Hospital POLST Guidelines:
Honoring the patient’s wishes when POLST orders are written by a physician, nurse practitioner or physician assistant not on staff at the hospital

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Hospitals and POLST:
POLST: 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.

Issue: Difficulties have arisen when the patient arrives at the hospital with the POLST form that is signed by a physician, nurse practitioner or physician assistant who did not admit the patient or who does not have admitting privileges at the hospital, or who is not known at the hospital. 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 signed by a physician, nurse practitioner or physician assistant without admitting privileges is not valid at the hospital. Further problems may arise if a hospital requires orders to be transcribed into the patient’s chart before the orders may be honored.

Law: Oregon State Board of Medical Examiners administrative rules require physicians and physician assistants to honor a POLST form even if the form was executed by a practitioner who does not have admitting privileges at the hospital. 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.
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 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).

Practice: If a patient presents with a POLST form signed by a non-admitting physician, nurse practitioner or physician assistant the common practice is for the admitting physician to discuss the POLST orders with the patient. The physician, nurse practitioner or physician assistant will acknowledge that the physician, nurse practitioner or physician assistant 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 under his/her name.

The challenge occurs when the patient is not capable of having this conversation with the admitting physician or circumstances otherwise prohibit the conversation. Some physicians are reluctant to honor the orders, particularly when the orders are to limit treatments or procedures. Some physicians may discuss the orders with the patient’s family, who may not always be the patient’s lawful surrogate or respectful of the patient’s wishes.

Hospital Policy: Hospitals need to address this issue proactively in their written policies and procedures and in collaboration with their physician staff. The following provisions should be considered:

- This hospital believes that each capable adult patient is the primary decision-maker in his or her own health care.
- This hospital respects all health care professionals’ right to express a conscientious objection to implementation of a particular order to limit or provide life-sustaining treatment, so long as patient care is not compromised.
- If a patient is admitted with a POLST form, the orders on the POLST form are valid orders regardless of whether the physician, nurse practitioner or physician assistant who signed the document has admitting privileges at this hospital 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 POLST form with the patient to ensure they continue to reflect the wishes of the patient.
- If either the patient or the patient’s surrogate indicates the orders expressed in the 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 POLST form with the patient’s legally authorized surrogate, if any.

• This hospital considers the following individuals as lawful surrogates for a patient who is unable to make health care decisions: Hospitals 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:
  o A guardian of the principal who is authorized to make health care decisions, if any;
  o The principal’s spouse;
  o An adult designated by the others listed here who can be located if no person listed here objects to the designation;
  o A majority of the adult children of the principal who can be so located;
  o Either parent of the principal;
  o A majority of the adult siblings of the principal who can be located with reasonable effort;
  o Any adult relative or adult friend;
  o Attending physician (although this may be a poor choice and in violation of some hospital policies)

• If the attending physician is unable to discuss the POLST orders with the patient or with the patient’s surrogate, the orders expressed on the POLST form are valid and should be followed.

• The attending physician shall ensure the orders on the POLST form, as revised if that is applicable, become active hospital 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. If new orders are needed, the prior orders are voided and a new POLST form completed.

• Ensure the POLST document is transferred with the patient upon discharge.