

## **POLST IL Case Study #7 2025 Q1: The importance of properly updating POLST forms**

Josephine is an 89-year-old woman who resides at an assisted living facility where she is receiving hospice care due to advanced illness. One evening, Josephine becomes confused and falls while trying to get out of bed. The assisted living facility calls the paramedics for assistance. Upon arrival, paramedics find Josephine alert but confused, in no apparent distress, yet hypotensive and mildly hypoxic. They administer 2L of oxygen and a fluid bolus. The facility staff inform EMS that Josephine is receiving hospice care, and the hospice team advised Josephine to return to bed. The paramedics review Josephine's POLST form. This documentation was completed 4 years prior. It indicates Josephine's wishes are for **SECTION A: NO CPR** and **SECTION B: Selective Care: Primary goal is treating medical conditions with limited medical measures** (including transfer to the hospital if indicated).

Due to her mental status at the time of evaluation, Josephine cannot express her wishes verbally. EMS is obligated to follow the medical order on the POLST and transfer her to the hospital for evaluation and management of her hypoxia and hypotension.

Upon arrival at the hospital, Josephine regains mental capacity and can communicate her wishes. She states that she does not want life prolonging interventions and wishes to go home and resume hospice support. At this point it is evident that her current preferences have changed from the POLST form available, and the recommendation is to update the POLST form to reflect her wishes more accurately for **SECTION A: NO CPR; SECTION B: Comfort-Focused Treatment: Primary goal is maximizing comfort through symptom management. Allow natural death.** (transfer to hospital *only* if comfort cannot be achieved in current setting).

### **Summary:**

This case highlights the critical role that properly completed and regularly updated POLST (Practitioner Orders for Life-Sustaining Treatment) forms play in ensuring that patients' end-of-life care preferences are respected. In Illinois, POLST forms serve as medical orders, guiding healthcare professionals in making timely and appropriate decisions for patients who may not be able to communicate their wishes directly.

### **The Issue: An Outdated POLST**

The situation presented a dilemma due to the timing of the POLST form and Josephine's current state. The form, completed four years earlier, was no longer aligned with Josephine's immediate wishes. Given her confusion at the time of the fall, Josephine was unable to communicate her wishes directly. Despite this, the paramedics were required to follow the POLST, which stipulated a transfer to the hospital if deemed necessary. This led to Josephine being transported to the hospital when she most likely wanted to remain at home and receive comfort-focused care from a hospice provider.

### **Lessons Learned: The Importance of Accurate and Up-to-Date POLST Forms**

This case highlights the complexities that arise in end-of-life care, especially when the patient's mental state fluctuates and their ability to communicate wishes is temporarily impaired. The conflict between the hospice philosophy of comfort care and the directives in the POLST form underscores the need for clear, updated documentation that accurately reflects a patient's current desires.

This case underscores the importance of ensuring that **both** SECTION A and SECTION B on POLST forms are not only completed but also updated regularly to reflect the patient's current healthcare wishes.

While the original POLST form was valid at the time it was completed, Josephine's mental state and healthcare preferences had changed over the years. The lack of an updated form contributed to a hospital transfer that may have conflicted with her actual desires.

In Illinois, healthcare providers are required to adhere to the directives outlined in a POLST form as if they were current practitioner orders. However, healthcare professionals must be aware that these forms should be periodically reviewed and updated, especially in cases where a patient's condition or wishes may have changed. In Josephine's case, the transfer to the hospital was in line with her initial directives, but it was ultimately unnecessary and caused undue stress, as her wishes for comfort care could have been better honored had the form been updated.

### **Best Practice Highlights**

- POLST is a medical order; if a person cannot communicate their medical wishes, the POLST is honored.
- The POLST form should be reviewed periodically, especially when a patient's health status or preferences change.
- Enrollment into hospice care is just one example of an important time to review the POLST.
- **Ideal times for review of a POLST include: a transfer from one care setting to another; a transfer from one level of care to another; a change in health status; a change in treatment preferences; a change in primary care provider.**
- An up-to-date POLST form ensures that healthcare providers can make decisions that truly reflect the patient's desires, promoting patient autonomy.