Lessons Learned in the Revision of the Oregon POLST Form that are not Incorporated in the National POLST Form

1. The tube feeding section was removed, as explained in the *Journal of the American Geriatrics Society (JAGS)* article, “It is Time to Remove Feeding Tubes from POLST Forms.” Further details of Oregon’s first six months of experience were provided in a subsequent *JAGS* letter.

2. Oregon reaffirms the value of not requiring the signature of the supervising physician for physician assistant (PA) signers. Since 2007, PAs in Oregon have been able to sign POLST forms without the signature of their supervising physician. Annually, about 5% of all POLST forms submitted to the Oregon POLST Registry are signed by PAs (approximately 2,000 forms).

3. Retain the patient’s address in the demographic information, as this element is a valuable asset in the Oregon POLST Registry’s matching and quality assurance protocols.

4. In describing *Who Was Present for Discussion*, it is important to retain the category “Relative or friend (without written appointment),” as family members without a formal appointment may feel undervalued when referred to as “Other.”

5. Oregon removed the section for the last four digits of the social security number, as the use of a social security number as an identifier is now actively discouraged to protect personal privacy.

6. Encouraging the signature of a capable patient can be instructive for the family when the patient loses decision making capacity; however, the signature of surrogates should not be required. For some surrogates, signing may be an added emotional burden and the distance of the surrogate from the patient may make the physical act of signing prohibitive.