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**AARP Analysis: States Find Success with Physician Orders to Honor Patients' Treatment Wishes**

*Report offers suggestions for states to launch programs effectively*

**WASHINGTON**— AARP today released a report evaluating the use of an innovative program designed to help patients with advanced illness have greater control over important treatment choices.

The report, by the AARP Public Policy Institute and the American Bar Association's Commission on Law and Aging, analyzed the use of Physician Orders for Life Sustaining Treatment, or POLST, in a dozen states and highlights a set of promising practices to help guide states considering similar programs.

“Unfortunately, far too many individuals do not have their treatment wishes honored,” said AARP Executive Vice President John Rother. “Ensuring that patients have meaningful discussions with their doctors and a platform to communicate their wishes is essential to making sure that patients’ choices are honored and their dignity is protected.”

Designed to offer continuity throughout a patient's treatment, POLST is an official medical order that travels with a patient through the medical system. POLST gives patients suffering serious illness a way to make sure they get the medical interventions they prefer—from full treatment to palliative care. Patients and doctors work together so that patients' care goals are known, respected and honored.

AARP's report found that despite POLST's advantages, states faced various barriers in starting programs including insufficient physician training and a lack of funding for such education. States successful at initiating POLST programs had strong coalitions on advanced illness issues or a core network of physician support.

Among the report's suggestions for people working to develop POLST programs in their states:

- Create partnerships and be inclusive when building support for a POLST program.
- Don't reinvent the wheel—consult POLST experts and follow the lead of existing programs.
- Have a multiyear plan with three essential components: ongoing education, research, and quality improvement of practice.

“When patients are informed and have the opportunity to communicate their preferences—based on their own values—to their health care providers, they can be empowered to make the decisions that are best for them,” said Rother.

For more information on the report “Improving Advanced Illness Care: The Evolution of State POLST Programs” please visit <http://www.aarp.org/health/doctors-hospitals/info-04-2011/polst-04-11.html>

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