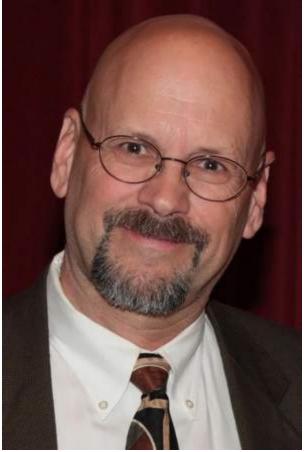
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Ken Brummel-Smith and Marshall Kapp: Make sure you get the treatment you

want

Written by Ken Brummel-Smith and Marshall Kapp My View Apr. 14

tallahassee.com



Ken Brummel-Smith

ON THE WEB

Tuesday is National Healthcare Decisions Day. View a video of Dr. Ken Brummel-Smith discussing POLST ay bit.ly/FSUPOLST. Learn more about POLST at med.fsu.edu/medlaw/POLST.

A national uproar resulted recently when an 87-year-old woman collapsed in an independent living center and a staff member refused to attempt CPR because of a facility policy. As it turns out, the woman's daughter agreed with the lack of CPR and said her mother would not have wanted resuscitation. But could the trauma and drama of this California event have been avoided? A movement of Florida leaders in medicine, nursing, hospitals, hospices, long-term care and the law is seeking to do just that.

Death is inevitable, yet we rarely plan for it. Many people enter the final stage of life without a will pertaining to property disposition or a discussion about which medical treatments they do or don't want. Nationally only about 20 percent of elders have completed an advance care directive or living will. Among younger people the percentage is even smaller.

New research shows that having an advance directive increases the chances that you will get the treatment you want (and only that treatment), will receive more treatment oriented to comfort

(palliative care) and will die at home rather than in a hospital — and that the care will cost less.

Proper planning for advance care consists of three stages. First is reflecting on your goals and wishes for end-of-life care and discussing them with your family and physician. Helath-care providers need to know what your goals are: to be at home, to be free of pain and so on. Second is completing an advance directive (such as a living will or the Five Wishes document) and naming a health-care surrogate to speak for you when you no longer can speak for yourself.

These two steps are crucial, but they are not enough.

What Florida needs is a third step: the ability of doctors to complete a set of medical orders to ensure that your wishes are followed, even if you move from one site of care to another. The Physician Orders for Life Sustaining Treatment (POLST) form does just that.

Studies have shown that, while advance directives increase the chance that your wishes will be followed, the POLST form is even more effective for someone who has an advanced illness.

The POLST form is not necessarily used to limit medical treatments. In fact, it is the best way to ensure that certain medical treatments will be used if you desire them. Fifteen states have formally approved the use of a POLST-type form.

Florida's Legislature and the pertinent regulatory agencies need to approve the POLST form for use here so seriously ill residents can be assured they'll get the treatments they want but not the aggressive medical interventions they

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want to avoid.

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