



## **Introduction to the POLST Form**

Pennsylvania Orders for Life-Sustaining Treatment (POLST) is a medical order that gives patients more control over their end-of-life care. The POLST form specifies the types of medical treatment that a patient wishes to receive towards the end of life. These medical orders are signed by either a patient's physician, physician assistant or certified registered nurse practitioner and the patient or the patient's surrogate.

Completion of a POLST form is only a small step in the process of a patient's decision-making, and it is critical that this form be used as part of a program for end of life decisions that includes educational support and other aspects of planning for providers and patients.

This form was developed by the Pennsylvania Department of Health's Patient Life Sustaining Wishes Committee and designed to be consistent with Pennsylvania law. There are significant advantages in using a form that contains standardized language and is produced in a distinctive and easily recognizable format. In order to maintain continuity throughout Pennsylvania, please follow these printing instructions:

**\*\*\* Print POLST form on Pulsar Pink card stock (65#) \*\*\***

Resources and educational information for the use of the POLST form are found on the Pennsylvania Orders for Life-Sustaining Treatment website at:  
[www.aging.pitt.edu/professionals/resources-polst.htm](http://www.aging.pitt.edu/professionals/resources-polst.htm).

For questions on POLST contact:  
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