



Massachusetts POLST

November 2023 Update

Questions? Visit: www.mass.gov/polst

Contact the Massachusetts POLST Call Center at 844-771-1629

or email: POLSTSupport@uhealthsolutions.org

Please [sign up for quarterly updates](#) on the transition to the POLST in Massachusetts

1. Why is the Commonwealth transitioning from MOLST to POLST?

After over a decade of using the MOLST Form, the Commonwealth is aligning with national standards and best practices, joining dozens of other states using the POLST (portable medical order) form. Massachusetts will implement an electronic registry (ePOLST), a call center, and provide local training and program implementation materials as part of the POLST Program. See enabling legislation [here](#).

2. The ePOLST registry is part of this transition.

When completed, a cloud-based electronic statewide POLST registry, referred to as ePOLST, will:

- enable the end-to-end online completion, signing, validation, revision, and retrieval of the most recent POLST form
- have dedicated provider, patient, patient family and EMS portals

3. We conducted a Limited Clinical Test Phase of the POLST Program in 2023.

Fairview Hospital (Great Barrington), Cooley Dickinson (Northampton) and partners in their communities are participating in the clinical test phase and are the only locations currently writing POLSTs. Healthcare providers and EMS across the state may see a POLST Form that originated in these communities. These communities will continue to use the POLST form until the ePOLST registry is launched (read more below).

The Massachusetts Executive Office of Elder Affairs (EOEA) is completing a formal evaluation of the Test Phase and will share more in 2025. The results of the evaluation will help the agency develop a strong foundation for the ePOLST Registry.

4. If you see a POLST Form (as shown below), please honor it as you would the MOLST Form.

Some key differences from the MOLST Form:

- POLST Form may not be on pink paper (there is no "original" form)
- POLST Form has no expiration date
- POLST Form simplifies resuscitation and treatment orders

A. Cardiopulmonary Resuscitation Orders. Follow these orders if patient has no pulse and is not breathing.	
Pick 1	<input type="checkbox"/> YES CPR: Attempt Resuscitation, including mechanical ventilation, defibrillation and cardioversion. (Requires choosing Full Treatments in Section B) <input type="checkbox"/> NO CPR: Do Not Attempt Resuscitation. (May choose any option in Section B)
B. Initial Treatment Orders. Follow these orders if patient has a pulse and/or is breathing.	
Reassess and discuss interventions with patient or patient representative regularly to ensure treatments are meeting patient's care goals. Consider a time-trial of interventions based on goals and specific outcomes.	
Pick 1	<input type="checkbox"/> Full Treatments (required if choose CPR in Section A). <u>Goal: Attempt to sustain life by all medically effective means.</u> Provide appropriate medical and surgical treatments as indicated to attempt to prolong life, including intensive care. <input type="checkbox"/> Selective Treatments. <u>Goal: Attempt to restore function while avoiding intensive care and resuscitation efforts (ventilator, defibrillation and cardioversion).</u> May use non-invasive positive airway pressure, antibiotics and IV fluids as indicated. Avoid intensive care. Transfer to hospital if treatment needs cannot be met in current location. <input type="checkbox"/> Comfort-focused Treatments. <u>Goal: Maximize comfort through symptom management; allow natural death.</u> Use oxygen, suction and manual treatment of airway obstruction as needed for comfort. Avoid treatments listed in full or select treatments unless consistent with comfort goal. Transfer to hospital only if comfort cannot be achieved in current setting.

5. Anticipated Plan for transitioning MOLST to POLST in the Commonwealth, 2023-2026

Fall 2023	Spring/Summer 2024	Fall/Winter 2024	2025-2026
<ul style="list-style-type: none"> State selects vendor for ePOLST Registry Evaluate and refine POLST Program elements tested in Clinical Test Phase 	<ul style="list-style-type: none"> Develop and test ePOLST Registry Begin distribution of educational materials for consumers and providers Release proposed ePOLST Regulations for public comment 	<ul style="list-style-type: none"> Publish final ePOLST Regulations Soft launch of ePOLST Registry 	<ul style="list-style-type: none"> Begin statewide implementation of the ePOLST Registry Sunset MOLST form

6. Read more about The Massachusetts POLST Program

The mission of the Massachusetts POLST Program is to help people living with serious illnesses and advancing frailty engage in active planning with their clinicians and care teams to ensure that their treatment preferences are understood and honored, regardless of their point of care. The goals are to:

- Establish POLST as an integral part of the advance care planning continuum in Massachusetts. POLST is more than just a Form. POLST is a clinical process that results in documenting patient preferences as a medical order that is honored regardless of care setting.
- Support effective care planning conversations for people with serious illness and advancing frailty. EOEA wants to ensure that all clinical staff have appropriate tools for effective, compassionate, and thorough conversations with patients.
- Ensure clear, reliable documentation about the program. EOEA wants to ensure that all program components are well-documented and easily referenceable.
- Improve integration across all care settings. An electronic registry accessible across care settings will provide a single source of "truth" and will be available for integration into each organization's electronic patient records.
- Align with national standards and best practices. Using the national POLST standard will enable improved portability outside of Massachusetts.
- Continually improve the program. Continuously improve the POLST Program and implement any new learnings.