

AARP reports on an Oregon creation to help patients with advanced illness: the Polst Program

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An Oregon-pioneered program aimed at improving health care for those with advanced illness is now receiving national attention. AARP recently released a report about the Physicians Orders for Life-Sustaining Treatment, or POLST, program. The program was created to honor the treatment wishes of patients with advanced progressive illness or frailty.

The AARP report titled, "Improving Advanced Illness Care: The [Evolution](#) of State POLST Programs," examines the evolution of POLST which, to date, has been implemented in at least 12 states. The report can be found online here along with a two-page summary. Oregon's program, which was the first in the country, was developed in the early 1990s.

At the center of the POLST program is a document that enables patients to work with their [health care professionals](#) to form medical orders.

"POLST differs from [advance directives](#) in that the program is geared towards those with advanced illness or frailty, meaning that patients are likely able to foresee the kinds of medical interventions they might require and request or limit the interventions based on their own personal wishes," explains Margaret Carley, Associate Director of the Oregon Health & Science University Center for Ethics in Health Care. Carley also helped contribute to the AARP report.

OHSU's Ethics Center worked with others to generate the program,

which is now approaching its 20-year milestone. The center also serves as the state's coordinator for the program.

The AARP report specifically focuses on the ways in which state POLST programs took shape. In doing so, the report provides several lessons learned for states currently contemplating a program of their own.

Among the considerations noted in the report are:

- Differences in state law in regard to whether the form requires a physician signature or whether the form can also be signed by a nurse practitioner or nurse assistant.
- Varying methods for forming a new POLST program including creating physician champions for the program or smaller pilot programs before going statewide.
- Methods for educating [physicians](#) and clinicians about the program so they are fully prepared before counseling their patients about POLST.

No state mandates completion of the POLST form. The POLST Program is entirely voluntary and a patient can change or revoke their POLST form at any time. There are advantages to states that participate including access to innovations such as the Oregon POLST Registry, a system that allows providers to access POLST information via a secure database 24 hours a day, seven days a week.

"Creating POLST in the early 90's was a lot of hard work as would be expected with any program of this complexity and scope," said Susan Tolle, M.D., Director of the OHSU Center for Ethics in Health Care.

"We are pleased that AARP investigated our work in Oregon along with the experiences of other states which have adopted the program. POLST fills an important role in [health care](#) that was not adequately addressed two decades ago. We hope that this report will help more rapidly pave the way for other states in generating a program that benefits countless patients and their families."

Joyce DeMonnin, Outreach Director for AARP Oregon and a member of the Oregon POLST Task Force added, "This is a vital and proven program that greatly benefits consumers in Oregon and around the country by insuring that patients' wishes are honored, but also that doctor orders are followed. It's a true win-win."

Provided by Oregon Health & Science University

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