Providers Orders for Life-Sustaining Treatment Program

The Providers Orders for Life-Sustaining Treatment (POLST) program is designed to improve the quality of care people receive at the end of life. It is based on effective communication of patient wishes, documentation of medical orders and a promise by health care professionals to honor these wishes.

Patient-Centered Care

Effective communication between the patient or legally designated decision-maker and health care professionals ensures decisions are sound and based on the patient’s understanding of their medical condition, their prognosis, the benefits and burdens of the life-sustaining treatment and their personal goals for care.

More information about the POLST form or utilization of POLST can be found at the Montana Board of Medical Examiners Website at: polst.mt.gov

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"AN EQUAL OPPORTUNITY EMPLOYER"
The POLST form is intended for any individual with an advanced life-limiting illness.

If you have a serious health condition, you need to make decisions about life-sustaining treatment.

Your provider (physician, nurse practitioner or physician assistant) can use the POLST form to represent your wishes as clear and specific medical orders.

Your provider may use the POLST form to write orders that indicate what types of life-sustaining treatment you want or do not want at the end of life.

The POLST form asks for information about:
- Your preferences for resuscitation
- Medical conditions
- Treatment options
- Artificially administered fluids and nutrition.

The POLST form is voluntary and is intended to:
- Help you and your provider discuss and develop plans to reflect your wishes;
- Assist physicians, nurses, health care facilities and emergency care providers in honoring your wishes for life-sustaining treatment;
- Direct appropriate treatment by Emergency Medical Services personnel.

FREQUENTLY ASKED QUESTIONS REGARDING POLST

Does the POLST form need to be signed?
Yes. A provider (physician, nurse practitioner, or physician assistant) must sign the form in order for it to be a medical order that is understood and followed by other health care professionals.

If I have a POLST form do I need an advanced directive too?
If you have a signed POLST form, it is recommended that you also have an advanced directive, though it is not required. You may obtain more information about advanced directives from your provider.

What if my loved one can no longer communicate his/her wishes for care?
If you are the designated health care representative, you can speak on behalf of your loved one. A provider can complete the POLST form based on your understanding of your loved one’s wishes.

In what setting is the POLST form used?
The completed POLST form is a provider order form that will remain with you if you are transported by an ambulance, transported between care settings, regardless of whether you are in the hospital, at home or in a long-term care facility.

Where is the POLST form kept?
If you live at home you should keep the original POLST form in a prominent location (e.g., on the front of the refrigerator, on the front of the bedroom door, on a bedside table, or in your medicine cabinet). If you reside in a long-term facility, your POLST form may be kept in your medical chart along with other medical orders.

I have "Comfort One", do I need to get a POLST?
No, Comfort One is still honored by Emergency Medical Services personnel and your wishes will still be followed by the EMS personnel. You may wish to discuss POLST with your provider if you want your wishes expanded beyond withholding life sustaining treatment or wish the medical facilities and other medical providers to honor your wishes.

How do I obtain a copy of the POLST form?
From your physician or other health care provider or you can download a copy from the web site, polst.mt.gov.
If your physician or other health care provider is not yet aware of, or needs more information about POLST you can direct them to the official POLST website for Montana at: polst.mt.gov.