

POLST

physician orders for life-sustaining treatment paradigm

In This Issue:

FEATURED NEWS

FEATURED RESOURCE

FEATURED RESEARCH

NEWS

FROM THE EXECUTIVE DIRECTOR

Dear Friends,

Thank you! The National POLST Paradigm Task Force depends on your participation and hard work on numerous committees. I realize that these activities demand precious time in your busy schedules. Yet, your contributions are essential to creating tools to ensure quality, gather data, and communicate the importance of the POLST Paradigm.



As our committee work for 2013 approaches an end, I am committed to ensuring that our work groups are efficient and make the best use of your time. I welcome your ideas about how we can improve our regional calls, achieve full representation in the Communications Committee, and strengthen the POLST Paradigm. Most of all, I look forward to working with all of you on behalf of seriously ill and frail patients.

Best wishes,

Amy Vandenbroucke, JD
Executive Director

News

Webinar: Experiences with Utah's ePOLST Program

On December 10th, the National POLST Paradigm will host a webinar on the development of Utah's ePOLST Registry. The webinar will be led by Peter Taillac, MD, of the University of Utah's Department of Emergency Medicine.

To learn more or to register for the webinar, contact polst@ohsu.edu.

Wanted: Communications

FEATURED NEWS

Endorsed Program Branding

As the POLST Paradigm continues to gain more attention, the **National POLST Paradigm Task Force (NPPTF)** has decided to provide increased education, both about the National POLST Paradigm (the essential elements of a POLST Program) as well as POLST Programs (how states and regions are implementing the National POLST Paradigm locally), and to better identify Endorsed POLST Programs. Endorsed Programs have proven that their POLST Program and Form comply with the National POLST Paradigm elements and can serve as representations of what we are hoping to implement nationally.

To avoid confusion, Endorsed Programs need to be clearly distinguished from developing programs, which may still use the term "POLST" or something similar, but have not reached

Committee Representatives

The Communications Committee is seeking representatives from each state with a Mature, Endorsed, or Developing POLST Program. By incorporating the perspectives of all POLST Programs, the Communications Committee can create materials that better serve the entire National POLST Paradigm.

If your state does not currently have a representative on the Committee, please contact us at polst@ohsu.edu.

Changes to the Consultation Committee

Woody Moss, MD, is stepping down as Chair of the Consultation Committee. We thank Woody for his leadership of this essential committee and look forward to his continued contributions to the NPPTF as a member of the Executive Committee. We are excited for David Koets, MD, to join us as the new Chair of the Consultation Committee.

Request for Feedback on Regional Calls

The National POLST Office is re-examining how to conduct regional POLST Program calls. We welcome feedback about what works on these calls and what could be improved. If you have thoughts about the calls or suggestions for improving them, please contact Amy Vandenbroucke at 503-494-9550 or email us at polst@ohsu.edu.

endorsed status. In order to make the differences easier to understand, the Communications Committee has created two logos for Endorsed Programs to display on their websites and materials.

The logos are currently being finalized and the NPPTF is creating a licensing agreement to cover their use. Preliminary versions of the logos are available for viewing:

- [Version 1](#)
- [Version 2](#)

This additional education and identifying information is needed as POLST Programs continue to start and develop in so many states! If you have any questions about these efforts, please contact Amy Vandenbroucke at vandenbr@ohsu.edu.

FEATURED RESOURCE

Goals of the Communications Committee

The National POLST Paradigm Communications Committee has developed a new goals statement. The goals statement will guide the work of the Communications Committee to ensure consistent branding and accurate language in POLST Paradigm materials and tools.

To read the goals statement, [click here](#).

FEATURED RESEARCH

Provider Perceptions of End of Life Treatment Preferences

A 2013 article in the Journal of Pain and Symptom Management reported on differences between patients' end-of-life wishes and providers' perceptions of those wishes. The authors studied treatment preferences in 196 veterans, focusing on preferences regarding mechanical ventilation and CPR. Simultaneously, the authors investigated health care professionals' perceptions of the veterans' wishes.

The study found that a majority of health care professionals (70%) believed that they knew their patients' treatment preferences. However, a larger majority of patients (85%) claimed that they had never had an advanced care planning conversation with their clinician. Not surprisingly, health care professionals' perceptions of preferences for mechanical ventilation were incorrect 39% of the time and for CPR were incorrect 25% of the time. The authors only identified one statistically significant factor associated with incorrect perceptions. The accuracy of clinicians' perceptions decreased as patient preference for treatment decreased. In other words, health care professionals tended to perceive preferences for more treatment from patients who wished to avoid some treatments.

Although the study did not explore the effects of POLST, it demonstrates the importance of programs to improve the communication of treatment preferences. Tools for the documentation of patient wishes, like POLST, are essential for ensuring that clinicians understand patients' end-of-life wishes.

To access the full article, click the citation below:

Downey, L, DH Au, JR Curtis, and RA Engelberg. (2013).

"Life-Sustaining Treatment Preferences: Matches and Mismatches Between Patients' Preferences and Clinicians' Perceptions." *Journal of Pain and Symptom Management* 46(1): 9-19.

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