uniform Do-Not-Resuscitate Advance Directive/Physician Orders for Life-Sustaining Treatment Form*.  
To save space, these FAQs will use the shorter name POLST.

- 1. What should I call the new form?***
- 2. What does POLST stand for?***
- 3. What is the POLST Program?***
- 4. Where is POLST being used now?***
- 5. How may the new IDPH Uniform DNR Advance Directive/POLST form be obtained?***
  
- 6. Is the POLST form available in other languages?***
- 7. Are previous IDPH DNR forms still valid?***
- 8. Does the POLST form replace a Power of Attorney or Living Will?***
- 9. Is it an Advance Directive or a Medical Order?***
- 10. Are health care providers required to honor a DNR order completed on the IDPH Uniform DNR Advance Directive form?***
  
- 11. What should be done with the form after it is completed and signed?***
- 12. Can a copy of the POLST form, rather than the original, accompany a transferring patient?***
- 13. 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 POLST?***
- 14. For whom is a POLST form appropriate?***
- 15. Does a DNR order imply that a patient does not want treatment?***
  
- 16. How does the POLST program ensure individuals are not harmed by POLST?***
- 17. Can a POLST form be completed following a discussion with someone other than the patient?***
- 18. How and when does one review and update a POLST Form?***
- 19. Can a patient revoke a POLST?***
- 20. Does the POLST form expire?***

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

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

The form will continue to be called the **Department of Public Health Uniform Do Not Resuscitate Advance Directive**. Legislation that went into effect on January 2012 states “The form shall meet the minimum requirements to nationally be considered a physician orders for life-sustaining treatment form, or POLST, and may be referred to as the IDPH of Public Health Uniform DNR Advance Directive.” Because **the form may also be considered a POLST form**, and the word POLST is much shorter than Department of Public Health Uniform DNR Advance Directive, many people use the terms interchangeably.

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

In Illinois, POLST stands for "Physician 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 Program?***

POLST is a voluntary process that:

- 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;
- Consists of physician orders that are based on a patient's medical condition and his/her treatment choices as established in communication between the patient or the legal medical decision-maker and a health care professional;

### ***4. Where is POLST being used now?***

POLST was originally developed in Oregon. There are a number of states that have established POLST programs or are currently developing programs. For more information on the national POLST paradigm, including published research and a complete listing of states using POLST, visit [www.POLST.org](http://www.POLST.org)

### ***5. How may the new IDPH Uniform DNR Advance Directives be obtained?***

Forms may be obtained from your healthcare provider, or downloaded from the IDPH’s website: [www.idph.state.il.us/public/books/advin.htm](http://www.idph.state.il.us/public/books/advin.htm)

### ***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 would be wise 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)

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

Yes, properly executed prior versions of the IDPH Uniform DNR Advance Directive are still valid. However, the new IDPH form has been expanded to provide individuals with more choices and

is intended to qualify as a Physician Order for Life Sustaining Treatment (POLST) document. Persons with a previous version of the IDPH DNR form may want to consult with their physician 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. Is it an Advance Directive or a Medical Order?**

A DNR order completed on the IDPH Uniform DNR Advance Directive contains an advance directive (directions for a future state of health) made by an individual (or legal representative), and also contains a physician's order that requires a physician's signature. When healthcare providers are presented with the valid physician's order on this form, the order must be followed.

**10. Are health care providers required to honor a DNR order completed on the IDPH Uniform DNR Advance Directive 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 DNR Advance Directive document, or a copy of that document.

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

The original POLST form, on pink paper, **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 to maintain.
- *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.

**12. 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, all copies of a valid form are also valid.

**13. 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.

***14. For whom is a POLST form appropriate?***

Use of the POLST form is recommended for persons who have advanced illness and/or frail elderly, those who might die in the next year, or anyone of advanced age with a strong desire to further define their preferences of care in their present state of health. To determine whether a POLST form should be encouraged, 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 form is appropriate. Unless it is the patient's preference, use of the POLST form is not appropriate for persons with stable medical or functionality problems who have many years of life expectancy.

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

No, a DNR order is only a decision about CPR 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.

***16. How does the POLST program ensure individuals are not harmed by POLST?***

The POLST is specifically designed to assure that an individual's treatment choices for end-of-life care are respected whether the choices are full or limited treatment or comfort measures only. The orders on the form are based on a patient's medical condition and his/her treatment choices. Use of the POLST form is completely voluntary. A POLST form is completed only after a discussion of end-of-life choices between a patient or his/her legal decision-maker and physician.

***17. 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 health care agent (PoA), or Surrogate (which includes guardians, parents of a minor, and other decision-makers as defined by the Illinois Healthcare Surrogate Act hierarchy).

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

The POLST form should be reviewed with the patient's physician 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.

***19. 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 choices.

***20. 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.