

## MOLST Overview and Frequently Asked Questions

MOLST is a medical order form (similar to a prescription) that relays instructions between health professionals about a patient's care. MOLST is based on an individual's right to accept or refuse medical treatment, including treatments that might extend life.

MOLST is not for everyone. In Connecticut patients approaching the end stage of a life limiting illness or in a condition of advance progressive frailty may discuss filling out a MOLST order with their clinician. [The patient's decision to use the MOLST form is and must always be voluntary.](#)

MOLST is different from a **health care representative form**. It is recommended that all *adults aged 18 and older complete a health care representative form* to name the person who can make medical decisions for them in the future event of an unexpected illness or accident. It is also suggested that anyone with a MOLST form also fill out the health care representative form.

The process before filling out MOLST requires discussions between the signing clinician (physician, nurse practitioner or physician assistant), the patient, and if the patient wishes, his/her loved ones about:

- The patient's current medical condition
- What could happen next
- The patient's values and goals for care and
- Possible risks and benefits of treatments that may be offered.

After these discussions, the MOLST form may be filled out and signed by the clinician to instruct other health professionals about the use of life-sustaining treatments for the patient, based on the patient's own decisions. The patient or their legally authorized representative (if the patient is unable to sign the order) also signs the MOLST form and another person witnesses the signatures of both parties and also signs the MOLST form.

The signed MOLST form stays with the patient and is to be honored by health professionals across all settings and the continuum of care.

### ***Why the MOLST form isn't considered an Advance Directive?***

- The MOLST form is not an advance directive because it is a medical document that contains actionable medical orders that are effective immediately based on a patient's current medical condition. Advance directives, including health care representatives and living wills, are legal documents that are effective only after the patient has lost capacity. In other words, a health care representative can make decisions for a person only after he or she has been determined to lack capacity; a living will is relevant only after the patient can no longer be consulted. A MOLST form, on the other hand, is a medical document signed by both the clinician and the patient, and is effective as soon as it is signed, regardless of a patient's capacity to make decisions.

### ***Is the MOLST form different from other medical orders?***

- The MOLST form is a standardized medical order form that contains valid medical orders. These orders are the same as any other medical orders that are followed by health professionals. Policies and procedures about honoring MOLST orders should be integrated into the institution's standard practices for following medical orders.

### ***Is MOLST used the same way as a Health Care Representative form?***

- No. Use of a **Health Care Representative** form to appoint one's Health Care Agent or Health Care Proxy is recommended for all adults, ages 18 and above, healthy or sick. The purpose, timing of use, intended users and content of the MOLST form are all very different **from using the Health Care Representative form. (Now that the MOLST form is in use, is the Connecticut DNR form /bracelet still valid?**
- Yes, the Connecticut DNR form /bracelet *remains valid*. The form/bracelet can still be used to document that a valid DNR order exists for a patient, and it will be honored by EMTs in outpatient settings. Because the MOLST (an actual medical order form) can be filled out to indicate "DNR" if that is the patient's decision, the MOLST form can be used instead of the bracelet/DNR form. In some situations, patients may have both the MOLST and the bracelet/DNR form
- **Can a person change his or her mind about treatment after they fill out the MOLST?** Yes. A person can also void the MOLST form and/or ask a physician, nurse practitioner or physician assistant to fill out a new form with different instructions at any time.

## ***Questions About the Format and Content of the MOLST Form***

### ***Does the MOLST form have to be bright green?***

- Yes. In order for the MOLST form to be valid it must be executed on the bright green form. The bright green form makes the MOLST order easy to find and EMTs as well as other first responders are trained to look for the bright green MOLST form in outpatient settings. Since the form is transferrable across all settings, it is strongly recommended that the MOLST order stay with the person at all times.

### ***Why shouldn't blank MOLST forms be given to or mailed to patients to preview or consider on their own?***

- The MOLST form is a standardized medical order that relays instructions from one licensed health professional to another. It is designed specifically for documenting decisions patients make in the context of appropriate discussions about life-sustaining treatment choices with their clinician that are based on the patient's prognosis, treatments, personal values and goals of care. It must be completed and filled out by a MD/DO, APRN, or PA *after* their discussion(s) with the patient and the patient's loved ones, or if the patient is unable to communicate for themselves, the patient's legally authorized representative

**Does every section of the MOLST form need to be filled out for the form to be valid?**

- Yes, In order for the MOLST to be valid all sections must be filled in and legible.

**When does the MOLST form expire?**

- If no expiration date is indicated on the form (no expiration date is required), the MOLST form does not expire.

