

Oregon POLST Task Force Statement on Following Other States' POLST Orders

Honoring the patient's wishes when medical orders are written on another state's POLST form by a non-Oregon physician, nurse practitioner or physician assistant

Physician Orders for Life-Sustaining Treatment (POLST), is a physician order form that addresses end-of-life care. It addresses resuscitation, medical intervention, antibiotics, artificial administration of fluids and nutrition, and the type of life-sustaining treatment a patient is to receive. The form is completed and signed by a physician, nurse practitioner or physician assistant pursuant to conversation with the patient and/or the patient's legally authorized surrogate and constitutes a valid medical order.

Periodically concerns have arisen when the patient arrives at a health care facility with a non-Oregon POLST form that is signed by a physician, nurse practitioner or physician assistant who is not licensed in Oregon. Sometimes the admitting physician or physician treating the patient at the hospital is reluctant to honor the orders contained in the form. This reluctance often arises from a belief that an order on another state's POLST program signed by a physician, nurse practitioner or physician assistant without an Oregon license is not valid.

Orders reflected in the POLST form represent a concerted effort for the patient to make his/her wishes for treatment known, carry substantial moral weight and should be included as any other advance care planning document in formulating the treatment plan.

The Oregon Medical Board administrative rules require a physician or physician assistant to honor a POLST form. This would also include a POLST form executed in another state. The law states:

“(1) A physician or physician assistant licensed pursuant to ORS chapter 677 shall respect the patient's wishes including life-sustaining treatments. Consistent with the requirements of ORS chapter 127, a physician or physician assistant shall respect and honor life-sustaining treatment orders executed by a physician, physician assistant or nurse practitioner. The fact that a physician, physician assistant or nurse practitioner who executed a life-sustaining treatment order does not have admitting privileges at a hospital or health care facility where the patient is being treated does not remove the obligation under this section to honor the order. In keeping with ORS chapter 127, a physician or physician assistant shall not be subject to criminal prosecution, civil liability or professional discipline.

(2) Should new information on the health of the patient become available the goals of treatment may change. Following discussion with the patient, or if incapable their surrogate, new orders regarding life-sustaining treatment should be written, dated and signed.” OAR 847-010-0110

First responders also are required to honor the POLST form. That law states:

“An Oregon-certified First Responder or EMT, acting through standing orders, shall respect the patient's wishes including life-sustaining treatments. Physician supervised First Responders and EMTs shall request and honor life-sustaining treatment orders

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executed by a physician, nurse practitioner or physician assistant if available. A patient with life-sustaining treatment orders always requires respect, comfort and hygienic care” OAR 847-35-0030 (6).

If a patient arrives in a hospital emergency department with a non-Oregon POLST form signed by a non-Oregon health care professional the emergency physician can use that POLST form to direct patient treatment until more information becomes available. The common practice is for the admitting physician to then discuss the POLST orders with the patient or legally authorized surrogate. The admitting physician will acknowledge that the out-of-state professional signer of the POLST form has previously spoken to the patient about his or her wishes. The admitting physician then reissues the orders, or changes them if the patient indicates such a change is now desired.

Health care facilities may address this issue proactively in their written policies and procedures and in collaboration with their physician staff. The following provisions may be considered:

- This health care facility believes that each capable adult patient is the primary decision-maker in his or her own health care.
- This health care facility respects all health care professionals' right to express a conscientious objection to implementation of a particular order to have or limit life-sustaining treatment.
- If a patient is admitted with a non-Oregon POLST form, the orders on the POLST form are valid (similar to other advance care planning documents) regardless of whether the physician, nurse practitioner or physician assistant who signed the document is licensed in Oregon until or unless new information becomes available.
- If the attending physician determines that a patient is able to make health care decisions, the attending physician shall discuss the orders expressed on the non-Oregon POLST form with the patient to ensure they continue to reflect the wishes of the patient.
- If either the patient or the patient's legally authorized surrogate indicates the orders expressed in the non-Oregon POLST form no longer reflect the patient's wishes, the attending physician shall void the form and complete new orders.
- If the patient is unable to make health care decisions, the physician shall discuss the non-Oregon POLST form with the patient's legally authorized surrogate, if any.
- This health care facility considers the following individuals as lawful surrogates for a patient who is unable to make health care decisions: health care facilities could consider using the list found in the Advance Directive statute for guidance in making this judgment. ORS 127.635 (2) provides the following list:
 - A guardian of the principal who is authorized to make health care decisions, if any;
 - The principal's spouse;

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- An adult designated by the others listed here who can be located if no person listed here objects to the designation;
- A majority of the adult children of the principal who can be so located;
- Either parent of the principal;
- A majority of the adult siblings of the principal who can be located with reasonable effort;
- Any adult relative or adult friend;
- Attending physician (although this may be a poor choice and in violation of some hospital policies).

Note: ORS 127.635 provides that surrogates from the preceding list can make life sustaining treatment decisions for persons without a health care representative who have certain listed conditions.

- If the attending physician is unable to discuss the non-Oregon POLST orders with the patient or with the patient's legally authorized surrogate, the orders expressed on the non-Oregon POLST form are valid and should be considered in formulating a treatment plan as with other advance care planning documents.
- The attending physician shall ensure the orders on the non-Oregon POLST form, as revised if that is applicable, become active health care facility chart orders.
- POLST orders can be updated following admission or at discharge if new information about diagnosis, prognosis or patient wishes becomes available to indicate that the goals of care have changed, or simply respected as written on the POLST form. If no changes are needed, then no new form need be completed. If new orders are needed, the prior orders are voided and a new POLST form completed, if possible using the form from the patient's state of residence.
- Ensure the original or newly completed POLST document is transferred with the patient upon discharge.

Oregon POLST Task Force
Center for Ethics in Health Care
3181 SW Sam Jackson Park Road
Mail Code: UHN-86
Portland, OR 97239
Phone: 503-494-3965 Fax: 503-494-1260
polst@ohsu.edu www.polst.org