

Maryland MOLST

Medical Orders for Life-Sustaining Treatment

Maryland MOLST Form and Processes

Maryland MOLST Training Task Force

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What is Maryland MOLST?

Medical Orders for Life-Sustaining Treatment

- Maryland MOLST is a standardized medical order form covering options for cardiopulmonary resuscitation and other life-sustaining treatments
- It is a portable and enduring order form
- The orders are valid across the continuum of care in all health care settings and in the community throughout Maryland

What are the benefits of MOLST?

- Consolidates important information into orders
- It helps to standardize definitions
- Reminds patients and providers of available options
- Helps to increase the likelihood that a patient's wishes to accept, limit, or decline life-sustaining treatments are honored

Maryland MOLST Form

INSTRUCTIONS

Completing the Form: The physician or nurse practitioner shall select only 1 choice in Section 1 and only 1 choice in any of the other Sections that apply to this patient. If any of Sections 2-9 do not apply, leave them blank. Use Section 9 to document any other orders related to life-sustaining treatments. The order form is not valid until a physician or nurse practitioner signs and dates it. Each page that contains orders must be signed and dated. A copy or the original of every completed MOLST form must be given to the patient or authorized decision maker within 48 hours of completion of the form or sooner if the patient is discharged or transferred.

Selecting CPR (Resuscitation) Status: EMS Option A-1 – Intubate, Option A-2 – Do Not Intubate, and Option B include a set of medical interventions. You cannot alter the set of interventions associated with any of these options and cannot override or alter the interventions with orders in Section 9.

No-CPR Option A: Comprehensive Efforts to Prevent Cardiac and/or Respiratory Arrest / DNR if Arrest – No CPR. This choice may be made either with or without intubation as a treatment option. Prior to arrest, all interventions allowed under *The Maryland Medical Protocols for EMS Providers*. Depending on the choice, intubation may or may not be utilized to try to prevent arrest. Otherwise, CPAP or BiPAP will be the only devices used for ventilatory assistance. In all cases, comfort measures will also be provided. No CPR if arrest occurs.

No-CPR Option B: Supportive Care Prior to Cardiac and/or Respiratory Arrest. DNR if Arrest Occurs – No CPR. Prior to arrest, interventions may include opening the airway by non-invasive means, providing passive oxygen, controlling external bleeding, positioning and other comfort measures, splinting, pain medications by orders obtained from a physician (e.g., by phone or electronically), and transport as appropriate. No CPR if arrest occurs.

The DNR A-1, DNR A-2 (DNI) and DNR B options will be authorized by this original order form, a copy or a fax of this form, or a bracelet or necklace with the DNR emblem. EMS providers or medical personnel who see these orders are to provide care in accordance with these orders and the applicable *Maryland Medical Protocols for EMS Providers*. Unless a subsequent order relating to resuscitation has been issued or unless the health care provider reasonably believes a DNR order has been revoked, every health care provider, facility, and program shall provide, withhold, or withdraw treatment according to these orders in case of a patient's impending cardiac or respiratory arrest.

Location of Form: The original or a copy of this form shall accompany patients when transferred or discharged from a facility or program. Health care facilities and programs shall maintain this order form (or a copy of it) with other active medical orders in the patient's medical record. At the patient's home, this form should be kept in a safe and readily available place and retrieved for responding EMS and health care providers before their arrival. The original, a copy, and a faxed MOLST form are all valid orders. There is no expiration date for the MOLST or EMS DNR orders in Maryland.

Reviewing the Form: These medical orders are based on this individual's current medical condition and wishes. Patients, their authorized decision makers and attending physicians or nurse practitioners shall review and update if appropriate the MOLST orders annually and whenever the patient is transferred between health care facilities or programs, is discharged, has a substantial change in health status, loses capacity to make health care decisions, or changes his or her wishes.

Updating the Form: The MOLST form shall be voided and a new MOLST form prepared when there is a change to any of the orders. If modified, the physician or nurse practitioner shall void the old form and complete, sign, and date a new MOLST form.