**Will the CT MOLST form be honored in other states?**

- The MOLST instructions may be honored in some states, but not in others. However, a MOLST form is always a good record of a person's treatment decisions. Likewise, MOLST/POLST/POST forms from other states are not considered valid medical orders in Connecticut but they may be considered as evidence of a patient's preferences. Patients who reside in (or spend time regularly in) multiple states are recommended to discuss MOLST/POLST/POST orders with clinicians in both states.

**Where should the MOLST form be kept when the patient is inpatient or resides in a skilled nursing facility?**

- Each facility should develop and abide by its own policy.

**Questions About Who (health professionals) Should Discuss MOLST Forms with Patients**

**Which types of health professionals should talk to patients about MOLST decisions?**

- Discussions with patients and families about life-sustaining treatment decisions that may be documented on a MOLST form are *clinical discussions, to be conducted by a MOLST trained physician, nurse practitioner or physician assistant.*

When suitable, based on the patient's current medical condition, MOLST trained physicians, nurse practitioners or physician assistants—regardless of setting of care, specialty or length of relationship with the patient, may wish to talk about advance care planning with patients and document patients' treatment preferences. Such conversations may include discussing and/or filling out a MOLST form.

Other health professionals (e.g. nurses or social workers) may discuss advance care planning and MOLST with patients; however, discussions that involve medical treatment decisions to be documented on the MOLST form are considered *informed consent* conversations and must be conducted by a physician, nurse practitioner or physician assistant.

### ***What is the process for introducing the option of using a MOLST form?***

- It starts with a person who has a serious life limiting advanced illness or is in a condition of advanced progressive frailty and a health professional talking about health care planning. This may or may not lead to the person choosing to document decisions about life-sustaining treatment using the MOLST form.

### ***Why does a clinician (physician, nurse practitioner, physician assistant) need to personally engage in these discussions?***

- Conversations that result in signing a MOLST form must include discussions about the person's health status, prognosis, personal values and goals of care, and the potential benefits and burdens of treatments. **These are “informed consent” discussions** that must be conducted by a clinician. The clinician signature on the MOLST form attests that the form was filled out to reflect the discussions he or she had with the patient.

### ***Questions About who (health professionals) should sign patients' MOLST forms***

#### ***Who fills out the MOLST form?***

- A clinician (physician, nurse practitioner, or physician assistant) and the person with advanced illness (or the person's legally authorized representative) if the person lacks capacity.

#### ***Which types of clinicians can sign a MOLST form?***

- In Connecticut MOLST forms can be signed by MOLST trained physicians, nurse practitioners or physician assistants. However, some APRNs and PAs may be limited in their scope of practice (e.g. not able to sign MOLST forms) in some situations, according to the policies and procedures of their practice settings. It is the clinician's responsibility to know if his/her scope of practice includes completing a MOLST form with a patient. By signing a patient's MOL ST form, the clinician attests that the contents of the MOLST form reflect the patient's decisions based on the clinician's discussion with the patient.

#### ***Can a facility Medical Director sign a patient's MOLST form?***

- Yes, but only if the Medical Director is a MOLST trained physician, nurse practitioner, or physician assistant *and* is the clinician who personally discussed MOLST choices with the patient.

#### ***Who keeps the signed MOLST form?***

- The person with the advanced life limiting illness keeps the MOLST form with them, in a place where it is easy to locate (e.g. on the refrigerator, beside the bed, or on the door), and it should be carried with them outside the home.

## Questions About Which Patients are Suitable for MOLST Use

### **What persons are most suitable for using MOLST forms?**

- Persons of any age (including children) who are at the end stage of a life limiting illness or in a condition of advanced progressive frailty who want to express their preferences about life-sustaining medical treatments.

### **At what stage of illness is it appropriate to consider using the MOLST form?**

- Every person who is at the end stage of a life limiting illness or in a condition of advanced progressive frailty should be offered the opportunity to fill out a MOLST form if:
  1. It is medically appropriate, based on the person's current health condition as determined by a physician or APRN *and*
  2. The person wants to express preferences about life-sustaining medical treatments.

### **Should all seniors/elders have a MOLST form, or is there a certain age when the MOLST form becomes appropriate?**

- **The MOLST form is not suitable for use by everyone, nor is it for use only with seniors/elders.** The MOLST form is typically most suitable for persons of any age at the end stage of a life limiting illness or in a condition of advanced progressive frailty. If a patient's current medical condition would prompt a conversation about DNR orders - then a MOLST discussion may be suitable. Second, all persons for whom a MOLST discussions are suitable are not required to use a MOLST form to document that discussion. Ideally, the option of using a MOLST form to document treatment decisions will be presented for consideration to all suitable patients - but **a patient's choice to use the MOLST form must always be voluntary.**

### **Can MOLST forms be used with children/pediatrics?**

- Yes. If the patient is under 18 years old, the child's parent can sign the MOLST form. Absent a parent, a legal guardian who has been appointed by a probate court can sign a MOLST. In a situation of conflict among the patient's parents, the decision about who can sign the MOLST form will need to involve legal consultation.

