



Massachusetts Medical Orders for Life-Sustaining Treatment

Frequently Asked Questions - Patients and Families

What is a MOLST form?

MOLST is a medical form similar to a prescription. It contains instructions from a clinician (physician, nurse practitioner or physician assistant) to other health professionals (e.g., nurses, emergency responders), about what life-sustaining medical treatments to try or not try on a patient, based on the patient's own decisions.

What are “life-sustaining treatments”?

These are medical treatments that attempt to keep a person alive. Cardiopulmonary resuscitation (CPR) is one example. Health professionals are required to try life-sustaining treatments if a person's heart or breathing stops, unless there is a medical order (like MOLST) with other instructions.

Who would be suitable for using a MOLST form?

Persons of any age (including children) who have a serious advanced illness or medical frailty and want to express decisions about life-sustaining medical treatments.

Who fills out the MOLST form?

A clinician (physician, nurse practitioner or physician assistant) fills out the MOLST form *after* discussions with the patient and family members or trusted advisors about treatment decisions. Both the clinician and patient sign the MOLST form.

What if the patient lacks capacity to make medical decisions?

If the patient has been declared to lack capacity to make medical decisions (for example, in the event of coma or dementia), only the patient's legally appointed health care agent can make decisions and sign MOLST on the patient's behalf. If no health care agent has been appointed, *seek legal counsel* with questions about who else may be able to make decisions and sign MOLST on the patient's behalf.

When is the right time to consider using MOLST?

- The person has an advanced illness or medical frailty *and*
- The person wants to use the MOLST form *and*
- The person (and ideally their health care agent) has had discussions about their illness, prognosis, values and goals of care, and possible benefits or burdens of treatment with a clinician.

Can a person be required to use the MOLST form?

No. Using the MOLST form must be completely voluntary.



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Is MOLST the same as a "health care proxy"?

No. A health care proxy form is a form used to legally appoint a health care agent. A health care agent is the person legally authorized to make medical decisions for a person in the future, only if the person cannot make medical decisions (e.g. because of unconsciousness, coma, dementia or other mental limitations). *Every adult aged 18 and older in Massachusetts should fill out and sign a health care proxy form.*

If a person has written "final wishes" or a "living will" is that enough?

Those forms may be used as evidence of a person's wishes, but they are not authorized by law in Massachusetts. They do not carry the same authority as a *medical order* like MOLST.

If a person has a "Do Not Resuscitate" (DNR) order, can he or she still use the MOLST form?

Yes. The MOLST form can be used to *refuse or request* resuscitation as well as several other types of life-sustaining medical treatments.

Can a person change their mind about treatments after signing the MOLST form?

Yes. A person can ask for and receive needed medical treatment at any time, no matter what the MOLST form says. A person can also void the MOLST form and ask a clinician to fill out a new form with different instructions at any time.

Who follows MOLST instructions?

Licensed health professionals (nurses, emergency responders, etc.) honor valid medical orders including MOLST.

Who keeps the signed MOLST form?

The patient keeps the MOLST with them in a place where it is easy to find (on the refrigerator, beside the bed, or on the door), and should carry a copy with them when they go outside the home. Copies of MOLST are valid and can be given to health care agents or family members.

Will the MOLST form be honored outside of Massachusetts?

It may be honored in some states but not others. However, a MOLST form is always a good record of a person's treatment preferences.