Voiding the Form: To void this medical order form, a physician or nurse practitioner shall draw a diagonal line through the sheet, write "VOID" in large letters across the page, and sign and date below the line. A nurse may take a verbal order from a physician or nurse practitioner to void the MOLST order form. Keep the voided order form in the patient's active or archived medical record.

Revoking the Form's DNR Order: In an emergency situation involving EMS providers, the DNR order in Section 1 may be revoked at any time by a competent patient's request for resuscitation made directly to responding EMS providers.

Bracelets and Necklaces: If desired, complete the paper form at the bottom of this page, cut out the bracelet portion below, and place it in a protective cover to wear around the wrist or neck or pinned to clothing. If a metal bracelet or necklace is desired, contact Medic Alert at 1-800-432-5378. Medic Alert requires a copy of this order along with an application to process the request.

How to Obtain This Form: Call 410-706-4367 or go to dnhm.maryland.gov/marylandmolst



Use of an EMS DNR bracelet is OPTIONAL and at the discretion of the patient or authorized decision maker. Print legibly, have physician or NP sign, cut off strip, fold, and insert in bracelet or necklace.

DNR A-1 Intubate DNR A-2 Do Not Intubate DNR B

Pt. Name _____ DOB _____

Phys./NP Name _____ Date _____

Phys./NP Signature _____ Phone _____

How does MOLST fit into Maryland's existing processes?

- Maryland MOLST replaces the MIEMSS DNR order form and the Life-Sustaining Treatment Options (LSTO) form that was previously used primarily in nursing homes
- The CPR orders guide interventions in case of a cardiac and/or pulmonary arrest both by EMS providers and in health care settings

What is the Life-Sustaining Treatment Options form?

- Documents the results of a conversation between a health care professional and the patient or authorized decision maker regarding life-sustaining treatments
- It was required to be offered to all nursing home patients, but was voluntary in other settings
- Effective October 1, 2011, the LSTO form is no longer required in Maryland, but it may be continued voluntarily

How does Maryland MOLST differ from the LSTO form?

- MOLST incorporates most of the same principles and content of the LSTO form and process
- The difference is that MOLST is a portable and enduring medical order
- MOLST does not change the steps involved in health care decision making

What are MOLST orders based on?

- An individual's wishes and goals (sometimes, as interpreted by an authorized decision maker)
- Current medical situation and prognosis
- Potential treatment options
- Rarely, determination of medical ineffectiveness



What is the certification for the basis of these orders?

- The practitioner is certifying that the order is entered as a result of a discussion with, and the informed consent of, the:
 - Patient, or
 - Patient's health care agent as named in the patient's advance directive, or
 - Patient's guardian of the person, or
 - Patient's surrogate, or
 - Minor's legal guardian or another legally authorized adult

What is the certification for the basis of these orders?

- “I hereby certify that these orders are based on”:
 - Instructions in the patient’s advance directive; or
 - other legal authority in accordance with all provisions of the Health Care Decisions Act. All supporting documentation must be contained in the patient’s medical records.

What if the patient declines or is unable to make a selection?

- An individual or ADM has the right to decline to discuss life-sustaining treatments and the right to not make a decision
- The patient's or authorized decision maker's participation in the preparation of the MOLST form is always voluntary
- If the individual or ADM declines or is unable to make a selection, mark "Attempt CPR" in section 1

What if the patient declines or is unable to make a selection?

- “Mark this line if the patient or authorized decision maker declines to discuss or is unable to make a decision about these treatments. The patient’s or authorized decision maker’s participation in the preparation of the MOLST form is always voluntary. If the patient or authorized decision maker has not limited care, except as otherwise provided by law, CPR will be attempted and other treatments will be given.”

