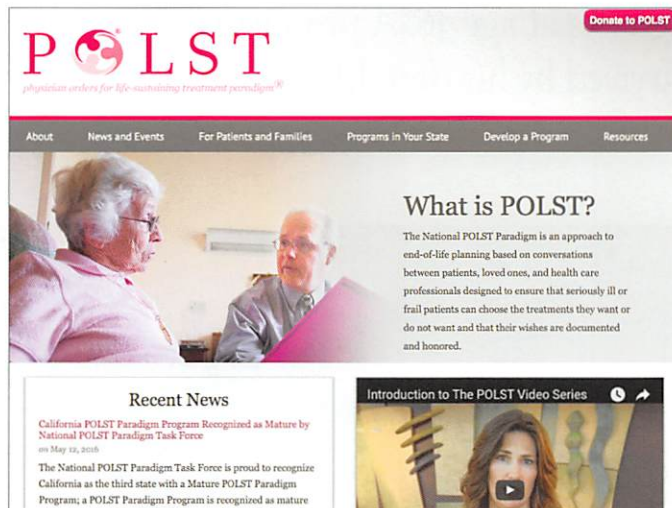
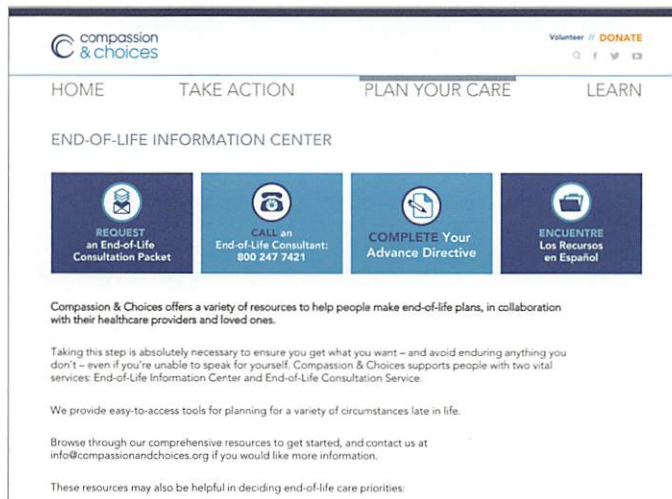


# What's a POLST?

A POLST, or a physician's orders for life-sustaining treatment, is a lesser-known and understood planning tool offered in many states. Compassion & Choices' end-of-life consultants are tasked with informing people at all stages of life, in different regions of the country, about their end-of-life options. End-of-Life Consultant Wendy Haile offers some great insight into this tool as states continue to develop protocols of their own.



[www.polst.org](http://www.polst.org)



[CompassionAndChoices.org/information](http://CompassionAndChoices.org/information)

Here's what you should know:

- » A POLST is different from an advance directive. State-specific advance directives can (and should) be filled out by adults at any stage of life.
- » Having a POLST (or MOLST, MOST, etc.) in place is not for everyone. A POLST should be filled out only for an individual with a life-limiting illness whose physician believes they may not live beyond a year.
- » A POLST allows individuals to document the treatments they would or would not want.
- » A POLST can hold more weight than other advance-planning documents since it is signed by a physician following a conversation between the individual and their doctor.
- » The original POLST form resides with the patient or care facility. A copy can be kept with the healthcare team.

You might consider talking to your physician about the form. Because POLST is an end-of-life planning tool your doctor may be surprised to hear you bring it up if you're not seriously ill. But you're well within your rights to find out more about POLST.

POLST forms are not yet available in every state. You can see what is available in your state by visiting [www.polst.org](http://www.polst.org).

**Find Compassion & Choices' end-of-life materials and learn more about our consultation program at [CompassionAndChoices.org/information](http://CompassionAndChoices.org/information)**

# To Face Death With Integrity

The following is excerpted from the epilogue Dr. Lucy Kalanithi wrote for the best-selling memoir her husband, Dr. Paul Kalanithi, began after receiving a terminal cancer diagnosis at age 36. A promising neurosurgeon, Paul died last year survived by his daughter, Cady, and Lucy, who had his book published posthumously.



Dr. Lucy Kalanithi and Dr. Paul Kalanithi with their daughter



keeping count

## Do as I Say ...

Asking your doctor the right questions — such as whether the treatment they are prescribing is one they would choose for themselves — is an important step to avoiding unnecessary procedures in your final days.

