

Name: _____ Date: _____

POLST Form and Your Wishes for Medical Care at **LTC facility name**

- Do you care about the types and amount of medical care you receive?
- Do you have opinions about your medical care now and in the future?
- If you become ill, is it important that the right person make choices for you?

..... If **YES**, then you should make and complete **advance care planning** now. Facility staff can provide information on how to access to necessary forms.”

What is advance care planning? Advance care planning (ACP) is the process by which individuals make decisions to guide their future health care, if they become unable to speak for themselves. It is designed specifically for a situation where you are unable to make or communicate your choices. It requires understanding of your health and thoughtful discussions about your medical care.

What does advance care planning include?

- Living will - a statement of choices regarding life-sustaining treatment if you have an end stage medical condition, and are unable to participate in decisions. It is recommended for everyone.
- Healthcare power of attorney - a person appointed by you to make your medical decisions if you are unable to do so. It is recommended for everyone.
- POLST (Pennsylvania Orders for Life-sustaining Treatment) – a translation of your medical wishes into specific medical orders that implement your choices now and in the future. It is suggested for people with serious illness – see details below.

Does **LTC facility name use the POLST form?** Yes, we will talk with you and the people you wish to include in the conversation about your wishes for care and the POLST form.

Tell me more about the POLST form.

The POLST Form is a document that helps doctors, nurses, healthcare facilities and emergency personnel honor your wishes regarding life-sustaining treatments in emergency situations.

The POLST form is voluntary and recommended for persons who have advanced chronic progressive illness and/or frailty, someone with progressive memory impairment, those who might die in the next year, or anyone of advanced age with a strong desire to guide their future care.

If you have an advance directive/living will, a POLST form is still recommended.

The POLST form includes information about:

- preferences for resuscitation
- treatments for medical conditions
- preferences on the use of antibiotics
- preferences for artificially administered fluids and nutrition

The POLST form is completed by a healthcare provider after discussion with you or your legal decision-maker. It is then signed by the doctor/nurse practitioner/PA and you or your legal decision-maker. It then becomes a medical order that is understood and followed by other healthcare professionals.

Can you explain some of the words on the POLST?

- Cardiopulmonary Resuscitation (CPR) - attempts to restart breathing and the heartbeat of a person whose heart has stopped and is not breathing. Typically this involves “mouth-to-mouth” breathing and forceful pressure on the chest. It can also involve electric shock or a plastic tube being placed in the throat to assist breathing.
- Mechanical Ventilation/Respiration - the pumping of air in and out of the lungs through a tube in the throat. Used when a person is not able to breathe on his or her own.
- Do Not Attempt Resuscitation (DNR) – this is a choice not to accept interventions such as CPR or mechanical ventilation when there is no heartbeat or breathing. This usually results in end of life. Most ethicists agree that this is not a deliberate choice to end life, but rather the acceptance of a natural death in someone who is life-threateningly ill.
- Comfort Measures - Care undertaken with the primary goal of keeping a person comfortable, rather than prolonging life. A person who requests “comfort measures only” on the POLST would be transferred to a hospital only if needed for his or her comfort.
- Intravenous (IV) Fluids - Fluids administered through a small plastic tube directly into a vein, typically on a short-term basis.
- Artificial Nutrition - when a patient can no longer eat or drink by mouth, it is possible to give liquid food through tube.
- Tube Feeding - Short-term basis: Fluids and liquid nutrients can be given through a tube in the nose that goes to the stomach. Long-term basis: a tube inserted through a surgical procedure directly into the stomach through the abdominal wall.

What happens if I go to the hospital or transfer elsewhere? The POLST remains with and travels with you between care settings, home, hospital, long-term care or any other facility.

Can I change my mind about my POLST choices? Yes, at any time! The POLST form is a guide for future decisions, and does not lock you in to that choice. You can change it tomorrow, or make a different choice at the time of a future illness. It should be reviewed and updated at least yearly to make sure it still reflects your current wishes.

Does the POLST replace my future decisions or my POA/representative? No! If you become ill and are still alert, we will discuss your options with you, and you can decide. If you are unable to participate in decisions, we will contact your POA if possible, and they can decide. It is best to discuss your POLST choices with your POA/representative, since it helps them honor your choices.

Where is the POLST form kept? The form is kept in the medical chart. If you are discharged, we will send the POLST with you.

Does this mean I won't receive treatment and medications for pain control? NO!! We will always seek to manage pain with medications or other treatments.

Why can't I just wait until I have a medical change before deciding? Often medical illness will affect your alertness and ability to make good decisions. It is hard to make good decisions in the middle of a crisis – it is usually best to describe your overall wishes when your health is stable. It is also a great gift to your POA/representative if you can give guidance on your wishes.