

FAQs for EMS Providers

POLST: Portable Medical Orders

Important Note: There are 16 names for POLST (MOLST, MOST, POST, etc.) click on your state www.polst.org/map to see what name you use (or a full list is at the bottom of that page). Almost all states follow national guidance for what the form looks like, who POLST is for, and how to create and honor a POLST form.

What is POLST?

POLST is a process that helps identify a patient's wishes regarding medical treatment through conversation, after which the patient's treatment wishes are documented as a portable medical order, called a POLST Form. There are 16 names for POLST (MOLST, MOST, POST, etc.) so your state may use call it something else (see www.polst.org/map, bottom of the page). Read more: [Overview of POLST](#).

POLST is appropriate for patients who are considered to be at risk for a life-threatening clinical event because they have a serious life-limiting medical condition, which may include advanced frailty. POLST is voluntary. [Guidance is available to help identify appropriate patients](#). Healthy individuals should be encouraged to complete an advance directive.

The POLST form is a set of portable medical orders documenting a person's wishes for advanced medical care (or not), arrived at through a shared-decision making discussion with a provider.

Why are POLST forms different for each state?

Under our government, advance care planning is delegated to the states meaning each state has the authority to determine what is a valid document in that state. This means establishing its own rules about what language is included in an advance directive and whether an out-of-state version of the document is valid. For POLST, states have the same authority but, unlike advance directives, there is a national organization—National POLST—that is a collective of state leaders agreeing by consensus about what language and then promoting that within their own states.

In September 2019, National POLST released the first [National POLST Form](#). It is the product of almost two years of interviews, consensus building, feedback, compromise and iterative versions of the form and patient guides. As more states adopt the National POLST Form, the acceptance, understanding and use of POLST can become standard of care for patients who are at risk for a life-threatening clinical event because they have a serious life-limiting medical condition, which may include advanced frailty. Both Arizona and Maine have already adopted and started using the National POLST Form. Other states are currently considering it.

While the National POLST Form should be honored in all states, states cannot use the form unless it has been approved by the state (under whatever mechanism their current POLST form was approved).

How do I find my state's POLST form?

Check with your state contact by going to www.polst.org/map and click on your state.

Is POLST available everywhere?

No. It is up to each state to develop a POLST Program and some are just getting started. Check with your state contact to see if it is available where you are (go to www.polst.org/map and click on your state).

What protocols exist for EMS providers in my state regarding POLST?

Check with your state contact by going to www.polst.org/map and click on your state.

How are POLST forms different from advance directives?

In short, POLST forms are medical orders that all providers, including EMS providers, should follow. The two sections important for EMS providers are:

1. Section A (the CPR / DNR section). This tells EMS providers whether to attempt CPR or not.
2. Section B (medical interventions section). This tells EMS whether to transport the patient to the hospital. If the patient's form says:

Full Treatment: the patient wants the standard of care and is fine going to the hospital

Selective Treatment: the patient is okay going to the hospital but does not want to be intubated or go to the ICU

Comfort-Focused Treatment: the patient does not want to be transported. ONLY transport the patient if their comfort needs cannot be met where they are.

Advance directives are legal documents that need interpretation. If available, they should be taken with the patient to the hospital so that the hospital can review treatment plans with the named surrogate once the patient is stabilized.

	Advance Directive	POLST Form
Type of Document	Legal Document	Medical Order
Who Needs?	All competent adults	Someone considered to be at risk for a life-threatening clinical event because they have a serious life-limiting medical condition, which may include advanced frailty
Purpose	<ul style="list-style-type: none"> Identifies surrogate Identifies future treatment wishes 	<ul style="list-style-type: none"> Directs treatment during an emergency Supports patient across care settings
Completed by	Individual	Health care professional (after shared-decision making conversation with patient)
Appoints a surrogate?	Yes	No
Can EMS Follow?	No	Yes

For more information about the differences between these advanced care plans, see:

- How POLST differs from Advance Directives: <https://polst.org/about/polst-and-advance-directives>
- Understanding advance care plans: <https://polst.org/understanding-advance-care-planning-pdf>

Other POLST Resources

- EMS Chapter of [The POLST Care Continuum Toolkit](#) and [accompanying webinar](#).
- Patient Guide: What Your Completed POLST Form Means: <https://polst.org/patient-guide-after-pdf>
- COVID Guidance: www.polst.org/covid

What is National POLST?

National POLST is a collective impact, where all participants develop strategies, policies and guidance supporting their shared vision that “all states adopted POLST, resulting in consistency of process, improved patient care and greater patient control and direction over medical treatment.” National POLST is the preeminent leader in advancing this vision.