

Nevada POLST: FAQ for Providers



What is POLST?

The Provider Order for Life-Sustaining Treatment (POLST) is a form that translates the wishes of seriously ill or frail patients regarding life-sustaining treatment to medical orders and travels with the patient regardless of setting. A social worker, nurse or chaplain may discuss POLST with the patient, but a physician, APRN or PA must review the POLST with the patient to determine their understanding, then complete section E for legal validity.

What is the legal status of the POLST?

Nevada POLST is governed by statute (NRS 449.691 - 449.697). A patient's POLST is to be honored by any health care provider in any health care setting, including, without limitation; a residence, health care facility or the scene of a medical emergency.

Where do I get POLST forms?

POLST forms are available to order through the State Division of Public and Behavior Health http://dphh.nv.gov/Reg/DNR-POLST/EMS_-_DNR_POLST_Forms/. For educational purposes, because the POLST form is a medical order and should only be obtained from one's physician, a watermarked sample may be printed and freely disseminated. Please visit www.nevadapolst.org/nevada-polst-form/ to review a sample form and printing instructions.

For whom shall a POLST be completed?

A POLST is ALWAYS voluntary and may not be mandated. It should be offered to all POLST qualifying patients:

- For a patient who is very elderly and frail; or
- If a patient has a terminal illness; or
- Is near the end of a life-limiting illness; or
- For any patient who would not be expected to live another year or so; or
- At the patient's or their agent's request

In any of these instances, the physician shall explain:

- The existence and availability of the POLST form;
- The procedures offered by and features of the POLST form; and
- The differences between a POLST form and the other advance directives. Upon the request of the patient, the physician shall complete the POLST.

Are there CMS codes for a POLST?

Yes. Please see the Nevada POLST website for specific billing codes.

Can I be disciplined or subject to legal action for using POLST?

The health care provider cannot be disciplined or subject to legal action if:

- Emergency care or life-sustaining treatment is withheld in compliance with the POLST form and the medical orders reflected on it, nor if;
- The provider, in good faith, is unaware of the existence of the POLST, or has reason to believe the POLST has been revoked, nor if;
- The patient, patient's agent (DPOA-HC), parent of a minor, or legal guardian makes a written request to override the POLST. A surrogate may only over-ride a POLST they themselves completed for the patient.

Furthermore, an entity that employs a provider of health care is not subject to disciplinary or legal action for the acts or omissions of the employee who honors the POLST.

Additionally, Nevada law states that a provider of health care shall comply with a valid POLST regardless of whether the health care provider who signed the POLST has privileges at the facility.

If a patient is being transported or arrives at a facility with their POLST, the orders on the POLST are to be honored, regardless of the privileges of the signing provider at the receiving facility. Death that results from compliance with a valid POLST does not constitute suicide or homicide. There is no provision in the POLST that condones, authorizes, or approves of mercy killing, euthanasia, or assisted suicide.

How is the POLST form used?

In a health care facility, the form should be the first document in the clinical record. It should be recognized as a set of medical orders, to be implemented as any other medical order. In a non-institutionalized setting (such as a home), the form should be kept on the refrigerator or next to the patient's bed where EMS is trained to look. It will be recognized by emergency personnel as orders to be followed. Preferably, the POLST will be printed on bright pink paper to assist with the ability to quickly identify the document.

What constitutes a valid POLST?

A POLST form is valid when Section E is completed with a:

- Patient 18 years of age or older with decisional capacity; or

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- If lacking decisional capacity, their DPOA-HC, legal guardian or parent of a minor; or
- If none of the above apply, a surrogate (see Terms of Use on Side 2 of the POLST form)

Sections D, attesting to the patient's decisional capacity, and Section E should be completed accordingly.

What if a patient regains decisional capacity?

If a POLST has been completed by someone other than the patient and the patient later regains decisional capacity, the patient should be told of the orders on the POLST and if a change is desired, the person who previously completed the POLST should be notified, if possible. A new POLST should be completed reflecting the patient's current wishes.

A POLST should be reviewed when:

- The patient is transferred from one care setting or level to another, or;
- There is a substantial change in health status, or;
- The patient treatment preferences change.

Transfer to a facility does not necessarily require a new POLST be completed. Nevada law states that a provider of health care shall comply with a valid POLST whether or not the health care provider who signed the POLST has privileges at the receiving facility.

What if the POLST form needs revision?

If, after medical evaluation, the physician recommends new orders, before completing a new POLST and modifying the medical orders, the physician shall consult with the patient, their agent, parent, guardian or surrogate.

When a POLST needs to be revised due to wear and tear, a change of orders, or other information, "VOID" should be written in large print diagonally across both sides of the old POLST then placed in the patient's record. A new POLST should be completed with the patient, or if they lack decisional capacity, their representative or surrogate.

What happens if a patient is transferred or transported by EMS?

The POLST form ALWAYS remains with the patient whether transferred by private vehicle or transported by

EMS regardless of whether to a hospital, home, or a long-term care facility.

EMS should ask for the POLST when responding to a call. The POLST replaces the out-of-hospital DNR identification. Therefore, EMS shall honor medical orders indicated in Section A (CPR) and Section B (Interventions).

Does a POLST form replace an Advance Directive (AD)?

The POLST form supplements an AD but is not intended to replace a living will, health care declaration, or durable power of attorney for health care (DPOA-HC). These documents provide general guidance for life-sustaining treatments and allow for the appointment of a legal health care agent to speak for the patient if they are unable, and are recommended for all adults, regardless of their health status. The POLST form is for patients with a life-limiting illness and translates treatment wishes to medical orders.

What if the POLST conflicts with a patient's other ADs or medical orders?

The most recent POLST or AD is the valid document; however, any other AD or medical order that does not conflict will remain valid.

What if I am unwilling or unable to comply with a valid POLST form?

You shall take all reasonable measures to transfer the patient to a physician or facility able to honor the POLST.

What if a patient has a POLST from a state other than Nevada?

A POLST executed in another state is valid in Nevada, but a new POLST should be completed as soon as possible, or reflecting the same out-of-state POLST choices, if the patient is unable to express their treatment wishes or their agent is unavailable.

What if a section is blank?

The POLST form is still valid, unless it lacks necessary signatures and dates (Section E). Any section not completed creates no presumption about the patient's preferences for treatment for that section.

In all instances, a health care provider has a responsibility, regardless of a patient's status or their medical orders, to provide treatment for the patient's comfort or to alleviate pain.

For more information: