Establishing Life-Sustaining Treatment (LST) Plans for Patients Who Lack Decision-Making Capacity, Have No Surrogate, and Have No Active VA LST Orders

In emergency circumstances (Immediate medical care is necessary to preserve the patient’s life or avert serious impairment to the patient’s health):

- Is patient presenting with valid state-authorized portable orders (SAPO), such as POLST or MOLST?
  - Provide emergency care and consult the multidisciplinary committee (MDC) within 24 hours (see below)
  - Act in accordance with the Veteran’s SAPO, write LST orders on the basis of the SAPO, and consult the multidisciplinary committee (MDC) within 24 hours (see below) (see VHA Handbook 1004.04)

In non-emergency circumstances:

- Follow MDC review process
- OR
- Request District Chief Counsel’s assistance to obtain a special guardian for health care

Health care team discusses medical condition, prognosis

Health care team collects and discusses information about the patient’s values, goals, preferences, life plans

Health care team documents proposed plan (e.g., in the MDC Consult Template) and contacts the MDC for review. (Do not use LST progress note/orders until decision is final)

To the extent possible, the health care team explains the nature and purpose of the proposed plan to the patient

MDC determines whether the proposed LST plan is consistent with patient’s wishes, if known, or best interests

MDC documents its findings and recommendations in CPRS (e.g., in a MDC consult report)

MDC notifies practitioner and Chief of Staff

Chief of Staff reviews MDC findings and recommendations

Chief of Staff disapproves recommendations, seeks review by District Chief Counsel, and consults National Center for Ethics in Health Care (NCEHC)

Chief of Staff approves recommendations, documents decision (e.g., in an addendum to the MDC consult report)

Chief of Staff concurs or non-concurs with MDC recommendations based on review by District Chief Counsel and NCEHC, documents decision (e.g., in an addendum to the MDC consult report)

Director reviews record and either concurs with the proposed plan or consults District Chief Counsel, and, if appropriate, NCEHC

Director or designee documents final decision (e.g., in addendum to the MDC consult report)

Practitioner reviews final decision and complete the LST progress note and orders

Is patient presenting with valid state-authorized portable orders (SAPO), such as POLST or MOLST?

Chief of Staff concurs or non-concurs with MDC recommendations based on review by District Chief Counsel and NCEHC, documents decision (e.g., in an addendum to the MDC consult report)