

Idaho POST Health Care Providers and Emergency Medical Services Personnel FAQs

The following document is intended as a general guide to answer questions concerning the Idaho POST. This document should not be considered legal advice. The citations in italics following each FAQ are from the Idaho Code that pertains to the FAQ.

1. What is a “POST?”

A POST is a Physician Orders for Scope of Treatment. POST is a universal advanced directive. It replaces Idaho Comfort One and supersedes all other DNR orders. (Effective date 7/1/07). Although POST supersedes Comfort One, if you're confronted with a Comfort One, it is still valid.

39-4502(12) “Physician orders for scope of treatment (POST) form” means a standardized form containing orders by a physician that states a person’s treatment wishes.

39-4512A A physician orders for scope of treatment (POST) form is appropriate in cases where a patient has an incurable or irreversible injury, disease, illness or condition, or where a patient is in a persistent vegetative state. A post form is also appropriate if such conditions are anticipated.

2. Is there identification jewelry associated with POST like there was with Comfort One/DNR?

DNR is represented by Medical jewelry: bracelet, necklace or anklet. Post jewelry always indicates DNR.

39-4502(13) “Physician orders for scope of treatment (POST) identification device” means standardized jewelry which can be worn around the wrist, neck or ankle, and which as been approved by the department of health and welfare.

3. Must I comply with the wishes stated on a patient’s POST form?

POST must be honored by all health care professionals except when:

- (a) You believe in good faith that the POST has been revoked
 - i. Post form may be revoked at any time by the maker thereof by any of the following methods
 - 1. By being cancelled, defaced, obliterated or burned, torn otherwise destroyed by the maker thereof, or by some person in his presence and by his direction;
 - 2. By a written, signed revocation of the maker thereof expressing his intent to revoke
 - 3. Or by an oral expression by the maker thereof expressing his intent to revoke
 - (b) To avoid an oral or physical confrontation
 - (c) If ordered to so by attending physician
 - (d) POST form is not present
 - (e) POST jewelry is not present

39-4512B(1) Health care providers and emergency medical services personnel shall comply with a patient’s physician orders for scope of treatment (POST) instruction when presented with a completed POST form signed by a physician or when a patient is

wearing a proper POST identification device pursuant to section 39-4512A(5), Idaho Code.

4. Can a patient be required to execute an advance directive?

No, a patient cannot be required to complete a living will, durable power of attorney for health care or POST form as a condition for being insured for, or receiving, health care services.

39-4514(7)(b) No physician, health care facility or other health care provider and no health care service plan, insurer issuing disability insurance, self-insured employee plan, welfare benefit plan or nonprofit hospital service plan shall require any person to execute a living will and durable power of attorney for health care or physician orders for scope of treatment (POST) form as a condition for being insured for, or receiving, health care services.

5. Is a copy of a patient's POST form valid or must they have the original?

Patients may elect to carry originals or copies of the POST form.

39-4514(8)(b) A photo static, facsimile or electronic copy of a valid physician orders for scope of treatment (POST) form may be treated as an original by a health care provider or by an institution receiving or treating a patient.

6. My patient has completed a POST form and has elected to not be resuscitated (DNR), can I also require the patient to complete a separate DNR order when checking in to my facility?

POST provides a single uniform document that goes with the patient from one care setting to another. POST may travel with the patient. POST is honored in ALL health care facilities.

39-4514(8)(a) A completed physician orders for scope of treatment (POST) form signed by a physician shall be transferred with the patient to, and be effective in, all care settings including, but not limited to, home care, ambulance or other transport, hospital, residential care facility, and hospice care. The POST form shall remain in effect until such time as new orders are issued by a physician.

7. Is a POST form that was completed in one facility effective if a patient transfers to another facility?

POST may travel with the patient. POST is honored in ALL health care facilities. A POST provides a single uniform document that goes with the patient from one care setting to another.

39-4514(8)(a) A completed physician orders for scope of treatment (POST) form signed by a physician shall be transferred with the patient to, and be effective in, all care settings including, but not limited to, home care, ambulance or other transport, hospital, residential care facility, and hospice care. The POST form shall remain in effect until such time as new orders are issued by a physician.

8. My patient presented me with a wallet card from the Idaho Secretary of State that indicates they have an advance directive registered with the Secretary of State; what does this mean?

Existence of a POST form may be confirmed by a Health Care Directive ID issued by the Idaho Secretary of State Office. The directive ID card will have instructions on how to access the POST form. Existence of a registry card **DOES NOT** indicate a DNR order, only a POST form.

39-4514(9) REGISTRATION. A directive or the revocation of a directive meeting the requirements of this chapter may be registered with the secretary of state pursuant to section 39-4515, Idaho Code. Failure to register the health care directive shall not affect the validity of the health care directive.

