



Hospice & Palliative Care ASSOCIATION OF IOWA

www.HPCA.org

Iowa Physician Order for Scope of Treatment (IPOST)

**A new process for documenting treatment preferences that is
Standardized ~Efficient~ Portable~ Flexible~ Updatable~ Effective**

The Iowa Physician Order for Scope of Treatment (IPOST) is a 1-page, 2-sided document based on a national movement that consolidates and summarizes patient preferences for key life-sustaining treatments including: CPR, general scope of treatment, antibiotics, artificial nutrition & hydration.

Persons may refuse treatment, request full treatment, or specify limitations.

The standardized order form can be easily and quickly understood by patients, healthcare providers, and emergency personnel. It is meant to complement advance directives by translating patient wishes into actionable medical orders.

It is primarily intended to be used by the chronically, seriously ill person in frequent contact with healthcare providers, a person with a life-limiting illness, or the frail and elderly already residing in a nursing facility.

The IPOST is completed by the patient or authorized agent in conversation with a person with sufficient knowledge or training to be able to explain the procedural and medical implications of the various treatment choices, and then signed by the patient/agent and a physician, advanced registered nurse practitioner, or physician's assistant.

The physician / Advanced Registered Nurse Practitioner / Physician's Assistant signature translates patient preferences into physician's orders actionable across the healthcare continuum.

The IPOST "travels" with the patient and is honored in any setting: hospital, clinic, long-term care facility, assisted living residence, hospice, or at home. The original is brightly colored for easy identification, but photocopies, faxes, and electronic scans are also valid.

The portability of the form allows seamless documentation of treatment preferences and closes gaps as patients transfer from setting to setting or experience delays in access to providers.

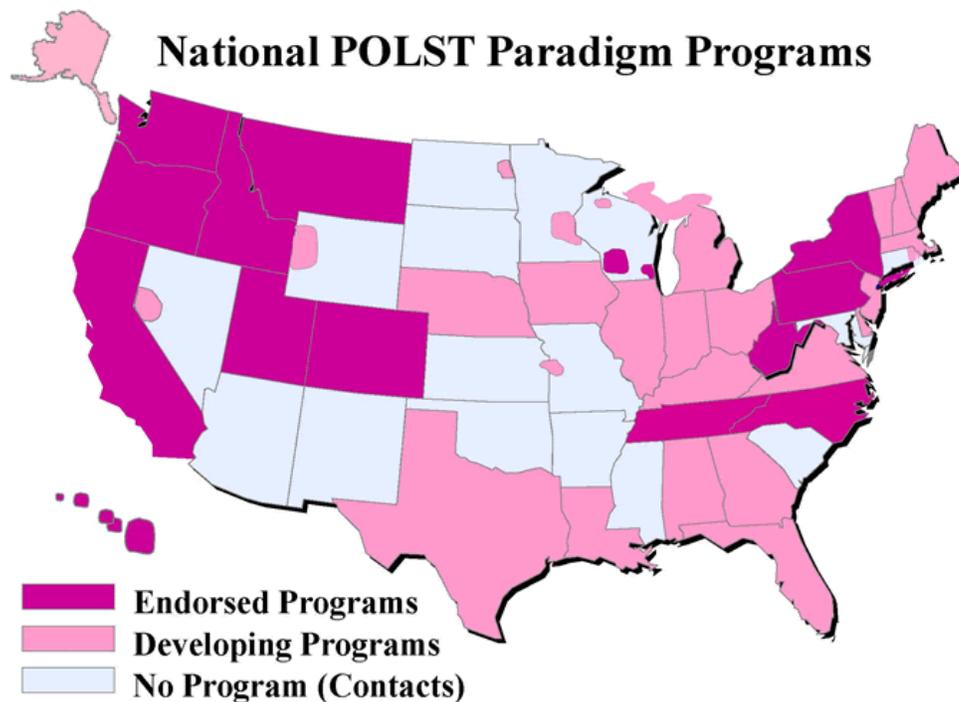
Iowa began its IPOST journey in 2008 with the implementation of a pilot project in Linn County. The pilot project was expanded to neighboring Jones County in 2010, and based on the success of the pilot projects, the state advisory group for the project has now recommended that the legislature authorize adoption of IPOST statewide.

Completion of an IPOST does not replace or invalidate prior directives. The advance directive overrules IPOST when they specifically conflict. A section on the back of the IPOST form prompts patients and providers to regularly review, confirm, or update choices based on changing conditions.

The legislation provides protection to healthcare providers honoring an IPOST form, and permits them to transfer patients to another healthcare provider if they have any moral concerns with the IPOST.

Extensive research indicates that the Iowa Physician for Scope of Treatment program would greatly improve utilization of advance care planning and adherence to expressed wishes. (See the POLST Web site, www.polst.org for references and research findings.)

The IPOST is a variant of the Physician's Orders for Life-Sustaining Treatment, pioneered in Oregon in the late 1990s. Similar programs are now officially sanctioned in Oregon, Washington, California, West Virginia, Tennessee, North Carolina, New York, Colorado, Montana, Idaho, Pennsylvania, Utah, Hawaii and parts of Wisconsin. Programs are being developed in 24 other states.



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