Nearly

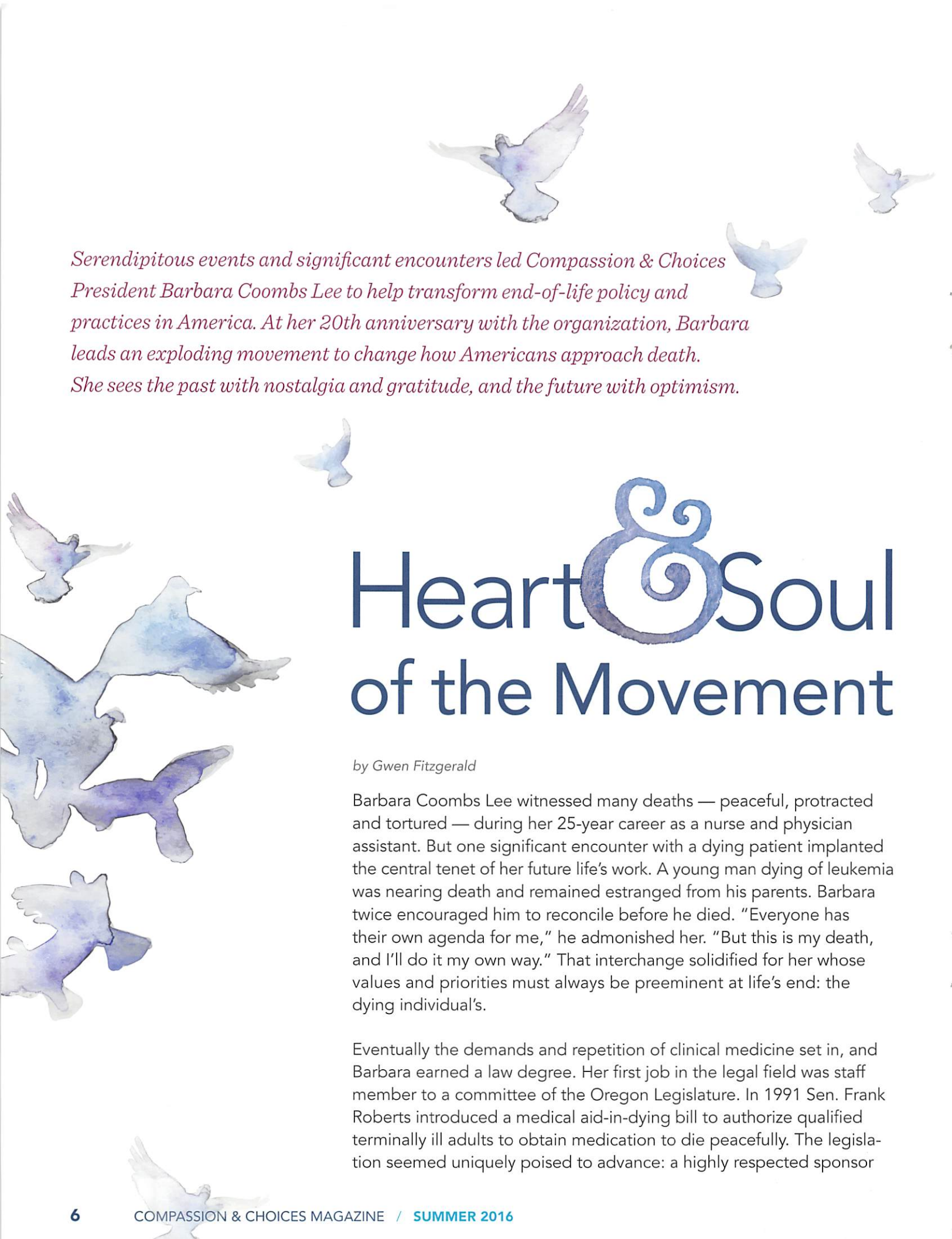
**1 in 3** Medicare recipients had **major surgery** in the **last year of life**,

**1 in 5** in the **last month** of life,

**1 in 10** in the **last week** of life,

While

**9 in 10** doctors say they would **reject aggressive treatment** at the end of their own lives.



*Serendipitous events and significant encounters led Compassion & Choices President Barbara Coombs Lee to help transform end-of-life policy and practices in America. At her 20th anniversary with the organization, Barbara leads an exploding movement to change how Americans approach death. She sees the past with nostalgia and gratitude, and the future with optimism.*

# Heart & Soul of the Movement

by Gwen Fitzgerald

Barbara Coombs Lee witnessed many deaths — peaceful, protracted and tortured — during her 25-year career as a nurse and physician assistant. But one significant encounter with a dying patient implanted the central tenet of her future life's work. A young man dying of leukemia was nearing death and remained estranged from his parents. Barbara twice encouraged him to reconcile before he died. "Everyone has their own agenda for me," he admonished her. "But this is my death, and I'll do it my own way." That interchange solidified for her whose values and priorities must always be preeminent at life's end: the dying individual's.

Eventually the demands and repetition of clinical medicine set in, and Barbara earned a law degree. Her first job in the legal field was staff member to a committee of the Oregon Legislature. In 1991 Sen. Frank Roberts introduced a medical aid-in-dying bill to authorize qualified terminally ill adults to obtain medication to die peacefully. The legislation seemed uniquely poised to advance: a highly respected sponsor