39-4510(4) I have discussed these decisions with my physician and have also completed a Physician Orders for Scope of Treatment (POST) form that contains directions that may be more specific than, but are compatible with, this Directive. I hereby approve of those orders and incorporate them herein as if fully set forth.

9. If I encounter a situation calling for cardiopulmonary resuscitation, what assumptions can I make about the patient's wishes?

You should assume that a patient desires resuscitation unless the patient or the patient's surrogate has expressed the patient's desire to not be resuscitated.

39-4514(4) PRESUMED CONSENT TO RESUSCITATION. There is a presumption in favor of consent to cardiopulmonary resuscitation (CPR) unless:

- (a) A completed living will for that person is in effect, pursuant to section 39-4510, Idaho Code, and the person is in a terminal condition or persistent vegetative state; or*
- (b) A completed durable power of attorney for health care for that person is in effect, pursuant to section 39-4510, Idaho Code, in which the person has indicated that he or she does not wish to receive cardiopulmonary resuscitation, or his or her representative has determined that the person would not wish to receive cardiopulmonary resuscitation; or*
- (c) The patient has a completed physician orders for scope of treatment (POST) form indicating otherwise and/or proper POST identification pursuant to section 39-4502(13), Idaho Code.*

10. If I encounter a situation calling for artificial life-sustaining treatment, what duty do I have to attempt to discover a patient's POST status?

You are required to make a reasonable effort to discover the POST form and jewelry. Discover means: asking for a post form and looking for POST jewelry. You are NOT required to look for a POST form under the following conditions:

- If the patient is a victim of severe trauma, mass casualty, homicide or suicide

39-4512C. DUTY TO INSPECT. Health care providers and emergency medical services personnel shall make reasonable efforts to inquire as to whether the patient has completed a physician orders for scope of treatment (POST) form and inspect the patient for a POST identification device when presented with a situation calling for artificial life-sustaining treatment not caused by severe trauma or involving mass casualties and with no indication of homicide or suicide.

11. Where do I look for a POST form?

Likely places in the home:

- On the refrigerator
- Next to the phone
- Beside the bed
- On the medicine cabinet
- Back of the bedroom door
- On the wall

Likely places in a care facility:

- Patient file/chart
- Beside bed

12. What do I look for on a POST form?

Identification information including first and last name, date of birth and gender, short summary of treatment preferences, signature of an Idaho physician.

13. I am concerned about being criminally liable for not attempting resuscitation on a pulseless and/or apneic patient who has declared “DNR/No Code” on a POST. Can I be held liable if I honor the DNR?

No. You cannot be held liable for following the instructions on a signed POST form or for honoring a POST\DNR or jewelry.

39-4513. IMMUNITY. (1) No emergency medical services personnel, health care provider, facility, or individual employed by, acting as the agent of, or under contract with any such health care provider or facility shall be civilly or criminally liable or subject to discipline for unprofessional conduct for acts or omissions carried out or performed in good faith pursuant to the directives in a facially valid POST form or living will or by the holder of a facially valid durable power of attorney or directive for health care.

14. My patient has a POST form that indicates that they desire aggressive interventions. Does this mean that I am obligated to provide care that is considered futile?

No. Nothing in the Idaho POST law requires you to pursue treatment considered medically inappropriate or futile.

39-4514(5) Futile care. Nothing in this chapter shall be construed to require medical treatment that is medically inappropriate or futile.

15. As a health care provider, can I ever disregard a POST form or POST identification device?

POST must be honored by all health care professionals except when:

- (a) You believe in good faith that the POST has been revoked
 - i. Post form may be revoked at any time by the maker thereof by any of the following methods
 - 1. By being cancelled, defaced, obliterated or burned, torn otherwise destroyed by the maker thereof, or by some person in his presence and by his direction;

2. By a written, signed revocation of the maker thereof expressing his intent to revoke
3. Or by an oral expression by the maker thereof expressing his intent to revoke
 - ii. To avoid an oral or physical confrontation
 - iii. If ordered to so by attending physician
 - iv. POST form is not present
 - v. POST jewelry is not present

39-4513 (5) Health care providers and emergency medical services personnel may disregard the POST form or a POST identification device:

- (a) If they believe in good faith that the order has been revoked; or*
- (b) To avoid oral or physical confrontation; or*
- (c) If ordered to do so by the attending physician.*

16. If a patient elects for Comfort Measures only in the Medical Interventions section of the POST form (Section B), what sort of care should I provide?

“Comfort care” means treatment and care to provide comfort and cleanliness. You should expect oral and body hygiene; food and fluids offered orally; medication, positioning, warmth, appropriate lighting and other measures to relieve pain and suffering; and privacy and respect for your dignity and humanity.

