

SAMPLE

Physician Orders for Scope of Treatment (POST) Form Policy and Procedure

[*Name of health care facility*] respects the right of patients to accept or refuse medical treatment, including life-sustaining treatments. The Physician Orders for Scope of Treatment (POST) form is used throughout West Virginia to communicate physician orders for life-sustaining treatments based on patients' preferences. The order form addresses decisions related to cardiopulmonary resuscitation, cardiac monitoring, intravenous fluids, tube feeding, and antibiotics. It is the policy of [*Name of health care facility*] that physician orders for life-sustaining treatment based on patients' preferences are to be respected by all health care personnel working at [*Name of health care facility*].

Procedure

1. When a patient is admitted with a completed POST form, the unit clerk is responsible for placing the original in the active medical record as the first page. The attending physician and/or his/her designee shall review the POST form with the patient, or if the patient lacks decision-making capacity his medical power of attorney representative or health care surrogate. The physician shall enter orders into the active medical record consistent with those in the POST form in accordance with current patient wishes. If the patient/medical power of attorney/surrogate wishes to change the POST form, the original POST form shall be voided, and a new one completed.
2. At discharge, the unit clerk is responsible for placing a photocopy of the current POST form in the advance directive section of the closed medical record. The original POST form shall be transferred with the patient to another facility or to home.
3. Prior to discharge to another facility (i.e., long-term care facility, personal care home, home with home health care, another hospital, or home with hospice treatment), the receiving facility shall be notified of the existence of the POST form.
4. At the time of discharge from the hospital for patients who are seriously ill, a POST form should be completed by the attending physician and/or his/her designee for patients who do not already have a completed POST form.
5. If the patient expires during the admission, the original POST form is to be placed in the correspondence section of the closed medical record by Health Information Management.
6. If a POST form is rewritten or voided during the admission, the attending physician or his/her designee is responsible for voiding the non-current version of the form in Section G of the form and writing the word "VOID" across the first page of the form. The voided POST form shall be placed in the correspondence

section of the closed medical record by Health Information Management.

7. Patients with do-not-resuscitate orders issued during the admission should have West Virginia Do Not Resuscitate (DNR) cards completed at the time of discharge if they are not being issued a POST form or if they will be outside the home and want a more portable form of DNR identification in addition to the POST form.