Section 1: CPR Status

- Attempt CPR: If cardiac or pulmonary arrest occurs, CPR will be attempted
- No CPR, Option A-1, Intubate: Comprehensive efforts to prevent arrest, including intubation
- No CPR, Option A-2, Do Not Intubate: Comprehensive efforts to prevent arrest; do not intubate, but use CPAP or BiPAP
- No CPR, Option B: Palliative and supportive care

Section 2: Artificial Ventilation

- Accept artificial ventilation indefinitely, including intubation, CPAP, and BiPAP
- Time limited trial of intubation
- Time limited trial of CPAP and BiPAP, but no intubation
- No artificial ventilation: No intubation, CPAP, or BiPAP

Section 3: Blood Transfusion

- Accept transfusion of blood products, including whole blood, packed red blood cells, plasma, or platelets
- No blood transfusions



Section 4: Hospital Transfers

- Accept hospital transfer
- Hospital transfer only for limited situations, including severe pain or severe symptoms that cannot be controlled otherwise
- No hospital transfer, but treat with options available outside of the hospital

Section 5: Medical Workup

- Accept any medical tests
- Limited medical tests are acceptable when necessary for symptomatic treatment or comfort
- No medical testing for diagnosis or treatment

Section 6: Antibiotics

- Accept antibiotics
- Oral antibiotics only (not IV or IM)
- Oral antibiotics for relief of symptoms only
- No antibiotics



Section 7: Artificially Administered Fluids and Nutrition

- Accept artificial fluids and nutrition, even indefinitely
- Accept time-limited trial of artificial fluids and nutrition
- Accept a time-limited trial of artificial hydration only
- No artificial fluids or nutrition

Section 8: Dialysis

- Accept dialysis, including hemodialysis and peritoneal dialysis
- Accept time-limited trial of dialysis
- No dialysis

Section 9: Other Orders

- This section may be used to indicate preferences for other life-sustaining treatments, such as chemotherapy and radiation
- It should not be used for ambiguous phrases such as "comfort care"

Does a specific time limit need to be included?

- No, specific time limits do not need to be selected

Does a choice have to be made in each section?

- Section 1, CPR status, must be completed for everyone
- Sections 2 - 9 are only completed if the patient or authorized decision maker makes a selection regarding that specific life-sustaining treatment and/or if specific treatments are determined to be medically ineffective

Who may sign Maryland MOLST?

- Any physician that has applied for and received an active Maryland physician's license may sign MOLST
- Nurse practitioners who are licensed in Maryland may sign MOLST
- Physician assistants with an active Maryland's license may sign MOLST
- Medical residents and interns may sign MOLST while performing assigned duties

What is the practitioner's responsibility when completing MOLST?



To ensure that the orders are compatible

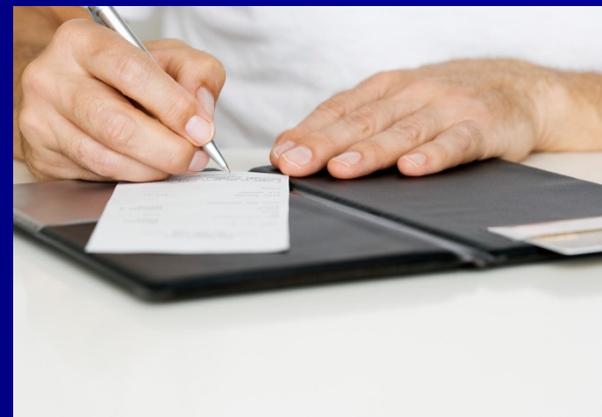
- For instance, choosing full resuscitation is inconsistent with refusing hospital transfer from an assisted living facility

Who completes the Maryland MOLST order form?

- The physician, nurse practitioner, or physician assistant who signs the Maryland MOLST order form is responsible for the orders
- Before signing this or any order sheet, the practitioner must validate the accuracy of the orders
- Physicians, NPs, and PAs shall not pre-sign any blank order forms

Should the practitioner initial the choices on the MOLST order form?

- It is strongly recommended that the practitioner initial the specific treatment orders on the MOLST form
 - Checking or otherwise marking the orders rather than initialing them is permitted



What constitutes a valid order?

- A practitioner's signature and date are required to validate the Maryland MOLST order
 - To assist in locating the practitioner and facilitating communication, the phone number and license number should be completed
 - If the license number and phone number are blank, it is still a valid order

What if the practitioner that signs MOLST is not on staff?



