

POLST: Physician Orders for Life-Sustaining Treatment

Patient Name

Date of Birth

Medical Record #

A. Cardiopulmonary Resuscitation (CPR):

Attempt Resuscitation/CPR Do Not Attempt Resuscitation (DNR/no CPR)

B. Medical Interventions:

Full Treatment Limited Interventions Comfort Measures Only

C. Artificially Administered Nutrition:

Long-term Artificial Nutrition, including feeding tubes Trial Period of Artificial Nutrition No Artificial Nutrition by Tube

D. Additional Orders or Instructions

(Optional) Additional orders, conditions, or clarifications

Signatures

Patient or Surrogate Signature

Physician/NP/PA Signature