GOALS

- Identify the ethical principle that is involved with advance directives
- Define the role of the patient and the surrogate decision maker.
- Provide a brief outline of the POLST program
- Discuss the differences between POLST and other types of Advanced Directives
- Discuss the POLST pilot project in Wyoming
- Discuss future directions for the Wyoming POLST project

PATIENT AUTONOMY

- Advance directives based in this ethical principle
- Advance directives allow more autonomy during periods of incapacity and at the end of life
- Advance directives empower patient and family to express their preferences for medical treatment in a way that will be honored by the medical system.

ROLE OF PATIENT

Think
What are your preferences for health care in the future?

Talk
With provider and/or surrogate decision maker, discuss and determine preferences and wishes.

Write
Fill out and sign advance care directive.

Review
Make sure document says what you want and revise/revoke previous advance care directives/periodically update.

ROLE OF THE SURROGATE

- Surrogate = person is authorized to make health care decisions when patient lacks decision making capacity
- Substitute judgment = stating what they believe the PATIENT would want regarding medical treatment if they could see their current medical condition.
- Ask questions
- Keep a copy of advance care planning documents

THE PHYSICIANS ORDERS FOR LIFE SUSTAINING TREATMENT (POLST) PILOT PROJECT IN WYOMING

- Jim Little Jr. MD
- Medical Director
- St. John’s Family Health
- Jackson, WY
**Some Problems with Advanced Directives**

- Written by attorneys who have limited knowledge about end of life care, often as a “freebie” with a will
- No discussion by healthcare provider about patient wishes, or context of patients health
- Often require 2 physicians, sometimes attorney and/or judge to interpret
- Not usable by EMS
- Patients wishes may not be followed
- Often “All or None”, or address rare circumstances
- Terry Schiavo had an “Advanced Directive”

**What Does This Order Mean?**

- “DNR”

**What Is POLST?**

- A written physician/provider ORDER
- EXPLICITLY outlines PATIENT WISHES for life sustaining and medical treatment
- ACTIONABLE - contains explicit instructions for treatment
- PORTABLE - Accompanies patients across care settings
- SINGLE PAGE

**POLST vs Advanced Directive**

<table>
<thead>
<tr>
<th>POLST</th>
<th>Advanced Directive</th>
</tr>
</thead>
<tbody>
<tr>
<td>Written by provider based on patients wishes</td>
<td>Written by attorney</td>
</tr>
<tr>
<td>Valid medical order for current treatment</td>
<td>Instructions for future treatment</td>
</tr>
<tr>
<td>Valid across hospital &amp; outpatient environments including EMS **</td>
<td>Not valid for EMS</td>
</tr>
<tr>
<td>Patient can opt in or opt out of specific treatments</td>
<td>Vague, may not cover specific treatments or covers them in general terms</td>
</tr>
<tr>
<td>For any person with advanced illness</td>
<td>For anyone over 18</td>
</tr>
</tbody>
</table>

**History of POLST**

- Originated in 1990’s by patients, medical ethicists and physicians in Oregon
- 16 states have adopted as law
- 27 states have developing programs

**States with POLST Programs - 2013**
Wyoming and POLST

- Only formal implementation in Jackson at St. John’s Medical Center
  - Dr. Jim Little, Jr. MD one of key champions
  - Tried to have formally legislated but unsuccessful
  - Have form and hospital policy
  - Would like to see form implemented statewide in a consistent standardized manner
- Informal use
  - Casper - University of Wyoming Family Medicine Clinic and for nursing home patients
  - Torrington - Nursing Home
  - Cheyenne several practitioners familiar unsure of actual use
  - Albany County using POLST form since 1990’s

Issues with POLST Implementation Through Policy

- How to handle orders from non-credentialed providers?
- Need to each facility and EMS organization to adopt the form individually
- Limits the portability of the form in other parts of state

Sample POLST Form

Patient Information

CPR?
OTHER MEDICAL INTERVENTIONS?

- Introduced in committee in 2012
- A well organized and vocal but misinformed opposition group opposed the bill
- It was killed by the sponsoring legislator
- Timing was bad - on heels of national election cycle where “death panels” were debated
FUTURE DIRECTIONS
- Organize a statewide, grassroots coalition
- Build support for statewide implementation
- Educate public about actual intent of the program
- Consider future legislation?

LEARN MORE
- POLST wikipedia
- POLST.org