- Even if the practitioner who signed the MOLST order is not on staff at the current facility or program, the MOLST orders are still valid

Can nurses accept verbal orders for the Maryland MOLST form?

- A nurse may accept verbal orders for life-sustaining treatments, but the nurse must document these orders on an order form other than MOLST
- MOLST orders are not valid until signed by a physician, NP, or PA
- EMS providers cannot follow unsigned or verbal MOLST orders
- A nurse may take a verbal order to void the MOLST order form

May sections of Maryland MOLST be struck through?

- As with other preprinted orders, sections that are not relevant to the patient's current medical condition can be left blank or a line may be drawn through a section that is intentionally left blank

What if a patient changes his or her mind?

- Patients who have the capacity to make health care decisions may change their advance directive and ask their physician, NP, or PA to revise their Maryland MOLST order form at any time



What if a patient loses capacity to make health care decisions?

- If there is no health care agent or guardian, then a surrogate decision maker is used
- A surrogate decision maker is someone who was not appointed by the patient, but who becomes the decision maker by default when the patient loses capacity to make his or her own health care decisions

What is the surrogate's decision based on?

- Any guidance from a surrogate decision maker must be within the surrogate's legal authority and consistent with the patient's known wishes, including any relevant instructions in an advance directive

May a surrogate decision maker withhold or withdraw a LST?

- A surrogate may withhold or withdraw a life-sustaining treatment if the patient has been certified by physicians to be in a qualifying condition:
 1. Terminal condition
 2. End-stage condition
 3. Persistent vegetative state
- Or two physicians certify that a treatment is medically ineffective

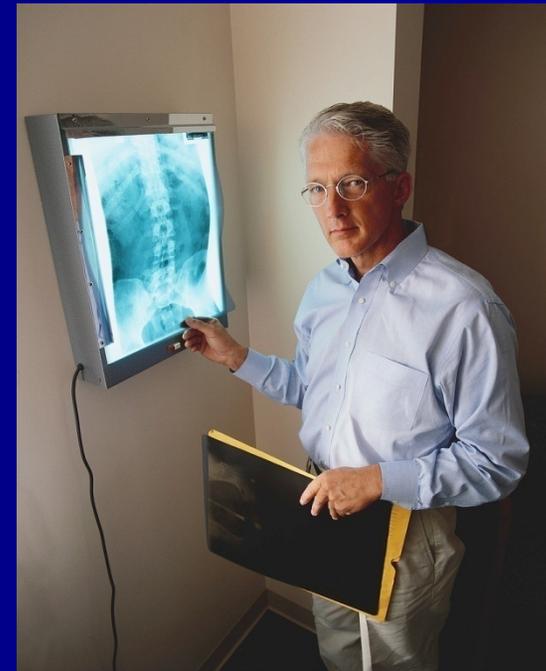
Does MOLST mandate using specific treatments?



Maryland MOLST does not mandate that treatment options be used regardless of their relevance to a patient's situation

Is a practitioner obliged to render medically ineffective treatment?

- Under the Health Care Decisions Act, a health care practitioner is not obliged to recommend or render treatments that are medically ineffective



When shall Maryland MOLST orders be reviewed?

1. Annually
2. Patient is transferred between health care facilities, the receiving facility reviews it
3. Patient is discharged
4. Patient has a substantial change in health status
5. Patient loses capacity to make health care decisions
6. Patient changes his or her wishes

How are MOLST orders revised?

- Void the existing MOLST form and complete a new MOLST form to reflect the current orders

How is MOLST voided?

- A physician, NP, PA, or nurse should void the form by drawing a single diagonal line across the page, writing "VOID" in large letters across the page, and then signing and dating below the line
- A nurse may take a verbal order to void the MOLST form
- The voided order form shall be kept in the patient's active or archived medical record

Can a facility add their logo to the Maryland MOLST form?

