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Transitions across settings and the Physician Orders for Life-Sustaining Treatment (POLST) program

Susan E. Hickman[1], Christine A. Nelson[2], Esther Smith-Howell[3], and Bernard J. Hammes[1]
[1]*Indiana University, Indianapolis, USA*
[2]*Oregon Health & Science University, USA*
[3]*Gundersen Lutheran Medical Foundation, USA*

Abstract

The POLST (Physician Orders for Life-Sustaining Treatment) program documents patient preferences for resuscitation, medical interventions, antibiotics, and artificial nutrition/hydration as medical orders. The resulting POLST form orders are designed to transfer with patients across treatment settings and are active during transport by emergency services personnel. In order to track the use of the POLST across settings and assess the consistency between prior decisions and POLST orders, data were collected in the La Crosse County region in Wisconsin. Participants were hospitalized patients discharged to one of 9 area nursing facilities or their legally appointed surrogates. POLST forms were abstracted from hospital records for n=190. Additional chart data were abstracted and follow-up interviews were conducted for a subset of n=39. Findings suggest that a substantial minority of POLST forms written in the hospital were used to document code status orders only. A majority (84.6%) of patients who were followed at discharge to nursing facilities had POLST forms. Most POLST forms written in the hospital were unchanged up to 3 weeks after nursing facility admission. Based on interview data with a subset of the sample, a majority (23/32; 71.9%) of POLST orders appeared consistent with prior treatment decisions. Findings suggest that POLST forms generated in the hospital do transfer with patients across settings, but are often used to document code status only. Orders appeared largely consistent with prior decisions. However, further research is needed to assess whether the decisions are fully informed and the reason for any inconsistencies.

Biography

Susan E. Hickman, Ph.D., is an associate Professor in the Indiana University School of Nursing and a Senior Affiliate Faculty Member in the IU Health Fairbanks Center for Medical Ethics. She is also a co-director of the RESPECT (Research in Palliative and End-of-Life Communication and Training) Center at IUPUI and a co-chair of the Indiana Patient Preferences Coalition. Her research focuses on ensuring older adults' treatment preferences are honored during transitions through use of the POLST (Physician Orders for Life-Sustaining Treatment) program and on improving the quality of decisions-making near the end of life.

hickman@iu.edu