



Guidance for Health Care Providers and Professionals

The Illinois Department of Public Health (IDPH) Uniform Practitioner Orders for Life-Sustaining Treatment (POLST) Form can be used to create a practitioner order that reflects an individual's wishes about receiving *cardiopulmonary resuscitation (CPR) and life-sustaining treatments such as medical interventions and artificially administered nutrition*. It allows an individual, in consultation with his or her health care professional, to make voluntary advance decisions about CPR and other life-sustaining care in the event the individual's breathing and/or heartbeat stops or based on the patient's medical condition and preferences.

The IDPH Uniform POLST Form is intended to be honored across various settings, including hospitals, nursing homes, and by emergency medical services personnel in the individual's residence or in route to a health care facility. The IDPH Uniform POLST Form should be used to replace the previous IDPH Uniform Do-Not-Resuscitate (DNR)/Practitioner Orders For Life-Sustaining Treatment (POLST) Form Advance Directive. Properly executed prior versions of the IDPH Uniform DNR or the DNR/POLST Advance Directive are still valid. The new IDPH Uniform POLST Form continues to provide individuals with choices regarding administration of CPR and other life sustaining treatments.

The IDPH Uniform POLST Form should be completed only after detailed discussion about treatment preferences with the individual or with the individual's legal representative, if the individual lacks decision-making capacity. Items for discussion with your patient should include the patient's preferences regarding administration of CPR if his or her heartbeat and/or breathing stop or if other life-sustaining treatments are desired, in view of the following:

- **The patient's personal views**
- **The patient's medical condition and related medical considerations**
- **The patient's views regarding use of CPR in the event of an unforeseen accident (such as a car crash or choking on food)**
- **The patient's quality of life issues before and after CPR**
- **The patient's views regarding use of CPR during surgery or other medical procedure**
- **The patient's wishes regarding organ donation**
- **The patient's views regarding use of a mechanical ventilator**
- **The patient's wishes for life-sustaining treatments, including, but not limited to feeding tubes**

An individual is not required to consent to a DNR or POLST order as a condition of treatment or care. DNR or POLST orders are always voluntary and may be changed by a patient or his/her lawful representative at any time.



I. General Considerations

Are health care providers required to honor a DNR or POLST order completed on the IDPH Uniform POLST Form?

Licensed hospitals, certain licensed long-term care facilities such as nursing homes, and licensed emergency medical services personnel must honor the IDPH Uniform POLST Form, or a copy of that document.

How may the new IDPH Uniform POLST Form be obtained?

Forms may be downloaded from the IDPH website at <http://www.dph.illinois.gov/topics-services/health-care-regulation/nursing-homes/advance-directives#publications-publications>.

Are photocopies of the IDPH Uniform POLST Form valid?

Generally, yes. Photocopies of a completed IDPH Uniform POLST Forms are valid. Each health care facility, however, may have different policies on whether copies of DNR or POLST orders completed on a form other than an IDPH Uniform POLST Form are accepted as valid. It is advisable to check with a health care facility regarding its DNR or POLST policy.

II. Completing and Reviewing the IDPH Uniform POLST Form

When is the best time to discuss the form with an individual?

Although it is not always possible, the ideal time for discussion is when the individual is alert and able to fully understand and articulate his or her wishes about end-of-life care.

Who may consent to a DNR or POLST order?

Consent may be obtained from the individual or from another person legally authorized to act on that person's behalf, such as the individual's legal guardian, agent under a power of attorney for health care or a surrogate decision maker. A parent or legal guardian typically may consent to a DNR or POLST order for a minor. Emancipated minors also may consent to a DNR or POLST order.

Does the IDPH Uniform POLST Form require the signature of the person who is consenting to the POLST order?

Yes. The patient or his or her authorized legal representative must sign the section of the form concerning consent to the POLST order.

Why does the individual (or his or her legal representative) and an authorized practitioner sign the IDPH Uniform POLST Form?

The law authorizing the development of the form specifies that an individual (or his or her authorized legal representative) may execute the IDPH Uniform POLST Form. The form is also a practitioner's medical order, therefore it requires the signature of an authorized practitioner.



Is a witnesses required for the IDPH Uniform POLST Form?

Yes. One individual, 18 years of age or older, must witness the signature of the patient or his or her legal representative on the IDPH Uniform POLST Form. A witness may include a family member, friend or health care worker.

Is the order valid if the second page of the form has not been completed?

Yes. The order can be valid even if the second page of the form has not been completed. The second page is for informational purposes only.

What if an individual decides to revoke a DNR or POLST order?

An individual or his or her legal representative can revoke a DNR or POLST order at any time. The DNR or POLST order can generally be revoked in a variety of ways, such as by writing “VOID” in large letters across the first page of the form or by destroying the document and all copies. The revocation decision also should be communicated to the individual’s health care professionals and providers and to family members.

III. Implementing a POLST Order on an IDPH Uniform POLST Form

Does the law address the potential liability of a health care provider or professional in connection with implementing a DNR or POLST order on the IDPH Uniform POLST Form?

Subsection (d) of Section 65 of the Health Care Surrogate Act, 755 ILCS 40/65, provides:

A health care professional or health care provider may presume, in the absence of knowledge to the contrary, that a completed Department of Public Health Uniform POLST Health Care Surrogate Act Order, or a copy of that form or a previous version of the uniform form, is valid. A health care professional or health care provider, or an employee of a health care professional or health care provider, who in good faith complies with a cardiopulmonary resuscitation (CPR) or life-sustaining treatment order, Department of Public Health Uniform POLST form, or a previous version of the uniform form, made in accordance with this Act is not, as a result of that compliance, subject to any criminal or civil liability, except for willful and wanton misconduct, and may not be found to have committed an act of unprofessional conduct.

Are DNR or POLST orders ever suspended during a surgery or other medical procedures?

Certain health care providers in Illinois have written policies indicating that a DNR or POLST order may be suspended during a surgical procedure after discussion with the individual or the individual’s legal representative. Further, a patient’s wishes regarding applicability of a DNR or POLST order during surgery or in the event of an unforeseen event (such as a car crash or choking on food) may be placed on the IDPH Uniform POLST Form in the space designated for “Optional Additional Orders.”

The Illinois Department of Public Health has provided this guidance document for general informational purposes. Because each individual situation is different and key facts can so often change the outcome, additional questions should be directed to a licensed attorney, as the Department cannot provide legal advice.