39-4502(5) “Comfort care,” means treatment and care to provide comfort and cleanliness. “Comfort care” includes:

- (a) Oral and body hygiene;*
- (b) Reasonable efforts to offer food and fluids orally;*
- (c) Medication, positioning, warmth, appropriate lighting and other measures to relieve pain and suffering; and*
- (d) Privacy and respect for the dignity and humanity of the patient.*

39-4514(3) Comfort care. Individuals caring for a patient for whom artificial life-sustaining procedures or artificially administered nutrition and hydration are withheld or withdrawn shall provide comfort care as defined in section 39-4502, Idaho Code.

17. When is it appropriate to complete a POST?

POST is appropriate for anyone that:

- Has an advanced chronic progressive illness
- Is in a terminal state
- Wishes to define their preferences for medical care

39-4512A PHYSICIAN ORDERS FOR SCOPE OF TREATMENT (POST). (1) A physician orders for scope of treatment (POST) form is appropriate in cases where a patient has an incurable or irreversible injury, disease, illness or condition, or where a patient is in a persistent vegetative state. A POST form is also appropriate if such conditions are anticipated.

18. How can a patient get a POST form?

Patients obtain the form from their physician.

39-4512A(3) The attending physician shall, upon request of the patient, provide the patient with a copy of the POST form, discuss with the patient the form's content and ramifications and treatment options, and assist the patient in the completion of the form.

19. Where can a physician obtain POST forms?

Physicians can download the form from this website:

www.idsos.state.id.us/general/hcdr.htm

20. When must a physician review a patient's POST form once signed?

The attending physician shall review the POST form: Each time the physician examines the patient, or at least every seven (7) days, for patients who are hospitalized; and each time the patient is transferred from one (1) care setting or care level to another; and any time there is a substantial change in the patient's health status; and any time the patient's treatment preferences change. Failure to meet these review requirements does not affect the POST form's validity or enforceability. As conditions warrant, the physician may issue a superseding POST form. The physician shall, whenever practical, consult with the patient or the patient's agent.

39-4512A (4) The attending physician shall review the POST form:

(a) Each time the physician examines the patient, or at least every seven (7) days, for patients who are hospitalized; and

(b) Each time the patient is transferred from one (1) care setting or care level to another; and

(c) Any time there is a substantial change in the patient's health status; and

(d) Any time the patient's treatment preferences change.

Failure to meet these review requirements does not affect the POST form's validity or enforceability. As conditions warrant, the physician may issue a superseding POST form. The physician shall, whenever practical, consult with the patient or the patient's agent.

21. As a physician, for ethical reasons I am unable to honor a patient's desires stated on his/her POST form; what are my options?

Any physician or other health care provider who for ethical or professional reasons is incapable or unwilling to conform to the desires of the patient (as stated on the patient's POST form) may withdraw without incurring any civil or criminal liability provided the physician or other health care provider, before withdrawal of his or her participation, makes a good faith effort to assist the patient in obtaining the services of another physician or other health care provider who is willing to provide care for the patient in accordance with the patient's expressed or documented wishes.

39-4513(2) Any physician or other health care provider who for ethical or professional reasons is incapable or unwilling to conform to the desires of the patient as expressed by the procedures set forth in this chapter may withdraw without incurring any civil or criminal liability provided the physician or other health care provider, before withdrawal of his or her participation, makes a good faith effort to assist the patient in obtaining the services of another physician or other health care provider who is willing to provide care for the patient in accordance with the patient's expressed or documented wishes.

22. I encountered a patient with an advance directive from another state. Is the out of state directive effective in Idaho?

Yes, provided the directive from the other state is materially similar to an Idaho directive, it is valid in Idaho.

39-4514(6) Existing directives and directives from other states. A health care directive executed prior to July 1, 2007, but which was in the living will, durable power of attorney for health care, DNR, or POST form pursuant to prior Idaho law at the time of execution, or in another form that contained the elements set forth in this chapter at the time of execution, shall be deemed to be in compliance with this chapter. Health care directives or similar documents executed in another state that substantially comply with this chapter shall be deemed to be in compliance with this chapter.

23. If I encounter a POST signed by an out of state physician employed at a Veteran's Administration hospital, is it still valid?

Yes, the POST form is still valid.

54-1804(1) Under the circumstances described and subject in each case to limitations stated, the following persons, though not holding a license to practice medicine in this state, may engage in activities included in the practice of medicine:

(a) A medical officer of the armed forces of the United States, of the United States public health service, or of the veteran's administration, while engaged in the performance of his official duties

24. Must I still honor Idaho Comfort One/DNR's from prior to July 1, 2007?

Although POST supersedes Comfort One, if you're confronted with Comfort ONE it is still valid.

39-4514(6) Existing directives and directives from other states. A health care directive executed prior to July 1, 2007, but which was in the living will, durable power of attorney for health care, DNR, or POST form pursuant to prior Idaho law at the time of execution, or in another form that contained the elements set forth in this chapter at the time of execution, shall be deemed to be in compliance with this chapter. Health care directives or similar documents executed in another state that substantially comply with this chapter shall be deemed to be in compliance with this chapter.