## Questions About Who Can Sign the MOLST Form on Behalf of a Patient?

### **If a patient has both an appointed health care agent and a guardian, which person can sign the MOLST form, if the patient has lost capacity to make health care decisions?**

- The health care representative is the one with the authority to make medical care decisions on the patient's behalf, including signing the MOLST form, unless the guardianship order expressly provides otherwise.

### ***Who can sign the MOLST form on a patient's behalf?***

- If the patient lacks capacity, the patient's legally authorized representative may sign the MOLST form on the patient's behalf. **For the purposes of a MOLST, Legally Authorized Representative means a Health Care Representative appointed in accordance with §19a-576 and §19a-577 of the CT General Statutes, a parent when the patient is a minor, or guardian appointed by the Probate Court.**
- If the patient is 18 years old or older and has capacity to make health care decisions, only the patient can sign his or her own MOLST form.
- If the patient is under 18 years old, his or her parent or court appointed legal guardian can sign the MOLST form. In a situation of conflict among the patient's parents, the decision about who can sign the MOLST form will need to involve legal consultation.
- If the patient has been declared to lack capacity to make health care decisions, the patient's appointed health care representative has authority to make medical care decisions and sign the MOLST form on his or her behalf.

### ***Can a spouse or next of kin or other close family friend (informal or default surrogate) sign the MOLST form, if the patient has lost capacity to make health care decisions?***

- **Yes, if the person is also the patient's legally authorized representative appointed in accordance with §19a-576 and §19a-577 of the CT General Statutes.** Informal or default surrogates are not authorized to sign a patient's MOLST form regardless of their relationship to the patient.

### ***Who keeps the signed MOLST form?***

- The person with advanced illness and/or chronic progressive frailty keeps the MOLST form with them, in a place where it is easy to locate (e.g. on the refrigerator, beside the bed, or on the door), and it should be carried with them outside the home.

## ***Questions about Honoring MOLST Forms***

### ***Who honors MOLST instructions?***

- Health care professionals (nurses, physicians, etc.) honor valid medical orders, including MOLST, in any setting where clinical care may be provided (including in the patient's home).

### ***What if the MOLST form says "Attempt Resuscitation" but also says "Do Not Intubate and Ventilate" and/or "Do Not Transfer to Hospital (unless needed for comfort)?"***

- If a person elects "Attempt Resuscitation" in Section A of the MOLST form, that decision "trumps" other decisions indicated in Sections B and C, and the patient may be intubated and

ventilated and transferred to the hospital. The form should not be filled out in a way that presents conflict.

***Can a hospice patient select “Do Not Transfer to Hospital (unless needed for comfort)?”***

- Yes. Every patient has the option for transfer to the hospital if it is medically indicated and needed or desired to maintain the patient’s comfort.

***Questions About Conflicting Forms or Treatment Instructions***

***What if there are multiple MOLST forms for the patient, and they say different things?***

- Follow the most recent orders.

***What if a patient’s family member or significant other disagrees with the instructions on the MOLST form?***

- If a patient has capacity to make health care decisions, the MOLST form should be honored. If the patient loses capacity, the patient’s health care representative has the legal right to make medical decisions, but the health care representative should always consider the patient’s wishes and goals of care. If those wishes are not known, then the health care representative’s understanding of the patient’s best interest should guide the decisions. If there is reason to question the motives of the health care representative or there is conflict, consultation with a care team or ethics committee would be recommended. In outpatient settings, EMTs are trained not to try to resolve conflict situations if they arise; EMTs would begin treatment and transport the patient to the hospital where the conflict would need to be resolved.

***Questions About Changes to the MOLST Form***

***Can a person change his or her mind about treatment after they fill out the MOLST?***

- Yes. A person can ask for and receive needed medical treatment at any time, no matter what the MOLST form says. Also, a person can void the MOLST form. In addition, a person can ask a physician, nurse practitioner or physician assistant to fill out a new form with different instructions at any time.

***Does the patient have to go back to the original clinician to re-discuss the MOLST?***

- No. Changes to the MOLST form may be discussed with any physician, nurse practitioner or physician assistant providing care to the patient.

***What if a patient wants to change the MOLST form?***

- Void the old form by writing VOID in large letters on the front of the form and create a new MOLST form, with new signatures and dates.