



Medical Orders for Scope of Treatment (MOST)

Training Agenda

I. Overview

- a. National POLST Paradigm (www.polst.org)
- b. Why MOST for South Dakota (video testimonials on SDAHO website)
 - i. MOST was developed, approved and endorsed by several individuals, groups and providers in South Dakota working collaboratively to create the best legislation for our state.
 - ii. SD MOST is more stringent than the National POLST paradigm due to our narrow definition of "terminal condition" and consideration for all ethical and religious directives. Modifications were also made to the form to ensure that everyone is treated with dignity and respect.
 - iii. SD MOST allows nurse practitioners and physician assistants to complete the form. (POLST, POST require a "physician" order).
- c. Legal Definition of MOST

"Medical orders for scope of treatment," or "MOST," a document, other than an advance health care directive, executed by a patient who has been diagnosed with a terminal condition, or the patient's authorized representative, and the patient's medical provider and entered in the patient's medical record that provides direction to health care providers about the patient's goals and preferences regarding the use of medical interventions, including cardiopulmonary resuscitation and other life-sustaining treatment

- d. Review of Legislation
- II. **Why do this?**
 - a. “Extremis” Video (on YouTube & Netflix)
- III. **Review of power point**
- IV. **Purpose of the Form**
 - a. Patient conversation with his/her medical provider with terminal illness in the last year of life
 - b. Patient-centered - one part of advance care planning
 - c. Transportable medical orders – ability to cancel and/or change at any time
- V. **Review of MOST Form**
 - a. Key requirements
 - b. Cardiopulmonary Resuscitation (CPR)
 - c. Medical Interventions
 - d. Artificially Administered Nutrition & Hydration
 - e. Informed Consent Discussion
- VI. **Questions?**