

Revisions to 2014-15 POLST form

Location on form	Revisions
Form header	<p>After the sentence starting ‘First follow these orders...’ add new sentence: ‘The POLST form is always voluntary.’</p> <p>Change the sentence beginning “The POLST is a...” to say: “The POLST is a set of medical orders intended to guide medical treatment based on a person’s current medical condition and goals.”</p>
Section C	<p>Under ‘Discussed with’ change ‘Legal Guardian’ to ‘Guardian with Health Care Authority’</p> <p>After ‘Spouse/Other’ delete colon, add ‘as authorized by RCW 7.70.065’</p> <p>After ‘Person has:’ delete: Living Will Registry.</p> <p>Add the notation “(mandatory)” in both Date boxes</p>
Footer (page one)	<p>Replace the word ‘FAXes’ with ‘faxes’ (do the same in the footer on back/page 2)</p> <p>Add a period (after ‘records’): ‘May make copies for records.’</p> <p>Under the sentence beginning ‘Photocopies and faxes’ add the following text: For more information on POLST visit www.wsma.org/polst. (do the same in the footer on back/page 2)</p> <p>On bottom right of footer, where currently it has the word ‘OVER,’ replace with ‘See back of form for non-emergency preferences’</p>
Section D	<p>Change title from Additional Patient Preferences to Non-Emergency Medical Treatment Preferences</p>

	<p>Remove '(Optional)' from section header</p> <p>In parenthesis after 'Additional Orders' add: 'implanted cardiac devices' after 'blood products'</p> <p>Directly below physician signature box add patient signature box with adjacent date box</p>
<p>Directions for Health Care Professionals</p>	<p>Under Completing POLST:</p> <p>Delete the current first bullet and add a new first bullet:</p> <ul style="list-style-type: none"> • “The POLST is usually for persons with serious illness or frailty.” • Add a new bullet: Completing a POLST form is always voluntary. • Replace the second bullet with: “The POLST must be completed by a health care provider based on the patient’s preferences and medical condition. • In third bullet item, add ‘and patient, or their surrogate,’ after ‘physician/ARNP/PA-C,. <p>Under Using POLST:</p> <p>In the second section, remove the words “effective across all” and replace them with “valid in all care”.</p> <p>Replace physicians’s with physician’s (typo in second sentence under Using POLST)</p> <p>Remove sentence beginning: ‘The health care professional should inquire...’ and the sentence beginning “In the event of a conflict...”</p> <p>Add: The POLST is a set of medical orders. The most recent POLST replaces all previous orders.</p>

	<p>Add: The POLST does not replace an advance directive. An advance directive is encouraged for all competent adults regardless of their health status. An advance directive allows a person to document in detail his/her future health care instructions and/or name a surrogate decision maker to speak on his/her behalf. When available, all documents should be reviewed to ensure consistency, and the forms updated appropriately to resolve any conflicts.</p> <p>Under Reviewing POLST:</p> <p>For the sentence beginning ‘A person with capacity ...’ replace ‘A person with capacity or the surrogate of a person without capacity’ with ‘A competent adult, or the surrogate of a person who is not competent,’</p>
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