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physician orders for life-sustaining treatment paradigm

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Strong Support for the Personalize Your Care Act of 2013

The National POLST Paradigm Task Force strongly supports the “Personalize Your Care Act of 2013” as a method to honor the treatment preferences of individuals nearing the end of life.

Creation of the POLST Paradigm (see www.polst.org)

The POLST Paradigm began in Oregon in 1990 in response to individuals with advanced chronic illness indicating that their preferences regarding life-sustaining treatment were frequently not being respected. This occurred even if individuals had executed an advance directive. Even if immediately available, emergency medical personnel still require signed medical orders, based on an individual’s expressed values, at a critical time of need. A task force convened by Oregon Health & Science University with broad representation of stakeholder organizations developed the brightly colored Physician Orders for Life-Sustaining Treatment (POLST) medical order form to put an individual’s treatment preferences into action. The order set complements an advance directive and is widely recognized by emergency medical services and other health care professionals. The POLST Paradigm is a program- not just a form- and includes extensive ongoing education, policy development and research.

National Adoption

With success of Oregon’s model, many states and localities have adopted, or are in the process of working to adopt, similar programs including: Alaska, Alabama, Arizona, California, Colorado, Connecticut, Delaware, Georgia, Florida, Hawaii, Idaho, Illinois, Indiana, Iowa, Kentucky, Louisiana, Maine, Michigan, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Utah, Virginia, Washington, West Virginia, Wisconsin and Wyoming. The National POLST Paradigm Task Force, with representation from experienced programs, was created in 2004 to provide guidance, mentorship and consultation to new and developing programs and to conduct research on the effectiveness of existing programs. Support for the National POLST Paradigm Task Force has been entirely gift and grant funded, with tremendous in-kind contributions by task force members and their organizations.

The “Personalize Your Care Act of 2013” Meets Growing Need

The “Personalize Your Care Act of 2013” ultimately aims to honor an individual’s preferences to have or to limit life-sustaining treatments. The bill provides support for voluntary advance care planning consultation under Medicare and Medicaid, grants for POLST programs, enhances standards for advance care planning standards for electronic health records and ensures the portability of advance directives. These legislative changes represent a tremendous improvement in care for individuals in their final months of life.

The National POLST Paradigm Task Force applauds this effort and strongly supports the proposed legislation.

Sincerely,

A handwritten signature in black ink, appearing to read 'Judy Citko', with a long horizontal line extending to the right.

Judy Citko, J.D.
Chair
National POLST Paradigm Task Force

A handwritten signature in black ink, appearing to read 'Amy Vandenbroucke', with a long horizontal line extending to the right.

Amy Vandenbroucke, J.D.
Executive Director
National POLST Paradigm Task Force