- A health care provider or practitioner may not reformat the MOLST form, change the wording, or add its name or logo to the form

Is the Maryland MOLST form printed on colored paper?

No, the Maryland MOLST form is on white paper



Is Maryland MOLST a two-sided or two-page order form?

- The Maryland MOLST order form is valid in either a two-sided or a two-page format

Is a copy of MOLST a valid order?

- The original, a copy, and a faxed MOLST form are all valid orders



Do MOLST orders expire?

- Maryland MOLST orders do not expire



Does the patient get a copy of a completed MOLST order form?

- Yes, within 48 hours of its completion, the patient or authorized decision maker shall receive a copy or the original of a completed Maryland MOLST form
- If the patient leaves a facility or program in less than 48 hours, the patient shall have a copy or the original of MOLST when he or she is discharged or transferred

What happens when the patient is discharged or transferred?

- The Maryland MOLST form shall accompany a patient when transferred to a new facility or program
- EMS providers shall take a copy or the original MOLST order form when the patient is transported
- The transferring facility or program shall keep the original or a copy of MOLST in the patient's medical record

What are the legal requirements for completing Maryland MOLST?

- The Maryland MOLST form must be completed or an existing form reviewed when a patient is admitted to:
 1. Nursing home
 2. Assisted living facility
 3. Home health agency
 4. Hospice
 5. Kidney dialysis center
 6. Hospitals (for certain patients)

What are the legal requirements for completing MOLST in hospitals?

- All hospitalized inpatients who are transferred to another facility in Maryland (nursing home, assisted living facility, home health agency, hospice, and kidney dialysis center, or another hospital) must have a completed Maryland MOLST form by discharge
- It is not required for Emergency Department, observation, or short-stay patients

How is “patient” defined?

- “Patient” does not include someone:
 - Whose primary diagnosis for the current treatment is a psychiatric disorder, except for dementia, delirium, or mental disorders due to a medical condition; or
 - Whose primary diagnosis is related to a current pregnancy; or
 - Who is younger than 18 years old and who is unlikely to require a life-sustaining treatment

What other patients have a MOLST order form completed?

- All patients who have limitations on CPR must be given a completed MOLST form upon discharge
- Any patient may request that a physician, nurse practitioner, or physician assistant complete a MOLST order form to reflect his or her wishes

Is there a patient worksheet for Maryland MOLST?

- Yes, the Health Care Decision Making Worksheet is a voluntary form that can be used to guide current medical decision making
- It is not an advance directive or medical order form
- It includes the individual's goals of care, the name of the authorized decision maker, and the patient's signature

Where is the Health Care Decision Making Worksheet kept?

- If the patient is in a facility, the Health Care Decision Making Worksheet is kept in the patient's medical record
- A copy of the worksheet should be given to the patient or authorized decision maker



What if two differing versions of Maryland MOLST coexist?

- The most recently dated and signed order takes precedence
- Disparities between the versions shall be promptly reconciled

Will older versions of the EMS DNR orders still be valid?

- All previous versions of the EMS DNR order forms never expire
- Older EMS DNR forms should be updated to the Maryland MOLST order form when the orders are reviewed



Will a colored DNR wrist band be honored by EMS providers?

- MIEMSS personnel must follow “Maryland Medical Protocols for EMS Providers”
- EMS providers will not honor colored wrist bands, but will honor bracelets and necklaces that are approved under their protocols



Which bracelets and necklaces are honored by EMS providers?

- At the bottom of the one-page MOLST instruction form, there is a paper bracelet that may be completed and cut out to place in a vinyl bracelet
- A bracelet or necklace may be ordered from Medic Alert to indicate the patient's or authorized decision maker's choice regarding CPR



Where is Maryland MOLST kept in a health care facility?

- MOLST shall be kept with the other active medical orders in the patient's medical record
- It must be readily available and retrieved for responding EMS and health care providers before their arrival

Where is the MOLST form kept in a patient's home?

- In a patient's home, the Maryland MOLST form should be kept at the bedside, behind the bedroom door, above the bed, or on the refrigerator door

For More Information

marylandmolst.org

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